



Repairing broken families and rescuing fractured communities

Lessons from the frontline

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The images used in this publication are illustrative only and do not portray any of the families or individuals mentioned.

Foreword

Tim Loughton MP

Parliamentary Under Secretary of State,
Department for Education

Growing up in a family experiencing very complex health, social, economic and behavioural problems often has a lasting and adverse effect on a child's life chances. Although there are only a small number of these families, the problems pass from generation to generation, for example poor parenting and the effects of domestic violence and abuse. Most local services are not designed to provide the kind of intensive, well coordinated help the families need which means the problems persist. These families are then likely to experience regular crises which make expensive and largely avoidable demands on a wide range of local services.

A new approach is needed to identify the kinds of local service best able to provide the support, incentives and, where appropriate, sanctions, these families need in the most cost-effective way. This approach should be based on examples of successful local practice and must make the most of the voluntary sector and volunteers.

We need to build on successful local projects such as the Westminster Family Recovery Programme. Other areas need to learn from the early successes in reducing child poverty, school exclusion, entrants to the care and criminal justice systems, and long-term unemployment, health or housing problems. On top of this, the projects provide immediate and longer-term reductions in service costs. In the current economic climate, it is only when agencies work together and pool resources that we can achieve vast improvements to services without vast investments.

Intervening early and services working more efficiently with vulnerable families is central to the Government's commitment to unlock social mobility and tackle child poverty. Through earlier intervention we can ensure as many children and young people as possible reach their full potential and have hope and high aspirations for their future.

The Government has asked Graham Allen MP to review early intervention programmes and to look at how the lessons from successful models like the Westminster Family Recovery Programme can be shared across the country.

Congratulations to all involved in this project and long may its success continue.

Introduction

Councillor Daniel Astaire

Cabinet Member for Society, Families and Adult Services, Westminster City Council

Local authorities work best when they are inventive. On those occasions when they look across their own and partner organisations with a determined sense of place and purpose, decisions can be made which materially improve the chances and prosperity of communities.

Westminster City Council's Family Recovery Programme is a prime example of this new way of thinking. At its core, it is an intelligence sharing approach between multiple public agencies dedicated to tackling persistent problem families, which manifest themselves across a wide variety of services. In turn for the support offered, these families adhere to strict 'contracts with consequences', knowing that they could face a raft of measures if they do not co-operate to mend their ways. A twin pronged approach which, as this publication demonstrates, achieves real results.

But a project like Family Recovery does not always sit comfortably with the political times. In an era of austerity and reduced public spending, when budgets are being cut and services redefined, Family Recovery stands out. At a time when in Westminster, we are consulting on tightening the criteria for recipients of adult social care, a key plank of family recovery is the ability to treat parents

suffering from low level mental health issues. Outside the programme, these people would not have been eligible to receive state funded care under the current criteria, let alone restricted criteria. What then can be a proper justification for treating those who disrupt society rather than those who may be edging toward vulnerability?

The answer is twofold and is borne out by the findings in this publication. Targeted and specific interventions can create greater savings for the public purse across a range of agencies; our own and independent analysis has confirmed this. It can also tackle and make deep inroads into seemingly impenetrable social blights which have disrupted communities, creating long term unrest and social discomfort. Findings show that the involvement of families recommended to the programme by the police and community safety teams increased feelings of safety and satisfaction amongst local residents.

Localism lies at the very heart of the principles behind Westminster's approach. The problems caused by a small core of misbehaving families will often only affect a relatively small group of people in a neighbourhood. However, low level anti-social behaviour can have an enormous impact on their quality of life. With such a complex myriad of causes and highly localised effects, a top-down approach planned and delivered from Whitehall will never succeed. What works in Westminster



will not necessarily be the right blend of interventions to work for families in Wolverhampton or even Wandsworth. Family Recovery succeeds because it offers local solutions to local problems.

These justifications alone provide confidence that funding Family Recovery is the right thing to do and is politically expedient. These decisions are not easy, but politics is not a straightforward art. We face difficult decisions, involving tough political choices. When, however, these work as Family Recovery clearly does, it gives us a chance to showcase the strength and importance of local government.

In its policy announcements and in setting out its vision for Britain, the new Coalition Government appears to be extremely sympathetic to this approach. The Coalition's Programme for Government committed ministers to investigating new approaches to helping exactly the kind of families that this programme targets and we will be challenging them to put their money where their words are.

Such a non-traditional approach to public services requires a non-traditional funding stream to embed it in public sector culture as more than simply an experiment. Arguably, local government should remain the primary and co-ordinating body in such a project (and is uniquely positioned for this role) but it should not be a primary funder.

Whilst we may argue over the figures and levels of estimated savings and cost avoidance, the principal that a project like family recovery can, over time, deliver savings to the public purse must not be lost in the debate. There is clear evidence of short term cost avoidance leading to long term savings and, at its simplest, the funding of the project should sit where these savings are borne.

Financial support is not, however, given that readily and if this model is to be rolled out across other areas then further innovative thought is required to create a funding model that works for all parties. Thinking outside of the box is just as important with the financing of the project as it is with the project itself. There must be an opportunity for considering forms of social impact bonds or other methods of results based funding. We have enough confidence in the project to pursue this. Furthermore, on the crime agenda, linking the Family Recovery Programme to an Integrated Offender Management scheme could also enlarge the scope and resources available to the Family Recovery Programme. This would involve working closely with partners in the police and probation service. Through Family Recovery, Big Society can also be seen at its best, with communities taking charge of their problems and working together to try to solve them.

This programme delivers. It shows that local government can deliver. Now is the time for the Government to deliver by securing the future of the Family Recovery Programme.

Executive summary

Background to the Family Recovery Programme

Despite its reputation as a lead authority in providing adults' and children's services, Westminster City Council decided in 2008 that a new approach to tackling entrenched social problems was required.

The council calculated that at any one time there were around 40 families in the city responsible for the vast majority of extreme anti-social behaviour and who displayed strong criminal tendencies.

Recognising the interrelation of causes and effects, the 'whole-family' approach embodied by the Family Recovery Programme (FRP) aims to deal with the causes of these problems rather than the symptoms.

With a wide range of expertise, a Team Around the Family (TAF) based entirely in one location is assigned to each family and is candid in setting clear and achievable goals for families with severe problems. A bespoke care plan is instituted for each family to deal with their particular challenges. The families are required to sign a 'contract with consequences' to formalise their involvement with the programme.

An innovative 'Information Desk' collects data from partner organisations and collates the information to offer real-time briefings to members of the TAF. Analysts then monitor

the family's continued progress and fast-track them back on to the programme if required.

The FRP has successfully engaged the voluntary sector to deliver some of its services. Not-for-profit organisations currently provide support for preparation for work, debt advice, drug assessments and interventions and in dealing with perpetrators of domestic violence. In future the FRP will involve even more voluntary sector groups.

Supporting families

Involvement in the FRP has been beneficial to a number of families who have engaged with the programme.

The net benefits include:

- the proportion of families who remain unregistered with a local GP has fallen by more than two-thirds following FRP engagement
- studies have shown that mental health services facilitated through FRP have seen greater levels of engagement than conventional methods
- of the families with domestic violence problems, a greater proportion effectively implemented a safety plan following engagement with the FRP
- more tenancies have been secured as a result of FRP engagement, avoiding the upheaval caused by eviction proceedings

- as a result of the FRP, more Westminster families have shown progress in improving conditions, where child protection was a concern at the outset
- more than 80 per cent of children for whom truancy had been an issue have increased their school attendance.

Strengthening communities

In a study of families where crime and disorder was a major concern, the number of offences they were accused of fell by 69 per cent in the 12 months following FRP engagement, while the average number of 'suspected offences' per month fell from nine in the year before intervention to just one and a half afterwards.

A survey of almost 100 of the families' neighbours found that two-thirds were either satisfied or very satisfied with the response of the police and the council.

Most of those surveyed reported lower levels of anti-social behaviour following their neighbours' engagement with FRP.

Savings for taxpayers

Westminster City Council's research suggests that for every £1 spent on FRP, £2.10 in costs is avoided by the public purse in year one. This is supported by a central government-commissioned independent study of the FRP's impact on crime and anti-social behaviour, which estimated that £3 in costs were avoided for every £1 spent on preventing offending through the programme.

Due to the wide range of beneficiaries of this work, only around 42 pence in every £1 of avoided costs directly relates to spending by the local authority, with the remainder being attributed to housing associations,

government departments, the NHS and other public agencies.

The targeted and intensive intervention is not inexpensive - at around £19,500 per family. However, early estimates of average cost avoidance per family amount to just over £40,000 in the year during which the family is engaged.

In just one year, some well-engaged families that had previously suffered from complex and entrenched problems turned around their behaviour to such an extent that up to an estimated £136,000 in costs had been avoided.

Extensive longitudinal studies of the pathfinder families are underway to assess the long-term savings resulting from the intervention.

The future of the programme

Political will exists to continue this programme. This political will, however, needs a credible source of funding. Conscious of the current financial climate and choices which are being taken across public services, Westminster is exploring options for linking funding to performance with individual families or sets of families. However, the diffuse nature of beneficiaries from the FRP's work means that an efficient funding source or mechanism does not yet exist.

One option is to widen the funding base so that the organisations that benefit directly from mid to long term cost savings provide investment. This would see more public and quasi-public bodies supporting the programme, including housing associations and the Probation Service.

Origins

A bold and innovative approach required to tackle an entrenched social problem

Research shows that a secure family with strong parental role models is highly influential in a child's wellbeing and development. Unfortunately, many in society lack the emotional support provided by a secure and loving family. In some cases family breakdown leads to a fundamental disconnect with the community and creates far-reaching and deeply entrenched problems that affect the whole of society – poverty, crime, poor mental health and substance misuse. The instinctive reaction to news reports of youth violence, gang activity and anti-social behaviour illustrates how the social exclusion and/or poor behaviour of a relatively small number of residents can blight the lives of whole neighbourhoods and impact on the perception of wider communities.

Until relatively recently, resources and support for these families were in no short supply but funding was ineffectively focused and opportunities missed for better long-term outcomes. Gradually, policy makers have realised that money alone does not represent the best means of addressing the most complex social challenges. A growing body of research conducted by progressive think

tanks has illustrated the connection between family breakdown and social decline.

Westminster City Council is widely renowned for delivering excellent adults', children's and family services, but there are families in the city that suffer from the consequences of social exclusion and a toxic combination of housing problems, low school attendance, substance misuse, domestic violence, poor parenting skills and an entrenched dependence on benefits. The cyclical nature of these problems means that victims of state failure are also more likely to suffer from the consequences of the social problems caused by the added strain on community safety resources and additional pressures on educational standards.

In an assessment of the most problematic cases, the council calculated that at any one time, there were around 40 families in the city responsible for the vast majority of extreme anti-social behaviour and who displayed strong criminal tendencies. There were a further 35 families whose children were suffering (or would probably suffer) significant harm likely to require intervention and, in many cases, care proceedings would need to be initiated. Further down

this pyramid of dysfunction, the council predicted that there were around 600 families (approximately one in 30 of all families in Westminster) at significant risk of displaying the symptoms caused by social breakdown. It was estimated that these families were responsible for 80 per cent of children's social care spending in the city, as well as placing disproportionate pressures on local health and policing services.

In 2008, armed with a growing body of evidence illustrating the long-term impacts of social breakdown, Westminster City Council decided that a new approach was required. Whilst many of the services available to at-risk adults and children were performing extremely well, the families in need of the most supervision and support were falling through the inevitable gaps created when the system comprised so many different bodies (including several council departments working to differing and sometimes conflicting centrally driven targets or statutory criteria):

- children's services perform excellently when focused on improving the prospects for children receiving their services, but offered limited support to adult family members
- adults' services in Westminster are also considered excellent but provide few structures for dealing with the problems of parents
- interventions were not tailored to individual needs and many families were being offered too many services that ran concurrently, were poorly phased or were contradictory
- assessments of families were being repeatedly conducted by a range of agencies and council departments without any coordination of information or action, resulting in inefficiency and duplication.



Uniting mutual interests: the Family Recovery Programme

Agencies with common objectives should come together to deliver results

Westminster City Council's Family Recovery Programme (FRP) focuses on treating the root causes of social breakdown rather than dealing only with its symptoms. This 'whole-family' approach to intervention recognises the interrelation of the causes and effects of social breakdown, for instance recognising that poor housing and parental drug use are likely to lead to poor health and a lack of educational achievement for children.

With the council as the lead partner, the FRP brings together a number of public services, as well as national and local voluntary groups to share resources, intelligence and expertise and provide a single focus for dealing with the deep-rooted problems suffered by the individual families concerned.

A Team Around the Family (TAF) provides the following expertise:

- adult mental health
- adult substance misuse
- neighbourhood and youth policing
- anti-social behaviour teams
- housing advice
- debt, budgeting and benefits advice

- intensive outreach work focusing on parenting and life skills
- domestic violence (separate specialists in perpetrators and victims)
- education
- child health
- information analysis
- preparation for and access to training, volunteering and work.

The TAF receives referrals from a wide range of statutory and non-statutory organisations. It acts as a single unit, based in one location, and reports directly to a single operational head. TAF members share information from their respective services in a unique way, overcoming agency barriers to provide coherent and consistent action.

The TAF seeks a family's consent prior to intervention – except in cases where crime and children's safeguarding are of critical importance and thus override data protection legislation – in a clear and common-sense way. It sets clear and achievable goals and is candid about the consequences for those individuals who fail to radically improve their behaviour.

Agreement for change

Central to the success of the Family Recovery Programme is the agreement between the TAF and the family involved. Westminster believes that the programme is something best done **with** rather than **to** families. For this reason family members are involved closely in the development of their care plan and are asked to sign a 'contract with consequences'. There is a strict understanding that signing this agreement is a prerequisite to joining the FRP and benefiting from the additional support on offer. Despite conferring no additional statutory powers or legal responsibilities, the contract spells out the possible consequences if families fail to cooperate with the FRP and continue to display negative behaviour. These sanctions include parenting orders, care proceedings, prosecution for non-school attendance, ASBOs and eviction.

For most, this is the first time in their lives that they have been so clearly presented with an outline of their responsibilities by all the agencies involved, and the consequences of not taking ownership of them.

The TAF devises a single care plan, taking into account all the needs and problems of each family member. To open effective communication channels whilst ensuring accountability, the responsibilities of each agency in the TAF is defined, and two lead workers are designated to act as the main points of contact for the family - one lead for the adults and one for the children. The care plan forms the basis of the contract families sign to formalise their involvement in the process. By inviting the family to the meeting where the care plan is formulated, full cooperation with the programme is promoted from the start.

Once the care plan has been established, three-weekly reviews are carried out for the duration of the engagement. The family are themselves included in alternate meetings. These reviews are supplemented by regular updates from information analysts. In the early stages the care plan includes several visits and phone calls to the family every week.

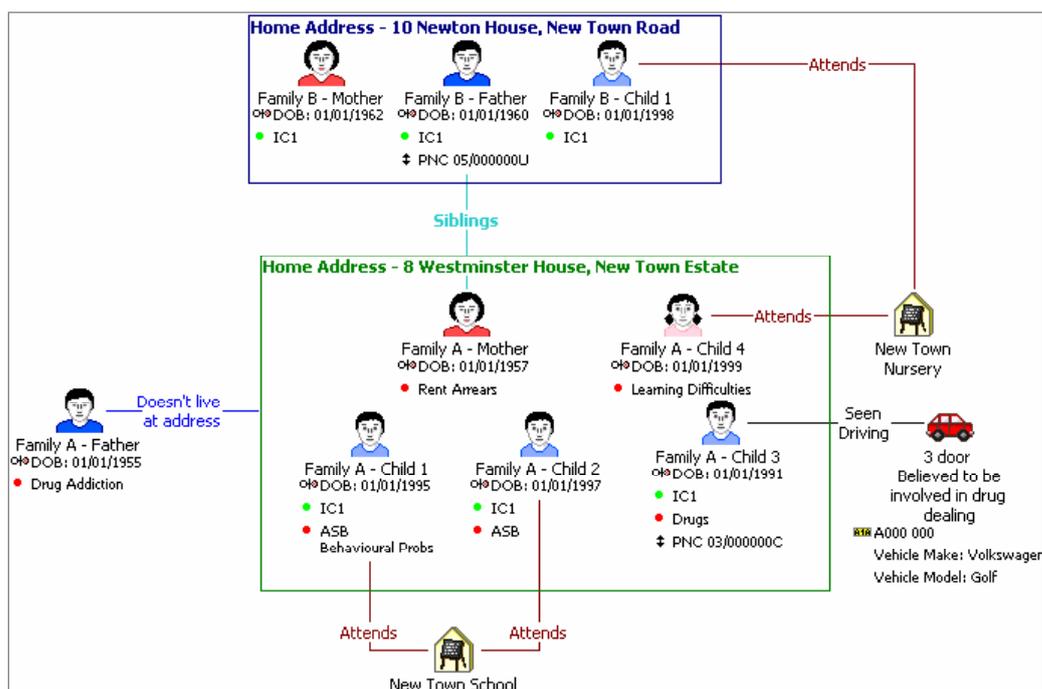
The Information Desk

One of the most difficult obstacles to overcome when designing the structure for the FRP was around collating the vast amounts of existing intelligence on individuals and families held by agencies that would otherwise be unavailable to all FRP partners.

The FRP's Information Desk analysts are an integral part of the project. They actively seek out information held by all the services involved and present it to partners in a simplified format, to ensure the most effective decisions are made when producing care plans. Only with the full picture of a family's problems can the team ensure it delivers the best possible service. Information used to create the care plans includes real time data from the local police, social care case chronologies, existing assessments and details of previous interventions.

The analysts are responsible for assessing outcomes against the aims set out in care plans, and for tracking the progress of families when they formally leave the FRP to ensure they are fast-tracked back in to the system if old issues reoccur.

The way in which information is presented has been important to the work of the Information Desk. An example of the visual method of displaying multi-agency information can be seen below. This method helps illustrate the context for behaviour and has proved popular with the agencies that have used it.



Sample family network chart

Using the I2 Analyst Notebook software (commonly used in law enforcement agencies), the Information Desk produces this visual display of multi agency information. Each family member is displayed in relation to their role within the family whilst the definition of 'family' is fluid and can represent any situation. Key 'attributes' can be added to each icon (family member) for example mental health, previous convictions or rent arrears. The chart is accessible to the Team Around the Family and is updated as new information is available.

Results: supporting families, strengthening communities and savings for taxpayers

A focus on families in need is the decent and cost-efficient thing to do.

In addition to the overwhelming evidence of the harmful consequences of social exclusion and the need to provide stronger support networks to families involved in the programme, Westminster has conducted its own extensive research into the FRP's measurable outcomes to ensure it is providing its residents with value for money. A number of external organisations have also assessed the different elements of the programme and reached similar conclusions about the effectiveness of the FRP.



Tapping into the Big Society

The Family Recovery Programme has successfully engaged the voluntary sector and commissioned a number of not-for-profit organisations to deliver high quality and unique services that could otherwise only be provided at considerable cost to the public purse.

Action for Children provides a range of unique support services for families involved in the FRP. They offer debt and benefits advice and provide training for FRP staff to deal with some less complex financial issues. Action for Children also provides access to work programmes linked to the Westminster Works Programme including individual planning for work readiness, training and volunteering opportunities.

The Domestic Violence Intervention Project (for perpetrators) is one of the few organisations in London equipped to assess perpetrators of domestic violence and offers targeted interventions to ensure offenders take responsibility for and work to change their behaviour.

The Westminster Drug Project (WDP) offers assessments and interventions for parents with a history of drug or alcohol misuse. WDP provides excellent value for money as tested during a recent robust tendering process.

Going forward, the FRP will involve many more voluntary sector groups. We are developing partnerships to help parents into employment and a sports mentoring project to aid those referred with obesity or depression.

Supporting families

One of the clearest symptoms of the social exclusion experienced by many families referred to the FRP is their lack of involvement with their local health network. Given the high prevalence of mental and physical health problems amongst this group, early and successful contact with GPs and primary health is a key goal. This contact both improves the life chances of family members and reduces cost by precluding the need for higher cost intervention later down the line, for instance by avoiding later Accident and Emergency admissions or in-patient treatment for mental health or substance misuse. The TAF gathers health information and sets up a GP registration for a family within 28 days of their initial meeting. Since beginning to collect figures on GP registration amongst FRP families, the proportion of unregistered individuals has fallen from 30 per cent to just nine per cent.

Adult mental health issues often lie at the heart of a family's problems and its eventual referral to the FRP. This, coupled with the council's early findings, points to higher levels of engagement with these mental health services through the FRP than via conventional methods of service engagement.

Parents in families referred to FRP will receive a mental health assessment where the mother or father displays mental health issues affecting their capacity to parent effectively. This review will identify specific needs and provide a gateway to appropriate resources, for instance referral to a GP, counselling services or culturally specific support groups. The TAF's mental health worker will also work with the adult to build self esteem and encourage them to take up employment or training opportunities. Where appropriate the mental health worker will

play a key role in the overall decision-making process of the team, sometimes as the FRP lead professional for the adult.

Issues around domestic violence are often linked to the poor mental health and low self esteem of adults within the family. For this reason the mental health worker will regularly work closely with the domestic violence consultant who takes lead responsibility for the victim of abuse, providing intensive support, aiding the victim in making sense of the violence and developing a plan for dealing with potential flashpoints. The domestic violence specialist will also assess the perpetrator of the abuse and make referrals to the Domestic Violence Intervention Project, which has a good record of engaging perpetrators and assisting them in understanding the reasons for and consequences of their actions.

In a sample of ten families with domestic violence problems, 50 per cent effectively implemented a safety plan or increased their understanding of the consequences of their actions as a result of FRP work - a markedly higher proportion than achieve this through more traditional child protection service interventions.

Evaluations of FRP have shown good results in preventing evictions for tenants and helping to secure their tenancies. Feedback from housing officers has been excellent. Overcrowding has also been alleviated for a number of families. Social workers have appreciated having a specific contact in the TAF with in-depth knowledge of local housing, given that there are over 15 large social housing providers in Westminster.



Amongst a sample of ten families who had been through the FRP process and which had Child Protection as the primary reason for referral, only one case was closed with no progress due to the family's disengagement. Six families achieved marked improvements, particularly the adult members. One of the households saw the children removed from a child protection plan and the prospects for the other children had been greatly improved.

Given the clear correlation between poor levels of school attendance and children who display a tendency to exhibit anti-social behaviour, the Family Recovery team prioritises improving families' engagement with educational institutions. School attendance is an issue for around 60 per cent of the households taking part in the FRP. As a result of the intervention, more than 80 per cent of these children have shown increased school attendance.

FRP education workers support children in developing plans for meeting their personal aspirations. They work one-to-one with the child to improve relationships with their school, targeting the predictable issues that arise in a child's education when he or she becomes involved in anti-social or illegal behaviour. Importantly, the FRP education

workers also attend school meetings with the parent/s to strengthen the family's relationships with teachers and other staff. Often the FRP team will focus on helping parents to be more positive about their child's abilities and to encourage a willingness to learn rather than communicating negativity about results and outcomes.

Coordination and communication have become key watchwords for FRP education workers in ensuring that everybody involved in the child's school life – the child, family, school and other education professionals – is aware of all developments and is provided with an input in the development of a plan to address any specific problems. This could include school attendance, offending, low level anti-social behaviour or family tensions that all impact upon a child's ability to learn.

Strengthening communities

The Family Recovery Programme has an excellent record in reducing anti-social behaviour amongst its participants and making the communities they live in more satisfied and confident in public services. Communities also often report increased perceptions of safety in their area as a result.



Using a sample of 22 families where crime and disorder was a key concern upon entering the programme, Westminster compared incidents prior to and following at least 12 months of engagement with the FRP. The total number of 'accused offences' fell by 69 per cent in the year after their initial engagement compared with the year leading up to their referral and the average number of 'suspected offences' per month for the whole group fell from nine to an average of 1.5.

A survey of 95 of the families' neighbours revealed good levels of community satisfaction. As the people with the most to gain from improved behaviour, the council takes the opinions of these residents very seriously. It is encouraging that more than two-thirds of neighbours are either satisfied or very satisfied with the response of the police and council. Around half of all those surveyed believed that there had been less anti-social behaviour from their neighbours in the 12 months following the FRP intervention. Only 14 per cent of respondents felt that anti-social behaviour had got slightly or much worse over the period.

These findings have been supported by feedback provided by Westminster's neighbourhood liaison officers, who have reported a calmer atmosphere in areas that were previously blighted by poorly behaved children and families.

Savings for taxpayers

The Family Recovery Programme has delivered significant and hopefully long-lasting change for families, but Westminster takes seriously its responsibility to all residents, not just those with extreme problems or those in their immediate vicinity. For this reason the council has committed itself to demonstrating the financial benefits of the FRP.

The majority of the savings accruing from the FRP work is attributed to public bodies other than the council. It is estimated that just 42 pence per pound in avoided costs directly benefits the council, with the balance of saving benefiting a wide range of bodies, including Registered Social Landlords (RSLs), the NHS and central government departments such as Work and Pensions, the Home Office and the Ministry of Justice.

Methodology

Using a range of sources, estimates have been assigned to the costs avoided as a result of each area of intervention. For instance, a Home Office study estimated the annual cost of anti-social behaviour at £5,000 per person, assuming just one incident of ASB is prevented for each individual. Using the results from existing cases, a projected cost reduction for each category can be assigned. The research takes into account 25 cost bases across six categories: health, worklessness, domestic violence, anti-social behaviour, poor family function and housing.

By taking the likely blend of problems faced by a family referred to the Family Recovery Programme, alongside the proven impact of the initiative and calculating the estimated costs avoided for each category, the average cost avoidance per family for year one can be estimated. Follow ups two years post-closure will make it easier to model the longer-term cost avoidance.



Although the intensive involvement required by the Family Recovery Programme is not inexpensive, offsetting these costs against the total costs avoided for the public purse helps build a strong case for the targeted intervention provided by the programme: the average cost per family for a year's involvement with the FRP is around £19,500. Early estimates of mean and median cost avoidance per family amount to more than £40,000 and £30,000 respectively in the year during which the family is engaged.

In the council's study of the 50 families to take part in the pilot, the specific avoided costs per family ranged from £300 to £136,000 in the year during which the family was involved in the programme.

A study of 50 families that have been through the FRP estimates that the outlay of £975,000 contributes to avoided costs for public bodies of around £2 million per annum providing a net benefit to the public purse of more than £1 million. Beyond the pilot phase, these up-front costs are likely to diminish as the programme increasingly benefits from economies of scale and estimates suggest that in future 50 families could be supported for a cost of around £650,000.

These predictions should be treated with some degree of caution but an approximate indication of the likely return on investment in FRP to date is £2.10 for every £1 spent. This is based on expert assessments of progress across 25 separate measures, and incorporates official estimates of cost avoidance for each of the factors.

An independent review of the programme has produced even more grounds for optimism. Work carried out by York Consulting on behalf of the Department for Education points to an 'expenditure to cost avoidance' ratio of £1:£3. This research focused solely on crime avoided and reduced levels of anti-social behaviour rather than the more extensive range of indicators assessed in Westminster City Council's own evaluation work.

However, the wide range of beneficiaries for whom costs are avoided and the relatively small proportion of that which is of direct benefit to the council means the case for a unilateral funding structure remains weak. Incentives need to be established for Westminster and other local authorities to continue pursuing innovative policies with a focus on long-term solutions to entrenched problems rather than merely targeting more simple short-term goals.

The long-term costs avoided as a result of such intervention are difficult to estimate, but ongoing longitudinal studies into the families in receipt of FRP support will help us to make these predictions. The first of these studies will be completed in 2011.

Westminster City Council is advancing with proposals for innovative 'payment by results' models to ensure delivery of collective goals for which the chief financial beneficiaries can be found at a national level.

Facts and figures

69% reduction in 'accused offences'

83% reduction in average number of 'suspected offences' per month

67% residents are supportive of the council and police's approach to dealing with those registered with the FRP

48% neighbours reporting reductions in anti-social behaviour since families registered with the FRP

9% proportion of individuals remaining unregistered with a GP (compared with 30% at the start of engagement)

£2.10 the estimated public purse costs avoided by every £1 of expenditure on the FRP

£19,500 average cost per family of involvement in the FRP

£41,000 average estimated cost avoidance for each family involved in the FRP

£650,000 the estimated annual cost of supporting 50 families through the FRP

£2 million estimated costs avoided whilst 50 families are tracked through the FRP

Success stories

Feedback from users should help improve the service for other vulnerable families.

Family **A**

Referrer

Child Protection Team – Children’s Services

Other agencies involved

CP team, YOT, Education Welfare, Connexions

Background and concerns

Five children, one of whom has a child of her own. Mother, four children and grandson all live together.

- mother has history of alcohol misuse and depression
- poor educational attainment
- ASB among children
- teenage pregnancy
- domestic violence.

FRP Care Plan

- address mother’s needs
- pre-birth assessment for pregnant child
- benefits check and provision of support
- examine housing needs
- manage children’s behaviour
- gather information on children’s health
- nursery placement for three year old
- develop mother’s parenting skills
- support 15 and 16 year old re-entry into education
- improve school attendance for all children.

Progress and blocks

All aspects of care plan progressed:

- 15 year old daughter is providing good day-to-day care for her baby and is motivated about education
- oldest child supported to move out of family home due to her behaviour posing risks to her younger siblings. She is now living in a hostel and making appropriate use of the resource. She is visiting home and her behaviour has improved
- mother has used parenting advice and support: children are attending school and nursery, have consistent routines, no exposure to domestic violence and mother is seeking employment.

Strengths

- family reacted protectively and appropriately following domestic violence incident
- mother started attending a course with a view to seeking employment
- non-statutory service (FRP) able to engage in meaningful intervention as family sees them differently to statutory services.

Risks

- meaningful engagement with family is inconsistent and their dishonesty around gang activity and 16 year olds presence in their home raises concerns – although stable for past 6 months
- other and 16 year old do not want to testify against 1 year olds father in court in relation to domestic violence incident – potential lack of insight into concerns.

Estimated costs without FRP

These are the estimated costs that the family would have incurred in a year based on their behaviours in the 12 months leading up to the FRP intervention:

Housing

Noise £686

Housing nuisance £1,206

Anti-social behaviour

2x ASBOs £10,700

Education

2x KS4 (age 14-16 risk of PRU) £34,200

2x NEET £5,542

Domestic violence

Domestic violence £23,200

Family function

3x Looked After Children court proceedings and court costs £72,000

2x Cost of care £93,600

Health

Adult mental health £2,740

Cost avoidance with FRP intervention

Intelligence gathered during and immediately after the intervention suggests that the risks of incurring these costs were reduced by the following due to the FRP intervention:

Housing 90%

ASB 75%

Education 75%

Domestic violence 50%

Family function 50%

Health 75%

Total estimated costs avoided in 12 months following FRP intervention:

£136,000

Family **B**

Referrer

Education Welfare

Other agencies involved

Education Welfare; Education – School; Health; Housing

Background and concerns

Two children aged 14 and 12, plus adult son who is 20 years old all live at home with the mother. The 14 year old has just started having contact with his father. The mother had her first child removed and placed for adoption when mother was 15 years old and in local authority care. Her other three children have been on CP Register throughout their childhood under the category of neglect – last registration ended 2002.

- domestic violence throughout the parents' relationship
- low school attendance (mother attributed to children being unwell due to serious damp conditions in the home)
- various health concerns surrounding the children including obesity
- concerns around mother's mental health.

FRP Care Plan

- core assessment
- full health assessments of children to ascertain whether housing situation is causing children's illness
- offer support to mother to meet children's health needs
- improve school attendance
- emotional support for mother
- review benefits and mother's aspirations.

Progress and blocks

- family has been re-housed
- children's school attendance has vastly improved. 12 year old had one unauthorised absence. 14 year old's attendance increased to approximately 80 per cent - supported by FRP education worker, education welfare officer and school, plus FRP health visitor, FRP intensive outreach worker and school nurse
- mother and children have acknowledged they are over-weight and the mother has made changes in the diet she provides for the children and is encouraging them to be more active
- the family has agreed to a referral for family therapy - without this intervention it is likely that the mother would have been successfully prosecuted by the education department.

Strengths

- multi-agency working has enhanced understanding of the family's issues and facilitated those needs in a targeted and timely way
- improved housing, education, children's health and mother's emotional well-being
- staged intervention with both adult and children's lead workers has improved outcomes for the family as a whole.

Risks

- engagement and changes made need to be sustained
- contact between children and their father due to historical domestic violence.

Estimated costs without FRP

These are the estimated costs that the family would have incurred in a year based on their behaviours in the 12 months leading up to the FRP intervention:

Housing

Post eviction accommodation provision
£18,840
Arrears £360
Eviction £12,994
Possession action £3,748

Education

NEET £2,771
Education welfare and court proceedings
£3,369

Family Function

2x Children in Need £600

Health

Chronic health issue/disability £1,793
Adult mental health £2,740

Cost avoidance with FRP intervention

Intelligence gathered during and immediately after the intervention suggests that the risks of incurring these costs were reduced by the following due to the FRP intervention:

Housing 75%

Education 90%

Family function 90%

Health 25%

Total estimated costs avoided in 12 months following FRP intervention:

£34,200

Referrer

Children's Services

Other agencies involved

Children's Services; Marlborough Family Service & Talking Without Fear; Education-School, School Nurse

Background and concerns:

Single mother with 4 children including a daughter of 18 years old who has a baby born in April 2009, all living in same household. Contact arrangements are in place for the father. The family has been known to Social Services since 1994.

- parents separated after serious incident of domestic violence and mother obtained non-molestation order.
- children have poor attendance and attainment at school
- poor engagement with family therapist
- debts and rent arrears
- mother's low mood
- ineffective parenting.

FRP Care Plan

- individualised benefits/debt advice
- support and advice regarding housing and overcrowding
- address experience of domestic violence with mother and provide support around impact
- explore and put in place family therapy
- work with father around contact with children and other practical issues
- father to be offered risk assessment by domestic violence intervention project worker for perpetrators attached to FRP
- father to be meaningfully engaged with substance misuse services
- health visitor to check baby's progress & development and support around positive parenting, health and nutrition.

Progress and blocks

- mother engaged with parenting support services and there was an improvement in the children's attendance at school. Mother and children are engaged with talking without fear project and therapeutic services
- issues of debt and rent arrears addressed by mother with assistance from FRP benefits advisor
- father attending a residential detoxification programme, prior to FRP involvement. Also participated in the risk assessment for perpetrators and agreed to attend the 32 week programme at the Domestic Violence Intervention Project (DVIP)
- Children having positive contact with father, and both parents wanting to resume relationship
- eldest daughter and baby moved out of family home, easing the overcrowding. However mother's 15 year old niece moved in due to problems at her home. The benefit was counteracted by this arrangement
- father was approaching end of residential placement and talking about returning home. Advised by professionals that he needed to complete DVIP programme and move to second phase of treatment regarding his alcohol programme. Mother also started to disengage with FRP workers and social worker
- father relapsed and presented as angry and violent to family. Mother able to protect children using guidance provided to the family. Children supported during these periods and father was returned to rehabilitation facility
- without this intervention and given the level of violence it was highly likely that the youngest children would have been taken into care.

Strengths

- a multi-agency, targeted approach has improved the complex and longstanding issues for this family
- good partnership working between agencies ensured effective communication creating a sense of cohesion and safety for the family
- consistency in approach by multiple agencies meant the Team Around the Family was able to continue with the care plan despite father's relapse and periodic non-engagement from the family.

Risks

- father's progress is good but he may yet relapse with potentially negative consequences on overall family progress
- longstanding domestic violence and entrenched behaviours are difficult to change – an intensive approach over time is necessary.

Estimated costs without FRP

These are the estimated costs that the family would have incurred in a year based on their behaviours in the 12 months leading up to the FRP intervention:

Housing

2x Arrears £720

Education

NEET £2,771

Education welfare £5,638

Domestic violence

Domestic violence £23,200

Family function

2x Cost of Care £93,600

Health

Adult mental health £2,740

Substance misuse (risk of rehab) £17,400

Cost avoidance with FRP intervention

Intelligence gathered during and immediately after the intervention suggests that the risks of incurring these costs were reduced by the following due to the FRP intervention:

Housing 90%

Education 75%

Domestic violence 75%

Family function 90%

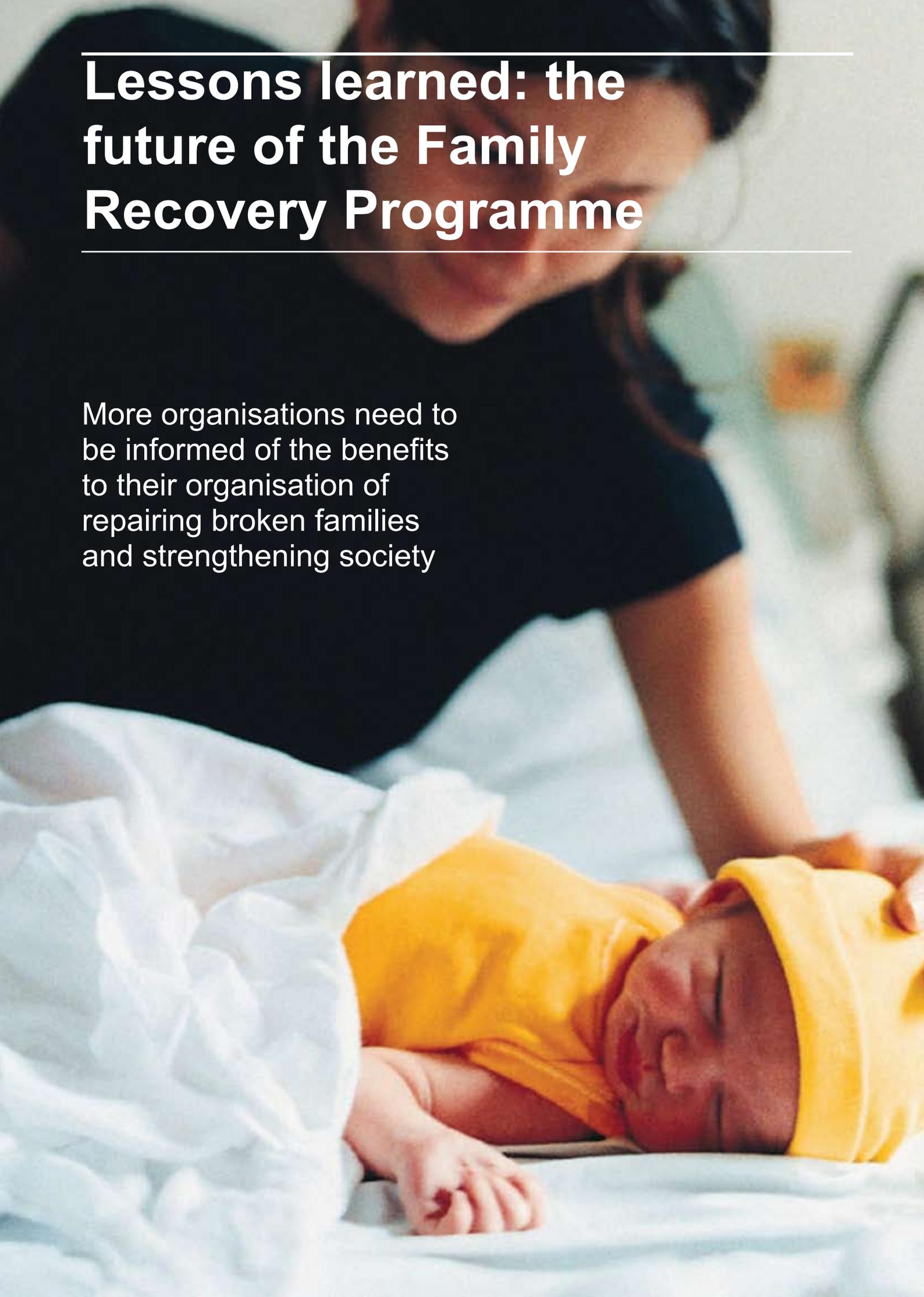
Health 50%

Total estimated costs avoided in 12 months following FRP intervention:

£118,700

Lessons learned: the future of the Family Recovery Programme

More organisations need to be informed of the benefits to their organisation of repairing broken families and strengthening society



Westminster City Council is extremely proud of the Family Recovery Programme and its results. However, given the uncertain economic climate and the diffuse and often unquantifiable nature of the programme's benefits, we recognise the need to demonstrate its positive economic impact.

The current Department for Education pathfinder funding for FRP ends in March 2011. In a tight fiscal environment and with relatively little of the avoided costs benefiting the local authority, the incentives and justification for further investment by Westminster taxpayers alone are understandably weak.

In the knowledge that Westminster residents receive great benefit from the programme, the council is exploring options to secure the FRP. One option is to widen the funding base so that the organisations that benefit directly from mid to long term cost savings provide investment. This would see more public and quasi-public bodies support the programme, including RSLs and the Probation Service. By bringing more organisations together under the FRP umbrella and increasing their commitment, information sharing between the FRP practitioners and information-holders would also increase.

Another option is to link funding to performance. Using a 'payment by results' model could see clawbacks by funding partners if FRP failed to achieve its cost-avoidance aims for particular bodies.

Proposals for this kind of 'payment by results' models of funding could also ensure higher levels of accountability in achieving positive social outcomes. Currently the diffuse nature of beneficiaries necessitates an overarching view of the FRP's work at central government level before initiating a joined-up approach to a full funding structure. There is also potential to link the programme to an innovative new payment by results scheme for Integrated Offender Management.

As we enter a new financial era where resources are tight, grant funding tied to results is likely to become not just desirable but necessary to drive efficiency, sustain quality and encourage innovation in public services. Traditional funding mechanisms and reporting procedures will inevitably undervalue holistic approaches required to tackle the deep-rooted societal problems that the FRP was designed to address. The current system of local expenditure of centrally raised block grants with results assessed against strict targets handed down by a single Whitehall department does little to encourage the required innovation.

Appendix one: FAQs

Who can make a referral to the FRP?

Referrals are welcomed at any time from statutory and non-statutory agencies. Most referrals to date have been from the children's, adults', child health and crime and anti-social behaviour services. As the project expands, we hope to receive referrals from GPs, voluntary sector partners and other government agencies such as the Probation Service and DWP.

What is the caseload capacity of FRP?

Teams take on 80 cases over a period of 12 months. In its first year the programme concentrated its work in the North and North West of the city, where social exclusion is most prevalent. By September 2009 the service was rolled out city-wide.

Is participation in the FRP voluntary?

Families consent to information being shared between agencies to create their Family Recovery Care Plan at the TAF meeting. They also sign a 'Contract with Consequences', which outlines all the possible repercussions of non-cooperation. 95 per cent of families who have been referred to the FRP have consented to working with the team and have also signed the contract.

How much does the FRP cost?

The funding of the FRP reflects the partnership ethos of the programme.

Breakdown of costs for 2010/11 are as follows:

- Westminster City Council: £400,000 plus housing officer at no cost
- DCSF – Think Family Pathfinder: £300,000
- Westminster PCT: £240,000
- DCSF – Anti social behaviour and youth crime Family Intervention Programme grants: £ 274,000
- Metropolitan Police: providing two police officers at no cost
- European Social Fund - £11,000 for employability work.

How does FRP differ from Family Intervention Projects (FIPs)?

Every local authority now has funding to develop a FIP aimed at families who are engaged in crime and anti-social behaviour.

The aims of the Family Recovery Programme are much wider than FIPs. Whilst a large proportion of those families referred to the FRP have been identified by community protection services, the programme works with families with a wide range of other problems including those associated with poor parenting, low educational attainment and mental health issues. The FRP works with families who are at risk of losing their liberty, their home and/or their children.

How long does the FRP work with a family before statutory care proceedings are put in place?

The FRP currently has several cases where it works closely to support the work done by children's social workers, particularly cases at high level children in need and child protection levels. FRP work will provide evidence upon which children's social care can base decisions about any statutory action around child protection or initiation of legal proceedings. FRP is not responsible for the timing of these decisions but has the

responsibility and expertise to indicate and/or refer to statutory agencies when concerns about the welfare of children are raised.

How is the programme being evaluated?

As a recipient of DCSF Think Family funding, the programme will be part of a national evaluation. In addition, the council is monitoring 19 separate performance indicators based on outcomes both for families and for the wider community. The council has also commissioned academic research through the University of East Anglia on the effectiveness of the methods of intervention.

The benefits of early, sustained intervention of this kind are widely accepted but the consequent savings to the public purse have never been clearly articulated. Westminster City Council has, therefore, devised a robust cost avoidance analysis of the overall project.

Appendix two: timeline

The Family Recovery Programme works best when action is swift and effectively coordinated

Day 1

FRP referral is received, the case is screened and a decision about whether to accept the case is made.

Week 1

Within the first week:

- a family visit is completed to obtain consent
- the Information Desk starts a search for data across different agencies.

Week 2

Within the first fortnight:

- the first Team Around the Family (TAF) meeting is held to bring together all relevant agencies including: social services, schools, police and adult mental health workers as well as specialists on family therapy, housing, domestic violence and benefits.
- the care plan is written with input from the family
- a small TAF is established and lead professionals are appointed for adults and children
- the family agrees to the care plan.

Months 1-6

- family seen several times per week by lead workers with support from TAF members
- a schedule of 3 weekly reviews is put in place involving the family to review progress on plans and risks.

Month 6-12

- intensity gradually reduces and contacts with community services are established with the family
- subject to the family's progress, the case is closed and handed over to lower tier services.

Year 2

For a period of up to two years:

- the family is monitored and fast-tracked back into the Programme if necessary.

Appendix three: costs avoided

The research conducted by Westminster City Council into the costs avoided as a result of FRP action is predicated on the published national costs of 25 individual indicators linked to social breakdown. Where this was not available, the council used local unit costs to estimate the total cost avoidance. However, improvements will not always be absolute. For that reason, expert opinions were sought to assess the percentage improvement for each family in relation to each of the measures included in the table below.

| Risk | Cost | Source |
|---|---------|---|
| Rent arrears | £360 | Westminster's own administration costs |
| Noise | £686 | DfE Negative Outcomes Costing Tool - Noise including staff time and prosecution and informal intervention |
| Housing nuisance | £1,206 | Westminster's own costs - 40 hours housing officer time |
| Possession action | £3,748 | DfE Negative Outcomes Costing Tool - possession action |
| Eviction (legal action to LA) | £12,994 | DfE Negative Outcomes Costing Tool- nuisance behaviour legal action to local authority |
| Post eviction accommodation provision | £18,840 | Westminster's own costs based on 6 months temporary accommodation |
| Youth Offending Team (YOT) intervention | £4,391 | Westminster's own costs per order/intervention |
| Career criminal | £8,571 | Impact Assessment of Youth Crime Action Plan, July 2008, Home Office, DCSF, MoJ: £300k over a lifetime divided by 35 years |
| Cost of ASBO | £5,350 | DfE Negative Outcomes Costing Tool |
| Young prolific offender | £24,000 | Westminster's own costs – average cost of young prolific offenders in a year prior to joining FRP using costing data from Home Office and other sources |
| Graffiti | £6,462 | DfE Negative Outcomes Costing Tool - Graffiti (low) |

| | | |
|--|---------|---|
| KS3 (age 11-13 risk of Pupil Referral Unit) | £39,100 | Westminster's own costs |
| KS4 (age 14-16 risk of Pupil Referral Unit) | £17,100 | Westminster's own costs |
| NEET | £2,771 | Estimate cost of being 'Not in Education, Employment or Training' at age 16-18, DCSF, Research Report RR346, 2002: £97k over a lifetime divided by 35 years |
| Education welfare officer (EWO) (no court) | £2,819 | Westminster's own costs based on average cost per educational welfare case |
| EWO and court | £3,369 | Westminster's own costs based on average cost per educational welfare case plus £550 magistrates court fees (from DfE Negative Outcomes Costing Tool) |
| Domestic violence | £23,200 | DfE Negative Outcomes Costing Tool |
| Child in Need (CIN) | £300 | Westminster's own costs of Child Protection staff time, average Section 17 contribution |
| Parenting Order | £781 | DfE Negative Outcomes Costing Tool - Parenting Order. Only families with YOT involvement are at risk of parenting orders |
| Child Protection Plan | £5,000 | Westminster's own costs of child protection staff time, average Section 17 contribution |
| Looked After Child court proceedings and court costs | £24,000 | Westminster's own costs of child protection staff time, average Section 17 contribution. Used where individuals incur legal costs but do not go into foster care |
| Cost of care | £46,800 | Westminster's own costs - 1 year foster care at £900 per week |
| Chronic health issue/ disability | £1,793 | Costs from DfE - 10 x £20 per GP visit, 2 x £116 per outpatient visit, 4 x £32 prescription visit, 2 x inpatient £443 per day. £110/visit, 1 x emergency ambulance x £237/journey |
| Adult mental health | £2,740 | CNWL Mental Health Trust cost of IAPT counselling |
| Substance misuse (risk of rehabilitation) | £17,400 | Westminster's own costs including NHS detox contribution |

Local Government Leadership

Local Government House

Smith Square

London SW1P 3HZ

Telephone 020 7187 7388

Facsimile 020 7187 7383

Email info@localleadership.gov.uk

www.local.gov.uk



City of Westminster

Westminster City Council

City Hall

64 Victoria Street

London SW1E 6QP

Telephone 020 7641 2168

Fascimile 020 7641 3156

Email nbishopp@westminster.gov.uk

www.westminster.gov.uk

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