

# Matching Needs and Services

## Learning Development and Support Services Project

An audit of the needs of 197 children in  
touch with Education Welfare Services in  
4 local authority areas

For National Association of Social Workers  
in Education (NASWE)

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*service development: children and families*

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## Summary of findings

- This report describes the findings from an audit of a sample of the files of 197 children in touch with education welfare services in 4 local authority areas: Cumbria, Warwickshire, Bromley and Havering. It includes an analysis of the patterns of need in the sample, information about the services provided to meet those needs and the views of the auditors as to whether services provided were meeting the identified needs.
- The identification of need and judgements about whether needs were being met has been undertaken collectively by a large group of professionals from the Education Welfare Services (EWS) across the four areas, led by r t b. Each authority approached the task in a way that best suited their operational circumstances within a common agreed framework.
- The audit findings provide an agreed picture of the needs of children and families in contact with EWS and will inform and assist discussions around the future development of the Learning Development and Support Services (LDSS) and the service responses that may need to be developed further.
- The results of the audit will also contribute to evidence being compiled by NASWE in relation to the proportion of cases coming to the attention of Education Welfare Services that could be described as complex and challenging and in this way will help with the identification of training and supervision necessary to support staff in addressing those needs.
- Three main clusters of need emerged from the audit. The largest cluster, about parenting, comprises almost a half of the sample (44%). Next came family relationships, comprising a third of the sample (31%), and third are needs about the emotional and mental health needs of parents and children accounting for a quarter of cases (25%).
- A threshold exercise on each case was completed by those doing the audit. This was designed to measure the seriousness of children and family needs. Cases were scored, using an adapted version of the levels of seriousness described in section 17 of the Children Act 1989; as 3 (serious/complex needs), 2 (moderate/additional needs), or 1 (lower level). These three levels of need correspond with the levels of need described in guidance to the Common Assessment Framework (CAF).
- More than a third (37%) of the cases were scored at level 3 (serious/complex needs), indicating them to be children whose development was being affected adversely to a significant extent. This finding confirms the impression of many professionals that education welfare officers are dealing with complex cases.
- Given the seriousness of the needs coming to attention it is impressive to note that 65% of children are having their needs met fully or partially.
- Children whose pressing needs are in relation to their parents' mental health, trauma, much improved care at home and adult/child relationships have the most serious needs and the least successful outcomes. They will need to be the focus of future developments in EWS and more widely across children's services.

- As well as identifying the pressing need for each child, the audit identified that children and their parents are facing a range of difficulties and a range of responses will therefore be needed from across both adult and children's services.
- The range of services and activities undertaken and provided by education welfare officers (EWOs) with and on behalf of children and families is extensive and impressive. In many cases it exceeds traditional expectations of the service as a tier two provider. It may be that services have developed in some areas as a response to need. This is obviously desirable but means that there is currently inconsistency across authorities in the range of services offered.
- A third of children were not seen by auditors as having their needs met. The most frequently expressed reason for not addressing children's needs was lack of involvement by children's social care and failure of parents to engage with services.
- At this stage, there is little evidence of co-ordinated, needs-led, outcome-focused, multi-agency planning or of the involvement of adult services in any of the audit areas. In the main services operate on a single agency basis and do not routinely focus on children's needs or develop plans which contain clear outcomes.
- Focused work to develop services to address the needs that have emerged and to develop multi-agency mechanisms for assessment, planning, and review will need to be central to any future strategy.

# Introduction

The National Association of Social Workers in Education (NASWE) is seeking to understand more about the needs of children coming to the attention of Education Welfare Services (EWS) and related learning development and support services (LDSS) and the ability of staff within these services to address those needs. This project is funded by the Children's Workforce Development Council (CWDC). As part of that project staff and managers from the EWS in four local authority areas (Cumbria, Warwickshire, Havering and Bromley) undertook a Matching Needs and Services audit to gain a picture of the pattern of need coming to the attention of education welfare services in these areas. This report sets out the findings from the four audits.

## The Audit Work

Each area was asked to identify a sample of around 50 children currently receiving services from EWS. Guidance on selecting the sample was sent to each area suggesting a range of methods that would produce a random selection of cases. In Cumbria the audit was part of a wider multi-agency audit of need and the sample was the last 50 cases referred into the service prior to January 2008. In the remaining three areas those taking part in the audit identified up to five children from their current caseload.

The auditors completed a short audit form in relation to each child in their local sample. The audit form is attached at Appendix 1. It asks staff to complete concise details about the child's situation across five dimensions:

- living situation,
- relationships,
- behaviour,
- health, and
- education.

It then requires auditors to make a judgement about what the key circumstances they have identified reveal about the child's needs. It is important at this stage to describe need in elementary and specific terms rather than in relation to a proposed service response. So a child might be described as needing to come to terms with the death of a relative rather than as needing counselling. Auditors were also asked to include the needs of parents or carers, where this was relevant, on the basis that children's needs are very often consequent on the needs of their parents. For example, a child's need to get to school on time may well be dependent on a mother's need to control her alcohol use so that she is able to get up and get the child to school.

Once individual professionals had completed all the forms in their agency sample the information about need was aggregated to identify patterns of need or *need groups*. The aggregation is based around what appears to be the main or most pressing need for the child and/or family. In two areas (Cumbria and Warwickshire) this process of aggregation was carried out by the professionals who had completed the forms and in the remaining two areas (Havering and Bromley) the aggregation process was carried out by the consultants. Similar groupings of need emerged in all four areas.

Thanks are due to the staff involved in the audit. It was a huge organisational task to bring together such a large sample of children from across four local authority areas and this was achieved on top of already demanding workloads.

# General Characteristics of the Children

## The samples

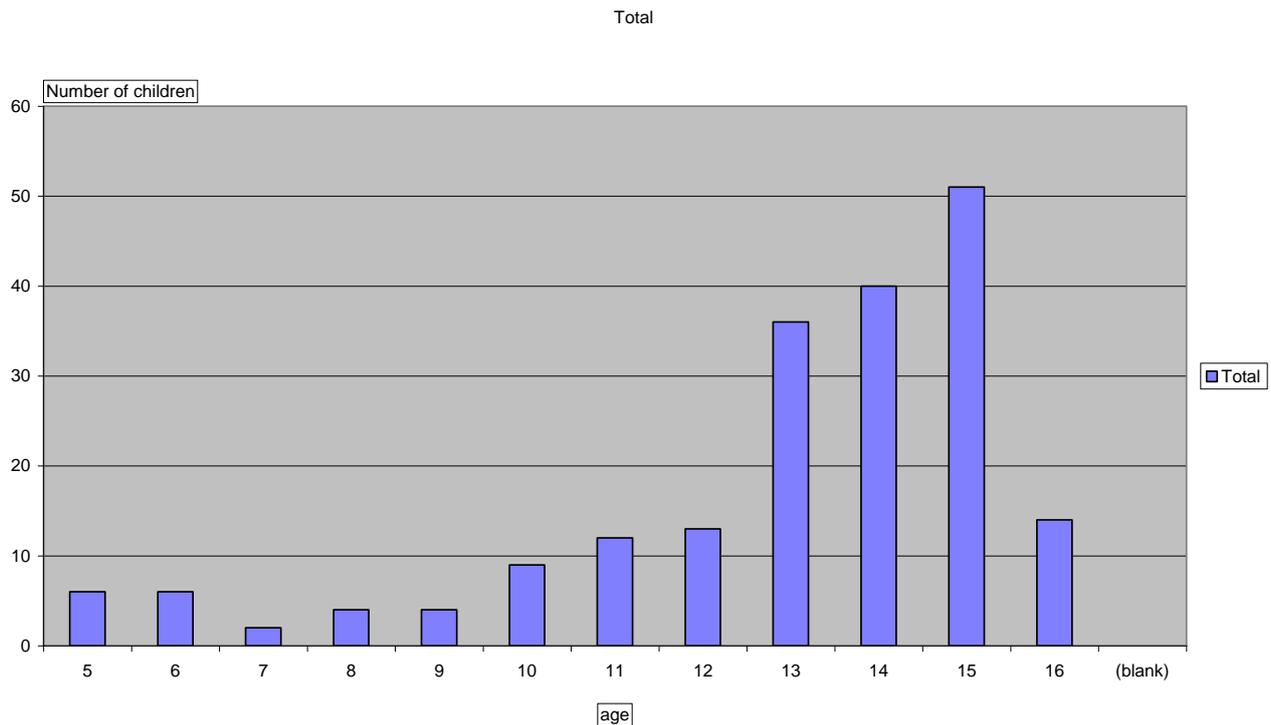
The sample comprised 50 cases from Cumbria County Council, 47 cases from Warwickshire County Council, 37 cases from the London Borough of Havering and 63 cases from the London Borough of Bromley. In general terms the sample is representative and gives a good picture of the pattern of need and the seriousness of need coming to notice.

The quantitative information which follows is based on the information about circumstances and needs recorded for each child. In the main, this information was recorded by the case worker and thus reflects the level of knowledge they held about the child and their family and environmental circumstances.

## Age

The chart below shows the ages of the children. The majority of children in the sample are of secondary school age.

Chart 1



## Gender

There are 102 (52%) girls and 95 (48%) boys.

## Distribution of cases in the sample

Cases in this sample came from the following EWS areas:

<b>Area</b>	<b>Total</b>
Bromley	63
Cumbria	50
Warwickshire	47
Havering	37
<b>Total</b>	<b>197</b>

## Ethnicity

Information about the children's ethnicity has been collected using the census codes.

<b>Ethnicity</b>	<b>No.</b>
White British	178
Any other white background	3
White and Black Caribbean	4
White and Asian	3
Other mixed background	3
Pakistani	1
African	1
Other ethnic group	1
Other Black background	1
No information	2
<b>Total</b>	<b>197</b>

It is noticeable that 90% of the children in this sample are White British.

## Living situation

The living situations of the children were as follows:

Child lives with	No.
Mother	107
Both parents	39
Mother and mother's partner	22
Father and father's partner	3
Stepfather	1
Relative	4
Father	10
LAC child with Foster carers	3
LAC child in secure estate	1
Living independently	1
No information	6
<b>Total</b>	<b>197</b>

Note: 118 children (60% of children) are living in lone parent households.

## Domestic violence a feature of family life

	No.	%
Domestic Violence	44	22%

Note: Domestic violence is a feature in the lives of nearly a quarter (22%) of the children.

## Behaviour

	No.	%
Adult has offending behaviour	16	8%
Child has offending behaviour	41	21%
Child has behaviour problems at home	86	44%
Bullying issues	25	13%
Poor Social Skills	56	28%
ADHD diagnosed	10	5%

Note: A significant number of children have behaviour problems at home (44%) and poor social skills (28%). Almost a quarter of children (21%) have offending behaviour.

## Health

	No.	%
Child has physical health difficulties	38	19%
Adult has physical health difficulties	14	7%
Child has emotional/mental health difficulties	69	35%
Child described as having low self esteem	38	19%
Adult has emotional/mental health difficulties	49	25%
Hygiene at home is poor	28	14%
Housing is an issue	37	19%

Note: Over a third of children (35%) have emotional/mental health issues as do a quarter (25%) of their parents. Almost a fifth (19%) of children are described as having low self esteem.

## Substance Misuse

	No.	%
Adult misuses alcohol	24	12%
Adult misuses drugs	22	11%
Child misuses alcohol	25	13%
Child misuses drugs	29	15%

Note: Substance misuse is an issue in a significant number of families.

## Education

	No.	%
Parent has learning difficulty	9	5%
Child has behaviour problems at school	57	29%
Exclusions	29	15%
Attendance issues	171	87%

Note: Children are struggling at school. Almost a third (29%) have behaviour problems in school and perhaps unsurprisingly most (87%) have attendance problems.

## Subject to legal intervention

	No	%
Legal intervention planned, taken or completed	70	36%

Detailed information regarding the nature and type of intervention planned, in process or completed has been difficult to analyse because of the range of interventions involved across the four authorities. However over a third of children (36%) (or their parents) are subject to some form of legal intervention ranging from formal warning letters, involvement in the Fast Track process, fixed penalty notices,

orders under section 444(1) Education Act 1996, supervision orders under section 31 Children Act 1989 and penalty notices under the Anti-Social Behaviour Act 2003.

## Seriousness

In planning and evaluating services it is important not only to identify need but also to make a judgement about the seriousness or severity of need. Without such an understanding it will not be clear what priority should be placed on the need identified or what intensity of service will be required and over what time period. In order to make a judgement about severity the definition of children in need in section 17 of the Children Act 1989 has been modified for use as a measuring tool. Auditors were asked to decide whether, without services, the child's development would be:

- 1 Affected adversely in the future
- 2 Was currently being adversely affected, or
- 3 Was currently being harmed in a significant way.

This way of measuring differs from the way levels of seriousness are measured in the static matrices of need which now exist in many children's services authorities - for example the model of levels one two and three - because it is based on prediction about the way needs will develop if not attended to rather than on the category of need the child currently falls in to.

The three levels above have been translated into:

- 1 Lower level needs
- 2 Additional needs, and
- 3 Complex needs.

### Auditors judged the seriousness of the children's situations as follows.

	No	%
Likely future impairment/lower level needs	12	6%
Current impairment/Additional needs	111	56%
Significant impairment/complex needs	72	37%
Below threshold	2	1%
<b>Total</b>	<b>197</b>	<b>100%</b>

Note: 93% of children's needs were judged as being moderate or serious.

## Numbers in the three samples

W = Warwickshire

C = Cumbria

B = Bromley

H = Havering

	<b>W</b>	<b>C</b>	<b>B</b>	<b>H</b>
Likely future impairment/lower level needs	0	1	4	5
Current impairment/Additional needs	20	37	33	21
Significant impairment/complex needs	26	11	22	11
Below threshold	1	1	4	0
<b>Total</b>	<b>47</b>	<b>50</b>	<b>63</b>	<b>37</b>

## % in three samples

	<b>W</b>	<b>C</b>	<b>B</b>	<b>H</b>
Likely future impairment/lower level needs	0%	2%	6%	14%
Current impairment/Additional needs	43%	74%	53%	56%
Significant impairment/complex needs	55%	22%	35%	30%
Below threshold	2%	2%	6%	0
<b>Total</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>

Note: Decisions about the level of seriousness of the needs in each case were clearly the subjective decisions of the auditors but clear guidance was given on how to make this decision. In addition the consultants reviewed the levels identified when analysing the data and in the majority of cases agreed with the level set. It is clear that EWS in all four areas are working with children with serious and complex needs and there is little difference in the level of seriousness across the four samples. All four agencies are working almost exclusively with children at levels two and three.

## Meeting need

Auditors were asked to make a judgement about whether the services the child was receiving were addressing the needs they had identified. It was stressed that this was not a comment on the quality or otherwise of the service per se, or a comment on the processes followed but rather a specific question as to whether the needs they had identified, in the context of the audit, were being addressed.

<b>Service addressing need</b>	<b>No</b>	<b>%</b>
Fully	29	15%
Partially	99	50%
Not meeting needs	63	32%
No information	6	3%
<b>Total</b>	<b>197</b>	<b>100%</b>

Note: Given the seriousness of need coming to attention it is encouraging that two thirds (65%) of children are having their needs fully or partially met. But it is obviously of concern that a third (32%) of the children are not having their needs met.

## Summary of quantitative data

- Children in the sample and their parents have a wide range of needs and those needs are serious. Almost half (37%) are judged to have reached the significant impairment threshold.
- 60% of children in the sample live in lone parent households.
- For 22% of children in the sample domestic violence is, or has been, a feature of their lives.
- More than a third (44%) of the children have behaviour problems at home and just under a quarter (21%) have offended. Just under a third (28%) have poor social skills.
- More than a third of children (35%) have emotional/mental health problems as do a quarter (25%) of their parents. Almost a fifth (19%) of children are described as having low self esteem and the same number have physical health problems.
- Just over a fifth (22%) of children have a parent who misuses drugs and/or alcohol.
- Children are struggling at school. Almost a third (29%) have behaviour problems in school and (87%) have attendance problems. 15% have been excluded.
- It is clear that in order to address the serious needs identified children and their families will need a spread of well integrated, outcome-focused service responses from a range of agencies in both children's and adult services.
- Given the seriousness of the needs and the extent of adult difficulties it is encouraging that two thirds (65%) of children's needs are judged to have been met fully or partially. It should be recognised that in many cases this is down to the skilled and committed work of EWS professionals struggling to fill gaps in service provision arising from the lack of available services in the area or poor inter-agency co-operation in responding to needs.

## The Need Groups that emerged

The table below gives an overall picture of the need groups, in descending order of magnitude, that emerged from the aggregation exercise described on page 4. Each need group is based on judgements about the child's **most pressing need** and children are allocated to a need group with other children who have a similar pressing need. Children can only be allocated to one need group.

<b>Need group</b>	
Behaviour to be understood and managed	33
Adult mental health to improve	31
Much improved care at home	30
Adult/child relationships to improve	26
Adult relationships to improve	21
Impact of loss and trauma to be reduced	19
Protection from domestic abuse and its impact	14
School and family to work in partnership	11
Practical help at home	7
Education to be accessible to child and family	5
<b>Total</b>	<b>197</b>

## Clustering

The table below clusters the need groups around three main themes; family relationships, parenting and the emotional needs of parents and children.

<b>Family relationships</b>	<b>Total</b>	
Adult/child relationships to improve	26	43%
Adult relationships to improve	21	34%
Protection from domestic abuse and its impact	14	23%
<b>Sub total</b>	<b>61</b>	<b>31%</b>
<b>Parenting</b>		
Behaviour to be understood and managed	33	38%
Much improved care at home	30	35%
School and family to work in partnership	11	13%
Practical help at home	7	8%
Education to be accessible to child and family	5	6%
<b>Sub total</b>	<b>86</b>	<b>44%</b>
<b>Emotional needs</b>		
Adult mental health to improve	31	62%
Impact of loss and trauma to be reduced	19	38%
<b>Sub total</b>	<b>50</b>	<b>25%</b>
<b>Total</b>	<b>197</b>	<b>100%</b>

Note: There is slightly larger proportion of cases in the Parenting group.

- Family relationships                      31%
- Parenting                                      44%
- Emotional needs                              25%

## Distribution of cases from the 3 samples

W = Warwickshire

C = Cumbria

B = Bromley

H = Havering

<b>Family relationships</b>	<b>W</b>	<b>C</b>	<b>B</b>	<b>H</b>
Adult/child relationships to improve	6	5	10	5
Adult relationships to improve	5	3	6	7
Protection from domestic abuse and its impact	2	10	2	0
<b>Sub total</b>	<b>13</b>	<b>18</b>	<b>18</b>	<b>12</b>
<b>Parenting</b>				
Behaviour to be understood and managed	13	7	10	3
Much improved care at home	10	3	10	7
School and family to work in partnership	0	7	1	3
Practical help at home	0	1	3	3
Education to be accessible to child and family	0	4		1
<b>Sub total</b>	<b>23</b>	<b>22</b>	<b>24</b>	<b>17</b>
<b>Emotional needs</b>				
Adult mental health to improve	3	7	16	5
Impact of loss and trauma to be reduced	8	3	5	3
<b>Sub total</b>	<b>11</b>	<b>10</b>	<b>21</b>	<b>8</b>
<b>Total</b>	<b>47</b>	<b>50</b>	<b>63</b>	<b>37</b>

Note: There is a similar distribution of cases across the ten need groups indicating that the four agencies are working with children with similar needs.

## Detailed description of the Need Groups

The following pages contain a more detailed description of the children in each need group. This is linked to an analysis of the judgements about seriousness of the needs of children in each group and success in addressing need. The auditors' descriptions of services being provided and explanations for partially meeting needs are included for each need group. Only those services described quite specifically are included here. So if it was noted on the form that referrals were made to other agencies, letters were sent, assessments undertaken or non specific 'visits' made, then these were not included as services. Auditors were asked to describe the services provided directly by, or organised by, EWS and services provided by other agencies. For some need groups no information was given about services provided by other agencies. While this may be because no such services were being provided it could simply mean the auditors were not aware of what other services were being received by the child and family.

## Cluster A – Family relationships

### 1. Parent/Child relationships to improve

#### 26 children

The primary need is for relationships between parents and their children to improve. It is difficult for parents to see the world from their child's point of view and expectations of children are often unrealistic. In some cases parents speak to their children in negative and critical ways. Some parents treat their children as friends which means the children lack clear boundaries and feel insecure as a result. Some children have disabilities and parents have been over-protective which has led to relationship difficulties and children are not able to develop independence skills. For some children a lack of emotional warmth causes them to behave aggressively which alienates them further from their family. Several children find it hard to get on with a step parent and this situation affects the relationship with their natural parent. Most children are teenagers and relationship difficulties are long standing. Their emotional well being is being affected. They show their distress in difficult behaviour: staying away from home, arguing, drinking excessively, not going to school. Several parents are dealing with depression, and some are trying to deal with their own difficult childhood experiences.

The group includes:

- A 14 year old whose mother treats her as a peer – they go drinking together and mother does not insist she goes to school. Her attendance is poor and her behaviour increasingly disruptive.
- A 16 year old whose relationship with her mother has broken down. She is refusing to return home.
- A 13 year old whose older brother is disabled. He is very overweight, has low self esteem and can become aggressive with his mother who is over powering and embarrasses him by speaking for him.
- A 14 year old who has had a difficult relationship with his mother who makes it clear the two younger children are her priority. His behaviour towards his mother is difficult but outside of the home he is 'personable and likeable'.
- A 14 year old who has a difficult relationship with her mother. This mother had poor childhood experiences and seems to find it hard to put rules in place and to stick to them. The atmosphere at home is tense and the child's behaviour is difficult at home and at school.
- A 13 year old whose mother is over-protective. She will not allow him to travel to school on the bus as the other children do.
- A 13 year old's mother will not allow her son to go to school because she says he is being bullied. There is no evidence that this is the case and it is thought that since her relationship ended she needs her son to stay at home with her.
- The mother of a 9 year old finds it very difficult to separate from her son. He does not socialise outside of the family and the whole household revolves around him. He has not been to school for eighteen months.

Relationships need to improve and parents need to let children know that they are important and that they want to put their needs first.

## How serious is the need?

	Total
Likely future impairment	0
Current impairment	17
Significant impairment	9
<b>Total</b>	<b>26</b>

## Are needs being addressed?

Yes - fully	4
Partially	11
No	9
No info	2
<b>Total</b>	<b>26</b>

## What services were in place?

The children in this group have a range of needs associated with poor relationships with parents. Auditors describe many unspecific services such as 'advice', one to one sessions, and phone conversations with mother. The services listed here are the more specific ones. It is noticeable that in these cases auditors did not note any services being provided by other agencies, instead all services were provided by EWS, either directly or through family support or health services based at the school.

### Range of services offered

- Parenting groups or classes sometimes combined with one to one advice for a parent.
- One to one sessions to improve young person's self esteem plus health advice.
- Escorting to school.
- Intensive sessions with a family focus.
- Support from school nurse providing information about particular health problems.
- Advice on routines and boundary setting.
- Behaviour support in school.
- Helping parents to understand how ADHD affects children and how best to manage their behaviour at home.
- Anger management work with young people.
- Advice to parents on managing behaviour and attendance.
- Helping a mother to separate from her child.
- Advice on routines, taken to buy furniture, reward chart for routines achieved, repairs to house, budgeting support.
- Family sessions to look at the way mother and child relate together.
- Bus pass and advice on safe route to school.

## Reasons given by auditors for partially meeting needs

- A lack of practical support for parents in the home, including when parents have serious physical health problems.
- A lack of work on improving relationships between the parent and child which affects all other areas.
- Difficulties in getting social care services to respond.
- Parents who refuse to work with anyone because they will not acknowledge the problems that exist.
- The need for other issues, such as the child's self esteem to improve before the parent/child relationship will improve.
- The need for a 'team around the child' approach – which is currently lacking.
- The mother's rejection of the child is the key factor and this is not being addressed.
- A lack of flexible options available for supporting parents such as help in the home to establish routines and boundaries rather than attending parenting classes.
- Children not receiving support which is available because it is dependent on them attending school more regularly.
- Parental mental health problems not being addressed
- A child's need for social contact outside the home not being met (home tuition).

## **2 Adult relationships to improve 21 cases**

The primary need is for parents to resolve conflict in their relationship and reduce the affect of conflict on their children. All the parents except two are living apart and relationships remain acrimonious including threats, verbal abuse. Domestic abuse has been an issue for many families. Children are frequently caught up in parental arguments. In some cases children have moved from the home of one parent to the home of the other causing disruption to their lives in general and education in particular.

Many mothers have become lone parents and are struggling to manage their children and home on their own. For some a preoccupation with their own issues has meant overlooking their children's needs and many children lack clear boundaries. Many parents have substance misuse issues and emotional and mental health difficulties including depression.

The group includes:

- A 6 year old whose school attendance is 54%. There is on-going conflict between his parents who are separated and concerns about neglect and mother's drug misuse.
- A 14 year old who lives in temporary accommodation with his father. He became involved in a fight between his parents and hit his mother.
- A 13 year old whose father is now living with another parent from her school. She refuses to go to school, is depressed and not caring for herself.
- A 12 year old whose separated parents constantly fight and argue. The child has low self esteem and is anxious about leaving her mother to go to school.
- A 6 year old who has moved to live with her father some way from school. She only attends 3 days per week because her father cannot afford the bus fare. There are frequent arguments between the parents and concerns that father has an alcohol problem.

Adolescents are showing their distress in difficult, oppositional behaviour. Younger children are frequently withdrawn and have behaviour problems which include soiling.

Adults need to understand the adverse impact of their difficulties on children. Children need their parents to be less preoccupied with feelings of resentment and bitterness, and to receive reassurance about their future living situation, and, where necessary, contact arrangements with parents, siblings and other relatives that are clear and agreed.

## How serious is the need?

	Total
Likely future impairment	4
Current impairment	14
Significant impairment	3
<b>Total</b>	<b>21</b>

## Are needs being addressed?

Yes - fully	3
Partially	12
No	5
No info	1
<b>Total</b>	<b>21</b>

## What services were in place?

In this need group services were being provided by other agencies as well as by or through EWS.

### Range of services in place

#### EWS

- Support, including one to one work, and advice on setting and maintaining routines and boundaries and managing behaviour.
- Monthly sessions with parents to talk about the impact of parental behaviour on the child.
- One to one work with parent and child together.
- Weekly parenting classes.
- Calling in morning to make sure child is up, driving or escorting children to school if necessary.
- One to one work with the child – including encouragement and praise - in conjunction with head of year, learning mentor and Connexions
- Advice to ensure that home and school are working together on managing behaviour.
- Provision of youth projects over the summer holiday.
- Advice given to school on monitoring and celebrating improved attendance.

#### Other services

- Anger Management provided by social care for father.
- Larger flat provided by housing department.
- Family counselling from voluntary organisation.
- Work to manage behaviour provided by YISP.
- Parenting classes provided by YISP.
- Help for child to deal with anxiety provided by CAMHS.
- Family Therapy provided by CAMHS.
- Summer programme provided by EWS/Police.

- One to one sessions with the Fire Brigade.

### **Reasons given by auditors for partially meeting needs**

- No relationship work being undertaken with parents to help them resolve the conflict or recognise its impact on their children.
- Parents' low level mental health needs (depression) not being addressed.
- A school refusing to offer a place to a child because of their previous non-attendance.
- Although the family need help with transport to school their application for assistance was declined.
- A failure on the part of services generally to take a pro-active approach, closing cases if families do not engage voluntarily.
- Difficulties in accessing specialist Child and Adolescent Mental Health Services (CAMHS)
- Difficulties in persuading children's social care to be concerned about parental neglect linked to substance misuse combined with frustration that they are more worried about a father and daughter having to share a bed-sit. Frustration also that children's social care services are still the gateway to children and their families being offered a wider range of support but that high thresholds make these difficult to access.

### 3 Protection from domestic abuse and its impact

#### 14 children

The primary need is for domestic abuse to stop and for children to be helped to overcome the impact of violence in the home on their day to day lives and the life of their families. For some children domestic violence is on-going and needs to stop. For other children the violence is not on-going but continues to affect their lives. In several of these cases domestic abuse has been a feature of family life for some time. A significant number of older children in the group have problems managing their anger and for several this has resulted in offending behaviour. Several are misusing drugs and alcohol and many have emotional and mental health difficulties. In addition their behaviour is affecting their school life and exclusion and poor attendance are issues. Grandparents provide a significant source of support in some cases. Mothers who have separated from violent partners are suffering from depression and other emotional and mental health difficulties. In two cases they are overly dependant on their children. They are all struggling with the practical difficulties of being a lone parent.

The group includes:

- A 15 year old who has moved to live with grandparents because of violence at home. Her school attendance is irregular, there are concerns about substance misuse and the police have been called several times when she has been missing.
- A 15 year old who lives in a violent home. The family are not well liked in the local community and the child is very isolated. He has offending behaviour and has made threats to harm himself.
- A 10 year old who finds it difficult to interact with other children and constantly asks if he is like his father. The police visit daily and there are window locks in his home and barbed wire fencing around the garden.
- A five year old whose step father forces her mother to drink alcohol until she passes out.
- A 6 year old who has witnessed violence at home. School are worried about his withdrawn behaviour and difficulty in making friends. His father was recently arrested.

#### How serious is the need?

	Total
Likely future impairment	0
Current impairment	11
Significant impairment	3
<b>Total</b>	<b>14</b>

#### Are needs being addressed?

Yes - fully	0
Partially	6
No	8
<b>Total</b>	<b>14</b>

## **What services were in place?**

In this need group services noted were provided mainly by EWS or the school apart from the support of the police in one case.

### **Range of services offered**

- Discussion with child about getting to school.
- Taking the child to school for one week.
- Transport arrangements to enable child to get to school.
- Regular discussion with a mother about her relationship.
- A managed move arranged to avoid permanent exclusion.
- One to one support for the child from learning mentor in school.
- Support from police.

### **Reasons given by auditors for partially meeting needs**

- Psychological issues were not being addressed.
- Parents not able to engage.
- A mother's inability to leave her partner which puts the whole family in danger.
- Father needs support to address his own needs.
- Professionals need to work together to address the range of need.
- Issue of domestic violence still not resolved

### **Comment**

In very few cases was a service offered that addressed the domestic violence.

## Cluster B - Parenting

### 4 Child's behaviour to be understood and managed

#### 33 children

The primary need is for parents to be helped to manage their child's behaviour better and to be consistent in setting boundaries. For some children in this group the child's behaviour problems clearly have their roots in long standing relationship problems at home. In other cases parents are committed to their children but do not know how to set clear rules and then to stick to them.

The behaviour of many of the children in this group is out of control and in some cases includes offending behaviour such as theft, assault and criminal damage. Children dislike being told what to do, have difficulty managing anger, misuse drugs and alcohol and frequently spend time away from home without parental consent or knowledge. For many children their behaviour is a problem at school and interrupts their learning and ability to make friends. Challenging behaviour includes violence to other children and family members, angry outbursts, wandering off and staying out late.

Several parents have their own difficulties, including debt problems, physical health problems and relationship difficulties. Many parents are separated and children are living with a lone parent. Several of these lone parents feel unable to go out to work because of their children's behaviour.

The group includes:

- A 13 year old Polish boy who is angry and aggressive to his mother and refuses to do anything she asks. He refuses to go to school and says he wants to go back to Poland to live with his father.
- A 15 year old who has not been to school for over a year. She drinks heavily and misuses drugs. If her parents refuse to give her money she shouts and screams at them.
- A 6 year old whose family all have learning difficulties. She is more able intellectually than her family members and so is allowed to 'rule the roost' and does as she likes. She is not attending school.
- A 15 year old who like her father is a drug user. She spends most of her time with her 20 year old boyfriend who also misuses drugs. She refuses to accept any of the rules her mother tries to establish.
- A 13 year old whose father is in prison. He recently moved in to the area and became involved with a criminal peer group. He has just received a 4 month custodial sentence.

## How serious is the need?

	Total
Likely future impairment	1
Current impairment	18
Significant impairment	14
<b>Total</b>	<b>33</b>

## Are needs being addressed?

Yes - fully	6
Partially	18
No	8
Info missing	1
<b>Total</b>	<b>33</b>

## What services were in place?

### Range of services provided

#### EWS

- Parenting classes.
- YOT and EWS working together to reduce offending behaviour.
- Weekly one to one sessions with the child to support attendance, including discussions about the reasons for non-attendance.
- Meetings with both the family and the school to identify issues that may be affecting attendance.
- Advice to the parents on managing difficult behaviour.
- Liaison between home and school.
- Advice to parents on getting child to school.
- Transporting children to school for a limited period.
- Advocacy on behalf of mother and child.
- Help to re-establish attendance after a long absence.
- Family sessions to talk about the impact difficult family relationships are having on child.

#### Other agencies

- Parenting support provided by social care.
- Mentor provided by Afro Caribbean youth support.
- Support to reduce offending provided by YOT.
- Parenting course provided by YOT.
- Help to reduce substance misuse provided by YOT.
- Group work provided by YISP.
- Counselling for child provided by CAMHS.
- Group work provided by CAMHS.
- Work on self esteem provided by fire service and Connexions.

## Reasons given by auditors for partially meeting needs

- Lack of co-ordination among the different services involved with the family.
- No additional classroom support available.
- No service offered to address offending behaviour.
- Parents with learning disabilities failing to meet the threshold for adult social care services.
- Lack of services to help resolve relationship issues.
- Cases failing to meet the threshold for social care involvement.
- A lack of engagement on the part of parents and/or the child.
- Limitations on the service EWS can provide when children reside in another Borough or area, for example being unable to do a home visit even when a child is not attending school at all.
- Difficulties in achieving change or improvement in family relationships when difficulties are long-standing.
- No agency taking responsibility for work with parents around setting boundaries.

## 5 Much better care at home

### 30 children

The need is for children to receive much better care and protection at home than at present. Parents need support and help with a wide range of issues and problems, including alcohol and drug misuse, social isolation, sexual abuse, self harm, mental health and bereavement issues. Many of the children in the group are living in homes where there are few household routines and where hygiene is an issue. This is affecting children's health and development. There are concerns about inadequate diet, lack of routines and boundaries, poor supervision, poor sleep patterns and bedtime routines, lack of stimulation, children caring for younger siblings, weight problems, untreated tooth decay, isolation, frequent moves and emotional and behavioural problems. These children and their families are very isolated and children find it hard to make friends.

The group includes:

- A 15 year old who lives at home with an alcoholic father. She cares for her father when he has had a drinking bout and misses school. When in school she complains frequently of minor ailments and finds it hard to get on with other young people
  - A 9 year old who has seen her mother fall off the balcony when drunk. Her school attendance is poor. Her family are all banned from the local shop because of shoplifting
  - A 10 year old whose mother is a heroin and crack user. He refuses to go to school and so has no chance to make friends of his own age. He has seen his mother overdose and has called the ambulance. The child soils himself regularly
  - An 11 year old whose mother misuses drugs and leaves him at home on his own for several days at a time
  - A 5 year old who is under weight and who has untreated head lice. Her mother finds it very hard to maintain household routines and the family are very isolated.
- Good outcomes for these children will be hard to achieve

### How serious is the need?

	Total
Likely future impairment	0
Current impairment	10
Significant impairment	19
Below threshold	1
<b>Total</b>	<b>30</b>

### Are needs being addressed?

Yes - fully	0
Partially	18
No	10
Info missing	2
<b>Total</b>	<b>30</b>

## **What services were in place?**

### **Range of services provided**

#### **EWS**

- One to one sessions with children – focusing on feelings, worries, self esteem, showing respect to others, organising/motivating oneself.
- Learning mentor working with the child in school to improve their confidence.
- Escorting children to school.
- Helping children return to school.
- Advising parents on how to promote attendance at school and encouragement to them to recognise the value of education.
- Organising joint activities for mother and child to promote their relationship – e.g. cooking.
- Organising out of school social activities for children.
- Advising parents on routines, setting boundaries, managing difficult behaviour and generally providing adequate care.
- Practical parenting advice including how to manage head lice.
- Advice to the parents on help available for drug misuse problems.

#### **Other services**

- Housing and environmental health involved to improve housing conditions.
- Financial and housing advice.
- Friendship work provided by YISP.
- Parenting classes provided by YISP.
- Mental health and support to manage anger provided by CAMHS.
- Family counselling provided by CAMHS.
- Hospital admission for child who was self harming.
- Sexual health advice for child provided by the school nurse.
- Mental health advocacy or other support provided for mothers by MIND.
- Practical help for mother with several very young children provided by a volunteer through children's social care.
- Drug counselling provided for parents.

### **Reasons given by auditors for partially meeting needs**

- Although there has been work done on getting the child to school, issues around relationships and practical parenting support have not been addressed.
- High thresholds for children's social care means that child protection concerns are not adequately addressed, multi-agency meetings are not called as often as they should be and/or intensive family support services are not provided.
- The lack of a pro-active approach by agencies means that cases are closed when parents fail to engage, or drop out of services, and many parents in this group are resistant to services or simply unable to keep to appointments because of their disorganised lives.
- There is a lack of services which can be provided for families for long periods of time – they are often time limited, whereas support needs to be sustained.
- Parents are unwilling to acknowledge they have problems – particularly around drug or alcohol misuse, which makes it difficult for the problems to be addressed.
- There is a lack of co-ordinated multi-agency working.

## 6 School and family to work in partnership 11 children

The primary need is for parents to work in partnership with schools to enable their children to go to school regularly. Parents need to help their children understand the value of education and to feel confident about talking to schools when problems arise. Schools need to understand why families are struggling and to be available to find practical solutions to the problems families are facing.

The group includes:

- A 15 year old who leaves home after his parents in the morning and frequently misses the school bus.
- A 16 year old whose father has found him a job although he has not yet reached the statutory school leaving age.
- A 13 year old whose attendance dropped when she moved to secondary school. Her older brother dislikes school and tells her she need not go.
- A 7 year old who I diabetic and whose mother struggles to get him to school as she is pregnant.

### How serious is the need?

	Total
Likely future impairment	4
Current impairment	6
Significant impairment	1
<b>Total</b>	<b>11</b>

### Are needs being addressed?

Yes - fully	6
Partially	2
No	3
<b>Total</b>	<b>11</b>

### What services were in place?

#### Range of services offered

##### EWS

- Youth work in school.
- Work experience placement leading to apprenticeship.
- Work with parents to encourage them to contact school when difficulties arise.
- Parents encouraged to provide the child with a bicycle to use when he misses the bus.
- Support to ensure the child succeeds when she does attend.
- Home visit to find practical solutions to improve attendance.

#### Reasons given by auditors for partially meeting needs

- Work needs to be done with parents to enable them to understand their child's needs as well as their own.
- Parents are not able to access family support services.

- Services need to work in partnership to be able to meet the needs identified.

## 7 Practical help at home

## 7 children

The primary need is for parents to be given practical support at home because particular circumstances make it especially hard for them to be a parent. For all the children in the group housing is an issue. Housing problems include overcrowding, poor condition, and imminent eviction. In addition families are struggling with health issues. All the families except one are headed by a lone parent and frequent moves and isolation are common features of their lives.

Parents need to be supported with the practical aspects of parenting and to be supported in finding housing suitable for their families' needs.

The group includes:

- An 8 year old who lives in a flat with her parents and two younger siblings. The flat is very damp and aggravates her asthma which then affects her school attendance. Her sister has a sleep disorder and keeps the whole family awake.
- An 11 year old whose family has a long history of housing difficulties. They are about to be evicted from overcrowded accommodation. Parents have not applied for a place at secondary school for their child as they do not know where they will be living.
- A 15 year old who cares for her mother and younger sibling who both have medical problems. She has to get up in the night to care for her mother. She is exhausted and has no space at home to complete homework.
- An 11 year old whose attendance has been affected by living in a home deemed unfit for habitation.

All the children need to be relieved from worrying about their parents and/or siblings; they need to be settled in homes that address their families' needs and to be able to go to school regularly and make friends at school and in the local community.

### How serious is the need?

	Total
Likely future impairment	1
Current impairment	5
Significant impairment	1
<b>Total</b>	<b>7</b>

### Are needs being addressed?

Yes - fully	1
Partially	5
No	1
<b>Total</b>	<b>7</b>

### What services were in place?

#### Range of services offered

#### EWS

- Advocacy in relation to housing.
- Providing a certificate for improved attendance on a weekly basis and or using a chart both at home and at school for improved attendance.
- One to one advice to parents about routines and the importance of improved attendance and punctuality.

#### **Other agencies**

- Support from Young Carers.
- Help from housing – re-housed.
- Advice on routines and diet provided by sleep clinic.

#### **Reasons given by auditors for partially meeting needs**

- Parents overwhelmed by one need, for example housing, find it difficult to make use of services to address other needs.
- Housing needs not addressed
- Family need more practical help at home.

## 8 Accessible education 5 children

The primary need is for children to be able to go to a school which understands and is responsive to their particular circumstances.

The group includes:

- A travelling family who have reservations about their child going to school with non-traveller children.
- A thirteen year old who has recently moved to the area. He is shy, over weight and finds it hard to make friends. His mother is worried that he could end up offending if he cannot go to school.

### How serious is the need?

	Total
Likely future impairment	1
Current impairment	2
Significant impairment	1
Below threshold	1
<b>Total</b>	<b>5</b>

### Are needs being addressed?

Yes - fully	3
Partially	2
No	-
<b>Total</b>	<b>5</b>

### What services were in place?

#### Range of services offered

- Flexible agreement with mainstream school/home education.
- Support provided to parents to find new school place for child, including help with paperwork.
- Help to effect a managed move and re-integration into a new school.

#### Reasons given by auditors for partially meeting needs

- Schools failing to respond to parents for unreasonably long periods of time.
- Length of time to find an appropriate school causes considerable anxiety in parents and children.

## Cluster C – Emotional Needs of Parent or Child

### 9 Help for emotional/mental health problems

#### 31 children

The primary need is to understand and address the mental health problems of parents and in some cases children too. Parents need practical and emotional support to address difficulties which affect the life of the whole family and their ability to parent. In some cases the behaviour of parents creates problems in the local neighbourhood and families are isolated. Many children have behaviour problems including violent outbursts. Some children are also withdrawn, have low self-esteem, anxiety and struggle to make friends. Difficulties affect children's schooling and several have attendance problems because they are staying home to care for parents or are anxious about leaving them alone. Many are not achieving well.

Six children in the group also have mental health problems. For three of these emotional difficulties appear to have developed as a result of parental mental health issues.

The group includes:

- A 14 year old whose mother is agoraphobic. He stays at home with her and is physically sick at the thought of going to school
- An 11 year old who stays at home to look after his mother who is depressed. His father died three years ago.
- A 16 year old whose mother is depressed. She takes the role of the adult in the family and spends nights away from the family home with a man much older than her.
- A twelve year old who lives with her mother who is depressed. She can become very frustrated and angry with her. She has a long history of poor attendance and is currently refusing to attend.
- A 14 year old whose mother has mental health difficulties which have made it hard for her to parent him. He is isolated, finds it hard to make friends, has offending behaviour, encopresis and is obsessed with weapons.
- An 8 year old whose father is in prison for assaulting his mother who has mental health problems. He rarely attends school and finds it difficult to make friends.
- A 5 year old who lives in a small flat with her pregnant mother who suffers from depression. Mother finds it hard to maintain any household routines and to get the child to school. There are concerns that the situation will deteriorate further when the new baby is born.

Parents need help in their own right and to be supported as parents. Children need to be reassured and to know their parents will get the help they need and – where appropriate – to know who will care for them when their parents are ill. They need activities they can enjoy outside of their homes and to be relieved of the burden of caring for their parents. Those who themselves have emotional difficulties need these to be attended to and their parents need to understand their child's behaviour and how to support them to change.

## How serious is the need?

	Total
Likely future impairment	9
Current impairment	20
Significant impairment	12
<b>Total</b>	<b>31</b>

## Are needs being addressed?

Yes - fully	4
Partially	16
No	11
<b>Total</b>	<b>31</b>

## What services were in place?

### Range of services offered

#### EWS

- Helping and advising parents, including one to one sessions, on routines, setting and maintaining boundaries and understanding the importance of education.
- Volunteer provided to help with routines at home.
- Helping parents access available support around pregnancy and parenting.
- Helping parents access parenting classes.
- Advocacy and advice in relation to housing issues and finance.
- Advocacy for provision of transport
- One to one support for school staff to help them understand child's problems and suggest ways of managing behaviour, including sexualised behaviour.
- Arranging meetings between home and school to discuss a package of support.
- Negotiating reduced timetable with the school.
- Working with the school to provide extra lessons in subjects the child enjoys.
- Taking children to school and/or visiting at home on days when the child is refusing to attend.
- Help to access a gym.
- Help to access family holiday.
- Support to fill in job application.
- Provision of a life coach.
- Provision of breakfast club at school.
- Mentor in school

#### Other agencies

- Support from school phobic advisor – provided by Connexions.
- Involvement of home-school support worker.
- Regular meetings with school nurse.
- Family therapy provided by CAMHS.
- Adult mental health service for mother.

- Counselling for child from voluntary organisation.
- Strategies to cope with sleep problems – sleep clinic.
- Family support – voluntary organisation.
- Victim support – for child because of bullying – and for mother because of neighbour harassment.

### **Reasons given by auditors for partially meeting needs**

- Difficulties in ensuring a good co-ordination of a range of different services for the family.
- Long waiting lists for services from other agencies and delays in carrying out assessments.
- Lack of attention to adult mental health problems and its impact on the family.
- More time is needed for services to address all the needs.
- Services in place do not appear to be being effective.
- A need to ensure that underlying issues are addressed now that attendance has improved.
- Lack of a proactive approach from children's social care services where parental mental health makes it difficult for the parent to engage with services, compounded by problems of continuity with frequent changes of social worker.
- High thresholds for accessing children's social care services and concerns about lack of support after s.47 enquiries have taken place.
- Problems of transport to special schools undermine attempts to improve attendance. One child has a four hour return journey on several buses to access two hours of education a day.
- The lack of long term support services for some families with chronic problems.
- Difficulties finding someone to work with the child who will be sufficiently consistent so that the child can develop trust in them and talk about issues of bullying.

Comment: In only one case is there evidence of the involvement of adult mental health services. In addition there is little evidence of multi-agency planning to address the needs of the whole family.

## 10 Coping with trauma 19 children

The primary need is for children to be able to cope better with past or current traumatic events and to reduce the impact of those events on their day-to-day life. The trauma arises from a range of events including domestic violence, sexual abuse, rejection, the death of a family member, witnessing murder, being subject to serious assault and rape. The children are showing their distress in a variety of ways – inappropriate sexual behaviour; self harm; damaging property; criminal behaviour; running away; eating disorders; suicidal thoughts; threatening behaviour and nightmares.

Many parents have also been affected by these same events and need practical help to put their lives back together and assistance in providing emotional support for their children.

The group includes:

- A 15 year old whose father is in prison as a result of domestic violence and physical abuse of him and his sisters. His sisters have now been adopted and he is living with his step father. He has not been to school for some time.
- An 8 year old who found her father in bed with a drugs overdose. She tried to revive him unsuccessfully.
- A 12 year old whose father was murdered when he was travelling abroad. His mother is anxious and over-protective. He has not been to school for 3 months.
- A 13 year old whose father is in prison for sexually abusing her older sister. The family have moved from northern England and are very isolated.
- A 15 year old whose disabled father died last year and alcoholic mother soon after. He was left with his mother's boyfriend until he knocked on a neighbour's door. Neighbour has now become his foster carer. He has behaviour difficulties and is not attending school.
- A 6 year old who is one of five children. There is a history of inter-generational abuse in her family. At school she complains of feeling ill and wanting to go home.

### How serious is the need?

	Total
Likely future impairment	1
Current impairment	11
Significant impairment	7
<b>Total</b>	<b>19</b>

### Are needs being addressed?

Yes – fully	2
Partially	10
No	7
<b>Total</b>	<b>19</b>

## **What services were in place?**

### **Range of service offered**

#### **EWS**

- Help to improve self esteem.
- Work to try and engage father.
- One to one work with child regarding physical abuse and domestic violence.
- Helping child to communicate in ways that don't involve speech – e.g. using a diary, communication book. Providing school with information about mutism.
- One to one work with parents to help them understand the impact of their drug use.
- Literacy support for parents.
- One to one support to help child express her feelings about mother's death – help for older sister to find work – advice to school on managing child's behaviour – benefits advice for father.
- Work with mother to identify what support child with disability will need to return to school after a period of home education.
- Negotiating a mentor for child in school.
- Arranged summer scheme placement at secondary school to help with transition.

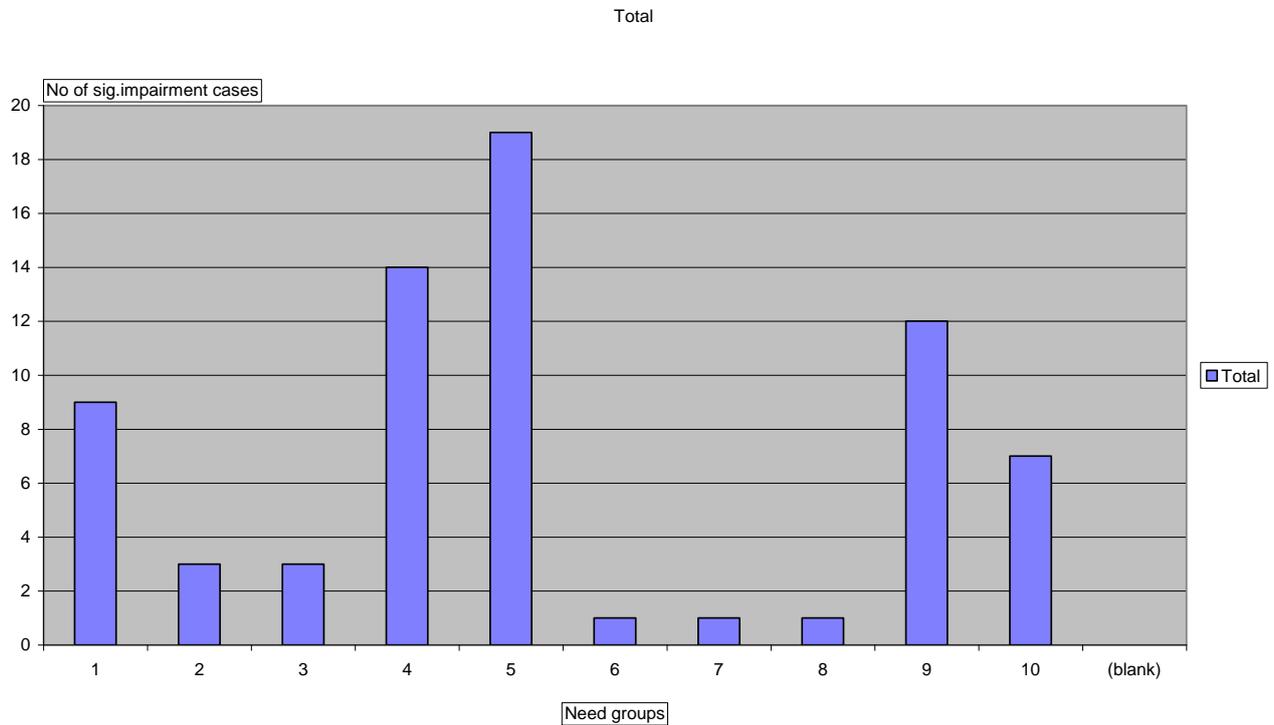
#### **Other agencies**

- Alternative education provided by the Youth Service.
- Counselling from CAMHS.
- Help from Young carers to support child in her role as a carer.
- Counselling from voluntary agency working with young people.
- Parenting classes organised by social care.
- Home care and regular contact from children's social care as children are on the CP register.
- Child accommodated by the local authority.

### **Reasons given by auditors for partially meeting needs**

- No support offered to help child come to terms with abuse of family member.
- Work focused on attendance rather than bereavement issues.
- EWS are the only agency involved in this case although there are a range of needs including serious drug misuse.
- Work needed to address child's behaviour.
- Counselling not provided for a child coming to terms with sexual assault or for parent and child in relation to loss and/or bereavement.
- Case not meeting threshold for social care involvement.
- Parent refusing to agree to home visits or one-to-one sessions for child in school.
- Parent unable to focus on the child's needs.
- Delays in assessment.

## Spread of significant impairment cases across the need groups

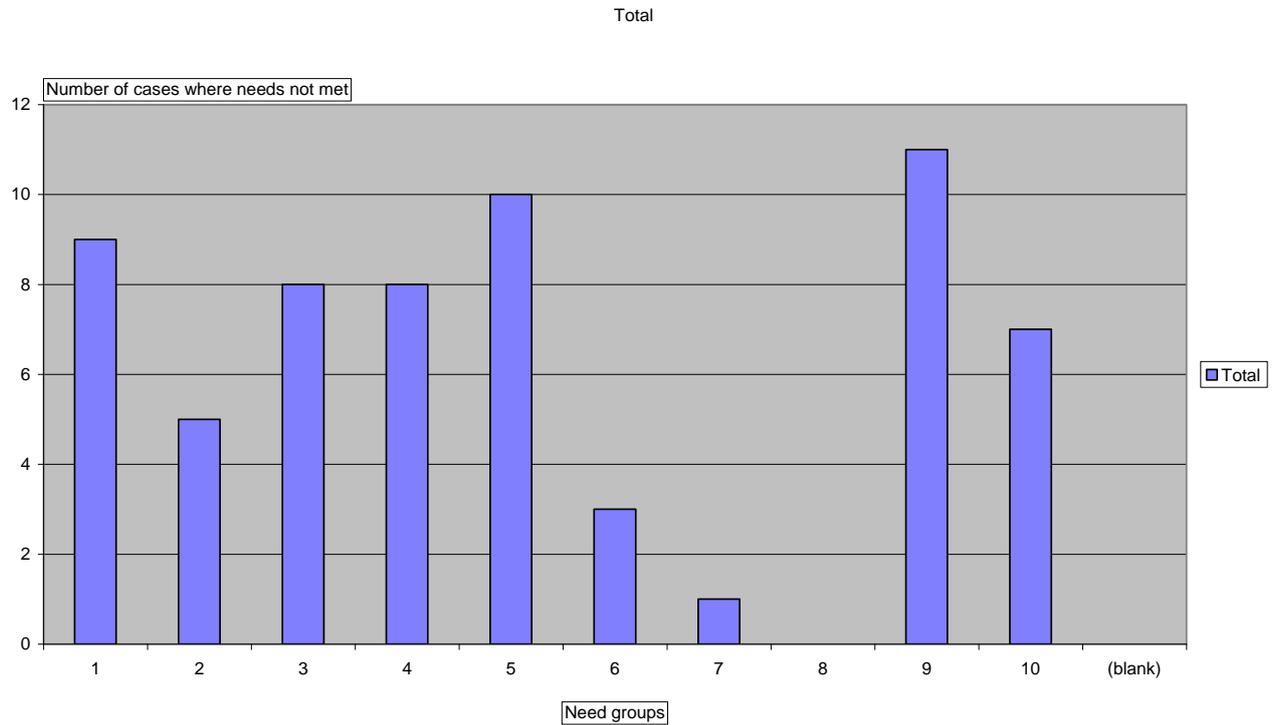


### Key to Need groups

- 1 Adult/child relationships to improve
- 2 Adult relationships to improve
- 3 Protection from domestic abuse and its impact
- 4 Behaviour to be understood and managed
- 5 Much improved care at home
- 6 School and family to work in partnership
- 7 Practical help at home
- 8 Education to be accessible to child and family
- 9 Adult mental health to improve
- 10 Impact of loss and trauma to be reduced

Note: Need group 5 – Much Improved care at home - has the largest number of children with serious needs.

## Spread of cases where needs not met across the need groups



Note: Outcomes are poorest for children in the following groups:

- Adult mental health to improve
- Much improved care at home
- Adult/child relationships to improve
- Impact of loss and trauma
- Protection from domestic abuse and its impact and behaviour to be understood and managed

## Conclusions

- Children in the sample and their parents have very high levels of need. Auditors judged that 37% of the children were experiencing significant impairment and 56% current impairment of their health and development. Particularly high levels of significant impairment were evident in five of the need groups: adult/child relationships; child's behaviour; the need for improved care at home; adult mental health and the impact of loss and trauma. These were also the need groups where outcomes for children were poorest.
- A high proportion of the cases required a co-ordinated multi-agency response to meet the needs identified. In many cases there was evidence of multi-agency involvement with the family but little evidence of this being delivered in a planned and co-ordinated way. Co-ordination is needed not only across children's services but with adult services too.
- Considerable frustration was expressed by the auditors about the high thresholds for children's social care services, or alternatively with the work being done in relation to cases open to social care, or with the early closing of cases that had been accepted as referrals.
- Concern was also expressed about the difficulties in accessing specialist CAMHS provision because of long waiting lists and the lack of support for low level but chronic adult mental health problems such as depression. It was notable that in group 9 where the pressing need was adult or child mental health problems, there was only one reference to the involvement of adult mental health services.
- Auditors made frequent reference to the need for services to be more pro-active. In particular references were made for the need for greater outreach work and frustration expressed at services which were quick to close cases when parents or children did not attend appointments or were seen to be reluctant to engage with services. However it is also true that a frequent reason given for services failing to meet needs or only partially meeting needs was that the parents or children would not engage with the services being offered.
- The evidence suggests that those working in Education Welfare Services are offering a wide range of effective responses and are achieving some good results in view of the seriousness and range of the needs of the children and families they are working with. There is evidence of: direct work with children, or with parents or with the family as whole, addressing parenting, behaviour and relationships; practical support in the home, in getting children to school and in helping families to access local services; advocacy on behalf of families in relation to a range of issues; working with schools and parents together to ensure a consistent response; and creative use of local voluntary sector provision to provide support to families.
- There is also evidence of the impact of the Change for Children agenda with a number of examples of quick and effective family support services, counselling and mentoring services being available directly through local schools.

- There is a strong feeling that emerges from the audit that if children's social care were more involved then children's needs would be more successfully met.
- In many cases it is difficult to see what a social worker might do that an EWO is unable to do or, indeed, is not already doing. Rather, the audit indicates that success in addressing needs would be increased if clear mechanisms were in place to enable collaboration with colleagues from other agencies, including adult services, so that multi-agency plans could be formulated and implemented to address the extent and range of need that has been identified in this audit.
- Effective collaboration will involve all agencies adopting a needs-led approach to assessment and an outcome-focused approach to drawing up plans with children and families. The implementation of the Common Assessment Framework (CAF) is an opportunity to develop and improve multi-agency working. The more recent emphasis on co-ordination across adult and children's services, particularly for cases involving adult mental health, learning disabilities or substance misuse, in the Think Family approach (2008 Social Exclusion Task Force) will also provide a helpful framework.
- Key to any multi-agency approach working is to ensure that individual cases have someone responsible for ensuring an outcome focused plan linked to the needs is drawn up and that all those involved deliver services or interventions as agreed. Members of LDSS will often be in a position to be the most effective lead professional for a child and/or family. Whether or not a lead professional can be effective in performing their role will be dependent on local areas ensuring that there are robust systems in place for identifying and resolving any problems that arise in delivering services as planned.

# Appendices

## Appendix 1: Audit Form

### AUDIT FORM *Matching Needs and Services*

Cumbria/NCB/EWS

#### Background

Identifier	<input type="text"/>	Team	<input type="text"/>
		Area	<input type="text"/>
Gender	Male <input type="checkbox"/>	Female	<input type="checkbox"/>
Age			<input type="text"/>
Ethnicity	<input type="text"/>		
Legal Action			<input type="checkbox"/>
Has legal action been taken?		Job title of case holder [EWS cases only]	<input type="text"/>
Is legal action planned?		Describe nature of legal action	<input type="text"/>

#### Needs

	Situation on day of audit	Needs on day of audit (parents & children)
Living situation	<input type="text"/>	<input type="text"/>
Family and social relationships	<input type="text"/>	<input type="text"/>
Social and antisocial behaviour	<input type="text"/>	<input type="text"/>
Physical and psychological health	<input type="text"/>	<input type="text"/>
Education and employment	<input type="text"/>	<input type="text"/>
Other, including family income level	<input type="text"/>	<input type="text"/>

#### Seriousness of needs [of child/children]

<input type="checkbox"/>	1	Likely future impairment	<input type="checkbox"/>	2	Current impairment
<input type="checkbox"/>	3	Significant impairment	<input type="checkbox"/>	4	None

How long has this parent/child/young person been in contact with your agency?

- ✓
- Under 3 months
  - 3-6 months
  - 6-12 months
  - 12months or more

What are you trying to achieve with him/her/the family?

What is the timescale for achieving this?

**Services**

What services has your agency offered ?

Specify for child / adult / family	Describe the service <i>e.g. one to one advice/group work</i>	Was it provided? <b>Yes/No</b>	If not, why not?	Frequency of service E.g. once a week.

What other services have been offered/agencies involved ?

Specify for child / adult / family	Describe service	Was it provided? <b>Yes/No</b>	If not, why not?	Which agency is providing it?

Are services being provided that meet the needs you have identified overleaf?

- Yes    
 No    
 Partially

Please explain

What should happen to address the needs identified?