

Children, young people and families Scrutiny Panel

25 November 2015

Report title	Children's Service Re-Design	
Cabinet member with lead responsibility	Councillor Val Gibson Children & Young People	
Wards affected	All	
Accountable director	Linda Sanders, Strategic Director, People Directorate	
Originating service	Children & Young People	
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Report to be/has been considered by	People Leadership Team	26 October 2015
	Strategic Executive Board	27 October 2015
	Cabinet	11 November 2015

Recommendation(s) for action or decision:

The Panel is recommended to:

1. Support the overarching aim of early intervention and prevention being to safely prevent family breakdown and thereby reduce the number of children being taken into care.
2. Endorse the outline design of the early intervention and prevention model and associated proposals for the re-design based on the objectives and principles set out in this report.
3. Provide comment as part of formal consultation on these proposals.

Recommendations for noting:

The Panel is asked to note:

1. The re-design work being undertaken which is a key component of the transformation strategy for safely reducing the number of looked after children.

1.0 Purpose

- 1.1 The purpose of this report is to set out for Cabinet proposals for the fundamental re-design of our front line services that deliver early intervention and prevention (EIP), also termed “early help”.

2.0 Background

- 2.1 The transformation of our EIP service is strongly aligned to the delivery of our Corporate Plan, helping deliver the objective of “Strengthening families where children are at risk”; part of the Stronger Communities theme. This recognises the importance of targeting effective EIP and support to vulnerable families at an early point.

- 2.2 In addition to the Strengthening Communities theme, this transformation is strongly aligned to the delivery of being a “Confident, Capable Council”, including:

- Improving facilities for customers, modernising and using our frontline buildings as effectively as possible
- Ensuring that our customers can contact us and access our key services in a way and at a time that suits them, through increased use of innovative digital channels
- Developing our workforce to ensure we have the right people, with the right skills, in the right place, at the right time
- Ensuring we use evidence to inform our decisions, monitor performance and address problem areas as soon as possible
- Strengthening methods of flexible and agile working that maximise the time available working with families in their local communities

- 2.3 Aligned to the Corporate Plan, the Families r First (FrF) Programme was launched in April 2014. This has been a multi-agency programme, governed by the Children’s Trust Board which aims to support children to live safely with their families, ensuring only the right children come into care and, when they do, robustly managing placements and permanency plans, promoting an ambition that all children are provided with a permanent family.

- 2.4 Building on the FrF Programme we have recognised the need to undertake a whole system transformation to deliver an accelerated and sustainable reduction of the number of Looked After Children (LAC). This will be achieved through the redesign of the whole Children’s Services pathway and systems, ensuring better use of resources with effective and targeted early intervention to safely keep families together and achieve sustained outcomes. This will support the delivery of the further proposed £6.4 million of savings from Children’s Services in 2016/17.

- 2.5 This transformation also focuses on continuing the development of an intensive response, specialist team and links to the development of a new Multi-Agency Safeguarding Hub (MASH).
- 2.6 As part of the new service, Wolverhampton will be further embedding the approaches and ways of working developed through the Troubled Families Programme. This includes a 'whole family approach' and the identification of a lead worker who works with families to achieve significant and sustained outcomes.
- 2.7 External consultants, iMPower, have been appointed to support the project and are working alongside senior officers from across the People Directorate. iMPower have a track record of supporting local authorities in service review and transformational re-design and have assisted in the evaluation of the effectiveness of existing provision and the development of proposals for a targeted EIP offer and are now supporting the re-design.

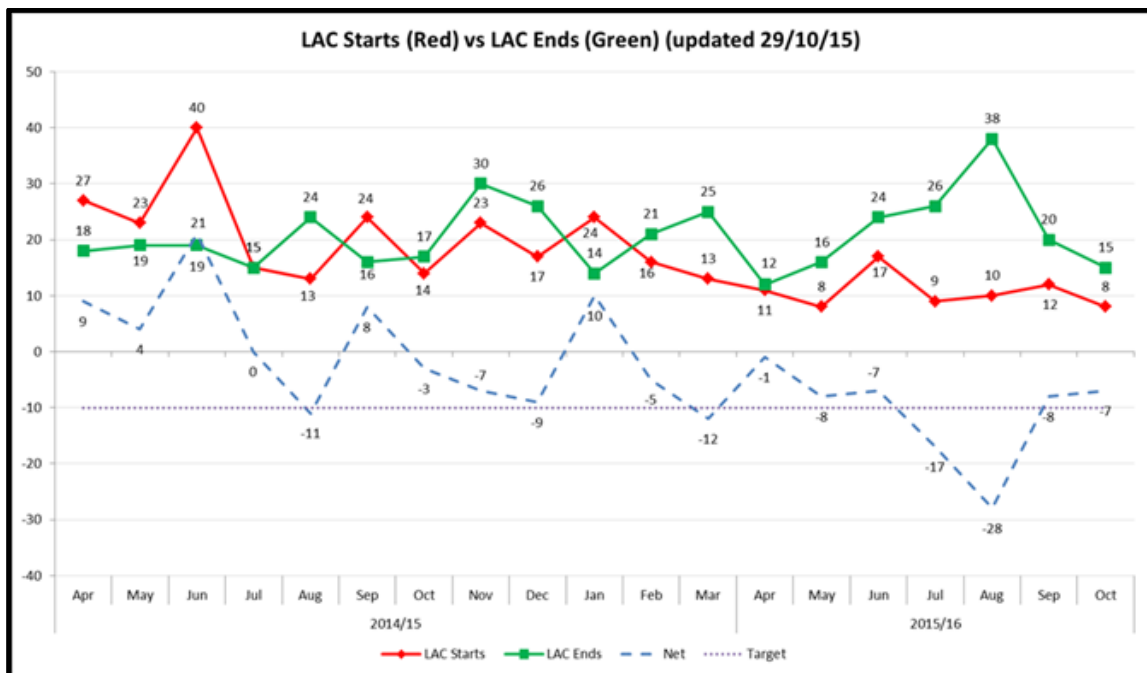
3.0 The National Context

- 3.1 Councils are experiencing the challenge of balancing unprecedented financial constraints with improving the life chances of children and keeping them safe while needing to develop a stronger response to complex and enduring challenges, such as violence against women and girls, child sexual exploitation and mental health issues.
- 3.2 Recognising that outcomes nationally for many children in care and young people who leave care are unacceptably low, the focus is on enabling children and young people, wherever possible to remain safe within their communities.
- 3.3 Wolverhampton, like many other authorities, is responding to these complex challenges by reshaping its services and ensuring resources are targeted where they can have greatest impact. EIP must be seen as relevant to everyone who interacts with children and families and part of the response must be to give frontline workers, police, teachers, GPs, housing officers, nurses and others the tools they need.¹
- 3.4 As defined in Working Together , Early intervention is about providing support as soon as a problem emerges at any point in a child's life and can prevent further problems arising, for example by providing support as part of a plan where a child has returned home to their family from care.

¹ Spending on Late Intervention, How we can do better for less. The Early Intervention Foundation

4.0 Wolverhampton Context

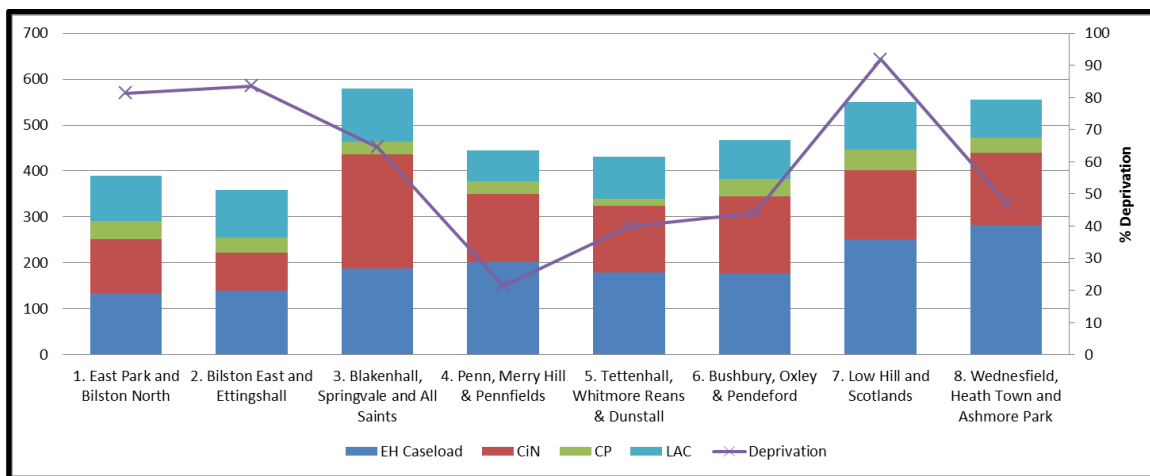
- 4.1 The number of children in care in Wolverhampton is considerably higher than comparator authorities, with more than twice the national average rate per 10,000 of the under 18 population. The rate had increased annually from 2009 until 2014, reaching 807 at its peak.
- 4.2 As at 31 March 2015 there were still 780 Looked After Children. As at mid-October there are now just over 700 Looked After Children, 224 children subject to Child Protection plans and approximately 1,293 Children in Need at any one time.
- 4.3 Since April intensive work has been undertaken to reduce the number of entrants to care through bringing together existing edge of care services. In addition focused work to seek permanence for existing looked after children has contributed to a reduction in the number of LAC. However, a more targeted and focused approach to prevention is required to sustain and strengthen this reduction to target levels in the future.
- 4.4 The overall effect of the recent focus on the edge of care is demonstrated in the graph below, which sets out the number children entering and leaving care each month for the last 18 months.



4.5 Children's Services with iMPower have undertaken an analysis of data in order to understand the drivers of demand on social care and the existing Early Help service and where there are opportunities to strengthen prevention.

4.6 There is a variation in levels of demand, need and numbers of children in care across the City, and also a variation in the characteristics of need and the manner in which each locality is responding to the needs of its families.

4.7 The graph below illustrates the level of demand by type of case against the level of deprivation in each locality (LAC data is for July 2015; CiN and CP data are averages from April to August 2015; Early Help caseload data are for September 2015).



4.8 There is significant evidence to demonstrate that early intervention, as currently configured in Wolverhampton, is not targeting those at most risk of family breakdown. Service design has been informed by the following findings from analysis of data:

- In the last year, 68% of children became looked after due to abuse or neglect. There is an imperative to intervene earlier where there is evidence of abuse and neglect as these are the families most at risk of breakdown.
- Of those that became looked after, 41% of children were not previously known to the Council and therefore not engaging with support prior to reaching crisis point.
- 52% of all children who become looked after do so after reaching five years of age but only 34% of Early Help Assessments are working with the over fives.

- 4.9 A case review was also undertaken which examined a random sample of cases of LAC to understand what could have been done to avoid the child entering care. From the sample of 21 cases, 28% children could have “definitely” or “probably” avoided care if more targeted interventions had been made earlier. Extrapolating this across the full LAC cohort suggests that care could have been avoided for 44 of the children who were in care at that time.
- 4.10 If it is possible to reduce the number of LAC by 28%, this would enable a sustainable reduction in the number of children in our care and a significant cost avoidance opportunity. Achieving this will require a service transformation towards a more proactive and targeted service model, focused on preventing family breakdown.
- 4.11 During the summer 2015, a review was undertaken of services currently contributing to the early intervention offer to evaluate their effectiveness. From 28 reviews, seven key themes emerged:
- There is a need to build a common understanding of what EIP means in Wolverhampton.
 - There is scope to improve joint working and alignment of working which is challenged by services working to a range of priorities.
 - There is a need to increase accountability for achieving outcomes for families across many services; this includes the need to improve how they measure performance and evidence impact.
 - With so many services working to build relationships with families, there is a risk that no one single service is able to fully “get under the skin” of what’s happening to understand the family and break the cycle of need.
 - There are overlaps in some services, which might be creating unnecessary duplication of effort.
 - Many services are reactive in targeting those families most at risk of family breakdown; there is limited outreach to access those families in most need.
 - Due to the on-going need to work with families with high needs, there is limited capacity to intervene earlier.

5.0 Purpose and objectives of a new EIP model

- 5.1 To date, our EIP services have worked individually to achieve their aims, evolving as a result of central government funding arrangements. Any transformation must ensure that we are able to provide creative and seamless support to families in the city; ensuring children are safe and have a wide range of opportunities open to them.
- 5.2 There must be a fundamental re-design of front line services with an emphasis on accountability for achieving positive change for families. Alongside this must be the implementation of clear frameworks for service performance and an ability to evidence impact, influence commissioning, and for developing and supporting our workforce to work effectively.

- 5.3 Children's Services are part of a complex system with many interdependencies. We therefore need to look at the role of EIP within the wider social care system, including how we support our partners to work within communities as well as focusing on reducing demand pressure on social care.
- 5.4 The proposed model will be built against four key objectives:
- Work with families to achieve positive and sustainable outcomes, safely preventing family breakdown.
 - Be a whole system approach, enabling close working with partners with clarity on roles and responsibilities.
 - Build employees' confidence and skills, and empower and support them to work creatively and innovatively with families.
 - Provide affordability and enable the financial sustainability of children's services in the future.
- 5.5 The transformation will enable us to reach the target reflected in the MTFS of approximately 550 LAC by 2018/19, a reduction from 780 at 31 March 2015. This will be an additional 150 fewer LAC from the current position of 703 (as of 26 October 2015).

6.0 Design principles

- 6.1 A set of design principles have been established that will be used as the model is developed and implemented.
- 6.2 Overarching Principles:
- Focus on supporting families to safely prevent family breakdown.
 - Common identity and approach for EIP that can be understood by partners and families wherever they are in the city regardless of what level of need they are working with.
 - An EIP offer that is flexible with the variation in need within localities and families and is responsive as those needs change.
 - Alignment with the MASH to be a powerful influence in good decision making across the partnership.
 - Clear pathways into the service allowing the service to offer the right level of support at the right time to families.
 - Allocation of resources based on meeting EIP objectives whilst providing value for money.
 - A consistent and constant measurement of performance across the system.
- 6.3 Practice Principles:
- Maintain a focus on impact, bringing more creativity and flexibility to respond to needs in order to achieve the best outcomes.

- Strong relationships with families, based on a clear set of values that encourage motivation, support empowerment of families and lead to the development of resilience.
- Staff skills and knowledge that draw upon evidence based practice but reflects local need.
- Great relationships across the partnerships which build confidence in EIP whilst balancing each other's' priorities, supported by clear information and experience sharing to break down siloes.

7.0 The emergent model

7.1. The proposals have been developed through engaging staff in a series of face to face interviews and group workshops together with data analysis regarding both need and demand and financial analysis. In addition, workshops have been undertaken with frontline employees and families who currently receive EIP support. The proposals also draw upon knowledge of good practice and developing models that have been put in place in other authorities.

7.2. Following learning from analysis and engagement, key features of the proposed model include:

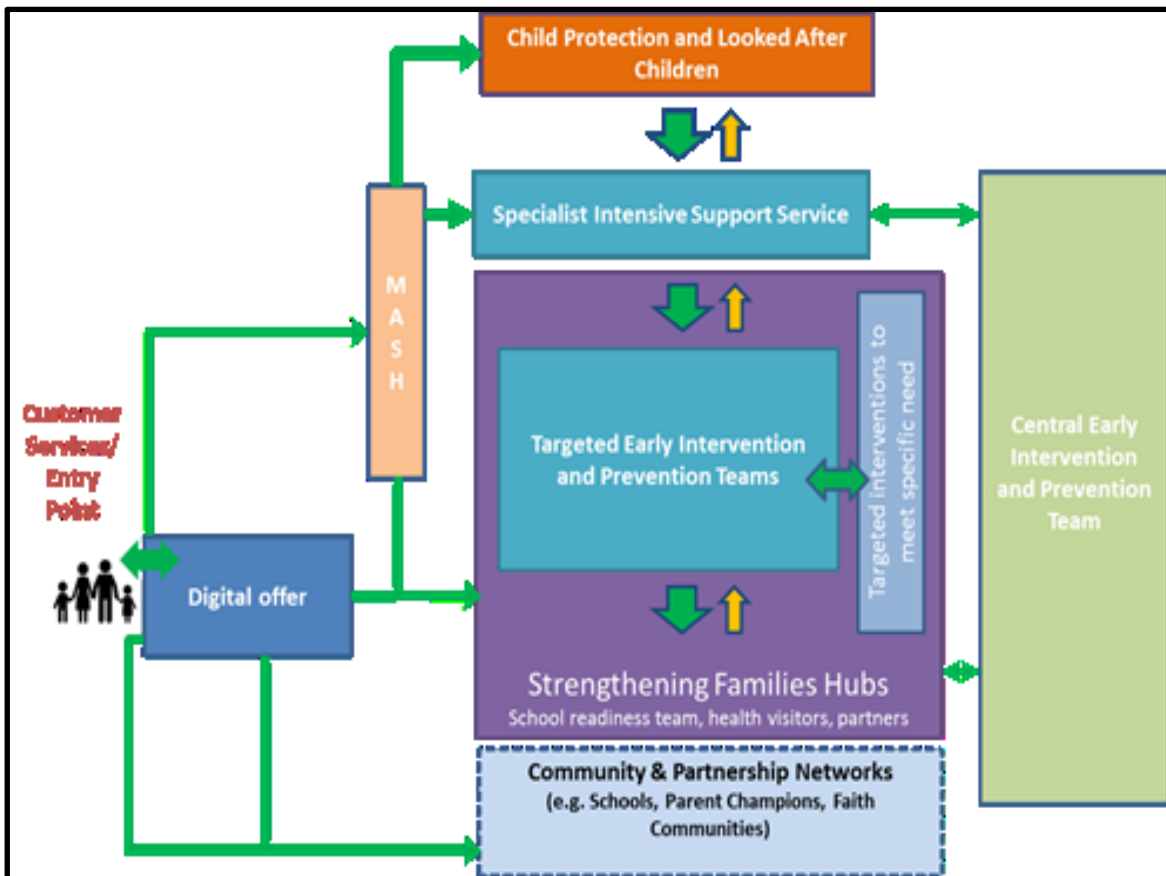
- A new 0-18 family-centered model, working with whole families, eliminating the current disparate 0-5 and 5-18 Early Help structure, will be at the heart of an eight locality-based design, aligned with the Schools Learning Communities.
- A greater focus on flexible and responsive interventions with as much of an emphasis on outreach as on building-based provision.
- A coherent offer focused on those children and families currently compartmentalised into Troubled Families, Children in Need and Early Help categories, with the aim of improving the effectiveness of intervention with all, whilst being able to evidence outcomes.
- Distribution of resources firmly aligned to analysis of need.
- An integrated approach across 0-18 services, facilitated by the transfer of commissioning responsibilities of Health Visiting and School Nursing to Public Health within the Local Authority.
- Eight locality Strengthening Families Hubs, using a key worker model, will offer a range of interventions including parenting support, family mediation, child development and play, behaviour management, family relationship work, practical support and co-ordinated family interventions with Health, Education, Mental Health and other services.
- The development of a citywide, highly specialist and targeted offer, including interventions such as intensive family support, family group conferencing, domestic violence interventions (including a perpetrator programme), multi-disciplinary therapeutic work, respite care, crisis support and direct work with vulnerable young people at risk of child sexual exploitation, missing and exclusion.
- An Insight Function will enable local trends to be understood and evidence to be collated to support an effective approach to commissioning and proactive service responses to need.

- An EIP referral hub, as part of the Multi Agency Safeguarding Hub (MASH), will enable families to achieve the right support at the right time.
- Application of a common outcomes framework will act as a mechanism to support future budget decisions, targeting families and performance and outcome measurement.

7.3. The model covers all services delivered by Children's Services which work with families, outside of statutory interventions. This includes:

- Services operating on a universal level, accessible to all families.
- Our Strengthening Families offer, focused on those families who have some additional needs and require some support to prevent issues from escalating.
- Our Targeted EIP service, working with families needing additional, intensive support to help resolve complex issues.
- Specialist Intensive Support Service, working citywide with those children, young people and their families who are at the highest risk of family breakdown or on the cusp of requiring statutory intervention. This service will also support families who are working within social care to prevent escalation into care and rehabilitation homes.

Building on lessons learnt from reviews of EIP models, where it has been focused through universal services, the model applies EIP as an approach that will apply across the system of children's services, working at each stage to reduce need by supporting families in the right way at the right time. The diagram below sets out how the high level model will be structured.



8.0 Universal Services and services for families from priority groups

- 8.1. Our current model of provision for families who have no additional or low level additional needs is based around provision delivered from twelve children centres and five satellite facilities. Families with children from pre-birth to five are able to access support through these centres, which includes childcare, school readiness activities for children, child and family health and other support such as supporting entry into employment.
- 8.2. Our analysis shows that we are missing opportunities to provide earlier support to families to help them resolve challenges which could lead to later crises. Therefore, there is significant scope to improve the ability to reach more vulnerable families who would benefit from support.
- 8.3. Eight Strengthening Families Hubs are designed to facilitate an approach based on outreach work into the community. Networks of universal services professionals will work within the locality to support and signpost families. EIP employees will have a role in supporting, developing and training non-council community-level networks to fulfill their role in supporting families earlier. The aim is to build on the existing assets within the community, establishing better links with the voluntary sector, schools, health and adult education.

- 8.4. We also know from our analysis that the challenges families face extend beyond the current age range of our existing model. Consistent with the recommendations of national research, we are proposing a transition to 0-19 (or 0-25 where a child or young person has disabilities), bringing together support for all children and young people, an approach increasingly common across the country.
- 8.5. We are placing the Strengthening Families Hubs at the heart of our service, taking the support available to families beyond the confines of a building to where suits them in the community. The hubs will fulfil the core purpose of Children's Centres under the Child Care Act 2006.
- 8.6. The offer available within each locality will be aligned to local need and consistent with embedding Wolverhampton's Troubled Families programme as well as delivering the Children's Centre core purpose. The offer delivered will incorporate:
- Parenting, delivery of an evidence based model, reflecting the needs of parents.
 - Support for school readiness, supporting children and families with numeracy and literacy, as well as links to schools to enable provision of support to families at key transition points.
 - Employability support, through continued links with local adult education providers.
 - Stronger links to wider support offered within communities.
 - Child health support, including infant nutrition, breastfeeding and health visiting.
- 8.7. The proposed team establishment numbers are provided in Appendix 1.
- 8.8. Children and Families will be able to access advice and support on-line through our digital offer, delivered through our Customer Service Transformation. This will provide online advice, but also signpost families to additional sources of support.
- 8.9. Partners will also form part of our offer of support to families. In October 2015, the responsibility for the commissioning of health visiting services transitioned to local authorities. The transition enables the Council to strengthen the approach to outreach from the hubs by ensuring the delivery of new birth visits is completed by health visitors. In the proposed model, health visitors will work alongside other EIP professionals from the Strengthening Families Hubs.
- 8.10. Parent Champions will also be explored as a means of increasing the reach of support services and increasing our ability to contact families earlier who need support. Parent Champions are parents who have positive experiences of accessing provision and act as advocates and peer advisers to other parents in

their community² Parent Champions will promote EIP, provide signposting and support to access services to support the family.

- 8.11. A School Readiness Team will operate as a flexible resource across the city, responsive to need and working primarily from the Strengthening Families Hubs. This team will work with parents to support attachment and to develop language and literacy in preparation for school. They will have a role to strengthen the links with schools in order to identify issues and challenges within families, including those at the point of transition into primary and secondary phases.
- 8.12. Strengthening Families Workers, who work directly with families in locality teams, will have an allocation of time to deliver universal support to families. We estimate 10% of employees' time will be dedicated to ensuring joined up working in universal and more targeted provision. This will include the delivery of direct group-work and community-based work. This will help improve family access to relevant skills and experience as well as helping Strengthening Families Workers identify and assess need while building deeper knowledge of the communities they serve.

9.0 Targeted EIP Services

- 9.1. Working from each locality hub will be a core service of Strengthening Families Workers who will hold the key relationship with families and be responsible for both preventing need from escalating and achieving positive outcomes. These frontline employees will have a mixed caseload of ages and families with additional needs, including those with multiple and increasingly complex needs.
- 9.2. The service will be focused on intervening earlier to prevent issues that may otherwise lead to family breakdown, facilitated by a Strengthening Families Worker who is able to fully understand a family's needs. They will access a menu of available targeted and intensive interventions. The range of available services will be commissioned based on identified needs and reflect the variation in need between different localities.
- 9.3. Families will access the service once an identified need cannot be met within the community. Most families will be identified via referrals from the Multi-Agency Safeguarding Hubs (MASH) and will include families who no longer require social care intervention.
- 9.4. The service brings together a range of existing practitioners into a simpler, integrated service with a singular clear aim of preventing family breakdown.

² <http://www.eif.org.uk/wp-content/uploads/2015/02/SPENDING-ON-LATE-INTERVENTION.pdf>

- 9.5. Teams will be based in each hub and work flexibly. The scale and skills mix of each team will be representative of the level and nature of need in each area. The teams will be resourced by the integration of existing EIP services and the inclusion of family support workers, who were previously in the social care team.
- 9.6. A Strengthening Families Worker will be assigned a number of families coming within the remit of the Targeted EIP service. Their first priority is to establish a relationship with that family. They will develop a plan in partnership with the family, commission suitable interventions and hold other agencies accountable for delivery against that plan. They will be the on-going contact point with families and will be responsible for supporting families to make changes and increase their motivation and resilience. All Strengthening Families Workers will have a level of understanding about key drivers of need. Some will have specialisms reflective of the needs in the local community and will be expected to support colleagues in their areas of expertise. They will also have responsibility for understanding a specific local area, within their locality, and establish community links.
- 9.7. Management arrangements will ensure supervision of the team of Strengthening Families Workers. This includes ensuring consistency in quality through quality assurance and auditing processes and embedding the evidence-based ways of working in each hub.
- 9.8. The locality model will be configured to make best use of available resources based on understanding of local need. There will be clear links between the localities and citywide planning, ensuring a flow of data and information that informs the work of local teams and the citywide commissioning priorities. Strategic citywide themes, including Troubled Families, the newly-established MASH and health will be co-ordinated across the locality teams.

Case Study: Child A

What happened

Child A is one of seven children. He is 11 years old and has a diagnosis of ADHD. His mother was involved with Social Care as a child. YISP referred Child A to the locality Early Help Team with concerns regarding Mother's negative relationship with Child A. They asked for parenting support for Mother and intervention to improve the relationship between Mother and Child A.

Child A actively engaged with social skills activities. The family was able to go on holiday together. Mother initially engaged with services that provided 'respite provision'. In time she attended two parenting related courses that helped her recognise the importance of implementing appropriate routines and boundaries and age appropriate activities for all her children. 13 agencies were involved with the family under an Early Help Assessment. The children became subject to a Child Protection Plan following an incident where Mother was under the influence of alcohol and had left the children 'home alone'.

What would happen in the proposed model

By undertaking a whole family approach and working more closely with partner agencies (especially in health and social care) the underlying need relating to alcohol dependency could be identified earlier. The Universal Team will have strong ties with the Targeted EIP Team and a Strengthening Families Worker would be assigned to the family, building the relationship with the Mother and getting to understand the true need. The Strengthening Families Worker would then commission evidence-based specialist interventions to address the underlying alcohol abuse. This would allow the family to build on the work they have done in a targeted universal setting (social skills/parenting courses) and help prevent Child A becoming the subject of a Child Protection plan.

10.0 Specialist Intensive Support Service

- 10.1 The Specialist Intensive Support Service will focus on preventing family breakdown when needs are increasingly challenging and complex. The service will be flexible, available out of hours and responsive to need at the point when families need it most by offering crisis support. Work will include brief, targeted, intensive, evidence-based interventions suitable for the level of need or complexity for that family. The service will target families most at risk of requiring social care intervention, those within Social Care at risk of becoming looking after and those needing to return home.
- 10.2 The case-holding responsibility and key longer term relationship will remain with the child, young person or family's social worker or Strengthening Families Worker.

10.3 Operating on a citywide basis, but with close links to the localities, the service will incorporate the following mechanisms of support:

- Delivery of intensive interventions relating to specific needs, including substance misuse, domestic abuse and other key drivers of need.
- Intensive Family Support on a short term, hands on basis, providing wrap around support to families. This will include the role currently fulfilled by Hospital Youth Workers.
- Therapeutic support through a specialist multi-disciplinary team who will deliver evidence-based programmes as packages of support in specialist areas.
- Within the service, a Vulnerable Persons' team will focus on key areas that may be indicators of risk for young people, including work to avoid exclusion, work with children who have been missing or missing education, or at risk of child sexual exploitation, as well as monitoring elective home education and attendance at school (including statutory enforcement).
- Family mediation and Family Group Conferencing, supporting families to identify their own solutions.

Case Study: Child B

What happened

Child B was 12 years old when he became known to social care after suspicions of physical chastisement by his stepfather were reported. Child B's challenging behaviour was found to be causing significant stress within the family leading to both parents overly chastising of the child. After a year of support to the family, Child B became looked after when the family went into crisis and there was a lack of out of hours support available.

His case was held by four different social workers and the mother didn't engage well with professionals. Various agencies became involved in the case (CAMHS, social work support, education, special educational needs) but there was not a coordinated intervention plan and there were no early intervention services used.

What would happen in the proposed model

A Strengthening Families Worker from the Targeted EIP Service will be assigned to the family and will form a strong and trusting relationship, maintained for the whole period that the family are receiving support. The Strengthening Families Worker will work with the whole family to understand their needs and develop a coordinated plan. The Strengthening Families Worker will draw on specialist and contributing services (e.g. CAMHS and schools) to ensure the right support is in place and prevent the child from becoming looked after. At times of acute crisis, the Specialist Intensive Support service will be able to step in and support the families at times currently 'out of hours'.

11.0 Central EIP Team

- 11.1. The locality-based service will be supported by a centralised function containing services that are of the scale and nature to work more effectively on a citywide basis to focus resources where they'd have the greatest impact. Centralised EIP resources include:
- Childcare quality and sufficiency support
 - School Readiness
 - Troubled Families
 - Insight Officers
 - Families Information Service (FIS)
- 11.2 Childcare quality and sufficiency will continue to include the role of a Universal Services Manager, a Childcare Development Officer and Childcare Support Officers. The focus will remain on ensuring there is sufficient local childcare of a suitable quality within the City including children aged two, three and four taking up early education places and that the council continues to meet its statutory duties as set out in the Childcare Act 2006, though this will not be provided directly by the council.
- 11.3. In order to deliver universal provision effectively, School Readiness Officer roles will continue to deliver support to families around aspects of school readiness, including speech and language and personal social and emotional development. This team will be managed by a Universal Services Manager who will also manage Quality and Access Officers who will support the improvement within the private, voluntary and independent childcare sector and be supported by an operations support officer.
- 11.4. Troubled Families will retain a discrete function and will be part of the broader embedding of approach including insight to support the targeting resources as well as quantification of the impact that is being achieved.
- 11.5. Insight Officers will provide insight on local trends (by working with partners), in performance information and evidence to support the impact of interventions as an integral part of the corporate performance function. They have responsibility for developing and embedding evaluation and performance frameworks, including gathering service user feedback. They will also support the commissioning and decommissioning of interventions based on clear evidence.
- 11.6. Service delivery will be supported by a team of administration employees. This resource will be allocated across the Hubs to help Strengthening Families Workers maximise the time they spend working directly with families.

- 11.7. Five FTEs have been allocated to the Multi Agency Safeguarding Hub (MASH). As well as supporting the appropriate referral of cases, the introduction of the MASH will also improve the quality of available data to target services to families that need them most.
- 11.8. The Families Information Service (FIS) will be delivered through the Customer Service Transformation. We will support this through the transfer of two employees to support the development and maintenance of the FIS as it is the key mechanism to signpost families and provide information.
- 11.9. Traded Services will become the responsibility of the Principal Educational Psychologist who will manage the resource and be responsible for income. The level of income will cover the cost of employees and have a net zero impact on the budget. Traded Services employees will link in with the Strengthening Families Managers in order to enable a joined up and consistent approach in the community.

12.0 Ways of working

- 12.1. Authorities such as Essex, where Children's Services are rated "Good" by Ofsted, tend to have a consistent model and way of working with families across services, which increases consistency and quality of casework as well as increasing practitioner confidence.
- 12.2. As part of implementing the new service, the Council is considering which working model to adopt as most suitable for Wolverhampton. The working model will be strengths-based and solution-focused with a focus on working in partnership with families.
- 12.3. Evidence is being collected from other Local Authorities to identify suitable models, such as the Family Partnership Model, that have been shown to produce positive outcomes of families.

13.0 Developing the workforce

- 13.1. A core objective is to build employees confidence and skills, and empower and support them to work creatively and innovatively with families. All employees across the service will have a core set of knowledge and tools and a toolkit of guidance and support that they will be able to draw upon in their work.
- 13.2. All new and existing employees will be inducted into the new service. This will ensure the new vision and approach is fully understood and it will align to the expectations within the Corporate Plan.
- 13.3. Employee development will also align with the existing Children's Workforce Development Plan. A core set of tools will be defined in detail during consultation to ensure they meet the needs of employees.

13.4 The continued development of the workforce will also take place through the embedding of quality, reflective supervision and the introduction of a strengthened performance framework.

14.0 Delivery infrastructure

- 14.1. The current infrastructure includes 25 buildings (12 designated Children's Centres with five linked outreach sites and eight 5-18 buildings). This infrastructure reflects many different government funding streams over the years, which has created a building-based model which is now outdated, inefficient and not aligned to the needs of our families.
- 14.2 Our future delivery model will have a greater focus on outreach and less on building-based provision and the proposed Strengthening Families Hubs will support this. As such, the required infrastructure will provide the foundations for the service, bringing together professionals from different agencies as well as providing an accessible resource for families in each locality.
- 14.3 The hubs will offer a range of interventions, including parenting support, family mediation, child development and play, behaviour management, family relationships, practical support and co-ordinated work with Health, Education, Mental Health and other services.
- 14.4 All sites will accommodate Targeted Early Intervention, Social Work (including employees working with CiN and CP cases) and Health Visiting employees. Based on the assumptions of flexible working set out in the operating principles, front line employees will be expected to work more flexibly within the community and spend less time in buildings.
- 14.5 A specification has been developed to identify hub sites: the infrastructure must meet the needs of redesigned EIP services, support greater outreach to families most in need, and accommodate the integrated teams. All hubs will be vibrant, inviting, have a family feel and will provide the required specialist facilities for professionals, including consulting, interview, family and multi-purpose rooms and hot-desking capabilities.
- 14.6 The geographic spread and location of the hubs have been informed by levels of local need and deprivation and ensure proximity to target communities. An additional network of community venues will be used to extend the reach of the Strengthening Families Hubs. The location of the hubs and outreach bases are shown in Appendix 2.

14.7 Proposed locations have been selected using the following criteria:

- Keeping alignment to the eight Learning Communities geographical areas.
- One Strengthening Families Hub per area
- Use of buildings that have capacity to provide the family centre hub model with potential to fulfil the specification with limited investment required.
- Leaving intact nursery and school buildings with option for use as outreach bases.

Locality/Area	Possible Strengthening Families Hubs	Outreach Bases
Area 1 East Park and Bilston North	Eastfield Campus Eastfield WV1	<ul style="list-style-type: none"> • Portobello Community Centre • The St Chads Parish Centre
Area 2 Bilston East and Ettingshall	Bradley Children's Centre/Rocket Pool Centre Bilston WV14	<ul style="list-style-type: none"> • Bilston Nursery School • Bilston Market Way Offices • Lunt Community Centre
Area 3 Blakenhall, Springvale and All Saints	Graiseley Centre Graiseley WV2	<ul style="list-style-type: none"> • Hilton Hall Community Centre or • Hill Avenue Primary School • Windsor Nursery School
Area 4 Penn, Merry Hill and Pennfields	Bingley Centre Merridale WV3	<ul style="list-style-type: none"> • Bradmore Community Centre • Warstones Primary School
Area 5 Tettenhall, Whitmore Reans and Dunstall	Whitmore Reans Children's Centre Whitmore Reans WV1	<ul style="list-style-type: none"> • Valley Park Campus

Locality/Area	Possible Strengthening Families Hubs	Outreach Bases
Area 6 Bushbury, Oxley and Pendeford	Barnhust Family Centre Pendeford WV8	<ul style="list-style-type: none"> • Bushbury Triangle Neighbourhood Nursery • Priory Green
Area 7 Low Hill and Scotlands	The Avenues Family Centre Low Hill WV10	<ul style="list-style-type: none"> • Former Scotlands Adventure Playground
Area 8 Wednesfield, Heath Town and Ashmore Park	Children's Village Children's Centre Wednesfield WV11	<ul style="list-style-type: none"> • Ashmore Park Community Hub

- 14.8 The Central EIP Team and Specialist Intensive Support Service teams will be based in Valley Park and Wednesfield, in existing Council owned buildings to maximise asset utilisation and where suitable meeting space and therapeutic therapy rooms are available. They will work closely with all locality teams, providing citywide coverage. No additional investment in buildings is envisaged to support their accommodation.
- 14.9 The buildings which will continue to be used and their potential usage are listed below. Nursery and Primary School settings will also continue to deliver nursery provision for 2, 3 and 4 year old children.

Locality/Area	Buildings	Potential Continued Usage
Area 1 East Park and Bilston North	Rainbow Children's Centre Stow Heath Primary School	<ul style="list-style-type: none"> • Expanded 2 Year Offer • SEN Resource Base • Bulge Class
Area 2 Bilston East and Etingshall	South West Bilston Academy Bilston Nursery School	<ul style="list-style-type: none"> • Additional space for school to increase Pupil Admission number • Further expansion of Nursery School • Rent space as Outreach
Area 3 Blakenhall, Springvale and All Saints	Windsor Nursery School Blakenhall Contact Centre	<ul style="list-style-type: none"> • Development of SEN Nursery and Early Years SEN provision • Rent space as Outreach Base • Maintain for increased contact in Contact Centre
Area 4 Penn, Merry Hill and Pennfields	Warstones Primary School	<ul style="list-style-type: none"> • Expand Primary School places • Develop Resource Base • Lease to Royal School
Area 5 Tettenhall, Whitmore Reans and Dunstall	Valley Park Campus	<ul style="list-style-type: none"> • Continued use for 'Edge of Care' service
Area 6 Bushbury, Oxley and Pendeford	Dovecotes Primary School Priory Green Rakegate Primary School	<ul style="list-style-type: none"> • Use for reorganisation of learning spaces within school • Continued use corporately

Locality/Area	Buildings	Potential Continued Usage
		<ul style="list-style-type: none"> • Use as outreach Base • Expanded for Two Year Offer
Area 7 Low Hill and Scotlands	Berrybrook Primary School Low Hill Nursery School	<ul style="list-style-type: none"> • Expand Primary School places • Expand nursery provision • Increase in trading offer by school
Area 8 Wednesfield, Heath Town and Ashmore Park	Wednesfield Children & Family Support Centre	<ul style="list-style-type: none"> • Continued use corporately as office space

14.10 Implementation will include working with schools to undertake an evaluation of the primary and secondary estate and will now take into account the sites identified when considering any future utilisation of space.

14.11 Where a contribution is currently made to the running costs of a school-owned site, future funding will no longer be made available.

14.12 Experience elsewhere demonstrates risk of claw back of Sure Start Grants is considered to be low as the assets will continue to deliver early years services

15.0 Commissioning

15.1. The current commissioning approach will be refined so that each stage of commissioning process is aligned to our strategic aim of preventing family breakdown. This will focus resource where it can have greatest measurable impact. The approach will be informed by an analysis of need at a local and city level to inform service planning and management.

15.2. Commissioning will take place on a joint basis with our partners. The transition of commissioning responsibility for health visiting and school nursing provides an opportunity to align these key services within the EIP model.

15.3. In order to enable us to specific families need, we will allocate a small amount of funding to each locality, to allow micro-commissioning of additional, creative solutions. The Strengthening Families Workers will have the ability to broker targeted and intensive support relating to a particular need.

16.0 Working with External Partners

- 16.1. In order to achieve the desired impact, the transformation will need to be 'whole system' in approach, influencing the ways of working of our external partners who are supporting families within the city.
- 16.2. It will be essential to raise partner confidence in early intervention, as the "go to" service and to increase the confidence of partners to support families themselves, where appropriate and safe to do so.
- 16.3. To facilitate collaborative working with partners we have incorporated the following features in the model:
- Partners will be engaged in consultation and through existing governance forums
 - The service will engage with partners to, develop shared objectives and agree roles and responsibilities
 - Engagement with partners through the implementation of the MASH, providing information and guidance on the role of the early intervention service
 - Building and holding local partnership relationships and building local networks, including the Voluntary and Community Sector, further supporting partners within the community
 - The Targeted EIP Service will consult, guide and support partners in the community, enabling them to support families with low level needs themselves

17.0 A strengthened performance framework

- 17.1 A performance management framework will be critical to ensuring that the proposed model has the required impact and that impact can be evidenced. The aim is to both increase levels of accountability and focus of how we work and drive continuous improvement of services so that outcomes for families are sustained.
- 17.2 The framework will measure the success of three levels of the early intervention "system": impacts on individual families, impacts of specific services and whether the council is achieving its strategic aim of preventing family breakdown.
- 17.3 The performance framework will build on the existing Troubled Families outcomes framework ensuring informed decisions and ensure the service remains focused on its core aim.

18.0 Benefits of the proposed model

- 18.1 The proposed model will have a significant positive impact on the outcomes for children and families in Wolverhampton. The benefits of the model include:
- Families will receive support earlier, meaning that fewer families reach the point of crisis or family breakdown and are able to stay together.
 - The intensive model of working will tackle the root causes of need for families, meaning the positive outcomes achieved for families are likely to be more sustainable.
 - As a result of building the locality knowledge and networks and strengthening the reach within the communities, families will receive the right support at the right time.
 - Employees will be empowered to work in more creative ways with families, supported in their own development and have the opportunity to have a clear, evidenced impact through the work that they do.
 - There will be the depth of data and local intelligence to make informed evidence-led decisions.
 - Over time the number of children in need, child protection cases and number of LAC will reduce and the associated financial pressure of high cost placements should ease.
 - Employees within social care will be able to provide more focus to those with the highest level of need.
 - Partner relationships and community networks will be strengthened; enabling joined up working and improved use of resources.
 - Financial savings will be made as a result of integration and rationalisation of services.

Risks associated with the delivery of the programme are to be captured and managed using the programme risk register.

19.0 Implementation approach and timescales

- 19.1 Implementation timeframes will be dependent on the results of consultation will take place between November and January, after which the proposals will return to Cabinet on 24 February 2016, updated with feedback from the consultation.
- 19.2 If endorsed, implementation would take place by July 2016 with elements, such as the implementation of an evidence-based working model, having the potential to be delivered earlier.
- 19.3 A programme of this scale and complexity requires strong programme management and supporting governance. This Project will report into the Children and Young People's Transformation Board, chaired by the Strategic Director for People. The approach taken will be in line with that for the MASH project, which successfully engaged key stakeholders and will go live on 5 January 2016.

- 19.4 The delivery of this transformation work will be supported by a project manager who will hold responsibility for managing the project plan, coordinating input and supporting both the tracking of benefits and the management of risks and interdependencies.
- 19.5 Continued support from iMPower will be directed at key implementation activity and bring continued momentum to implementation.

20.0 Financial implications

- 20.1 The total budget for Children and Young People Services for 2015/16 is £51.8million.
- 20.2 There are a number existing EIP services which have been initially deemed in scope for this transformation programme. The initial focus of this programme are those services that the Council delivers directly to families and those that a provider is commissioned to deliver. The total budget for these services is £10.2 million; the budgeted net cost to the Council in 2015/16 is £8.2 million.
- 20.3 The table below shows the approved budget for 2015/16 for the services in scope for the re-design of EIP:

Service	Budget 2015/16 £'000
Early Help 0-5	5,692
Early Help 5-18	2,874
Intensive Family Support	283
Family Group conferencing	143
Targeted Youth	363
Hospital Youth Work Team (Funded by Public Health)	73
Family Support Workers from Social Care (Children in Need/Child Protection)	762
Total Resource	10,190

- 20.4 In addition to the services detailed above, Nursery placements (2-4 year olds) are funded separately through the Dedicated Schools Grant (DSG) to the value £4.8 million in 2015/16. This service re-design excludes Nursery placements as these are funded from the DSG. This proposal will however result in a potential loss of income to eight schools totalling around £195,000 relating to premises costs.
- 20.5 The Medium Term Financial Strategy included a saving proposal for the reduction in Looked After Children of £6 million (£3 million in 2015/16 and £1 million each year for 2016/17 – 2018/19).
- 20.6 The Medium Term Financial Strategy also includes a savings target of £1 million in 2016/17 deferred from previous years this will be realised as the number of Looked After Children reduce, enabling a reduction in staffing resources.

20.7 Cabinet on 22 July 2015 and 21 October 2015 included savings proposals of £4.4 million for the Children's Services Re-design was approved for further development in the Draft Budget and Medium Term Financial Strategy 2016/17-2018/19.

20.8 Therefore, the total savings requirement in the Medium Term Financial Strategy for 2016/17 is £6.4 million. In summary the savings for 2016/17 will be delivered by:

Description	2016/17 £000
Savings Target	(6,350)
Savings from Service Re-Design	4,300
Less Re-investment in Specialist Intensive Support Service	(2,200)
Net Savings From Service Re-Design	2,100
Savings from the reduction in the number of Looked after Children	3,500
Reduction in staffing resources as a result of the reduction in LAC	750

20.9 The whole service re-design will underpin the delivery of an accelerated, sustainable and lasting reduction in the number of LAC over the medium term. The Medium Term Financial Strategy assumes a reduction in the number of LAC to 583 by 31 March 2017 and 559 by 31 March 2019, which assumes the delivery of significant savings in placement costs of £3.5 million.

20.10 The proposed re-designed of services will make a contribution of £2.1 million towards the £6.4 million savings target.

20.11 Programme management will be required for a fixed-term period of up to 18 months to support the effective implementation of the whole service re-design. These costs will be funded from the Troubled Families Grant.

20.12 Capital investment for this proposal require further deliberation but the major investment would be circa £350,000 to undertake essential works. Work is currently being undertaken to identify existing capital resources that can be used towards funding these costs in order to reduce the need for additional borrowing.

20.13 Any capital receipts generated from these proposals would feed into the Council's disposal programme. The potential value of these sites is yet to be determined; however it is likely that the capital receipt value would be minimal.

20.14 Should the re-design of services change the indicative savings referred to in paragraph 1.9 as a result of the consultation process then this will be the subject of a further report.{AS/03112015/D}

21.0 Legal implications

- 21.1 Due to the potential requirement to transfer employees employed by schools into the employment of Wolverhampton City Council, it is possible that The Collective Redundancies and Transfer of Undertakings (Protection of Employment) (Amendment) Regulations 2014 (“the Regulations”), will apply. As such, the terms and conditions of employment of those transferring employees will transfer with them and be honoured by the council. However, after one year, the council could consider renegotiating any terms and conditions which have derived from a collective agreement, following relevant consultation with unions, etc., where appropriate.
- 21.2 In addition, where it is likely that a redundancy situation will occur in respect of an employee following a transfer of employment, may be considered a fair dismissal where the reason for it is one of an ‘Economic, Technical or Organisational reason, entailing changes in the workplace’ (Regulation 8). Also, the dismissal can be shown to be for a genuine redundancy reason, with a fair dismissal procedure being followed, including individual and collective consultation with affected employees, if more than 20 are to be made redundant within 90 days.
- 21.3 In respect of post-transfer redundancies immediately after a transfer of employment, the Regulations permit redundancy consultation to begin before the transfer and to continue after it, following agreement by both employers; therefore, both types of consultation can occur concurrently. However, specific selection of employees for redundancy and/or dismissal should not take place before the transfer itself occurs. Therefore, all relevant stakeholders, including union representatives, elected representatives and employees, should be involved in the consultation process (Regulation 3).
- 21.4 Due to the potential nature of the proposed re-design consideration has been given to Section 5(a) of the Childcare Act 2006, amended by the Apprenticeship, Skills, Children and Learning (ASCL) Act 2009 which requires Local Authorities to ensure there is sufficient Children’s Centre provision within the local area to meet local need. The proposals set out in this report ensure that the Council continues to discharge its duties in relation to this.
- 21.5 Section 5(d) of the Childcare Act 2006 as amended by the Apprenticeships, Skills, Children and Learning Act 2009 provides a statutory framework in which consultation about proposed changes to Children’s Centres can take place and due regard would be given to ensuring compliance with these requirements.

[JB/21102015/Z]

22.0 Equalities implications

- 22.1 It is imperative for the council to be able to understand and separate the wider equality issues that are present in Wolverhampton, as they are in the rest of the UK, from those issues that this proposal can and must consider and address. Equalities issues must also be considered in the wider context of the council's need to make significant savings. The proposals outlined here are designed to meet both the financial imperative and those of equality.
- 22.2 In considering a whole service transformation as this report does; and particularly one that relates to some of the most vulnerable people in our city there will be critical equality issues to be resolved. The Equality Act 2010 and the General Equality Duty that the Act creates at Section 149 require the council to ensure, as far as is proportionate or practical, that policies and services are compliant before decisions are taken to approve them. To have what the Act calls "Due regard"
- 22.3 The Equalities aspects of this work are so important and the intensity of need can be so great that it will be important that the service's development is supported by on-going equalities work to ensure that the model and principles deliver on the expectations that the council has of them. That is that individuals receive or do not receive, a service that is directly responsive to their eligible needs and not adversely impacted upon by a protected characteristic; for example their disability and access. These mitigations will be informed by the consultation process.
- 22.4 Equalities are core to the transformation set out in this report and have been integral to the process from the outset. This can be evidenced in the tender specification that was developed for the consultancy work that has underpinned these proposals.
- 22.5 The proposal to establish a data and intelligence function will enable local trends to be understood, evidence collated and work supported to ensure that the council's equalities ambitions and duties operate in practice as well as in policy.
- 22.6 This report and its associated initial equality analysis have identified the potential for adverse implications for some people who share characteristics as defined and protected in the Equality Act. The report describes a new service model and officers are clear that adverse impacts can be mitigated and/or justified within the context of those permissible under the Act.
- 22.7 A full equality analysis has been undertaken and this will be further informed by the consultation findings.
- 22.8 Any proposed employee changes will fall within the Council's Equality in Employment Policy and will be reflected in the Council's annual equality monitoring reports.

23.0 Environmental implications

23.1 There are no environmental issues arising from this report.

24.0 Human Resource implications

24.1 The proposals for re-design will lead to a reduction in the overall resource requirements within the EIP service. Affected employees have had opportunity to participate in the design and development of the future service. Full consultation with employees and trade unions will be undertaken regarding proposed changes to the service, alongside public consultation.

24.2 Changes to organisation structure, job roles and resource numbers will be managed in accordance with the City of Wolverhampton Council policies and procedures. In order to minimise the impact of redundancy on employees, in accordance with the councils Assimilation Policy and Process, where appropriate employees will be assimilated into posts with ring fenced recruitment being used for new posts or posts for which duties have substantially changed.

24.3 The proposed re-design will require employees to adopt a 5 out of 7 day working pattern. In accordance with the Collective Agreement full consultation will be undertaken with affected employees.

24.4 Employees who do not secure a post through the restructure will be offered redeployment support in accordance with the Restructure and Redundancy Policy. The council is currently operating a voluntary redundancy scheme which has been made available to all employees to mitigate the need for compulsory redundancy.

24.5 Based on the potential delivery model there is a requirement for employees to transfer from the Children's Centre to the City Council. This will be undertaken ahead of full consultation with employees on the re-design. Consultation with affected employees regarding potential redundancy implications will be undertaken in accordance with the Transfer of Undertakings (Protection of Employment) (Amendment) Regulations 2014.

[HR/JF/EB/008]

25.0 Corporate landlord implications

25.1 As outlined in paragraph 8 of the report the proposals could result in a number of current delivery sites becoming surplus to service requirements including those delivering Children's Centre core purpose and Early Help 5-18. The nature of ownership of the sites declared surplus would determine the process to be followed.

25.2. Where sites are not council owned early discussions would take place with the site owners as to the most efficient process for withdrawal.

- 25.2 For Council owned assets the Corporate Landlord Board will determine the future use of these assets. If the assets are deemed to be surplus to Council requirements Corporate Landlord will declare them surplus and seek approval from Cabinet (Resources) Panel for inclusion on the Council's asset disposal strategy.
- 25.3 Subject to Cabinet (Resources) Panel approval the Corporate Landlord will deal with the progression of the marketing and sale of the assets for best consideration and manage them as a surplus asset.
- 25.4 Surplus assets are managed by the Corporate Landlord Service in accordance with the Corporate Landlord Board recommendations prior to disposal with a view to minimising holding costs whilst still ensuring any buildings are maintained in good order (where possible) and secured prior to disposal.
- 25.5 There will be holding costs associated with these surplus assets and the full financial savings cannot be made until the assets have been disposed of/leases terminated.
- 25.6 Corporate Landlord are extensively included within the Children's Service Transformation Phase 2 Programme Team, and for the assets that are to be retained are ensuring that they are fit for future use and fully utilised in compliance with the Corporate Landlord strategic asset review. There will be some investment requirements into the retained assets and these will be kept to a minimum wherever possible.

Appendix 1: Organisational Establishment

Current Establishment by Team

Service	Current FTE
Early Help 0-5 and 5-18	166.8
Early Help 0-5 Central Team	15
Early Help 5-18 Central	14.5
Family Support Workers from Social Care	28
Edge of Care	16
Total	240.3

Proposed Establishment by Team

Service	Proposed FTE
Targeted Early Intervention and Prevention	123
Universal and Families from priority or excluded groups	20
Specialist Intensive Support Service	52.5
Customer Transformation	2
MASH	5
Corporate Team	1
Total	203.5

Establishment by Role

	Current FTE	Proposed FTE
Managers	32	31
Admin	37.4	34
Frontline staff	170.9	138.5
Total	240.3	203.5

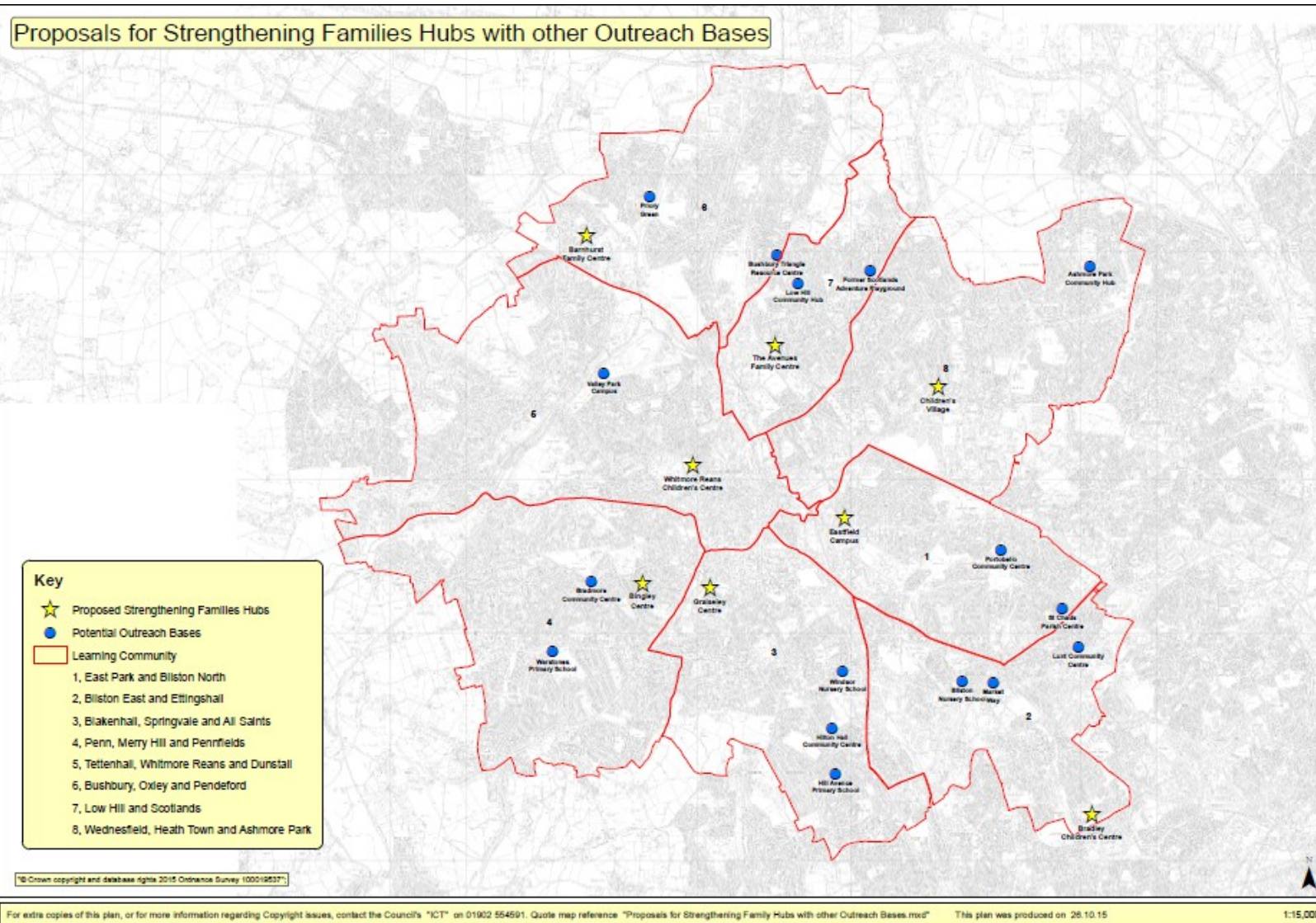
Establishment by Roles and Team

Early Help and Targeted Intervention and Prevention	Current	Redesign
Managers	30	23
Admin	38.4	26
Frontline staff	127.9	94

Specialist Intensive support	Current	Redesign
Managers	2	7
Admin		4
Frontline staff	14	41.5

Family Support Workers from Social Care	Current FTE
Frontline workers	28

Other	Proposed FTE
Managers	1
Admin	4
Frontline workers	3



APPENDIX 2