

NAME OF COMMITTEE	Services Scrutiny Committee
DATE OF MEETING	17 November, 2016
ITEM	End to End, Children and Supporting Families Service
SUB-HEADING	Submit responses to members' observations from the preparatory meeting on 18 October, 2016.
AUTHOR	Head of Children and Supporting Families Department
CABINET LEADER	Councillor Mair Rowlands

- This report is submitted at the request of the Services Scrutiny Committee in response to members' observations on the paper shared with them at the preparatory meeting on 18 October, 2016. The paper submitted focused on an update on the recommendations of the End to End review of the Children Services which was commissioned in October 2012.
- Responses to several specific points were requested and the following is a response to the points as they were raised in the paper produced from the preparatory meeting.
 - (i) **That there is a duty on the service to send children out of the county because they require specialist care that is not provided in Gwynedd, and**
 - (ii) **If such a provision had been established in Gwynedd, savings may have been made**
- There are currently 15 looked-after children and young people who are placed in out-of-county residential units. The decision to place a child out of the County is one that is made based on an assessment of the child or young person's needs and is made at a multi-agency Statutory Panel which is chaired by the Head of Children Service. The statutory membership on the Placements Commissioning Panel include representation from the Betsi Cadwaladr University Health Board, Gwynedd Council Education Department and Children and Supporting Families Department and they consider the needs of the child in their entirety and reach a decision regarding the most suitable placement.
- The young people who have been placed out of the County in residential units have reached there because they have severe and complex needs that could not be provided for locally in foster care or

in an ordinary residential unit. The needs of these fifteen are very different from each other; therefore, we cannot plan to establish provision in Gwynedd which would meet the need. The range of needs includes sexual behaviour harmful to others; severe learning disabilities; severe physical and learning disabilities; behaviour problems which have led to Court Orders to place them in specific units in order to provide appropriate therapy; mental health problems which require a hospital placement and behaviour that is so dangerous to themselves and to others that a placement in a secure unit is required for a period of time. With the exception of the young people who are in placements because of a disability, these young people are the subject of a Court Order and the Council has a parental responsibility for them.

- As is seen, the variety of needs shows that savings would not be made if a provision were to be established in Gwynedd - we would remain in a situation of having to commission specialist placements out of the County in order to meet the needs and ensure appropriate intervention.
- This specific question was raised at the Strategic Safeguarding Panel at the beginning of this year and the request was taken to a meeting of the North Wales Head of Children Services meeting for discussion to see whether there was any desire to consider sub-regional or regional arrangements. The outcome reached was that it was not possible to establish such a provision due to the variety and types of specialist needs that need to be addressed by these provisions. The matter was considered to be impractical on a regional level and due to other priorities facing the work programme a decision to proceed with the proposal was not reached.

(iii) Clearly there was no funding available to deliver the three recommendations arising from the review.

- As noted in the report to the preparatory meeting, a significant investment was made to implement the main recommendation of the review, namely establishing the Edge of Care Team, and there will be further reference to the work of the team later in this report.
- No additional funding was required to implement the second recommendation as the aim was to establish a procedure for scrutinising new placements within the existing resources and this has now been established strongly and effectively.

- With the three other recommendations outstanding, there were valid reasons as to why we did not implement them immediately which did not involve funding.
- The first was to ensure better access to services for those receiving social services. The criteria for accessing services were committed in the commissioning framework at the time for 'Families First' packages. At the time, the way in which this was established in Gwynedd was a fundamental barrier to achieving the recommendation; but, by now and over time, Gwynedd (as other authorities) allows access to these services and therefore the recommendation has been achieved. The decision to establish the Children and Supporting Families Department in its new guise in 2014 was a big step forward in reaching this aim with the placing of statutory services and early intervention and preventative services for children and their families in one Department under the leadership of the Head of Service.
- The second recommendation, namely to establish 'one front door' was dependent on releasing structural arrangements to achieve it rather than additional funding. The 'one front door' would move our screening work to begin a process that was not a statutory expectation on the Council at the time. In this period also, the need to establish the Edge of Care Team and other priorities meant that there was no momentum or capacity to consider such a significant change. The passage of time also means that we are now much closer to establishing 'one front door'. The Social Services and Well-being (Wales) Act 2014 which became effective on April 6, 2016, has assisted us to create the statutory circumstances to establish one front door. There is a statutory expectation under the Act to establish what is known as *IAA - Information, Advice and Assistance*, and this work programme is being addressed although the solution will be a little different by now.
- The third recommendation is a model for establishing a multi-agency service to work with a family from the first suggestion of a problem or concern and to stay with the family until the solution is provided. Although based on good practice research in Scotland, this does echo the Troubled Families programme in England. The basic idea is to work closely with the most needy families, working tirelessly to resolve their situation before taking a step back. This is based on spending a considerably larger percentage of time with the families than what is possible within our current resources. However, despite

this, we have two services which work and follow a similar model, namely the IFSS Team and the Edge of Care Team.

- The IFSS Team is a multi-agency team working on behalf of the Children Services on the highest level of need with parents who are misusing substances, and it is an effective service with workers spending hours every day with the family. The workers are restricted to working on a very small number of cases at a time. The work of the Edge of Care Team will be familiar to the members from the report to the preparatory meeting.
 - We know from our experience locally that, in order to succeed to ensure changes for families and stabilising their situations, intense attention and encouragement is needed for approximately six months. This is a significant time commitment. For example, if we were to reduce the number social of worker cases from 30 to 3 as happens in the IFSS Team, much more attention could be given to these matters; but, in terms of basic numbers, to address the needs of 800 children on the lists of our social workers on any one day, a substantial investment would be needed to address that. We would also need to add capacity by using the current resources of other agencies, or investment by other agencies to create such a team.
 - Our current experience is that, rather than being available to collaborate, agencies are less willing to do so because of their own financial and capacity challenges. In practice, we are having difficulties securing the attendance of agencies in child protection case conferences, and willingness to commit to other less serious arrangements is becoming more of a challenge from month to month.
 - It is not possible to give a cost outline for the recommendation as is seen from the aforementioned explanation and context.
- (iv) **That more information is needed to include: what is the cost of the savings; more details regarding the number of cases in the Edge of Care Team; an outline of the cost of the third recommendation and would there be a positive impact of implementing this and/or would it be possible for the authority to develop its own provision for child care.**
- The service has realised significant amounts of money via efficiency schemes and cuts during 15/16 and 16/17. To date, there is no

significant impact on our ability to respond on the front-line. The main risk in the Children Service is placements and the changeable nature of the field. Despite very detailed planning by Department managers with the Finance Department and detailed and careful projection work into the future, there are times when unforeseen cases come to our attention which means that we must re-profile the spending and report on a potential overspend. This has been done regularly and consistently, and two expensive plans have been identified at the end of quarter 2, 16/17 which had not been foreseen at the beginning of the year.

- Since January 2016, the Edge of Care Team has worked with 53 families and with a total of 93 children, with a high percentage of children aged under 4 and teenagers in this cohort. When looking at costs that would have been incurred if intense intervention had not been provided for the family and if these children would have gone into care or would not return from expensive placements to foster placements or home, it was calculated that costs of £419,469 have been avoided and the savings on two cases in this cohort are significant.
- The response to point (i) and (iii) above addresses the final question in (iv).