

## Appendix 2



**WALSALL**

### **Early Help Comprehensive Partnership Review Executive Summary September 2016**

## **Foreword**

In Walsall we are embracing the challenge to strive for an Outstanding Service to ensure children are 'Safe, Happy and Learning Well' against a back drop of reduced budgets and increasing demand.

There is compelling national and international evidence that early help, if implemented properly, can work to improve outcomes and deliver cost benefits. The 'Early Help, Early on' message has now been embedded in a number of key documents driving our partnership including the West Midlands Police Strategic Assessment, Walsall's Early Help Strategy and Children and Young People's Partnership Board priorities.

Over the last 12 months we have built strong relationships between partners and stepped up to the challenge of creating whole-system change through integrated locality working to ensure sustained improvements for Walsall's children and young people and their families.

For the first time we have undertaken a whole system review of the help and support we provide to children and young people across Walsall. The evidence we have gathered has informed our understanding of the demand for help, identified good practice and the areas we need to improve to deliver better outcomes for children, young people and families.

We are committed to embedding an effective early help model, owned across the partnership and underpinned by strong evidence of what works. This includes ensuring that our collective services are of the highest standard with clear pathways to a range of effective interventions for our most vulnerable families. We need to take our learning and consolidate what we know we are doing well, stop doing what isn't working and invest in new and innovative evidence-based initiatives. This is a real opportunity to change the way we are working and see sustained improvements for children and young people across Walsall.

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## **Context**

Walsall's Strategic Partnership engaged in a workshop delivered by Accenture to identify key issues around improving the configuration of the Strategic Boards and the work that needs to be done to ensure public agencies work together to provide Strategic Leadership for Walsall Borough to deliver better outcomes for and with local people. The report produced By Accenture outlines a number of actions as a result of the workshop, which included 'To tilt the focus more towards people as opposed to themes, ie by incorporating more insight on individuals when making strategic decisions, start with sharing the findings of the ' Early Help 1000 case review'.

Children's Services completed a structural redesign in April 2016 of Early Help to create four locality 0-19 family support teams. The redesign purposely brought together skills and resources to enable more effective and timely whole family working and to ensure better, evidence informed help was available to those children and families who needed it most.

Children's Services committed to a comprehensive review of all open Early Help Cases at the time of the redesign (estimated to be around 1000 cases). This review consisted of a concentrated case reflection between staff and managers on a significant scale in order to:

- Develop a joint understanding of the children and families currently receiving Early Help, what's working for them and what isn't and needs to change
- Seek assurance that all cases are being worked at the right Children's Safeguarding Board thresholds
- Ensure that all cases are relevant to be supported by the 0-19 team
- Get an overview of the interventions being delivered by staff and capture good practice to inform a menu of services to be communicated to social workers and partners
- Consider changes to processes that are unhelpful, add no value or delay effective support to families

The Strategic Partnership identified the case review as an opportunity to get a better understanding of vulnerable families currently in the 'support system' to inform integrated partnership working and partners have worked with us to:

- Map the ACE (Adverse Childhood Experiences) factors for each child
- Map partnership involvement in the lives of the children/families
- Undertake thematic multi agency reflection on selected cases

## **Methodology**

- Over a four week period 47 Children's Services Family Support practitioners reflected on their open case files. The reflection discussions involved the practitioner, the senior practitioner, an Early Help Group Manager, Early Help School Support Advisor (chair of locality panel), the Parenting Coordinator and a Social Work Development Coordinator.

- Partners including Children's Services, Police, Health, Youth Justice, Beacon and Supported Housing also completed the Matrix with identified needs and interventions. This provided a rich picture of the children and their families to inform our understanding of demand, provision and future partnership working (See appendix A for detailed data report).
- Finally seven half day multi agency case reflection workshops were scheduled throughout August and September to explore current service provision across partners, lessons learned and good practice to take forward in future partnership delivery with a specific focus on long term neglect, CSE and Toxic Trio (See appendix B for detailed findings on each multi agency case reflection).

40 practitioners from across Children's Services (Family Support, Social Care, Early Years, Integrated Behaviour Support), Beacon, Police, Schools, probation, School Health, Health Visiting, CCG, Commissioning, Youth Justice and Sandwell Woman's Aid.

This report outlines the findings and learning from the data analysis on 892 children, 502 families (data analysis only included the children about whom we received robust data) and the Early Help and multi agency case reflection meetings and sets out recommendations to be considered by the Strategic Partnership

# Early Help Comprehensive Review

September 2016

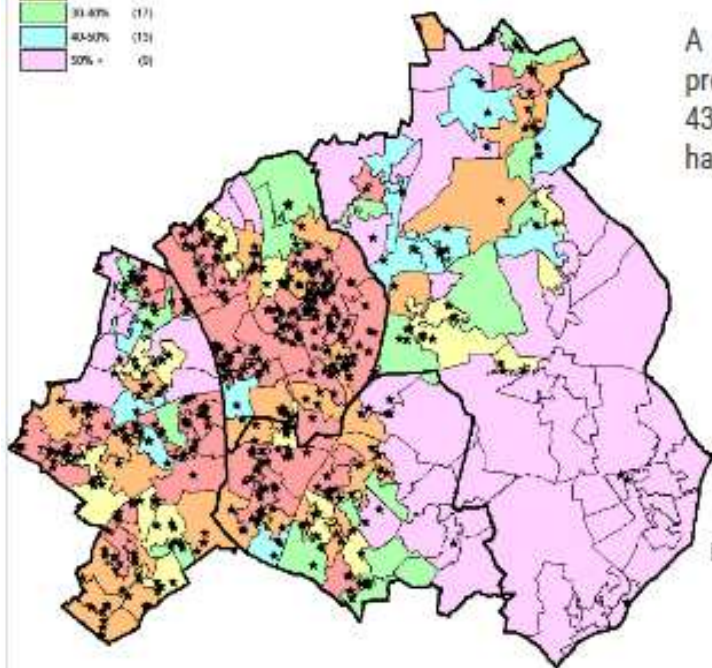
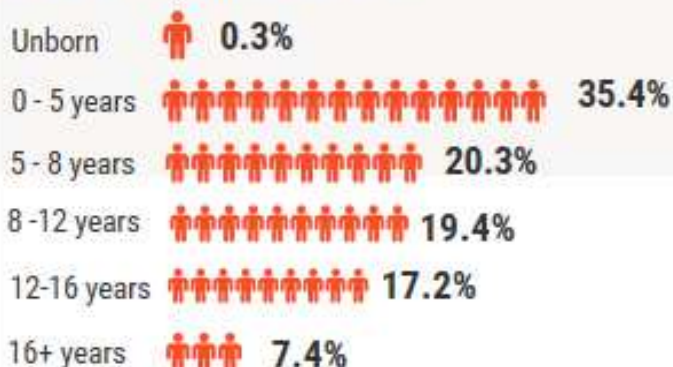
Overview of the families we are supporting together

Children's Services, Police, Health, Supported Housing, Youth Justice and Beacon gathered information on:



**892 Children**  
**502 Families**

This report gives a overview of the children within the families, their needs and their Adverse childhood experienced to date.



## Direct Adverse Childhood Experiences



Emotional Abuse  
19%



Emotional Neglect  
22.1%

## Indirect Adverse Childhood Experiences



Witnessed Abuse  
71.4%



Family member with  
Mental Illness  
36%

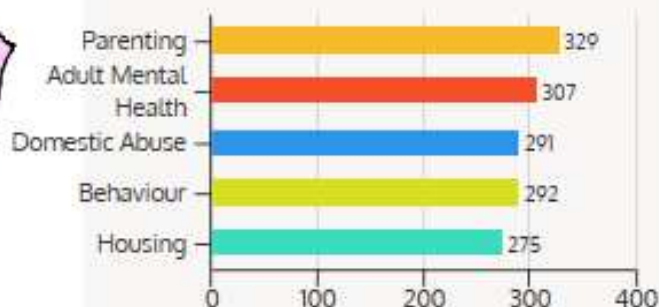


Parental Separation  
31%



A check of the children's services system where professionals had no evidence on ACE revealed that 43% of children had lived in a household where there had been at least one DV incident

## Top 5 Demands for Early Help Support





# Early Help Comprehensive Review

September 2016  
Overview of partnership involvement

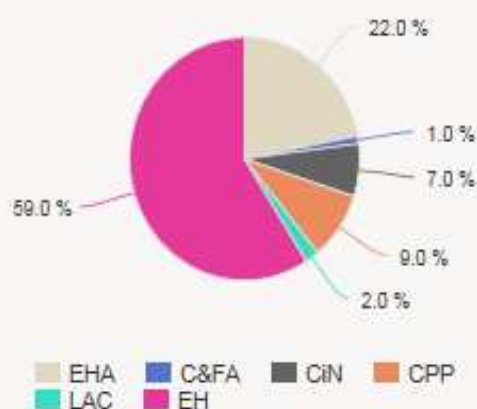


**892 children**  
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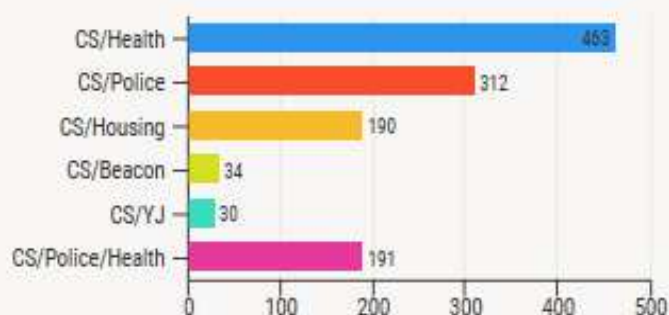


Children's Services - Family Support **841**  
Police **339**  
Youth Justice **30**  
Health **500**  
Supported Housing **201**  
Beacon **45**  
School **638**

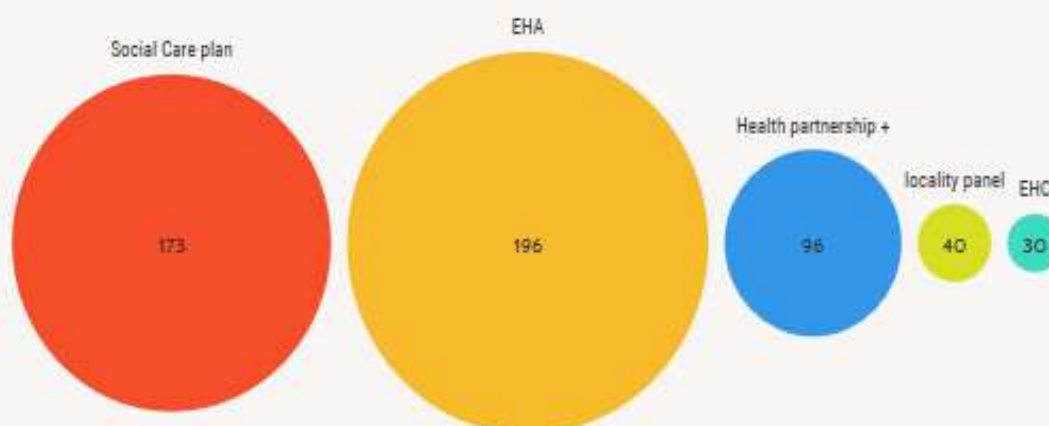
At what thresholds are the children ?



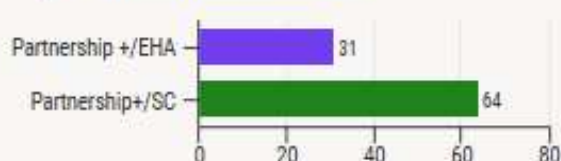
Joint knowledge



Assessments and plans



Duplication of Assessment



The Early Help Assessment, the Health Partnership + assessment and social care assessment are all using the triangle of need as a tool to assess.  
The table on the left shows the number of children that had two live assessments at the time of the review.

# Children's Services Early Help Case review

## Toxic Trio - Overview

### Toxic Trio Overview

Of the 791 Children reviewed in Children's Services Early Help there were:



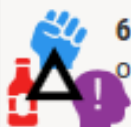
**332 children (42%)** live in a household where there had been at least one incident of DA



**334 children (42.2%)** live in a household where there is one adult who has a mental health need.



**114 children (14.4%)** live in a household where there is an adult with an alcohol and substance misuse issue.

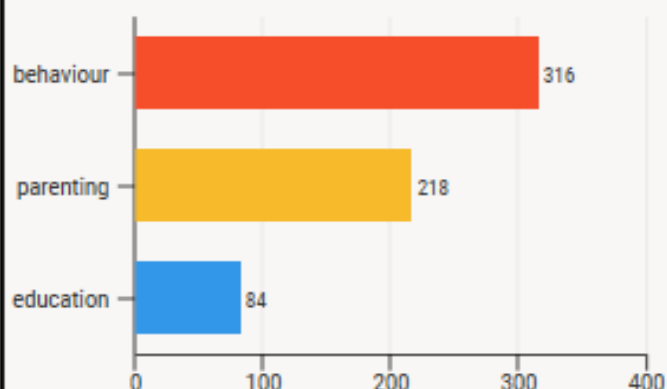


**6%** of children live in household where all of the Toxic Trio factors are present.

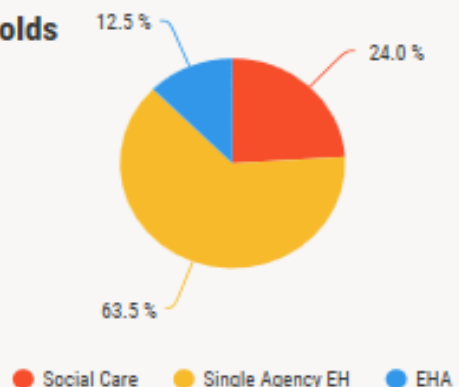
### Breakdown of children affected by DA

0-5 years		139
5-8 years		70
8-12 years		78
12-16 years		36
16+ years		9
SEND		42

### Top demands for help where Toxic Trio has been identified



### Thresholds



### 0-19 Family Support - interventions offered to children and families affected by DA

Freedom Programme - 33.9%

One to One parenting - 50%

Group Parenting - 7%

(mellow or PPP)

Referral to specialist DA provider - 18.5%

\* The above overview is a analysis of the data used for the Children's Services Early Help Review as this was the only set of data that included robust information on Toxic Trio that included presenting need at the Front Door, Identified Need and interventions offered.



## Summary of Findings

The review has identified a series of findings which will be useful for the partnership to consider in helping to inform future collaborative working to secure better outcomes for children, young people and their families and prevent long term high service costs.

### **1. Smarter use of partnership information to secure early change**

Both the data and the reflection demonstrated that each agency had some information on the family often focussed on one area. Bringing information from across the partnership together gets us to understand the context of families better, enables us to inform an effective route of engagement and understand the issues that may need to be tackled.

How can we use our joint knowledge of demand to be more proactive and together in tackling areas of need?

E.g.

- Information on communities with high referrals for DA – could we do a community partnership approach to responding to the issues rather than an individual approach?
- CSE – could we provide a more preventative approach to schools where there are pupils of high risk identified?

Considering a large proportion of children in this review had been impacted by the Toxic Trio factors and therefore increasing the Adverse Childhood Experiences, it may be worth considering undertaking further work to map the information held by Adult Social Care and Adult Mental Health for the families included in the redesign.

### **2. Treating symptoms versus ‘root cause’**

The case reflection highlighted a reactive response to a presenting need/issue at a moment in time. The reactive response doesn't allow us to see the entire picture. We miss important details and information about the children, young people and family which we need to inform effective decisions. The case reflection identified that at times we jump to conclusions, misread the situation and take action to simply stop the 'presenting need' and not securing change as we have not addressed the 'root cause'. The case reflection also identified that, at times, we are not focussed enough, do not jointly understand the impact we want to achieve for the children and do not have a focussed approach on how to achieve this.

In a number of the case reflection workshops professionals identified that this had been the first time they had an opportunity to reflect in detail on a family they were working with. All involved saw it as a positive experience and gained valuable learning directly related to the case and for their practice in general.

The partnership needs to consider how we can move to a more responsive approach (in line with restorative practice), meaning practitioners take time to thoughtfully evaluate the situation, are encouraged to have conversation, or challenge and determine how best to respond. It allows us to build with what we've got.

Moving to a responsive approach as a partnership may help us to deliver adaptive/flexible services, rather than offering a 'standard menu of service', increasing the chances that we find the right solution first time around.

### 3. Knowledge is power

The review demonstrated that there are lots of effective and quality services and interventions available to support children, young people and families. However, practitioners were not always aware of the services or how to access them for families and therefore did not pull them in to support.

We also need to acknowledge that the current economic climate means that services and/or their remits are changing on an ongoing basis. As a partnership, we have a challenge to consider how we can keep a joint knowledge hub of what valuable services we have and promote how they can be accessed to practitioners and families on.

The case reflection also identified the underdeveloped partnership with the community and faith sectors in securing change and providing ongoing sustainable support for families.

### 4. Lots of pathways...more developing

We seem to have lots of referral pathways for different services, and therefore it becomes hard to navigate and secure access to services. The different pathways and their related criteria can provide a barrier to enable practitioners to secure and synchronise the right interventions.

As a result practitioners sometime fall back to offering a less effective service as it is perceived as 'better than offering nothing'. However again, as a partnership, we need to consider if this is a waste of valuable capacity as it may not address 'root cause'.

Practitioners raised particular issues in understanding pathways and securing the right support to children with disability, including transition support, Children Mental Health and services around Adult Mental Health. It was identified that adult focussed services like probation, Adult Mental Health and the Police were not always sufficiently sighted on the children, the impact of the adult issue or behaviour on the children within the family. or how the parental role can be used to secure positive change for the Child.

We seem to have reducing services but be continually creating more pathways for different issues/problems which are often developed from a professional perspective rather than a service user perspective.

As a partnership we need to consider following:

- Understand what pathways we do have, do we need then all (are they effective in making a difference), can we integrate them or link them better together?
- Do we understand enough about what the experience of the current pathways are for children, young people and their families and when developing new pathways whether this will improve this experience?

## 5. Relationships are key in doing the right thing

Taking time to build relationships with children, young people and families is really important in ensuring we are working **with** them. The case reflections highlighted the need for practitioners to have 'curious' approach to families to enable us to gather valuable information on family context and root cause.

Practitioners don't always feel confident to ask challenging questions or feel they have the time to build an effective relationship that allows for asking the right questions and challenge.

In addition, it was identified that some families' negative experience of services when they were children results in not wanting services involved and practitioners end interventions too soon due to non-engagement. Practitioners identified lack of capacity and the pressure to get onto the next family as barriers to provide the 'persistence assistance' approach to engaging 'hard to reach' families

As well as building relationship with families we need to have time to build relationships with colleagues, including the third sector providers. We need to have a network of support services and practitioners that feel they work together in a high support, high challenge and reflective environment to secure sustainable change with families.

Effective communication was also identified as a key enabler for delivering the right interventions – some pathways and processes prevent practitioners from communicating effectively.

Examples in the case reflection showed that change in staffing and organisation at times can lead to vital knowledge on a child and family and the impact (or lack of impact) of interventions being lost, leading to duplication of non effective interventions. Again we don't always reflect enough on how families experience this and what this may mean to their future attitudes to service engagement.

## Recommendations

### Recommendations for the Partnership Leadership Group

1. Partners to use the demand analysis to respond to the actions identified in the Accenture Report including:
  - (1i) Create a common Purpose informed by the common drivers of demand
  - (2ii) Mapping of strategic priorities informed by shared, intelligence-led understanding of need
  - (11Xi) Customers to be sufficiently represented in performance data – ‘1000-case review’.
2. Partners to consider future integration of health, social care, police and housing to develop multi disciplinary locality teams to enable more effective information sharing and a more responsive response to needs of children, young people and families with a view to reduce duplication and costly long term interventions.
3. For the partnership to map and review our range of pathways and consider opportunities to streamlining these. Consider how we can keep a flexible approach to pathways for those families and circumstances that don’t fit a standard approach.
4. Develop a structure that provides us to coordinate and effectively communicate the range of services, interventions available across Walsall to ensure practitioners and families have easy access to information on pulling in the right support.
5. Develop a partnership protocol or standard that sets out expectations/accountability on how we work together and communicate between professionals when supporting families
6. To consider further mapping of information held by Adult Social Care and Adult Mental health for the families included in this review to enhance our understanding of need and possible future opportunities for joint working.

### Recommendations for Walsall Safeguarding Board

1. Consider opportunities to disseminate learning of this review to Strategic partners and practitioners including an event on 17 November 2016.
2. Consider further development of the Children Walsall Safeguarding Board training plan to include training that responds to the findings including:
  - Restorative training to develop a culture of high support high challenge between professionals and develop a response approach to need.
  - ‘Persistence Assistance’ training
3. Safeguarding Board to consider regular multi agency reflection workshops (using methodology used in this case review) in addition to desk top audits. This would provide an enhanced opportunity to identify good practice and areas for further development as well as give a range of practitioners a key learning opportunity.