

Report of the Cabinet Member for Services for Children and Young People

Cabinet – 16 March 2017

FAMILY SUPPORT SERVICES COMMISSIONING REVIEW – OPTIONS APPRAISAL REPORT (GATEWAY 2) FOR THE UNDER 11'S CLUSTER OF THE COMMISSIONING REVIEW

Purpose:	The purpose of this Options Appraisal is to outline the process, findings and set out New Models of Delivery for the Under 11s Cluster of the Family Support Commissioning Review
Policy Framework:	Sustainable Swansea: Fit for the Future Social Services and Wellbeing (Wales) Act 2014 (SSWBA)
Reason for Decision:	Decision on the recommendations of the preferred option on the future delivery model for the Under 11s Cluster of the Family Support Commissioning Review based on fully informed and robust evidence.
Consultation:	Corporate Management Team Cabinet Members Legal, Finance and Access to Services. Child and Family Services, Poverty and Prevention and Education.
Recommendation(s):	It is recommended that: 1) That the preferred option (3) outlined in section 3 of this report as a measure to improve performance, make the service more robust, and make efficiencies, is appropriate to take forward to implementation.
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1.0 Purpose & Summary

- 1.1 This Review is of services supporting children and families of children under 11 where mental health, substance misuse or parenting difficulties have been identified and is a strand of the wider Family Support Commissioning Review. It is a cross-service review between Child & Family Social Services and Poverty & Prevention, but there are clear interdependencies with other service areas, principally with Education, Health and the Third Sector.
- 1.2 In July 2016, Members and the Corporate Management Team agreed Swansea's vision for the delivery of Family Support Services across the Continuum of Need in addition to the desired outcomes for service users.
- 1.3 This report is asking for approval to move forward with implementation of the recommendations.

2.0 Background

- 2.1 Services for young children and their families are provided on a multi-agency basis City wide. It is necessary to understand the whole picture in order to ascertain what improvements could be made across the Continuum in terms of Family Support. It is not possible to solely focus on aspects of the system due to the broader interdependencies.
- 2.2 Currently Family Support provision for the Under 11s is organised via:
 - i) a set of Core Early Intervention Services within Poverty and Prevention with some of these services provided via an integrated model between the Council and the Health Board and other services commissioned and provided via the Third Sector and co-ordinated under the Families First Programme. Almost all of these services are funded entirely via external grants.
 - ii) A set of ring-fenced Family Support Services within Child and Family Services to meet the need of children whose needs require a statutory social work intervention. This includes the Integrated Family Support Service. Almost all of these services are funded entirely via the Council's core funding.
- 2.3 Most Early Intervention services falling under the umbrella of Family Support, for the purposes of this Review, are also critical in contributing to a number of other key agendas and priorities. This is reflected, to an extent, within the performance measures of the Services.
- 2.4 The journey to transform services on the Continuum of need commenced prior to the commissioning. Over the last few years considerable work has been undertaken on a multi-agency basis to develop and review the pathways of support for children and their families. This has included:

- A full scale review of commissioned services in relation to quality and fit
- On-going quality assurance cycles to monitor quality and influence early intervention service delivery.
- Exploration of good practice from other Local Authority areas in Wales and England which has been facilitated via the regular Welsh Government (WG) national meetings and learning sets.
- The Early Years audit and multi-agency Strategy, Action Plan and Governance.
- The close working with external academics to support practice and identify cutting edge evidenced new and emerging interventions drawn from the UK and internationally.
- The on-going planning and developments under the Family Support Continuum Board.
- Piloting new approaches as a result of the Continuum Board and building on approaches via the Prevention Fund i.e. the Family Well-being Team and the TAF in Schools.
- The development of detailed Business Cases under the Prevention Strategy for Speech and Language and Early Years and continued collaboration with the Health Board to drive these forward.

The Continuum of Need model for Children and their Families in Swansea

- 2.5 The model of family support for children under 11s and their families in Swansea reflects the continuum dashboard which is used across our family support services. It should however be noted that some services are difficult to map in this way as they are targeted to a geographical area or a particular need.
- 2.6 An important consideration for this review is that services and approaches available are able to respond to the needs of the different ages and stages. A mapping exercise has been undertaken across the Continuum to reflect the services according to need and in relation to ages and stages. It also highlights identified service gaps. This can be found at Appendix C.
- 2.7 Further information on the Universal Core Pathway, Healthcare (including midwifery and health visiting) and workforce development can be found in the Gateway 2 Report
- 2.8 An important consideration for this review is that services and approaches available are able to respond to the needs of the different ages and stages. A mapping exercise has been undertaken across the Continuum to reflect the services according to need and in relation to ages and stages. It also highlights identified service gaps. This can be found at Appendix C.
- 2.9 As part of the review process a service comparison has been completed to compare the current service model, cost, outputs and performance with other areas (Neath Port Talbot, Bridgend).

- 2.10 This review looked at Newport's model for the Families First and IFSS project. IFSS is an integrated project between the Local Authority and Barnados. It is funded through Families First, the Local Authority and Barnados and provides one strand of family support across different levels of the Continuum. The IFSS does not however represent the full offer to vulnerable children and families in Newport but it provides the key family support elements including: the Integrated Family Support Team (IFST), Family Assessment and Support Services (FASS), Family Support Team (FST), Family Contact Service (FCS); the Preventions Core Team and the Children with Additional Needs Service (CANS).
- 2.11 The recommendations from the external review on the IFSS and a comparison to activity in Swansea can be found under **Appendix D**.

KEY FINDINGS & SUMMARY

- 2.12 The evidence during the benchmarking exercise illustrated that in Swansea we are in a very strong position and have come some way on our journey to establish a multi-agency and multi-disciplinary integrated service within Early Intervention across the continuum.

The positives are:

- Highly skilled and creative staff
- Evidence based approaches utilised throughout
- Integrated teams and services established and developing to respond to families in a holistic way cutting across traditional service boundaries
- Innovative approaches making a difference and being recognised as ground-breaking
- Evidence of services directly preventing the need for accommodation
- Evidence of services directly improving children's attendance in school
- Evidence of approaches reducing demand on services
- Robust performance data
- Ahead in terms of provision of services for young children
- Ahead in terms of the TAF workforce model

- 2.13 It is clear that Swansea is further ahead in its Early Intervention provision for children and families than other Local Authority areas however requires further consideration in relation to the alignment and focus of statutory family support services in terms of a future model and achieving greater equity in terms of a Swansea wide approach.
- 2.15 It is evident that services in other Local Authorities across Wales are also funded similarly to those in Swansea through a combination of local authority and grant funding. Most early intervention services are heavily reliant on grant funding. Some Projects are funded by Third Sector organisations which are topped up by the Local Authority.

3.0 Options Appraisal

- 3.1 Based on the research, evidence and gap analysis gained throughout the previous stages of the commissioning review process, the Commissioning Review Team looked at options to be considered to re-design and deliver the agreed vision. The process resulted in the development of four distinctive options.
- 3.2 A full report and actions of the gap analysis can be found under **Appendix E**.
- 3.3 An Options Appraisal Workshop was held on 8th February 2017 to consider the 4 options outlined for the Under 11s future model of delivery. Involved in these discussions were stakeholders both internal and external from Health Visiting, Midwifery, Early Intervention Services, Child and Family Services, Schools, Third Sector, Unions as well as other internal officers. Stakeholders included managers and frontline staff.
- 3.4 The options were evaluated and scored utilising a delivery model matrix which involved scoring the options based on the following criteria;
- Outcomes
 - Fit with priorities
 - Financial impact
 - Sustainability and viability
 - Deliverability
- 3.5 The key characteristics and details of each 4 options are explained below;

Option 1 (As is)
<p>Key Characteristics</p> <ul style="list-style-type: none">• Partial alignment of internal family support services• No universal coverage of schools or health• Multiple entry points for services with different criteria• An imbalance of capacity between Early Intervention and Statutory <p>Specific details include:</p> <ol style="list-style-type: none">a) To continue the Team Around the Family (TAF) in Schools approach with the existing 61 Primary schools.b) To continue to offer workforce development through support for school pastoral roles to continue to build on confidence and competency.c) Development of partnership pathways such as relating to young parents and feeding into the domestic abuse partnership pathway.d) Continued model of integration with Health to develop and deliver services to young children and their families from conception upwards.e) Continue to pilot the Family Well-being team.f) Separate family support resources/team for Statutory Child and Family and Early Intervention.

g) Family Information Service as a stand-alone database.	
Advantages	Disadvantages
<ul style="list-style-type: none"> • Pulling in expertise and not pushing service user out • Multi-agency integrated co-located teams • Evidence of preventing the escalation of need via low step-up rates • Innovation continues to drive progress • Proven quality and effectiveness of early intervention offers and considered as ground breaking at a national level • High levels of buy-in from schools • The TAF in Schools Model proportionate and cost effective for Family Support Services 	<ul style="list-style-type: none"> • No further capacity to expand • All early intervention elements reliant on grant funding • Only partial coverage of the core universal pathway • Constrained opportunity to further improve outcomes for families and/or the System due to limitations of funding • Levels of unnecessary and “scatter gun” referrals continue • Not fully maximising the collective resource. • Lack of consistency of quality and workforce development across levels of the Continuum • Unknown demand for statutory family support resource • Lack of capacity within certain areas • The re-modelling in certain areas has resulted in a capacity issues in other areas

Option 2 (Transform in-house - partial re-configuration)
<p>Key Characteristics:</p> <ul style="list-style-type: none"> • Universal coverage of TAF in schools and health • Fully implement the FWT team following the pilot • Single entry point into Early Intervention services • Re-addressing the balance of capacity between Early Intervention Services and Statutory Parenting Support Services and establishing specialist adolescent parenting. • Improved alignment of Early Intervention Services and Statutory Parenting support services across the ages and stages of the Continuum <p>Specific details include:</p> <ol style="list-style-type: none"> a. To expand the TAF in Schools offer to all primary schools and to develop a TAF in Health model. b. To move towards a primary school cluster model of TAF in Schools as staff become more confident and experienced with a future focus where appropriate on school to school support. c. To continue to offer responsive workforce development opportunities through support for school pastoral roles to continue to build on confidence and competency and share the practice with the Over 11s in order to align the approach across comprehensive schools. d. To establish a Single Point of Entry for our Early Intervention that allows professionals to talk through children’s needs. This reflects the similar approaches taken by the Domestic Abuse Hub and the Over 11s

commissioning review. Advice will be given on which EI (Under 11s) offer best meets the needs of families taking away the onus from professionals to identify the right support and complete several referral forms. This will include ensuring that partnership pathways across the Continuum are also exhausted where appropriate to ensure the right support at the right time.

- e. To increase the co-ordination element of the TAF offer in order to align with the Swansea wide development of the Family Well-Being Team (FWT).
- f. To conclude the FWT pilot and fully implement in order to further strengthen the interface with Statutory services and continue addressing the reduction in levels of Child in Need of Care and Support(CINCS).
- g. Align practices in Early Intervention with that of YPS to establish a 2 way brokerage pathway with CAMHS enabling more effective joined up working between services, including long arm support from CAMHS.
- h. Involvement in the development of the new Prams peri-natal Service.
- i. Over 11's services in scope to commission EI Parenting Team to offer consultancy, skill building opportunities and support in developing an adolescence parenting offer.
- j. Continued development and strengthening of partnership pathways such as relating to young parents and feeding into the domestic abuse partnership pathway as well as developing new Partnership Pathways relating to Disability, Substance Misuse, Mental Health.
- k. Continued model of integration with Health to develop and deliver services to young children and their families from conception upwards.
- l. To centrally align workforce development across the continuum in order to consistently ensure alignment of practices that play a central role in the delivery of all services regardless of age or level of need. This would also include increasing the knowledge base around specialist areas such as disability and mental health and substance misuse.
- m. Family Information Service feeding into the overall Social Services and Well-Being Act driven Dewis Directory.

Advantages	Disadvantages
<ul style="list-style-type: none"> • Timely approach – right support at the right time • 'I tell my story once and that's enough' • Pulling in expertise and not pushing service user out • Improving efficiency and maximising resources • Continue with the multi-agency integrated co-located teams • Greater focus on early intervention and prevention • Building on what has been proven to work and considered as ground breaking at a national level • Alignment of schools and health with the Continuum 	<ul style="list-style-type: none"> • Difficulty in achieving consistent QA through separate models • Families stepping up into Child and Family Services would not maintain some elements of the EI offers • Grant funding uncertainty

<ul style="list-style-type: none"> • Allows time for the impact of the Supported Care Planning re-structure to take place prior to making radical decisions relating to the statutory child and family services • Ensures that adolescent parenting approaches is not disjointed from direct services for Young People • A whole Universal System Offer ensuring that there is less risk of children's needs not being identified and met at an early stage • Consistency of evidence based approaches and proportionate application of use • Clearer pathways between universal services and families needing support further up the continuum • A more confident and able workforce • Ensuring that families' needs are met as low down the continuum as possible and at the youngest possible age • More robust measures in place to ensure that earlier offers of support have been exhausted • Consistency of approach / methodologies across the Continuum • Greater consistency and quality of provision • Appropriate ring-fenced resources for families requiring statutory resources 	
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Option 3 (Transform in-house - full re-configuration)	
<p>Key Characteristics:</p> <ul style="list-style-type: none"> • Universal coverage of TAF in schools and health • Fully implement the FWT team following the pilot • Single gateway into Early Intervention services • Re-addressing the balance of capacity between Early Intervention Services and Statutory Parenting Support Services and establishing specialist adolescent parenting. • Full alignment of Early Intervention Services and Statutory Parenting support services across the ages and stages of the Continuum 	

Specific details include:

- To expand the TAF in Schools offer to all primary schools and to develop a TAF in Health model.
- To move towards a primary school cluster model of TAF in Schools as staff become more confident and experienced with a future focus where appropriate on school to school support.
- To continue to offer responsive workforce development opportunities through support for school pastoral roles to continue to build on confidence and competency and share the practice with the Over 11s in order to align the approach across comprehensive schools.
- To establish a Single gateway for our Early Intervention that allows professionals to talk through children's needs. This reflects the similar approaches taken by the Domestic Abuse Hub and the Over 11s commissioning review. Advice will be given on which EI (Under 11s) offer best meets the needs of families taking away the onus from professionals to identify the right support and complete several referral forms. This will include ensuring that partnership pathways across the Continuum are also exhausted where appropriate to ensure the right support at the right time.
- To increase the co-ordination element of the TAF offer in order to align with the Swansea wide development of the Family Well-Being Team (FWT).
- To conclude the FWT pilot and fully implement in order to further strengthen the interface with Statutory services and continue addressing the reduction in levels of Child in Need of Care and Support(CINCS).
- Align practices in Early Intervention with that of YPS to establish a 2 way brokerage pathway with CAMHS enabling more effective joined up working between services, including long arm support from CAMHS.
- To be involved in the development of the new Prams peri-natal Service.
- All parenting (statutory and young people) that spans the various levels of need, ages and stages to be brought into Early Intervention Services on a phased approach. Financial contributions required from all in scope in order to achieve this.
- Development of the Statutory Family Support Services so that they are aligned to the Early Intervention offer. Re-addressing the balance through analysis of the demand data following the Supported Care Planning re-structure.
- Continued development and strengthening of partnership pathways such as relating to young parents and feeding into the domestic abuse partnership pathway as well as developing new Partnership Pathways relating to Disability, Substance Misuse, Mental Health.
- Continued model of integration with Health to develop and deliver services to young children and their families from conception upwards.
- To centrally align workforce development across the continuum in order to consistently ensure alignment of practices that play a central role in the delivery of all services regardless of age or level of need. This would also include increasing the knowledge base around specialist areas such as disability and mental health and substance misuse.
- Family Information Service feeding into the overall Social Services and

Well-Being Act driven Dewis Directory.

Advantages	Disadvantages
<ul style="list-style-type: none"> • Timely approach • 'I tell my story once and that's enough' • Pulling in expertise and not pushing service user out • Improving efficiency and maximising resources • Right support at the right time • Continue with the multi-agency integrated co-located teams • Greater focus on early intervention and prevention • Building on what has been proven to work and considered as ground breaking at a national level. • Alignment of schools and health with the Continuum • A whole Universal System Offer ensuring that there is less risk of children's needs not being identified and met at an early stage • Families stepping up into Child and Family Services would maintain consistency of worker from some EI Services • Consistency of evidence based approaches and proportionate application of use • Clearer pathways between universal services and families needing support further up the continuum • A more confident and able workforce • Ensuring that families' needs are met as low down the continuum as possible and at the youngest possible age • More robust measures in place to ensure that earlier offers of support have been exhausted • Consistency of approach / methodologies across the Continuum • Greater consistency and quality of provision 	<ul style="list-style-type: none"> • Grant funding uncertainty • Creates complexities in relation to grant compliance • Risk that a disproportionate amount of parenting would be utilised by high end need cases which would reduce the ability to work at an early stage. This means that the focus on EI would be difficult to "safeguard" • Loss of connection to the thematic young people related issues • Doesn't allow time for the impact of the Supported Care Planning re-structure to take place prior to making radical decisions relating to the statutory child and family services • Investment in workforce development in terms of time and finances • De-stabilisation of individual services that are working well • HR implications in terms of the practicalities • Possible loss of innovation

Option 4 (Full Commissioning - Outsource)

Key Characteristics:

- Commission all in scope services out to one single external provider (either a 3rd sector organisation or private sector company) to transform under their guidance.

Advantages

- Possibly in the long term there could be reduced costs
- Access to match funding opportunities
- Potentially less bureaucratic systems could offer efficiencies and increased performance

Disadvantages

- Unknown quality and capacity of organisations in the current market place
- Risk of de-stabilising what is working well
- The quality of the relationship between commissioner and organisation in order to develop the high quality provision does not currently exist
- Robust and complex performance monitoring and quality assurances would need to be established which could be problematic
- Access to internal Management Information Systems and Information Sharing processes could be more difficult
- Breadth of skills, knowledge and understanding are unlikely to exist in a single organisation
- Timeframes to build the required understanding in organisations has not been undertaken
- TUPE issues with existing staff would be complex and require long timeframes
- Risk of organisation failing to deliver

3.6 In summary Option 3 was the preferred option as this would achieve a clear pathway from prevention to protection. This would require a clear project management approach, which may or may not require moving through Option 2.

3.7 Option 4 was discussed in detail and concluded that this was not a viable option at this stage as it was felt the service model needed to be optimised in the first instance. This option could be explored in the future.

4.0 Preferred Option- Legal Implications

- 4.1 It is not anticipated that there will be any significant legal implications with Options 1, 2 or 3. There would be more significant legal issues if Option 4 due to the potential TUPE of staff and Commissioning Contracts.
- 4.2 The Social Services and Wellbeing (Wales) Act 2014 (SSWBA) provides a new legal framework that brings together and modernises the law for social services in Wales. The Act, and it's many regulations, codes of practice and guidance cover five main principles: **Promoting of Wellbeing, Voice and Control, Prevention and Early Intervention, Co-production and Multi Agency Collaboration**
- 4.3 The development of the Under 11s model to strengthen the universal core pathway and to build further on encouraging and supporting partners to exhaust all options at the lowest level possible to achieve early intervention, is directly aligned with the values and principles of the SSWBA. The continued development of partnership pathways will also ensure there is consistency of approach, values and principles across all Under 11s managed and commissioned and universal services in Swansea. This directly relates to statutory guidance available in part 9 of the SSWBA which requires local authorities to arrange for co-operation with relevant partners.

5.0 Preferred Option – Financial Implications

- 5.1 The financial summary scoring matrix in **Appendix G** outlines the costs for all of the options considered the alternative delivery models.
- 5.2 All options outlined in this review are achievable within the budget allocated. The list of current funding sources is outlined below.

Funding Sources		
WG Families First	£	1,340,757
Core YPS	£	68,824
Core C&F	£	838,501
Core EI	£	28,355
Total Budget Available for 2017-18	£	2,276,437

- 5.3 The purpose of this commissioning review is to bring things together and work in partnership to improve outcomes for children and their families and reduce and manage demand, hence reducing the need for higher level complex interventions. This is a preventative agenda which can only be achieved by developing appropriate pathways to enhance partnership working and the development of a pathway from prevention to protection to be managed across the continuum of need to achieve efficiencies and economies of scale.

- 5.4 The preferred options (Option 2 and Option 3) have the same financial costs and a total of costs of approximately 2.27 million; this is achievable in the budget available as outlined in the table above. Option 3 sees a 7.3% increase on current levels of spend; this increase will be met through maximisation of grants and does not add any additional pressure to core budgets.
- 5.6 This is a preventative agenda which can only be achieved by developing appropriate pathways to enhance partnership working. The preferred option requires alignment of resources between Child and Family and Poverty and Prevention in line with the overall budget strategy.

6.0 Preferred Option – HR Implications

- 6.1 The HR implications associated with the preferred option will require the recruitment of suitably experienced and qualified staff to new posts and the updating of job descriptions to reflect the agreed option as well as a formal transfer of staff from Child and Family Services to Poverty and Prevention.
- 6.2 There are no redundancies.
- 6.3 All relevant staff will be consulted and appropriate HR processes will be followed in line with advice from HR Officers.

7.0 Consultation

- 7.1 The Under 11s Cluster of the Family Support review is recommending options which transform our internal processes and staffing to deliver our services as effective and sustainable as possible in addition to working more collaboratively with our internal and external stakeholders. These options will not be making changes to front end services received by our service users and so no formal consultation is required.

8.0 Equality

- 8.1 An EIA screening form was completed and given that the preferred option is not proposing any changes, it is agreed that there will be little to no impact for any protected groups. As a result, a full EIA has not been deemed necessary. The screening is available in APPNDIX H for further information.

Background Papers:

Gateway 1 Report
Gateway 2 Report

Appendices:

Appendix A gateway 1 report
Appendix B context and background to early intervention services

Appendix C service mapping
Appendix D service comparison
Appendix E gap analysis and summary
Appendix F options appraisal scoring matrix
Appendix G financial summary spreadsheet
Appendix H EIA Screening