Hope For Children

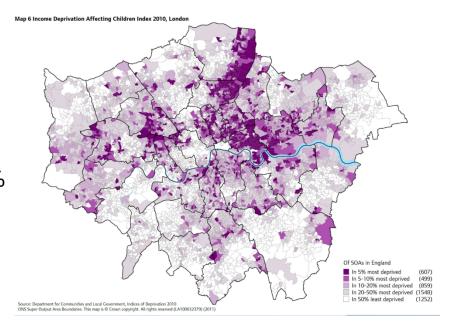
London Borough of Merton Pilot: Strategic & Practice Implications

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Merton the place

- Outer London borough
- Total population of 200,543 Census 2011).
- 47,499 children and young people aged 0-19
- 0-19 year olds forecast to increase by 3,180 (7%) by 2017, within which we forecast a 20% increase of children aged 5 to 9 (2,270).
- Have already seen a 39% net increase of births over the last ten years (2,535 births in 2002 rising to 3,521 in 2010).



- 39 Super Output Areas which amongst the 30% most deprived areas across England for children.
- 45% of Merton school pupils are living in an area of deprivation (30% most deprived, IDACI 2010).
- Since 2010 we have seen an increase of 23% of children who are eligible for free school meals (2010, 2881 FSM children, 2014, 3548 FSM children).
- Alongside other demographic factors this changes have placed additional demand on all children's services.

Children's Trust Values

- Keeping children and young person at the heart of our work.
- Promoting a culture that values children and young people.
- Equality, equity, inclusion and valuing diversity judged on our impact on the most vulnerable.
- Local accountability and partnership.
- Making a difference quality assurance and continuous improvement.
- Promoting a learning culture.



Hope For Children- Why we chose to do it

- HFC provided a fit for our values and commitment to improve outcomes
- Aligned with Munro Changes
- Rooted in strong Evidence based approaches
- Underpinned by an approach which provides a theoretical basis for practice
- Staff needed an approach that connects with phasing process of intervention
- The approach is rooted in systemic and relationship oriented practice



What we had to do

- Engagement of Director and the MSCB
- Provision of additional Social Care resources
- Commissioning of clinical support for practitioners
- Incorporate concerns and views of frontline managers
- Develop local leadership
- Administer the programme
- Maintain staff commitment
- Ensure there is effective communication about the programme



What has gone well

- Social workers and other practitioners have really welcomed the opportunity to develop an approach
- Availability of clinical supervision has been received positively
- Clinical supervision is essential to the programme
- Some practitioners have integrated the approach into their cases and they have generalised to other work
- The fit of the approach to practice is strong



Challenges-What we have learned

- Project management and diffused leadership need to be managed throughout the programme
- A year is not enough
- Risk management is critical
- Pragmatic challenges of caseloads, time and staff turnover etc need to be managed
- Practitioners need to be better supported managerially in implementation of HFC
- For Social care practitioners the approach takes time and needs
- Adaptation of organisational culture to support effective practice is a challenge
- Staff engagement



Where do we go from here?

- Review position in next 2-3 months
- Pilot ends in February
- Look at development of approach beyond February

