

**RHONDDA CYNON TAF COUNTY BOROUGH COUNCIL
MUNICIPAL YEAR 2014/15**

**COMMUNITY AND CHILDREN'S
SCRUTINY COMMITTEE**

17TH MARCH 2015

**REPORT OF THE GROUP DIRECTOR,
COMMUNITY & CHILDREN'S
SERVICES**

Agenda Item No: 6

**CHILDREN'S SERVICES
MODEL FOR CONSULTATION**

**Author: Andrew Gwynn, Service Director Children's Services
Tel. No. 01443 495118**

1. PURPOSE OF THE REPORT

To update Scrutiny Members on progress in developing a Children's Services delivery model for Rhondda Cynon Taf.

2. RECOMMENDATIONS

It is recommended that Members:

- 2.1 note and comment on the contents of this report and the progress made in developing a revised service model for Children's Services;
- 2.2 receive further reports, in due course, setting out the implementation arrangements.

3. BACKGROUND AND PROGRESS TO-DATE

- 3.1 Social Services in Rhondda Cynon Taf aim to provide a range of services which are responsive and well coordinated in protecting and supporting the population as a whole and vulnerable people in particular. However, like all Councils, Rhondda Cynon Taf is facing considerable financial challenges with significantly reducing budgets at a time of increased demand, higher expectations and legislation change with the implementation of the Social Services and Well-Being (Wales) Act 2014.
- 3.2 One of the major challenges going forward will be to maintain our focus on maximising independence so that we can help more people and families to manage risks, to stay safe and to stay independent at home for as long as possible. This requires us to continue to promote ways in which we can focus on early intervention and prevention approaches by working with local communities to meet the specific needs of the people who live within them.

- 3.3 Prevention and early intervention are central to our ambition to offer more opportunities for people to stay safe, active, healthy and independent for longer. We have made good progress in this area, but more needs to be done.

4. THE DEVELOPMENT OF THE CHILDREN SERVICES DELIVERY MODEL FOR RHONDDA CYNON TAF

- 4.1 The model (attached as Appendix One) has been prepared by the Rhondda Cynon Taf Children's Services Management Team with the support of The Institute of Public Care at Oxford Brookes University (IPC) as part of an exercise to develop a future operating model for Children's Services. It describes the vision, principles, framework and direction of change that the Senior Management Team proposes across services to support children and families in the future in Rhondda Cynon Taf. It has been developed in order to address the Children Service improvement priorities identified in this Council's Director of Social Services report as set out in paragraphs 4.2. and 4.3 below.

- 4.2. The revised operating model will enable children, young people and families to access appropriate support as early as possible, to help them maintain their quality of life, prevent problems escalating and reduce the demand for high cost, specialist support services. Our objective is to ensure that children, young people and their families will be supported to help themselves to achieve their full potential and thereby improve their overall wellbeing and quality of life. In order to achieve this we will need to:

- Improve our capacity to prevent the need for statutory intervention by coordinating preventative and early intervention services for families in the greatest need more effectively.
- Ensure that the current Team around the Family (TAF) model makes best use of the total resources available to assess the needs and to co-ordinate services for vulnerable families in need of our support.

- 4.3. In addition, the model will need to enable the service to deliver improvements in assessment, planning and decision making for those children who will require long term permanent care in accordance with legislative requirements. In order to achieve this we will need to:

- Achieve improved performance in assessment and care planning arrangements that is quality assured.
- Ensure that business processes and information systems are fit for purpose, reducing bureaucracy and freeing up social work time for direct work with families.
- Recruit, develop and retain a highly motivated and skilled workforce, which is responsive to the needs of children, young people, and their families.

- Support the implementation of the Multi Agency Safeguarding Hub (MASH) for referrals received where there are safeguarding concerns in relation to Children and Young People.
- Include a model for services for young people aged 16+ that ensures a consistency of approach that achieves the best possible outcomes for the young person involved.
- Continue to provide sufficient, suitable and cost effective care placements to meet the needs of children looked after and care leavers where this is required.
- Ensure that there is access to Rhondda Cynon Taf systems in Pontypridd Police Station.
- Ensure MHub provides reliable management information that will assist in evaluation frameworks for the MASH.
- Develop a plan for quality assurance of decision making and escalation of professional disagreements.
- Consult with staff affected by the changes; alongside Human Resources and Trade Unions.
- Develop a Communication Strategy to ensure the referring community is fully briefed on the changes.

5. NEXT STAGE

Consultation is underway with staff and partners including Cwm Taf Safeguarding Children's Board, Education Services, Health and third sector, to finalise the model and once finalised a revised service configuration/structure will be developed for consideration by Cabinet.

6. CONCLUSION

The production of this revised operational model and its implementation will address the agreed service improvement priorities for Children's Services and will inform the revised service configuration/structure required to deliver these priorities and address the ongoing requirements of the Social Services and Wellbeing Act.

LOCAL GOVERNMENT ACT 1972

AS AMENDED BY

THE LOCAL GOVERNMENT (ACCESS TO INFORMATION) ACT 1985

RHONDDA CYNON TAF COUNTY BOROUGH COUNCIL

COMMUNITY & CHILDREN'S SERVICES SCRUTINY COMMITTEE

17TH MARCH 2015

REPORT OF THE GROUP DIRECTOR, COMMUNITY & CHILDREN'S SERVICES

CHILDREN'S SERVICES MODEL FOR CONSULTATION

Officer to contact: Ann Edwards. Tel. No. 01443 424102

Appendix 1

Rhondda Cynon Taf CBC

Children's Services Model for Consultation

January 2015

Rhondda Cynon Taf CBC

Children's Services Model for Consultation

1 Introduction

This document has been prepared by the RCT Children's Services Management Team with the support of The Institute of Public Care at Oxford Brookes University (IPC) as part of an exercise to develop a future operating model for children's services. It describes the vision, principles, framework and direction of change that the Senior Management Team proposes across services to support children and families in the future in RCT.

This is a working document, not a final statement; it will continue to be amended to take account of wider consultation processes. Following this, further work will be undertaken to develop operating arrangements and design future services, and subsequently to plan detailed changes needed to roles, pathways, protocols and posts to implement the new arrangements.

2 The Overall Model

2.1 Service vision

Children's Management Team proposes a new vision for children's services in RCT as follows:

To be part of a seamless network of agencies that help all children and families in RCT to be safe, fulfilled, independent and healthy, living in resilient and supportive communities.

We know that for many families this is difficult and where they need help to achieve these outcomes we will provide social services support which is responsive, timely, high quality and well-coordinated. We will work in partnership, based on the strengths of the family and the need to safeguard the wellbeing of children and young people.

2.2 Service principles

Children's Management Team also proposes a series of principles to steer the way in which we work with children and families in future:

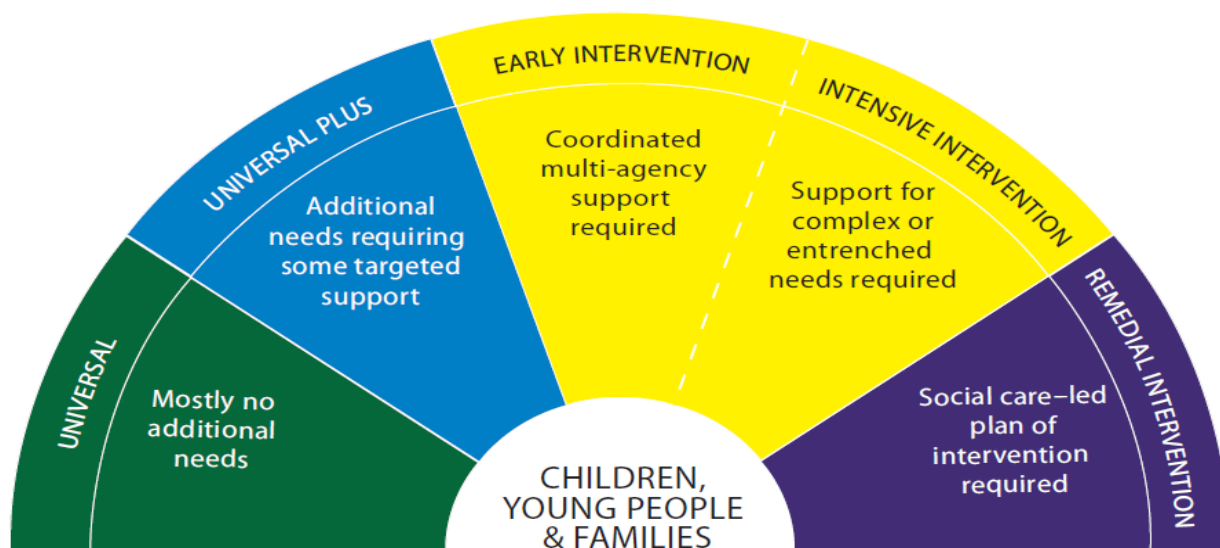
- Child and family centred - Our services will build on families' strengths and abilities and help them to maintain an appropriate level of independence with a suitable level of care and support.
- Involving families and carers - The child and family will be supported to express their views about decisions that affect them and their views will help form the support we offer. We will take account of their preferred language and means of

communication. We respect the contribution of the wider family and other carers and will take account of their strengths, needs and views whenever appropriate.

- Proportionate - The way we work with children and families will be straightforward and transparent and our work will be based on strong evidence about what works.
- Clear - We will invest in proven early intervention and prevention services to reduce the number of families who need remedial interventions. We expect to be supported by other agencies that will also focus their services on promoting the wellbeing of those children and families most in need.
- Integrated - Our work with children and families will be based on detailed knowledge of their needs; desired outcomes; the risks and the capacity and resources available to them.
- Safeguards - All professionals will be alert to any risk or harm to the person (to themselves or others). Assessment and care and support planning will explore the possible responses to those risks and agree approaches to risk management and/or mitigation.
- Outcome Based - Our approach to supporting children and families will be based on a consistent and common framework, and jointly owned and operated by professionals, in order to ensure that people receive timely and effective access to safe care and support.

2.3 Overall framework

The Children's Management Team also proposes an overall framework for children's services which describes an integrated network of services and support from all agencies at 4 different levels:



The effective delivery of the framework is based on the following underpinning assumptions:

- Workers must help children and families to make positive choices and access the right help at the right time - there should be no closed doors particularly for vulnerable children and young people.
- Those people in a position to advise families about the support available to them must be able to refer easily to the right level and type of service.
- Children at all levels of need still need good support from universal services.
- Children and families can and do move from one level to another. There are some children – in particular those at risk of significant harm – who should be helped to move quickly and effortlessly to the required service response.
- All services should help to prevent a child's needs from escalating, and to minimise poor outcomes, risk and harm through:
 - Whole family approaches.
 - Building on family strengths and solutions-focused.
 - A clear and realistic understanding of risk and the need for safeguarding children
 - Attention to effective engagement of families including in particular at the start of a targeted intervention.
 - Services based on evidence about what works.
- Effective information sharing is critical, particularly to enable better advice and support for families and to ensure that the right decisions are made about access to the right support at the right time.
- Workers working with families with complex difficulties and needs must be supported and have the key skills required to work with them effectively.

3 Key Developments

The next sections summarise what The Children's Management Team proposes should be the key developments needed at each level of the overall framework to make sure that:

- Services meet national legislation and policy requirements
- Services fit with the growing body of research evidence and best practice
- Services are able to meet the demands of changing population and public expectations
- Services are deliverable within the available resources

.. and ultimately and most importantly that children and families in RCT are getting the best possible response to their needs.

4 Level 1: Universal

4.1 Relevant needs and services

Situations where services at this level are relevant include where:

- A child has mainly no additional needs.
- Most needs are met through universal services such as school; primary health care services; universally accessible advisory and leisure services.
- The child or young person is considered to be thriving generally.

Examples of relevant services include GP and Health Visitor support, early years, nursery, school and youth provision.

4.2 What is needed to make services at this level more successful?

The management team propose the following areas for further improvement:

- Better quality information, advice and assistance for children and their families from any professional in the community.
- Better use of appropriate technology to make communications between agencies and with families easier.
- Clearer referral and advice routes available to help practitioners in universal services respond effectively to the needs of children and families.
- All universal services including schools, nurseries, early-years and youth services better able to support families to build resilience and promote successful development.

5 Level 2: Universal Plus

5.1 Relevant needs and services

Situations where services at this level are relevant include where:

A child has needs that require some extra support in order to meet their full potential, and these needs can be met by a single agency or a single agency working with others without the need for TAF – typically, this will be the agency undertaking an assessment or identifying the additional needs.

An outcomes-focused single agency plan is likely to suffice, albeit with links and signposting to other services as appropriate

This may be delivered by any service based in the community which has a brief to provide additional support to children and families, including community health services, education support, and community based youth services, SLT, Physiotherapy, CAMHS, youth justice, flying start services.

5.2 What is needed to make services at this level more successful?

The management team propose the following for further improvement:

- More easily accessible services for families needing some extra support.
- Good quality, locality based triage, advice and guidance to universal services practitioners from social work services.
- High quality targeted advice, assistance and direct input to children and families needing some extra support from universal plus services.

6 Level 3(a) Early Intervention

6.1 Relevant needs and services

Situations where services at this level are relevant include where:

There is concern about a child's progress or wellbeing and the needs are either unclear or broader than one service can address. The child and family would benefit from a Team around the Family approach. The benefits might include all or some of the following:

- An opportunity to assess the strengths and needs of the whole family
- More robust ways of ensuring wrap around support for families compared with signposting / ordinary referral systems
- Being able to harness additional resources in a timely way

- Having a named Key Worker. Families greatly value having a key worker and research shows they have better relationships with a range of services, have higher morale and experience less isolation as a result
- Enabling work with the family to be planned, supported and reviewed in a more holistic and 'gripping' way

In addition to previously identified community services this may include TAF co-ordinators and support workers, and early intervention and support projects for families.

6.2 What is needed to make services at this level more successful?

The management team propose the following for further improvement:

- A clearer description of thresholds for services and referral / access arrangements / allocation protocols.
- Embedding of the 'everybody's business' TAF arrangements in localities across RCT.
- Services which are designed and specified with clearer evidence-based intervention methods.
- Better and clearer outcome-based interventions for families.
- Services which are targeted at families who most need early intervention.

7 Level 3(b) Intensive Intervention

7.1 Relevant needs and services

Situations where services at this level are relevant include where:

- The child and family have needs that are complex or entrenched requiring enhanced targeted support led by key workers and agencies with experience in working with families with complex needs – such as Action for Children or On Track
- A Team around the Family approach would be beneficial, including having a multi-agency plan of intervention and Key Worker
- A social care-led plan of intervention is not required for now but may be appropriate if needs or risk increase

In addition to previously identified services this may include intensive engagement from TAF co-ordinators and support workers, and more intensive or specialist community support services such as IFST, CAMHS, and other intensive family support or youth support projects.

7.2 What is needed to make services at this level more successful?

The management team propose the following for further improvement:

- Clearer descriptions of thresholds for services and referral / access arrangements / allocation protocols.
- Closer links and better information sharing between intensive intervention and remedial services.
- Better commissioning of intensive intervention services with clearer evidence bases for their interventions.
- More effective co-ordination of support for individual families between services.
- Sufficient high skilled intervention practitioners and more effective system co-ordination functions.

8 Level 4 Remedial Intervention

8.1 Relevant needs and services

Situations where services at this level are relevant include where:

- The child and family have complex or entrenched needs or problems that require or are likely to require a social care-led plan of intervention and some form of multi-agency remedy to those problems
- This group includes:
 - Children who require an assessment to determine whether or not they are a child in need including at risk of suffering significant harm
 - Children who have been assessed as being a child in need (of family support, a child protection plan, or being looked after)

Whilst it is important that remedial interventions are reserved for those who really need them, it should be recognised that the circumstances of children and families who fall into both levels 3 and 4 are often complex and can be difficult to ascertain on immediate presentation. Therefore, there needs to be a constructive approach and highly effective communication at the interface between social care services and early / intensive intervention services.

Services at this level include social work teams, child protection and safeguarding services, looked after teams and services, LAC education and health services, fostering and adoption and residential care services, leaving care support.

8.2 What is needed from services to make this level more successful

Plans for new arrangements are already being developed in a number of areas including:

- Multi-Agency Safeguarding Hub (MASH) and improved 'front door' arrangements.
- 16+ service.
- Improved early intervention and prevention arrangements at the interface between intensive and remedial services.
- Improved arrangements to promote workforce development and staff retention.

However, in addition to these, the management team propose the following for further improvement:

Clearer vision, boundaries and focus

- A clear, well-articulated vision for what the service is there for and the outcomes it wants to achieve.
- A more clearly defined thresholds framework including case examples and clear responsibility for delivery agreed by all agencies.
- Delivery of more intensive support to the most vulnerable families.

Stronger practice

- Social workers are enabled to make change happen for families and, more often, able to engage directly in working with families, rather than just assessing and monitoring support plans.
- Social work practice is under-pinned by evidence-based interventions that shape the way that social workers operate both in direct work and in their critical thinking and decision making.
- Social workers deliver evidence-based direct work and have the skills to engage children effectively.

More effective teams able to deliver better outcomes

- Teams are interdisciplinary and/or social workers have easy access to clinical and therapeutic support for families.
- Teams are organised in a way to make best use of skills and resources, and are clear about their specific role and how it fits within the overall framework of services.
- Social workers have access to high quality and flexible administrative support.
- Staff are well supported by colleagues but also challenged to develop multiple hypotheses and try new approaches when something isn't working.
- There is better joint working between social workers and clinicians, particularly mental health practitioners, and other partners.
- Teams share some responsibility for cases collectively, so they work together on a case where this is what is needed.
- Teams make best use of experienced people.

Better support

- Supervision and team meetings encourage social workers to reflect critically on cases develop alternative hypotheses and be open to multiple lines of enquiry.
- Managers and staff use data and quality assurance mechanisms to provide rich feedback which gets to the heart of the fundamental questions, 'are children being helped?' and 'are children safer?'
- All staff has good training in the organisation's practice theory, and in evidence-based techniques for direct work.
- The organisation makes best use of experienced workers.
- Managers and senior staff are involved in direct work and provide mentoring and coaching to staff on how to do this effectively.
- Work is done at the right level, with professional time focussed on intense work with the most vulnerable families, backed up by high quality administrative support.
- There is a clear approach to workforce analysis and development which encourages the recruitment and retention of the best possible staff.

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