

EIF National Conference 2017

Putting evidence into action



EARLY
INTERVENTION
FOUNDATION

Breakout 2

Can early
intervention
make a difference
to the most
vulnerable
children?

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Isabelle Trowler,
Chief Social Worker for
Children and Families

Department for
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Donna Molloy,
Director of Dissemination

Early Intervention
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There are some clear messages from evidence about the interventions shown to improve parent-child relationships and outcomes

- Work on child protection concludes that there is good evidence to support interventions aimed at [for example] reducing physical abuse, improving outcomes where there is emotional abuse, supporting older maltreated children with trauma symptoms...
- Work to support the Troubled Families Programme – interventions with good evidence of improving parent and child outcomes in vulnerable populations
- What works to support inter parental relationships and improve outcomes for children in the contexts of poverty and economic pressure – small number of interventions shown to deliver child outcomes

There is a significant gap between ‘what is known to be effective’ from peer reviewed studies and what is delivered in local systems

- Forthcoming work on child protection shows that whilst some interventions found to have good evidence are in use in LAs, but these are very small in scale compared with the vast majority of practice
- On balance - families and children who receive interventions shown through robust methods to improve outcomes, *are more likely to be benefit and to a greater degree* than those who receive other services
- Sustained effort needed to:
 - Clearly communicate the evidence
 - Fill gaps in evidence
 - Support analytical capacity locally to both apply evidence and evaluate impact of local approaches



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Ian Thomas,
Director of Children's
Services

Rotherham Borough
Council

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Early Help Journey

January 2016: Launch of the Early Help Offer, Request for Support & Early Help Assessment

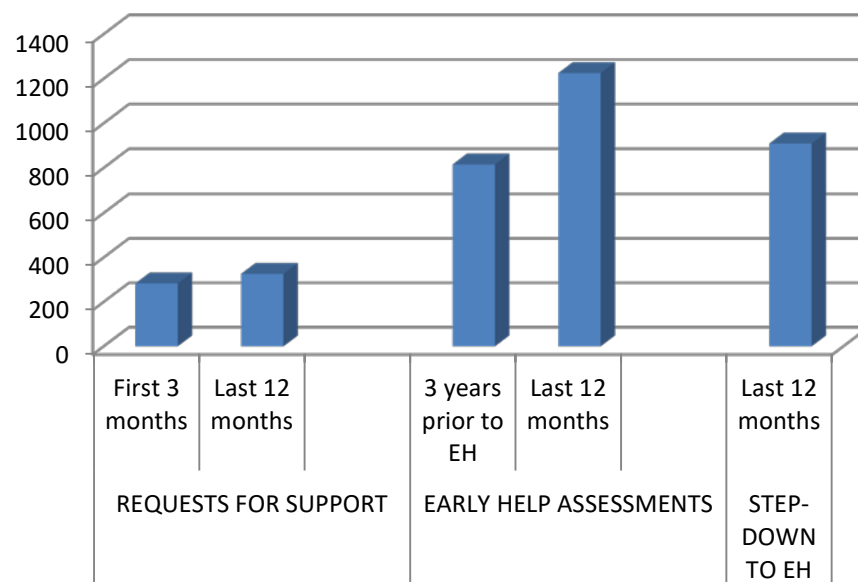
February 2016: Step Down Panel launched

January 2017 full integration between Early Help Triage and MASH

February 2017: Ofsted Monitoring Visit



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children • young people • families



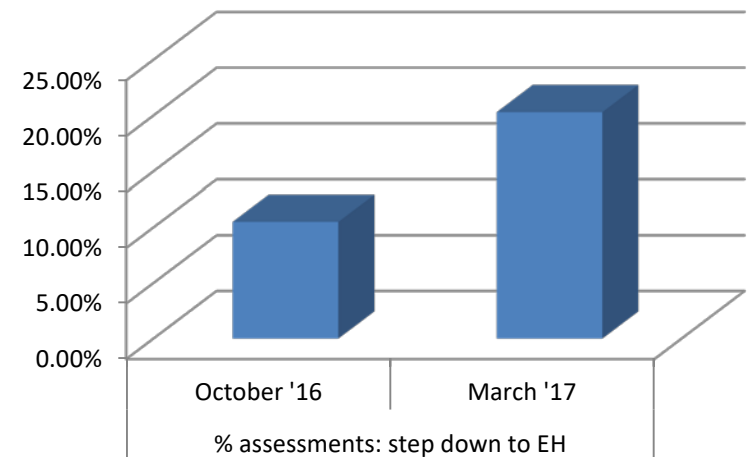
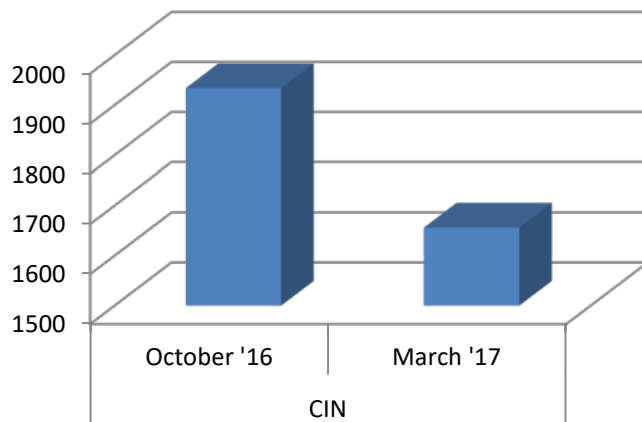
Early Help Impact



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'Michelle listened to me and all my problems. She has given me emotional support, she told me she understands my problems not judging me but offering me empathy and advice.'

'I don't know where I'd be or if I would still have my kids if it hadn't been for your help.'



Early Help Financial Impact

The estimated unit cost per CiN £1,655 *

The unit cost per Early Help Assessment £949**

A difference of £706

Over six months from October 2016 to March 2017 a total of 629 CiN were stepped down to Early Help which, if it is assumed all would have remained as CiN up to the end of March, gives an in-year pro-rata cost reduction of £156k.

Across a full year the indicative cost reduction based on a similar number of CiN stepping down to Early Help would be £425k.

* 2014/15 EIF the cost of late intervention for children & young people – CiN unit cost based on a 6 month period of case management uplifted to 2016/17.

** Bottom of range



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Stephen Rimmer,
Director of Impact and
Learning

Barnardo's

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Systems Leadership, Early Intervention and Supporting the Most Vulnerable Children

What it feels like...



Systems Leadership, Early Intervention and Supporting the Most Vulnerable Children

Some key issues

- Is this **evidence-based** or a **leap of faith**?
- What data drives genuinely sustainable political commitment?
- ***Strategic delivery partnerships*** – how far can public services genuinely be transformed  a different “balance” between statutory/voluntary/commercial services and services users?
- ***Accountability*** – Do Inspectorates and others know what good prevention/early intervention outcomes look like?
- ***Culture*** – “I didn’t get where I am today by being collaborative.” Can leadership behaviours really change??
- ***Mission*** – What are the new vulnerabilities? post Brexit? Digital? Organisational mind-sets?



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Dr Warren Larkin,
Consultant Clinical
Psychologist

Clinical Lead for
Department of Health
Adverse Childhood
Experiences Programme

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The case for routine enquiry in health and social care

Waiting to be told doesn't work...

Victims of childhood abuse have been found to wait from between nine to sixteen years before disclosing trauma with many never disclosing

(Frenken & Van Stolk, 1990; Anderson, Martin, Mullen, Romans & Herbison, 1993; Read, McGregor, Coggan & Thomas, 2006)

Read and Fraser (1998) found that 82% of psychiatric inpatients disclosed trauma when they were asked, compared to only 8% volunteering their disclosure without being asked

Felitti & Anda (2014) report a 35% reduction in doctor's office visits and 11% reduction in ER visits in a cohort of 140,000 patients asked about ACEs as part of standard medical assessment in the Kaiser Health Plan



A S S O C I A T E S L I M I T E D

REACH Model

Readiness checklist and organisational 'buy in'

Change Management - systems and processes to support enquiry

Training Staff - hearts and minds & how to ask and respond appropriately

Follow-up support and supervision for staff and leadership team

Evaluation and Research



A S S O C I A T E S L I M I T E D

Key Findings

- Most participants were not aware of the impact of adversity on later life outcomes before the training.
- REACh training equips practitioners with the knowledge, confidence and skills to conduct routine enquiry with the people they support.
- Routine Enquiry is feasible and acceptable to staff and service users.
- There have been no reported significant increases in service need following practice change. Most service users are well supported by the worker they disclosed to or were currently working with.
- The REACh approach was the catalyst for increased frequency of disclosures, better therapeutic alliance and more targeted interventions
- Following routine enquiry people report considering the impact of ACEs in relation to their own children.
- Routine enquiry can quickly become business as usual.



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