

Committee Overview and Scrutiny Committee	Date 5 th May 2009	Classification Unrestricted	Report No.	Agenda Item No. 8.3
Report of: Lutfur Ali, Assistant Chief Executive		Title: <i>Early Intervention – Child Protection:</i> Report of the Scrutiny Working Group		
Originating Officer(s): Judith Colvin Scrutiny & Equalities		Ward(s) affected: All		

1. Summary

- 1.1 This report submits the report and recommendations of the Early Intervention – Child Protection Working Group for consideration by the Overview and Scrutiny Committee.

2. Recommendations

It is recommended that Overview and Scrutiny Committee:

- 2.1 Endorse the draft report.
- 2.2 That the Service Head for Scrutiny and Equality be authorised to agree final report before submission to Cabinet, after consultation with the Scrutiny Lead for Excellent Public Services.

LOCAL GOVERNMENT ACT, 1972 (AS AMENDED) SECTION 100D

LIST OF “BACKGROUND PAPERS” USED IN THE PREPARATION OF THIS REPORT

Background paper

Name and telephone number of and address where open to inspection

3. Background

- 3.1 The Working Group was established in August 2008 to review existing Early Intervention services, identify any gaps in existing provisions and explore the case for extending services to deliver greater value for money, improved access to services, and a more effective service for users.
- 3.2 The review had four main objectives:
- To investigate the level of need for Early Intervention and preventative services for Safeguarding Children.
 - To undertake a comprehensive value for money analysis of existing Early Intervention provisions.
 - To undertake comprehensive service mapping of existing Early Intervention services and identify any gaps in existing provisions.
 - To investigate the case for providing additional Early Intervention services and how this could add value.
- 3.3 The Working Group met five times to hear from Council Officers, the Police and the PCT, as well as hearing from a range of local practitioners who work with young people and their families. Working Group members also went out into the community to visit local practitioners and service users.
- 3.4 The report with recommendations is attached at Appendix A.
- 3.5 Once agreed, the Working Group's report and action plan will be submitted to Cabinet for a response to their recommendations.

4. Concurrent Report of the Assistant Chief Executive (Legal)

- 4.1 The Council is required by section 21 of the Local Government Act 2000 to have an overview and scrutiny committee and to have executive arrangements that ensure the committee has specified powers. Consistent with this obligation, Article 6 of the Council's Constitution provides that the Overview and Scrutiny Committee shall make reports and recommendations to the Full Council or the Executive in connection with the discharge of any functions. The attached report contains recommendations in relation to early intervention, child protection. It is open to the overview and scrutiny committee to agree the report for presentation to Cabinet.

5. Comments of the Chief Financial Officer

- 5.1 There are no specific financial implications emanating from this report.

6. One Tower Hamlets consideration

- 6.1 In meeting the first and third objectives of the review – to investigate levels of need and to undertake service mapping of existing provisions – the Working Group has been mindful of issues of race and religion/belief. This is because different racial and faith communities may have different needs, access to and experience of services.

- 6.2 Issues of gender have been a consideration under Recommendations 1 and 2, which relate to domestic violence, with the Working Group needing to consider the needs of predominately male perpetrators of domestic violence as well as predominately female victims.
- 6.3 Any examination of issues surrounding mental health carries with it important considerations of disabled members of the community and their access to and experience of services. The review sought to consider disability and improve access to services for these members of the community in Recommendations 4 and 6.

7. Risk Management

- 7.1 There are no direct risk management implications arising from the Working Group's report or recommendations.

Early Intervention – Child Protection

Report of the Scrutiny Working Group

Tower Hamlets Council
May 2009

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The Working Group would like to thank all Tower Hamlets officers and Partner agencies for their time and advice and all those residents and young people who made contributions and gave input into the review.

Chair's Foreword

To be completed.

Recommendations

- R1** That the Community Safety team in conjunction with Children's Services develops targeted services to work with families and perpetrators of domestic violence, particularly male perpetrators.
- R2** That the Community Safety team in conjunction with the Resident Social Landlord (RSL) forum and Tower Hamlets Homes explore options for using tenancy conditions to hold Domestic Violence perpetrators to account.
- R3** That the Community Safety team in conjunction with Children's Services and the Partnership give active consideration to publicising actions taken against perpetrators when safe to do so, through selection of appropriate cases.
- R4** That a piece of work is undertaken by Children's Social Care and the Domestic Violence team to chart the links between Domestic Violence and children's services in the borough.
- R5** That the Partnership explores ways in which support to parents with mental health problems could be increased.
- R6** That Adults' Health and Wellbeing in conjunction with Children's Services undertake an audit of cases in which an adult receives services from the Community Mental Health Team (CMHT) and where no referral was made to Children's Social Care.
- R7** That a review is undertaken on how the needs of children from CMHT areas not covered by a Children's and Adult Mental Health (CHAMP) worker can be addressed using a similar model, within budgetary constraints.
- R8** That further analysis be undertaken to identify how the needs of parents with substance misuse problems can be targeted. Further to this, funding will need to be identified to allow increased support is available to vulnerable parents.
- R9** That the Council works with partner agencies to ensure the successful launch and management of the ContactPoint system to provide a more effective early intervention service.
- R10** That Children's Services in conjunction with the Partnership further develops localisation of services through clarifying pathways between delivery and local centres and extended schools, and the wider integrated front door.

- R11 That Children's Services work with Children's Centres and other key partners to explore development of a model to have a designated lead professional for families, allowing them one point of contact amongst the many professionals that may be working in partnership.**
- R12 That Children's Services work alongside the Communications team to be more proactive in identifying and publicising good practice from both statutory social care services and other partner agencies in protecting vulnerable children.**
- R13 That the Children's Services, and particularly Children's Social Care, work with Members to explore ways of further involving Members in the overview and audit of safeguarding work.**
- R14 That the Excellent Public Services Scrutiny Lead should undertake a further piece of work in 2009/10 which focuses more explicitly on value for money and improved service outcomes, and how this message can be delivered effectively to the community.**

Introduction

- 1 The proportion of young people under 19 living in Tower Hamlets is markedly higher than the inner London average, at 24% of the total population. 70% of the under 19 population are from ethnic minority communities, with over 90 different languages spoken. In 2004, almost half (47%) of children in the borough lived in a household receiving benefits, and the proportion of children and young people receiving free school meals is nearly four times the national average. Combined with the fact that Tower Hamlets has the fastest growing children's population in Europe, more children than ever are set to come through Children's Services in future years. This means Children's Services needs to be thinking constantly about how to deliver better outcomes for families. Undoubtedly, this will have to be done against a background of tighter public spending. Therefore delivering high quality services which also provide value for money will therefore become even more important in future years.
- 2 In July 2008, the Scrutiny Lead for Excellent Public Services identified early intervention services relating to Children's Social Care as a priority area for review, given the high and growing workload of the service, and the excellent potential early intervention work has both in heightening outcomes for service users and providing value for money.
- 3 Revelations in November 2008 surrounding the 'Baby P' case in the London Borough of Haringey exploded interest in this subject, with the Working Group ('the Group') finding itself focusing on an issue at the forefront of national concern. The field now looks set to have changed irreversibly, with Children's Social Care services in the midst of a changing policy context and under an intense media spotlight.
- 4 The Group was established in September 2008 to review the Council's existing early intervention services in relation to Child Protection and explore the case for extending services from a value for money and customer service perspective. The membership of the Group was politically balanced, comprised of 7 councillors, and was chaired by Councillor Bill Turner.
- 5 The review had four main objectives:
 - To investigate the level of need for Early Intervention and preventative services for Safeguarding Children.
 - To undertake a comprehensive value for money analysis of existing Early Intervention provisions.
 - To undertake comprehensive service mapping of existing Early Intervention services and identify any gaps in existing provisions.
 - To investigate the case for providing additional Early Intervention services and how this could add value.

- 6 The nature of this review meant much attention was focused specifically on the work of our Children's Social Care (CSC) team. Group members were keen to contextualise in relation to other partners in the borough and the approach of neighbouring boroughs. The Group agreed the following timetable and methodology:

Introductory Meeting (October 2008)

- Agree scoping document
- Briefing from CSC and discussion – introduction to topic and work of team, investigation of Child Protection needs in the Borough

Site visits – Duty teams and Children's Centres (December 2008)

- Investigate current practice and gain an idea of challenges on the ground.

Value for Money analysis (December 2008)

- Briefing from CSC and discussion – value for money analysis of current early intervention services and their outcomes for service users.

Focus group with practitioners (January 2008)

- Round table discussion with officers (Children's Services, Community Safety and Adult's Health and Wellbeing) and partners (Police, East London NHS Foundation Trust, Extended schools, headteachers, CSC) to hear about local experiences.

Spotlight on domestic violence and parental mental health (March 2009)

- A later addition to the work programme, to give additional focus on the local domestic violence and parental mental health context, including service responses and evidence-based options in relation to potential interventions. Both were felt to be areas needing extra attention due to their importance to the recommendations in the Group's final report.

- 7 The review sought to understand the value of existing early intervention services relating to the field of Children's Social Care and to produce recommendations that ensure excellent value for money and optimum outcomes for service users, highlighting good practice both in this borough and elsewhere. The key aim of the Group is to make policy recommendations that support service improvement.
- 8 The Overview and Scrutiny Committee will consider the Group's report and recommendations. It will then be submitted to Cabinet for a response and action plan.

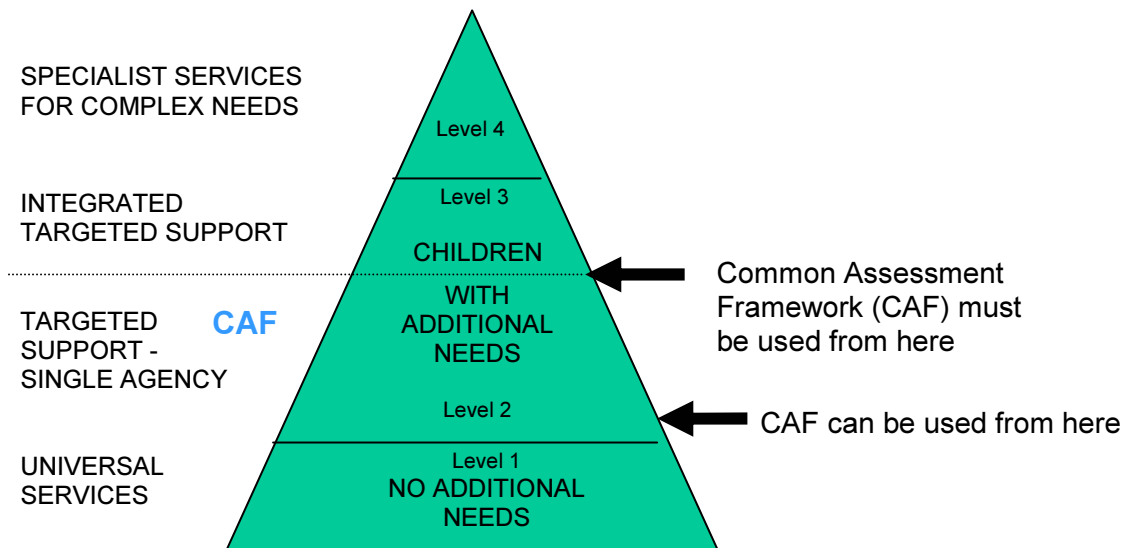
Findings

Background

Definition of Early Intervention

- 9 Early Intervention is a term that eludes exact definition or classification. In its widest sense, 'early intervention' classifies any action that looks to identify problems early and intervene before the potential of the problem is realised, with the aim of producing a positive outcome instead. Early Intervention in relation to children in Tower Hamlets can thus potentially cover such diverse services as the Nurse-Family Partnership, the Family Intervention Project and Warrior Women Personal Safety Training.
- 10 Not only can early intervention potentially cover a host of different services, it can also cover a range of different timings of interventions. Figure 1 illustrates the various levels of a child's need, ranging from "Universal" (Level 1) to "Specialist" (Level 4). This continuum of need highlights the varying service responses required to address different levels of need:

Figure 1: Triangle of support



- 11 An immediate problem for the Group and an important conceptual foundation was thus the establishment of a definition of early intervention used for this review.

- 12 The definition of early intervention as adopted by the Wave Trust¹ is instructive here – early intervention is distinguished against primary prevention, where the latter refers to activity “designed to stop a predicted impairment to a child’s health or development before it occurs”. This covers such services as the Nurse-Family Partnership and perinatal care for pregnant women. By contrast, early intervention is defined as starting when the signs of impairment become apparent.²
- 13 In the initial scoping document, it was felt that the Group would be able to take a wider focus, and also look at early intervention from the universal level – supporting families before the need for a referral to CSC (from level 1 to 2). Inevitably however not all issues could be considered within the timescale available. Thus whilst the Group received evidence on early intervention from a range of perspectives and outcomes, it has needed to be selective for the purposes of maintaining a manageable focus for the review.
- 14 Therefore the Group defined early intervention as specifically those actions at the targeted end of the needs spectrum (levels 2 and 3). Essentially, this means those interventions that can help a troubled family whose problems are already known to service providers avoid crossing the threshold for statutory intervention. Another important qualification is the Group’s specific focus on the child protection context. Whilst early intervention can relate to a range of potential outcomes such as truancy, psychological illness, teenage pregnancy, delinquency, social deprivation – the Group’s attention has been specifically focused on interventions around avoiding a child needing to be taken into care. This social care context was felt to be particularly important due to the high cost and questionable outcomes for children and families of statutory interventions, and mirrors the Council’s aspiration to do everything it can for families to secure successful outcomes long before any statutory need arises.

National Policy

- 15 The Every Child Matters: Change for Children Programme underlines as one of its five key priorities that children ‘Stay Safe’. As an umbrella term, this means ensuring that families, parents and carers provide safe homes and stability for children. In its ‘Staying Safe Action Plan’, the government outlines the key commitments it will be taking forward over

¹ The Wave Trust is an international charity committed to reducing child abuse and interpersonal violence through understanding root causes, and the Trust has undertaken over ten years of global research. The Trust was commissioned by Tower Hamlets to produce ‘Early Intervention and Primary Prevention in Tower Hamlets’ – a discussion document’ - a research project that was conducted for the Borough between November 2007 and May 2008.

² Definition from ‘Early Intervention and Primary Prevention in Tower Hamlets’, p. 8.

the current Comprehensive Spending Review period (April 2008 - March 2011) to improve children and young people's safety. These include raising awareness of and promoting understanding of safeguarding issues, and ensuring this work is coherent and effectively coordinated across government. These objectives are reflected at a local level through the National Indicators Set (NIS) for Local Government. There are 16 indicators in the NIS relating to children and young people's safety.

- 16 Sections 10 – 11 Children Act 2004 impose a duty of cooperation between Children's Services authorities and other partners. The aspiration for children's social services is to provide an 'integrated front door'. This means providing integrated services and referral mechanisms across a range of partner agencies, to respond to issues in children's social care earlier. It is hoped that this 'integrated front door' can provide an effective interface between early intervention and statutory CSC involvement, and will ensure that families are responded to appropriately commensurate with the level of the child's needs.
- 17 The aspiration of the 'integrated front door' and 'back door' is that families can be supported without the need for ongoing or episodic CSC involvement, and is a key priority in terms of improving efficiency and outcomes for service users. The aspirations of the 'integrated front door' are to maximise both the effectiveness of Children's Services and improve customer access to them, and therefore form key considerations in the recommendations of this review.
- 18 The Common Assessment Framework (CAF) is a tool designed by the Government to support practitioners as part of the Every Child Matters agenda. The CAF aims to ensure that every young person receives the services they need at the earliest opportunity, through providing a standardised process for undertaking a common assessment. The aspiration is that, by supporting practitioners in identifying and meeting children's needs earlier, the CAF will act as a vehicle through which to inform referrals to CSC, and eventually will lead to a reduction in referrals. The CAF was rolled out across the Borough in July 2007.
- 19 Events in Haringey surrounding the Baby P case, which unfolded during the course of this review, have dramatically altered the landscape for practitioners. The sad circumstances of the Baby P case identified the crucial importance of effective partnership working and communication amongst agencies to secure the safety of children, and the grave consequences when these systems fail. National scrutiny has now been turned firmly on social workers and local authorities, providing a challenging and potentially hostile context for safeguarding work.

The Tower Hamlets context

- 20 The 2008 Joint Area Review (JAR) of Children and Young Peoples' services found Safeguarding to be 'good' overall, with Early Intervention and preventative services praised for offering a wide range of effective support. As detailed in the Children's and Young People's Plan, the local vision is that:

"we want our children and young people to grow up free from harm, fear and prejudice. This means ensuring that children are effectively safeguarded from the risk of harm and neglect, reducing the involvement of young people in crime, both as victim and perpetrator, and protecting young people from bullying and harassment".³

- 21 In 2005, Tower Hamlets was awarded Beacon status for our innovative work around Early Intervention – Children at Risk. Key factors described as underpinning the authority's success in this Beacon round were a clear focus on outcomes, strong partnership working through the Social Inclusion Panel and Local Strategic Partnership, and a commitment to inclusion and innovation.⁴
- 22 Although the Council has continued to achieve considerable success in the field of early intervention, officers and Councillors recognise that there are still important possibilities for improvement. The Council is firmly committed to improving outcomes for all Tower Hamlets children, particularly those who are vulnerable and who are often a hidden section of the community. The aspiration is that we raise our goals even further and to develop innovative, proactive and effective approaches.

Levels of need

Workload of the Children's Social Care team/forecasting

- 23 The Group heard compelling evidence that the CSC team is experiencing a high and sharply increasing workload.
- 24 In the past two years there has been a significant rise in referral activity – in 2007/8, a rise of 38.5% was recorded, and trends from 08/09 suggest this activity is being maintained. In response to the queries of Group members, one explanation offered was the heightened awareness of partners and the community of Child Protection issues and the need to intervene earlier by referring to CSC. The reclassification of thresholds relating to domestic violence, from neglect to emotional harm, was also

³ Children and Young People's Plan (CYPP) 2009 – 12

⁴ Tower Hamlets Beacon Submission – Early Intervention: Children at Risk (2005).

suggested as a reason for the particular increase in domestic violence referrals.

- 25 Figure 2 gives a snapshot comparison of increased demands on the CSC team between 2006 and 2008. In 2007/8, there were 300% more initial assessments made by CSC than in 2006/7, with the number of core assessments undertaken also rising by 59% in the same period. There has been a significant rise in child protection activity relating to section 47 enquiries started,⁵ and high referral figures have been exacerbated by a 44% rise between 2006/7 and 2007/8. Trends for 2008/09 suggest that the rise in referrals, completion rates for Initial Assessments and Core Assessments, and numbers children in need of a Child Protection Plan will all be maintained, if not exceeded.⁶

Figure 2 - Interim Data Comparison (1.4 – 31.03)

Year	No of referrals	Total number of Initial Assessments completed	Total number of Core Assessment completed	Total number of £47 enquiries	Total no of children in need of a Child Protection Plan at the end of the reporting year
2006/07	1794	707	601	233	189
2007/8	2582	2564	956	324	234

- 26 It was envisaged that the CAF will better inform referrals to CSC, and in some cases eliminate the need for them where no child protection needs exist and support can be provided by partners working together. It is evident however that the role-out of the CAF has not yet led to a reduction of referrals. As identified in the JAR, there is a need for some developmental work to support the use of the CAF.
- 27 The impact on CSC is increasing workload and complexity for front line teams in terms of assessment activity and strategy discussions. The service is also experiencing a bottle-neck in transferring cases from Assessment to Fieldwork teams. Whilst the high level of referrals is being maintained, and CAF making little tangible reduction to referrals, the rate of work coming into CSC is not being matched by the volume of work going out. What this means is that there is a greater volume of work being maintained by CSC teams.

⁵ Where an initial assessment indicates a child is suspected to be suffering, or is likely to suffer, significant harm. local authorities are obliged under s47 of the Children's Act 1989 to make enquiries so as to determine whether or not they need to take action to safeguard the child.

⁶ Cabinet Budget 2009/2010 Document Pack (Wednesday 11th February 2009), Appendix E2 'Children's Fieldwork Budget', pp. 74 – 79.

- 28 Baby P has exacerbated these figures, leading to a pronounced increase in referrals to CSC. In recognition of this, in April 2009 the Cabinet adopted proposals from Lord Laming's report into child protection, limiting the maximum caseload of social workers. Combining increased public attention with predictions of an even larger children's population in Tower Hamlets over the next decade, current projections forecast a sharply increasing workload for CSC in the next few years.

Value for money

Costs versus outcomes

- 29 In analysing the value for money of Early Intervention it is impossible to give clear and incontrovertible evidence about what would have happened if these arrangements had not been in place. It has therefore been a key conceptual challenge in presenting evidence for this review to understand how various different costings can be used to give such an analysis.
- 30 The value of Early Intervention needs to be considered from the perspective of outcomes achieved for the children and families involved – a cost analysis means little if it is not supported by evidence that interventions are securing the best possible outcomes for the community. This consideration of cost versus outcomes is key to the review's definition of what value for money constitutes, and forms the crux of the framework around which value for money will be investigated.
- 31 The general principle that it is not only important, but crucial to intervene early in securing the five Every Child Matters outcomes for children is well-documented. Analysis shows that early intervention can be highly cost-effective,⁷ and MacLeod and Nelson (2000), build upon this premise with the summary observation that "the earlier the intervention the better".⁸ By intervening earlier and strengthening protective services, the number of children requiring the support of CSC services should be reduced. The aspiration is to maximise the services at an earlier stage and reduce referrals, thereby allowing CSC to focus on the statutory functions.

International research

- 32 There is a wealth of international evidence posing the value for money case for early intervention such as Head Start (USA), Triple P and Sure

⁷ LBTH Family Support and Parental Engagement Strategy, 2007 – 8, pp. 5 – 6.

⁸ Wave report, p. 8.

Start Family Programmes. Family-Nurse Partnership (USA) and Head Start give particularly strong evidence of the value for money case – families where intervention is delivered early have much lower costs in the long-term.

- 33 As an example Head Start, upon which the UK Sure Start programme is based, is a child development programme with the overall goal of increasing the school readiness of young children in low-income families. Returning to our definitions of early intervention (point 11 above), Head Start, which caters for families with children from three to school age, can be described as early intervention, as opposed to Early Head Start, which is aimed at families with infants and toddlers, and pregnant women, and thus is better described as primary prevention. Having run since 1965, the project has attracted long-term research into outcomes and gives us clear messages about the value for money case of early intervention.
- 34 Overall it has been found that the benefits of Head Start amount to between \$2.50 and \$10 for each \$1 invested. This cost finding can be accounted for in various ways. Olds (1993)⁹ found that home visiting paid itself back within 4 years, with the next 11 years of home visiting thereafter, before the child reaches adulthood, amounting to clear gain in financial terms and social benefits for both the individual child and the wider community. In a similar fashion, it has been found that parenting training proved highly cost effective in reducing crime, as it has proven to be much cheaper than teenage supervision or prison.
- 35 In a similar fashion, it has been found that parenting training proved highly cost effective in reducing crime, with parenting training proving much cheaper than teenage supervision or prison.

Local evidence

- 36 To help measure value for money the Group was given a number of different costing measures to gain an insight into the local context.
- 37 **COSTING EXAMPLE 1: Helping a family avoid eviction for ASB**
- Intervention 1: Solution Focused brief therapy (through Educational Psychologists in Children's Centres) costs on average £550 per family.
 - Intervention 2: Strengthening Families Strengthening Communities costs £684 per participant

⁹ David L Olds et al, Effect of prenatal and infancy nurse home visitation on government spending, Medical Care 31:2, pp. 155 – 174.

- Intervention 3: Family Intervention Programme (FIP) costs approximately £10,000 per family. So far no family on the FIP programme has been evicted from their home.
- Housing an evicted family costs £300 per week/at least £15,600 a year.
- Whilst none of these interventions is guaranteed to stop ASB and consequent evictions, families have reported that interventions have made a positive difference to their lives.

COSTING EXAMPLE 2: Cost of looking after children

- Average unit cost for a looked after child – £969 per week.
 - This excludes social worker and administration time, the cost of preparing a report, supervising the social worker costs and managing the independent review process.
 - In total, unit costs tend to be far in excess of £1,000 per week.
 - In Tower Hamlets there is a growing proportion of looked after children who are adolescents.
 - Research has indicated poorer outcomes for looked after children in adolescence, in terms of educational attainment, mental health problems, crime and teenage pregnancies.
 - Implication – taking children into care is a very costly intervention that struggles to deliver real benefits and thus emphasising the importance of intervening earlier.
- 38 Whilst the general principle that intervening earlier provides value for money and better outcomes was proved, it was brought to the Group's attention that the rise in activity within CSC, as described above at points 24 – 9, has occurred in a context of zero changes to CSC frontline resources. A FTE (full time equivalent) social worker with experience costs the borough £46,687 per year. Currently there are 69 baseline social work posts delivering services to 1627 children, a ratio felt by CSC to be unsustainable in light of static resourcing to the service.
- 39 Overall, the Group heard tangible evidence that intervening early – i.e. before the need to take children into care arises – is both cost effective, and produces better outcomes. The Group heard of the importance of supporting children at pre-school age, as intervening late is more costly and does not deliver better outcomes. In the medium term, there is a need to develop further capacity around hard to reach, complex families to prevent the need for highly expensive specialist services. This means developing capacity at the specialist and more targeted ends of the needs spectrum. It was this need that the Group focused on in formulating the recommendations of this report.
- 40 The Group welcomed the Cabinet's decision to invest a further £661,000 into CSC this year, in recognition of sharply increasing demands on the service.

Service mapping

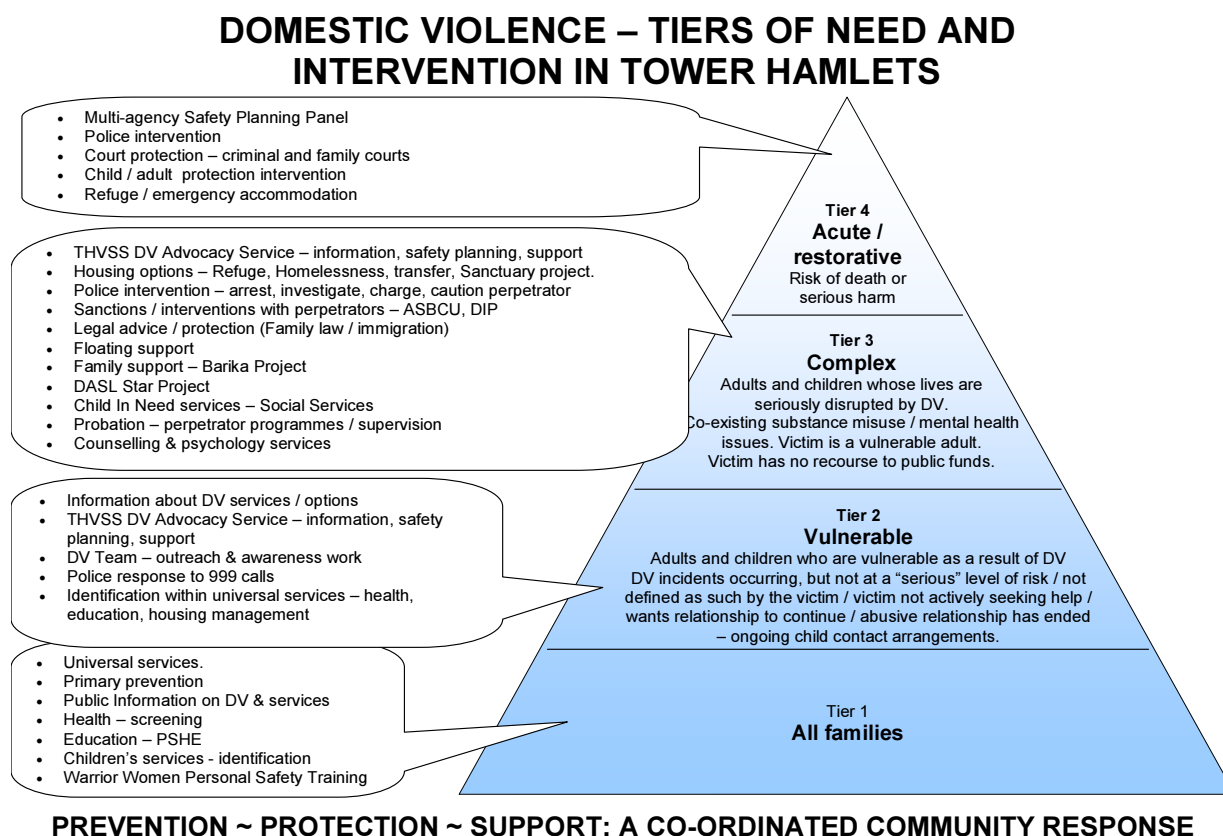
- 41 A consistent theme raised throughout the review was that better linkages need to be made between the CSC team and a number of key services areas, and how this could help to improve the efficiency and effectiveness of services to children and families.

Domestic Violence

- 42 The Group heard on a number of occasions compelling evidence that there has been a sharp rise in numbers of referrals to CSC linked to domestic violence. Child protection cases involving domestic violence are also on the increase. According to practitioners' knowledge, the Group also heard that there may be an underestimation in the statistics of children living with domestic violence.
- 43 The "Co-ordinated Community Response" is an umbrella term for actions aimed to prevent domestic violence and reduce the harm it causes by
- increasing safe choices for adults and children
 - holding perpetrators to account, beyond the police response
 - reducing social tolerance of domestic violence and challenging inaction by individuals and agencies.

A summary of current interventions is summarised in Figure 3 below:

Figure 3 – Tiers of need and intervention to domestic violence in Tower Hamlets



- 44 As the figure indicates, currently there is a lot of work being undertaken in the Borough. However the Group repeatedly heard that there is more we could be doing to provide targeted service to children living in families suffering domestic violence, as well as to domestic violence perpetrators.
- 45 Working with the male perpetrators of domestic violence was identified as an area worthy of special attention. The Group heard from officers that the idea of taking the, often male, perpetrator out of the home is not always the best solution. However offering services to male perpetrators of domestic violence is a gap in our current provision. This was further highlighted in both the practitioner focus group and the session on domestic violence. Members agreed they would like to see an appropriate perpetrator programme established for violent men, but believed that the primary beneficiaries of such a programme should be children.

Recommendation

- R1 That the Council develops targeted services to work with families and perpetrators of domestic violence, particularly male perpetrators.

- 46 Members were particularly interested in the links between social tenancies and Domestic Violence convictions, and heard evidence that male perpetrators will often remain in the home once a female victim has left for her own safety. Members voiced concerns about the equity of this situation and suggested that in the case of criminal action being taken against a perpetrator of Domestic Violence, landlords should consider action against the perpetrator.
- 47 The Group accepts that this is a complex area of policy, in that evicting a domestic violence perpetrator may lead to undesirable consequences such as re-offending. The Group is keen that this area is explored more fully so that the potential of using tenancy conditions to hold Domestic Violence perpetrators to account is understood more completely.
- 48 The Group is also keen that the potential benefit of publicising actions taken against perpetrators is explored. This again is a complex issue, given the risk of a whole family being identified through publicising the perpetrator. Members are keen that the potential benefit in sending the message to all potential perpetrators that their behaviour will not be tolerated is explored further, mindful of the impact on children and families.

Recommendations

- R2 That the Community Safety team in conjunction with the Resident Social Landlord (RSL) forum and Tower Hamlets Homes explore options for using tenancy conditions to hold Domestic Violence perpetrators to account.

R3 That the Community Safety team in conjunction with Children's Services and the Partnership give active consideration to publicising actions taken against perpetrators when safe to do so, through selection of appropriate cases.

49 The map of contact points between the CSC team and the Domestic Violence team is growing more complex due to changes in guidelines and proliferation of services. A constant theme throughout the review was the importance of partnership links. It is crucial for CSC and Domestic Violence services to be able to locate related services and maintain a working relationship with them so that referrals and partnership working can be successfully managed.

Recommendation

R4 That a piece of work is undertaken by Children's Social Care and the Domestic Violence team to chart the links between Domestic Violence and children's services in the borough.

Parental Mental Health issues

50 The Group heard that a high proportion of parents of looked after children have a history of substance abuse, mental health problems and/or domestic violence issues. Nationally, the proportion of adult mental health service users who have children under the age of 18 is estimated at between 25 and 50 per cent.¹⁰ In Tower Hamlets, the proportion was found to be between 30 and 35 per cent, or approximately 600 children. Practitioners in Children's Centres in the Borough also commented that they witnessed a high proportion of cases involving parental mental health issues.

51 Children living with a parent with mental health problems are affected in a variety of ways, and exposed to a catalogue of risks including: behavioural problems, physical health risk, psychological health risk, academic underachievement, dysfunctional social relationships and bullying. Members of the Group expressed concerns, based on their own knowledge, that the numbers of children living with a parent with mental illness are greatly underestimated.

52 For this reason, the interface between Adults' Health and Wellbeing and CSC is important, to ensure that practitioners in both fields feel confident about handling cases where there are both adult mental health needs and related child protection issues. A key element in strengthening this

¹⁰ Gopfert et al, 1996; Falkov, 1998.

interface involves ongoing work on the formulation of protocols between Adults' Services and Children's Services, and once agreed, ensuring they are embedded robustly in each service.

- 53 It is estimated that 6 per cent of parents of looked after children have a history of mental health issues, which is believed to be a conservative estimate. Given that the annual cost of housing a child in an independent residential placement has been calculated at £114,000, an important value for money argument can be made for extending services to families where parents have a mental health issue, long before the need to take a child into care arises.

Recommendation

- R5 That the Council explores ways support to parents with mental health problems could be increased.

- 54 At the focus group session, mental health professionals in Adult's Health and Wellbeing described the difficulty of balancing the welfare of the adult – their primary professional consideration – with concerns about the welfare of children. Having a dedicated Children's and Adult Mental Health worker (CHAMP) within mental health teams has proved a success, affording more confidence to practitioners in addressing the needs of children living with adults with mental illness, and a better service for the children themselves. Activities undertaken by the CHAMP worker include:

- direct work with children;
- liaison with schools and CSC;
- arranging holiday provision for children;
- engaging families with outside agencies working with children

Practitioners advocated strongly that the number of CHAMP workers be increased to allow this work to be extended.

- 55 Members were impressed by the CHAMP model of working and suggested that further strengthening of the interface between Adult's Mental Health services and CSC is undertaken, particularly in relation to the Community Mental Health Teams (CMHTs). Members considered examples when an adult receives services from the CMHT but there is no referral to CSC. They questioned the safety of this response.

Recommendations

- R6 That Adults' Health and Wellbeing in conjunction with Children's Services undertake an audit of cases in which an adult receives services from the CMHT and where no referral was made to Children's Social Care.

R7 That a review is undertaken on how the needs of children from CMHT areas not covered by a Children's and Adult Mental Health (CHAMP) worker can be addressed using a similar model, within budgetary constraints.

Parental substance abuse issues

- 56 The Group heard that a high proportion of parents of looked after children have a history of substance abuse, mental health problems and/or domestic violence issues.
- 57 Whilst the Drug and Alcohol Action Team is very active locally, a gap in service provision was identified by the CSC team relating to services supporting children in families where there is a history of substance misuse. Currently, there is only one such pilot programme in operation – AdAction. The Group also heard evidence that working relationships between agencies could be strengthened.
- 58 Intervening earlier where substance misuse issues are prevalent has an important value for money angle. Support can be given before a statutory need arises, and therefore avoid the need for ongoing or repeated CSC involvement. In Tower Hamlets 11 per cent of parents of looked after children have a history of substance misuse, and we know that the annual cost of housing a child in an independent residential placement has been calculated at £114,000. This poses a persuasive value for money case in extending support services for parents with substance misuse problems.

Recommendation

R8 That further analysis be undertaken to identify how the needs of parents with substance misuse problems can be targeted. Further to this, funding will need to be identified to allow increased support is available to vulnerable parents.

The relationship between Children's Social Care, the Council, and wider partners

Information systems

- 59 At the practitioner focus group, the Group heard about how communication issues were central to the success of partnership

working. A particular barrier to fluent communication was identified in the workings of the IT systems between different agencies. For example, health professionals cannot access case files on central systems if they are not registered as a London Borough of Tower Hamlets worker. It was suggested that different database and information systems in use by the Council and its partner agencies be charted, and continuing attention be given to how these could be better integrated.

- 60 Whilst aware of the importance of data protection and confidentiality, Members feel that consideration of appropriate access requirements and information sharing arrangements needs to be given, both for the safety of children and to minimise duplication and time wastage for busy staff. Improving the efficiency of service delivery in this way also has an important value for money benefit, in ensuring efficient use of resources and optimum use of valuable practitioner time.
- 61 The Group learnt about Contact Point – an online directory that will be introduced next year in Tower Hamlets – that will make it quick and easy to find out who else is working with the same child or young person, making it easier to deliver more coordinated support. Contact Point is known to be an effective system and should greatly aid the fluency of communication between agencies. For this reason it is important that all partners are signed up to this directory, which will improve information sharing and knowledge, and ultimately work towards securing better outcomes for children in the Borough.

Recommendation

- R9 That the Council works with partner agencies to ensure the successful launch and management of the Contact Point system to provide a more effective early intervention service.

Customer Service and the Integrated front door

- 62 A key concern of the Group has been how services can be delivered more efficiently and cost-effectively through intervening earlier and improving partnership working. These considerations have led the Group to consider what increased efficiency looks like from a customer service perspective, and how the 'integrated front door' could be implemented successfully in practice.
- 63 At the practitioner focus group it was generally felt that cluster working is positive and should be continued. A community base for services would be more productive rather than having them centralised. It was also suggested that the integrated front door could take the form of a local one-stop shop, where families could access a range of support services

from one base. This could really help develop relationship between the various agencies and the clients. Issues around co-location were discussed and it was felt that this was neither feasible nor practicable – rather practitioners should work from local centres to deliver to families. Extended schools would be the ideal local centres from which to deliver these services, as long as they are well-resourced.

Recommendation

R10 That the Children’s Services in conjunction with the Tower Hamlets Partnership further develops localisation of services through clarifying pathways between delivery and local centres and extended schools, and the wider integrated front door.

- 64 At many points during the review it was highlighted that the success of interventions depends on the strength of relationships built with families. As child protection issues are never just about the children themselves, but children who are living within troubled families, engaging adults is crucial to secure good outcomes for the children involved.
- 65 Often if the case is complex there will be many professionals involved. Having one lead contact for the family would not only simplify matters from the service user perspective but would improve communication and help foster a relationship of trust.
- 66 Similar to other London boroughs, Tower Hamlets is experiencing challenges relating to recruiting and retaining high quality staff. Partners raised concerns about how to address continuity issues arising from the frequent turn-over of social workers. Having one lead professional would help manage any change-over in case workers, particularly from the point of view of the families involved.
- 67 Whilst the CAF is being rolled out, there is also still a need to support professionals within ‘Teams Around the Child’ and multi-agency working teams, and having a designated lead professional would assist in providing support.

Recommendation

R11 That Children’s Services work with Children’s Centres and other key partners to explore development of a model to have a designated lead professional for families, allowing them one point of contact amongst the many professionals that may be working in partnership.

Communication

- 68 Members considered that excellent work is done with vulnerable children and families, both by statutory social care services and other partner agencies. Given the current climate following the Baby P case, there has been a proliferation of negative and hostile of stories in the local and national media about social workers. Members believe the Council could be trying to do more to celebrate the achievements of our safeguarding work. Greater recognition would raise the morale of staff, provide more reassurance to families and service users, and reassure the wider community of the quality of our local service.

Recommendation

- R12 That the Children's Services work with Communications to be more proactive in identifying and publicising excellent practice from both statutory social care services and other partner agencies in protecting vulnerable children.

Role of Members

- 69 Members were generally supportive of the Corporate Parenting Steering Group, but noted that there is no comparable unit which oversees and audits safeguarding work more generally, especially with regard to children who are subject to Child Protection plans. Whilst aware that this is a particularly sensitive and confidential area of the Council's work, Group members felt that greater Member oversight and scrutiny of this work could be taking place.
- 70 In April 2009 the Cabinet, in consideration of the Safeguarding Children's Board Annual Report 08/09 and Lord Laming's report into child protection, enthusiastically supported proposals for more training for members in Children's Safeguarding, and for an enhanced role for councillors in scrutiny of this work.

Recommendation

- R13 That the Children's Services, and particularly Children's Social Care, work with Members to explore ways of further involving Members in the overview and audit of safeguarding work.

- 71 Members particularly welcomed the opportunity this review afforded to consider value for money in key Council services, given that these considerations are at the core of resident satisfaction. Members considered that this element of the scrutiny review process could be

extended, to help develop a better understanding of the relationship between value for money and improved service delivery – and particularly how this issue could be communicated clearly to residents. This area of work would clearly sit within the remit of the Scrutiny Lead for Excellent Public Services.

Recommendation

R14 That the Excellent Public Services Scrutiny Lead should undertake a further piece of work in 2009/10 which focuses more explicitly on value for money and improved service outcomes, and how this message can be delivered effectively to the community.

Conclusions

- 67 The Group welcomed the timeliness of this review, given the current climate and the strong pressures being placed on councils across the country to review their safeguarding arrangements.
- 68 Members found that there were already numerous examples of excellent practice both within the Council and across partner agencies, and applauded the dedication of officers in earning Tower Hamlets its reputation for innovation and excellence in this field.
- 69 Members gained a strong impression of the crucial importance of the interfaces between services, given that Child Protection issues concern not just the child themselves, but families as well. Whilst much of the strategic thinking concerning early intervention, partnership working and the integrated front door are well-developed, the challenge remains in constantly shaping these concepts into tangible realities. The strategic coordination of services is still one of the key challenges, and the majority of the recommendations arising from the review look to address these challenges. As ever, strengthening and developing real and effective partnerships will be crucial to our future success.

Scrutiny and Equalities in Tower Hamlets

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