



Report to Reading Local Safeguarding Children Board

Date:	15th March 2017
LSCB Meeting Date:	21st March 2017
Author:	Andy Fitton - Head of Early Help Service, RBC
Topic	Update report on proposal for new Single Point of Access in children's services
KEY ISSUES/UPDATES:	
Issue 1 - Timing of the project delivery	
Report outlines that 2 phases are now required to deliver a full partnership offer for a Single point of access by Sept 2017. However it is important to note that by the end of June 17 this project will deliver partners with a single point of access for all contacts for children of concern. Access will be through a single web based form, phone number and email address (Phase 1).	
Issue 2 - Communication	
Report outlines the importance for partners on the branding and key messages to ensure that confusion is avoided and take the opportunity to support the workforce to understand levels of risk for children when they are concerned.	
Issue 3 - Partnership involvement	
To meet the full ambition of the project, as outlined in the benefits section of the report, wide and full partnership involvement in the offer by Sept 17 is essential. This includes both statutory and non-statutory partners being ready to discuss and be open to put resources into the single point of access.	
RECOMMENDATIONS/AREAS FOR CONSIDERATION:	
That partner involvement is provided in the next 3 months to begin to draft proposals to meet the full ambition of the project by Sept 2017.	
DECISIONS REQUIRED BY Reading LSCB: To note/approve/action etc.	
None	

READING BOROUGH COUNCIL

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TITLE:	Update report on proposal for new Single Point of Access in children's services		
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1. PURPOSE OF REPORT

1.1 This report provides an update on the proposal to change the current arrangements for both the Early Help Pathways and the current Multi-Agency Safeguarding Hub (MASH), by establishing a new 'Single Front Door' (SFD), which will deal with all enquiries relating to concerns about children. (confirmation of offer and assurance that will achieve this)

1.2 Important to note that to reach a full partnership offer in a SFD it is proposed to deliver this over 2 phases, by the end of September 2017.

2. KEY ISSUES

2.1 This change is mandated from the Ofsted Learning and Improvement plan and is required to be in place in June 2017. The key benefits are summarised as follows:

2.2 Outcomes expected for Children, Young People (C&YP) and their Families are:

- a. That C&YP are safer, healthier and as a result are able to achieve their full potential.
- b. That C&YP and families receive a speedier response that is right first time. Therefore preventing cases from 'bouncing' between services.
- c. That C&YP situations do not deteriorate but rather their life situations improve by getting the help they need.
- d. Adults/ families get consistent messages from partners and there is little/ no confusion created in families about the way to access help and support.
- e. Resources are effectively targeted to those that need them.

2.3 Outcomes expected for partners

- a. Simplifying of the decisions to take when concerned about a child
- b. Improved communication that is more consistent.
- c. Improved confidence, knowledge and understanding of a clearer system to access help and support.
- d. Opportunity for greater shared responsibility and decision making
- e. Access to higher professional knowledge and advice that supports, and when needed, challenges decision making about C&YP.

3. Current MASH and Early Help position

3.1 Within MASH a review of the skills is required now, to deliver an effective service both currently and into the future. A specific MASH manager is being brought in to accelerate the assurance of our MASH operations over the next 8-12 weeks, ensuring it is fit for purpose for the establishment of a SFD.

3.2 The Early Help pathway was collapsed into a single access point in Jan 2016. This has recently been reviewed by staff and partners and concluded that its first year of operation has seen an increase in use and security of decision making.

4. Proposed Single Front Door Model

4.1 A number of meetings and conversations have taken place with key staff from Early Help (EH) and Children's Social Care (CSC) and several different models have been considered. It has become clear that a re-design will be required and so it is sensible to set up a 2 phased approach in order to maintain stability and ensure changes are embedded.

4.2 The first phase will be complete by end of June 2017 that fulfils the Learning & Improvement plan primary commitment. This phase 1 will deliver the following:

- a) Provide our partners with a single point of access for all contacts for children of concern. Access will be through a single web based form, phone number and email address.
- b) A SFD model that both an Early Help and MASH response will sit within, with a single management structure that will provide clear, single decision making for each contact about children.
- c) A model that uses Mosaic to record concerns and decisions for all contacts.
- d) A single set of service standards and performance measures that will guide the management of the SFD and assurance for senior leaders and partners, and therefore begins to address the 'expected outcomes'.
- e) At end of phase 1 there will be draft proposals on how a full SFD partnership offer can be implemented by end of phase 2, through continued conversations with partners through the LSCB.

4.3 The second phase will be completed by end of September 2017. This phase 2 will deliver the following:

- a) Implementation of a wider SFD partnership offer, based on the jointly agreed proposals with partners that will include proposals on an advice and consultation offer to partners.
- b) Clearer and improved pathways in key areas of domestic abuse; missing children/ CSE; C&YP with disabilities.
- c) A further developed set of service standards and performance measures that includes the wider partnership offer, that will guide the management of the SFD and assurance for senior leaders and partners, and must address all the 'expected outcomes'.

4.4 The key change is that whereas currently all enquiries/contacts/referrals go into either the MASH or the Early Help Hub, all future contacts will go into a single point of access, similar to other LAs (e.g. Merton, Worcestershire, Kingston).

4.5 Once in the SFD a team of advisers will handle the contact (initial screening) and direct it into either the existing MASH structure or over to the Early Help pathway, using Mosaic as the recording and transferring system.

4.6 Once in MASH, the existing service standards will apply that will provide children with two options:

- Refer on to A&A
- Step down to Early Help.

4.7 If in Early Help, the triage system will review the case, as now, and will provide children with three options;

- Provide a service response from RBC or partners in triage
- Provide advice or guidance on how to meet children's needs with universal or community settings.
- Send the case into MASH for a review, due to new information being made available at triage.

4.8 There needs to be a renewed focus on reminding partners/ referrers of their responsibility to understand the level of concern of risk for the child in question. Using the platform of launching the SFD, a range of communication around key messages to support the use of thresholds would be executed 6 weeks out from the SFD starting.

4.9 The importance of Branding. The new SFD is not MASH (MASH will be a component of the SFD) therefore a new brand is required, such as Reading's 'Single Point of Access' for children's services. This is an opportunity to communicate clearly with families and partners about the offer being made to support children of concern and to again stress the importance of understanding the level of risk that children are experiencing.

4.10 Risks. The project has identified in our project management documentation, a range of risks which have been placed in a log to plan mitigation actions. A summary of these are:

- Families are put off accessing early help support as they misunderstand and are fearful of potential social care involvement due to the single referral route.
- Confusion created in the wider partnership workforce whenever you change processes.
- Mosaic changes delayed due to capacity in RBC
- Delay in operational changes required to build the SFD capacity due to dependency on HR processes and resource identification in RBC.

5. NEXT STEPS

5.1 A full Project Initiation Document (PID) that sets clear tasks and milestones has been written to achieve phase 1 deliverables which will drive the change required. Every 2 weeks a review of the plan against milestones will be held by the Head of Service Safeguarding and EH responsible for this change.

5.2 Key milestones within the next 3 months there are:

- i. Finalise the job roles required within the SFD by end of March 17.
- ii. Identify the resourcing required to implement the model and bring this back to DMT for agreement by start of April 17.
- iii. Finish a communication plan to re-brand the new service and to manage the message to partners and the public by end of April 17.
- iv. Mosaic changes completed ready for use of both SFD and Early Help by start of June.
- v. Updated (single) referral form signed off by start of June 17.
- vi. Complete the reorganisation of roles and people into the SFD by start of June 17.
- vii. Staff training completed on using Mosaic by end of June 17.
- viii. Complete range of communication activities to inform partners of go live on SFD by end of June 17.