

Targeted youth support

Integrated support for vulnerable young people – emerging practice



Developing Southend's integrated service delivery model

Area: Southend-on-Sea Borough Council, East England, population approximately 160,000

“The early multi-agency clusters set strong foundations in place and led to the delivery model and tiered levels of support development. This helped us to take big leaps, such as closing other referral routes and assessments when the children and family panels and the Common Assessment Framework (CAF) came on line” – **Michael Bracey, Group Manager, Integrated Youth Support, Southend-on-Sea Borough Council – June 2008**

Challenges

- Moving people from thinking referral to assessment
- Completing the CAF to a high and consistent quality
- Getting people to see the value of the multi-agency panel – it is not just added bureaucracy

Key Actions

- Sept 2004: In response to Every Child Matters (ECM), multi-agency clusters (MAC) set up in two out of three localities for children with complex needs and extended to three. Includes council, primary care trust (PCT), police, schools, community and mental health services, housing, social care and youth offending service (YOS)
- MACs successful – multi-agency work increasingly valued
- Mid 2006: started to pull together new model; Senior PCT manager seconded to council to support development
- Multi-agency CAF training – 700+ trained so far
- Feb 2007: children and family panels built on/took over from MACs. Action oriented/meet fortnightly in each locality to draw up/monitor support package, chaired by locality co-ordinator
- From day one, panels became the single point of referral; the CAF the primary assessment tool
- Three locality teams, each with three sub-teams – youth support, inclusion, early years and health were all set up
- June 2007: integrated locality working operational guidance published, details Southend's four stage intervention model – universal, vulnerable, complex and acute
- End 2007: Locality Partnership Boards set up – involving wider stakeholders including the voluntary sector
- 2008: Locality Youth Forum set up to further improve the engagement of young people in service development

Key Implementation Tips

- **Be bold, seize the agenda and don't hold back when instigating reforms**
- **Invest in a high quality external trainer for CAF – even if expensive, it is worth the investment**
- **Train the managers first so that they can take the responsibility for getting others on board**
- **Make sure everyone knows change is permanent**
- **Emphasis the fact that this change is bigger than just your local authority**
- **Getting senior level buy in and enthusiasm from the start really helps**
- **Take time and don't be afraid to challenge people carrying out CAFs in order to quality control and improve outcomes**
- **Find out where all your resources are and see how practically you can use them to best advantage**
- **Be flexible and don't assume that all professions/agencies start from a level playing field**

Impact

The high level of integration among Southend's integrated locality teams is bringing about real improvements for young people. Teams are finding solutions together and are demonstrably improving outcomes for young people. For example, thanks to early intervention and proper assessment processes, referrals to stage 4 (acute) fell from 643 per 10,000 of the 0-17 population in 2006/07 to 503 in 2007/08. The numbers of young people, aged 16-18 who are not in education, employment or training fell from 7 per cent in 2006/07 to 5.9 per cent in 2007/08 and re-offending rates fell from 39 per cent in 2006/07 to 37 per cent in 2007/08.

788 CAFs have already been carried out by a variety of agencies including primary and secondary schools, police, pupils referral units, Connexions, social care, school nurses, the YOS, health visitors etc. CAFs are even done on the unborn when, for example, working with teenage mums. Young people are better supported into the system and they now receive help and support in the transition between different levels of care.

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