

Meeting of:	<b>Healthy Living and Social Care Scrutiny Committee</b>
Date of Meeting:	<b>Tuesday, 12 September 2023</b>
Relevant Scrutiny Committee:	Healthy Living and Social Care
Report Title:	The Vale of Glamorgan and Cardiff Integrated Family Support Team Annual Report 2022-23
Purpose of Report:	To provide Scrutiny Committee with an opportunity to consider the 2022-23 Annual Report for the Vale of Glamorgan and Cardiff Integrated Family Support Team (IFST) before it is submitted to the Welsh Government as required.
Report Owner:	Director of Social Services
Responsible Officer:	Head of Children and Young People Services
Elected Member and Officer Consultation:	Cabinet Member for Social Care and Health
Policy Framework:	This report is consistent with the Policy Framework and Budget

**Executive Summary:**

The Integrated Family Support Team has its origins in Welsh Government's Vulnerable Children Strategy. The legislative framework is the Children and Families (Wales) Measure 2010, later superseded by the Social Services and Well-being (Wales) Act 2014. The IFST is a partnership between the Vale of Glamorgan Council, Cardiff Council and Cardiff and Vale University Health Board who have a joint statutory responsibility for ensuring the delivery of an IFS service in their region.

This, the 10<sup>th</sup> Annual Report prepared in accordance with s.62 of the Children and Families (Wales) Measure 2010, provides information on the effectiveness of the service provision and highlights any challenges which impact upon the successful delivery of the service.

The IFST continues to meet performance targets. Families are receiving the right support at the right time to effect long term behavioural changes. The team have transitioned back to face to face working following the ending of Covid-19 restrictions. Through their enthusiasm and commitment, the IFST continue to deliver an excellent service to families through meaningful co-production, resulting in children living at home with their parents/carers where this is safe. The primary issues referred to the service continue to be around substance misuse, although the service does also support those affected by domestic abuse or mental ill health. Referral rates from the Vale have been consistent and continue to represent a similar proportion of the families worked with as a whole across the two Authorities.

## **Recommendation**

1. That Scrutiny Committee considers the Integrated Family Support Team Annual Report for 2022/23 (Appendix 1).

## **Reason for Recommendation**

1. To allow Members to scrutinise the work of the Integrated Family Support Service in relation to Welsh Government guidance.

## **1. Background**

- 1.1** Through the provision of its Flying Start, Families First and Integrated Family Support (IFS), this Council has in place a coherent framework for delivering the range of preventative, protective and remedial family support initiatives set out in relevant Welsh Government strategies. By providing intensive and specialist help to families when risks are escalating, the IFST has a key role to perform both in reducing harm to children, and the volume of avoidable admissions into care.
- 1.2** The IFS programme is intended to provide holistic support to families by breaking down boundaries between local government and Health, and between Adult Services and Children's Services. It is delivered by a combination of highly skilled professionals from Social Care and Health, acting as a single workforce.
- 1.3** The IFST is based at The Alps to support the regional nature of the Service. The Service has five principal functions:
  - Undertaking intensive direct work with families through the application of time-limited family focussed interventions;
  - Providing advice and consultancy to practitioners and agencies on engaging complex families with parental substance misuse, domestic violence or mental health issues;
  - Working jointly with the case managers and others to ensure that the family can gain access to the services they need;
  - Spot-purchasing services not otherwise available;
  - Providing training on evidence-based interventions for the wider workforce.

## **2. Key Issues for Consideration**

### **2.1 Hybrid Working**

Covid-19 restrictions came to an end during the very early stages of this period and the IFST's preferred way of working with children and families is through face to face working. Hybrid working is used on occasion to support the maintenance phase of the intervention when this is considered the most effective option.

## **2.2 Referral Rates**

The referral rates from the Vale of Glamorgan have increased by one since last year from 43 to 44 families representing a total of 97 children. Nineteen families from the Vale of Glamorgan were allocated with a total of 47 children. The number of no space referrals (referrals that could not be accepted due to a lack of capacity) has decreased by 1 from 20 last year to 19 this year. The Vale of Glamorgan continues to promote referrals to IFST through face to face meeting and the attendance of an IFST practitioner at legal gateway meetings. Given the resource constraints, it is important to ensure that referrals are appropriate and targeted on the children that will benefit from them the most.

The age profile of the children referred in the Vale of Glamorgan is slightly different to that in Cardiff with the largest group being children aged between 11 and 14.

## **2.3 Outcomes**

Outcomes continue to be positive with 94% of the children worked with in the Vale of Glamorgan being able to remain at home within their families. Outcome measures in terms of happiness and distance travelled also appear to suggest that the service is effective in achieving positive change for the children and families who work with the service.

## **2.4 WCCIS Integration**

Work has already been undertaken to allow IFST workers access to the Vale of Glamorgan ICT system. Further work will focus on IFST forms being integrated into the WCCIS recording system.

## **2.5 Family Drug and Alcohol Court (FDAC)**

The IFST is currently supporting the FDAC pilot that is operating across our region. The pilot will inform the potential for a wider roll out across Wales. The outcomes of the pilot will be formally evaluated to inform next steps.

## **2.6 Capacity**

Referrals to the service continue to exceed capacity. Reassessment of the role of the Independent Reviewing Officer within the team could create opportunities to increase the team's capacity for intervention work.

# **3. How do proposals evidence the Five Ways of Working and contribute to our Well-being Objectives?**

## **3.1 Long Term**

The IFST provides an opportunity for families to realise their potential, implement behavioural change and achieve better outcomes in the longer term.

## **3.2 Integration**

Under the oversight of the Service Manager, the multi-disciplinary team of Social Workers and Health Intervention Specialists provide a holistic supportive response to children and families in need across the Cardiff and Vale of

Glamorgan region. Regular meetings are held between the IFST Service Manager and the Vale of Glamorgan's Operational Manager for Family Support. The Vale of Glamorgan are currently exploring the provision of IT equipment to ensure that the IFST can be fully integrated with the WCCIS recording system used by the Authority.

### **3.3 Involvement**

The Council and its partners are committed to involving those in receipt of its services and recognising protected characteristics. In the context of IFS, this means involving children, young people, their families, their carers and their support networks in co-producing plans that can effectively meet identified needs. It means taking a strength-based approach that recognises the resources that exist within families themselves and empowering families to support themselves and to achieve change where this is necessary. It also means involving children and families in decision making, including the need to transparently articulate risks that may prevent the achievement of goals that the child or family are hoping for, and where possible managing risks confidently.

### **3.4 Collaboration**

As noted above, the IFST is a collaboration between the Vale of Glamorgan Council, Cardiff Council and the Cardiff and Vale University Health Board.

### **3.5 Prevention**

The Service is designed to assist families at point of crisis, where their children are described as being as on 'the Edge of Care', to prevent escalation and accommodation through working co-productively with families. The IFST offers a preventative service to help maintain children within their families where it is safe to do so.

## **4. Climate Change and Nature Implications**

4.1 There are no climate change and nature implications associated with this report.

## **5. Resources and Legal Considerations**

### **Financial**

5.1 The budget £568,000 across the Cardiff and Vale region. The largest element (80%) is salaries. The year-end figures (Appendix 1 p13) demonstrate the Service delivered within budget.

### **Employment**

5.2 There are no employment implications associated with this report.

### **Legal (Including Equalities)**

5.3 The legislative framework is the Children and Families (Wales) Measure 2010, later superseded by Social Services and Wellbeing Act (Wales) 2016. The IFST is a partnership between Vale of Glamorgan Council, Cardiff Council and the Cardiff

and Vale University Health Board who have a joint statutory responsibility for ensuring the delivery of an IFS service in their region.

- 5.4** Equalities data is collected and reviewed within the monitoring arrangements for the service, underpinned by Results Based Accountability methodology. To ensure equality of access interpreters are provided for families where English is their second language and adaptations have been made to therapeutic tools engaged with families reflecting their first language.

## **6. Background Papers**

Reports to Healthy Living and Social Care Scrutiny Committee, 6th September 2022; 6th July 2021; 12th November 2019; 6th November 2018; 6th November 2017.



**Integrated Family Support Team  
Cardiff & the Vale of Glamorgan**

Annual Report

April 2022 – March 2023

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## **1 Introduction**

- 1.1 This is the tenth Annual Report of the Cardiff and Vale of Glamorgan Integrated Family Support Team. The purpose of the report is to provide information on the effectiveness of the Integrated Family Support Service, accounting for both organisational and operational matters within the Cardiff and Vale of Glamorgan area. The report will highlight any challenges which impacts on the successful delivery of the service. This report has been prepared in accordance with S.62 of The Children and Families (Wales) Measure 2010.
- 1.2 The Integrated Family Support Team (IFST) has its origins in the Welsh Assembly Government Vulnerable Children Strategy. The legislative framework is the Children and Families (Wales) Measure later superseded by Social Services and Wellbeing Act (Wales) 2016. The IFST is a partnership between Cardiff Council, Vale of Glamorgan Council and Cardiff and Vale University Health Board.
- 1.3 The aim of the IFST is to provide an intensive intervention by a highly skilled, multi-disciplinary team to intervene with families referred by Children's Services from Cardiff Council and Vale of Glamorgan Council Social Workers. IFST model was initially introduced to work with families with substance misuse and alcohol use. The Social Services and Wellbeing Act (2016) invited IFSTs to use the behavioural change model with parents/carers who are experiencing mental health or domestic abuse where there are safeguarding concerns for children. IFST use a behavioural change, evidenced based model to reduce the risk to children and support parents / carers to effect and sustain positive behavioural change. A primary focus of the IFST will also be to provide consultation, advice and training to the wider workforce utilising the knowledge, skills and experience of the IFST staff to model and shape strength-based practice.
- 1.4 The vision of the Cardiff and Vale of Glamorgan Council IFST is to deliver a high-quality service that provides intensive support to families at times of crisis to reduce risk and increase safer family functioning whilst ensuring positive outcomes for children and creating opportunities for positive change wherever possible.
- 1.5 The IFST embraces the following service values:
- To provide a holistic, evidence-based family centred approach to service delivery.
  - To ensure the needs of children are met.
  - To work in partnership with parents and families to meet their own identified needs where this is commensurate with the needs of children.
  - To provide impartial and objective consultation and advice to the wider workforce.
  - To provide a non-judgemental and trauma informed approach to service delivery.
  - To provide a welcoming, accessible and timely service.
  - To adhere to the principles of information sharing.



- The service shall be provided in a non-discriminatory, anti-oppressive and professional manner and in a way that demonstrates respect for service users and is sensitive to personal situation and experiences.
- The service will respond positively to cultural, religious, language, gender, sexuality, disability, age and communication needs.
- Participation of service users is integral to ensure that services are responsive to changing pattern of need.
- Participation of all families is voluntary.
- To ensure dissemination of contemporary research and best practice concerning evidence-based interventions with families.
- To influence wider systems to ensure more joined up service delivery to families.
- To ensure all local and national requirements regarding service evaluation and monitoring are undertaken.
- To strengthen partnership working between Cardiff and Vale of Glamorgan Local Authority Adult and Children's Services and University Health Board.

1.6 The IFST is a regional service across two local authority areas and this provides challenges to ensure that strategic planning allows for consistency wherever possible, but also takes into consideration differences in Social Care and Health systems and processes across both areas. See also Funding.

1.7 The Early Intervention Team was aligned to IFST until August 2022 (further information available Section 5). The Early Intervention Team (EIT) followed the strength based IFST model, offering support to families with children receiving care and support. In addition to this, EIT offered Community Reinforcement and Family Training (CRAFT) for individuals who are supporting a loved one with substance misuse issues. The Early Intervention Team also employs Support Workers to assist both services (IFST & EIT) within the maintenance phase of the intervention. Support Workers work alongside the Intervention Specialist to enhance the intervention through supporting parents / carers with accessing education, training, employment, diversionary activities and community-based resources to support their recovery. Support workers offer advice and support for harm reduction and re-lapse prevention.

## **2 Regional Partnership Board**

- 2.1 The IFST Board meets on an ad hoc basis and will continue to maintain the required representatives and operate according to the statutory guidance. It employs a collaborative approach taking its membership from key statutory and non-statutory services operating across Cardiff and the Vale of Glamorgan.
- 2.2 During this past year, there continues to be no barrier to service delivery that has required intervention by the Board.
- 2.3 There have been no changes to Board Membership. Operational Board meetings include representatives from Cardiff, Vale of Glamorgan and Health Operational Managers to ensure oversight of the service and to escalate any issues which require consideration by the Regional Partnership Board.
- 2.4 **Terms of Reference**

Section 53 of the Children and Families (Wales) Measure places a duty on the Local Authority to establish an Integrated Family Support Board for IFST.

- **Purpose**

To provide strategic direction to the implementation and delivery of the Integrated Family Support Service across Cardiff and the Vale of Glamorgan.

- **Functions**

The Children and Families (Wales) Measure sets out the statutory functions of the Board, these are:-

- To ensure the effectiveness of what is done by the Integrated Family Support Services to which they relate.
- To promote good practice by the local authorities and Local Health Boards participating in the teams in respect of the functions assigned to the teams.
- To ensure that Integrated Family Support teams have sufficient resources to carry out their functions.
- To ensure that the Local Authorities and Local Health Boards co-operate with the Integrated Family Support teams in discharging the teams' functions.

Furthermore:

- To provide overall direction, management and scrutiny to the IFS teams.
- To ensure compliance with the grant and that all grant monitoring procedures set up within IFST meet organisational audit needs.
- To ensure the service provided is sustainable and is integrated into local service provision.
- To ensure a communications strategy is implemented and necessary resources provided to disseminate information to all partners and service users and to promote the success of the IFST.

- To support and progress workforce development within IFS teams and the transfer of skills to the wider workforce.
  - Interface between the Local Health Board, Members of the Local Authority Executive / Management Committees and Local Safeguarding Children's Board.
  - Deal with complaints and disputes about the exercise of functions by the IFST. Manage any complaints / disputes about the exercise of functions by the IFST.
  - Facilitate the sharing of information between Local Authorities, Local Health Boards, Integrated Family Support Teams and Boards.
  - Be responsible for the accounts and audit in respect of functions assigned to integrated family support teams.
  - Act as the IFST interface with the existing children and adult services and wider services.
  - Agree the objectives for the IFS teams based upon local needs and circumstances.
- **Agenda**  
The Board will take up risks and issues arising and support the Service Manager to ensure the effective and efficient running of the service.
  - **Voting**  
The members representing each area will have delegated powers to act on the authority of their respective areas. In decision making the Board will strive for unanimity, but where this cannot be achieved, a majority decision will be agreed.

### **3. Service Delivery**

- 3.1 At the start of the tenth year of operation the team structure continues to comprise the following members:
- IFST Service Manager
  - 2 Consultant Social Workers
  - 4 Social Care Intervention Specialists (IS)
  - 2 Health Intervention Specialist (Health Visitors)
  - 1 Business Support Worker
- 3.2 The staffing situation in the team this year can be summarised as follows: An Interim Service Manager had oversight of IFST until the permanent Service Manager returned to post in September 2022. An Intervention Specialist successfully acted up in the position of Consultant Social Worker to cover a secondment opportunity. February 2023 saw the successful recruitment of two Health Intervention Specialists. IFST experienced a period of uncertainty in the first half of the year resulting in staffing changes in aligned services, Early Intervention Team due to recommissioning process, in addition to vacant posts created by IFST supporting secondments into the Family Drug and Alcohol Court pilot. The team were affected by the delay in the recruitment of Health Intervention Specialists and two periods of long-term sickness absence. Staff members remain highly motivated in their commitment to supporting families, taking into account staffing throughout the year, performance targets have been maintained and high-quality interventions delivered.
- 3.3 An Independent Reviewing Officer (IRO) undertakes IFST Reviews. This post sits within the Safeguarding and Reviewing Service in Cardiff and covers both Cardiff and Vale of Glamorgan families. The IRO service was delivered by one full time IRO to undertake all reviews across Cardiff and Vale of Glamorgan. A new IRO was appointed in October 2022 due to the previous IRO leaving Cardiff Childrens Services. Consultant Social Workers within IFST assumed the reviewing role whilst awaiting the successful appointment of an IRO.
- 3.4 The business support processes have resulted in an efficient and effective system. Outcomes are measured and reported using the Results Based Accountability (RBA) methodology (See section 7 for details of the RBA approach and the annual outcome statistics).
- 3.5 There have been no official complaints made against the IFST in the past year. Positive feedback is shared within family reviews with Social Workers and either a Consultant Social Worker or IRO chairing the meetings. These reviews allow the experience of families and practitioners when working with the IFST to become a central point to maintaining the high standards of the service. IFST trialled an online feedback form with families offering them an option to respond anonymously to capture family responses to improve service provision. To date, feedback remains exceptionally positive which provides a useful mechanism to help measure the impact of interventions.

- 3.6 The focus of any research carried out by Consultant Social Workers (CSW) will be relevant to IFSS practice and / or development. A Consultant Social Worker has evaluated the effectiveness of IFST brief interventions. (See section 5.5 for further information)
- 3.7 To ensure the effectiveness of the Team in delivering 'Family Support Functions' it has been recognised that there may be instances when the IFST needs to 'spot purchase' a service that, for whatever reason, is not immediately accessible by the IFST within the timeframe to be effective for the family, or is not available under the list of agreed services within the 'Family Support Functions' and is not available outside the IFST, either in the Local Authorities or the UHB. A small budget has been set aside for this purpose.

#### 4 Development of Processes and Protocols

4.1 The referral pathway continues to be fit for purpose ensuring that appropriate families receive an intervention.

4.2 Information Sharing Protocol is available on the WASPI website as a model of good practice.

Information Sharing Partner Organisations	Responsible Manager
Cardiff County Council <ul style="list-style-type: none"> <li>• Children Services</li> <li>• Adults Services</li> <li>• Housing</li> <li>• Youth Offending Services</li> </ul>	Head of Children Services Head of Adults Services Housing Officer Youth Offending Team Manager
Vale of Glamorgan County Council <ul style="list-style-type: none"> <li>• Children Services</li> <li>• Adults Services</li> <li>• Housing</li> <li>• Youth Offending Services</li> </ul>	Head of Children Services Head of Adults Services Housing Officer Youth Offending Team Manager
South Wales Police	Manager Central Referral Unit
University of Wales Health Board <ul style="list-style-type: none"> <li>• CAU</li> <li>• Midwifery</li> <li>• Mental Health</li> <li>• Health Visitors</li> </ul>	Health Project Manager Senior Nurse (Mental Health Specialist Services)
Wales Probation Trust	Assistant Chief Officer
Barnardo's Cymru	Children's Services Manager
Action for Children	Team Manager

## **5 Aligned Services**

- 5.1 The Early Intervention Team, CRAFT and family support continued to work alongside and enhance the work of the IFST until August 2022. EIT staff offered the IFST model and intensive interventions to families where children are receiving statutory provision on a care and support basis. CRAFT is an evidence-based model working with family and friends who are supporting a loved one with alcohol or substance misuse. The model is delivered over 8-10 sessions on a one-to-one or group work basis. The model is effective for both the friend/family member and their loved one in improving wellbeing, reducing substance misuse and accessing treatment service.
- 5.2 EIT and CRAFT services were funded by the Substance Misuse Area Planning Board (APB), until 1<sup>st</sup> August 2022 at which time, the APB adopted an alliance framework for service delivery. All substance misuse services tendered in the commissioning process, resulting in the decision that EIT and CRAFT contracts were not re-commissioned. In response to this, Cardiff Childrens Services has temporarily established a new team, Cyfri to continue to deliver services to families receiving care and support, initially on a 12-month basis. Vale of Glamorgan Childrens Services did not proceed in this way but will be interested in the outcomes achieved in Cardiff when these are available.
- 5.3 The provision of the Support Worker role continues to be invaluable to the maintenance stage of the IFST intervention. The Support Worker post is instrumental to supporting families in their recovery and re-lapse prevention. Promoting parents to use techniques to improve emotional regulation positively impacts on effective and meaningful engagement and access to services. Empowering parents to access diversionary activities in education, training and employment contributes to successful outcomes for children.
- 5.4 The Family Drug and Alcohol Court (FDAC) is a regional two-year pilot which commenced in November 2021. FDAC provides holistic intensive support for parents in care proceedings through the 'Trial for Change' specifically addressing alcohol and substance use. FDAC and IFST share core principles and values which provides a seamless transition for families between the two services. When the care plan is for children to be reunified to their parent's care, IFST provide post proceedings support to the family for a period of 12 months. The purpose of this support is to gradually reduce professional involvement following a period of intensive intervention; create goals with parents; encourage continued access to treatment services whilst offering the opportunity for booster sessions to learn from any lapse/ re-lapse.

### **5.5 Research**

A Consultant Social Worker has evaluated the impact of brief interventions which were initially delivered in response to Covid-19. Learning from the research indicates that brief interventions are successful with families in action stages of change providing effective strategies for relapse prevention. Trends identified in brief interventions with no successful indicators and escalation of risk to children, were with families with parents in a co-dependent relationship featuring domestic abuse,

characterised by long term, entrenched alcohol or substance use; complex mental health needs without any previous access to support services for trauma. Engrained patterns of thinking and behaviour were present for 10+ years. Data analysis comparing the outcomes of brief interventions with intensive interventions progressing to the maintenance phase of the model, demonstrates that the model is most effective supporting families to sustain long-term behavioural change when the model is delivered in its entirety.

Similarly, FDAC learning echoes trends seen in IFST specifically in relation to birth mothers who delay accessing treatment services due to fear of their children being removed from their care.

## **5.6 Supporting Strength Based Practice**

IFST continue to offer high quality student placements and mentoring support to newly qualified Social Workers. We have successfully supported a Social Work student placement and offered shadowing opportunities for student Health Visitors. IFST is a hub of strength-based practice and regularly supports practitioners across Childrens Services to attend joint intervention sessions; observe and participate in peer supervision. IFST delivered a training workshop on motivational interviewing during Cardiff Children's Services practice development week and are in discussion with the Vale of Glamorgan about similar opportunities.

Practitioners within the team are linked to specific localities across Cardiff and Vale of Glamorgan, offering advice and consultation and promoting strength-based practice.



## **6 IFST Budget and Finances**

### **6.1 Changes to the IFST Grant**

IFST is funded via a Revenue Support Grant (“RSG”) with a 50/50 split between Cardiff and the Vale of Glamorgan. For the team to operate for a full year, the full amount of the RSG is required regardless of the ratio delivered between the regions.

### **6.2 IFST Budget**

The IFST budget remains at £550,000 plus an additional £18,000 to cover provision for training. The largest element of the budget (80%) is salaries, and it is therefore important that each Local Authority ensures that there are processes in place to ensure that appropriate referrals are made to the service. There will undoubtedly be anomalies to the equal division of funding as each Local Authority will have a different level of requirement for this service. On top of these potential savings, we would also consider the reduction in lost days of work, social care time and, of course, the cost to the neighbourhood of anti-social behaviour, nuisance calls, etc. and most importantly the benefits enjoyed by the children in remaining in the family home.

### **6.3 Actual expenditure 2022-2023**

The attached Financial Report provides an overview and breakdown of actual year-end figures which have fallen just within budget.

**Integrated Family Support Service 2022-23**

	£	£	£
<b>Employee Related Expenditure</b>			
Salaries	446,505.22		
Agency	43,211.40		
Other Employee Costs	3,340.38		
<b>Total Employee Related Expenditure</b>		<b>493,057.00</b>	
<b>Premises Related Expenditure</b>			
Rent	9,000.00		
Security Services	60.00		
Waste Disposal	113.75		
<b>Total Premises Related Expenditure</b>		<b>9,173.75</b>	
<b>Transport Related Expenditure</b>			
Travel Expenses	3,746.91		
<b>Total Transport Related Expenditure</b>		<b>3,746.91</b>	
<b>Supplies &amp; Services</b>			
Equipment, Furniture & Materials	693.12		
Printing, Stationery, General	494.61		
Communications & Computing	6,802.67		
Insurances	1,990.00		
<b>Total Supplies &amp; Services</b>		<b>9,980.40</b>	
<b>Third Party Payments</b>			
Local Authorities & Health Authorities	43,051.34		
Vale Of Glamorgan Council OM Salary	3,990.60		
<b>Total Third Party Payments</b>		<b>47,041.94</b>	
<b>Support Services</b>			
Children's Services	5,000.00		
<b>Total Support Services</b>		<b>5,000.00</b>	
<b>Total Expenditure</b>			<b>568,000.00</b>
Cardiff Council Contribution		284,000.00	-
Vale Of Glamorgan Council Contribution		284,000.00	-
<b>Total Budget</b>			<b>568,000.00</b>
<b>Total</b>			<b>0.00</b>

## 7 Key Achievements – outcomes

7.1 IFST monitoring systems are underpinned by RBA methodology. A performance management framework has been developed that complies with the requirements set out in section 63 & 64 of the Children’s and Families (Wales) Measure 2010. The framework identifies mechanisms for reporting on the performance of the IFST, using an RBA report card approach that detail:

- The level of service provided (**How much?**)
- The quality of the service provided (**How well?**)
- The outcomes achieved for children and families (**What difference did it make?**)

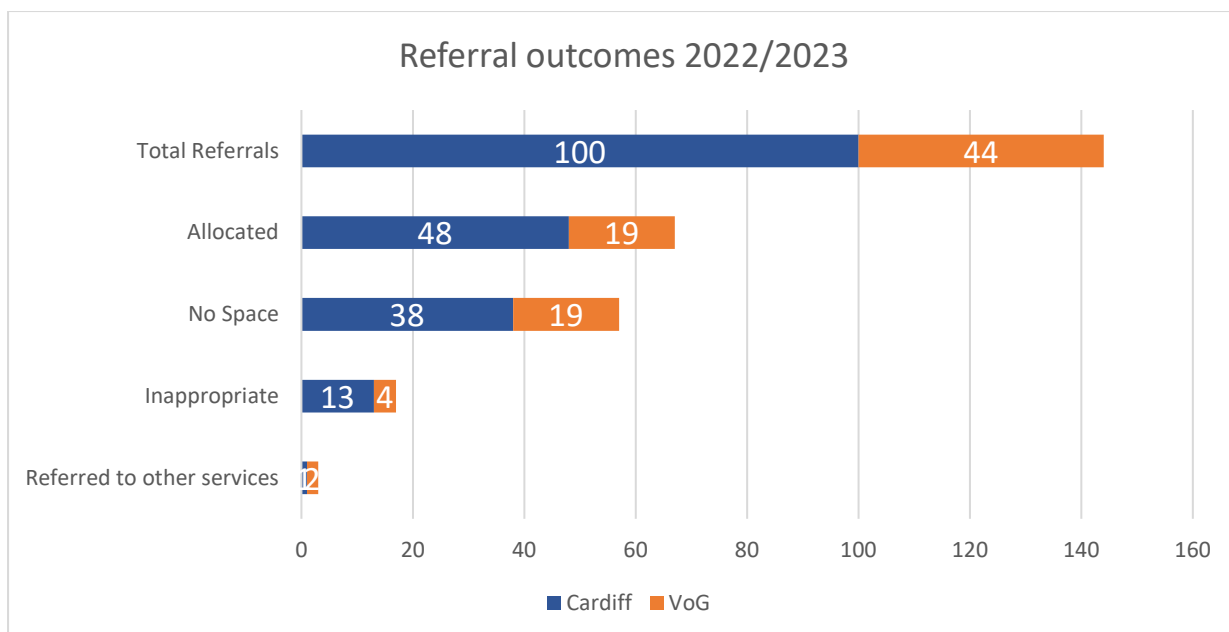
A selection of the outcomes of the RBA report cards covering the annual performance of the IFST can be found below.

### 7.2 Referrals

The performance target for the team is to receive 120 referrals per year across Cardiff and Vale of Glamorgan. This year we surpassed the referral target reaching 144 by year end this was higher than expected. It is acknowledged that not every referral will be appropriate and/or the IFST may not have capacity to offer a service.

The team target based on the number of staff available during 2022/2023 was to work with 64 families. The team worked with 67 families during this period with 59 completed interventions. It is expected that an Intervention Specialist would work with 15 families per year, holding 2 families during the intensive phase at any given time. Consultant Social Workers will work with 7 families per year. CSWs and IS offer booster sessions to families throughout the 12-month intervention and attend all statutory Childrens Services meetings.

Included in the performance data is the number of ‘no space’ referrals and the number of inappropriate referrals. Families are monitored and prioritised using a tracker to risk assess and ensure timely allocation of resources. Cardiff made 100 referrals and Vale of Glamorgan 44 referrals.



A 'No space' referral is a referral that has been received and is deemed to be appropriate but, due to capacity within the team, it has to be closed. 'No space' responses increase at times of staff vacancies or absence. As detailed above, staff availability was affected due to quantity of referrals IFST were receiving. It is evident that the demand for the service outweighs the capacity within the service area.

Total 'No Space' Cardiff: 38

Total 'No Space' Vale: 19

### 7.3 Families who have been referred.

For further analysis, also provided are the ethnicity of families, the number of children and the types of substances used. An indication of how well the service has done is collated using feedback from childcare social workers and families worked with indicating whether they had received a positive experience.

#### Families referred and worked with ETHNICITY OF INDIVIDUALS REFERRED:

Council	White Welsh	White British	Mixed	Unknown
Cardiff	5	16	13	66
VoG	26	2	0	16
Totals	31	18	13	82

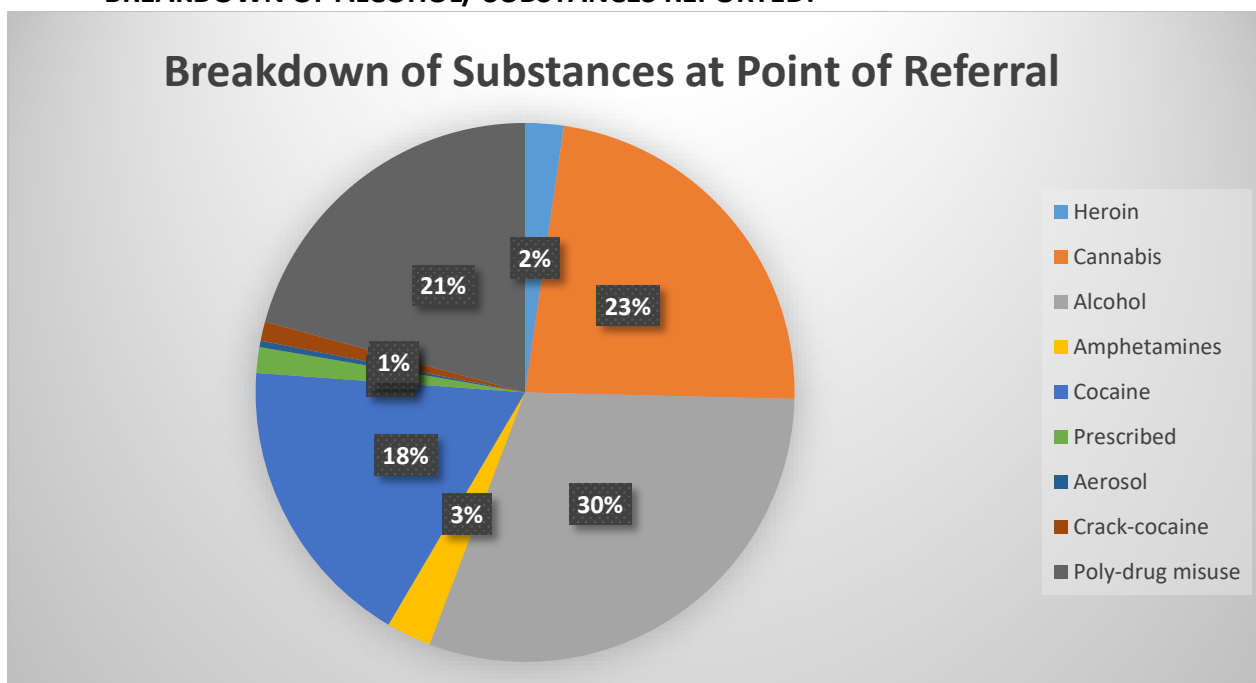
IFST provide interpreters for families where English is their second language. To address communication needs, the IFST have adapted therapeutic tools to reflect the first language of the family we are working with.

Please note a high proportion of 'Unknown' is because they haven't been recorded at point of referral.

**PRIMARY REASON FOR REFERRAL DATA:**

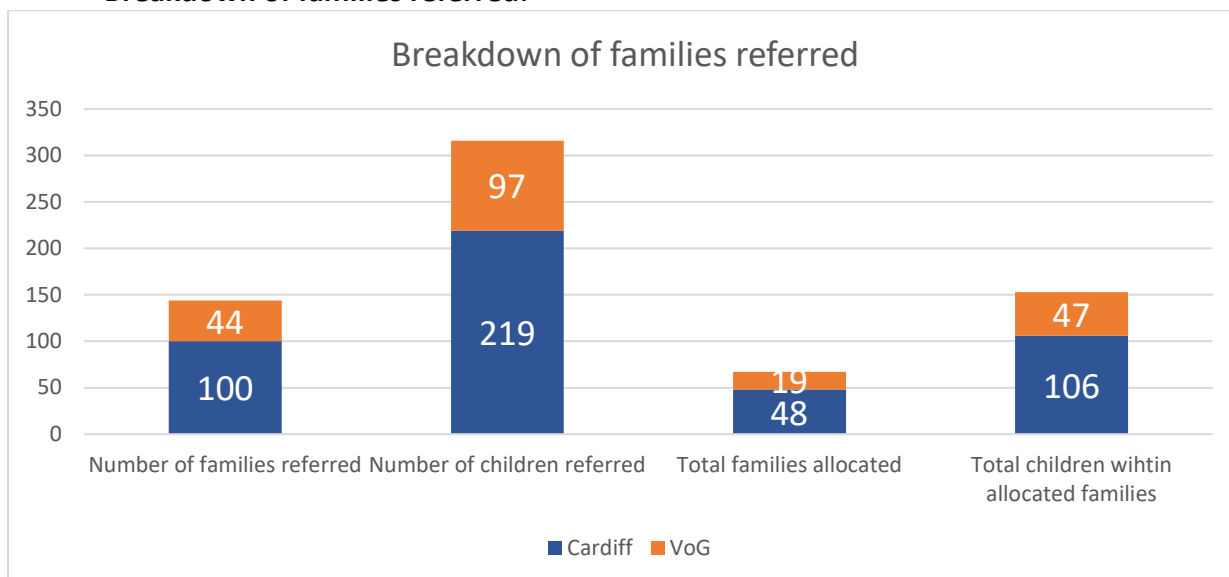
Local Authority	Male Substance Misuse	Female Substance Misuse	Dual Substance Misuse	Mental Health risk only	Domestic Abuse risk only	MH and DA risk	Totals
Cardiff	9	56	26	3	4	2	100
VoG	4	15	22	0	0	3	44
<b>Totals</b>	<b>13</b>	<b>71</b>	<b>48</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>144</b>

**BREAKDOWN OF ALCOHOL/ SUBSTANCES REPORTED:**

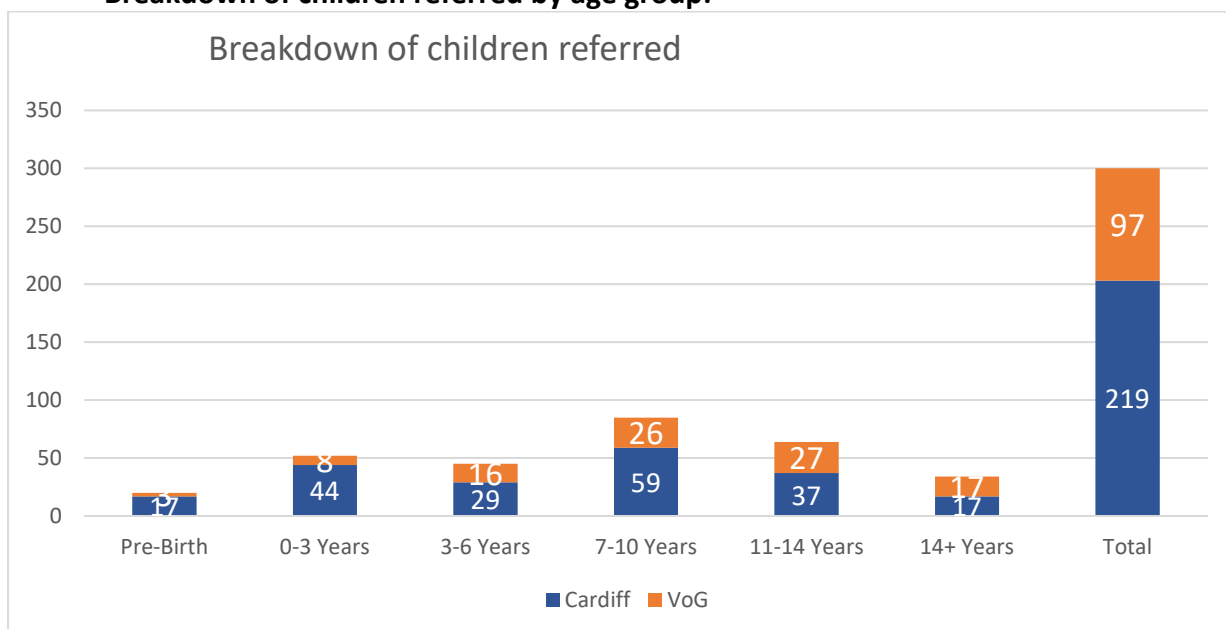


IFST provide information and feedback to Welsh Government and Substance Misuse Area Planning Board forums regarding trends of substance misuse in our work with families.

### Breakdown of families referred:



### Breakdown of children referred by age group:



### NUMBER OF FAMILIES RECEIVING IFST INTERVENTION THIS YEAR (22/23):

Local Authority	Number of referrals	Number of families allocated	Completed Interventions
Cardiff	100	48	43
Vale of Glamorgan	44	19	16
<b>Total</b>	<b>144</b>	<b>67</b>	<b>59</b>

IFST have provided post proceedings support to all families who have completed the Trial for Change in the Family Drug and Alcohol Court where children have been reunified to their parents care. Families are stepped down to IFST following intensive support during care

proceedings. IFST build a therapeutic relationship with families, formulate goals and gradually reduce the level of support whilst parents access the maintenance phase.

#### 7.4 Referring to other services:

##### Current year:

	Number of services accessed
Prior to Intervention	89
After Intervention	422
% Increase	474%

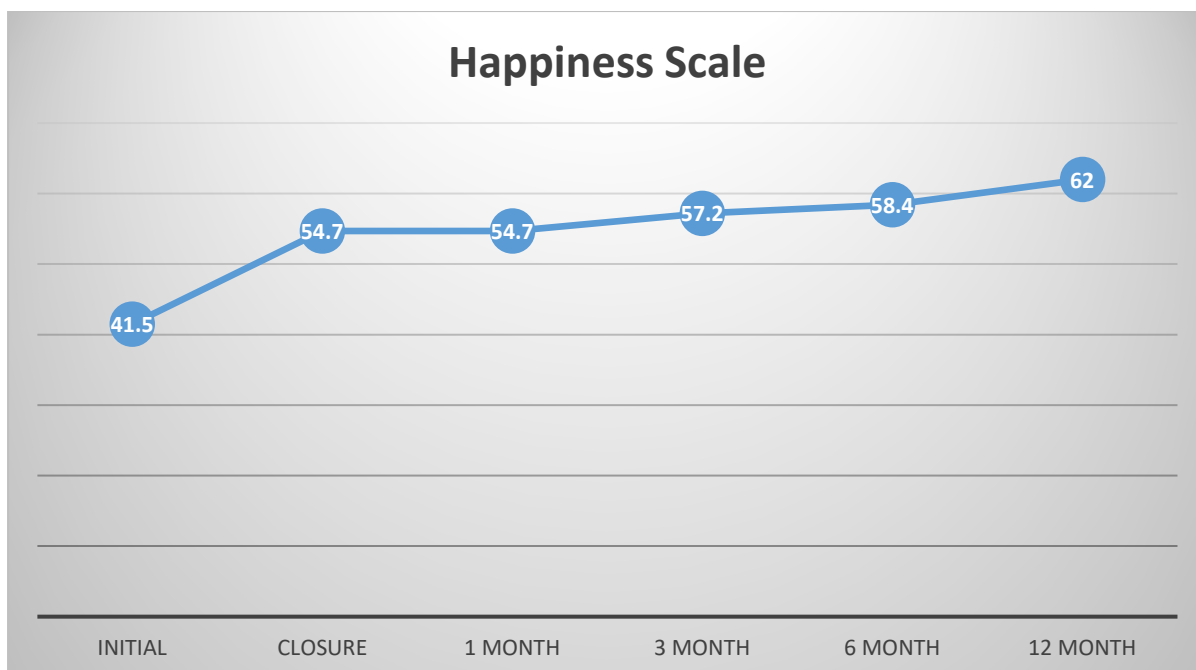
A measure of how much better off the families are is shown by measuring the number of individuals accessing services as a result of the intervention. Many of the families referred to the IFST are families generally considered to be hard to engage. It is an expectation that at the end of the intensive phase of the IFST intervention, families will 'invite' other appropriate services to support them to meet their goals, thus sustaining the changes made to ensure the wellbeing of their family.

Since the IFST first started working with families, we can see the services that were accessed before the interventions (89) compared to those accessed after the interventions (422). These services include community-based treatment services which continue to support families beyond the child's journey in Childrens Services. In turn, this significantly increases the likelihood of positive change with access to appropriate services.

#### 7.5 Happiness Scale

In recognition that, for some families attaining and maintaining the goals set during the IFST intervention (although this evidences necessary behaviour change), is not always representative of greater family cohesion regarding 'happiness'. IFST adopted the Warwick-Edinburgh Mental Wellbeing Scale as an appropriate tool. The Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS) is based on scores to 14 questions given to a service user asking them how they are feeling. The scores (1 (Low - None of the time) – 5 (High – All of the time)) are totalled and plotted on a graph. The graph indicates the mean score at each follow-up point. From written feedback families report that they feel happier, more hopeful and more positive about the future at the end of the intervention.

This method of collecting data establishes family and individual wellbeing. The questionnaire is completed by family members as close to the beginning of the intervention as possible, at the end of the intensive intervention and again at the follow up reviews.



The graph strongly portrays improved happiness following the IFST intensive intervention, this is maintained with happiness gradually increasing over the 12-month intervention. This information directly correlates with goal scoring and written feedback which validates the effectiveness of the IFST intervention.

#### 7.6 Goal Measurement

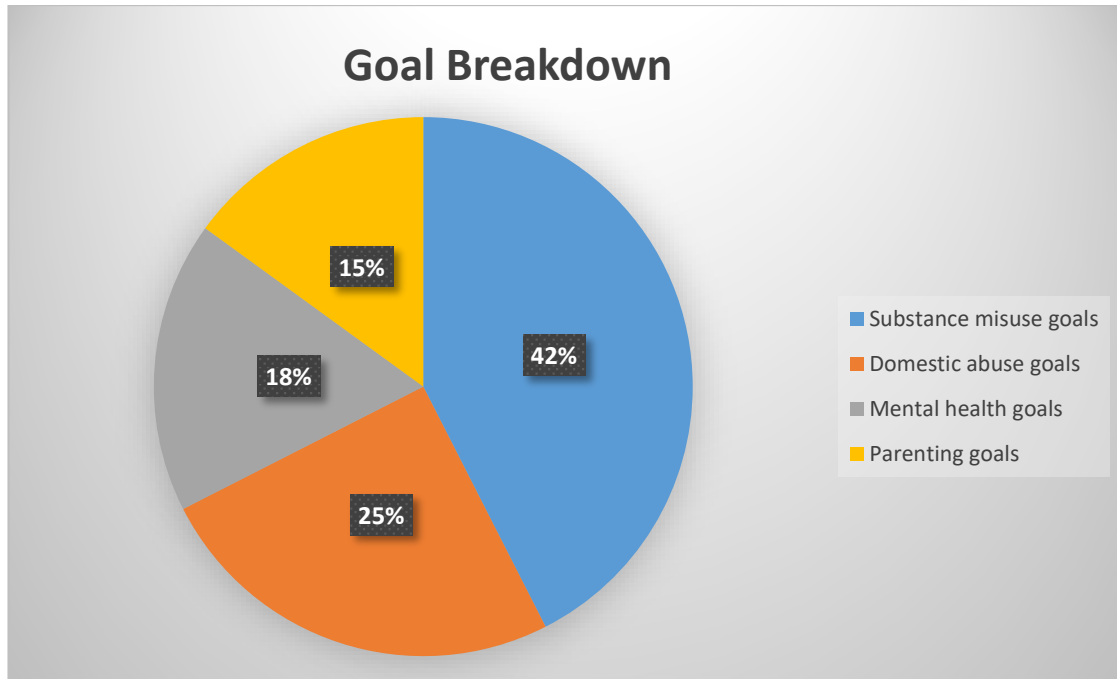
The IFST works with families to create clear, measurable and attainable behavioural goals in line with the referring Social Worker’s expectation for the children to remain safely living at home. Families will generally work towards an average of two goals of which at least one will focus the primary reason for referral. The aim is to achieve a success rate of 75% of goals achieving a score of ‘0’ or higher throughout the 12-month intervention. This is where ‘0’ represents a good enough outcome for children to remain safely at home. An important measure of immediate and sustained behavioural change will be through goal measurement.

#### 7.7 Goal Categories

Behavioural change goals are formulated in response to the primary reason for referral impacting on the safeguarding concern for the child(ren). Additional goals can be identified within the intensive intervention.



## BREAKDOWN OF GOAL CATEGORIES



### 7.8 Child and Family Outcomes

Child and family outcomes are measured by reducing the risk for children to safely remain in the care of their families. This includes the number of children on the Child Protection Register (CPR) who are de-registered and families closed to Children's Services as a result of the intervention. When risk increases requiring the Local Authority to accommodate a child, the Intervention Specialist has been integral in providing information to inform care planning, ensuring that the child safety remains paramount. Families referred earlier, during the CPR process are more likely to achieve long-term behavioural change.

Currently, families referred to IFST present with increasingly complex needs as seen more broadly in Childrens Services. An increasing number of families are referred to IFST during the pre-proceeding stage (PLO) which impedes parents' ability to meaningfully engage with an intensive intervention due to the pressure and expectations that are required at this stage of the process.

## Family and Children's outcomes

Family outcomes	VoG No.	VoG %	Cardiff No.	Cardiff %
De-registered	5	31%	7	16%
Closed to social services	4	25%	3	7%
Children returned home	0	N/A	2	5%
Children accommodated	1	6%	4	9%
Children placed on CPR	1	6%	1	2%
Children remaining at home	15	94%	40	91%

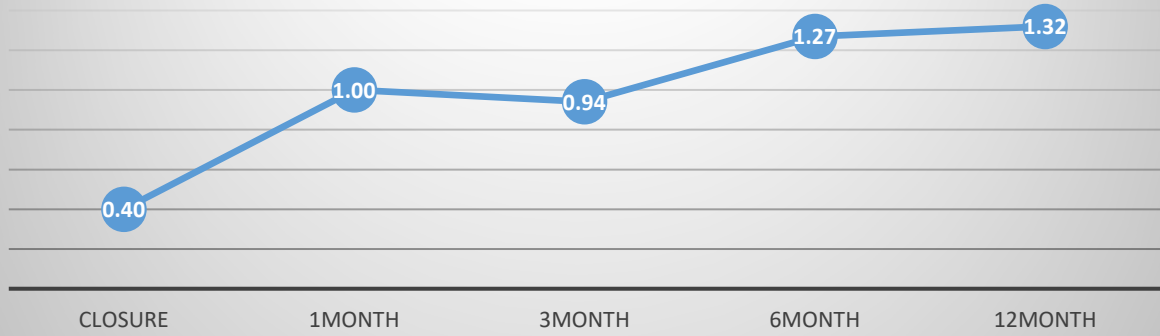
IFST Health Intervention Specialists provide professional consultation and interventions with birth mothers during pregnancy. Timing of interventions within the ante-natal period requires careful planning and co-ordinated care to maximise the benefits to the unborn child.

### 7.9 Distance Travelled

Goals are clear, measurable and attainable and set by the families in line with Social Worker requirements to ensure the safety and wellbeing of the children. They are measured by statements that will establish how well they are doing, with -1 and -2 being not achieved and 0 being the level at which it is considered safe enough for the children to remain at home. +1 and +2 exceed expectations. A graph detailing the average scores of goals measured when they are set and then throughout the intervention to the 12 month follow up shows whether families are better off after the intervention.

The graph illustrates that significant progress is achieved by families during the intensive phase and goals scoring steadily improves throughout the 12 month intervention. At the 12 month review families on average score +1 which not only exceeds expectations, it demonstrates sustained progress over a 12 month period. Trends observed since the IFST service was initiated, consistently demonstrate lapse is most likely between the 3 and 6 month period of the intervention. A Support Worker offers targeted re-lapse prevention strategies beforehand and booster sessions are provided in response to any lapse/ re-lapse.

## Distance Travelled 2022-2023



## 8 Training

### 8.1 Training Evaluation

IFST have a fundamental role in shaping and influencing strength-based practice across Childrens Services and partner agencies. IFST has adapted to continued restrictions with face-to-face training through facilitating and supporting a range of sessions and courses. IFST has a target to offer 3x2 days IFST training to the wider workforce annually. IFST has successfully met this commitment.

An Intervention Specialist facilitated 'Social Work Communication Skills' seminars to student Social Workers at Cardiff University over an 8 week period. One Health Intervention Specialist led a strength based session at the University South Wales, Specialist Community Public Health Nurse Conference. A practitioner facilitates monthly 'Ask and Act' Violence Against Women, Domestic Abuse and Sexual Violence training.

Participant feedback *'Sessions were very informative, I learnt a lot and I've had the opportunity to practice my skills. My confidence has improved and I now feel ready to support and empower families. Thank you'*

**Plan 2023/24:** Update and enhance training resources to incorporate trauma informed approach. Extend IFSTs current offer through designing online Motivational Interviewing skills workshops. Inform and support Social Care Wales, Social Work conference and All Wales IFST conference.

## **9 Partnership Working**

- 9.1 The IFST is integral in delivering training to providers in order to ensure a shared set of principles and values underpin all work with families. This has created a firm foundation for these services to build their model on.
- 9.2 The Service Manager for the IFST is instrumental in working with partner agencies to develop a consistent approach to service delivery. The Service Manager is an active participant in Substance Misuse Area Planning Board, attending and disseminating information from Treatment, Therapies and Clinical Governance; Harm Reduction; and Children and Young People groups.
- 9.3 The IFST continues to take a leading role in Cardiff Childrens Services Public Law Outline panel and Vale of Glamorgan Legal Gateway meetings to support the embedding of strength-based practice.

## **10 Challenges and Issues**

- 10.1 At a local level, IFST face challenges with regards to current ICT systems, working regionally. IFST require access to Vale of Glamorgan WCCIS ICT system. IFST forms need to be available on the system and this will be a priority for 2023/24.
- 10.2 IFST use hybrid working to maximise service delivery. Family feedback and practitioner insight recognised the significant benefits of delivering full interventions in person with families, to build therapeutic relationships and accurately assess risk to children. The preferred method of delivering intensive interventions will be in person with hybrid options to support the maintenance phase and attendance in other forums.
- 10.3 IFST 12-month post proceedings support offer for families stepped down from the Family Drug and Alcohol Court requires review and a clear pathway and structure to be agreed following the FDAC pilot phase. This will be dependent on whether the FDAC is funded in the longer term.
- 10.4 Demand for IFST service year on year outweighs the capacity in the team. Consideration should be given to the team composition with the opportunity to reassess the significance of the Independent Reviewing Officer role within the IFST model.

## **11 Priorities for the next 12 months**

- 11.1 Targeted information sessions across Childrens Services with the aim of families accessing IFST intervention earlier in the safeguarding process. A renewed focus on delivering IFST model in its entirety to support families to achieve long-term behavioural change. To implement learning from the evaluation of brief interventions, offering brief interventions to families in the action stages of change.
- 11.2 Establish practice links across the region with pre-birth families to enhance IFST offer and deliver a health informed ante-natal programme.
- 11.3 Consultant Social Workers will continue to undertake research and disseminating knowledge across the workforce. Research within the team will inform both practice developments across the region and training. Evaluate the post proceedings support intervention for FDAC families. Ensure information is shared across the workforce regarding referral pathway and support available. Enhance the current IFST training offer to reflect a trauma informed approach. Explore and utilise online training delivery.
- 11.4 IFST will continue to champion strength-based practice, to lead, influence and shape Cardiff and Vale of Glamorgan Childrens Services in using these approaches. IFST training will be integral to supporting practitioners across the wider workforce in embedding strength-based approaches. Health Intervention Specialists will strengthen relationships with health partners and explore opportunities to support and deliver strength-based training within their current training framework.
- 11.5 Co-production and service user involvement is integral when shaping services. Service users will be involved in the development of training materials, recruitment, research, consultations and service development. Feedback mechanisms will be improved and incorporated within existing reviews.

## **12. Conclusion**

IFST staff are highly motivated to work collaboratively with families to achieve positive and sustained behavioural change. During a period of uncertainty with aligned services and staff transitioning to support FDAC, the team has continued to deliver high quality interventions resulting in 93% of children safely remaining in the care of their family. Positive outcomes from the service have resulted in reducing safeguarding concerns and prioritising the needs of children.

Family feedback together with rigorous evaluation of brief interventions has now shifted the focus to delivering the IFST model in its entirety. Cardiff and Vale of Glamorgan have received recognition for providing enhanced post proceedings support for FDAC families.

Delivering excellent strength-based training to student Social Workers, student Health Visitors and the wider workforce continues to bridge the gap and shift a culture of practice towards collaborative working. We will continue to build on the positive work with families, referrers and other professionals to ensure the IFST continues to be a valuable resource, ensuring the continued best outcomes for families and children across Cardiff and the Vale of Glamorgan.

Report completed: 31<sup>st</sup> July 2023  
Karen Worman  
Service Manager