

## Children's Improvement Board Case Study - Bradford Metropolitan Borough Council

August 2012

### 1.1 Summary

- **What they are doing:** Bradford Services to Children & Young People has re-configured its Children's Social Care Duty & Assessment Service to include professionals outside of social care, which enables more efficient and robust triage into the assessment route, so that the most appropriate cases are progressed to an Initial or Section 47 assessment.
- **How they are doing it:** The new multi-agency screening team includes professionals from the Police, Health Visiting and Education, each with direct access to their own databases and IT systems to enable swift cross-checking and sharing of intelligence regarding incoming referrals. In addition, the team also provides an informal consultation service to potential referrers to enable them to discuss any concerns regarding children or families they work with.
- **Main benefits and outcomes:** The Authority has recorded a reduction in the referral and re-referral rate, reflecting more appropriate and robust assessments, and fewer cases being directed into Section 47 assessments. The social work time saved from this reduction in volume of referrals is being reinvested into improving the quality of assessments. In addition, wider children's services professionals have an opportunity to discuss any concerns with the team, strengthening confidence in the CAF and ensuring that referrals that do come in are appropriate and evidenced. The team also uses this opportunity to share knowledge of wider networks and universal services (other than statutory social care) which may be useful.

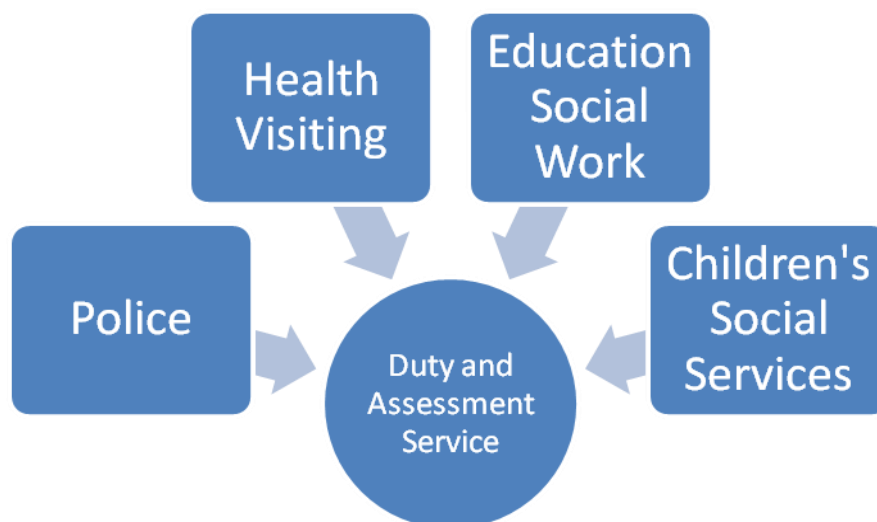
### 1.2 How it works

Bradford Metropolitan District Council has redesigned its Children's Social Care Duty and Assessment Service to include a wider breadth of professionals than just social workers. As well as social work professionals, the new team comprises 3 new partners, one each from:

- Police
- Health Visiting
- Education Social Work

Each of these professionals has access to their own professional IT systems and organisational databases, enabling them to cross-reference appropriate incoming

referrals. As well as the key partner agencies, who remain in the Duty team, the social work element of the multi agency screening team is made up a rotating group of qualified Social Workers with a dedicated Team Manager (on rotation from one of the five Assessment Teams). The Duty triage team also has its own administrative and business support.



If an incoming referral is felt to be a Child Protection concern (potentially warranting a section 47 Assessment), then cross-checks with the non-social work partners will be carried out in line with Child Protection legislation, guidance and procedure.

This system ensures a robust and detailed triage system for incoming social care referrals which ensures that only the most appropriate cases are progressed either onto an Initial or a Section 47 Assessment. At this point, the case is passed on to one of the attached Assessment Teams, for the relevant assessment to be completed. In this way, the Duty triage team directs cases into each of the five assessment teams that complete required assessments with children and families and acts as the first stage of screening for incoming referrals.

### 1.2.1 Main benefits

The new team has only been set up since January 2012 but the Authority is already witnessing a reduction in both the referral and re-referral rate. There is also a reduction in the number of cases that are progressing to a full Section 47 (Child Protection) Assessment. These reductions have meant a saving in terms of workloads and represent efficiencies in the way the new team processes referrals. As the overall quantity of referrals and assessments being carried out has decreased, social workers have been enabled to carry out more robust and detailed assessments, in turn improving their quality.

This 'freed-up' resource is also being reinvested into Children in Need cases which require step-down support. Assessment social workers are now spending more time co-ordinating and chairing step-down meetings and getting other agencies working with the child/family in agreement about priorities on the CAF, who is the Lead Professional and how non-statutory intervention will support the service user in the future. In this way, social work professionals are re-investing time into early intervention and the newly configured Service enables assessment social workers to take on a greater brokerage and bridging role, working effectively with other agencies in a preventative way.

Finally, the ability of wider Children's Services professionals (e.g. health visitors, teachers, etc) to consult the Integrated Assessment Team for advice and expertise in relation to any safeguarding concerns, enables the team to share expertise, signpost to alternative provision in the District and to ensure that these professionals have a greater understanding of what constitutes an appropriate and evidenced referral to social care (should they subsequently choose to make one).

#### 1.2.2 Has the project improved outcomes?

In addition to the benefits above, fewer families are unnecessarily experiencing the intrusion and anxiety of undergoing a Section 47 investigation as cases are more effectively being triaged down this route, following multi-agency screening. Formal evaluation of the new team has already commenced and will be gathering data from both families and children in the coming months. However anecdotally, there has been a reduction in the number of complaints from families, and a recent Ofsted inspection also rated the Authority as Outstanding for its partnership working in safeguarding children.

#### 1.2.3 Has the project led to cost-savings?

As stated above, the reduction in referral and re-referral rate, as well as the reduction of cases being taken forward as Section 47 (Child Protection) assessments means a cost saving in terms of social work time and resource. The increased efficiency with which the team is able to respond to referrals also indicates a cost-saving in relation to professional time. This is currently being re-invested in early intervention work, in itself representing longer-term savings over time, by the prevention of crisis and the need for acute services further down the line.

### 1.3 How it was achieved

#### 1.3.1 What was the rationale for the change in service?

Bradford Children & Young People Services remain deeply committed to improving outcomes for children, working more efficiently and effectively and wherever possible, co-locating and integrating key services that provide joined up responses for families.

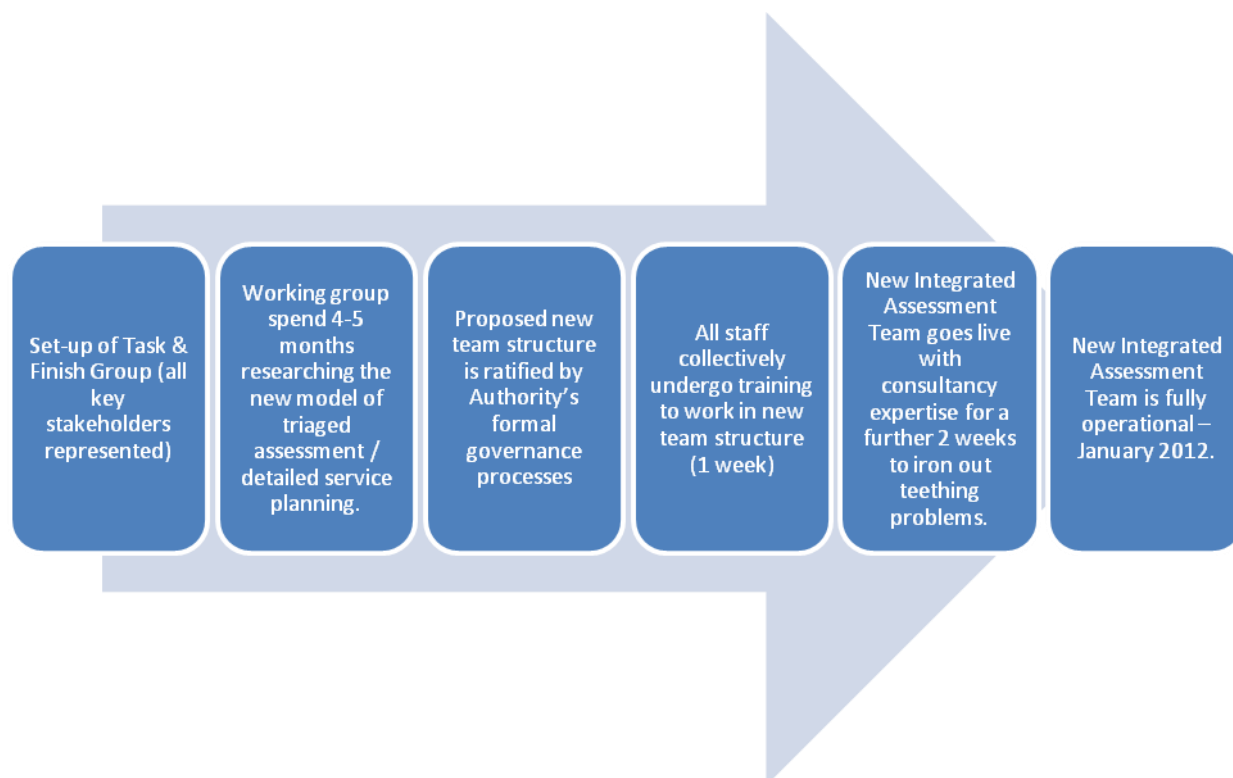
In the wake of national child death inquiries and the increase in referrals to Children's Social Care Services, Bradford participated in a regional research project conducted by Professor David Thorpe, Gary Denman and Suzanne Regan. This Yorkshire and Humber Regional research project was undertaken with an aim of improving child protection and referral and assessment activity.

In light of these local drivers, as well as the Eileen Munro Review, the Authority felt it was the right time to re-assess their model of dealing with referrals and set up a Task and Finish Group, whose role it was to research a new and more effective model of triaging incoming children's social care referrals. The Task Group had representation from the full range of stakeholders who are now involved in delivering the service.

#### 1.3.2 Key steps towards integration?

The steps below outline key milestones for Bradford in setting up the new Integrated Screening and Assessment Team ensuring it was live and operational. The project went

from the set-up of the Task Group to the point at which the team was operational in just over six months.



### 1.3.3 What were the key challenges, and how were they overcome?

The key challenges included:

- **Overcoming professional cultures** and identities in order to work effectively and collaboratively across professional boundaries. Having a working Task Group from the very beginning which represented all the key stakeholders (e.g. Police, Health Visiting, Education, senior management, as well as frontline staff and team managers from social care) has ensured that no stakeholder has felt peripheral to service development, and all have been able to democratically contribute to the process of service design and delivery from the very beginning.
- **Minimising teething problems at the start** by ensuring that appropriate expertise and onsite training was available to guide staff and practically address any operational issues that came up.
- **Re-location to improved accommodation** had the effect of creating greater cohesion and galvanised the team as all staff members started afresh from a new location, reinforcing their identity in working under a new and different service model.

## 1.4 Learning points

Although the service is relatively new, key learning points have included:

- As a newly configured service, it is **an effective model of triaging incoming social care referrals**. The basic design of the team is therefore likely to remain, although with more evaluative evidence, the service is likely to be developed further.
- The objective of **responding proportionately and appropriately to children's needs**, has in turn, improved the quality of assessments overall, reducing the numbers of referrals that result in assessments and improving families' experience of the social care intervention process (as more resource can be directed into good quality assessment and intervention, including greater amounts of preventative work).

## 1.5 Key contact

For further information, please contact Melanie John-Ross, Group Services Manager (Social Work Services) on 01274 437 077 or [melanie.john-ross@bradford.gov.uk](mailto:melanie.john-ross@bradford.gov.uk).