



Annual Overview Report

May 2021- April 2022

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Executive Summary

Supporting Families First (S.F.F) remains one team. There are three pods operating within its structure to manage a county wide service; they are split into three geographical areas. Wyre Forest and Bromsgrove, Worcester and Malvern, Redditch and Wychavon. This model allows Supporting Families First to continue to have a close working relationship with our partners and community resources in each geographical area, responding effectively to presenting needs and risks.

Since May 2021 Supporting Families First expanded its remit from solely Edge of Care work to also include children in need as a pilot project up until September 2021. The success of the pilot led to a permanent change to the service as a multi-disciplinary approach to working with both child in need and edge of care. Currently S.F.F's principal and largest cohort of children is supporting those who are subject to Child In Need plans (CIN). Those at risk of being on the edge of care, are the second largest. We work with children aged 0-18 years and their families.

S.F.F is predominantly permanently staffed across all disciplines, with current new vacancies for a Clinical Lead, Team Manager and Youth Mentor being actively recruited to.

Overview

During the period from 1 May 2021 and 30 April 2022 Supporting Families First worked with a total of 564 children and young people with 326 open as of 30 April 2022.

In terms of service demand and need in each district area during this period we can see how these 564 children presented in each district.

The workload is fairly evenly spread with Redditch/Wychavon and Worcester Malvern both had the same number of children over the period. Wyre Forest and Bromsgrove is the lowest, but the figure is negligible at only 3 less than the other two when considering total numbers. What is significant is the edge of care (EOC) demand in Redditch/ Wychavon (17) compared to Wye Forest and Bromsgrove (30) for this period. Further factors are explored within this report. We know that Bromsgrove has a higher young people population so further analysis of the edge of care cohorts we are seeing in each area will be helpful in understanding how this can inform the early help offer.

POD	Total Number	% of total
Redditch and Wychavon	189 (172 CIN/17 EOC)	33.5%
Worcester and Malvern	189 (167 CIN / 22 EOC)	33.5%
Wyre Forest and Bromsgrove	186 (156 CIN / 30 EOC)	33%
Total	564	

Demographics

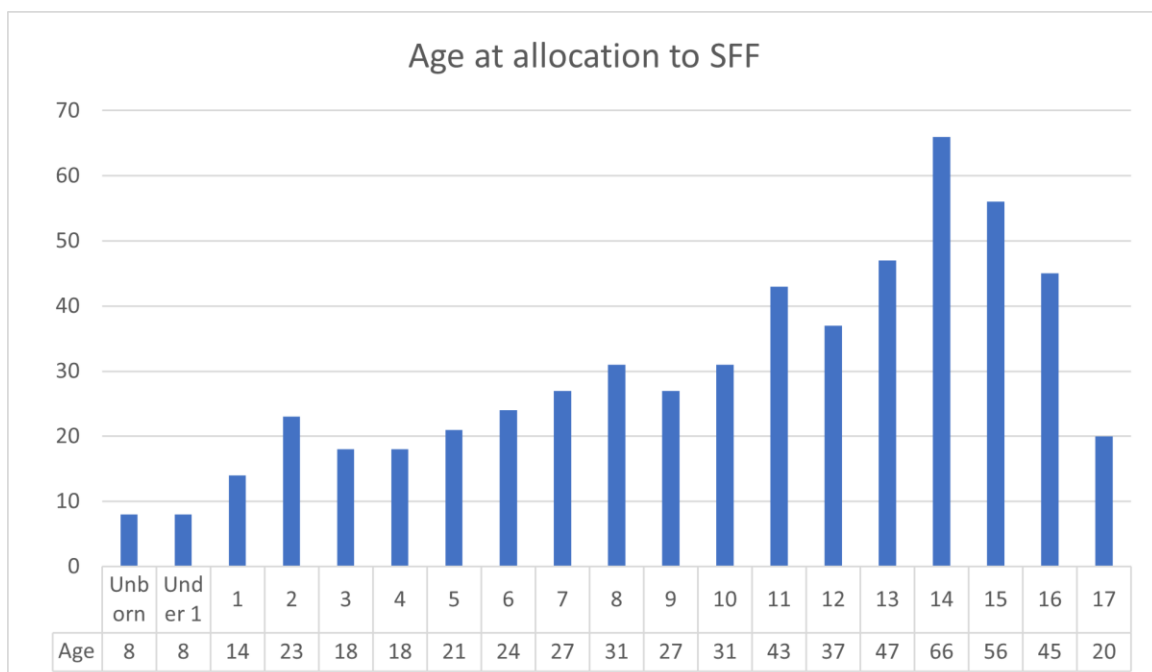
Age

Supporting Families First have seen the highest number of referrals is in relation to young people aged from 11 – 16, with a total of 294 representing 81%. This figure is not surprising when you consider the transition to adolescence and being a teenager and the challenges, this poses to young people and their parents and carers and the covid lockdown. The highest demand for SFF intervention and support is in respect of chronological age of 14-year-olds at 66 young people or 18% of the children and the numbers remain higher through to adulthood. We are seeing an emerging peak at 11 years which may relate to secondary transfer and adolescence.

7- to 10-year-olds represent 116 /32% of the children worked with in the period. We see the rise specifically emerge in the 8- and 10-year-olds which equates to 9% of the overall total.

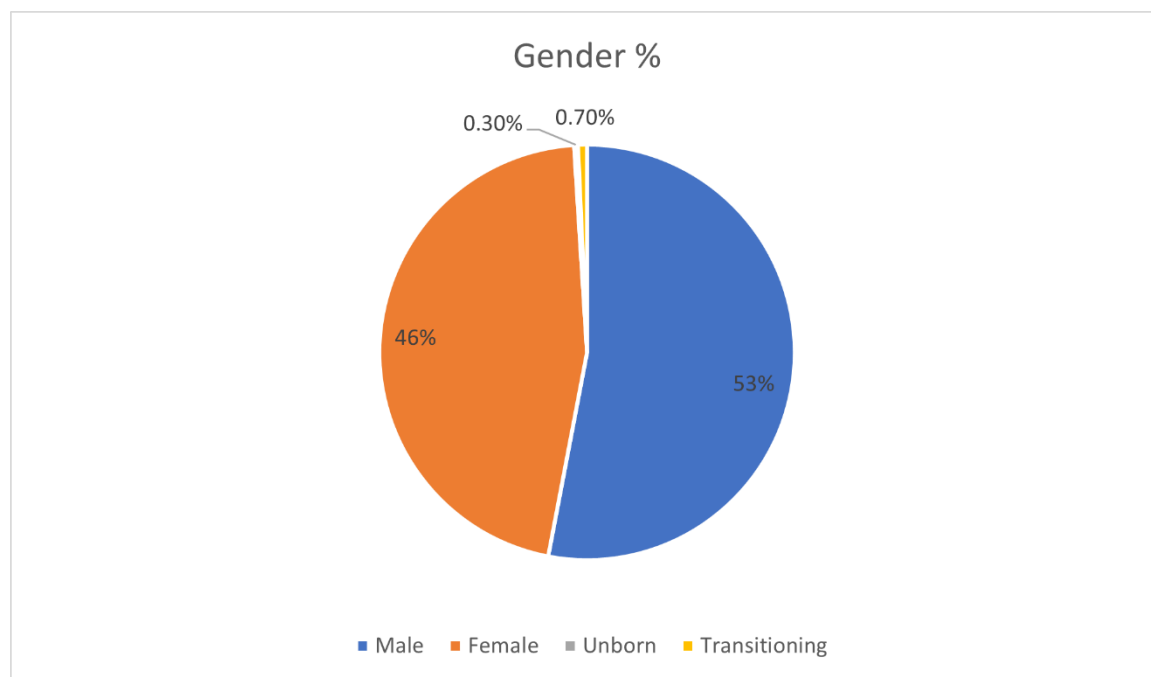
Unsurprisingly the lowest number of referrals are for unborn and those aged 1 or under, representing a total of 30 children or 8% of the intervention. Given the ages we are referring to these children are very unlikely to present behavioural challenges, these are principally cases where there are risks around the other children in the house or their parents needs for example in terms of verbal/physical aggression, drug/alcohol misuse, or risky adults.

The graph below shows the full distribution of ages the children and young people that Supporting Families First have worked with between 1 May 2021 and 30 April 2022 from unborn to the age of 17.



Gender

In terms of gender, since the inception of Supporting Families First commenced we have seen an ongoing trend of working with a slightly higher proportion of male children compared to females. In the period from 1 May 2021 and 30 April 2022, S.F.F worked with a total of 298 males, representing 53%. In respect of females over the same period S.F.F worked with 260 females representing 46%. 0.7% of the overall total were transitioning from one sex to another and 0.3% were unborn children.



Ethnicity and Nationality

The tables below show the ethnicity and nationality of the children and young people who Supporting Families First have worked with between 1 May 2021 and 30 April 2022.

Please Note: There are a number of records where ethnicity and nationality data are not recorded, (110). Moving forward the collection of this data has been improved so we anticipate minimal anomalies in terms in any future reporting.

The largest ethnic group which S.F.F works with remains White British at 68%, given the population and demographic of Worcestershire this is to be expected. The smallest cohort of children are from Indian and Pakistani heritage at only 0.4%. British Nationality as you can see below is the largest identity at 75% with Portuguese and Latvian being the smallest with 0.2% respectively.

Accessibility and inclusion of all families is very important to all, Supporting Families First work in an anti-discriminatory and inclusive way, utilising interpreters and translation services. In addition to this, the use of "plain" English and Jargon free language is custom/practice, being flexible in our accessibility and approach is important. The S.F.F workforce has diversity in terms of disability, ethnicity, race, gender, social class, age and from the gypsy travelling community. S.F.F proudly

celebrates this element of our service which supports our work in facilitating strong working relationships with the communities we serve.

The below table identified the ethnicity and nationality of the families we have worked with in the last year. We are mindful that this does not represent all of the families living in Worcestershire and the diverse communities we have.

Nationality	Number	%
British	425	75
Polish	5	0.9
Other nationality	2	0.4
Latvian	1	0.2
Portuguese	1	0.2
Not recorded	130	23
Ethnicity	Number	%
A1 – White British	386	68.4
A2 – Any other White background	16	2.8
B4 – Any other mixed background	14	2.5
B3 – White and Asian	10	1.8
B1 – White and Black Caribbean	10	1.8
D1 - Caribbean	5	0.9
A5 – Gypsy / Roma	4	0.7
D2 – African	3	0.5
C1 – Indian	2	0.4
C2 – Pakistani	2	0.4
D3 – Any other Black background	1	0.2
E3 – Refused	1	0.2
Not recorded	110	19.5

Presenting Risks and Needs

Presenting Risks and Needs in the Edge of Care cohort

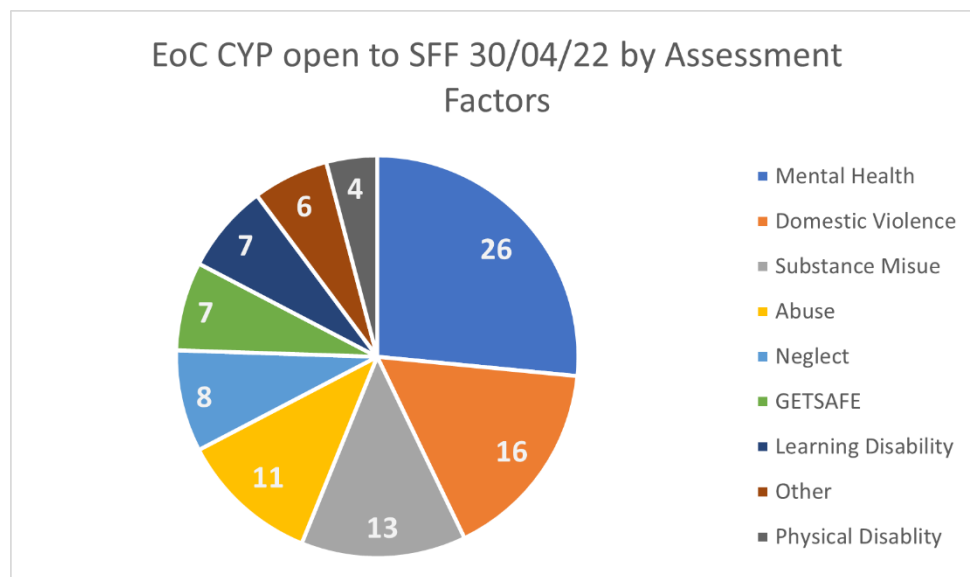
From the time period of 1 May 2021 to 30 April 2022, 7% of the total referrals were children deemed to be at risk of becoming Looked After whether this be kinship or Local Authority care.

In terms of assessment factors as to why cases transfer to S.F.F as edge of care the table below shows that the top four presenting needs across the period of 1st May 2021 to 30th April 2022. Mental Health will relate to parental or child mental health and is overwhelmingly the highest at 62%, followed by Domestic Abuse at 38% and Substance Misuse concerns at 31%. The lowest factor was physical disability at 10%.

Please note that some families will have multiple needs identified as part their assessment.

Presenting factor	% of edge of care children
Mental Health	62 %
Domestic Abuse	38 %
Substance Misuse	31 %
Physical disability was the lowest	10 %

The pie chart below gives a more global overview of all the presenting needs and risks for the edge of care children.



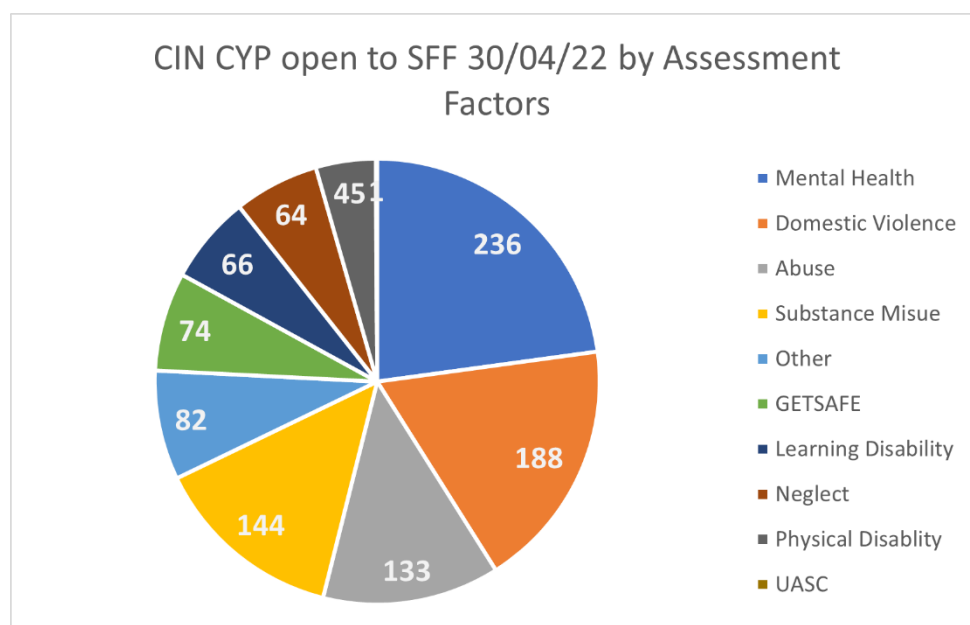
Assessment Factors in the Child in Need cohort

Children In Need work makes up to 93% of the cases open to SFF within the time frame of 1 May 2021 to 30 April 2022.

The top three presenting need was Mental Health at 58%, Domestic Abuse at 46% and Substance Misuse at 35%.

Presenting factor	% of edge of care children
Mental Health	58 %
Domestic Abuse	46 %
Substance misuse	35 %

The pie chart below gives a more global overview of all the presenting needs and risks for the child in need cohort. Again multiple needs will be captured for come families during the assessment.



Educational needs and outcomes for Children

From November 2021 to March 2022 the Virtual School in conjunction with WCF undertook analysis of a cohort of children in respect of every statutory school aged child/young person who has a current Child in Need or Child Protection plan. Using the following categories: gender, educational settings, CME and EHE, age, pupil premium eligibility, SEND status, exclusion and suspension rates data can now be tracked identifying any areas of concern and potential support quickly.

A joint project between the Virtual School and Supporting Families First Team to evaluate what good collaborative working practice looks like and identifying areas for partnership development has taken also place.

The key themes highlighted from this project were as follows:

- The needs and barriers of the CIN/CP cohort must be more prominent in school.
- CIN presenting challenging behaviours and attendance challenges should be supported earlier.
- Parents need to be engaged by schools better than is currently happening.
- More effective communication is required between schools and social care colleagues.

In terms of addressing the areas of development above the following has been endorsed as remedial actions

What are we doing?

- Target the key challenges through the delivery of school parental engagement workshops to remind schools of the effective strategies and benefits of engaging with families post COVID and evidence what a robust Early Help offer looks like. The sharing of effective practice is a key strategy.
- Additional training for social care colleagues to ensure they have informed educational knowledge and they are able to use this appropriately/confidently when challenge to a school is required.
- The sharing of positive case studies from Supporting Families First where collaborative practice between schools and social care are present.
- Working closely with Access to Education team - addressing low level and persistent absences through sharing of effective practice with schools, parents and social care. Promoting the Attendance Network meeting and SLA offerings across all schools not already engaged in with services.
- Producing toolkits for schools: for example, signposting of SEMH resources for support for families, signposting schools to support that is available e.g., the Wellbeing Emotional Support Teams and Family Hubs
- Monitoring children missing education (CME) through attending weekly multi agency meeting.
- The Virtual School CIN/CP Learning Advisor attending CIN, Core Group and Professionals meetings where applicable to facilitate resolutions about educational issues in addition to review how CIN and CP Plans could also focus on education objectives more frequently.

In terms of better understanding how S.F.F will know these measures are working we expect to see the things below happen.

How will we know?

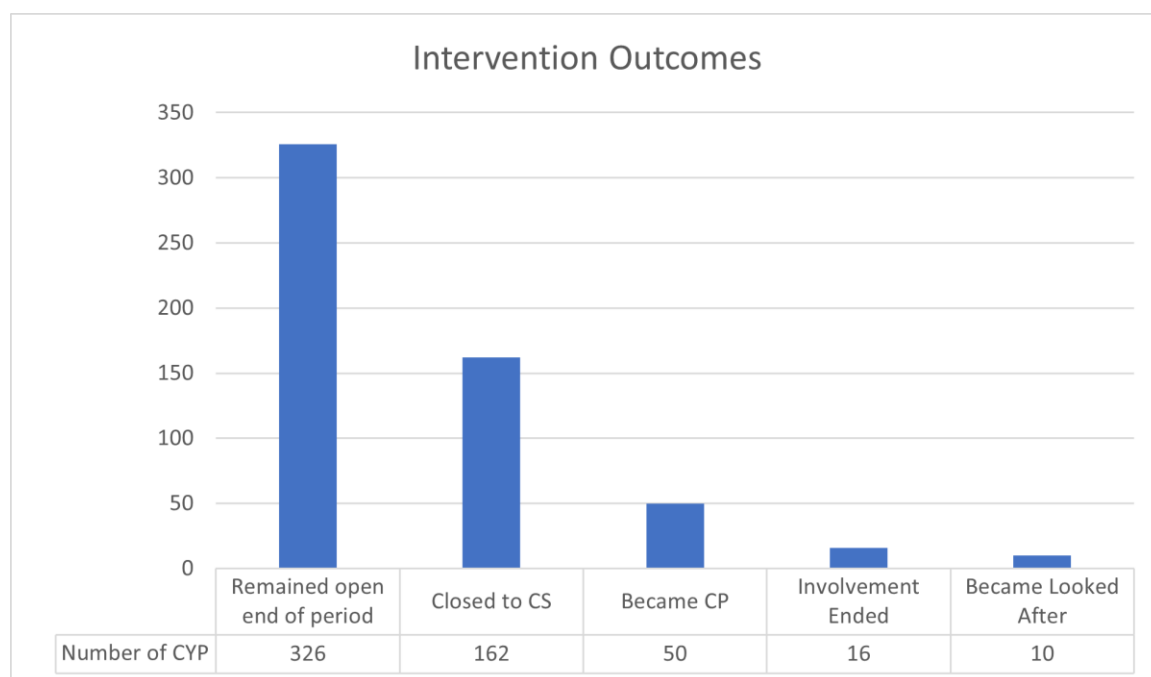
- An increase of attendance will be seen for the CIN/CP cohort originally identified – There have been issues with getting accurate data on this, but this has now been resolved, moving forward S.F.F can obtain accurate information on this.
- Suspensions and permanent exclusion will be reduced for the CIN/CP cohort - 60% of the children on a Child in Need plan experienced 3 or more suspensions, Schools have been identified where these suspensions are a pattern and encouraged to attend the Virtual School Trauma Informed School training. Tracking and monitoring is now in place to ensure these schools are identified early and a SEMH offer is being put into place by Virtual School for the next academic year to support schools. As with the above obtaining accurate data

has been problematic but this issue has also now been resolved so in the future on request, we will be in a position to report accurate data.

- An increase in the number of pupils in full-time education and a decrease in those 25 hours and under – The collection of this data is now underway and can be reported on in the future accurately.
- Consistent pupil attitude surveys demonstrate an increase in positive emotional health - Currently a joint project with the Family Learning Team to obtain a baseline in September 2022 of the family and pupil voice.
- Regular review of newly formed data c dashboard - The dashboard is now in place and schools can easily be identified where further advice/guidance is required
- Clear actions and support from education in child’s CP/CIN/LAC plan evidenced – The Virtual School Education Advisor has advised that she plans to run some training with the various teams within WCF and IROs in terms of the new DFE guidance as it is now stipulated that attendance should be included as a target in CIN/CP plans and PEPs.

Intervention Outcomes for Families

The graph below shows the outcomes for children and young people who received Supporting Families First intervention and support for the period as of 30th April 2022.



- 326 children and young people remained open to the Supporting Families First as of the end of April 2022.
- 162 children and young people were closed to Childrens Social Care at the end of S.F.F involvement and stepped down to universal support.
- 50 children and young people were escalated to Child Protection plans.

- S.F.F ceased involvement with 16 young people. These children were deemed edge of care and were CIN open to Locality safeguarding and co-worked by SFF and later closed to SFF following intervention. S.F.F now case hold in their own right which did not occur prior to May 2021.
- 10 children and young people became Looked After by the local authority. This represents 4% of the 238 children no longer involved with S.F.F at the end of this period.

Repeat interventions by Supporting Families First

During this period S.F.F worked with three young people who were re-referred back into the service to the service following repeated concerns. The synopsis of all three are as follows:

- One originally closed in August 2020 after being open to S.F.F as part of the original EOC Cohort, closure was following the young person being deemed no longer being in need. This was reopened November 2021 following new concerns and a referral from police with Child Sexual Exploitation concerns. The case subsequently closed in April 2022 following intervention and disengagement from the family and no grounds for escalation to child protection identified. This child has not been referred again at the time of this report.
- Another child originally closed September 2020 who was of the original EOC Cohort, as no further safeguarding concerns were identified. They were reopened in August 2021 following concerns they had been going missing from home. The case subsequently closed March 2022 following positive changes in behaviour and the young person is now 18 years old.
- One originally closed in August 2021 but was reopened and closed March 2022. This young person was part of a sibling group who was not deemed to be Child in Need so did not continue on the CIN plan, however when level of need escalated for their sibling, this young person was reopened and is now subject to a Child Protection plan.

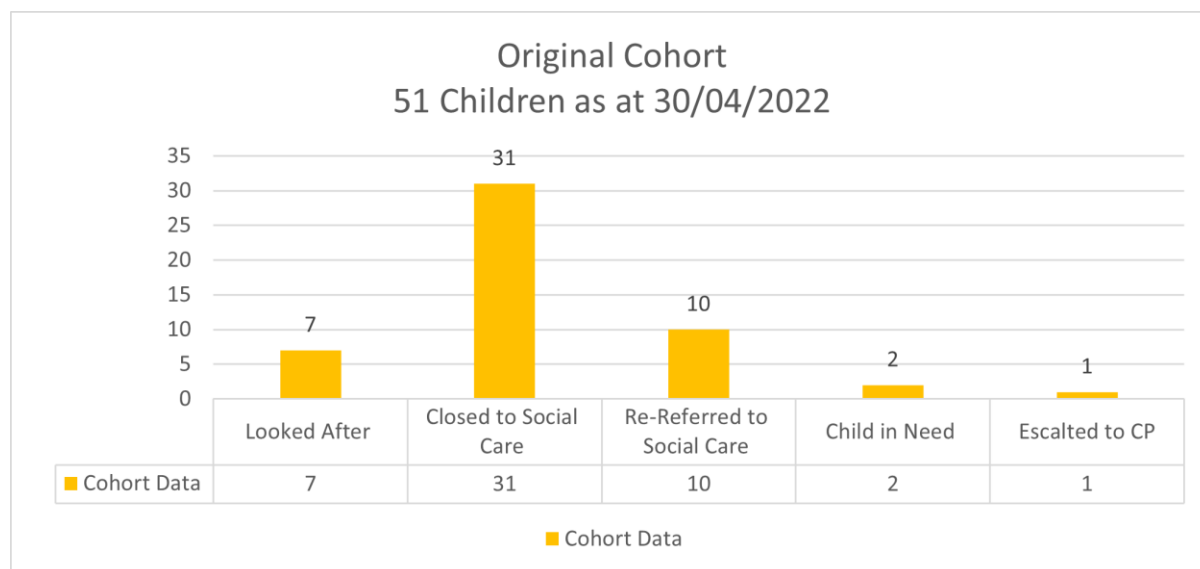
This analysis identifies very few children are being re-referred back in or back in for the same presenting issue. We are mindful that when these children were first open to SFF the cohort of children the team worked with was significantly smaller than the expanded remit and size now. Therefore, the cohort of Edge of care and CIN tracking being undertaken will assist us in understanding longer term outcomes for these children and their families.

The sustainability cohorts 12-month review

Tracking the Original Cohort of edge of care Children

The original cohort data is developed from the 51 children who were deemed on the edge of care at the “Go Live “date in January 2020 and were open to Supporting Families First.

The original edge of care cohort is tracked and report on in each quarterly report to provide the latest evaluation of care prevention sustainability within those families.



We can see here that in twenty-five months on of the 51 children 31 /61% remain closed to Children’s Social Care. Ten have been re-referred, one was escalated and remains on a child protection plan. Two are open to Child in Need Plans. Seven children (14%) are Looked after.

This demonstrates positive long-term outcomes for 61% of edge of care children who have remained at home safely with their families without the need of further statutory support at level 4 needs. This demonstrates that this model of multi-disciplinary work is effective in care and child protection prevention in both the short and longer term for edge of care children.

Tracking the CIN cohort

To continue to learn and monitor the impact and effectiveness of this approach with children in need; we have also set up tracking of 50 new CIN cases that entered Supporting Families First in Quarter One 2021 which was the start of the pilot phase May 2021.

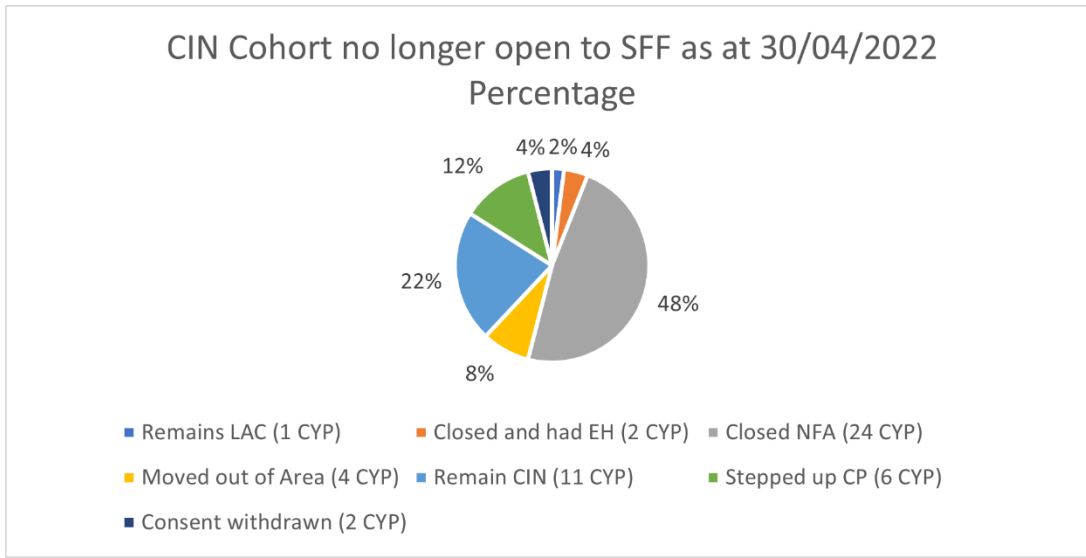
In terms of this cohort of 50 identified children as at the end of April 2022:

- 8 Children (16%) remain open to Supporting Families First,
- 26 children have been closed and / or stepped down to early help/universal services.
- 1 child has become Looked After,
- 3 children are open as children in need in Locality Safeguarding as it no longer met the remit of SFF e.g., privately fostered.

- 6 children have escalated to Child Protection,
- 4 children moved out of Worcestershire during the Supporting Families engagement.
- 2 children’s parents did not consent to a child in need plan and support from Supporting Families First.

Closed no further action is defined as no follow up by any Worcestershire Children First social care teams including our early help teams as the family are accessing community-based early help support.

Therefore, this control group will continue to be monitored on a quarterly basis to look at longer term impact and outcomes for the children.



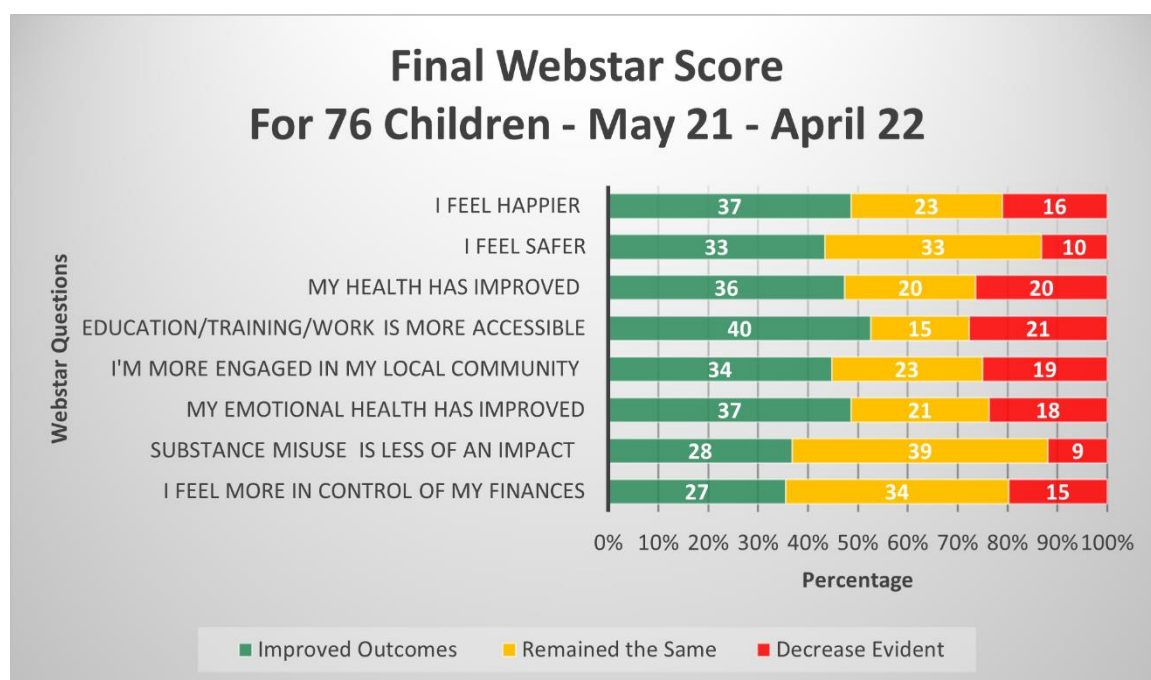
Webstar overview of impact for children and adults

Webstar Data - May 21 to April 22

Supporting Families First continues to use Webstar to understand the impact and effectiveness of the intervention on families experiences in working with us. A Webstar is utilised at the beginning and at the end of intervention, it is a visual tool which assists the people within the family to see change/progress and any areas that require further development:

- 569 active Webstars were completed with 266 families between May 21 and April 22
- 326 Webstars were undertaken with adults.
- 243 Webstars were undertaken with children.
- 76 Closure Webstar were completed with Children.
- 81 Closure Webstars were completed with Adults.

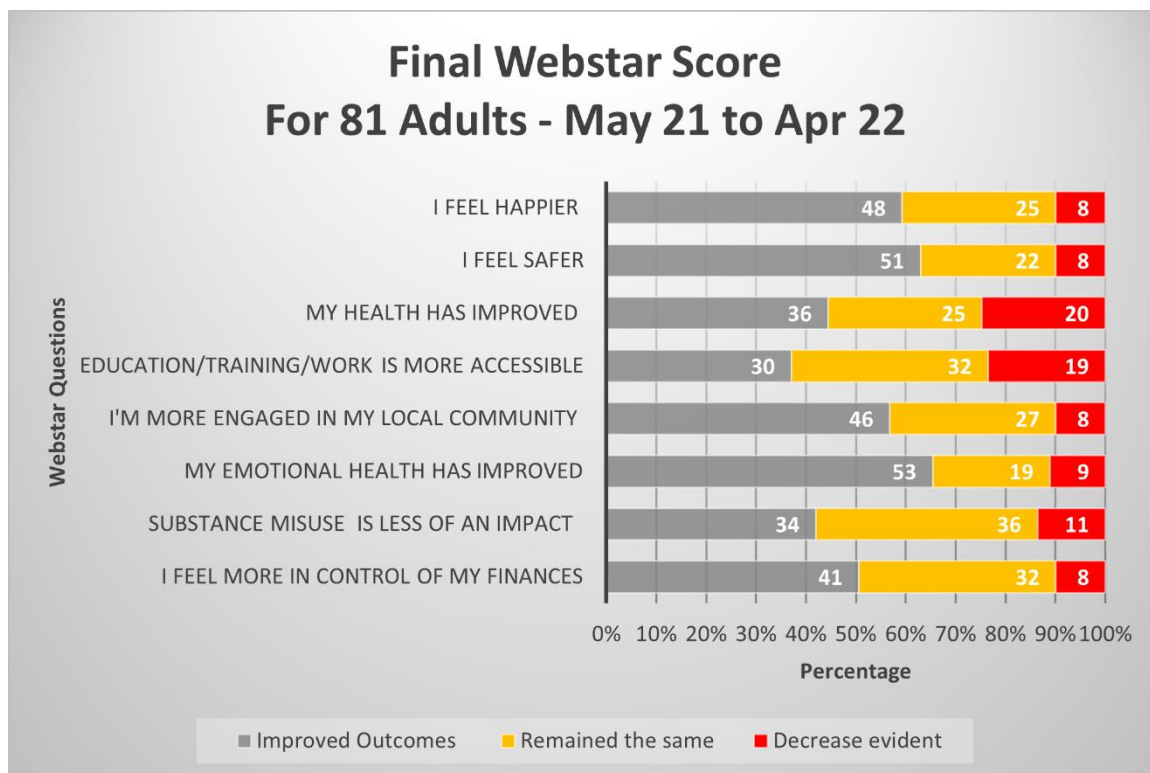
Webstar Scoring for Children upon closure



This tells us that children felt:

- 49% of children told us they felt happier.
- 43% of children told us they felt safer, with 43% reporting no change.
- 53% of children told us that their access to Education/Training had improved.
- 36% of children told us their financial situation had improved.
- 37% of children felt more in control of substance misuse, 9% by 5 or more scores.

Webstar scoring for Adult's upon closure



This tells us that adults felt:

- 59% of adults said their happiness has improved.
- 63% of adults reported feeling safer.
- 44% of adults reported their physical health had improved.
- 31% of adult reported no change, which is a comparable percentage with the feedback from children (26%).
- 65% of adults told us their Emotional Health & Well-Being had improved.
- 42% of adults said substance misuse was less of an impact in their family.
- 51% of adults reported improvements in their financial position.

Service user feedback

In May 2022 S.F.F undertook a targeted feedback survey with parents of their experience in terms of input post case closure to the service. In total feedback was obtained from 59 parents, below are some examples of what they said about S.F.F:

If you could tell the team how you experienced their work/support...what would you tell them?

- "I feel that I have received more stability, as Mark has supported R for a good period of time and really helped him"
- "I was struggling to parent correctly and you all helped me in changing how I do this" "You also made a big difference in getting things moving at school, so he has the level of support that he needs"
- "Amazing!!!"
- "You've all been amazing I have never felt judged. I feel supported"
- "I am so very happy with the support we have had from SFF team. They have gone above and beyond to help support all family members and how they have helped to bring some stability and happiness back into the family home. They were caring, kind and compassionate"
- "I would tell them I am thankful for all the help, knowing there is support out there"
- "Visits have been very valuable" "Helped get me back on track - support given has been good"
- "I have felt 100% supported from my outreach worker, I feel that she has supported me to complete tasks that I know I would have struggled with and helped me look forward to a brighter future"
- "That as a family, we have all been supported with dad drinking and the violence, the boys are a lot better and have been supported with knowing right from wrong, we feel more comfortable to put in sanctions"
- "It was very difficult to get help we needed in the first instance, it was during Covid, it was difficult to get everyone to listen and under severity of how we were living, but once SFF were involved things quickly moved along and Abi, Social Worker was really helpful and supportive"

If you were to tell another family who was going to start work with SFF, what would you tell them?

- "Don't give up, you would recommend having support from SFF" "It's a good thing and helpful, they are here to help"
- "Take on board what is being said to you, don't get your back up, the support will make a difference"
- "Be honest and upfront, don't hide anything because it's no good. No one can help you if you aren't honest" "Listen to what they are saying as they are doing it for the right reasons"
- "It does help, and you shouldn't just assume that it is bad, any help is good help"
- "I have had a lot of bad experiences from social services over the past 20 years and this is the first time I've had proper help and support for me and my family"
- "Stick at the process - things will happen positively eventually" "To be open, honest and be trusting of them"
- "Don't think they're here to judge you or take your kids away. I have been massively helped"

- “Tell them to go for it because they make you feel safe, can talk to them freely and they help”

Conclusion

The Supporting Families First pilot ran from May – September for CIN and Edge of Care and then became embedded as the SFF approach which led to the service expansion from September 2021. The recruitment into the new roles and approach is in its first year of infancy and will shortly reach its stability and consistency. Already we are seeing positive outcomes for children and their families. The success of this model is being demonstrated in the prevention of escalation to child protection and / or children becoming Looked After where it is deemed safe and appropriate to do so. We are also seeing a very low number of children being re-referred back into children’s social care with level 4 needs and risks.

Positive feedback has been provided by our partners in education, police and health. In addition, our service user feedback provides clear evidence of the impact S.F.F are making in families lives. In terms of complaints S.F.F consistently only account for 2% of overall complaints received by WCF in terms of Stage 1 which is another strong indicator of this innovative way of working with children and families and how families experience our work.

In quarter two of 2022 S.F.F will adding an additional Advanced Social Work Practitioner to each Pod (which will mean 3 ASWP as opposed to the current establishment of 2). This increase is a direct result of the ongoing service analysis whereby we have seen an increase in the complexity of needs families have and the volume and length of intervention family’s needs to create and sustain changes. It is predicted that with the increase adverse impact on both adult and children’s emotional health and wellbeing, coupled with the current cost of living crisis that people are experiencing the demand will continue on an upward trajectory for the foreseeable future.

Report produced by:

Kevin Bryan, Group Manager, Supporting Families First

Dated: 08.9.2022