

## **Evidenced Based Practice and the Development, Implementation and Impact of BwD's Children's Advice and Duty Service or "The front door"**

### **Development and Implementation of our Children's Advice and Duty Service (CADS)**

The newly appointed Director of Children's Services reviewed performance and workload in BwD children's services in late 2018 and early 2019. Demand for the service was on an increase, caseloads for social workers were too high and this was adding to staff turnover. All of these issues were having an impact on a service, which in 2017 had been judged to be overall "good" by Ofsted, but where Ofsted had judged Help and Protection as Requires Improvement. The increasing demand for more and more resources threatened the quality and consistency of social work practice whilst also threatening the resources of the Council. Despite some initial resistance and concerns from staff and partners who were committed and proud of BwD's Multi Agency Safeguarding Hub (MASH), the DCS was committed to exploring different ways of working. This was supported by the newly appointed CEO. David Thorpe and his team were commissioned in February 2019 to research how the existing MASH in BwD was functioning. The review was informed by the implementation of Professor Thorpe's work with other local authorities and his longstanding expertise as an academic in social work practice and theory.

The research completed in April 2019 with findings and recommendations reported to the DCS in June 2019.

Staffing structures were reviewed and strengthened over the summer of 2019 with qualified and experienced social workers/advanced practitioners being supported and trained to deal with telephone enquiries at the point of initial contact. A new service manager was created and appointed to lead CADS. These changes in staffing structure were fundamental to the successful delivery of the model.

Support from Digital and Transformation on enhanced telephony systems and an improved website all went towards delivering the planned "Go Live" date on the 5 November 2019.

The model promotes professionals seeking advice directly via telephone rather than completing a multi-agency referral form. Put simply David Thorpe's model is based on the following premise: You can't ask a form questions and it is never acceptable to do nothing. Partners or concerned individuals have conversations with qualified social workers in order to determine next steps and/or to agree that a referral into children's social care is appropriate. These conversations and decisions on actions to take are recorded on the children's social care system by the social worker who has taken the call. There is a requirement that a manager signs off all decisions.

CADS has now been in place as a model to support the right children at the right level at the right time for 15 months and a 52 week review of the data has been held. Key headlines from the 52 week review indicates a 402.7% increase in the number of telephone conversations occurring between social workers and partners – this being the most dramatic increase of any Local Authority Professor Thorpe's team have ever seen. There has been a 33% reduction in referrals and a 31.7% reduction in the number of single assessments. The trend in terms of the implementation is one of consistency and stability with the model being maintained and embraced by the team and by partner agencies.

Feedback is gathered systematically from partners who have said the following:

- *Very pleased with the support / advice offered from CADS. Risk of harm has been initially reduced, paving the way for CAF to be opened to continue this work, but in a less urgent manner (School, October 2020)*

- *SW was outstanding with her professional approach to the situation. She listened to what I had to say and was very professional. I have received a letter 2 days later with a plan to support mum with her son's ADHD. This I feel will help her feel much more confident dealing with him. Thank you for such a brilliant service (Housing Needs, June 2020)*
- *Very supportive, clear and helpful (School, December 2020)*
- *Many thanks for your swift and thorough input (Health, November 2020)*
- *Very satisfied with this communication (GP, June 2020)*
- *Excellent professional support when needed (Health Visitor, July 2020)*

Professor Thorpe's team have advised that we have a compelling story to tell in Blackburn with Darwen regarding the implementation of CADS and the impact of the model. By focusing our resources on the 66% of families who need us most and reducing a volume of work that should never have been accepted into the social work system we have been able to free up social work time to work with the children and families.

We have a strong early help offer in BwD too, which supports a CAF lead professional model both internally and with our partners. The Early Help team offer advice and support to partners in lead professional roles. This mirrors the CADS model, but at a lower threshold. Our step-up and step down to Early Help works well with the teams linking closely together with children receiving support at the appropriate level along the continuum of need.

We have implemented guidance around three similar contacts about a child within a 3 month timeframe with a requirement that these contacts need closer scrutiny by the CADS social worker and team manager. Section 47 enquiries have reduced by 31%. The biggest reduction in Section 47 enquiries has happened during the 45-day assessment period. This more proportionate response means we are no longer an outlier with our statistical neighbours for this performance measure.

Strategy discussions and Section 47 enquiries, which are reviewed in our weekly CADS data meetings demonstrate a sound commitment from partners that supports effective multi-agency decision making. The threshold and quality of this process is determined by quality assurance activity to ensure that multi-agency decision-making is appropriate. We are also reviewing recent outcomes from strategy discussions and section 47 enquiries when they result in no further action.

### **Analysis of quality of practice**

Our weekly CADS data meetings give an overview of incoming contacts/referrals/outcomes. 24 hour decision making at the front door is now at an average of 80% and the average conversion rate from contact to referral is 18%. Before we implemented the model the percentage of contacts to referrals was as high as 96%. 12 months ago assessments completed within timescale were 61%. Currently timeliness of assessments is at 90%. The assessment teams are able to undertake quality and timely assessments with those children and families where risk and need requires us to lead multi-agency support and intervention.

Recent analysis of data at our Service Development Board confirms that this reaching out to the community has resulted in 981 contacts from family, friends and neighbours from April 2020 to the end of December 2020, compared to 633 in the previous year.

19.4% is our current re-referral rate, which is below the regional and England average, but is a figure we will continue to monitor. As stated above, if three contacts are received of a similar nature within a three month period and patterns are emerging then the SW and TM will offer greater scrutiny of such cases where it is likely that a referral and single assessment will be triggered.

Social workers within the four assessment teams at the time of the 52 week review of CADS had an average caseload of 18.2. This compares to the average caseload 12 months ago of 28.8.

## Conclusion

BwD's Children's Advice and Duty Service was designed, implemented and is being delivered on an evidenced based social work practice model. Supported by our partners and increasingly the broader community we are proud of the difference that we have made to the offer that the children in BwD receive.

Professor Thorpe further indicated that BwD have a very positive story to tell both from the implementation of our CADS model and the combination of this with other strategies which have supported both good practice and more realistic workloads for our staff. CADS has not been entirely about demand management – it has been about redressing the balance as regards ourselves as a statutory Children's Service who are required to work with the right families and those referrals which do progress to assessment. We need to make sure our biggest resource, the staff, are working with those most in need and at risk.

Within BwD we had the biggest and most impactful journey to travel that Professor Thorpe's team had ever seen based on their original analysis and this has been fulfilled with the very successful implementation of the model. It was the right decision to make to support our service.

Other initiatives that have supported a more proportionate response to need and risk include the development and implementation of a Legal Gateway meeting. This meeting considers social workers and their manager's request to implement pre-proceedings with enhanced assessments and interventions for children and families where we consider that there is a need to share parental responsibility. This meeting asks social workers with their manager to present a case to senior social work colleagues for a case discussion and shared decision-making. Prior to the implementation of Legal Gateway decisions, to go into pre-proceedings or initiate care proceedings, rested with one senior manager who agreed or disagreed based on the contents of a case decision form. Legal Gateway was implemented in July 2019 and over the eighteen months has resulted in a 40% reduction in care proceedings. CADS, Legal Gateway and an investment in systemic social work training have all contributed to a resetting of the context in which social work practice takes place in the Service.

We are never complacent and we continue to review the impact of CADS as a service through weekly practice review meetings, a quarterly, soon to be monthly partnership board and thematic audits. The need to ensure that CADS continues to respond appropriately to children in need of help and protection during Covid has also informed specific communication with our communities about what to do if you are worried about a child. The need to reach out to protect the most vulnerable, whilst a core social work value, is also one of Blackburn with Darwen Borough Councils most important Corporate Priorities.

Given the challenges of the Covid Pandemic on public services and the impact that it has had in BwD the significance of the changes brought about to our "front door" are remarkable and are a credit to the staff, social workers and partners who have supported us on this journey.

Jayne Ivory