Item No. 10.	Classification: Open	Date: 12 July 2016	Meeting Name: Corporate Parenting Committee	
Report title:		Innovation Projects		
Ward(s) or groups affected:		All		
From:		Director of Children & Families		

RECOMMENDATIONS

 That the corporate parenting committee notes the work of these two Innovation Projects and consider their evaluation at the November corporate parenting committee.

BACKGROUND INFORMATION

- 2. In October 2013 the Department for Education (DfE) launched the Social Care Innovation Fund and associated Programme to act as a catalyst for developing more effective ways of supporting vulnerable children. The programme was seeking to inspire whole system change so that in five years' time we achieve:
 - Better life chances for children receiving help from the social care system;
 - **Stronger incentives and mechanisms** for innovation, experimentation and replication of successful new approaches; and
- Better value for money across children's social care.
- 3. On 9 February 2016 the council's cabinet agreed the Children in Care and Care Leavers Strategy 2016-19. The first priority of this is "children and young people have a say and their voice is heard".
- 4. Applications for a further round of funding for this fund close on 7 July 2016 and Southwark is involved in 3 possible bids.

KEY ISSUES FOR CONSIDERATION

5. Southwark has implemented two major Projects through the Social Care Innovation Programme: Keeping Families Together and The Pause Project.

Keeping Families Together

- 6. Keeping Families Together (KFT) is a new social work unit embedded within the Specialist Family Focus Team. Southwark was one of five local authorities in partnership with Morning Lane Associates which piloted the Keeping Families Together teams from June, 2015 –April, 2016 initially. The Project is currently funded by the Council having demonstrated initial impact around financial sustainability through the outcomes it has achieved.
- 7. The primary aim of KFT is to prevent family breakdown, working with families where there is a young person between 11 and 17 who is at risk of coming into

care, or is in care with the possibility of being rehabilitated at home. Using multi-modal interventions, the unit works collaboratively with service-users to enable change so that far more children in Southwark remain safely with their families, rather than going into care. This will also mean that if Southwark is spending less money placing children in care, it can spend more on supporting families in the wider system.

- 8. Multi-modal interventions aim to address whichever aspects of the person's environment are sustaining the problem, rather than focusing solely on the individual as the focus for work. This could include trying to impact on a young person's behaviour through approaches such as parent coaching, family therapy, individual work, and even organising a new bedroom door if this is assessed as directly contributing to the risk of breakdown within the family. The work derives from the same overarching analysis of the problem, and is overseen by an Advanced Practitioner within a small tightly supervised unit. The team includes social workers, family therapists and family practitioners with a wide range of skills and intervention approaches with a particular expertise in working with teenagers.
- 9. KFT offers an intensive 3-6 month intervention focused on a single set of goals agreed collaboratively with the family and other stakeholders. They aim to deliver as much of the work as possible using the skills and specialisms of unit members rather than referring for interventions from many different sources which may at best be ineffective and at worst work against one another.
- 10. Whilst in every case the aim is for young people to be able to remain at home with their families without statutory intervention, there is a recognition that for some young people the work may have highlighted that it is not safe or in their best interests for this to be the case. In any event, the KFT unit are consistently working towards stability for the family after the work is completed, delivering the best that social work can offer, working in partnership with families and professionals to achieve the best possible outcomes for young people in Southwark.
- 11. All referrals to the team are made via the Resources Panel. There have been 23 cases referred to KFT, of which KFT have worked with 17 families (26 young people)to date and so far have closed 5 (7 young people); their maximum capacity due to the intensive nature of the multi-modal intervention is 12 families. There is evidence that the overwhelming experience of the child whether they have returned home or remained in care has been extremely positive - T came to KFT after being placed in care (CSE concerns, self-harm, drug use, offending, alleged associations with gang members, suggestions that she was involved in prostitution, carer for her Mother with mental health issues who was sectioned just prior to KFT involvement), and not engaging with any professionals and being abusive to them as she felt completely let down by the whole system. She is now lead actor in a theatre production. She has spoken very emotionally and positively about her experience of KFT, her engagement with the Youth Offending Service and the support of her IRO. Her self-esteem and confidence is increasing and her Father (a pastor in the local community with very high expectations) has now told her he is proud of her and the relationship is growing and becoming more positive and she now has hope that they will be reunited.

The Pause Project

12. Pause originated in Hackney as an initial pilot to test the Pause methodology. Southwark Pause is funded by the Social Care Innovation fund until end March 2017 to test the methodology as one of six other locations (Doncaster, Hull, Newham, Southwark, Greenwich and Islington). It will be independently evaluated over the testing period and this means that it is particularly important to replicate the model including the criteria for women to be included to see if it works in different local authorities. This evaluation is due to report in September 2016.

13. The criteria is:

- Women who have had 2 or more children permanently removed from them and have no children in their care.
- Last child removed up to 5 years ago (since 1.11.2009)
- Women of child bearing age where further pregnancy possible and likely
- Women consent to long acting reversible contraception (implant, injection, IUD or IUS)
- 14. Priority is being given to women who live in Southwark. Women meeting the criteria have been identified via care proceedings tracking and the legal database which preceded this. The Project has been receiving referrals from professionals working with women whose children were removed by other local authorities but who are now living in Southwark.
- 15. Pause is practice group managed within Southwark Children's Permanence Service but located at Tooley Street and offers an innovative, dynamic and creative solution designed to address the needs of these women. The service is offered on an assertive outreach basis with an intense programme of therapeutic, practical and behavioural support through an integrated model. Each woman has a bespoke programme designed around their needs looking at the various elements of their system.
- 16. Pause aims to break the cycle of repeat removal by intervening at a point when the women have no children in their care and offers them a chance to take a pause from the usual periods of chaos, anger and reaction to care proceedings in order to be supported to reflect and develop new skills and behaviours.
- 17. Pause does not define women in relation to any one presenting social issues such as substance misuse. Instead Pause helps the women to focus on themselves with the purpose of supporting them to take control of their lives. To do this they are required to take LARC (long acting reversible contraception) during the intervention, thereby creating a space to pause, reflect, learn and aspire.
- 18. Pause is staffed to work with a maximum of 20 women and is currently working at this limit.

Community impact statement

19. These projects impacts positively on all communities that the families and women live within, enabling them to be able to remain within those communities and to be a more positive constructive part of them.

BACKGROUND DOCUMENTS

Background Papers	Held At	Contact
None		

AUDIT TRAIL

Lead Officer	Alasdair Smith, Director of Children and Families					
Report Author	Alasdair Smith, Director of Children and Families					
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CONSULTATION WITH OTHER OFFICERS / DIRECTORATES / CABINET						
MEMBER						
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Cabinet Member		No	No			
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