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Leicester
City Council

WARDS AFFECTED
All Wards (Corporate Issue)

Social Services and Personal Health Scrutiny Committee   **16 September 2002**
Cabinet   **23 September 2002**

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THE MODERNISATION OF CHILDREN AND FAMILY RESOURCES
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Report of Corporate Director of Social Care and Health

1.   Purpose of Report

1.1   To inform Members about the next phase of proposals for the modernisation of Children and Family Resources, and to seek agreement for the resulting proposed reconfiguration for the City Council's family support services.

2.   Summary

2.1   This report provides information about the outcomes of a review held during the past year and identifies that the Council needs to make three strategic shifts in relation to the provision of family support services in order to deliver improved outcomes for vulnerable children. These are:

        (i)   To provide a better balance of preventative services at a universal, intensive or targeted level.

        (ii)   To equalise family support resources to both younger and older children.

        (iii)   To provide directly managed in-house resources, or to develop a mixed economy by commissioning some services from external providers, entering into strategic alliances or by developing strategic partnerships.

2.2   The report details the development of a community family support partnership previously agreed by Cabinet. This addresses the needs of vulnerable children for preventive and supportive services by co-ordinating universal services and local community and voluntary organisations. It therefore requires an approach which uses all three options for change. No one solution will achieve the improvement necessary to deliver improved outcomes for children. The supporting information details the proposals for service reconfiguration and explains the direction of travel for family support within the City Council. The report suggests that this approach would release some of the Department's resources to concentrate more effectively on those children in

greatest need and to broaden the scope of the services provided to a wider age range of children.

2.3 The report proposes that through a reconfiguration of services, improved outcomes will be achieved. It is intended to use this strategy to begin "shifting the balance" from intensive, high cost provision towards more preventative efficient provision. By reducing the number of looked after children, the number of disruptions in placement, achieving reductions in length of time on the Child Protection Register and reducing Child Protection Registrations, it will be possible to incrementally shift the balance towards improved preventative service. This will in turn further reduce the level of commitment the department current invests in intensive services.

2.4 The report provides further detail on proposals for service reconfiguration of current services.

3. Recommendations

a. <u>Scrutiny Committee</u>

Members' views are sought on the proposals prior to consideration by Cabinet.

b. <u>Cabinet</u>

(i) That Members agree the reconfiguration of family support services proposed in this report, together with the development of a detailed action plan.

(ii) That Members approve the change of role for all centres contained within the proposed reconfiguration, and agree that detailed negotiations proceed with partner organisations, where relevant, to implement the reconfiguration;

These are:

- Bishopdale Family Centre to become a Mainstreaming Sure Start Centre

- Belgrave Family Centre to become a Mainstreaming Sure Start Centre

- St Peter's Family Centre to become a Sure Start Centre subject to further negotiation with the Sure Start Partnership Board

- Jubilee Family Centre to become a Sure Start Centre subject to further negotiation with the Sure Start Partnership Board

- Charnwood Family Centre to become Community Family Centre with further negotiation regarding use of site and the LIFT project

- St Andrew's Family Centre to become the base for a comprehensive Contact Service

- Mayfield Family Centre to be developed to respond to the particular needs of disabled children in addition to maintaining a role as Community Family Centre

- St Christopher's Family Centre to be developed to respond to the particular needs of children aged 13+, in addition to maintaining a role as a Community Family Centre

- Johnson Family Centre to be developed to respond to the particular needs of children aged 13+ in addition to maintaining a role as a Community Family Centre

4. Financial and legal Implications

There are no specific financial issues arising from this report. However, the implementation of the proposals would imply the realignment of existing resources. Members will also be aware that savings of £495,000 are required for the Departmental Revenue Strategy in 2002/03. The proposals outlined here would allow the ongoing provision of services for vulnerable children and Children in Need whilst achieving those savings.

The report does not give rise to any immediate legal implications, but the detail of the reconfiguration and the negotiations with partner organisations will require specific legal advice (Guy Goodman, Assistant Head of Legal Services – Tel. 252 7054).

5. Report Author/Officer to contact:

Kim Bromley-Derry, Service Director (Children & Family Resources) Tel. 256 8303

DECISION STATUS

Key Decision	Yes
Reason	**Significant effect on 2 or more wards**
Appeared in Forward Plan	Yes
Executive or Council Decision	**Executive (Cabinet)**
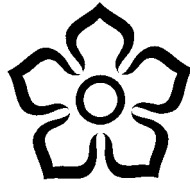
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SOCIAL SERVICES AND PERSONAL HEALTH SCRUTINY   **16th Sept 2002**
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THE MODERNISATION OF CHILDREN AND FAMILY RESOURCES

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Report of the Director of Social Services

SUPPORTING INFORMATION

1.   Introduction

1.1   Members will be aware that an internal review of the Children and Family Resources section has been under way since January 2001. The review entailed gathering considerable information and conducting a wide consultation and information gathering process. This included questionnaires for staff and service users as well as presentations to, and discussions with voluntary organisations. The results of this consultation are also reported as part of the Best Value Review of services for vulnerable children.

1.2   This report outlines how we need to move forward to modernise the service by developing the agreed vision and direction for the service, and puts forward some specific proposals in relation to the reconfiguration of family support services.

1.3   The proposals are being developed in two phases, first the reconfiguration of family centres alongside other community developments and secondly the reconfiguration of allied support services.

2. Demand and supply in the existing services

2.1 The Children and Family Resources Section currently provides a range of family support services, which are commissioned by social workers on the basis of an assessment of need. Referral statistics showed that the section received 1121 requests for a service in 2000, and in 1064 cases was able to respond to the request. 45% of referrals came from the Duty and Assessment team and a further 15% from hostels for homeless families. Only 40% were from child care teams, suggesting that the largest proportion of the section's work is with children and families at the earliest stages of their involvement with the Department.

2.2 In addition 130 Placement Panels were requested (these are used as a gatekeeping mechanism for the Looked After Children service), 78% of which concerned parent – child conflict. 9% (99) of the service requests were for the Intensive Support Team, and 85 of these received a response. The service with the most difficulty in responding to requests was the special childminding service, which was only able to meet 75% of the 207 requests. These figures might suggest that supply and demand are well matched. However, because the priority categories and eligibility criteria are very clear, commissioners in general only make referrals for services that they think they have a good chance of receiving. (They tend to be accurate in their assessment: 84% of referrals in 2000 received the service requested.) This does not necessarily mean that they would not use more if they were available. These referral statistics have, therefore, resulted in a service-led configuration rather than a needs-led configuration of services.

2.3 In canvassing their views, it became clear that social workers were by and large satisfied with the services to which they were able to gain access. They did, however, express some dissatisfaction with the level and scope of service available, particularly for older children, and identified the need for new services such as supervised contact, crisis response services at an early stage for families experiencing difficulties with teenagers and increased direct work with individual children and their families. It was also highlighted how requests for children aged 10-15 to be accommodated are being avoided a number of times by the Department, before the family's request can no longer be ignored. An earlier and more responsive input by family support services could possibly stop the case coming to Placement Panel and resulting in a child or young person being looked after.

2.4 This dissatisfaction might appear strange, given that the Department prides itself on its preventive services to children, which have for many years formed a plank of our children's services strategy and which received praise from the Joint Review for their effective work towards clear objectives. However, it must be recognised that the context has changed: the Children in Need Assessment Framework (CINAF) demands an earlier and more coordinated response from the Department, and Government expectations are that that this response will be more geared towards the provision of family support services. New Government initiatives, such as Sure Start and the Children's Fund demand that Departmental services change in the way they are provided and "bend" towards a more preventive style in partnership with a range of agencies. In attempting to respond in this style, social workers are looking to Children

and Family Resources to provide them with appropriate preventive services which complement the development of new initiatives such as Sure Start within the City.

2.5   At the same time, however, the greater number of children becoming "looked after" has resulted in greater pressure on those services that are designed to support families in greatest crisis, prevent children entering accommodation or assist their rehabilitation. There has thus been an increase in demand for services at both the early intervention stage and also at the more complex end of the children in need continuum.

3.   Current service spread

3.1   It was clear from the responses to the consultation that the current family support services are not able to meet the demand for the most intensive services, especially those for teenagers. The current services were developed without taking into account the development of other 0 – 4 year old services such as Sure Start and, therefore, duplicate effort or do not target prevention. Workers are on the whole satisfied with the quantity of preventive services for younger children (mainly provided through family centres) but they did not feel that these were sufficiently flexible to meet the range and complexity of need. In addition, it was felt that there was a need to provide improved access to services across universal and targeted needs. This is particularly relevant given the increasing numbers of younger children entering the care system or being excluded from school.   They were also of the opinion that there was insufficient provision for older children across the continuum. This is perhaps not surprising when the spread of services is examined in more detail.

3.2   The services provided by the Section, and their allocated budgets for 2001-2002 are described in the following table:

Service	Annual Budget (00/01)	% of Section Budget	Staffing Component	
Family Centres	2,592,100	77.10	2,309,700	Revised for 2001/02 (Now Transferred to Ofsted)
IST	218,800	6.51	201,900	
Family Aides	181,200	5.39	166,400	
Childminding and Playgroup Advisors	150,700	4.48	121,900	
Section Management Team	219,100	6.52	214,400	

Family Centres

Currently 75% of the section's resources (over £2.5m) are dedicated to the provision of the Council's 9 family centres. These serve children under five and their families. While children in greatest need (those on the child protection register and in danger of becoming looked after) get priority for places, there is still sufficient capacity to offer a service to most children in the lowest priority group. The service that is most often provided in family centres consists of day care, usually on a sessional basis but sometimes full days. This service is not necessarily targeted to preventative work. or reconciliation. This is an extremely popular service with parents and with our own staff as well as other agencies. However, it must be recognised that it is a service which is

provided by many other organisations, such as playgroups, nursery schools, voluntary and community organisations, Sure Start programmes, etc. In fact the provision of day care can be described as somewhat of a growth area. There is a need to continue to stimulate the development of high quality nursery provision across a range of providers.

3.3 An examination of referral statistics showed that 100% of children referred to the centres following an assessment were offered a place, even those in the lowest priority group. Services to support children in other settings (such as their own homes) are, however, more limited, and this is particularly true of children over ten. The Department invests 7% of its family support budget in the IST, which is the one team dedicated to work with teenagers experiencing family breakdown. Unlike the family centres, this team can only ever accept work that falls into its top priority category. Numerous requests are made for the involvement of the team in early prevention, e.g. walk – in behaviour management advice sessions, or mobilisation of extended family resources to prevent a possible admission to accommodation, as well as intensive interventions with families to rehabilitate children from care. It is, however, currently only possible to allocate cases of children whose family situations are at the point of breakdown. Similarly the special childminding schemes for older children and disabled children are seriously oversubscribed. This position necessitates the need to provide a coordinated approach to the provision of family support services.

4. Modernisation

4.1 The national context has changed in other ways in addition to the expectations of earlier intervention. An increased emphasis on developing neighbourhood services, community capacity building and involving local people in the management of services presents additional challenges to Social Services. Its services are currently operated on a centralised basis, which has not only allowed city - wide consistency of approach but also economies of scale. The review group consulted staff on a range of possible structural options for the future. Staff within the section were reluctant to lose the advantages of the current arrangement, but recognised that the service needs to develop a more local focus in order to be able to respond appropriately to local needs by forming closer links to communities and to local initiatives. This will enable a collaborative approach to providing local services to develop and also provides the opportunity to develop multi-disciplinary teams and responses.

4.2 It is increasingly obvious that direct provision is not always effective or appropriate. Research has shown, for example, that many black and ethnic minority service users find community and voluntary organisations more welcoming or more responsive to their needs. The Best Value Review recognises that it has not always involved service users in planning services, and they may find services provided by the Council distant, stigmatising or hard to trust. Certainly it is a matter for concern that in a city where the non-white child population is estimated to be nearing 50%, only 39% of users of the department's family support services are from an ethnic minority background. This inequality must be further addressed through the implementation plan and detailed development of services.

4.3 Another relevant factor is the Government's growing emphasis on multi-agency partnerships as a vehicle for delivering services to families. Government funding streams are designed so that finance is more easily acquired by partnerships or by

voluntary organisations than by Local Authorities. It is therefore increasingly important to be clear about whether the Council intend to continue to provide services directly or whether this is the right time to work with external partners to provide some or all of the Council's family support services. This will significantly increase capacity, reduce stigma and avoid duplication within the services provided by all organisations.

4.4   The review group undertook an exercise to identify the level of interest from the voluntary sector in providing family support services of various types. It became evident that in addition to the large national voluntary organisations that there is potential within small community and voluntary organisations to take on the delivery of some parts of services that are currently provided on an in-house basis. Most interest was expressed in developing childcare and parents' groups, i.e. early prevention services. It is considered that it would be more cost-effective to commission services such as these than to provide them on an in-house basis; however unless resources can be freed up from our current services the Council will be committed to direct provision as this is where the budgets are tied into non-preventative services even in circumstances where this is not cost effective or delivering performance improvements.

5.   Strategic Purpose

5.1   The Family Support services provided by the Department were established in order to prevent children becoming looked after, so it may be considered that it has not been wholly effective given the steady increase in children entering accommodation since 1997. On the other hand, it may be that without the level of family support services in place the problem would be even worse. It could be argued that the Section is becoming less effective because it is less able to focus on its core business due to the additional demands and expectations made upon it. This report is suggesting that it is time to re-state the purpose of Family Support and be clear where it fits into the continuum of children's services.

5.2   It is suggested that the Council has to move forward using a combination of three strategic options in relation to services which provide the framework for providing family support services. These are:-

- Improving the balance between early prevention and intensive interventions.

- Equalising the balance between maintaining a high level of investment in early years and being able to provide adequately for the needs of older children.

- Utilising the opportunities of a balance between directly managed in-house resources, services commissioned from external providers and the development of strategic alliances with other organisations.

The Current Framework For Family Support Services

5.3   The Children Act, 1989 is based on a general assumption that children are best looked after within their own family and that most parents manage to discharge their parental responsibilities without significant recourse to services provided under a statutory framework.

5.4   However, it is normal for many families to have problems from time to time. On these occasions parents may have needs in their own right that impact on their children's well being.

5.5   Research on child protection, family support and looked after children has all suggested that many families who are known to the statutory agencies are subject to multiple stressors **(Bebbington and Miles, 1989; DoH, Aldgate and Turnstall, 1995; Packman and Hall, 1998)**.

5.6   Generally three categories of typologies of families are particularly relevant for the improvement of family support services within Leicester.

1. Multi-problem families are well known to statutory agencies and have a range of problems many of which are chronic. Problems include ill-health, poor housing, long term unemployment, domestic violence, drunkenness, drug abuse, and financial and social incompetence.

2. Specific problem families are rarely known to agencies and come to their attention because of a specific issue, for example parental mental illness. Families are not confined to any social class and, on the surface, their lives may appear quite ordered.

3. Acutely distressed families normally cope, but any accumulation of events overwhelm their resources and require them to seek support.

5.7   The difficulty with providing services for families in these three typologies is that the problems experienced by them require a service approach that enables a range of agencies to collaborate and on a mixed economy and range of services. By achieving this it should ensure that, not only are parents recognised as having needs in their own right, but the impact of those needs on children becomes part of the response.

Definition of Family Support

5.8   Family support services is a collective title given to a broad range of provisions developed by a combination of statutory and voluntary agencies to promote the welfare of children in their own homes and communities. (**Murphy 1996. Administration, Volume 44, Number 2).**

5.9   Family support covers a range of interventions and can be targeted to a range of groups such as mothers, fathers, toddlers, teenagers. The diversity of services provided, professionals involved and target service user groups indicate that family support is not homogenous, but should be a diverse range of interventions.

5.10   Traditionally within Leicester, family support has been heavily influenced by the existing organisation of services, and it reflects professional demarcations around family intervention.

5.11   " Fundamental to the concept of family support services is the conviction that families – however difficult or apparently intransigent their problems – contain within them

resources and strengths that, if harnessed and nurtured, can produce beneficial outcomes". **(Keenan, 1998, Barnados).**

5.12 Family support needs to be flexible and adaptive in its engagement with vulnerable families. It must cultivate the strengths and weaknesses and innate problem solving abilities of all families and restore confidence in their capacity to overcome adversity.

5.13 Families may need to be supported for an extended period, but this is likely to be effective if the service can contribute to building stronger supportive relationships with families, develop their strengths, expands their support networks and cultivates an attitude of hope and optimism that life can be improved for families.

What Family Support Interventions Work

5.14 Any family support strategy must be based on some evidence of what works. The following areas of intervention should be considered as the backbone of Leicester City Council's approach to providing family support services.

(a) Parent Education and Support Programmes.

5.15 Parent education programmes aim to improve the knowledge and skills of parents for the purpose of improving the development of their children. The programmes usually take the form of group based sessions outside the home in venues such as family centres.

5.16 However, operating alongside these should be a complementary programme provided within the home. These can best be described as **parent support programmes** because notwithstanding their educational content they involve an important element of support.

5.17 The success of these programmes is usually based on ensuring the following factors are in place:

- Topics are identified by parent/carers
- An emphasis on specific skill development
- Parents/carers are given additional materials or information
- Social networks are established through the programme
- Elements of self-selection are used
- There is hands on active participant involvement
- There is a specific child behaviour or social skills focus.

5.18 However, despite the research evidence that these programmes have a positive impact on families it is unlikely they will constitute a sufficient response in families where in addition to parenting problems a range of other conditions and circumstance prevail, such as:

- Poor parental adjustment, particularly when associated with maternal depression
- Parental stress and low economic status
- Social isolation of mother
- Relationship problems

- Extra-familial conflict
- Severe and or long standing problems
- Parental misperception of deviance of their children's behaviour.

5.19   In these circumstance supplementary services must be offered in order to effect change.

(b)   **Home based parent and family support programmes**

5.20   Home based interventions with vulnerable families should be seen as a useful approach to some of the following circumstances:

- Reducing barriers to services that arise due to lack of transport, child care, or motivation
- Providing a source of support to the family and assist in building the family's social network
- Facilitating greater insight into the needs of parents and children, particularly around the issues of parenting and child rearing
- Assisting in detecting early signs of parental distress or child neglect/abuse.

5.21   In Holland and the US home based support programmes are used extensively and include visits by family support workers to the family at least once a week for up to a year and working with the family as a whole rather than with parents or children alone. Methods used include use of video training, beahvioural therapy as well as practical assistance with everyday problems.

5.22   However, these programmes although effective have limitations and tends to be less effective under at least three circumstances:

- Older children, especially adolescents, show less positive results
- Where children have severe psychosocial problems
- With parents of younger children who are unwilling to co-operate.

(c)   Child Development and Education Interventions

5.23   Child development and education interventions such as crèches, after-schools clubs, nurseries, playgroups, pre-schools, homework club, home school liaison. The specific focus of these services is the child, but parents, schools and the community are also likely to be involved. Co-ordination of these services across specific areas of the City will be important in order to avoid duplication and to enhance efficiency.

5.24   Head Start and High Scope are good examples of these programmes from the United States. Many of the developments within Sure Start mirror the intervention programmes used in these examples. Any programme developed will need to target the child's social interaction skills.

(d) Work with Adolescents

5.25 This refers to a broad range of out of school interventions such as sport, recreation, leisure, education and personal development for adolescents aiming to improve personal and social development and ensure a successful transition to adult life.

5.26 Approaches to developing these services should be linked to the Youth Service strategy and should include:

- Activity-centred services such as youth clubs, scouts and guides etc
- Information, advice and counselling services
- Employment and training services
- Direct behavioural work including contracting between young person/ parents/carers
- Youth projects in neighbourhoods

5.27 Obviously key linkages need to be developed in order to target
young people who are at risk of harm to themselves and others, through leaving school early, offending behaviour and substance misuse. An approach which works in partnership with the Connexions service and Youth offending Team will contribute to the success of these programmes.

(e) Community Development

5.28 This involves building communities through working with groups and organisations to develop collective strategies on common issues such as housing, environment and local services. Within the context of family support, community development addresses the contextual factors that impinge on, and often exacerbate, the problems of vulnerable families. As such, its focus of action is strengths and weaknesses within the community rather than the family.

Community development is characterised by being:

- Collective
- Participatory
- Empowering
- Concerned with process as well as task
- New and creative approaches
- Confronts prejudice.

6. Stakeholder Views

Service Users

6.1 Parents were consulted with regard to their views by means of a structured interview, designed around the three issues. Because family centre users constitute the majority of service users, the majority of our sample were family centre users, so it is not surprising that they tended to stress the importance of early years. Many respondents did, however, also acknowledge that there were insufficient resources for older children,

and most felt that both early intervention and crisis response were necessary. The most frequently voiced comment, predictably, was that all the services were necessary and there should be more of everything instead of considering service reductions. It was interesting to note that about one third of respondents were of the opinion that community or voluntary provision had advantages over statutory services. We know that a third of our respondents were from ethnic minority backgrounds, but because of anonymity we do not know whether these were the respondents who were most positive about externalising the service. Given the points made in paragraph 4.2 ,this is a significant point.

Commissioning social workers

6.2　　Social workers were asked to identify whether they considered that there were too many, not enough, or the right level or scope of services. The only two areas where an over-supply was generally acknowledged were in the provision of day care and play provision. They felt the need for new services to be developed, such as assessment support, preventative services and intensive intervention.　Social workers in general doubted that community and voluntary provision would be able to meet the needs that they identified, and seemed to have a greater degree of faith in the Department's internal resources to provide a service at the required level. This shows the importance, if out-sourcing or strategic alliances are to be considered, of robust procurement and contract-compliance systems.

7.　　Proposed Model for Strategic Positioning

7.1　　The new Children in Need Assessment Framework is based on a model of different levels of need, and it is proposed that a similar model is adopted by the Council to describe the point at which the Department should intervene directly. These different levels are illustrated diagrammatically at Appendix A.

7.2　　Members will be familiar with the concept of "vulnerable" children, which has been used to develop the scope for the Best Value review of children's services. The Department of Health describes a group of children, approximately one third of the total child population, who are "vulnerable" to social exclusion and need targeted services in addition to the universal services available to all children. Examples of these targeted services are speech and language therapy, Home Start, Child Behaviour Intervention Initiative, play schemes, and Sure Start programmes. The service provided by Family Centres to many children (particularly the day care component) can also be described as a targeted service to vulnerable children. The Best Value review of services for vulnerable children actively considered the issues relating to services to this group in order to improve life chances, promote independence and revitalise neighbourhoods. It is therefore critical that the review of Children and Family Resources is integrated into the Best Value outcomes and recommendations.　This concluded that there was a need to integrate services for vulnerable children and children in need, respond more effectively to community accessibility and provide a broader range of services.

7.3　　It is also important to develop services that integrate with other universal services, such as schools, to ensure improved engagement and reductions in non attendance and exclusion.　The Education Department is a key partner in creating integrated family support services to socially excluded families

7.4 Within the vulnerable group, there is a smaller group of children who are "In Need". This includes children who are in need of protection. The Department of Health considers that approximately 3% of the total population falls into this category (in Leicester, this would mean around 2,500 children). Children In Need require more specialist services under Section 17 of the Children Act 1989. These include current Social Services provision such as the Family Aides, Intensive Support Team and the parenting training, assessments and monitoring work conducted in Family Centres. It would also include the type of services our social workers are requesting, but which cannot currently be provided. This also requires a reconfiguration of services other than Family Centres to ensure the necessary integration. A very small sub-set of children in need are children whose health and developmental outcomes are so poor while they remain at home that they have to become "looked after". This group is less than 1% of the total child population.

7.5 It is suggested that the majority of the Department's services should concentrate on providing an integrated service which co-ordinates and enhances services across the Vulnerable Children/Children In Need continuum. Through intensive intervention targeted towards children in need it should be possible to develop interdependence so that they can function adequately with only the ongoing support of targeted local servicesfor vulnerable children. At the same time we should work with children who are looked after so that they can safely and appropriately be returned home with the help of our specialist services. In addition, by enhancing services to vulnerable children it is likely that many will be prevented from becoming "in need". If Members agree this reconfiguration of services, it will then be necessary to start to re-align our resources in order to develop the services required to achieve it.

8. The Community Family Support Partnership

8.1 The Council has committed itself in the Community Plan to increasing investment in services for Children in Need. However, the reality is that the Department cannot increase the proportion of its resources expended on this group unless we reconfigure our expenditure on services for vulnerable children. This would mean reducing the amount of day care provided in Family Centres in order to free up resources to provide more services for children in greatest need and to enable more appropriate services to be provided to vulnerable children using Sure Start models and Neighbourhood Nurseries. It would also mean redressing the balance between under fives and older children, thus developing some resource centres that really do help the whole family.

8.2 However, it would not wish to reduce the overall service for vulnerable children. It is important to recognise that if vulnerable children do not receive the targeted services that they require, they will become children in need. Nevertheless, they do not have to receive these services in full from the Social Services Department. In fact, it is often better if they receive them from local community organisations, voluntary projects and multi-agency initiatives. It is argued, therefore, that the role of the Department in relation to vulnerable children should be to enable and to support a community family support partnership rather than to directly provide all services. This is envisaged as a network of family support services provided across the city by a range of partners, with a neighbourhood focus and an emphasis on the involvement of local people in planning, managing and delivering the services. The Department's contribution to this partnership

would be a significant one, and will include passing some services to local neighbourhood management, procuring services on a contractual basis, seconding staff, pooling budgets or contributing to a "mixed economy". This model has an important role to play in local regeneration and to revitalising neighbourhoods. The partnership should be underpinned through co-ordinating City Council Services, currently delivered by the Social Services, Education and Housing Departments to ensure integration, common purpose and agreed outcomes. However, it is not envisaged that these centres would be managed through the proposed local fora, arising from the Revitalising Neighbourhoods initiatives.

8.3   Under the development of the "Mainstreaming Sure Start" initiative, two existing family centre buildings will become local ***community family resource centres:*** one stop shops in which would be based a variety of preventive services, similar to a Sure Start center, but catering for a wider age range. These centres could well continue to provide some day care if this was a local requirement, or staff could act on an outreach basis to help to develop more local playgroups. The centres would provide groups and activities, advice, practical support, and develop home based support services. It is considered that there is potential for attracting external funding to support developments of this kind. It is intended that these centres develop in partnership with multi-agency Teams and will work closely with Health Visitors, Community Midwives, pre-school teachers and Speech and Language Therapist. These centres will form the basis of a multi-disciplinary approach to family support detailed within the earlier framework. It is proposed that by bringing a range of professional such as social care, health and education work together to provide a network of centrte and community based services improvements in health, social and educational outcomes can be achieved.

8.4   Detailed negotiations with statutory and voluntary partners are currently taking place to ensure the commitment of resources to working in this way. Resources committed in this way have provided the opportunity to lever in additional funding from various sources, many of which could not be accessed by the Department working in isolation. Opportunities may also be available via the Children's Fund, Neighbourhood Nurseries Initiative and Neighbourhood Renewal to fund new services. Locally provided services would also be more cost-effective; for example, day care in a pre-school playgroup costs less than transporting a child several miles to an expensively staffed and equipped centre. Thus it is considered that vulnerable children could be better served within their own communities, and that this would release resources that could be invested in services targeted towards Children In Need services within the community.

8.5   It is considered that working with Children In Need is the Social Services Department's core business. While this too should be carried out in partnership with other agencies and with the communities in which they live. The service does need to change and it may be that other providers could deliver better quality more efficiently. It is recommended that Children and Family Resources should provide focussed work with children in need and that additional resources should be invested, as they are freed up from providing day care. The section must also develop further provision for older children and develop an integrated service for vulnerable children. In order to increase responsiveness towards the needs of families in particular areas it is proposed to develop a more locally focused service in each of the three child care "cluster" areas.

8.6   The third aspect of the proposed Family Support partnership would consist of the **very**

specialist services that are needed for children with very complex needs. Examples of these services are a **contact service**, a **disabled children's resource service**, **a young peoples centre, or a residential assessment centre for parents and young children**. The Department spends large amounts of money on providing services such as these and it is considered that specialist in-house resources could not only save money but would provide better outcomes for children and young people. The opportunities created by reducing direct provision such as day care for vulnerable children would allow us to develop or commission such specialist resources. The development of specialist services would take time and would only be taken forward after a comprehensive exercise to quantify the needs of, and required outcomes for, Leicester's children. It is considered that there is likely to be considerable interest from the voluntary sector in providing these specialist services and that a market-testing exercise will be required in due course.

9. Service Design

9.1   It is proposed that a service design for providing a comprehensive and integrated family support service is approved by Members.   Detailed implementation plans will be developed to ensure effective delivery.

"Mainstreaming Sure Start" Centres

9.2   As indicated in section 8.0 the City has been successful in obtaining mainstreaming Sure Start funding. This funding is available to broaden the coverage of Sure Start methodologies and practice and to facilitate the development of new services. This project will receive £190k from the Sure Start Unit in 2002 / 03 and £199k in 2003 / 04, to assist in its development.

9.3   It is proposed that two of the City Council's Family Centres (Bishopdale Family Centre in Beaumont Leys and Belgrave Family Centre in Belgrave) develop to become resource centres based on the Sure Start model. These will offer a range of targeted services such as speech and language therapy, parental education and support programmes, home based support programmes and closer working with Health Visitors and Community Midwives. The centres will develop a multi-disciplinary model of delivery and will work alongside colleagues in Health and Education.

9.4   These centres will work towards linking with the Neighbourhood Nurseries Initiative, where appropriate, to stimulate the development of high quality day care provision across the City.

9.5   The arrangements for each of these centres differs, largely due to the differences in services currently available in the respective areas.

9.6   In the case of **Bishopdale Family Centre**, there is already an existing Sure Start Programme in Beaumont Leys. It is therefore proposed that these two services work in partnership to deliver both services for vulnerable children and children in need across the whole Beaumont Leys area.

9.7   There are currently no existing Sure Start Programmes in the Belgrave area of the City. It is therefore proposed that the **Belgrave Family Centre** move towards a traditional

sure Start Centre model. However, the proximity of the St Matthews Sure Start Programme provides the opportunity to form a continuum of services from the Belgrave area to St Matthews. Close co-operation with the existing Sure Start Programme will be necessary in order to develop this continuum.

9.8   Finally, enhanced community involvement is critical to the effectiveness of this development and, as a result, it is expected that these centres will be developed alongside the "Revitalising Neighbourhoods" initiative and will explore partnerships or strategic alliances for delivery.

Community Family Centres

9.9   It is proposed that a number existing Family Centres are reconfigured into Community Family Centres. These Centres will link with the current three Child Care Team clusters for children in need services, but will also develop preventative services for vulnerable children.

9.10   However, although some targeted day care may be provided it is envisaged that these Centres will respond more appropriately to the Children in Need Assessment Framework, provide targeted preventative interventions with individual and groups of children and work with the family.

9.11   In responding to this development, it will be necessary to reconfigure a range of family support services such as specialist childminding, family aides, domicilary care and the Intensive Support Team to provide an integrated response to referrals and enhance the impact of time limited family support packages. This would involve providing some services to an extended age range, for example 0 – 13 years.

9.12   The arrangements for each of these centres differs due to the local landscape of buildings and existing or developing services.

9.13   **St Peters Family Centre** is situated in the Highfields area of the City. A large Sure Start Programme is being developed in this area and it is important for the Council's family support development to compliment and enhance this initiative whilst ensuring the provision of children in need services remain in place. At the end of the period of Sure Start the building will be returned to the City Council.

9.14   It is proposed that the St Peters Centre becomes the main Sure Start Centre for the Highfields area. This will involve a significant capital investment by Sure Start on the building and the site and will greatly enhance the availability and range of provision. The Council will aim to lease the building to the accountable body of Sure Start Highfields and have a service level agreement with Sure Start Highfields for the provision of a range of children in need services. Negotiations will need to take place to ensure that current staff are deployed either within the new service or to provide community based service in the Highfields area.

9.15   As part of this proposal it is intended to develop a community family support team to enhance services to families by providing home and community based support.

9.16   **Jubilee Family Centre** is situated in the Braunstone area of the City. A large Sure Start

Programme is being developed in the area and as in the case of Highfields it is important for council services to enhance and compliment whilst maintaining children in need services.

9.17 It is proposed that the Jubilee Family Centre becomes the main Sure Start Centre for the Braunstone area. Again like in the case of St Peters this will involve a significant capital investment in the building and the site. The Council will aim to lease the building to the accountable body of Sure Start Braustone and have a service level agreement with Sure Start Braustone for the provision of a range of children in need services. AT the end of the period of Sure Start the building will be returned to the City Council.

9.18 Negotiations will need to take place to ensure current staff are deployed either within the new service or to provide community based services in the Braunstone area.

9.19 The **Charnwood Family Centre** is well placed to provide services across the Humberstone and Northfields area of the City. It is proposed the Charnwood Centre focuses on providing services for children assessed as being in need, however, given its position and distance from some of its catchment area, it will need to develop a range of homebased and community based support and education programmes.

9.20 The LIFT project is current exploring the Charnwood site for the development of an intergrated Health and Social Care Centre. In this event the Family Centre will form part of this proposal with the provision of a new family Centre with some satellite facilities in the Hamilton area being included in the proposals.

"Specialist Services"

9.21 As described in paragraph 8.6, it is proposed that three Centres are targeted to provide specialist services where appropriate, in particular with other agencies.

9.22 It is proposed that the **St Andrew's Centre** becomes the base for a **comprehensive contact and assessment service**. This would respond to the high demand for contact but would develop a high quality assessment service alongside this provision in order to respond to care proceedings. In addition, the service would coordinate transport arrangements, organise venues and offer supervising officers. This service will be developed to contribute to complex packages of care or prevention.

9.23 It is proposed that **Mayfield Family Centre is developed to respond to the particular needs of disabled children**. This will not result in all disabled children attending this Centre but that it will act as a resource and workbase for specialist workers working in the community. In addition it will work to provide a venue for group work and some direct work with children and parents. The Centre will also provide advice and support to providers across the Centre but will work towards a one stop shop approach.

9.24 It is proposed that **St Christopher's and Johnson Family Centres are specifically developed to respond to children aged 13+ alongside children in need services.** Using the Resource Centre model they will act as a workbase for the development of multi-disciplinary teams and work to support young people in the community and, where appropriate, their own homes. This Centres will coordinate and provide targeted and intensive responses to young people at risk of being looked after or to support them in

the community post care.

Additional Developments

9.25   The reconfiguration of services allows for the development of integrated multi-disciplinary teams, providing a range of services such as family therapy, speech and language therapy, special needs pre-school teaching and targeted community development. This broadens the scope of current services and allows for integrated assessment and delivery to take place.

9.26   The two PCTs are currently redesigning primary care services such as health visiting to work collaboratively with this development.

10.   The way forward

10.1   If Members agree to the proposed reconfiguration and the vision for the future, the next step will be to commence the implementation process. This will include service users, staff, Trades Unions and other agencies, both statutory and voluntary. Particular attention will be paid to the need to make the implementation process understandable and accessible to Black and Ethnic Minority service users and a range of methods will be used to ensure full participation.

10.2   An implementation plan is being developed to ensure effective management of this reconfiguration. This will include update reports for Members. This implementation plan will also distinguish between the steps that can be taken immediately and detail milestones for action.

11.   Consultation

11.1   Initial consultation with service users and staff has been undertaken as outlined in paragraph 6. Preliminary discussions have taken place with voluntary agencies and with partner agencies through the Leicester Children's Planning Partnership.

12.   Conclusions

12.1   These proposals aim to provide a coordinated response to modernising the provision of support to families in crisis, children in need and vulnerable children. In addition, it aims to provide services which will strengthen families and prevent children from entering the care system by ultimately providing support to families which is focused on helping them to solve their problems.

12.2   The service must begin to respond to achieving social inclusion for the City's most excluded and isolated children and families and be re-designed to minimise barriers to participation.

12.3   This reconfiguration positions the service to make a contribution to the planning and delivery of a community wide range of services and aims to underpin a partnership approach to the provision of service which involves children, young people and their parents and carers.

12.4 Ultimately, this reconfiguration aims to improve outcomes for children. Key measures for this will be:

- proportion of looked after children with three or more placement moves;
- reduction in numbers of looked after children;
- reduction of children re-registered on the Child Protection Register
- reduction in length of time on the Child Protection Register

13. Financial and Legal Implications

13.1 The implementation of the proposals would imply the realignment of existing resources. Members will also be aware that savings are required from the section of £495,000 in 2002/03 as part of the Departmental Revenue Strategy. The proposals outlined here would allow the improvement in provision of services for vulnerable children and children in need whilst achieving those savings.

14. Other Implications

		Paragraph refers
Equal Opportunities	**yes**	**4.2, 6.1**
Policy	**yes**	**total report**
Sustainability and Regeneration	**yes**	**8.2**
Crime and Disorder	**no**	
Human Rights Act	**No direct implications**	
Eldery/people on low income	**no**	

15. Background papers

None specifically.

16. Consultations

The review itself involved wide consultation with staff, Trade Unions and service users.

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