

Preventative services - Core purpose and Interface with other internal teams and external agencies

This document is designed to describe the interface between Preventative Services and other internal and external colleagues/teams, including our Early help partners.

Core Purpose of Preventative Services

Preventative Services support families with children from pre-birth to 18, with multiple and/or complex needs which have not been able to be addressed by universal services. The aim is to work with families to help them improve their resilience, achieve positive outcomes and reduce the chance of problems getting worse. Preventative Services work alongside colleagues from universal services, such as schools and early years' settings, health providers, and sometimes in partnership with specialist teams from health or social care, working with the whole family.

Structure of Preventative Services

Preventative Services are part of South Gloucestershire Council's Integrated Children's Services (ICS), specifically contribute to the vision and priorities of South Gloucestershire's [Early Help Partnership Strategy](#) 2019-24 and include the following teams:

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Compass team

- [Families Plus 0-5](#)
- [Families Plus 5-18](#)
- [Young Peoples Support \(YPS\) team](#)
- Youth Offending Team (YOT).

The Preventative Services approach

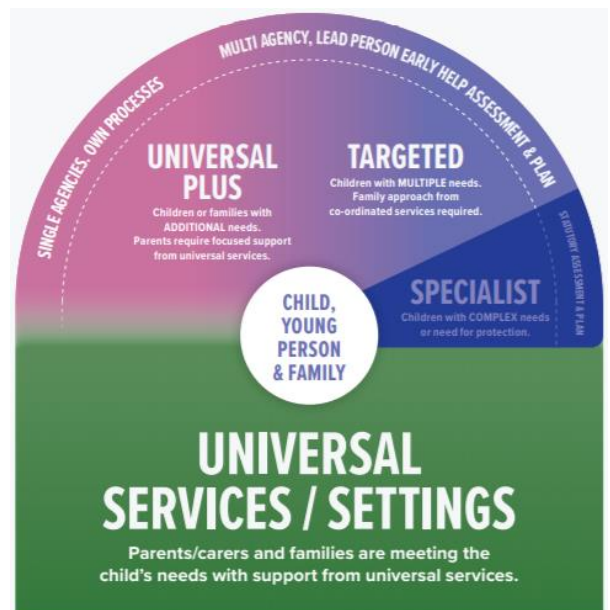
- Whole family work - exploring the issues and dynamics within families which may be impacting on the presenting issues eg. the impact of poor housing, unemployment, mental health etc
- Conversations with families to identify their needs, strengths and best hopes, using a strength-based, '[Signs of Safety](#)' approach.
- Families are supported to drive the work themselves
- Trained workers facilitate, coordinate and use evidence-based interventions to support families
- Keyworkers identify and enhance the wider support network of family, friends, community and professionals to sustain progress.
- The teams only work with families who want to work with Preventative Services (except where a statutory Youth Justice order applies) and who give consent.

When do Preventative Services work with families?

Preventative Services are targeted, with some specialist functions (notably the statutory work undertaken by the Youth Offending Team). The key aspects of targeted work are described in the [Early Help Partnership Strategy](#).

Teams may become involved with families at different stages. For example:

- Compass provide advice and support to services who are working with families and/or who are leading on an Early Help Assessment and Plan (EHAP)
- Compass provide advice and signposting directly to families
- YPS and Families Plus teams (0-5 and 5-18) work alongside other agencies and/or directly with families whose needs are more complex
- All teams can work with families who have 'stepped down' from statutory services to support them sustain positive changes.
- YPS and Families Plus 0-5 teams may contribute to an existing Child in Need or Child Protection plan, for a specific piece of work
- YOT support young people to reduce the risk of offending or re-offending



How do Preventative services teams interface with others?

Context:

Continual review of circumstances, supported by collaborative conversations, is the best way of identifying and responding to the needs of children and young people and their families. For children and young people to receive the right help in the right way at the right time, conversations need to be constructive, going beyond a discussion about concerns to form part of a meaningful assessment and, where appropriate, a plan to support the child, young person, and their family.

This approach promotes shared responsibility and flexibility, recognises the complexity and individuality of the needs of each child and family and reduces bias of individual professional and agency decisions through discussion and debate.

Principles:

The principles and expectations outlined below should be applied with discretion to promote the delivery of high-quality services across the continuum of need for children, young people and their families. This will involve managers – and the teams they manage – exercising professional judgement, promoting and maintaining effective cooperation and communication to ensure that families receive the right help in the right way at the right time.

These are principles for good practice and are intended to aid professional discussion and decision making. They are not intended to be applied as a rigid set of rules:

- The primary consideration in all interactions between teams and services must be the needs and best interests of the child, young person and their family. The number of hand-offs, between teams and services, should be kept to a minimum and wherever possible the child's wishes and feelings should be considered when decisions are being made.
- Parental or child (in the case of young people) consent for referrals to, assessment by, and intervention from, Integrated Children's Services should be obtained and should be explicit on all files.
- Conversations between practitioners, practice managers and team managers are strongly encouraged, and should always take place if there is uncertainty about the level of need and/or whether transfer to another team is the correct action. These conversations with decisions, outcomes, planned actions and timeframes should be recorded on the child's / family's electronic record.
- All conversations should take place at the earliest opportunity between practitioners and managers of current and future teams when assessment, in line with the continuum of need (threshold document), indicates that the family has a particular need that can be met by the proposed receiving service. These conversations with decisions, outcomes, planned actions and timeframes should be recorded on the child's / family's electronic record.
- Step-up/Step-down conversations, held prior to any transfers, should be smooth and swift, and transfers should be completed within the timeframe agreed during the continuum of need discussion. There should be no unnecessary delay for families arising from this process.
- Where there is professional disagreement within the continuum of need conversations (about potential transfer), these should be resolved by team managers in the spirit of good communication and collaboration, and with families' needs at the heart of all discussions. If team managers cannot reach agreement, they should escalate to their respective Service Managers for resolution, in line with South Gloucestershire Children's Partnership Resolution of Professional Differences (Escalation Policy) (Updated October 2020). It is expected that this will occur in very few situations.

- It is anticipated that early conversations will help define the best-placed team or service to meet need at the earliest opportunity. This will enable the worker who is handing over to prepare the child's / family's records for passing to the new worker and for their manager to quality assure the file against the minimum standards prior to the handover taking place. Once handover is complete, the receiving team assumes case responsibility; however, should remedial action be required to bring the case file into order then the team manager handing over must ensure that this is done.

Specific team interfaces:

1) Compass/Access teams

The Compass team is a small team whose core function is to support the delivery of the [Early Help Partnership Strategy](#), navigating families to the right information, advice and guidance, at the right time and as early as possible when problems emerge.

The Compass and Access team have a pre-triage system, the purpose being to think Early Help at an early stage and to ensure that families receive the right help and support from the right team at the right time. All emails in the Access inbox are reviewed by a qualified Social Worker / Manager within 24 hours of receipt but if the level of risk and need is of early help, this will then move to the Compass team to progress. Occasionally, a challenge/support conversation between the Access and Compass team managers takes place at this stage, so as to clarify and confirm rationale in relation to the early help threshold.

Access Social Workers will inform Compass when they have completed an assessment and have stepped down to community Early Help Assessment and Plan. This enables Compass to ensure the community Early Help Assessment and Plan has been completed within 6 weeks, and the named Compass Partnership Worker can offer support to the early help setting when completing the assessment.

Compass will offer induction for all new Integrated Children's services staff.

2) Compass/Response Teams

Daily Threshold discussion meetings occur which are manager's meetings to hold strengths-based conversations about where family's needs can best be met. This includes Team Managers from Access, Response and Preventative Services. The purpose of these conversations is to ensure families are receiving the right help, in the right way, at the right time as not all families will require a statutory social work assessment and families can be supported by community resources.

The Compass Team Manager is the named link person for the Response Teams and sends updates to the Response Team Managers. Compass are available to offer induction for new staff.

Response Social Workers will inform Compass when they have completed an assessment and have stepped down to community Early Help Assessment and Plan. This enables Compass to ensure the community Early Help Assessment and Plan has been completed within 6 weeks, and the named Compass Partnership Worker can offer support to the early help setting when completing the assessment.

3) Compass/Early help partner agencies

Compass provides information and advice both directly to families, as well as to professionals who are supporting them to enable them to achieve meaningful and positive outcomes without the need for statutory intervention. This will include asking individual agencies to consider what practical help they might offer, either on a one off or ongoing basis. Additionally, support will be provided to professionals across the partnership to enable them to support families achieve good outcomes. Compass aims to empower families by working with them, not doing things to or for them, identifying and building on strengths and recognising that family, friends and community can be the most effective and sustainable forces of “help”.

In relation to the interface with early help partners, the Compass team will:

- Support activities designed to build the capacity and effectiveness of early help responses and services within the community including active engagement with the cluster-based community networks. For example, the Compass team manager regularly co-presents the Level 3 Safeguarding training to GPs and has been able to share a greater understanding of the role of Compass but also the wealth of community resources available for GPs to signpost families to.
- Ensure that professionals have access to skilled advice that enables them to effectively support children and families at the earliest possible opportunity. Support to professionals will take the form of telephone/email contact and face to face meetings. One example is that each school setting (including preschools) has a named Compass Partnership Worker who are the ‘go to’ advisor for that school – they encourage schools to contact Compass for informal conversations and all advisors have visited every school to make contact in person with the SENCO/Designated Safeguarding Lead or named Pastoral Support as well as having delivered a pack of resources (posters) – these posters include Early Help support in South Glos / Voice of the Child/ Role of Compass.
- Ensure that professionals have access to up-to-date information regarding support services that they might navigate families to.
- Provide professionals with advice and support with regard to initiating an early help assessment and plan. As necessary this will include practical support and mentoring, such as helping to facilitate a family meeting. The Compass team also quality assure a number of Early Help Assessment and Plans each month and feedback is sent to the lead professional. Compass also offer regular workshops for settings to support settings to write good quality , child and family focussed early help assessments and reviews.

- Coordinate all activity relating to the delivery of the early help common processes (early help assessments, plans, and reviews, performance monitoring and quality assurance).
- Provide training to professionals, particularly with regard to facilitating early help plans and delivering support within the Signs of Safety framework. Eg The team has held Early Help Assessment and Plan virtual Workshops to promote what a good EHAP looks like/ writing and reviewing action plans.
- Support the development and updating of information included in the Children, Young People and Families information web portal to ensure the information is accurate and of high quality.
- Develop links with our partner agencies, for example Next Link, Julian House, Southern Brooks by attending their team meetings to share up to date information regarding Compass and early help support available for families.

Families plus teams/ Young People's Support (YPS) team and Access and Response teams

Preventative Services and Social Care are jointly committed to ensuring that families receive the right help at the right time in the right way. As such, managers maintain formal and informal communication to achieve this.

4) Families plus/ YPS with Access team:

Representatives from ART and Preventative Services use a daily threshold meeting to discuss families whose needs are close to, or at, the statutory threshold for Social Care intervention; those present consider the information provided in external referrals or internal step-up requests to determine the appropriate next action to support the family. This could be:

- Proceeding to a Child and Family Assessment (C&FA) by the Response team (this would include Step-up from Preventative Services)
- Proceeding to / staying with Preventative Services under an Early Help Assessment and Plan (EHAP)
- Not proceeding within Integrated Children's Services but recommendations given to the referrer for:
 - Support in the community, generally using a Community EHAP to structure this effectively
 - More information / clarification on key matters so that a better-informed decision can be made
- Escalation as a result of professional difference of opinion (See above)

The outcome is recorded on Mosaic by the manager bringing the family to the meeting and this data is, since March 2022, being collated on Sharepoint in order to evaluate the effectiveness of this interface.

Where the Families plus or YPS team are working with a family and the risks to the child or young person are escalating, they will initiate discussion with the Access team using the daily meetings slot; this normally takes the form of a conversation about the level of risk and may include recommendations for information required to determine whether statutory intervention is necessary. If agreed, Preventative Services complete a Mosaic step—up form. The process ensures that a timely decision is made in Access so that Response can start the Child and Family Assessment quickly. Families Plus or YPS will usually continue to keep the case open during this assessment period to support the Social Worker and the family until a decision is made about the level of risk and possible ongoing Social Care support.

5) Families plus/ YPS with Response team:

Where a C&F assessment has been / is being undertaken and the Social Worker and their manager consider the identified needs may best be met at non-statutory level, they will propose a Step-down to a Preventative Services team.

A weekly meeting is scheduled for such discussion between representatives from Response and the relevant Preventative Services team. This conversation can take place at any stage during the assessment and more than one can take place, if necessary, before the next step is initiated formally. Outcomes from such meetings could be:

- Accepted for Step-Down to Preventative Services (with identified work and the explicit consent for this work from the family); a time-frame is normally agreed for the step-down to take place.
- Decision to propose ongoing work under a Child in Need plan, generally in Locality Social Care
- Recommendation to Step-Down to a community setting which can provide and / or coordinate relevant support under a Community EHAP.
- More information to be gathered to inform the next step.
- Closed with No Further Action (NFA) if appropriate.

6) Families plus/ YPS with Locality social care teams

Where Locality Social Care identifies that they are approaching the end of the plan, and that the levels of need and risk no longer require statutory oversight, they may consider that Preventative Services can support the family at point of closure. Social Care managers can approach Preventative Services at any stage to initiate discussion and, where appropriate, arrange an effective handover and Step-Down. Preventative services should be invited to the step down CIN review meeting.

In all such interfaces with regard to direct work with families, best practice is that an effective hand-over process is undertaken to ensure that the family's experience is as smooth as possible. Interaction between teams is not restricted to the transfer of work; advice, guidance, peer support and sharing of good practice takes place between teams from both Social Care and Preventative Services.

Families Plus 0-5 and YPS teams can contribute to Locality Social Care cases in the same way as they contribute to Response team cases; the same process is followed as outlined above, with a focus on early discussions between managers to ensure that the right help is given in the right way at the right time. Families Plus 5-18 teams do not contribute to Social Care cases due to resource having moved to Social care from Preventative services, to undertake this function, in 2020.

A Children In Need (CIN) Review Panel was established in 2022 focusing on those families which are open to Locality social care at the 9 and 12 month stage. The Panel will facilitate discussions where both Service Managers and Team Managers from Locality and Preventative services agree the broader trajectory of the family. If it is felt that no other services are required, a clear trajectory will be produced of when the family will close to social care. If it is felt that further support would be beneficial to the family, discussions will take place regarding which service would be the most appropriate for the family and a trajectory of when the case could step down will be produced. This Panel is not a hand over meeting; it is about early identification of families which can be stepped down from Social Care to ensure that a robust plan is in place for when the family step down and information is shared to avoid any drift and delay.

7) Families plus and YPS/early help partner agencies

As outlined above, referrals from Early Help Partner Agencies are managed via Compass and if, following their enquiries, Compass believe that the family's needs are best met by Families Plus or YPS teams, Compass will start the discussion with managers from Families Plus or YPS ensuring they have consent from the family for the referral. Following these discussions there are 2 possible outcomes:

- Families Plus or YPS become Lead Professional
Where it is agreed that these teams are best placed to meet the needs of the family, Compass will send notification via Mosaic to the relevant team who will allocate to a worker to take on the Lead Professional Role.
- Families Plus or YPS Contribute to Community EHAP
Where it is agreed that the needs of the family are best met by Universal or Universal Plus services, but that there is a specific piece of work which Families Plus or YPS can offer, then these teams will become Contributors to the Community EHAP. This work is time limited with a clear focus on a specific area of work to complement the direct work being completed by colleagues leading the Community EHAP. The Lead Professional will be from an early help partner agency and they will ensure the family have given consent for the work.

All agencies and teams within the Early Help Partnership, including the Council's Preventative Services, work below the social care threshold so there is not a Step Up to Families Plus or YPS from a Community EHAP but rather a Step 'Across' for more targeted forms of Early Help, alongside the Universal and Universal Plus support.






Requesting support from Preventative Services (other than YOT)

A '[Request for Help](#)' form can be completed by a family or, with the family's consent, by a professional or other person on their behalf and sent to accessandresponse@southglos.gov.uk. If there are no significant safeguarding concerns the Compass team will explore how to link the family to the most appropriate level of support. This could be by directly providing advice, through the wider early help partnership or Preventative Services.

For requests from Social Care

- i. If the Social Worker has assessed that the family would benefit from a contribution to the Child in Need or Child Protection plan, they can request this directly from YPS and from Families Plus 0-5 (Families Plus 5-18 workers do not undertake these contributions). This contribution will explicitly support the family to meet the safety goals identified within the statutory plan.
- ii. If a social worker is proposing to close their involvement with a family they can propose a 'step-down' to Preventative Services with the family's consent. This would be to support the family sustain progress.

Further information on specific teams within Preventative Services is below:

Compass	 Compass%20Team%20Structure%20Feb%2020.docx	<p>Families in Focus</p>  FiF Briefing Note June 20.docx
Families Plus (0-5)	 Briefing Families Plus (0-5) April 20 V1	
Families Plus (5-18)	 Briefing Families Plus 5-18 v3.5.docx	
Young People's Support	 Briefing YPS May 2020 V1.3.docx	