

<b>DECISION-MAKER:</b>	Joint Commissioning Board (JCB)		
<b>SUBJECT:</b>	<b>Mothers at risk of repeat removals</b>		
<b>DATE OF DECISION:</b>	<b>13<sup>th</sup> September 2018</b>		
<b>REPORT OF:</b>	<b>Joint interest: Hilary Brooks, Jason Horsley and Stephanie Ramsey</b>		
<b><u>CONTACT DETAILS</u></b>			
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#### **STATEMENT OF CONFIDENTIALITY**

Not required.

#### **BRIEF SUMMARY**

A pre-business case scoping exercise has been completed to explore the possible options for funding and delivering a service that supports mothers that have had, and are at risk of having, multiple children removed and taken into care. The key aims of the service are to:

1. Support mothers at risk of repeat removals to take more control of their lives, and resolve their multiple needs and difficulties that led to their child/children being removed.
2. Reduce the number of future children taken into care by asking women to take a "pause" in pregnancy (using Long-Acting Reversible Contraception) during the 18-month period of intensive support so that they can focus on resolving their multiple needs and issues, and hence are more likely to be able to keep future children that they may have after completion of the programme.
3. Reduce the costs of further repeat children being taken into care, and avoid costs in relation to NHS and adult social care.

Joint Commissioning Board are asked to make decisions on the following:

4. Are JCB committed to the delivery of a service in Southampton to support mothers at risk of repeat removals; to address their multiple needs, and reduce future children being taken into care?
5. If so, where would JCB like the funding for the service to come from? The options are as follows:
  - A. Redirection of SCC - and potentially partner - funding to enable delivery of the service.
  - B. Redirection of some FNP and SCC Children and Families resources (posts) under the current Section 75 framework.

C. Another option as suggested and agreed by JCB.

3. Do JCB agree that we proceed with the development of a full business case, which is considered and approved by the Children's Multi-Agency Partnership Board, with prior input from Cabinet Members?

**RECOMMENDATIONS:**

	(i)	JCB commit to the delivery of a service in Southampton to support mothers at risk of repeat removals.
	(ii)	JCB agree to Option A, scenario 1: Redirection of SCC - and potentially partner - funding to enable delivery of the service.
	(iii)	JCB agree that we proceed with the development of a full business case, which is considered and approved by the Children's Multi-Agency Partnership Board, with prior input from Cabinet Members.

**REASONS FOR REPORT RECOMMENDATIONS**

1.	Supporting mothers to take more control of their lives, resolve their difficulties, and address the issues that led to their child/children being removed will lead to better overall health and wellbeing and related outcomes, less inequality and less spend on treating poor outcomes.
2.	As the issues faced by many women are sufficiently entrenched, preventing further pregnancy during the time in which they are being supported, would increase the chance of a successful outcome for women whilst reducing the chance of them experiencing further attachment trauma.
6.	This is a "cost avoidance" proposition. It will reduce avoidable long term pressure on Children's Looked After Children budget, and the associated additional spend of adult social care and NHS services on treating the fallout of unresolved cycles of family failure rooted in unresolved mental health issues, alcohol and substance addiction, domestic abuse and high levels of benefit dependency.
4.	The strengths of Option A, scenario 1 are that we can utilise the budget more freely to employ people with the right skill mix and experience (i.e. rather than shifting existing posts), we do not detract from an existing service if the SCC contribution is sourced from reserves, and there are benefits in buying into an evidence based national model; using a tried and tested programme that has good outcomes, have access to Pause training and clinical supervision, intensive support (from the national and regional Pause team) with set up, delivery, monitoring and evaluation of the service.
5.	Proceeding with the development of a full business case, which is considered and approved by the Children's Multi-Agency Partnership Board, with prior input from Cabinet Members, would enable the business case to be approved within a fairly short timescale.

**ALTERNATIVE OPTIONS CONSIDERED AND REJECTED**

B.	Redirection of some FNP and SCC Children and Families resources to deliver the service under the current Section 75 framework. i.e. 2 x FNP Nurses. 1 x Family Engagement Worker.
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	<p>1 x Senior Social Worker. Requires backfill.</p> <p>Option to be discussed by JCB during the meeting. The key limitations are less flexibility in the skill mix that makes up the team (as utilising existing posts and people), impact on the areas that resources are shifted from, and possible limitations as to when can redeploy FNP nurses (terms of the FNP licence being explored). A key strength is that it presents a sustainable way of resourcing the service longer-term.</p>
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C.	Another option as suggested and agreed by JCB.
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**DETAIL (Including consultation carried out)**

	<p>The following methods were used to inform the pre-business case scoping exercise:</p> <ul style="list-style-type: none"> <li>• Analysis of Southampton Paris system data on children and mothers.</li> <li>• Evidence review (on LARC and interventions to support mothers at risk of repeat removals).</li> <li>• Visit by the national Pause Chief Executive and South East Pause Practice Lead, and follow up discussions.</li> <li>• Qualitative work i.e. discussions with Local Authorities that commission Pause, discussion with Pause providers, discussion with key people from SCC and Solent (including members). Discussion at key forums including CYP Multi-Agency Prevention Board.</li> <li>• Cost comparison of delivering Pause Vs bespoke service (using scenarios), and cost avoidance scenarios.</li> </ul>
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**RESOURCE IMPLICATIONS**

**Capital/Revenue**

1.	If Option A scenario 1 is approved, the average cost of a Pause service for an 18 month period is £450k (£303,322.50 in staff costs, £88,950 in programme costs, and £57,727.50 in local costs). Capital costs would be minimised by utilising existing building space if the preferred delivery model is pursued i.e. SCC in-house service or SCC/NHS Solent service delivered under the Section 75 agreement.
2.	If approval is given to proceed to a Business Case, a deep dive cost exercise and more detailed cost avoidance analysis will be completed.

**Property/Other**

	The preferred delivery model is a SCC or SCC/NHS Solent service delivered under the Section 75 agreement, which would not require additional property or new office space.
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**LEGAL IMPLICATIONS**

**Statutory power to undertake proposals in the report:**

1.	Can be undertaken within existing powers.
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**CONFLICT OF INTEREST IMPLICATIONS**

1.	Discussions have taken place with NHS Solent to determine options for
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	redirecting FNP resource to this service. However, this option was developed following exploration of other preliminary options, and their input has been collaborative and not directive in any way.
<b>RISK MANAGEMENT IMPLICATIONS</b>	
1.	A risk register will be developed as part of the full Business Plan.
<b>POLICY FRAMEWORK IMPLICATIONS</b>	
1.	None that aware of.

<b>KEY DECISION?</b>	<b>Yes (due to suggested on-going cost)</b>
<b>WARDS/COMMUNITIES AFFECTED:</b>	<b>Women at risk of repeat removals across all wards</b>
<u>SUPPORTING DOCUMENTATION</u>	
<b>Appendices</b>	
1.	Women at risk of repeat removals: Pre-business case scoping and decisions to be made (PowerPoint slides)

#### **Documents In Members' Rooms**

1.	Report as above shared with all Members on JCB and Cllr Jordan.
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#### **Equality Impact Assessment**

<b>Do the implications/subject of the report require an Equality and Safety Impact Assessment (ESIA) to be carried out.</b>	<b>Yes</b> (to be carried out if commence to Business Case)
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#### **Privacy Impact Assessment**

<b>Do the implications/subject of the report require a Privacy Impact Assessment (PIA) to be carried out.</b>	<b>Yes</b> (to be carried out if commence to Business Case)
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#### **Other Background Documents**

**Other Background documents available for inspection at:**

<b>Title of Background Paper(s)</b>	<b>Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable)</b>
1.	Evaluation of Pause: Research Report. University of Central Lancaster and Opcit Research on behalf of the Department for Education. Available at <a href="https://innovationcsc.co.uk/wp-content/uploads/2017/11/1.2.87-Evaluation_of_Pause.pdf">https://innovationcsc.co.uk/wp-content/uploads/2017/11/1.2.87-Evaluation_of_Pause.pdf</a>
2.	National Pause documentation and other relevant published and grey literature can be provided.