

# People and Health Scrutiny Committee

## 20.9.21

### Dorset Children Thrive

#### For Review and Consultation

**Portfolio Holder:** Cllr A Parry, Children, Education, Skills and Early Help

**Local Councillor(s):** All

**Executive Director:** T Leavy, Executive Director of People - Children

Report Author: Claire Shiels  
Title: Dorset Children Thrive  
Tel: 013053224682  
Email: [claire.shiels@dorsetcouncil.gov.uk](mailto:claire.shiels@dorsetcouncil.gov.uk)

**Report Status:** Public

**Recommendation:** Members of scrutiny committee are asked to consider the implementation of the new model 'Dorset Children Thrive' and the impact on quality and performance.

**Reason for Recommendation:** Member have previously received information on planned changes and requested a progress update following implementation.

#### 1. Executive Summary

- 1.1 This report provides an update on the implementation of the new operating model for children's services (Dorset Children Thrive). An overview of the model is provided alongside distance travelled on key performance indicators since implementation.
- 1.2 As members have previously received performance reports and a full self-evaluation report in February 2021, this report focuses on areas of improvement that the new model was specifically seeking to address which included governance; leadership and accountability; recruitment and retention; employee engagement; offering help at the right level; use of performance data and increase capacity for quality assurance and increasing capacity for commissioning and brokerage.
- 1.3 Improvements have been seen in all areas and the new model is now becoming well embedded and well understood.

## **2. Financial Implications**

- 2.1 Delivering effective and efficient services that improve outcomes for children, young people and families is essential to providing value for money for the council, but also has wider benefits for communities and partners into the future as failure to address issues in childhood can have long lasting consequences not only for the individuals concerned but for the wider public sector as greater levels of support will be required when they enter adulthood.

## **3. Well-being and Health Implications**

- 3.1 Getting it right first time and working with children at the right level is key to the Dorset Children Thrive model. This is of critical importance to supporting the wellbeing and health of the population now and into the future.

## **4. Climate implications**

- 4.1 The delivery of locality based and digital services is designed to reduce travel and associated carbon emissions.

## **5. Other Implications**

- 5.1 The changes to the delivery model included increased investment in support to care leavers as part of our Corporate Parenting responsibilities and sought to improve our safeguarding practice.

## **6. Risk Assessment**

Having considered the risks associated with this decision, the level of risk has been identified as:

Current Risk: Low

Residual Risk: Low

## **7. Equalities Impact Assessment**

- 7.1 An equalities impact assessment was undertaken to support the implementation of the new model. The model is designed to increase local access to services and improve outcomes for the most vulnerable children, young people and families.

## **8. Appendices**

- 8.1 Appendix 1: Dorset Children Thrive Delivery Model  
Appendix 2: Performance Benchmarking

## **9. Background Papers**

- 9.1 Minutes of the People Scrutiny Committee 7<sup>th</sup> January 2020: Presentation on Children's Services Blueprint for Change

[Agenda item - Presentation - Children's Services Blueprint for Change - Dorset Council](#)

9.2 Minutes of People and Health Scrutiny 17<sup>th</sup> September 2020: Overview of Children's Services

Presentation <https://moderngov.dorsetcouncil.gov.uk/ieListDocuments.aspx?CId=653&MId=4967&Ver=4>

9.3 Annual Self Evaluation of Children's Services 2021

<https://moderngov.dorsetcouncil.gov.uk/documents/s23874/Childrens%20Services%20Self-Evaluation%20February%202021.pdf>

## **10. Introduction**

10.1 This paper provides information about the introduction of a new operating model for the delivery of Dorset Council Children's Services Operating Model through a transformation project which was known as 'Blueprint for Change' which commenced in 2019 and completed in September 2020 with the introduction of the Dorset Children Thrive delivery model.

10.2 People Scrutiny Committee received a presentation in respect of the proposed changes to the service delivery model on 7<sup>th</sup> January 2020 which set out the vision for the service, the case for change, how the service would work, structure of services and the timeline for change and a further presentation providing an overview of Children's Services framework on 17<sup>th</sup> September 2020 which included an overview of implementation. It is timely, one year on from implementation, for committee members to consider the model and the impact on service delivery and performance.

## **11 The Change Process**

11.1 Members will remember from previous reports and presentations that this change programme was to respond to the challenges identified through previous inspections; external evaluation; employee engagement and children and family feedback that told us that way our services were structured were not creating the conditions for good relationship based practice to flourish.

11.2 Professional disciplines were not always working together in the way that children and families needed and there were too many hand-offs between professionals. The needs of children and families have been changing over time and our services were not always flexible enough to respond to these and there was a need to modernise processes and practices. There was a need to change support services so that they better supported the delivery of value for money.

11.3 This change project commenced in 2019 following external evaluation, internal self-evaluation and engagement with employees. Following formal consultation with employees and Trade Unions a large-scale staff re-

organisation commenced in March 2020. Following discussion with employees and Trade Unions, the selection process moved online as a result of social distancing requirements. Despite the challenges of Covid implementation of the new model continued and was delivered on time with a phased transition from the old to the new model between March and August 2020, with the launch of our 'Dorset Children Thrive' model on 1st September 2020.

## **12 Dorset Children Thrive Service Delivery Model**

- 12.1 The details of our Dorset Children Thrive Delivery Model can be found in Appendix 1. Our model has brought together Early Help, Children's Social Care, Educational Psychology, SEND and Inclusion services under the leadership of Heads of Locality and Strategy into six integrated locality teams across Dorset. The teams are supported by a central team of specialist services. We are already seeing an impact of our new model with the green shoots of this visible to CQC and Ofsted inspectors during the SEND visit in October 2020. Our managers and staff tell us that our locality Line of Sight meetings and working closely with colleagues from other disciplines is having a positive impact on their work with families and is making a difference
- 12.2 Services are accessed through our integrated front door which helps professionals and families identify the right support offer to meet their needs. Services to children and families are provided primarily through multi-disciplinary locality teams or through one of our small number of county wide specialist teams which includes our Fostering, Harbour and residential services, children who are disabled service, hearing and vision support services and some other small specialised support services.
- 12.3 Frontline service delivery is supported by a business support service and a commissioning service, which includes a brokerage team focusing on finding homes for children in care and educational places for children who are not educated in their local or mainstream special school.
- 12.4 Quality assurance activity is embedded in all service areas but led by a Quality Assurance Service which also leads on workforce development to ensure we take action on the learning identified through quality assurance.
- 12.5 There are a small number of services that support our schools, delivered by our Education Service.
- 12.6 No changes were made to the delivery of our Youth Offending or Adoption Services and these have continued as shared services with BCP council.

12.7 There have been some minor adjustments to the structure along the way and a more significant change to how we deliver services for our children in care following the commitment to invest in the creation of children's residential hubs (Harbour) and a need to improve our arrangements to support children in care stay in touch with people that are important to them. We will continue to adjust in line with national policy decisions or based on feedback from children and families but our commitment to multi-disciplinary locality-based teams remains.

### **13 Impact of the changes**

13.1 Members of scrutiny committee receive performance information on various aspects of children's services and have received the annual self-evaluation of children's services so this report will focus only on those areas that we specifically seeking to address through the change programme.

(a) We have established clear governance arrangements to support our partnership working, overseeing the implementation of our Children, Young People and Families Plan (2020 – 23) and the Strengthening Services Plan. Dorset Council and its Local Area partners have worked relentlessly to deliver the SEND Accelerated Progress Plan and the necessary improvements required to SEND services in Dorset. This progress was recognised at the SEND Progress Review meeting with the Department for Education and NHS England advisers, the Department of Education wrote to us to confirm that they "are reassured that the strength and commitment of current leaders within the LA and CCG will continue improvements across the SEND system throughout Dorset. Our Safeguarding Partnership arrangements have operated on a Pan-Dorset footprint whilst ensuring that the specific needs and characteristics of the Dorset Council area kept in focus through our operational arrangements. The Chief Executive, Senior Leadership Team and Elected Members play an active role in providing support and challenge to the service and partnership and have a strong line of sight to practice.

(b) Leadership and accountability has improved, with a stable, permanent leadership team now in place. Matrix management arrangements have been put in place and following some challenges in the early stages of implementation are now becoming more well understood and embedded. There is more management oversight and processes have been improved over time through the introduction of regular decision making and quality assurance panels such as the Multi-Agency Resource Panel (MARP) which oversees decisions about children with SEND who need joint packages of support and weekly leadership meetings which oversees decisions about entry to care. Audits of supervision show that the quantity and quality of social work supervision has greatly improved (with 36% completed on time at the beginning of implementation of the new model increasing to 83% in April 21). Professional leadership for

social work is now in place with the introduction of a Principal Social Worker, in line with good and outstanding local authorities.

- (c) Recruitment and retention of social workers has significantly improved since the implementation of the new model. New starters tell us that they were attracted by our model. The vacancy rate for social workers at the end of July 21 was 8% and agency usage has decreased overall. Turnover is at manageable levels. This has meant that social worker caseloads have reduced significantly to 14 compared with caseloads ranging from 23 to 29 in February of last year. We have more new recruits starting in September and several students qualifying in November which will further improve this position. Earlier challenges in recruiting sufficient SEND workers has improved with a stable workforce now in place there too.
- (d) Employee engagement has improved since the implementation of the model – demonstrated through both increased participation in Hive employee surveys and in the proportion of people that would recommend the organisation as a good place to work. A facilitated workshop session on the implementation of the new model identified that relationships between professionals internally and with partners has improved and frontline practitioners are better able to work together to support families with all the skills and expertise needed in the team. They recognised that communication and engagement through digital means has been effective, but that some of the benefits of co-location have yet to be realised as a result of office restrictions as a result Covid-19. This will be a key priority for recovery.
- (e) Getting it right first time and working with children at the right level was a key priority for the development of the new model. Our integrated front door now includes and Early Help Hub and this is enabling good conversations to take place about the type of support that would benefit families. Our link workers worked closely with schools during the pandemic to identify and support children and families who would benefit from help and there were close links with health and other partners to share intelligence and plan together. There was a 70% increase in early help offered and a 34% decrease in the number of children receiving a social work intervention at child in need level and a 10% reduction in child protection plans between 2019 and 2021. We are continuing to focus on ensuring that we use child protection plans appropriately when they can make the biggest difference to children's lives. The rate of children in our care has reduced from 70 per 10,000 in 2019 to 65 per 10,000 in 2021 and continues to reduce with fewer children entering our care than previously.

- (f) The availability and use of performance data has improved significantly and there are monthly leadership performance boards, locality performance meetings and quarterly whole service performance conferences which are ensuring performance is steadily improving on a range of key performance indicators. A snapshot of these is provided as Appendix 2, which demonstrates performance within the range of good and outstanding local authority performance on the majority of measures.
- (g) Our Quality Assurance Framework is well embedded and participation in auditing activity is widespread. Our collaborative approach is contributing to our learning culture and involves feedback from children, young people and families. The proportion of good and outstanding audits in social work has increased from just over 50% earlier in the year to over 77% in the most recent reports and has been maintained at just under 60% in Early Help. A new Quality Assurance Process is being implemented for Education, Health and Care Plans. Learning identified from quality assurance activity is addressed through workforce development and reviews of policies and procedures where necessary. Quality Assurance reports are provided regularly to the partnership Strengthening Services Board. A Peer Challenge of our Quality Assurance approach in May identified that the structure and approach is working and that there is a comprehensive learning offer in place. They recommended that and that we could do more to ensure all our employees understand the learning from quality assurance activity and that we should support them to be better able to describe the impact that their work is having on improving outcomes for children.
- (h) Increasing capacity for the brokerage of foster care, residential and educational placements so that we improve efficiency, value for money and quality has led to improvements in process and we have seen an increase in joint funding arrangements and in holding providers to account. The expansion of the brokerage team has freed up front line practitioners to focus on direct work with children and families and we have a better understanding of spend and quality and we have supported new providers to enter the care market to set up children's homes in the county. There are significant national challenges in the care market in terms of cost and quality and we continue to give this area of work close attention.

## **14. 'Dorset Children Thrive' in Action**

14.1 There are many examples of how the new model is delivering for our children and families, this section illustrates a few of these – names have been changed.

- (a) Partnership working at the Harbour:** Zoe is 13 years old and in foster care in Dorset. Zoe and her foster carer were not getting on as well as

they had been and Zoe was struggling with school and pushing against the boundaries that were in place. Zoe's foster carer felt that they may not be able to provide the right level of care for her and work started to try to find a new foster home. At that time there were no local placements available and Zoe may have had to move from the local area. The Harbour team came alongside Zoe and the foster carer to work on the challenges they were facing. The Harbour team, including the embedded police officer were able to work with them and to help rebuild the relationship and as a result Zoe has stayed with her foster carer and is doing well she has been able to stay in her school and connected to her friends and community.

**(b) Multi-disciplinary working:** George and his brother Peter have special educational needs and live with their mother who has a mental health condition. They have experienced significant parental conflict and witnessed domestic abuse. Partners were worried about the children's wellbeing and the family was supported through a child-protection plan. Some of stressors for the family related to the need for a different type of school provision for George. The locality team including the social worker, educational psychologist, specialist teacher, SEN provision lead and school were able to come together to support George with an Education, Health and Care Plan and a new school placement that was better able to meet his needs and where he is described as 'thriving', his mother is doing better and parental conflict has reduced. There was a single plan for George and his family with close working leading to a more joined up and timely whole family response.

**(c) Space for direct work with children:** Lower caseloads for our social workers means that they are better able to undertake quality direct work with our children. One element of that is to support children in care to understand their journey into care and their lives before that and to identify people that are important lifelong links. Tom is 14 years old came into care when he was 4 years old. He was not in touch with his parents. Tom had hazy memories of his past and trying to understand his story was having an impact on his wellbeing. The social worker was able to work closely over time with the residential care provider to sensitively share things that had happened in Tom's early life and to help Tom to build a relationship with his mother. This work has helped Tom to be much more settled at home and at school. The relationship with Tom and his mother has improved and while still at early stages there is potential for Tom to return home to his mother in the future. He no longer blames himself for things that have happened in the past and has a stronger sense of security. This work was possible because Tom was able to build a strong and lasting relationship with his social worker who was able to create the time for meaningful direct work.

**(d) Whole family working:** Charlie was struggling in school and the school asked for some help for him by contacting the Early Help Hub. A Family Worker pulled together a Team Around the Family approach drawing together the right professionals and working with the family to address all their needs which included helping to get a new bed; helping dad to get back into work and focusing on improving housing conditions. Charlie said they are said they are less worried now are better able to concentrate on schoolwork and teachers that school attendance has improved. Working with the whole family has led to improved outcomes for everyone, including improved financial stability.

**(e) Working with communities to meet local needs:** Each locality has a Local Alliance Group, which comes together to respond to local needs as well as implementation of county wide priorities. Ensuring children are in education is a key responsibility. School admissions, the locality team, a local youth centre (charitable trust), the local schools and a local volunteer worked closely together with families from the traveller community to help them support their children into education. This required significant investment of time in building trust and confidence to help overcome Covid-related fears and offering support to parents with admissions processes. This resulted in children returning to school and others enrolling and offers a demonstration of what is possible when people work together to make the best use of resources to respond to local needs.

**(f) Placing children and families at the heart of all we do:** we have made a strong commitment to putting children and families at the heart of all we do and the feedback from children and families is that these values are being demonstrated by our workforce – here are some direct quotes

- *“This is the first meeting that we have had with professionals that has made me feel hopeful for my child's future. Where our son's needs have been heard and put at the centre of a discussion. It is one of the few times I have felt genuinely listened to and our views accepted and given weight. Where we felt collectively understood and supported.”*
- *“My social worker has helped us, sometimes I have been cross with her about 4 times when she has said about my bedtimes but she has definitely helped me. She has helped me with bedtimes and with sleeping, I am sleeping more now. She helped me with worrying about things less, I don't worry as much about things anymore. She has been really nice to mum and helped her with some stuff too. She is a really good social worker and has been trained well”*

## 15. Recommendation

14.1 Members of scrutiny committee are asked to consider the implementation of the new model ‘Dorset Children Thrive’ and the impact on quality and performance.

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**Footnote:**

Issues relating to financial, legal, environmental, economic and equalities implications have been considered and any information relevant to the decision is included within the report.