



**Oxfordshire County Council
Children, Education & Families
Health and Wellbeing Board**

26th September 2019

Family Safeguarding Plus Model



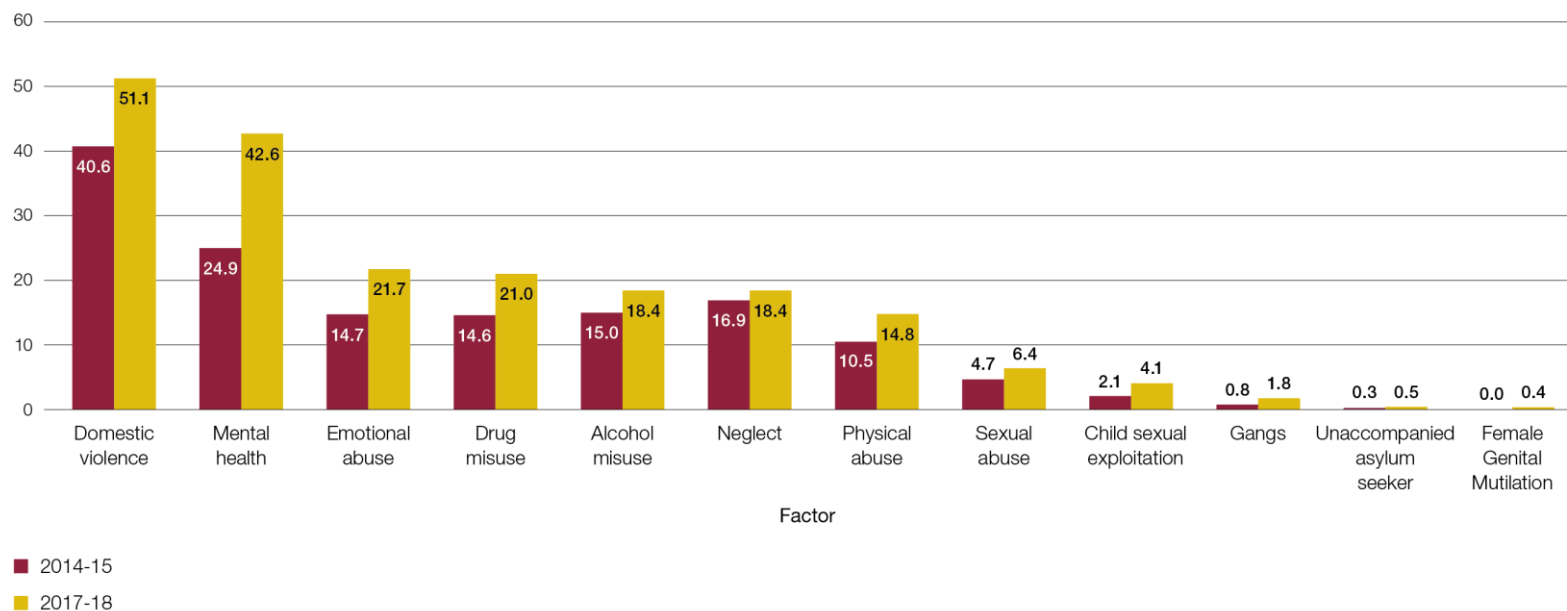
What is driving demand?

Figure 6

Incidence of risk factors in local authority safeguarding assessments between 2014-15 and 2017-18

In 2017, domestic violence was the most common risk factor identified at the end of an assessment for children in need

Percentage of factors during assessment (%)



Notes

- 1 Not all factors from Statistical First Release included in analysis.
- 2 An assessment may have more than one factor recorded.

Source: National Audit Office analysis of Department for Education's Statistical First Release on children in need



2017/18 Oxfordshire safeguarding activity – Risk Factors

Risk factor	How often a child went on to a plan where this risk factor was recorded		Number of assessments identifying this risk	% of times it went to a plan
	No	%		
Parent Domestic Violence	455	58.9%	1829	24.9%
Child Emotional Abuse	433	56.0%	1232	35.1%
Child Neglect	410	53.0%	859	47.7%
Parent Mental Health	374	48.4%	1500	24.9%
Child Physical Abuse	251	32.5%	1052	23.9%
Parent Alcohol Misuse	247	32.0%	840	29.4%
Parent Drugs Misuse	233	30.1%	680	34.3%
Child Domestic Violence	193	25.0%	620	31.1%
Child Unacceptable Behaviour	173	22.4%	714	24.2%
Child Sexual Abuse	54	7.0%	396	13.6%



Ambitions of Family Safeguarding Plus

- Work more effectively with parents
- Increase engagement with families by increasing the help they receive (specifically domestic abuse, mental health & substance/alcohol abuse)
- Keep more high risk families together safely
- Improve health and educational outcomes for children
- Reduce physical and emotional harm in families
- Strengthen information-sharing and shared decision-making to better protect children and reduce harm to their parents
- Reduce the amount of time children spend in care



Family Safeguarding Model

The **Four Key** elements are:

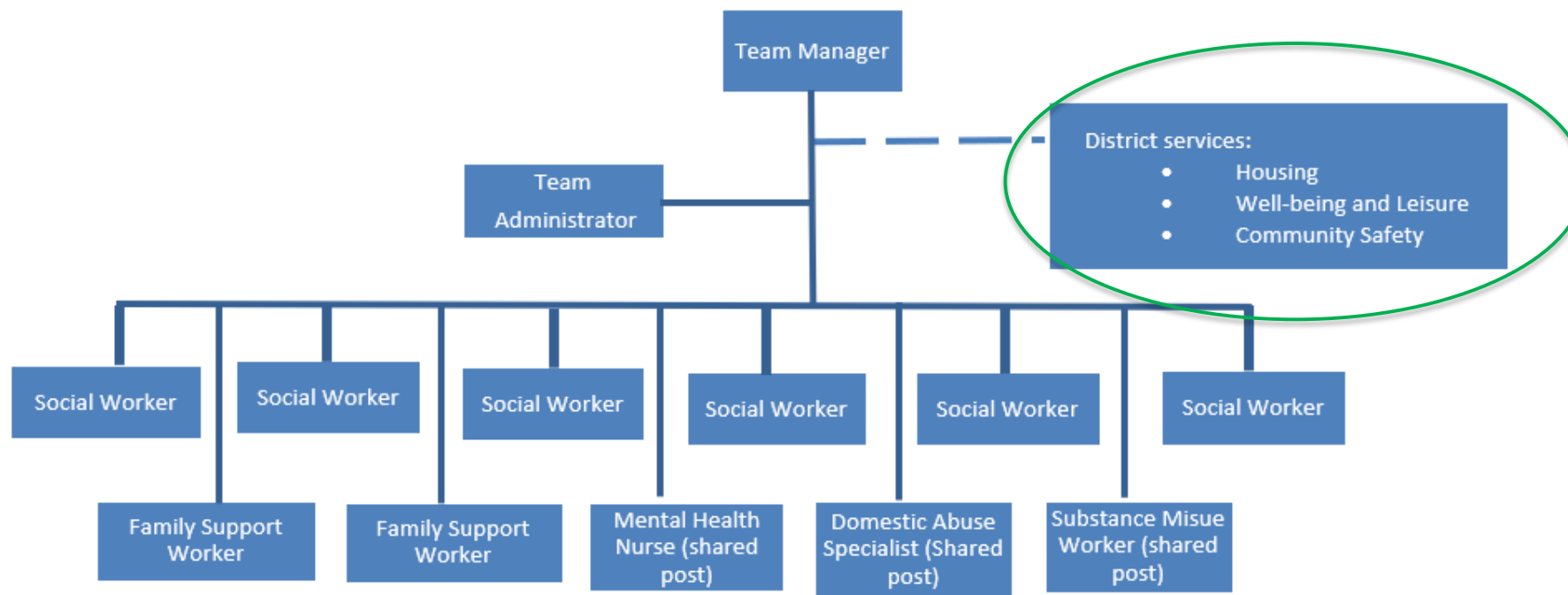
1. Partnership working through multi-disciplinary Family Safeguarding Teams – Group supervision
2. A core skill set with Motivational Interviewing at its heart - shared unified model of practice
3. A structured ‘workbook’ approach to assessing parent’s ‘capacity for change’ - reducing bureaucracy
4. Tracking impact - an outcomes based performance framework





Family Safeguarding Model

Proposed Team Structure





Family Safeguarding Model

Indicative benefits (Herts after 18mths)

For families

- 66% reduction in repeat police call outs to domestic abuse incidents
- 53% reductions in emergency hospital admissions for adults
- 50% reduction in use of 'care' by the County Council - 200 fewer under 12s in care
- 38% improvement in school attendance
- 50% reduction in children subject to CP plans
- 38% reduction in care proceedings

For the service

- Reductions in A&E and Police expenditure
- Staff across all disciplines feel more confident and less stressed
- Improved recruitment and retention of staff with 7% vacancies in hard to recruit posts (December 2017)
- £2.6m reduction in expenditure for the Local Authority in first year including placements, legal and staffing costs



Progress to date

- Secured £4.8 million investment and commitment from OCC to roll out FSP
- Engaged project lead and project manager
- Set up project governance
- Extensive analysis of needs and potential impact
- Engagement with key stakeholders
- Agreed to develop local name and brand (co-produced with service users)



SYSTEM CHANGE POSTS



System Change Posts

- Alcohol & Substance misuse workers (10 posts) - A pilot has also taken place with Public Health funded drug/alcohol workers working closely with children's services (this is being evaluated and is due to report shortly)
- Domestic Abuse Workers (10 posts – to work with perpetrators and complement social care work with victims)
- Mental Health Workers (10 posts)

- Also developing a pilot with housing and leisure staff from CDC



System Change Posts

- The specialist adult workers are important for improving outcomes providing not just specialist input but a move towards a more multidisciplinary way of thinking about families. They will work with families with the most severe difficulties (in Herts - Families' use of other services reduced after allocation to FSP)



Funding Adult Focused Posts

- OCC has agreed to fund the 30 new posts for up to 18 months
- This funding is to create a catalyst for change and focus on helping whole families
- This approach has been successful in Herts and other areas, delivering real improvements for both children and parents



WORK FORCE DEVELOPMENT



Five General Principles of MI

- Express Empathy
- Explore Ambivalence
- Develop Discrepancy
- Roll with Resistance
- Support Self-Efficacy

Throughout – emphasise the desirable



Partnership Outcomes Based Performance Framework

Children & Young People Factors	Parental Factors	Partnership Factors	Process Factors
<ul style="list-style-type: none">- Learner engagement- School attendance- Elective Home Education- School attainment- Child emotional health & wellbeing	<ul style="list-style-type: none">- Home environment scores- Family relationship scores- Domestic abuse incidents- Substance misuse rates	<ul style="list-style-type: none">- Parental police arrests and cautions- Parental prosecutions- Parental attendance at A&E	<ul style="list-style-type: none">- Repeat referrals- Repeat child protection plans- Rate of child protection plans- Rate of children entering care

What would we like to see in an Oxfordshire partnership framework?



Mapping & Understanding System Need

1. Why whole family working?
2. The trigger trio – need; provision; gap



3. Moving into the gap



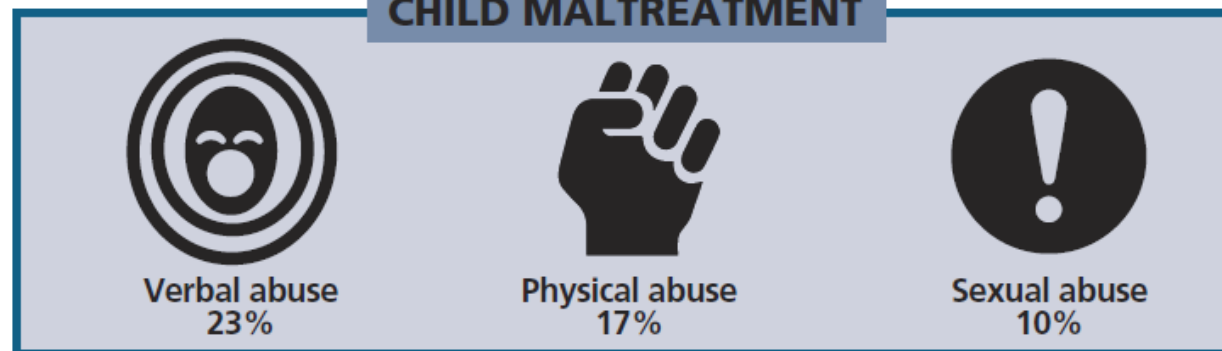
Adults in Wales exposed to ACEs

0 ACEs	53%
1 ACE	20%
2-3 ACEs	13%
4+ ACEs	14%

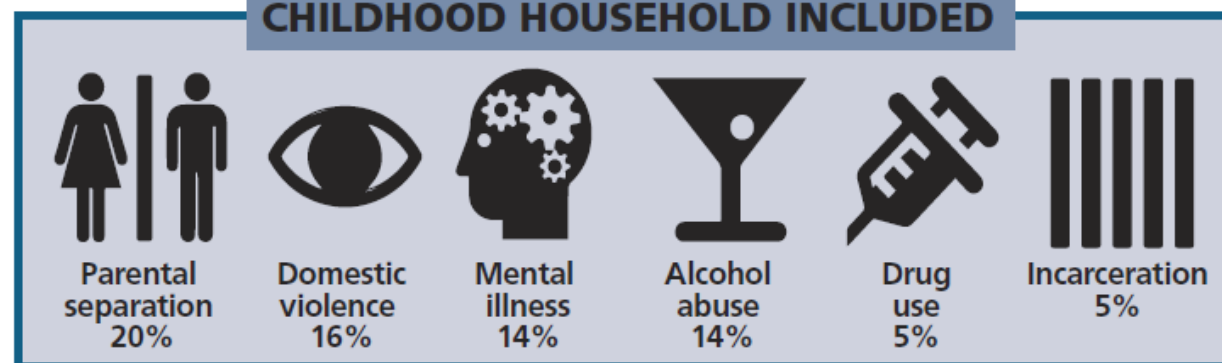
Compared to people with no ACEs those with 4 or more were the following times more likely to be

High risk drinker	4
Involved in teenage pregnancy	6
Smoker	6
Underage sex	6
Smoked cannabis	11
Victim of violence	14
Committed violence	15
Used crack cocaine or heroin	16
Been incarcerated	20

CHILD MALTREATMENT



CHILDHOOD HOUSEHOLD INCLUDED



Tackling these can turn many lives around



“Its art not science ... & more surreal than expressionism”

So it would suggest the potential for ...

- **> 1000** fewer heroin/crack cocaine users
- **250** fewer people jailed a year
- **3,000** fewer violent crimes a year
- **4,000** fewer DV call outs
- **11,000** fewer binge drinkers
- **6,000** fewer smokers
- **350** fewer Looked After Children
- **350** fewer Child Protection Plans



**Better lives
Saved resources**





Estimates of the Trigger Trio

	Common Mental Disorder	Borderline personality disorder	Antisocial personality disorder	Psychotic disorder	psychiatric disorders
Cherwell	16,706	2,122	2,973	620	6,371
Oxford	19,761	2,511	3,631	741	7,601
South Oxon	15,294	1,942	2,709	566	5,825
Vale	14,408	1,830	2,561	534	5,493
West	11,892	1,510	2,106	440	4,529
Oxfordshire	78,099	9,919	13,985	2,902	29,833

	Alcohol dependency (mild, mod & severe)	Drug Dependency (mild, mod & severe)
Cherwell	5,323	3,014
Oxford	6,499	3,659
South Oxon	4,851	2,749
Vale	4,586	2,597
West	3,771	2,137
Oxfordshire	25,043	14,165

	Domestic Violence notifications (17/18)
Cherwell	1,904
Oxford	1,550
South Oxon	1,076
Vale	1,046
West	1,045
Oxfordshire	6,621

Data taken from www.pansi.org.uk: run by Institute Public Care; Estimates are based on the report Adult psychiatric morbidity in England, 2007: Results of a household survey, published by the Health and Social Care Information Centre in 2009

Data taken from Thames Valley Police: Domestic Violence Notifications 2017/19

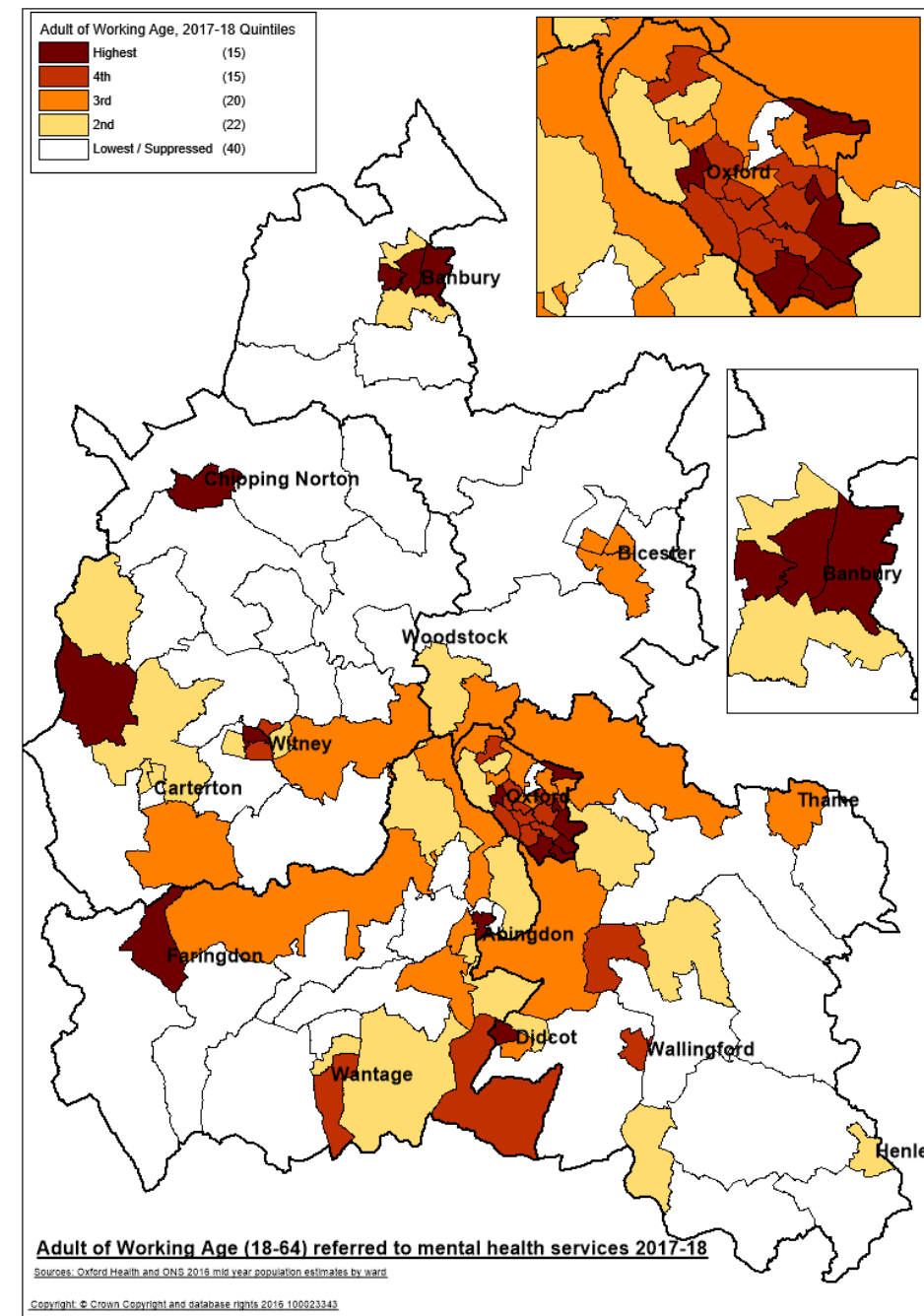


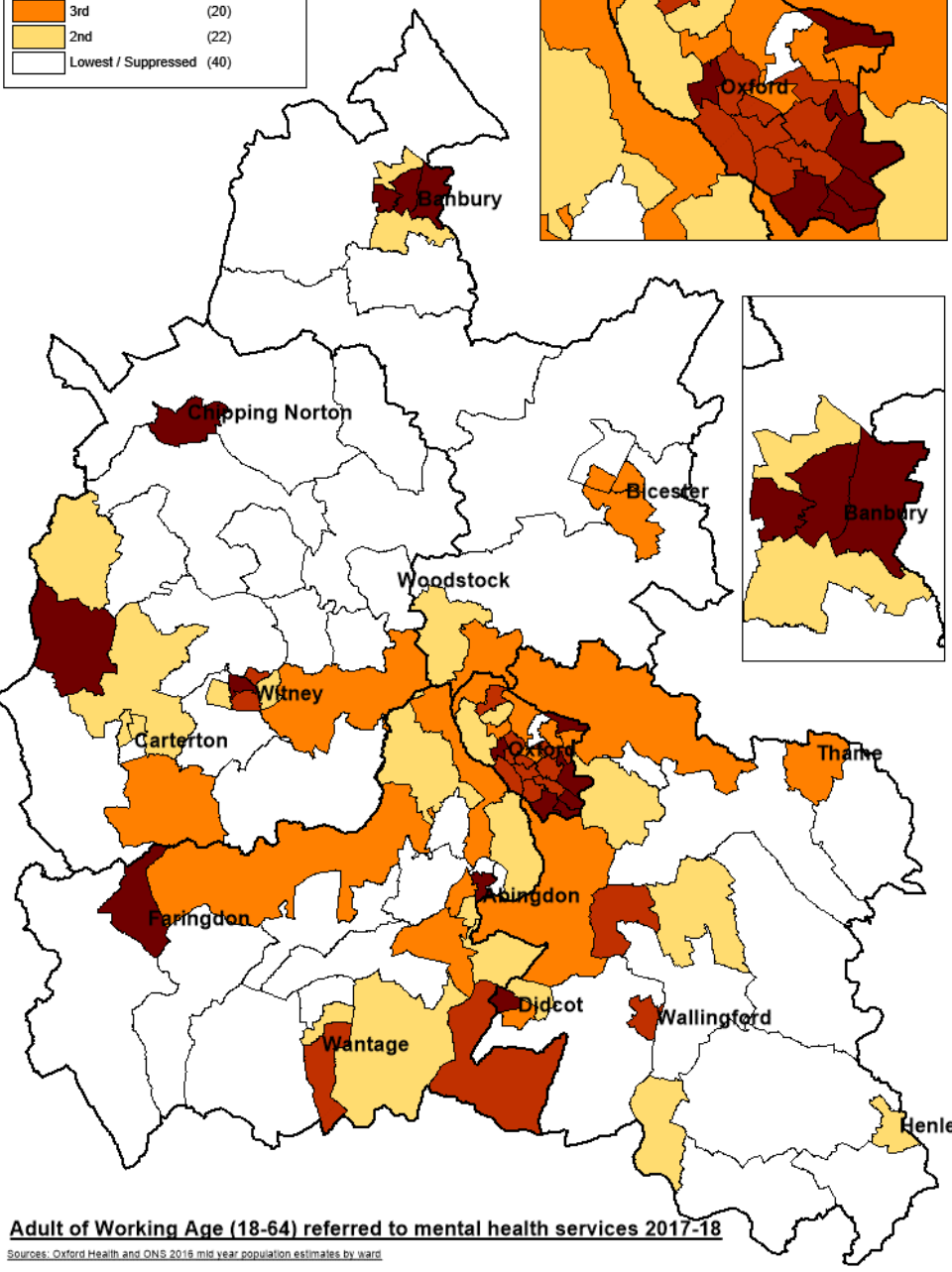
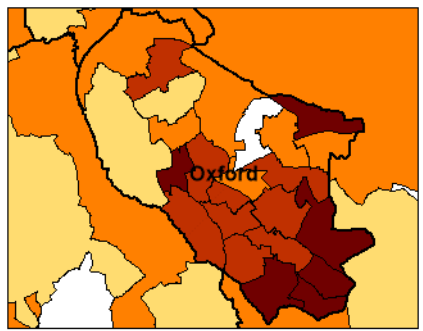
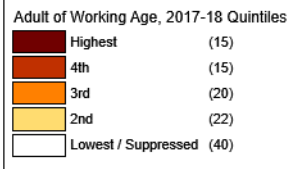
Referrals: Adults of a Working Age for Mental Health Services (2017-18)

In 2017/18: 12,804 referrals of adults of a working age to Oxford Health Mental Health Services.

A third were from Oxford City; a fifth from Cherwell, and the lowest rate number was from West Oxfordshire

	No.	%
Cherwell	2,623	20%
Oxford	4,082	32%
South Oxfordshire	2,107	16%
Vale of White Horse	2,266	18%
West Oxfordshire	1,726	13%
Oxfordshire	12,804	100%





Adult of Working Age (18-64) referred to mental health services 2017-18

Sources: Oxford Health and ONS 2016 mid year population estimates by ward

78,000

Common mental health disorder

13,000

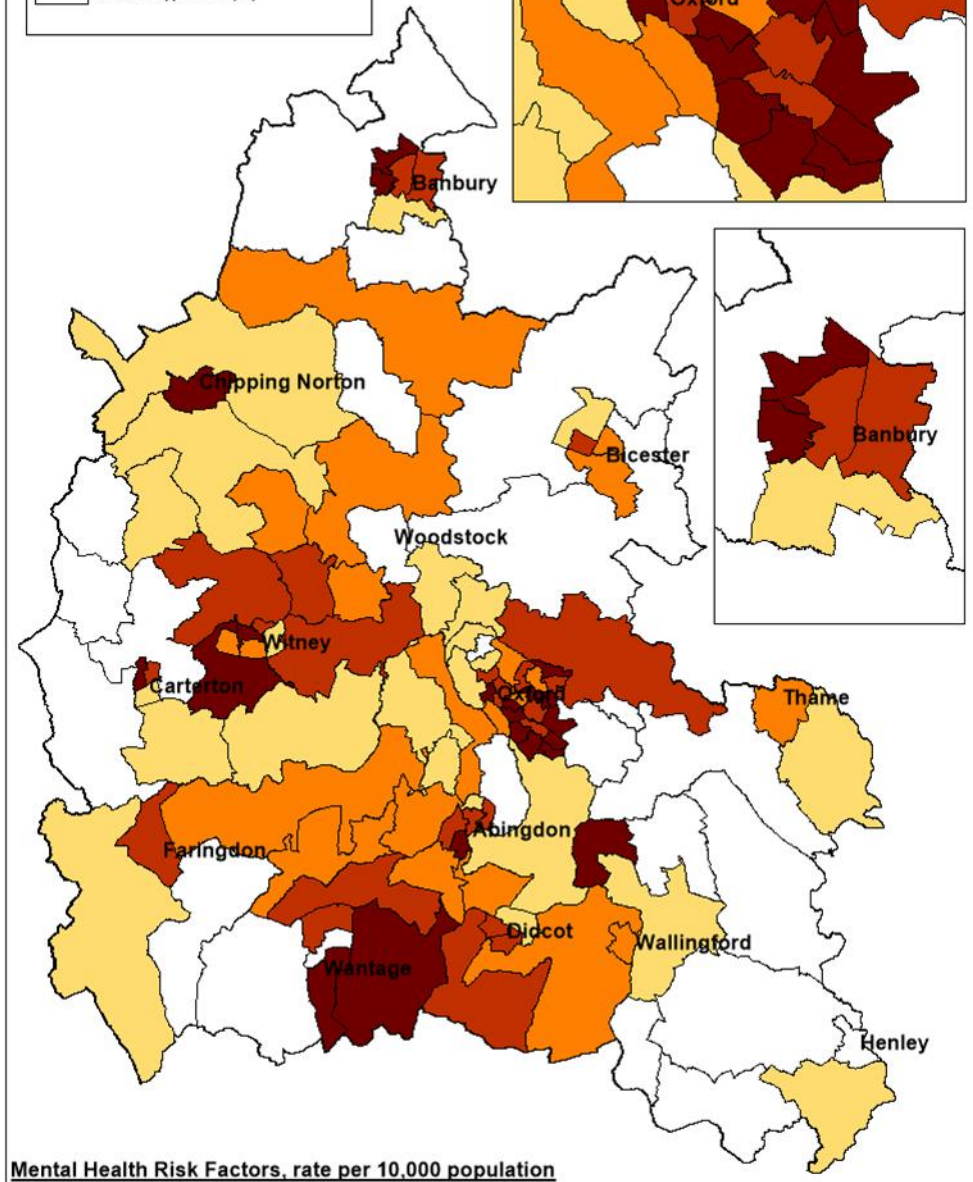
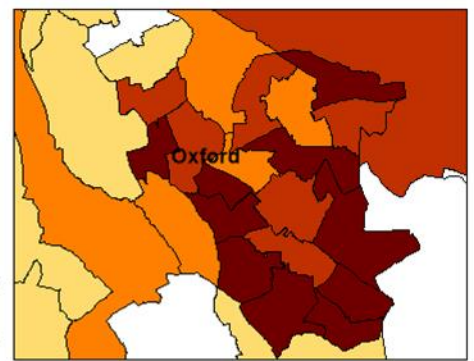
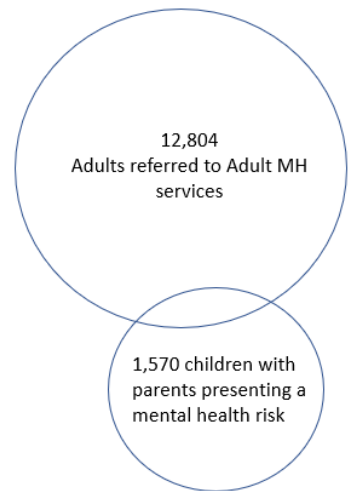
Referrals (AWA)

1,570

social care cases (39%) with adult mental health risk factor

Wider distribution of cases where risk factors identified than service use

78,000 Adults estimated to have a common mental health disorder



Mental Health Risk Factors, rate per 10,000 population

Data Sources: Oxfordshire County Council Assessment Risk Factors and ONS 2016 mid year population estimates by ward

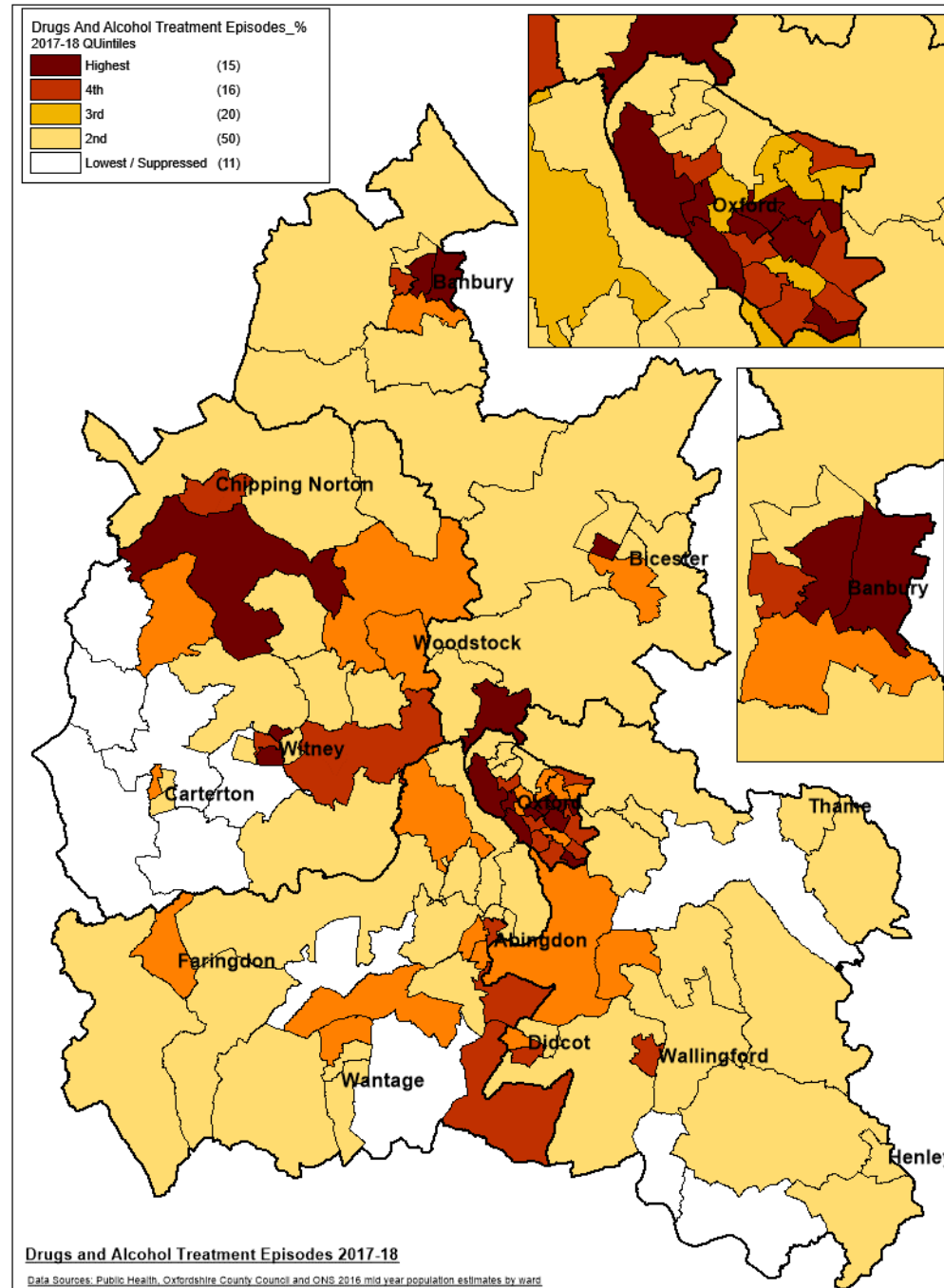


Drug & Alcohol Services (2017-18)

In 2017/18 there were 4,583 people attended Drug and Alcohol services commissioned through public health.

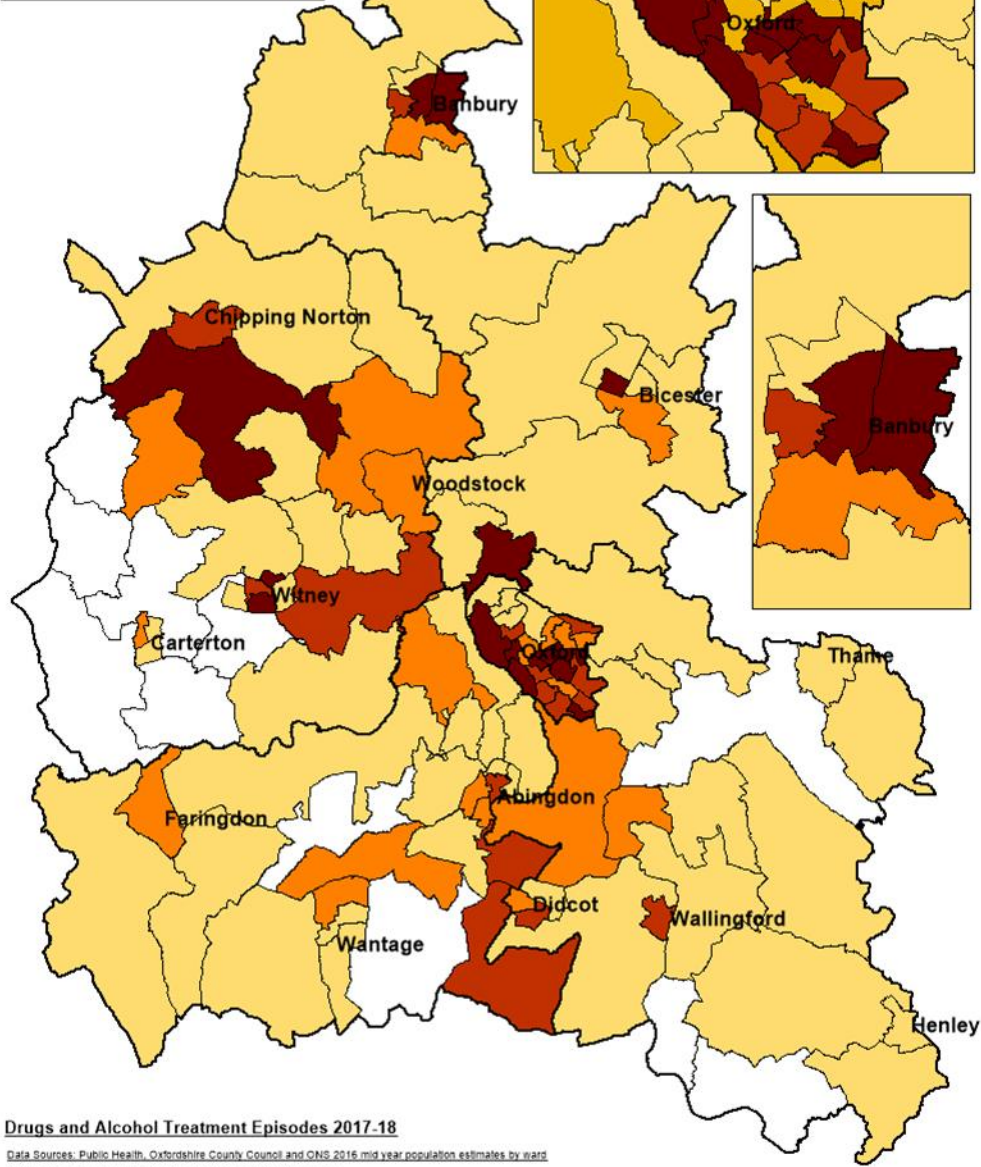
A third were in Oxford City and a quarter in Cherwell

	No.	%
Cherwell	1,159	25%
Oxford	1,580	34%
South Oxfordshire	585	13%
Vale of White Horse	652	14%
West Oxfordshire	607	13%
Oxfordshire	4,583	100%



Drugs And Alcohol Treatment Episodes_%
2017-18 Quintiles

Highest	(15)
4th	(16)
3rd	(20)
2nd	(50)
Lowest / Suppressed	(11)



Drugs and Alcohol Treatment Episodes 2017-18
Data Sources: Public Health, Oxfordshire County Council and ONS 2016 mid year population estimates by ward
Copyright: © Crown Copyright and database rights 2016 100023343

Est 25,000

Adults mild to severe alcohol dependence

Est 14,000

Adults mild to severe drug dependence

4,583

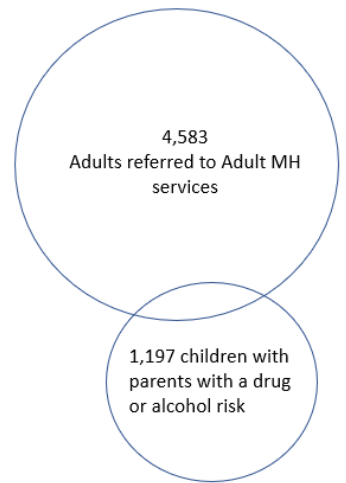
People receiving treatment

1,197

social care cases (30%) with adult drug / alcohol risk factor

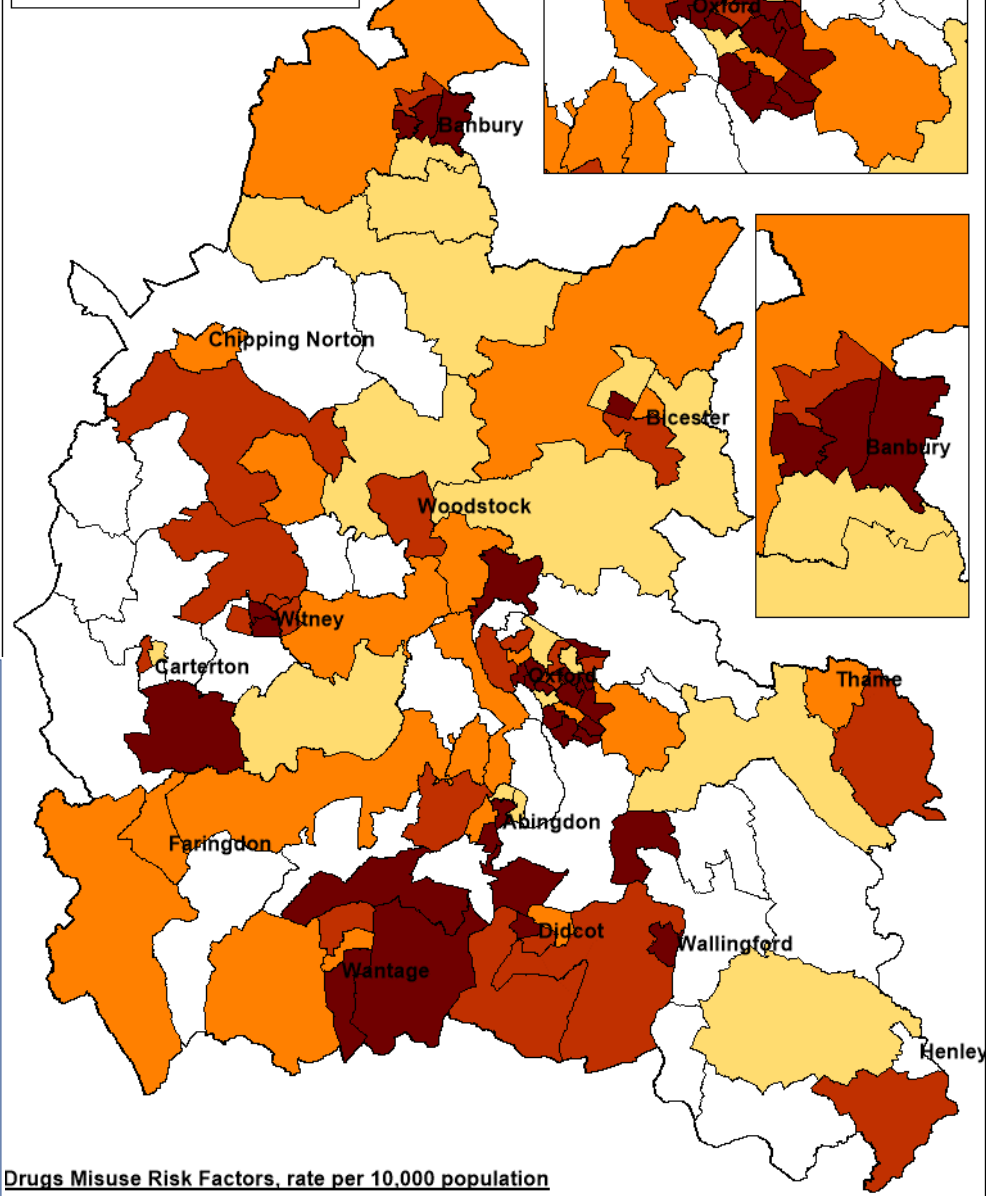
Slightly wider distribution of cases in the risk factors but similar distribution

25,000 alcohol dependent adults
14,000 drug dependent adults



Drugs Misuse Risk Factors per 10K populatci

Highest	(28)
4th	(21)
3rd	(20)
2nd	(15)
Lowest / Suppressed	(28)



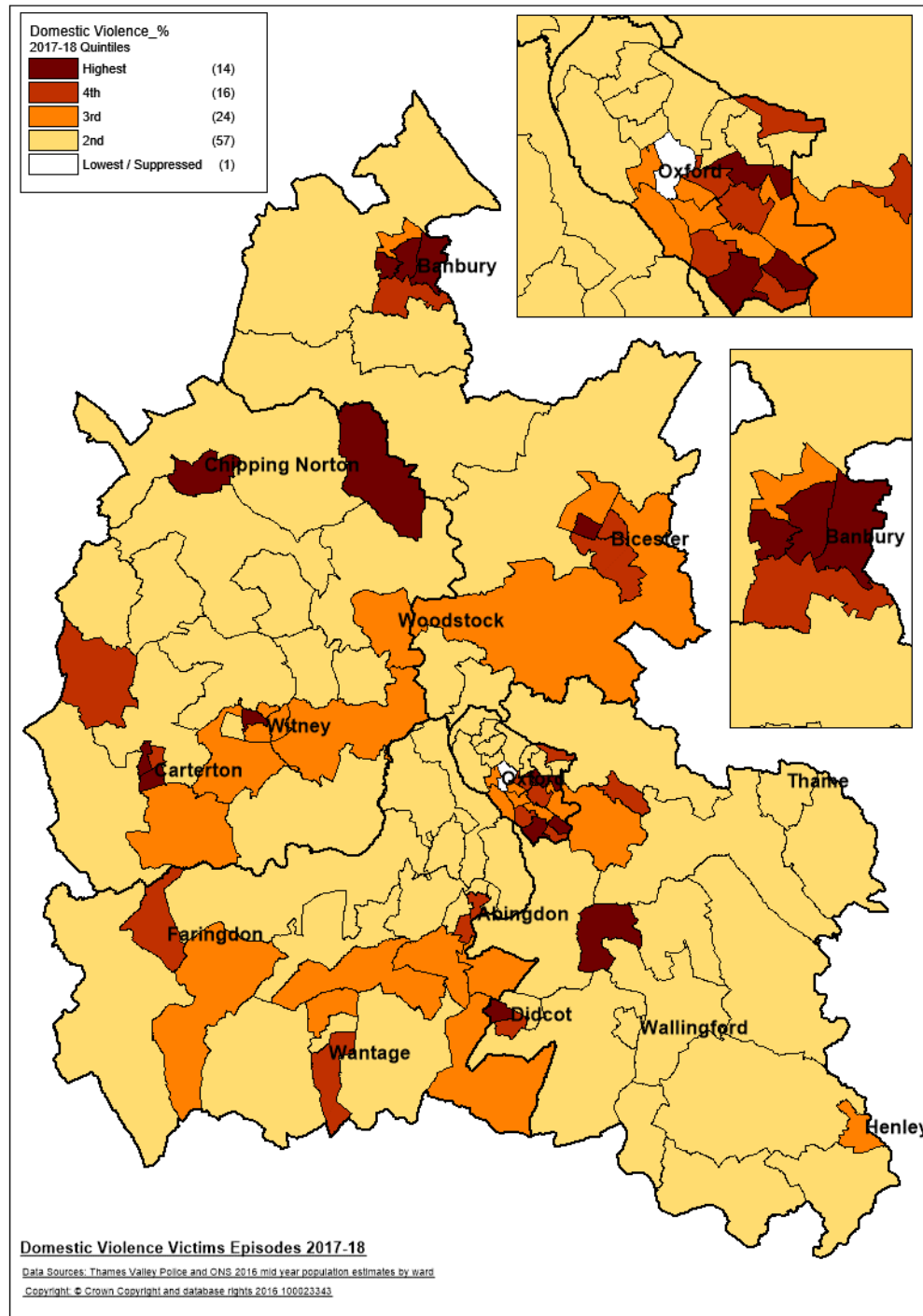
Drugs Misuse Risk Factors, rate per 10,000 population
Data Sources: Oxfordshire County Council Assessment Risk Factors and ONS 2016 mid year population estimates by ward
Copyright: © Crown Copyright and database rights 2016 100023343

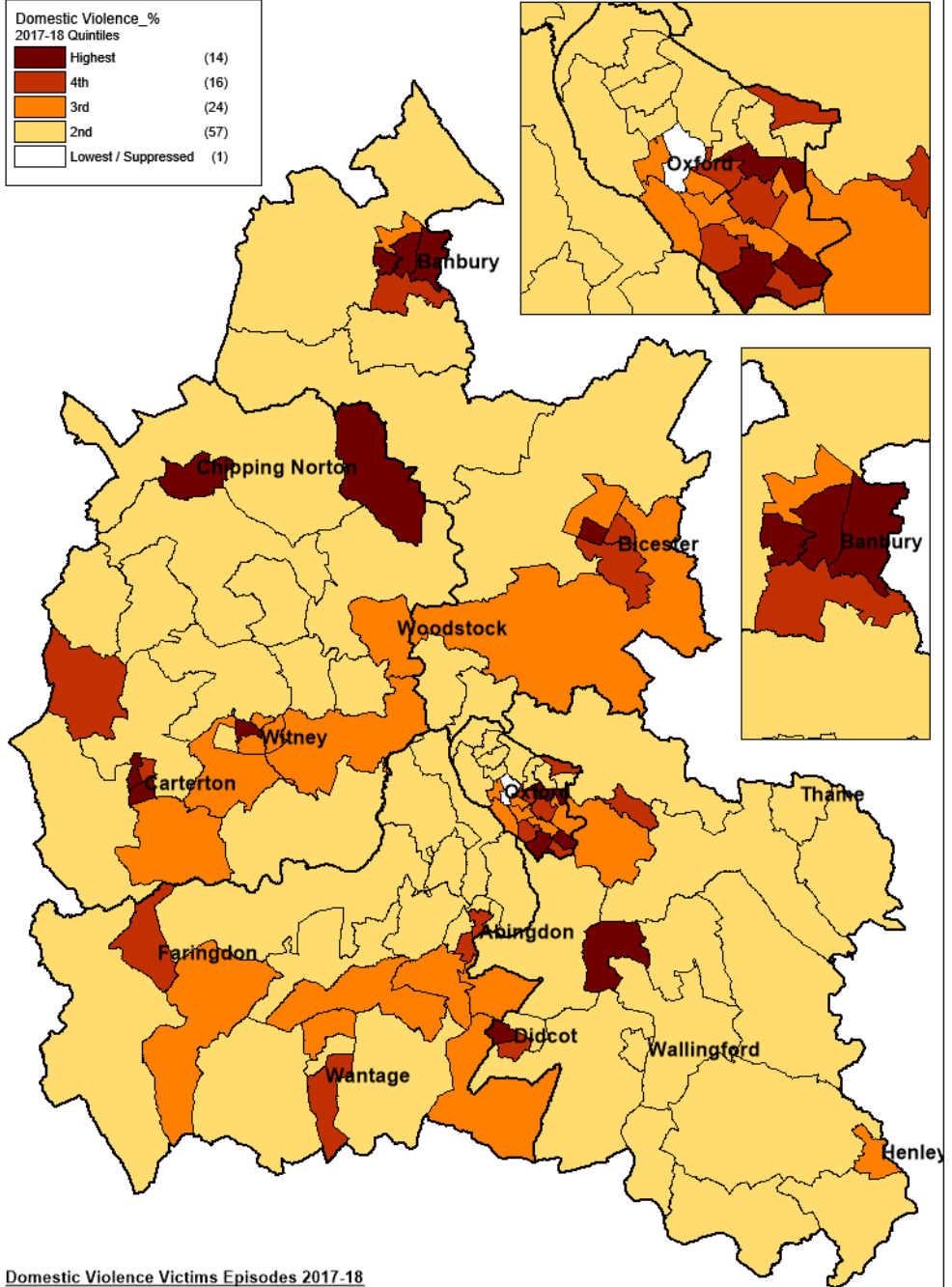
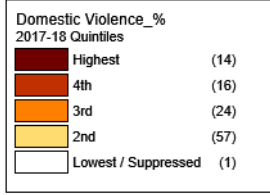


Domestic Violence Notifications (2017-18)

In 2017/18 there were 6,621 domestic violence notification. Over a half occurred in Cherwell and Oxford City – with Cherwell at 29%

	No.	%
Cherwell	1,904	29%
Oxford	1,550	23%
South Oxfordshire	1,076	16%
Vale of White Horse	1,046	16%
West Oxfordshire	1,045	16%
Oxfordshire	6,621	100%





Domestic Violence Victims Episodes 2017-18

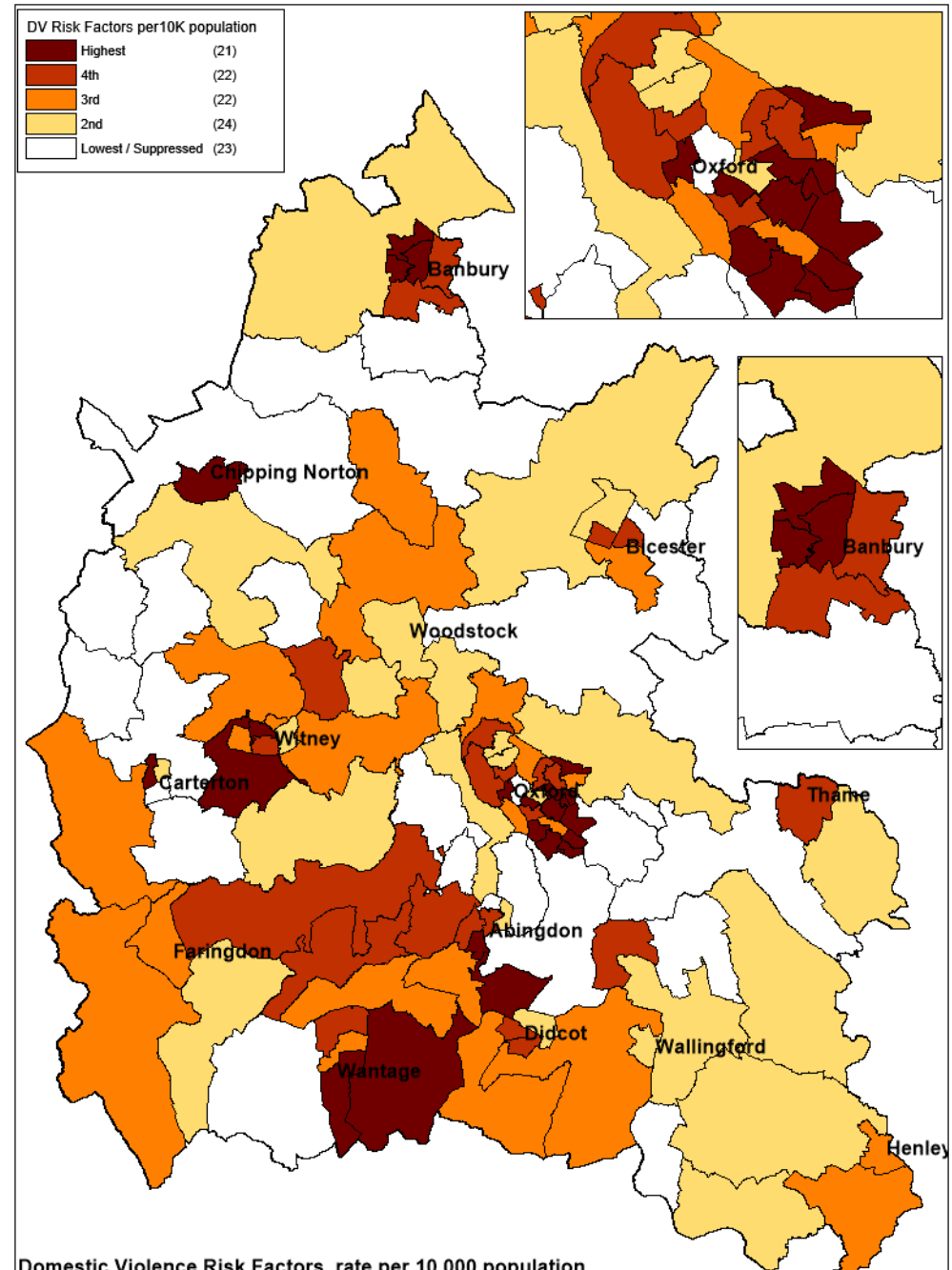
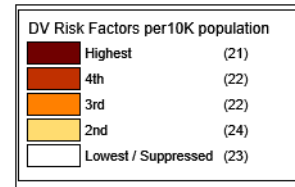
Data Sources: Thames Valley Police and ONS 2016 mid year population estimates by ward
Copyright © Crown Copyright and database rights 2016 100023343

6,621

Domestic Violence
Notifications

1,437

social care cases (37%) with
domestic violence risk factor



Domestic Violence Risk Factors, rate per 10,000 population

Data Sources: Oxfordshire County Council Assessment Risk Factors and ONS 2016 mid year population estimates by ward

Copyright © Crown Copyright and database rights 2016 100023343



Some thoughts

Benefits of whole family working: today and tomorrow



Known Gap - Some sits with vulnerable families

**WHERE
- TO -
NEXT
?**

