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**Report of Rachel Farnham, Head of Children's Social Care, DCC**

**Electoral division(s) affected:**

Countywide

**Purpose of the Report**

- 1 This report provides an update on the progress for the Pre-birth Intervention Service (PBIS).

**Executive summary**

- 2 The Pre-birth Intervention Service (PBIS) was re-established in Durham's Families First (FF) Service in May 2018. The model and ambition are to enable babies to remain with their parents, or at least within the birth family where it is safe to do so. This is achieved by completing as much work as possible before the baby is born and by ensuring that the parents receive intensive support to help them to achieve sustainable change. Where this is not in the best interests of the child, then the ambition is to ensure that the baby is permanently placed with alternative carers as soon as is possible after birth and to reduce the number of carers the child experiences.
- 3 Latest Office for National Statistics data identifies that just under 1% of the County Durham population are aged under 1. More than 9% of the total children open to Durham Children Social Care (DCSC) are under one. 22% of all children that come into our care are under 1, the next largest group is 16-year-olds at 9%.
- 4 Of contacts into First Contact between the period of April 2023 and March 2024, it is noted that 40% of unborn babies and 34% of under ones go straight to a statutory referral. This is in comparison to 21% of the overall contacts of other age groups. A higher proportion of unborn and under one contacts are also triaged in the Multi Agency Safeguarding Hub (MASH) than for other age groups.
- 5 A higher proportion of children who are and become children in our care (CiC) in Durham are aged under one than in comparators. In 2020/21, Durham had the 5<sup>th</sup> highest under one CiC starts in the country with 29% of all CiC starts in Durham. In 2021/22, Durham dropped to 23<sup>rd</sup>

highest CiC under ones in the country, which was 24% of all CiC starts in Durham. This has reduced again in 2022/23 to 29<sup>th</sup> highest in the country, which is 21% of all CiC starts in Durham. However, this was still higher than statistical neighbour (19%), regional (18%) and national (17%) comparators.

## **Recommendations**

- 6 Members of the Corporate Parenting Panel are requested to note the context of this report.

## **Background**

- 7 A review of the PBIS criteria was undertaken in 2020, it became clear that it was difficult to implement the intervention due to the level of complexities of parents' needs and circumstances. A high proportion of the cases resulted in care proceedings and babies being placed permanently outside of parental care. The review demonstrated the need to amend the criteria, which enabled the team to have a renewed focus and to target their intervention towards those parents who would benefit from intensive support and intervention.
- 8 The criteria is as follows:
  - (a) Teenage mothers under 16 who are still in full time education;
  - (b) All active care leavers up to the age of 25, who are currently permanently resident in Durham, and where the unborn meets the requirement for a statutory pre-birth assessment;
  - (c) Parents who have had a previous child removed through care proceedings, where there is evidence of some positive change of circumstances.
- 9 For a referral to be accepted into the team, the referral must be made prior to 21 weeks gestation, and meaningful consent must have been given by the parents.
- 10 Social Workers work alongside Early Help practitioners from the One Point Service. Together they deliver intensive assessment and support, with the aim of enabling parents to safely care for their children or gather evidence to make timely decisions in relation to permanence plans. Where children remain in the care of their parents, they have established relationships with professionals based within local Children's Centres to ensure that support can be sustained and readily accessible to parents.
- 11 In the last year, the team have worked hard to develop new pathways so that individual assessments are tailored to the needs of the family rather than a one size fits all assessment. The pathways are tailored to meet learning needs, young parents and one for previous proceedings.

## **Outcomes for Children**

- 12 The team have worked with a total of 96 unborn/ children within the last year. This is an increase from the previous year due to the expansion of the team. There were 7 families which did not meet the criteria however were accepted due to level of complexity. There were 10 families where parents were under the age of 18, some of which were under 16 of these 5 were young people in our care. There were 27 care experienced

young people and living in Durham. There were 44 families who had had a child permanently removed from their care following care proceedings, 3 of those were care experienced parents under the age of 25.

- 13 Of the 96 unborn/ children, 41 had at some point been subject to care proceedings. Of those that have concluded within the last year, 9 children have plans of adoption, 8 were made subject to subject Care Orders, 8 subject to Supervision Orders and 4 children subject to Special Guardianship Orders. There are currently 19 children subject to care proceedings ongoing.
- 14 There were 14 children that were supported under child protection plans and Public Law Outline, which did not progress to care proceedings. There were twelve unborn/ children were subject to child in need plans. One moved out of area. The remainder of children are unborn with assessments still ongoing.
- 15 Of the children with care experienced parents who had no previous children removed, 10 children (90.9%) are currently in the care of one or both parents. Of the children with young parents, 77.78 % were supported to remain in the care of parents, 1 child is currently subject to care proceedings with assessments ongoing, 1 child was placed for adoption after all potential alternatives were explored and there are 2 more unborn.
- 16 The team have also worked with 3 very poorly children over the course of the last year which has at times taken a considerable emotional impact on not only the families, but the workers involved. The team have shown absolute dedication to these children and to ensuring their needs are met even when this has meant working weekends or outside of working hours.

## **Two children's story**

- 17 Below describes the events of two families' journeys through the PBIS. This demonstrates the commitment and dedication of the practitioners within the team. It also demonstrates the inter-face with other parts of children's services.

### **Baby T and Baby K**

18. Baby T's family were referred to the PBIS due to his mum being under the age of 16 when she became pregnant. She had been known to Children Services throughout her own childhood and was herself subject to care proceedings when she was a toddler. The baby's father was also under the age of 18 and known difficulties with substance

misuse. There were also concerns that Mum's living arrangements were unstable and that extended family members could pose a risk to her.

19. Baby T and his parents were referred to Young Parents supported accommodation which they moved into just after his birth and a significant amount of parenting work was completed around basic care. The family were supported under a child protection plan and Public Law Outline, this was to ensure that there was a structured level of support in place and that Baby T's welfare remained the primary consideration.
20. Following some difficulties within parent's relationship Baby T's father moved out. Mum continued to have intensive support and she provide Baby T with good enough care. Around this time Mum fell pregnant and was supported to prepare for the birth of Baby K.
21. Having had the extended support from the PBIS for around 2 years, Baby T and Baby K were stepped down from child protection and the family were supported under child in need for a further period before being stepped down to early help.

#### Baby D

22. Baby D's mum has had previous children removed due to concerns around neglect, domestic abuse and substance misuse. Mum built a good relationship with the unborn baby's social worker during pregnancy. Given the previous worries it was necessary for the courts oversight and care proceedings were issued. Baby D remained in the mother's care throughout and proceedings concluded with no order. The judge noted that whilst proceedings had been necessary, this was a positive outcome for all.
23. Baby D remained open to the team for support and there was a brief decline which led to baby D being placed on a Child Protection Plan. However, with good relationship-based practice, Baby D's mum was supported to return to her previous levels of care and Baby D has been stepped down from a child protection for some time.
24. Baby D is now open as a child in need and has been receiving consistent care for some time. Baby D has remained open for some emotional support to mother who has a limited support network. The care remains of a good standard, and it is hoped that the Baby D will close to children's services shortly and stepping down to early help.

## **Hope Boxes**

- 25 Hope Boxes are provided to mothers when the plan is removal at birth to start early life story work and to provide the mothers with some comfort/hope during the early stages of separation.
- 26 The boxes are provided to both the mother and child. It has two comforters within it so the smell of the mother and baby can be added to the smell of one comforter each and then exchanged. A handprint kit and wooden milestones to record birth weight, time etc are also included to allow early milestones to be recorded and memories to be created at an early stage. Life story worksheets designed by the life story coordinator are also included to allow this to start at the earliest opportunity.
- 27 Feedback from the parents has been largely positive. Some parents have provided feedback regarding the design of the box and the team are looking for something a little more suitable.
- 28 Hope boxes are now being increasingly used Families First teams to ensure early child removed from their parent's care from birth.

## **Real Care babies**

- 29 It is recognised that one of the difficulties of completing pre-birth assessments, is that it is challenging to assess the ability of a parent to meet a child's need when the child is not born. It is also hard to demonstrate to parents, particularly first-time and young parents, the needs of such young children in a way that gives them a realistic expectation of the challenges.
- 30 We introduced 'real care' babies some time ago and these have been used to assist in completing assessments looking at parents' ability to meet the needs of their baby. The recordings tell us about parents' timeliness of responses, the ability of the parent to meet the needs, if any abusive behaviour such as shaking occurred and also if the doll was left for too long without stimulation or in inappropriate temperatures.
- 31 Real care babies have been used with a number of families and the information has then been used to inform parenting interventions. For example, some parents have had difficulties with consistent head support which has led to an increased focus on this during parenting work. They have been of particular use for younger parents or parents with additional learning needs, as a way to practice prior to the arrival of the baby.

## Skills and partnership working

- 32 The Nuffield Foundation has launched a number of recent research documents which outlined a number of recommendations and guidance for social work practice when working with expecting mothers and parents with learning disabilities. The team have used the guidance developed by the Nuffield alongside the Good Practice Guidance to develop new assessment pathways which will be submitted for approval soon and hopefully implemented across all the Families First social work teams. The team have worked with early help colleagues to develop the parenting intervention and parenting workers are now in the process of being trained.
- 33 There are 8 social workers, the SWC and the Team Manager who are trained in PAMS or/ and ParentAssess which are tools to take into account parents who have some level of learning difficulties or a learning disability, which mean that they can be assessed and supported by using practical demonstrations and visual aids. There have been 23 PAMS/ ParentAssess assessments completed within the team, which if commissioned would have been a cost to the council in excess of £69,000.
- 34 There continues to be a dedicated worker from the Family Group Conference (FGC) service aligned to the PBIS. This helps to increase the parent's sense of control and ensures that family networks are central to the safety plan from an early stage. The FGC also identify alternative carers to be identified and assessed when it is not safe for a child be in parents' care following birth.
- 35 The PBIS works closely with Future Hope who work with women which have had a child permanently removed from their care. The team proactively work with Future Hope to ensure that the most vulnerable mothers are prioritised.
- 36 The PBIS are a key agency within the Pre-Birth and Under One Delivery group. The purpose of the group is to provide strategic and operational oversight of integrated pathways of support across universal, targeted safeguarding and specialist services to ensure their safety and wellbeing. The vision is for vulnerable unborn babies and babies under 1 year old to be identified at the earliest opportunity and their parents/carers provided with the best possible coordinated help and support to care for their babies safely. Where they are unable to, a timely and robust safeguarding response is in place.
- 37 The PBIS have a lead role in the regional pre-birth group and a regional group on working with parents with additional needs This provides an opportunity to share good practice and consistency across the service.

## What others think

Parents views:

38 *It means so much. I can't thank all of you enough for actually giving me the chance. It's been the longest hardest journey of my life, but everything I've been through has totally been worth it. I will take very good care of M, provide her with all her needs, keep her safe, and I guarantee she will always have love, and appropriate love, from appropriate & responsible adults. And I will always reach out for help too. Thank-You for all the support you've shown us both in all the different ways you have. Will you also thank (TM) and all the other faces we've seen over these last couple of years too please.*

39 Some professionals:

*Barrister: 'H (social worker) was called to give evidence and she gave very compelling evidence, an excellent witness.*

*Foster Carer: 'I'd like to thank you for all your hard work and concern for both R and C - and for sending us the lovely N (social worker)! We feel the transition home has been an easy process from our point of view, the amount of supervision and support I know their parents have had over this time has taken away the responsibility that J and I would otherwise have felt so heavily (and have in a past situation). So a big thank you to you and your team.*

*Guardian: Mammy also worked really well with your Social Worker, called B. B was a really wonderful social worker to you and to your mammy. I really think he made a big difference to mammy too."*

## What's next

- 40 The team are embedding and testing the new pathways within their own practice to ensure that they are ready for roll out across Families First
- 41 The team are continuing to work to develop the pre and post birth parenting work that will be completed by early help as well as family workers within Families First.
- 42 There will be an increased focus on encouraging engagement with the Family Hubs.
- 43 Work is being completed to design a new pre-birth and post-birth assessment which will allow for holistic and well-rounded assessment and timely care planning using the Signs of Safety model.



- 44 The PBIS are supporting the role of pre-birth training across families first team, this will have a particular focus on the Nuffield recommendations and Good Practice Guidance.
- 45 The PBIS are compiling a pre-birth tool kit, this will provide assessment guidance, worksheets and tools for practitioners across families first.

## **Conclusion**

- 46 The families that the pre-birth teamwork with is high in complexity and require a significant amount of work and adaptation around the families. This can often include weekend and out of hours visits and support, adaptation of work completed and out of the box thinking. The experience of the last few years has been pulled together along with the more recent guidance to pull together the pre birth pathways to try and improve planning within the team and across children's service.
- 47 The team continues to have a number of highly experienced and dedicated social workers who have dealt with a significant number of emotional situations but dealt with it with resilience. To try and build further resilience links have been made with the Full Circle team to manage the stresses of working with such vulnerable and at times unwell children. The team has been largely stable and works well together to manage the needs of the children we oversee.
- 48 The report reflects a great deal of positive and effective working. The team are passionate and committed about achieving good outcomes for children.

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## **Appendix 1: Implications**

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### **Legal Implications**

The Children Act 1989 sets out the legal requirement on the local authority to support children in need and to carry out safeguarding investigations and where necessary, issue care proceedings to ensure that children are protected from harm.

### **Finance**

No implications.

### **Consultation**

No implications.

### **Equality and Diversity / Public Sector Equality Duty**

No implications.

### **Climate Change**

No implications.

### **Human Rights**

No implications.

### **Crime and Disorder**

No implications.

### **Staffing**

No implications.

### **Accommodation**

No implications.

### **Risk**

No implications.

### **Procurement**

No implications.