



NSPCC 
**Dim mwy o greulondeb i blant. DIM.
Cruelty to children must stop. FULL STOP.**

**NSPCC CYMRU/WALES
RESPONSE TO:**

**Consultation on Stronger Families: Supporting
Vulnerable Children and Families through a
new approach to Integrated Family Support
Services**

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NSPCC Cymru/Wales welcomes the opportunity to respond to this consultation on development of Integrated Family Support Services

The NSPCC's purpose is to end cruelty to children. Our vision is of a society where all children are loved, valued and able to fulfil their potential.

We seek to achieve cultural, social and political change – influencing legislation, policy, practice, attitudes and behaviours for the benefit of children and young people. This is achieved through a combination of service provision, lobbying, campaigning and public education.

Do you agree with the proposed categories for the IFSS support, that is parental substance misuse, mental health problems, learning disabilities and domestic abuse?

NSPCC Cymru/Wales welcomes the development of this proposal and the recognition of the need to target vulnerable families to prevent problems escalating and the risks to children and young people increasing. The proposed categories would undoubtedly benefit from an early and sustained intervention. It is also important to note the issue raised in the consultation document that these are areas where often the needs of the adult have been primary, with the needs of the child often lost. It is vital that the IFSS ensures that there is a continued focus on the child and we further welcome the very clear statement that the safety of the child or young person should be paramount in any intervention. NSPCC Cymru/Wales would be particularly concerned around the issue of domestic abuse and the need to make absolutely certain that the IFSS was not supporting the continued presence of an abusive partner in the home.

We believe that whilst the initial pilots are with families where substance misuse is the “primary” issue this does not automatically lead to interventions successful with them being appropriate for the other three categories. We would recommend the Welsh Assembly Government focus delivering pilots in each of the four categories, this would ensure that the model has been tested across these groups and any alterations to how the service would be delivered could be made before mainstreaming. We would be concerned that a successful piloting with substance misuse might lead to the whole programme being rolled out and teething problems with the other categories leading to compromised service delivery. Providing pilots across all the categories could also help to develop evaluation for programmes for working with the families identified.

Do you agree with the principles of the IFSS teams as agents of change to bridge child and adult services and agencies to focus on families and across agencies?

NSPCC Cymru/Wales welcomes the Welsh Assembly Government's recognition of the need to work across agencies when working with vulnerable families and that it is seeking to use the new powers to strengthen statutory duties to do this.

The “agent of change” agenda also needs to take into account the relationship statutory bodies have with the voluntary sector. We are concerned that this consultation provides very few details on the way in which the voluntary sector will work with the proposed IFSS. It should be acknowledged that the programmes delivered to these groups of families are often being led by the voluntary sector. There is also no discussion in the document around referral routes into the IFSS from the voluntary sector and also how the IFSS will refer out to specialist providers. The later point is of particular concern as we have encountered in some areas of Wales a reluctance from CAMHS to refer out, which has a similar multi-agency approach underpinning it. NSPCC Cymru/Wales recommends that further work is undertaken to ensure that the programmes and work that the voluntary sector undertakes is acknowledged in the future developments of the IFSS.

Do you agree that the IFSS should primarily operate at tiers three and four?

We agree that Tier 3 is certainly appropriate for the majority of the cases the IFSS would deal with, and understand from the consultation that the work in Tier 4 would mainly be linked with children and young people returning to the family after a period in foster care. We strongly

believe that there could be a role throughout all four tiers when the service is fully running, including providing advice and support to practitioners under tier one, who are often at the front line of first recognising problems. This support could be training and awareness raising, or providing advice and consultation to professionals. We believe there is a very strong case for this type of service extending into Tier 2, in order to address problems at the earliest possible stage. Our concern would be that by Tier 3 problems have escalated to such an extent whereby a more significant intervention is needed and also it may be that a child or young person is at considerable risk.

Also by indicating that this service will primarily operate at those specified tiers there is the risk that the “silo” approach that the IFSS is being developed to discourage could reappear between the tiers. NSPCC Cymru/Wales strongly urges the Welsh Assembly Government to re-consider the statement that the delivery will be primarily in Tier 3 and 4 by stating clearly the benefits and support that the IFSS can give to practitioners and professionals throughout the tiers.

Do you agree that the NHS should have a duty to jointly provide the IFSS with local authorities? Are there other partners that should or could be included?

NSPCC Cymru/Wales welcomes and supports the proposal to establish this statutory duty to strengthen and provide increased focus to agencies working together to provide support and interventions to particular families. We remain concerned about the ability of Child and Adolescent Mental Health (CAMHS) to respond to the potential needs of children and young people who are identified via the IFSS. There needs to be an acknowledgement within this proposal the impact that the IFSS will have on other services, particularly CAMHS which is already under significant pressure and in some areas operating high thresholds.

In terms of other partner agencies we believe that there should be explicit reference to the voluntary sector as frequently the provider of innovative interventions for families experiencing these difficulties. We again express our disappointment at the lack of reference to the role of the voluntary sector in the establishment of the IFSS and the lack of clarity over the way in which the voluntary sector will refer to and receive referrals from the service. NSPCC Cymru/Wales recommends that representatives from the voluntary sector, where a relevant service is provided, should be included in the list of partner agencies.

NSPCC Cymru/Wales would also recommend that the Welsh Assembly Government explores extending this duty to the police, probation services and youth offending teams, potentially under their duty to safeguard and promote the welfare under the Children Act 2004. This is particularly in light of the proposed category around domestic abuse, where these agencies may have key information relating to the safety of a child or family. This would also provide a further safety net for any child or young person within the family.

There is no mention in this proposal of the role of joint commissioning, which has been encouraged by the Welsh Assembly Government as part of its response to the Beecham Review. Alongside the recent announcement around the proposed reorganisation of health structures, there needs to be a clear lead as to whether authorities can look to pool funds in order to deliver this type of service across boundaries.

Do you agree that the accountability for IFSS should lie with the Director of Social Services?

NSPCC Cymru/Wales believes that this would be appropriate and would help to ensure that the IFSS does not develop a more medical approach to welfare, which has been an issue previously raised about the provision of CAMHS in Wales. We would welcome further information around what the expanded duties on the NHS lead officer would be and how the professional accountability would work within the service.

Do you agree that the initial priority should be with children whose families have substance misuse problems?

The issue of substance misuse is certainly of concern and the consultation document makes a viable case for prioritising this area.

Last year approximately 2400 children and young people across the UK contacted ChildLine, a service provided by NSPCC, to primarily talk about substance misuse, with many others mentioning it as a secondary factor to the issue they had phoned about. This included parents who were misusing substances as well as children and young people who were themselves involved with misusing substances. The provision of substance misuse services have often been very adult focussed with the needs of children and young people being lost. We welcome the proposal to develop the IFSS and would urge the Welsh Assembly Government to ensure that systems are put in place to keep the focus on the welfare and safeguarding needs of children and young people, who frequently are lost in the process when the adults who are caring for them have complex needs themselves.

With all four of the categories there is no neat delineation between them and, as the consultation document rightly acknowledges, families in these situations often have complex and overlapping problems. Particular attention should be paid to the link between substance misuse, parental mental health and domestic abuse. We would draw attention to the recommendation made previously in this response that we feel it would be preferable to pilot in each of the category areas, to ensure that there is learning around what professionals and interventions are needed.

Do you agree with the categories and circumstances in which children and families may be eligible for an IFSS? What other circumstances do you feel would benefit from targeted IFSS?

Broadly these criteria would appear to cover many of the children and young people in vulnerable situations. Further to this NSPCC Cymru/Wales believes that the Welsh Assembly Government along with partner agencies needs urgently to look at those children and young people who might be on the outer reaches of contact with statutory services, who maybe are not currently meeting the threshold for an intervention from social services, but who have difficulties in the family that may deteriorate quickly. Currently the children and young people identified in the consultation document are already in receipt of some intervention from statutory services. If the IFSS is going to be a model for prevention then there needs to be a rethink over how it will intervene earlier, not just with known families, but also with those on the fringes of statutory interventions. NSPCC Cymru/Wales recommends that more work is undertaken to ensure that the IFSS does not only provide support to families who are in crisis, but also seeks to engage and provide support to those families who are displaying behaviours that may suggest future crisis or risks to children and young people.

Do you agree that the strategies for intervention should be subject to systems of approval at a local and national level?

NSPCC Cymru/Wales welcomes the approach of the Welsh Assembly Government to ensuring that interventions with families in these categories should be well evidenced, based on outcomes and fully evaluated. All agencies want to ensure that interventions are successful and produce better outcomes for children and young people, so we would be supportive of systems of "approved" interventions.

Whilst we would be supportive of this development we would recommend that the Welsh Assembly Government ensures that the process of evaluation and "approval" is open and transparent so that there are a range of programmes for practitioners to choose from. We would strongly recommend that the Welsh Assembly Government lays out a clear pathway for getting programmes evaluated and recognised both locally and nationally. This should be supported by a dedicated fund for agencies to apply to in order to access evaluation for a programme. This is particularly important in relation to smaller charities and voluntary sector providers where all funding may be taken up delivering the programme and there would be

little left for evaluation. The consultation document also needs to recognise, again, the role that the voluntary sector plays in innovating and developing new programmes, including accessing and adapting interventions from across the world to meet the needs of vulnerable families in Wales.

The system of “approval” needs to ensure that innovation is not stifled, leading to practitioners simply using the same approaches when it may be that research and practice has moved on and there are new interventions available. The “approved” list held by WAG should also be regularly reviewed to ensure that it is up to date with what is best practice and that those interventions listed have been regularly evaluated to ensure that they are continuing to provide improved outcomes for children, young people and their families. Unless these systems and alterations are acknowledged we would question whether the practitioners within the IFSS would be able to fulfil their function to provide up to date training and advice to other professionals across agencies.

NSPCC Cymru/Wales would recommend that the Welsh Assembly Government, along with local partners, ensures that the process for being placed on the “approved list” is open and transparent; that there is a development fund available for smaller agencies to have their programmes evaluated; and that the list itself is regularly reviewed to ensure that interventions continue to provide improved outcomes for children and young people.

Should we require services for adults to review eligibility criteria for services to reflect the priority given to supporting families?

Should we make requirements about eligibility or leave these to local agreements?

NSPCC Cymru/Wales believes that it would be a valuable exercise to review adult services eligibility criteria, particularly as one of the “common pitfalls” highlighted earlier in this document associated with this work is that the needs of the adult are prioritised over the needs of the child. It may also be that thresholds for intervention with adults are different. There may also be the need for training for professionals working in services that have primarily working with adults to enhance their awareness of the impact of particular problems on children and young people and their responsibilities in relation to safeguarding and child protection.

Further to ensuring that the thresholds for intervention in adult services are appropriate there may also be the need to look at thresholds in other services that may be referred to, such as CAMHS, to ensure that children and young people experiencing problems can access services locally.

NSPCC Cymru/Wales would recommend that there is some standardisation around eligibility initially in the pilots and then to be rolled out across Wales. We are aware of the potential for different thresholds to develop, which would mean different families being able to access services in different authorities. With a standardised threshold the funding impact of IFSS could also be calculated more clearly and before piloting a needs assessment should be developed to be able to look at the resource impact of the service. There also needs to be a clear focus on the outcomes an intervention provides as well as the cost. Interventions with families experiencing multiple difficulties can often be resource heavy, both in terms of finance and professional hours, but this should not be a factor in the decision to choose a particular intervention. The “best value for the Welsh pound” is the intervention that provides the best outcomes not necessarily the cheapest option. This is why it is vital to get the funding levels right for each area before the roll out.

How can we ensure that existing systems for disseminating knowledge are used more effectively?

NSPCC Cymru/Wales would be supportive of the concept of the “knowledge bank” and would like further information as to whether this would just include interventions from Wales or would maybe have a more global reach, which could encourage practitioners to look at different methods of intervening with families. The success of such an idea would be in how it would

be promoted with professionals and whether professionals would have the time to access such information regularly. The pressure on frontline social work teams has been well documented and it may be that whilst many would like to access this type of development, time pressures would not necessarily allow them.

Do you agree that a National Centre of Excellence is needed?

NSPCC Cymru/Wales believes that we would need more information about how the Centre would work and how it would be made accessible before we would feel able to comment on whether it would be a worthwhile use of resources.

Are the areas of expertise identified for consideration the appropriate core support service?

The list seems comprehensive although we would question why there is not a professional from adult social services included, when some of the adults the IFSS would be dealing with could be vulnerable themselves and have a social worker. Also we would want clarification over who would provide the therapeutic input, if needed, to children and young people from within this list. Often children and young people in these situations do need support and an intervention themselves to overcome their experiences. At present we would question where that intervention would be coming from.

As outlined earlier we believe that added to this list should be representatives of the voluntary sector as relevant, in order to acknowledge the wealth of knowledge and skills outside of statutory agencies.

The major issue with the whole development of the IFSS is where will these “experienced” professionals come from? The recruitment and retention issues in relation to children’s social services are well established, as is the issue with the lack of experienced social workers. We acknowledge that the proposed career pathway may encourage some to remain in frontline practice, but we would also be concerned that it would lead to practitioner’s currently providing front line child protection interventions moving over to providing this more preventative service. There needs to be a balance between prevention and protection and we question whether that has been properly explored in this proposal. If mental health/CAMHS social workers are going to be part of this team, how are they also going to be able to provide vital support and advice to practitioners who are working with children, young people and families outside of the proposed categories? NSPCC Cymru/Wales welcomes the focus on preventing families reaching a crisis point, but would want to strike a note of caution that this does not drain resources and practitioners from other areas of child protection work.

Are the proposed developments in the social work role and related supports considered appropriate to strengthen the social work role to support children and families?

NSPCC Cymru/Wales believes this to be a positive development and, concerns addressed in the paragraph above notwithstanding, hopes that this will encourage more experienced social workers to continue to practice directly with children, young people and families.

What are your views on the proposed Career Structure provided at Annex 1?

Are there any other models that could be considered?

NSPCC Cymru/Wales does not have any comment on these particular questions and proposals.

Do you agree that the IFSS should be inspected as part of the multi-disciplinary framework rather than a separate function of local authority social services?

NSPCC Cymru/Wales believes that it would be sensible as a multi-agency body for IFSS to be inspected as part of a multi-agency framework across inspectorates

Do you agree with the proposal for a new provision to vary/impose conditions by urgent notice?

Do you agree with the proposal for a new power to impose a penalty notice (fines) where a person has committed an offence under the Children Act 1989?

Do you agree with the proposal for an extension to the time limit in section 79X of the Children Act 1989 in which criminal proceedings must be brought from 6 months to 12 months?

Will the proposal to link commencement and completion of post qualifying training at specified levels for specific posts strengthen children's social work?

NSPCC Cymru/Wales would support any measures that strengthen the regulatory framework relating to improving the protection of children and young people in daycare and childminding settings.

Conclusion

Broadly NSPCC Cymru/Wales welcomes the proposals to develop these new duties, although we believe that further thought urgently needs to be given to acknowledging the important role that the voluntary sector plays in delivering direct services and in developing innovative responses to families in the four categories outlined. We hope that our concerns and recommendations are taken on board by the Welsh Assembly Government and we would be happy to discuss further any aspect of this response.

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