



Health and Wellbeing Board

26 January 2021

Family Safeguarding and Sustainability

1. Context

Family Safeguarding in a partnership project “co-owned” by a number of partners including Black Country Partnership NHS Foundation Trust, Walsall CCG and Walsall Together. These partners played a vital and active role in the scoping and start-up of Family Safeguarding. Since “go live” there is emerging Walsall data suggesting a positive impact which mirrors national research. We now need to establish an approach to sustainability in collaboration across the partnership healthcare is central to this in terms of identifying a sustainable funding solution and there will also be benefits to the wider Walsall system partnership.

2. Background

The Family Safeguarding Model, grant-funded by the Department of Education was launched in Walsall on the 1st September 2020 and brings a whole-system partnership-led change approach tackling the impact of the ‘trio of vulnerabilities’ of parents (domestic abuse, substance misuse and mental ill-health) on children’s lives. Specialists (including mental health practitioners) work in unified safeguarding teams to share information, to provide support, and to prevent parents reaching crisis stage. This provides better outcomes for children by keeping families together, addressing root causes, and preventing children from entering the care system. There is a wealth of evidence available externally which supports this.

3. Current situation

- a. Clear sign up from partners to support the model going forward (evidenced by signed pledges).
- b. Established outcome framework commended nationally.
- c. Over 170 children already being supported.
- d. Clear case examples of parents improving their health and changing outcomes as a result of the intervention of the specialist adult workers.
- e. Robust data showing a reduction in the number of children on a child protection plan.



- f. Sustainable funding for the adult specialist workers (four from the NHS) yet to be identified.
- g. Emerging learning about an integrated cross-partnership practice model which is already informing other models of delivery for the health economy.

4. Outcomes

Below are the outcomes for the family safeguarding model in Walsall which clearly relate to the outcomes across the health economy in terms of the better start to life and improved mental health (those especially relevant are in bold). Additionally there is a specific outcome focussed on partnership working between the local authority, health and others.

Families remain together at home where it is safe to do so.	Families receive the right level of support, when they need it, for the right amount of time	Fewer families experience issues relating to the trio of vulnerabilities and receive better support (Domestic Violence, Mental Health, Substance Misuse)	Improved engagement in school and improved academic attainment	Professional collaboration across partnership organisations provides a holistic, joined up service for children and families.
<ul style="list-style-type: none"> 1) Fewer children move into care proceedings 2) Fewer children become looked after. 3) More children who come into care are reunited with their families. 	<ul style="list-style-type: none"> 1) Fewer children are re-referred into statutory services following an intervention. 2) The duration that children receive statutory services is relevant and appropriate. 3) The amount of time families wait for specialist interventions is reduced. 	<ul style="list-style-type: none"> 1) Domestic violence decreases within families in Walsall. 2) Parents affected by substance misuse are supported to manage these well. 3) Parents are more resilient and receive timely support for mental health issues. 4) Families are more resilient 	<ul style="list-style-type: none"> 1) Attendance at school is improved and fewer children are excluded. 2) Academic attainment and outcomes for children and young people improve. 3) Children and young people are able to and are accessing education, employment 	<ul style="list-style-type: none"> 1) Relationships across partner organisations and professionals improve 2) Multi-disciplinary team working is effective. 3) Staff are motivated, confident and have the skills they need staff retention improves.



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The key health outcomes for Walsall which link specifically to family safeguarding being

- a. Population health; there is robust national evidence and local case studies showing that family safeguarding is improving academic attainment of vulnerable children and improving the mental health of all family members leading to a good start in life and improved health and happiness.
- b. Accessible coordinated and responsive care; National evidence and reports from Walsall staff are already showing that families appreciate the improved coordination and support of family safeguarding. The support is offered at an earlier stage reducing morbidity and improving health outcomes, especially those associated with looked after children and parents with drug and alcohol, mental health and domestic violence.

5. Supporting evidence

National research shows a clear reduction in costs for partner organisations in terms of time spent with families on child protection plans and specialist services for looked after children. We are commissioning specific work in Walsall to enumerate these benefits and consider wider impacts.

We have nearly completed a partnership-dashboard to evidence key performance indicators which will measure both the improved outcomes and cost reduction, these are largely based on findings from other areas which have implemented family safeguarding. However we acknowledge we are in unprecedented times and as such baselines/norms could be difficult to establish. Crucial measures for health partners include:

- a. Reduction in accessing of mental health crisis services; home treatment teams and psychiatric liaison.
- b. Reduced referral to and accessing both GPs and outpatient appointments.
- c. Reduced number of accident and emergency attendances.

6. Recommendations

- a. Health and wellbeing Board to consider what outcomes they would be seeking to achieve to want to invest in this model going forward.
- b. Health and Wellbeing Board to identify the mechanisms for how any future contributions to the sustainability of Family Safeguarding can be agreed.
- c. Health and Wellbeing Board to identify strategic connections and opportunities to embed the approach and share the learning.



Walsall Council

- d. To invite the board to enter into further discussion outside of Health and Wellbeing Board to consider the contents of this report to develop a plan for sustainability, to enable a further more detailed paper to be considered at the April meeting which sets out proposals for sustainability.

Report Author

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