



# Children's Social Care Innovation Programme

## Expression of Interest Form

If you have any problems editing this form, please email [innovation@springconsortium.com](mailto:innovation@springconsortium.com)

### Section 1

#### 1.1 About you

Lead organisation	Torbay Council	Address	Town Hall
Lead contact	<b>Gail Rogers</b>		Castle Circus
Position	Principal Commissioner		Torquay
Email address	<b>Gail.rogers@torbay.gov.uk</b>		TQ13DR
Phone number	01803 207073		
Type of organisation	Local authority		
Number of years the organisation has been operating for	Local authority or other public sector organisation - n/a		

#### 1.2 About your partners

Are you working or planning to work with partners on your innovation?  If yes, please list your partners or potential partners in the table below:	<b>Yes</b>
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<i>Partner</i>	<i>Type of organisation</i>	<i>Status</i>
CCG	Other public sector organisation	Drop down list
Torbay and South Devon Care Trust	Other public sector organisation	Drop down list
Devon and Cornwall Police	Other public sector organisation	Drop down list
HAND	Other	Drop down list
Torbay Community Development Trust	Other	Drop down list

[Click here to enter additional information about your partners that you want us to know about at this stage](#)

#### 1.3 Your involvement so far

Did you attend the summit event on 7 July?	No
Have you had previous conversations with DfE regarding this proposal or the ideas within it?	Yes
If yes, who have you spoken with?	Kat Benjamin from Deloitte
Would you like to opt out of regular innovation programme update emails? We will still communicate with you about your EOI.	No, I do not want to opt out
Is your organisation applying for or receiving funding for activity related to children's social care from any other government or charitable	Yes

innovation or transformation fund?	
If yes, please give brief details.	Cabinet Office Mutuals for Success and Commissioning Better Outcomes and the Social Outcomes Fund; also Cabinet Office Vulnerable and Disadvantaged Young People's Fund
Do you intend to submit more than one EOI?	No

The word counts included in this form are suggested maximum word limits. You do not need to write up to the word count for any of the questions if you can answer the question clearly using fewer words. Whilst we advise not going significantly over the word count at this stage you will not be penalised if you exceed it.

## Section 2

### Your proposal and the impact you want to have

2.1 What geographical area is initially covered by your proposal?	<b>South West</b>	Torbay
2.2 Which of our two focus areas does your proposal respond to? <a href="#">Click here for more information on the focus areas</a>	<b>Children's social work</b>	
<p>2.3 <b>About the problem your innovation is trying to address</b> (200 words)  <i>What is the problem? To what extent is it a problem and for whom? How do you know this - what evidence or insights do you have about the problem? At this stage, you may not have completed gathering evidence about or analysing your problem, but you should have a clear sense of the issue you are seeking to address.</i></p> <p><b>Demand for social care services in Torbay is comparatively high with increasing numbers of contacts received into the Safeguarding Hub. Alongside this is high demand across all Partners with an overstretched Camhs service, high admissions to hospital and visits to a GP, and high numbers of young people with a SEN. 24% of children aged under 16 live in poverty, high numbers of children are looked after, teenage pregnancy rates are higher than average as is childhood obesity and domestic violence, and high numbers of adults with substance misuse require treatment. Consequently, the cost of meeting demand is becoming unsustainable, with a constant challenge to fund early help services to prevent longer term demand and cost when the cost of statutory services is growing. The demand for services correlates with the socio-economic and health indicators above, but is also a result of public perception around entitlement to pre-set services and the way that the whole 'system' responds in a fragmented and poorly co-ordinated way. We are seeking to address the systems first in order to better target resources and in order to change the culture of providing and receiving services both from the bottom up and the top down.</b></p>		
<p>2.4 <b>About your solution</b> (200 words)  <i>At this stage it is ok if your proposal is embryonic, with full details of the operating model still to be developed. Equally, it's ok if you have already started testing out or piloting your innovation. Either way please try to be clear in explaining what your idea is, even if you don't have all the details yet on how you will make it happen.</i></p> <p><b>Our solution seeks to fuse existing opportunities to create structural and cultural change in Torbay, leveraging resources within an integrated delivery culture. South Devon and Torbay Health and Social Care community is one of fourteen national DoH Pioneer sites for the integration of children's and adults health and social care services. Additionally, the development of an Integrated Care Organisation merging Torbay Hospital with Torbay and Southern Devon Health and Care Trust will transform care delivery, integrating with children's services and deepening the relationship and role of the voluntary sector. The</b></p>		

**Lottery funded the development of LIST (Local Integrated Services Trust) across the Peninsular, creating a permanent legal structure to facilitate projects centred on cross public sector working that we can use practically to redesign our services. These frameworks support our re-shaping children's social work in its broadest sense, establishing a Public Service Trust. This will be aimed initially at developing Early Help practices which later integrate social work operating with the child and community at the centre, informing the 'commissioning' of their own care and contributing to the development of services for themselves and others. Enablers will navigate pathways for organisational and community-based change, embedding long-term practice and behavioural change.**

**2.5 About the outcomes you want to achieve (300 words)**

*What will change for children who need help from social services, and to what extent? What impact will your proposal have on value for money? What are the most important things to measure so you know whether you're achieving these outcomes? How might you be able to collect this information? At this stage, you may not have precise figures on cost effectiveness, but you should be able to articulate why you think the proposal would be cost effective. Similarly, you may only have some initial thinking on what you will measure and how.*

**Children needing help from social services will receive this with less delay and with a focus on one single education, health and social plan to meet the need within the family, preventing the bounce between multiple services. The integrated approach will manage risk more confidently in the community, impacting on demand at the front door of social care and consequently reducing spending in line with our existing five-year budget reduction plan. The new structure will use an evidence based, strengths model to build skills and resilience, with principles of co-production to develop local, sustainable provision. The proposal brings together key public services and will develop an organisation with overarching performance outcomes and capacity to devolve budgets enabling a degree of commissioning within the Early Help Practices. As a Trust, the organisation will be able to attract both internal and external investment to implement new evidence based programmes and new delivery partnerships. We anticipate measuring: the experience of the child and family (appreciative enquiry), the journey of the child and family and extent of involvement as consumer and co-producer, the impact and value of devolving budgets, numbers of children entering tiers three and four services (including children looked after), and the cost of staff training and development within a new culture or working. We would also seek to measure practitioner satisfaction with a new model of working and can measure the resultant impact on recruitment and quality of practice. We believe that apart from the more expedient access to help for children and families, those public services forming the Trust will see less duplication of resource and less time and resource used in multiple assessments, threshold activity and repeat demand, thereby stemming the flow.**

**2.6 Why do you believe your solution can achieve the level of change you describe above? (200 words)**

*What evidence do you have from your own work or from elsewhere to suggest that your innovation will work? If you have already been testing your innovation you should have evidence that it works; if you haven't you should have a compelling rationale that draws on relevant evidence. Evidence can range for example from reports of the views of those you have helped, to academic study evidence.*

**The Community Hub concept is already a workstream within the Pioneer project, with an established community partnership, Health and Neighbourhood Development (HAND) encompassing community centres, leaders, the Community Development Trust, Public Health, CCG, Torbay Council and the Police. This is actively driving social productivity, building on the strengths of our communities to develop local provision alongside resources within the public sector partnership. HAND have signed to implement 'step-in' services, which we have co-designed with parent users of services to enable buddying and support at a community level, and intended also for use as step-down from higher level public sector-delivered services. Our parent/community questionnaires evidence that local, GP-style access to service is the preferred way of accessing help, and lessons from Serious Case Reviews**

continually point to the need for improved information sharing and communication. National examples of services co-locating around neighbourhoods are: Wiltshire's 'campuses' programme co-designed with local communities, Mendip's public service hub with frontline services – operating as one-stop-shop models. Our proposal goes further than this, developing the Open Public Services reform programme to create an organisation with its own legal framework, able to devolve delivery budgets within an Early Help/social work Practices model co-produced by the community with real potential for budget savings (eg Nesta April 2013).

#### **2.7 Scaling your solution (200 words)**

*Why do you think your innovation has the potential to transform the system in which it will be implemented? What would you do to help make this happen? What potential do you think it has to work at a bigger scale (through extending the reach of, replicating or by others adopting and adapting your solution)?*

The innovation will develop a Public Services Trust with the transformative legal and philosophical capability required to integrate the children's workforce across the range of disciplines. To support this, a clear vision and business/finance plan will be put in place to articulate key principles, a common set of metrics will capture outcomes data, and an outcomes-based commissioning strategy will be implemented by the Trust to enable the Hub Practices to develop solutions at a neighbourhood population level. The innovation, supported by an independent evaluation, will provide a testing ground to overcome historical barriers such as information sharing, professional cultures and paradigms, performance frameworks and resource allocation. Early Help Hub Practices will be implemented in year one, phasing into a model to operate across all levels of need in the second year. The transformative potential here is two-fold: top-down and bottom up. Enthusiasm amongst public services to integrate will initiate better outcomes and greater satisfaction for those using provision and will evolve complementary practice models into overlapping systems; for children, families and communities, resilience reveals latent strengths and skills and co-production fine-tunes commissioning and personalisation. For practitioners, the model enables the application of professional skills within a framework that shares an understanding and responsibility for both strengths and risks.

#### **2.8 Informing the transformation of the social care system (200 words)**

*How will the activities you propose inform change in cultures, structures and ways of working in the wider social care system?*

The proposed model will work with the social economy of the family and neighbourhood, understanding the strengths and weaknesses rather than 'treating' a problem in a professionally led contract. The public services Trust will look beyond departmental constraints and will seek innovative ways to deliver benefit that may be very locally-targeted and may focus on a broader current health, social or economic risk. The culture will be of partnership to bring in assets and initiatives from both private, public and the community and voluntary sector, and this will both benefit the wider social care system through stronger and deeper resources and networks, and influence new structures to integrate the tiers of service to manage risk within a community structure. The level of integration envisaged will require an ICT solution to align the separate systems currently in place, and a whole systems change will break down misinformation around information governance, developing confident inter-agency working. The cultural change at a strategic level and for professionals in recognising the value of interventions which they do not deliver and which involve co-production will broaden the evidence base of protective factors and create a more satisfactory culture of engagement and communication that will reduce demand.

### **Section 3**

#### **Making it happen**

**3.1 Who will lead and deliver the work? (150 words)**

*Name the key person or people in the team. Please include job titles if applicable, list what role people would play in developing and delivering your innovation, and mention any relevant experience or knowledge they bring.*

The work will be led by the new and agreed Strategic Safeguarding lead, a shared post between Health and Social Care – the post will be in place in six months time. Others involved are Rebecka Foweracker from the CCG who is the lead for Community Hubs within the Pioneer Bid, currently working with the communities and strategic partners; also Richard Williams, the Director of Children’s Services whose vision is leading the development of a Public Services Trust and who has led Torbay Children’s Services out of intervention; Siobhan Grady, Head of Joint Commissioning Torbay and South Devon CCG is leading on the ICO for the JoinedUp Board, bringing the experience from this initiative. We will bring in a transformation team comprised of Enablers with advanced experience within their disciplines to drive the project from different angles: Health, Social Care, Community, and Governance and IT; also a Project manager and business support.

**3.2 Who needs to say ‘yes’ to make your solution happen? (100 words)**

*What permissions – formal and informal – do you need? Do you have these permissions already or if not how do you think you could get them? At this stage you may not have all the permissions you need, but you should have grounds for confidence that you will get them.*

Agreement to take this forward has been given by the Chief Executive of the Local Authority, the Chief Executive of the Hospital, the Director of Public Health, the Health and Wellbeing Board, the Police Lead and the Board of the Community Development Trust. In addition, the elected members and MP are aware of the proposal and will lobby for its successful implementation.

**3.3 Who else will you need or want to engage in the development and/or implementation of your solution? (100 words)**

Blue Light services need to be involved, and children, families and young people need to be involved in both development and implementation. Involvement by Education will be critical due to their central role in supporting and providing community-based services. The LIST will be part of the solution, and we wish to engage an independent, academic evaluation and would seek to commission business and finance support (discussion held with current commissioned service through Social Finance).

**3.4 What are the biggest challenges for, risks to or negative unintended consequences from your solution and what might you do to overcome or mitigate them? (200 words)**

There are risks and challenges involved in establishing a new model of social work delivery. Not least, while the Social Care Practices Working Group explored options for piloting social work practices in 2007, an evaluation in 2012 found that devolving budgets and commissioning remained problematic, and the potential to create a further tier of bureaucracy is significant, creating a resource drain rather than savings. Interagency working may continue to cause difficulties because the language, culture, disciplines and performance frameworks are deeply engrained, and the management of risk safely within the community is difficult without absolutely holding the reins. The trust required to create transformation may also take longer than we anticipate. All of these risks also point to inspection frameworks that will punish any uncertainty and anything not embedded with poor inspection results, potentially further destabilising workforces and political support. To mitigate these risks, we will request funding to add transformation capacity because this will enable work to continue as normal within existing structures. We will ensure a significant investment in workforce development for incremental change, and will align the project within existing governance frameworks, part of the journey we are already on, so that it does not add bureaucracy.

**3.5 What impact could any disruption associated with implementing your solution have on**

**the quality of service and outcomes for children during the transition period? What are your early thoughts on how to manage this? (200 words)**

Disruption is likely to be around understanding governance arrangements, uncertainty in service and practice models and in the management of devolved budgets. A project plan with agreed responsibilities and accountability will need to be developed with a clear communication and information plan. Allocation of resources at the point of implementation will need to be informed by JSNA data and budget plans held by Partners. Clear pathways will need to show where and how children access help to prevent confusion and some agreed integrated working models need to be in place to give confidence to those involved in delivery.

**3.6 How much will it cost? (150 words)**

*What are your best estimates on the overall costs needed over the next year, and what will your solution cost annually beyond that? (At this stage we're only asking for an overall figure. If we invite you to develop a proposal we will ask you for a detailed budget).*

**We estimate costs to be approximately £900,000 over the two year transformation phase of the project. This comprises the Project Manager, the Enablers and Business Support, the evaluation and the business and finance support as well as a staff development budget, ICT investment and some capital budget to facilitate integration. Beyond the transformation period, the costs will reduce to £150,000 based on investment in ongoing staff development and infrastructure support. Service management and delivery will subsequently come through the re-design of services.**

**3.7 What resources do you intend to leverage to deliver your solution? (150 words)**

*From your own resources or via partners and other stakeholders.*

**We have the commitment of the shared Safeguarding Lead post to bring into this initiative and we already have resources committed to developing the framework we wish to implement. We have invested in business and finance planning to develop a five-year plan with projects already staffed within this, such as the development of systemic therapeutic services, commissioning different placement types; we also have resources in place for the Community Hub, and ICO and have the LIST established and ready to go. These resource commitments are already made and we have the ideological commitment of Partners through the journey that we have already begun to swiftly progress the solution.**

**3.8 What don't you know yet? (200 words)**

*It's ok not to know everything at this stage. What things do you still need to work out about your proposal and/or how to make it happen? What might you need support to do this?*

**We are not clear on timescales for the ICO. We are not entirely clear around the costs of the model post-transformation and what a new model will mean in terms of workforce and recruitment and enthusiasm for a new model of practice. On a macro level, we don't know the local and national political landscape beyond May nor the extent of budget reductions and capacity then of the public sector to transform. Economic changes may impact more deeply on our community to increase the need for help across the levels, and the capacity of communities to contribute may be impacted by this and a growing lethargy. We do not know whether this level of ambition will be viewed as dangerous across our inspection frameworks. We need to consider the impact of these uncertainties and develop a project risk tool informed by clear information and business processes.**

**3.9 What could you do to sustain the impact of your solution and to financially sustain the activity? (200 words)**

*What makes you confident that your innovation can have a sustained impact over many years? How will you make sure it becomes mainstream practice rather than peripheral to children's services in the areas in which you are operating? How do you think the activity could be funded once any support from the innovation programme ceases? What would you do to ensure this is the case?*

**This is not a peripheral programme attached to a service, but a significant structural change that can reform public sector services to bring them alongside the communities they serve.**

The request for pump priming will build the new frameworks and change workforce cultures as well as the culture of those requesting services, and an ongoing staff development programme that includes the community and voluntary sector will enable and embed new relationships and transactions. Sustaining this new model will require a clear business plan (within requested support budget) with financial forecasts identifying the costs against outcomes and a complementary outcomes based commissioning plan. With the new Public Service Trust operating within the LIST framework, it will be possible to explore the use of social investment to fund those activities that the business plan identifies as critical to stemming flow and reducing demand. We believe that the adoption of an overarching set of performance metrics will create a single accountable framework, and that this will inform the financial commitment across the partnership – this would seek to reduce as the impact of a whole system service is felt. The independent evaluation will include a cost benefit analysis to test the model in financial terms.

## Section 4

### Summary

#### 4.1 Summary of your proposal (250 words)

*Please summarise what you want to do and why, and what difference you think it can make and why.*

The proposal is seeking investment to establish a Public Service Trust with a unique legal and operational framework. This journey began with the ICO and our Pioneer status, with the planned establishment of a children's community hub, and using the LIST to ensure clear single governance arrangements. The Trust will devolve budgets for population based commissioning to the new Hub Practices, based on the requirement to deliver against a set of outcomes. As well as integrating public sector structures and delivery arrangements, the programme will bring about cultural change in the workforce and in the community using a strengths-based model of working that empowers communities and individuals and builds their resilience. The difference will be in perception, in the landscape of help and its constituent parts, and we expect this to lead to reduced demand, improved outcomes, greater satisfaction for those delivering and receiving services, and reduced cost. In terms of models of social work, we are first establishing Early Help/Hub practices (Le Grand's concept) with scope to bring in more local commissioning through this set up. We are then considering how this model may enable social workers to work in a more people-centred way, adding to the practices to provide services across all levels of need within a model that we may call 'Reclaiming Childhood' as opposed to Reclaiming Social Work (Trowler), because of our ambition to place children, not services at the centre, creating responsive, affordable and personalised provision to meet need and achieve sustainable outcomes.

#### 4.2 What do you want to get out of participating in this programme? (150 words)

This is an opportunity to realise ground-breaking change in public sector delivery to bring lasting benefits to our children and families, and we want to be at the forefront of this. The programme will teach us how to listen to our communities better, bringing a different landscape of commissioning and greater satisfaction in sourcing and engaging in solutions, and it will teach us to work together. We need to reduce overall spend, and anticipate that the project will deliver this both through reducing demand and embedding more effective and efficient models of working.

Please turn the page for details on where to submit the form.

## Submitting the form

### **By submitting this expression of interest form you commit to:**

- Working openly with DfE and our programme delivery and evaluation partners.
- Being open to working in new ways and being supported to develop the skills and capacity to do so. If you are invited to develop a full proposal this will include working with an innovation coach and other technical experts.
- If your proposal is funded, participating in a rigorous learning process, including a robust evaluation and sharing learning from your process and innovation publicly.

If your expression of interest is unsuccessful, you will receive brief feedback in relation to the programme criteria. Due to capacity, we will be unable to share more detailed feedback.

Please submit this form by email to: [innovation@springconsortium.com](mailto:innovation@springconsortium.com)