



Minutes of meeting

CHAIR:	Debbie Pritchard
MEETING:	AXS Programme Board
DATE:	26 th March 2007
VENUE:	Library, Coaver Club, Exeter
ATTENDEES:	Tim Leishman (TL), Dave Roberts (DR), Kathy Beechen (KB), John Davey (JD), Dave Simpkins (DS), Supt. Ian Curtis (IC), Martin Spragg (MS), Roger Kirk (RK)
APOLOGIES:	Ingrid Fisher (IF), Cheri White (CW), Jenny Winslade (JW), John Shaw (JS), Liam McGrath (LM), Jacqui Hawley (JH), Paul Jones (PJ), Cathy Ellingford (CE), Ruth Dale (RD), Paul Northcott (PN).
GUESTS:	Robert Weeks (RW), Pam Cowley (PC), Dillon Hughes (DH), Amber Steer-Frost (ASF), Katherine Jones (KJ), Pip Tucker (PT)

ITEM	DETAIL	ACTION	BY WHOM
Matters arising	Minutes recorded as accurate, matters arising picked up through sections below. Clarity that the LSCB will sign off the multi agency Thresholds paper, AXS board for information only.		
1. Highlights (Paper 1)	<u>Projects</u> 4. BHLF: Governance and accountability issues being raised through BHLF pilot. See appendix 1 attached. Panel process goes against family based decision making. 5. CAF IT: Who inputs data into system, clerk or practitioner? Training implications	Produce option paper	TL

ITEM	DETAIL	ACTION	BY WHOM
	<p><u>Enablers</u> Performance management</p> <p><u>Interdependencies</u> Integrated Youth Strategy Youth Matters</p>	<p>Scope</p> <p>Add to list</p>	<p>TL</p> <p>TL</p>
<p>2. ISP (Paper 3 & Presentation 4)</p>	<p>Presentation well received. Process steps agreed in principle. Agencies identified with owners: DCC - TL Police - IC Health - KJ Probation - Mary Mitchell Connexions - JD Districts - TL</p>	<p>Consult with Chief Executive(s) for sign off. Progress check next board meeting.</p>	<p>ALL</p>
<p>3. ContactPoint (paper 5)</p>	<p>Project slippage risk report Appendix 2 attached acknowledged by board.</p> <p>i) Agreement that Stage 1 plan completed.</p> <p>ii) Feedback comments on Stage 2 plan to RW as appropriate</p>		<p>ALL</p>
<p>4. Partnership (Paper 6 & 7)</p>	<p><u>Local Management Board Paper 6:</u> Clarity around Connexions engagement provided post meeting and attached for information in appendix 3. Agreed in principle that each organisation to agree internally the best way of supporting respective LMBs Recognising this was not a precedent for future organisation.</p> <p><u>Business Change Agents Paper 7:</u> Agreed in principle that each organisation to agree internally the best way of supporting respective BCMs recognising this was not a precedent for future organisation but a recognition of the importance of pathfinder stage.</p>		
<p>5. Key messages</p>	<p>Deferred until next meeting</p>		<p>ALL</p>
	<p>Next meeting: 23 April 2007 Time: 3.00 to 5.00 Venue: Coaver Club, Exeter</p>		



BUDGET HOLDING LEAD PROFESSIONAL (BHLP)

BHLP Newsletter

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1. Background information

Pilots have been set up to trial a concept related to the lead professional – that of the budget-holding lead professional. The aim is to test whether better service packages for core groups of children and families could be delivered by giving lead professionals a budget with which to commission services directly from providers.

The 16 local authorities piloting the model are:

- Blackpool
- Bournemouth
- Poole
- Brighton & Hove
- Derbyshire
- Devon
- Gateshead
- Gloucestershire
- Hertfordshire
- Knowsley
- Leeds
- Redbridge
- Telford & Wrekin
- Tower Hamlets
- Trafford
- West Sussex

The pilots were established in June 2006 and will run up to April 2008.

2. Pilot news to date

The BHLP pilots have been running for nine

months now and, whilst it is too early to reach significant conclusions about what works, a few interesting issues have emerged and some key messages have been identified. These are summarised below.

First BHLP is very dependent on lead professional (LP) and related integrated processes being well established. Indeed the authorities that have already implemented LP and related processes are finding it easier to implement BHLP than those that are starting from the beginning. However it is evident that BHLP has provided a valuable spur to rapid implementation of LP and the common assessment framework (CAF) and that BHLP has also enabled practitioners to understand the essence of LP very quickly. Experience is showing that most places need to develop new management structures and sometimes new governance arrangements to coordinate and manage the range of targeted services to meet the needs of children with additional needs.

More than half of the pilots are involving parents in the process of decision making through the Team round the child although this terminology is not used everywhere. Others including Gloucestershire

have other ways of doing this which are yielding good results and good feedback from parents. Involving parents, children and young people is the very essence of BHL P and has been identified as one of the key messages (see below).

Most of the pilots have limits to expenditure and a process for referring up the line any cases that require additional resources. Almost half of the pilots leave the final decision about using BHL P to a decision maker or to a multi agency team (variously named) rather than allowing the BHL P or team round the child to make the decision. This may be a necessary and understandable feature of early pilot work where people are nervous about decision making and need to know more about how BHL P works. However it does go somewhat against the spirit of the BHL P process because of the delay in decision and the potential to undermine family involvement in the decision making process. Again this has been picked up in the key messages listed below.

Financial process has clearly been an important part of the development of BHL P procedure as the pilots try to balance the need for financial accountability for every last penny of public money and the need for local flexibility. The risk of giving money to families as direct payments is well understood and there is considerable concern about the need to ensure that families use the money for what it was intended. This is a good reminder that risk and needs assessment and on the spot judgement is the most important part of a LP/BHL P role and that many practitioners do not yet feel confident enough to do this well. However good local LP/ CAF training is it will take time for the majority to develop good enough skills and competency without considerable support and good supervision.

The lists of purchasable services and products differ in length but are similar in make-up. Indeed, most sites are going to develop their understanding on the "menu" available to BHL P as the project evolves. Most have resisted a prescribed list in favour of enabling LPs and families to be innovative. All sites have exemplified a willingness to provide space for experimentation in this regard.

3. Case Studies

It is apparent that we will not be able to produce a full list of what is being procured until much later in the pilot process when there is more experience to draw on.

Key Messages

We held a two day BHL P pilot workshop in January. During this workshop six key messages were identified as follows:

- Decisions must be made with children, families and young people rather than later at a professional panel – empowering the BHL P to make decisions in this way
- Understanding the 'appreciative CAF' (looking at strengths as well as weaknesses is a fundamental part of the CAF process) may help to embed the concept of co-production of outcomes so that all services are working with families rather than 'doing unto'.
- BHL P should be linked to a full CAF assessment and agreement at a Team round the Child meeting or the equivalent. Pilots should be using CAF and LP Guidance.
- BHL Ps should operate more as 'individual level commissioners', that is they should be able to commission new services from the voluntary sector and new or re-shaped services from within local authorities and the NHS, as well as buying goods.
- Pilot authorities may need to explain further the transformational potential of BHL P to opinion formers and leaders within each children's services authority. BHL P project managers will need to be successful in 'influencing up and out' in order to develop strong support for mainstreaming BHL P beyond the life of the pilot
- Measure the impact of BHL P locally – e.g. reduced exclusions, use of EWS, fewer referrals to social services etc.

The case study below gives a flavour of how the BHLF concept is working in practice.

Background

This case came to the attention of the Integrated Services Manager in late December, 2006 and involves a family of mother, partner and three children aged 2, 3 and 4 years of age. One of the children is diagnosed as ADHD and is on medication, and another is currently being assessed for Autism. All three are extremely challenging at home. Mother has had suicidal tendencies on and off for about two years and has been under the direction of the local Adult Mental Health Services. She has shown some improvements during subsequent periods but has also gone through times of anxiety and depression. Partner, who is natural father to all three of the children, does not work and has been the main carer for the children for this period, Up until recently mother had sole access to all of the family's benefits and has been using them inappropriately on clothes shopping etc., partner has been unable to stop this and they have fallen into debt to the tune of £1,500 rent arrears. Mother holds the tenancy to the property in which they live. Father did not have parental responsibility.

The initial contact with the ISM was when a Family Support Worker made contact asking for financial support to partner over a weekend when mother was in residential care and whilst action was taking place to give partner access to the family benefits. At the same time it was realised that there were financial issues in relation to one of the children accessing nursery and that these arrangements were in danger of ceasing due to the family's financial crisis.

At the time of mothers latest residential stay that she mentioned to a health professional that she was intent on taking her own life and those of the children. Social Care was sent out to make an initial assessment in relation to this child protection issues and it was decided that, for the foreseeable future, mother would only be allowed access to the children if supervised. It was also clear that her unstable state was having a detrimental effect on the children and her partner, who was finding it increasingly difficult to cope with both situations.

Although there was a Team Around the Child process in place the situation with the family came into crisis in January, 2007 with mother attempting suicide and being taken back into residential care and the family being threatened with eviction due to their outstanding debts.

Approach

Following a visit from the Family Support worker an initial request was made to provide partner with some cash to see him through a particular weekend whilst his finances were being sorted out. £30 cash was provided which assisted him in relation to heating, electricity and foodstuff for that weekend. It was also decided at that time that £300 would be made available to the Nursery to ensure the 3 year olds attendance through to February half term.

Initial discussions were held with the professionals involved in the TAC process and it was agreed to hold a further TAC meeting to put actions in place to try and secure the children's immediate security within the family home, the issue of eviction was put on hold until the meeting and all agencies agreed to look at how best to support the partner in maintaining the family unit whilst mother was in treatment. The TAC meeting took place towards the end of January when father, paternal grandmother, the ISM (as Chair), the Health Visitor (Lead Professional), a Family Outreach worker from the Telford Christian Council, a Manager from the Registered Social Landlord Organisation, a Social Worker from the Adult Mental Health Team (representing mother) and the local school the children attended, took place. By this time father had been supported through the Courts and granted a temporary residence order to remain in the family home. Negotiations

between the Registered Social landlord organisation, Social Care and the ISM had put forward a suggestion to write off the rent arrears and an extension of the Nursery funding brought back to the table for further consideration.

It was agreed that an extension of the period in relation to Nursery provision would be provided, ensuring the child's attendance until the end of the Spring Term (£300). The Registered Social Landlord brought an offer to the meeting to write off half of the rent arrears if the remainder of the debt could be found from other agency budgets. It was agreed by the ISM to match this from BHLP monies on the provisos that:

- a. The £750 would be paid direct to the Housing Association.
- b. That future rental payments would be made from the Benefits Agency to the Landlord and therefore no future debts would be accrued.
- c. That in removing this debt the children's future housing needs would be secured whether this be with the current arrangement with father as sole carer, by both parents coming back together as a family unit or some other arrangement directed through possible future family proceedings and
 - d. That this agreement has been put in place on the proviso that the house would be made available for the children as the first and only priority for their future security.

Outcome

This case is still obviously ongoing but the benefits accrued through the expenditure of some £1,600 are as follows:

- The initial provisions of £30 cash ensured that father and the children were able to remain within the family household over a very traumatic weekend whilst finances were re-routed.
 - Two further amounts of £300 have ensured that one of the children has continued to receive Nursery provision which is now secured until other financial arrangements can be found to support this after April, 2007. It also provides a wider support network for this child and his father and a degree of respite for the latter.
 - The commitment of a further £750 will ensure the children's future security within their current home environment. It has also removed the potential threat of seeing these children possibly being taken into care.
 - The TAC process is also helping the whole family through a particularly difficult period within their lives. Further support packages are now in place to assist mother, secure a legal position on tenancy for partner and children over the next six months and finally support father with continuing practical help from Outreach and Health Services. The financial support we were able to provide through BHLP has reduced the threat of removal from the house, lessened the stress on the family that their financial position had placed them under and provided some stability for the children in what is also an unsettling time for them.
- e. The family's circumstances are likely to continue to change in the future but this will continue to be monitored and addressed through the TAC process. It is unlikely, due to the actions already taken, that future support will need further financial backing and the risk of local authority accommodation for child protection or homelessness issues has been significantly reduced. Had this taken place even for a short period and in the current circumstances, it is likely that the bill would have been more significant than the figures highlighted above.

4. National evaluation

The Department has commissioned researchers at Newcastle University to evaluate the BHLP pilots.

The aims of the evaluation are threefold:

1. To compare two types of service delivery (with an LP and with a BHLP) for the provision across the pilots.
2. To evaluate cost-effectiveness of BHLPs.
3. To consider how the initiative might be rolled out.

The researchers will also be looking for evidence to determine whether BHLP increases the power of lead professionals to:

- Ensure children and families can access services they need when they need them
- Reduce overlaps and inconsistency among practitioners and the costs per episode of intervention.

The evaluation falls into two main time periods; a scoping phase until December 2006; and the main study from January 2007 - March 2008, when the final report will be presented.

6. BHLP for Children in Care Pilots

The Green Paper, *Care Matters: Transforming the Lives of Children and Young People in Care*, includes a budget-holding lead professional pilot for children in care. We are currently working out the details of what the pilot will involve but are planning to pilot this from April 2007 onwards by incorporating it into four of the existing budget-holding lead professional pilots.

The BHLP pilot for children in care aims to explore ways of freeing social workers to provide better services to children within a local authority. For social workers to be truly able to respond to

children's needs they must have the greatest freedom possible over what support the child gets and when.

7. Documents available

The documents/reports relating to these pilots that are available so far include:

- Guidance on financial management & control
- Towards Mainstreaming BHLP
- Commissioning Change for Children – understanding how the BHLP role can transform services
- BHLP Process Mapping Report
- BHLP in Context
- Evaluation Scoping Report

All of these reports can be downloaded from our web-page on the every child matters website:

<http://www.everychildmatters.gov.uk/deliveringservices/leadprofessional/budgetholding>.





AXS Programme Board

8 March 2007

DfES Delay – Risk Assessment

Delay is effectively 3-6 months (May to Aug/Sep/Oct/Nov) depending on deployment slot we agree - from when FIRST practitioners can use.

Some of these months would have been summer months with limited practitioner availability for training

Reality is that it is likely to take considerable time (that will dwarf this delay) after this, to achieve a status where most Devon practitioners are using CP

Any risk that we have in terms of “we need an Index but we’re still waiting for CP” is not changed in magnitude by much by this delay and the risk was there beforehand anyway.

- ⇒ At a programme level we must decide how to address this risk for the interim period where we are running multi-agency processes without an index for those practitioners (could be 2 years plus)
- A lot depends on how quickly we roll-out CAF, LP, Info sharing
 - Undertaking a local index is a huge decision with huge implications. DfES do not recommend it at this point in time, nor do other localities that have local indexes in place. Experience from other localities suggests that implementation of an effective local index would take as long (and as much resource) as that of ContactPoint.

DfES “The new deployment plan allows a wider window between EA go live and the first deployments in August 2008. This provides the National Team with a longer period to monitor performance of ContactPoint and to take any actions necessary before the next phase of deployment. This longer lead time again brings down risk to the revised deployment slots.”

Tim Leishman

From: John Davey [John.Davey@connexions-cd.org.uk]
Sent: 03 April 2007 11:33
To: Tim Leishman
Cc: Devon Area Managers
Subject: Mangement links to AXS Pathways

Tim – for your records these are details of our links to the AXS Pathway Pathfinders.

From our Barnstaple office:

Iffracombe and South Molton
Bideford

Adele Bennett
Sue Wearne

Exeter:

Tiverton and Okehampton
Exeter
Exmouth

Erica Williamson
Jane Hayden
Cathy Moran

South Devon:

Dawlish
Totnes

Karen Kelly
David Norman

Contact details are – first [name.surname@connexions-cd.org.uk](mailto:firstname.surname@connexions-cd.org.uk)

John

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