NORFOLK: A Step in the Right Direction

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Early Help is the term used by agencies in Norfolk to describe our approach to providing support to vulnerable or potentially vulnerable children and young people when problems arise to prevent escalation of that problem or when risks have been reduced to prevent escalation of concern in the future.

Early Help may be provided through an increase in the levels of universal services or support provided or commissioned in clusters this includes family support provided by schools and third sector services.

Nationally the CAF describes how the needs of the child will be assessed and services delivered. It is the expectation that all Local Authorities have clear plans regarding how they will ensure CAFs are delivered.

In Norfolk we call the CAF Family Support Plans or FSP.

For those children whose needs cannot be met in Universal services they can be referred for Targeted Services.

Norfolk’s Early Help and Family Focus teams provide targeted support at this level.
Troubled Families

The first phase of the Troubled Families programme ran from 2012 to 2015

It set a target to work with, and ‘turn around’, families with multiple problems, or help them move into continuous employment

Problems included crime, anti-social behaviour, truancy and unemployment

Local authorities ran the programme and received payment-by-results from central Government

Phase two - 2015-2020 to work with 400,000 additional families

Second phase targeted additional problems, including domestic violence, health, drug abuse, mental health and children at risk

Each Locality Authority provides their own arrangements for early help
Norfolk’s Journey

- **January 2013** - Norfolk Children’s Services judged by Ofsted to be **inadequate**:
  - Early Help is under-developed and not consistently applied

- **July 2015** – Norfolk Children’s Services judged to be inadequate but showing improvement especially in areas of help and protection:
  - Notable improvements in early help services
  - Early Help Hubs are developing and partnerships developing. MASH decision-making regarding Early Help and Social Care is not consistent. Quality of early help planning is variable.
  - Norfolk under notice to improve.
2015 – 2017 Ofsted Monitoring Visits:

- November 2016 – action taking place to address threshold. Partner awareness of and confidence in early help services needs to increase.

- March 2017 – Early help is an identified strength. Well developed partnerships, effective hub arrangements and good working relationships between Early Help Teams and Children’s Social Care.

- June 2017 – Senior Managers are ensuring thresholds are well understood and consistently applied. Practitioners and managers know how and when to step cases up to Children’s Social Care and do so promptly. Plans are easy to read, child-centred, specific and measurable.
Norfolk uses its City, District and Borough Council boundaries to define its 6 localities.

Each locality has a Head of Social Work and a Head of Services and Partnerships (Early Help)

Localities have 2 social care assessment teams, 2 Family Intervention teams, 2 Looked After Children Teams, 1 Leaving Care Team, 2 Early Help and Family Focus Teams, 1 Process Team and 1 Commissioning, Partnerships and Community Capacity Team. Each have a manager who is line-managed by a Head of Social work or Head of Services and Partnerships. They are mostly co-located.
West Norfolk – 1 of Norfolk’s 6 localities.

- West Norfolk – 147,000 population. Very large geographical area. Town and rural deprivation.
- In 2016 Hayley and Carol were Heads of their respective services (social work and Early Help) in West Norfolk
- Teams were co-located
- Hayley and Carol modelled cohesive working arrangements between social care and Early Help (CS Teams)
- Hayley and Carol developed strong relationships with locality partners from Borough Council, Health, Police and the Voluntary Sector
- Hayley and Carol held a weekly managers’ meetings
- Hayley and Carol met weekly to develop practice in the locality
Essex County Council were Norfolk’s improvement partner as directed by the DfE.

Bi-monthly meetings with Essex to develop a better system and better practice.

Essex suggested that Norfolk’s Early Help Family Focus Teams were not working to a high enough threshold.

Hayley and Carol had already discussed how to step-down cases more efficiently.

Hayley and Carol were tasked with developing a new ‘in-reach, step-down, step-up’ model of practice for Norfolk’s social care and early help staff.
‘In Reach’ model resulted in a shift in the threshold. Now working very close to the S17 threshold in order that cases can be stepped down from social care when the risks are assessed as reducing and the family are working effectively with professionals.

The model also describes behaviours of practitioners. Clear expectation around being helpful to each other in the best interests of children. This speeds up effective transition and ensures that the right children are in the right part of the service at the right time.

The process is that once a week at least early help practitioners, who are co-located to identify suitable cases and agree a plan of transition.

This model has now been rolled out across the county.
Practice Arrangements

- Meetings and working relationships – initially led by senior managers
- Case tracking
- In-reach conversations (EHFF and Universal)
- Step-down support – (EHFF and Universal)
- Process Teams
- Auditing/case reviewing
- Reinforcing with staff (labour intensive but effective), developing a culture
- Improving other practice arrangements
- Case discussions between managers to agree which team is best to manage the case.
Norfolk’s Threshold

- Norfolk now has a new threshold guide to help all agencies better understand where cases should sit.

- Work to embed the threshold guide is still taking place in Norfolk.
Other Working Relationships

- **Health Visiting:**
  - Regular meetings with our equivalent in Health Visiting
  - Regular meetings between our social work team managers and our health visiting team leaders
  - Expectation that all initial visits to under 5s who have been referred for social work assessments are completed
  - Office space made available at health visiting offices so that social workers and health visitors can collocate for planning of visits and writing of assessments recordings
- **Housing** – joint meetings between housing manager and ourselves
- **Police** – joint meetings with sergeant of local police team carrying out child protection investigations and ourselves.
- **Schools meetings** – head teachers and safeguarding leads
- **Collaboration Hub** – fortnightly round table meeting with partner agencies
So what?

- Culture of the whole locality is positive, creative and co-operative.
- No bottle necks
- More cases stepped down
- More children and families getting the right service at the right level.
- Less intrusive.
- Fits with strength based model
- In Norfolk we use signs of safety.
- Those requiring support S17 / 47 are getting a better service as there is less work in the social care system.
- Essex diagnostic of West Norfolk gave positive feedback and took away some learning for Essex.
What’s next?

- Early help practitioners to shadow the social workers to help them manage difficult conversations
- Improve our practice regarding getting feedback from service users to shape our services.
- Further diagnostics across the county and support as necessary.
Any questions?
Thank you for listening!

Please come and see us outside the auditorium – stand 22