

SOCIAL AND HEALTH CARE OVERVIEW AND SCRUTINY COMMITTEE

Date of Meeting	22 October 2020
Report Subject	Children's Transformation Project Update
Cabinet Member	Cabinet Member Social Services
Report Author	Chief Officer (Social Services)
Type of Report	Operational

EXECUTIVE SUMMARY

North Wales has secured £3m grant funding for a regional Transformation Programme for Children's social care. Working on a regional footprint the programme is delivered on an Area basis. The East Area project is a partnership between Flintshire, BCU and Wrexham local authority. The project has 3 work streams which seek to:

- i) help parents with low/moderate mental health needs
- ii) bring health and social care staff together to provide intensive assessment and therapeutic support for young people who, don't meet the thresholds for CAMHS, but are displaying significant needs and require support
- iii) develop a local residential Care Home to meet the needs of young people whilst seeking family reunification, or a longer term local fostering/residential placement

This report provides an overview of the project, progress and next steps of the local authority's ambition to transform our support to children and young people by developing high quality in house residential care aligned with new models of support.

RECO	RECOMMENDATIONS	
1	Committee endorse the work to safely reduce the numbers of children in need of care through early help and intensive targeted support for families.	
2	Committee support the establishment of a local authority Children's Residential Care as part of an approach to rebalance care provision for	

children, with a focus on ensuring an affordable and sufficient range of local high quality placements.

REPORT DETAILS

1.00	EXPLAINING THE CHILDREN'S TRANSFORMATION PROJECT REPORT
1.01	Flintshire County Council is committed to ensuring safe, high quality support for children on the edge of care and those we look after. We want our young people to develop the skills and resilience to lead fulfilled lives.
1.02	Our main aim is to support families to care for their own children, and to prevent them, if safe to do so, from becoming looked after. This is what the majority of families want and where most children will best achieve their potential.
1.03	We have secured funding for an East Area project to develop the support we offer for children, young people and families who have clear needs but may fall between the services offered by different agencies. The project is a partnership between Flintshire, Wrexham local authority and BCU. The project has 3 work streams which are set out in the following paragraphs.
1.04	Helping parents with low/moderate mental health needs
1.05	A reoccurring feature of referrals to the Early Help Hub is the mental health needs of the parents bringing up their children. Regularly, the parents needs do not meet the thresholds for support from Community Mental Health Teams (CMHTs) but their mental well-being is impacting on their ability to effectively nurture their children. CIW engagement activity highlighted this feature and recommended that the local authority explore how it can bridge this gap as part of its early intervention strategy.
1.06	As part of the Transformation Programme a part time social work post has been funded to work with the Early Help Hub to target support for parents with low/moderate mental health needs. The funding provides an opportunity to test the model of support we want and to identify the initial impact. Proposal are being drawn together for the sustainability of the approach should it prove effective.
1.07	Intensive assessment and therapeutic support for families
1.08	The second work stream has involved us establishing a health and social care Team to provide intensive assessment and therapeutic support for young people who don't meet the thresholds for CAMHS, but are displaying significant needs, often with high levels of dysregulated behaviour, and patterns of school exclusion/risk of exclusion. During the COVID lockdown we have successfully appointed, and launched, a Team which comprises of a Supervisor 4 therapists and part time administrator. The Team have met the criteria to operate Multi Systemic Therapy (MST) model under strict licencing requirement including competency to practice through intensive training. MST a clinical model that works with all systems surrounding the child including education, community influences

	and any significant adults/others in the family. It builds resilience of the child and family as a collective, and offer supports that is accessible '24/7'. The Team provides direct support to build the resilience of families between 3 and 5 months. The focus is preventing family breakdown and reducing the need for children to unnecessarily entering the care system. As the Team will be working with some of the most complex cases they will have capacity to support up to 20 families across the East Area at any one time. Since the formal launch in June the Team have completed work with 5 Flintshire children and are currently working with another 8 Flintshire children. As part of the regional model Oxford Brookes University have been commissioned to evaluate the project and are about to commence their work which will include qualitative work to assess the impact of the intervention through discussions with the young people and families who have been supported to date.
1.09	Setting up a local Residential Children's provision to rebalance the market and support children and young people locally
1.10	Like many authorities Flintshire is currently reliant on the independent sector for Children's Residential Care provision. This provision is very expensive and often in placements that are out of area. There are opportunities to use this grant funding to facilitate a different approach to help reduce our reliance on Out of County placements which lead to financial pressures for social services and education.
1.11	The intention would be to establish a short term (12 week) residential assessment and support provision to meet the needs of young people whilst seeking family reunification, or a longer term local fostering/residential placement. The support model would be the clinical MST approach.
1.12	There can be occasions where a placement (with family or carer) can reach crisis point and breakdown. In these emergency situations the choices for placements can be limited and can result in long term high cost Out of County provision. We are seeking an alternative, where a local authority Residential Care provides short term intensive MST model (see 1.8 above). This would enable an in-depth assessment of the young person to fully understand their needs, whilst providing therapeutic work with them and their families. The intention would be to de-escalate the crisis, assess and understand the core issues/needs of the family, and work with them to develop their skills/relationships with a view to reunification so that young person can appropriately step down back to their family network. There would be a strong focus on supporting attendance within local education provision, supporting schools in this aim, as well as developing a long term care and support plan if needed for the family. This approach would also help to minimise avoidable long term entry into the looked after care system.
1.13	Where a return home is assessed as not being in the child's best interest the 12 week period will provide time to secure the best setting possible for that child to thrive and facilitate a planned and structured placement, avoiding a crisis placement based on availability on the day.
1.14	A local property has been identified with the potential to provide 3 x 12 week Residential Assessment beds plus 1 x Emergency Bed for one to two nights. The property has sufficient capacity to locate the MDT Team

	at the provision alongside a Residential Care Team who will also offer MST whilst children stay at the Home.
1.15	A full business case is being developed for the establishment and the association running of the provision. This includes a Flintshire only provision as well as the options for an East provision with Wrexham local authority. This is in line with Welsh Government's ambition to see greater degree of regional/sub regional working in rebalancing the children's residential market.
1.16	In line with the First Minister's commitment to improve outcomes for children, we have shared our intentions with Welsh Government with a view to securing ICF funding to purchase and refurbish a building for the Residential provision. The funding is critical in enabling us to drive forward innovation and to develop alternative models of care that rebalance the current market which is Provider led.
1.17	As part of our ambition to provide local, quality options Officers from Social Services and Housing undertook a site visit to Anglesey where they have developed a 'small homes' registered homes model. Bespoke provision has been developed using existing Council stock, and purchasing a bungalow to provide residential provision for up to 2 children in each location. Active work has commenced with housing to explore how this model could translate locally and options will be developed for supporting more children in house.

2.00	RESOURCE IMPLICATIONS
2.01	Safely and appropriately supporting young people through intensive assessment and support is the most cost effective way of delivering our services. For some children specialist residential placements will always be the best provision for them. This Strategy will help to ensure high quality local/regional residential placements that secure positive outcomes and placement stability.
2.02	Grant funding is in place for the social worker for mental health and the establishment of the MST Team. Funding would need to be provided by Welsh Government to enable the purchase and refurbishment of a Residential provision. A detailed costed business will be developed to identify associated revenue costs and funding options.

3.00	IMPACT ASSESSMENT AND RISK MANAGEMENT
3.01	Failure to implement alternative pathways is likely to result in a continued increase in the number of looked after children without the opportunity to fully explore and deploy intensive support which can, in some cases appropriately support family resilience and maintain family arrangements. There is also a risk of an over reliance on costly provision through independent fostering and residential providers, with a lack of appropriate placement choice within the local/regional area.

4.00	CONSULTATIONS REQUIRED/CARRIED OUT
4.01	None

5.00	APPENDICES
5.01	None

6.00	LIST OF ACCESSIBLE BACKGROUND DOCUMENTS
6.01	None

R DETAILS
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8.00 **GLOSSARY OF TERMS** 8.01 Looked After Child Looked after children are children and young people who are in public care and looked after by the state. This includes those who are subject to a care order or temporarily classed as looked after on a planned basis for short breaks or respite care. The term is also used to describe 'accommodated' children and young people who are looked after on a voluntary basis at the request of, or by agreement with, their parents. Multi Systemic Therapy (MST) is an intensive family and community based intervention for children and young people aged 11-17, where young people are at risk of out of home placement in either care or custody. MST teams focus on the whole world of the young person - their homes and families, schools and teachers, neighbourhoods and friends. MST staff go to where families live and work with them intensively for three to five months, including being on call to families 24 hours a day, seven days a week