

	London Borough of Hammersmith & Fulham CABINET 3 NOVEMBER 2014
FOCUS ON PRACTICE - INNOVATION FUND GRANT	
Report of the Cabinet Member for Children and Education - Councillor Sue Macmillan	
Open Report	
Classification - For Decision	
Key Decision: Yes	
Wards Affected: All	
Accountable Executive Director: Andrew Christie, Executive Director of Children's Services	
Report Author: Steve Miley, Director Family Services	Contact Details: Tel: 020 8753 2300 E-mail: steve.miley@lbhf.gov.uk

1. EXECUTIVE SUMMARY

- 1.1. Children's services has been successful in being awarded a £4m Innovation Grant from the DfE to transform interventions with families although total match funding of £1m is required (£0.33m for H&F). Hammersmith and Fulham Children's Services allocation will be approximately 38% of the £4m grant funding. The total funding award is for £1.5m to be spent in Year 1 (2014/15) and £2.5m in Year 2 (2015/16)
- 1.2. This report seeks agreement to how that grant is used; the broad proposals are to use this grant to strengthen our clinical practice with specialist therapists, to train social workers in evidence based methodologies and to reduce caseloads to allow for more intensive work with families.

2. RECOMMENDATIONS

- 2.1. To allocate up to £0.33m from the Invest to Save fund as H&F's match funding to the Innovation Fund Grant.

- 2.2. That agreement be given to the proposals outlined in the table in paragraph 5.2 of the report as to how this grant should be used.

3. REASONS FOR DECISION

- 3.1. The size of the grant (being over £100,000) requires Cabinet agreement to the expenditure.

4. INTRODUCTION AND BACKGROUND

- 4.1. It is recognised that in Family Services, despite a number of initiatives, practitioners continue to be constrained by bureaucratic processes, too much time spent at the computer and too little time spent on effective work with families. The role of case manager for social workers dominates in preference to direct and effective intervention. Too often we see our social workers in the role of watching and waiting with families, referring on to other teams or agencies, while they focus on assessment or planning but have neither the time nor the confidence to undertake the clinical and sophisticated interventions which would be most likely to help the family. We see practitioners who come into the profession with an ambition to make a real difference to children's lives, which is frustrated when they are not able to develop the expertise they need or develop trusted relationships with families.
- 4.2. A recent analysis of the histories of young people who came into care revealed that that often, families had been known to our departments over a period of years, but there was insufficient evidence of significant change despite repeated episodes of assessment and intervention. The findings from this analysis led us to think about how we might create a service where families are not 're-worked' over and over, but where the intervention is deeper, more intensive and able to help families to engage with our service in a meaningful way in order to make radical and sustained changes in their lives; and deliver significant savings in the process. There are too many repeat referrals, assessments, child protection plans and interventions which do not result in significant change, and which drive unnecessary costs. We need to get it right first time.
- 4.3. Changing the way we work with families will demand a whole system change. The ambition is to create a more effective children's social care service by developing the key elements as described in the paragraphs below.
- 4.4. The three key platforms of the new model are to create more **time** for practitioners to work with families, to develop their knowledge, confidence and **expertise** in order that they are more effective in creating change, and importantly, to change the **system conditions** which reinforce and steer practice.

- 4.5. The new model will enable practitioners to work intensively with families to solve problems and change behaviours, rather than referring out to others. This will involve a gradual reduction of caseloads; our ambition is that practitioners will work with five or six families at any one time, compared to current caseloads of 10-12 families across the Tri-borough.
- 4.6. By use of evidence based interventions and a more engaging approach, practitioners will develop relationships with families that enable them to build on their strengths. To enable this to happen, there will be delivery of comprehensive skills development programme incorporating: systemic practice; Signs of Safety approaches; Motivational Interviewing; and parenting programmes.
- 4.7. We plan to create built in learning mechanisms within the organisation, comprising a framework of observation, feedback and coaching to change practitioner behaviour and consolidate training.
- 4.8. The programme includes a tracking element enabling a more proactive approach with families, identifying those who would benefit from sustained help at key stages, for example, secondary school transfer, in order to reduce the number of teenage entrants to care.
- 4.9. There will be a career pathway for social workers who wish to remain in practice, whilst rising up the hierarchy and developing their expertise. As in other professions, doctors for example, we would expect to see practitioners in senior positions who are still working directly with families. In our current structure, social workers can only be promoted by giving up practice and becoming managers, who then only see families sporadically.
- 4.10. We want to see a proportionate time spent on paperwork and case recording and concise analytical reports and we have begun a pilot to reduce the requirements for detailed record keeping of every event, activity and conversation that take place with families and other professionals.
- 4.11. In each borough there will be a Head of Clinical Practice post, who supervises systemic family therapists working alongside social workers and other professionals. The postholder will teach, coach and also model systemic approaches through direct work with families.

5. PROPOSAL AND ISSUES

- 5.1. It is proposed the funding from the DfE will be used to fund start up and transition costs with ongoing expenditure covered by the projected savings. The DfE have agreed to fund full year costs in Year 1 and part year costs in Year 2. The additional costs for Year 2 will be provided from Tri-borough budgets using existing staff and redirection of current funding streams, for example, for training. The costs of the programme are

outlined in the table below.

- 5.2. Subsequent funding post year 2 will be through services delivered as a result of the programme; should the savings not be as great as expected then the programme will be scaled back accordingly.

MAXIMUM COST OF THE PROGRAMME	2014/15	2015/16
Project management	£41k	£70k
Training	£200k	£460k
External observation on quality of engagement and impact of training	£20k	£30k
Heads of Clinical Practice (3 posts)	£81k	£210k
Family therapists or psychologists (24 posts)	£400k	£1,080k
Tracking programme team (15 posts)	£309k	£530k
Career pathway for social workers	£100k	£200k
Transitional social work staff (24 posts)	£267k	£960k
Total funding request	£1,418k	£3,540k

The two key areas for saving expected from the programme are:

- 5.3. Key change 1: Stronger and more intensive relationships between social workers and families, and use of more effective interventions in all parts of the system will reduce the number of repeat referrals. This will lead to a predicted reduction in the referral rate from 20% to 10% (of cases closed in the previous 12 months). The Tri-borough receives an average of 4,000 referrals every year so if the programme is successful this will lead to a reduction in re-referrals of 460 per annum, with a knock-on effect of fewer assessments, fewer Child Protection Conferences, fewer Child Protection Plans, and reduced demand on early help and social care services.
- 5.4. Key change 2: More effective interventions at the assessment, Child Protection Plan and children in need stages will reduce the percentage of children being taken into care by 20% (60 per annum).
- 5.5. These predicted changes in volume equate to the savings outlined in the table below. The largest portion of the savings is from a reduction in placement costs. The smaller portion of the projected cost saving is a reduction in staff costs.

SAVINGS	2015/16	2016/17	2017/18	2018/19	2019/20
Placement cost savings	£0.68m	£1.35m	£2.03m	£2.70m	£2.70m
Staff cost savings	-	£0.25m	£0.70m	£1.50m	£1.50m
Total savings	£0.68m	£1.60m	£2.73m	£4.20m	£4.20m

- 5.6. The grant was awarded on the basis of these proposals and the sustainability of the project as outlined in the bid papers attached as an appendix.

6. CONSULTATION

- 6.1. Discussions with social workers and with families regarding their experience of receiving services informed these proposals.

7. EQUALITY IMPLICATIONS

- 7.1. It is not considered that the adjustments to budgets as a result of this grant will have an impact on one or more protected group so an EIA is not required.

8. LEGAL IMPLICATIONS

- 8.1. The ability of Children Services to reorganise and transform interventions with families is within their general power of competence [s1(1) of the Localism Act] and is consistent with the general function to deliver children services in accordance with the Local Authority Social Services Act 1970. There are no other direct legal implications of the Report.
- 8.2. Implications verified/completed by: (Jade Monroe, Senior Solicitor 0208 753 2695)

9. FINANCIAL AND RESOURCES IMPLICATIONS

- 9.1. The Bid to the Innovation Fund sets out as above the potential spend plan for Tri Borough Focus on Practice for the period to March 2015. Hammersmith and Fulham Children's Services allocation will be approximately 38% of the £4m grant funding. The application of £0.33m from the Invest to Save fund is the match-funding required to secure the Innovation Fund Grant and optimises the chances of delivering the department's financial plan over 2015-18.

- 9.2. The workforce strategy is currently being finalised and recruitment planned over the coming months. The financial profile and monitoring of the forecast will be via the Focus on Practice Board who will agree and manage the budget.
- 9.3. The forecast spend will be monitored and reported through the monthly departmental revenue monitoring report which will also be scrutinised by the Senior Leadership Team.
- 9.4. The savings above are currently estimates based on potential reductions in referrals and the number of children becoming looked after. Impacts on the number of referrals and LAC will be closely monitored as part of the project.
- 9.5. Implications verified/completed by: Caroline Osborne, Tri Borough Head of Finance, Family Services. Ext 1423.

10. RISK MANAGEMENT

- 10.1. The report recommendations contribute positively to the management of key risk number 6, Standards and Delivery of Care, on the Council’s Tri-borough risk register. The Bi-borough Risk Manager agrees that if the programme is successful this will lead to a reduction in re-referrals of, with a knock-on effect of fewer assessments, fewer Child Protection Conferences, fewer Child Protection Plans, and reduced demand on early help and social care services.
- 10.2. Implications completed by Michael Sloniowski Bi-borough Risk Manager ext. 2587.

11. PROCUREMENT AND IT STRATEGY IMPLICATIONS

- 11.1. *Not applicable.*

LOCAL GOVERNMENT ACT 2000
LIST OF BACKGROUND PAPERS USED IN PREPARING THIS REPORT

No.	Description of Background Papers	Name/Ext of holder of file/copy	Department/ Location
1.	None.	Steve Miley	Children's services

LIST OF APPENDICES:

Appendix 1 Innovation Fund Bid