REVOLVING DOOR

PART 1: Are vulnerable children being overlooked?
From before they are born until they are into their twenties, we help disadvantaged children across the UK. We do it through practical services and programmes that are proven to work.

We have spent over a century working on the front line, developing services that set a lead for others to follow. We work in partnership with other charities, local authorities and health services, and are supported by a broad range of donors, campaigners, experts and specialists.

We help children by intervening early to stop neglect and abuse. We work with parents to keep families together. We influence policy and advocate for change. Our 7,000 staff and volunteers run over 600 services, from family centres to intensive support services, support for disabled children, youth work to finding loving foster homes. Together, we make a difference to the lives of 370,000, children, young people and families every year.
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“Our ambition at Action for Children is to get the right help for children and their families - but the fact is, we can’t help those we don’t know about. We’re putting a spotlight on the estimated 140,000 vulnerable children in England falling through the cracks in the system. The Government must take action now to tackle the root causes of child abuse, neglect and disadvantage – not just the symptoms. This is both urgent and achievable.”

- Sir Tony Hawkhead, Chief Executive
The problem

We are concerned that some of the most vulnerable children in society are not getting the support they need. Our evidence raises questions about the availability of early help provision for an estimated 140,000 children.¹

These children have needs that are too great for schools, health or other universal services to meet on their own, but they are not eligible for support from statutory social care services. They have been referred to children’s social care services because of concerns around domestic violence, parental mental health, neglect and physical abuse (among others).

If assessment does not lead to appropriate support for a child, then we miss an opportunity to act early. Some children may be stuck in a ‘revolving door’ into children’s services, repeatedly referred and assessed but not receiving help. This risks children undergoing “prolonged periods of unmet needs and recurrent episodes of abuse, neglect [or] maltreatment”¹ before they receive help.

Addressing the financial pressures on local authorities and strengthening the statutory framework for early help would go a long way to meeting the needs of these children. It has to be clear who should do what, when, to make sure children get the right help at the right time.

Policy context

Now is an important time to put the spotlight on how we support vulnerable children who do not reach the threshold for social care. Ofsted recently identified assessing risks and taking action to help and protect children as “one of the greatest challenges and one of the hardest things to get right” for local authorities.² A National Audit Office (NAO) review suggests that the quality of help and protection for children is inconsistent across the country. The NAO suggests that this is caused by issues with the system rather than local failure.³

We know there are record numbers of children needing help and protection while local authority budgets are increasingly stretched. This means that resources for providing support early are under pressure, making it harder for local authorities and their partners to fulfil this role.

However, despite these pressures, there are also opportunities to improve support for children at this time. The new Government has signalled that it will introduce reforms on mental health and legislation on domestic violence, both issues which affect thousands of children around the country. It has also indicated it is reviewing section 17 of the Children Act 1989. This review includes looking at what more support Children in Need might require and could be an opportunity to consider whether section 17 could be a vehicle to provide support for children who do not meet statutory thresholds.

The Department for Education is aware of the children we are focusing on; the 2016 policy paper Putting Children First acknowledges the need to rethink whether the support currently given to children “on the edge of the social care system” is effective.⁴ The Children’s Social Care Innovation Programme recently announced four targeted support projects⁵ which explore new models of providing support to children whose “needs are considered serious enough to warrant a social work assessment, but do not go on to become in need”.⁶ The Department is also aware of the Revolving Door effect. It recently published research, which found that over half of children referred to children’s services in 2010-11 were re-referred at least once by 2016.⁷ This indicates that problems persisted for 50% of children, and they were referred back to children’s services multiple times by professionals concerned about them.

Similarly, the Children’s Commissioner’s recent work on vulnerable children highlights those that are hidden or invisible in official statistics. This includes “children not meeting the threshold for social worker intervention” as one of 32 key groups of vulnerable children.⁸

¹See appendix 2 for more information on the methodology we used to estimate this figure.
Another key opportunity relates to the Children and Social Work Act (CSWA), which gained Royal Assent in early 2017. Under the CSWA, the local authority, health and police must make arrangements to work together “for the purpose of safeguarding and promoting the welfare of children in the area.” How these new arrangements are designed and implemented will have significant impact on the safety and wellbeing of children and young people. The CSWA regulations offer an opportunity to improve how organisations support the children and families we are focussing on here, whose needs are below statutory thresholds.

We know that there are high numbers of children experiencing neglect whose needs do not meet the threshold for statutory support and that neglect can have a cumulative impact on children’s mental and physical health. We cannot afford to “only focus on those cases reaching the threshold for statutory intervention” but must take a wider view and respond to children below the threshold as well.

“Let’s tackle it. We’re involved, let’s tackle it once and for all. Let’s not keep going over, and backwards, and to and fro, let’s tackle it once and for all, first and foremost, do it… It just doesn’t make sense not to.”

Local authority staff member

**Definitions**

When we use the terms “statutory system” or “statutory support” in this report, we are referring to support required under legislation. This includes support for children in need, child protection and care for looked after children.

“Children in need”. Under section 17 of the 1989 Children Act, local authorities are required to ensure that services are provided for children who are deemed to be ‘in need’. This means children who need services to achieve or maintain a reasonable level of health or development or who are disabled. Setting the threshold at which children become “in need” has always been controversial.

“Child Protection” refers to measures taken to protect children who are not safe. The threshold for child protection is when children are, or suspected to be, at risk of significant harm. This is outlined in section 47 of the 1989 Children Act.

The term “threshold” refers to a set of criteria that children and families have to meet to access services or support. In most cases a social worker assesses a child to determine if they meet the threshold for statutory support.

“Early help” refers to support for children who do not meet statutory thresholds (i.e. they are not a child in need or at risk of harm). It includes a range of services and support for children and families delivered by various organisations. Statutory Guidance* states that early help should typically include family or parenting programmes, and help for families affected by substance misuse problems and domestic violence.

We use “revolving door” to describe the situation where children are in a cycle of referrals and assessments, but only receive help if their needs escalate to crisis point.

*HM Government (2015). Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children
Who are these children who may not be getting the support they need?

Unlike other populations of vulnerable children, we know who these children are. Each child has had a referral made about them to children’s services which has proceeded to assessment. For example, a teacher makes a referral for a child because they are worried that the child comes to school tired, with poor hygiene and exhibiting signs of neglect. A social worker decides to look into the referral further and undertakes an assessment. This finds that although there are some parenting concerns, the child does not meet the threshold for support as a “child in need” so the case is closed.

Figure one sets out their journey:

In 2016 there were

621,470 referrals to children's social care

571,640 assessments undertaken of children’s needs

401,600 children started an ‘episode of need’

Approximately 157,000 assessments are closed as ‘no further action’

This is the focus of our research. We wanted to find out what types of needs these children have, and most importantly, if they are being helped.

What we did:

- Sent a Freedom of Information (FOI) request to all 152 local authorities in England.
- Held interviews with early help staff members from six different local authorities, of varying size, geographic representation, Ofsted rating and multiple index of deprivation ranking.
- Held interviews with Action for Children staff from six of our family support services. Five of these services were located in local authorities who participated in this research.

All the quotes in this report from local authority and Action for Children staff members are from these interviews. For more information, see Appendix 2.
How many children are affected?

Through our research we found that out of the total number of children whose case is closed after assessment, only 1 in 4 children can be confirmed as referred to early help services. Overall, we estimate that there are **140,000 children** who do not meet the threshold for statutory support and are not referred to early help after their case is closed. This raises questions about the availability of early help support for children and families whose case is closed post assessment.

**We asked local authorities:**
- How many children they had whose case was closed after assessment
- Whether these children were referred to early help after their case was closed

Total number of children across country whose case was closed after assessment: **184,500 (rounded to nearest hundred)**

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*This figure is an estimate. It may not capture children who were receiving early help prior to their referral. For information on data quality and methodology, see appendices.*

*This is based on FOI responses from 129 local authorities. It is greater than the number reported in the Department for Education’s Children in Need census for the same year. This is likely due to different methods of data collection and collation (see Appendix 1 for more information).*
Why is this a concern?

We are concerned that without early help, these children are left in limbo. It is positive that children are being identified, and their needs assessed. However, these processes are not useful as an end in themselves but should be tools to direct an appropriate response to the child’s needs. If assessment does not lead to help, then an opportunity to act early is missed. While some of these children may not require additional help, it is likely that many are vulnerable and would benefit from some form of support.

A study by Ofsted found that sometimes, if children did not receive early help after they were assessed as not needing a statutory intervention, their problems got worse, and they needed to be re-referred for social care support. While this finding only related to 84 cases, it could be part of a broader pattern, as 22% of all referrals to children’s services in 2016 were re-referrals within 12 months.

While it relates to a broader group of children than our work, recent research published by the Department for Education reinforces the importance of addressing children’s needs at the first opportunity. Over the six-year period of the study of 498,867 children, 50% were referred back to children’s services, and 8% entered care. Children referred in 2010-11 who did not meet the threshold and whose case did not proceed to assessment during initial screening were 1.34 times more likely to be re-referred than other children. This suggests that when children and families do not receive appropriate support, their problems persist and sometimes escalate. Due to ongoing concerns, professionals refer children back to social care multiple times.

We are exploring the link between children who are assessed but do not meet the threshold for support and the high re-referral rate into children’s social care. We will publish our findings in late 2017.
What types of needs do these children have?

Children are referred to children’s social care services because someone is worried about them. We wanted to understand why people were worried about these children, and what types of needs they have. We found that the most common reasons for referral were domestic violence, neglect, physical abuse, mental health of parent and substance misuse (see figure two).

We asked local authorities what are the three most common reasons for these children to be referred to social care?

![Figure 2 Most Common Needs of Children](image)

- Domestic Violence
- Other*
- Neglect
- Physical abuse
- Mental health problems (parent)
- Substance misuse
- Sexual abuse or CSE
- Antisocial behaviour
- Don’t know
- Disability
- Homelessness

*The ‘other’ category includes information that some local authorities gave on children’s ‘primary need identified at assessment’ rather than the list specified in the FOI question. The most common ‘primary needs at assessment’ were Abuse or Neglect, and Family Dysfunction.

For the Freedom Of Information request, we used a list of common factors for children, drawn from categories used in the Department for Education’s Children in Need Census. These are well recognised as being areas where children can benefit from help at an early stage before problems escalate. Statutory guidance is clear that children who are "in a family circumstance presenting challenges for the child, such as substance abuse, adult mental health problems and domestic violence" may be vulnerable and could benefit from early help.

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*This is based on responses from 107 local authorities. For more information, see Appendix 1.

*Abuse or Neglect refers to children who are in need as a result of, or at risk of, abuse or neglect; also includes children at risk because of domestic violence. Family dysfunction refers to children whose needs primarily arise from living in a family where the parenting capacity is chronically inadequate.
## Common factors affecting children and families

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<td>Domestic violence</td>
<td>Substance misuse</td>
<td>Neglect</td>
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<tr>
<td>Mental health problems (parent)</td>
<td>Antisocial behaviour</td>
<td>Sexual abuse or CSE</td>
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<tr>
<td>Mental health problems (child)</td>
<td>Disability</td>
<td>Physical abuse</td>
<td></td>
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<tr>
<td>Missing</td>
<td>School attendance</td>
<td>Homelessness</td>
<td></td>
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<tr>
<td>Young carer</td>
<td>Other</td>
<td>Don’t know</td>
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Because these children fall outside of the social care system, there is limited information on them. We are undertaking work to better identify the demographics of this group. This will help us to understand their needs and what is happening in their lives. This will be published in late 2017.
How do the FOI results compare to Children in Need?

We compared the Freedom Of Information request results with DfE data on children who are “in need”. We found striking similarities. In 2015-16, 49.6% of Children in Need were affected by domestic violence, 36.6% by mental health, 19.3% by drug misuse, and 17.5% by neglect.15

Policy implications

There is a wide body of evidence on the issues that affect children below statutory thresholds. We have drawn on this to identify opportunities to help them.

Ofsted and the Care Quality Commission’s survey of joint working between adult and children’s services shows the impact on children of parental mental health problems and substance misuse. Parents need support to address their substance misuse or access mental health treatment, and professionals who work with them need to consider the impact of these issues on children. Effective joint working between adult and children’s services can ensure that the right help is in place for families.15 If parents are not supported, there is a risk that children may be neglected or harmed.17

The recently announced mental health reforms and domestic violence legislation offer an opportunity to improve support for the thousands of children living with adults affected by these issues. It is important that these measures recognise the need for support for parents, including addressing barriers that might stop them from accessing the help they need. They should also address the impact of these issues on children.

“If that parent is still consumed by heroin use day in day out, or subject to bad mental health, or offending behaviour, or actually being the partner of somebody who is serving for example a custodial sentence, then their whole functioning is consumed by those adult risk factors. For me you’re never likely to realise a productive outcome for those children. So we have this very professional term, ‘you stick a plaster on it’. And while you continue to just stick a plaster on it; actually it’s not going to completely recover.”

Local authority staff member
By the numbers

30% of children in the UK live in poverty.\(^{18}\)

Children living in the most deprived 10% of neighbourhoods are 10 times more likely to be in care or to have a child protection plan than those in the least deprived.\(^{19}\)

Over 118,000 children are homeless or living in temporary accommodation.\(^{20}\)

1 in 6 adults experience mental ill-health and 30% of these are parents.\(^{21}\)

An estimated 189,119 children live with at least one alcohol dependent adult in the household.\(^{22}\)

Over 80,000 opioid users have children living with them.\(^{23}\)

1 in 5 children have witnessed domestic abuse.\(^{24}\)
By the numbers

The LGA estimates there will be a £2 billion funding gap to support vulnerable children by 2020.\(^{25}\)

By 2020, central government funding for early help will reduce by 71% compared to 2010.\(^{26}\)

156
Sure Start children’s centres closed in 2015, compared with 85 in 2014, an 83.5% increase.\(^{27}\)

There has been a 124% rise in the number of enquiries where a child may be suffering, or likely to suffer, significant harm, over the last 10 years.\(^{28}\)

Over the past 10 years, the rate of children starting on child protection plans rose by 94%.\(^{29}\)

Over the past 5 years, the number of children starting to be looked after has risen by 17.4%.\(^{30}\)

9 out of 10
Local authorities think financial pressures are the biggest risk for effective delivery of children’s social care services.\(^{31}\)
Resourcing pressures

We held interviews with early help staff from six local authorities and six Action for Children family services. Their perspectives helped us better understand the challenges around helping children below statutory thresholds. All interviewees talked about the challenges of operating in a resource scarce environment and the impact of budget cuts.

The impact of austerity

Local authorities are operating in a challenging environment, which is likely to affect support to children with less ‘urgent needs’. To date local authorities have managed to maintain relatively stable funding levels for children’s social care within a shrinking fiscal envelope. However, the Local Government Association estimates that local authorities will face a £2 billion funding gap to support children by 2020. There is also some uncertainty over the future of local authority funding structures. The Government has signalled it will give local areas greater control over locally generated funds, but it is not currently clear what form this will take.

A recent survey found that four in five local authorities were confident that early help can reduce demand on services for Children in Need. However, financial pressures can make it hard for local authorities to prioritise early help over their core statutory obligations, such as child protection and support for Children in Need. Action for Children staff highlighted the effects of limited resourcing in public services and greater need in the community. They felt this could manifest as delays or difficulties in accessing social care support for children they were concerned about. Staff tended to discuss the impact of ‘rising thresholds’, caused by strict rationing of resources for early help and social care. Our staff suspect children need to have higher levels of need, or have more serious problems, before they qualify for help.

“We try to escalate in and sometimes they say it doesn’t meet the threshold and you’ve got to just keep plodding on, trying and trying. All the time we’re talking about a child that is not in a safe environment aren’t we? And that is very, very frustrating.”

Action for Children staff member

This echoes wider concerns about variation in thresholds for support and protection across the country. Recent research shows that children living in local authorities where social workers have high caseloads and high referral rates are more likely to be subject to re-referrals into social care. This suggests that high re-referral rates may arise because some local authorities lack the capacity to assess or address the needs of children at the first opportunity. The National Audit Office found that “children in different parts of the country do not get the same access to help or protection” and that there is wide variation between rates of referrals accepted, and rates of Children in Need between local authorities.
The National Audit Office did not find a direct correlation between Ofsted inspection score, how much is spent per child in need and the number of Children in Need, a finding which needs further exploration. As well as addressing the scarcity of resources, we need to ensure that existing resources are used effectively. This includes learning from research and evidence based practice, to improve how services are delivered and children’s needs met, and reduce inefficiencies and duplication.

**A challenging environment for early help**

Over the past ten years, the rate of children starting on child protection plans has risen by 94% and the number of enquiries where a child may be suffering significant harm has risen by 124%. In a resource scarce environment where many children require intensive intervention, it can be difficult to prioritise helping children who need support, but at a lower level.

“Trying to get families in for mental health assessments is really, really challenging... because of waiting lists and always seems they have to go through GPs or whatever unless it gets to crisis point and we then may be having to put in a referral to safeguarding because we’re concerned about that parent’s mental health [posing risks to children’s safety].”

*Action for Children staff member*

This means that there is less support available to meet the needs of children below statutory thresholds before their problems reach crisis point.

“The jury is still out for children’s centres. We say we’re intelligence led and evidence based, but when the evidence tells you one thing but the budgets tell you a different thing. You go with the budget rather than the evidence.”

*Local authority staff member*

**Making the most of limited resources**

Resourcing challenges mean that some local authorities are thinking differently about how they help children and families. They are looking for opportunities to reduce duplication and increase efficiency. One local authority we spoke to had recently restructured its early help system. They said that although resource constraints were difficult, their old arrangements needed changing. They consolidated multiple referral pathways into one front door for early help and social care, which they felt reduced risk and increased efficiency for children and families.

“We tend to duplicate a lot of work. You know you’ve got a lot of good stuff happening in schools but you know actually we might then duplicate it in social work interventions. What is the point of that? We need to be thinking much more smartly.”

*Local authority staff member*
Several local authorities discussed opportunities to work differently with partners like health, schools, housing, the police and the voluntary sector. They were exploring co-location between early help and partners or early help and social care in response to resourcing constraints, and to achieve better outcomes for children and young people.

“It’s the grey area things that the MASH [multiagency safeguarding hub] really comes into its own for. Where there’s a bit of a debate and discussion, analysis and information gathering and intelligence gathering to make that decision... so that we’re not responding with a sort of statutory intervention when we can respond with early help, but at the same time not leaving children vulnerable.”

Local authority staff member

In some areas, local authority staff described a change in how early help is delivered, with an expectation that partner organisations should provide more direct support. This means taking the lead professional role and coordinating the team around the family, with the local authority early help role being to support this process (not provide it). In this model, early help is characterised as a way of working, not just a service.

“Part of our new offer is going to be a very visible link and resource to provide that coaching and consultation, co-working with partners to develop their skills and capacity to keep hold of families at lower level for longer and respond appropriately”

Local authority staff member

This is in line with the findings of our earlier child neglect reviews with the University of Stirling, and with NSPCC’s Thriving Communities framework. NSPCC’s framework outlines how different organisations can meet families’ needs in the current environment where “the child protection system is under such pressure and thresholds for interventions are so high.”

“And that’s quite scary really for some professionals. Where historically their model is that we hand over here, and you get us involved, but you are holding all that risk and all that worry. And we’re used to that in social work; that is our bread and butter. But actually, the shift is, now we want you to hold some of that. So it’s not as risk, but as a partnership.”

Local authority staff member
Gail struggles with mental health problems

She finds it hard to get out of bed to give her children the care they need

She repeats the same negative patterns of parenting that she received as a child

Her kids show signs of neglect

With family support, Gail attends GP appointments and starts getting treatment

She’s an active mum again and improving her parenting skills

The kids are happy and healthy

Life’s back on track
Strengthening the statutory framework for early help

If we are to effectively help children below statutory thresholds, the broader policy and legislative framework needs strengthening. Local authorities have more flexibility to manage spending over early help services, because there are no statutory requirements outlining the type or extent of services that should be in place. When faced with budget cuts, this can lead to a focus on statutory services at the expense of early help.

“I would say you know if you begin to think about the context of devolution and local authorities having far more autonomy and in terms of the budget implications of the current climate financially, actually statutory services are always going to be the overriding priority.”

Local authority staff member

It is not always clear who should do what, and when, to help children and families address problems early. Ofsted has found that the roles and responsibilities of individual agencies for early help provision are often unclear. Schools, GPs and other organisations who work with children and families do not always see the practical ways they can help children beyond referral to children’s social care services.

“Early help is more of a grey area, you know, and I just think it would just be helpful to have a little bit more of a directive for partners from government so that we’re not having to do this thing of saying “please play ball, do the early help assessment”. That people really get it that it’s their responsibility. I think it does some of it that, but it’s not got the teeth that we need it to have.”

Local authority staff member

There have long been calls for a stronger framework for early help to address these issues. The 2011 Munro Review of Child Protection recommended introducing a duty on local authorities and their statutory partners to secure the sufficient provision of early help services. Munro recognised the importance of a robust legal framework to ensure support is available for children and families “where their needs do not match the criteria for receiving children’s social care services.”

Some in the sector have called for reconsideration of section 17 of the Children Act 1989 as a mechanism for ensuring early help for children and families. There are a large number of children who are vulnerable and need services to address emerging safety or welfare needs, but do not reach the Children in Need threshold. This raises the question of whether section 17 thresholds are interpreted too narrowly. Schedule 2 of the 1989 Act requires local authorities to take reasonable steps to prevent children in their area from suffering ill-treatment or neglect. While statutory guidance states that section 17 refers to support for complex needs, the wording of the legislation itself and the duty in schedule 2 suggest scope for it to include support for lower levels of need.
“Although we had Victoria Climbié, we had Laming enquiry, Munro, later on, after baby Peter Connelly. Yet [early help has] never been a requirement... it would just be nice to have that cushion of you know statutory arrangement behind it. Not riding roughshod over rights and the voluntary nature of it. But I think a bit more rigour there from government would really help us.”

Local authority staff member

Strengthening the statutory framework for early help provision, whether via a review of section 17 or introduction of new measures, would need to be supported by adequate funding. Combined, these measures would ensure that help is available for children at all levels of need, which should in turn reduce the pressure on statutory services.

Implementing the Children and Social Work Act 2017

The Children and Social Work Act 2017 (CSWA) heralds significant changes in how local authorities work with partner organisations to help children and families. Supporting regulations are now required before the CSWA can be implemented; these provide an opportunity to address some of the practical issues around early help.

Most of the discussion about the CSWA has focussed on effective child protection. While this is undoubtedly important, we should not overlook early help. Children’s needs are not static. At some points in their lives children may require protection, at others they would benefit from lower level support. The regulations need to make it clear that the scope of the new safeguarding arrangements includes early help as well as child protection.

The CSWA strengthens the duty on organisations to work together to safeguard and promote the welfare of children. The Secretary of State is able to make regulations for enforcement of this duty on relevant agencies (though these cannot include criminal offences). These reforms were introduced because of recognition that stronger legal duties were needed to ensure effective cooperation between organisations who work with children.∗

The conversations we had with local authority and Action for Children staff reinforce the importance of partnership working for promoting children’s wellbeing and keeping them safe. However, partnership working is difficult to get right if everybody is not on the same page.

New Local Safeguarding Arrangements

Under the CSWA, the three key Safeguarding Partners (Health, Education and the Local Authority) must make arrangements for themselves and Relevant Agencies to work together “in exercising their functions, so far as the functions are exercised for the purpose of safeguarding and promoting the welfare of children in the area.”

Relevant Agencies refer to any agency specified in regulations to be made by the Secretary of State.

Both the Safeguarding Partners and the Relevant Agencies have a duty to act in accordance with these strategic arrangements.

∗As recommended by the 2016 Wood Review of the role and functions of Local Safeguarding Children Boards.
“Schools are a key partner, but some schools are embracing it more than others. Some schools really understand it, and some schools are a bit more resistant. I would say the relationship with schools is really key for early help.”

Local authority staff member

Some Action for Children staff noted that schools and private nurseries can too readily exclude children with behavioural problems, or they do not see their role as delivering early help, even for issues they have the capacity to address.

“So schools, so one of the worst things they can do really is exclude a child who is experiencing some level of neglect at home and their response, because they are finding difficulties to manage the child’s behaviour, is to exclude them from school. We have children, we have like four-year olds being excluded from nursery because their behaviour is quite challenging, but those behaviours are about something else that is going on in their lives.”

Action for Children staff member

There is now an opportunity for the CSWA Regulations to clarify roles and responsibilities for early help in the new safeguarding arrangements, while avoiding being overly prescriptive about how functions are carried out locally. The Regulations need to recognise the critical role schools, nurseries and colleges play in delivering early help. Regulations should also ensure that adult services are part of the new arrangements because of the impact of substance misuse and other adult issues on children.
Addressing information gaps

Our research suggests there is significant variation in how local systems record children who have had contact with social care, but are not currently ‘in need’ or receiving support.

141 local authorities responded to the FOI (a response rate of 93%).

129 local authorities answered Q1: How many children had their case closed after assessment?

107 local authorities answered Q2: What were the most common reasons these children were referred to children’s services?

56 local authorities answered Q3: Were these children referred to or received early help after their case was closed?

Not all of the respondents answered every FOI question.

However, many did not answer our question on children’s needs, or whether children were referred to early help after their case was closed. Some could not answer because they do not record this information. Others record this information, but do not collate it, which meant that answering the question would require examining hundreds of individual cases. This suggests many local authorities are not using this information strategically.

Overall this emerged as a clear area of improvement for many areas of the country. It is important that local authorities both collect and make effective use of this data, because it offers insight into local need and can help shape appropriate responses.

Next steps

While local data is valuable to better direct services to local need, a country-wide picture of the response to children below statutory thresholds is needed. The report by the Children’s Commissioner on vulnerability highlights this as an area where there are considerable knowledge gaps, in part because this group of children is only partially captured by national statistics.

This report has focussed on whether these children receive early help, or whether they are overlooked by current systems and processes. Its findings help to address some information gaps, but there are still many unanswered questions. We are planning further work to help answer questions about the demographics of this group, as well as who refers them to social care, and what needs they have.

The next stage of our work will explore their interaction with statutory services. Recent research shows that the revolving door is evident in the wider landscape of children’s social care. We are interested in exploring the likelihood that children’s needs will escalate if they are not meet at assessment stage.

*Section 12 of the Freedom of Information Act 2000 allows public bodies to refuse to answer a request on the grounds that it would cost too much or take too much staff time to deal with the request. Section 40 allows refusal on the grounds that personal information would be revealed through the request, in this case because of the small numbers of children affected in this particular authority.*
Conclusions

We are concerned that there are an estimated 140,000 children who are not getting the support they need. These children have needs that are too great for schools, health or other universal services to meet on their own, but they are not eligible for support from statutory social care services. Although they do not require a statutory response, we fear that this situation still leaves children vulnerable.

Our research suggests many are living in challenging family situations, affected by issues like domestic violence or substance misuse. Without the right help, there’s potential for these situations to escalate to crisis point, placing children at risk of harm.

Addressing the financial pressures on local authorities and strengthening the statutory framework for early help would go a long way to meeting the needs of these children. It has to be clear who should do what, and when, to make sure children get the right help, at the right time.

We are urging the Government to take action. Ensuring that these children receive the help they need is an achievable and urgent goal.

Recommendations

We are calling on the Government to:

i. Strengthen the statutory framework for early help provision and ensure new requirements are adequately resourced;

ii. Urgently address the funding crisis for children’s social care;

iii. Ensure that the proposed Mental Health reforms and Domestic Violence Bill include a focus on parents and addressing the impact of these issues on their children;

iv. Ensure the Children and Social Work Act Regulations:
   - Are clear that local Safeguarding Arrangements should address early help or low level needs as well as child protection;
   - Include provision for enforcement of the duty to cooperate;
   - Make it clear that adult services are ‘Relevant Agencies’ for safeguarding children;
   - Make clear that all types of schools, nurseries and colleges are ‘Relevant Agencies’ and should be front and centre in the development of the new local arrangements.

We are calling on local authorities to:

i. Collect and make effective use of data on the response to children’s needs post assessment to better direct support to vulnerable children and families. This should include children who below the threshold of statutory support.
Appendix 1

Data quality

Numbers of children assessed but not found to be in need

There was a wide range of responses to the FOI request, with some that seemed very high and others very low. This could be because local authorities record and report similar data around referrals, contacts and assessments differently or due to variations in local practice.

The number of children who are assessed but not found to be in need is greater by local authority self-report than the number reported in the Department for Education’s (DfE) Children in Need Census for the same year. This could be for a number of reasons. We compared the FOI and DfE data, and enquired with the relevant local authority for significant discrepancies. This confirmed that some variation is due to the differences in methodology between internal reporting, how DfE calculate figures from Census returns and how local authorities apply the Children in Need Census codes. In addition, the DfE Census does not capture children whose assessment was completed in the financial year following referral (assessments can take up to 45 days to complete).

One local authority provided a figure for children assessed as not in need which was approximately five times greater than the number of assessments the DfE had recorded that they undertook in the same time period. We followed up for clarification but as none was forthcoming, elected not to include this figure due to data quality concerns.

The most prevalent needs of children whose case was closed post assessment

Our research aims to provide an indication of what is going on in these children’s lives. However, it does not provide a total number of children affected by each of these issues. We asked for the three most prevalent reasons for referral, rather than a detailed breakdown for all children in each local authority. Some children may experience multiple factors (e.g. both domestic violence and neglect) which is not captured through the FOI response.

Numbers of children referred to early help post case closure

We list ‘referred to’ rather than ‘received’ early help, because participating in early help is optional for families. In some instances, families may decide not to accept support that is offered to them.

It is important to note that some children may not be referred to early help post assessment because they are judged not to need such services.

As the FOI asked for information on children’s outcomes post case closure, we do not know whether children were receiving early help prior to being referred to children’s social care services. This may mean that the case outcome was not recorded as “referred to early help” because a referral was not needed.

There was significant variation in how local authorities presented this information about the reasons for case closure. The figures from the FOI may not capture all of the early help that is happening at local levels, which could mean that support is underestimated.

One local authority provided a figure for children who were referred to early help post assessment that was greater than the figure for children assessed as not in need. We elected not to include this figure out of data quality concerns.
Appendix 2

Methodology

We conducted interviews with nine early help staff members from six different local authorities, of varying size, geographic representation, Ofsted rating and multiple index of deprivation ranking. The majority of local authority participants were senior managers, with a small number of frontline practitioners. We wanted to hear the perspectives of local authority staff about early help and responding to children below statutory thresholds.

We interviewed 14 frontline Action for Children staff members from six of our family support services and/or children’s centres. Five of these services were located in local authorities who participated in this research. We talked to our staff because they are on the frontline, and can tell us about what is happening on the ground for the children and families they work with.

Freedom of Information Act Request

We sent the following FOI to all 152 local authorities in England. 141 responded, a response rate of 93%. Note that some responses were to withhold information under various parts of the Act.

We elected to use an FOI because this information is not available anywhere else. There is no national reporting on early help, and children who are not in need are not captured in statistical releases by government.

In the financial year, 1 April 2015 to 31 March 2016:

1. How many children referred to children’s social care had their case closed immediately after assessment?

2. For children that were assessed but whose case was closed immediately after assessment, what were the main reasons which caused them to be referred to children’s social care in the first place?

Please pick most relevant answers, no more than 3:

- c. Domestic violence
- d. Mental health problems (parent)
- e. Mental health problems (child)
- f. Substance misuse
- g. Antisocial behaviour
- h. Disability
- i. School attendance
- j. Neglect
- k. Sexual abuse or CSE
- l. Physical abuse
- m. Homelessness
- n. Missing
- o. Young carer
- p. Other
- q. Don’t know

3. How many children who were assessed by children’s social care and whose case was closed immediately after assessment received preventative early help support?

Please indicate ‘don’t know’ if you do not collect or hold this information.
Estimations

While some local authorities provided data in response to question three of the FOI, others did not. There were approximately 100,000 children in the local authorities that supplied information on children’s outcomes post case closure. Out of these 100,000 children, just over 18,000 were referred to early help. Because we did not have information on whether or not all children were referred to help, we could not generate national figures from the FOI data on its own.

We used the local authority level data from the FOI to generate regional estimates. We used the average response rate in each region to estimate regional numbers of children helped after their case was closed. We then subtracted this figure from the overall number of children in the region to provide an estimate of the number of children who were not referred to early help after their case was closed. We then used these to create a national picture of the response to children below statutory thresholds.

Percentage of children who received early help after their case was closed (based on available FOI data)

<table>
<thead>
<tr>
<th>Region</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>London</td>
<td>18%</td>
</tr>
<tr>
<td>Yorkshire and the Humber</td>
<td>17%</td>
</tr>
<tr>
<td>South West</td>
<td>39%</td>
</tr>
<tr>
<td>East of England</td>
<td>24%</td>
</tr>
<tr>
<td>West Midlands</td>
<td>20%</td>
</tr>
<tr>
<td>North West</td>
<td>40%</td>
</tr>
<tr>
<td>South East</td>
<td>22%</td>
</tr>
<tr>
<td>North East</td>
<td>18%</td>
</tr>
<tr>
<td>East Midlands</td>
<td>27%</td>
</tr>
</tbody>
</table>

Estimated number of children who do not receive early help after their case is closed (rounded to nearest hundred)

<table>
<thead>
<tr>
<th>Region</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>London</td>
<td>19,800</td>
</tr>
<tr>
<td>Yorkshire and the Humber</td>
<td>15,300</td>
</tr>
<tr>
<td>South West</td>
<td>14,900</td>
</tr>
<tr>
<td>East of England</td>
<td>12,900</td>
</tr>
<tr>
<td>West Midlands</td>
<td>17,000</td>
</tr>
<tr>
<td>North West</td>
<td>19,600</td>
</tr>
<tr>
<td>South East</td>
<td>24,400</td>
</tr>
<tr>
<td>North East</td>
<td>7,900</td>
</tr>
<tr>
<td>East Midlands</td>
<td>10,400</td>
</tr>
</tbody>
</table>
Appendix 3

End notes


5. For more information see http://springconsortium.com/projects-being-funded/


By gathering evidence and identifying solutions

By fighting for change and influencing policy

By making sure children and families are at the forefront of decision making

By ensuring that every child who needs help, gets help

By giving children a voice

By helping families break the cycle