FAMILY CONTEXT IN CHILDREN'S SERVICES: PROJECT OVERVIEW

The Alpha Phase Submission

STOCKPORT METROPOLITAN BOROUGH COUNCIL

Leeds CITY COUNCIL

Ministry of Housing, Communities & Local Government

SOCIAL FINANCE

GUIDE TO PROJECT OUTPUTS

In this deck

Project Context

User Research Report

Feasibility Report

Product Roadmap

Benefits Case

Also available

GitHub - https://github.com/SFDigiLabs

- Additional documents (incl. user research scripts, draft prototypes, findings from user research and feasibility research by service, etc.)

Blogs About the Project

- Blog 1 - How can better access to data support better decision-making for families?
- Blog 2 - Family Context project: The "Design Sprint" & Beyond!

“One piece of information can change the decision for a family”

Chief Social Worker

PROJECT CONTEXT

PROJECT OVERVIEW

Summary

Objective: Provide social workers with key information on what services are engaged with the child's family in a way that works across councils

Partners: Stockport, Leeds, Social Finance and MHCLG's Local Digital Collaboration Unit

Funding: MHCLG's Local Digital Fund and the Christie Foundation – both funders are focused on supporting local authorities to create common solutions to shared problems

The partners

STOCKPORT
METROPOLITAN BOROUGH COUNCIL

Leeds
CITY COUNCIL

Ministry of Housing,
Communities &
Local Government

SOCIAL
FINANCE

TO LEARN MORE, WATCH CRAIG HUGHES FROM STOCKPORT EXPLAIN THE PROJECT:
HTTPS://WWW.YOUTUBE.COM/WATCH?V=UJKNICXHTSS

TIMELINE AND KEY MILESTONES

FROM DISCOVERY TO ALPHA

June 2018:
Stockport, Leeds & ten other local authorities met with Social Finance to discuss barriers for improving decisions and outcomes for vulnerable people. Two potential projects were identified, including Family Context in Children's Services.

July 2018:
Stockport & Leeds committed to participate in discovery phase of Family Context in Children's Services

September 2018:
Discovery phase began, running for 12 weeks

November 2018:
Discovery phase concluded - began drafting £100k MHCLG Local Digital Fund bid

December 2018:
Successful bid submitted; began planning for alpha, attending kick-off meetings etc.

January 2019:
Alpha phase began, IG & procurement focus

February 2019:
Design sprints

March 2019:
Prototype iteration

APPROACH

… USER-CENTRED

We put social workers' input at the centre of our design process – every new iteration of our prototype is the result of learnings from our user research interviews with frontline workers.

… AGILE

We refined our prototype through five iterations of research with social workers - every additional round gave us a more in-depth understanding of user needs.

… COLLABORATIVE

We ensured that online and offline communication was harmonious.

… OPEN SOURCE

Our aim was to be as transparent as possible.

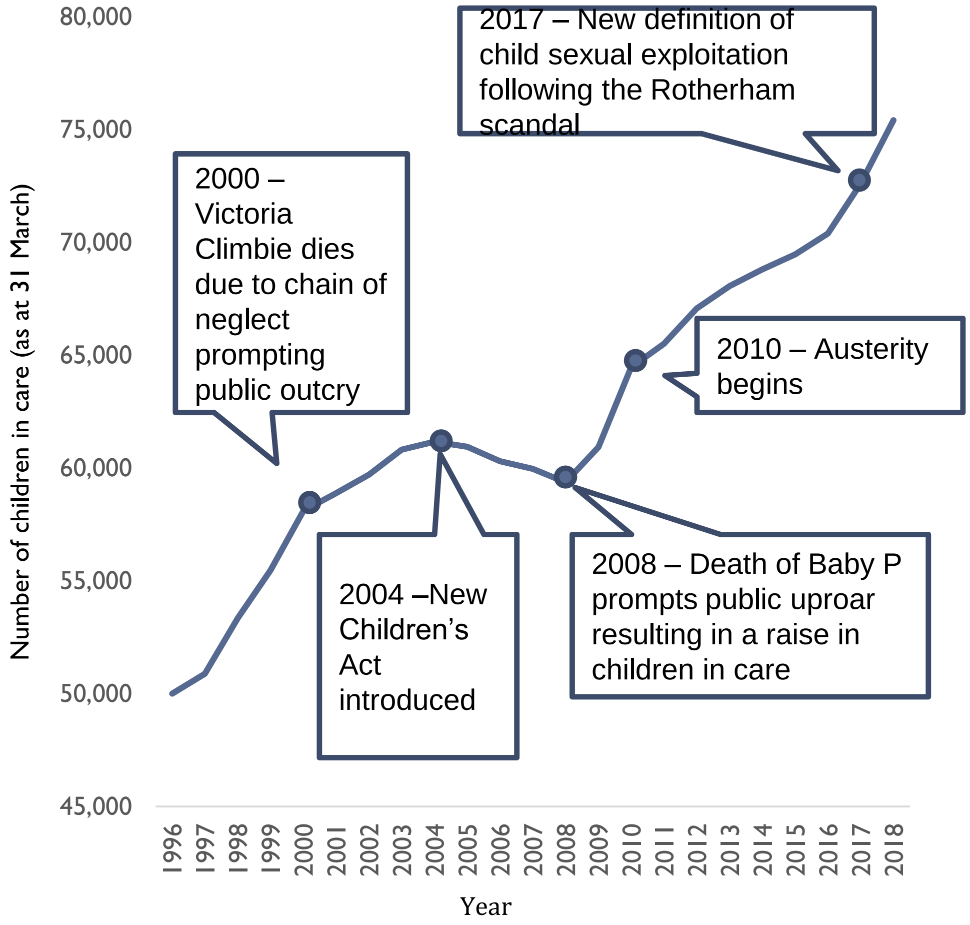
THE SOCIAL ISSUE

The number of children taken into care in England has reached a 25-year high. Children who experience the care system are some of the most disadvantaged people in the country, with significantly poorer life outcomes in comparison to their peers.

Children who experience the care system are:

- 4x more likely to be involved in the Youth Justice System than their peers
- 5x more likely to face exclusion from school than their peers
- 40x more likely to become homeless than their peers

The increase in numbers of children in care



2000 – Victoria Climbie dies due to chain of neglect prompting public outcry

2004 –New Children's Act introduced

2008 – Death of Baby P prompts public uproar resulting in a raise in children in care

2010 – Austerity begins

2017 – New definition of child sexual exploitation following the Rotherham scandal

THE PROBLEM

When social workers first interact with a family, they do not have easy access to **key information** on relevant people in the family and the services that have engaged with them. This results in them either taking decisions without this key information or spending a **significant amount of time searching for it**.

Consequences are:

*Social workers sometimes have **incomplete information** which can change decisions and outcomes for children and families.*

*Social workers **waste time** chasing information, which they would prefer to spend with the family on working out a plan.*

WHY SOLVE THE PROBLEM?

We want to ensure that social workers always have the information they need so that:

- More young people are well looked after by their families and fewer end up in care
- Children are protected from harm even when no single service perceives significant risk
- Social workers are viewed by all families as people who really understand their circumstances and can support them

Overview of alpha

ALPHA OVERVIEW

Building and testing prototypes

Kick-off

Design Sprint

Week 4

Prototype Testing

Week 16

Further Investigation

Alpha Gateway

We kicked off with a three-week design sprint (incl. three rounds of user testing), which culminated in the development of our first prototype solution.

We ran four rounds of user testing in order to iterate the prototype. In the final round, we tested the prototype on live cases.

We extended the alpha for an additional six weeks to validate the remaining assumptions before advancing to a potential beta stage.

OUTCOME: WE FOUND THAT THERE IS SIGNIFICANT VALUE TO AREA SOCIAL WORKERS IN PROVIDING ACCESS TO INFORMATION ON WHICH SERVICES ARE ENGAGED WITH THE FAMILY

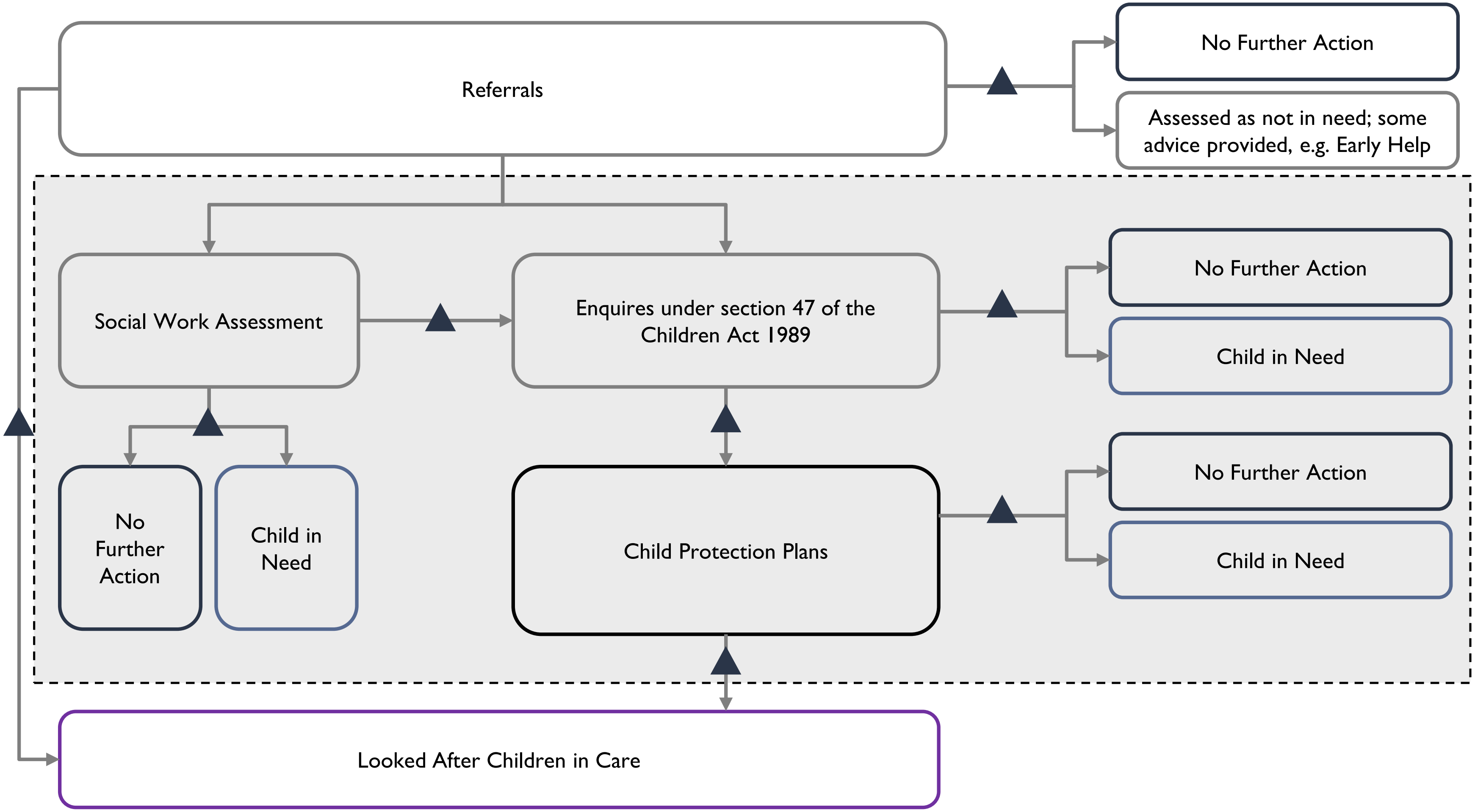
DURING ALPHA, WE TESTED DIFFERENT SOLUTIONS TO A KEY USER NEED FOR AREA SOCIAL WORKERS

Area social workers need **a quick and easy way to find out who is in the child's family and the services supporting the family** so that they can…

1. **make decisions on what support to provide a child** with complete information about the risks and strengths in their family; and

2. **free up a significant amount of time to work with families** (time which they would otherwise spend searching for this information).

THE USER NEED IMPACTS SEVERAL KEY DECISIONS



Referrals

No Further Action

Assessed as not in need; some advice provided, e.g. Early Help

Social Work Assessment

Enquires under section 47 of the Children Act 1989

No Further Action

Child in Need

No Further Action

Child in Need

Child Protection Plans

No Further Action

Child in Need

Looked After Children in Care

▲ Decisions points

▨ Decisions where information on the family is most lacking to support the social worker’s assessment of risks and needs within the family

ALPHA OBJECTIVES

To test different solutions and explore new approaches to the user need

To identify the riskiest assumptions and gain an understanding of the constraints

To decide which, if any, of the ideas tested are worth taking forward to beta

OUR ‘THEORY OF CHANGE’ TO TEST IN ALPHA

In alpha, we wanted to test our theory of change on how information on family context could result in better decision-making and outcomes for children

ACTIVITIES

Area social workers access a single tool to see the full picture of the family and the services that are or have been engaged with them

Area social workers contact representatives from the other engaged services

OUTPUTS

Area social workers have a more complete picture of the family and about their engagement with services when they start the assessment

Area social workers work in a more joined up way with other services when they work with the family

OUTCOMES

Area social workers have more time, which they use to have better quality conversations with the family and provide better support

Area social workers identify risks which are not apparent to any single service and put in place the necessary protection for the child

IMPACT

More young people are well looked after by their families and fewer end up in care

Children are protected from harm even where no single service perceives significant risk

Area social workers viewed by all families as people who really understand their circumstances and can support them

ALPHA OVERVIEW – OUR APPROACH TO LEARNING

What were our objectives?

1 Refine our understanding of social workers and their needs during the assessment process

2 Test and iterate design concepts and features with social workers that address their core user needs

3 Assess social workers experience with the prototype to ensure it meets their needs and enables better decision-making

What did we need to learn?

What information do social workers need on the family context at point of referral for social work assessment?

Would there be a time-saving aspect to having this information?

How will this impact on the decisions social workers make about the level of need?

How would having the information they need on service involvement impact on their work with the family?

ALPHA OVERVIEW – IN NUMBERS…

3

LOCAL AUTHORITIES PARTICPATED IN USER RESEARCH

23

AREA SOCIAL WORKERS PARTICIPATED IN USER RESEARCH

13

DIFFERENT SERVICES PROVIDED ACCESS TO DATA AND SYSTEMS

16

WEEKS ITERATING AND REFINING THE PROTOTYPE TO PRODUCE THE MINIMUM VIABLE PRODUCT

4

PROTOTYPES TESTED ACROSS SIMULATED AND ‘REAL’ SITUATIONS

5

CHILDREN AND FAMILIES SUPPORTED USING THE PROTOTYPES AS PART OF ‘LIVE’ TESTING

~3hr

OF TIME SAVED PER ASSESSMENT THAT CAN NOW BE SPENT WITH FAMILIES

~60%

OF SOCIAL WORKERS WOULD RECOMMEND FAMILY CONTEXT TO PEERS AND SUPPORT ITS ROLL-OUT

USER RESEARCH REPORT

UNDERSTANDING OUR CORE USERS

USERS OF THE FAMILY CONTEXT ALPHA

During the alpha, we worked closely with key user groups to better understand their role and whether Family Context Alpha would add value. We identified that area social workers are our core user.

AREA SOCIAL WORKERS

Social workers who cover a geographic area without specialising in a need area

CORE USER

FRONT DOOR SOCIAL WORKERS

SPECIALIST SOCIAL WORKERS

AREA SOCIAL WORK TEAM MANAGERS

POTENTIAL-USER

WE IDENTIFIED AREA SOCIAL WORKERS AS THE CORE USER DUE TO THEIR FREQUENT AND DIRECT ENGAGEMENT WITH FAMILIES WITH DIFFERENT NEEDS

POTENTIAL USERS

Role	Responsibilities	Motivations	Insight
SPECIALIST SOCIAL WORKERS	- Conduct assessments on children and families who have a need or risk related to their specialism, e.g. learning disabilities.	- Ensure children access the right support and safeguard them from harm.	- Spend most of their time supporting open cases rather than conducting assessments. - Tend to have long term relationships with the family and already work closely with key partner organisations.
TEAM MANAGERS	- Supervise social work assessments. - Provide guidance to area social workers during the assessment and sign off on the decision on what support to provide.	- Ensure children access the right support and safeguard them from harm. - Ensure area social workers feel supported and can access additional advice.	- Only involved in conversations with other services and with the family in a small number of more serious cases.
FRONT DOOR SOCIAL WORKERS	- Receive contacts from the public and professionals regarding concerns. - Make referrals to area social work teams for assessment.	- Ensure children access the right support and safeguard them from harm. - Understand enough about cases to triage appropriately.	- Investigate cases only deeply enough to triage them, and in some cases the content of the contact is sufficient to do this. - Can find out information from police researchers and health visitors stationed at the front door.

AREA SOCIAL WORKERS – USER PERSONA

Role in the process

Social workers conduct child and family assessments following a referral regarding safeguarding concerns about a child. They gather information from the child and family and the professionals who have had contact with them, in order to make decisions on how to best support them.

Key statistics

- Caseload of 24-31 children at any one time
- Four to six children being assessed at any one time
- Caseload includes Referrals, Child in Need, Looked After Child through to Adoption

Key responsibilities

- Safeguard children and families
- Make decisions about level of risk of harm to the child
- To coordinate and signpost families to appropriate services to meet the families' needs
- Maintain accurate records of all interactions with children and families on the case management system

Key insights

- It is often hard to get information about the family's involvement with services, which they need to make decisions about the level of risk of harm to a child
- Some information can be located within their case management system, but it can be unintuitive to use, and difficult to find information
- Social workers have to balance case work with assessment work
- Building a relationship with the family is an integral part of the assessment process, and social workers have to rely on them for information on the services the family are working with

AREA SOCIAL WORKERS – EMPATHY MAP

Motivations

- Maximise time spent with children and families– spend less time inputting information
- Get the best outcomes possible for the child

What works well for them

- Look for opportunities to build relationships with families
- Aim to coordinate support with other services

SAYS

"I might need to talk to ten different partners (schools, education, health visitors, etc.)"

"Sometimes you don't find out about other professionals 'till half way though an assessment"

THINKS

"It's important to get the right people supporting the family around the table"

"I have to work out which other services are involved"

DOES

"You might have an informal chat with people you are sat next to quite early on to find out if they have heard of this family before"

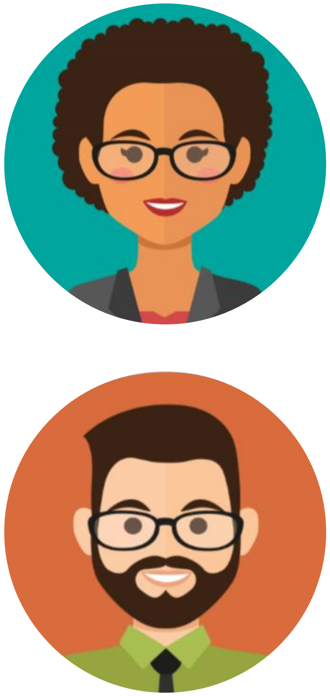
FEELS

Intrusive – trying to get background information on a family

Frustrated – trying to record interactions and locate information in systems

Uncertain – about what information can be shared

KEY USER NEED AND POTENTIAL BENEFITS



As an area social worker, I need quick and easy access to information on what services are engaged with the family

So I can: contact relevant services to better understand their needs and work in a joined up way with them

So I can: spend more time with families and less time searching for relevant information

So I can: be more confident in my assessment of the risks and needs of the child and their family

APPROACH TO USER RESEARCH

HYPOTHESIS

From the discovery phase, we learned that social workers have a problem knowing which services are or have been supporting the family and why.

Our hypothesis is that we can help them by **providing an overview that shows people in the family alongside the engagement of those people with other services.**

We know we're right when area social workers:

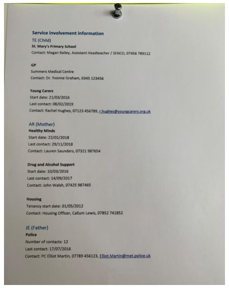
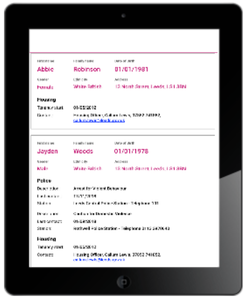
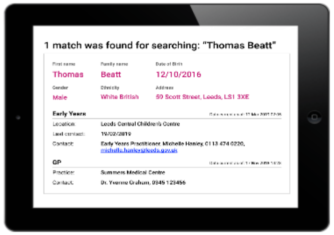
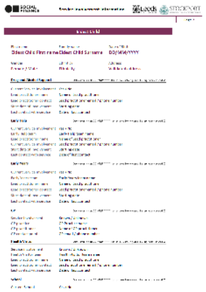
(1) **spend less time chasing this information; and**

(2) **contact other practitioners earlier in the assessment process and have more informed conversations with families.**

USER RESEARCH APPROACH AND TIMELINE

We undertook multiple rounds of user research to test this hypothesis. We have conducted the research using different referrals/cases and iterating the prototype.

Test the hypothesis in an interview setting with a fictional case (Rounds 1–3) | Real-world testing (Live)

Round	**1**	**2**	**3**	**Live**
Prototype used	 Paper	 Digital	 Digital	 Excel
Presenting issues	Alcohol abuse Domestic Violence	Domestic Violence Mental Health, Housing	Adult Social Care	Domestic Violence, Adult Social Care, Drug & Alcohol
User Research Methodology	Semi structured interviews and card sort exercise			See slide 29
Extent of research	6 area social workers	4 area social workers	7 area social workers	5 area social workers

Round 1 (Paper):

Service involvement information

TE (Child)
St. Mary's Primary School
Contact: Megan Bailey, Assistant Headteacher / SENCO, 07456 789112

GP
Summers Medical Centre
Contact: Dr. Yvonne Graham, 0345 123456

Young Carers
Start date: 21/03/2016
Last contact: 08/02/2019
Contact: Rachel Hughes, 07123 456789, r.hughes@youngcarers.org.uk

AR (Mother)
Healthy Minds
Start date: 22/01/2018
Last contact: 29/11/2018
Contact: Lauren Saunders, 07321 987654

Drug and Alcohol Support
Start date: 10/03/2016
Last contact: 14/09/2017
Contact: John Walsh, 07425 987465

Housing
Tenancy start date: 01/05/2012
Contact: Housing Officer, Callum Lewis, 07852 741852

JE (Father)
Police
Number of contacts: 12
Last contact: 17/07/2016
Contact: PC Elliot Martin, 07789 456123, Elliot.Martin@met.police.uk

Round 2 (Digital):

Abbie Robinson 01/01/1981

Housing

Jayden Woods 01/01/1978

White British

Police

Arrest for Violent Behaviour

Housing

Round 3 (Digital):

1 match was found for searching: "Thomas Beatt"

First name	Family name	Date of Birth
Thomas	Beatt	12/10/2016
Gender	**Ethnicity**	**Address**
Male	White British	59 Scott Street, Leeds, LS1 3XE

Early Years
Location: Leeds Central Children's Centre
Last contact: 19/02/2019
Contact: Early Years Practitioner, Michelle Hanley, 0113 474 0220, michelle.hanley@leeds.gov.uk

GP
Practice: Summers Medical Centre
Contact: Dr. Yvonne Graham, 0345 123456

DETAILED VIEW - 'LIVE' PROTOTYPING METHODOLOGY

Who participated?

2 area social workers in Leeds

3 area social workers in Stockport

5 referred children / young people

How did we assess the usability and impact of the prototype?

Step 1
Usability Testing

We observed five area social workers using the Family Context prototype to identify relevant family members and other services involved with the family. We also asked questions about what they were doing, thinking and feeling.

Step 2
Day 5/6 Follow-up

We conducted follow-up user interviews to understand how the Family Context tool informed the assessment process and how the area social worker used the insight to support the family.

Step 3
Day 11 Follow-up

We conducted final user interviews at day 11 to assess the impact of the tool on the assessment process and what concrete actions / next steps having access to Family Context information enabled.

LEARNINGS FROM USER RESEARCH

LEARNINGS FROM RESEARCH

We have grouped our learnings from our research into three categories:

VALUE OF SHOWING INFORMATION ON ENGAGEMENT WITH OTHER SERVICES	We have learnt a lot about the impact of information on service involvement for the individuals in the family
VALUE OF SHOWING INFORMATION ON PEOPLE IN THE FAMILY UNIT	We learnt how area social workers define family and how this information is collected at different stages of the assessment process
VALUE OF PROVIDING AN OVERVIEW / VISUALIZATION	We learnt how information needs to be presented to area social workers and iterated the prototype based on their feedback and input

WE FOUND THAT DIFFERENT DATA FIELDS / SOURCES PROVIDE DIFFERENT BENEFITS

Information on family context enables area social workers:

1. Build an understanding of the family by talking to people who have a direct relationship with them (see slide 33)
2. Collaborate with other services in supporting the family (see slide 34)
3. Access more information to assess risk (see slide 35)
4. Formulate hypotheses to test during the assessment process (see slide 36)

1. BUILD AN UNDERSTANDING OF THE FAMILY BY TALKING TO PEOPLE WHO HAVE A DIRECT RELATIONSHIP WITH THEM

"I would definitely call [an] Adult Social Care practitioner if I had the contact details."

"We now know earlier that Early Help has been involved, so if necessary we would know whom to contact right away because that person would know a lot about family and that would be useful."

"Teachers know the child well and that is the best source of information usually."

"Mum is involved with [mental health services] (she notes that it is not in the referral) – that would be interesting to find out what has been affecting her in the past."

"I would contact Young Carers - they would know that child much better than I do."

2. COLLABORATE WITH OTHER SERVICES IN SUPPORTING THE FAMILY

"Housing information could also help me build a relationship with the family if they complain for instance about housing fixes that need to be done. I could contact the person in charge of it and chase it for them."

"It feels like the GP is not always part of the process, so [it] would be great to have the contact details and make the GP part of the conversation."

"The team around the child meeting would happen earlier and would be more inclusive."

"I could visit the family with someone from another service [Adult Mental Health or Drug and Alcohol Support]."

"It might be that support has fallen away from this mum, it might mean ringing [the Drug and Alcohol Support practitioner] and bringing them back in."

"If there was a significant concern with the mum's alcohol abuse, we would want someone from Drug and Alcohol to come to the meeting anyway."

"I try to have [a] joint supervision with the Youth Offending Service person."

3. ACCESS MORE INFORMATION TO ASSESS RISK

"Police would always be a good one because it links with probation and youth offending."

"Having the history has made me think straight away there IS an issue with domestic violence, whereas without it I'll get there less quickly."

"If there are no other services involved, then school would be helpful. How long have they had concerns and what is the evidence for that?"

"You already have more information to engage with the family – that shifts the first family visit conversation; it gives you something to go on; you know that there is contact with the Youth Offending Service team."

4. FORMULATE HYPOTHESES TO TEST DURING THE ASSESSMENT PROCESS

"Looking at Housing, I'd be looking for: how secure is [the] tenancy; [are there] any concerns from neighbours; and how does he manage his tenancy?"

"I can triangulate information to better understand what is going on…"

"With [this] tool, you start making hypotheses about what might have gone on. This visit has strengthened one hypothesis. [The] teenager is having issues because of domestic violence, and Mum's not aware. She's a victim, but for her children's sake, she needs to be educated very quickly."

"Without this information sheet, [I] wouldn't know about the Adult Social Care involvement with Dad, which is relevant for the assessment."

"What Mum's said at the home visit correlates with this information."

THE IMPACT OF SHOWING ENGAGEMENT WITH OTHER SERVICES

Service	Summary of our learnings about the value to social worker	Why it adds value in comparison to the status-quo?
Adult Social Care	Enables joint working with the family (e.g. visiting the family with an Adult Social Care practitioner)	Joint working with Adult Social Care can ensure a holistic approach to supporting the family and meeting their needs
Police	Informs risk assessment and conversations with families	Allows social workers to be more confident about the current risks posed by relevant family members, earlier in the process
Housing	Identifies important risks around the family's basic needs and provides support if necessary	Provides ways in which the social worker can help the family with issues or be alert to potential risks, e.g. rent arrears
Adult Mental Health	Understands the adults around the child better and offers an opportunity for joint support	Understanding the challenges faced by significant adults in the family means that the right level of support can be identified
Drugs and Alcohol	Offers a deeper understanding of underlying needs	Key insights into the needs of relevant adults provides a more accurate assessment of risk and need
GP	Gives an overview of risks and family context information	Enables GPs to be a part of the conversation on risk and need
Early Help	Presents details of previous support offered to the family and avoids duplication	Provides information on 'what works' from previous interventions
School	Gives the first point of call for information about the child and family context	Provides an initial snapshot of the family context and concerns
Health Visitor	Provides an overview of the family's healthcare needs, especially for a referral relating to a young child	Presents easy access to health information on the child and family
Youth Offending Service	Imparts knowledge on risks relating to the child and the relevant family risk and protective factors	Facilitates joint working to address the key areas for concern and the support being offered
Young Carers	Helps to understand the child's needs in the context of the family's existing difficulties	Offers a clearer understanding of the child's needs and existing support

LEARNINGS FROM RESEARCH

We have grouped our learnings from the research in three categories:

VALUE OF SHOWING INFORMATION ON ENGAGEMENT WITH OTHER SERVICES

We have learnt a lot about the impact of information on service involvement for the individuals in the family

VALUE OF SHOWING INFORMATION ON PEOPLE IN THE FAMILY UNIT

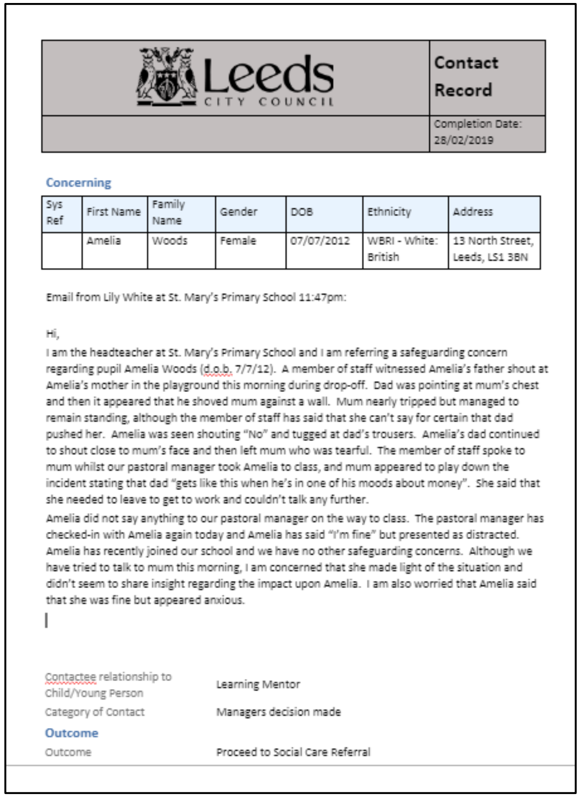
We learnt how area social workers define family and how this information is collected at different stages of the assessment process

VALUE OF PROVIDING AN OVERVIEW / VISUALIZATION

We learnt how information needs to be presented to area social workers and iterated the prototype based on their feedback and input

COMPLETE AND ACCURATE PERSONAL DETAILS FOR FAMILY ARE HELPFUL TO SOCIAL WORKERS BUT ARE NOT ALWAYS EASILY AVAILABLE

Example Referral Form



Leeds City Council

Contact Record

Completion Date: 28/02/2019

Concerning

Sys Ref	First Name	Family Name	Gender	DOB	Ethnicity	Address
	Amelia	Woods	Female	07/07/2012	WBRI - White: British	13 North Street, Leeds, LS1 3BN

Email from Lily White at St. Mary's Primary School 11:47pm:

Hi,

I am the headteacher at St. Mary's Primary School and I am referring a safeguarding concern regarding pupil Amelia Woods (d.o.b. 7/7/12). A member of staff witnessed Amelia's father shout at Amelia's mother in the playground this morning during drop-off. Dad was pointing at mum's chest and then it appeared that he shoved mum against a wall. Mum nearly tripped but managed to remain standing, although the member of staff has said that she can't say for certain that dad pushed her. Amelia was seen shouting "No" and tugged at dad's trousers. Amelia's dad continued to shout close to mum's face and then left mum who was tearful. The member of staff spoke to mum whilst our pastoral manager took Amelia to class, and mum appeared to play down the incident stating that dad "gets like this when he's in one of his moods about money". She said that she needed to leave to get to work and couldn't talk any further.

Amelia did not say anything to our pastoral manager on the way to class. The pastoral manager has checked-in with Amelia again today and Amelia has said "I'm fine" but presented as distracted. Amelia has recently joined our school and we have no other safeguarding concerns. Although we have tried to talk to mum this morning, I am concerned that she made light of the situation and didn't seem to share insight regarding the impact upon Amelia. I am also worried that Amelia said that she was fine but appeared anxious.

Contactee relationship to Child/Young Person	Learning Mentor
Category of Contact	Managers decision made

Outcome

Outcome	Proceed to Social Care Referral

**fictional information

Referral Status Quo

Often the current referral form does not provide sufficient information on who is in the family…

- "The information that we get is quite scarce."
- "I would look for information on family links on the case management system."
- "We need to do a lot of digging on the case management system (incl. reading free text) to find out who is in the family."

This means that social workers may not have the information they need to assess risk…

- "When [I] talked to Dad, [I] didn't know Dad wasn't living with the child anymore."
- "No date of birth for Mum on referral….this means I need to find out more about date of birth [in order to see] if she may already have children, see if there is a midwife assigned to her yet, etc."

WITHOUT ALREADY KNOWING THE FAMILY, IT IS NOT EASY TO IDENTIFY RELEVANT INDIVIDUALS

It is not always clear who the key adults are…

- "A lot of this assessment will be on Mum's new partner as he is staying at the house and has a relationship with the child."
- "Parents are not necessarily key to the case – in this case it's the carers (Special Guardianship Order[1])"
- "I would ring the school – do they know of any other people around the family – I'd be thinking of Family Group Conferencing already[2]."

It is not always clear who else is in the family…

- "Dad may have more children back in Trafford or somewhere outside the council."
- "If it's a new family, hopefully the Front Door put together information on all the siblings. There are a couple of examples where they missed one sibling, then we weren't sure if it was a sibling or someone else."
- "It's going to be one of those where you have to figure out who is who."

WE FOUND THAT THE DEFINITION OF FAMILY CHANGED DEPENDING ON THE CHILD AND CASE…"AS A SOCIAL WORKER YOU QUICKLY LEARN HOW TO FIGURE OUT RELEVANT FAMILY IN YOUR HEAD"

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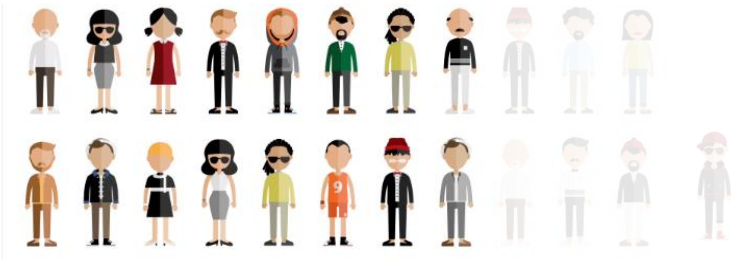
[1] Special Guardianship Order – is when the court appoints a special guardian who has parental responsibility for the child.

[2] A Family Group Conference is a meeting where a child's wider family come together, talk about concerns and make a plan for the future care of the child

WE IDENTIFIED PEOPLE IN THE CHILD'S FAMILY WHO WERE NOT ON THE REFERRALS…

The families according to **the referrals**

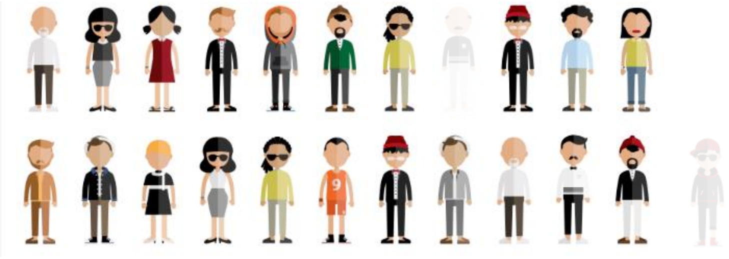


16

TOTAL INDIVIDUALS IDENTIFIED IN REFERRAL FORM

▼

The families according to **the prototypes we tested**



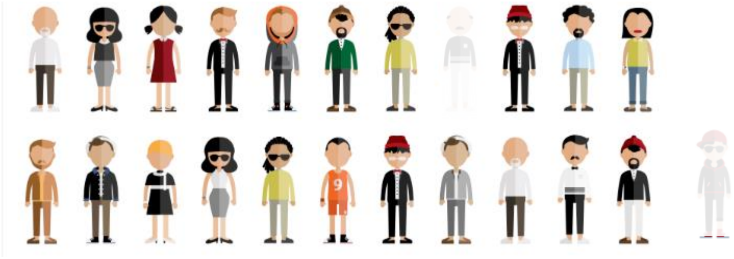
21

TOTAL INDIVIDUALS IDENTIFIED BY THE PROTOTYPE

▶ THE PROTOTYPE IDENTIFIED AN ADDITIONAL SIX PEOPLE WHO WERE NOT FLAGGED DURING THE REFERRAL PROCESS. THE PROTOTYPE, HOWEVER, FAILED TO IDENTIFY ONE PERSON WHO WAS FLAGGED AS RELEVANT AT REFERRAL BECAUSE THEY WERE NOT FROM THE LOCAL AUTHORITY.

… BUT NOT AS COMPREHENSIVELY AS SOCIAL WORKERS ON DAY 11 OF THE 'LIVE' PROTOTYPE TESTING

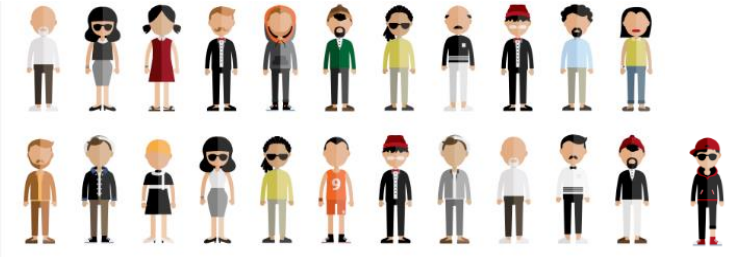
The families according to **the prototypes we tested**



21

TOTAL INDIVIDUALS IDENTIFIED BY THE PROTOTYPE

The families according to **the social workers on day 11 of 'live' prototype testing**



23

INDIVIDUALS IDENTIFIED BY SOCIAL WORKERS ON DAY 11

THE PROTOTYPE IDENTIFIED THE MAJORITY OF FAMILY MEMBERS WHO SOCIAL WORKERS IDENTIFIED DURING THE ASSESSMENT PROCESS. HOWEVER, IT STRUGGLED WITH FAMILY MEMBERS WHO HAD RECENTLY MOVED INTO THE LOCAL AUTHORITY

…AND NOT IN EVERY CASE

The prototype’s ability to identify additional family members was not consistent across the five referral areas of live testing

Local Authority	Referral Area	Additional individuals identified by the prototype
Leeds CITY COUNCIL	**L1** - Hough Lane	None
	L2 - Osmondthorpe	None
STOCKPORT METROPOLITAN BOROUGH COUNCIL	**S2** – Stockport	🧍🧍🧍🧍
	S4 – Stockport	🧍
	S5 – Stockport	None

THROUGH USER RESEARCH, IT BECAME CLEAR THAT SOCIAL WORKERS WERE BETTER AT IDENTIFYING WHO WAS IN THE FAMILY IN COMPARISON TO THE PROTOTYPE

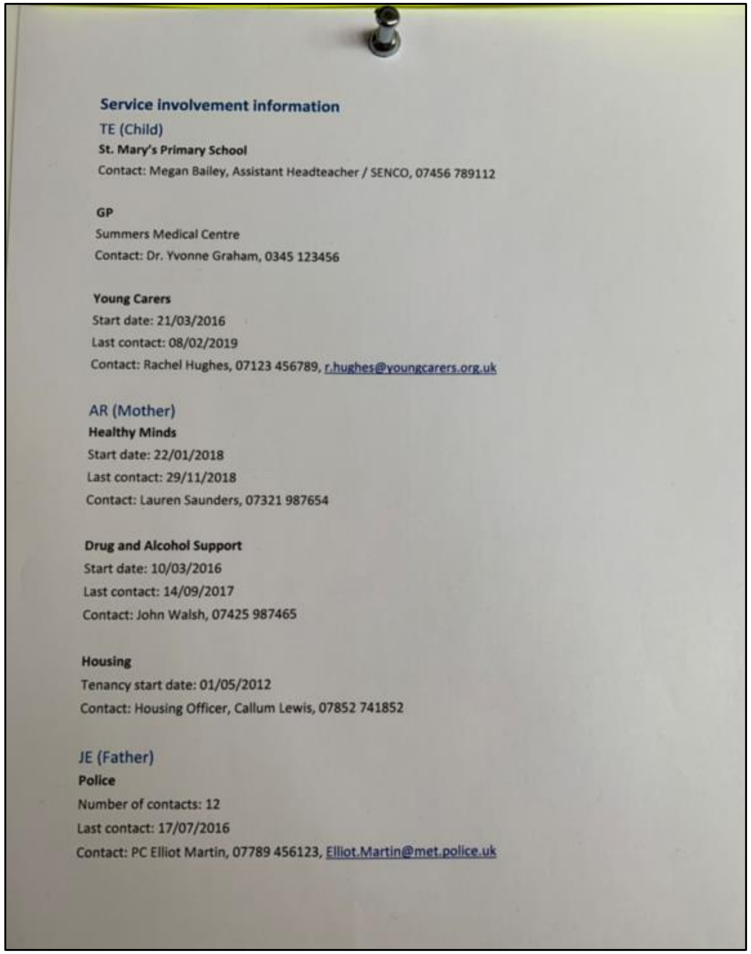
LEARNINGS FROM RESEARCH

We have grouped our learnings from the research in three categories:

VALUE OF SHOWING INFORMATION ON ENGAGEMENT WITH OTHER SERVICES	We have learnt a lot about the impact of information on service involvement for the individuals in the family
VALUE OF SHOWING INFORMATION ON PEOPLE IN THE FAMILY UNIT	We learnt how area social workers define family and how this information is collected at different stages of the assessment process
VALUE OF PROVIDING AN OVERVIEW / VISUALIZATION	We learnt how information needs to be presented to area social workers and iterated the prototype based on their feedback and input

PROTOTYPE 1

SOCIAL WORKERS LIKED THE SIMPLE WAY INFORMATION WAS PRESENTED BUT WANTED AN INDICATION OF WHY SERVICES WERE INVOLVED



Service involvement information

TE (Child)

St. Mary's Primary School

Contact: Megan Bailey, Assistant Headteacher / SENCO, 07456 789112

GP

Summers Medical Centre

Contact: Dr. Yvonne Graham, 0345 123456

Young Carers

Start date: 21/03/2016

Last contact: 08/02/2019

Contact: Rachel Hughes, 07123 456789, r.hughes@youngcarers.org.uk

AR (Mother)

Healthy Minds

Start date: 22/01/2018

Last contact: 29/11/2018

Contact: Lauren Saunders, 07321 987654

Drug and Alcohol Support

Start date: 10/03/2016

Last contact: 14/09/2017

Contact: John Walsh, 07425 987465

Housing

Tenancy start date: 01/05/2012

Contact: Housing Officer, Callum Lewis, 07852 741852

JE (Father)

Police

Number of contacts: 12

Last contact: 17/07/2016

Contact: PC Elliot Martin, 07789 456123, Elliot.Martin@met.police.uk

What worked well

- “It is useful to have a breakdown of which service is linked to the family.”
- “It gives me a clear view of the case and replaces the need to make interpretations from the referral.”

What didn’t work well

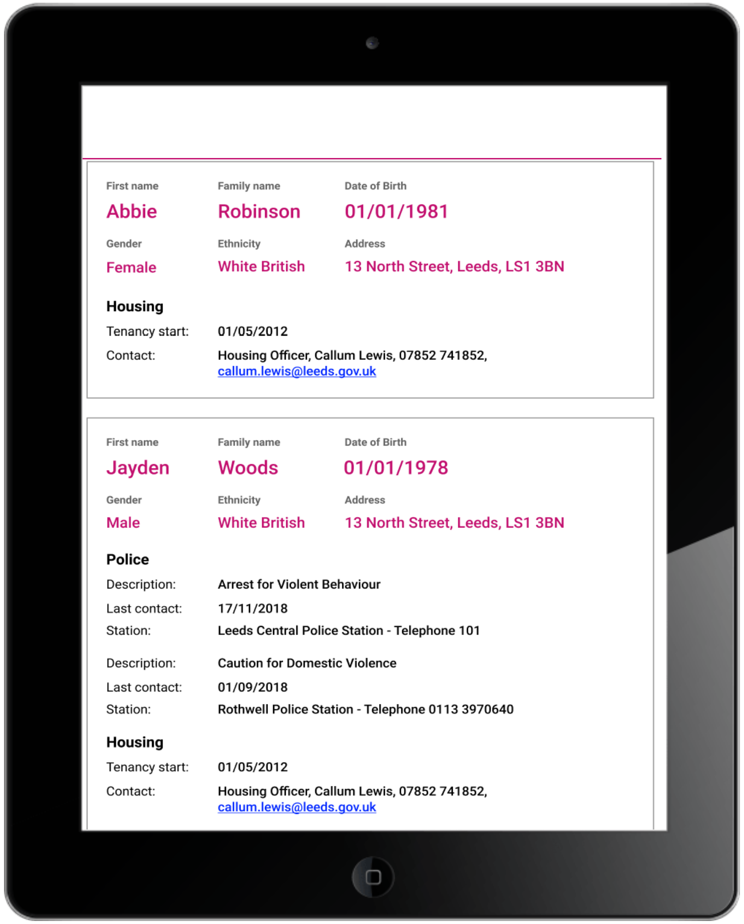
- “Maybe a small overview of why they are on the list would be helpful.”

What we did next

- Retained the simplicity
- Added details on child and family
- Added additional datafields to flag why certain services were involved

PROTOTYPE 2

SOCIAL WORKERS FOUND IT USEFUL TO KNOW WHEN THE LAST CONTACT WITH A SERVICE OCCURRED BUT WERE UNSURE HOW UP-TO-DATE THE INFORMATION WAS



First name	Family name	Date of Birth
Abbie	Robinson	01/01/1981
Gender	**Ethnicity**	**Address**
Female	White British	13 North Street, Leeds, LS1 3BN

Housing

Tenancy start: 01/05/2012
Contact: Housing Officer, Callum Lewis, 07852 741852, callum.lewis@leeds.gov.uk

First name	Family name	Date of Birth
Jayden	Woods	01/01/1978
Gender	**Ethnicity**	**Address**
Male	White British	13 North Street, Leeds, LS1 3BN

Police

Description: Arrest for Violent Behaviour
Last contact: 17/11/2018
Station: Leeds Central Police Station - Telephone 101

Description: Caution for Domestic Violence
Last contact: 01/09/2018
Station: Rothwell Police Station - Telephone 0113 3970640

Housing

Tenancy start: 01/05/2012
Contact: Housing Officer, Callum Lewis, 07852 741852, callum.lewis@leeds.gov.uk

What worked well

- "I really like 'last contact'… it tells you how long these things lasted, when they ended."

What didn't work well

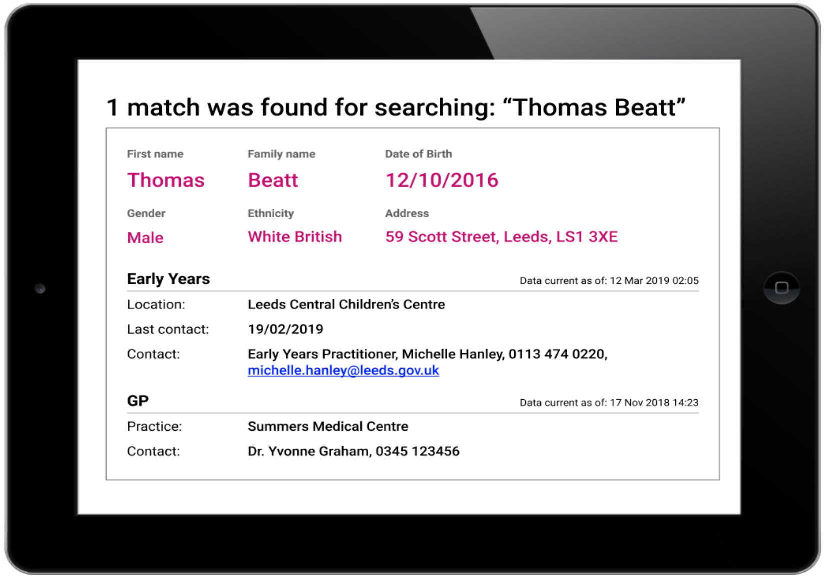
- "You'd wonder where [Mum] has been before. Was it outside Leeds?"
- "Where is the information coming from?"

What we did next

- Added 'data current as of:', which is a field to clarify when the information was last updated
- Improved layout by dividing sections between services more clearly

PROTOTYPE 3

SOCIAL WORKERS FOUND IT USEFUL TO KNOW HOW UP-TO-DATE INFORMATION WAS BUT WANTED MORE QUALIFYING INFORMATION



1 match was found for searching: “Thomas Beatt”

First name	Family name	Date of Birth
Thomas	Beatt	12/10/2016
Gender	**Ethnicity**	**Address**
Male	White British	59 Scott Street, Leeds, LS1 3XE

Early Years Data current as of: 12 Mar 2019 02:05

Location:	Leeds Central Children’s Centre
Last contact:	19/02/2019
Contact:	Early Years Practitioner, Michelle Hanley, 0113 474 0220, michelle.hanley@leeds.gov.uk

GP Data current as of: 17 Nov 2018 14:23

Practice:	Summers Medical Centre
Contact:	Dr. Yvonne Graham, 0345 123456

What worked well

- “It’s useful to know when it was last updated.”
- “If the information was sitting on a sibling’s previous case then I would not be able to see this.”

What didn’t work well

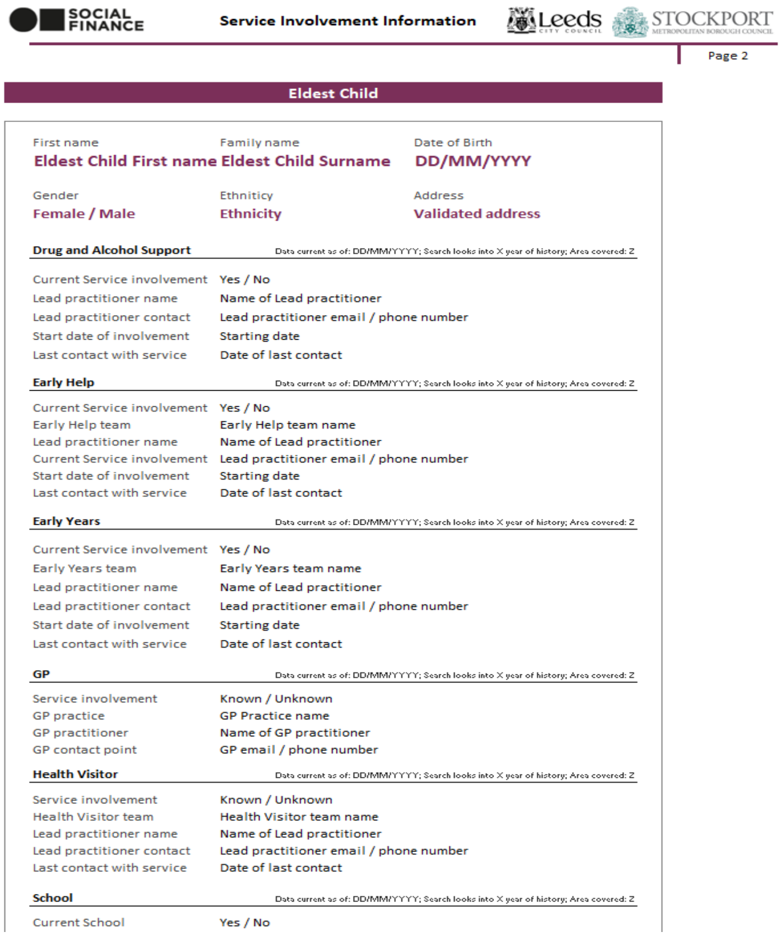
- Unclear how to interpret last contact in some instances: is the case closed or did something else happen?
- Would like to have information from other local authorities (especially Leeds)

What we did next

- Added information on which geographic area has been checked for involvement
- Specified how far back the search goes

PROTOTYPE 4

SOCIAL WORKERS APPRECIATED HAVING ALL THE CONTACT INFORMATION IN ONE PLACE BUT PREFERRED A SIMPLER LAYOUT WITH LARGER FONT SIZE



Service Involvement Information

Page 2

Eldest Child

First name	Family name	Date of Birth
Eldest Child First name	**Eldest Child Surname**	**DD/MM/YYYY**
Gender	Ethniticy	Address
Female / Male	**Ethnicity**	**Validated address**

Drug and Alcohol Support Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

Current Service involvement	Yes / No
Lead practitioner name	Name of Lead practitioner
Lead practitioner contact	Lead practitioner email / phone number
Start date of involvement	Starting date
Last contact with service	Date of last contact

Early Help Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

Current Service involvement	Yes / No
Early Help team	Early Help team name
Lead practitioner name	Name of Lead practitioner
Current Service involvement	Lead practitioner email / phone number
Start date of involvement	Starting date
Last contact with service	Date of last contact

Early Years Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

Current Service involvement	Yes / No
Early Years team	Early Years team name
Lead practitioner name	Name of Lead practitioner
Lead practitioner contact	Lead practitioner email / phone number
Start date of involvement	Starting date
Last contact with service	Date of last contact

GP Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

Service involvement	Known / Unknown
GP practice	GP Practice name
GP practitioner	Name of GP practitioner
GP contact point	GP email / phone number

Health Visitor Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

Service involvement	Known / Unknown
Health Visitor team	Health Visitor team name
Lead practitioner name	Name of Lead practitioner
Lead practitioner contact	Lead practitioner email / phone number
Last contact with service	Date of last contact

School Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

Current School	Yes / No

What worked well

- "Having all the information in one place, that has been handy… having all the contact details."
- "Good to have the parents' names on the sheet. No information about Dad on the referral."

What didn't work well

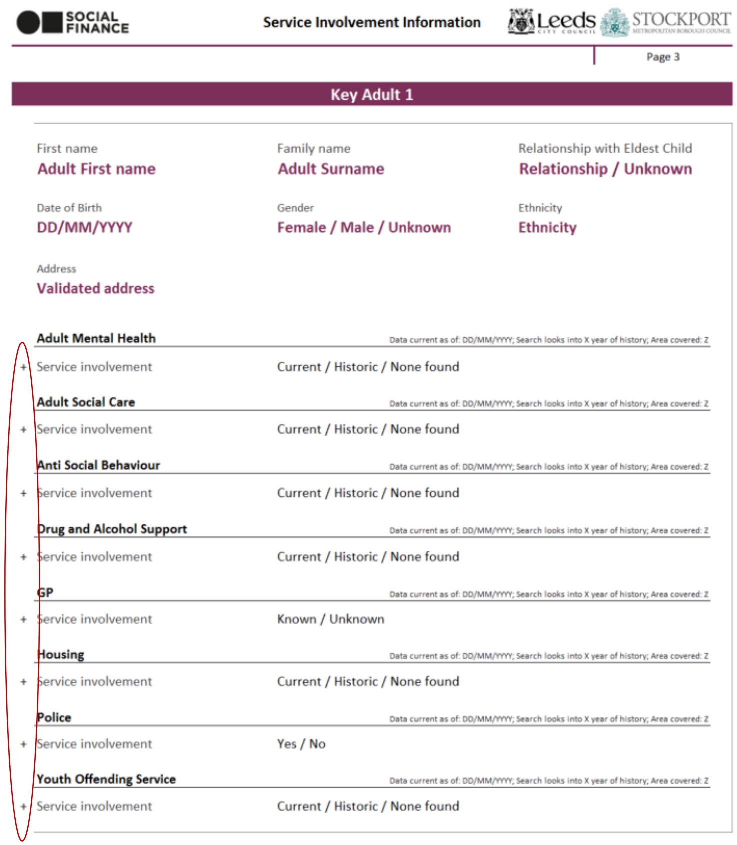
- "A lot of unnecessary boxes not filled with any information. Yes/No/Not Applicable. It's time-consuming to go through these."
- "Font size and layout could be improved."

What we did next

- Added a grouping function to avoid displaying blank fields when no information is available
- Alter font size and layout to improve readability

PROTOTYPE 5

BASED ON OUR FINAL ROUND OF TESTING, WE ADDED AN EXPAND FUNCTIONALITY THAT MAKES INFORMATION MORE DIGESTIBLE



SOCIAL FINANCE **Service Involvement Information** Leeds CITY COUNCIL STOCKPORT METROPOLITAN BOROUGH COUNCIL

Page 3

Key Adult 1

First name **Adult First name**	Family name **Adult Surname**	Relationship with Eldest Child **Relationship / Unknown**
Date of Birth **DD/MM/YYYY**	Gender **Female / Male / Unknown**	Ethnicity **Ethnicity**
Address **Validated address**		

Adult Mental Health Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

+ Service involvement Current / Historic / None found

Adult Social Care Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

+ Service involvement Current / Historic / None found

Anti Social Behaviour Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

+ Service involvement Current / Historic / None found

Drug and Alcohol Support Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

+ Service involvement Current / Historic / None found

GP Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

+ Service involvement Known / Unknown

Housing Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

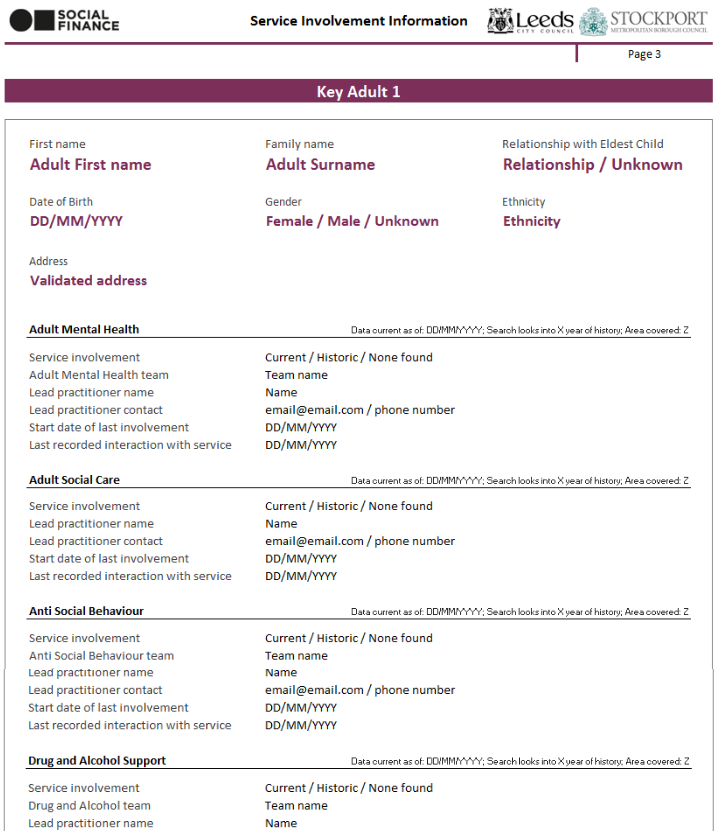
+ Service involvement Current / Historic / None found

Police Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

+ Service involvement Yes / No

Youth Offending Service Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

+ Service involvement Current / Historic / None found



SOCIAL FINANCE **Service Involvement Information** Leeds CITY COUNCIL STOCKPORT METROPOLITAN BOROUGH COUNCIL

Page 3

Key Adult 1

First name **Adult First name**	Family name **Adult Surname**	Relationship with Eldest Child **Relationship / Unknown**
Date of Birth **DD/MM/YYYY**	Gender **Female / Male / Unknown**	Ethnicity **Ethnicity**
Address **Validated address**		

Adult Mental Health Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

Service involvement	Current / Historic / None found
Adult Mental Health team	Team name
Lead practitioner name	Name
Lead practitioner contact	email@email.com / phone number
Start date of last involvement	DD/MM/YYYY
Last recorded interaction with service	DD/MM/YYYY

Adult Social Care Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

Service involvement	Current / Historic / None found
Lead practitioner name	Name
Lead practitioner contact	email@email.com / phone number
Start date of last involvement	DD/MM/YYYY
Last recorded interaction with service	DD/MM/YYYY

Anti Social Behaviour Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

Service involvement	Current / Historic / None found
Anti Social Behaviour team	Team name
Lead practitioner name	Name
Lead practitioner contact	email@email.com / phone number
Start date of last involvement	DD/MM/YYYY
Last recorded interaction with service	DD/MM/YYYY

Drug and Alcohol Support Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

Service involvement	Current / Historic / None found
Drug and Alcohol team	Team name
Lead practitioner name	Name

WE STILL NEED TO FULLY TEST THE ACCESSIBILITY OF THE PROTOTYPE TO ENSURE IT CAN BE USED BY PEOPLE WITH CONDITIONS INCL. LOW VISION, DEAF AND HARD OF HEARING, DYSLEXIA, MOTOR DISABILITIES, USERS ON THE AUTISTIC SPECTRUM AND USERS OF SCREEN READERS

HAVE WE VALIDATED THE HYPOTHESIS?

REVISITING THE HYPOTHESIS

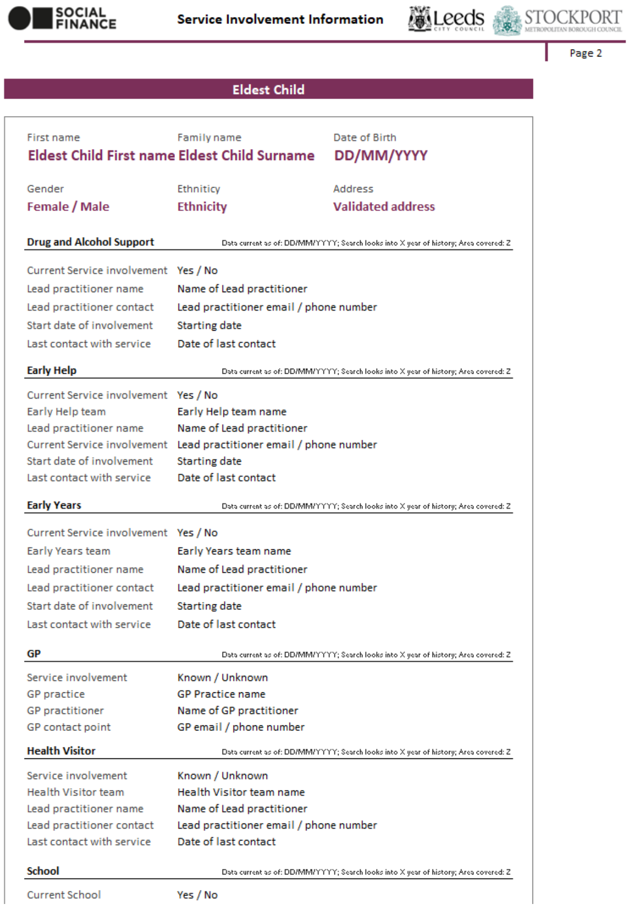
From the discovery phase, we learned that social workers have a problem knowing which services are or have been supporting the family and why.

Our hypothesis is that we can help them by **providing an overview that shows people in the family alongside the engagement of those people with other services.**

We know we're right when area social workers:
(1) **spend less time chasing this information; and**
(2) **contact other practitioners earlier in the assessment process and have more informed conversations with families.**

WE HAVE VALIDATED THE HYPOTHESIS

1. Area social workers spend less time chasing this information



SOCIAL FINANCE **Service Involvement Information** Leeds CITY COUNCIL STOCKPORT METROPOLITAN BOROUGH COUNCIL

Page 2

Eldest Child

First name	Family name	Date of Birth
Eldest Child First name	**Eldest Child Surname**	**DD/MM/YYYY**
Gender	Ethnicity	Address
Female / Male	**Ethnicity**	**Validated address**

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Current Service involvement	Yes / No
Lead practitioner name	Name of Lead practitioner
Lead practitioner contact	Lead practitioner email / phone number
Start date of involvement	Starting date
Last contact with service	Date of last contact

Early Help Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

Current Service involvement	Yes / No
Early Help team	Early Help team name
Lead practitioner name	Name of Lead practitioner
Current Service involvement	Lead practitioner email / phone number
Start date of involvement	Starting date
Last contact with service	Date of last contact

Early Years Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

Current Service involvement	Yes / No
Early Years team	Early Years team name
Lead practitioner name	Name of Lead practitioner
Lead practitioner contact	Lead practitioner email / phone number
Start date of involvement	Starting date
Last contact with service	Date of last contact

GP Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

Service involvement	Known / Unknown
GP practice	GP Practice name
GP practitioner	Name of GP practitioner
GP contact point	GP email / phone number

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Service involvement	Known / Unknown
Health Visitor team	Health Visitor team name
Lead practitioner name	Name of Lead practitioner
Lead practitioner contact	Lead practitioner email / phone number
Last contact with service	Date of last contact

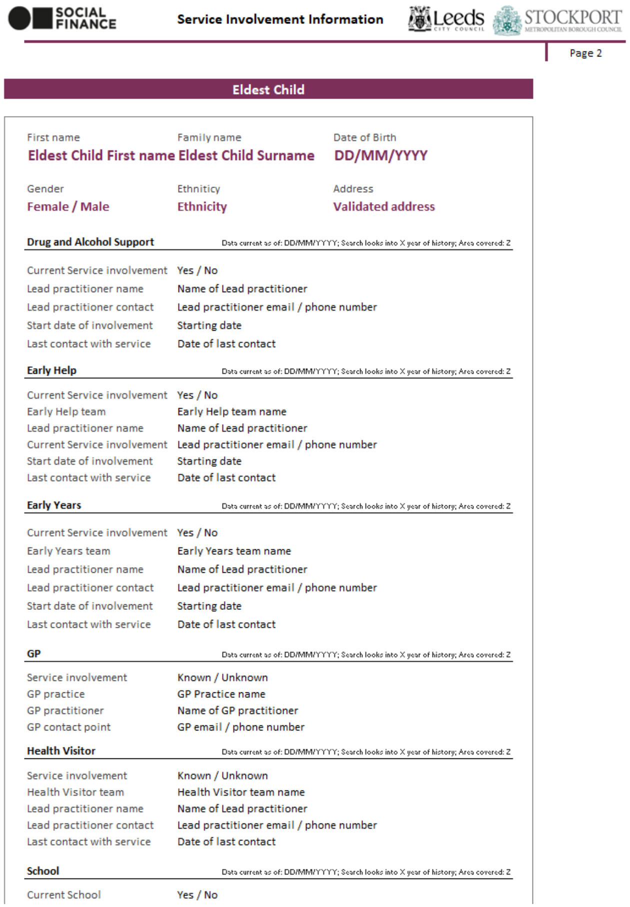
School Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

Current School	Yes / No

- “The speed in which I find links and talk to people is much quicker.”
- “It’s useful in terms of giving us a heads up on who’s involved in case the family doesn’t share that with us.”
- “Having all the information and contact details in one place has been handy.
- "Mum hasn't told me about Youth Offending Service [involvement], so it would take at least another visit or two to find out.” (would call them 1-2 weeks later without information on their involvement)
- “It may take four weeks to get information from police if it's not a S47.”

WE HAVE VALIDATED THE HYPOTHESIS

2. Area social workers contact other practitioners earlier in the assessment process and have more informed conversations with families



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Early Help team	Early Help team name
Lead practitioner name	Name of Lead practitioner
Current Service involvement	Lead practitioner email / phone number
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Lead practitioner name	Name of Lead practitioner
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Start date of involvement	Starting date
Last contact with service	Date of last contact

GP Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

Service involvement	Known / Unknown
GP practice	GP Practice name
GP practitioner	Name of GP practitioner
GP contact point	GP email / phone number

Health Visitor Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

Service involvement	Known / Unknown
Health Visitor team	Health Visitor team name
Lead practitioner name	Name of Lead practitioner
Lead practitioner contact	Lead practitioner email / phone number
Last contact with service	Date of last contact

School Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

Current School	Yes / No

- "I would [now] contact housing when I wouldn't otherwise. Standard check is just GP, school, health visitor."
- "Without this [prototype], [I] wouldn't know about the Adult Social Care involvement with Dad, which is relevant for the assessment."
- "I can arrange the team around the family meeting earlier and it would be more inclusive [of relevant services]."
- "Having the contact details would make it a lot easier to organise meetings with housing, health visitor, and others."
- "We now know earlier that Early Help has been involved, so if necessary we would know whom to contact right away."

AFTER RIGOROUS TESTING WITH USERS, *WE ARE CONFIDENT THAT THE PROTOTYPE MEETS THE USER'S NEED*

The prototype made the social work assessment process quicker, saving hours of time searching for information…

Most importantly, it enabled social workers to come to a decision quicker on what support to provide and spend more time with families.

… BUT OUR RESEARCH RAISED SOME AREAS FOR FURTHER INVESTIGATION ON *PROPORTIONALITY* OF DATA SHARING

Area social workers had questions about whether the information provided on Family Context could only be shared and used if it was proportionate to the level of risk to the child.

“Can I see this information?”

“It's about proportionate as well, what we need to know and why we need to know it.”

“[Families] might not want that information being instantly available to Children Social Care workers (...) we have to be mindful about that. It's helpful to know it but I'm not sure how I'd feel about it.”

WE NEED TO WORK CLOSELY WITH FAMILIES AND/OR REPRESENTATIVE ORGANISATIONS/BODIES AND WORK WITH INFORMATION GOVERNANCE TEAMS TO IDENTIFY RELEVANT INFORMATION GOVERNANCE GATEWAYS AND PROTOCOLS

… AND OUR RESEARCH RAISED SOME AREAS FOR FURTHER INVESTIGATION ON *HOW THIS TOOL FITS* WITH SOCIAL WORKER PRACTICE AND PROTOCOLS

Area social workers were not always confident that it was appropriate to use the information on Family Context and how best to incorporate this new information into how they approached and supported families.

“Do I need to get consent from the family before using the tool?”

“I wouldn't contact these people unless there's a S47. I would like to get consent first.”

“How do I bring up this information in conversation?”

“When I spoke to Dad to validate his offence history he was quite anxious.”

▶ WE ARE WORKING CLOSELY WITH SENIOR PRACTITIONERS IN LOCAL AUTHORITIES TO EXPLORE HOW BEST TO EMBED THE FAMILY CONTEXT TOOL INTO THEIR PRACTICE MODELS AND WAYS OF WORKING

FEASIBILITY REPORT

FEASIBILITY LEARNINGS FROM RESEARCH

Alongside our user research, we needed to understand what was commonly feasible across councils. We have grouped our learnings from the research into two categories:

TECHNICAL FEASIBILITY OF SHOWING **PEOPLE IN THE FAMILY**

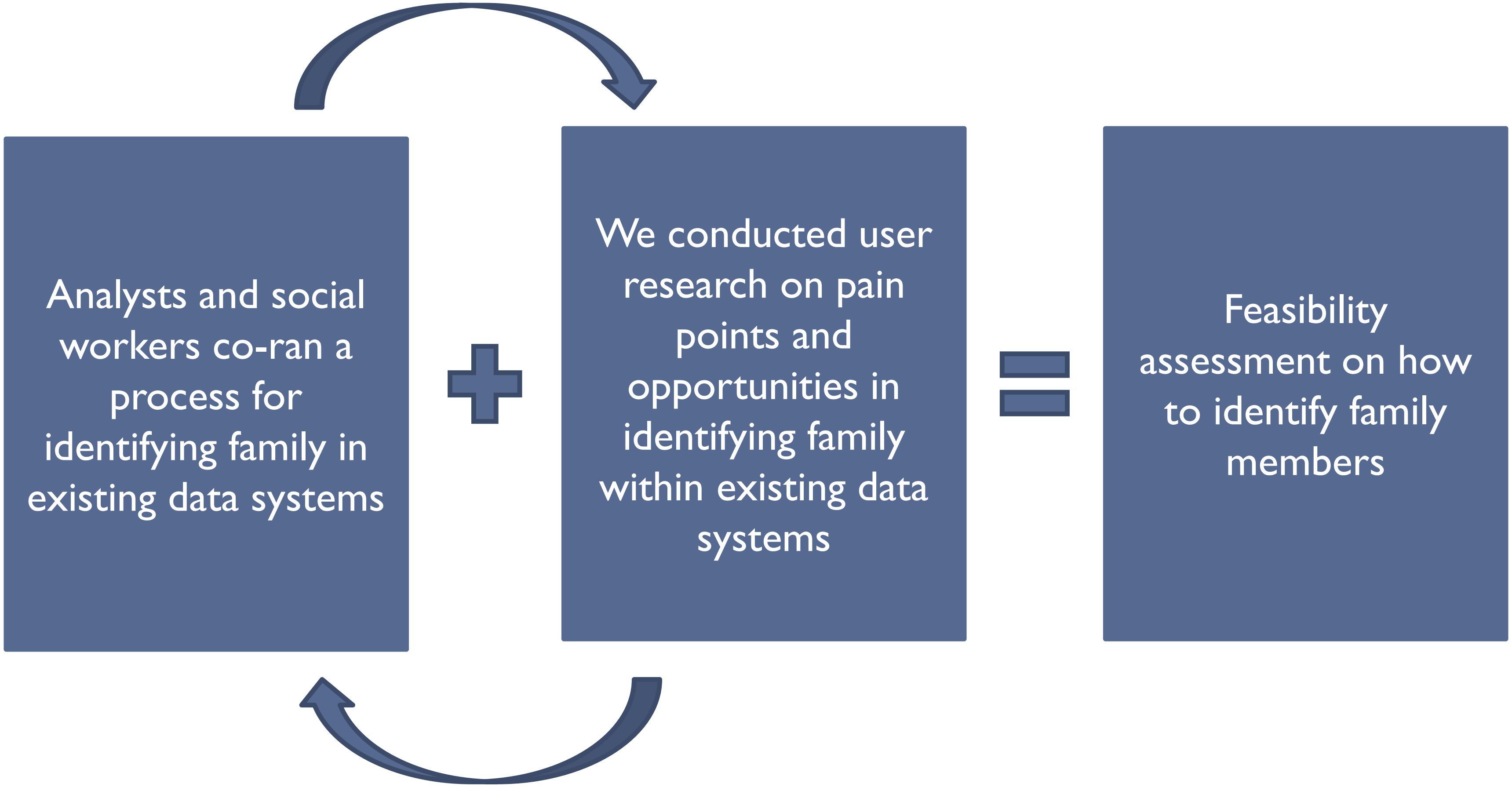
We tested how to best identify families using the available datasets and systems. In both authorities, we learned that the case management system (often in free text) and social workers were the best source of information on who is in the family.

TECHNICAL FEASIBILITY OF SHOWING THE **ENGAGEMENT OF THOSE PEOPLE WITH OTHER SERVICES**

We tested the ease with which data on different services can be accessed and brought together to form a single view of the services engaged with the family.

Note: We have not factored information governance into this assessment of feasibility, which focuses purely on technical feasibility. What is and isn't proportional and ethical information sharing will be explored as part of alpha extension, and we don't want to pre-empt it here.

OUR APPROACH TO TESTING TECHNICAL FEASIBILITY



Analysts and social workers co-ran a process for identifying family in existing data systems

+

We conducted user research on pain points and opportunities in identifying family within existing data systems

=

Feasibility assessment on how to identify family members

ANALYSTS AND SOCIAL WORKERS CO-RAN A PROCESS FOR IDENTIFYING FAMILY USING EXISTING DATA SYSTEMS

PROCESS FOR LIVE PROTOTYPE

SYSTEM	PROCESS	QUOTE
Case management system (EIS, Mosaic)	Teams searched the case management system including relationship fields and free text fields to find family members	“If a family had a lot of involvement with the service, I would be confident in the family unit”
Schools system (Synergy)	To fill gaps and corroborate the people in the family, teams either reviewed the school data system…	“We were able to easily match and we have a high confidence in the matching itself”
Troubled Families (Families First) database	… or searched their Troubled Families databases based on address	“We do some work to identify other people at the address, but this can be built on further or integrated further”
External services (police, housing)	Teams then searched other data systems for service involvement based on address, but also came across additional linked people	“We populated as much as we could, then discovered additional family members”

BUILDING A PICTURE OF THE FAMILY FROM SYSTEMS INVOLVES MULTIPLE DATA SOURCES AND STEPS

WE CONDUCTED USER RESEARCH ON THE PROCESS FOR IDENTIFYING FAMILY MEMBERS IN EXISTING DATA SYSTEMS

TECHNICAL TEAMS

What worked well?

- “We weren’t actually missing any of the information in the cases I checked.”
- “Information was generally accurate.”
- “We found most of the key family members that the social workers needed to know about.”

What needs improvement

- “[In] one case we didn’t have a date of birth for the parent.” (this is important information to find out about service involvement)
- “[I] would like to have more time to validate the data better.”
- “With conflicting information, we need to have some feedback loop that checks which [system] is more up-to-date or reliable.” (e.g. if there are multiple addresses from different sources)
- “The case management system did not always have family details in easy-to-find places. We needed to do a lot of digging in the free text case notes.”

WE FOUND THAT IDENTIFYING FAMILIES USING AN ALGORITHM IS DIFFICULT

1. **Relevant family members do not always live at the same address** (e.g. separated parents or teen parents or parent lives in a different local authority)

2. **Relevant family members are not always a child's biological parents or siblings** (e.g. new partners or grandparents)

3. **Relevant family members change at different points in the child's life** – especially around transitions into adulthood

4. **Relevant family members change depending on the data source** (meaning no one local data set has the full picture)

5. **Relevant family members often move between local authorities** (meaning local data systems do not contain any information on them)

What is already happening in this space?

Both Leeds and Stockport are exploring different algorithmic approaches to identifying families:

- Stockport has written an exact matching algorithm in Python to identify family members based on address
- Leeds has implemented a fuzzy matching algorithm in their master data management system based on household address

Each local authority recognises the need for multiple sources of information on the family to triangulate who is most important

---

BOTH LOCAL AUTHORITIES ARE MAKING PROGRESS ON ALGORITHMIC APPROACHES TO IDENTIFYING FAMILIES. SOCIAL WORKERS ARE BEST ABLE TO DISCOVER WHO IS IN THE FAMILY BASED ON CONVERSATIONS DURING THE INITIAL DAYS OF THE ASSESSMENT PROCESS.

“As a social worker you quickly learn how to figure out relevant family in your head”

- Stockport social worker

FEASIBILITY LEARNINGS FROM RESEARCH

Alongside our user research, we needed to understand what was commonly feasible across councils. We have grouped our learnings from the research into two categories:

TECHNICAL FEASIBILITY OF SHOWING **PEOPLE IN THE FAMILY**

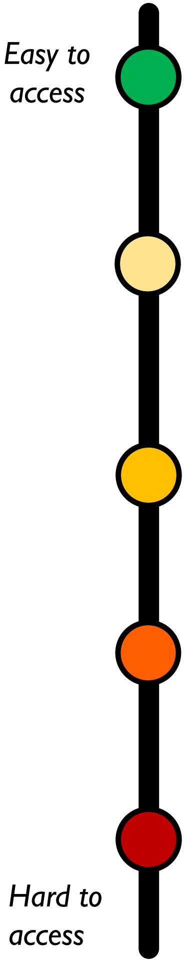
We tested how to best identify families using the available datasets and systems. In both authorities, we learned that the case management system (often in free text) and social workers were the best source of information on who is in the family.

TECHNICAL FEASIBILITY OF SHOWING THE **ENGAGEMENT OF THOSE PEOPLE WITH OTHER SERVICES**

We tested the ease with which data on different services can be accessed and brought together to form a single view of the services engaged with the family.

Note: We have not factored information governance into this assessment of feasibility, which focuses purely on technical feasibility. What is and isn't proportional and ethical information sharing will be explored as part of alpha extension, and we don't want to pre-empt it here.

EASE OF TECHNICAL ACCESS VARIES BY SERVICE



Data on School, Adult Social Care and Youth Offending Service is easily accessible because it is managed by the Children's and Adult's Services Departments

Housing data is generally accessible by the local authority, but relationships and understanding of data would need to be built for smooth access and usage by Children's and Adult's Services

Police data is accessible through the legal gateway established by the Troubled Families (Families First) service. However, it can still take weeks to access key information

Health visitor data is available to the Multi-Agency Safeguarding Hub (MASH) on a case-by-case basis via an on-site health visitor, but data is not directly accessible currently

Adult Mental Health and Drug and Alcohol data is hard because its collected and owned by organisations outside the authority's control

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THE TECHNICAL DIFFICULTY OF ACCESSING INFORMATION VARIES BY DATASET. HOWEVER, FOR THE MAIN DATASETS, THE TECHNICAL EASE OF ACCESS IS SIMILAR ACROSS LEEDS AND STOCKPORT. (SEE GITHUB FOR MORE DETAIL)

PRODUCT ROADMAP

OUR VISION

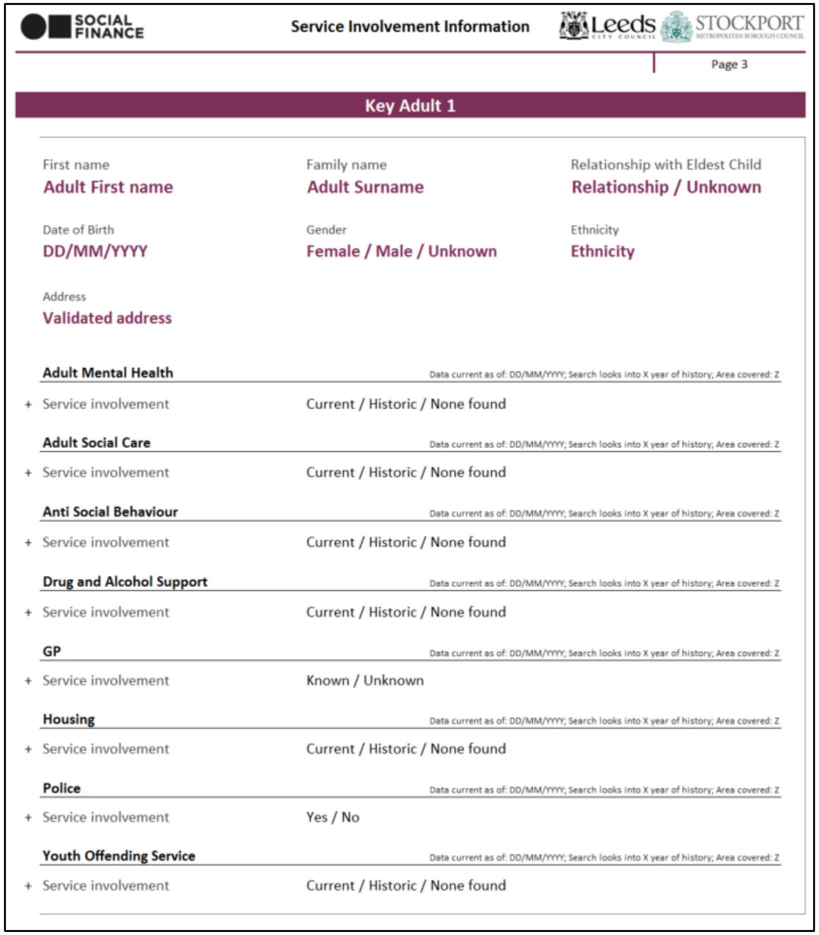
Area social workers across England and Wales use a tool showing the family context for every child and family assessment so that they can…

(1) work closely with other relevant services;

(2) spend more time with families; and

(3) be confident in their assessment of the family's risks and needs.

IN THE FUTURE, SOCIAL WORKERS COULD SEE INFORMATION ON FAMILY CONTEXT PRESENTED IN THIS WAY



SOCIAL FINANCE

Service Involvement Information

Leeds CITY COUNCIL STOCKPORT METROPOLITAN BOROUGH COUNCIL

Page 3

Key Adult 1

First name	Family name	Relationship with Eldest Child
Adult First name	**Adult Surname**	**Relationship / Unknown**
Date of Birth	Gender	Ethnicity
DD/MM/YYYY	**Female / Male / Unknown**	**Ethnicity**
Address		
Validated address		

Adult Mental Health Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

+ Service involvement Current / Historic / None found

Adult Social Care Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

+ Service involvement Current / Historic / None found

Anti Social Behaviour Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

+ Service involvement Current / Historic / None found

Drug and Alcohol Support Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

+ Service involvement Current / Historic / None found

GP Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

+ Service involvement Known / Unknown

Housing Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

+ Service involvement Current / Historic / None found

Police Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

+ Service involvement Yes / No

Youth Offending Service Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

+ Service involvement Current / Historic / None found

To achieve the vision, social workers need to see **all relevant people in the family** and **their engagement with all relevant services** nationally….

But first, we looked at options for a **minimum viable product** (e.g. the options for what elements provide the most value to the user for minimum effort).

THE MVP WILL HAVE BOTH COMMON AND LOCAL AUTHORITY SPECIFIC FEATURES

The Minimum Viable Product (MVP) consist of a ***common feature set*** that can scale to all Children's Services Departments, as well as a **local feature set based on each authority's** specific circumstances (incl. technology choices, data systems, practice models, etc.)

Common Feature Set

(E.g. Re-usable and scalable to all local authorities)

- Definition of what family members to include
- Visualisation design principles* for how to provide social workers with information on family context
- Defined data schema and model on what information needs to be included
- Approved information governance agreements (e.g. data processing agreements, data Privacy Impact Assessments) and ethical opinions on what can be used

Local Feature Set

(E.g. local implementation of Family Context MVP)

- Data collection systems
- Product delivery mechanism (e.g. web-app / paper form, etc)
- Social work training and protocols on how Family Context MVP fits within practice model

*Key visualisation design principles are known, eg simplicity and volume of information, further work to understand and leverage existing patterns prior to finalising the MVP visualisation

HOW WE DEFINED THE COMMON REQUIREMENTS FOR THE MVP

Together, we identified a set of selection criteria for prioritising what information to include in the MVP.

Primary

- Value - Provide real value to user (and more value than other options)
- Effort - Require minimum amount of effort (compared to other options)

Also needs to

- Learning - Let us learn about problem and solution
- Engagement - Provide value to stakeholders

THE MVP SHOULD ONLY INCLUDE ELEMENTS THAT PROVIDE VALUE TO THE USER FOR MINIMUM EFFORT

PRODUCT ELEMENTS	KEY INSIGHT	EVALUATION
PEOPLE IN THE FAMILY	• Information on who is in the family is not very useful in and of itself. It needs to include service involvement information. • Social workers were better at identifying who was in the family in comparison to the prototype.	**Value –** personal details for relevant family members is a critical input to finding service involvement. **Effort-** trying to identify and include every relevant family member in the tool requires a prohibitive level of effort. However, including people from one data source is easier and still adds real value.
SERVICE INVOLVEMENT	• Information on the involvement of a service with an individual or with the household often provides multiple benefits to social workers assessing the case.	**Value** – to be valuable, the MVP must provide a full enough picture of service involvement – it needs to include multiple services and must contain high value services. **Effort** – some services require more effort so we should select a subset that create the value for minimum effort;
SCOPE OF DATA	• Having up-to-date information is important to social workers – "it has to be accurate otherwise it's useless". • Data refresh cycles differ across local authorities and datasets. • Local authorities can predominantly access local / regional data.	**Value** – data should only be included if it's updated regularly and perceived to be accurate. **Effort** – should only include local and regional datasets because access to national data would require data sharing agreements with national bodies (e.g. DfE, MoJ, et.c) and / or between each participating local authority and their relevant agency.

THE CONCEPT MVP LOOKS LIKE…

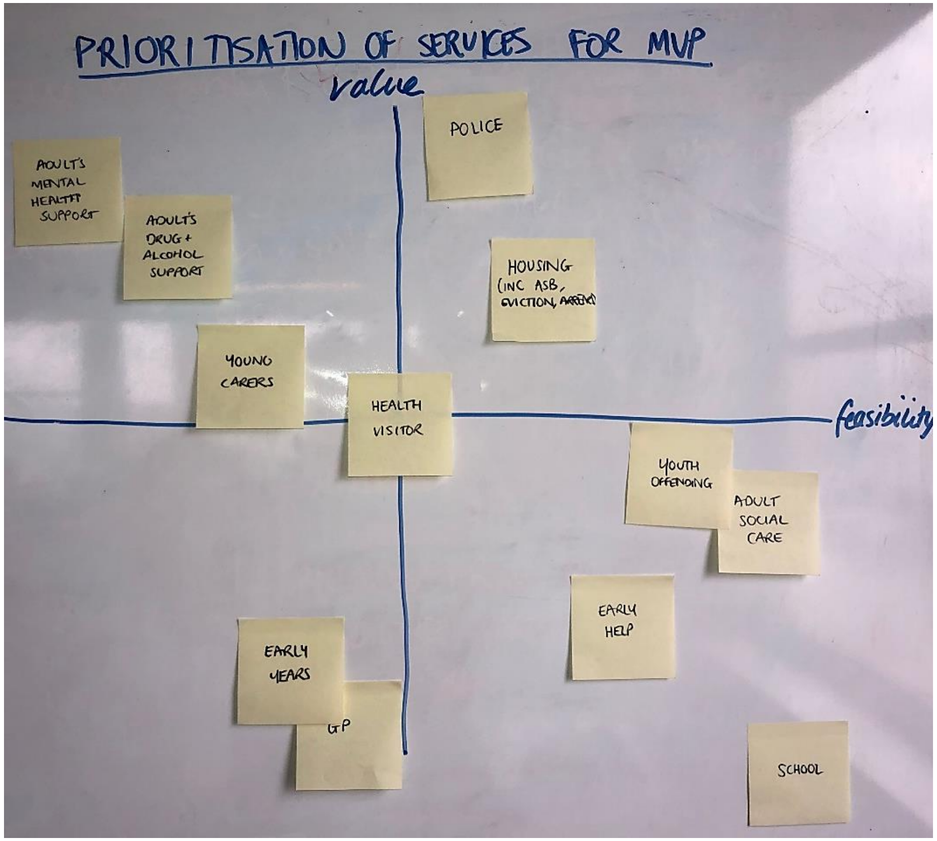
For the MVP, it is a picture of service involvement for key individuals in the family that provides real value to users for minimum effort.

PEOPLE IN THE FAMILY	SERVICE INVOLVEMENT	SCOPE OF DATA	
Cover only key people identified via **case mangement system and School Data system (Synergy)**	**Include 3-4 services** to provide an initial picture	**Local** and **up-to-date data** as a starting point	**MVP**
Identify additional potentially relevant people through **matching capability**	Additional services **internal** to Children's and Adults' Services	**+ partner local authority data** for internal services	
Build out family matching – additional datasets and develop algorithm and process	Additional services **external** to Children's and Adults' Services	+ engage owners of external data at the **national** level	
Feedback loops from social workers	Additional services **not yet considered**	+ real time refresh	

THE MVP WILL ALSO ENABLE US TO CONTINUE TO LEARN ABOUT THE PROBLEM, ADAPT AND ITERATE THE SOLUTION TO BEST MEET USER NEED AS WELL AS PROVIDE VALUE TO KEY STAKEHOLDERS (INCL. POLICE, YOUTH OFFENDING SERVICE, INFORMATION COMMISSIONERS OFFICE)

WE IDENTIFIED 3-4 SERVICES TO INCLUDE

Step 1: Rank services according to value and technical feasibility


PRIORITISATION OF SERVICES FOR MVP
value
feasibility
POLICE
ADULT'S MENTAL HEALTH SUPPORT
ADULT'S DRUG + ALCOHOL SUPPORT
HOUSING (INC ASB, EVICTION, ARREARS)
YOUNG CARERS
HEALTH VISITOR
YOUTH OFFENDING
ADULT SOCIAL CARE
EARLY HELP
EARLY YEARS
GP
SCHOOL

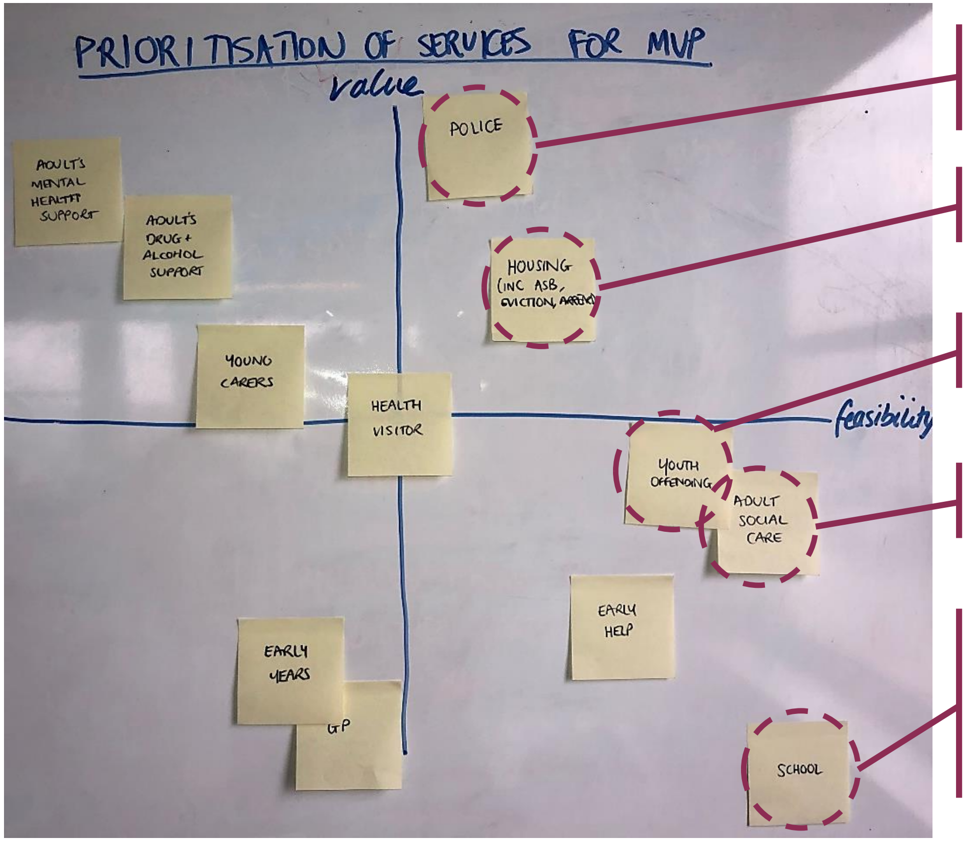
During a working session with the project team, we reviewed user research and ranked the services according to value and feasibility:

- On the x-axis - we reviewed additionality of information versus status quo in terms of what area social workers need to understand the risks and needs in the family.
- On the y-axis – we reviewed technical feasibility of including the data within an MVP being implemented later this year.

NEXT, WE DEFINED THE SUBSET OF THESE SERVICES WHICH TOGETHER CREATE MAXIMUM VALUE FOR MINIMUM EFFORT

WE IDENTIFIED 3-4 SERVICES TO INCLUDE

Step 2: Define the subset of services that together create maximum value for minimum effort


PRIORITISATION OF SERVICES FOR MVP
value
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POLICE
ADULT'S MENTAL HEALTH SUPPORT
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HOUSING (INC ASB, EVICTION, ARREARS)
YOUNG CARERS
HEALTH VISITOR
YOUTH OFFENDING
ADULT SOCIAL CARE
EARLY HELP
EARLY YEARS
GP
SCHOOL

Police data – included because it can help area social workers quickly assess risk. Access to basic police information can currently take weeks.

Housing data – identifies important risks around the family and helps support with other needs.

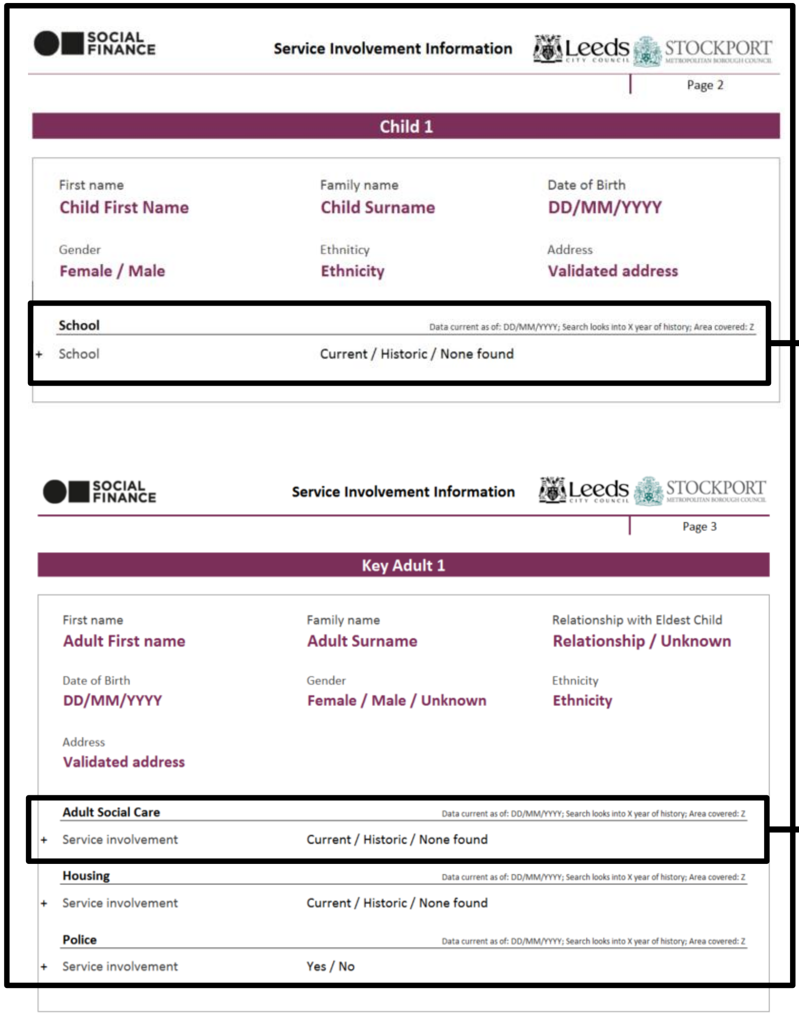
Youth Offending Service data – left out because of overlap with police.

Adult Social Care data – included because it enables better coordination and joint working with the family.

School data – included because area social workers consider it the 'first port of call.' While this information is often disclosed by the family, it needs to be included so that area social workers have all the relevant information in one place.

… SO THE CONCRETE MVP LOOKS LIKE:

MVP – FAMILY OVERVIEW VIEW



Service Involvement Information

Page 2

Child 1

First name **Child First Name**	Family name **Child Surname**	Date of Birth **DD/MM/YYYY**
Gender **Female / Male**	Ethnicity **Ethnicity**	Address **Validated address**

School — Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

+ School	Current / Historic / None found

Service Involvement Information

Page 3

Key Adult 1

First name **Adult First name**	Family name **Adult Surname**	Relationship with Eldest Child **Relationship / Unknown**
Date of Birth **DD/MM/YYYY**	Gender **Female / Male / Unknown**	Ethnicity **Ethnicity**
Address **Validated address**		

Adult Social Care — Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

+ Service involvement	Current / Historic / None found

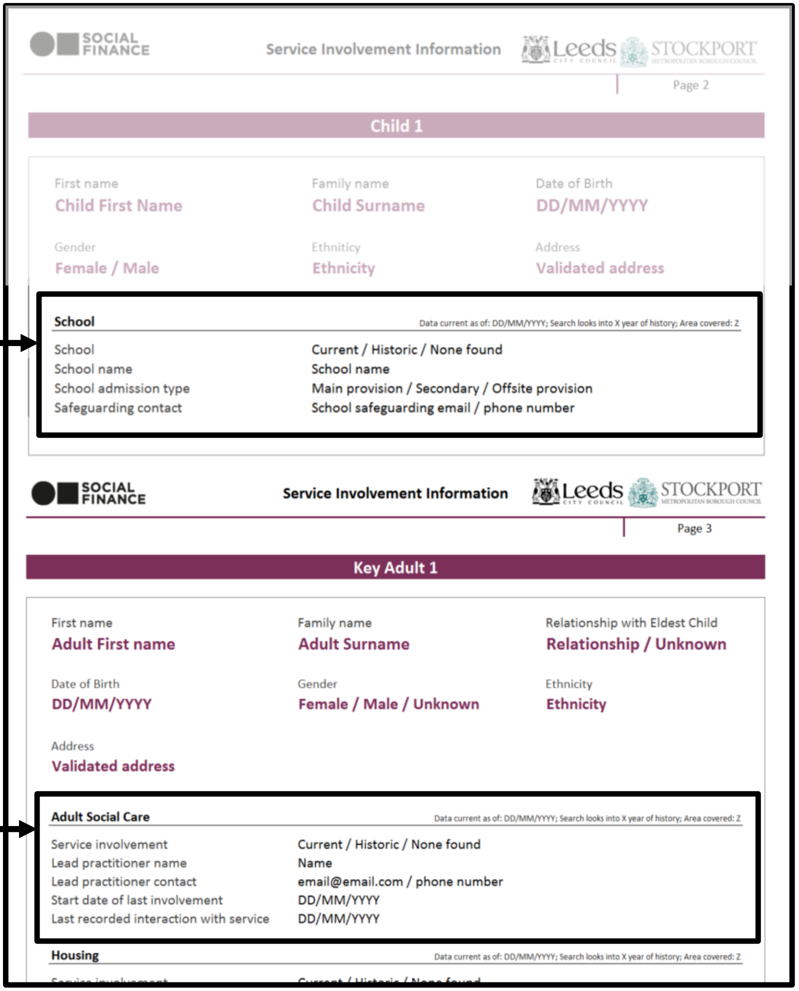
Housing — Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

+ Service involvement	Current / Historic / None found

Police — Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

+ Service involvement	Yes / No

MVP – DETAILED SERVICE VIEW



Service Involvement Information

Page 2

Child 1

First name **Child First Name**	Family name **Child Surname**	Date of Birth **DD/MM/YYYY**
Gender **Female / Male**	Ethnicity **Ethnicity**	Address **Validated address**

School — Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

School	Current / Historic / None found
School name	School name
School admission type	Main provision / Secondary / Offsite provision
Safeguarding contact	School safeguarding email / phone number

Service Involvement Information

Page 3

Key Adult 1

First name **Adult First name**	Family name **Adult Surname**	Relationship with Eldest Child **Relationship / Unknown**
Date of Birth **DD/MM/YYYY**	Gender **Female / Male / Unknown**	Ethnicity **Ethnicity**
Address **Validated address**		

Adult Social Care — Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

Service involvement	Current / Historic / None found
Lead practitioner name	Name
Lead practitioner contact	email@email.com / phone number
Start date of last involvement	DD/MM/YYYY
Last recorded interaction with service	DD/MM/YYYY

Housing — Data current as of: DD/MM/YYYY; Search looks into X year of history; Area covered: Z

HOW DO WE GET THERE?

PRODUCT ROADMAP

Alpha

Family Context Prototype **tested in social work assessments in Leeds and Stockport**

▲

Today

Beta

Family Context **used in business as usual in Leeds, Stockport and neighbouring authorities** to conduct social work assessments. This will require:

- Bringing together data on a limited number of key services for understanding the family
- Technical teams identifying relevant family members through case management system / Synergy
- Service data limited to local services (e.g. local rather than national police data)

Live

Family Context **used across** England to conduct social work assessments. This will require:

- Bringing together data on all key services for understanding the family
- The Family Context tool identifying relevant family members
- Service data expanded to include neighbouring local authorities and national datasets including police

WHAT ARE THE IMMEDIATE NEXT STEPS

ALPHA EXTENSION – KEY ACTIVITIES

ADDITIONAL VALIDATION	KEY ACTIVITIES
1. Ensure that sharing the data fields is appropriate for the purposes of family and child assessments	Investigate appropriateness of sharing data fields with area social workers – including: (1) User research with families and/or representative organisations/bodies; and (2) Work with information governance teams to identify relevant information governance gateways
2. Understand the value of Stockport''s Signposts, and how this can or cannot be leveraged to provide family context	Conduct user research on Signposts with Stockport social workers
3. Test user need in additional authorities to prove scalability	Conduct mini-discovery in other local authorities to test prototype with simulated referrals
4. Test that external agencies (e.g. police and housing) are supportive in principle for their data being shared for the purposes of child and family assessments	Engage with external agencies (e.g. police and housing) to ensure commitment to the Family Context tool and providing access to the required data – including data processing agreements and data privacy impact assessments
5. Ensure Children's Services Departments at partner authorities commit to embedding the tool within their practice model and support its roll out	Secure commitment from Children's Social Care departments to integrate the Family Context tool into business as usual
6. Test accessibility of MVP to cater to users with accessibility challenges	Review MVP against accessibility best-practise and conduct user testing with people with conditions including low vision, D/deaf and hard of hearing, dyslexia, motor disabilities, users on the autistic spectrum and users of screen readers

BENEFITS CASE

THE PROBLEM

When social workers first interact with a family, they do not have easy access to **key information** on relevant people in the family and the services that have engaged with them. This results in them either taking decisions without this key information or spending a **significant amount of time searching for it**.

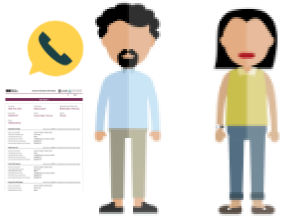
Consequences are:

Social workers sometimes have ***incomplete information*** *which can change decisions and outcomes for children and families.*

Social workers ***waste time*** *chasing information. They would prefer to spend this time working out a plan with the family.*

WHAT IS THE POTENTIAL IMPACT OF THE SOLUTION ON THE PROBLEM?

SOLUTION → **DIRECT IMPACT ON AREA SOCIAL WORKER** → **IMPACT ON CHILDREN AND FAMILIES** → **LONG TERM IMPACT**



Area social workers have access to **key information on what services** are engaged with the **family**

save time chasing information and spend more time supporting the family

do more joint work with other services

build a **more complete picture of the family's needs and risks** and therefore **make more informed** decisions

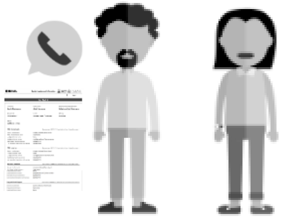
children and families **receive better support earlier**

children and families **do not escalate unnecessarily to higher intensity and costly services**

children and families have **better long term outcomes**

QUANTIFYING THE BENEFITS

SOLUTION → **DIRECT IMPACT ON AREA SOCIAL WORKER** → **IMPACT ON CHILDREN AND FAMILIES** → **LONG TERM IMPACT**



Area social workers have access to **key information on what services** are engaged with the family

1 **save time chasing information** and spend more time supporting the family

do more joint work with other services

build a **more complete picture of the family's needs and risks** and therefore **make more informed** decisions

children and families **receive better support earlier**

2 children and families **do not escalate unnecessarily to higher intensity and costly services**

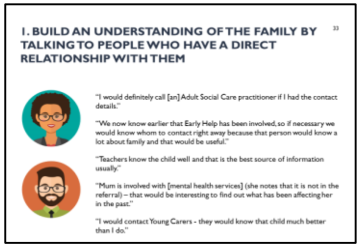
3 children and families have **better long term outcomes**

IN A WORKSHOP WITH THE PROJECT TEAM, WE PRIORITISED THREE POTENTIAL BENEFITS FROM FAMILY CONTEXT: (1) SOCIAL WORKERS SAVE TIME CHASING INFORMATION; (2) VULNERABLE CHILDREN AND FAMILIES DO NOT ESCALATE UNNECESSARILY INTO MORE INTENSIVE SERVICES; AND (3) CHILDREN AND FAMILIES HAVE BETTER LONG TERM OUTCOMES.

KEY INGREDIENTS OF THE BUSINESS CASE

To build the business case, we combined user research insight from Leeds and Stockport with national data, sector research and guidance from Her Majesty's Treasury to develop a benefits case for the average local authority

Learnings from User Research



1. BUILD AN UNDERSTANDING OF THE FAMILY BY TALKING TO PEOPLE WHO HAVE A DIRECT RELATIONSHIP WITH THEM

33

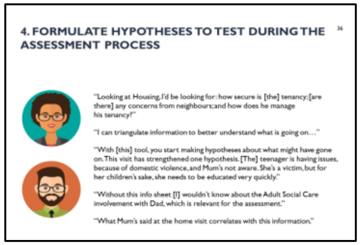
"I would definitely call [an] Adult Social Care practitioner if I had the contact details."

"We now know earlier that Early Help has been involved, so if necessary we would know whom to contact right away because that person would know a lot about family and that would be useful."

"Teachers know the child well and that is the best source of information usually."

"Mum is involved with [mental health services] (she notes that it is not in the referral) – that would be interesting to find out what has been affecting her in the past."

"I would contact Young Carers - they would know that child much better than I do."



4. FORMULATE HYPOTHESES TO TEST DURING THE ASSESSMENT PROCESS

36

"Looking at Housing, I'd be looking for: how secure is [the] tenancy; [are there] any concerns from neighbours; and how does he manage his tenancy?"

"I can triangulate information to better understand what is going on…"

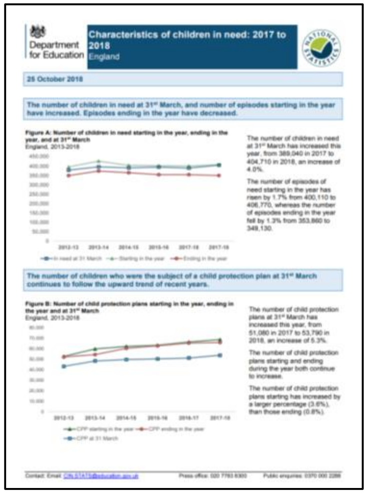
"With [this] tool, you start making hypotheses about what might have gone on. This visit has strengthened one hypothesis. [The] teenager is having issues, because of domestic violence, and Mum's not aware. She's a victim, but for her children's sake, she needs to be educated very quickly."

"Without this info sheet [I] wouldn't know about the Adult Social Care involvement with Dad, which is relevant for the assessment."

"What Mum's said at the home visit correlates with this information."

We used the 'live prototyping' to estimate the potential impact of family context

National Data



Department for Education

Characteristics of children in need: 2017 to 2018
England

25 October 2018

The number of children in need at 31st March, and number of episodes starting in the year have increased. Episodes ending in the year have decreased.

Figure A: Number of children in need starting in the year, ending in the year, and at 31st March
England, 2013-2018

The number of children in need at 31st March has increased this year, from 389,040 in 2017 to 404,710 in 2018, an increase of 4.0%.

The number of episodes of need starting in the year has risen by 1.7% from 400,110 to 406,770, whereas the number of episodes ending in the year fell by 1.3% from 353,860 to 349,130.

The number of children who were the subject of a child protection plan at 31st March continues to follow the upward trend of recent years.

Figure B: Number of child protection plans starting in the year, ending in the year and at 31st March
England, 2013-2018

The number of child protection plans at 31st March has increased this year, from 51,080 in 2017 to 53,790 in 2018, an increase of 5.3%.

The number of child protection plans starting and ending during the year both continue to increase.

The number of child protection plans starting has increased by a larger percentage (3.6%), than those ending (0.8%).

Contact: Email: CIN.STATS@education.gov.uk Press office: 020 7783 8300 Public enquiries: 0370 000 2288

We used national data to create a benefits case for the average local authority

Sector Research

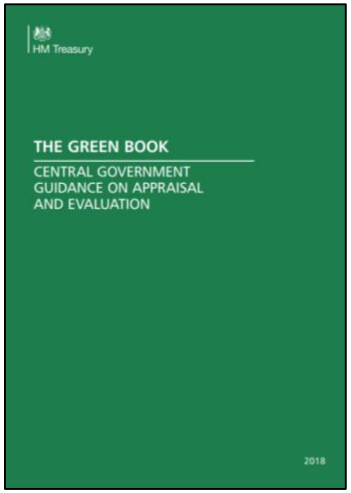
REVOLVING DOOR

PART 2:
Are we failing children at risk of abuse and neglect?

HOW ACTION FOR CHILDREN WORKS

We used sector research to test and challenge our assumptions on the benefits of family context

HMT Guidelines on Benefits Cases



HM Treasury

THE GREEN BOOK

CENTRAL GOVERNMENT GUIDANCE ON APPRAISAL AND EVALUATION

2018

We applied a 60% confidence factor to all our benefit assumptions to take into consideration optimism bias. We derived it by applying Greenbook / GDS guidance to findings from user research.

I TIME SPENT CHASING INFORMATION (1/2)

Problem: Social workers spend a lot of time searching for key information on families and the services engaged with them. During our user research, we observed that area social workers spend on average 2.5 hours per assessment chasing information on the family and other services.

Solution impact: We believe that by presenting information on the services involved with the family, social workers can spend less time chasing that information and more time with children and families.

Benefits: Social Workers said it would take c. 30 minutes to chase information for each assessment with the prototype tool, a saving of 80% versus the usual 2.5 hours. This would save area social workers in a single local authority over 5,000 hours per year.* Instead of chasing information, this time could be spent working with children and families.

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* We applied a 60% confidence factor to all our benefit assumptions to take into consideration optimism bias.

▶ DURING BETA, WE WILL CONTINUE TO EVALUATE HOW AREA SOCIAL WORKERS USE FAMILY CONTEXT AND THE POTENTIAL TIME SAVINGS ASSOCIATED WITH HAVING ALL THE INFORMATION IN ONE PLACE WHEN ASSESSING A CHILD AND FAMILY

1 TIME SPENT CHASING INFORMATION (2/2)

Calculation per local authority:

2.5

Average nr of hours spent researching per case **without the Family Context tool**

X

80%

Percentage of time saved through using **the Family Context tool**

=

2.0

Average number of hours saved researching per case **using the Family Context tool**

X

Average number of **assessments per year**

4,313

=

8,626 hrs
Without confidence factor applied

/

5,176 hrs
With confidence factor applied

Extra time that could be spent supporting children and their families. 5,176 hours are equivalent to 3 social workers or c. £113k per annum.

Assumptions & Sources: We surveyed and observed social workers during the live prototype testing to estimate how long they spend chasing information and the potential time savings from using the tool. We used the DfE's 'Character of Children In Need Report' to determine the average number of assessments per year. We applied a 60% confidence factor to all our benefit assumptions to take into consideration optimism bias. Note that the numbers have been rounded.

2 CHILDREN AND FAMILIES DO NOT ESCALATE UNNECESSARILY (1/2)

Problem: A significant number of children each year are assessed by Children's Social Care, but don't get the right level of support. For example, 23,000 children a year are assessed by Children's Services to require no action, but are re-referred within a year and do need social work support (Action for Children: 'The Revolving Door'). These "false negative" assessments mean that children don't get the right support and often end up needing more costly and intensive support later on.

Solution impact: We believe that by presenting information on services involved with the family, these children are far more likely to receive the support they need sooner. A lack of information and service coordination is one of the key reasons that "false negatives" occur.

Benefits: We conservatively estimate that family context will be able to reduce the number of "false negative" assessments by just 20%. This will mean that 30 more children per year in a local authority would get the right support at the right time. If these children are able to access a lower level of support due to earlier identification of their needs, local authorities would have an additional c. £210,000* p.a. to invest in services for children and their families.

* We applied a 60% confidence factor to all our benefit assumptions to take into consideration optimism bias.

▶ DURING BETA, WE WILL CONTINUE TO EVALUATE THE ABILITY OF FAMILY CONTEXT TO REDUCE THE NUMBER OF "FALSE NEGATIVES"

2 CHILDREN AND FAMILIES DO NOT ESCALATE UNNECESSARILY (2/2)

Calculation per local authority:

151

Average number of children per council each year that experience a false negative (e.g. are referred to Children's Social Care, have no action taken, but are re-referred within a year and need social work support)[1]

x

20%

The proportion of "false negative" assessments that we estimate could be eliminated with a fuller view of the family[2]

=

c. 30

Number of children who get the right support at the right time

x

c. £12k

Estimated cost reduction associated with supporting a child with less intensive services due to intervening earlier[3]

=

c. £348k

Without confidence factor applied

c. £210k

With confidence factor applied

Potential benefit per year from supporting children earlier

Assumptions & Sources:

1. 23,000 children a year are assessed by Children's Social Care to require no further action, but are re-referred within a year and do need social work support – Action for Children: 'The Revolving Door' – Are we failing children at risk of abuse or neglect? Note: this proxy for "false negative" assessments is a conservative estimate as it only captures one type of "false negative".
2. We assume that one in five false negative assessments could be improved with a fuller picture of the family. A lack of information and service coordination is one of the key reasons that mistakes are made. We've tested the assumption with Directors of Children's Social Care.
3. Of the cases starting in a year, 80% are for Child in Need (CiN), 14% are for Child Protection Plan (CPP) and 6% are for Looked After Child (DfE: Characteristics of children in Need and Care). The average direct cost of supporting a Looked After Child is £44,647 (DfE Aldaba), and c. £10,776 for CiN/CPP (DfE Aldaba) and £2,601 (estimated) for Early Help. We estimated the time children spend CiN, CPP, and LAC from the 'Characteristics of children in Need and Care' report.

3 CHILDREN AND FAMILIES HAVE BETTER LONG TERM OUTCOMES

We believe that Family Context will positively impact children, helping them reach their potential and avoid the negative life outcomes that many children who've been in care experience. However, these are long-term outcomes that are hard to estimate so we do not include them in the benefits case to determine value for money.

Area[1]	% of Care Leavers that experience outcome	% of non-Looked After Children that experience outcome	Cost of outcome per year	Additional cost of outcome due to Care Leavers	Organisation bearing costs
Education	*Cost estimates not included as poor education outcomes are correlated with other negative outcomes experienced by Looked After Children*				
Employment Welfare benefits[3]	**11%** *Estimated care leaver unemployment rate*	**4%** *Unemployment rate for the general population*	**£3,120** *52 weeks of Job Seeker's Allowance*	**£82m**	DWP
Employment Foregone tax[4]	**68%** *Estimated employment rate for care leavers*	**75%** *Employment rate for the general population*	**£3,150** *Annual tax on average UK salary*	**£83m**	DWP
Criminal justice[2]	**6%** *of care leavers are in custody at any point*	**0.13%** *of the population are in custody at any point*	**£35,000** *Annual cost per offender in prison*	**£754m**	MoJ
Health	*Cost estimates not included to keep potential impact conservative*				
Homeless-ness	*Cost estimates not included to keep potential impact conservative*				

We estimate that there are ~400,000 CL overall in the country. This is based on estimated average number of LAC leaving care each year over the past 60 years. Number of care leavers per year is calculated assuming care leavers per capita is constant based on 2007 levels. (There has been a 20% increase in children in care since 2007, partly following the death of Baby Peter)

1. All numbers here are rounded. Calculations are based on non-rounded figures, with any small differences in calculated figures due to this. A detailed breakdown of the calculations can be found in the supporting business case model
2. 30% of YP in custody are CLs (Report by HM Inspectorate of Prisons); there are currently 83,000 prisoners in the UK (MoJ) with an adult population of 52,4M (ONS); cost per prisoner including overhead is based on NEF unit cost database
3. NEETs data was used to estimate CL unemployment rate: CL are 3x more likely to be NEET vs their peers (Support for Care Leavers, Briefing Paper 08429, House of Commons Library), we therefore estimate a correspondingly higher unemployment rate for CL;
4. CL employment rate was estimated using the difference between general employment rate of 75% (ONS) and estimated LAC employment rate of 68%. LAC employment rate based on LAC unemployment rate of 11% and conservatively assuming that the same proportion of LAC as of the general population are out of the labour force (21%). Average UK salary in 2015 was 27,600 (ONS), giving £3,150 per person at a 20% tax rate on salary above personal allowance

WHAT ARE THE TOTAL COSTS OF FAMILY CONTEXT?

Development Costs	***One-off setup costs***	***On-going per annum***
£100k Discovery costs in Stockport and Leeds	£86k Setup Costs (LAs post-beta)	£33k p.a Local Authority on-going product development and maintenance costs
£170k Alpha costs in Stockport and Leeds	£46k Unlocking Access to Data (LAs post-beta)	£4.5k p.a. On-going cost of collaboration
£1.51m Beta costs for Stockport, Leeds, and two additional local authorities	£20k Implementing Family Context Algorithm	£2k p.a. On-going cost of maintaining Family Context
£230k Costs of developing the family matching algorithm		
£2.01m **Total Development Costs**	**£152k** **One-off Setup Costs**	**£39.5k p.a.** **Maintaining Family Context**

WE ESTIMATED THE COSTS OF FAMILY CONTEXT BASED ON OUR EXPERIENCES IN DISCOVERY AND ALPHA. WE WILL CONTINUE TO TEST AND ITERATE THE UNDERLYING ASSUMPTIONS. AS PART OF THE ALPHA EXTENSION, WE WILL FLESH OUT THE PLAN FOR BETA AND THE ASSOCIATED COSTS. (SEE SLIDES 91 TO 94 FOR MORE DETAIL)

WHAT ARE THE COSTS AND BENEFITS OF FAMILY CONTEXT?

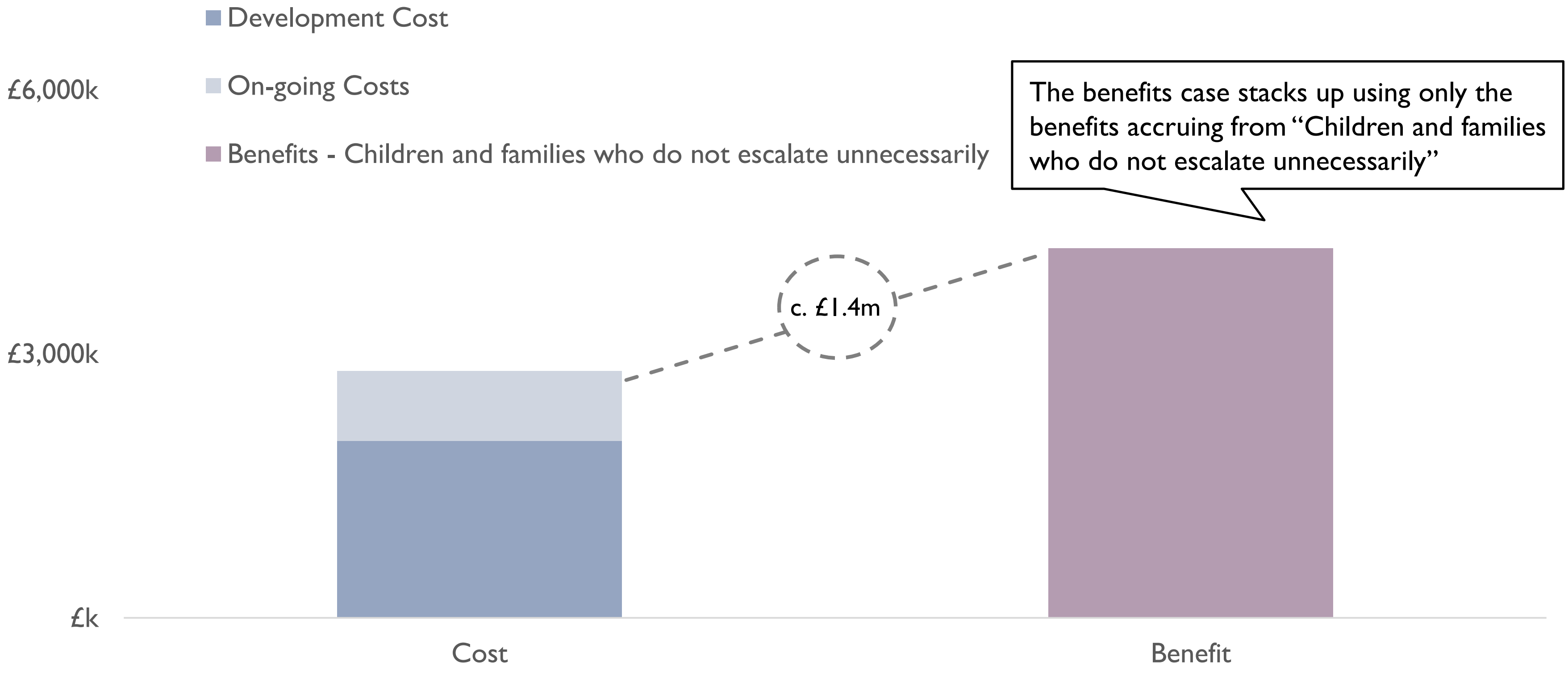
The costs and benefits are based on the long-term vision for Family Context.

Costs			Benefits	
Development Costs *(ones-off shared across discovery, alpha, and beta partners)**	***One-off setup Costs*** *(per LA post-beta)*	***On-going per annum*** *(per LA)*	***Time spent chasing information*** *(per LA)*	***Children and families who do not escalate unnecessarily*** *(per LA)*
£2.01m	**£152k**	**£39.5k p.a.**	**5,176 p.a.**	**£210k p.a**
Total Development Costs	One-off Setup costs	Maintaining family context	Extra time that could be spent supporting children and their families – equivalent to 3 social workers or c. 113k per annum	Potential benefit per year from supporting children earlier

** This includes the development costs of both family context and the additional family matching algorithm feature*

OVER FIVE YEARS, DOES THE BENEFITS CASE STACK-UP?

To understand the cost and benefits of Family Context, we analysed the difference between costs and benefits over a five-year time horizon for the four local authorities who participate in the beta.



The benefits case stacks up using only the benefits accruing from "Children and families who do not escalate unnecessarily"

Note: This assumes the full benefits of family context for the five years accruing just from "Children and families who do not escalate unnecessarily." For local authorities participating in the beta, the setup costs of family context are included in the development costs. For a more detailed view of the type and timings of potential benefits and costs, see the benefits case model.

EXPLANATION OF KEY COSTS

WHAT ARE THE *DEVELOPMENT COSTS* OF FAMILY CONTEXT?

£270k

Family Context – discovery and alpha

Assumptions: Between September 2018 and May 2019, Leeds, Stockport, MHCLG and Social Finance ran a discovery and alpha to better understand what data and insight is needed on the family to improve outcomes for children.

£1.51m

Family Context - beta

Assumptions: For the Family Context beta, we have included costs for local authority data and digital teams, information governance, project management, 10 weeks for support from a digital agency, social worker training time, senior resource to align the practice model, etc. We've also added costs to cover the collaboration overhead. We're still testing these assumptions with senior sponsors. We plan to run the beta in four local authorities. We've benchmarked the costs against similar projects (incl. Digital Outcomes Specialist 3 Framework).

£230k

Family Matching Algorithm- discovery, alpha, and beta

Assumptions: We believe that the next major feature of Family Context will be a family matching algorithm. We've included £30k for discovery and £80k for alpha in line with MHCLG's Local Digital Funding Round 1. We've allocated £120k for beta.

DURING THE ALPHA EXTENSION, WE WILL CONTINUE TO EXPAND THE PLAN FOR BETA AND TEST OUR RESOURCING AND COSTING ASSUMPTIONS

WHAT ARE THE *SET-UP COSTS* OF FAMILY CONTEXT?

£86k Setup Investment (one-off) for LAs joining post-beta	**Assumptions:** The setup costs assume that the local authority will build and integrate Family Context into their existing practice model and tech stack. We've also allocated time for staff training to ensure the tool is effectively integrated into practice.
£46k Unlocking Access to Data (LAs post-beta)	**Assumptions:** We've provided an indicative cost for accessing the datasets needed to provide information on the family and the services engaged. For each dataset and data source, we've estimated the number of days required from LA information governance leads and external experts. This includes time spent on information governance, data ethics, and data privacy.
£20k Family Matching Algorithm Development	**Assumptions:** The MVP of Family Context (see slide 72) does not include a family matching algorithm. This will need to be developed at a later date. We've assumed that each local authority will need to deploy development and data science resource to implement the family matching algorithm once developed.

DURING BETA, WE WILL CONTINUE TO TEST AND REVISE OUR ASSUMPTIONS ON THE COST OF SCALING FAMILY CONTEXT

WHAT ARE THE *ON-GOING* COSTS OF FAMILY CONTEXT?

£33k Per annum cost of running Family Context per LA	**Assumptions:** The on-going running costs include training for new staff, hosting, additional developer time to incorporate changes to Family Context based on learnings as well as information governance and project sponsor time to ensure continued access to key datasets and engagement from relevant services.
£4.5k On-going cost of collaboration	**Assumptions:** Each local authority benefits from collaboration on Family Context including common data schema, data processing agreements, design principles, UI/UX, etc. We assumed local authorities would contribute a small amount of the savings to support continued collaboration and coordination of Family Context.
£2k Maintaining Family Context Algorithm	**Assumptions:** The family matching algorithm will need updates as and when new datasets are added and bugs found.

DURING BETA, WE WILL CONTINUE TO TEST AND REVISE OUR ASSUMPTIONS AROUND THE COST OF SCALING FAMILY CONTEXT

If you want to learn more, please get in touch at craig.hughes@stockport.gov.uk