North Tyneside
Health & Wellbeing Board Report
Date: 13 September 2016

Report from :   North Tyneside Council, Safeguarding Services

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(Safeguarding Services)

1.   Purpose:

This report serves to provide the Board with an overview of the model of social work practice entitled 'Signs of Safety'.

2.   Recommendation(s):

The Board is recommended to:-

a) endorse the proposed model of social work practice that will require a commitment from all partner agencies to fully embrace its methodology for full Implementation; and

b) request the Children Young People and Learning Partnership to lead on the development of the signs of safety model and report progress in 12 months time to the Board.

3.   Policy Framework

This item relates to the key priority of 'Improving the Health and Wellbeing of Families' in the Joint Health and Wellbeing Strategy 2013-18.

4.   Information:

4.1   What is 'Signs of Safety'?

Signs of Safety is a tool kit for how to do child intervention work, used by:
- Local Authority
- NHS
- Police
- Voluntary organisations

It includes:
- Guidelines for child intervention work
- How safeguarding professionals should use them
- A range of tools for assessment and planning
- Decision making and how to work with children, young people and families
- Processes when working with families, children and young, including partner agencies.

Dr Andrew Turnell and Steve Edwards developed the Signs of Safety in the 1990s. They used the experiences of child protection workers and what worked best for them with difficult cases.

It focuses on how to build a partnership with parents and children where a child is at risk of abuse, and strengthen and stabilise their family life.

The aim is to use this joined-up approach to work with other organisations to use Signs of Safety

4.2 Signs of Safety outcomes:

- Families feel more empowered and can understand and address the concerns
- Fewer children removed from families that are working closely with authorities
- Greater job satisfaction for practitioners due to the clear approach, purposeful tools and the impact for the children, young people and families
- Fewer referrals and improved outcomes
- Placing the child at the heart of the process and building a safety network around their care
- Working with families and not against them as part of a "blame culture"
- Creating a shared language to manage risk, using plain English that families and children can understand
- Developing a practice framework and culture across all child protection responses for all organisations

It is argued that an effective model of practice is essential. Signs of Safety have been honed by the experience of workers and has a substantial evidence base. However, a model of practice is not sufficient to transform Children's Services. For this to occur, the organisation has to change with the practice, it needs to be aligned to the practice. This requires a huge culture change in terms of new ways of working, new skills, behaviours and knowledge.

4.3 Implementation of Signs of Safety

At first, it may be overwhelming to think about everything that needs to happen in order to start and continue to implement Signs of Safety as the operating model across services and all work with parents, children and partner agencies.

Child protection is always about the art of the possible in the real world within the agency at any given time, considering political imperatives, funding limitations, evolving local and national policy trends, quality and turnover of staff, and current organizational culture, that is, the full spectrum of intersecting realities at play.

Meaningful change in child protection requires a compassionate whole of person, whole of organization vision detailed down to particulars informed by our best expert knowledge with those leading the vision constantly guided by those living the work. While the vision

is and must be comprehensive to stay the course, eating an elephant is always done one bite at a time and an agency and its leadership team can only do so much at any point in time. The Signs of Safety team working with the organization will always focus with agency leaders on what's possible.

Every jurisdiction is unique, and will have its own goals for the implementation of Signs of Safety. The Signs of Safety licensed trainers and consultants are dedicated to customizing Signs of Safety, and working to the timelines, that meet the specific needs of the agency. At the same time, there is a clear implementation process and trajectory to begin and guide the journey that has been demonstrated to make the most progress. Two years of strong and focused activity in learning, leadership, organisational alignment and meaningful measures (quality assurance and data systems), within the context of a long-term commitment, supported by licensed Signs of Safety trainers and consultants is what has been demonstrated to deliver substantial transformation.

4.4 The implementation model

This is a proven standardised approach to implementing Signs of Safety. This is outlined below.

Signs of Safety will be implemented in a phased approach, managed by a project team, made up of Practice Leaders and key stakeholders from Organisational Development and Business Improvement team that will operate for a period of 6 months. It is hoped that an implementation manager will be seconded for 1 year to lead the roll out.

The first phase will focus on engaging the workforce – explaining the rationale, purpose, timescales and how they can get involved in the design phase of the work. . This will involve all social work front line practitioners, executive leadership and managers will receive initial Introduction to Signs of Safety training with additional support provided through support sessions and development sessions with trainers to begin to develop the approach in practice. In addition the case conferences will be implementing an interim conference approach using Signs of Safety.

Lead facilitators across Children's Social Care will work with staff and service users to inform the development of S of S tools for North Tyneside and provide quantative and qualitative feedback as part of the evaluation process that will inform the second phase of the implementation to embed the approach into practice.

We will work to identify and develop IT solutions as part of the implementation of the new IT system Plan to ensure compatibility with the S of S tools. Work is also underway to commission and procure a system which will be compatible with the approach.

The project will sit within a wider programme governance that will ensure connectivity with other key areas of transformation across children's services, in particular Early Help, Troubled Families and the redesign of specialist services operating model.

4.5 The Implementation Journey

Below outlines a summary of the key phases of the implementation plan. A more detailed plan is outlined in appendix A

preparation	• purpose, commitment and planning
months 1-3	• basic training and organisational building blocks
months 3-6	• advanced training, policy alignment and partner engagement
months 6-9	• Aligned supervision, the Knowledge Bank and organisational capacity
months 9-12	• Application across the continuum of service and aligned quality assurance
months 12-18	• Implementation review and targeted training
months 18-24	• Internal Gathering and integration of basic training
3-5 years	• Aligned information management and targeted learning and development

4.6 How will we know it is working?

National research projects help us to learn about the impact of SOS on staff and on families through surveys and family interviews on the quality of service delivery;

Resource implications
- Project management
- Support for OD/WFD
- Time commitment for staff briefings, training, design group, steering groups etc.
- Financial cos

5.   Decision Options

The Board may either:
   a. Endorse the proposed model of social work practice and request the Children Young People and Learning Partnership to lead on its development; or
   b. Note the report and take no further action.

6.   Reasons for Recommendation

The Board are recommended to approve option a.

7.   Appendices:

Appendix A – detailed implementation plan

8.   Contact officers:

Kevin Buck, Interim Senior Manager (Safeguarding Services)   Tel - 643 8488.
Jacqui Old Director Health Education and Childrens Services

9.   Background information:

The following background documents have been used in the compilation of this report and are available from the author:-
- Signs of Safety Implementation Training and Consultancy UK Offer

COMPLIANCE WITH PRINCIPLES OF DECISION MAKING

10   Finance and other resources

There will be financial implications for the Council associated with the implementation of the Signs of Safety training and consultancy offer. Details of these implications would need to be considered by the Authority in deciding whether or not to proceed with the implementation of the model.

11   Legal

The model enables the Council, and partners, to fulfil their statutory duties in relation to the Children Act 1989. Any procurement of services to support the implementation of Signs of Safety model will require compliance with the Authority's Contract Standing Orders and may require approval by Cabinet or officers acting under delegated powers.

12   Consultation/community engagement

Partner Agency consultation initiated and will continue with oversight by LSCB and CYPL.

13   Human rights

There are no human rights implications directly arising from this report

14   Equalities and diversity
This policy will be subject to an Equality impact assessment during the implementation process This policy will have to meet the Equality Act 2010 requirements to have due regard to the need to meet any of the following:
Eliminate unlawful discrimination, harassment and victimisation
Advance equality of opportunity amongst different groups
Foster good relations between different groups

15   Risk management

The risks identified can be managed following the Council's risk processes.

16   Crime and disorder

There are no crime and disorder implications directly arising from this report.

SIGN OFF

Director of Public Health	X
Chair/Deputy Chair of the Board	X
Chief Finance Officer	X
Head of Law & Governance	X