Family Safeguarding Hertfordshire Evaluation Summary

Background
Family Safeguarding Hertfordshire (FSH) is a whole-system reform of Children’s Services which aims to improve the quality of work undertaken with families, and thereby outcomes for children and parents. It brings together a partnership including the police, health (including mental health), probation and substance misuse services. Key elements include specialist workers with domestic abuse, substance misuse and mental health expertise joining social work teams; training in Motivational Interviewing (MI is a communication style developed to support behaviour change) as a framework for practice for all staff; a move to group case discussions; and structured tools to support direct work. In addition, there is an attempt to provide practice-enabling factors, such as reduced caseloads and a new recording system. During the Innovation Programme, FSH worked with 940 families.

Aims and objectives
The project was designed to increase the quality of assessment and direct work with children and families in order to improve outcomes. The majority of families worked with by Children’s Service have complex issues, particularly parental alcohol and drug use, domestic abuse and mental health issues. FSH aims to enable workers to spend more time working with families; increase their skills and knowledge; and provide an inter-professional whole-family response that allows parent and child issues to be addressed effectively.

Evaluation
The mixed methods evaluation collected data in 3 strands:
- data on the process of change from the perspective of people at every level across the service, including 185 interviews, 7 focus groups, 8 observations and 439 questionnaires from staff at 3 time points
- a comparison of practice, service experiences and outcomes as the service moved to the FSH model. This involved 126 observations of practice, 108 research interviews with parents shortly after allocation and 40 3 months later, plus 11 with children; data from computerised records for 447 families
- analysis of data on service use and outcomes for 940 families allocated in FSH for the 12 months from August 2015, including police involvement, emergency hospital admissions, school attendance, and substance misuse and mental health service (referred to as key performance indicators - KPIs)

Findings
- The project was implemented successfully, including a large training programme for all staff (c 180), new specialist adult workers, multidisciplinary teams and new ways of working
- The quality of practice improved over the course of the year of the evaluation, with improvements continuing after the initial implementation
- There were indications of better outcomes for families, e.g. in their achievement of goals, reduced levels of anxiety or depression and improvements in self-reported quality of life
• There was a small reduction in the proportion of families with a child entering care, from 12% to 10%. The number of days children spent in care, more than halved, from 20.5 days per family pre-FSH to 9.8 days post-FSH
• The specialist adult workers were important for improving outcomes providing not just specialist input but a move towards a more multidisciplinary way of thinking about families. They were working with families with the most severe difficulties and generally achieved larger positive changes for them
• Families’ use of other services reduced after allocation to FSH. For example, adult emergency hospital admissions reduced by more than 50% following allocation to FSH. This KPI data provides strong evidence on the impact of allocation, but weak evidence on the additional difference that FSH made as there is insufficient comparative data from allocation pre-FSH. These KPIs have strong potential for future service management and evaluation.
• The estimated cost savings to Children’s Services from reduced care and child protection allocations in the first 12 months were £2.6 million

Recommendations
The evaluation found a positive set of initial indicators of outcomes in a short period. Recommendations are:
• continuation of FSH partnership and extension of project in Hertfordshire
• development of cross-agency service use measures; development of adult worker roles; integration of MI framework; development of and training in theoretical approach to group supervision; support for workers to develop understanding and application of MI principles and skills
• consideration by all local authorities to implementing all of FSH or key elements. Three areas in particular should be considered by other authorities:
  • the potential that multi-disciplinary working has for improving practice and outcomes
  • recognition of the importance of processes to support the creation of multidisciplinary teams, such as group case discussion and a framework for practice.
  • the multi-agency service use measures (KPIs) provide an opportunity to develop robust and meaningful outcome measures and should be developed and implemented widely

Changes made in services in response to evaluation findings
The project is being sustained in Hertfordshire with funding from Wave 2 of the Innovation Programme to extend the model to Luton, Peterborough, Bracknell Forest and West Berkshire.

This evaluation study was carried out between May 2015 and September 2016 by Tilda Goldberg Centre for Social Work and Social Care, University of Bedfordshire.

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