

# Family Services

Document control	
<b>Document title</b>	Early Help and DATs One Service Response (OSR)
<b>Document description</b>	This document sets out the aims and objectives of this one service response and how this is going to happen

The Pilot	
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# 1. Rationale

- 1.1 In her final report 'Review of Child Protection', 2011, Professor Eileen Munro talked about the importance of Early Help services for children and families. She talked about Early Help services not just being about preventing abuse or neglect but also about improving the life chances of children and young people in general. The aim of Early Help is to provide support as soon as a problem emerges, at any point in a child's life, from the foundation years through to the teenage years.
  
- 1.2 As identified from the Early Help Strategy 2019-2022, "our offer encompasses universal and targeted services aimed at intervening as soon as difficulties start to emerge and/or when individual circumstances are likely to create future difficulties. Barnet 0-19 Early Help Services provides help and support to children throughout their minority, from pre-birth through to adulthood in recognition of the evidence that demonstrates effective interventions can improve children's life chances at any point during childhood and adolescence".

## 2. Objectives

- 2.1 The aim of this One Service Response between the Duty & Assessment Team (DATs) and Early Help (EH) is to identify and provide support for families at the earliest opportunity. This will prevent drift and delay in requesting Early Help support and this being delivered. It will also reduce the likelihood of the parents/young person withdrawing consent, as previously when referrals were made to Early Help at the end of the DAT's assessment, often there was lost momentum, and parents sometimes withdrew consent to work with EH
- 2.2. A further objective of this one service response (OSR) is to enable the assessing Social Workers to have a better understanding of the family's engagement and capacity to implement positive change, therefore informing their C&F Assessment and ensuring more effective planning.
- 2.3 Following the review with the Duty and Assessment Teams held on 25 February 2021, it was agreed that the OSR would be best delivered working alongside the DATs team the week after they have been on Duty. This will allow time to carefully consider the cases where Early Help Interventions would be required. For example, once a S47 visit had been completed and the needs of the family have been identified.
- 2.4 From the review, it was identified that the designated 0-19 practitioners would be available for the week rather than as previously agreed one day. This will afford flexibility on case visits and the start of 0-19 intervention. As previously agreed, there will be a maximum of three visits/ cases per week per hub as part of the

OSR. This will be reviewed further at the next joint meeting with DATS, to explore the positive impacts gained and discuss if any changes need to be made to the number of cases agreed. This will be based on the outcomes achieved from the implementation of the OSR. The Duty Social Work Manager/ Social Worker will have already considered which families they would like to consult with the 0-19 designated Practitioner. From this consultation visits will be arranged and ultimately a maximum of three visits per hub will be accepted as identified and agreed interventions for that week. And followed up with a 0-19 Request Form.

### **3. The Benefits**

- 3.1. Social Workers and 0-19 Practitioners to work together collaboratively. This will provide an opportunity for both workers to build on their skills set and learn from each other.
- 3.2. By getting the right support at the earliest opportunity, families may benefit from Early Help support as opposed to longer term statutory intervention as the plan would have been tested. Early Help support may therefore be the most appropriate service for the family. For those who require statutory intervention early engagement with EH may support improved transitions at any required step down
- 3.3. By EH working alongside DATs, we are working with the principle of intervening as early as possible to reduce the need for escalation, i.e., small problems can usually be resolved before they become big problems.
- 3.4. The social workers will have access to the wide range of interventions delivered by the EH system enabling the assessing Social Worker to signpost and refer to the

relevant agencies as required. This will also promote the Social Workers knowledge base of wider community and Borough wide services.

- 3.5. Where cases then step down to an EHA or Universal Plus service, the same 0-19 practitioner will stay involved where possible, ensuring a seamless and consistent practitioner for the family.

## 4. How is it going to work?

- 4.1 These interventions will adhere to the Early Help Menu of Interventions, which will be focused with a clear plan, timescales, and outcomes. (Please find a copy in the appendix of this document.)
- 4.2 In cases where parenting interventions are being explored, we would generally offer an evidence-based parenting programme, however a 1:1 approach can be considered in specific cases such as Child Protection situations or when there are Non-English-speaking parents. In principle, these are short term pieces of work with a maximum of 6 sessions and can then be reviewed, however more sessions (up to a further 6 weeks) can be considered if there are more complex issues that need supporting; For example if a parent has a learning difficulty.
- 4.3 For those cases where there are court proceedings, 0-19 practitioners will not do court reports or parenting viability assessments. The 0-19 hubs do not offer specialist parenting programmes (E.G around Autism, ADHD Etc); these are provided through a commissioned process with partners and will need to be referred to.

The 0-19 practitioners will provide a range of support and interventions that are set out in the Menu Of Intervention. All work will be allocated and supervised by their line manager.

Each Hub will identify a 0-19 Practitioner who will be the lead responder for that week. This will either be a H, or I Grade practitioner. This will allow a combination of 0-19 Practitioners experienced in working with vulnerable adolescents for example complex youth support (I grade worker) as well as those experienced in for example, parenting programmes (H grade worker) or 0-5 Early Years

Social Workers will be issued the rota and book actual or virtual joint home visits and consultations on cases for the 0-19 practitioner from the relevant Hub. The joint visit should be discussed with the 0-19 Practitioner prior to it taking place, for the worker to be able to prepare for the visit and consult with the Relevant Hub Team Manager in line with current COVID Risk Assessments.

- 4.4 It is expected that the 0-19 Practitioner completing the joint visit with the Social Worker will deliver the intervention, unless they consider another Practitioner may be better suited (e.g., in terms of gender or area of specialism, workload or Annual leave) in which case, this will be considered by Hub Team Manager.
- 4.5 The Social Worker will then follow this up with a 0-19 Request Form on LCS detailing the agreed work identified with the family.
- 4.6 Social Workers making a request for a commissioned piece of work outside of their Rota week will need to follow the existing process in place, by completing a 0-19 Request Form on LCS and send it to the respective Hub. This 0-19 request will then

be allocated to the identified 0-19 practitioner and will be monitored in line with the current supervision guidelines.

## **5. How are we going to know it's working?**

- 5.1 This revised protocol will be reviewed by all parties on 20<sup>th</sup> May 2021; however, the Hub and DATs Managers will communicate on a regular basis throughout regarding the progression of the OSR and agree changes where needed.
- 5.2 The hard data provided by the data management team may not show immediate benefits of the OSR, however we are hoping that there will be a reduction of cases transferring from DATs to I&P thus concluding Early Help Intervention is making a positive impact on Service Provision to families in Need. It is also hoped that the data from the OSR will show that the length of time Early Help (or Statutory involvement) required for working with families reduces due to services becoming involved at the earliest possible point.
- 5.3 Discussions will need to be held with the Data Management Team to explore how best we are able to record and use feedback from Children, Carer/ Parents on how the services were able to best support them. This will be discussed further at the next review.



## 6. Appendix

[Menu of Interventions - FINAL - Shortcut.Ink](#)