IMPROVING CHILDREN'S SERVICES DECISION MAKING WITH FAMILY CONTEXT

DISCOVERY PROJECT – MID-POINT FINDINGS EXECUTIVE SUMMARY AND KEY FINDINGS
DRAFT FOR COMMENT

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We've spoken to 50+ staff across Leeds & Stockport to assess need for better family information

- Over the past 8 weeks Stockport, Leeds and Social Finance have been working together on a discovery project to identify if and where better information on a child's family context – the risks and strengths of their family members – would radically improve decision making
- We've interviewed 50+ frontline staff, managers and business intelligence staff from child and family and supporting services across Leeds and Stockport and have held Show and Tell workshops to test, refine and prioritise our findings
- We've taken an open approach, looking broadly at all needs users have, so we can assess how often family context is one of the major needs and how important it is

This shows very similar needs across the two councils, but also between users within councils

- Although systems and service structures differ between the two, we've found that the vast majority of user needs are common – we've also found these mirrored in our parallel discovery project in Wigan and Cheshire West and Chester
- We've also found strong commonality in needs between users within councils (particularly Early Help & Social Work), caused by common and fundamental root causes e.g. no systematic way to get family context

There is very strong demand for better data on child journey and family – lack of this data undermines practice and increases risk

- Frontline workers lack basic information on who a child's family are, who they live with and what services the family interacts with. This information is essential to make the right choice on what support to offer at time of assessment, intervention planning or point of closure: *"One piece of information can change the decision for a family"*
- Without a systematic way to get this information, both Early Help and Social Workers are currently using ad hoc and lengthy "detective" processes. This often depends on personal relationships and workarounds
- For the most important "set piece" decisions (e.g. MASH/MASSH, MARAC) both councils have effective, but person-intensive, manual sharing processes through having every service present in a room – this works well for the immediate data sharing but less well for ongoing sharing, outcome tracking or out of hours. It would be too expensive to have a co-located multi-agency approach for all day-to-day Social Work and Early Help decisions
- Leadership lacks a view of what services interact for families and where this works well or not when e.g. deciding which services to commission or how to improve operations

Six key user needs have emerged as priorities, two relating specifically to family context:

1. **Information on family –** Frontline staff and managers can't easily access basic information on the family (e.g. who they are and what services they interact with) which they need to assess risk and coordinate support – this is particularly acute at the first assessment point
   "I don't have access to other people's systems, so I make calls around."

2. **Management Information** – Limited outcomes data prevents leadership from understanding the impact of services. For example, information on which services offered to families work well in combination to achieve positive outcomes for the families.
   "What does success look like for an EH offer for a Local Authority?"

Four of the key user needs were more general than family context:

3. **Extract key information from Case Management Systems** - Case files consist of very long and detailed notes making it difficult for frontline staff to identify key information.
   "Currently we have to wade through documents and documents and documents"

4. **Referral forms** – The quality of referrals that frontline staff receive varies, with many lacking key information, meaning extensive chasing is required and details can be missed.
   "The referral can be just one line"

5. **Data access –** There is misunderstanding in relation to data sharing and strong risk aversion to IG, meaning that frontline staff and leadership lack vital information for decision making
   "There can be an attitude of 'that's my data, not yours'"

6. **Data quality -** Data quality is a major issue for analysts, frontline and leadership. Whilst some is inevitable, some results from laborious data entry processes
   "There's often errors in the data, but there's no way I can fix it across all systems"

We are taking forward better information on services engaged with the family for frontline workers

- We presented the key family context user needs back to Leeds and Stockport leadership, the users we interviewed and a wider group of 9 councils – these conversations suggested that immediate priority should be frontline workers need to know what services are engaged with the family
- Over the next 4 weeks we will take this user need forward, examine potential solutions including technical and IG feasibility, overlap with existing solutions and business cases
- This will result in a plan for a potential alpha product: a prototype of a solution to give better access to key information when making decisions
- We will then collectively decide whether to progress to alpha

Our aim is to create something that works for Stockport, Leeds and other councils

- Stockport and Leeds are both committed to leading and building solutions that work others as well
- Both Leeds and Stockport are already doing innovative work on new tech solutions, but these are working in isolation meaning work is repeated – we should do more to work with other councils building similar solutions

A key issue will be data sharing, this needs to be more consistent and well understood

- At the overall service level, IG processes are conservative and limit systematically sharing data. With the void of sharing channels, individuals lean towards oversharing, sometimes without proper consideration of data protection
- Poor understanding of data protection and security at the individual level leads to risky practice
- There are also cultural barriers to data sharing. Some people have a "that's my data not yours" attitude
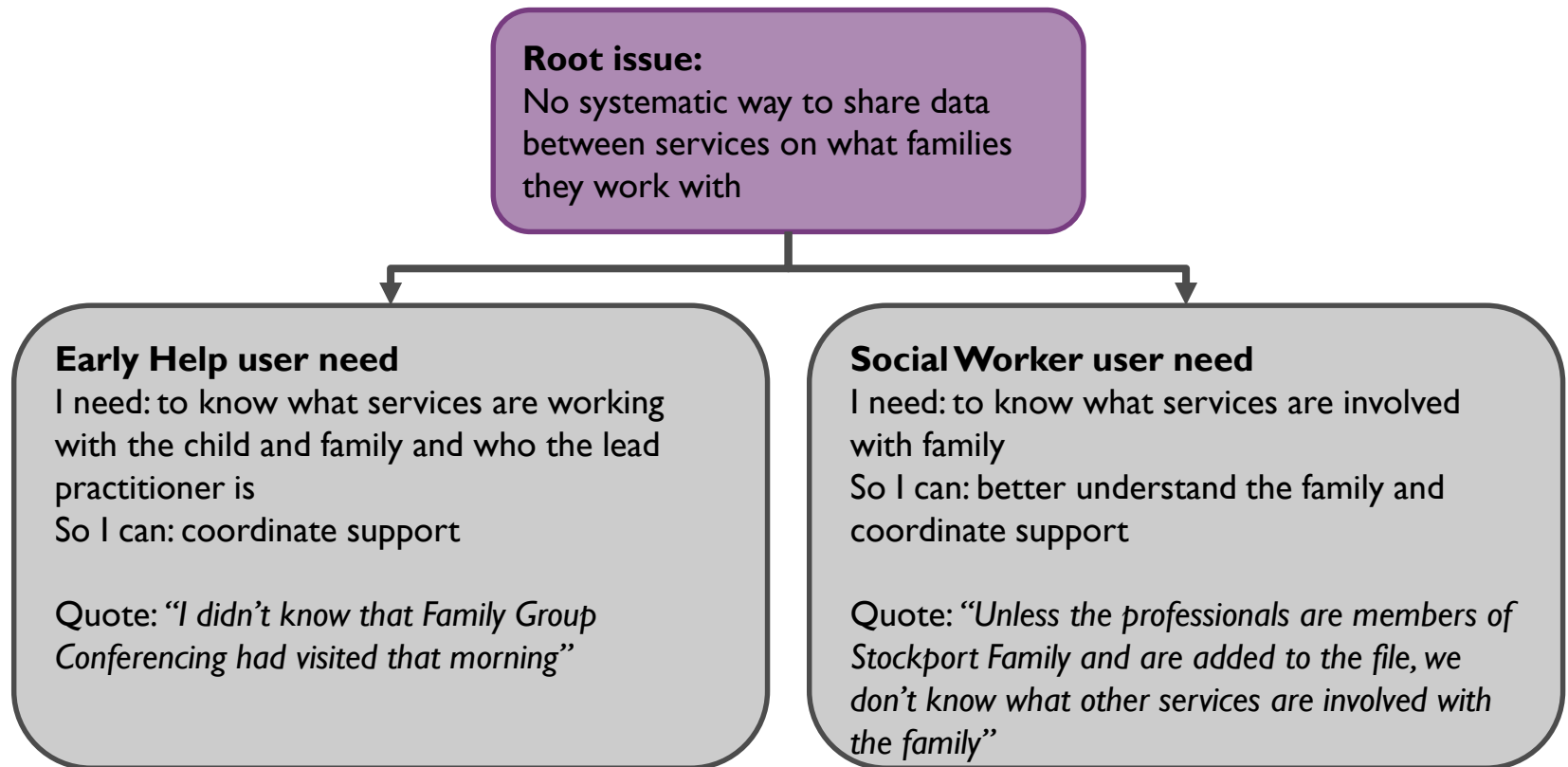
We have also seen demonstration of other more general issues

- Lack of information sharing means services don't always align, and don't know that others are engaged
- Families moving between councils cause major data sharing problems
- A meetings culture and firefighting means mid-level and senior staff do not have time to think
- Some front-line staff are sceptical and weary of data and digital – it is key that tools directly address their needs
- Data entry is a burden for front-line staff, leading to poor quality and contributing to data retrieval burden

WE FOUND STRONG COMMONALITY IN NEEDS ACROSS USERS – THESE ARE DRIVEN BY COMMON ROOT CAUSES

Example:

Root issue:
No systematic way to share data between services on what families they work with

Early Help user need
I need: to know what services are working with the child and family and who the lead practitioner is
So I can: coordinate support

Quote: *"I didn't know that Family Group Conferencing had visited that morning"*

Social Worker user need
I need: to know what services are involved with family
So I can: better understand the family and coordinate support

Quote: *"Unless the professionals are members of Stockport Family and are added to the file, we don't know what other services are involved with the family"*

HOWEVER IT WILL BE MORE TRACTABLE TO FOCUS ON SOLVING THE ROOT ISSUE FOR ONE USER GROUP INITIALLY

WE ALSO FOUND A SET A MORE GENERAL SET OF PRIORITY USER NEEDS, NOT RELATING TO FAMILY CONTEXT

Extracting key info from CMS

Summary: Case files consist of very long and detailed notes making it difficult to identify key information pieces

Users: Social Workers

Quote: *"Sometimes there's 600 case notes to wade through"*

Referral forms

Summary: Frontline staff often receive referral forms that lack key information. This could range from a lack of contact number to details of who is working with the family

Users: Social Workers, EH workers and Front door

Quote: **"***the referral often lacks details on the incident***"**

Data access

Summary: Strong risk aversion and lack of understanding of IG holds back data sharing. Although all councils face the same challenge, there are no commonly shared approaches to IG

Users: All users

Quote: *"There's sometimes an attitude of 'that's my data, not yours'"*

Data quality

Summary: Poor data quality holds back the use of evidence in decision-making and is an extensive drain of analyst time. This is a common problem across councils

Users: Analysts **+** All users

Quote: "*poor quality data quickly erodes trust in analysis*"

THESE ARE IMPORTANT ISSUES TO UNDERSTAND WHICH COULD BE ADDRESSED IN FUTURE DISCOVERY WORK

OVERALL USERS PRIORITISED SIX FAMILY CONTEXT NEEDS UNDER TWO MAIN THEMES AS BEING THE MOST IMPORTANT

Individual family information – Frontline workers (SWs, EH & Front Door) all need quick and reliable access to basic information on the family. They need to know:

1a **Who is the child's family and who do they live with?**
…so they can ensure they don't miss risk factors or support options

1b **What services are engaged with the family?**
…and have contact details so they can reliably assess risk and coordinate support

1c **What are the risks factors of each family member?**
…(e.g. for substance issue: what's the nature of this?) so they can reliably assess risk

1d **What is the quality of the relationships between family members?**
…so they can understand family strengths and risks

Management information – Leadership need to understand how services work for families to improve decision making. They need to know:

2a **Which groups of needs and services typically go together?**
…so they can to highlight issues and improve coordination

2b **What approaches give good outcomes?**
…so they can improve future decision making

WE TOOK THESE TO A WORKSHOP WITH 9 COUNCILS AND PRIORITISED THEM AGAINST FOUR CRITERIA TO ASSESS WHICH TO TAKE FOCUS ON TAKING FORWARD

We considered each of the top user needs against the following criteria...

❑ **Immediate value**

Are any changes required for a solution to fit within current services and workflows?

❑ **Potential Impact**

How could addressing this need create better outcomes for children and families?

❑ **Replicability**

Does this user need resonate? What are the conditions needed for it to apply?

❑ **Technical and IG feasibility**

Is a 'high-tech' solution required to address this need? What data sharing and processing is needed?

UNDERSTANDING THE SERVICES ENGAGED WITH THE FAMILY EMERGED AS THE IMMEDIATE PRIORITY

Overall highest priority & good first step given dependencies

Individual family information	Immediate value	Potential impact	Replicability	Technical & IG feasibility
1a Who is the child's family and who do they live with?	✓✓✓			✗ ✗
1b What services are engaged with the family?	✓✓✓✓	✓✓	✓✓	✓ ✗
1c What are the risks factors of each family member?	✓	✓	✓	✗
1d What is the quality of the relationships between family members?	✓✓✓	✓✓		✗ ✗

Management information	Immediate value	Potential impact	Replicability	Technical & IG feasibility
2a Which groups of needs and services typically go together?	✓	✓	✓	✓ ✗
2b What approaches give good outcomes?	✓✓	✓✓	✓	✓ ✗

THIS MATCHED WITH SHOW AND TELL PRIORITISATIONS AND ALSO THE VIEWS OF STOCKPORT AND LEEDS LEADERSHIP…

WE WILL TAKE THIS USER NEED FORWARD AND INVESTIGATE HOW WE CAN EFFECTIVELY ADDRESS IT

✓ = individuals voted that user need scores well on this criteria   ✗ = individuals voted that user need scores poorly on this criteria