



*one Derby one council*

# **Report to Derby Safeguarding Children's Board.**

## **Effectiveness and Impact of Early Help Arrangements 2015-16.**

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### **1. Introduction.**

The People's Department in Derby City remains committed to ensuring Early Help is available to vulnerable young people and their families to prevent escalation to (more costly and socially damaging) higher tariff services in the future.

Derby has a range of Early Help services available across the city, including Multi-Agency Teams (MAT's), who are co-located with Social Work teams in an integrated locality based model.

The MAT's are complemented by Children's Centres as part of a broader Early Help offer. Children's Centres provide universal and targeted services in clusters of locality based centres across the city to families with children under the age of 5. The focus of centres work is increasingly with more vulnerable families.

A further key element of the Early Help offer, is the Space@Connexions, a city centre based youth 'one stop shop', which delivers careers and health advice, including sexual health services, drug and alcohol services and houses the Leaving Care Team.

This report provides an overview of the impact Early Help services in Derby have had over the past 12 months by addressing areas impact can be either judged or measured against. There will be a narrative response to each area in turn and the report will contain a number of suggested actions to address challenges and areas for improvement raised within the body of this report.

The report should be read in the context of pressures that are increasingly being applied to children's services both nationally and locally due to:

- A national rise in the number of initial contacts and referrals to children's services.
- funding reductions from central Government.
- The on-going impact of the toxic trio.
- Increasing population/changing demographics.
- Inspection frameworks.

Locally, other pressures have included:

- Move of a number of teams from locality bases to a city centre based office facility.
- Transition to a new case work recording system and Children's Centre database in April and September 2015.
- Combining separate Children's and Adult's Strategic Director posts into a Director of People post.
- Increases in complex families, especially larger family units and migrant families from Eastern Europe.
- The BME population in Derby increasing from 15.7% in 2001 to 24.67% in 2011.
- Derby having 3,300 more children under the age of 4 in 2011 than it did in 2001.
- Derby experienced a higher than average population growth over the same period of time.
- Derby has higher than the national averages of children living in the most deprived wards and living in poverty.

## **2. Early Help Performance Framework.**

To help demonstrate the impact of Early Help services, Derby developed a performance framework in April 2014 to develop a coordinated assessment of Early Help activity and support evaluations of the impact it is having on associated services / measures (i.e. referrals to Social Care and the total number of looked after children).

Each measure is entered (onto the City Council's performance framework, DORIS) by each Multi-Agency Team (MAT) and Children's Centre Locality Team, with a summary being available by locality and then across the city. The first year of the framework (2014-15) involved setting baselines for each of the measures, which are compared with performance over 2015-16 below. The framework is divided into 3 areas of work, **how much** Early Help do in specific areas of practice, **how well** early help deliver services and **the impact of services**:

**How much** Early Help do in specific areas of practice:

- Open cases – 633 – reduction from 740 in 2014-15 (at quarter 4 of 2015-16 compared to quarter 4 of 2014-15).
- Spider-graphs completed (progression of change tool) – 717 – increase from 303 in 2014-15.

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- 'How was it for you' surveys received – 499 – increase from 160 in 2014-15.
- Early Help Assessments completed – 603 – decrease from 929 in 2014-15.
- Number of cases audited – 133 (96% completion rate) – increase on 47% completion rate from 2015-16. This was across Children's Services.
- Number of cases referred screened for CSE – 363 – this data was not collected last year.
- Number of cases screened that were judged either medium or high risk of CSE – 37 (20.3%) - this data was not collected last year.

### **How well Early Help deliver services:**

- Number of cases re-opened within 3 months – 66, which is 4.9% of total cases worked with over the year – a reduction from 12.4% in 2014-15
- Number of people reporting that they were treated with respect (via 'how was it for you' surveys) –  $373/499 = 74.7\%$  - a reduction from 79.3% in 2014-15
- Number of people reporting that workers listened to them (via 'how was it for you' surveys) –  $370/499 = 74.1\%$  - a reduction from 80.6% in 2014-15
- Number of cases closed – 700 – a reduction from 726 in 2014-15

### **Impact of services:**

- Number of spider-graphs with an improving direction of travel – 667/717 (93%) – an increase on 66% in 2014-15.
- Number of cases escalated to Social Care Services – 212/700 (30.2%) – This was over the course of the year.
- Number of people reporting that they were helped with identified issues (via 'how was it for you' surveys) – 384/499 (76.9%) – a reduction from 80% in 2014-15.
- Child in need, child protection plan and looked after child rates – see table in section 3.

What the data shows us is that whilst Early Help services had a reduced case load compared to 2014-15 at the end of quarter 4, over the course of the year, there were

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68 more open cases in 2015-16 than in 2014-15. Early Help Services have been affected by the loss of Family Intervention Project workers, who returned to Derby Homes in February 2016. This directly impacts on work capacity within Early Help services.

There has been a significant increase in the number of Spidergraphs completed with families, which acts as a measurement tool for progression of change. This is positive and displays that this practice is now more widespread across practitioners than it was in 2014-15.

The same can be said for the healthy increase in the number of How Was it for You? Questionnaires completed with families at the end of an intervention. The number does not match the number of closed cases, which is an area of development to consider, as case guidance for Early Help requires all closed cases to have a How Was it for You? Questionnaire completed. However, it should be noted that some families refuse to complete this.

The number of Early Help Assessments completed shows a significant decrease of over a third from 2014-15; however some of this could be due to data migration issues from the CCM database to the Liquid Logic database. We therefore feel that this figure may lack some accuracy and we are going to look further into the data that underpins this to ensure we are satisfied we gather an accurate picture of assessments completed over 2016-17.

We have screened a high number of cases for CSE risk indicators this year and just over 21% have been identified as either medium or high risk. This provides some assurances that children and young people potentially at risk of CSE are not slipping through the net in relation to risk identification and action. We now need to be assured appropriate actions are taken on cases identified as high risk to ensure effective risk management is being undertaken.

The number of cases re-opened 3 months after case closure shows a significant drop from last year. This may indicate that plans are starting to become more specific and needs are now being addressed more effectively before cases are closed down, leading to a reduction in the need for re-referral back in for a service.

The numbers of families reporting they felt listened to, were helped with identified issues and treated with respect has reduced slightly from last years' baseline figures. However, it has to be remembered that the numbers completing How was it for You? Questionnaires have increased significantly, which is a positive. The aim of Early Help Services over the past 2 years has been to become more professionalised in its

approach to providing intervention with families, rather than merely providing a 'support' type service, which may account for some of the feedback from families becoming a little less favourable, as parents are increasingly challenged by Early Help practitioners.

What is very positive is the increase in the % of Spidergraphs with an improving direction of travel from the 66% last year to 93% this year. Furthermore, a far greater number of these tools are being completed with families, which is very positive in terms of consistency of practice.

### 3. Children's Services Performance Data.

The City Council's Performance and Intelligence team collect data that provides a quantifiable picture of the impact of Early Help services. The data displayed in the table below highlights performance data on a quarter by quarter basis over the past two years in several areas of practice, where Early Help is required to make a difference

- Number of Early Help/level 2 cases
- Number of child In need (CIN)/level 3 cases
- Number of child protection plans
- Number of children in care
- Youth crime figures, i.e. numbers open to Youth Offending Service (YOS)
- Number of cases escalated to Social Care
- Number of Early Help Assessments completed each quarter

Case Type	30/06/2014	30/09/2014	31/12/2014	31/03/2015	30/06/2015	30/09/2015	31/12/2015	31/03/2016
Early Help/Level 2 Cases	683	726	698	740	766	1031	1014	989
CiN Cases	1813	1705	1524	1583	1813	1705	1753	1567
Number of CP Plans	327	329	324	307	316	302	329	313
Children in Care	459	448	470	470	467	467	487	459
Numbers open to YOS	165	183	152	125	181	173	183	149
Escalated to Social Care	51/273	53/369	18/206	65/351	122/453	87/325	93/331	97/392
Escalation %	18.60%	14.30%	8.70%	18.5%	26.9%	26.7%	28%	24.7%
CAF/EHAs completed	187	206	254	282	56	79	170	108

## **Early Help.**

Numbers of level 2 (Early Help) cases appear to have increased significantly at quarter 2. However, this is related to how data is now captured from the new recording system (Liquid Logic), which incorporates both Early Help cases from Locality teams and from the Integrated Disabled Children's Service.

The number of Early Help cases (Locality teams only) at the end of quarter 4 for 2015-16 was 659, at the end of quarter 3 it was 699 and at the end of quarter 2, the figure was 791. So, following an initial growth in numbers, from quarter 1 to quarter 2, the case load in Early Help has reduced to a similar size to the caseloads in 2014. One potential explanation for this, is that only children (in a family) with an identified and assessed need/risk are now opened up on the recording system whereas previously there has been some inconsistent practice involving opening up of children in families who have not had assessed and identified needs. There is also more robust scrutiny of cases that have been open for longer than 12 months.

The recent mock OFSTED exercise in Children's Services in Derby city highlighted that there is some capacity in case-loads in Early Help, which this data appears to confirm.

Although the case-load in Early Help appears to be reducing quarter on quarter, there was an overall increase in Early Help case numbers over 2015-16 compared to 2014-15. The case load rose by 68 cases over the course of 2015-16.

We took a sample in quarter 3 of 2015-16 of the number of cases where Early Help staff were involved with a family as part of a Team around the Family approach (also known as an involvement). This was in Locality 5 of the city (the west) and there were 2241 contacts with families and young people. These contacts related to group-work delivered in schools, delivery of youth clubs, completion of return interviews for young people who have been missing and with young people in school at risk of NEET. This level of work is in addition to the work identified in the preceding paragraphs and the data in the above table.

Additionally, Early Help services work with some cases at a Child in Need (CIN) level (although this is relatively small numbers) either as a Lead Professional or completing a joint piece of work with Social Care services. There is also some joint work with Social Care services on Child Protection cases. Over the year, Early Help have been involved in 140 CIN cases and 37 Child Protection cases (this latter number is from Locality 1 and 5 only).

### **Child in Need.**

Child in Need cases increased over the first 2 quarters of 2014-15 before they plateaued off to a consistent number in the last two quarters. The number of CIN cases in quarter two of 2014-15 had spiked to the highest rate (of CIN cases) for over two years, which was in line with what Derby City's Children's Services had experienced between December 2013 and 2015 in relation to seeing a rising demand for Children's services. However, 2015-16 has seen a concerted effort in Children's Services to ensure a good throughput of work at all levels (with emphasis on CIN and Early Help cases) to prevent drift and ensure capacity in staffing resources is freed up to ensure swift allocation and delivery of work. This approach appears to have helped reduce case-loads in both areas towards the end of the year.

The general trend line in relation to CIN has been one of a reducing number of cases (excepting quarter 3). The difference in number of cases from the end of quarter 1 in 2015-16 and the end of quarter 4 in raw data terms is 256, or a 13.6% reduction in the CIN case-load. However, the trends seen in the 2014-15 data also saw numbers decrease from the first two quarters of the year, which may indicate a seasonal trend in case-load numbers. There were 213 more CIN cases open over 2015-16 than there were in 2014-15.

### **Child Protection Plans.**

The first X 2 quarters of 2014-15 saw continuing increases of children subject to child protection plans, particularly in quarter 1 of 2014-15. This was in line with both national trends and comparator Local Authorities. The last X 2 quarters of 2014-15 saw reductions in the numbers of children subject to child protection plans. There have been both increases and decreases in child protection plans quarter on quarter in 2015-16 but at no point has the number exceeded 2014-15's highest number of plans and the numbers do appear relatively stable, although there was an increase of 22 plans in quarter 3. Over the course of 2015-16, there were 27 less child protection plans than there was for 2014-15.

### **Children in Care.**

Children in care (CIC) numbers increased over 2014-15 in line with national trends, with a particular spike in quarter 3, which had been preceded by relatively stable numbers. The numbers over 2015-16 initially dropped slightly and remained stable for quarter 2 before an increase to the highest number of children in care in the city for the past two years in quarter 3. Quarter 4 saw a reduction to the levels of children in care that we saw in early 2014-15, which is a positive sign along with emerging downward trends in the CIN case-load and the slight decrease in the number of child protection plans in 2015-16, compared to 2014-15. However, over the course of the year, there were 33 more CIC cases than in 2014-15.



### **Youth Offending Service.**

YOS numbers reduced significantly over the last 2 quarters of 2014-15 but significantly increased in quarter 1 of 2015-16, the numbers were relatively stable over the course of the next two quarters but saw a significant reduction in quarter 4. This appears to correlate with quarter 4 of 2014-15, which also saw a significant reduction in the YOS case-load. This could relate to seasonal trends in offending and anti-social behaviour by young people, i.e. reduced offending in autumn/winter compared to spring and summer. YOS numbers increased by 61 over the course of 2015-16.

### **Case Escalation.**

The percentage of cases that needed to escalate over 2014-15 reduced quarter on quarter until quarter 4, which saw a significant increase on quarter 3, (the escalation figures for quarter 3 last year appear incredibly low). Throughout 2015-16, there has been a relatively stable % of case escalations, which averages out at 26.5%. This data incorporates both Early Help in Locality teams and the Early Help service in Integrated Disabled Children's Services (IDCS), (there were only 700 case closures in Locality Early Help services).

The mean data for escalation involving both Early Help services in Locality teams and IDCS (alone and then combined) are very similar, i.e. 30.2% for Locality teams and 26.5% combined. This is higher than last year (15.5%) but may be due to improved recording of escalations on the new database, or potentially an increase in more complex cases being referred for a service. There are also a number of cases that have been involved with Children's services for a number of years and which move between statutory Social Care services and Early Help services intermittently.

### **Early Help Assessments.**

The number of Early Help Assessments being completed increased every quarter over 2014-15, displaying greater recognition of emerging needs being identified by partner agencies and universal services, allied to a clear referral pathway into locality teams to meet these needs. The number increased by over 100 over the course of 2014-15. Numbers significantly reduced over 2015-16 but our view is that this relates more to the changeover in recording system from CCM to Liquid Logic and inconsistencies in how/where assessments are stored and recorded, rather than an actual reduction in the number of assessments completed. This area requires further investigation to ensure accurate numbers of assessments are available going forward.

### **Overall Summary.**

Overall, the picture presents some positive areas, as numbers of Early Help cases have reduced through the course of the year and appear to be on a generally downward trajectory. The same can be said for CIN cases and child protection plans have reduced compared with 2014-15, this has started to occur at a time of concern around the growing demand for Children's services between 2013 and 2015. It is possible that the robust approach to adopting shorter and more intensive interventions at Early Help and CIN levels has helped to manage demand for services, whilst at the same time, available data suggests case escalation takes place with cases where risk is increasing (or no progress is being made) to ensure children are kept safe.

Children in Care numbers over the past 12 months have slightly increased (which would correlate with an increasing number of case escalations over the past 12 months) and further work is required to prevent entry into care and also to ensure that re-unification with families is considered where this is a safe and appropriate option. There is work taking place within children's services as part of demand management work to create further interventions at the edge of care, potentially using money from Futures in Mind to provide a Family Therapy type approach for those families where there is a risk of family breakdown, utilising those members of the children's workforce who have been trained in IAPT models (Improving Access to Psychological Treatment).

#### **4. Response to 2014-15 Annual Report**

The Early Help annual report in 2014-15 provided a number of challenges for Early Help services in Derby, which were informed by:

- Local data (from DORIS and the Performance and Intelligence Team)
- OFSTED's Early Help: Whose Responsibility? Report
- Findings from case audits across 2014-15
- Outcomes from the NEET strategy
- Children's Centre inspections in 2014

This informed an action plan, which aimed to address these challenges and was overseen by a group of practitioners and managers from across a range of services over 2015-16.

The progress made against each section of the plan is located below.

#### **Theme 1: Early Help Performance Framework**

Data is now consistently collected by all MAT and Children Centre Managers at quarter end and there is now consistency in how data is collected (by front line practitioners) and recorded on the DORIS performance system.

The Spider-graph (progression of change tool) has been re-designed to include questions, which gain family views before review meetings to ensure their views are heard by all professionals working with that family.

The number of How Was it for You forms completed was 499, a significant increase from 160 in 2014-15.

Some data has been collected from quarters 3 of 2015-16 on the number of case involvements and contacts with young people across the city, which was 2241. This was from 1 Locality Team and included individual contacts with young people attending youth provision such as youth clubs and group work at schools as well as Connexions Personal Advisers working with vulnerable (to NEET young people in schools).

## **Theme 2: Children's Services Performance Data**

Section 3 of this report provides an overview of Early Help data across 2015-16 and comparisons against CiN, child protection plan, Youth Offending Service and Children in Care data.

Section 5 of this report provides an overview of the multi-agency audit that took place in December 2015 on a sample of cases subject to child protection plans (who had accessed an Early Help service) to identify potential gaps in service locally. The report highlighted a number of practice issues that will form the basis of the Early Help action plan for 2016-17.

A medium term impact of Early Help services audit was completed this year and this identified that 51/163 cases that were worked by Early Help services in 2012/13 have escalated to Social Care Services since then, representing 31.2% of the cohort for that year. This means 69.8% of cases avoided any contact with higher tariff Social Care services (tiers 3 or 4) since that time.

Of the cases that escalated, a number did not meet thresholds for Social Care intervention at tiers 3 or 4 and continued to be worked with by Early Help services.

30/51 cases that escalated met thresholds under CiN (Section 17), representing 18.4% of the cohort, meaning 81.6% of cases avoided contact with Social Care services at tier 3.

10/51 cases that escalated to Social Care met thresholds for Child Protection, representing 6.13% of the cohort, meaning 93.87% of cases avoided contact with services at tier 4 (Child Protection).

27/51 cases that escalated to Social Care met thresholds for Looked After Child through either a Child Protection or voluntary accommodated route. This represents 16.5% of the cohort; meaning 83.5% of cases avoided contact with Social Care services at tier 4 (Looked after Child).

Some of these cases escalated on more than one occasion and to more than one tier of Social Care service, i.e. some cases escalated to Child In Need and then to either Child Protection, Looked after Child or both.

Overall, almost 70% of cases had no contact with Social Care services at tiers 3 or 4 some 2 years after case closure. In raw data terms, this is 112 cases.

6 of the above cases that escalated were looked at in more detail to help identify any learning from these audits and inform practice or policy development.

Of these 6 cases, 3 escalated due to Child Protection concerns, 2 due to concerns at a level of Child in Need and X 1 case to Looked After Child and youth custody. The issues for escalation were physical abuse in X 3 cases, emotional abuse in X 2 of the cases, neglect in X 2 cases, sexual abuse in X 1 case, CSE concerns in X 1 case and behaviour of the young person in X 2 cases.

X 3 of the cases remained open to Children's Social Care for 3 months or less, which seems to display an appropriate reaction to escalating concerns in a case and then stepping back down to Early Help services once concerns had been investigated and it was assessed as safe to de-escalate. X 1 case remained open to Children's Social Care for less than 6 months, X 1 less than 12 months and X 1 case had been open at Child in Need level for over 3 years. In aggregate, X 4 cases were stepped back down to Early Help services after Children's Social Care intervention.

Gaps identified varied, in some cases, there were no gaps identified in the case, some of this was due to difficulties in deciphering case recording (due to data migration issues), whilst in other cases gaps included:

- Lack of engagement of a parent.
- Referral for Early Help services coming too late (young person became CIC and served a custodial sentence). In X 1 case, it was not clear whether the young person had been referred to the Sexual Abuse Unit to help them deal with the abuse he suffered at a younger age.

- No structured Early Help services in place at time when family needed them (this was in 2009).
- In X 1 cases there was a gap where a TAF meeting should have taken place but no evidence to clarify that it did. The case then escalated to Children's Social Care within 2 months.
- In another case, there was a lack of evidence the worker had looked at alternative family members for a child to stay with when the child had been running away from home due to family relationship issues.
- Potential lost opportunity in X 1 case to exit to other agencies to hold Lead Professional responsibility.

There were other relevant issues within some of these families, namely that:

- X 1 child has gone on to have a child of their own.
- There was an allegation of inter familial rape in another case.
- Lack of frequent enough assessment in X 1 case and in the same case, an initial lack of management oversight.
- In X 1 case there was a lot of assessment but very little in the way of direct work.

X 4 of the 6 cases had prior Children's Social Care involvement, X 3 of these cases had 3 or more episodes of prior involvement. X 2 of the cases had prior Early Help involvement before the episode that led to escalation to Children's Social Care.

The recommendations from this work form part of the action plan for Early Help for 2016-17.

### **Theme 3: Review of the Early Help Assessment (EHA)**

Early Help Advisers have advised in Early Help and Integrated Processes training that Team Around the Family (TAF) meetings should be arranged even when a referral is going to a Vulnerable Children's Meeting and have reinforced that agencies can run TAF meetings without the need for an Early Help service.

The Early Help Assessment document set guidance notes have been updated and ratified by the DSCB Policy and Procedure sub group and disseminated across the city.

A menu of assessment tools that can aid affective assessment have been developed and these are located within the EHA document set guidance notes. This has been ratified by DSCB Policy and Procedure sub group and disseminated across the city.

Section 5 of this report provides an overview of the multi-agency audit that took place in December 2015 on a sample of cases subject to child protection plans to assess the quality of Early Help Assessments. The report highlighted a number of practice issues that will need to form the basis of the Early Help action plan for 2016-17 but a key issue for Early Help practice is the lack of use of assessment tools such as the Early Help Assessment to guide planning, delivery and review progress in cases (this was cases that had been escalated due to concerns around neglect).

#### **Theme 4: External Reports on Early Help**

Checklists have been devised and are used by Early Help staff across the city to guide their case work to ensure it is in line with the Early Help case guidance. However, the last case audit into the quality of Under 11 MAT work in December 2015 found a lack of progress in the quality of case work from 2014-15 and so further work will need to take place across 2016-17 to embed more consistent quality of practice in Early Help case work.

A report has been provided at the Integrated Processes Group on 12.1.16, which outlined that feedback from partner agency staff on the quality of the Early Help and Integrated Processes training was very positive and there were very few areas to improve.

There remains a gap in performance data that would help us to evidence the progress we are making against plan compliance in Early Help. This remains an area for development with the Performance Team. However, an Early Help case audit was completed in December 2015; this was in Under 11 MAT's. The findings showed that cases had plans on the system but that the quality of plans was variable. Further work on quality of plans is therefore also needed.

The same Early Help case audit completed in December 2015, displayed that just over half of cases were rated as good for management oversight and just under 50% were judged to be requires improvement. There was X 1 case that was judged to be inadequate. The quality and consistency of management oversight therefore requires further work.

The revised supervision policy was launched in September 2015 across Early Help and Children's Social Care.

## **Theme 5: Case Audit Themes**

By the time the December 2015 case audit had been completed on Early Help Under 11's cases, the case audit completion rate was 96%, an increase in completion rates and a huge improvement. Monthly reports are now sent to relevant directors, who respond to this as a regular business item at Head of Service meetings. Omissions in audits are challenged by directors in person, to ensure audits are consistently completed within timescales to enable effective reporting.

The quality of assessments, plans, review and management oversight was assessed in the December 2015 case file audit on Under 11 MAT's. In relation to assessments, X 6 assessments could not be sourced within the case file and X 1 was graded as inadequate. Only 30% were graded as 'Good'.

Comments made about assessment quality included: The assessment not being able to be found on the system, the assessment not updated, in some cases since previous safeguarding involvement, the assessment being completed and maintained on the shared drive, rather than on the system and assessments being descriptive, lacking analysis, no father's views in assessments (it has to be remembered that these assessments are on the whole completed by partner agencies rather than staff in Early Help).

In relation to plans, X5 care plans could not be sourced within the case file, and a further X1 was graded as inadequate. Only 20% were graded as 'Good'.

Comments made about plans included: The plan not being able to be found on the system, the plan not having received any updates in duration of the case, even where this had originally been held at Child Protection or Child in Need, no use of appropriate tools or analysis to inform and shape the plan, plans lacking focus, plan lacking any actions/outcomes that actually provide a 'plan' of future work.

In relation to reviews, 35.2% were rated as good, 41.1% as requires improvement, 17.6% as inadequate and 5.9% as missing. Clearly, there are inconsistencies that need to be addressed in 2016-17.

## **Theme 6: Children's Centres**

Inspection action plans for Centre's are in place and are part of business as usual processes.

An annual discussion is planned with the Service Director for Early Help and Children's Safeguarding in June 2016.



Connect Plus (new Children's Centre database) was launched on 7.9.15. Training has been completed. Registration forms (for Centres) are being added and there is now the facility to gather data without the need for a manual trawl.

Public Health has developed a dashboard of measures, which are shared with Children's Centres to help plan and review the impact of services.

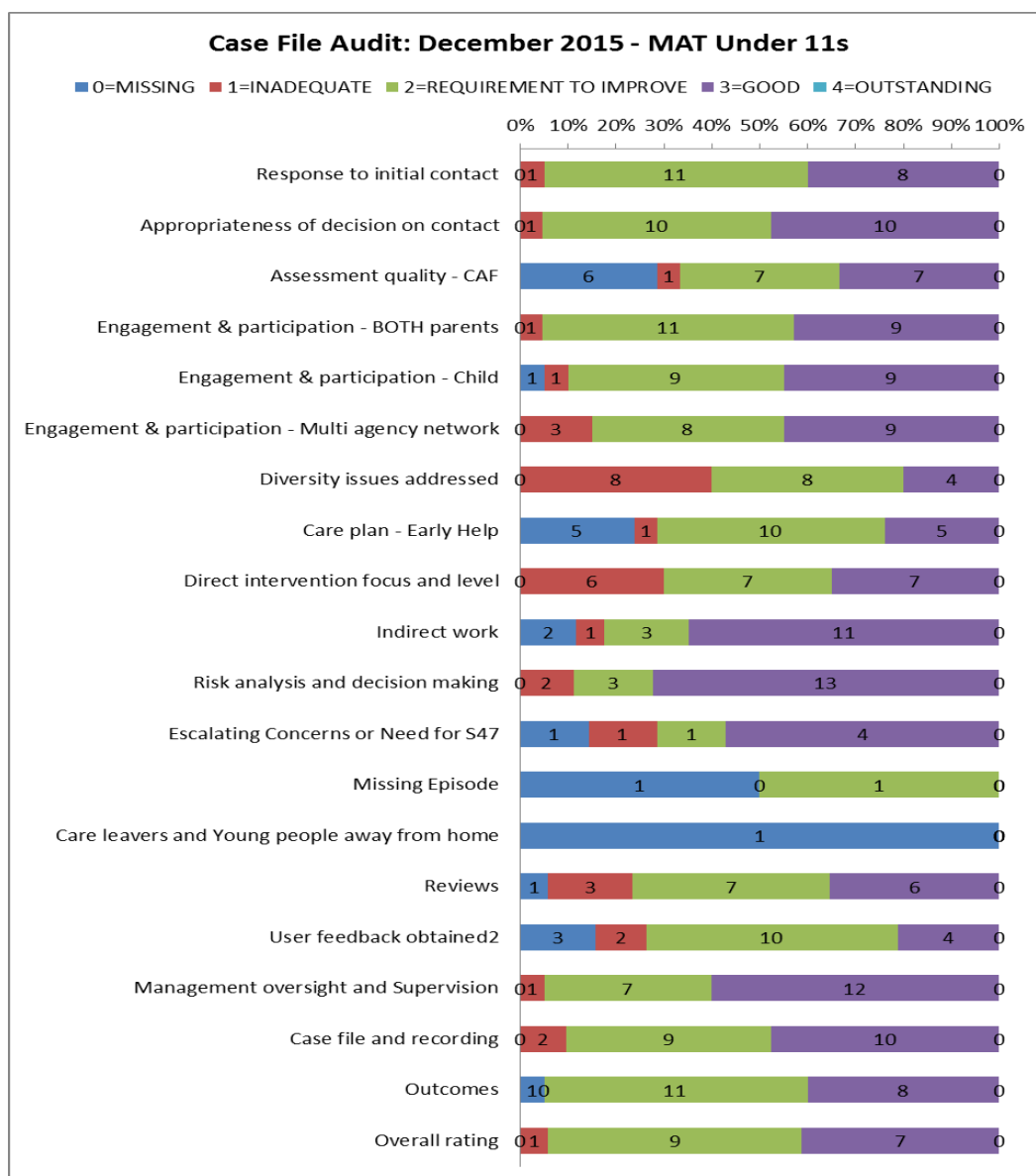
Children's Centre Team Managers have agreed a process for supporting the Family Information Service to increase take up rates for the 2 year old Flying Start Offer. This is in place and the take up rate at the end of 2015-16 stood at 73.5%.

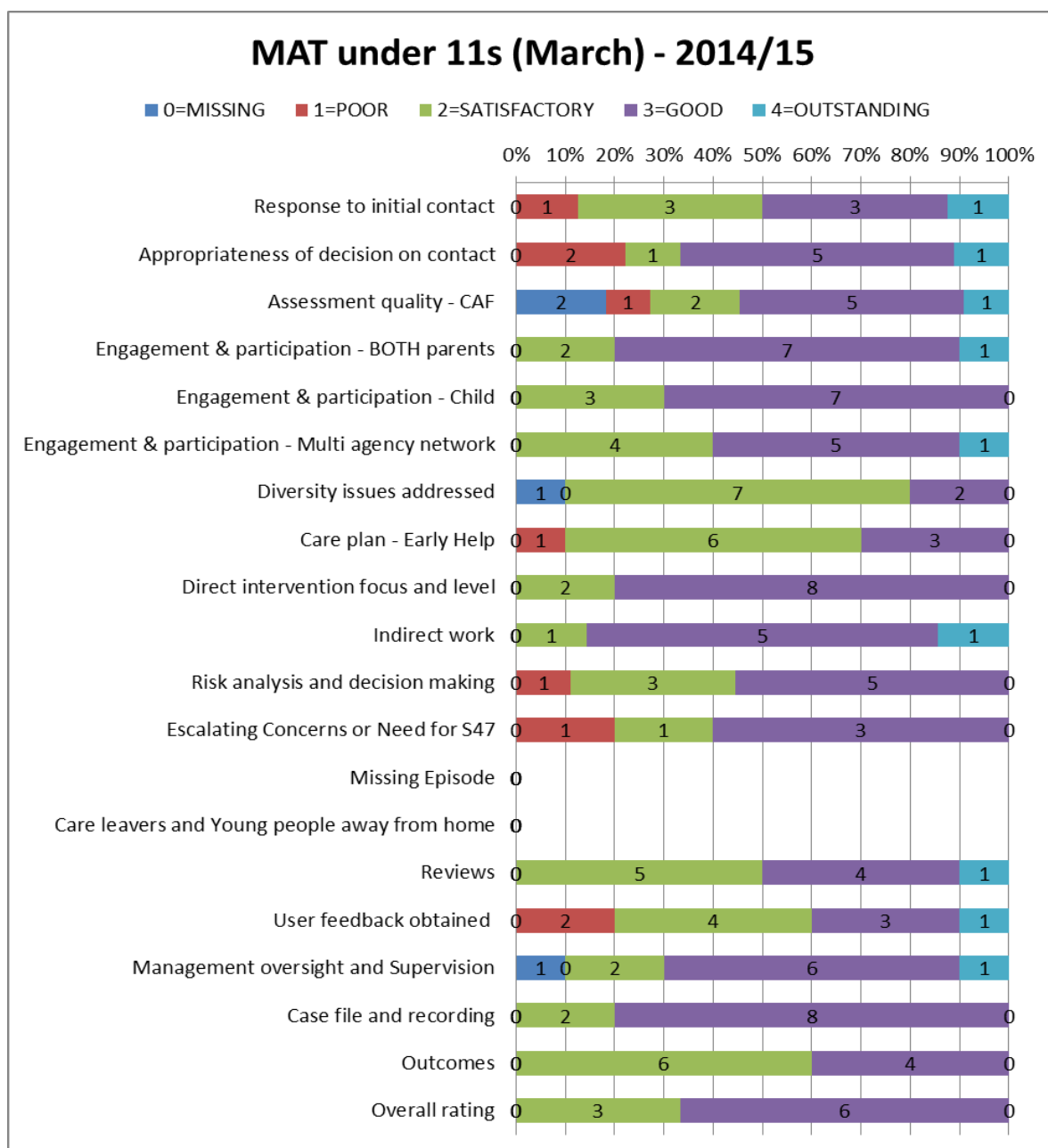
There have been increases quarter by quarter in relation to attendance by parents at advisory boards. This seems to be embedded across all localities in the city and has become business as usual.

### **5. Case Audit Themes and Issues.**

Every month, senior managers across Children's Services in the People's Services Directorate complete case file audits on specific areas of practice. A focus on Early Help cases is part of this cyclical audit process and between 1.4.15 – 31.3.16, the only case file audit activity that focused on Early Help were cases worked by under 11s teams. Auditors were asked to judge the standard of work / compliance accordingly; as well as commenting on the threshold. Auditors were requested to look particularly at the sharpness of the intervention versus drift, and the effectiveness at resolving the issues for the child. The information contained below provides an overview of the key findings.







The charts above give the proportion and actual numbers of each grade for each indicator in the 2014-15 and 2015-16 Under 11 MAT case audits. For some indicators there may only be a few examples, so the grading is not necessarily indicative of overall standards. Others are based on a much larger number of examples, providing a more accurate picture.

In comparison to last year, there has been a decline in all measures; with the average score across all indicators being lower. There were more than 10 cases for most measures, usually indicative of a fair representation. Fewer cases were graded 'Good' in this year's audit, and no measures were given outstanding. Some audit

responses suggest that this is, in part, due to lack of timely recording of activity which has taken place.

The scores indicate that Risk analysis; Management Oversight and Indirect Work are strengths within this area. Auditors comment on a number of cases having a good level of direct work, and indirect work and coordinating multiagency input. A small number receive positive comments on the work being focussed and significantly improving outcomes for the family. Auditors comment on the appropriate processes being followed according to level of risk, and that these are well recorded. Supervision is commented on being inclusive of case discussion and contains appropriate analysis and reflection.

Areas for improvement are; assessment quality, direct intervention level and focus, diversity issues being addressed, Early Help care plan and user feedback being obtained.

A large number of auditors comment on the lack of structure to the case, with a lack of focus, pathways or SMART planning. 6 auditors comment on there not being a completed plan. Poor recording is seen as an area for improvement across multiple cases, and audit responses would also suggest that this could be improved upon by focussing on timely recording of key documents and case notes. Auditors comment on these factors influencing drift, as well as 2 cases having a significant delay between case being referred, and the case being worked on.

No comparison can be accurately drawn between the areas of strength and improvement of 2014/15 and 15/16, due to poor completion rates in 14/15 not allowing for a more thematic analysis. Furthermore, the changeover in recording systems has created some difficulties in auditors being able to locate key documents, as some documents such as chronologies and assessments are stored on a different section of the data base (LCS) to where the case notes are recorded (EHM). This issue is currently being Addressed due to the issues it has raised.

The findings were disappointing; particularly as case guidance for Early Help was implemented in April 2015. An immediate response has been provided in the form of a case audit improvement action plan, which has been agreed by the Service Director for early Help and Children's Safeguarding. More frequent case audits in Early Help would help to increase the focus on incremental improvement in this area of work and also ensure that progress can be measured more frequently.

#### **Joint Multi-Agency Case File Audit.**

In December 2015, a neglect multi-agency case file audit of six cases was undertaken by several agencies across the city (Children's Social Care, Derbyshire Police, Derby Teaching Hospitals Foundation Trust, Derby Healthcare Foundation

Trust, Ripplez Family Nurse Partnership, Community Rehabilitation Company and three primary schools (St Chads Primary School, Derwent Community School and Firs Estate Primary School), to examine the effectiveness of multi-agency arrangements in Derby and test whether Early Help arrangements helped to address early concerns about neglect. This was also in response to some of the issues that arose in the 2014-15 Early Help annual report.

The sample was chosen randomly of children who were recently subject of child protection plans for neglect. This approach was used to seek assurance about practice for children most at risk of harm arising from neglect and to understand, (where possible), the contribution of Early Help and targeted services.

The findings presented a mixed picture of the quality of work being undertaken at an early stage and as concerns about neglect increased. It was apparent that at the point where cases were considered at risk of significant harm, there were substantial levels of multi-agency activity seeking to prevent further escalation. The audit found that none of the children were found to be unsafe. Concerns about neglect had been escalated and at the time of the audit all were subject of child protection plans.

Given the focus and size of the initial report completed by the DSCB, what is contained below are areas for improvement for Early Help services (although the feedback is a combination of issues for a range of services). The full report can be requested from the Local Safeguarding Children Board.

### **Findings and Areas for Improvement.**

- The robust and systematic assessment of neglect, specifically informed by the Neglect Graded Care Profile, was absent in all but one of the cases audited. The audit findings indicate that opportunities to prevent neglect increasing to a level that required statutory intervention are likely to have been adversely affected by ineffective assessment, which impacted upon planning and reviewing cases at an early stage. There were examples of ongoing crises in different families that drew attention from underlying concerns.
- Differences of opinion about the seriousness of emerging concerns about neglect were not informed by Early Help Assessments or the use of Graded Care Profiles. The use of Team Around the Family (TAF) meetings was not consistently in place to help collective understanding of individual needs, services and plan how progress would be monitored over a sustained period.
- Where early concerns were emerging there was sometimes a lack of clarity about the role of different agencies to “monitor” and “review” progress and this was compounded by lack of clear assessments and plans. This contributed to drift, which may have contributed to a delay in escalation of concerns, thereby

extending the time children experienced neglect and led to children experiencing more harm as a result.

- Disguised compliance by parents was evident in five cases and impacted on effective analysis of progress at an early stage. It is important practitioners are able to ascertain whether sustained progress is being achieved as a key measure to judge whether children are being safeguarded from neglect. Non-engagement was a common concern with universal services or at Early Help or Child in Need level, bringing into focus the importance of effective assessment and planning to establish a platform for the prevention and escalation of concerns.
- There was less consistency about how individual needs of parents and children were considered jointly at an early stage and this was a feature emerging for five cases. Sometimes there was good focus on children's needs but less so on parents.
- It would be expected in cases of neglect where the level of concern was increasing that records would indicate clearly what needed to change, what steps had been taken to achieve change within timescales and the parents engagement in the process. There was little information indicating that cases had been effectively and consistently reviewed by agencies prior to becoming subject of child protection plans.
- Chronologies were not present in most cases and therefore not systematically used to inform judgements about the seriousness of ongoing concerns or the relevant history of previous involvement leading to increased risk of "start again" syndrome.
- A sample of practitioners working with the families demonstrated little evidence that they had received appropriate training to work with complex cases of neglect. Of the twenty local authority practitioners who were identified as working with these families only 2 could be identified as having attended training on neglect provided by the DSCB or Local Authority.
- Management oversight and supervision of staff was insufficiently robust to ensure staff had received training on neglect, appropriate assessment tools were used to inform judgements and effective reviewing of cases (at Early Help and Children in Need level) to ensure drift was avoided. Supervision arrangements were variable and whilst there were examples on CSC case files of good quality supervision, this was inconsistent and in some cases not evident.

- Domestic violence was a factor in five of the six cases. The Domestic Violence Risk Identification Matrix is a key assessment tool that was not being used to inform assessments of the impact on the children and the victim, identify risk factors and quantify the level of risk within the family.
- “Think Family” approaches seek to ensure effective coordination between children’s and adults’ services. This becomes critical when difficulties and needs of parents are impacting on neglect of their children. There was insufficiently consistent practice to ensure effective join up between services.

The full version of the report contains a range of recommendations for the agencies that were involved in the cases audited. There are a number that are relevant for Early Help services, which have been added to the Early Help action plan situated at appendix 1 to ensure that these are taken forward in the next 12 months. The focus of these will be on use of assessment tools (specific focus on Graded Care Profile) to inform assessment and benchmarking of risk and on-going review of progress against clear actions to address the assessed risks.

A number of the findings from this case audit were consistent with the case audit completed by Children’s Services (also in December 2015), around the need for improvements in assessment and planning, individual need/diverse needs and the need for a more solid and robust case work structure being embedded within Early Help services. Again, the action plan situated at appendix 1 sets out the actions to address the findings of both of these case audits.

## **6. Young Carers.**

Young Carers returned to the responsibility of the Local Authority in April 2015. It is managed and delivered by Early help Services in Locality 2. There are currently 22 young people accessing a variety of support services and activities which are planned with their allocated worker or existing worker.

The voice of the child is captured in a variety of way for Young Carers both informally and Formally such as:

- TAF /Review Meetings
- Art Therapy feedback
- Spider-graphs
- Verbal and photographic feedback captured during and after activities
- Engagement through Voice of the child tools used with workers

- Parents feedback on the impact of activities on both the young people and themselves

There are plans in place to run regular group activity for young people alone and with parents to support the planning of future services and activity but this is in its infancy, however the above list of methods of engagement influences planning for future Young Carers services.

Appendix 1.						
	Outcome	Action	By Whom	By When	Rationale	Progress
<b>1. Theme: Early Help Performance Framework</b>						
<b>1.1</b>	Increase number of families feeding back at close of intervention from 71.2% to 75% and numbers reporting positive impact to 85%.	Devise another way of recording feedback from families at close of intervention.	Early Help Team Managers.	September 2016.	Data from Early Help performance framework.	Case guidance has been updated and where families do not want to complete HWIFY, workers should gather verbal feedback from families on their views of the worker and impact, asking families if they would be happy for feedback to be written onto a How Was it for You form by the worker and stored on families file.



Appendix 1.						
	Outcome	Action	By Whom	By When	Rationale	Progress
1.2	Ensure latest tools are being used to measure progress and ensure voice of family informs TAF meetings.	Early Help Team Managers dip sample 5 cases every month from 1.6.16 - 1.9.16 to ensure new spider-graph form is embedded in practice.	Early Help Team Managers.	September 2016.	Data from Early Help performance framework.	Audit complete, 75% of cases that were audited were using the new spider-graph or an equivalent progression of change tool to ensure families voice was captured to inform TAF meetings.
1.3	Ensure young people are protected from, harm by way of CSE.	Early Help Team Managers to ensure safeguarding procedures are being followed by dip sampling cases where medium or high risk CSE	Early Help Team Managers.	December 2016.	Data from Early Help performance framework.	

Appendix 1.						
	Outcome	Action	By Whom	By When	Rationale	Progress
		is identified following initial screening.				
2. Theme: Children's Services Performance Data						
2.1	Understand impact of Youth Crime Prevention Officers.	Examine how many cases worked by Youth Crime Prevention Officers enter the youth justice system.	Youth Offending Service Deputy Head of Service.	May 2017.	Data from Performance and Intelligence Team.	
2.2	Gain accurate number Early Help Assessments completed in the city	Work with performance and Intelligence Team to identify why there is a shortfall in assessments for 2015-16.	Early Help HOS'.	June 2016.	Data from Performance and Intelligence Team.	Complete, Performance team have now reported on quarter 1 data in relation to numbers of Early Help Assessments, which is accurate

Appendix 1.						
	Outcome	Action	By Whom	By When	Rationale	Progress
						(231).
2.3	Reduced number of children entering care system.	Develop further edge of care provision using Futures In Mind money and IAPT training.	Early Help HOS'. Children's Commissioning Service.	November 2016	Data from Performance and Intelligence Team.	In progress, there is a plan in place to train 15 staff in Early Help teams (Children's Practitioners and Intensive Family Support Workers) in Systemic techniques of family work to develop family interventions that can be used to reduce risk of family breakdown. The plan is for this to

Appendix 1.						
	Outcome	Action	By Whom	By When	Rationale	Progress
						be completed on a rolling basis but work needs to be completed on the model including development of a wider workforce training plan and more details regarding objectives/purpose success measures, numbers, outcomes and milestones. A Kaiser has stated this work via a PID and has meeting with S McFarlane on

Appendix 1.						
	Outcome	Action	By Whom	By When	Rationale	Progress
						W/C 17/10 to discuss further.
3. Case Audit Themes						
3.1	Develop improved understanding of what works in Early Help.	Audit sample of cases open to Early Help that did not escalate to Children's Social Care services and who had an improving direction of travel. Identify practice issues that helped prevent escalation/address assessed needs and risks.	People's Directorate Quality Assurance Team and Performance and Intelligence Team.	December 2016	Need to better know what intervention/s prevent case escalation to inform future practice/policy.	
3.2	Ensure robust management oversight of cases featuring parental non-engagement/disg	Cases where there is a lack of engagement by parents should be booked into a case clinic discussion by practitioner and Team Manager with a	Early Help HOS'.  Children's Social Care Deputy Heads of	From June 2016.	Findings from multi-agency case audit in December 2015.	Case clinics in place in Locality 1 and 5 and have features cases of parental non engagement.

Appendix 1.						
	Outcome	Action	By Whom	By When	Rationale	Progress
	used compliance.	Deputy Head of Service (Children's Social Care) and Head of Service (Early Help) to discuss necessary actions going forward.	Service.  Early Help practitioners and Team Managers.			Need feedback form other localities.
3.3	Children in Derby are kept safe from risk of harm caused by neglect.	All Early Help staff to complete Neglect training if they have not done this within the last 2 years.  Staff to complete refresher neglect training every 2 years.  Locality briefings to be delivered by Early Help Team Managers on the use of Graded Care Profile (GCP).	Workforce Development Team.  Early Help practitioners and Team Managers.  Early Help Team Managers.	1.4.17  Ongoing.  1.9.16	Findings from multi-agency case audit in December 2015.	As of 1.8.16, 25.5% of early Help staff had completed neglect training in the last 2 years. This was 36/141 staff.  Briefings are planned for November 2016, this will be led by X 3 MAT Under

Appendix 1.						
	Outcome	Action	By Whom	By When	Rationale	Progress
		GCP to be used in all cases where neglect is a key feature in the case to assess initial level of concern, measure progress/inform the need to escalate case.	Early Help practitioners and Team Managers.	From June 2016.		11 Managers for all Early Help staff.  Do we need to arrange a case audit in Early Help to check on cases of neglect?
3.4	Ensure needs of all family members are considered/addressed where appropriate.	Survey key barriers to effective partnership working between Children's and Adults services with Early Help staff.  Arrange session between Early Help and key Adult's	Early Help Team Managers.  Early Help HOS'.	July 2016.  September 2016.	Findings from multi-agency case audit in December 2015.	MAT Managers have completed survey with staff. A Kaiser has feedback and will write into a themed report.  Director of People ( A Smith) is

Appendix 1.						
	Outcome	Action	By Whom	By When	Rationale	Progress
		<p>management team/s to action plan how barriers to effective join up can be overcome.</p> <p>Early Help staff attend training session on assessing and meeting diverse needs.</p>	<p>Workforce Development Team.</p> <p>Early Help practitioners.</p>	1.12.16.	Outcomes from case audit in December 2015.	<p>planning middle managers events between Children's and Adult's middle managers .</p> <p>Diversity and Difference workshops are planned between October and December 2016 and all Early Help teams have signed up to these.</p>
3.5	Contact level with families is	Case guidance is amended to ensure Team	Early Help staff and Team	1.9.16	Outcomes from case audit in December 2015.	Complete, case guidance and



Appendix 1.						
	Outcome	Action	By Whom	By When	Rationale	Progress
	proportionate to needs of the case.	Managers and front line staff agree visit frequency in all Early Help cases and record this clearly on recording system.	Managers.			checklist have been amended to reflect this have been sent out to all Team Managers in Early Help to request that this is gone through with staff in team meetings.
3.6	Increase consistency of management oversight in Early Help case work.	Early Help Heads of Service dip sample x 2 cases per Team Manager every quarter to ensure level of management oversight is in line with the current supervision policy.	Early Help HOS'.	From June 2016.	Findings from multi-agency case audit in December 2015.	Locality 1 and 5 – Quarter 1, 8 cases reviewed, 7 cases had supervision in line with supervision policy, X 1 did not, as had been handed over

Appendix 1.						
	Outcome	Action	By Whom	By When	Rationale	Progress
						<p>form CSC and had not had supervision in first 2 months of the case.</p> <p>Locality <math>\frac{3}{4}</math> cases were in line with supervision policy.</p>
3.7	Improve consistency of quality of Early Help case work.	Early Help Team Manager's discuss outcomes of all case audits in team meetings to ensure learning is captured and teams understand expectations	Early Help staff and Team Managers	From June 2016.	All case audits in 2015.	<p>MAT Over 11 audit completed in June 2016, findings report has been shared with Early Help teams, audit showed some improvements on prior audit and x 3 further audits</p>

Appendix 1.						
	Outcome	Action	By Whom	By When	Rationale	Progress
						are planned this year.
3.8	Reduce incidences of young people being accommodated by the Local Authority.	<p>Team Managers to ensure all cases in Early Help have genogram in place to ensure all options are available to explore (across an extended family unit) in cases of family breakdown/risk of care.</p> <p>All Early Help staff to complete Genogram training.</p>	<p>Early Help staff and Team Managers.</p> <p>Early Help practitioners.</p> <p>Workforce Development Team</p>	1.9.16.	All case audits in 2015.	<p>Audit to be arranged with MAT Managers – now overdue</p> <p>As of 1.8.16, 38% of early Help staff had completed genogram training in the last 2 years. This was 54/141 staff.</p>
3.9	Drift is reduced in	Findings from both case audits are shared with	Early Help HOS' and Team	1.8.16.	Findings from multi-agency case audit in	X 1 audit has been completed

Appendix 1.						
	Outcome	Action	By Whom	By When	Rationale	Progress
	Early Help cases.	<p>Early Help practitioners with focus on drift and systematic review using assessment tools.</p> <p>X 4 case audits take place on Early Help casework in 2016-17 to monitor progress made in reducing drift, and use of tools/TAF meetings to guide assessment and review progress.</p>	<p>Managers.</p> <p>People's Directorate Quality Assurance Team.</p> <p>Early Help HOS' and Team Managers.</p>	By 1.4.17.	December 2015.	and findings were improved from the prior audit and have been shared with Early Help teams.
3.10	Improve understanding of risk in families.	Chronologies to be in place for every Early Help case. These are used to systematically inform judgements about	<p>Early Help practitioners.</p> <p>Team Managers</p>	By 1.9.16.	Findings from multi-agency case audit in December 2015.	There was no specific mention of chronologies in the June 2016 case audit in

Appendix 1.						
	Outcome	Action	By Whom	By When	Rationale	Progress
		seriousness of ongoing concerns and the relevant history of previous involvements.  Team Managers and HOS' to monitor progress of chronology completion via case audit.	Early Help HOS' and Team Managers.	Audits every quarter until 1.4.17.		Early Help. If the next audit does not cover completion of chronologies, then audit to be arranged and completed between MAT Managers.
3.11	Ensure risk associated with domestic violence is systematically and accurately assessed.	Ensure use of Domestic Violence Risk Identification Matrix (DVRIM) to inform assessments of impact and level of risk within the family.  Early Help Team Managers to dip sample X 2 cases each where domestic violence is a	Early Help Team Managers and HOS'.  Early Help Team Managers.	By 1.4.17.  November 2016 and February	Findings from multi-agency case audit in December 2015.	

Appendix 1.						
	Outcome	Action	By Whom	By When	Rationale	Progress
		feature to assess level of use of DVRIM. This to be completed twice in 2016-17.		2017.		
3.12	Improve clarity of storage of key case work documents.	Work with IT teams to develop a system where Early Help case documents can be stored on Early Help section of recording system.	Early Help HOS'. IT teams in DCC.	1.8.16	Findings from multi-agency case audit in December 2015.	A categorisation system has been suggested to Liquid Logic lead and we are waiting feedback on when this is to be implemented.
3.13	Improve quality of TAF plans.	Develop exemplar plan.  Develop APIRE guidance for Early Help staff.  Monitor progress via case	Early Help HOS'.  Early Help HOS' and Team Managers.	1.6.16.  1.9.16.	Findings from multi-agency case audit in December 2015.	Exemplar plan has been shared with teams.  Draft APIRE guidance in place, further work needed.

Appendix 1.						
	Outcome	Action	By Whom	By When	Rationale	Progress
		audits.				

Andrew Kaiser, Fiona Colton, Donna Brooks  
Heads' of Service for Locality Early Help Services.  
May 2016

