



London Borough of Haringey

Summary of strategic options for CYPS transformation

1. Transformation overview

1.1 Haringey's context

Haringey is an area with a growing number of children and young people where many families experience high levels of stress that are likely to put them in need of some extra help and support to achieve better outcomes for family members. We also know that there are some marked differences in the outcomes between children and young people living in the borough with more children in need living in the east of the borough than the west. Our Joint Strategic Needs Assessment (JSNA) provides us with the data that drives our understanding of the need in our borough.

In 2010 there were approximately 53,800 children and young people aged 0-19 living in Haringey. Population projections predict that this will increase to 66,700 by 2033¹. This would be a 21.7% increase. Haringey is the 5th most ethnically diverse local authority in the country. Nearly half of the residents and nearly 80% of our school population come from Black and minority ethnic (BME) communities; 190 different languages are spoken in our schools. The proportion of children and young people from BME communities varies from 30% in Muswell Hill to 78% in Northumberland Park.

Haringey is the 4th most deprived borough in London and the 13th most deprived in the country. An estimated 21,595 (36.4%) children and young people live in poverty, largely in the east of the borough. 27.5% of primary school, 32.3% of secondary and 40.5% of special school pupils receive free school meals².

Unemployment at local levels is best measured by the number of people claiming job seekers allowance (JSA). In July 2012 6.2 % of people were claiming JSA, with higher rates in the east of the borough and lower in the west. Although the percentage has decreased slightly since July 2011 Haringey's claimant rate is still significantly above those of London and England. Government changes to welfare benefits are expected to place increased stress on family budgets. Infant mortality rates have been falling but are still slightly above the national average. 40% of women booked late for antenatal care, compared to the national average of 20%, and an analysis showed variations in booking rates for different ages and ethnicities. The teenage pregnancy rate is one of the highest in the country.

Educational achievement has been improving but there are still differences between the educational outcomes for pupils in receipt of free school meals and other pupils and between different ethnic groups. We have significant levels of homelessness; nearly 3,000 households are officially in temporary accommodation, the highest in London, and there are 5,075 children and young people in these households. Just over 30% of households live in social housing with high concentrations in the east of the borough. The east of the borough is more densely populated than the west.

The overall picture is one of increasing demand at a time when funding for public services is being reduced and family incomes are under pressure. Health services and schools are seeing increased demand from the growing numbers of births and school age children and young people and increases in numbers of children and young people

¹ The 2010 ONS Sub National Population Projections

² DfE statistics derived from January 2012 Pupil Census

with disabilities. Due to early diagnosis and the advancement in medical science more children and young people with complex health conditions are requiring services.

1.2 Improving services to Children, Young People and Families

Haringey's Children and Young People's Service (CYPS) has been through a period of great challenge in recent times and undergone immense scrutiny – both from within and from external agencies. As the period of recovery has concluded, services to families with children have seen significant improvement, including:

Achieving Educational Excellence	<ul style="list-style-type: none"> ➔ 2013 Haringey's best school results ever at KS1,KS2 and GCSE and A levels now ahead of national averages ➔ Increased proportions of schools at good or outstanding: now all secondary and special schools ➔ Significant improvement at KS1 reported in 2013 ➔ Outstanding for All project plan in place ➔ School to School Support process agreed by Haringey Heads and functioning from 2012 onwards
Strengthened Safeguarding	<ul style="list-style-type: none"> ➔ Increased social worker capacity on the front-line ➔ Robust assessment at the front door ➔ Effective joint working with the Police ➔ Strengthening the use of the Common Assessment and rolling out single assessment in line with the Munro recommendations ➔ Haringey Safeguarding Board has good oversight of practice issues through SCR process
Vulnerable Children and Young People	<ul style="list-style-type: none"> ➔ Substantially improved adoption service ➔ Reducing length of care proceedings ➔ Revised Permanency Policy ➔ Decision making in child protection is now much quicker ➔ Educational outcomes of LAC exceed national averages ➔ Lead Member and DCS driving improvement through Corporate Parenting Panel and overview of performance in key areas ➔ LMCS and DCS send congratulations cards annually for GCSE and A level outcomes for LAC
Leadership and Partnership	<ul style="list-style-type: none"> ➔ Children's Trust re-instated ➔ Health and Well Being Board prioritising "Best start in life for every child" ➔ Haringey Families First (TFI) ➔ Corporate Parenting Advisory Committee active engagement with Aspire. ➔ Refreshed Child Poverty Strategy

Haringey CYPS is committed to a cycle of strengthening, consolidating, improving and transforming its offer to children, young people and families. The transformation of services to children, young people and families in Haringey, will allow redirection of investment in improving services over the next 5 years to bring its performance

trajectory to above and beyond that of benchmark authorities. This is an ambitious plan but one that is essential to securing the quality of services children and families in Haringey can expect.

1.3 Need for change

The mandate for transformation of services to children, young people and families is shaped by both national and local drivers:

National

- Reduction in funding to Local Government of 43% by 2015.
- Loss of key grants which funded prevention.
- Increased demand and expectations of local services by residents.
- New Ofsted inspection framework raises the bar.
- Current model of social care is unsustainable without getting up-stream on managing demand.
- Families First programme offers opportunity to do things differently.

Local

- A risk-averse culture, too many children are being looked after or dealt with through child protection.
- Limited and fragmented range of early help services – for example the review of children’s centres highlighted further work being needed to reach the right families and achieve value for money.
- The workforce need to be supported to deliver and sustain the culture shift that is required.
- Better value for money needs to be targeted through improved commissioning – reducing the current high social care unit costs.
- The Quality Assurance framework needs strengthening and embedding in line with new Ofsted arrangements.
- Business processes and systems need to modernise.
- Partnership working, though improving requires renewed focus.

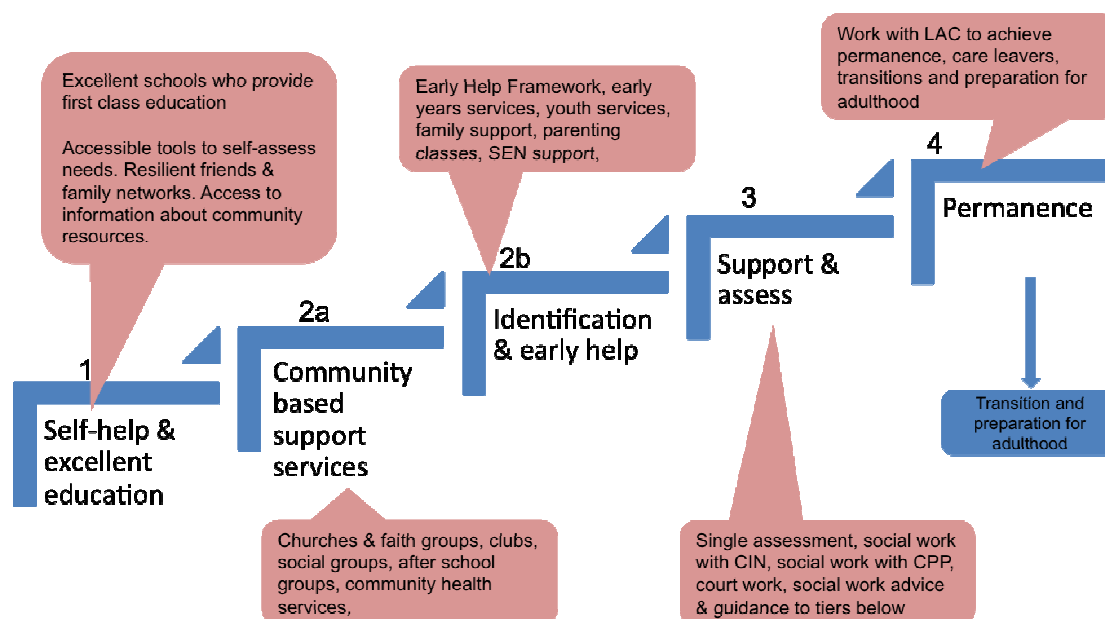
At the same time, the affordability of current model is unsustainable:

- 80% of budget spent on high cost specialist services.
- 21.7% projected increase in population of 0-19 y/o.
- Rising trend of children and young people with complex and challenging needs.
- The cash limit budget for CYPS is £61.3m for 2013-14. This is expected to reduce by approximately 10% per annum for the next three years, to £45.4m.

1.4 Vision for the future

Our vision is that Haringey will be a place where children and young people are known to thrive and achieve. We have high aspirations for our residents and to be known for the richness of our environment for family life. In order to achieve that, the whole system needs to be re-balanced to support families and communities to help themselves.

The proposed CYP&F pathway would refocus in providing a service response at every step:



Therefore, implementation of the transformation programme would mean:

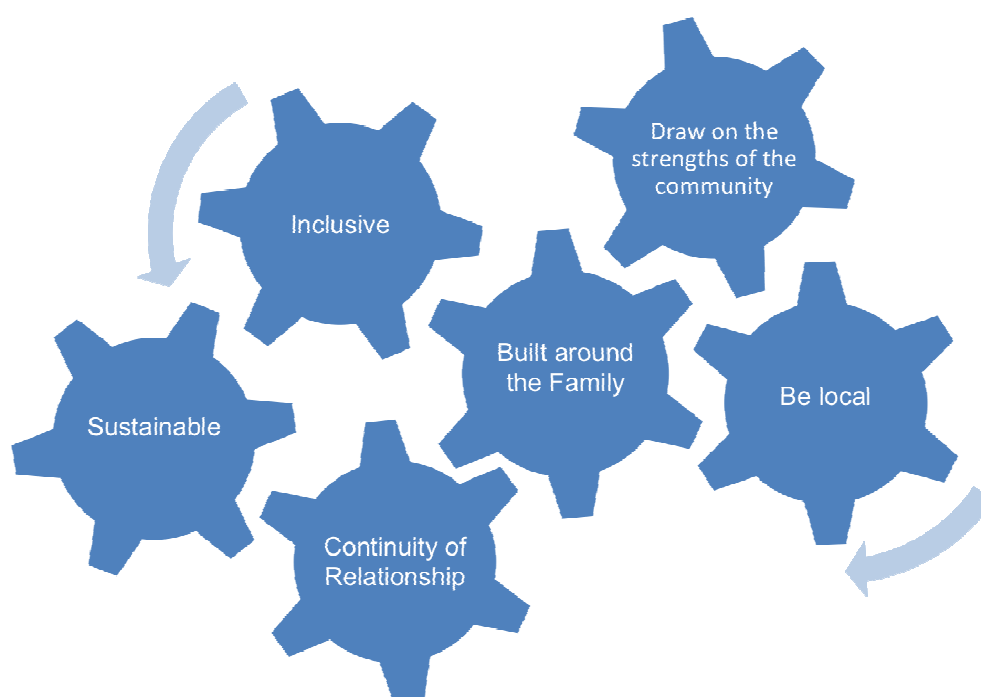
- Move to a system which collaborates with families to help them find their own solutions so that problems and difficulties do not escalate.
- Develop an offer of effective early help and support for vulnerable families, coordinating the support of the voluntary private and public sectors and ensuring that they deliver joined up services.
- Where additional support is required, engage with other agencies and organisations to commission and secure this help locally.
- Adopt an approach that sees prevention and intervention as a continuum so that it is never deemed too late to positively intervene and prevent the deterioration in an individual child or young person's circumstances.
- With key partners continue to strengthen safeguarding services, reducing where possible risks to children. This will be achieved most effectively by working alongside families building on their strengths and enabling them to make the changes that are required.
- Where children are suffering significant harm and the required change cannot be made continue to act decisively in order to protect them.
- When children and young people cannot live with their birth or extended families ensure that there is sufficient supply of a range of alternative carers that can meet their needs as close to their home communities as possible.

1.5 Design principles

The transformation programme, in conjunction with a number of core strategies, aim to measurably improve outcomes for Haringey's children, young people and families over a ten-year period. If successfully implemented, Haringey will have more children ready

for school, more children prepared for the transition to secondary school, more young people equipped for further education and ready for work, and more young adults prepared to make their full contribution to the community's well-being.

To achieve our vision the operating model will be developed based on 6 design principles:



Each principle has assigned objectives, with attached evaluation criteria which have been used to assess different models for transforming CYPS.

Principle	Objective	Evaluation Mechanism
Built around the family	Families are able to get the help and support when they need it	<ul style="list-style-type: none"> Services will be available in hours that work around family life, including for working parents, and school attending children. Families will find it easy to access information and advice about early help services (not necessarily run by the council) and will be able to either self-help or self-refer for the support they believe they require.
	Help and support will be provided that builds on the wider family's strengths. Wherever possible, families will be encouraged to take responsibility for their own improvement and lead the planning and activity to strengthen themselves- e.g. Family Group Conferencing Hidden	<ul style="list-style-type: none"> A range of family and parenting support services (both practical and therapeutic) will be utilised (and procured if lack of sufficiency) by social workers to avoid unnecessary family breakdown. Families will be strengthened and supported by early help services.

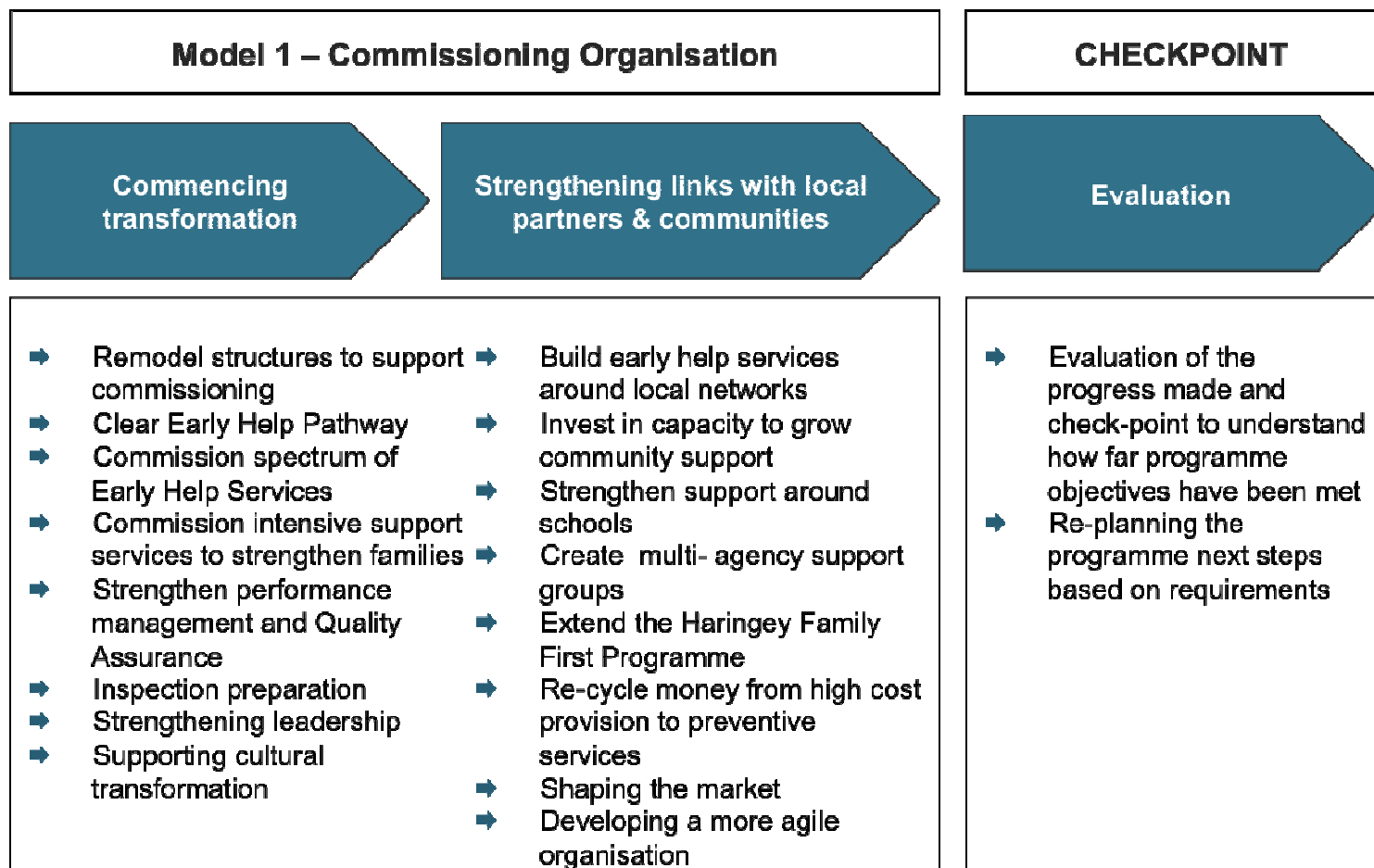
Principle	Objective	Evaluation Mechanism
	Insights	
	Effectively safeguard children who are in need, including looked after children in line with our Corporate Parenting responsibilities	<ul style="list-style-type: none"> • Children at risk of significant harm will receive timely and effective support to protect them. There will be the right children on a child protection plan and they will have access to a range of services that can quickly assess and then mitigate the risks within the family. • There will be the right number of looked after children and almost all those children will be in family placements close to home. We will only place children in residential care exceptional circumstances. Children will have timely permanence plans.
Local	Provide an easily accessible pathway / journey for children, young people and their families (CYP&F) and referring practitioners	<ul style="list-style-type: none"> • Families are able to self-refer through a range of channels and get access to information and guidance as and when they need it. • There is a straightforward and well understood pathway for practitioners to follow to get a child seen by a CYPS colleague.
	Operate together, across the spectrum of need, stepping children up and down the intensity of support as needed	<ul style="list-style-type: none"> • Practitioners can identify named colleagues operating at every step of a child's journey, and report that they know their referral is being built on. • Families and children will be supported to access the right level of support and help themselves. • Case audits show children and families moved to a CYPS colleague or partner agency.
	Services will be local, multi-agency and where sensible co-located on the front-line so that families are able to be supported seamlessly by a range of practitioners who get to know, understand and trust each other in an area	<ul style="list-style-type: none"> • Other agencies working with the child, young person or family will always be identified and work will be done in collaboration where possible. This will recognise that each agency will have competing priorities.
Draw on the strengths of the community	Capacity will be built in the community by commissioning from the VCS and community groups a range of early help support. Volunteering and self help models of support will be encouraged to assist families to	<ul style="list-style-type: none"> • Proportion of early help services commissioned from local groups. • Number of children in those community groups with Early Help Framework. • Number of families volunteering.

Principle	Objective	Evaluation Mechanism
	thrive and be sufficient	
	Ensure council community provision, e.g. parks and leisure services or regeneration initiatives, form part of a coherent early help offer so families experience a seamless approach and step up and down processes work effectively across the council offer	<ul style="list-style-type: none"> • A mapped Haringey Council early help offer. CYPS staff training other council staff in how to work with, listen to & if necessary refer cyps who are vulnerable.
Continuity of relationships	Assess children and their families needs quickly and thoroughly before directing them to the appropriate practitioner who will provide consistent support for as long as is required	<ul style="list-style-type: none"> • The referral gets to the right person quickly. • Case transfers kept to a minimum. • Threshold procedure clear, well understood and working.
	CYP&F will tell their story once. Technology will assist in providing a single record which practitioners across CYPS, and to a certain extent other agencies, will use, trust and build on	<ul style="list-style-type: none"> • Families will report telling their story once. A single record will operate across CYPS. • Information about children and families will flow freely across agency boundaries ensuring a holistic view of the family's needs. • Technology, joint training.
	Ensure council community provision, e.g. parks and leisure services or regeneration initiatives, form part of a coherent early help offer so families experience a seamless approach and step up and down processes work effectively across the council offer	<ul style="list-style-type: none"> • A mapped Haringey Council early help offer. CYPS staff training other council staff in how to work with, listen to & if necessary refer cyps who are vulnerable.
	Haringey is the employer of choice in the region and we will understand what motivates and incentivises staff to perform optimally. Good staff will choose to stay with the council.	<ul style="list-style-type: none"> • Ensure that there is a stable and strong workforce, with staff turnover low and agency use minimised. • Retention rates and internal promotions. • Cross-departmental % vacant posts, £ agency staff, staff survey re morale. • Consistency of worker family relationship.
Inclusive	Services will be delivered on an equal and inclusive basis to all communities in line with the corporate 'One Borough' vision	<ul style="list-style-type: none"> • Services are proportionately distributed and commissioning strategies are based on need. The needs of minority groups will be effectively met.
	Children and young people's voices are at the heart of service planning	<ul style="list-style-type: none"> • Customers and partners will be consulted on a regular basis through

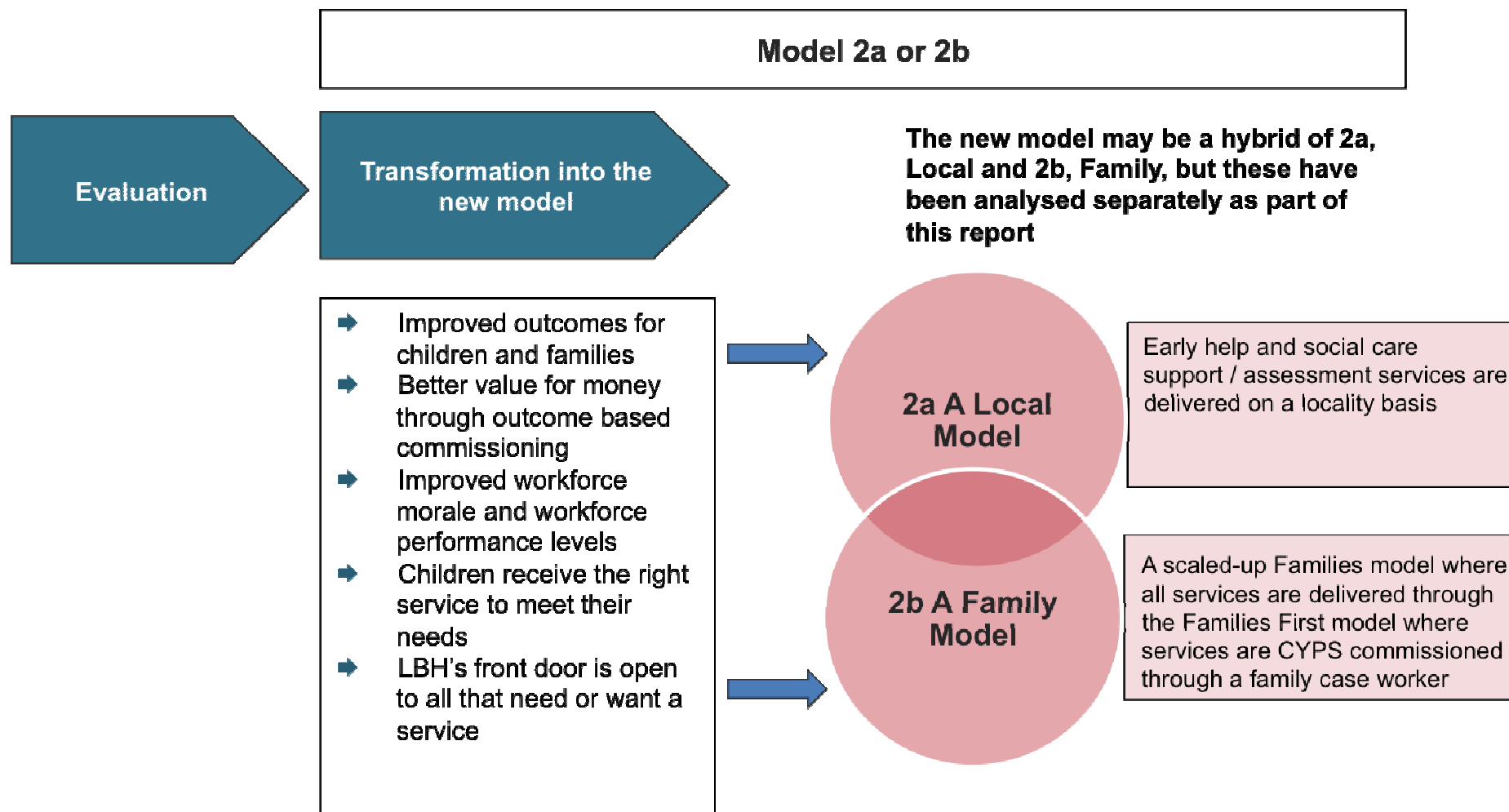
Principle	Objective	Evaluation Mechanism
		a range of mechanisms – focus groups, website, etc.
	Work to ensure that every child and families needs are met, including when those needs don't neatly fit into the service community,	<ul style="list-style-type: none"> Commissioning arrangements will be sufficiently flexible to ensure all CYP&F needs are met.
Sustainable – building capacity & meeting the challenges of the future	Operate with a unified outcomes-based commissioning framework and a continuous improvement planning cycle that is sustainable	<ul style="list-style-type: none"> An effective commissioning function in place which constantly evaluates the effectiveness of services against cost and outcomes.
	Only provide or commission services that are evidence based or breaking new ground and meet the specific needs of Haringey children and families	<ul style="list-style-type: none"> Services will be designed around the evidence base and monitored against the outcomes they achieve for children. Outcomes for each user will be tracked and the range of prevention services reviewed annually to ensure that they remain fit for purpose. Evidence of drawing in funding to the service from a range of entrepreneurial methods.
	Invest early on in the child and family's life and in their level of need to prevent need from escalating, and a subsequent reactive rather than proactive service	<ul style="list-style-type: none"> The system will be rebalanced with more families who currently access children social care being supported by a team around the family approach earlier. This will lead to an increased proportion of families receiving early help and targeted services and a reduced demand for children's social care assessment or intervention. The savings in the acute services will be recycled into early help services. The Council will aim to spend no less than 40% of expenditure in the service on early help.
	Quality assure every aspect of its work, making sure the right children are in the right part of the system, being supported quickly and effectively	<ul style="list-style-type: none"> We will be able to manage risk well, right from the outset when a child is born or comes into contact with any of our services.

2. Transformation journey

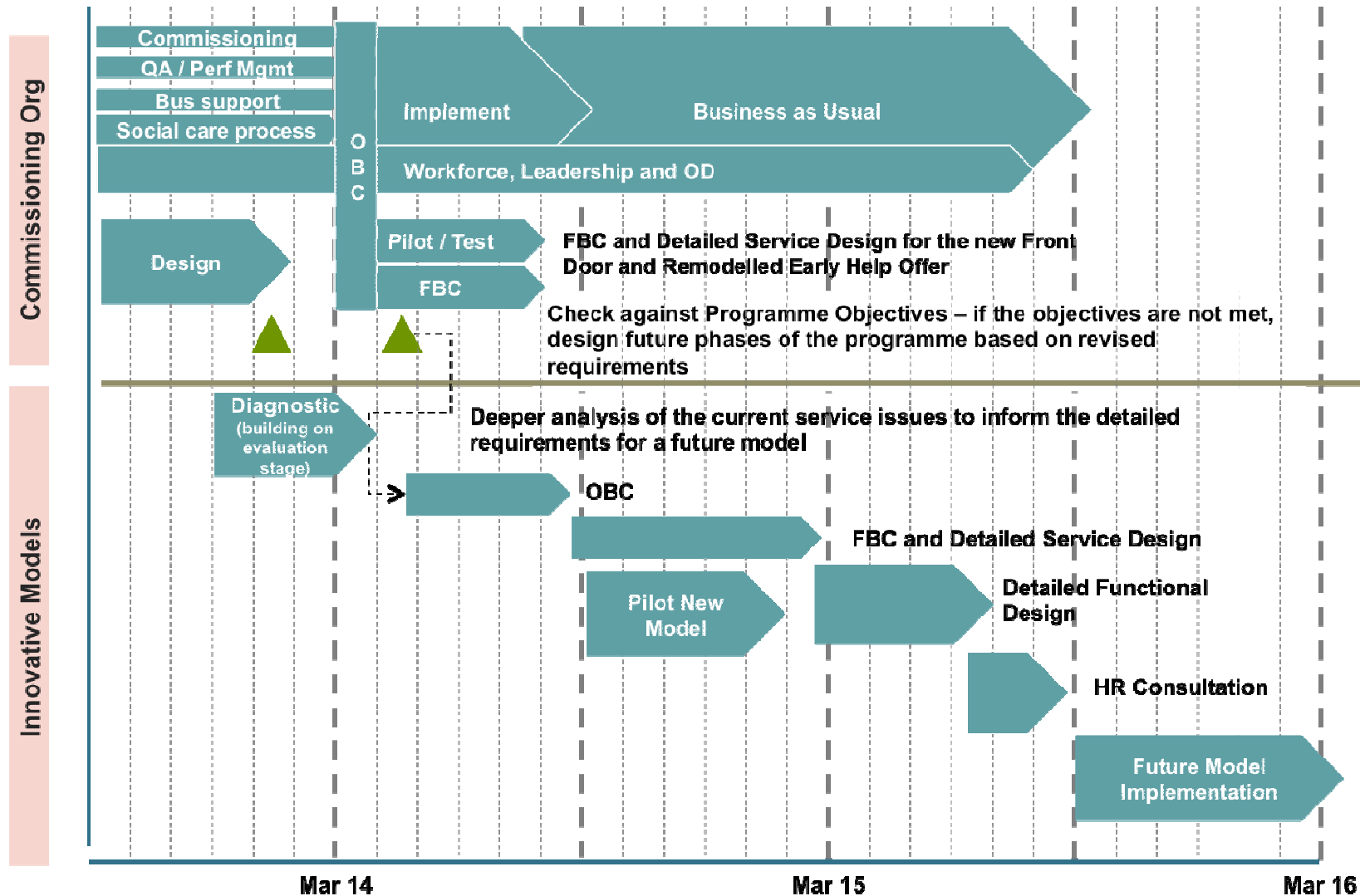
In order to meet the joint objectives of building resilience in the service, and in the longer term achieving more transformational service improvements, we have developed a two-phased programme of activity.



With the service operating at optimum levels, it is envisaged that partnership working and/or closer links to the community will be deepened through two potential innovative operating models:



We are expecting the overall transformation programme delivery to broadly fall in line with this high-level outline:



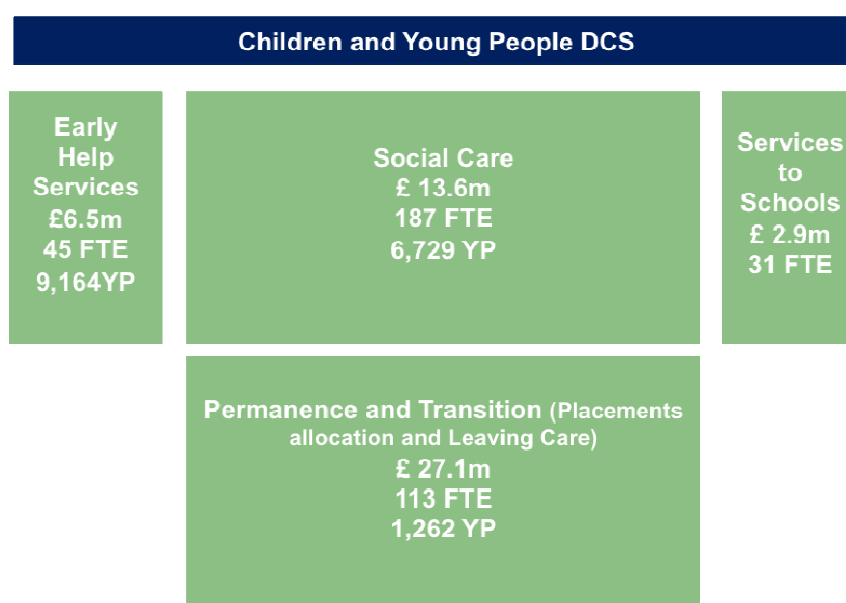
3. Options evaluation

This section will look at conceptual models for CYPS, based on the key high-level activities that need to take place in order to affect positive impact on outcomes. Options are then assessed on how well they meet Haringey's design principles by exploring the relationship between proposed model and evaluation statements.

3.1 Option 1: Do nothing

This option explores the 'stay as we are now' view:

Expenditure is based on the current cost of the service (13/14 Budget)



Summary of Key Benefits: There are no key benefits – although there are no project related investment costs, costs are expected to rise over the longer term if robust business management and service practices are not embedded

Estimated Re-Investment Potential at Year 5	Assumptions in the Financial Analysis	
0%	Assumption	Detail and Source
	None	<ul style="list-style-type: none"> There are no financial assumptions in this model It is expected however that costs would rise over the long term

Summary of Benefits	Risks / Issues
<ul style="list-style-type: none"> No change means no additional investment costs now (although investment will be required at a later date if the current model is not sustainable) 	<ul style="list-style-type: none"> The current structural model has been costly for the service in the past CYPS expenditure will continue to be too heavily focussed on tier 3 & 4 Commissioning of social care placements will still be high cost The Quality Assurance framework will not be strengthened and embedded Business processes and systems still need to modernise New Ofsted requirements will require a change in approach Staff will continue to feel de-moralised, and there will continue to be an over-reliance on temporary staff and high turnover Limited and fragmented range of early help services will still exist High level of assessments leading to no outcome for families A risk-averse culture, too many children are being looked after or dealt with through child protection Partnership working will continue to be weak

The evaluation of the 'Do Nothing' option against the programme objectives is as follows:

Note: Criteria are evaluated relative to other models.

Principle	Summary of Evaluation Criteria	Model Fit
Built around the family	Services will be available in hours that work around family life. Easy access to information and advice about early help services	
	A range of family and parenting support services	
	Children at risk of significant harm will receive timely and effective support. There will be the right number of looked after children, close to home and in residential care only in exceptional circumstances	
Local	Families are able to self-refer through a range of channels and get access to information and guidance. A straightforward and well understood pathway for practitioners	
	Practitioners can identify named colleagues operating at every step	
	Other agencies will always be identified and collaborated with	
Draw on the strengths of the community	A proportion of early help services commissioned from local groups, a high number of children in those community groups have an EHF	
	A mapped Harrogate Council early help offer. CYPS staff training other council staff in how to work with, listen to & if necessary refer cyps who are vulnerable	

Model	Cost	Quality	Time	Implementation Risk
Commissioning Model			N/A	N/A

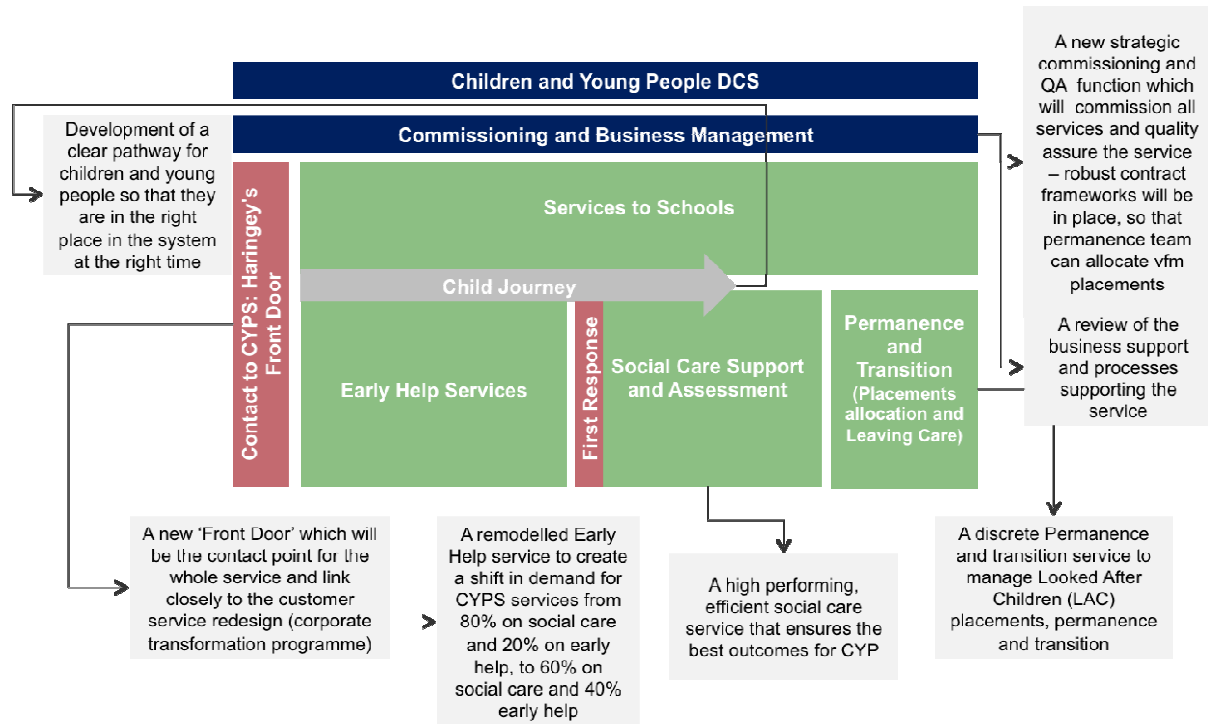


Note: Criteria are evaluated relative to other models.

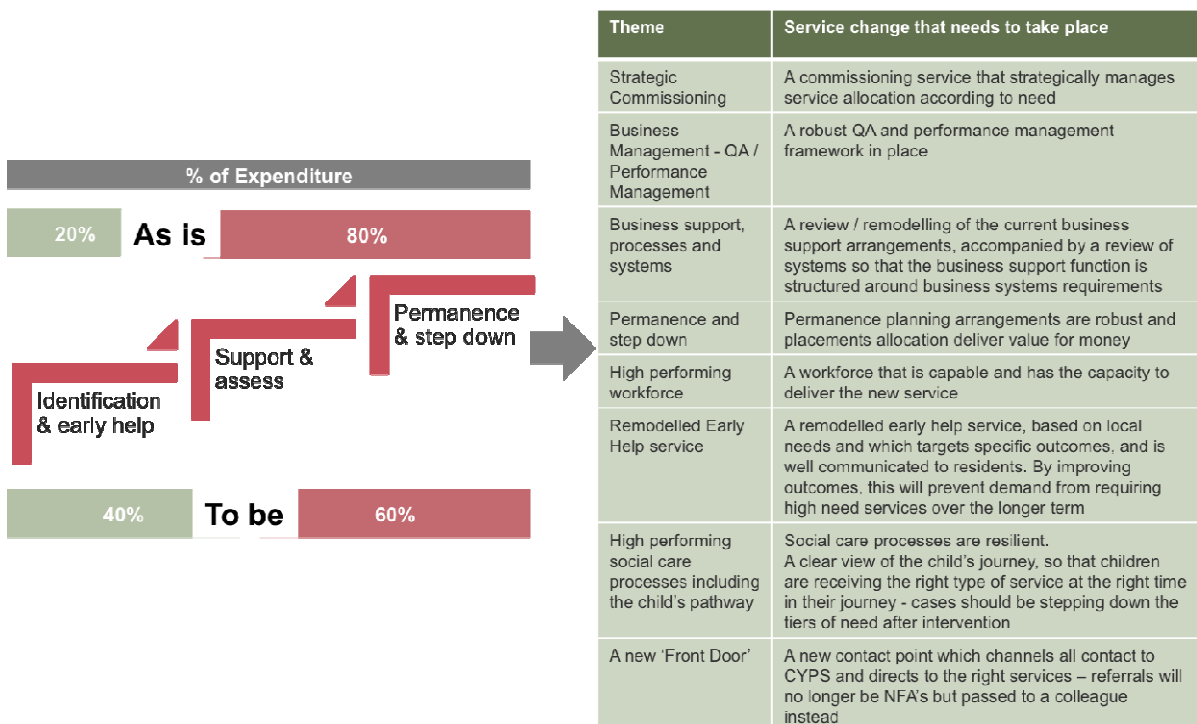
Principle	Summary of Evaluation Criteria	Fit with Criteria
Continuity of relationships	The referral gets to the right person quickly, case transfers are kept to a minimum, threshold procedure is well understood and working	
	Families will report telling their story once. A single record will operate across CYPS and will flow freely across agency boundaries ensuring a holistic view of the family's needs	
	Ensure that there is a stable and strong workforce, with staff turnover low and agency use minimised, cross-departmental % vacant posts, £ agency staff, staff survey re morale	
Inclusive	Services are proportionately distributed and commissioning strategies are based on need	
	Customers and partners will be consulted on a regular basis	
	Commissioning arrangements will be flexible	
Sustainable – building capacity & meeting the challenges of the future	An effective commissioning function in place which constantly evaluates the effectiveness of services against cost and outcomes	
	Services will be designed around the evidence base and monitored against the outcomes they achieve for children	
	The savings in the acute services will be recycled into early help services. The Council will aim to spend no less than 40% of expenditure in the service on early help	
	We will be able to manage risk well, right from the outset when a child is born or comes into contact with any of our services	

3.2 Option 2: Commissioning organisation

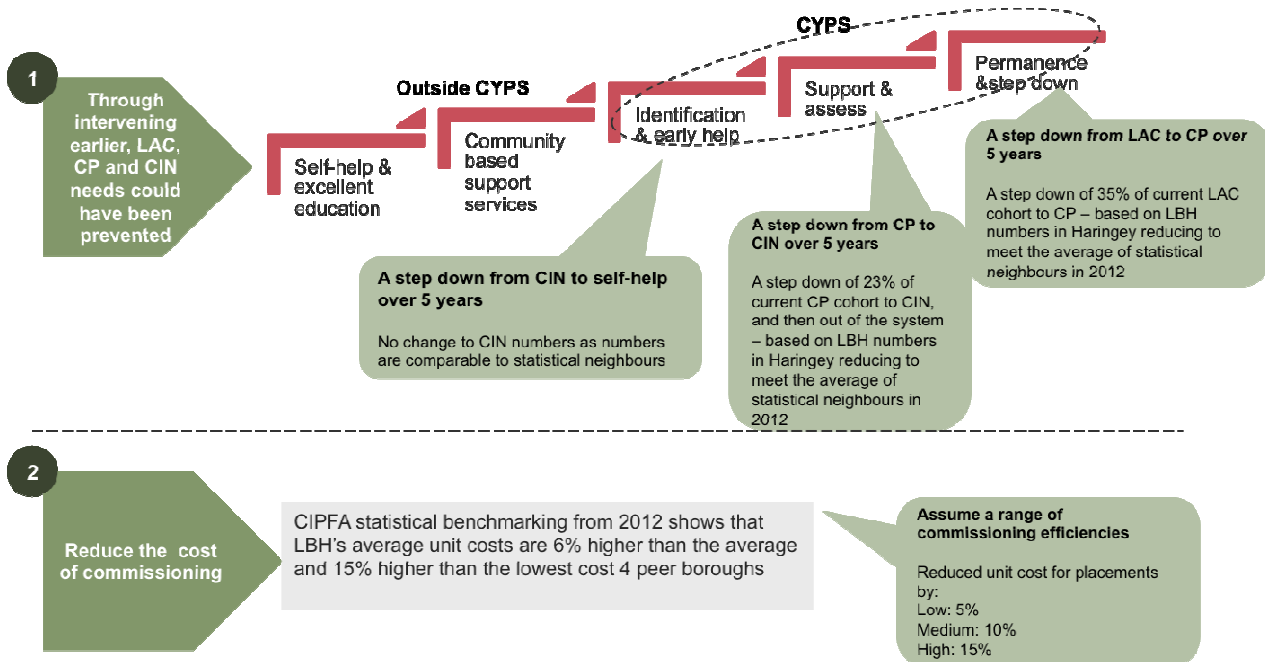
Key features of the commissioning model:



Service changes that will need to take place:



Financial assumptions:



Source: 1. DfE, 2012 CIN / CP / LAC rates per 10,000 of population, using CIPFA nearest neighbours analysis
2. CYPS Performance

Indicative benefits:

Summary : The benefits of the Commissioning CYPS model are that there is resilience built into the system, prior to wider transformation, a new service for early help is developed and embedded which could yield a re-investment potential if managed and tracked well, additionally process efficiencies are likely to be made.

Estimated Gross Re-Investment Potential at Year 5
14% - 16% (low to high scenarios) £8.5m - £9.7m

Assumptions in the Financial Analysis	
Assumption	Detail and Source
LAC step down CP	➔ 35% reduction in LAC over 5 years
CP step down to CIN	➔ 23% reduction in CP over 5 years
CIN step into Tier 2	➔ Same number of CP as above leave the social care system into Early Help
Phased over 5 years	➔ No change in year 1, gradual phasing up to year 5
Process efficiencies	➔ Commissioning efficiencies over a range

Models exclude investment as it is difficult to scope the investment required in Early Help without a needs analysis – **it is expected that efficiencies from reduced demand would be required to fund a remodelled early help offer**

Summary of Benefits
<ul style="list-style-type: none"> ➔ Improved outcomes for CYP as a remodelled early help service will reduce need in the cohort over time ➔ Better value for money through outcome based commissioning and remodelled business support ➔ Improved workforce morale and workforce performance levels ➔ Improved management grip of staff and performance ➔ Confidence that children are receiving the right service to meet their needs ➔ Confidence that LBH's front door is open to all that need or want a service

Risks / Issues	Mitigations
<ul style="list-style-type: none"> ➔ That the service steps down cases when they are not ready ➔ That the assumptions in this scenario are unrealistic 	<ul style="list-style-type: none"> ➔ The step down model described here is demand led i.e. when the child needs a lower level service, the case can be stepped down ➔ The assumptions require further verification once we are clear on the nature of demand as this model is currently assumption based on national and peer data – proper benefits tracking then needs to accompany any financial modelling

The evaluation of the 'Commissioning model' option against the programme objectives is as follows:

Note: Criteria are evaluated relative to other models.

Principle	Summary of Evaluation Criteria	Model Fit
Built around the family	Services will be available in hours that work around family life. Easy access to information and advice about early help services	
	A range of family and parenting support services	
	Children at risk of significant harm will receive timely and effective support. There will be the right number of looked after children, close to home and in residential care only in exceptional circumstances	
Local	Families are able to self-refer through a range of channels and get access to information and guidance. A straightforward and well understood pathway for practitioners	
	Practitioners can identify named colleagues operating at every step	
	Other agencies will always be identified and collaborated with	
Draw on the strengths of the community	A proportion of early help services commissioned from local groups, a high number of children in those community groups have an EHF	
	A mapped Haringey Council early help offer. CYPS staff training other council staff in how to work with, listen to & if necessary refer cyps who are vulnerable	

Model	Cost	Quality	Time	Implementation Risk
Commissioning Model				

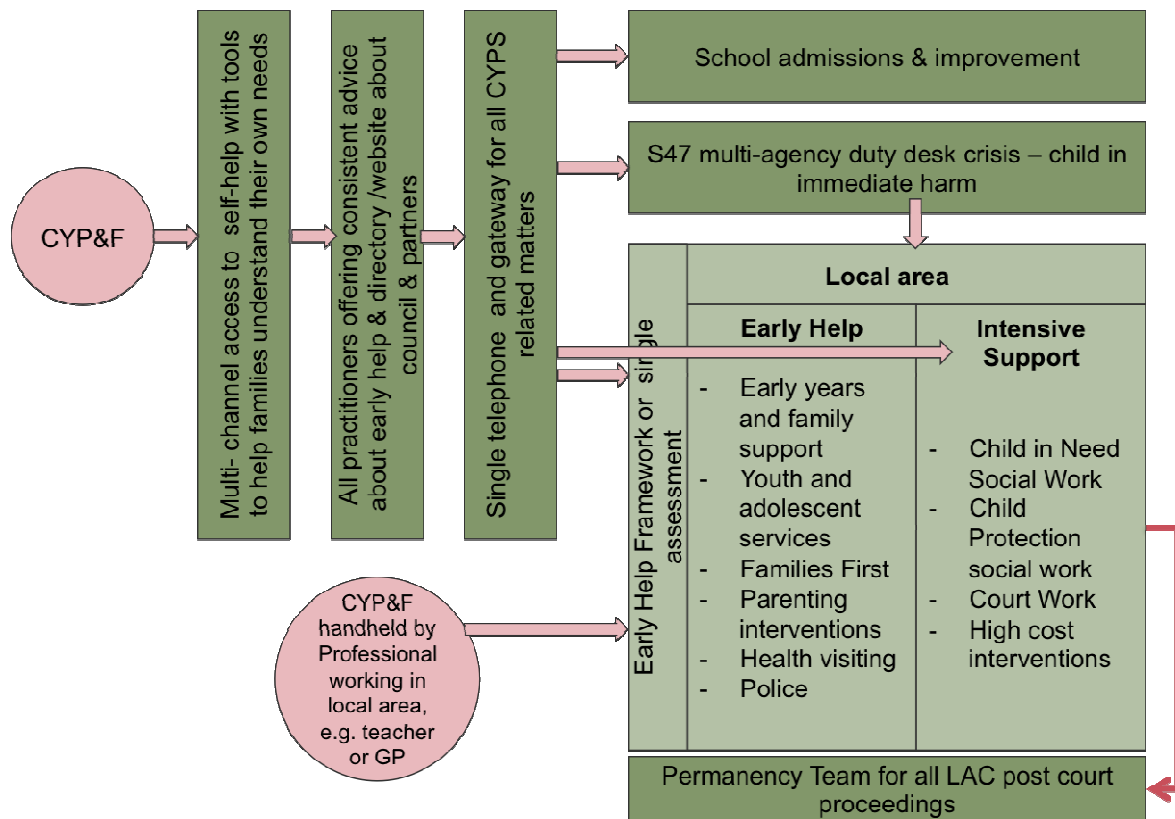


Note: Criteria are evaluated relative to other models.

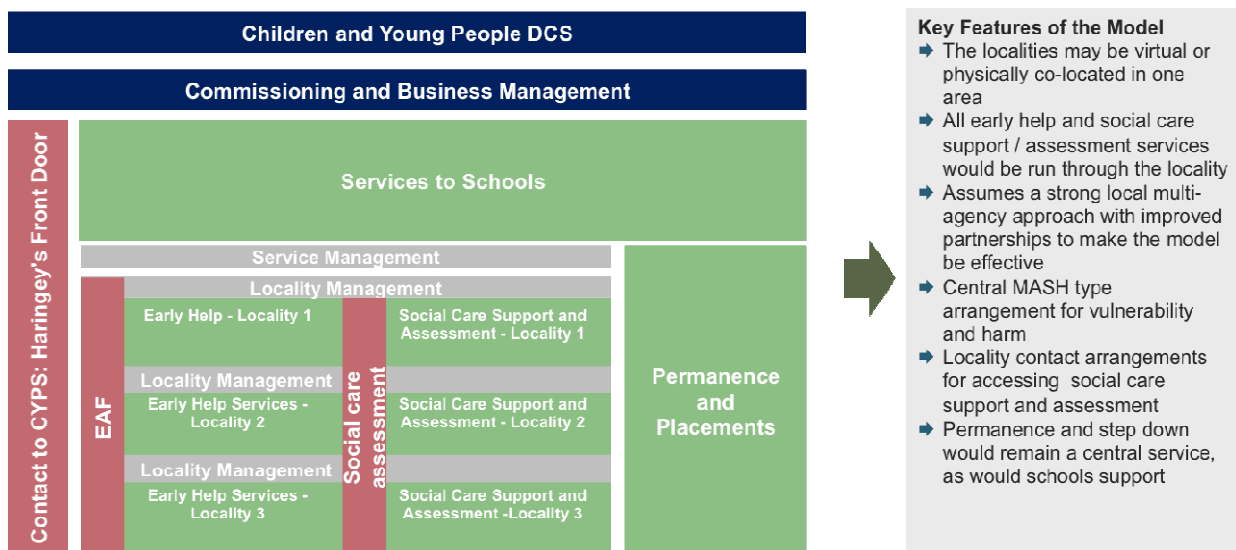
Principle	Summary of Evaluation Criteria	Fit with Criteria
Continuity of relationships	The referral gets to the right person quickly, case transfers are kept to a minimum, threshold procedure is well understood and working	
	Families will report telling their story once. A single record will operate across CYPS and will flow freely across agency boundaries ensuring a holistic view of the family's needs	
	Ensure that there is a stable and strong workforce, with staff turnover low and agency use minimised, cross-departmental % vacant posts, £ agency staff, staff survey re morale	
Inclusive	Services are proportionately distributed and commissioning strategies are based on need	
	Customers and partners will be consulted on a regular basis	
	Commissioning arrangements will be flexible	
Sustainable – building the capacity & meeting the challenges of the future	An effective commissioning function in place which constantly evaluates the effectiveness of services against cost and outcomes	
	Services will be designed around the evidence base and monitored against the outcomes they achieve for children	
	The savings in the acute services will be recycled into early help services. The Council will aim to spend no less than 40% of expenditure in the service on early help	
	We will be able to manage risk well, right from the outset when a child is born or comes into contact with any of our services	

3.3 Option 3: Developing a 'Local' CYPS service

Potential pathway and key features of the model:

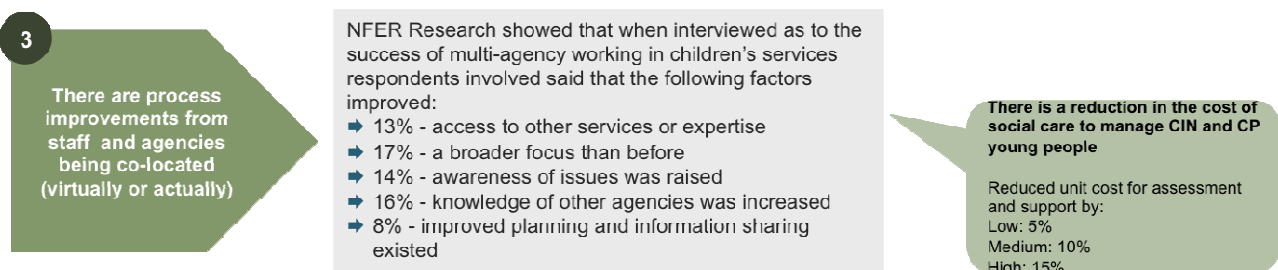
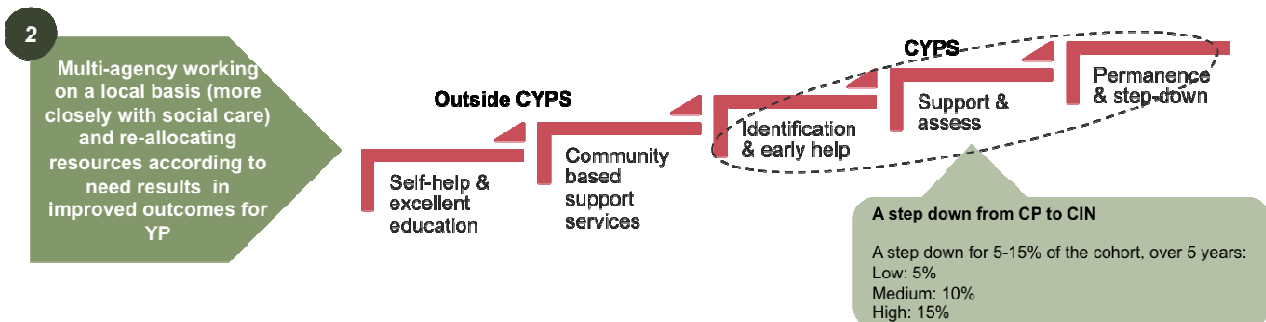
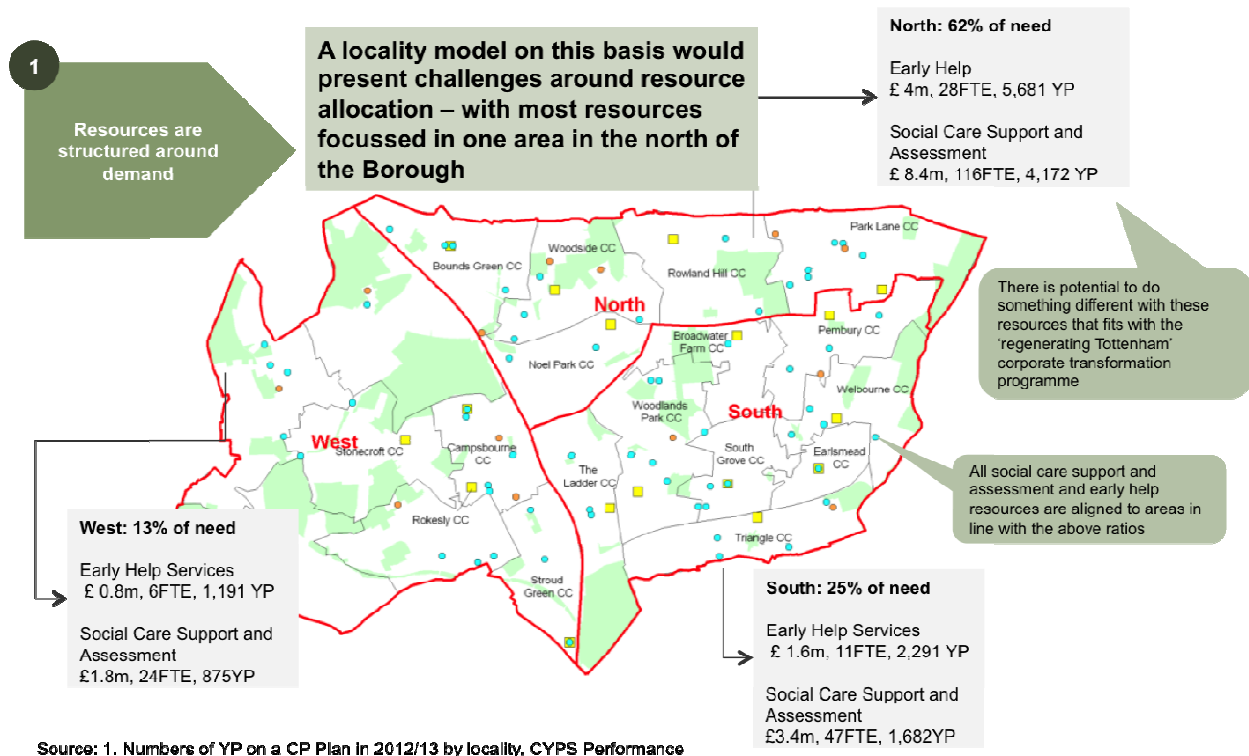


In addition to the early help and commissioning assumptions, this model assumes that staff are structured around several localities



It should be noted that there is very little quantitative data which is publicly available on the merits of multi-agency working on a locality basis – if the Council wishes to explore this further, it is recommended that discussions with other local authorities that are tracking the benefits takes place

Assumptions for the model:



Source: 1. and 2. Assumption. based on a qualitative survey , 'Multi-agency working: a detailed study, National Foundation for Educational Research, 2002

Indicative benefits:

Summary: The local model will allocate resources around need, and facilitate closer working with agencies. However, the local model is a structural solution which will need to be underpinned by a new way of working to support the change.

Estimated Gross Re-Investment Potential at Year 5 (Including the Commissioning CYPs Model)		Assumptions in the Financial Analysis	
13% - 15% (based on low to high scenarios) £8.1m - £8.9m		Assumption	Detail and Source
Models exclude investment as it is difficult to scope the investment required in Early Help without a needs analysis – it is expected that efficiencies from reduced demand would be required to fund a remodelled early help offer		CP step down to CIN	➔ Over a 5 year period
		Process efficiencies	➔ CIN / CP planning reduction in staffing unit cost over a range
		Phased over 5 years	➔ No change in year 1, gradual phasing up to year 5
Summary of Benefits		Risks / Issues	
<ul style="list-style-type: none"> ➔ Resources are focussed where the need exists and will be tasked with managing the need safely as well as improving outcomes ➔ The intervention will likely be better communicated to the customer as agencies will more joined up – the customer experience may be improved ➔ Less travel will be associated with social work ➔ Community buildings may be better utilised ➔ A community budget approach with partners could provide savings for partners and incentivise partners to be engaged ➔ There are likely to be more complex management arrangements ➔ There may be resourcing challenges with greater flexibility required than currently 		<ul style="list-style-type: none"> ➔ That the service is structurally localised but staff are not localised and do not work with agencies and families in a local way – without these changes, the model will only duplicate and add complication and cost to the service ➔ The risk of duplication in the service ➔ Dis-economies of scale and small teams ➔ The focus of resources in the high need areas becomes part of the model, and not a temporary solution, thus exacerbating the need further. Allocation of resources will need to be flexible and reactive to change 	
		<ul style="list-style-type: none"> ➔ The model needs to be accompanied by strong management and clear direction as to the purpose for the change ➔ If strong service management on a service and locality basis is not present, the model will be duplicating functions ➔ Benefits tracking needs to be in place so that the North team in particular is measured on outcomes – need should reduce over time if focussed resources are placed there 	

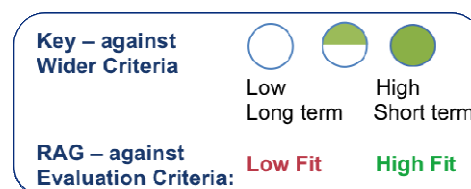
The evaluation of the 'Local model' option against the programme objectives is as follows:

Note: Criteria are evaluated relative to other models. This model is evaluated independently of Model 1 to highlight the difference

Principle	Summary of Evaluation Criteria	Model Fit
Built around the family	Services will be available in hours that work around family life. Easy access to information and advice about early help services	High Fit
	A range of family and parenting support services	Low Fit
	Children at risk of significant harm will receive timely and effective support. There will be the right number of looked after children, close to home and in residential care only in exceptional circumstances	High Fit
Local	Families are able to self-refer through a range of channels and get access to information and guidance. A straightforward and well understood pathway for practitioners	High Fit
	Practitioners can identify named colleagues operating at every step	High Fit
	Other agencies will always be identified and collaborated with	High Fit
Draw on the strengths of the community	A proportion of early help services commissioned from local groups, a high number of children in those community groups have an EHF	High Fit
	A mapped Haringey Council early help offer. CYPS staff training other council staff in how to work with, listen to & if necessary refer cyps who are vulnerable	Low Fit

Model	Cost	Quality	Time	Implementation Risk
Local Model				

Criteria are evaluated relative to the other 2 models

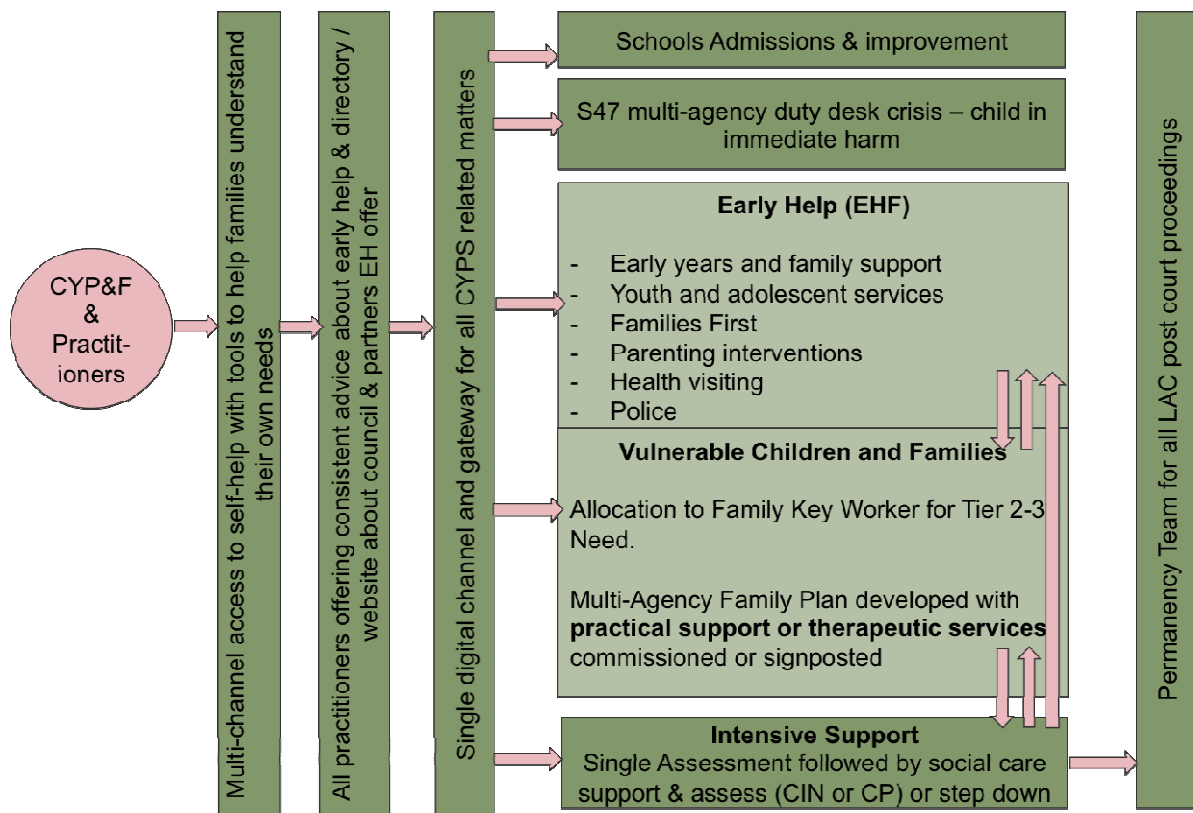


Note: Criteria are evaluated relative to other models. This model is evaluated independently of Model 1 to highlight the difference

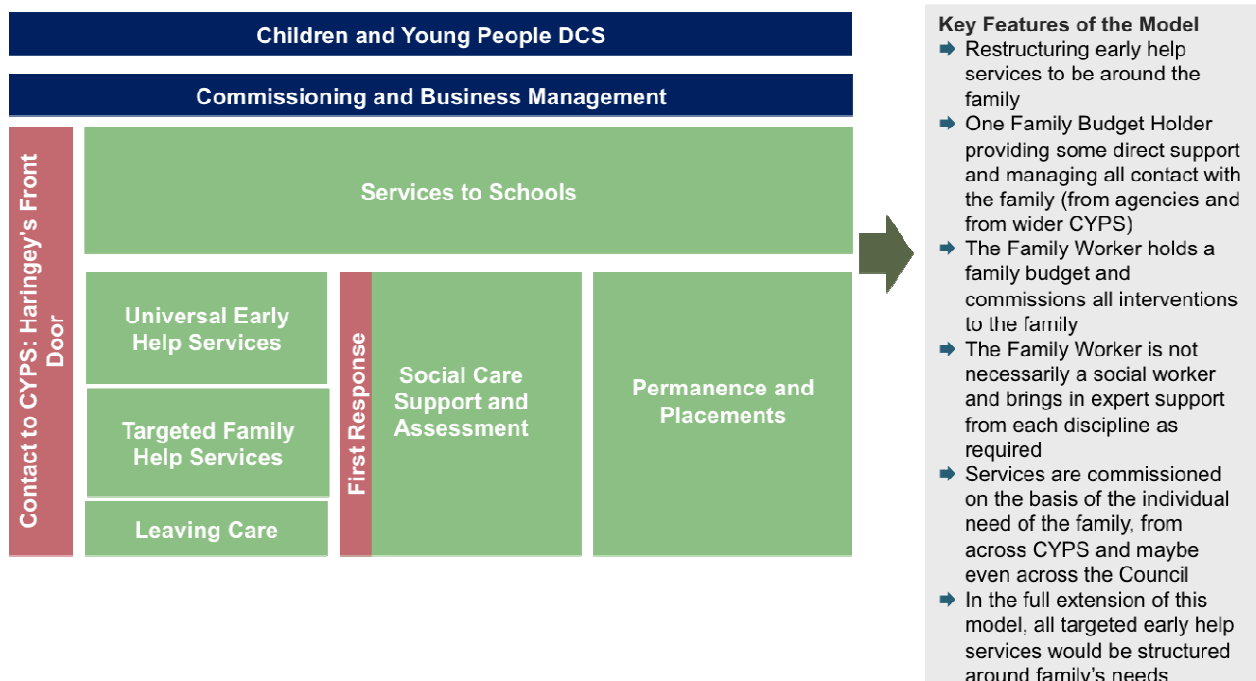
Principle	Summary of Evaluation Criteria	Fit with Criteria
Continuity of relationships	The referral gets to the right person quickly, case transfers are kept to a minimum, threshold procedure is well understood and working	High Fit
	Families will report telling their story once. A single record will operate across CYPS and will flow freely across agency boundaries ensuring a holistic view of the family's needs	High Fit
	Ensure that there is a stable and strong workforce, with staff turnover low and agency use minimised. cross-departmental % vacant posts, £ agency staff, staff survey re morale	High Fit
Inclusive	Services are proportionately distributed and commissioning strategies are based on need	High Fit
	Customers and partners will be consulted on a regular basis	High Fit
	Commissioning arrangements will be flexible	High Fit
Sustainable – building capacity & meeting the challenges of the future	An effective commissioning function in place which constantly evaluates the effectiveness of services against cost and outcomes	Low Fit
	Services will be designed around the evidence base and monitored against the outcomes they achieve for children	Low Fit
	The savings in the acute services will be recycled into early help services. The Council will aim to spend no less than 40% of expenditure in the service on early help	Low Fit
	We will be able to manage risk well, right from the outset when a child is born or comes into contact with any of our services	Low Fit

3.4 Option 4: Service around the family

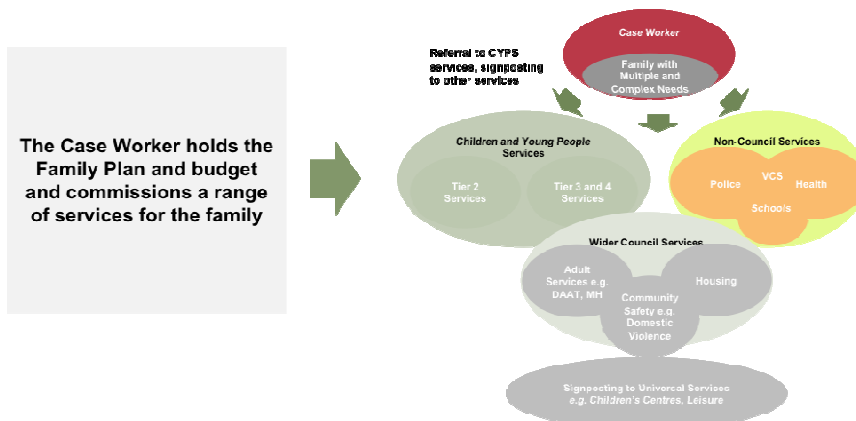
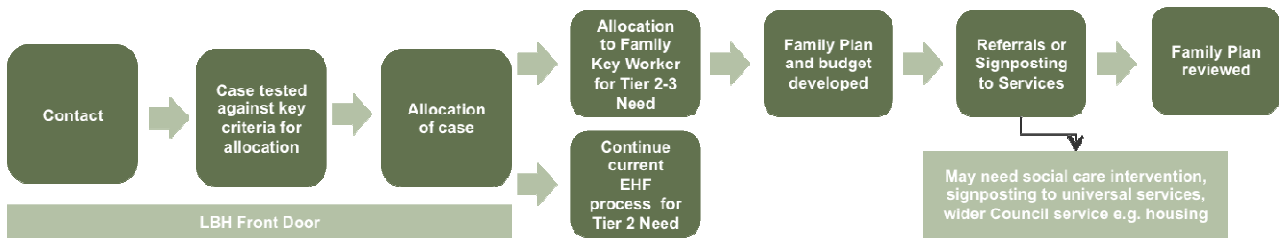
Potential pathway and key features of the model:



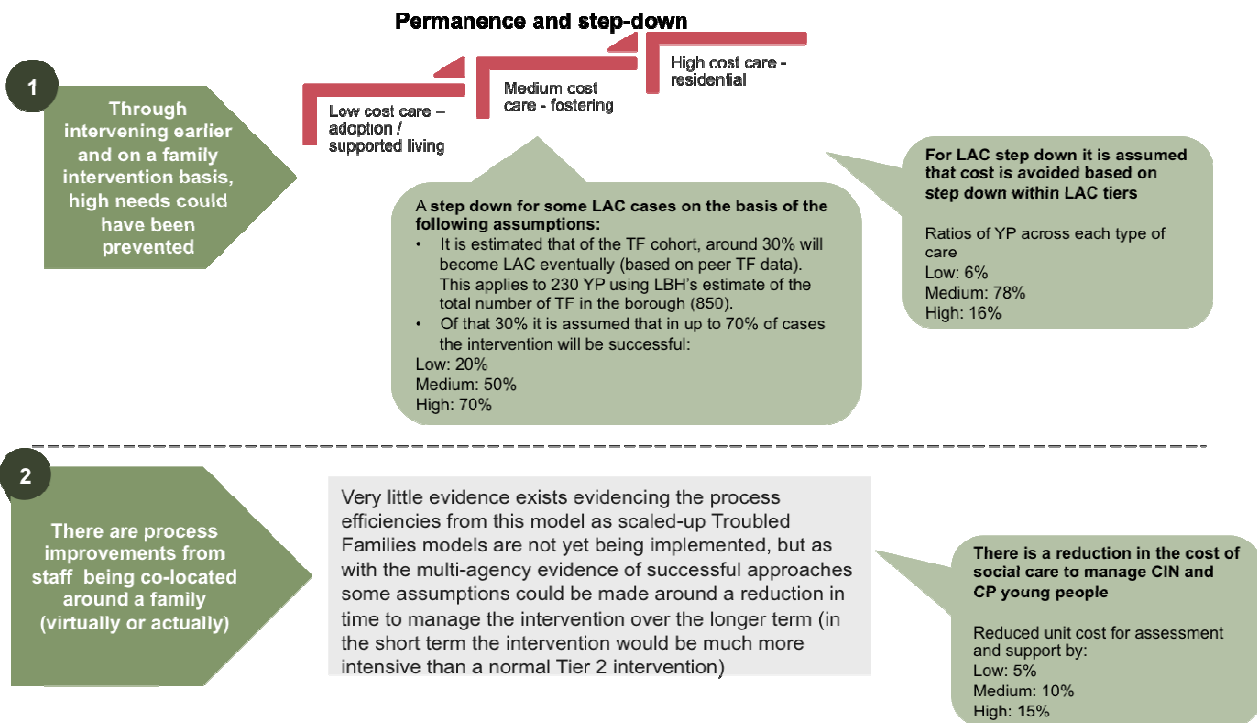
A family-centred intervention focussed on early help, but which may need to refer into social care – modelled on the Troubled Families initiative, but extended to a wider set of criteria



The model would select families at the Front Door (would need to include an early assessment hub) that meet an agreed set of criteria for a focussed family intervention. The family intervention would be managed through means of a plan and be surrounded by an appropriate governance arrangement to exit the family and step down



Assumptions:



Source: 1. iMPower assumptions based on working with other London Boroughs on a family-focussed prevention strategy
LBH Placements data

Indicative benefits:

Summary : The model will allow for better allocation of CYPS resources as they will be targeted against needs, and improved outcomes for the family as they intervention should be targeted better, and the relationship / communication with the family will be clearer

Estimated Gross Re-Investment Potential at Year 5 – Incremental to the Commissioning CYPS Model
16-20 % (based on low to high scenarios)
£9.6m - £13.7m

Models exclude investment as it is difficult to scope the investment required in Early Help without a needs analysis – **it is expected that efficiencies from reduced demand would be required to fund a remodelled early help offer**

Assumptions in the Financial Analysis

Assumption	Detail
A step down for LAC cases – avoided demand	➔ Demand reduced through LAC tiers based on actual data from a Troubled Families programme at another London Borough
A process improvement from working closely with the family	➔ Assumption, same as locality assumption
Phased over 5 years	➔ No change in year 1, gradual phasing up to year 5

Benefits	Risks / Issues	Mitigations
<ul style="list-style-type: none"> ➔ Better outcomes for the family – they are now dealing with one individual that they are more likely to develop a trusting relationship with; ➔ Process efficiencies for the Council – all interventions are directed through one individual; ➔ High cost specialist practitioners are brought in only as and when needed for a specific intervention; ➔ Allows for better use of partner resources. 	<ul style="list-style-type: none"> ➔ The family budget holder model will need to be accompanied by a culture change and training – the trainer will need to be professionally respected to carry the Family Plan ➔ Requires Tier 2 budgets to be much more flexible - creating financial complexity 	<ul style="list-style-type: none"> ➔ Will require training around what the role is and how it fits into the organisation ➔ Will need to be accompanied by a change in financial management internally through training / performance management– services will be commissioned according to family need, not supply

The evaluation of the ‘family model’ option against the programme objectives is as follows:

Note: Criteria are evaluated relative to other models. This model is evaluated independently of Model 1 to highlight the difference

Principle	Summary of Evaluation Criteria	Model Fit
Built around the family	Services will be available in hours that work around family life. Easy access to information and advice about early help services	High Fit
	A range of family and parenting support services	High Fit
	Children at risk of significant harm will receive timely and effective support . There will be the right number of looked after children, close to home and in residential care only in exceptional circumstances	Low Fit
Local	Families are able to self-refer through a range of channels and get access to information and guidance. A straightforward and well understood pathway for practitioners	High Fit
	Practitioners can identify named colleagues operating at every step	High Fit
	Other agencies will always be identified and collaborated with	High Fit
Draw on the strengths of the community	A proportion of early help services commissioned from local groups, a high number of children in those community groups have an Early Help Framework	Low Fit
	A mapped Haringey Council early help offer. CYPS staff training other council staff in how to work with, listen to & if necessary refer cyps who are vulnerable	High Fit

Model	Cost	Quality	Time	Implementation Risk
Family Model				
Criteria are evaluated relative to the other 2 models				

Key – against Wider Criteria

Low Long term High Short term High Short term

RAG – against Evaluation Criteria: Low Fit High Fit

Note: Criteria are evaluated relative to other models. This model is evaluated independently of Model 1 to highlight the difference

Principle	Summary of Evaluation Criteria	Fit with Criteria
Continuity of relationships	The referral gets to the right person quickly, case transfers are kept to a minimum, threshold procedure is well understood and working	High Fit
	Families will report telling their story once. A single record will operate across CYPS and will flow freely across agency boundaries ensuring a holistic view of the family's needs	High Fit
	Ensure that there is a stable and strong workforce, with staff turnover low and agency use minimised, cross-departmental % vacant posts, £ agency staff, staff survey re morale	Low Fit
Inclusive	Services are proportionately distributed and commissioning strategies are based on need	Low Fit
	Customers and partners will be consulted on a regular basis	Low Fit
	Commissioning arrangements will be flexible	High Fit
Sustainable – building the capacity & meeting the challenges of the future	An effective commissioning function in place which constantly evaluates the effectiveness of services against cost and outcomes	High Fit
	Services will be designed around the evidence base and monitored against the outcomes they achieve for children	High Fit
	The savings in the acute services will be recycled into early help services. The Council will aim to spend no less than 40% of expenditure in the service on early help	High Fit
	We will be able to manage risk well, right from the outset when a child is born or comes into contact with any of our services	Low Fit

4. Recommendation

The analysis of models within this report shows the following in summary format:

- ➔ **Do Nothing is not an option** – it does not meet the Programme’s objectives
- ➔ **Commissioning CYPS** – meets the objectives, provides some implementation risk and meets the highest rate of re-investment potential based on current analysis
- ➔ **Local** – Independently of Commissioning CYPS, does not meet the objectives at this point in time, provides greater implementation risk than other models and meets the lowest rate of re-investment potential
- ➔ **Family** - Independently of Commissioning CYPS, does not meet the objectives at this point in time, provides some implementation risk and meets a medium rate of re-investment potential compared to the other models

Whilst Local and Family do not meet the Programme’s objectives at this point in time, it is envisaged, that once the activity under the Commissioning model is completed, both models will support CYPS to meet its objectives in their entirety. The analysis within this report shows that the service is not ready to move to a Family or Local model without undergoing the activity as part of the Commissioning model first, which will establish some solid building blocks in the service before to embarking on a much more innovative change programme.

It is therefore recommended that the Haringey Council progresses on a phased approach, which will meet most of the CYPS objectives through a CYPS Commissioning model (Phase 3 of transformation between January 2014 and March 2015); and then proceed to meet the wider objectives through a more innovative model (Local or Family) as part of a fourth transformation phase, between April 2015 and March 2016.

Key principles that will need to be maintained through the process to ensure that the Programme continues to meet the CYPS objectives set are that:

- ➔ The Programme objectives are now set and are not substantially modified through the process
- ➔ There is a baseline, Outline Business Case (OBC) for each model, from which to measure success
- ➔ A detailed Full Business Case (FBC) will define exactly what the model future will look like and whether implementation should proceed and will be considered by Cabinet
- ➔ At each decision point, there is a checkpoint against the business case to ensure that objectives continue to be met (for example, gateway points at each stage).