



Title of meeting: Cabinet

Date of meeting: 22nd September 2016

Subject: Key future approaches for children's services

Report From: Director of Children's Services

Report by: Kelly Nash, Corporate Performance Manager

Wards affected: All

Key decision: Yes

Full Council decision: No

1. Purpose of report

1.1. To seek approval from the Cabinet for the "Stronger Futures" strategy to improve outcomes for children and families in Portsmouth through consistent application of effective, targeted, empowering approaches to helping families.

2. Recommendations

2.1. Cabinet is recommended to agree:

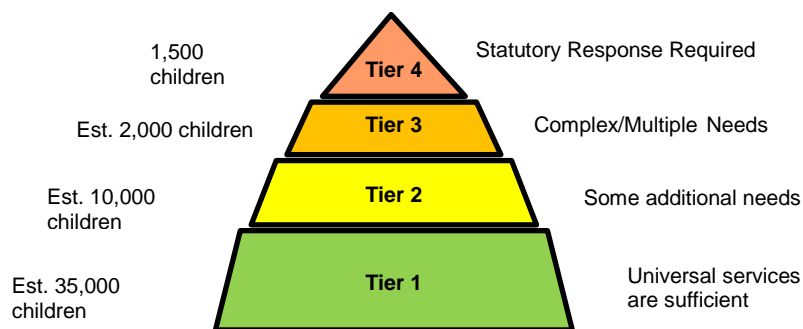
- a) The "Stronger Futures 10 point plan" set out at appendix 1 for effective, proportionate support for children and families around health, wellbeing and safeguarding.
- b) That the Cabinet Member for Adult Social Care and Public Health and the Cabinet Children's Social Care are authorised to review and agree within the next three months the provider model and procurement process as appropriate for a refreshed integrated City Council early intervention offer bringing together current VCS contracts, Children's Centres and Public Health delivery.
- c) That the council's contracts with Solent NHS for Health Visiting, School Nursing and Family Nurse Partnership are extended for a period of two years subject to the Cabinet Member for Adult Social Care and Public Health receiving a risk appraisal prepared by the Procurement Manager and City Solicitor; and that over the span of the Stronger Futures programme, arrangements are agreed to integrate delivery of these services operationally with the refreshed City Council early intervention offer.

3. Background

- 3.1 Considerable work has been undertaken to consider how the outcomes for children and families in Portsmouth can continue to be improved in a way that is effective and sustainable in the longer term. The conclusions of this work are that in order to ensure continued effective support and safeguarding for children we need a "whole system" approach which both ensures a consistent approach to working with families across different services and also looks at how services are configured in order to secure best value and optimum effectiveness.
- 3.2 The whole system for children and families in the city is significant in size and complexity, so clear parameters have been placed around the definition of the system for the purposes of this paper.
- 3.3 Firstly, in recognition of school autonomy, the separate budgeting regime, and the changing educational landscape, spending in schools has been excluded from this work. This is not to downplay the significant contribution of schools in supporting outcomes for children and young people, and for providing specific support for some of the children and families in greatest need; rather it recognises that the relationship with schools is one of influence and partnership, and that they are not under the commission of the authority. The relatively small amount of funding associated with supporting school improvement activity is not part of this discussion paper, as this is directed to supporting schools, not children and families directly. Similarly, activity associated with the local authority's statutory duties in respect of school resources, sufficiency and participation is excluded.
- 3.4 The analysis in this paper also omits elements of activity and spending related directly to children and young people with special educational need and disabilities (SEND).
- 3.5 The proposals focus chiefly on areas commissioned by the City Council, including through Public Health. There are elements of CCG commissioning, in particular maternity and mental health services, which are also very relevant. Discussions have taken place with commissioners and providers of these services and there is broad agreement about how they can contribute to the direction of travel recommended in this paper.
- 3.6 The areas of local authority activity that this paper is concerned with are largely in relation to social and environmental support to children and families, and encompass:
- Children's social care (including the Youth Offending Team)
 - Public Health Delivery Team working with children and young people
 - Public Health commissioned contracts for health visiting, school nursing and the Family Nurse Partnership programme
 - The Troubled Families programme
 - Children's Centres
 - Parenting support programmes

3.7 For many children and families in the city, interaction with these services will be minimal. Most children are well cared for and thrive, with little or no intervention. Some families require some low-level support at various points, and others need some very specifically targeted intervention. These levels of need, and the responses, are generally described as "tiers" and in Portsmouth the picture is as described in figure 1, below. The services described above are those most substantially involved in identifying and addressing need.

Fig 1: Tiers of Need



4. Recent developments

4.1 For around 18 months, there has been a programme to develop multi-agency teams (MATs) to deliver support for children and families. The aim of the Multi-Agency Teams is to bring together, co-located in locality-based teams, professionals working with families across tiers of need; including social workers, health visitors, school nurses, family intervention workers. The co-location is intended to improve professional dialogue between teams working with families, and build stronger awareness, as well as mitigate against a culture of referral (and cost-shunting). The intention from the outset was to combine the co-location with a shared outcomes framework, an identification tool to ensure support is targeted appropriately (the Early Help Profile) and workforce development to ensure families receive a consistent but differentiated offer of support along a shared practice model.

4.2 Co-location of the teams was achieved in June 2016, with three bases split across Medina House (North) and the Civic Offices (Central and South). The teams retain their separate management and supervision lines; at an operational level, however, there have been some very positive examples of co-location enabling closer working to ensure appropriate responses to family needs. Senior managers working within the localities are working together to ensure the shared priorities and practice are embedded across the localities.

5. Building on assets - where we want to go next

5.1 The intention has always been for MATs to develop, into a second phase that sought to rationalise complicated budget, commissioning and management arrangements; to address areas that need strengthening (particularly targeted Early Help) and to influence wider aspects of the system such as the schools

pastoral workforce and the voluntary and community sector. This "phase 2" has been articulated in the "Stronger Futures" programme for Portsmouth. The "10 point plan" for the programme, attached as Appendix 1, has a focus on: broadening and targeting support for vulnerable families; encouraging communities and families to self-help; developing volunteering; and providing a balance of high support and high challenge to families. A key element running through it is a change in the culture across all services, with much more emphasis on empowering families, enabling them to draw on their immediate and wider networks to find solutions to problems and make the changes they need to make in order to improve their lives.

6. Preparing for the future - the longer term landscape

6.1 The policy landscape around children's services is fluid, and there are a significant number of national policy drivers that we need to be prepared to respond to. In addition to the national policy on academisation of schools (which nevertheless still leaves local authorities with a significant list of statutory responsibilities around education provision), the Government is promoting innovation across different aspects of children's social care. The recent Department for Education Policy Paper *Putting Children First: Delivering our vision for excellent children's social care* sets out the terms of a review (to be conducted by Alan Wood CBE) to consider three broad questions:

- a) what the future role and responsibilities in relation to children and young people should be;
- b) what powers and levers local authorities will need to carry out those responsibilities effectively; and
- c) what transition and implementation arrangements will be needed to help local authorities manage change over the coming months and years.

6.2 Alongside this, the government continues to develop a programme exploring different delivery models for services, including mutualisation and community interest companies. Existing models such as those in Doncaster, Kingston-upon-Thames and Richmond-upon-Thames and the London tri-borough arrangements are receiving interest, as are other delivery models involving "high performing" authorities providing support.

6.3 There is keen interest in the DfE in the relationship between local devolution deals and combined authority models, and the models that are proposed for local service delivery in these arrangements. The next round of Innovation Funding, likely to be launched in September, is expected to focus on the development of new models.

6.4 The government continue to promote a broad "life chances" agenda, with a fuller strategy expected in the autumn. The role of parenting, the early years, opportunities for looked after children, and supporting families with problems including domestic abuse, substance misuse or mental health will all feature in this approach.

6.5 The broad direction of travel towards closer integration with colleagues in health services - including at a commissioning level but also across public health, primary and community care - is also a key driver. The expectation is that this is worked through on different geographical footprints through regional Sustainability and Transformation plans. The current STP covering Portsmouth does not deal in any detail with children's services, but they do feature in its local expression, in the "blueprint" for health and care in Portsmouth.

8. Next Steps

8.1 To give effect to the broad Stronger Futures strategy set out above and in appendix 1, we propose the following steps over the next 12 months:

- (i) To carry out targeted engagement over the Autumn to advance the programme, including research with families to understand what they need, and with the market to understand opportunities available. This work will build on learning already derived from the systems review "Positive Family Futures" (Appendix 2).
- (ii) To bring together the preventative and early help services provided and commissioned across city council children's services and Public Health to form a combined, refreshed, targeted early intervention offer for more vulnerable families. A decision needs to be taken about whether some or all of this service offer is outsourced; we recommend that this decision is delegated to the Cabinet Members for Children's Social Care and for Adult Social Care and Public Health together.
- (iii) To extend for two years the council's contracts with Solent NHS Trust for the delivery of health visiting, school nursing and the Family Nurse Partnership programme and to explore opportunities within this period to step up the integration of the delivery of these services with the refreshed city council early intervention offer as part of the local programme of integration for health and social care (the Portsmouth Blueprint).
- (iv) To invest in the short term in a finite programme of workforce development to underpin the proposed system change. We recommend that funding allocations for this programme are agreed by the Cabinet Member for Adult Social Care and Public Health.

9. Reasons for recommendations

9.1 To improve outcomes for children and families in the city we need to look at how we strengthen early intervention, particularly through cultural change, empowering families more.

9.2 The paper is underpinned by a financial strategy that seeks gradually, where possible, to rebalance investment over time towards effective early intervention so that the system as a whole can be sustainable. Estimates of the extent to which cost reduction is possible, however, need to take into account the benchmark comparisons highlighted in paragraph 12.1 below around current activity and cost in children's social care, Equality impact assessment (EIA)

10.1 A preliminary EIA was completed for the document and concluded that there will be no negative impact on any of the protected characteristics arising from the

strategy. Any individual projects or measures arising from the strategy will be subject to impact assessments in their own right. The preliminary EIA is attached as Appendix 3.

11. Legal Implications

11.1 The review referred to in recommendation 2.1b) will require consideration of a range of implications arising from procurement law, the Council's statutory duty of Best Value and potentially (in particular if outsourcing of any part of the service offer is contemplated) employment law/staffing implications.

11.2 The proposed extension of the Solent NHS contracts (recommendation 2.1 c)) should be appropriately risk-assessed and approved in accordance with the Council's Contract Procedure Rules in the usual way before being implemented by officers.

12. Director of Finance and Information Services comments

- 12.1 The largest proportion of spend on children's services is within statutory social care. A forensic approach has been taken to explore opportunities for reducing costs and a number of initiatives are being pursued. Comparative work and modelling have demonstrated that that children's social care in Portsmouth has a low number of referrals compared with statistical neighbours, reflecting relatively high thresholds for service (albeit still assessed by Ofsted as safe). Compared with statistical neighbours the city has relatively low numbers of children formally categorised as "in need", and of children looked after. Placement costs are comparatively low, and staffing at managerial and caseholding levels is lean. This means that savings can only be made by remodelling the wider system to prevent escalation of need; and to target services according to need. In addition, as noted in paragraph 9.2, estimation of the extent of savings possible needs to take into account conclusions from the benchmarking analysis.
- 12.2 Detailed modelling on the Stronger Futures strategy has fed into a financial strategy which will inform a series of proposals for savings and investments in the coming months, including for some short term investment to support workforce development and service reconfiguration. These proposals will be considered across the portfolios of Children's Social Care and Adult Social Care and Public Health, and in consultation with the s151 officer and Acting Director of Public Health.

Signed by: Alison Jeffery, Director of Children's Services

Appendices:

Appendix 1 - Stronger Futures - affordable and even better support for children, young people and families

Appendix 2 - Positive Family Futures

Appendix 3 - Preliminary EIA

Background list of documents: Section 100D of the Local Government Act 1972

The following documents disclose facts or matters, which have been relied upon to a material extent by the author in preparing this report:

Title of document	Location

The recommendation(s) set out above were approved/ approved as amended/ deferred/ rejected by on

.....
Signed by: Name and Title

Appendix 1

Stronger Futures

Affordable and even better support for children, young people and families

INTRODUCTION

We can be proud of some of the steps we have taken in Portsmouth in the last few years to strengthen the way we support vulnerable children, young people and families.

New ways of working and a more joined up approach in midwifery, health visitors, early years, schools, public health and social care teams have given us a secure platform on which to build for the future.

We know however through indicators on issues such as child health and school attendance that we still need to do more work to support our children so they can enjoy the best future possible. The continued reductions in funding for public services also provide a significant challenge in maintaining and developing our offer to families in the city, so we know we need to find different ways of doing things.

WELCOME TO STRONGER FUTURES

Stronger Futures is a new strategy that aims to provide affordable and even better support for families that will enable and empower them to build good futures and improve the quality of their lives.

It has been agreed by the Portsmouth's Children Trust and forms part of the wider transformation under the Health and Care Portsmouth programme which is delivering the blueprint for the integrating health and social care services in the city.

WHAT STRONGER FUTURES AIMS TO ACHIEVE

Stronger Future aims to build a system of support for children, young people and families which gets the balance right so that we do not put more pressure on statutory services in the long term.

It is based on an approach which empowers families, drawing on the strengths which even the most vulnerable families possess. Support will be targeted very carefully, aiming to build a system which is affordable and sustainable in the long term.

If we get this right, we will provide better and more effective support for children, young people and families.

We will empower families more effectively so that they know how to get the information and advice they need and can face problems without needing external support. We will also reduce the number of days which children spend in alternative care, and improve the experiences of young people leaving that care, so that they spend more time with families and are better able to face future challenges.

TEN POINT PLAN

Our ten point plan for Stronger Futures is to:

- 1. Target our support more**

Further target the support provided through current universal services, including health visiting, public health and Children's Centres. For families whose need our support less, we will increasingly signpost them to information, advice and guidance online. We will explore ways of promoting more proactive and confident use by families of the information which is already available to them and enhance information, advice and guidance provided.
- 2. Step up guidance for universal services**

Encourage early years' settings and schools to continue and wherever possible, step up the significant support which they already offer to children, young people and families
- 3. Encourage volunteering**

Encourage more people in local communities to volunteer their time, so that open access activities can continue, for example, in Children's Centres. We will support people to use volunteering as a route to better mental health, stronger social networks and employment.
- 4. Rationalise and coordinate support for more vulnerable families**

Use our new Multi Agency Teams, and links with the wider workforce, to make sure that staff can support each other as flexibly and effectively as possible. We will roll out a "team around the worker" approach which reduces the number of different individual professionals involved in supporting families where possible.
- 5. Provide varied, flexible support according to need**

Provide a wider, more flexible and better coordinated range of support options for more vulnerable families, from a dedicated lead professional/keyworker supporting the whole family, to group activities including peer group support..
- 6. Draw on strengths of families**

Draw more heavily on the strengths which all families, even the most vulnerable possess through their immediate family and wider social networks, across both targeted early help and statutory social care. To search out ways in which people can be effectively supported by their families and friends and helping them to identify sustainable ways of improving their lives together.
- 7. Promote a restorative approach**

Promote a strong, consistent approach to supporting families, with an approach called 'restorative'. This involves providing high levels of support and challenge to families so that they take full responsibility for improving their own

lives as quickly as possible. Restorative approaches put the emphasis on how everyone involved in a family's life feels about the situation they are in and how feelings can be restored to a healthy state through practical actions. They are not judgemental and do not involve doing things to a family and do not attempt to do things for them in a way which treats them as incapable or in need of permanent support. Instead restorative approaches are about doing things with families, which build their resilience and enable them to face future challenges without support.

8. Quickly provide alternative care

To provide alternative care for children as quickly as possible where we have to use statutory powers so that any damage to children from unacceptably bad care is minimised. To make it a priority to reduce the length of time it takes to find permanent alternative care arrangements for children where they are needed, whether that is through adoption or fostering.

9. Quickly reunify families

To support the reunification of families whenever we can as soon as possible. Supporting families to resume the care of children they have previously been unable to care for, as long as they are genuinely able to offer good loving care, is very positive for everyone especially the children themselves. To provide practical and emotional support to parents who have not been able to care effectively enough for a child so that children can remain with them in the future.

10. Strengthen support to young care leavers

To continue our efforts to strengthen the support provided to young people leaving care, so that despite the challenges they have faced, they can take their place in the world as confident, resilient adults, able to find the support they need from within their communities and to parent the next generation with confidence, generosity and love.

Appendix 2

Positive Family Futures (Paulsgrove)

1. **Background**

- 1.1 In May 2013 the Public Service Board (PSB) sponsored a review to investigate and understand why families become 'troubled' and to test the hypothesis that a focus on the earlier points of intervention could prevent families reaching the point of classification as 'troubled.'
- 1.2 A multi-agency team was formed and they were supported by Vanguard Consultancy Ltd. Information was gathered to plot the 'journeys' of eight families. The 'Journeys' were costed and the additional cost to the multiple agencies involved could reach as much as £0.5million per family.
- 1.3 By using the 'Vanguard Method' aka 'Systems Thinking', the technique the team used enabled them to identify missed opportunities for the families whereby issues could have been 'nipped in the bud' and not escalated.
- 1.4 It was found that some families were actively asking for help but failing to reach current intervention thresholds (meaning they later reached crisis point), others who needed support were not being recognised early enough.
- 1.5 The prevalent culture was to 'refer and assess' rather than to provide support that would bring about genuine change.
- 1.6 Following a presentation of this work to the PSB in July 2013, the PSB requested that the team continue with the work and a short period of 're-design' took place in the Charles Dickens ward in Portsmouth.
- 1.7 A further presentation in November 2013 had an outcome of the PSB endorsing a further piece of work to 'scale up' the work and take the learning into a geographical area in the City. The area selected was Paulsgrove & Wymering and the work there commenced in late spring 2014.
- 1.8 The team were branded as Positive Family Futures (PFFT) and was kept deliberately small as the learning was to use and maximise the latent resource that exists in Universal Services and not to create another team that referrals could be made into.

2. **Delivering Differently in Neighbourhoods**

- 2.1 In March 2015 the PFFT were awarded funding from the Department of Communities and Local Government (DCLG) as part of their Delivering Differently in Neighbourhoods (DDN) initiative. The funding was £90k and was available from April 2015 until March 2016. The funding has been used to investigate and explore the earliest point of intervention for customers also known as a 'wobble point', behaviour change for customers and practitioners, local co-ordination of services, coproduction and greater understanding of communities and the possibility of the creation of a 'Zone' around a location within a geographical area. The work has been supported by an Oversight Group who have provided challenge, scrutiny and shared their individual expertise with

the PFFT. Members of Oversight Group were invited to participate based on their individual areas of expertise.

- 2.2 The learning by the PFFT is that there is an opportunity when customers join a community to identify 'wobble points' and to share with customers the universal services and community resources that are available to them. The visit also ascertains whether the customer(s) have registered with Universal Services e.g. GP, school as the learning has been that non-registration is a 'wobble point' and requires further investigation. Housing Officers undertake a 'Welcome Visit' to all PCC customers soon after they move in. The Housing Officer is the person that the customer will have an ongoing consistent relationship with. The work started in Paulsgrove and Wymering but has now been implemented citywide. All new customers receive this visit not just those with children as the learning also indicated that within a community, family members, neighbours and friends are influential and supportive. Feedback from both customers and Housing Officers has been extremely positive.
- 2.3 Although the work started with PCC local authority customers, work is well underway to include other Registered Social Landlords and Private Owner/Occupiers.
3. **Concluding Comments**
- 3.1 The roll out of the customer joining the community model mainstreams practice and is linked to existing posts and management structures within the services that deploy the 'welcome visit'.
- 3.2 Techniques that have emerged during the work, for example mapping families' journey through services over time will be used where appropriate in other work. An example of that is the use of the technique by the Safer Portsmouth Partnership to understand how complex 'cases' reach a point of intense intervention.
- 3.3 The broader learning from the review about families journey has been presented to various partnerships throughout the City and has been made available to support the City's integration agendas such as the development of Multi-Agency Teams for Families and Children.
- 3.4 The oversight group established in Paulsgrove will continue to meet to support other initiatives in the area including the local community plan.
- 3.3 The mainstreaming of the learning, interest from the DCLG in using the learning to inform a national model and legacy in utilising the techniques elsewhere are testimony to the success of the approach.