

Early Help Practitioner Survey 2016/17

Full Report



April 2017

Feedback and Insight Team, Commissioning Support, Shropshire Council

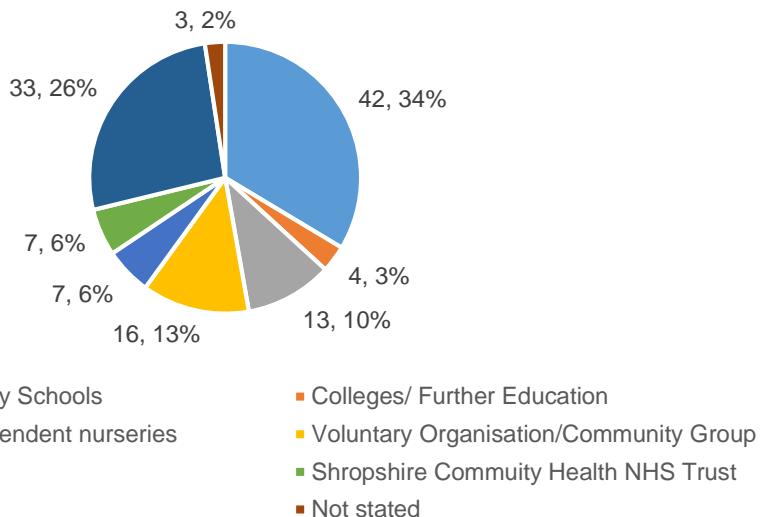
1. Methodology

The Early Help Practitioner Survey was opened for responses in mid-March and 125 surveys were completed between the 20th March and 26th April 2017. A variety of communication methods were used to encourage feedback. Partnership contacts and networks were used to target communications alongside general communications and hosting of the survey on the Council's consultation pages.

2. Survey Respondents

The 125 survey respondents were asked to supply their name, role, team and organisation. A proportion of respondents wished to remain anonymous. 37 respondents chose not to supply their role, 7 did not wish to provide a team name and 3 did not state which organisation they were from. Charts 1 and 2, below, use the data available to highlight where respondents work and the roles they are in.

1. Type of organisation respondents work for

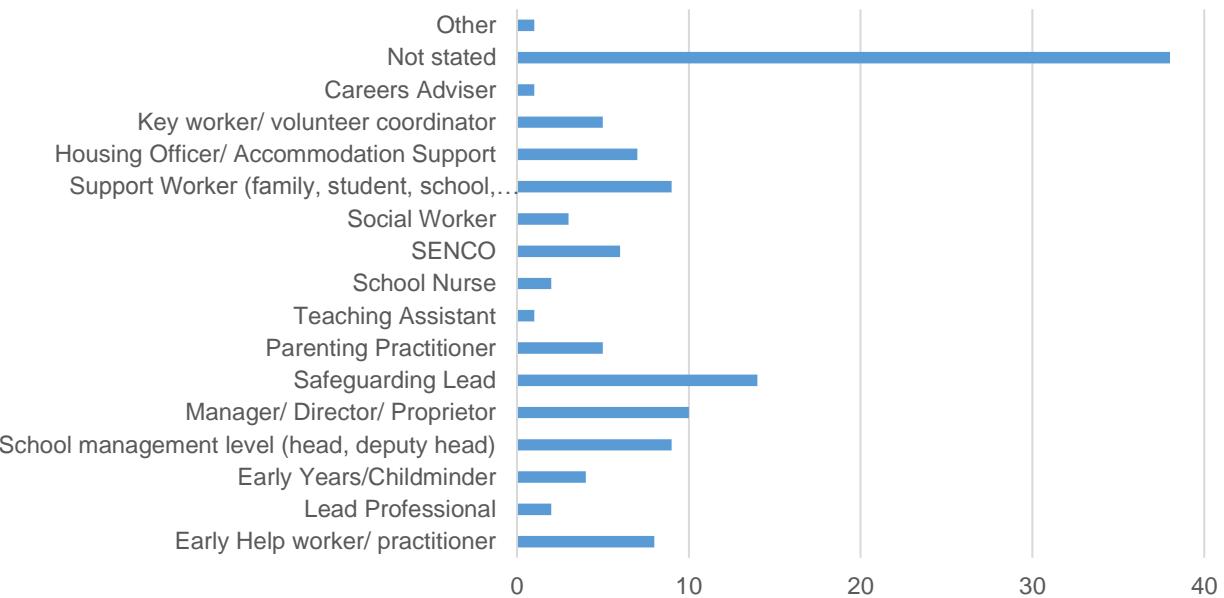


Work was undertaken to group the job roles of survey respondents into some key categories. It is worth noting that a proportion of the respondents are in senior management roles within their organisations (either managers of organisations or Head/Deputy Head roles within schools). Overall the split between manager and practitioner roles is as follows:

- 55% (69) are Practitioners
- 32% (40) are Both a practitioner and a manager
- 13% (16) are in the role of Manager/ Supervisor

Further analysis was undertaken to understand how the 26% of respondents (33 individuals) working for Shropshire Council are spread across the organisation. The results show that 24% are based in Children's Centre Services, 15% in Early Help, 15% in the Parenting Team, 12% in the Assessment Team North, 12% in Housing Options and the remainder spread across Safeguarding, ICT, Central Team Joint Adoption Service and Quality Assurance.

2. Types of job role - survey respondents



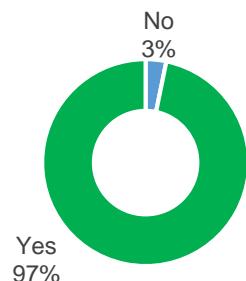
3. Practitioner Confidence

The survey results highlight that 97% of the 125 survey respondents know where to go for advice and support with Early Help. This is a very similar figure to the 2015/16 survey results (99% knew where to go for support). Only 3 survey respondents were unsure how to access advice and support.

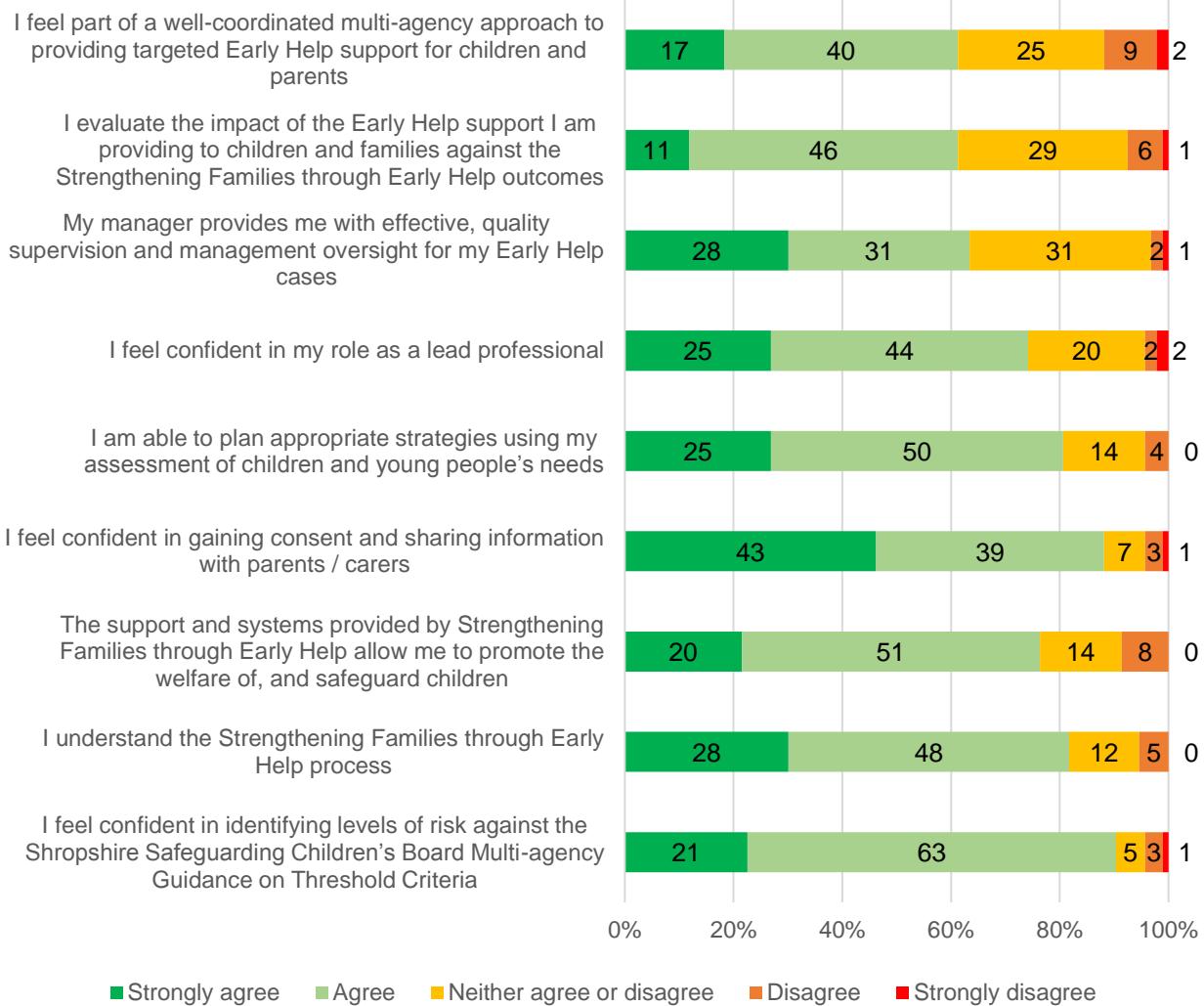
Chart 4 on the following page considers general confidence in working to deliver Early Help. The survey was used to measure understanding of the Early Help systems and processes. The key findings from this work to understand practitioner confidence are as follows:

- Over 90% of survey respondents are confident in identifying levels of risk against the Shropshire Safeguarding Children's Board Multi-agenda Guidance on Threshold Criteria.
- Over 80% of survey respondents:
 - Are confident gaining consent and sharing information with parents and carers.
 - Understand the Strengthening Families through Early help process (approximately 5% are less certain).
 - Feel able to plan appropriate strategies using assessment of children and young people's needs.
- Over 70% of survey respondents strongly agree or agree that they are able to:
 - Use the support and systems available to promote the welfare of and safeguard children.
 - Feel confident in the role of lead professional.
- There are lower levels of confidence (just over 60% agree or strongly agree) in their ability to/ provision of:
 - Effective supervision and management oversight from their manager/supervisor.
 - Evaluate the impact they are having on children and families (using Early Help outcomes).
 - Feel part of a well-coordinated multi-agency approach to providing targeted Early Help support.

3. Do you know where to go for advice and support from Early Help?



4. Practitioner Confidence



There were a large number of comments related to these statements and these can be found in Appendix 1.

Taking a look at confidence levels in 2016 compared to 2015, it is possible to see that results across the two years remain very similar overall. Although it is not possible to compare all of the questions asked in 2016 but for those with comparisons available, we can see that a significantly reduced proportion of survey respondents strongly agreed or agreed to the following statement: “*I evaluate the impact of the Early Help support I am providing to children and families against the Strengthening Families through Early Help outcomes*”.

It is also worth noting that the proportion of survey respondents who disagreed or strongly disagreed with “*I feel part of a well-coordinated multi-agency approach to providing targeted Early Help support for children and parents*” has reduced from 20.2% to 11.8%. There has been a slight decrease in confidence in the following statement “*I am able to plan appropriate strategies using my assessment of children and young people's needs*”. A slightly smaller proportion of survey respondents agreed with this statement this year and a slightly larger proportion disagreed.

Table 1 Confidence comparisons 2015 and 2016

	2015			2016		
	Strongly Agree/agree	Neutral	Disagree/Strongly disagree	Strongly Agree/agree	Neutral	Disagree/Strongly disagree
I feel confident in identifying levels of risk against the Shropshire Safeguarding Children's Board Multi-agency Guidance	97.0%	1.8%	1.2%	90.3%	5.4%	4.3%
I understand the Strengthening Families through Early Help process	85.3%	11.0%	3.7%	81.7%	12.9%	5.4%
The support and systems provided by Strengthening Families through Early Help allow me to promote the welfare of, and safeguard children	72.5%	17.4%	10.1%	76.3%	15.1%	8.6%
I am able to plan appropriate strategies using my assessment of children and young people's needs	89.8%	8.4%	1.8%	80.6%	15.1%	4.3%
My manager provides me with effective, quality supervision and management oversight for my Early Help cases	67.9%	26.6%	5.5%	63.4%	33.3%	3.2%
I evaluate the impact of the Early Help support I am providing to children and families against the Strengthening Families through Early Help outcomes	79.8%	16.5%	3.7%	61.3%	31.2%	7.5%
I feel part of a well-coordinated multi-agency approach to providing targeted Early Help support for children and parents	59.6%	20.2%	20.2%	61.3%	26.9%	11.8%

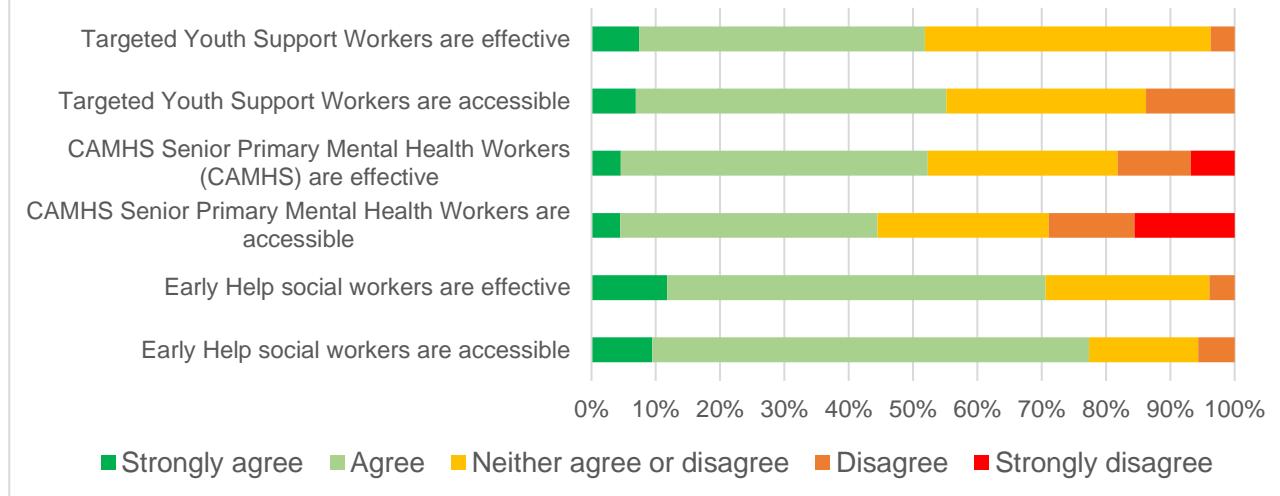
4. Experience of Early Help: Consultations

62% of the survey respondents (58 people) had one or more professional consultations in 2016/17. 35 survey respondents did not have a professional consultation and were therefore unable to respond to the questions concerning consultations. Of the professional consultations the survey respondents were involved in:

- 51% (47) had a professional consultation with a Social Worker from Early Help
- 34% (32) were with a CAMHS Senior Primary Mental Health Workers
- 12% (11) were with Targeted Youth Support
- Of the remainder, 1% were with Enhance and 2% with Compass.

Chart 5 highlights the views of survey respondents based on the consultations they had. Chart 5 shows that, on average, over 50% of respondents were satisfied with the accessibility and effectiveness of the consultations (with the exception of CAMHS accessibility). Almost 28.9% disagreed or strongly disagreed that the CAMHS Senior Primary Mental Health Workers are accessible and a smaller proportion (18.2%) disagreed that they are effective. Satisfaction with the other types of consultation was higher. The only other noticeable concern was that 4 respondents disagreed that the Targeted Youth Support Workers are accessible.

5. Respondents views based on experiences of Early Help consultations



Comparison data for 2014 to 2016 is available for Early Help Social Workers and CAMHS Primary Mental Health Workers. This is displayed in Table 2 below. The results show that satisfaction with CAMHS has fallen over the three years and dissatisfaction has increased (for both effectiveness and accessibility). For Early Help Social Workers, levels of satisfaction have increased for accessibility and slightly increased from 2015 results for effectiveness.

Table 2 Comparison data: 2014 to 2016

	Strongly agree/agree			Neutral			Disagree/strongly disagree		
	2014	2015	2016	2014	2015	2016	2014	2015	2016
Early Help social workers are accessible	84.0%	69.0%	77.4%	3.2%	22.0%	17.0%	12.7%	9.0%	5.7%
CAMHS Primary Mental Health Workers are accessible	65.7%	50.6%	44.4%	11.4%	23.4%	26.7%	22.9%	26.0%	28.9%
Early Help social workers are effective	76.2%	66.0%	70.6%	12.7%	28.0%	25.5%	11.1%	6.0%	3.9%
CAMHS Primary Mental Health Workers are effective	71.4%	58.4%	52.3%	20.0%	24.7%	29.5%	8.6%	16.9%	18.2%

Box 1a Comments on Consultations

- It can take some time to get a call back.
- On occasions I have had quick responses but on other occasions I have had to wait several weeks before they got back to me.
- Sometimes a wait for some weeks for CAMHS consultation.
- Sometimes we have quite a long wait to speak to CAMHS.
- The number of Early Help Social Workers has reduced from 6 to 3 so will have to wait to see if this has an impact.
- There can be waiting time for an appointment, but recently I was able to gain access for a consultation within the same week.
- This has been good but there was some confusion late last year over a referral to Havenbrook where the procedure had changed but EH Social Worker was not clear about the process as it has just changed.
- Yes, they were available, but I understand numbers have just been reduced by 70% so this a concern for the future.

Box 1b Comments relating to services

Note: A small number of comments have been removed for ease of reading (but only if the point made was almost identical to another comment).

Early Help Social Workers Effective

- Yes, the individuals I have had consultations with, I have known for some years and have a good relationship with.
- When needed the support is very effective.
- When they have got involved they have been effective.
- They can be a sounding board when stuck and not sure which direction to take. Sometimes helpful to attend Early Help meetings as other agencies may listen and perceive them as more 'expert', where as a practitioner you may say the same things, but sometimes your advice can be dismissed. They can offer reassurance and say you are doing everything you can do and continue with this etc.
- Yes, they are effective, and have given some very useful advice and support at Partnership meetings. I realise this is difficult because of heavy demand, but it would be even more helpful if, should a social worker agree that his/her attendance at a further meeting is necessary, the same worker could attend.
- But clearly under pressure because of reduced staffing and high level of referrals.

CAMHS

- Resources are very stretched.
- Waiting lists are too long.
- Sometimes there can be a long wait for a telephone appointment.
- Access to assessment still very slow.
- I have had to wait two months for an appointment.
- Consultations are often months after the request is submitted.
- I feel the face to face accessibility was better over 2 years ago. Sometimes families want to talk to a CAMHS worker and not to a key worker. Even if we say the same things they want to hear it from an agency they perceive as the 'experts'.
- This is an issue that I currently find extremely frustrating. Recently, I have attempted to arrange a Consultation (due to case issues and concerns) to be informed that I cannot access this support for 4-6 working weeks. In light of the complexity of some of the cases I am currently holding and Lead professional for, I find this unacceptable. There are some Young people that I feel are possibly at TIER 3 help and support for mental health/ emotional wellbeing and I cannot access the appropriate professional help. Sorry, this isn't good enough.
- Too long for a consultation to many external barrier to neurodevelopmental pathway referral for families and schools.
- Roles have changed and it is getting used to the new remits etc.
- Useful to consult, but such a long waiting list just for a consultation.
- More available now I think a CAMHS worker is now based in Compass
- I appreciate that they can be approached directly as based in Compass.
- Accessing Core CAMHS, has been and frankly always will be an extremely challenging process. The introduction of advisors can be very helpful part of the journey. I had a very positive experience working with Susan Redondo on a case this year. She was excellent and very helpful in accessing the appropriate help and support.
- I feel that CAMHS service has a very strict criteria and the referral process is long winded - e.g. one YP had to have an Educational Psychology Assessment to recommend CAMHS Neurological Developmental Assessment - and I was advised an assessment/diagnosis could take 12 months plus.
- The advice given is helpful but if not implemented by those concerned it can feel a wasted intervention.

Targeted Youth Support

- Depends on the worker.
- Again recent changes, the EH support workers have moved over to the targeted youth team to offer more support.
- I rarely liaise with TYS workers and therefore cannot comment. This maybe because Enhance is also a targeted service.

5. Experience of Early Help: Communications

The 2016/17 was designed to gain an understanding of how effective the work undertaken to communicate Early Help has been. Communications work has been particularly important where significant changes have taken place. The following question was included "Early Help Tools and processes have changed in the last year. How effectively have we communicated those changes?" Chart 6 highlights the results. 69% of survey respondents feel changes have been communicated fairly well or very well. 18% don't know or don't have a view at all. 13% feel communications have fairly poor or very poor.

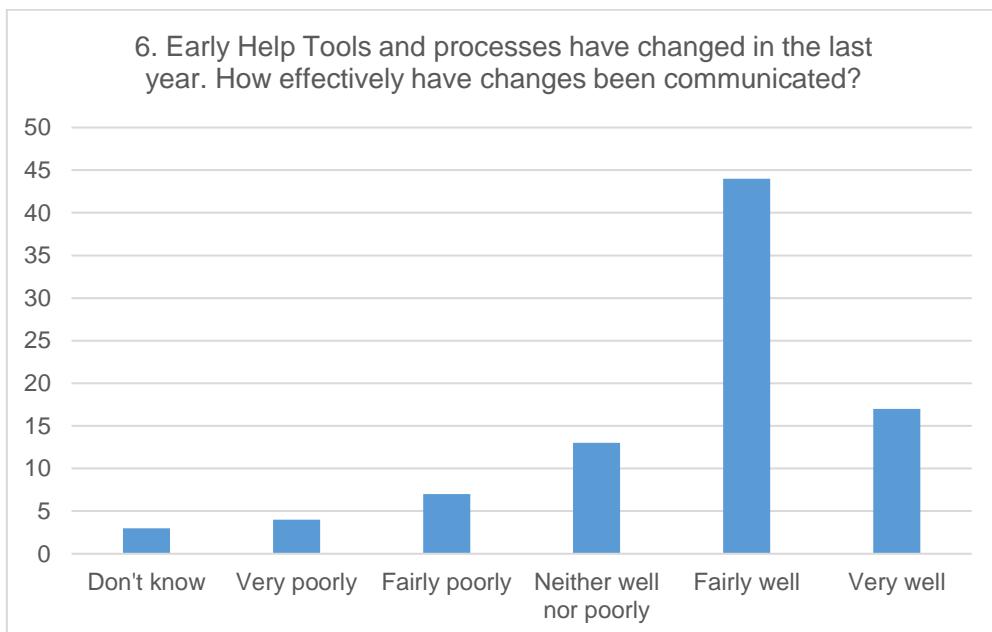
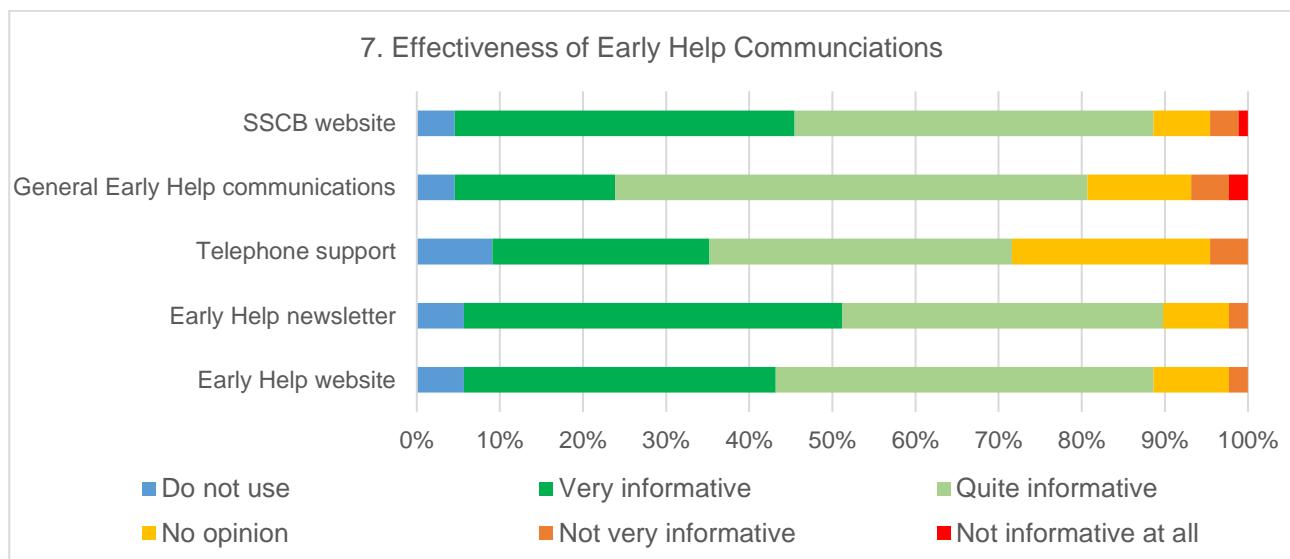


Chart 7 considers how effective different forms of communication have been. Survey respondents seem satisfied that the Early Help newsletter, Early Help Website and SSCB website are quite informative or very informative. There are more mixed views concerning telephone support.



The comments received are shown in Box 2. The comments cover the different forms of communication with a number of survey respondents having an opinion on communication around change (particularly E-CINS) and telephone and website communications.

Box 2 – Comments on Communications

General Communications

- “I think it is best to keep communications down to what is necessary and keep them qualitative rather than quantitative. I am not saying they are not necessary, but I have so much to do...”
- “I feel the amount of change in general within Early Help has been challenging to adapt to. I just hope that things stay put for a while now. ECINs has been a major and significant change”
- “Not enough information on how to upload early help referrals onto ECINS system. Feel this will impact on my work as unable to contact help around how to use ECINs system. Colleagues not confident so unable to show other staff members the process.”
- “The range of documentation and changes to procedures makes accessing help quite challenging; we do not get very much information about the impact on individuals receiving help.”
- “Too many name & organisation changes - difficult to keep up to date, particularly if you do not have any safeguarding issues. Effectiveness will only become apparent when we have a case.”

Telephone Communications

- “I rang for a CAMHS consultation for a suicidal boy and was told I would need to wait 4 weeks to speak to someone...”
- “I have had again mixed experiences with Early Help. Some telephone numbers are out of date and I have had to try various different numbers to reach them. One being Lifelines”.
- “What is the boundary between Early Help and CAMHS, TYS, etc? Where does one referral start and another stop? Which forms do we use for which? When will all this change yet again?”

Early Help Website

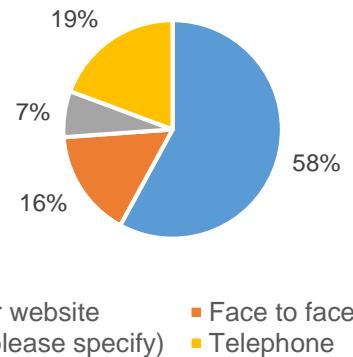
- “EH process is not clear on the website”.
- “The website is not easy to use”.

SSCB Website

- “SSCB website is informative but it could be easier to contact them directly.”
- “I have found the SSCB website confusing to find but once I have, it is useful, but I would only use it if I have to”.
- “SSCB website is wholly ineffective. It is impossible to find anything via search”.

Chart 8 highlights the results received when respondents were asked about their preferred method of communication. 58% prefer email or websites, 19% telephone communication and 16% face to face communications. Other suggestions/comments were similar in that people highlighted that they like different forms of communication for different purposes. Face to face communications for big changes, email for keeping up to date generally and telephone for queries.

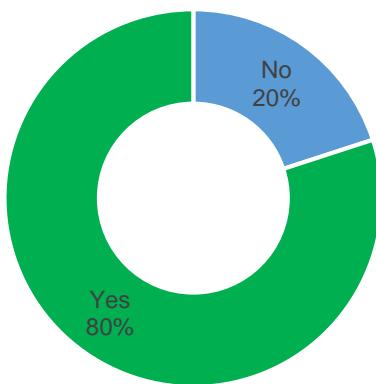
8. Preferred method of communication



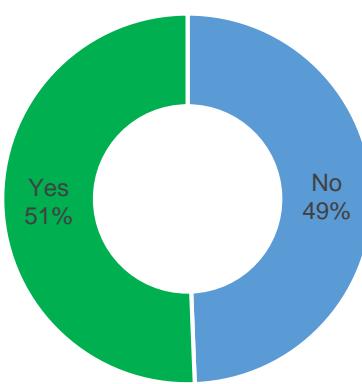
6. Experience of Early Help: Training

74% of survey respondents agreed that their manager undertakes regular supervision which allows them to identify their training needs. 22% had no opinion. 3% survey respondents do not have supervision in a way that training needs can be identified. Charts 9 and 10 show that 54% of respondents have identified training needs in the last year and 33% currently have training needs.

9. Have you identified training needs in the last 12 months?



10. Do you currently have training needs?



The training needs respondents mentioned are listed in Table 3. E-CINS training was requested by more survey respondents than any other type of training. Safeguarding training and subjects related to safeguarding and child protection were also mentioned. Those requesting general Early Help Training asked for information on the older age group 11-18 year olds, on completing Family Webstar and action plans. A few survey respondents requested training with neighbouring counties and some gave examples of training they have undertaken.

Table 3 – Requests for Training

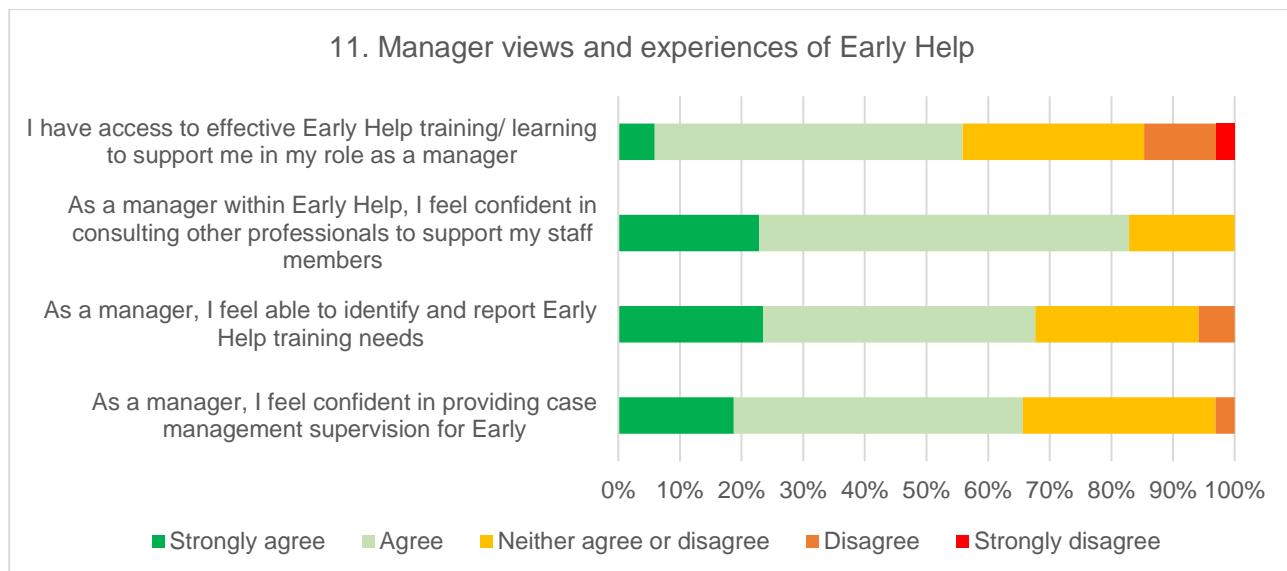
Training Requested	Number of requests	Other issues raised
E-CINS	11	Additional training needs were raised in a supplementary question and included:
Safeguarding Training	6	
Child sexual exploitation	5	
Mental Health	5	
Graded Care Profile	4	
Neglect Toolkit	4	
Early Help Training	4	
Child Protection	3	
TAMHS training	2	
Prevent Training	2	
FGM	1	
Adult Protection	1	
Court Skills	1	
Domestic Violence	1	
Asylum Seekers and Immigration	1	
Good hygiene	1	
Understanding Your Child	1	
SEND	1	
Developing practice modules	1	
Total	55	

The results of the survey may be a useful source of information when planning future training and identifying potential participants.

7. Experience of Early Help: Manager Views

The 2016/17 Early Help Practitioner Survey was used to assess how Managers feel about their role within Early Help. Chart 11 shows the results. The blank and 'not applicable' comments have been removed so only feedback from managers has been included. Overall the feedback is very positive.

Only 5 managers feel they do not have access to effective Early Help training/ learning to support them in their role. On the whole, 80% feel confident supporting their staff members with Early Help. Almost 70% feel able to identify and report training needs and around 65% are confident providing case management supervision for Early Help. A significant proportion did not have a view for many of the questions.

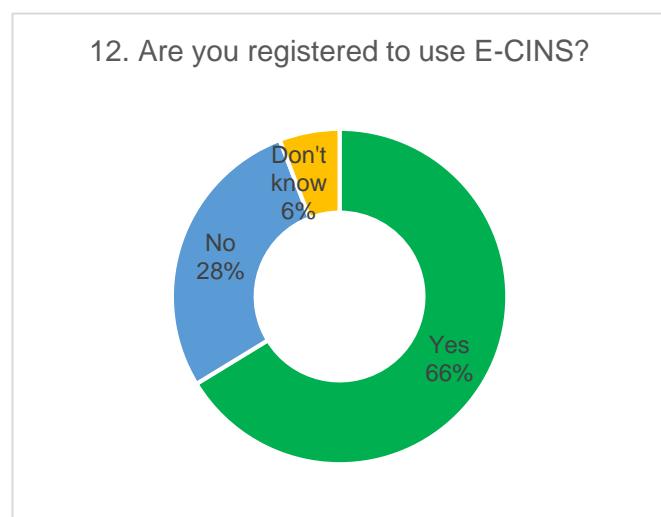


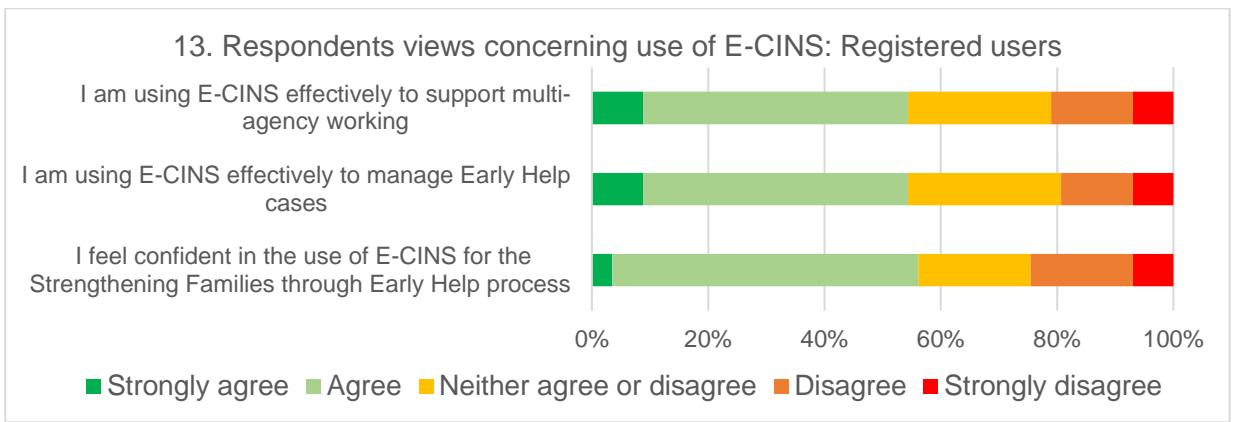
8. E-CINS

The survey results highlighted that 66% of those who completed the survey question on E-CINS are registered to the system (57 individuals). However 39 respondents did not complete the question, and a further 5 did not know. This suggests that, of all respondents (not just those completing the question), approximately 46% either do not use E-CINS or did not feel able to comment on it).

Chart 12 highlights that 60 survey respondents (48%) have had training in E-CINS and 26 (21%) have not. This response reflects the training needs questions where E-CINS was highlighted as the top training need.

Chart 13 displays the results of some more detailed questions concerning the use of E-CINS. The responses analysed are only those made by registered E-CINS users. Over 50% of the E-CINS registered respondents strongly agreed or agreed that they use E-CINS to effectively support multi-agency working, manage Early Help cases or implement the Strengthening Families through Early Help process. Between 11 and 14 individuals disagree or strongly disagree with one or more statements.





Box 3a Example comments from users of E-CINS

Note: These are not all the comments received but represent the range of views expressed (many survey respondents made the same points as those listed below).

- I find it challenging to use.
- I have registered but haven't been able to access the system. We have asked for support on numerous occasions but not had any. I attended the training but didn't feel it was fit for purpose, need help in smaller numbers.
- As an intermittent user, it has been difficult to get to grips with it, since it seems to change quite frequently.
- I have only been using E-CINS for last 2 months so I'm still learning.
- I did a quick training course. However, there was so much to take in on the day. I would like to be shown the E-CINS again.
- I have booked onto training.
- I am becoming more confident the more I use the system.
- I need more experience using E-CINS to become confident.
- It is now starting to be effective, the changes were difficult to adapt to, however it's now starting to make sense. Please don't make too many more changes!
- The team are on the phone and are more than happy to help support any queries I have. Training was not fit for purpose, and User Manual is also not very user friendly

Box 3b Other comments about E-CINS (including non-users)

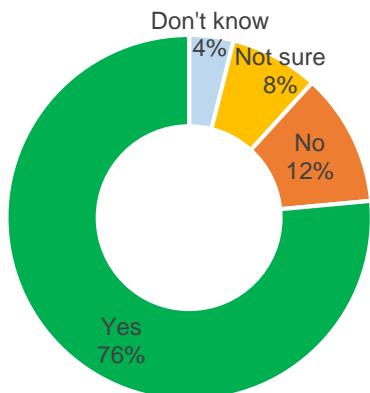
Note: These are not all the comments received.

- We have been surprised at how few requests we have had via E-CINS for support.
- Now written referrals [are] no longer accepted, currently I am unable to refer into Early Help.
- If other professionals had access but they don't so I am repeating workload.....CAHMS, Psychotherapy, SEN, Inclusion....
- I would be if other agencies, Health in particular, used ECINS it only works as well as the agencies who use it.
- I wish CAMHS and the EWO could access E-CINS.
- I wish more schools were using the system regularly. I think they require more support in order to use it confidently.
- The system will only work when all Early Help agencies have signed up or registered, and actually understand how to use it.
- It still feels demanding of time which is spent on the system rather than actually working with children or families.
- I am frustrated that the E-CINS system is very complicated and time consuming, I don't feel that things get actioned very quickly from them and I still find myself chasing work up.
- I feel the system is preventing effective communication rather than enhancing it.
- I am becoming more effective in using E-CINS to support multi-agency working, and I can see the benefits - it is a significant improvement for several agencies to be able to access and update a single Whole Family Action Plan. My slight concern is that this might lead to more electronic communication at the expense of face-to-face contact which is where I've usually built up an understanding and trust with other agencies in the past.

9. Feedback on the Concerns Line

49 survey respondents (57%) have phoned the concerns line since January 2016. Those people were asked for some more feedback concerning how their calls were handled. 76% believe their call was directed appropriately. 12% do not believe their call was directed appropriately.

14. Did you feel your call was directed appropriately?



Looking at the results for use of the concerns line from 2015 it is possible to see that fewer survey respondents have phoned the concerns line (71 had phoned in 2015, 82%). There is quite a significant reduction between the two results 57% in 2016 and 82% in 2015.

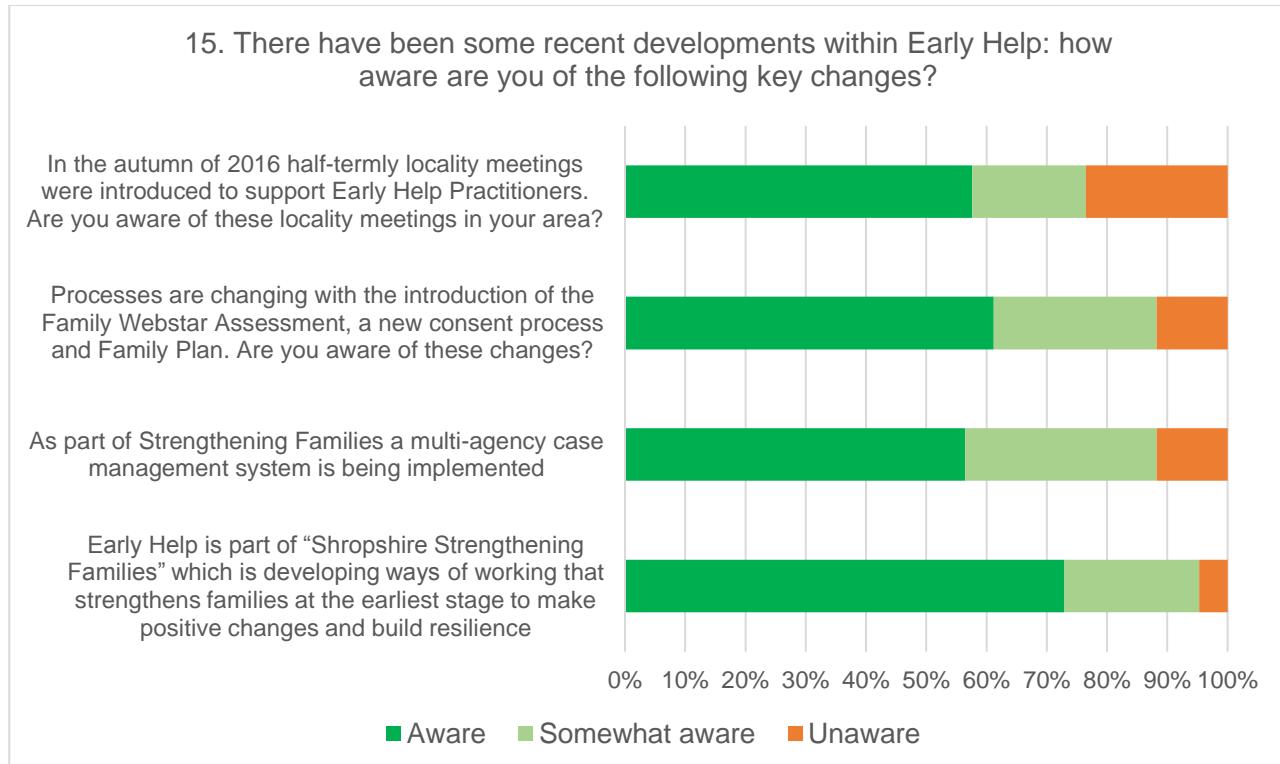
Box 4 – Comments on the Concerns Line (Examples)

- Very helpful- clear- listened well.
- I have always found them helpful and friendly.
- The staff on FPOC are well trained, helpful and effective. My experiences of dealing with these staff, so far, have been positive.
- I am not sure if the information I passed on was logged on to the child's file.
- Both times I have received paperwork to inform me how the concern had been dealt with.
- Concerns regarding flexibility of working hours - finished at 4pm on Friday, knowing that there was an on-going concern.
- I asked for a number for someone from Enhance. The person I spoke to said it should be on the website. It wasn't so she said she would report it as something to improve. During a phone call the following day someone else told me that it was deliberate
- I think you need to change the introductory answerphone message: "If you have concerns for the safety or welfare of a child, press 1". Well I'm only phoning because I have concerns but I often want to talk to someone to discuss which option and referral.
- I understand that concerns do not automatically result in a social worker assessment but they remain concerns! Especially during school holidays, when social workers may not be able to contact schools for an update into particular families.
- Ideally there should be other forms of communication for others who can't use the phone.
- The only problem was when they tried to put me through to the ICT team - it has been unsuccessful with emails having to be sent instead and waiting for them to reply.
- Sometimes we are asked what we think we need.
- It was engaged for quite some time before I got through.
- Takes too long to get a return call.
- I was told I would need to wait 4 weeks to have CAMHS consultation for a suicidal child! More like late help not early!

10. Changes in Early Help

Just over 50% of survey respondents are aware of the introduction of locality meetings. 60% or more are aware of the Family Webstar assessment and Family Plan, multi-agency case

management system and that Early Help is part of Shropshire strengthening Families. More detail is shown in Chart 15 but it suggests that only small proportions of the survey responses are unaware of changes and more people are unaware of are the locality meetings than any other change.



The data collected from the 2015 survey suggests that fewer survey respondents are aware of the locality meetings than they were in 2015. Awareness of Early Help being part of Strengthening Families is very similar across the two years but the proportion aware has slightly reduced in 2016 (the proportion remaining unaware has not really changed). See Table 4 below.

Table 4 Survey Respondents' Awareness Comparison 2015 to 2016

	2015			2016		
	Aware	Somewhat aware	Not aware	Aware	Somewhat aware	Not aware
Early Help is part of Strengthening Families	84%	12%	4%	73%	22%	5%
Locality meetings have been set up	68%	19%	13%	58%	19%	24%

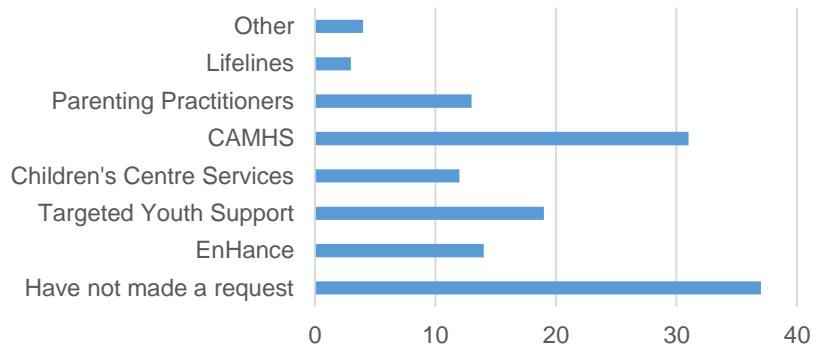
11. Early Help Targeted Services

Survey respondents were asked about their experiences of making a request for an Early Help intervention during 2016. 30% had not made a request for an Early Help intervention within the last 12 months.

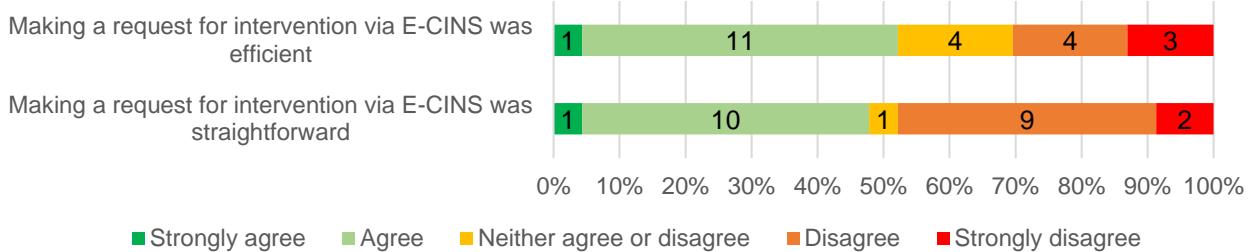
Chart 16 highlights that more survey respondents requested an intervention from CAMHS than any other service (31), this was followed by Targeted Youth Support (19) and EnHance (14).

23 survey respondents have made a request for an intervention via E-CINS. Of those, 11 felt that requesting an intervention via E-CINS was straightforward and 12 felt it was efficient (agreed or strongly agreed). Similar numbers disagreed. 11 felt that the process was not straightforward and 7 felt it was not efficient (disagreed or strongly disagreed). See Chart 17 for details.

16. Did you make a request for an Early Help intervention during 2016 from any of the following services?



17. Thinking about your request for intervention through E-CINS, to what extent do you agree or disagree with the following statements?



Box 4 Other comments on targeted interventions

- Following guidance booklet for E-CINS is a great help.
- Now that we are more efficient, things are improving. I am very 'for' the system as long as it works effectively.
- The case is still awaiting intervention.
- There were a few misunderstandings about Access (to the Whole Family Action Plan) and I had some reservations about the need for the request to be accompanied by a recent Webstar Assessment - how recent? What if there has been continuous involvement with a family for 6 months to a year before a need for Intervention from another agency is identified? If the Action Plan is comprehensive and up-to-date, is this sufficient? I was aware the other user was already signed up to E-CINS and using the system.
- It was difficult to liaise with the various agencies involved.
- It's now quite clear. The task can be chased up too, if the recipient hasn't responded etc. Also, it provides a good audit trail etc.
- The more times I use this process the easier it is becoming.

12. Other Comments and Feedback

A significant proportion of comments received in the open question at the end of the survey relate to E-CINS. Support is another topic included in the responses. All responses are really helpful and provide a much better understanding concerning how Early Help practitioners and managers are feeling and the types of issues and concerns they currently have.

Box 5 Other Comments

E-CINS

- I would like to see more schools being specifically contacted and reminded by Strengthening Families that they have to have at least 2 members of staff actively using E-CINS. There aren't enough professionals using E-CINS to make it as efficient as it could be.

- E-CINS theory is great. Practice is onerous and the system is not user friendly - continually freezes and stops further input.
- E-CINS is too complicated a referral process that takes half a day to put a family on and make referral- do not have capacity for this amount of time so have had to tell families to call in themselves for help.
- E-CINS, is now starting to make a lot of sense with practitioners. The changes that were made from April 2016 were significant and affected a lot of professionals. The whole things now feels like its 'coming together'.
- It would be really helpful if case notes from ECINS were duplicated to Care First - or at least if a chronology of ECIN involvement could be made available.
- Please let school nursing staff have more training on how to upload and make early help referrals using E-CINS. The system was implemented too quickly with staff unsure on how to use effectively. This will result in less referrals because staff are unsure of what to do. School nursing staff coping with many changes and it is just another new procedure which is not giving staff time to digest. ECINS is unreliable and presents a threat to data protection. All of this creates a large hurdle for schools to access the system effectively. We have invested in a staff member to support the well-being of children and families but the ECINS/EH process takes up too large a percentage of her time. I'd like to suggest two improvements: firstly a very simple certification scheme for highly skilled early help practitioners allowing briefer form filling and a fast track to referrals (I know this exists to an extent). Secondly there should be more help for those that haven't got the time within their roles with form filling and bureaucracy.

Support for Early Help

- Shropshire CAMHS is not working and must be reformed and given more resources. More money [should be] spent supporting lead professionals.
- There is no guidance on the trait rating values for the family Webstar on the website. When I tried to fill one in last month I could find no-one who could help with this.
- We feel that it takes too long to get support for children - we do know that services are stretched. We also feel that we do not get sufficient feedback when a case is closed and often cases are closed too soon because of your time restraints and then we feel children are left without the support they need.
- Website is not easy to navigate. Constant reorganisation and name changing confusing and unhelpful.
- Would like some training after working hours in the week for childminders.

General Comments

- Although I can see parts of Early Help working. Waiting lists and a lack of communication is frustrating.
- Daunting when you don't deal with it very often.
- The Early Help process is too bureaucratic with much duplication.
- I fully support the Early Help agenda. I also understand that money is tight and therefore support has to be rationed and delivered to the most needy.
- I think the overall idea is excellent and there are some dedicated and knowledgeable practitioners who are facilitating positive, effective multi-Agency working. But, it seems many teams/agencies are being hit by cutbacks and I worry that this will reduce the ultimate success of Early Help.

More detailed analysis is available on request and a summary report is also available highlighting key findings.

Contact Us

For more information concerning the Survey results please contact Shropshire Council's Commissioning Support Unit.

❑ **Website:** <http://new.shropshire.gov.uk/information-intelligence-and-insight>

✉ **Email:** commissioning.support@shropshire.gov.uk ☎ **Telephone:** 01743 258524

To find out more about Early Help use the following details:

❑ **Website:** <http://new.shropshire.gov.uk/early-help/>

✉ **Email:** earlyhelp@shropshire.gov.uk

Appendix 1 – Practitioner Confidence: Comments

Box A

I feel part of a well-coordinated multi-agency approach to providing targeted Early Help support for children and families

- I am sorry to be negative about a system that is a great idea for sharing information and work together with families and children and young people, but we need lots more support and it needs to consider the time we have available to complete all this detailed work. We are all working to capacity and need to the point, smart documents/ plans etc. Please offer us more support. We try hard for our families and need the support.
- I believe significant issues around other agencies being fully involved in the process and delay in the time it takes for a case to be picked up by some agencies and support systems is letting the system down. For example, waiting lists and telephone support through Enhance have meant that families have withdrawn from the process, refused to engage via the telephone or have reached crisis point before support is in place. This is not helpful and evidence suggests problems have escalated to more serious issues as a result within our own setting.
- I feel that it takes a long time to get support. Especially from CAMHS.
- I feel that most of the coordinating comes from Enhance at Early Help Meetings. COMPASS are available and will support when needed. I don't feel it is very easy to gain sometime necessary support or assessment needed from CAMHs and this can mean holding on to cases to offer containment. If schools need to hold and support the families following the end of our intervention they will in the longer term need to step up more to do this. Some schools already do this, but not all.
- Still feel like there is a barrier to support and that Early Help staff do not understand the capacity/constraints that the team are up against. I feel that there is an expectation that the school nurse will hold the case and support the Young person/family whilst allocation through E-CINs is pending, this is not always possible due to capacity and scope of practice.
- The multi-agency approach is ok in principle but access to documents seems to be all one way - we share everything but everyone else's information is restricted. Also the access aspects of E-CINS is very cumbersome and not at all user friendly.
- The system is not well coordinated. There is a need to chase every referral.
- The level of co-ordination is building as we all become familiar with the system, but I do find it much harder to co-ordinate support when another agency is not on E-CINS e.g. CAMHS, where it is harder and more time-consuming to achieve good communication and collaboration. I also find the lack of involvement of GPs in the Early Help process (whilst I understand the need for patient confidentiality) can mean a gap in knowledge and understanding.
- Systems are there. I just wish they would stop changing.
- I make full use of The Early help partnership meeting process.
- I think the co-ordination is better but the services are less.
- I feel communication between schools/Education and myself have improved greatly and the use of Early Help meetings for some families have created a much more united front for families. The use of consultations with EH social workers and CAMHs have been good and I have now got an effective way of getting an appointment promptly via email as opposed to ringing them up as I am deaf.

Box B

I evaluate the impact of the Early Help support I am providing to children and families against the Strengthening Families through Early Help outcomes

- Cross-county working sometimes has its challenges.
- Sometimes difficult to keep contact regularly with agencies.
- Support identified is individual to families: this may or may not link in with Strengthening Families outcomes
- The outcomes don't always match up to the types of concerns I often work with - this may be my misunderstanding or lack of understanding, but the outcomes seem to be at Troubled Families level, whereas I usually work at a lower level.
- The outcomes have taken some 'getting used to' shame there isn't a section on E-CINS or even CareFirst which specifically captures the voice of the child or even the My Life booklet!
- We have very clear systems in place for reviewing and discussing cases to ensure the best outcomes. We often find ourselves having to chase up other agencies to respond to tasks or referrals and much time is wasted by staff having to make checks on others rather than focussing our time and efforts on the children and families.

Box C**Manager provides supervision**

- 3 monthly supervision and school nurse meetings. We have raised our concerns to our manager.
- My supervisions with regards to my cases have always been of high quality however since my manager is having to use a paper copy to record my cases before being uploaded onto E-CINS into documents when it can or could be recorded directly into supervision.
- We have systems in place for supervision of staff who are dealing with caseloads. It is increasingly difficult due to time and money to prioritise this above the needs of the children and this is something which I believe will only get worse as we feel increasing pressure on school budgets.
- We provide supervision for all cases that the practitioner needs support with, not Early Help specifically
- As I am the manager, I know who to contact for advice and I have support from my deputy leader.
- Yes, in weekly Safeguarding meetings. Also, monthly line management meetings.
- My manager has been extremely supportive and without her support and help I would not have managed working with E-CINS so well.
- Brilliant, effective supervision both individual and peer support.
- Excellent support, professional and insightful.

Box D**Confident role lead professional**

- Depends on the case and access to services that I can access to support e.g. recent case needs family mediation.....this is the need but there is no service and the families cannot afford private services. It is not appropriate for me to lead family mediation.
- I don't take on the responsibility in my role as a Lead Professional and have had to encourage school staff whether it is Senco/ Family Support to take the Lead.
- I have been acting as a lead professional for a long time with a previous organisation and with EnHance and feel relatively confident. However I think it may help to have some updated training to ensure that I am meeting expectations of the SF team as I think the process needs to be robust and I am not sure all schools understand Early Help meetings (and that it is not just a vehicle for the school to find out what work you are doing), but it is also an opportunity to ensure they are doing everything possible to support that young person. Sometimes difficult being a key worker for a family and going in to a meeting and being assertive around actions that involve other agencies as well as EnHance.
- I think the title of 'Lead Professional' should be changed to 'Primary Contact in your Organisation'. Who wants to lead a potential disaster?
- It needs to be recognised that school is not always the most appropriate lead professional and does not always have the capacity to fulfil this role effectively and efficiently.
- More training needed.
- Time is always an issue and being LP considerably impacts on work levels.
- Overall, I have built up a confidence in taking the lead role, but feel that where there are numerous, complex needs for several children of different ages and where several other agencies are involved, the role can be demanding of more time and energy than my overall caseload allows. It helps when other Agencies are registered to use ECINS, and contribute towards updating the Plan.

Box E**I am able to plan appropriate strategies using my assessment of children and young people's needs**

- As we don't have masses of these, it is always useful to recap each time and this does take a lot of time!
- Improving. We don't have cases all the time so when you've just got used to one system, it seems to change again.
- Feel isolated from knowing what support services are available to signpost to.
- I only assess using my previous experience of working with children's services. My current role enables me to assess how housing, and finances impact on a family's well-being.
- I am fairly confident I can plan appropriate strategies for the 5-11 age group with whom I predominantly work, but am less confident about my knowledge of strategies for other age groups, now that the Assessment is for the whole family.
- My assessment informs the plan, which in turn accesses the help and support needed etc.

- Still feel that we are sometimes the wrong people to be the lead practitioner. E.g. co-ordinating or accessing a variety of complex services that you have very little experience, knowledge or understanding of. There are times I've felt unconsciously incompetent but how are you supposed to direct something which is out of your training and experience (whilst still trying to be the Head Teacher of the school).
- Using the online E-CINS action plan can make it harder to quickly identify which criteria/box an actions should fit in. This took some getting used to but as using this system regularly and the support from the SF team has been manageable, again I worry about the services within Early Help who won't be using E-CINS regularly.
- We have very clear systems in place for managing the needs of children in setting. It can be difficult however, to know what other support agencies are available to a family and stay on top of changing names, agencies and support offered.

Box F

I feel confident in gaining consent and sharing information with parents / carers

- Never easy.
- Sometimes hard to reach families are difficult to engage.
- I think there needs to be greater clarity around responsibilities for gaining consent and information sharing as I have been asked to have conversations with families at times which I feel are inappropriate and beyond my level of training. Whilst I recognise that in some cases this is beneficial, I believe that it can have an impact on the relationship between home and school, which can be a protective factor in the lives of children. Often these interventions and conversations can cause parents to withdraw from working with school and information is not shared freely. This is to the detriment of the child.
- The form for use with parents is complex and the language can be daunting for those with poor literacy levels. In addition, there are questions on the form which are unnecessary such as 'I understand that I have the right to withdraw consent at any time'.
- Have been doing this for 13 years, the crib supporting crib sheet is useful.
- I feel confident. However, we have had some parents who did not initially wish to complete the Webstar.

Box G

Support and Systems

- Disappointed with E-CINS support. We have rung and emailed to ask for help with the E-CINS process on numerous occasions with no luck. Feel the idea is good for sharing information, but it has made it very complicated for already stressed to capacity workers involving lots of time and detailed paperwork. I have not led a meeting since the new style paperwork and it seems very complicated and long winded compared with the previous system. My worries are that practitioners will not complete the assessments.
- Directly as a worker and service I would agree, however working alongside other Early Help agencies/provisions this isn't the case. Some provisions are struggling with the introduction of E-CINS for many reasons. If not all Early Help agencies are working with E-CINS this system will fail. Some agencies are not making referrals to get support for families and young people as this now has to be all done via E-CINS and if they haven't signed up then I believe Early Help support won't be referred for.
- Early Help telephone advice is effective but services to support seem very hard to access e.g. CAHMS - still 6 month waiting list; family mediation recommended but not provided unless on verge of being looked after; prevention services seem to be diminished....all focus on acting in crisis.
- I find the Family Webstar a particular problem.
- Having spoken to colleagues I know I am not alone in not knowing what support is available to families.
- Issues around the time taken to upload information and the delay in some cases being picked up means that safeguards and support can take too long. This can make some families and children vulnerable when they most need help and support.
- My caseload only currently includes families on CIN and child protection plans.
- Referral very time consuming- not able to complete the ECINS.
- The bureaucracy is overly burdensome and changes too frequently. Cuts in services have meant that waits for interventions have lengthened significantly. CAMHS is in crisis. However we are still able to

- make a difference to some families through Early Help. It must be said that our investment in resource to access the system is substantial much of which is wasted on duplicated form filling.
- There can be waiting times for EnHance (for example), and often a family's engagement can be withdrawn when cases are allocated.
 - This has been a huge learning curve for me and I think the paper copy was much more user friendly. I find that I am helping other agencies (schools) by showing them how to use the Action plan on E-CINS.
 - Welfare and safeguarding is supported but not always as quickly as needed!
 - When they are working and all the professionals involved with the family are on the system this works well. However, we will have to see what happens with the new system.
 - Whilst I agree, there have been difficulties with E-CINS.
 - Yes it allows me to promote the safety of our children.
 - yes, put the time constraints of ECINS do delay support for Young people and families

Box H

I understand the Strengthening Families through Early Help process.

- Basic understanding but could be improved.
- I do understand this process however, it is in a state of constant change which isn't always helpful. Also, other professionals who don't use the processes as often can be confused by it.
- This has changed often and the website information is not clear. Courses are not advertised for schools to access easily.
- The system works but the response times and the use of E-CINS really frustrates us in school.
- We are currently exploring E-CINS and how this will be used in relation to Early Help. We are getting to grips with how we can use this (that we have been informed will be the only way to refer children to Early Help) without onsite access to the internet.
- We have many families being supported through this process.
- This is mainly contributed by effective and thorough line management/ head of the direct service I work within.

Box I

I feel confident in identifying levels of risk against the Shropshire Safeguarding Children's Board Multi-agency Guidance on Threshold Criteria

- I do feel confident but will feel better once I have completed the new NSPCC Neglect tool kit.
- I do feel confident in this however, I am pleased that the document is being updated to reflect some of the recent learning from Serious Case Reviews.
- Recently I have not had to deal with any safe guarding cases and I probably need to renew training, so feel slightly less confident.
- I welcome the review of the threshold criteria as it has been unhelpful in the past. The document needs to be clear and concise so that practitioners can be sure about level of risk and there is a consistent approach across all services.
- If I have any doubts I make contact with COMPASS for additional advice