

# **Report to the Schools, Children and Families Overview & Scrutiny Committee**

**7 December 2016**

## **Multi-Agency Safeguarding Hub (MASH) and Children's Advice and Support Service (CASS)**

### **Purpose of the Report**

To brief the Committee on the Children's Advice and Support Service (CASS) and the Multi-Agency Safeguarding Hub (MASH) arrangements including how these and the assessment and short term intervention teams (ASTIs) are working together.

### **Recommendation**

That Members note the information contained in this report

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## Background

The Operating Model for Children's Social Care set out a vision, purpose and social work practice orientation for Children's Social Care. The aim was to provide the most effective intervention in a proportionate and timely way that engages with children and their families. Supported by the 'Right Service Right Time' BSCB service framework, the introduction of ASTIs in April 2015 provided Safeguarding Teams with respite from the competing demands of planned interventions, care proceedings and incoming assessments. Smaller safeguarding teams were introduced, based in localities and working alongside family support teams. At the same time, Children in care teams took over the responsibility for care proceedings providing for a greater focus on the child's journey for children in the care system.

Birmingham's MASH model had been in operation since July 2014. MASH had a notable part to play in the steady improvement to service delivery: a single front door for child protection concerns was established, partnership working at the first point of entry to social care has improved and information sharing arrangements were considerably strengthened

The introduction of ASTIs provided an opportunity to return child protection enquires from MASH to the area teams, ending the anomalous distinction between assessments for children in need and those in need of protection, providing for consideration of context, risks and the potential of the family to engage with services and completing the implementation of the Operating Model. Child protection enquires moved from MASH to ASTIs in February of this year.

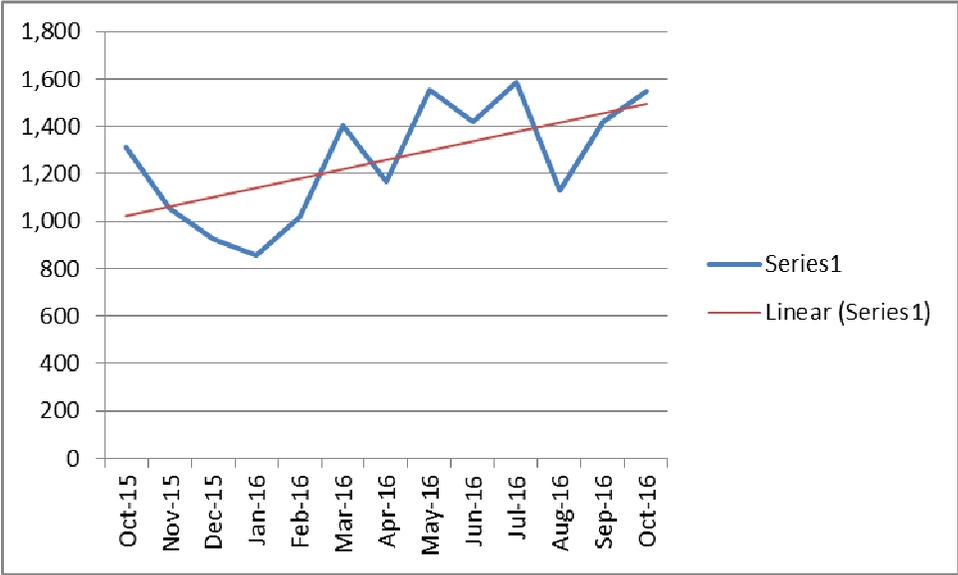
As a result of this it was necessary to redefine the MASH function excluding the child protection enquiry function and also to review the Children's Information and Advice Service (CIAS). The outcome moved enquires about universal services e.g. school places, to the corporate contact centre and introduced Children's Advice and Support Service (CASS) as a single 'front door' responding to concerns about a child and advising on Early Help Support. The value of the multi-agency information sharing hub is fully acknowledged in the Operating Model.

It was agreed that ASTIs would continue to benefit from the multi- agency MASH environment by operating a duty system from there to ensure an immediate response to child protection enquiries. The aim of CASS service is to offer:

- Strong and coherent front door for Early Help and Social Care Intervention
- Triage function which is fully informed by professionals with knowledge and experience of RSRT and the provision available to families in local communities
- Rapid and proportionate response
- Reduce number of "hand offs"
- Clear distinction between contacts and referrals
- Clear distinction between CASS and MASH
- Management of high volume through the system

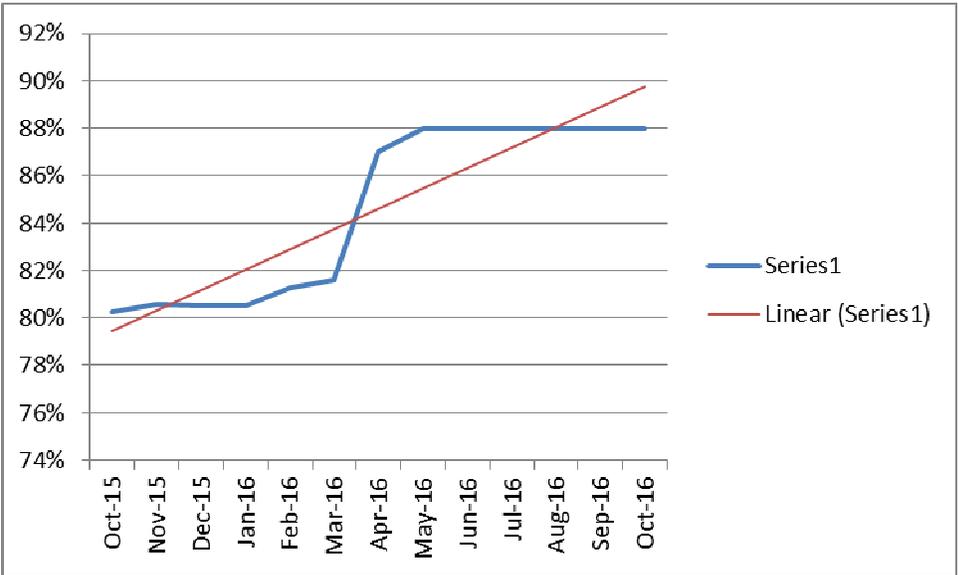
Despite an increase in the number of referrals, see table a) the introduction of ASTIs has significantly improved assessment timescales, see table b). The working relationships between partner agencies and ASTI team managers are also vastly improved. The necessity for information sharing at an early point of decision making is clearer and allocation of work to ASTIs directly from CASS is making more efficient use of staffing resources. Table c) demonstrates re referrals are decreasing slightly and are in line with England average. Nearly half of all contacts made by schools convert to referrals; see table d)

**a) No of referrals**



| Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | Apr-16 | May-16 | Jun-16 | Jul-16 | Aug-16 | Sep-16 | Oct-16 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 1,310  | 1,057  | 925    | 854    | 1,018  | 1,405  | 1,168  | 1,556  | 1,418  | 1,584  | 1,130  | 1,419  | 1,547  |

**b) % of family assessments completed within timescale**



| Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | Apr-16 | May-16 | Jun-16 | Jul-16 | Aug-16 | Sep-16 | Oct-16 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 80%    | 81%    | 81%    | 81%    | 81%    | 82%    | 87%    | 88%    | 88%    | 88%    | 88%    | 88%    | 88%    |

**c) % of referrals that are re-referrals within 12 months**

| % of referrals that are re-referrals within 12 months (YTD) |        |        |        |        |        |        |        |        |        |        |        |        |        |
|---|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
|   | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | Apr-16 | May-16 | Jun-16 | Jul-16 | Aug-16 | Sep-16 | Oct-16 |
| City Total  | 26%    | 26%    | 26%    | 25%    | 25%    | 24%    | 20%    | 22%    | 21%    | 22%    | 23%    | 23%    | 23%    |

**d) Schools'\* referrals – attrition by each step**

In the period October 2015 – October 2016:

Education made:

- 4,481 contacts - of which
- 2,203 (49%) became referrals - of which
- 1,616 (36%) became assessments - of which
- 736 (16%) became strat discussions - of which
- 459 (10%) became S47 enquiries - of which
- 138 (3.1%) went to an Initial Child Protection Conference

\*NB Education may contain more establishments than just schools, however the great majority are schools

**Key Issues**

The current arrangements took effect on 6th September 2016. Ofsted full inspection began on 12 September, just six days into the new arrangements. Their findings largely reflected the issues we are aware of and are addressing.

Social Care CASS staffing consists of 21 unqualified workers (Referral and Advice officers), 4 team leaders, responsible for their supervision, 18 qualified social workers, 4 social work team managers and a Head of Service who works across CASS and MASH.

The experience of the referral and advice officers is highly variable: 30% are new to the service, 35% formerly worked in CIAS and the remainder were existing MASH staff. Of the 18 QSW, 44% (8) are agency workers. One of the key issues is recruiting suitably skilled and experienced social workers; whilst this is not unique to Birmingham it is resulting in inconsistent standards of practice. Of the four team managers, just one is an agency worker. The quality of their decision-making and oversight is improving. A Family Support team manager has now been seconded into the service to support early help decision making

Volume and demand is high. There is an average of 250 calls and 150 emails each day. The systems and processes are inefficient. A review is underway and additional business support capacity has recently been made available to assist with demand.

Early help advice and support is under-developed and too many partner agencies refer children who could best be supported by universal services. Early help and family support capacity is now in place and it is anticipated this will reduce demand as the appropriate advice and signposting becomes embedded.

Partner agencies are well represented in both CASS and MASH and include Police, Adult Mental Health, Education, Acute and Community Health, Probation and Women's Aid. We have undertaken an analysis of the roles and responsibilities of all partners operating in CASS and the MASH environment. A well represented partnership forum is in place and is in the process of developing a specification for all partners operating across CASS and in the MASH environment.

## **Conclusions**

The introduction of the Operating Model has brought significant benefits in terms of staff retention, staff morale and improved quality and timeliness of assessments however Ofsted found cases of drift and delay and some examples of a lack of management grip on decision-making. This was particularly evident in the front-door (CASS and MASH). Changes had been made to the front-door to deal with the high volumes of incoming work more efficiently, but these changes were put in place only the week before Ofsted arrived. We continue to shape and refine front-door systems and processes and volume and demand, staff retention and development, early help support and a clear and coherent partner agency offer are key priorities. We are working closely with partners and with colleagues across Children's Services to embed the new arrangements and to address issues raised by Ofsted.