DEVELOPING A NEW APPROACH TO EARLY HELP
‘CONVERSATIONS’ RATHER THAN ‘THRESHOLDS’

In its Annual Report (published in September 2013) the LSCB identified the further development of the Early Help approach as a priority for 2013/14. Regular updates of performance data and analysis of ‘the child’s journey through the safeguarding system’ have confirmed this direction of travel.

In the Autumn the Board and its sub groups began to consider the structure required to support practitioners and first line managers across the partnership in developing a more comprehensive and effective Early Help approach. A framework for responding to the needs of children and young people is being developed which emphasises:

- The need for multi-agency ‘conversations’ where there are concerns about a child or young person
- The inter-relatedness of universal, targeted, specialist and statutory services.

At the Board meeting in January 2014 work was undertaken to establish how best to facilitate multi-agency conversations and co-ordination of services for children and young people whose needs can not be met by a single agency response. The Board considered and supported the principles outlined in a paper which set out an approach that did not rely on the concept of ‘thresholds’ to determine engagement with, and the provision of services to, children, young people and their families. An abbreviated version of this report is attached below.

The LSCB Policy & Procedures sub group is working to develop and progress these proposals in order to produce a framework which can be adopted across the partnership. A further draft will be considered by the LSCB on the 14th March.

It is important that all practitioners and first line managers who work with children and young people are aware of these developments and how they relate to national guidance. Please read the paper, make any comments through the LSCB website and draw your colleagues’ attention to it.

Bryan Gocke, LSCB Manager 06.02.14.
Beyond Thresholds

Improving our response to vulnerable children in Leeds

Discussion Paper from Steve Walker, Deputy Director of Children's Services

Introduction

Leeds has an ambition to be a truly child friendly city, in which children are listened to and supported to achieve the best possible outcomes. Through the Children’s Trust Board and the Leeds Safeguarding Children Board, agencies in Leeds have worked together to take forward this ambitious agenda.

The approach is predicated on ensuring that children who need it are provided with the support they need at the right time and in the right way. At a time of budgetary constraints considerable efforts have been made by the local authority and its partners, including the third sector, to ensure that Leeds retains a wide range of services to support children and families. These include universal, preventative, early intervention and specialist services.

However, the needs and circumstances of children are varied and complex and ‘Deciding what level of support/safeguarding response is required remains a vexing problem in child welfare, and decisions are often taken in challenging circumstances and with limited information’ (Munro, Second report p31)

Supporting practitioners across agencies in making these decisions has been a key feature of the Leeds approach. In addition to the Integrated Processes Team, in 2012/13 Target Services Leaders were appointed for each of the 25 clusters in the city. A key aspect of the role of Target Services Leader is to facilitate and support conversations at a cluster level to ensure that children and families are directed to the appropriate local services. Multi-agency ‘Support and Guidance’ meetings now take place in clusters facilitating information sharing about vulnerable and potentially vulnerable children.

Research into the Children’s Services ‘front door’ arrangements was jointly commissioned by the Leeds Safeguarding Children Board, the Children’s Trust Board and Children’s Services from Professor David Thorpe. In response to his recommendations the Duty and Advice Team was established to ensure that any professional with a concern about a child had the opportunity to speak to a qualified social worker. A weekly multi-agency referral meeting was established to review a sample of all decisions made to ensure that these were appropriate. The Front Door Team was further strengthened in 2013 when social work professionals were joined by colleagues from Health and the Police.

Over the past two years Leeds has developed a clear framework in which multi-agency conversations about vulnerable and potentially vulnerable children can take place. This approach recognises the complexity of children’s needs and circumstances and so helps to ensure that the appropriate support is provided in the most effective way.

The current proposal seeks to further develop the existing framework as the basis for decision making in relation to different types of intervention.
Understanding Thresholds

Threshold: noun

1. a strip of wood or stone forming the bottom of a doorway and crossed in entering a house or room: he stood on the threshold of Sheila’s bedroom* *in singular* a point of entry or beginning: she was on the threshold of a dazzling career • the beginning of an airport runway on which an aircraft is attempting to land.

2. the magnitude or intensity that must be exceeded for a certain reaction, phenomenon, result, or condition to occur or be manifested: nothing happens until the signal passes the threshold

Although the word threshold is not mentioned in the Children Act 1989, the implementation of the Act saw their introduction in increasing numbers of local authorities in England and Wales. The development of threshold documents was a response to the very broad definition of a ‘child in need’ within the Children Act 1989. Local authorities were concerned that such a broad definition might lead to any child, whose needs could not be met by universal services, being referred to the local authority for services. The development of thresholds was, therefore, an attempt to both inform families and other professionals about the needs of children that the local authority would respond to and, at the same time, to ration those services.

Thresholds were increasingly used by local authorities and partners to develop an agreed understanding of local responses to children in need, clarify roles, expectations and responsibilities. The key benefits of threshold documents were that they supported:

- Apparently clear and transparent shared rules for all decisions
- Useful resource for advice, guidance and training
- Reduced ambiguity and conflict between agencies, rules and staff
- A more holistic conception of children and families

Thresholds have not been a national statutory requirement, therefore thresholds criteria have developed and been applied at a local level, leading to considerable variations between authorities on the needs that each local authority would respond to.

The Munro review of child protection highlighted increasing concerns about the use of thresholds and threshold criteria:

“They’re the wrong concept in this area … If you’re dealing with a child, you don’t have a threshold for removal. You look at this unique child and the dangers in his home setting, whether you can work with them and remove those dangers or whether you have to remove him.” (Munro)

For Munro threshold criteria are part of a wider, ‘rational-technical approach’, where the emphasis has been on the conscious, cognitive elements of the task of working with children and families. Munro and others (Turney et al., 2012, Platt and Turney, 2013) expressed concern that threshold guidance and documents, despite their size, are over-simplified and cannot adequately reflect the complexities of individual children’s needs and circumstances. Consequently, they can limit proper assessment of need and lead to a false sense of safety for professionals and decision making.

‘Rational-technical’ tools and models Munro agues do not take account of the human element involved in decision making in relation to children. Following the death of Peter Connelly, whilst there was no change in threshold criteria, local authorities experienced an average 11% rise in 2008/9 and a further 10.4% in 2009/10 in referrals received. The variation in referral rates around the country and the
fluctuations in referral rates in response to high profile child deaths Munro argues, ‘both suggest that complexity, uncertainty, and anxiety play a significant part in making the decision to refer’.

Munro highlights that there are consequences for those families who are drawn unnecessarily into the net for a statutory intervention, ‘for these families, the experience ranges from unpleasant to highly traumatic, sometimes leaving them with a fear of asking for help in the future….It is important to remember that the search for accuracy comes with a human cost that is borne by a child and parent (Munro 2nd Report)’.

There is an increasing body of research (Munro, Platt and Turney 2013, Cleaver et al 2004, Davies and Ward 2012) which suggests that threshold criteria can actually undermine effective joint working and shared responsibility. The broad, simplistic nature of threshold criteria means that it is possible through the way information is presented or received to ‘talk referrals up’ and, in response, for the local authority to raise thresholds for acceptance. This can lead to tensions between agencies making and receiving referrals.

In summary, the weaknesses of thresholds are as follows:

- They cannot take account of the complexities of individual children’s lives
- They give a false sense of certainty based on limited rule based assessments
- They are based on unrealistic models of decision-making
- They can produce incentives to pass on responsibility by ‘gaming’ the system, raising or lowering thresholds or tailoring referrals.

Despite the fact that the threshold concept is not included in the Children Act, it is in Working Together 2013, where the LSCB is charged with publishing a ‘threshold document’ which sets out:

- The process for the early help assessment and the type and level of early help services to be provided
- The criteria, including the level of need, for when a case should be referred to local authority children’s social care for assessment and for statutory services.

Moreover the current Ofsted inspection evaluation guidance includes judgment on whether:

- ‘thresholds between early help and statutory child protection are appropriate, understood and operate effectively’
- ‘thresholds for intervention accord with the requirements of legislation …… and are consistently applied, well embedded and regularly updated’
- ‘Drift and delay are avoided’

It is crucial, therefore, that the alternative approach being undertaken in Leeds provides an equivalent degree of clarity and is fully owned and adopted by all partners. The framework for responding to the needs of children and young people (emphasising the need for multi-agency ‘conversations’ where there are concerns about a child or young person) will stand in the place of a more traditional ‘threshold document.’

Beyond Thresholds: A framework for better decision making for vulnerable children in Leeds

In Leeds, the LSCB and Director of Children’s Services are proposing a different approach, which recognises the limitations of thresholds and builds on the positive joint working of recent years.
The approach uses the existing framework that has been developed in Leeds to support multi-agency discussions about vulnerable and potentially vulnerable children. It utilises the concept of multi-agency ‘conversations’ that is, the opportunity for a practitioner who has a concern that a child may need additional support to have a quality conversation to clarify the nature of the concerns, the needs of the child and the most appropriate way to respond to them.

It is important to stress that there is no proposal to change the way in which concerns about significant harm are handled. Joint arrangements for safeguarding those in need of protection are now much improved and working well, through the development of the Children’s Services ‘Front Door’ Duty and Advice Team. Where there are concerns that a child may be at risk of significant harm these will be discussed with the Duty and Advice Team to identify the response needed and how this will be provided.

It is anticipated that the new arrangements will strengthen and improve decision making around early help where we still need to do more to promote better decisions and joint working to provide the right help at the right time for families.

In practical terms, this will mean increased emphasis and support for our local and citywide arrangements for promoting effective shared conversations, advice and decisions about children and families such as Clusters, Targeted Services Leaders, Guidance and Support Meetings, and the Duty and Advice Team.

The aim is to support all services (practitioners and first line managers) working with children and families to be able to feel safe, secure and well-supported in making decisions. This will be achieved by making sure that there is the right help within their own agency, their cluster or with specialists across the city to make the right decisions and provide the right help at the right time.

The advantages of this approach are:

- Founded on multi-agency collaboration and conversation
- Promotes shared responsibility and flexibility
- Recognises complexity of unique needs of each individual child and family
- Reduces bias of individual professional and agency decisions through debate

This approach is consistent with Munro’s findings of arrangements that improved interagency responses;

‘Common to these successes has been the creation of channels through which practitioners from different agencies can discuss their concerns, either in a meeting room or simply over the telephone. The value of these informal but strategic conversations is that they enable professionals to exchange ideas without needing to enter formal proceedings. It is these informal relationships between different types of expert which the review holds to be crucial to improving early help. When done properly, this should help to reduce the number of unnecessary referrals to children’s social care, freeing time and resources in busy departments. But it should also give universal services and family support workers better opportunities to talk through concerns, even when they are not immediate child protection issues, and so offer a better chance of these children receiving appropriate attention more quickly (Munro 2nd Report).’

Engaging Services

Despite the fact that this proposed new approach builds on the existing Leeds strategy, it is clear that there is a need to work on communication and engagement with all local agencies and professionals to ensure that all involved understand how to work best within these new arrangements, and to feel confident, secure and well-supported in making decisions and every day work.
As such, it is proposed to establish a programme of consultation and engagement events throughout Spring 2014 with all major partners, providing briefings and training and seeking input from front line staff. The main elements of this will include:

- Multi-agency communication and engagement events in Clusters and Areas, led by local professional leads
- Communication and reporting through agency management and staffing structures
- Web communications and online surveys

It is proposed that focus groups would be held with front line practitioners to identify what would support them, this could include:

**Underpinning Practice Principles**

It might be helpful to establish accepted practice principles to underpin the approach. Examples from Munro’s final report are included below (appendix 1 and 2).

**Models to explain the framework**

The development of simple model/diagrams which outline the overall approach (example – below: ‘How we respond to the needs of Children and families in Leeds’ has been accepted by the LSCB. The Policy & Procedures sub group is working on a model that clearly outlines conversation opportunities for practitioners and first line managers.

**Resolving professional differences**

A process of managing situations where practitioners from other agencies differ in opinion about how to meet a child’s needs – The Policy & Procedures sub group is considering models from the LSCB procedures and those previously used in the CS Operational handbook.

**Format of conversation / opportunities for conversations**

The development of an agreed format/agenda for each conversation opportunity to ensure consistency about what is discussed and agreed.
Working Together to Safeguard Children (2013) government guidance states:

‘If at any time it is considered that the child may be a child in need as defined in the Children Act 1989, or that the child has suffered significant harm or is likely to do so, a referral should be made immediately to local authority children’s social care. This referral can be made by any professional.’

If you are concerned that this is the case for any child you are working with, you MUST call the Duty and Advice Team.
APPENDIX 1: Principles of a good safeguarding system.

Munro felt that it is important to explain the principles of a good child protection system and these are equally applicable to the broader ‘safeguarding system.’

1. The system should be child-centred: everyone involved should pursue child-centred working and recognise children and young people as individuals with rights, including their right to participation in decisions about them in line with their age and maturity.

2. The family is usually the best place for bringing up children and young people, but difficult judgments are sometimes needed in balancing the right of a child to be with their birth family with their right to protection from abuse and neglect.

3. Helping children and families involves working with them and therefore the quality of the relationship between the child and family and professionals directly impacts on the effectiveness of help given.

4. Early help is better for children: it minimises the period of adverse experiences and improves outcomes for children.

5. Children’s needs and circumstances are varied so the system needs to offer equal variety in its response.

6. Good professional practice is informed by knowledge of the latest theory and research.

7. Uncertainty and risk are features of safeguarding work: risk management can only reduce risks, not eliminate them.

8. The measure of the success of safeguarding systems, both local and national, is whether children are receiving effective help.

APPENDIX 2: Risk Principles

Those involved in safeguarding and protecting children and young people must be ‘risk sensible’. There is no option of being risk averse since there is no absolutely safe option. In reality, risk adverse practice usually entails displacing the risk onto someone else. Even if every child who was considered or suspected to be suffering harm was removed from their birth family, that would only incur different risks.

The Association of Chief Police Officers (ACPO) has recently grappled with this issue and drawn up a list of organisational ‘Risk Principles’ to inform officers’ thinking. These have been adapted to refer to all those who work to safeguard and protect children and young people:

**Principle 1**: The willingness to make decisions in conditions of uncertainty (i.e. risk taking) is a core professional requirement.

**Principle 2**: Maintaining or achieving the safety, security and wellbeing of individuals and communities is a primary consideration in risk decision making.
**Principle 3:** Risk taking involves judgment and balance, with decision makers required to consider the value and likelihood of the possible benefits of a particular decision against the seriousness and likelihood of the possible harms.

**Principle 4:** Harm can never be totally prevented. Risk decisions should, therefore, be judged by the quality of the decision making, not by the outcome.

**Principle 5:** Taking risk decisions, and reviewing others’ risk decision making, is difficult, so account should be taken of whether they involved dilemmas, emergencies, were part of a sequence of decisions or might appropriately be taken by other agencies. If the decision is shared, then the risk is shared too and the risk of error reduced.

**Principle 6:** The standard expected and required of those working to safeguard and protect children and young people is that their risk decisions should be consistent with those that would have been made in the same circumstances by professionals of similar specialism or experience.

**Principle 7:** Whether to record a decision is a risk decision in itself which should, to a large extent, be left to professional judgment. The decision whether or not to make a record, however, and the extent of that record, should be made after considering the likelihood of harm occurring and its seriousness.

**Principle 8:** To reduce risk aversion and improve decision making requires a culture that learns from successes as well as failures. Good risk taking should be identified, celebrated and shared in a regular review of significant events.

**Principle 9:** Since good risk taking depends upon quality information, those working to safeguard and protect children and young people should work with partner agencies and others to share relevant information about people who pose a risk of harm to others or people who are vulnerable to the risk of being harmed.

**Principle 10:** Those working to safeguard and protect children and young people who make decisions consistent with these principles should receive the encouragement, approval and support of their organisation.