## **Corporate Parenting Panel**

#### 10 November 2023

## **Pre-Birth Intervention Update**



# Report of Rachel Farnham, Head of Children's Social Care, Children and Young People's Services, Durham County Council

# Electoral division(s) affected:

Countywide

### **Purpose of the Report**

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

## **Executive summary**

- 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.
- Office for National Statistics data identifies that approximately 1% of the County Durham population are aged under 1. More than 8% of the total children open to Durham Children Social Care (DCSC) are under one. 20% of all children that come into our care are under 1, the next largest group is 16-year-olds at 9%.
- Of contacts into First Contact between the period of June 2022 and June 2023, it is noted that 42% of unborn born babies and 36% 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 MASH than for other age groups.
- 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 23rd

highest CiC under ones in the country, which was 24% of all CiC starts in Durham. This has reduced again to 50<sup>th</sup> highest in the country, which is 21% of all CiC starts in Durham.

#### Recommendations

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

## **Background**

- 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:
  - i. Teenage mothers under 16 who are still in full time education.
  - ii. 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.
  - iii. Parents who have had a previous child removed through care proceedings, where there is evidence of some positive change of circumstances.
  - iv. Parents with a diagnosed learning disability.
- 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.
- 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.

#### **Outcomes for Children**

In the 12 months leading up to May 2023 the PBIS have worked with 85 children. These can be broken down into 12 children where one or both parents were care experienced, 41 children whose parents had previously been involved in proceedings where there is some sign of positive change, 9 children whose parents were under 16 and remained in full time education and 22 children that did not meet the current criteria but were accepted due to capacity issues across the service/service need. 2 children had parents who were both care experienced and had previously had children removed.

- Of those 85 children, 24 were subject to care proceedings that had concluded. There were 10 adoption orders (including 2 foster to adopt), 5 special guardianship Orders (SGOs), 3 supervision orders and five care orders including two which needed longer term support in a mother and baby placement, and one with no order. In May 2023 there were fourteen sets of Care proceedings that were ongoing, with it being expected that at least 4 more will be issued shortly.
- 20 specialist learning disability assessments of one or both parents were completed within the team, 3 were outsourced due to the need for expert assessment as a result of other needs i.e. parents with an additional disability. Of the parents with Learning disabilities, two of the parents were care experienced, two were care leavers with previous experience of proceedings, two were young parents, twelve had previous experience of care proceedings and the other five were parents who did not meet the usual criteria.
- Of the children with care experienced parents who had no previous children removed (8) children 87.5% were supported to have a longterm plan of remaining with one or both parents. Of the children with young parents, 50% were supported to remain in the care of parents, 2 are currently subject to care proceedings so have no determined current plan and the 2 more (siblings) are likely to be issued shortly.

## Two children's story

Below describes the events of two children's 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 S

- Baby S was born unexpectedly early to teenage parents. His gestation was such that survival at times did not appear likely and significant support was provided to the parents by the social work team to ensure they could spend as much time as possible with Baby S. Support was also provided by a Families First team to mother who was a child in her own right. Thankfully despite numerous complications, Baby S survived and was discharged into the care of his mother in a mother and baby foster placement.
- 17 The placement was difficult for the mother as due to Baby S's medical needs the most suitable placement was out of area. Care was taken to adapt the placement as much as possible so that mother still spent time with her own family who provided emotional support and had the chance to complete her GCSEs. Despite this, the placement

- unfortunately could not be maintained as the distance was too great. However, the social worker did not give up and using some extremely skilled Early Help Practitioners, work was undertaken to build Mother's skills away from the placement.
- Through careful negotiation with family members and the assistance of professionals, the outcome of court was positive in that Baby S was made subject to a Care Order with a plan that he would return home to his mother.

#### Baby H

- Baby H's parents did not meet any of the criteria for the prebirth team when the referral was made. However, it was recognised upon receipt of referral that the parents needs were complex and that the needs of the parents would best be met by the Pre Birth team.
- 20 Both of baby H's parents had diagnosed disabilities impacting on communication as well as numerous mental health conditions. Both had previously spent time in mental health wards and there was a history of violence. There was also concern around a potential learning disability for both parents.
- Given the particular disabilities of the parents, it was not felt an assessment could be completed in house and so the team worked to identify an independent social worker and other experts who were qualified to meet the parents' needs. A high level of liaison was also needed between the social worker and other professionals in mental health and adult disability teams to ensure that the needs of the parents and baby were being met during the pregnancy and afterwards. The level of detail was recognised by the allocated barrister for the case who commented that the Local Authority had "been unusually proactive in giving thought to how the parents needs would be met both pre and post birth".
- Initial connected carers assessments had been completed pre birth of both sets of grandparents but due to the level of risk, full assessments were needed before Baby H could be placed into their care.

  Additionally, there were concerns around how Baby H's health had been impacted by his mother's medication and other substance use during pregnancy.
- The parents accepted within the proceedings that they were unable to care for Baby H but following close liaison and work with the Connected Carers Team, Baby H eventually moved from foster care into the care of one of his grandmothers. Given the level of risk posed by the parents, this is initially supported by a Care Order however this is intended to be short term with a plan to discharge within a 12-month period.

### **Hope Boxes**

- 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.
- 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. There has been positive feedback from mothers.

#### **Real Care babies**

- 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.
- 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.

# Skills and partnership working

- 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.
- There are 5 workers in the PBIS who are trained in PAMS or/ and ParentAsess 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 17 PAMS/

ParentAssess assessments completed within the team, which if commissioned would have been a cost to the council in excess of £42,500. There are plans in place to ensure that all staff within the PBIS all have the skills to assess our most vulnerable parents.

- 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.
- The PBIS works closely with Durham Pause who work with women which have had a child permanently removed from their care.
- 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.
- The PBIS have a lead role in the regional pre-birth group. This provides an opportunity to share good practice and consistency across the service.

#### What others think

Parents views:

- I just wanted to say thank you! Thank you for not giving up on me and guiding me towards a better path for me and my beautiful amazing little girl. I know I haven't exactly been easy to work with, but I do appreciate the help you have given me and A. Thank you
- 35 Some professionals

Judge: 'This is a case which reflects extremely well on all those involved with care planning, professionals and the lay parties. My thanks to all those involved in the outcome.....This Local Authority have shown a refreshing willingness to deal with things appropriately....'

Judge: 'I would like to give particular thanks to the Social Worker who provided an exceptionally high quality of social work evidence which

was provided to the court. It was exceptional and made preparation for this hearing much easier. It should be used as a model going forward'.

Foster Carer: 'I would like to take this opportunity to thank everyone involved, of their guidance and support during a very difficult few weeks.... I feel very privileged to have all of your support'.

Foster Carer: 'It was lovely to see N (social worker) on Friday, she found the right words when talking to me and it helped. It was appreciated, as was your support - thank you'.

36 Barrister: 'Can I just say that the social work completed in this case was of a very high standard. We were able to bring matters to a sensitive and appropriate conclusion due to the hard work of DCC and the allocated social worker. I think that H (the social worker) will have a bright future ahead of her'.

## What's next

- It is recognised that there is a great deal of diversity in terms of the parents' needs following the change in the referral criteria. A review has identified the need for 3 pathway and intervention programmes. The PBIS are working with Early Help to develop and implement the new pathways across the service.
- The PBIS are pulling together a pre-birth tool kit, this will provide assessment guidance, worksheets and tools for practitioners across families first.
- 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.

## Conclusion

The report reflects a great deal of positive and effective working. The team are passionate and committed about achieving good outcomes for children.

# **Background papers**

None

#### Other useful documents

None

#### **Authors**

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# **Appendix 1: Implications**

# **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.