Cambridgeshire and Peterborough strategic review of early help

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Purpose and methodology

Isos Partnership has been jointly commissioned by Cambridgeshire and Peterborough local authorities, the CCG and the Police to support them in reshaping their current model of early help and offer of support for at-risk adolescents. The ambition is that, following this review, there will be a clear plan of action for early help agreed across the partnership. The review has three phases of work – an initial evidence gathering phase followed by two rounds of workshops to co-produce the future plan.

Central to the review is one overarching strategic question, and then three specific sub questions:

Overarching question:

1. How well is the offer of early help meeting the needs of children and families in Peterborough and Cambridgeshire and how can we build on existing strengths to optimise the offer of early help going forwards?

Sub questions:

- Does the fact that Cambridgeshire and Peterborough operate different models of early help cause difficulties?
- 2. Within the overall envelope of early help, how well are support and services for adolescents working together to identify needs and prevent them from escalating?
- 3. How well are the mental health needs of children and young people in Cambridgeshire and Peterborough being addressed?



Where we are in the process of this review

Significant evidence gathering process completed in January and February 2020, collating views on early help from key staff within children's services, housing, health partners, the Police, YOS, schools, colleges, and the voluntary and community sector.

The findings from the evidence gathering are brought together in Part 1 of this report – slides 5 to 20.

March 2020: Project paused to allow services time to deal with implications of pandemic

Brief follow-up interviews with heads of service for early help, adolescent risk, CYP and mental health commissioning and SEND to provide a perspective on significant changes over last six months Part 2 of this report – slides 21 to 24 – provide an update on the key themes arising from these interviews.

Proposals for phase 2 of the work bring together key challenges and opportunities for working differently in future

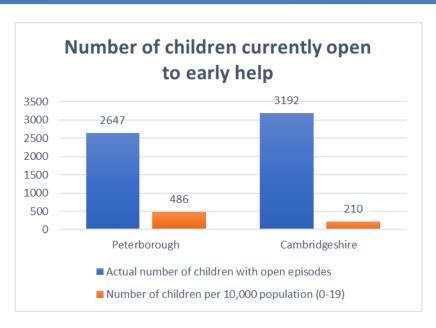
Slide 25 sets out a proposition around next steps.



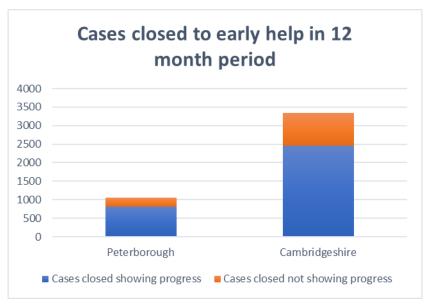
Part 1: Findings of the initial evidence gathering process



Data suggests that there is a solid offer of early help in place in Peterborough and Cambridgeshire

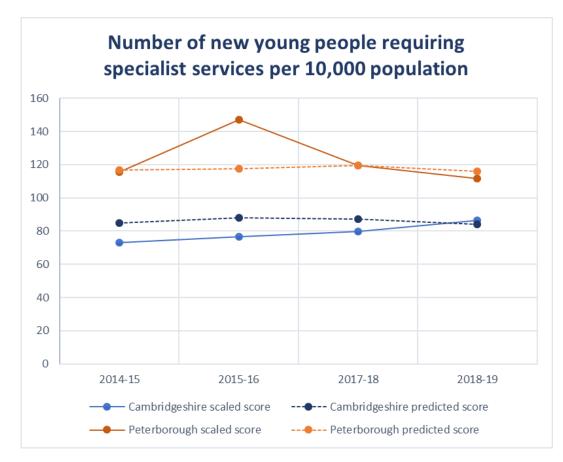


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- Across both Peterborough and Cambridgeshire there are currently around 5,800 individual children receiving support through the early help offer. This equates to between 200 and 500 children per 10,000 population (0-19).
- Over a 12 month period around 1000 early help cases (families) were closed in Peterborough and around 3,300 were closed in Cambridgeshire. In both areas positive progress was recorded in around 75% of cases being closed.
- In both Peterborough and Cambridgeshire less than 20% of cases closed to early help were escalated to children's social care. This suggests that the offer may be having an impact in diverting families from higher levels of intervention.
- However, it is not possible to tell from this data whether the right families are being targeted and whether, without the input of early help, needs would have escalated and more specialist interventions would have been needed.

Data suggests that there is a solid offer of early help in place in Peterborough and Cambridgeshire





Date note: This analysis is based on published data. Data on permanent exclusions, FTE to youth justice and mental health A&E presentations are only available up to 2017/18 so these are currently used for the 2018/19 analysis.

- This chart shows a scaled measure for the number of new children requiring high cost statutory interventions in a year, per 10,000 people aged 0-25.
- This is based on the number of new child protection cases, new looked after children, children permanently excluded, first-time entrants to the youth justice system and young people presenting at A&E with mental health issues.
- The scaled measure generated for each local authority can be compared with a notional 'benchmark' or predicted score based on plotting of all local authorities' scaled scores against their relative levels of deprivation.
- The predicted score is therefore an estimate of what a similar sized local authority, with similar levels of deprivation, might score based on averages across all local authorities.
- This analysis suggests that in the last two years both Cambridgeshire and Peterborough have had broadly expected levels of presentations to statutory services based on their levels of deprivation.

There are some clear strengths in the current delivery of early help which provides a platform for future development

Leadership

There is strong and purposeful leadership of early help which has continued to prioritise this area of work in the face of significant budgetary pressures.

Partner engagement

Despite some tensions, partners contribute significantly to the early help offer both strategically and in practice, as lead professionals and through team around the family arrangements. There has been significant support put in place to enable this day to day engagement.

Front door to early help

The integrated front door to early help across Peterborough and Cambridge is providing a robust and reliable system for considering the need for early help and allocating cases appropriately.

Relationship with CSC

Working relationships between children's social care and early help are well developed and step up and step down between the two generally occurs smoothly.

Innovation

Both Cambridgeshire and Peterborough have demonstrated the ability to innovate in response to emerging needs, for example the development of the SAFE programme and the multi-agency arrangements for Targeted Youth Support in Peterborough.

Management information

Both services have moved onto a single management information system that both supports the tracking of children and families, facilitates joined up working and generates regular performance reports.



However, looking ahead, there are some key challenges which need to be addressed

Strategic

There is no overarching vision and strategy for early help beyond BSIL

Organisational

Cambridgeshire and
Peterborough have
different models of early
help

6

Place-based ways of working are not fully embedded

More could be done to maximise the contribution of partners and the community

8

5 Delivery

Early help is operating at the very edge of children's social care

There are gaps in the offer of support for specific age ranges

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The delivery model for at-risk adolescents is fragmented

There is a lack of distributed responsibility for C&YP mental health



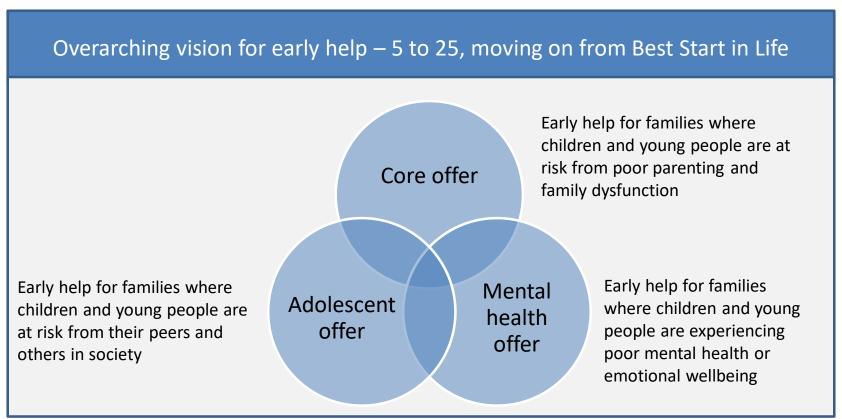
No overarching strategy for early help

- There is no single vision articulated for early help across the two local authorities in the way that there has been for Best Start in Life.
- This leads to a lack of clarity about the overall outcomes you hope to see at system level, for example whether the success of early help will predominantly be measured by reducing presentations to children's social care or by a wider set of outcomes.
- As in many other areas of the country, current early help offers (particularly in Peterborough) are very dependent on the continuation of Troubled Families grant funding which potentially makes them precarious going forward. A clear forward vision and strategy for early help may enable earlier partnership-based planning to address this potential cliff-edge.
- The absence of an overall strategy for early help, with associated outcomes and targets, can mean that decisions about prioritisation may be made in a somewhat piecemeal fashion. It also increases the risk that access to services or support might be determined by geography rather than a planned level of provision.
- It is also contributing to some mixed messages for partners about the purpose of early help and how they can contribute to or benefit from the offer.
- Being able to articulate early help alongside other parts of the system would be beneficial. This does
 not necessarily require a lengthy strategy but rather a compelling "vision on a page" that can be used
 as a communication tool.



No overarching strategy for early help

Going forward, a compelling vision that shows the inter-relationship between the core themes
focused on in this review may be a useful tool for communication and planning. The graphic below
described how this might be constructed.





Cambridgeshire and Peterborough are operating different early help 'models'

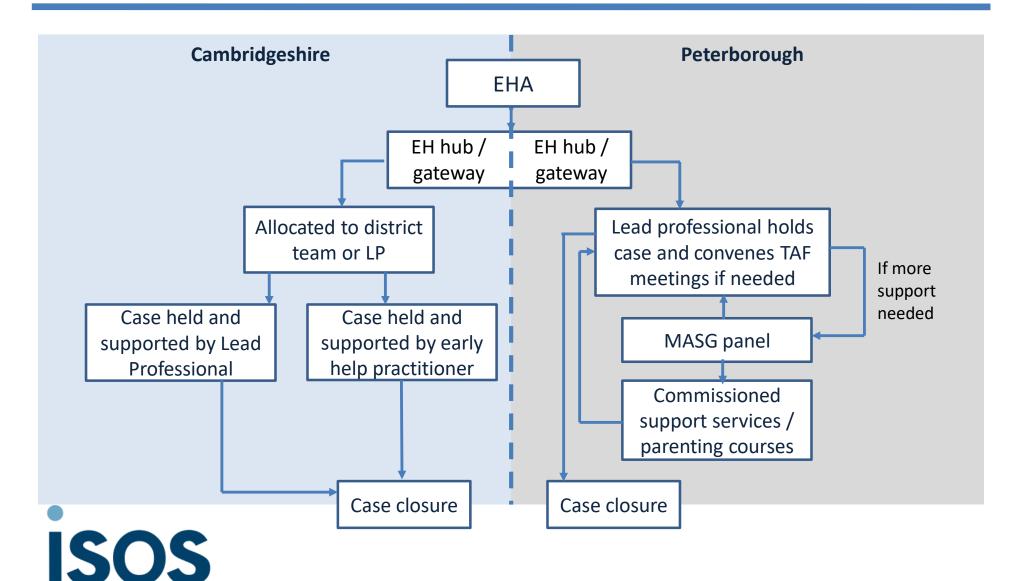
- A lot has already been done to align aspects of the Cambridgeshire and Peterborough early help offers, particularly around the integrated front door. However, some significant differences remain. These can be summarised as:
 - There are different expectations, and different levels and types of support, afforded to partners carrying out the lead professional role in Peterborough and Cambridgeshire. In Peterborough over 90% of open early help cases are held by a lead professional based in a partner agency (mainly schools) compared with around 40% in Cambridgeshire.
 - The decision about who will support a particular family, and the nature, duration and type of support that will be offered is made differently in Peterborough and Cambridgeshire. In Cambridgeshire allocation decisions are made at a district level, by the early help team managers. In Peterborough, requests for additional support are brought to the MASG panel (a weekly multiagency panel) which may then allocate a family to another statutory or commissioned service.
 - The individuals who carry out direct family support is different in each local authority. In Cambridgeshire there are district teams comprised of family workers, early intervention family workers, young peoples workers, children and family centre workers and transitions advisers. In Peterborough direct family support services are commissioned out, with some LA input remaining from TYSS and the NEET team.
- The diagrams overleaf visually represent the different pathways and offers.





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Cambridgeshire and Peterborough are operating different early help 'models' to access additional targeted support





Cambridgeshire and Peterborough are operating different early help 'models'

- The implications of having two different approaches to early help are, arguably, more deeply felt by the services
 themselves than by others in the system. Partners who covered both local authorities broadly seemed to
 understand that there are somewhat different approaches in Peterborough and Cambridgeshire and appear to be
 able to operate within that environment.
- However, for the services themselves the ongoing debate and reflection about the differences in the two models have created a sense of instability and flux. This is particularly true for Cambridgeshire where there has been more widespread speculation about possible future changes to service structure.
- It has also, at times, created an unhelpful dynamic in trying to establish which way of providing early help is 'better', without the recognition that each model has evolved in response to a range of specific contextual factors, not least of which are the geography and financial position of each area, and that there are strengths and challenges associated with both approaches.
- Arguably, the lack of a consistent approach combined with the absence of an overarching early help strategy, has also driven some inconsistency around the practice model being used and how to frame expectations around the length of time an early help practitioner should continue to engage with the family.
- There was concern expressed by some partners and early help practitioners that in a resource-constrained
 environment and with pressure to move cases on, interventions were sometimes too short term to expect to see
 any real change in family behaviour and could lead to repeat referrals for same families.
- There may not be sufficient clarity about what 'good' looks like in early help across both local authorities, all districts and key partners.



Place-based ways of working are not yet fully embedded

- Through the 'Think Communities' transformation programme in Cambridgeshire and Peterborough there is an ambition that services will be tailored to the needs of specific localities and places, that professionals working in those areas will be able to connect more effectively with each other, and that community-based assets will play a greater role in supporting better outcomes for residents.
- The early help model has begun to work in a place-based way, but this is not yet fully embedded.
- In Cambridgeshire the move from localities to districts has led to the disruption of some professional networks, particularly with schools, and early help practitioners no longer feel that they 'know their patch' as well as they did previously.
- There are significant differences in the accessibility and concentration of statutory and commissioned services and community based groups between different districts / localities. In some instances commissioning of an LA wide service has not sufficiently taken into account the different challenges associated with delivering in predominantly rural or mainly urban areas. In other instances the ability to access support and provision is seen more as a 'postcode lottery' than a well-planned place-based offer that responds to local needs.
- In some cases the different 'footprints' of individual services creates some barriers between
 professionals working with families. Conversely, where co-location exists, practitioners speak very
 positively about its day to day benefits.



Maximising the contribution from partners and the community

Partners play a wide range of different roles within the early help offer. Overall, many were very positive about the strength of partnership working and their desire to be part of the offer moving forward. However, inevitably the fieldwork threw up some tensions. Overall, a number of partners felt that they could not always see how what they were doing related to the bigger picture.

Partners as providers

There are a range of good quality VCS organisations in both local authorities delivering services and support to children and young people. For those who are not formally commissioned there could be benefit in offering greater support for capacity development, joint training and greater access to local planning processes to bring them within the early help umbrella. Revitalising previous opportunities to use volunteers may also be beneficial.

Partners as practitioners

A number of those who work with children on a day to day basis felt they did not know enough about 'what is out there' to be able to signpost or refer on with confidence.

Partners as lead professionals

A frustration and anxiety among some that the thresholds for both early help and children's social care have become so high that they are now coping with a level of vulnerability for which they are not equipped.

Partners as commissioners

Some felt that they did not have a clear enough understanding of the scope and purpose of the early help offer, or access to the right strategic networks, to ensure the services they were commissioning complemented and could work alongside the broader offer.





Early help is increasingly operating at the very edge of children's social care

- The overwhelming message from all those working in the system is that early help is no longer particularly 'early'. Those directly delivering support to families recognised that by the time families reached the threshold for receiving early help, many of their issues and challenges had become acute.
- The reasons for this were multiple and varied. In Peterborough the overall financial position has created a situation in which an already small service has been reduced even further. The capacity to carry out direct family work is now around 1 full time worker for every 780 deprived child or young people (excluding the early help element of Targeted Youth Support Service and children's centre staff). In Cambridgeshire, in comparison, the ratio is 1 to 160 (excluding young people's workers and children's and family centre staff for comparability).
- In Cambridgeshire, the capacity and financial challenges have not as been acute. However, the service acknowledged that pressures within children's social care meant have meant that their workload has been diverted over recent years to supporting families only just below the threshold for social care intervention.
- In both authorities there has also been, over time, and in response to austerity, a gradual diminution of universal and lower level targeted offers for families and young people including drop-in and stay and play sessions, positive and diversionary activities and youth clubs and services.
- A frequently voiced frustration by those taking part in the focus groups was 'we know who these children / young people / families are, but by the time we are able to help them it is often too late.'



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Early help is increasingly operating at the very edge of children's social care

- Several schools in both Peterborough and Cambridgeshire voiced the concern that thresholds for accessing early help were very high and that as lead professionals they did not always have the skills and capacity to meet a family's complex needs.
- In Peterborough the per capita capacity of early help to provide additional support is much smaller than in Cambridgeshire and many more cases are managed by schools as lead professionals. However, Peterborough schools also tend to be larger and receive higher per-pupil base funding which enables many to employ family support workers and other pastoral staff. In Cambridgeshire the early help offer is larger and schools may find it easier to access additional support. However, their core funding and pastoral capacity tends to be less, which may create a similar set of pressures.
- Some schools felt that the progress that had been made in reducing exclusions, particularly in Cambridgeshire through devolving funding and creating collective responsibility for exclusions, might be compromised if the right support for the most complex families is not available.
- The reduction in the number of Early Intervention Family Workers was highlighted by some Cambridgeshire schools as a potential risk. They felt that the numbers of EHAs may rise without the opportunity to get informal pre-assessment advice and support.
- There was a concern expressed by a number of partners that while support for victims of very significant domestic abuse and violence was good, there was very little support available for lower-level instances of domestic abuse which over time might have a significant impact on a child or young person's wellbeing.
- Partners also identified relatively few interventions in place to deal with family conflict before it escalated.



Gaps in the offer of support at specific ages

- A significant number of those we engaged in the fieldwork highlighted a gap in the support being offered to children in the later years of primary school and the early years of secondary school.
- Many of those we spoke to were concerned that not enough was being done to support transition for vulnerable or at-risk children and in both Cambridgeshire and Peterborough reference was made to previous approaches to supporting transition which had been lost due to lack of funding.
- There was also frustration that there was not a more significant offer of support for children in primary school where there were ongoing issues of low-level poor behaviour and family dysfunction who were likely to become the 'at-risk' adolescent cohort of the future. This relates to the lack of capacity to engage in genuinely preventative work outlined in the previous slide.
- There were also relatively few opportunities to work purposefully with younger siblings of those already engaged in criminal or sexual exploitation.
- In Peterborough this gap was particularly acutely felt as there is currently no lower-level commissioned family support offer for 12 and 13 year olds or direct 1:1 work with young people. (The core family support offer extends to age 11 and targeted youth support works with young people from 14 upwards.)
- Both primary and secondary schools recognised the need for more support in the later years of primary and through transition to secondary. Rising numbers of primary exclusions was a particular concern.
- Primary schools flagged their greatest concern to be SEMH, which underlines the need to join up early help with the SEND strategy and the current SEMH review.
- An additional, more discrete, gap in provision was around mental health support for the post-16 cohort.





Fragmented service delivery model for at-risk adolescents

- There are significant concerns about the growing impact of county lines in parts of Cambridgeshire. In Peterborough the cohort of at risk adolescents is more stable, but nonetheless forms a relatively high proportion of all those open to early help and children's social care.
- Schools were anxious that the information and support available for parents whose children had become
 implicated in or were at risk of county lines was very limited.
- In Peterborough the targeted youth support services model brings together youth workers offering targeted interventions, social workers, drugs and alcohol abuse services and the YOS into a single multi-agency team. This co-located partnership-based way of working with young people had begun to show dividends but is now under pressure with impending cuts and key vacancies in the YOS. Capacity for any form of preventative work is now significantly compromised.
- In Cambridgeshire young people workers are based in district early help teams, the YOS works on a different locality footprint and there is a county-wide adolescent social work team. Some of those working with at risk adolescents from an early help perspective felt that they did not always have the right knowledge, skills or suite of interventions to support this group of young people.
- There is a wealth of information on the at-risk adolescent cohort available through the Met Hub but some felt this was not always used as effectively as possible.
- Several schools voiced the concern that the reliability and consistency of feedback when they raised an issue
 of concern to the Police was variable.
- The devolved model of AP funding in Cambridgeshire has contributed to significant progress in reducing exclusions. However in Peterborough there remain significant concerns about the quality of Alternative Provision and issues of persistent non-attendance. Children not being in formal full-time education can compound other adolescent risk factors.





Lack of distributed responsibility for children and young people's mental health

- In relation to children and young people's mental health, those we spoke to recognised that progress is being made in developing a partnership based strategy, but would like to see greater momentum and urgency.
- While waiting lists and times for treatment for CAMHS have improved, there is still a significant cohort of young
 people who do not meet the CAMHS threshold and who are not getting the support that they need in a timely
 fashion. The predominant view among those who took part in the focus groups is that there was a big gap around
 access to lower level mental health support.
- There has been a significant focus on supporting schools to embrace whole school approaches to mental health and emotional wellbeing and this is beginning to have a positive impact, but there is anxiety that schools are now being faced with a proliferation of competing schemes.
- There is little evidence of CAMHS expertise being distributed or embedded within the system to provide supervision, training, hands-on support or professional advice to other practitioners working day to day with children and young people.
- Partners feel that the wrap-around support and services for providing 24 hour intervention in the case of a crisis is currently not working well.
- There is a need to work with schools and families around children and young people exhibiting extreme behaviour who are not meeting the CAMHS threshold to understand what the best form of support might be, and who in the system could provide this.
- There is pressure on the neuro-developmental pathway and the inter-relationship with access to parenting

 courses.



Part 2: Key developments in early help in recent months



Part 2: Bringing the story up to date - Early help

Key developments in last 6 months

- Stopped the majority of face to face early help interventions and group work in schools.
- Carried out small number of essential face to face engagements and some door step visits.
- Virtual offer to YP and families has been really effective.
- Triple P and other parenting programmes online, with practitioner support have worked really well.
- MASG (Peterborough) working well online.
- Very strong partner engagement including from VCS.
- Rapid take-up of shared MIS.
- New impetus for locality working.

Future challenges anticipated

- Likely to have been a widening of the gap in outcomes for children from vulnerable families in terms of education, health and mental health over the last period.
- Disclosures relating to DV / safeguarding likely to rise after children return to school – scale currently unknown.
- Trauma experienced by some families, including bereavement, will bring new families to the attention of children's services.
- Anticipating significant work with schools and mental health teams on promoting positive behaviours and engagement with education, on return to school.

Aspects of current working that would like to retain

- Flexible service design that allows the partnership to respond to new challenges as they arise.
- Hybrid model that combines face to face and virtual elements, aiming to be more responsive to children and families needs.
- Engagement of local community hubs in bringing together partners and services for vulnerable children and young people.
- Build on information that has been developed around self-help options, and maintain new offers such as the parent-carer phone line.
- Capitalise on access to shared MIS.
- Multi-agency risk assessments for identifying vulnerable children.



Part 2: Bringing the story up to date – the adolescent offer

Key developments in last 6 months

- Prior to lockdown (March), TYSS in Peterborough achieved majority of performance related targets – demonstrating efficacy of combined model.
- When service under intense pressure TYSS has been able to consider how to use resources most effectively – e.g. combining CiN and YOT contacts.
- Seen reducing age-profile of adolescents at risk, and more localised issues (less related to train-lines). More 10 to 11 year olds coming to attention of services.
- Closer partnership working across all heads of services working with vulnerable children and YP.

Future challenges anticipated

- Securing successful return to school for young people at risk – particular focus on the younger cohort.
- Need to agree a contextual safeguarding framework / trauma informed approach for working with young people across the partnership.
- Potential for increasing referrals when pupils return to school.
- Continue to focus on issues of localised violence.
- Consider how to develop an integrated offer for at-risk adolescents across both Cambridgeshire and Peterborough, working across service boundaries.

Aspects of current working that would like to retain

- Integrated approach to TYSS currently deployed in Peterborough.
- Joint working with SAFE team and Police around contextual safeguarding in hot sport areas.
- Closer contact and joined up working between heads of service working with vulnerable children and families.
- Developing and building on trauma informed practices so that these become the way of operating across the partnership.



Part 2: Bringing the story up to date - children's mental health

Key developments in last 6 months

- At the start of the pandemic the nature of services offered changed very quickly – with no face to face support for children and young people.
- There was a focus on diverting resources to work with children and young people in crisis and lower level treatment was paused.
- Referrals have dropped significantly while pupils have been out of school

 particularly seen drop in low-level anxiety and school refusal cases.
- Virtual support worked very well for some young people (eg ASD in particular). Less well for others.

Future challenges anticipated

- Anticipating a surge of demand as schools reopen.
- Staff will need more training on how to deliver therapies virtually as part of an ongoing blended offer.
- Children and adults will need support to deal with loss, but also need to be cautious not to overpathologise.
- Recent emotional wellbeing survey for schools shows that many staff are quite fearful – need to make sure they feel safe.
- Commissioning lower level support, as CHUMS contract ends, will be a significant priority.

Aspects of current working that would like to retain

- A virtual offer for children and young people should continue to be part of the mix going forward.
- Daily meetings between CAMHS and CSC to focus on the most high risk have been really helpful and should continue.
- Have started thinking about the front door into a range of mental health support services – Covid has accelerated these conversations and broken down some of the bureaucracy.
- Need to create greater flexibility in commissioning contracts going forward to ensure they can respond to rapid changes in circumstances.



What does this mean for the areas of focus going forward?

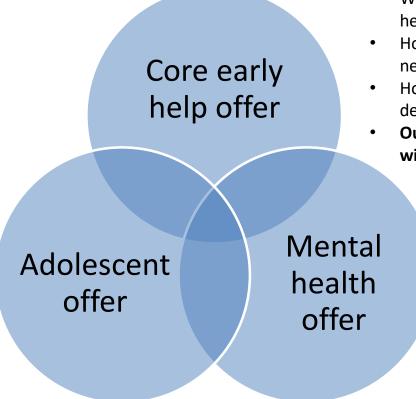
Original challenges that remain relevant	 Lack of shared strategic vision and strategy for early help across Cambs and Peterborough Different models of delivering early help and early help not always 'early enough' Gaps in support for specific age-ranges, particularly around 10 to 12 year olds. Fragmented delivery-model for at-risk adolescents. Lack of distributed responsibility for C&YP mental health
Previous issues where progress has been made	 Locality hubs have become more vibrant and there is a structure in place to take these forward Working with a range of partners, both statutory and community, has accelerated. New MIS systems provide a better platform for sharing information. Joint work and planning around the most vulnerable children has improved.
New challenges confronting the system	 Likely surge in referrals once schools have been open for a few weeks. Possible new cohort of at-risk children and families coming to the attention of services. Need for even greater flexibility and responsiveness in modes of delivery. Capacity of schools and health partners may be fully absorbed by day to day firefighting.
New opportunities to capitalise on	 Opportunity to reimagine services on a new 'hybrid' model. Better platform for partnership working. Clearer partnership wide perspective on the most vulnerable children and opportunity to genuinely join up services. Appetite not to simply return to 'old ways of working'.



Our proposal for next steps on this project

A series of virtual workshops focused on the three key areas, below. Suggested questions and outputs are proposed for each. These would take place between September and December with an update offered to the next partnership board in December.

- How can we achieve an integrated approach to support at-risk adolescents across all partners?
- What will we need to do to embed a trauma-informed approach to adolescent risk?
- How do we work with a younger cohort?
- Output: A delivery model for working with at-risk adolescents across Cambs and Peterborough



- What is the overall strategic vision for early help across the partnership?
- How should we frame our strategy for the next three years to deliver this vision?
- How do we consolidate and refine the delivery model for the future?
- Output: A refreshed early help strategy with revised vision and priorities
 - What are our commissioning priorities and how do we measure outcomes?
 - What does a responsive offer of lower level support for emotional wellbeing and mental health look like?
 - How can we distribute responsibility and expertise for mental health?
 - Output: A refreshed CYP mental health vision and outcomes framework