

# People Scrutiny Commission

## Agenda



**Date:** Monday, 14 October 2019

**Time:** 5.00 pm

**Venue:** Room 1P06, City Hall, College Green, Bristol,  
BS1 5TR

### **Distribution:**

**Councillors:** Claire Hiscott (Chair), Eleanor Combley, Jude English, Paul Goggin, Carole Johnson, Gill Kirk, Brenda Massey, Celia Phipps, Ruth Pickersgill, Steve Smith, Tim Kent, Judith Brown and Roger White

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**Date:** Friday, 4 October 2019



# Agenda

## 1. Welcome, Introduction and Safety Information

5.00 pm

(Pages 4 - 5)

## 2. Apologies for Absence and Substitutions

## 3. Declarations of Interest

To note any declarations of interest from the Councillors. They are asked to indicate the relevant agenda item, the nature of the interest and in particular whether it is a disclosable pecuniary interest.

Any declaration of interest made at the meeting which is not on the register of interests should be notified to the Monitoring Officer for inclusion.

## 4. Minutes of Previous Meeting

To agree the minutes of the previous meeting as a correct record.

(Pages 6 - 27)

## 5. Chair's Business

To note any announcements from the Chair

## 6. Public Forum

Up to 30 minutes is allowed for this item.

Any member of the public or Councillor may participate in Public Forum. The detailed arrangements for so doing are set out in the Public Information Sheet at the back of this agenda. Public Forum items should be emailed to [democratic.services@bristol.gov.uk](mailto:democratic.services@bristol.gov.uk) and please note that the following deadlines will apply in relation to this meeting:-

**Questions** - Written questions must be received 3 clear working days prior to the meeting. For this meeting, this means that your question(s) must be received in this office at the latest by **5 pm on Tuesday 8<sup>th</sup> October**.

**Petitions and Statements** - Petitions and statements must be received on the working day prior to the meeting. For this meeting this means that your submission must be received in this office at the latest by **12.00 noon on Friday 11<sup>th</sup> October**.



**7. Risk Report**

**(Pages 28 - 36)**

**8. Performance Report**

**(Pages 37 - 47)**

**9. SEND Standing Item**

To follow

**10. Contextual Safeguarding**

**(Pages 48 - 52)**

**11. Strengthening Families Programme**

**(Pages 53 - 80)**



# Public Information Sheet

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(Access to Information) Act 1985

You can find papers for all our meetings on our website at [www.bristol.gov.uk](http://www.bristol.gov.uk).

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## Public Forum

Members of the public may make a written statement ask a question or present a petition to most meetings. Your statement or question will be sent to the Committee and be available in the meeting room one hour before the meeting. Please submit it to [democratic.services@bristol.gov.uk](mailto:democratic.services@bristol.gov.uk) or Democratic Services Section, City Hall, College Green, Bristol BS1 5UY. The following requirements apply:

- The statement is received no later than **12.00 noon on the working day before the meeting** and is about a matter which is the responsibility of the committee concerned.
- The question is received no later than **three clear working days before the meeting**.

Any statement submitted should be no longer than one side of A4 paper. If the statement is longer than this, then for reasons of cost, only the first sheet will be copied and made available at the meeting. For copyright reasons, we are unable to reproduce or publish newspaper or magazine articles that may be attached to statements.

By participating in public forum business, we will assume that you have consented to your name and the details of your submission being recorded and circulated to the committee. This information will also be made available at the meeting to which it relates and placed in the official minute book as a public record (available from Democratic Services).

We will try to remove personal information such as contact details. However, because of time constraints we cannot guarantee this, and you may therefore wish to consider if your statement

contains information that you would prefer not to be in the public domain. Public Forum statements will not be posted on the council's website. Other committee papers may be placed on the council's website and information in them may be searchable on the internet.

### **Process during the meeting:**

- Public Forum is normally one of the first items on the agenda, although statements and petitions that relate to specific items on the agenda may be taken just before the item concerned.
- There will be no debate on statements or petitions.
- The Chair will call each submission in turn. When you are invited to speak, please make sure that your presentation focuses on the key issues that you would like Members to consider. This will have the greatest impact.
- Your time allocation may have to be strictly limited if there are a lot of submissions.
- If there are a large number of submissions on one matter a representative may be requested to speak on the groups behalf.
- If you do not attend or speak at the meeting at which your public forum submission is being taken your statement will be noted by Members.

### Webcasting/ Recording of meetings

Members of the public attending meetings or taking part in Public forum are advised that all Full Council and Cabinet meetings and some other committee meetings are now filmed for live or subsequent broadcast via the council's [webcasting pages](#). The whole of the meeting is filmed (except where there are confidential or exempt items) and the footage will be available for two years. If you ask a question or make a representation, then you are likely to be filmed and will be deemed to have given your consent to this. If you do not wish to be filmed you need to make yourself known to the webcasting staff. However, the Openness of Local Government Bodies Regulations 2014 now means that persons attending meetings may take photographs, film and audio record the proceedings and report on the meeting (Oral commentary is not permitted during the meeting as it would be disruptive). Members of the public should therefore be aware that they may be filmed by others attending and that is not within the council's control.



**Bristol City Council**  
**Minutes of the People Scrutiny Commission**

**18 July 2019 at 2.00 pm**



**Members Present:-**

**Councillors:** Claire Hiscott (Chair), Eleanor Combley, Paul Goggin, Carole Johnson, Gill Kirk, Brenda Massey, Celia Phipps, Steve Smith and Harriet Clough

**1. Welcome, Introduction and Safety Information**

In lieu of an elected Chair, the Scrutiny Adviser welcomes everyone to the meeting.

**2. Annual Business Report**

**RESOLVED:** Cllr Hiscott Elected as Chair – Nominated by Cllr Brenda Massey and seconded by Cllr Steven Smith

**REVOLED:** Cllr Phipps elected as vice chair — Nominated by Cllr Brenda Massey and seconded by Cllr Eleanor Combley

**RESOLVED:** ToR noted

**RESOLVED:** Commission Members noted

**RESOLVED:** Meeting dates confirmed

**3. Apologies for Absence and Substitutions**

Apologies have been received from the following Commission Members: Cllr Jude English, Cllr Tim Kent and Cllr Pickersgill.

Cllr Harriet Clough is substituting for Cllr Tim Kent.



#### 4. Declarations of Interest

Cllr Clough declared that she is an Adult Social Care service user.

#### 5. Work Programme

**Resolved:** The work programme is noted.

#### 6. Minutes of Previous Meeting

**Resolved:** The Minutes of the last meeting are agreed as an accurate reflection of the meeting.

#### 7. Chair's Business

No Chairs Business

#### 8. Public Forum

##### Public Question

	Name	Title
PQ01	Sally Kent	Where will these children be placed?

##### Public statements

Ref No	Name	Title
PSO 1	Sara Stocks	SEND Strategy



PSO 2	Jen Smith	SEND Strategy
PSO 3	Fiona Castle	SEND Strategy
PSO 4	Sidney Smith	SEND Strategy
PSO 5	Nick Flaherty, Bristol Parent Carers	SEND Strategy
PSO 6	Nura Aabe	Final Amended EHC Plan

**Public Question:**

Where will these children be placed?

**PQ01**

**Submitted by:** Sally Kent

**Topic:** SEND

There are 558 EHC plans currently waiting to be finalised by Bristol SEN department. Statistically 42% of children with plans in Bristol are in special schools. Bristol Special schools are full.

Going by Bristol statistics, 42% of those 558 plans will need a special placement.

Where will these children be placed?

**ANSWER**

**Subject: EHC Plans**





There are 558 EHC plans currently waiting to be finalised by Bristol SEN department. Statistically 42% of children with plans in Bristol are in special schools. Bristol Special schools are full, Local Independent special schools are also full

Going by the Bristol statistics, 42% of those 558 plans will need a special placement.

What plans does the Mayor have in place to ensure that ALL children with SEND in Bristol will have a school place to attend when their plan is finalised?

**Suggested points:**

- There is pressure for places in special schools, as with mainstream schools
- Schools in both categories have been asked to take extra pupils, and have done so
- Many authorities share this experience; for special schools there has not been a regular allocation of capital to provide the expansion needed to reflect growing demand
- Bristol City Council has addressed this with proposals in its recent cabinet report setting out a capital strategy for SEND
- Cabinet agreed investment of over £10m on projects starting this summer and for further reports to flesh out an long term strategy to ensure sufficiency of special places



- A new special school in South Gloucestershire is expected to provide 80 places for Bristol in 2021.
- The cabinet report acknowledged that we have EHCP pupils - the number as of last month was 62 (of c.2800) - in Alternative Provision, and we need to address that (as many LAs do)
- The director has personally involved himself in cases in order to achieve resolution

### **Additional information**

Cabinet agreed to proceed with work commencing in the summer holiday on The Keep at Kingsweston to ensure sustainable provision there, at KnowleDGE to provide post-16 accommodation (40 new places) and free up space for pre-16, and to commence planning work looking at the future of Claremont and Elmfield schools. Annex 4 to the report contained information on several other projects for the medium to long term.

The 42% figure of special/mainstream EHCP placement looks accurate.

However we do not recognise the 558 figure. I am advised that we have 84 plans currently waiting to be finalised. It might be that the 500 number relates to plans awaiting annual review processing, of which the great majority would not involve a placement change.

**Prepared by:** Alan Stubbersfield

**Signed off by:** Alan Stubbersfield



**Public Statement:**

**PS01**

**Submitted by:** Sara Stocks

**Topic:** SEND Strategy

1) As a parent of a child who has been unlawfully denied appropriate education throughout KS3 when such education was entirely the responsibility of the LA, I would say that the draft SEND strategy is a whitewash, a political sop, an attempt to ignore the lived experiences of parents unfortunate enough to have been dealing with a failing SEN department for several years and evidence of an ongoing fundamental unwillingness to accept the facts of the current dire situation.

2) A non-exhaustive list of the key issues with the report are as follows:

I. Adopted children should have been included in the LAC calculation following their legal inclusion in the remit of the virtual school. They are twenty times more likely to need EHCP support than non-LAC or PLAC children and as such are uniquely vulnerable when systems such as this fail them.

II. Your achievement targets perpetuate the myth that all learning difficulties are cognitive. As you know, there are some very bright children with EHCP support and so these attainment targets are nothing to be proud of. To people who understand the real-world impact of these assumptions they are further proof of the shockingly low standards that are accepted on behalf of this cohort of children.

III. The absence figures are startling and not explained. For a clear picture of the numbers of children not being educated by Bristol LA the numbers of children 'awaiting placement' or 'off rolled' should be included and the number of children home educated not by choice. This would probably double the already high figures you present.

IV. It is not clear what 'very low' means but the exclusion figures for children with



EHCPs should be zero. It is illegal to exclude a child for exhibiting behaviour that has been identified as giving rise to an SEN on their EHCP. In addition these figures by definition do not include the many hundreds of children who are simply 'sent home' on a regular basis without official exclusions being completed.

V. I would be interested to know how the 'development' of children with EHCPs was measured when a vanishingly small number of them had reviews on time and the vast majority have languished unnoticed by the SEN team throughout the past three years.

3) Furthermore, the glossed over and painfully optimistic draft report does not acknowledge any responsibility for or consequences from the illegal transferring of funds out of the SEN budget in recent years when this has beyond any doubt contributed to the terrible mess that the SEN department finds itself in. The backlog is now the worst in the country and there is no apparent learning from this debacle.

4) One of the most pressing problems that Bristol has is the lack of secondary SEN places, particularly for children with ASD and associated difficulties. This situation was forecast at least as long ago as 2015 and should have been part of a forward planning strategy. It wasn't and now there is a further wave of primary children due to move to secondary school in the next few years for whom there is still no planning or provision. This report offers no solutions to that.

5) The report also makes it evident that there is little or no understanding of how the systems within the department are contributing to its continuing inability to meet its legal requirements to monitor and provide for children with SEN in Bristol. Another non-exhaustive overview of some of the system failings that are not recognised in the draft report but that are very clear to me and have cost my child years of education is as follows.

I. Cases are left unassigned for a long period of time. The system that is currently



used for record keeping and data management does not notify a named person of upcoming dates and deadlines and if a case is unassigned the child will languish unmonitored until a parent or other person manages to notify the department.

II. Notifying the department of anything is extraordinarily difficult. The team have been told not to answer the phone when they are busy, and emails routinely go unanswered for weeks and months.

III. The system does not track cases adequately. Key events such as exclusions, formal complaints, emails from parents, requests of help from schools do not form part of the narrative that the SEN team have access to. Each of these (and there are many more) indicators of potential failure of provision provide an opportunity to address an issue early on and each time that opportunity is lost. Each time a parent calls the department they must start their story from the beginning. Put simply the department is simply not monitoring the provision that they are responsible for.

IV. If a key worker is assigned and begins to understand a case all of their notes and understanding are lost if they move jobs or even roles. There is no evidence of case worker notes being attached to the narrative to make it possible for someone coming new to the case to pick it up and manage it effectively, if at all.

V. The culture that has grown out of the failure to support or monitor is one of continual firefighting. This requires parents who need support for their child to light a bigger fire than the other parents in the system in order to be noticed. The tribunal figures therefore soar. Simply putting out the bigger fires does not address the fundamental root issue of failure to monitor EHCPs adequately.

6) I would therefore like you to be aware that in my opinion this report does not acknowledge any of the above difficulties and is therefore worse than not fit for purpose. It is dishonest and unrealistic.

### **Public Statement:**



**PS02**

**Submitted by:** Jen Smith

**Topic:** SEND Strategy

The new Bristol Send strategy, says it will support and empower disabled young people and those with Send to reach their full potential.

One of the ways this will be achieved is through Respect – treating the young people and their parents and carers with value and respect.

The plan is full of the same insincere wishy washy hogwash of the One City Plan with which it is aligned.

It is all well and good to sit with these documents and believe that Send in Bristol is in hand. It is not and this document will not help. Bristol needs a cultural change in perception about children with Send from the top down. The contempt with which these children are treated in this city by some schools, services and teams supposed to meet their needs is a disgrace.

I'm telling you from a year of experience, a year of dealing directly with the people who will be making this plan functional is that some treat us appallingly. Some lie. Some deliberately withhold services which would enable children to attend education. Some deliberately give misleading and false information. And some fail to commission the special school places we need.

Nothing will change with this strategy until every individual, manager and leader within every service has been told that it is all their individual and collective responsibilities to uphold equality laws.

**Public Statement:**

**PS03**



**Submitted by:** Fiona Castle

**Topic:** SEND Strategy

I have an 8 year old Autistic son. He has significant Speech and Language issues, social communication and Sensory Processing difficulties and is behind academically.

In October 2018, we applied to Bristol City Council for an EHCP needs assessment for him. The request was denied and we went to Mediation with the Council at the end of January.

The high ranking Council official sent to Mediation was dismissive of our concerns for our son. She would not consider a needs assessment, because the school were not spending the full £6000 of their allocated SEN funding. The school in turn refused to spend more money to meet my son's needs, because the SEN budget is notional and they can spend it however they see fit.

The Council official offered us access to services such as Occupational Therapy and Bristol Autism Team. I have since discovered that we were already eligible for these services, due to being turned down for the needs assessment.

Part of the legal mediation agreement with the Council, included a review by an Educational Psychologist. This review still has not occurred and we have now spent £1500 on a Private EP assessment.

Upon appeal to the tribunal service, our request for a needs assessment has been upheld, but at time of writing, this process has yet to begin, almost 2 months after the tribunal's decision. We are now 9 months into a process that should have taken 6 weeks.

The Council is spending money on SEND services and producing strategy documents such as the one being presented here today, in an attempt to convince everyone involved with SEND that the Council wants to do better.



However, doing better isn't enough. The Council requires a seismic shift in attitude to recognise its legal responsibilities. Change in SEND governance should not be about meeting targets and passing public scrutiny. It should be about a genuine desire to improve the lives of SEND children and their families. I don't believe this is a commitment the Council is anywhere near achieving.

**Public Statement:**

**PS04**

**Submitted by:** Sidney Smith

**Topic:** SEND Strategy

My school attendance is a shocking level. It is 35 per cent at the moment.

I should not have missed this much education due to Send and school places.

We are trying to get a place at a special school but I don't have one due to the lack of places.

The council knew this was going to happen and took no action.

My EHCP isn't fully done. We are on Week 43 and we would have had this done ages ago if the council actually did their jobs properly.

I haven't been going to Cotham School due to people bullying me due to my disability.

Not much support was put in place and they got it all wrong. Then they tried, but now I don't go to school at all because I feel like I can't do it.





There's no one there to help me go there and I find transport is a hard situation from home to school.

The noise level and people bumping into me it triggers me and when I get to school I feel unable to go in because of all the issues I've had on my way.

I'm missing the education I rightfully deserve.

**Public Statement:**

**PS05**

**Submitted by:** Nick Flaherty, Bristol Parent Carers

**Topic:** SEND Strategy

Bristol Parent Carers welcomes the regular inclusion of SEND in the People's Scrutiny Committee and the Health and Wellbeing Board. We reiterate our position stated in the Self Evaluation Framework that confidence of parent carers in the education process is extremely low and urgent action has been necessary for many months.

We highlight that the recovery plan announced in June, while very welcome, is a temporary measure to March 2020. We call on the Scrutiny Committee to support moves to enable long term, sustainable, effective provision for children and young people with SEND in Bristol and their families.

We welcome the proposal for the initial funding of the 14+ Transition team to March 2020 and note that this proposal only addresses a proportion of young people that require support. We look forward to seeing a sustainable, effective service supporting all young people with SEND to achieve their full potential into adulthood.

We also welcome the announcement of an independent review into SEND in Bristol. As highlighted by the co-chair of the National Network of Parent Carer Forums, Mrunal Sisodia, at the recent NASEN (National Association of Special Educational



Needs) conference, co-production of sustainable, effective services requires that a local area meets its statutory duties. While the draft SEND strategy is a starting point, governance of SEND is still weak, and a clear commitment to an effective SEND strategy is essential.

Providing sustainable, effective services also requires an effective recruitment, retention and training programme for staff across Bristol that has the needs of the children, young people and their parent carers at the heart. We look forward to seeing significant commitment to supporting children and young people and their families more effectively in the coming months, and regular oversight of the improvement and recovery process.

**Public Statement:**

**PS06**

**Submitted by:** Nura Aabe

**Topic:** Final Amended EHC Plan

Further to Judicial Review pre-action protocol communications, Bristol City Council issued the final amended EHC plan for [REDACTED] on 15 July 2019. The local authority is reminded that this should have been issued within at least 5 months before the transfer between one post 16 institution and another post-16 institution in accordance with SEN Regulation 18(2). This would mean that [REDACTED]'s final amended EHC plan should have been issued no later than the 31 March 2019.

We appreciate that the Local Authority have amended the EHC plan in accordance with proposed amendments contained within a letter to [REDACTED] dated 14 June 2019. However, the final amended EHC plan does not address any of the concerns relating to the need for specification and quantification and there are further amendments not addressed. The Local Authority is aware that Section F of the EHCP "should specify clearly the provision necessary to meet the needs of the child. It should detail appropriate provision to meet each identified need".



The examples of the failure to adequately specify and quantify provision are detailed below as per the letter dated 14 June 2019

- a) Support for ■■■ to increase his independence in social thinking (i.e. thinking for himself about social behaviours, choices and impacts) – what support?
- b) Support to increase his independent use of language and use of accepted language structure – what support?
- c) Support to develop and use strategies that will help him recall words more easily. To reduce his tendency to use prompts to guess what he is expected to say – what support?
- d) Support to develop his understanding and use of vocabulary to support readiness for 2 key word joining and working towards 3 key word joining – what support?
- e) Regular support to refocus in order to remain settled and socially engaged – what is meant by regular support?
- f) Support to becoming more independent in recognising and recalling safety precautions and to temper his actions accordingly – what support?
- g) Support to build a greater awareness of more complex social relationships and the differences between them - what support?
- h) Support to add and understanding the use of future tense to his vocabulary and consolidating present and past present – what support?
- i) Support to extend his ability to retain and recall multiple, related pieces of information including multi-step instructions to follow in sequence. – what support?
- j) Support to Improve pronunciation further and relating this to phonics/reading skills. – what support?



k) Support to improve his verbal sentence structure to more frequently include the correct joiners and tense, etc and to consider and moderate his volume, tone and proximity to others according to the social situation. – what support?

l) Support to extend his learning to cross over experiential as well as desk-based work and to practice recalling each through the other to build a more rounded understanding of the subject. – what support?

m) Support to remember safety rules and guidelines, why we have them and how to follow them. – what support?

n) Support to develop appropriate relationships e.g. personal space, greeting/shaking hands. ■■■ needs regular reminders of social rules i.e. keeping personal space, in order to redirect his behaviour. – what support?

o) Support to recognise ‘why’ he and others prefer one thing over another. – what support?

p) Support with recognising, anticipating and testing cause and effect in a range of settings. – what support?

q) Support with recognising and communicating his feelings about certain things at the time they occur more readily and with a clearer sense of how to do this effectively and appropriately. – what support?

r) Support with recognising and communicating his feelings about certain things at the time they occur more readily and with a clearer sense of how to do this effectively and appropriately. – what support?

s) Support with recalling and recording social and emotional experiences on paper and ICT through a range of means/methods to build an understanding of social



conventions on which he can draw in daily life with greater independence and consistency.– what support?

t) He needs to develop his understanding of signals from people of when they are uncomfortable with the intensity of his apparent motivations – and how to respond to this – what provision is going to be put in place to ensure he develops these skills?

u) “A Mathematics programme...” – the duration and frequency of the programme must be specified and quantified

v) “Modified or specialist learning materials and equipment to meet his sensory needs” – what materials and equipment?

w) “Evidence-based strategies and advice regarding approaches to foster independent living skills” – what does this mean in terms of provision for

x) “Being more conscious of his responsibility to his peers and his environment and resisting urges to effect things negatively (e.g. break branches, flowers or hurt people out of a desire to have contact with them” – What is the provision, this is an identified need

y) “Building a stronger connection between his observations in the moment and appropriate responses to his environment and being able to express this process to another person” – what is the provision to achieve this?

z) “An individually managed programme using a functional analysis approach” - the duration and frequency of the programme must be specified and quantified

aa) “A life skills programme...” the duration and frequency of the programme must be specified and quantified

ab) “frequent help in practical lessons and with the manipulation of tools and



equipment” – what does ‘frequent’ mean?

ac) “Programmes to help him learn about choosing health eating options and choosing appropriate foods when shopping” – what programmes, the duration and frequency of the programme must be specified and quantified

ad) “Regular monitoring of [REDACTED] blood sugar levels to support his functioning and regulating of his arousal levels”. – needs to be amended in terms of what is ‘regular’ and that the hospital will guide this.

ae) “Support for [REDACTED] to choose and eat a range of different foods including high protein foods to help [REDACTED] feel fuller for longer to help level out blood sugar level (Taken from Annual Review and OT report)” – the support needs to be specified from the hospital dietician.

af) Support to with increasing his independence around his diabetes, including recognising his own symptoms and the subsequent need for food and drink intake; when, how much, etc. Communicating and recording this with staff to support a clear transfer of responsibility towards independence. Using a written record including working on improving the reading and tracking of the time of day to promote agreed times to check as well as what to do for each level range. – what support, updated advice is needed from the hospital, school nurse and SALT

ag) “Support with improving focus and reducing distractibility further through some light sensory work and attention, memory development work” – what support, this needs occupational therapy to update this provision.

Furthermore, as previously mentioned a pre-action letter was served on the council on 9 May to challenge Bristol Council over the failure of the council to comply with statutory timescales and causing delay by unlawful process with regards to an EHC plan review for [REDACTED]. Following the review meeting the notice of the decision should have been given by 28 February 2019. The Council, had it done so, would have been



able to provide a draft amendment notice and a final amended EHC plan before the 31 March 2019, giving our client ample time to lodge an appeal with respect to any disagreements.

Due to the delays caused as indicated above, the final amended EHCP has been issued naming [REDACTED] and that The Local Authority considers that [REDACTED] needs can be met within a mainstream Further Education provision with additional support from September 2019.

As part of the pre-action process my colleague [REDACTED] informed [REDACTED] on 3 June 2019 that the offer of a place at [REDACTED] was in fact provided to the council on 24 May 2019. My colleague reiterated at this point the urgency of the situation with respect to this being a transition situation with regards to September and needed to be resolved speedily.

The Local Authority were further informed of the parental decision to name [REDACTED] in Section I and the offer of a placement in our email to [REDACTED] dated 14 June 2019.

It is evident that the Local Authority knew full well by 14 June that it would not agree to a placement at [REDACTED] and this could have been notified there and then and an appeal lodged without yet further delay with further amendments.

This has caused a further 4-week delay to proceedings and the situation now is that any appeal lodged this week, will undoubtedly have a final hearing date of late October/early November and therefore [REDACTED] will be without a suitable placement come September 2019, due entirely to the Local Authority's failures including repeated breaches of statutory provisions under the SEN Regulations and without due regard to public sector equality duties under s.149 Equality Act 2010.

There has been no communication whatsoever between [REDACTED] and our client. [REDACTED] has not been for – or invited to - an interview at [REDACTED]



██████████.

The Local Authority's express assertion that his needs can be met within a mainstream further education provision are unsupported. There is no rational basis that has been disclosed that supports the notion that suitable provision is available at ██████████. All advice from professionals has indicated that ██████ needs continued access to specialist post 19 provision.

In all the circumstances the Local Authority should immediately review its position, withdraw its proposal of ██████████, and agree to placement at ██████ ██████ forthwith to ensure that ██████ can commence there in September.

## 9. Performance Report

Report presented by Officer detailing performance statistics for the quarter four 2018/2019. The report highlights that opiate use is a concern in the City, particularly in Older people. The Life expectancy of woman is also dropping slightly which the Officer confirms is a reflection of the National picture. South Children services caseloads are also a concern and additional resources have been assigned to tackle this.

## 10 SEND Strategy

The report was presented by an Officer and explains that the SEND strategy is a high level strategic document with several documents sitting underneath it with practical measures to implement the strategy. The Officer confirms that the Action plan will be published next term.

Using the extra funding that Cabinet approved on July 5<sup>th</sup> 2019, additional caseworkers and educational psychologists are being recruited. Teams within the department are working to detailed plans which aim to improve the quality of work, and create a system which parents do not have to fight against. SEND will be on the Cabinet agenda again in October 2019 with a greater monetary





ask and more detail about how the service will be improved. Officers are accountable to the Cabinet Members and they will be justify any extra funding will be well spent. The Officer acknowledges that they are starting from a very low baseline, however states that improvements are already underway for example three months ago there were 100 assessments not assigned to an educational psychiatrist and now there is zero.

In response to concerns about the statistics regarding school attendance and fixed term exclusions, the Officer informs that a new Schools Strategy is being developed. This Strategy will seek to improve the overall quality of schools which will in turn improve the quality of special education needs provisions within schools. It is a priority to upskill mainstream schools giving schools ownership of all their pupils. A Toolkit has also been developed around attendance giving schools practical tips and the ability to share best practice.

The Officer acknowledged that it is possible that families are not always being informed of all the suitable services that are available to them. With regards to the influence the Council have over Academies to improve their SEND provision, the Officer reports that the new OFSTED framework will provide an element of leverage and inclusion with respects to SEND practices.

Members of the Commission expressed concerns that the style of the document does not reflect the discussion taking place and that they have greater confidence in the strategy following this discussion. The Officer informs the Commission that the strategy has been developed through the Local Area Strategic SEND Partnership (LASPAG) and forming a strategy by committee has had its challenges however the end result is a document which the whole partnership has ownership of and is committed to delivering.

## **11 Transition Support for Disabled Young People**

The Officer presented a report outlining a new Pathway model from Childhood to Adulthood for people with additional needs. Significant effort has been put



into driving the voice of child as oppose to parental preference. Additional resources have been allocated and this has been used to upskill existing staff, concentrating on early intervention and a new team working with teenagers 14+. This shift has been (and continues to be) a cultural change incorporating more integrated ways of working.

Currently there are five young people placed out of County. These are young people with complex needs and Bristol currently does not have the resources to place them. The team are looking at different ways Bristol can meet the needs for these placements.

It is planned that young people will be moving into the new Seamills Centre in March 2020. Discussions are taking place regarding mixed developments in the South. The Commission welcomes the innovative and child centred approach of the team.

#### **12 Better Lives (focus on under 65's)**

A Report is presented by the Officer outlining the work taking place on the Adults under 65 project within the Better Lives Programme.

Extra care housing has been a successful model however focus now needs to shift to tackling intergenerational living and complex needs for all ages. Housing benefit levels around city have had a negative impact on ability to support supported living in city,

When questioned by a Commission Member about the £14.50 'Bristol Price' for care, Officers explain that they have been open and transparent with the market and in return, providers agreed to open their books to BCC which has left the Officers confident that the market can bare £14.50.

The Commissions led innovative approach outlined in the report and discussed today is commended by the Commission.



Meeting ended at 4.30 pm

**CHAIR** \_\_\_\_\_



# People Scrutiny Commission

14<sup>th</sup> October 2019



**Report of:** Jacqui Jensen

**Title:** Executive Director: People

**Ward:** City-wide

**Officer Presenting Report:** Jacqui Jensen

**Contact Telephone Number:** 0117 357 6390

## Recommendation

To consider and note the latest review of the People Directorate Risk Report and summary risks escalated to the Corporate Risk Report and to comment on any areas of interest.

## Summary

The risks defined in this report are those captured by the services within the People Directorate, namely Adults Social Care, Children and Families Services, Education and Skills and Public Health

The following represent the most significant areas of risk for the People Directorate as at Q1 2019/20 June 2019:

1. Better Lives Programme
2. Safeguarding Vulnerable Children
3. Safeguarding Vulnerable Adults

These remain unchanged from Q4 2018/19 including risk level.



## 1. Policy

- 1.1. The Audit Committee is responsible for providing independent assurance to the Council regarding the effectiveness of its strategic risk management arrangements. The Council has a Risk Management Policy which requires strategic risks to the Council, and details of how they are managed, to be recorded in the form of the Corporate Risk Report and Directorate Risk Report.
- 1.2. The Corporate Risk Report is scrutinised by Audit Committee on a six monthly basis. It was agreed at Overview and Scrutiny Management Board that the Directorate Risk Report will also be scrutinised on a six monthly basis by the Directorate Scrutiny committees. In addition, they will also be provided to Audit Committee once each year, for information only to provide Audit Committee with assurance that Directorate Risk Reports are in place and effectively scrutinised.

## 2. Risk Management and the Corporate Risk Report (CRR)

- 1.3. As part of good governance, the Council manages and maintains a register of its significant risks assigning named individuals as responsible officers for ensuring the risks and their treatment measures are monitored and effectively managed.
- 1.4. The Corporate Risk Report (CRR) is a critical tool for capturing and reporting on risk activity, the organisations risk profile and an integral element of the Council's internal governance and performance frameworks. The Service Risk Registers (SRR) are working documents and the data within the register is used to inform the business of the threats and opportunities it faces in delivering outcomes and services to the Council forming the Directorate Risk Reports (DRR) and the Corporate Risk Report (CRR). It is used to ensure the organisation operates effectively and Leadership Teams take assurance that all necessary steps are being taken to ensure the risks are managed to a level acceptable to them. The CRR was last reported to Cabinet on 3rd September 2019.

## 3. Consultation

- a. **Internal** - First to fourth tier managers, People Leadership Team, Corporate Leadership Team, Cabinet Member for Adult Social Care, Cabinet Member Children, Women and Families, Cabinet Member Education & Skills, Cabinet Member Public Health
- b. **External** - None

## 4. The People Directorate Risk Report (summary of risks)

- 4.1. The People DRR informs the council of significant risks to the achievement of the Directorates objectives to ensure it is anticipating and managing key risks to optimise the achievement of the council's objectives and prioritise actions for managing those risks. The DRR provides assurance to management and Members that the Directorate's significant risks have been identified and arrangements are in place to manage those risks within the tolerance levels agreed.
- 4.2. The DRR is an important tool in managing risk. It aims to provide an overview of the significant risks facing the Directorate and how they are being managed. The People DRR attached to this report at Appendix A is the latest formal iteration following a review by members of the People leadership team (EDM) 13<sup>th</sup> February and Corporate Leadership Board (CLB) 26<sup>th</sup> March 2019. The risk review has included managers from across the Council.

- 4.3. The Directorate reports biannually to Members, ensuring that they are aware of the significant critical and high level risks facing the Directorate and how the Council is ensuring these risks are effectively managed.
- 4.4. As strategic planning, resource management and resilience processes are strengthened; the identification, management and communication of risk to the achievement of the Council’s strategic priorities and objectives will continue to embed.
- 4.5. The DRR was developed following:
- Risk identification and assignment of a risk owner who is responsible to ensure each risk is effectively managed; current mitigations and further actions to ensure the risk is identified and interventions planned,
  - Review by EDM to ensure risk levels are correctly identified; and target risk levels where stated are acceptable.
- 4.6. The DRR is presented in the standard format agreed by CLB and uses the risk management methodology set out in the risk management policy agreed by Cabinet in January 2019.
- 4.7. Pages 5 and 6 to Appendix A sets out the risk matrix, guidance parameters used to measure impact and likelihood and the supporting scoring criteria and will assist Members in understanding the risk levels recorded in the register.
- 4.8. The DRR sets out the significant critical and high rated risks. All other business risks reside on the Service Risk Register (SRR). The DRR as January 2018 contains: No Critical risks and 3 high risks. A summary of the progress of risk for this reporting period is set out below.
- 4.9. The following paragraphs summarise the key changes to the People Directorate Risk Report since its last presentation:

All identified risks were reviewed in light of the revised scoring and set the performance for future reviews. All risks on the DRR have management actions in place. The DRR is currently subject to a refresh during 2019/20.

As with all risks, it is not possible to eliminate the potential of failure entirely without significant financial and social costs. The challenge is to make every reasonable effort to mitigate and manage risks effectively, and where failure occurs, to learn and improve.

Further details are contained in Appendix A

## **5. Public Sector Equality Duties**

- 5a) Before making a decision, section 149 Equality Act 2010 requires that each decision-maker considers the need to promote equality for persons with the following “protected characteristics”: age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation. Each decision-maker must, therefore, have due regard to the need to:
- i) Eliminate discrimination, harassment, victimisation and any other conduct prohibited under the Equality Act 2010.
  - ii) Advance equality of opportunity between persons who share a relevant protected

characteristic and those who do not share it. This involves having due regard, in particular, to the need to --

- remove or minimise disadvantage suffered by persons who share a relevant protected characteristic;
  - take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of people who do not share it (in relation to disabled people, this includes, in particular, steps to take account of disabled persons' disabilities);
  - encourage persons who share a protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.
- iii) Foster good relations between persons who share a relevant protected characteristic and those who do not share it. This involves having due regard, in particular, to the need to –
- tackle prejudice; and
  - promote understanding.

5b) No equalities assessment necessary for this report.

**Appendices:**

**A – People Directorate Risk Report** - The summary of the risks are set out on pages 1 to 3 including controls and management actions, a summary of risk performance on page 4, the risk matrix on page 5 and the risk scoring criteria on page 6.

**LOCAL GOVERNMENT (ACCESS TO INFORMATION) ACT 1985**

**Background Papers:**

Risk Management Policy

Corporate Risk Register as at March 2019 – Threat Risks to the achievement of Bristol City Councils Objectives.									
Risk title and description	What we have done	Perf	Current Risk Level		What we are doing	Tolerance Risk Level			
			Likeli	Risk R		Likeli hood	Risk R		
<p><b>CRR9: Safeguarding Vulnerable Children.</b></p> <p>The council fails to ensure that adequate safeguarding measures are in place, resulting in harm or death to a vulnerable child.</p> <p>Key potential causes are:</p> <ul style="list-style-type: none"> <li>Safeguarding arrangements do not meet the requirements of the Children Act and associated legislation, guidance and regulations.</li> <li>Inadequate controls result in harm.</li> <li>Poor Management and operational practices.</li> <li>Demand for services exceeds its capacity and capability.</li> <li>Inability to recruit/retain social care staff in a competitive market.</li> <li>Poor information sharing.</li> <li>Strategic commissioning arrangements do not meet identified need and our ability to commission safe care for children is impaired.</li> <li>Increase in complex safeguarding risks, criminal exploitation, serious youth violence and gang affiliation.</li> </ul>	<p>We provide regular analysis of performance and reports to Cabinet Members and Directors regarding safeguarding performance and progress.</p> <p>The Safeguarding Children’s Board provides independent scrutiny of children’s safeguarding arrangements in the city and holds BCC and partner agencies to account.</p> <p>There has been a review of arrangements to meet the Prevent Duty and the Safer Bristol Board has adopted an Improvement Plan to deliver better outcomes in service provision quality and safety.</p> <p>BCC works with partners to effectively identify victims and perpetrators of CSE and take action to disrupt and protect.</p> <p>Multi Agency Public Protection Arrangements are in place (MAPPA) with BCC contributors at every level to support family safeguarding.</p> <p>The Safeguarding and Quality Assurance Service has been remodelled to secure additional capacity (Independent reviewing officer and Child Protection Chairs) and has the Local Authority Designated Officer for allegations against people who work with children.</p> <p>Comprehensive training and development offer, together with publication of Bristol’s policies and procedures and monthly professional supervision help ensure safe practice and adequate control of risks. This is monitored and tested through a performance and quality assurance framework.</p> <p>September 2018 Ofsted ILACS single inspection identified that, ‘services have improved substantially for care leavers, children in care and children in need of help and protection.’ However, there is more to do to ensure <i>all</i> children and families receive a good service. Based on this and self-evaluation, we are refreshing our transformation and improvement plan to address areas identified for improvement (these incorporate actions in response to learning from other Inspections, Peer Review, Serious Case Review, complaints and other feedback received).</p> <p>Bristol’s Strengthening Families transformation programme is taking a whole system approach to meeting the needs of children and families at the earliest point. In this way we aim to manage demand and maintain capacity within the system. Universal services may be supported by early help and targeted services, including a team around the school offer.</p> <p>Bristol has an active workforce strategy in place to attract, recruit and retain social workers with a particular emphasis on recruiting and retaining excellent, experienced social workers. The Management Team monitors social work vacancies and agrees strategies for urgent situations. Competent agency social workers and managers are used on temporary basis to fill vacancies. A number of further measures are being progressed with the aim of improving the retention of social workers. A robust social worker caseload monitoring framework is in place.</p> <p>Information sharing protocols are in place with services taking action to comply with GDPR where sensitive data is stored/processed.</p> <p>Children’s strategic commissioning team have a work plan in place.</p> <p>BCC commissioners work closely with operational services to identify need and ensure appropriate service commissioning.</p> <p><u>Due diligence and quality checks of all commissioned services for vulnerable children are in place.</u></p>	<p>←</p>	<p>2</p>	<p>7</p>	<p>14</p>	<p>←</p>	<p>1</p>	<p>7</p>	<p>7</p>
<p>Risk Owner: Executive Director, Adults, Children and Education.</p>	<p>Action Owner: Director for Children’s and Families Services.</p>	<p>Portfolio Flag: Children and Young People.</p>	<p>Strategy Theme: Our Organisation, Empowering and Caring, Wellbeing.</p>						



Corporate Risk Register as at March 2019 – Threat Risks to the achievement of Bristol City Councils Objectives.									
Risk title and description	What we have done	Perf	Current Risk Level			What we are doing	Tolerance Risk Level		
			Likeli	Risk R	Likeli hood		Risk R		
<p><b>CRR10: Safeguarding Adults at Risk with Care and support needs.</b>                      The council fails to ensure adequate safeguarding measures are in place, Adults at risk.</p> <p>Key potential causes are:</p> <ul style="list-style-type: none"> <li>• Adequacy of its controls.</li> <li>• Management and operational practices.</li> <li>• Demand for its services exceeded its capacity and capability.</li> <li>• Poor information sharing.</li> <li>• Lack of capacity or resources to deliver safe practice.</li> <li>• Failure to commission safe care for adults at risk.</li> <li>• Failure to meet the requirements of the 'Prevent Duty' placed on Local Authorities.</li> </ul>	<p>The Safeguarding Adults Board is an independent scrutiny board led by BCC alongside our statutory partner and key agencies. There has been a multi-agency led review of existing arrangements led by BCC in light of the new Prevent Duty and the Board has adopted an Improvement plan to deliver better outcomes in service provision quality and safety. The Board is now on a statutory footing following implementation of the Care Act 2014. The Multi Agency Public Protection arrangements are in place (MAPPA).</p> <p>The Bristol Safeguarding Adults Board Learning and Development Competence Framework has been reviewed and will be reviewed on an annually basis to ensure continued best practice.</p> <p>Safeguarding improvement plans are in place for Older People, Physical Disability and Disabled Children and the Capability framework for safeguarding and the mental capacity act have been introduced. The Adult Change Programme 'Better Lives' - Transforming Care Programme has been established to implement policy objectives of moving people into more suitable care settings.</p> <p>We have an active strategy in place to attract, recruit and retain social workers through a variety of routes with particular emphasis on experienced social workers. The Adult South West Recruitment and Retention Strategy has been drafted, the risks and costs identified. The strategy will be presented through the Decision Pathway. Regular strategies and campaigns support the recruitment and retention of high calibre social workers and managers, with competent agency social workers and managers used on temporary basis to fill vacancies.</p> <p>All key staff working with people directly at risk are trained in the essentials of safeguarding and BCC has an ongoing awareness-raising 'Prevent' training programme.</p> <p>Regular reporting on safeguarding is taking place quarterly for Directors and Cabinet Members, with an annual report for elected Members to allow for scrutiny of progress. The quality assurance framework and performance framework is routinely monitored and reported on.</p> <p>The outcome of the recent Kamil Ahmad Safeguarding Adults Review has been considered in detail and all recommended actions noted and acted upon.</p>	↔	2	7	14	<p>Social workers working with Multi-agency partners supporting Adults and elderly people to live safely within their families and community.</p> <p>We are increasing capacity this year in the commissioning team to lead on monitoring quality in the care sector. Improving the quality services for those who need it and ensuring effective management oversight.</p> <p>It is planned to make a one off retention payment to all social workers as part of the council's retention policy. A wider review of the remuneration package for social workers is planned to improve recruitment and retention.</p> <p>Review of the Safeguarding Pathway is planned for April 2020.</p> <p>We are transforming the Safeguarding Adults Board</p>	1	7	7
Risk Owner: Executive Director, Adults, Children and Education.	Action Owner: Interim Director Adult Social Care.	Portfolio Flag: Adult Social Care.			Strategy Theme: Our Organisation, Empowering others and Caring, Fair and Inclusive, Well connected, Wellbeing.				

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Corporate Risk Register as at March 2019 – Threat Risks to the achievement of Bristol City Councils Objectives.									
Risk title and description	What we have done	Performance	Current Risk Level			What we are doing	Tolerance Risk Level		
			Likelihood	Impact	Risk Rating		Likelihood	Impact	Risk Rating
<p><b>CRR23: Better Lives Programme.</b></p> <p>Failure to deliver the required outcomes and savings from the Better Lives Programme, whilst delivering against our statutory duties and maintaining quality services.</p> <p>Key potential causes are:</p> <ul style="list-style-type: none"> <li>Increased demand and complexity of Service Users' needs.</li> <li>The Provider Market is unable to meet needs in the required way and/or we suffer relationship breakdown.</li> <li>Other Directorates within the organisation are unable to support the Programme in the way required.</li> <li>Statutory requirements of Adult Social Care (ASC) mean resources have to be diverted away from Programme activity.</li> <li>Changes to the priorities of the wider health system and/or the National context, requires us to divert resources/focus away from the Programme's objectives.</li> <li>There is a lack of sufficient skills and capacity within Adult Social Care (ASC) to deliver the required change at the required pace.</li> <li>Focus on savings, demand management and specific areas of the service creates risk in other areas of adult social care where we have a statutory duty to deliver</li> </ul>	<p>We have a Programme Board in place that meets monthly and has a key governance role for the Programme in terms of managing risk. The Board membership contains the Cabinet Lead for Adult Social Care, The Executive Directors for ACE and Resources, the Director of Adult Social Care and representation from both Bristol Hospital Trusts and the Clinical Commissioning Group (CCG). They are provided with a verbal update and written monthly highlight report that contains key risks and issues. Any actions and decisions arising are minuted with completion tracked through a log.</p> <p>The Programme Senior Responsible Officer (SRO) regularly attends key internal governance meetings e.g. ACE Scrutiny Commission, Delivery Executive. The programme appointed a dedicated Senior Professional Lead who works within Adult Social Care to oversee delivery of the programme outcomes and act as the lead Business Change Manager.</p> <p>We have delivered and are planning to deliver a number of key interventions to improve the diversity of provision and the Provider Market's ability to respond to changing requirements and needs e.g. Bristol Price introduced for residential and nursing care June 2018; Market Position statement provider event held. We are actively increasing opportunities to work with us in shaping the future market as well as investing in key areas such as Home Care (Cabinet approved rate rise and innovation fund July 2018).</p> <p>We are working closely with other areas of the Council we have a dependency on to help us deliver the programme outcomes e.g. Change Services, Housing, Communities, Information Communication Technology (ICT) and Procurement colleagues.</p> <p>We have a specific area of the Programme dedicated to strengthening partnership working.</p> <p>We have introduced a number of interventions that are impacting new demand e.g. the introduction of the Bristol Price (June 2018); increased capacity and investment in Home Care (July 2018); increased capacity in the Reablement Service; Introduced a new Home First Service (October 2018).</p>	↔	2	7	14	<p>We are currently developing a new phase of the Better Lives Programme, focused on delivering the programme vision at pace. This will include activities to deliver further changes which are required around Older People's services and an increased focus on Adults of Working Age and Preparing for Adulthood.</p> <p>Piloting provider reviews to increase capacity in our Reviewing Teams and further develop the Market. (November 18)</p> <p>Developing for a new Assistive Technology offer. Completing the delivery of proposals new technology and working practices to our Social Workers.</p> <p>Completing the delivery of proposals new technology and ways of working to our Home First and Reablement teams. Continue to increase the capacity of the Reablement service to the required level,</p> <p>Continuing to discuss dependencies between Healthier Together and Better Lives with programme leads. Implement Phase 2 of the Integrated Care Bureau.</p> <p>Introducing a further rate increase for Home Care. April 2019.</p> <p>Opening two new Extra Care Housing sites in the City each with 60 units with BCC nomination rights 100 units in total). Which has been delay from November 2018 to the end of Q4 18/19.</p>	1	7	7
Risk Owner: Executive Director, Adults, Children and Education.	Action Owner: Interim Director Adult Social Care.	Portfolio Flag: Adult Social Care.	Strategy Theme: Our Organisation, Empowering others and Caring, Fair and Inclusive, Well connected, Wellbeing.						

**Corporate risk performance summary for open risks**

The risks are set out by the highest risk rating first in Quarter 1 April – June 19/2020

Page	Risk ID	Risk	Risk Owner	Quarter 4 January – March 17/18		Quarter 1 April - June 18/19		Quarter 2 July - September 18/19		Quarter 3 October - December 18/19		Quarter 4 January – March 18/19	
				Rating	Travel	Rating	Travel	Rating	Travel	Rating	Travel	Rating	Travel
19	CRR23	Better Lives Programme	Executive Director, Adults, Children and Education	2x7=14	↔								
7	CRR9	Safeguarding Vulnerable Children	Executive Director, Adults, Children and Education	2x7=14	↔								
8	CRR10	Safeguarding Adults at risk with care and support needs (Previously Safeguarding Vulnerable Adults)	Executive Director, Adults, Children and Education	2x7=14	↔								

**Risk Scoring Matrix**

		Threat Impact (Negative risks)					Opportunity Impact (Positive Risk)							
		4	12	20	28	28	20	12	4	4	3			2
Opportunity Likelihood	Almost certain	4 (Low)	12 (Medium)	20 (High)	28 (Critical)	28 (Significant)	20 (High)	12 (Medium)	4 (Low)	4	3	2	1	Almost certain
	Likely	3 (Low)	9 (Medium)	15 (High)	21 (High)	21 (High)	15 (High)	9 (Medium)	3 (Low)	3	2	1	1	Likely
	Unlikely	2 (Low)	6 (Medium)	10 (Medium)	14 (High)	14 (High)	10 (Medium)	6 (Medium)	2 (Low)	2	1	1	1	Unlikely
	Rare	1 (Low)	3 (Low)	5 (Medium)	7 (Medium)	7 (Medium)	5 (Medium)	3 (Low)	1 (Low)	1	1	1	1	Rare
		1	3	5	7	7	5	3	1					
		Minor	Moderate	Major	Critical	Exceptional	Significant	Modest	Slight					

**Current and Tolerance risk ratings:** The 'Current' risk rating for both threats and opportunities refer to the current level of risk taking into account any strategies to manage risk - management actions, controls and fall back plans already in place. The 'Tolerance' rating represents what is deemed to be a realistic level of risk to be achieved once additional actions have been put in place. On some occasions the aim will be to contain the level of the risk at the current level.

**Positive Risks (Opportunities):** Where the risk is an opportunity, a cost benefit analysis is required to determine whether the opportunity is worth pursuing, guided by the score for the matrix, e.g. an opportunity with a score of 28 would be pursued as it would offer considerable benefits for little risk

# People

## Scrutiny Commission

14<sup>th</sup> October 2019



**Report of: Jacqui Jensen**

**Title: Executive Director: People**

**Ward: City-wide**

**Officer Presenting Report: Jacqui Jensen**

**Contact Telephone Number: 0117 357 6390**

### **Recommendation:**

To note the People Directorate's performance progress report for quarter 1, 2019/20.

### **The significant issues in the report are:**

The most significant performance issues against the corporate plan priorities are set out in appendix A1. The Scrutiny Commission are invited to ask questions of the Executive Director; People on progress against these priorities.



## 1. Summary

The report and appendix are a summary of the main areas of progress towards delivery of the Corporate Plan 2018-19.

## 2. Context

This report and appendix is designed to standardise a set of Key Performance Indicators and reporting arrangements around the corporate strategy and Bristol City Council's business plan.

In terms of performance in Q1 for the directorate, progress can be summarised as follows:

### **Performance summary for People directorate:**

Taking the total available KPI results this quarter:

- Just over a quarter (27%) of those with established targets are performing on or above target and,
- Just a third (40%) of those with a direct comparison from 12 months ago, have improved.

### **Service Areas:**

#### Adult Social Care

The reablement of older people following discharge from hospital is continuing to develop and improve the Home First Service to enable people to return home at a more appropriate time.

There has been extensive work undertaken to address the over-reporting of cases that were not new permanent admissions to residential care. There is confidence that the Better Lives programme will reduce the number of new admissions further this year.

The monthly Delayed Transfer of Care (DToC) figure had a significant spike in May '19 and some immediate actions (as shown in the management comments) were put in place to address this downturn in performance. Work will continue to reduce the delays for patients leaving hospital.

#### Children & Families Service

The data verification for children who are seen promptly is in progress. It is anticipated that data will be available for Q2 reporting.

Care leavers, aged 17-21 in Education, Employment or Training is well above target (under the statutory definition). This is the best rate (65%) since records began in 2015. This is significant improvement due to the regional innovation project.

Despite the service being remodelled and the Pathway Plan paperwork being redesigned and marked improvements seen in 2018/19, the performance for Q1 2019/20 has dipped significantly (75.8%) from the same period last year (89.3%) and remains well below target. The manager suggests an increase in staff sickness has impacted this indicator.

The average social worker caseload of 55.7 is slightly below the ambitious target. However, it is better than the same period last year (56.3) and significantly better than the same period 2 years ago (66.8).

### Educational, Learning & Skills Improvement

Early indications (provisional data) are that we may have exceeded target at Key Stage 2 and have the highest figure recorded in Bristol at 64.2%.

Employment of people with a Learning Disability has seen a significant dip in performance despite the numbers increasing. The new Bristol WORKS for Everyone programme launches in September 2019 is aimed to increase the numbers of people with Learning Disabilities in employment. Meanwhile, the reasons for the dip in performance are being explored.

The project to increase the number of apprenticeships within BCC has exceeded expectations and is likely to achieve target by the end of the year.

There are significant issues with the number of Educational Health Care Plans that are issued within timescales. Additional resources are now in place and more staff anticipated in the year ahead to address the shortfall.

### Public Health

Alcohol related hospital admissions are higher than at any time last year. A needs assessment is underway and an action plan will ensue to reduce the levels of alcohol-related admissions.

The percentage of opiate clients who successfully complete treatment is slightly under target and drug dependency will be included in the needs assessment to improve the completion rate of treatment.

The number of attendances at BCC leisure centres and swimming pools is slightly below target; the first time in 10 years.

## **3. Policy**

All BCP Performance Indicators contained within Appendix A1 represents the People PIs that are included within the Corporate Strategy (2018/23) and demonstrate our progress.

## **4. Consultation**

### **a) Internal**

Performance progress has been presented to the Executive Directorate Meeting prior to the production of this report.

### **b) External**

Not Applicable

## **5. Public Sector Equality Duties**

- 5a) Before making a decision, section 149 Equality Act 2010 requires that each decision-maker considers the need to promote equality for persons with the following “protected characteristics”: age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation. Each decision-maker must, therefore, have due regard to the need to:
- i) Eliminate discrimination, harassment, victimisation and any other conduct prohibited under the Equality Act 2010.
  - ii) Advance equality of opportunity between persons who share a relevant protected characteristic and those who do not share it. This involves having due regard, in particular,

to the need to --

- remove or minimise disadvantage suffered by persons who share a relevant protected characteristic;
  - take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of people who do not share it (in relation to disabled people, this includes, in particular, steps to take account of disabled persons' disabilities);
  - encourage persons who share a protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.
- iii) Foster good relations between persons who share a relevant protected characteristic and those who do not share it. This involves having due regard, in particular, to the need to –
- tackle prejudice; and
  - promote understanding.

5b) This is a report to consider performance progress against the 2018/23 Corporate Strategy, which has had an Equalities Impact Assessment.

**Appendices:**

A1 – People Directorate Performance Progress Report (Q1 2019/20)

**LOCAL GOVERNMENT (ACCESS TO INFORMATION) ACT 1985**

**Background Papers:**

None



## People Directorate – Q1 2019/20 Performance Summary

ADULT SOCIAL CARE	
Title	Target status
BCP276a: Reduce the permanent admissions aged 65+ to residential and nursing care, per 100,000 population	<b>Below</b>
BCP278: Percentage of older people at home 91 days after discharge from hospital into reablement/rehabilitation *	<b>Below</b>
BCP279: Improve the monthly Delayed Transfers of Care for BCC (Delayed Days per 100,000 population)	<b>Well Below</b>
BCP280: Increase the % of people who contact Adult Social Care and then receive Tiers 1 & 2 services	<b>Well Below</b>

CHILDREN & FAMILIES SERVICES	
Title	Target status
BCP218: Improve the % of 17 - 21 year old care leavers in Employment, Education or Training (statutory return - recorded around birthday)*	<b>Well Above</b>
DPE006: Children looked after placed more than 20 miles from their home address	<b>Well Below</b>
DPE007: Percentage of Pathway Plans are reviewed on a six monthly basis or less	<b>Well Below</b>
DPE008a: Area social work unit average caseload (Snapshot)	<b>Below</b>

**OVERALL SUMMARY:**  
 27% (8) PIs are On or Above target  
 40% (10) PIs improved on the same period last year

EDUCATIONAL, LEARNING & SKILLS IMPROVEMENT	
Title	Target status
BCP227: Percentage of Final Education Health Care Plans issued within 20 weeks including exception cases	<b>Well Below</b>
BCP261a: Increase the total number of apprentices employed by Bristol City Council	<b>On Target</b>
BCP263a: Reduce the % of young people of academic age 16 to 17 years who are not in Education, Employment or Training & destination unknown	<b>Below</b>
BCP266: Increase % of adults with learning difficulties known to social care, who are in paid employment	<b>Well Below</b>
BCP268: Increase the number of adults in low pay work & receiving benefits accessing in-work support	<b>Well Above</b>

PUBLIC HEALTH	
Title	Target status
BCP251: Reduce the rate of alcohol-related hospital admissions per 100,000 population	<b>Below</b>
DPE123: Breastfeeding at 6-8 weeks as a percentage of all children with a known feeding status	<b>Below</b>
DPE130: Percentage of opiate clients who successfully complete treatment and who do not re-present within six months	<b>Below</b>
BCP253: Increase the number of attendances at BCC leisure centres and swimming pools	<b>Below</b>



# People EDM - Quarter 1 (1st April - 30 June '19) Performance Progress Report - Quarterly PIs

Corp Plan KC ref	Code	Title	+/-	2018/19 Outturn	2019/20 Target	Q1 Progress	Comparison over last 12 months	Officer Notes
<b>Adult Social Care</b>								
EC3	BCP276a	Reduce the permanent admissions aged 65+ to residential and nursing care, per 100,000 population	-	570	550	603.4	↑	361 admissions out of 59,829. We have undertaken extensive analysis on the reporting methods for this Performance Indicator and discovered that we have been over-reporting due to the inclusion of data on LAS (Adult Social Care case-management system) that does not reflect a new admission. We are now confident that the data is correct for the last 2 periods. There is a slight increase between end of last year and period 1 of this year. We have seen a small increase in new placements which we have related to an increase in Hospital admissions. We continue to work to reduce the total number of new admissions to care homes for older people through the Better Lives programme and are confident that this will reduce further this year. All new placements are closely scrutinised by Senior Managers and there is an action plan that is governed by the Better Lives board and the trajectory is very closely monitored.
EC3	BCP278	% of older people at home 91 days after discharge from hospital into reablement/rehabilitation *	+	86.1%	88.0%	86.1%	↓	Total passes 414 out of total cases 481 This performance indicator has a 3 month data lag and reports the 2018/19 outturn, which is slightly below target, due to this being the winter period and is a usual seasonal fluctuation. However the national reporting benchmarking data is for Q3 which was 87% (1.6% points up on the previous year) We are continuing to develop the Home First Service to enable people to return home at a more appropriate time.
EC3	BCP280	Increase the % of people who contact Adult Social Care and then receive Tiers 1 & 2 services	+	47.4%	60.0%	50.5%	↓	Totals for this period: 501 T1 / T2 outcomes / 993 total outcomes. This target has continued to increase as we are working to the 3 tier model and making maximum use of T1/ T2 services. Also we have increased Reablement and Home First services and have plans to increase further to ensure people can access more T2 support to maximise independence. However we have discovered that other T1/2 support are not being picked up because of the way they are recorded on LAS, e.g. Rehab centres and some voluntary sector T2 services. We are investigating mechanisms to pick these up so that we can adjust the figures. Therefore, we expect to reach the target by the end of this year.
EC3	DPE003	Average change in level of homecare following short-term assessment and reablement episode	+	5.5 hrs	5.5 hrs	6.3 hrs	↓	Service is still maintaining a reduction in hours above target. This is in the context of people being discharged from hospital more quickly and with more assessment at home with the Home First service. This means clients are staying more independent and living at home.
EC3	DPE004	Increase % of BCC regulated CQC Care Service providers, where provision is rated 'Good or Better'	+	90.3%	91.0%	89.6%	n/k	The percentage of CQC regulated services which are rated as either good or outstanding in Bristol has stabilised this quarter after 2 years of continuous and significant improvement. The number of CQC regulated services in Bristol has also increased slightly, by 3, which naturally affects the calculation slightly.
EC3	DPE005a	Increase the percentage of adults receiving direct payments	+	38.9%	40.0%	25.1%	↓	This is a sudden and unexpected down turn in performance which has previously been steady. We are looking into current practice to try to establish if any specific circumstances have arisen to explain this change and are also undertaking further data analysis in order to understand whether this is a data issue or if there has been a change in performance. Following this exercise appropriate actions will be undertaken.

Corp Plan KC ref	Code	Title	+/-	2018/19 Outturn	2019/20 Target	Q1 Progress	Comparison over last 12 months	Officer Notes
W1	BCP279	Improve the monthly Delayed Transfers of Care for BCC (Delayed Days per 100,000 population)	-	187.8	187	254.9	↓	<p>Totals for May '19: 931 Delayed Transfer of Care (DToC)/ 18+ Population of 365,292</p> <p>We saw a spike in our DTOCs in May having recently overseen a downward trend in DTOCs. Poor performance was a result of a mixture of things. The performance was not acceptable and so some immediate measures have been taken, including:</p> <ol style="list-style-type: none"> <li>1) A new team manager has been appointed and is now in place – tasked as a priority to address DTOC issues</li> <li>2) A request to the acutes team to move our local coding away from 2 days to allocate and 3 days to assess to a straight 5 day coding model.</li> <li>3) An acknowledgment that Reablement and Pathway 3 intermediate care services need to be coded differently</li> <li>4) A change to our rules around annual leave for the team which has been signed off at DTOC group and added to the Standard Operating Procedures.</li> </ol> <p>June '19 has already seen a fall in DTOCs and the number of social care referrals due to the growth of Home First and further application of a discharge to assess model in Bristol.</p>
<b>Children &amp; Families Services</b>								
EC1	BCP212	Reduce the number of adolescents (aged 13-17) who need to enter care due to abuse or exploitation	-	27	24	8	↓	19 children aged 13 or over started care between 01/04/2019 and 30/06/2019. Of these, 8 started due to neglect. The circumstances of these children are reviewed on a monthly basis with the Strengthening families Team to ensure it was the right outcome for the child and any learning from the situations.
EC1	BCP214	Increase the % of child referred who are seen promptly	+	New PI 2019/20	90.0%	Data not entered		Data verification in progress. Anticipate data will be available for Q2 reporting.
EC1	BCP219	Increase the percentage of Family Outcome Plans where agreed outcomes were achieved	+	New PI 2019/20	Establish baseline	30.40%	n/k	59 Family Outcome Plans were achieved of the 194 closed as at 30 June '19. The percentage of significant and sustainable outcomes achieved when working with families is a useful measure in understanding the difference early intervention services make. We have re-established 9 different outcome themes and in Sept 2019 will be embedding these new outcomes into the Early Help Module so that by October we will be capturing information more in line with our service plan and the vision for children and family services. A short period of benchmarking will enable future targets to be set.
EC1	DPE006	Children looked after placed more than 20 miles from their home address	-	12.3%	12.0%	15.6%	↓	<p>32 children entered care between 01/04/2019 and 30/06/2019. Of these, 5 were placed 20 miles+ from home on 30/06/2019.</p> <p>Children are placed more than 20 miles from Bristol due to lack of availability of care / education provision or due to a need for specialist intervention. Examples would be to address sexually harmful behaviour or complex trauma. We are currently developing our local offer and redesigning our children's home so that we can offer small therapeutically informed provision in the city. We are working with colleagues in SEN to ensure that the educational needs of children placed in this new provision will be met. As part of this work we are reviewing all the placement plans for children currently placed out of Bristol to ensure where appropriate these children are prioritised for a move back to Bristol to live in one of these new homes.</p>
EC1	DPE007	Percentage of Pathway Plans are reviewed on a six monthly basis or less	+	79.1%	90.0%	75.8%	↓	190 Pathway Plan Reviews were due between 01/04/2019 and 30/06/2019. Of these, 144 were completed on time. There is often a lag between reviews being completed and being written up on LCS.
FI3	BCP218	Improve the % of 17 - 21 year old care leavers in EET (statutory return - recorded around birthday)*	+	65%	65%	65%	↑	<p>This Performance Indicator has a statutory three month data lag and is reporting the 2018/19 outturn figure in quarter 1 of 2019/20. There were 425 eligible care leavers on 31/03/2019. Of these, 274 were recorded as in Education, Employment or Training (EET) within their statutory birthday contact period.</p> <p>This is significant improvement due to the relentless focus by Personal Advisors, Practice Leads and the new Reboot Team in place through our regional innovation project. (2018/19 target was 58% - higher than any performance since 2015)</p>
WOP1	DPE008a	Area social work unit average caseload (Snapshot)	-	61.5	54	55.7	↑	1,448 cases were allocated to 26 Area teams on 30/06/2019. There continues to be a downward trajectory. Caseloads are reviewed on a weekly basis.

Corp Plan KC ref	Code	Title	+/-	2018/19 Outturn	2019/20 Target	Q1 Progress	Comparison over last 12 months	Officer Notes
WOP1	DPE008b	Through-care team average caseload (Snapshot)	-	98.7	97	97.2	↑	875 cases were allocated to 9 Through Care teams on 30/06/2019. Social work caseloads are currently 20 and personal advisors 25. There is an ongoing plan to reduce case loads further. The service has 4.5 vacancies resulting from maternity leave. Caseloads are reviewed weekly.
<b>Education &amp; Skills</b>								
FI2	BCP227	Percentage of Final Education Health Care Plans issued within 20 weeks including exception cases	+	7.0%	61.3%	2.0%	↓	Only 2 of the 169 EHCPs were issued with statutory timescales. The reasons for under-performance include a significant increase in the number of applications (200 more than anticipated over the last year) and the migration of data to a new recording system which has had a significant impact on performance as there are now extensive manual interventions currently required. Additional staff have been recruited since April '19 and there is an intention to recruit further following a successful £1.3m Growth Bid agreed by Cabinet in July '19. This combined with the newly created performance clinics in July '19 are expected to deliver improved performance over the coming year.
FI3	BCP261a	Increase the total number of apprentices employed by Bristol City Council	+	184	214	176	↑	14 apprenticeship completions and 3 withdrawals since end of quarter 4 2018/19 led to a slight dip in numbers. In the period 1st July to 30th Sept we have 81 planned starts in pipeline and 25 scheduled completions so remain on target to meet this measure by financial year end.
FI3	BCP261b	Increase the % of BCC apprentices starting apprenticeship training from priority groups	+	29.3%	31.0%	29.0%	↑	Current recruitment of new apprentices continues to bring in a diverse range of candidates from target groups. Continuing to build upon our lead role in the 5 Cities Apprenticeship Diversity Hub project we are working with a range of external partners and some departments to improve accessibility, information and awareness of opportunities amongst under-represented groups. We expect to continue to move towards this stretch target in this way by year end.
FI3	BCP263a	Reduce the % of young people of academic age 16 to 17 years who are NEET & destination unknown	-	7.7%	6.5%	7.3%	↑	There will continue to be focused work around the reduction of the Not known and Not in Education, Employment or Training (NEET) numbers it has continued to reduce over this quarter.
FI3	BCP267	Improve the overall employment rate of working age population	+	76.6%	76.6%	77.1%	↓	Whilst there has been growth in the rate from the previous quarter, due to the accuracy of the data, +/- 2%, it is difficult to draw accurate conclusions.
FI3	BCP270	Increase experience of work opportunities for priority groups	+	New PI 2019/20	2,750	340	n/k	There has been continued success at recruiting young people in priority groups and schools into experience of work and apprenticeship opportunities, including: > Career Coach programme for young people in care (26); > Work experience placements with Bristol City Council (7); > Apprenticeship hub activities (120); > WORKS experience of work activities take up by young people (187) The reduction in experience of work and work placements in this quarter is due to a seasonal dip between April and June. Already, by 15th July our Work experience numbers are 36 and WORKS numbers are 403 based on activity since 1st July. Also, due to our current focus on young people most at risk of non-participation in education, training and employment, most of our WORKS activity was with smaller groups (i.e. 6 per trip and visit)
FI3	DPE040	Increase the total number of apprenticeships created and managed by Bristol City Council	+	503	539	465	↑	This represents a seasonal dip in numbers between April and June following successful completions of existing apprentices. Both BCC recruitment (81 planned next quarter) and On Site Bristol (77 expected next quarter) will offset total of 72 completions expected and bring us in line with target. In line with local college and other provider programmes, On Site Bristol intake operates on an annual basis, with the apprenticeship programmes starting in September each year.
WC2	BCP269	Increase digital skills development of those 19+ with no or few qualifications	-	New PI 2019/20	25.0%	19.0%	N/k	The structure for recording and reporting digital skills built into new 19/20 courses but was not fully part of the 18/19 academic year. Current % is expected to increase with use of new recording process. It is intended that building digital skills and online learning into courses will support the public to become more confident in accessing services and support systems digitally. Enabling them to understand new ways to use the internet, and utilise smartphone and tablet resources to improve their skills, access information, find and secure work and access to services.

Corp Plan KC ref	Code	Title	+/-	2018/19 Outturn	2019/20 Target	Q1 Progress	Comparison over last 12 months	Officer Notes
WC3	BCP266	Increase % of adults with learning difficulties known to social care, who are in paid employment	+	7.1%	8.0%	5.1%	↓	In this period this has seen a significant drop in the percentage rate, despite the actual numbers of people with a learning difficulty in paid employment rise from 44 to 50. This is because there has been a 59% rise in the denominator, (people being counted) between the previous quarter and the current period from 688 to 998. We are currently investigating with the Data Team the reasons for this. The new Bristol WORKS for Everyone programme launches in September 2019 and we are working with frontline teams to ensure that they know about the employment support options available for people with learning difficulties. Furthermore we are awaiting the outcome of our recent ESF / WECA funding bid.
WC3	BCP268	Increase the number of adults in low pay work & receiving benefits accessing in-work support	+	New PI 2019/20	314	151	n/k	The growth of the Future Bright in work support programme and the new Get Well - Get On programme which focusses on supporting people in work who have mental health of muscle, joint or bone conditions has contributed to performance which is above target this quarter.
<b>Public Health</b>								
W1	BCP251	Reduce the rate of alcohol-related hospital admissions per 100,000 population	-	839	839	856	↓	The number of alcohol-related hospital admissions is above target, this has been acknowledged and we are currently undertaking the completion of a needs assessment for all substances (drug and alcohol) and will be developing a subsequent strategy that will address this need. In parallel we are using the alcohol CLear assessment tool to assess local arrangements and delivery plans to support an evidence-based response to preventing and reducing alcohol-related harm at local level.
W1	DPE123	Breastfeeding at 6-8 weeks as a percentage of all children with a known feeding status	+	68.2%	70.0%	69.0%	↑	2018/19 Q4 statistic reported below. Prevalence of breastfeeding at 6 to 8 weeks statistic for Q1 2019/20 not expected until September 2019 as part of quarterly Health Visiting performance reporting process. Reporting relies on data from the provider of health visiting services for Bristol (Bristol Community Health) and cannot be reported earlier than this date.
W1	DPE130	% of opiate clients who successfully complete treatment and who do not re-present within six months	+	81%	80%	79%	n/k	We are aware of the number of clients successfully completing treatment for opiates and not re-presenting within 6 months is under target- this has been acknowledged and we are currently undertaking the completion of a needs assessment for all substances (drug and alcohol) and will be developing a subsequent strategy that will address this need. We hold regular performance monitoring meetings with our providers and have stood up a standards and governance committee which is the forum for discussing these system-wide issues.
W4	BCP253	Increase the number of attendances at BCC leisure centres and swimming pools	+	2,723,628	2,764,482	440,800	↓	(April - May) 440,800 attendances at BCC leisure centres and swimming pools.



## People EDM - Q4 [Outturn] Quarterly Reporting of the Corporate Strategy - [Annual PIs] - By exception

Corp Plan KC ref	Code	Title	+/-	2018/19 Outturn	2019/20 Target	Q1 Progress	Comparison over last 12 months	Officer Notes
<b>Adult Social Care</b>								
EC3	BCP277	Percentage of adult social care service users, who feel that they have control over their daily life	+	77.7%	78.0%	n/a		Although this data is taken from the annual survey and therefore we cannot track progress on a quarterly basis –we do have outcomes within the Better Lives programme to ensure we are improving in this area. This includes the basic principle of ensuring that people remain as independent as possible in their own homes through the investment in tier 2 services to support them and avoiding admissions to care homes. Also through more outcomes based support planning that is focussed on the individual and the promotion of Direct Payments which are above national average and plans to implement Individual Service Funds.
<b>Education &amp; Skills</b>								
EC1	BCP222	Increase the take-up of free early educational entitlement by eligible 2 year olds	+	68.0%	70.0%	64.0%	↓	The 2019/20 progress reports the 2018/19 financial year, as published by the DfE. The uptake of the Free Early Education offer for Eligible two year olds is in decline nationally and Bristol is no exception, with a drop of 6% in 2018/19. Reasons for this could be the recent decline in the Bristol birth rate, more families accessing work and therefore no longer eligible, or the cost of delivery of the two year old offer for early years settings, which is high when compared to the extended Early Education (30 Hours) offer for three and four year olds. The Early Years Service will be analysing the reasons for this decline to inform a strategic response.
FI2	BCP230a	KS2 - Increase the % of pupils achieving the expected standard in reading, writing and maths	+	63.0%	64.0%	64.2%	↑	Provisional data indicates that 64.2% of pupils achieved the expected standard in reading, writing and Mathematics which is above target. This figure is subject to revision during the national validation process.
FI2	BCP231a	Key Stage 4: Improve the Average Attainment 8 score per pupil	+	45.5 points	47.0 points	n/a		Reporting arrangements for GCSE results have been agreed with schools and provisional headline outcomes should be available on results day.
FI2	BCP231d	Key Stage 4: Attainment 8 - Reduce the Points gap between the Disadvantaged and Non-Disadvantaged	-	16.2 points	15.0 points	n/a		Performance data for pupil groups will be provided to schools through the blackbox data agreement with Cabot Learning Federation. This will enable schools to plan strategically very early in the new academic year.
FI2	BCP245	Improve the level of Bristol Schools' pupil attendance	+	94.7%	95.2%	n/a		Further work to provide support for schools to improve attendance is planned for the 2019-20 academic year. The attendance strategy is being reviewed in response to the public consultation and development work on the attendance toolkit for schools is nearing completion and will be available to schools from September. A lead for attendance is being established to develop and lead the action plan in response to the attendance strategy.
FI2	DPE014	Reduce the %ppt gap between SEN/non-SEN pupils achieving the expected standard in R,W&M (KS2)	-	53.0% pts	50.0% pts	n/a		Performance data for pupil groups is not yet available. Performance gaps between Bristol and national have narrowed this year and it is likely that this will be reflected in pupil groups. Schools will receive provisional pupil performance analysis through the blackbox data agreement with Cabot Learning Federation by the end of term. All primary schools opted to take part in this analysis this year.
FI2	DPE031p	Key Stage 4: Progress 8 score	+	-0.09	0	n/a		Reporting arrangements for GCSE results have been agreed with schools and provisional headline outcomes should be available on results day.
FI2	BCP230b	KS2 - increase the % of disadvantaged pupils, at KS2, achieving the expected standard in RWM	+	49%	50%	n/a		Performance data for pupil groups is not yet available. Performance gaps between Bristol and national have narrowed this year and it is likely that this will be reflected in pupil groups. Schools will receive provisional pupil performance analysis through the blackbox data agreement with Cabot Learning Federation by the end of term. All primary schools opted to take part in this analysis this year.



## Key

Progress Key
Well Above Target
Above Target
On Target
Below Target
Well Below Target

Improvement Key	
↑	Direction of travel <b>IMPROVED</b> compared to same period in the previous year
=	<b>SAME</b> as previous same period in the previous year
↓	Direction of travel <b>WORSENERD</b> compared to same period in the previous year

### Corporate Strategy - Key Commitments

Empowering & Caring	
EC1	Give our children the best start in life by protecting and developing children's centre services, being great corporate parents and protecting children from exploitation or harm.
EC2	Reduce the overall level of homelessness and rough sleeping, with no-one needing to spend a 'second night out'.
EC3	Provide 'help to help yourself' and 'help when you need it' through a sustainable, safe and diverse system of social care and safeguarding provision, with a focus on early help and intervention.
EC4	Prioritise community development and enable people to support their community.
Fair & Inclusive	
FI1	Make sure that 2,000 new homes (800 affordable) are built in Bristol each year by 2020.
FI2	Improve educational outcomes and reduce educational inequality, whilst ensuring there are enough school places to meet demand and with a transparent admissions process.
FI3	Develop a diverse economy that offers opportunity to all and makes quality work experience and apprenticeships available to every young person.
FI4	Help develop balanced communities which are inclusive and avoid negative impacts from gentrification.
Wellbeing	
W1	Embed health in all our policies to improve physical and mental health and wellbeing, reducing inequalities and the demand for acute services.
W2	Keep Bristol on course to be run entirely on clean energy by 2050 whilst improving our environment to ensure people enjoy cleaner air, cleaner streets and access to parks and green spaces.
W3	Tackle food and fuel poverty.
W4	Keep Bristol a leading cultural city, helping make culture, sport and play accessible to all.
Well-Connected	
WC1	Improve physical and geographical connectivity; tackling congestion and progressing towards a mass transit system.
WC2	Make progress towards being the UK's best digitally connected city.
WC3	Reduce social and economic isolation and help connect people to people, people to jobs and people to opportunity.
WC4	Work with cultural partners to involve citizens in the 'Bristol' story, giving everyone in the city a stake in our long-term strategies and sense of connection.
Workplace Organisational Priorities	
WOP1	Redesign the council to work effectively as a smaller organisation.
WOP2	Equip our colleagues to be as productive and efficient as possible.
WOP3	Make sure we have an inclusive, high-performing, healthy and motivated workforce.
WOP4	Be responsible financial managers and explore new commercial ideas.

# People Scrutiny Commission

14<sup>th</sup> October 2019



**Report of:** Ann James, Service Director Care & Support, Children & Families

**Title:** Contextual Safeguarding

**Ward:** Citywide

**Officer Presenting Report:** Ann James (BCC), and Androulla (Andri) Nicolaou (Avon & Somerset Police)

**Contact Telephone Number:** 0117 9037951

## Recommendation:

That Scrutiny note the report on the prevalence of complex risks and the development of services to build contextual safeguarding for children and young people in the city.

## The significant issues in the report are:

This report seeks to help scrutiny understand the emerging landscape and definition of contextual safeguarding. It sets out Bristol's approach including recent developments in response to Serious Youth Violence and other complex safeguarding risks. It also highlights the approach taken by Avon and Somerset Constabulary in the delivery of Operation Topaz.

Whilst Bristol has seen a rise in serious youth violence over recent years, the response of the multiagency partnership and strategic leadership of the city builds on strengths in our current approach, is based in best practice from elsewhere and has invested in prevention and developing trauma informed approaches to aid recovery as well as disruption of perpetrators of abuse. There are indicators of impact that we will continue to evaluate as our approach develops further.





## 1. Definition

- 1.1 Contextual Safeguarding is a developing approach to safeguarding children at risk of extra-familial abuse. Extra-familial abuse includes issues such as child sexual exploitation, child criminal exploitation, trafficking, radicalisation, hate crime, bullying and online abuse. It recognises all of these issues as safeguarding issues which require a child welfare response.
- 1.2 A contextual safeguarding approach suggests that children are better safeguarded when there is a focus on responding to locations, peer groups, neighbourhoods and school environments where the harm happens rather than individual children in their family context. This challenges what is a more traditional family focussed approach to social work that is set out within social work legislation and designed around the assessment of a child and their family rather than a group of unrelated children or a location.

## 2. National Policy Context

- 2.1 The concept of Contextual Safeguarding was adopted by the government in the publication of Working Together 2018. Working Together 2018 is the national guidance which sets out how multi-agency partners should work together to safeguard children. The adoption of the term Contextual Safeguarding in this legislation strengthens existing legislative expectations that the local authority works with other partners to safeguard children where the harm exists beyond the family.
- 2.2 Nationally, there is a growing body of evidence that shows existing Child Protection processes are not as effective for extra-familial abuse as they are for intra-familial abuse. The evidence is that, in response different local authorities and their partners have developed different responses as they innovate and redesign safeguarding approaches to better meet these children's needs.
- 2.3 In 2015 the Government set up a National Independent Inquiry into Child Sexual Abuse under the Inquiry Act 2005. The purpose and scope of the Inquiry are set out in its Terms of Reference, which states that its role is:
 

*'to consider the extent to which State and non-State institutions have failed in their duty of care to protect children from sexual abuse and exploitation; to consider the extent to which those failings have since been addressed; to identify further action needed to address any failings identified; to consider the steps which it is necessary for State and non-State institutions to take in order to protect children from such abuse in future; and to publish a report with recommendations.'*
- 2.4 Bristol is one of six named areas in the Inquiry's investigation into Child Sexual Exploitation by Organised Networks. The Local Authority is a core participant of this Inquiry and has supplied information in relation to this investigation. **Significant resource has been committed to providing the evidence required by the investigation.** The hearing into this strand of the Inquiry will be held in Spring 2020.

## 3. Our approach

- 3.1 Services in Bristol have a strong background in protecting adolescents at risk of extra-familial harm. Since 2014 we have been building on our learning from Operation Brooke (a large scale investigation into organised child sexual exploitation) and developing our approach to extra-familial harm. Practitioners have a good understanding of extra-familial abuse as a safeguarding issue and many children, their siblings and their families receive support through our Children social care and Families in Focus services.

- 3.2 We are joint-commissioners of a pan-Avon and Somerset specialist Child Sexual Exploitation Service delivered by Barnardo's. This service works with around 45 of our most vulnerable children at any one time providing an intensive integrated victim care response which includes co-located sexual health services, specialist CSE CAMHS nurse and drugs and alcohol drop-in. The Avon and Somerset Police and Crime Commissioner supported a bid to the Home Office by Barnardo's to provide a parallel service to child victims of child criminal exploitation and serious youth violence. This service launched in January and is delivered in partnership with Learning Partnership West. Bristol City Council also fund a 18-25 Sexual Exploitation Transitions Worker who supports young adults at risk of sexual exploitation or those who are recovering from childhood sexual exploitation.
- 3.3 Following Operation Brooke<sup>1</sup> the partnership recognised a need for a more proactive policing and disruption approach. Avon and Somerset Constabulary funded the specialist Operation Topaz team in 2017. The team is responsible for finding opportunities to disrupt or prosecute perpetrators of Child Sexual Exploitation and has resulted in increased rates of prosecution.
- 3.4 In October 2019 Avon and Somerset Constabulary will expand the Operation Topaz team to respond to child criminal exploitation and trafficking for county lines. Bristol City Council support the team through provision of intelligence, close joint working on individual cases, and access for the police analyst to the Think Family Database to build profiles of risk and vulnerability.
- 3.5 Bristol City Council also commission preventative services through the Creative Youth Network targeted youth work service, mentoring programmes, Families in Focus evidence-based parenting programmes for adolescents, the Safeguarding Education Team's support of school-based prevention interventions and Team Around the School approach.

#### **4. Contextual Safeguarding Scale Up**

- 4.1 Bristol City Council successfully led on a Bristol Safeguarding Children Board (now Keeping Bristol Safe Partnership) bid to partner with the University of Bedfordshire on the Contextual Safeguarding Scale-Up Project<sup>2</sup>. The project was launched in April 2019 and will help us implement system change across the child protection and safeguarding system with the aim of improving our response to extra-familial abuse.
- 4.2 It includes trialling models such as peer and location assessments rather than child and family assessments, and interventions which target groups. It does not set aside the importance of a social work approach, but will draw on a range of disciplines that support and enable community and family safety. The project includes a team of embedded researchers who will support us to review our current system and identify ways in which we could use our existing resources to more effect. The observation phase of the research is underway. This will inform the co-design of system change pilots from early December 2019 that will be implemented and evaluated over the forthcoming two and a half years.

#### **5 Regional approach**

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<sup>1</sup> <https://bristolsafeguarding.org/children-home/serious-case-reviews/bristol-scrs/operation-brooke-2016/>

<sup>2</sup> <https://www.contextualsafeguarding.org.uk/>

- 5.1 The Scale Up Project will also inform our regional approach through the Avon and Somerset Safeguarding Strategic Partnership. Bristol City Council’s Director of Children and Families Services chairs a newly established regional group under the Keeping Bristol Safe Partnership and Avon and Somerset Safeguarding Strategic Partnership arrangements. It has responsibility for developing improved cross-border intelligence and responses to extra-familial abuse.

## **6 Serious Youth Violence and Safer Options development**

- 6.1 Safer Options is Bristol’s Violence Reduction Unit established for East Central Bristol from September 2018, it is now growing and being implemented citywide. It takes an intelligence led and evidence informed approach to identifying, coordinating and acting to prevent/help children recover from serious youth violence and associated adversity.
- 6.2 Safer Options is a coordinated Multi-Agency response to serious youth violence, gang affiliation and knife crime. It cannot be and is not entirely separate from wider contextual safeguarding risks such as child criminal and sexual exploitation and county lines.
- 6.3 There has been a general rise in serious youth violence and child criminal exploitation (CCE) in Bristol over the past three years. In the last 12 months Bristol has seen a 28% increase in robberies, 28% increase in violence using a weapon and a 14% increase in offences of violence without injury.
- 6.4 Whilst overall youth offending is reducing, the level of serious incidents has increased. Commensurate with this is an increase in the use being made by the courts of secure remand. In addition to the social issues that are involved, this brings an associated cost pressure to the Local Authority in excess of £1m.
- 6.5 Nationally a rise in serious youth violence and CCE has also been seen with an increase in county lines and the use of children by criminal gangs to move and deal drugs in other areas and cities. It is important that schools and universal settings work with us to include and protect children. We have developed a team around the school offer and employed education coordinators with the aim of supporting our schools inclusion agenda.
- 6.6 Since implementation there have been a number of examples of impact where children have accepted a community mentor, have engaged with positive activities, have been supported in school and where risk has been assessed to have reduced.

## **7 Safer Options Team Approach:**

- 7.1 The Safer Options Team is grounded in the Public Health approach to serious violence which has been seen to be successful in Glasgow and is now used in London. This approach conceptualises violence as a collective, rather than individual issue and focuses on understanding causality in order to provide preventative strategies that operate at every level from community through to specialist recovery from trauma.
- 7.2 The intelligence that the Safer Options Team receive enables the identification of contextual “hot spots” where heightened risk is associated with a particular area or group and to take action that builds safety and aims to disrupt the risks that are present.
- 7.3 A key element of the approach is to recognise adverse childhood experiences, the links with contextual safeguarding and to strengthen a trauma informed approach which includes helping to build positive activities that engage young people, therapeutic and psychological

services which are effective in supporting this group of young people and their families. The team support and coordinate existing agencies and services, including universal services by identifying a lead professional. Where needed, they will strengthen the service offer to young people and support them to take up services that are focussed on protection, diversion, building aspiration and achieving potential.

## **8 Operation Topaz**

- 8.1 Topaz incorporates a police led proactive team of officers and intelligence staff as well as nominated contact officers. The unit is intelligence led and is designed to assess risk posed to children from identified suspects involved in Child Sexual Exploitation (CSE) behaviours using a bespoke risk assessment, designed by the constabulary, with the intent of carrying out suspect disruption to prevent harm to children.
- 8.2 This can take many forms but includes the issuing of child abduction warning notices, arrests for unrelated offences as a means of disruption and investigations into cases of child sexual exploitation where these are not being dealt with by other police units.
- 8.3 A key part of the Topaz process is the involvement of victim contact officers whose role is to undertake long term engagement when required with children who are presenting considerable risk to themselves through identified risk factors, they are also responsible for undertaking evidence gathering via video interviews and statements.
- 8.4 The unit currently is above national average for ongoing engagement and evidential disclosures for CSE as a result of this tactic. Topaz also incorporates a significant proportion of multi-agency working with intelligence being gathered and police led multi-agency meetings where intelligence and taskings are shared with other agencies. This sharing has opened up lines of enquiry and increased intelligence sharing with partner agencies.
- 8.5 Topaz is working with 77 victims or potential victims currently and to date has 151 victims and 129 suspects listed in Bristol. The rapport that engagement officers build is key to Topaz success and can take anything from a few days to many weeks. To date, 52% of children allocated to Topaz have gone onto give either a video interview or statement.

# People Scrutiny Commission

14 October 2019



**Report of:** Ann James, Service Director Care & Support, Children & Families

**Title:** Strengthening Families Programme – progress update

**Ward:** All

**Officer Presenting Report:** Ann James, Service Director Care & Support, Children & Families

**Contact Telephone Number:** 0117 903 7951

**Recommendation:**

To note the report.

**The significant issues in the report are:**

- Demonstrable progress since the previous report received by Scrutiny 18 October 2018.
- The programme has delivered on time, to budget and achieved the high level aims of reducing the children in care population and delivered a balanced budget in children's services for 2017-18 and 2018-19.
- The programme's intensive delivery phase concluded on 30 September.
- A controlled handover to the business to continue to embed change and ensure onward sustainability of financial and non-financial benefit is happening now.
- A Lessons Learned Workshop will take place later in the year.



## 1. Summary

The Strengthening Families Programme will close on schedule and to budget. The key aim of reducing our children in care population through the range of interventions that have been delivered with the investment secured has been achieved. This includes ... working earlier with families to keep children at home; a range of measures aimed at reducing teen entrants to care; reunifying children with their families; reducing social worker caseloads so they can focus on high quality impactful practices; securing investment to deliver a new model of children's homes in order to bring Bristol children home from out of authority placements, and much more. As a result, Bristol is one of only handful of local authorities to deliver a balanced budget (and deliver savings) in the country for the preceding two years.

## 2. Context

As with the national picture, Bristol's Children and Families Service has been experiencing significant budget pressures resulting from: demand in the system; rising weekly placement costs related to a dysfunctional market; and increasing complexity of issues, particularly within the teenage care population. Following the appointment of a new Service Director in May 2017, a series of management actions were implemented to tackle overspending budgets, addressing each area of pressure and these had some positive impact in the short-term.

It was recognised however, that the existing model of delivery did not allow for the pressures to be addressed over the longer term in a sustainable way and was not impacting on demand or enabling delivery of good outcomes for children and families living in Bristol. This was exacerbating challenges around demand pressures, increased costs and workforce instabilities. System-wide transformation was required to bring about sustainable change to focus on the root causes of demand underpinned by ACEs (Adverse Childhood Experiences); improve the partnership response to children and families in need of support; and enable us to deliver our vision and key outcomes.

The **Strengthening Families Programme** was Bristol's response to these combined challenges and ambitions. A system-wide programme of transformational change was developed, underpinned by a business case for investment, which set out to deliver substantial financial and non-financial benefits over a 5-year delivery period. The Programme received formal Cabinet approval and funding in April 2018, however, work on some transformational activity and early release of benefits pre-dates that.

A focus on ACEs and their impact on health and emotional wellbeing, harming behaviours, alcohol use, drug use, violence, sexual behaviour, incarceration, smoking, poor diet, leading to a higher than average use of health and social care services, underpins the direction of travel within the Strengthening Families programme.

The **vision** for children and families in Bristol is that they get the "right response, the right assessment, the right help, at the right time".

The **Statement of Intent** for the Programme is to make cost savings whilst holding the ambition of improving outcomes, commissioning and delivering quality services and keeping children and families at the heart of what we do.

- **We want the best** for Bristol’s children and young people and they are at the heart of everything we do.
- **We will help families** to achieve the change they want to see for themselves and their children
- **We believe** that children should live with their families or someone who knows them best.
- **We take action** when children need to be protected from harm.
- **We do everything we can** to make sure that the children in our care and care leavers are set up for life.

There are three<sup>1</sup> angles from which the programme approached the challenge:

1. **DEMAND** – tackling the number of children, young people and families that need our support and reducing the level of that need;
2. **SUPPLY** – how we organise our resources and commission in order to respond to that demand and, within that;
3. **WORKFORCE** – how we organise and support our staff to deliver the most effective and timely response to families.

The intensive delivery phase of the programme has now concluded (April 2018 to September 2019). There is, however, an onward benefit realisation period of 5 years extending through to 2023.

The full report detailing the achievements, challenges and closing position of the programme is available at Appendix A with Appendix B providing case studies of impact in each area of programme delivery.

### 3. Policy

Not applicable.

### 4. Consultation

#### a) Internal

Not applicable.

#### b) External

Not applicable.

### 5. Public Sector Equality Duties

- 5a) Before making a decision, section 149 Equality Act 2010 requires that each decision-maker considers the need to promote equality for persons with the following “protected

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<sup>1</sup> A detailed explanation of each of the three challenges is contained within the Strengthening Families Full Business Case.

characteristics”: age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation. Each decision-maker must, therefore, have due regard to the need to:

- i) Eliminate discrimination, harassment, victimisation and any other conduct prohibited under the Equality Act 2010.
- ii) Advance equality of opportunity between persons who share a relevant protected characteristic and those who do not share it. This involves having due regard, in particular, to the need to --
  - remove or minimise disadvantage suffered by persons who share a relevant protected characteristic;
  - take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of people who do not share it (in relation to disabled people, this includes, in particular, steps to take account of disabled persons' disabilities);
  - encourage persons who share a protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.
- iii) Foster good relations between persons who share a relevant protected characteristic and those who do not share it. This involves having due regard, in particular, to the need to –
  - tackle prejudice; and
  - promote understanding.

5b) An EqIA relevance check was completed for the programme when it was presented to Cabinet seeking approval and funding in April 2018. The result was that a full EqIA was not required for the programme and assessments would be undertaken at the individual project level as there was no evidence of combined or cumulative impacts arising from the proposals tabled..

**Appendices:**

Appendix A – Summary Report of Programme Closing Position

Appendix B – Case Studies

**LOCAL GOVERNMENT (ACCESS TO INFORMATION) ACT 1985**

**Background Papers:**

None.



# Closure/Handover Report



strengthening  
families

## 1. Performance against scope and objectives

### 1.1 Programme scope

The programme's intention was to undertake a system-wide transformation of children's services to deliver the vision for children and families, whilst achieving the required financial savings. This required the scope to be flexible enough for projects to be brought into the programme if they were deemed to contribute to the benefits – financial and non-financial – being sought. Similarly, gatekeeping and change control functions monitored via the Programme Delivery Board and governed by the Transformation Board ensured that scope creep did not undermine the programme's overarching objectives or impede its success. Within scope were specific projects and discrete work packages, however, the programme extended to 'focused business-as-usual' activity where we were seeking an improvement and contribution to benefits within existing resources by, for example, following best practice.

The programme delivered largely to the published scope – certainly in terms of areas of focus and ambition. On the occasions where there was deviation from scope, this was primarily concerned with methods of delivery and/or procurement and were approved within the programme's own governance structure. There were two occasions where the Programme Board agreed to extend the scope to achieve programme objectives:

1. A mini project to supply social workers with kits to support direct work with families. These kits comprise items such as [Worry Monsters](#), emotion cards and a selection of portable crafting items and was intended to complement the rollout of mobile technology. The dual rollout was designed to reinforce the message that the new technology was to enable social workers to have more time to undertake meaningful and impactful work with families.
2. Delivering improvements to the finance system to enable better reporting of spend against placement type. The programme was originally intended to develop the business case and secure funding to run this as a standalone project, however, the options appraisal identified a tactical solution that could be funded and implemented within the programme's governance.

### 1.2 Programme objectives

SMART programme objectives were agreed following Cabinet approval of funding and link directly to the areas of investment and intervention set out on the business which was approved. SMART objectives were reported on monthly in the PMO Highlight Report and were presented to the Programme Board via a trajectory management approach. Trajectories were supported by narrative supplied by the service (the last set of trajectories produced for programme reporting is available at Appendix).

	Specific	Measureable	Timebound	Status
1	Number of children in care and/or the	Children in care numbers are available	over the life of the	Achieved. The reduction of the overall number of

	Specific	Measureable	Timebound	Status
	cost of placements reduce.	on demand, but were reporting monthly via the Trajectory report. Cost of Placements were reported quarterly via a Finance & Activity report	programme (and beyond)	children in care has been a success story of the programme (from 702 at point of FBC, to a low of 604, before levelling off at around 620. The budget for placements continues to be under pressure as presented in the Q1 Finance & Activity analysis (see Appendix X).
2	Number of older children entering care reduces	Monthly via trajectory report, twin tracking 10 to 15 and 15 to 17 year olds (and Unaccompanied Asylum Seekers)	over the life of the programme and beyond	Achieved. There has been a steady reduction in the number of older children entering care over the life of the programme. This continues to be a focus of the service.
3	Caseloads are reduced to recommended levels	A target of 1400 cases held across the 3 areas	over the life of the programme (and beyond)	Achieved. The caseload target was achieved in the penultimate month of programme delivery.
4	Number of children exiting care via an appropriate route increases	Monthly via trajectory report, exits to SGO, adoption and reunification	over life of the programme (and beyond)	Achieved in part. Issues with recording impeded early tracking, further complicated by transfer of adoption to regional service – Adoption West. Increases in exit to SGO can be evidenced and Reunification Team can evidence some early success.
	Use of In-House Foster Carers increases/use of Independent Foster Carers reduces	Targets were set to increase placements over 3 year period	3 years	Not achieved. Current levels have been maintained in context of national recruitment shortfalls. Impact of some intervention activities are not yet visible.
6.	Quality of partner referrals to First Response improves/volume reduces	Monthly via trajectory report, showing contacts and No Further Actions	over the life of the programme (and beyond)	Achieved in part. Variable performance over the life of programme which has given rise to questions over recoding/collection of data.
7.	Increase in families being supported by joint-working (across Families in Focus and Social Care)	Quarterly	over the life of the programme (and beyond)	Achieved in part. Metric is problematic to establish as pulls from 2 systems, manual cross checking is required.

## 2. Achievement of programme benefits

### 2.1 Financial benefits delivery

The savings position for 2018/2019 was validated via the P12 Summary Outturn for Division 15 as delivered. The Children's Social Care Finance and Activity Analysis Q1 2019/20 (taken from snapshot of data as at 30 June 2019) shows that costs overall have been rising in recent quarters and are now only £0.5m less than the prevailing spend in March 2017. Children in care numbers have been reducing (-9% since March 2017), as has the spend (-3% since March 2017).

This is offset, however, by rising costs in Permanency (£0.2m / 3%) and in Care Leavers (+£0.1m / +7%) with number of Permanency and Care Leaver cases around the same level as in March 2017.

As part of the service delivery planning and annual budget setting process, discussions are underway to review the level of savings that can realistically be achieved in future years. These discussions will take into account proposals pressures within the business that have previously been absorbed (e.g. social worker pay uplifts), newly emerging pressures (e.g. increase in serious violence, more unaccompanied asylum seeking children, impact of continuing austerity on families) as well as savings within the original FBC which are not on track to deliver (e.g. increases in contributions received from Health as a result of the introduction of a high cost placement calculator).

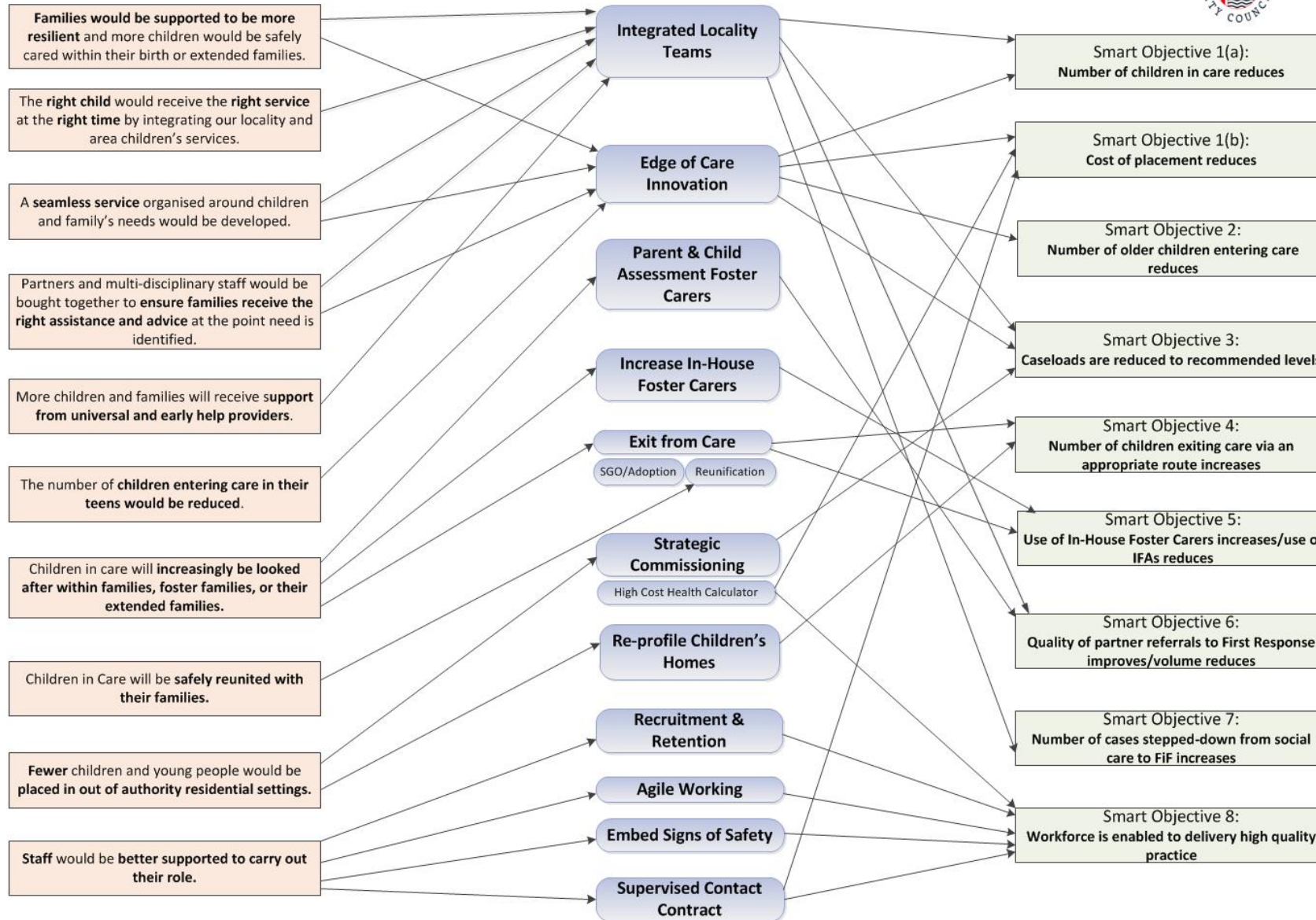
## **2.2 Non-financial benefits delivery**

A benefits mapping exercise was undertaken during the start up phase of the programme. Within a such a large system-wide change programme it is not always possible to map benefit delivery directly to an intervention as there is complex network of dependencies and interdependencies in play. Performance to date against a range of non-financial benefit is listed after the map but but this is not to be considered to be exhaustive as benefit delivery and impact of programme sponsored interventions remains ongoing.

In addition, there has been additional non-financial benefits in the form of the programme interventions giving strength to service-led funding and innovation bids, such as securing significant extra funding the from the Office of the Police and Crime Commissioner to scale-up our multiagency approach to serious violence; as well as securing investment and delivering a coordinated response to escalating serious youth violence and contextual safeguarding risks in East Central Bristol. Troubled families earned autonomy enabled us to further develop our early help offer to ensure Families in Focus, Children's Centres, targeted Youth Services and Strengthening Families Teams delivered an effective and well-coordinated Early Help Service in which families receive the help they need when they need it (right help and support at the right time). These initiatives and enhancements are predicated on programme sponsored Integrated Locality and Edge of Care interventions

A range of case studies detailing the impact of the Strengthening Families Programme were compiled and included as part as the Annual Conversation with Ofsted which took place in July this year. These case studies are available at Appendix B.

# PROGRAMME BENEFITS MAP



**Workforce: creating conditions to enable high quality social work practice to thrive**

Social Worker Recruitment & Retention

Agile Working for Social Workers

Embed Signs of Safety Methodology

Measures	Performance to date
<ul style="list-style-type: none"> <li>• Settled workforce, turnover less than 18%</li> <li>• Healthy workforce, sickness less than 22%</li> <li>• Reduce use of agency workers to less than 9</li> <li>• Quality of assessments improve</li> <li>• Quality of plans improve</li> <li>• Caseloads are reduced</li> </ul>	<ul style="list-style-type: none"> <li>• Building on identified areas of strength have been able to maintain a stable workforce, kept agency use low, and continued to reduce caseloads to an average of 17 per social worker                             <ul style="list-style-type: none"> <li>– Turnover over for the past year is 18.89%</li> <li>– 10 average working days absence per employee over the past year</li> <li>– Agency use down to 7.5 FTE</li> </ul> </li> <li>• 81% of social workers feel they have the right tools to do the job, up from 38% last year</li> <li>• A new competency based career progression arrangement has been implemented; enabling more social workers to progress to the level of advanced practitioner without the need to move jobs</li> <li>• Improving quality of assessments, with 50% audited assessments being judged good or better in quarter 4 2018/19, up from 34% in quarter 2 2018/19.</li> <li>• Audited plans shows a smaller improvement in the same period, with 36% rated good or better (from 31%). Further work is underway with focussed sessions being delivered in each service area.</li> <li>• Participation in the Signs of Safety England Innovations Project and training in Systemic Practice with the Centre for Systemic Social Work to embed strengths based, solution focussed, trauma informed practice consistently across the workforce</li> <li>• Signs of Safety training for all new staff, SoS revision of assessment form and new visual guides produced</li> <li>• Sustained reduction in caseloads gives social workers more time to work with children and families</li> </ul>

**Supply Management: how we organise our resources and commission in order to respond to that demand**

Increase Adoptions & SGOs  
 High Cost Health Calculator  
 Increase In-House Foster Carers  
 New Model of Children’s Homes

Measures	Performance to date
<ul style="list-style-type: none"> <li>• Number of children placed within 20 miles of home and in our own provision</li> <li>• Increase in number of in-house foster carers and placements available</li> <li>• Improved conversion rate from initial enquiry stage through to approved status</li> <li>• Increased exit from care to SGO</li> <li>• Increased exit from care to adoption</li> </ul>	<ul style="list-style-type: none"> <li>• Reviewed and secured investment in our foster carers as the city’s VIPs, including innovative approach to recruitment and retention designed with the Behavioural Insights Team, foster carers, Home for Good and our Partner in Practice</li> <li>• Delivering a step change in the number of applications to foster through our refreshed approach to fostering: helping to deliver the comparatively high percentage of children placed within 20 miles of home (79%) and in our own provision (63%). Fewer children are placed more than 20 miles from their home address (17% in 2018/19) which is below the England average of 19%.</li> <li>• Good (top quartile) performance for short-term and long term placement stability (provision 2018/19 data continues to evidence good performance).</li> <li>• Delivered parent and child residential assessment framework and our own parent and child fostering service</li> <li>• Leading work with the CCG for children in need of continuing care</li> <li>• Re-profiling our children’s homes - capital investment to open two new Children’s Homes in 2019 (the first of eight in an ambitious five year plan)</li> <li>• Investing in Special Guardianship and revising the support available to them as plans to increase the number of children achieving permanency through SGOs are achieved</li> </ul>

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**Demand Management: tackling the number of children, young people and families that need our support and reducing the level of that need**

Integrated Locality Working<sup>1</sup>  
 Edge of Care/Edge of Custody<sup>2</sup>  
 Reunification/Exit from Care  
 Supervised Contact Service  
 Bristol is an ACE Aware City  
 Refresh of Area Social Work Model  
 MASH Telephony

Measures	Performance to date
<p>Page 63</p> <ul style="list-style-type: none"> <li>• Reduction in the number of children who need a Child Protection Plan</li> <li>• Reduction in teenagers needing to come into care</li> <li>• Reduction in the rate of reoffending by young people</li> <li>• Reduction in antisocial behaviour</li> <li>• Reduction in contacts to the Front Door</li> <li>• Reduction in school fixed-term exclusions</li> <li>• Improved school attendance</li> </ul>	<ul style="list-style-type: none"> <li>• In 2018/19 there was a continued reduction in number (-157) and rate of children need, which is significantly lower than statistical neighbour average. This change includes the reduction in number of children subject to a Child Protection Plan and numbers of Children in Care.</li> <li>• There has been a continued focus of meeting children’s needs at the earliest point, which has prevented the need for statutory intervention, maintained lower caseloads, and ensured purposeful practice.</li> <li>• Focused work with partners on referrals is improving quality and understanding of thresholds, particularly with school and education settings where the conversion from contact to referral is high, evidencing the impact of our team around the school approach.</li> <li>• Multiagency, area based Strengthening Families Teams now trained in Non-Violent Resistance and evidence informed parenting programmes, they are effective at working with families to prevent family breakdown and address contextual risks.</li> <li>• New Families in Focus teams Q2-Q4 cases closed (worked with 469 families/477 children helped)                         <ul style="list-style-type: none"> <li>– 143 have improved school attendance</li> <li>– 57 reduced offending and antisocial behaviour</li> <li>– 95 achieved work or gainful activity</li> <li>– 96 reduced financial exclusion</li> <li>– 107 reduced domestic abuse</li> <li>– 346 improved health outcome</li> </ul> </li> <li>• Reunification Team in its first year has worked with 29 children and 23 families. 18 children now live at home and 1 child returned to our care. The team costs £300k per annum and has saved just under £1m in placement costs per annum.</li> <li>• Continued to reduce late entrants to care and support families effectively, contributing to further improvement placement sufficiency.</li> </ul>

<sup>1</sup> Launched as Families in Focus (FiF) teams across 3 areas (North, South and East Central)

<sup>2</sup> Launched as Strengthening Families Teams across 3 areas (North, South and East Central)

- In 2018/19 there was been a slight reduction in the rate of child protection plans to 37 per 10,000 children. This rate is low compared with England average and Statistical Neighbours and follows the significant drop in rate in 2017/18 when 9 month check aimed at eradicating drift and delay was instated and the Strengthening Families transformation programme was initiated.
- Achieving sustainable change that enables children and young people to live within or return to their families and, when this is not possible, achieving permanency as quickly as possible
- One City Plan<sup>3</sup> launched with an ambition to eradicate ACEs by 2050

Measure	Unit	Bristol 2017-18	Bristol 2018-19 (provisional)	LA Quartile	Stat Nbr 2017-18	England 2017-18
Rate of children looked after at 31 March per 10,000 children aged under 18 years	Rate	69	66	B	80	64
Started to be looked after % Age: 10 to 15	%	29	26	B	26	28
Started to be looked after % Age: 16 and over	%	18	15	B	16	18
PiCiC in own provision (by the Local Authority)	%	61	63	A	49	53
% of children leaving care over the aged of 16 who remained looked after until the age of 18	%	81	78	A	71	74
% Adopted	%	6	10	C	17	13
% Special Guardianship Orders	%	8	19	A	14	11

Performance improvement is evident for almost every indicator. Delivery of the vision and Strengthening Families Programme has resulted in the reduction in teenage entrants to care and an increase in exit from care to suitable family or alternative permanency arrangements (adoption and special guardianship). Performance is in line with or above that of good and outstanding authorities as well as above that of statistical neighbours and core cities.

There has been a continued reduction in rate of children in care, with the rate significantly lower than statistical neighbours. This reflects the ambition of the Strengthening families programme to reduce the need for care and can be attributed to the:

- focus on reducing teenage entrants to care
- success of edge of care service and exit from care team
- effectiveness of early help services and area social work teams

<sup>3</sup> <https://www.bristolonecity.com/>



It is important to set these achievements in the broader context of changes and familiar and emerging challenges in children’s social care, including a serious violence increase nationally and in Bristol, leading to an increase in young people being remanded by the courts; the continuing and increasing impact of austerity on families; national increases in children in care populations and children subject to child protection plans (Bristol is bucking both these trends).

### 2.3 Benefit realisation handover

Onward benefit realisation and oversight of project activity that extends beyond the life of the programme was formally discussed and agreed at the August Programme Board. The following routes and owners were identified and ratified at the final Programme Board held on 2 October 2019.

Benefit yet to be realised	How this will be measured?	Who will take ownership/ through which forum?	When will the benefit be realised / measured?
Savings profiled for 2019/2020 of £1,642,067	Division 15 forecasting and outturn position	Service Director for Children & Family Services <i>Budget Working Group</i>	ongoing to April 2020
Savings profiled for 2020/2021 of £2,194,632	Division 15 forecasting and outturn position	Service Director for Children & Family Services <i>Budget working Group</i>	April 2020 to April 2021
Savings profiled for 2021/2022 of £1,828,292	Division 15 forecasting and outturn position	Service Director for Children & Family Services <i>Budget Working Group</i>	April 2021 to April 2022
Savings profiled for 2022/2023 of £453,228	Division 15 forecasting and outturn position	Service Director for Children & Family Services <i>Budget Working Group</i>	April 2022 to April 2023
Model of smaller Children’s Homes and associated new ways of working	Reports on progress and home occupancy rates to Children’s Home Project Board	Service Director for Children & Family Services <i>Children’s Home Project Board &amp; Children’s Service Improvement Board<sup>4</sup></i>	Incrementally during delivery period as each new home is purchased and opened (2019 to 2023)
Social Workers accessing LCS whilst on the move and fully agile in their work style	Deployment of devices able to run the LCS Mobile App	Service Director for IT <i>ITTP Governance (with reports to People EDM)</i>	2020
Social Workers accessing LCS whilst on the move and fully agile in their workstyle	Annual Social Worker Health Check survey (regarding ‘tools to do their job’ question) and service Quality Assurance Framework	Service Director for Children & Family Services <i>Children’s Management Team</i>	a few months after devices have been deployed

<sup>4</sup> By exception only

Benefit yet to be realised	How this will be measured?	Who will take ownership/ through which forum?	When will the benefit be realised / measured?
Improved understanding of placement type and spend through upgrading and enhancements for Softbox	Reduced time and effort spent manually analysing spend/improved products for managers	Service Director for Children & Family Services <i>new Project Board</i>	Q4 2019/2020

### 3. Performance against schedule

Mandate approval	Kick off meeting	Original planned closure date	Current approved closure date	Actual closure / halt date
30/08/2017	n/a	30/09/2019	30/09/2019	02/10/2019

Overall the programme performed well against the original baselined plan, with the majority of milestones being achieved within tolerance. The arrival of Programme Support in June 2018 accelerated progress across a number of workstreams, particularly those not in receipt of any specific programme funding or other resource. Additional support for the programme also enabled a more robust approach to reporting and monitoring of progress against plan. Where delay or slippage did occur, these were largely absorbed by the programme without detrimental impact and fell into two main categories – those within the control of the programme and those which were not. The first concerns those delays which, with the benefit of hindsight may have been mitigated or avoided had more rigorous upfront planning or seeking out expert advice earlier e.g. starting procurement and/or decision pathway processes earlier. Examples of delays incurred which were outside of the programme’s control included changes in policy, absence of purchasing frameworks/suppliers, or external factors such as the Ofsted Inspection taking out 4 full weeks out of delivery.

The work to deliver a new model of smaller children’s homes within the city was always intended to run beyond the Strengthening Families Programme having achieved its aim of securing Cabinet approval and releasing funding. This leaves 3 programme sponsored pieces of work which were not able to be concluded within the agreed delivery period, the reason for slippage for each is outlined below.

Project or Workstream	Reason for Slippage
Agile Working for Social Workers	The Agile Working project was beset by a number of challenges leading to a build up of delays since first receiving Cabinet approval and funding on 6 March 2018. These are well documented within the project’s own management products and minutes of meetings etc. The most significant – and that which has prevented the project from progressing in its current form beyond the closure of the Strengthening Families Programme – was the launch of the council-wide IT Transformation Programme (ITTP). The ITTP proposes far reaching and revolutionary system-wide changes which the Agile Working project will not benefit from if it were to continue to deliver to its original scope and timescale. Following an Exception Report process, the decision was taken that ITTP will take over delivery of the project and project funding transferred. The details are being finalised on this, including when social workers can expect to receive their devices in the wider deployment.

Project or Workstream	Reason for Slippage
High Cost Health Calculator	This is a complex project concerned with negotiating a new funding protocol with the CCG and neighbouring authorities for our most complex children with high cost health needs. The negotiations are taking place at the most senior levels across the partner organisations and funding has been set aside by the programme as part of closure proceedings to continue this work through to the end of the financial year. Work will still continue even if negotiations are not fully concluded at that point, but programme funded resource will no longer be available.
Finance Module for LCS	There were various set backs and changes of direction in the earlier stages of developing this work. An assumption was made about the required solution at the outset that did not ultimately withstand scrutiny. As a result, a full options appraisal process was undertaken, leading to a different solution. Once the decision has been made, progress has been solid and kept to plan. The resources and governance are in place to see the project through to conclusion in January 2020.

#### 4.3 Delivery

Original approved budget	Final approved budget	Actual total spend	Variation
Capital Reserves £1,815,000	£1,815,000	£1,815,000	£0
Revenue £1,017,000	£1,017,000	£1,017,000	£0

The programme was responsible for a number of cost centres which will be transferred to the nominated leads in the service to manage ongoing activity through to financial year end. Budget Manager responsibilities linked to cost centres were fully compliant throughout the life of the programme, including submission of key milestones for capital projects. All cost centres are forecast to spend to budget within the current financial year with the exception of the Children's Home Residential where the milestones and spend profile extends until 2022.

#### 4. Summary of key programme risks, issues and resolutions

Every endeavour has been made to resolve any open risks and issues before programme closure. RAID logs have been reviewed in full and have been transferred to the service as part of handover process. The residual risks and issues relate to delays in extending colocation aims beyond the North to the rest of the city, delays in deploying devices to social workers, and those which pertain to managing pressures and increased demand across children's services which may impact on future savings delivery.

#### 5. Lessons Learned

The Lessons Learned Workshop has been scheduled for 26 November 2019, 2 months after formal programme closure as this benefits from taking a reasonable break between delivery and structured reflection of lessons learned. Programme Board members formally committed to participating in the workshop at the final board meeting on 2 October 2019.

<u>Lessons learned workshop</u>	<b>Attendees</b>	
	<b>Name, Job Title</b>	<b>Role in the Programme</b>
26/11/2019	Samantha Flowers, Senior Project Manager	<i>Programme Manager – Strengthening Families</i>
	Helen Haggi, Project Manager – Children’s Homes	<i>Programme Support Officer – Strengthening Families</i>
	Ann James, Service Director	<i>Programme Executive – Strengthening Families</i>
	Jacqui Jensen, Executive Director	<i>Programme Sponsor – Strengthening Families</i>
	Gary Davies, Head of Service	<i>Programme Board member</i>
	Fiona Tudge, Head of Service	<i>Programme Board member</i>
	James Beardall, Head of Service	<i>Programme Board member</i>
	Bridget Atkins, Head of Service	<i>Programme Board member</i>
	Tessa Bailey, Consultant	<i>Senior Professional Lead –Strengthening Families</i>
	Jackie Healey, HR Advisor	<i>HR Advisor – Strengthening Families</i>
	Graham Wilkie, Performance & Improvement Manager	<i>Programme Board member/critical friend</i>
	April Pye, Children’s Service Performance Advisor	<i>Trajectory Reporting &amp; Analysis</i>
Sam Marsh, People Business Change Manager	<i>Programme Assurance</i>	

# Case Study 2: Joint Working and Integrated Localities (Demand Management)

## What did we do?

**Families in Focus** introduced the 'team around the school' (TAS) initiative across the city. Schools have been banded depending on risk and vulnerability factors and this determines the frequency of visits that each school will receive in a year.

All schools receive support from their locality Families in Focus team. This includes:

- Face to face meeting and telephone advice and guidance
- Domestic violence notifications (with assertive outreach from our IDVAs)
- Targeted youth offer
- Access to the Think Family database
- Access to wider multiagency offer, inc Adult Mental Health, DWP, regular pastoral support and training bursts.

**Locality meetings** have been held weekly since April 2018 and are proving to be a very successful forum. There is good representation at these meetings which includes Families in Focus, Children's Centres, Social Care, Disabled Children Service, Police, YOT, Creative Youth, CAHMS and BDP.

## Why did we do it?

To provide an opportunity for early conversations to take place about children and young people that schools are worried about; and to improve joint working and decision making about how best to support children and families in each locality, particularly when they are moving between services.

## What difference did it make? (Case Study)

September 2018 to January 2019 in South Bristol:

- 36 TAS meetings in primary, secondary, nursery schools and Pupil Referral Units
- 6 to 8 children discussed at each meeting and Signs of Safety mappings are completed with Designated Safeguarding Leads to highlight the worries and decide next steps.
- **Only 2 children** discussed within these meetings have needed a follow up referral to First Response, indicating that schools are holding appropriate levels of complexity within their school setting.

This initiative has been well received by schools and has had a demonstrable impact on the quality of referrals made by schools to First Response with a drop in those resulting in no further action.

Partners report a better understanding of working arrangements, thresholds and feel integral to what we are all trying to achieve together. The working relationships between FiF, Social Care and Children's Centre's has shifted with improved communication and shared ownership. We have clearer processes in place to ensure we are not duplicating support and families receive a seamless service from us as a Local Authority.

## Case Study Quote

*"I wanted to compliment DW [Social worker from Families in Focus] for his visit to our school for the Team around the School meeting. I thought DW was brilliantly calm, honest, easy to talk to, knowledgeable and very helpful. I know that he has been doing this for a long time and knows his stuff but I thought I would take this opportunity to express how impressed we were with his support."*

# Case Study 3: Integrated Localities / Joint Working (Demand Management)

## What did we do?

Families in Focus lead a weekly integrated locality meeting with a quarterly advisory group of senior leaders in each area of the city. Together they set priorities and share work, focusing on relationship based working and meeting need at the earliest point.

## Why did we do it?

To engender ownership of place and improve outcomes for children and families, reduce demand for specialist services, provide a forum to allocate work and share knowledge and skills.

## What difference did it make? (Case Study)

Relationships and communication have improved with both internal and external partners. There is a shared understanding of services, including demand, pressure, thresholds and the roles of managers/supervisors. A trickle-down effect to frontline practitioners has been achieved resulting in greater commitment to and improved arrangements for joint working and transition between services.

Key partners report an improved understanding of threshold through attendance at locality meetings.

### Case example 1:

- Parent with two children under 5, where concerns were around substance misuse - allocated via locality meeting to Children's Centre's Family Support Worker with consultation and joint work from Bristol Drugs Project link worker.
- Social Workers access FiF Assertive Outreach IDVAs to good effect
- Support to Social Workers with information about and access to community resources to support ongoing plans and sustain families following SW involvement.
- Housing Coordinator provides consultation and trouble shooting to SWs where families have been threatened with homelessness or evicted from temporary accommodation.

## Case Study Quote

*"Closer working relationships with social care has led to an increasing number of families being joint worked and held effectively in FIF. The capacity to take on this work is due to improved focus on supporting universal services to lead on work with families. Cases being referred, triaged and allocated according to need more effectively, with supervisors carrying out detailed triage to ascertain need, which is followed by advice, guidance and support to universal services where an NFA decision is reached."*

### Case example 2:

- single mum with 3 children under 5.
- dad recently sentenced to life in prison for murder
- step in requested from a SW following the sentence and due to escalating risk within the family (police report was received with allegations of neglect, physical and emotional abuse by mum)
- Social care agreed to open the case as CIN, working alongside SFT with a clear 6 week plan in place.
- This plan is still in place, and SFT and social care are working closely and sharing resources effectively.

# Case Study 4: Edge of Care & Custody (Demand Management)

## What did we do?

The Strengthening Families Team (SFT) sits within each Families in Focus service and has replaced the old Family Intervention Team. The purpose of this team is to work specifically with children and young people on the edge of care or custody.

## Why did we do it?

The rationale for the development of this team is to reduce the number of children entering care and custody, which is of high cost to the authority and has poor outcomes for children and young people.

## Predicted and expected stresses:

One part of the service that is less developed is our work with children on the 'edge of custody'. We have acknowledged that this phrase has been a barrier in identifying the right cohort of children to work with and feel that perhaps 'edge of criminality' is a more helpful phrase in order for this to happen.

Plans are in place to ensure that children and young people that are identified by the Youth Offending Team (YOT) as being suitable for this service are referred and provided with a service as soon as possible.

Increased attendance by the YOT at our weekly Locality meetings will greatly assist with this.

Plans to add capacity to further integrate Children Centres and develop the Edge of Care & Custody model is being progressed.

## What difference did it make? (Case Study)

In September 2019 the SFT took on the case management of a number of families that had been previously worked with by Skylakes and over the course of the following months received referrals from our area social work colleagues, PDT and First Response for SFT allocation. The cohort of families now being worked with by this team are either on the edge of family breakdown due to the difficult behaviours presented by the children within the home, or are at risk of children being removed from the family home due to worrying family functioning and parenting capacity.

Keyworkers are working flexibly with families. In one example, a keyworker has provided parenting coaching over the phone at weekends for a father struggling to manage his young daughters' aggressive behaviours. When the keyworker started working with this family the father was repeatedly requesting respite foster care, however, an intensive support package, involving parenting work with dad and step mum, CBT support for the child, and positive activities for the other child has negated the need for this and the family situation is currently stable.

Our Locality arrangements and strengthened working relationships between Area Social Work and Families in Focus teams, has provided opportunities for joint work to take place. We have written joint working protocols to ensure that we are clear on who is doing what and to ensure that our plans align. Joint work between SFT and children on CP plans is taking place with SFT providing intensive parenting work and family support. Strengthening Families Co-ordinators and /or other practitioners are being consulted about what additional support could be added to area social care cases when families are in crisis or on the edge of breakdown so even when SFT cannot take on the whole family, assistance can be provided. For example, our youth practitioner has been heavily involved in securing a support package for child on edge of custody currently on an ICO.

# Case Study 5 – Signs of Safety (High Quality Practice)

## What did we do?

Produced visual guides to the Signs of Safety workflow.  
Delivered training to all ASYEs and workshops led by Deputy Area Managers in each service area.  
Family Finding training with Kevin Campbell attended by managers and practitioners - rolling out across the service and being used to build supportive family networks and avoid care.

## Why did we do it?

To support the workforce to understand the methodology and enable them to better translate this into practice.

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## Case Study Quote

*"I understand why they are involved because of the accusations, the house being untidy and because I am on drugs. But I was raped, grandad died, mum dying. I have opened up a bit more with this social worker. We are going to do work together and go to alcohol and drugs worker. I'm not sure why I open up more to him. I think, he understands, he has seen the things that have been going on. He is respectful." With the Child Protection Conference 'At first I thought - I want off that plan. But I like the CP Conference Chair. She manages the meetings well. She listens to me and understands me. I feel comfortable. I had the CP Report before and marked what I didn't agree with so I could speak about it at the meeting."*

## What difference did it make? (Case Study)

Audits evidence that increasing numbers of cases each month come to Child Protection Conferences with a Family-led Safety Plan and collaborative mapping assessment. In real terms this means that families are increasingly being engaged and involved in the child protection process, and interventions are more effectively naming risk and establishing safety.

Melanie has three children under the age of 5. The three children have a different father. There has been domestic abuse in the relationship between Melanie and each of the three men. Melanie is a care-leaver. Children and Families Services have been involved for most of the children's lives due to the concerns about domestic abuse, neglect and Melanie's drug misuse. When one children's father came out of prison the social worker used the safety planning tools to develop a realistic safety plan about his contact with all the family members involved. This included specific actions devised by the child who wanted to see her step-father but 'have no shouting in the house'. This plan was changed and enhanced by including the children's grandmother and paternal aunt.

## Data/Financial Information/Trajectory

Increase in % of safety plans brought to CP Conference increased to 73% by year end



# Case Study 6: Agile Working – (High Quality Practice)

## What did we do?

Deploy Smartphones to enable social workers.

## Why did we do it?

Enable social workers to work more efficiently.

## Next steps

1. Direct work kits issued to all Social Workers July
2. Piloting lighter, more interactive notebooks July – September
3. Piloting LCS Apps that will enable families, workers and partners to access records according to their needs

## What difference did it make? (Case Study)

Social workers universally say it makes their life easier. Whilst out they can access emails wherever they are. If they are in a meeting or in court they can be sent a report or information to use. They can quickly access a police report of a domestic abuse incident to help them plan their visit.

Smartphones can be used for sharing photographs from and to paediatricians and police and have been used specifically in one case where a bruise was eliminated as a Mongolian blue spot by the paediatrician, therefore not needing to subject a child to an unnecessary child protection medical.

## Case Study Quotes

*“Having a smart phone provides CSW with the appropriate means to support effective management and responses to risk when out of the office because it provides continued access to email information. It can also prevent responses to professional’s concerns being unnecessarily delayed and a build of work tasks when being out of the office.”*

## Case Study Quotes

*“ASYE now have their own WhatsApp group. I have asked them all to make sure they have a break at lunchtime and they use the group to remind each other to have a break – they often go for a walk together as a group”*

## Case Study Quotes

*“Being able to use WhatsApp-is excellent because families can make free phone calls and text. It’s so much easier to stay in touch with young people through WhatsApp.”*

# Case Study 7: Reunification

## What did we do?

The Reunification Team has been set up with 1 Practice Lead, 1 Social Worker, 2 Family Key Workers, 3 Family Support Workers and 1 P/T Business Support Officer. The original proposal envisaged that the team would be working with 12-16 families when fully staffed. The team are currently working with 21 families with 26 children. 20 of the children are aged over 10 and some of the younger ones are part of a sibling group. 18 children are already living at home.

## Why did we do it?

In the past, social workers did not have capacity to provide regular and intensive support to children, young people and their families when there is a planned or unplanned reunification. This had meant that reunification has not been successful or Care Orders have remained in place for long periods of time when children are at home.

## What difference did it make? (Case Study)

We provided the framework timetable and process to work with the family and Aaron to enable him to return home. Aaron has moved from being missing on a frequent basis, offending and engaging in anti-social street conflict, at risk of exploitation from adults, not engaging in his education, taking drugs and alcohol to engaging in his education most of the time, starting to manage a routine of returning home and letting adults know where he is. Since returning to his mother's care he has not committed any offences and has not placed himself at any significant risk.

Aaron now feels listened to and understood by the 3 key professionals in his life – his youth offending worker, education coordinator and social worker – and he is engaging much more meaningfully with us. He now has a long term plan in which he sees himself as an active partner and participant. Research shows this is much more likely to deliver successful outcomes than a care plan 'imposed' on Aaron by professionals. We have helped Aaron undertake a fundamental change in his social care arrangements from being in care to living at home amongst his family.

## Case Study Quote (SW)

*"I am much less worried about his safety and welfare on a day-to-day basis. Aaron and I have a much more cooperative and collaborative working relationship than previously. His Education and Youth Offending workers report a similar improvement."*

*The focus of work has shifted from reacting and responding to 'problems' created by Aaron being unsettled in care, to providing an opportunity for him and his mum to work through issues around him being parented, and mum taking responsibility for looking after him."*

## Case Study Quote (Child)

*"They have helped me with school, thinking about my future, money, rules and helping my mum."*

*"I like the team as they are helping families' stay together."*

# Case Study 7 - Reunification (continued)

## What difference did it make? (Case Study)

Two families that I work with are being supported by the Reunification Team. I was spending a lot of time supporting parents in managing their child's behaviour after reunification, rather than focussing on the child themselves. Additionally, the family needed someone to visit and check in twice a week, something that I do not have capacity to do.

The team has been brilliant at helping parents to adapt their parenting style to the developmental and emotional needs of the young people. This has included coming up with house rules collaboratively with parents and young people and reflecting with parents about their responses to behaviour. They have provided emotional support to both parents and young people. For parents, they are someone at the end of the phone to ask questions or offer solutions when things get difficult. For young people, they get alongside children and advocate for them when needed, and provide a different dynamic to the social worker. They have the time to spend quality time with young people and build a relationship where young people can speak openly about being back at home with parents.

## Case Study Quote

*“Even though it is a fairly new service the short time we have been involved I’ve found it a really positive experience with helpful information given.*

*I can only speak for the people that have been involved with us and they have been brilliant, always being able to get in contact asap and feeling confident and secure that we were being listened to as the input shows.”*

# Purpose

- To support children living in long term care to return home to their parents
- To support children who have returned home to their parents in an unplanned way
- To contribute to safely reducing the number of children in care through supported reunification



# Our Work

- Evidence based parenting programmes
- Family work
- 1:1 work with children and young people; emotional support, Life Story work, CBT based interventions
- Family group conferencing
- Practical support i.e. accessing local services, support with benefits and housing, attending appointments etc.



# Number of Families Supported

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- 29 children, 23 families
- 18 children at home
- Involvement ended with 3 families
- Success rate 90%
- 1 child requested return to care, 1 child in custody



# Future Plans

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- Parent mentoring scheme
- Parent groups
- Parent mental health worker
- Family therapist





### **Feedback**

*'Even though it is a fairly new service, the short time that we have been involved I've found it a really positive experience with the help and information that has been given.'*

*'I can only speak for the people that have been involved with us and they have been brilliant, always being able to contact asap if needed and feeling confident and secure that we we're being listened to, as the input shows.'*

**Mother of three children (aged 17, 15 and 8).**

