Evaluation of Enfield Family and Adolescent Support Service (FASH)

Research Report

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John Rodger, Louise Starks, Amy Woolger, Matthew Cutmore & Lesley Wilkinson – York Consulting LLP
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Executive Summary

The Family and Adolescent Support Service (FASH) was designed to introduce a radical change in the way support for children, adolescents and their families is organised in the Borough of Enfield.

The model aimed to provide a full range of support services for children and young people over the age of 11 and their families. A key feature was the inclusion of other services (psychology, mediation, learning mentors, youthwork) rather than referring out to other agencies; an increase in face-to-face working and greater flexibility of operation to establish effective relationships and support.

The cornerstone of the service was based on conducting whole family assessments, case planning and reviews by a team of highly skilled social workers, drawing in other disciplines to form a customised whole-family intervention; Team Around the Family (TAF).

FASH comprised 3 distinct teams:

- Reunification Adolescent Support Team (RAST); which supported reunification of families after a child had spent a period of time in care
- Family and Adolescent Support Team (FAST); which supported young people who were at risk of being taken into care
- Child Sexual Exploitation Prevention (CSEP); which supported young people at risk from CSE

The level of risk, in terms of young people becoming LAC, varied considerably across the teams.

In addition to the support from experienced practitioners, the FASH model also included training up Parent Champions who could provide peer to peer support for parents experiencing similar challenges.

Evaluation Overview

The evaluation was designed to assess the impact FASH had on the needs of young people on the edge of care, the effectiveness of multi-disciplinary working and the cost effectiveness of the delivery model in generating improved outcomes for young people.

The evaluation addressed both qualitative and quantitative impacts through a multi-method approach. Evidence included family case studies, a family and young people survey, a practitioner and partner survey, and the cost benefit analysis, employing a Fiscal Return on Investment methodology in each case and across the whole service.
In order to demonstrate the value added of FASH interventions, an historical comparator group was established of young people and families with similar characteristics, but who did not receive FASH type support.

The emerging findings from the evaluation have been cascaded locally to practitioners and partners through good practice seminars throughout the project.

The evaluation has broadly been implemented as planned, although higher levels of resource were devoted to the cost benefit analysis (increasing the sample size) and formative model assessment and development (monitoring and supporting delivery practice).

**Key Findings**

**Impact on Families**

From the period June 2015 to December 2016, FASH data shows it engaged with 246 young people. Where engagement among families was good, the high level of support and challenge delivered by social workers, in partnership with other key professionals, made a positive impact; children and young people have been kept out of care as relationships with their families improved.

Preliminary estimates suggest that the number of young people being placed in care in 2016/17 could be 20% lower than the previous year.

Data provided by the FASH team on the impact of their support on young people suggests that the majority of young people experienced a reduction in safeguarding concerns. Almost one half of the 246 families referred to the service had been closed to social care following support.

Evidence provided through case studies and interviews with practitioners and partners, indicates that FASH provided a valuable service to the majority of young people and some families and to the Borough of Enfield, in terms of future cost savings from a reduced demand on other services.

Many families interviewed were happy to be receiving support and reported a sense of relief when social workers, with a capacity to make a difference, were assigned to their case.

Features of FASH support that worked particularly well included mediation, the use of youth workers and learning mentors, and access to psychologists. Both parents and young people valued having a dedicated worker, focusing on their particular issues, and in whom they could trust.
Overall, family perceptions of the support they received were generally mixed. Positively, 70% felt that workers had built a good relationship with the young person and 40% rated the FASH service as between 8-10 out of 10.

However, 46% of families closed to FASH felt the duration of support was insufficient and 30% felt there had been no long lasting changes.

Less positive assessments in many cases were linked to deficiencies in whole-family working and young people disengaging from the service. The focus of support, in the main, was directed to the young person, rather than the wider family. There was limited use of whole family assessments and the application of the Family Outcome Star. Only one family was referred to Family Group Conferencing.

**Cost Benefit Analysis**

The cost benefit analysis involved estimating the costs of support provided to a young person and their family, and the application of financial proxies to outcomes achieved as a result of the support.

The cost benefit analysis was based on the experiences of 121 families (49% of the total) receiving FASH support). The average cost of FASH support was £2,000 and the average benefit was £6,000, generating a return on investment of 3.0. This indicates that for every £1 invested in FASH support, there was a return of £3.

Analysis of the historical comparator group revealed a return on investment of 0.3. This means a loss of 70p for every £1 invested in support. The significant difference, relative to FASH outcomes, demonstrates a relative cost effectiveness of the FASH approach.

The return on investment at a whole-service level, which takes account of overheads and an annual case load, reveals a lower return on investment of 1.84. The lower figure is largely explained by overhead costs. This is in line with high-level overheads, such as management, training and supervision of staff associated with a project of this nature.

**Partner Perceptions**

Partners were asked for their views on FASH (a list of partners responding is detailed in Appendix 6). Partner perceptions were mixed, but generally positive, with 82% indicating that FASH had responded positively to referrals, 57% indicating that FASH had stopped case escalation and 88% stating that FASH was filling a service gap.

More than three-quarters of partners (75%) supported the continuation of the FASH support model.
Partners indicated that the FASH service is crucial for families experiencing a range of complex needs, and that their capacity to work intensively with them is what the Borough needs.

Areas of FASH operation identified for improvement included stronger management oversight, greater integration and coordination with statutory Children’s Services process and procedures and improved skills of FASH workers linked to family working.

It was widely acknowledged that the key challenge for the service was the low levels of experience of many of the workers coming into FASH.

**Practitioner Perceptions**

FASH practitioners were generally very positive regarding their experience of delivering the support model: 86% of practitioners felt they had effectively managed their cases, and 82% felt that cross team communication was effective.

Where practitioner concerns were expressed, they could, in the main, be related back to a lack of experience within the team, and a low level of appropriate management and supervision of cases.

**Impact on Key Macro Indicators**

Macro indicators did not reveal any significant positive impact on the number of social care cases. This may be due to insufficient time having passed from the date FASH started to the time frames in which measures are reported.

The number of children who were LAC rose from 545 in 2014-2015 to 575 in 2015-2016. However, the total number of LAC from April 2016 to November 2016, was 219. This indicates an estimated 20% drop in the number of LAC in 2016-2017. This could result in a saving of approximately £1 million if the trend continues.

The numbers of young people who were LAC increased from 345 per 10,000 at March 2014 to 360 per 10,000 at March 2016, although estimates for 2016/17 suggest a 20% drop.

From between 2013-2014 and 2015-2016, return to birth families shows a significant drop of 13 percentage points in the number of children who were returned to birth families after a period in care.

Data showing the impact on young people being accommodated reveals a 20% increase from June 2015.
Lessons Learnt Regarding Programme Implementation

Establishing the referral process and operating protocols took longer than originally planned: the FASH service did not start receiving significant numbers of referrals, and staff were under-utilised, until September 2015.

The separating out of the 3 teams discouraged resource and practice sharing among social workers. The recent reintegration into a single team has improved practice and increased the overall balance of the critical RAST component.

The appointment of an external consultant as Service Manager, who was unfamiliar with Enfield structures and ways of working, resulted in the service operating in relative isolation from the rest of children’s services. The recent introduction of a new experienced in-house manager, following a brief review, has made changes to improve the function and cohesiveness of the project operation and, in particular, social worker practice and synergy with social care protocols.

The recruitment of a relatively large number of additional social workers proved difficult to achieve. The result was a high proportion of inexperienced workers, who initially struggled with the innovative delivery model and the high level of flexibility within the operating practice.

Despite these challenges, the FASH delivery model has introduced an innovative multi-disciplinary package of support that has transformed the lives of a number of young people and generated potential savings to Enfield Borough Council. However, aspects of model operation in this early phase of development have been found to be somewhat lacking. These include isolation from social care; the operation of Parent Champions; the accuracy of management information; the development of support protocols and the use of commissioned services.

The recent external auditing of family case files has provided a boost to FASH practice development through the identification of a range of improvement opportunities. This has resulted in some recent operational restructuring.

Appropriateness of the Evaluation

The evaluation approach has been sufficiently robust and flexible to capture the impacts and cost effectiveness of FASH operation.

The dominant position of the cost benefit analysis within the evaluation has strengthened the credibility of the evaluation findings and has been generally welcomed by the FASH project steering group.
The hands-on approach to understanding operational delivery significantly changed the relationship with practitioners. The facilitated feedback loop to management ultimately led to enhanced supervision and management, which, in turn, ushered in management and practice changes. Had we kept our focus more strongly on the summative elements, as originally planned, then the opportunity to formatively inform model development could have been missed.

As our evaluation programme continues until March 2017, there is an opportunity to assess the impact of the changes recently introduced on the overall performance of the FASH delivery model.

Evidence of Sustainability

Qualitative and quantitative evidence suggests that the outcomes could not have been achieved in the absence of FASH and partners would like to see the programme continue in some form.

The cost benefit analysis indicates that FASH delivery generated a saving of £3 for every £1 spent.

The FASH model has recently been refocussed and restructured to reflect best practice findings. The intention of the borough is to retain the CSE and FAST as co-located teams and to bring the RAST team back in to Children’s Services.

Future Development and Wider Application

Elements of the FASH model that have worked particularly well, and which are worthy of wider consideration and application include:

- intensive social worker support
- use of mediators, clinical psychologists and learning mentors
- positive activities funding with access to flexible funding to support young people to attend clubs and develop hobbies
Project Overview

What outcomes was the project seeking to achieve?

The Family and Adolescent Support Service (FASH) was designed to introduce a radical change in the way support for children, adolescents and their family is organised in the borough of Enfield.

Enfield is one of the most deprived London boroughs with 3 wards that are within the most deprived 10% of wards in England. Features of local deprivation include:

- a proportionally low Looked After Children (LAC) population (43 per 10,000\(^1\), compared to the national average of 60 per 10,000\(^2\)), but with higher levels of complex needs
- 46% of new entrants to the care system being aged 11 or over, as are children in residential care
- domestic violence being a significant factor in over 70% of child protection referrals
- gang related violence and offences which are on the increase\(^3\)
- the largest number of households in London affected by welfare reform benefit cap

An analysis of placement stability data for Enfield Looked After Children (LAC) conducted in 2014\(^4\) identified young people who entered the care system as adolescents to be the ones exhibiting the most disruptive behaviour. It also highlighted concerns of sexual vulnerability among girls in the older age group. The general picture, and central problem, to emerge from analysis was of young people from chaotic backgrounds and beyond parental control exhibiting serious behavioural problems. One of the recommendations from the report was:

“Resources should be focussed on keeping challenging young people out of care whenever it is safe to do so…to increase the capacity of children’s services to provide a range of threshold of care interventions.”\(^5\)

\(^1\) Enfield Borough Council, Number of Children under 18 LAC at 31st March 2016.
\(^4\) Ibid
\(^5\) Ibid
The FASH approach was designed to fundamentally change the child, adolescent and family support system to affect this change, rather than simply increase the capacity of existing resources.

Features of improvement designed to be delivered through the FASH model included:

- developing a comprehensive preventative service through a well-resourced specialist multi-disciplinary service
- a whole-family approach that focussed on increasing family resilience
- customising support inventions to the individual needs of children, young people and families in Enfield

Anticipated outputs for the FASH delivery model were specified as follows:

- reduction in the number of Looked After Children (aged 11-17)
- reduction in the late entry into care (aged 11-17)
- reduction in children becoming LAC due to remand
- achieve fiscal savings in youth and family support budget
- reduction of re-entry into care (aged 11-17)
- reduction of re-referral to social care (aged 11-17)
- improved life chances for local people
- a reduction in family dependence on public spending

**How did the project set out to achieve the intended outcomes?**

The FASH model aimed to provide a full range of support services for children and young people (CYP) over the age of 11 and their families. The cornerstone of the service was based on conducting whole family assessments, case planning and review by highly skilled social workers, in addition to drawing in other disciplines, as appropriate, to form a bespoke sequenced intervention for the whole family: a Team Around the Family (TAF). Within the model, social workers were to adopt an enhanced leadership role, whilst also being accountable for the services delivered. The key was about establishing and forming effective relationships with young people and their families, with an emphasis on increased face-to-face working and greater flexibility of operation. A key feature of the model involved drawing in other services, rather than referring out to other agencies.

The FASH service delivered support to CYP with a range of needs:
• young people aged 16-17 years who were experiencing family breakdown and at risk of homelessness, and who would otherwise be taken in to care (LAC) were supported to return home, reside in kinship care, or become accommodated in semi-independent, or independent living

• families where CYP were at risk of becoming LAC were supported to help prevent periods of care

• families with CYP coming out of care or YOI were supported to ensure a successful re-unification back to the family home

• CYP at risk of Child Sexual Exploitation (CSE) were supported to prevent longer term negative outcomes as a result of CSE

FASH comprised 3 dedicated teams:

• Reunification Adolescent Support Team (RAST); which supported re-unification after a period of care

• Family and Adolescent Support Team (FAST); which supported CYP who were at risk of being taken in to care, and

• Child Sexual Exploitation Prevention (CSEP); which supported CYP at risk from CSE

The levels of risk in terms of CYP becoming LAC varied considerably across the teams and therefore, the extent to which the CYP could be said to be on the edge of care differed. This added an element of complexity within the evaluation with regards to determining the impact, the cost benefits of each team and of the service as a whole.

**Changes to intended outcomes and activities**

The evaluation was broadly implemented as planned, although higher levels of resource were devoted to:

• increasing the size of the cost benefit analysis

• formative model assessment and development

• monitoring and supporting delivery practice.

The Parent Champions Panel, which was one of the key innovative strands of support, was only implemented in October 2016 and was, therefore, outside of the timeframe of the evaluation.

6 As determined by the discussion paper circulated by the Innovation Programme’s Evaluation Coordinator, Oxford University, for the purpose of the Innovation Fund evaluation.
Fewer evaluation resources to-date have been spent on family feedback and follow up. This will be addressed in the final stage of the evaluation process, completed in March 2017.

**Operational context**

Local intelligence in Enfield showed that LAC young people in the Borough of Enfield experience poor outcomes in relation to criminality, school exclusions and emotional behavioural health issues. In order to improve outcomes for this group, it was recognised that more intensive work with the CYP and their families was needed, in order to deliver a solution focussed approach. FASH practitioners (for example, a social worker, youth workers, psychologists etc.) were not trained in the use of Restorative Practice, but did demonstrate the use of restorative principles. FASH operating principles were designed around:

- a lower case load of between 6-8 cases per social worker, which enabled workers to provide a more effective range of support to address need and achieve change
- positive and trusted relationships with clients
- consistency of support
- practice focussed on improving family resilience and coping skills within family networks

Assessment of need included the Child and Family (C&F) assessment, and was to be supported through the use of the Family Outcomes Star to ensure that the approach considered all elements of family functioning.

**Evaluation overview**

The evaluation was designed to address the following questions:

- what impact has FASH had on the needs of young people on the edge of care?
- what impact has the multi-disciplinary team had on the effectiveness of support interventions?
- how cost effective is the FASH support model?

**Evaluation method**

**Evaluation database**

The evaluation database, designed by York Consulting, which linked all data generated through the study, formed the foundation of the analytical approach, with all other
inherent methods and tools emanating from this key source of information and intelligence. The database linked key information (via a unique identifier) relating to all supported family members, and focussed on all aspects of the FASH delivery model and associated measures of performance.

Comparator group

We established an historical comparator group of 20 families and young people with similar characteristics to those receiving FASH support. Key characteristics were agreed with EBC as being young people who were:

- LAC
- subject to a Section 20 (looked after but not under any order)
- on remand
- CPP then into LAC

Family case studies

We closely monitored the experience of 25 families through the FASH process. This involved face-to-face consultations with:

- family members; including supported young people
- FASH practitioners for example, social workers, psychologists, youth workers etc.

The evaluation methodology includes consultations on entry to, and exit from, the programme. This approach allowed a qualitative assessment of family experience; provided an opportunity to assess the effectiveness of the FASH process; and to track more qualitative intermediate outcomes, such as confidence and resilience.

Family and young people survey

All families were surveyed on exit from the programme of support. This took the form of a short questionnaire which captured the family experience and impact of the support. Key themes of investigation included expectations on entry to support; quality of support received; what had worked well and why; what had worked less well and why; key benefits and impact of support; expectations for the future. A small cash incentive was offered to encourage response: 26 responses (15%) were received from 169 questionnaires distributed.

Practitioner and partner survey

We undertook surveys of practitioners and partners (see Appendix 5) actively involved in FASH delivery. Key areas of investigation included family selection and engagement; assessment and action planning; combinations of support; integrated working; aspects of
systems change; aspects of good practice; impact on young people and families; lessons for the future.

The first partner survey was undertaken 3 months from the commencement of the programme and repeated after 9 months to capture the bedding-in effect.

Cost benefit analysis

The cost benefit analysis was based on an estimation of the support costs and monetisation of the benefits associated with the needs of families and young people through targeted FASH support essentially, cost avoidance. The approach employed a Fiscal Return on Investment (FROI) methodology, a variation of Social Return on Investment, which focused exclusively on the financial (actual costs) savings to the state or local authority.

Reporting and Dissemination

Emerging findings from the evaluation have been cascaded locally to practitioners and partners through good practice seminars throughout the project.

The evaluation methodology will be rolled on to the next cohort of young people entering the programme, and a final report was submitted to Enfield Borough council in March 2017.
Key Findings

Key findings from the FASH evaluation study are addressed under the following headings:

- impact on families
- partner perceptions
- practitioner perceptions
- cost benefit analysis

Impact on Families

The impact on children, young people and families varied, depending on the level and types of need presenting to the teams. Where engagement among families was good, the high level of support and challenge delivered by social workers, in partnership with other key professionals, made a positive impact; children and young people were kept out of care as relationships within families improved.

Macro data provided by Enfield BC shows there was a reduction in the costs associated with LAC across the borough and, based on the data from 2016-2017 so far, a potential decrease in the number of young people recorded as LAC:

- in 2014-2015, 545 young people had been in care at an annual cost of £9,927,153
- in 2015-2016, 575 young people were in care at an annual cost of £9,882,328
- from 2016 to current date (October 2016), there were 219 (estimated 438 per year) young people who had been in care at a cost of £4,337,813 (estimated £8,675,626 per year)

This shows a total drop of 107 (20%) of young people who were in care from 2014-2015 and a potential saving of £1,251,527.

Data generated from the study regarding the impact of the FASH support on young people shows that most young people experienced a reduction in safeguarding concerns. We have analysed in detail 121 cases. This is represented as:

- 65 FAST cases
- 28 CSEP cases
- 28 RAST cases

Table 1 shows the status of young people on entry and exit from FASH.
### Table 1: Levels of risk on entry and exit from FASH

<table>
<thead>
<tr>
<th>On entry</th>
<th>On exit</th>
<th>No. of cases</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Looked after child (9 cases)</td>
<td>Looked after child</td>
<td>4</td>
<td>44%</td>
</tr>
<tr>
<td></td>
<td>No concerns (closed to social care)</td>
<td>3</td>
<td>33%</td>
</tr>
<tr>
<td></td>
<td>Subject to a CiN plan</td>
<td>2</td>
<td>22%</td>
</tr>
<tr>
<td></td>
<td>Subject to a CP plan</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Subject to a CP plan (3 cases)</td>
<td>Looked after child</td>
<td>1</td>
<td>33%</td>
</tr>
<tr>
<td></td>
<td>No concerns (closed to social care)</td>
<td>1</td>
<td>33%</td>
</tr>
<tr>
<td></td>
<td>Subject to a CiN plan</td>
<td>1</td>
<td>33%</td>
</tr>
<tr>
<td></td>
<td>Subject to a CP plan</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Subject to a CiN plan (49 cases)</td>
<td>Looked after child</td>
<td>4</td>
<td>8%</td>
</tr>
<tr>
<td></td>
<td>No concerns (closed to social care)</td>
<td>31</td>
<td>63%</td>
</tr>
<tr>
<td></td>
<td>Subject to a CiN plan</td>
<td>12</td>
<td>24%</td>
</tr>
<tr>
<td></td>
<td>Subject to a CP plan</td>
<td>2</td>
<td>4%</td>
</tr>
<tr>
<td>No previous involvement from social care (60 cases)</td>
<td>Looked after child</td>
<td>1</td>
<td>2%</td>
</tr>
<tr>
<td></td>
<td>No concerns (closed to social care)</td>
<td>57</td>
<td>95%</td>
</tr>
<tr>
<td></td>
<td>Subject to a CiN plan</td>
<td>2</td>
<td>3%</td>
</tr>
<tr>
<td></td>
<td>Subject to a CP plan</td>
<td>0</td>
<td>0%</td>
</tr>
</tbody>
</table>

Source: YCL Evaluation Database

Key points to note:

- of the 49 young people who were on a CiN plan on entry to FASH, 12 (25%) remained on a CiN plan; 2 were stepped up to Child Protection and 4 became Looked After. The majority, 31, (63%) exited with no concerns.
- 9 young people from a total of 121 were LAC on entry and this was reduced to 4, with 3 having no safeguarding concerns and 2 stepped down to CiN.
- of the 60 young people who had no previous concerns, 2 were stepped up to a CiN plan and one became LAC.
- the clear majority (92, 76%) of young people left FASH with no concerns recorded. However, it should be noted that 24 (25%) young people disengaged from support and will have been registered as no longer needing support.

The figures presented in Table 1 are based on a representative sample of young people who have been through the FASH support service. As social workers did not complete all data on all cases, it was not possible to assess all cases supported (246). However,
sample evidence shows that FASH has prevented young people’s needs from escalating and from becoming LAC.

FASH practitioners reported that they had reduced levels of need for young people across a number of key areas as highlighted in Figure 1 below.

Figure 1: Needs on entry and exit from FASH

Figure 1 shows that FASH practitioners observed reduced levels of need between entry to, and exit from, FASH. There was a reduction in all areas of need, in particular:

- conflict within the home
• risk of becoming NEET
• college or school attendance
• anger issues or aggression
• emotional and behavioural development
• housing stability issues

Evidence provided through case studies, interviews with practitioners, and partners suggested that FASH provided a valuable service to young people and some families. Many families interviewed were happy to be receiving support and reported a sense of relief when social workers with a capacity to make a difference were assigned to their cases:

“My social worker was very brilliant and he explained every move step-by-step, kept me updated regularly and was a very understanding person. The help was just awesome.” (Young Person)

Many families interviewed during the support spoke of the quality of relationship that had been forged between the family and young person:

“He has a way of getting through to my son, he’ll get up and go and see him, he respects him.” (Mother)

Over one half of families had a history of previous social worker involvement and had become jaded with social services through numerous unsuccessful interventions. Therefore, it was important that the FASH service offered something different, both in terms of capacity and duration of support, but also regarding the nature of intervention.

Evidence reveals that one of the key differences was linked to the access to a range of therapies and interventions, and duration and intensity of support.

Approximately two-fifths (39%, 47) of cases had support from FASH professionals other than their case worker (social worker). Additional support was more prevalent in RAST cases with 16% (20 young people) requiring support from other professionals, which compares to 17% (21 young people) for FAST and 5% (6 young people) for CSEP cases. Table 2 details the number of cases (from a total of 121 cases) that required additional support and the types of additional support.
Table 2: Additional FASH support

<table>
<thead>
<tr>
<th></th>
<th>No. of cases</th>
<th>% of total cases (121)</th>
<th>Total hours</th>
<th>Average hours (per case)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Psychologists</td>
<td>22</td>
<td>18%</td>
<td>105</td>
<td>5</td>
</tr>
<tr>
<td>Learning Mentors</td>
<td>15</td>
<td>12%</td>
<td>125</td>
<td>8</td>
</tr>
<tr>
<td>Activities/Engagement Officers</td>
<td>15</td>
<td>12%</td>
<td>98</td>
<td>7</td>
</tr>
<tr>
<td>Mediation</td>
<td>13</td>
<td>11%</td>
<td>60</td>
<td>5</td>
</tr>
<tr>
<td>Triage Workers</td>
<td>4</td>
<td>3%</td>
<td>19</td>
<td>5</td>
</tr>
<tr>
<td>Healthy Living Advisors</td>
<td>3</td>
<td>2%</td>
<td>5</td>
<td>2</td>
</tr>
<tr>
<td>Youth Workers</td>
<td>1</td>
<td>0.8%</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Housing Officers</td>
<td>0</td>
<td>0%</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Number of cases requiring additional support</strong></td>
<td><strong>47</strong></td>
<td><strong>39%</strong></td>
<td><strong>414</strong></td>
<td><strong>9</strong></td>
</tr>
</tbody>
</table>

Note: multiple-response question – total does not sum
Average hours rounded to nearest whole number

It should be noted that 22 cases had a youth worker as their only key worker in FASH (as opposed to a social worker) but these are not shown here as they are not additional workers to a case. The majority of these cases (21) were for young people at risk of CSE, where it was felt more appropriate to have a youth worker response.

Although the average length of support was 4 months, this was influenced by the high number of cases where the young person was seeking support with accommodation and throughput of these cases was higher.

For families who were referred in to FASH with a plan for the young person to be returned home after a period in care, support lasted up to 10 months in duration with the average being 6 months. The duration varied and often depended on how ready the family was to be reunified. In some instances, social workers perceived that families were referred in to FASH to be returned home, but were not at the point where reunification was viable. In these cases, the social worker provided more intensive support. Where necessary and when perceived to be beneficial, social workers utilised the expertise of mediators to facilitate a greater understanding between individual family members.

Weekly contact was not particularly intensive, with the average being 4 hours a week for families being supported to stay out of care proceedings, and 6 hours a week for families who were being reunified after the children had been in care or a youth offending institution. This hourly contact rate includes face- to-face and admin time spent on cases.

Mediation was delivered mainly to young people and their families where the young person was at risk of homelessness (aged 16-17) due to family breakdown, although a small number of referrals were made from the Reunification Team for mediation. One of
the key benefits of this approach has been the perception by families that mediation was independent of social services and, therefore, operated wholly for the benefit of families.

There is some evidence that mediation in these circumstances resulted in a positive outcome and the young person staying at home. Data provided by FASH for the 18 month period from April 2015-November 2016 showed that:

- in total, 274 young people presented as homeless over this time and of these, 125 (45%) were placed
- of those 149 that were not placed, 31 (21%) were successfully returned home after a period of support from FASH; others either disengaged, were not entitled to support or were referred elsewhere

Parents interviewed who received mediation described how having a mediator whose role it was to find solutions on behalf of both parties was a very constructive process:

“It gave us the space to hear each other out. I don’t think we would have got to this stage without it.” (Mother of a young person who wanted to be accommodated but was reconciled instead.)

Other successful interventions were evidenced through case studies and included the use of youth workers and learning mentors working closely with young people on specific issues relating to the young person’s risks. In some cases in the CSEP team, the youth worker role extended to become the case holder once the initial assessment and support plan was agreed for the young person. This provided flexibility within the team, allowing social workers to take on higher level need cases, but also gave dedicated support to the young person from an expert youth worker.

Similarly, social workers worked closely with learning mentors to motivate young people who were NEET, or at risk of being NEET, to focus on their educational outcomes. Learning mentors were hugely valued by the social workers as a way of gaining more insight into the problems facing the young person, and in finding solutions. Strong relationships between learning mentors and the young people were evidenced as learning mentors accompanied young people to college; helped secure training or employment opportunities, and accompanied young people to job interviews.

Where young people engaged well with the service, their experiences of multi-agency working was mostly positive:

“I feel like I’m like a puzzle being put back together...” (Young person who received support from the psychologist and social worker).

Similarly, parents also valued the idea of their child having a dedicated worker focussed on their particular issues and in whom they trusted to positively influence their decisions:
“She won’t talk to me about what she feels but I’ve noticed a difference in her behaviour since she’s been working with [name of youth worker] and I’m so relieved.” (Mother of a CSE related case)

We have been unable to talk with any families in detail regarding the benefits of the psychological support due to highly sensitive nature of the intervention. Interventions often focussed on issues relating to a young person’s anger and emotions and how this affected their behaviour. Psychologists also worked with young people on self-perception and self-esteem as well as relationships. Psychologists did report struggling to engage many young people due to the chaotic nature of their lives. However, evidence provided on the case management data, and from staff within the FASH team, suggested that, where the young person or parent engaged fully, the psychological interventions were powerful.

Families’ Perception of the Benefits of the Support

A survey of families was carried out towards the end of the evaluation to maximise feedback from families. Family questionnaires were sent to all families whom had exited the FASH programme, and for whom we had contact details (169, 69% of the 246). Each young person or parent received a £10 voucher as an incentive to return the questionnaire; 26 questionnaires (15%) were returned.

Family perceptions of the support they received were generally mixed. On the positive side;

- 70% (18) felt workers had built a good relationship with the young person
- 57% (15) felt that good relationships had been established with the family as a whole
- 50% (13) felt that they now knew what they had to change
- 40% (10) rated the FASH service as between 8 – 10 out of 10

We have interviewed many young people who have been successfully placed in semi-independent accommodation who speak very positively about the support they received from the social worker and other workers including youth workers, and activities and engagement officers:

“The FASH was like having someone listening to you without judging.”
(Young Person Accommodated)

“The support has been amazing I can start living again now and focussing on what I want to do with my life.” (Young Person Accommodated)
Case studies and interviews with young people evidenced the commitment from social workers and other specialists to make a real difference to people’s lives. FASH practitioners worked with high levels of sensitivity and creativity, using a range of different tools, including Wishes and Feelings work, Healthy Relationships Pyramid, Affirmation Box and Brief Solution Focussed Therapy, to help young people talk about their relationships, decision making, anger and other emotions.

On the less positive side:

- 46% (12) felt the duration of support was insufficient
- 38% (10) felt families did not experience any positive change
- 30% (8) felt there had been no long-lasting changes
- 58% (15) were not made aware of the complaints procedures

Where families offered less favourable accounts of FASH experience, participants tended to be influenced by:

- the young person’s age and whether or not they were accommodated. There were a number of young people who complained that the support was not meeting all their needs, and when they reached 18, was withdrawn altogether. In one particular case, a young person was left homeless as she struggled to engage with the social worker; when she turned 18, she disengaged from the service and was referred to a housing service but failed to turn up for her appointment. This age limitation remains a challenge for children’s social services.
- focus on returning to home. Some young people felt that the focus of social workers was too much on returning them home without regard to their viewpoint: “Almost the first thing she said to me was ‘you’re going home’ without actually knowing anything about my situation.” (Young Person)
- support not being family orientated and poor communication between social workers and families: a number of parents complained that the support was too focussed on the young person and not enough on the needs of the whole family. Some young people have been very challenging and the experience required by social workers to deal with this challenging behaviour was not always apparent.

This latter point is related to a broader issue regarding the general practice of social workers and their ability to work in a whole-family way with very challenging families. There has been a lack of effective leadership and structure around this practice within the FASH. There was limited use of whole family assessments: only one third of families had a C&F assessment carried out by FASH and the quality of C&F assessments upon referral to FASH varied; very few social workers used the Family Outcomes Star; there was very limited evidence of engaging families in an agreed family plan, and no sign of progress reviews.
There was one family referred for a Family Group Conference and no parents were referred onto parenting programmes.

The issue of whole-family working was addressed with practitioners at a workshop facilitated by York Consulting, where workers were taken through a range of approaches, including establishing goals and designing plans. Several practitioners indicated they had not received this training prior to this event and lacked confidence in working in a whole-family way.

**Partner Perceptions**

Partners fully supported the concept of FASH, and, at the start of the project, the Steering Group meetings were well supported. There was considerable interest in the success of the model, due to concerns over the rising cost demands on the borough for LAC and, in particular, the provision of accommodation for 16 and 17 year olds after the Southwark Judgement. Working to reconcile families, prevent needs from escalating and to reduce the LAC cost were viewed by partners as essential outcomes.

Partner perceptions were recorded at a baseline stage (October 2015) and again towards the end of period of the study (October 2016) to meet the November deadline for reporting. The former addressed expectations, and the latter, experience of engagement.

Partner perceptions were mixed but generally positive:

- 82% felt FASH responded positively to referrals
- 71% thought they could not have accessed similar support without FASH
- 41% felt FASH support was impacting on target outcomes
- 57% thought FASH had stopped case escalation
- 43% thought young people were receiving more effective support
- 88% thought FASH was filling a service gap
- 77% thought the FASH service should continue to operate

Partners indicated that the FASH service was crucial for families experiencing a range of complex needs and that their capacity to work intensively with them was what the borough needed. In particular, having staff with an expert understanding of the issues around CSE was highly valued:

“I have referred some of the young people we have been unable to work with to the team and they have had some fantastic results. We had one case where we couldn’t put our finger on what was going on with the daughter and we referred her to work with one of their team and they
worked out she was being exploited by a gang. We would not have found that out if it hadn’t have been for their expertise.” (Troubled Families Manager)

“I feel that the FASH team has been very beneficial, especially in providing intensive support to children at risk of coming into care, or in returning them home from care.” (Referral and Assessment Team EBC)

The service has been flexible in meeting the needs of the young person/family, and cases have been held outside of FASH with support being delivered across departments in the borough, including the Troubled Families team and the LAC team. This has helped maximise the expertise within FASH and benefited services and cases held outside of FASH.

One or 2 partners expressed concerns about how FASH has operated, particularly where children were on the edge of care, and about Section 20 LAC decisions. Some young people became LAC under a Section 20 order which ultimately entitled the young person to a higher level of financial support on exit from children’s service. However, it was reported that a number of these young people were refusing to engage in any additional support, There was a sense of disappointment in the quality of some of the support provided by social workers, and the lack of urgency or commitment to engage the family to prevent them from becoming LAC.

Areas of FASH operation identified for improvement included:

- stronger management oversight
- greater integration with children’s services
- skills of FASH workers linked to family working

It has been widely acknowledged that a key challenge for the service was the low levels of experience of many of the workers coming in to FASH. FASH struggled to recruit suitably experienced social workers to a service that was working with very challenging families, and this impacted on staff’s confidence levels to work with some of the most difficult families. In addition, the service was led by someone who had no prior experience within Enfield and did not have the professional networks of support from which to draw on across the Borough.

Practitioner Perceptions

The views of FASH practitioners were captured through a survey of team members in September 2016. This included social workers, youth workers, psychologists, learning mentors, and activities and engagement officers. A total of 22 responses were received from a team of 24 (92% response rate).
Perceptions of FASH operation were generally positive:

- 82% felt cross-team communication was effective
- 60% thought management communication was effective
- 86% felt they could effectively manage their cases
- 68% could evidence working in a whole-family way
- 95% thought supervision was constructive

A focus group held with practitioners evidenced considerable commitment and a recognition that the service and quality of joint working had improved considerably:

“We are becoming much more effective in the way we work.” (FASH practitioner)

“I know what I’m doing now – clear instruction as to how the case should progress.” (FASH practitioner)

“We have become very good at sharing information and working together.” (FASH practitioner)

Areas where more concerns were expressed included:

- 86% felt they needed further training, particularly on whole-family working
- 78% felt that FASH was not well understood by social care staff
- 41% felt under a great deal of pressure
- 50% disliked their working environment
- 32% felt that referrals to the service were too challenging

Most of the concerns expressed could be related back to a lack of experience within the team, but also to a low level of appropriate management and supervision of cases.

“Potentially, there is a lack of understanding about the roles and responsibilities of the Reunification Team.” (FASH practitioner)

“Sometimes I need management to make decisions that I am not able to make.” (FASH practitioner)

“For the most time, I feel I am on the edge of not effectively managing my cases and it only takes one to go in to crisis to feel anxious about meeting deadlines.” (FASH practitioner)
One of the challenges has been linked to the various professionals working together and sharing information. This has been a particular issue for psychologists, who indicated that they were informed of things relating to their client that they would rather not hear, as this could alter how they worked with them.

One of the design challenges facing the FASH service was that it was operationally separate from the rest of Enfield's Children's Services. Children’s Services referred cases in for specialist support and the majority of cases were held by FASH practitioners. FASH operated with a high degree of autonomy, which had both positive and negative impacts on the quality of delivery. Practitioners were able to operate with flexibility and to provide families with a timely response. However, FASH operating systems and protocols did not adhere to the wider expectations within EBC. This resulted in the use of external audits and a series of challenges and recommendations to help improve practice. This has improved with the introduction of new leadership.

An additional significant concern of staff was the lack of communication from senior managers regarding their future role and the sustainability of FASH. This has resulted in staff leaving and staff feeling insecure within their employment contract.

**Cost Benefit Analysis**

The FASH cost-benefit analysis involved estimating the costs of support provided to a young person and their family, and the application of financial proxies to outcomes achieved as a result of the support. The cost-benefit model calculated the return on investment of the support provided. Essentially, we were seeking to establish whether the FASH model generated sufficient benefits to cover costs and therefore justify future investment.

The cost benefit analysis included 2 distinct approaches to establishing the potential savings made through operating the FASH model:

- a cost comparison using an historical group of young people who had been in social care and had a similar profiles with edge of care cases
- a cost benefit study analysing the potential return on investment of the whole service

**Cost Comparison with edge of care cases**

In order to measure the additionality of FASH (i.e. what difference FASH made compared to the business as usual approach to supporting young people in social care) we constructed a comparator group from 20 historical children’s social care (CSC) cases in
Enfield that, according to the FASH management team, would have met the criteria for a referral to FASH. Criteria agreed included young people:

- who had been LAC;
- who were subject to a Section 20
- who were on remand
- who were on a child protection plan and had become LAC (needs were escalating)

The comparator group consisted of high-need cases with children experiencing lengthy periods of local authority care. These cases are only represented in the RAST team and, therefore, we have made a cost comparison with the RAST team only.

An overview of the costs and benefits per case for the comparator group is shown in Table 3. All the costs and benefits have been calculated using information collected on the Enfield social care Management Information System (MIS). This includes the duration and intensity of support (CiN, CP and LAC) and outcomes achieved as a result of the support.

Table 3: Comparator group costs and benefits overview

<table>
<thead>
<tr>
<th>Case</th>
<th>Support period (years)</th>
<th>No. of young people supported</th>
<th>Support on-going</th>
<th>Costs</th>
<th>Benefit</th>
<th>FROI</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>3.1</td>
<td>4</td>
<td>Yes</td>
<td>£126,565</td>
<td>£0</td>
<td>0.0</td>
</tr>
<tr>
<td>2</td>
<td>3.8</td>
<td>1</td>
<td>No (independent living)</td>
<td>£66,884</td>
<td>£8,736</td>
<td>0.1</td>
</tr>
<tr>
<td>3</td>
<td>2.1</td>
<td>3</td>
<td>No (YP turned 18)</td>
<td>£21,836</td>
<td>£10,080</td>
<td>0.3</td>
</tr>
<tr>
<td>4</td>
<td>5.4</td>
<td>1</td>
<td>Yes</td>
<td>£96,801</td>
<td>£0</td>
<td>0.0</td>
</tr>
<tr>
<td>5</td>
<td>2.4</td>
<td>1</td>
<td>No (YP left LA)</td>
<td>£206,184</td>
<td>£0</td>
<td>0.0</td>
</tr>
<tr>
<td>6</td>
<td>2.7</td>
<td>1</td>
<td>Yes</td>
<td>£46,548</td>
<td>£4,368</td>
<td>0.1</td>
</tr>
<tr>
<td>7</td>
<td>2.4</td>
<td>3</td>
<td>Yes</td>
<td>£88,210</td>
<td>£2,856</td>
<td>0.0</td>
</tr>
<tr>
<td>8</td>
<td>3.1</td>
<td>2</td>
<td>No (YP turned 18)</td>
<td>£9,605</td>
<td>£7,224</td>
<td>0.2</td>
</tr>
<tr>
<td>9</td>
<td>1.9</td>
<td>4</td>
<td>No (YP turned 18)</td>
<td>£94,140</td>
<td>£75,024</td>
<td>0.8</td>
</tr>
<tr>
<td>10</td>
<td>0.3</td>
<td>3</td>
<td>No</td>
<td>£3,842</td>
<td>£34,656</td>
<td>9.0</td>
</tr>
<tr>
<td>11</td>
<td>3.4</td>
<td>1</td>
<td>Yes</td>
<td>£2,385</td>
<td>£17,328</td>
<td>7.3</td>
</tr>
<tr>
<td>12</td>
<td>2.4</td>
<td>1</td>
<td>No (independent living)</td>
<td>£2,160</td>
<td>£8,736</td>
<td>0.2</td>
</tr>
<tr>
<td>13</td>
<td>4.4</td>
<td>3</td>
<td>No (YP turned 18)</td>
<td>£24,175</td>
<td>£16,320</td>
<td>0.2</td>
</tr>
<tr>
<td>14</td>
<td>1.2</td>
<td>2</td>
<td>No (Reunified with family)</td>
<td>£93,447</td>
<td>£69,312</td>
<td>0.7</td>
</tr>
<tr>
<td>15</td>
<td>2.4</td>
<td>2</td>
<td>No (Kinship care)</td>
<td>£55,584</td>
<td>£69,312</td>
<td>1.2</td>
</tr>
<tr>
<td>16</td>
<td>2.3</td>
<td>1</td>
<td>Yes</td>
<td>£87,981</td>
<td>£56,808</td>
<td>0.6</td>
</tr>
<tr>
<td>17</td>
<td>2.3</td>
<td>4</td>
<td>Yes</td>
<td>£122,597</td>
<td>£11,376</td>
<td>0.1</td>
</tr>
<tr>
<td>Case</td>
<td>Support period (years)</td>
<td>No. of young people supported</td>
<td>Support on-going</td>
<td>Costs</td>
<td>Benefit</td>
<td>FROI</td>
</tr>
<tr>
<td>------</td>
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<td>-----------------------------</td>
<td>----------------</td>
<td>---------</td>
<td>-----------</td>
<td>------</td>
</tr>
<tr>
<td>18</td>
<td>2.7</td>
<td>2</td>
<td>No (independent living)</td>
<td>£11,713</td>
<td>£11,592</td>
<td>0.4</td>
</tr>
<tr>
<td>19</td>
<td>2.3</td>
<td>3</td>
<td>No (independent living)</td>
<td>£38,624</td>
<td>£16,320</td>
<td>0.2</td>
</tr>
<tr>
<td>20</td>
<td>2.7</td>
<td>2</td>
<td>Yes</td>
<td>£194,328</td>
<td>£0</td>
<td>0.0</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>44</td>
<td>8 (40%) open to support</td>
<td>£1,393,609</td>
<td>£420,048</td>
<td>0.3</td>
</tr>
<tr>
<td>Average per case</td>
<td>2.7</td>
<td>2.2</td>
<td></td>
<td>£69,680</td>
<td>£21,002</td>
<td>0.3</td>
</tr>
</tbody>
</table>

Source: Enfield Children’s Services

Analysis of the historical cases revealed:

- on average, cases were supported for 2.7 years. Support for 8 cases was ongoing
- the number of young people supported per family ranged from one to 4. On average, 2 young people per family were supported
- the estimated costs associated with those supported totalled £1.4m. This averages out at £69,680 per case. These high costs can be attributed to substantial periods of support and expensive placements
- the average benefit per case supported was £21,002. Total benefits were £420k. The largest benefits were realised when the young person(s) was reunified, or placed in suitable accommodation (that is, kinship care or independent living)
- historical cases revealed an average return on investment of 0.3: for every £1 invested in support there was a return of £0.30 – or a loss of £0.70

**Costs and benefits of all closed FASH cases**

In addition to the cost comparison, we undertook a study to evidence the cost and benefit of FASH across the 3 teams including CSEP and FAST. An overview of the costs and benefits of 121 cases, with complete data and closed to FASH support, is provided in Table 4. All the costs and benefits have been calculated using information held on the YCL Evaluation Database. This includes the duration and intensity of support, and outcomes achieved as a result of the support. In all cases, only one young person within the family was in receipt of support. The costs, support status, main outcomes and benefits for individual cases can be found in Appendix 2.
Table 4: Overview of the costs and benefits of FASH support

<table>
<thead>
<tr>
<th>Team</th>
<th>FASH costs</th>
<th>Benefits</th>
<th>FASH FROI</th>
</tr>
</thead>
<tbody>
<tr>
<td>FAST 65 (54%) cases</td>
<td>Total £108,300</td>
<td>£314,739</td>
<td>2.9</td>
</tr>
<tr>
<td></td>
<td>Average £1,666</td>
<td>£4,842</td>
<td>2.9</td>
</tr>
<tr>
<td>CSEP 28 (23%) cases</td>
<td>Total £26,941</td>
<td>£107,465</td>
<td>4.0</td>
</tr>
<tr>
<td></td>
<td>Average £962</td>
<td>£3,838</td>
<td>4.0</td>
</tr>
<tr>
<td>RAST 28 (23%) cases</td>
<td>Total £115,792</td>
<td>£330,176</td>
<td>2.9</td>
</tr>
<tr>
<td></td>
<td>Average £4,135</td>
<td>£11,792</td>
<td>2.9</td>
</tr>
<tr>
<td>Total 121 cases</td>
<td>Grand Total £251,033</td>
<td>£752,380</td>
<td>3.0</td>
</tr>
<tr>
<td></td>
<td>Average £2,075</td>
<td>£6,218</td>
<td>3.0</td>
</tr>
</tbody>
</table>

Key points to note from the cost benefit analysis of closed FASH cases are:

- more than 40% (51) of the cases had received support from Children’s Social Care (SCS) prior to being supported by FASH. This ranged from £238 (supported on a CiN plan for one month) and £49,424 (long-term LAC)
- the total cost of FASH support across the 121 cases, was £251k, an average of £2,075 per case. This includes a combination of FAST housing cases that, typically, incurred low support costs, and more intensive support for families with multiple needs
- the average benefit for closed FASH cases was £6,218. Total benefits reported total over £750k. The vast majority of benefits related to cases where the case worker felt the young person avoided entering the looked-after system or suitable (independent/semi-independent) housing was found, thus reducing the need for expensive foster care placements
- the return on investment for all cases supported was 3. For every £1 invested in FASH support there was a return of £3

Based on the data we have received for closed cases, FASH appears to have proved cost effective. The average FROI for a young person supported was 3.0: for every £1 invested in support there was a return of £3 in potential savings to the local authority.

The data comprised a combination of cases from the different teams, exhibiting a wide range of support needs and outcomes. Although disengagements were seemingly high (20%), 13 of these were FASH housing cases and perhaps represent those young people without a real need for support.
Annualised assessment of the FASH model

Based on our analysis of closed cases we can project the return on investment at the whole FASH service level. This is calculated by combining the projected total spend to deliver FASH with the average benefits associated with each team, multiplied by their annual throughput of cases.

The sample of 121 cases we based our cost-benefit model on is statistically representative of the total annual throughput (246) of cases, with a confidence level of 88%.

In relation to the annual analysis, we have calculated steady-state running costs for FASH based on projected expenditure as follows:

- Annual Budget = total DfE and LBE funding over course of Innovation Programme (2015-17) = £2,309,206 / 3 years = £769,735

DfE grant money for commissioned external services (£684,336) was excluded from the projected expenditure as this has not been spent. Table 5 shows the projected return on investment based on the annualised fund spent each year.

<table>
<thead>
<tr>
<th>No. of cases</th>
<th>Total FASH Annual Budget</th>
<th>Total Annual benefits</th>
<th>Service level FROI</th>
</tr>
</thead>
<tbody>
<tr>
<td>246</td>
<td>£769,735</td>
<td>£1,417,048</td>
<td>1.84</td>
</tr>
</tbody>
</table>

The return on investment at a whole service level is 1.84. For every £1 invested in FASH there is a return of £1.84. The FROI for the observed cases was 3.0. The difference between the observed and annual FROIs can be explained by overhead costs. This fall is in line with high-level overheads associated with a project of this nature.
Achievement of Programme Objectives and Outcomes

Impact on Key Macro-Indicators

Official LAC data to the DfE, which counts the number of children LAC on the 31st March, shows an increase over the period of FASH’s operation:

- 2013-14: Number of children who were LAC at March 31st was 300 (37.0 per 10,000)
- 2014-15: Number of children who were LAC at March 31st was 345 (41.8 per 10,000)
- 2015-16: Number of children who were LAC at March 31st was 360 (43.0 per 10,000)

EBC data on the number of children/young people who were LAC over the course of a year also shows an increase:

- over 2013-2014 a total of 483 were LAC
- over 2014-2015, a total of 545 were LAC
- over 2015-2016, a total of 575 were LAC

However, recent data suggests a drop in annual figures for 2016-2017: currently, 219 young people have been LAC in 2016 up to November, which indicates a drop of 20% (107) in the total number of young people who became LAC.

The number of referrals to social care (CiN) has increased:

- 2013-2014: Number of referrals to social care were 2,463 (405.9 per 10,000)
- 2014-2015: Number of referrals to social care were 2,833 (339.3 per 10,000)
- 2015-2016: Number of referrals to social care were 3,439 (419.4 per 10,000)

It was never clear whether FASH should expect to reduce this figure, particularly due to the inclusion of CSEP in the team, which would possibly increase referrals to social care because of an increased awareness and understanding of the nature of risk. However, a 40% percentage increase in the proportion of young people needing a referral to social care since 2013-2014 should be reviewed. The national trend shows a 3% increase from 2013-20147.

Table 6: Referrals to social care compared to statistical neighbours

<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>Enfield</td>
<td>2,660</td>
<td>2,691</td>
<td>1%</td>
<td>2,810</td>
<td>4%</td>
<td>3,439</td>
<td>22%</td>
<td>4,154</td>
<td>21%</td>
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<tr>
<td>Barking and Dagenham</td>
<td>1,812</td>
<td>2,586</td>
<td>43%</td>
<td>3,126</td>
<td>21%</td>
<td>4,084</td>
<td>31%</td>
<td>3,255</td>
<td>-20%</td>
</tr>
<tr>
<td>Haringey</td>
<td>2,509</td>
<td>2,156</td>
<td>-14%</td>
<td>2,102</td>
<td>-3%</td>
<td>2,262</td>
<td>8%</td>
<td>3,273</td>
<td>45%</td>
</tr>
<tr>
<td>Waltham Forest</td>
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<td>3,394</td>
<td>35%</td>
<td>3,535</td>
<td>4%</td>
<td>3,538</td>
<td>0%</td>
<td>3,323</td>
<td>-6%</td>
</tr>
<tr>
<td>Greenwich</td>
<td>4,715</td>
<td>4,432</td>
<td>-6%</td>
<td>4,097</td>
<td>-8%</td>
<td>3,043</td>
<td>-26%</td>
<td>3,427</td>
<td>13%</td>
</tr>
<tr>
<td>Croydon</td>
<td>4,177</td>
<td>4,135</td>
<td>-1%</td>
<td>3,516</td>
<td>-15%</td>
<td>4,196</td>
<td>19%</td>
<td>4,775</td>
<td>14%</td>
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<td>England</td>
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<td></td>
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<td></td>
<td></td>
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<td>-3%</td>
</tr>
</tbody>
</table>

Compared to the national average, Enfield experienced a substantial increase in the proportion of referrals to social care in 2015 and 2016. However, compared to other London boroughs, selected using the DfE Statistical Neighbour tool on the social care referrals indicator, the proportion of referrals in Enfield is more or less in line with local authorities with a similar location and demographic. Furthermore, if the referrals were appropriate and action (be that from social care or referral to preventative services) was taken, an increase isn’t necessarily a negative, as more children are getting the support they need.

The number of CYP on a Child Protection Plan has also increased:

- in 2013-2014, 204 (25.4 per 10,000) CYP were on a child protection plan
- in 2014-2015, 256 (31.4 per 10,000) CYP were on a child protection plan
- in 2015-2016, 254 (31.0 per 10,000) CYP were on a child protection plan

This represents a 24% increase on the 2013-2014 figures. Nationally, the trend in child protection figures shows an increase of 19% from 2012-2013 to 2014-2015. (Figures for 2015-2016 are not yet released)^8.

Return to birth families is showing a lower rate of young people returned home after a period of care:

- in 2013-2014, 51% of CYP were returned to their birth families after a period in care
- in 2014-2015, 38% of CYP were returned to their birth families after a period in care

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This shows a significant drop of 13 percentage points in the number of children and young people who were returned to their birth families after a period in care. This needs to be explored further to understand the drop in return to birth families. Data for 2015-2016 should also be included to track current impact.

Data showing the impact on young people being accommodated reveals a 20-percentage point increase in the CYP being accommodated this year

- 2013-2014: there were 158 presentations and 34 (21%) CYP placed
- 2014-2015: there were 213 presentations and 34 (16%) CYP placed
- 2015-2016: there were 167 presentations and 91 (55%) CYP placed
- 2016 to November 2016: there were 87 presentations and 39 (45%) of CYP placed

The recent increase in placement needs to be understood to ensure that the decision to place is not being influenced by the availability of space.
Lessons Learnt Regarding Programme Implementation

While the FASH delivery model has been shown to be effective, and, overall, generated a positive return on investment, there are several lessons emerging from the period of operation that have impacted on aspects of performance. These include:

- project set-up
- project management
- recruitment of staff

Project set up and structure

Establishing the referral process and operating protocols took longer than originally planned, and the FASH service did not start receiving sufficient referrals until September 2015, nearly 9 months after the proposal was agreed by DfE. In the summer months of 2015, referrals to FASH were predominantly for young people, aged 16-17, who were presenting as homeless. Figure 2 shows the distribution of cases across the teams.

![Figure 2: Case distribution within FASH](image)

The structure of case support and the necessary response from social workers, shaped, to some significant degree how the service operated; practice became heavily focussed on providing support to the young person, rather than to the whole-family, details of which have only recently been retrieved by the recruitment of a suitably experienced and connected service manager.

In addition, each team had different referral criteria and referrals were logged independently within each team. This created additional layers of complexity when understanding throughput, and teams operated quite independently. The separating out of the 3 teams discouraged resource and practice sharing among social workers to some extent. Recently there has been a move to integrate working practices so that cases are
allocated on capacity as well as areas of expertise. This has improved practice and increased the overall balance of the critical RAST component.

**Project management**

The appointment of an external consultant as Service Manager, who was unfamiliar with Enfield structures and ways of working, resulted in the service operating in relative isolation from the rest of children’s services. This affected the extent to which practitioners followed protocols with regards to assessment, planning, reviewing and recording progress on Enfield case management systems. This also affected practitioner practice for newly qualified social workers who were working with families with complex needs. The recent introduction of a new, experienced in-house manager, has latterly transformed the cohesiveness of project operation and in particular, social worker practice and synergy with social care protocols.

**Social worker recruitment and experience**

Recruiting a relatively large number of additional social workers was difficult. The result was a high proportion of Assessment and Support Year in Employment (ASYE) staff, who initially struggled with the innovative delivery model, the high level of flexibility within the operating practice, and the challenge of the client group.

**FASH model evolution**

Despite the challenges, the FASH delivery model has introduced an innovative multi-disciplinary package of support that has transformed the lives of a number of young people, and generated potential savings to Enfield Borough Council. However, aspects of model operation in this early phase of development have been found to be sub-optimal.

- isolation from social care/LAC: given the nature of the focus being on-the-edge-of-care client group, establishing a brand-new team, both operationally and physically distant from social care, proved to be problematic. In hindsight, there would have been significant benefits from much closer integration

- Parent Champions: Parent Champions were successfully recruited but have not worked as well as anticipated. This is because they have been used largely as an out of hours telephone support resource. The issue has recently been addressed with the introduction of face-to-face contact, resulting in better levels of engagement
• management information: collecting management information relating to FASH operation has been a slow and difficult process. Busy practitioners attached a low priority to record keeping, weakening both management control and the quantity and quality of evaluation data. This has recently improved, resulting in increased performance transparency.

• support protocols: support protocols relating to aspects of family working were well documented but less well implemented. This applied particularly to aspects of whole-family working. The situation was linked to the inexperience of FASH staff and light touch management supervision. This has recently improved through a combination of training and practice reinforcements.

• commissioned services: additional support services, such as Family Group Conferencing and parenting programmes, have not been accessed on the scale anticipated. This was linked to low practitioner awareness and understanding of the services. The position has recently improved through a combination of active promotion and staff training.

• file audits: external auditing of family case files provided a boost to FASH practice development through the identification of a range of improvement opportunities which resulted in some recent operational restructuring. These are now being addressed effectively through the introduction of a new, highly experienced service manager.
Evaluation Constraints and Limitations

In this section, we address what we consider to be the constraints of the evaluation approach.

Limitations of the evaluation and key findings

Limitations of the evaluation include:

- the model and its development: the FASH delivery model has taken some time to fully embed. The reasons for this are highlighted in the previous section. Throughout the evaluation process we have identified summative impacts showing positive achievements; particularly relating to cost effectiveness. At the same time, however, the intensive formative dimension of our investigation identified areas for improvement. All this has strengthened the delivery model, though the impact identified to date reflects a model in development. We estimate that steady-state outcomes will be greater than those currently identified

- sustainability: insufficient time has elapsed to comment on the sustainability of family outcomes. Our cost benefit model assumes that, where benefit outcomes have been achieved, they will be sustained for at least 12 months. We think this is a reasonable assumption based on the follow-up case-file analysis. It will, however, be important for EBC to follow up individual families in 12 months’ time, to gain a more accurate picture of events

- comparator group: throughout the evaluation we placed a strong emphasis on establishing robust baselines against which aspects of value-added could be traced. As part of this process, we identified a historical comparator group of young people on the edge of care who received the preceding alternative to FASH support. We have subsequently discovered that the characteristics of this comparator group are not representative of those of the average FASH participant. They are only representative of those young people supported by the RAST strand of delivery. Where comparisons are made, it is important that they are exclusive to this component rather than the FASH programme as a whole

- cost cutting environment: the introduction of the FASH model coincided with an unprecedented programme of cost cutting and rationalisation within Enfield Borough Council, which created a culture of resource rationing and uncertainty. The high staff turnover and work pressures among FASH partners are likely to have contributed to slower model development and need to be taken into account when judging relative performance
** Appropriateness of the evaluation  

Features relating to the appropriateness of the evaluation include:

- cost benefit analysis: from the outset, the central plank of the evaluation was the cost benefit analysis. Enfield Borough Council were clear that the longer-term feasibility of FASH would depend on the economic case. We have devoted significant resource to this element to secure a sufficiently large sample (121 cases) from which to draw robust conclusions. This has been time consuming given the issues encountered with the management information systems, and has required triangulation of practitioner, partner and file data.

In order to clarify expectations, we agreed the CBA model approach with Enfield Borough Council Finance Team and presented preliminary findings to senior management in March 2016. A further presentation took place in November 2016. The final assessment was completed in March 2017 when involvement in the evaluation programme ended.

The dominant position of the cost benefit analysis within the evaluation strengthened the credibility of the evaluation findings and has been generally welcomed by the FASH project steering group. As it became increasingly clear that the FASH model was taking longer to embed, we took the decision to spend more time focussing on the building blocks of FASH delivery. We conducted one-to-one sessions with practitioners and reviewed a large number of case files. We also brought in external experts on Family Group Conferencing and whole-family working to discuss and benchmark relative approaches.

This hands-on approach to understanding operational delivery significantly changed the relationship with practitioners. Rather than simply requesting information, we were able to add to their knowledge and, where appropriate, voice their concerns. Our facilitated feedback loop to management, ultimately led to enhanced supervision and management, which in turn ushered in the management and practice changes discussed earlier. Had we kept our focus more strongly on the summative elements, as originally planned, then the opportunity to formatively inform model improvement could have been missed.
Implications and Recommendations for Policy and Practice

Here we consider the implications of evaluation findings for future policy and practice linked to FASH activity.

Evidence of sustainability

- Young people outcomes: the project has achieved success with young people, and evidence suggests it has kept 50% of young people from having needs escalated and being closed to social care. Qualitative and quantitative evidence suggests the outcomes could not have been achieved in the absence of FASH, and partners would like to see the programme continue in some form.

- The economic case: the cost benefit analysis indicates that FASH delivery (when considering practitioner support costs only) generated a saving of £3 for every £1 spent on social care interventions provided by Children’s Services. The RAST strand shows a saving of £2.90 for every £1 invested, compared to a loss of 70 pence evident from the historical comparator group. However, when considering FASH in its current form, the model delivers a saving of £1.84 for every £1 spent.

- Model enhancement: the FASH model was re-focused and re-structured to reflect best practice findings.

- Real cash savings: the impact of FASH has not worked its way through all areas of potential savings when considering the number of CiN, the number of children on a CP Plan and the percentage of young people in supported accommodation. External drivers may be adversely influencing these indicators, for example, EBC suggested they were experiencing an increase in the number of unaccompanied asylum seekers. It could also be argued that local authority expenditure would have been higher without the borough’s contribution to FASH. Account also needs to be taken of the knock-on effect of the continuing programme of rationalisation within the authority.

Future development and wider application

Elements of the FASH model that have worked particularly well and worthy of wider consideration and application include:

- Intensive social work support: providing intensive social worker interventions, with low caseloads.
• youth workers: a tiered approach to supporting young people at risk from CSEP and the use of youth workers working at the lower end of risk, so freeing up capacity at higher end of risk for social workers
• mediators: trained to deliver expert mediation to young people and their families experiencing breakdown in relations
• clinical psychologists: having clinical psychologists as part of the support team overcomes mental health barriers
• learning mentors: learning mentors have played a key role in introducing young people to learning opportunities and thus addressing NEET issues
• positive activities funding: having access to flexible funding to support young people to attend clubs and develop hobbies has boosted engagement and contributed to outcome sustainability.
Appendix 1: FASH Organisation Chart

Innovation Programme Lead

Administrator

FASH Deputy Manager (0.5)

Team Manager
CSE Prevention (CESP Team)

Social Worker x 5

Triage Worker (0.5)

Team Manager
Family and Adolescent Support Team (FAST)

Social Worker x 5

Learning Mentor x 2

Triage Worker (0.5)

Team Manager
Reunification and Adolescent Support Team (RAST)

Clinical Psychologist x 2

CSE Prevention Social Worker x 2

Senior Youth Worker

Healthy Living Case Worker

CSE Prevention Case Manager

Youth Worker x 2

Activities & Engagement Officer x 2

Triage Worker
Appendix 2: Family Case Studies

Case Study One

Background

<table>
<thead>
<tr>
<th>Age at Case Study</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Status at Case Study</td>
<td>Opened in October 2015</td>
</tr>
<tr>
<td>Team</td>
<td>FAST</td>
</tr>
<tr>
<td>Attendees at Interview</td>
<td>Marianne* (Young Person) and FASH Social Worker</td>
</tr>
</tbody>
</table>

Figure 3: Case study one

*Not her real name.

Risks and Needs for Support

Marianne was one of 5 sisters and had one step brother. She moved to England with her family in 2000 from Somalia. Marianne’s mother had mental health problems and Marianne was on a care plan from the age of 14 to 16 years-old for neglect and was in foster care for one month. Marianne had been sofa surfing for 6 months before presenting as homeless to Enfield FASH in October 2016. On self-referral, Marianne described relationship problems with both her parents and the dynamics in the family home as very difficult. Marianne had reported her brother to social services for assaulting her, and on one occasion Marianne called the police. This triggered a referral to children’s social services and resulted in 4 of Marianne’s siblings being taken into care. On self-referral to FASH, a housing needs assessment was carried out and this revealed Marianne had low self-esteem, low levels of confidence and low level mental health. Marianne said that she had self-harmed, taken an overdose and been admitted to hospital.

Support Provided by FASH

Marianne was supported by FASH in finding emergency accommodation. She was placed in a bed and breakfast initially, but the landlord made her feel uncomfortable and she was moved to Teresa House – a semi-independent supported housing for young people. The social worker and the key worker at Teresa House supported Marianne in accessing housing benefit. For an immediate need, FASH provided some financial support in getting Marianne an Oyster card, food bank vouchers, and food shop vouchers. The mediator met with Marianne to determine the possibility of the family having mediation, but Marianne was not at the point where she felt she could engage in this activity with her mother. Marianne was also referred to the psychologist and accessed 2 sessions, but then stated she did not want further work. The key worker and
the social worker helped Marianne secure an apprenticeship at a local hairdressers and Marianne had ambitions to be a self-employed hairdresser.

**Evidence of Impact and Value of Support**

There was clear evidence of a strong bond between Marianne and her social worker: they had developed a trusting relationship and Marianne had responded well to the support and the move to semi-independent living. There was also evidence of an effective partnership between the key worker at Teresa House and FASH, which enabled support to be joined up. Both workers attended joint review meetings with Marianne. The impact on Marianne was positive and she stated that she felt she was getting her life back in order. “It’s like a puzzle being put back together.” (Marianne)

Marianne also stated that, for the first time, she felt that she had people who were supporting her to move on and that she no longer felt isolated. “I’ve got a team with me, I don’t feel alone anymore.” (Marianne)

Without the support of the FASH team and the referral to semi-independent living, it is likely that Marianne would have remained homeless, continuing sofa surfing between friends, without any secure accommodation. Marianne would have been at risk of longer term negative outcomes. “I don’t know where I’d be, but I’d be sleeping on someone’s sofa right now or in a park or on a bus.” (Marianne)

Marianne presented as a much more confident person with hopes and aspirations. The social workers stated that she had progressed quite significantly. “I went from homeless to having a home – anything’s possible… I finally feel like a someone.” (Marianne)

**Case Study 2**

**Background**

![Figure 4: Case study 2](image)

<table>
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<th>Age at Case Study</th>
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<tbody>
<tr>
<td>Status at Case Study</td>
<td>Open – LAC</td>
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<tr>
<td>Team</td>
<td>RAST – Reunification Team</td>
</tr>
<tr>
<td>Attendees at Interview</td>
<td>Father of Mica* (Young Person) and FASH Social Worker</td>
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</tbody>
</table>

*Not his real name

**Risks and Needs for Support**

Mica was born in the UK in 2000, and sent to live with his Uncle in South Africa. He had no contact with his mother. He came back to the UK in 2013 to live with his Father, Step
mother, and 3 year old half-brother. His relationship with his Father was very fraught and Mica was running away on a regular basis. In July 2015, when Mica was 15, he was picked up at Heathrow Airport by the police, fearful of returning home due to a bad school report. He said that his Father was physically assaulting him and expected to get a beating if he returned home. He was placed under police protection and a referral was made to children’s services. Mica had scars consistent with abuse from a whip and plastic rod, but the date of the scarring could not be determined. Mica’s father signed a Section 20 and Mica was taken into foster care in July. The Referral and Assessment Team held a panel meeting where the father revoked the Section 20 stating that he wanted Mica back home, and the decision was made to support the family in a successful reunification. Mica was referred to FASH and a home visit was made in September 2015 with both parents to discuss Mica’s return to home. The case was allocated to FASH in October 2015.

**Support Provided by FASH**

At the time of the case study, Mica had returned home, but children’s services case notes suggested that he was unsettled, upset and had runaway back to his foster carer. The work within RAST was focussing on family relationships between Mica, his Father and Step mother to try to build trust. A behaviour contract was drawn up, listing things that Mica needed to do and his parents needed to do to support Mica. The social worker also referred Mica to the learning mentor and activities and engagement officer. The plan was to reunify Mica back at home, but Mica stated that he did not want this to happen; this raised concerns that he was not being listened to. There were difficulties in the Father and Step mother’s relationship, which the social worker was working to address. The couple were referred by the social worker to marriage counselling. Mica’s Father was out of work at the time of the case study. His wife was working and this caused conflict, as Mica’s Father felt he should be the main breadwinner. The social worker was working with the couple to put in place a budgeting plan and was also trying to support the Father with getting back into employment. In addition, the social worker was considering accessing mental health support for the Father. He had lost his own mother, was made redundant and his son had been taken into foster care all around the same time. The Father described this as “a heavy time” and “mentally difficult.”

**Evidence of Impact and Value of Support**

The father stated that he was pleased to have the support from FASH and that his relationship with his son was improving. However, case notes suggested that the relationship was not improved. Mica’s father stated he could benefit from further support in finding work and stated he felt there was more talking taking place than action. According to the father, the social worker’s involvement had led to an improvement in Mica’s behaviour; he had been going to school and not stealing. The family had previous
involvement with social services, which the father felt was not a good experience. He said that he had been listened to and understood, and the team had changed his impression of social services. “I’ve seen it differently now, they’ve made an impact on my life and I believe they’ve made an impact on the life of Mica, too. He’s happy, I am very sure he’s happy.” (Father) However, Mica’s recorded behaviour suggested that he was not happy, and this raised concerns that he was not being listened to. The case remains open to FASH.

Case Study 3

Background

Figure 5: Case study 3

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<tbody>
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<td>Team</td>
<td>CSE</td>
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<tr>
<td>Attendees at Interview</td>
<td>Beth* (Young Person)</td>
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</tbody>
</table>

*Not her real name.

Risks and Needs for Support

In August 2015, Beth’s school made a referral to the CSEP team in FASH due to concerns around attendance, behaviour and punctuality. There were concerns regarding Beth mixing with older men. A teacher saw Beth with a male that they believed was considerably older than her. “In the mornings we would meet up which would make me late for school, and a teacher saw us and reported it to school….the school were concerned that I was in a relationship…that he was a lot older, like 20.” (Beth)

Support Provided by FASH

The social worker undertook the CSEP screening tool which showed Beth to be at low risk. The social worker also conducted sessions around healthy relationships and risky situations and behaviour, and Beth responded well. “We looked at healthy relationship and what was not a healthy relationship. She talked to me and gave me ideas and what I could do if I got in to trouble.” (Beth)

The social worker did some sessions with Beth to help her think of what was a good relationship and to articulate her thinking. “In the activity, it was little cards and it says what’s healthy and what’s not. In relationships, a girl and a boy have to decide things together – if that’s healthy or not. Does there have to be trust in a relationship or not. All those kind of things.” (Beth)
Beth’s mother was quite protective of Beth and as a result, Beth stated that she had not got involved in a lot of activities outside of the house. The social worker introduced the activities and engagement officer to encourage Beth to do activities by herself, and also as a family – thus improving trust and developing relationships. “My Mum doesn’t really like me to go out most of the time so she found me clubs I can go – dance clubs, park, family things that we can go.” (Beth)

TAF meetings with school staff, Beth’s parents, Beth and the education welfare officer were held, which showed a good level of coordinated support.

**Evidence of Impact and Value of Support**

Through working with Beth and her mother, the social worker helped them discuss Beth’s relationship with her boyfriend and this made her mother feel reassured and more comfortable. The social worker encouraged Beth’s mother to give Beth more flexibility and freedom, and promoted activities that Beth could do alone or with her mother, with the support of the activities and engagement officer. There was evidence of a good relationship between the social worker and Beth. “When I talk to her I just feel comfortable, she’s more than a friend to me, that’s how I feel.”

Without the intervention, Beth stated her attendance would have continued to be an issue. “I would still be late to my lessons, I think it’s good that the social worker got involved, I think better, I’m in year 11, my GCSEs are coming up and I just want to pass, I want to be a GP Doctor.” (Beth)

**Case Study 4**

**Background**

*Figure 6: Case study 4*

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<tr>
<td>Team</td>
<td>RAST</td>
</tr>
<tr>
<td>Attendees at Interview</td>
<td>Hakan* (Young Person)</td>
</tr>
</tbody>
</table>

*Not his real name.

**Risks and Needs for Support**

Hakan and his family moved to the UK from Cyprus. Hakan’s father remained in Cyprus, and he had no contact with him. His mother had experienced physical abuse from his father, and had attempted suicide. His mother suffered from mental ill health and Multiple Sclerosis; her condition and symptoms were exacerbated when she became stressed. Hakan had learning difficulties and a statement of special educational needs. In October
2009, a referral was made to children’s services by Hakan’s primary school in relation to Hakan’s sexualised and aggressive behaviour. An initial assessment was conducted, and found that his mother was finding it difficult to manage Hakan’s and his brother's behaviour, and that the family were very isolated. Issues with Hakan’s behaviour remained constant and his behaviour both at home and at school were a cause for concern. According to children’s services case notes, the police wanted Hakan taken into care, as there were concerns over domestic violence between the mother and son. Despite social services efforts to repair the relationship with his mother and keep him at home, in July 2010, his mother signed a Section 20 and Hakan was taken into care. He returned home, but in March 2011, was placed in foster care. Following a period in foster care, he was moved to various residential units, finally spending from 2013-2015 in a residential unit in Kent. Hakan wished to return home after this period and his mother agreed to having him home and a referral was made to FASH to facilitate this. Hakan returned home to live with his mother in the Summer of 2015.

**Support Provided by FASH**

On leaving the residential unit, Hakan was provided with £900 from the FASH. However, this was spent quickly and it was questionable as to whether this was necessary and what impact this would have in terms of Hakan’s expectations of the service. The key focus of the social worker was to help Hakan find employment, and maintain a positive relationship with his mother and other family members. The social worker met with Hakan and his mother on a weekly basis, and spoke to them at least every 72 hours. The social worker also provided some learning support around English and Maths. FASH were provided with an employment opportunity for Hakan through their partnership work with YOS and an interview was arranged with North London Garages for Hakan to begin an apprenticeship, but unfortunately, he was not successful. Hakan had some challenging behaviours and special needs, and although the social worker was trying to get him to participate in some volunteering work, he was only interested in paid work. There were numerous entries on children’s services case files describing phone calls from Hakan’s mother regarding her concern with her husband potentially inflicting violence on her and her sons. However, there was no proof of this and the case was referred to a voluntary organisation for domestic violence for a response. The social worker referred Hakan’s mother to a psychologist within FASH for support in relation to her concerns.

**Evidence of Impact and Value of Support**

There was evidence of a good working relationship between the social worker, the young person and the mother. At the time of the case study, the reunification was successful, but there were ongoing concerns regarding the mother’s mental health and wellbeing. Through the support of the FASH, Hakan gained experience of interviewing through the interview for an apprenticeship with a garage.
Appendix 3: The Costs and Benefits of FASH

Introduction
We have developed a cost-benefit model to evaluate the cost-effectiveness of the FASH service. This builds on the detailed individual case data collected via our survey of FASH case workers.

The cost-benefit analysis involves estimating the costs of support provided to a young person and their family, and the application of financial proxies to outcomes achieved as a result of the support. The cost-benefit model calculates the return on investment of the support provided. Essentially, we are seeking to establish whether the FASH model generates sufficient benefits to cover costs, and therefore justify future investment.

In order to measure the additionality of FASH (in terms of the difference FASH made compared to the business as usual approach to support) we constructed a comparator group from 20 historical children’s social care (CSC) cases in Enfield that, according to the FASH management team, would have met the criteria for a referral to FASH.

The comparator group consisted of high-need cases with children experiencing lengthy periods of local authority care; cases similar to those supported by RAST. However, as the FASH model evolved over time, it became apparent that the comparator group selected was not totally representative of all FASH cases. From our analysis of closed cases, the FAST and CSEP teams have supported families with a lower level of risk, and work has been for a shorter duration and of a more preventative nature.

The approach
Our approach involved 4 key elements:

- costing FASH support
- costing comparator group support
- identifying the benefits
- conducting a fiscal return on investment calculation

Costing FASH Support
The costs of intervention for FASH cases take account of the level and duration of FASH support and other CSC involvement prior to FASH. The return on investment figures are presented for both cost scenarios: the return on investment for FASH-only support and the return on investment for the London Borough of Enfield (LBE) (that is, CSC costs
prior to FASH + FASH costs). The FASH only measure is the most appropriate for assessing FASH cost effectiveness.

The time spent supporting young people was estimated using a combination of case management information collected from Liquid Logic and case management data completed by the FASH practitioners at the point of case closure.

We have obtained detailed data on the type and duration of support through the development of a programme-specific case questionnaire that FASH professionals completed when a case was closed to FASH support. Professionals provided details of the duration of support, the intensity (average direct and indirect hours supported per week) and any input from other professionals (for example, psychologists and mediators). Support costs were calculated by multiplying the recorded time input from each professional by their respective hourly rates.

**Costing Comparator Group Support**

In relation to our comparator group, we identified periods when the young person was subject to a CiN/CP plan or in the care of the local authority and then applied well-researched, national averages of these different levels of support. To represent the full costs to the LBE, these averages have also been applied to FASH cases where historical involvement from CSC was recorded.

The CSC support costs used in this analysis are set out in Table 7:

<table>
<thead>
<tr>
<th>Level of support</th>
<th>Weekly cost</th>
<th>Annual cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child in Need</td>
<td>£59.50</td>
<td>£2,856</td>
</tr>
<tr>
<td>Child Protection Plan</td>
<td>£79</td>
<td>£3,792</td>
</tr>
<tr>
<td>Looked after child (kinship care setting)*</td>
<td>£13.17</td>
<td>£632</td>
</tr>
<tr>
<td>Looked after child (semi/independent living setting)**</td>
<td>£540</td>
<td>£25,920</td>
</tr>
<tr>
<td>Looked after child (foster care setting)</td>
<td>£722</td>
<td>£34,656</td>
</tr>
<tr>
<td>Looked after child (residential care setting)</td>
<td>£3,089</td>
<td>£148,272</td>
</tr>
</tbody>
</table>

* based on a one-hour care review meeting every 6 weeks  
** based on historical costs for LBE

Costs for interventions below CiN level have not been included in the analysis. This was due to a combination of insufficient existing research at this level and the variability in the intensity and delivery of early help that was difficult or impossible to identify using management information. Further to this, any involvement below CiN (e.g. Early Help and Children’s Centre) should be viewed as a positive outcome and is not costed.
Identifying the benefits

Typically, benefits/cost avoidance are calculated for the 12 months immediately after the young person exits support. However, an exception was made for FAST cases where preventing escalation to LAC was identified as an outcome. Under this scenario, where a young person presents as homeless and FAST are able to resolve the issues that underlie this (e.g. through mediation) so that the young person can remain at home, we calculated benefits for 3 months. It is unlikely that, in the absence of FAST support, a young person with a housing issue that requires a small intervention to resolve, would be taken into foster or residential care for 12 months – this would be an overestimate of the benefit at this level of need.

FAST cases where the young person remaining at home was not possible, and suitable accommodation was sought, are subject to a 12 month benefit. This is the average cost of foster care for 12 months minus the accommodation costs. This was deemed appropriate, as these cases, where staying at home was not an option, are thought to have been more likely to enter the looked after system for a substantial period in the absence of FAST support.

In the main, benefits relate to a young person avoiding or ending periods of looked after care and/or being stepped-down or closed to CSC as a result of the support. These benefits are clearly identified on the case management information and can be tracked over time. Additional benefits, such as reductions in domestic violence and improved school attendance, are included where there is sufficient evidence of benefits being realised and sustained. Additional benefits for FASH cases were more apparent from the primary data collection undertaken.

In relation to young people with accommodation issues, we have only attributed benefits relating to preventing LAC or finding suitable accommodation. We felt it was important to restrict benefits to those that could be realistically attributed to the FASH intervention.

Financial values for additional benefits are taken from recognised national research.

A fiscal return on investment

The fiscal return on investment (FROI) shows the benefits/cost ratio for each case supported. It reveals the cost avoidance generated for every one pound invested in support: for example, a ratio of 1.7 means that £1.70 is avoided for every £1 spent on support.

The return on investment ratio is calculated when the case closes to CSC/FASH or, in case the young person remains open to support, the time of reporting. In order to account for outcomes being sustained over the longer-term, we weight the benefits observed at time of reporting to reflect the following scenarios:
• Successful closure: young person requires no further direct support from social care. This includes cases where semi- or independent living and kinship care were arranged, recognising that this, for some young people, is a successful outcome. We assume benefits are sustained for one year.

• Referred to other agency: the young person requires additional support (not from social care). To reflect on-going support costs, and the likelihood of benefits being sustained over the longer-term, we reduce the fiscal benefits by 25%.

• Remained open to social care: the young person requires additional support from social care. To reflect more intensive ongoing support costs, and an increased likelihood of regression on benefits recorded, we reduce the fiscal benefits by 50%.

• Disengaged or moved out of area: the young person disengaged from support or moved away from LBE, therefore benefits are not attributable to the support provided. Benefits are set to zero.

<table>
<thead>
<tr>
<th>Costs</th>
</tr>
</thead>
<tbody>
<tr>
<td>FASH support (3 hours per week FASH social worker @ £25.58 per hour + 1 hour per week Learning Mentor @ £21.07) x 9 months = £3,521</td>
</tr>
<tr>
<td>Total costs = £3,521</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Benefits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reunified with family (LBE no longer paying for foster care placement @£722 per week) x 12 months = £34,656</td>
</tr>
<tr>
<td>Level of need in relation to school attendance falls from high (on entry to RAST support) to low on exit = annual cost to LBE of persistent truancy £1,878</td>
</tr>
<tr>
<td>Total benefits = £36,534</td>
</tr>
</tbody>
</table>

\[
\text{FROI} = \frac{\text{benefits (36,534)}}{\text{costs (£3,521)}} = 10.4
\]

Based on the calculated costs and benefits, the FROI is 10.4. This can also be interpreted as there is a return of £10.40 for every £1 invested in support.
Our findings

Results from the comparator group analysis

In order to allow us to make a comparative assessment of FASH support against the business as usual approach (support without FASH), LBE identified all cases between June 2013 and January 2014 where the young person (aged 11-17) became either:

- Looked After
- subject to a Section 20 (looked after but not under any order)
- placed on remand
- CPP which escalated to LAC

In discussions with the FASH management team, we selected cases that would have most likely been supported by FASH had it existed when the family required support. We also selected at random a number of the cases identified as meeting the criteria for FASH to ensure robustness.

An overview of the costs and benefits for our comparator group is provided in Table 8. All of the costs and benefits have been calculated using information detailed in Enfield Borough Council's children's social services. This includes the duration and intensity of support (CiN, CP and LAC) and outcomes achieved as a result of the support.

Important Note: As mentioned previously, as the FASH model evolved, and our understanding of the type and need of cases being supported by FASH developed, we realised that the selected comparator group more closely reflected RAST cases. Therefore, the FROI of 0.3 presented in Table 8 should only be compared against the average RAST costs and benefits.

Table 8: Comparator group costs and benefits overview

<table>
<thead>
<tr>
<th>Case</th>
<th>Support period (years)</th>
<th>No. of young people supported</th>
<th>Support on-going</th>
<th>Costs</th>
<th>Benefit</th>
<th>FROI</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>3.1</td>
<td>4</td>
<td>Yes</td>
<td>£126,565</td>
<td>£0</td>
<td>0.0</td>
</tr>
<tr>
<td>2</td>
<td>3.8</td>
<td>1</td>
<td>No (independent living)</td>
<td>£66,884</td>
<td>£8,736</td>
<td>0.1</td>
</tr>
<tr>
<td>3</td>
<td>2.1</td>
<td>3</td>
<td>No (YP turned 18)</td>
<td>£21,836</td>
<td>£10,080</td>
<td>0.3</td>
</tr>
<tr>
<td>4</td>
<td>5.4</td>
<td>1</td>
<td>Yes</td>
<td>£96,801</td>
<td>£0</td>
<td>0.0</td>
</tr>
<tr>
<td>5</td>
<td>2.4</td>
<td>1</td>
<td>No (YP left LA)</td>
<td>£206,184</td>
<td>£0</td>
<td>0.0</td>
</tr>
<tr>
<td>6</td>
<td>2.7</td>
<td>1</td>
<td>Yes</td>
<td>£46,548</td>
<td>£4,368</td>
<td>0.1</td>
</tr>
</tbody>
</table>
Analysis of the historical cases reveals:

- on average, cases were supported for 2.7 years. Support for 8 cases was ongoing
- the number of young people supported per family ranged from one to 4. On average, 2 young people per family were supported
- the estimated costs associated with those supported totalled £1.4m, which averages out at £69,680 per case. These high costs can be attributed to substantial periods of support and expensive placements
- the average benefit per case supported was £21,002. Total benefits were £420,000. The largest benefits were realised when the young person(s) was reunified or placed in suitable accommodation (e.g. kinship care or independent living)
- historical cases revealed an average return on investment of 0.3. For every £1 invested in support there was a return of £0.30 – or a loss of £0.70.
Whilst substantial benefits were realised for these cases, the FROI was negative. This can be attributed to long periods of support, and young people entering the care system resulting in high costs. Figure 8 shows that the majority (93%) of costs were associated with periods where young people were in the care of the local authority.

Table 9 and Figure 6 show that most (68%) of the young people supported achieved outcomes. The most frequent outcome was young people being supported to semi-independent or independent accommodation, thus avoiding a costly period in foster care. Meeting the young persons’ needs by arranging cost-effective placements, such as kinship care, yielded the greatest savings to the local authority.
Table 9: Outcomes achieved

<table>
<thead>
<tr>
<th>Outcome</th>
<th>No. of young people</th>
<th>Benefit</th>
</tr>
</thead>
<tbody>
<tr>
<td>No longer required social care support</td>
<td>6</td>
<td>£20,880</td>
</tr>
<tr>
<td>Avoided escalation to CPP</td>
<td>3</td>
<td>£11,376</td>
</tr>
<tr>
<td>Supported to independent living (avoided foster care)</td>
<td>8</td>
<td>£56,784</td>
</tr>
<tr>
<td>Arranged cost-effective placement (e.g. kinship care)</td>
<td>5</td>
<td>£195,432</td>
</tr>
<tr>
<td>Reunified young person(s) with family</td>
<td>4</td>
<td>£121,296</td>
</tr>
<tr>
<td>Safeguarded against potential risks</td>
<td>5</td>
<td>£14,280</td>
</tr>
<tr>
<td>Total</td>
<td>30* (68% of young people supported)</td>
<td>£420,048</td>
</tr>
</tbody>
</table>

*one young person achieved 2 outcomes. Actual number of outcomes was 31.

Figure 9: Benefits

The criteria these cases were selected on, and our analysis of them, reveals that these were typically high-need, with multiple young people in each family being supported to prevent, or end, periods of LAC.
Costs and benefits of closed FASH cases

An overview of the costs and benefits for cases closed to FASH support, by each team, is provided in Table 10. All of the costs and benefits have been calculated individually using information provided by FASH case workers. This includes the duration and intensity of support outcomes achieved as a result of the support. In all cases, only one young person was in receipt of support.

We refer to this as a micro analysis as it is based only on a sample of cases of different types of FASH support and does not take overheads into consideration.

### Table 10: Overview of the costs and benefits of FASH support

<table>
<thead>
<tr>
<th>Team</th>
<th>Costs prior to FASH</th>
<th>FASH costs</th>
<th>Benefits</th>
<th>FROI (costs prior to FASH + FASH costs)</th>
<th>FROI FASH costs only</th>
</tr>
</thead>
<tbody>
<tr>
<td>FAST 65 (54%) cases</td>
<td>Total £80,436</td>
<td>£108,300</td>
<td>£314,739</td>
<td>1.7</td>
<td>2.9</td>
</tr>
<tr>
<td></td>
<td>Average £1,237</td>
<td>£1,666</td>
<td>£4,842</td>
<td>1.7</td>
<td>2.9</td>
</tr>
<tr>
<td>CSEP 28 (23%) cases</td>
<td>Total £6,188</td>
<td>£26,941</td>
<td>£107,465</td>
<td>3.2</td>
<td>4.0</td>
</tr>
<tr>
<td></td>
<td>Average £221</td>
<td>£962</td>
<td>£3,838</td>
<td>3.2</td>
<td>4.0</td>
</tr>
<tr>
<td>RAST 28 (23%) cases</td>
<td>Total £186,661</td>
<td>£115,792</td>
<td>£330,176</td>
<td>1.1</td>
<td>2.9</td>
</tr>
<tr>
<td></td>
<td>Average £6,666</td>
<td>£4,135</td>
<td>£11,792</td>
<td>1.1</td>
<td>2.9</td>
</tr>
<tr>
<td>Total 121 cases</td>
<td>Grand Total £273,285</td>
<td>£251,033</td>
<td>£752,380</td>
<td>1.4</td>
<td>3.0</td>
</tr>
<tr>
<td></td>
<td>Average £2,259</td>
<td>£2,075</td>
<td>£6,218</td>
<td>1.4</td>
<td>3.0</td>
</tr>
</tbody>
</table>

Key points to note from the cost benefit analysis of closed FASH cases are:

- more than two-fifths (51) of the cases had received support from CSC prior to being supported by FASH. This ranged from £238 (supported on a CiN plan for one month) and £49,424 (Long-term LAC)
• the total cost of FASH support was £251k, an average of £2,075 per case. This includes a combination of FAST housing cases that, typically, incurred low support costs, and more intensive support for families with multiple needs

• the average benefit for closed FASH cases was £6,218. Total benefits were over £750k. The vast majority of benefits relate to cases where the case worker felt the young person avoided entering the looked after system, or suitable (independent or semi-independent) housing was found, thus reducing the need for expensive foster care placements

• the return on investment for all cases supported was 3. For every £1 invested in FASH support there was a return of £3. If all costs (prior to FASH involvement) are included, the return on investment falls to 1.4 – still a positive return

The average costs and benefits, by team, are presented in Figure 10.
Summary of FAST cases

The majority (54%) of closed FASH cases were supported by FAST. Sixty-one (out of 65 FAST cases) presented to the FAST team as homeless (or at risk of becoming homeless) and were supported around this. The management information indicates that these types of cases are, typically, quick to turn around and have the potential to achieve high yield outcomes. This is reflected in the relatively low support costs (an average of £1,666 for FAST cases compared to £4,135 for RAST cases) and high instances of prevented LAC or finding the young person suitable accommodation.

The average cost of all FAST interventions was £1,666 and the average benefits were in the region of £4,842. The resulting return on investment was 2.9. A fifth of FAST cases disengaged from support, which negatively impacted on the overall FROI.

Summary of CSE cases

Analysis of cases supported and closed by the CSEP team reveals a positive return on investment of 4. We applied a smaller fiscal value to account for families identified at a lower level of risk in recognition of preventative work. The intensity of support is reflected in the relatively low average cost of a CSEP intervention of £962.

Summary of RAST cases

The most resource-intensive support was provided by RAST, with an average support cost of £4,135 per family. However, these cases, typically, had high levels of need, and thus the potential to yield substantial benefits: the average benefit for RAST cases was £11,792 per family. This was achieved through reunification work, preventing further instances of LAC and outcomes associated with a stable home environment. The FROI for RAST cases was 2.9.

Costs

With regard to FASH costs, 96% of support, and thus costs, was provided by the FASH Case Worker. Table 10 breaks down FASH support by professional across the 121 cases.

<table>
<thead>
<tr>
<th></th>
<th>Cases supported</th>
<th>Total support (hours)</th>
<th>Proportion of total support</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Worker</td>
<td>121</td>
<td>9,338</td>
<td>95.75%</td>
</tr>
<tr>
<td>Psychologists</td>
<td>22</td>
<td>105</td>
<td>1.08%</td>
</tr>
<tr>
<td>Learning Mentors</td>
<td>15</td>
<td>125</td>
<td>1.28%</td>
</tr>
<tr>
<td>Activities/Engagement Officers</td>
<td>15</td>
<td>98</td>
<td>1.00%</td>
</tr>
</tbody>
</table>
### Table

<table>
<thead>
<tr>
<th>Service Type</th>
<th>Cases</th>
<th>Total</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mediation</td>
<td>13</td>
<td>60</td>
<td>0.62%</td>
</tr>
<tr>
<td>Triage Workers</td>
<td>4</td>
<td>19</td>
<td>0.19%</td>
</tr>
<tr>
<td>Healthy Living Advisors</td>
<td>3</td>
<td>5</td>
<td>0.05%</td>
</tr>
<tr>
<td>Youth Workers</td>
<td>1</td>
<td>2</td>
<td>0.02%</td>
</tr>
<tr>
<td>Housing Officers</td>
<td>0</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td><strong>Total number of professional interventions</strong></td>
<td><strong>194</strong></td>
<td><strong>9,752</strong></td>
<td><strong>100.00%</strong></td>
</tr>
</tbody>
</table>

### Outcomes

Figure 12 shows the support status of young people on exit from FASH support. Half of those supported required no additional support and were closed to social care. One-fifth of cases (24) disengaged from FASH support.

The proportion of successful closures for CSE was 60.7% (17 young people), 52.3% (34 young people) for FAST and 15% (9 young people) for RAST.

Disengagement was most prevalent amongst CSE cases (9 young people (32%)), whilst RAST had very low levels of disengagement (2 young people (7%). One-fifth (13) of those supported by FAST disengaged.

More than a third (10 young people (36%)) of RAST cases remained open to social care. This compares to 2 (3%) FAST cases and zero CSE cases. This can be attributed to the higher starting point and needs of those supported by RAST.
Figure 12 shows the percentage change in levels of risk among families who registered high and medium level risks on entry to and exit from FASH. There was a reduction in all areas of need: in particular, conflict within the home, anger issues/aggression and housing stability issues.

In regard to preventing LAC, Figure 13 breaks down these outcomes by FASH team. As expected, RAST and FAST had the greatest impact in preventing LAC. Approximately half (32 young people) of those supported by FAST were accommodated in semi-independent or independent living arrangements.
Benefits

Benefits for each case were calculated by applying financial proxies to the outcomes recorded by case workers and weighted to reflect the post-FASH support status (see Figure 12).

Two-thirds (£498,012) of the total benefits achieved related to preventing LAC. Benefits relating to FASH support are detailed in Table 12 and Figure 14.

Table 12: FASH benefits

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Total benefit</th>
<th>% of benefits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prevented LAC</td>
<td>£498,012</td>
<td>66.2%</td>
</tr>
<tr>
<td>Improved behaviour at school</td>
<td>£96,373</td>
<td>12.8%</td>
</tr>
<tr>
<td>Reduced reliance on statutory services</td>
<td>£37,842</td>
<td>5.0%</td>
</tr>
<tr>
<td>Did not become NEET</td>
<td>£35,206</td>
<td>4.7%</td>
</tr>
<tr>
<td>Reduced risk of CSE</td>
<td>£30,026</td>
<td>4.0%</td>
</tr>
<tr>
<td>Improved attendance at school</td>
<td>£14,071</td>
<td>1.9%</td>
</tr>
<tr>
<td>Benefit</td>
<td>Cost (£)</td>
<td>Percentage</td>
</tr>
<tr>
<td>--------------------------------------------------</td>
<td>----------</td>
<td>------------</td>
</tr>
<tr>
<td>Reduced domestic violence</td>
<td>£10,607</td>
<td>1.4%</td>
</tr>
<tr>
<td>Improved parenting capacity</td>
<td>£8,471</td>
<td>1.1%</td>
</tr>
<tr>
<td>Improved family home</td>
<td>£6,580</td>
<td>0.9%</td>
</tr>
<tr>
<td>Reduced anti-social behaviour</td>
<td>£4,142</td>
<td>0.6%</td>
</tr>
<tr>
<td>Reduced criminal activity</td>
<td>£3,502</td>
<td>0.5%</td>
</tr>
<tr>
<td>Improved mental health (adult)</td>
<td>£3,329</td>
<td>0.4%</td>
</tr>
<tr>
<td>Reduced gang related activity</td>
<td>£2,588</td>
<td>0.3%</td>
</tr>
<tr>
<td>Improved mental health (child)</td>
<td>£1,631</td>
<td>0.2%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>£752,380</strong></td>
<td><strong>100.0%</strong></td>
</tr>
</tbody>
</table>

**Figure 14: FASH benefits**

Based on the data we have received for closed cases, FASH appears to have proved cost effective. The average FROI for a young person supported was 3.0: for every £1 invested in support there was a return of £3 in potential savings to the local authority.

The data comprised a combination of cases from the different teams, exhibiting a wide range of support needs and outcomes. Although disengagements were seemingly high (20%), 13 (65%) of these were FASH housing cases and perhaps represent those young people without a real need for support.
Annualised assessment of the FASH model (Macro)

Based on our analysis of closed cases, we can project the return on investment at the whole FASH service (macro) level. This is calculated by combining the projected total spend to deliver FASH and the average benefits associated with each team, multiplied by their annual throughput of cases.

The macro FROI is likely to be lower than the micro FROI due to all costs (including management and overheads), not just the resource input from frontline professionals supporting young people/families, being included on the cost side of the equation. Another factor that impacts on the macro FROI is the annual distribution of cases. For example, if substantially more low-cost and high-benefit cases (such as FAST housing only cases) are supported than preventative CSEP cases (experiencing typically lower financial benefits) the FROI at the service level will be higher.

Table 13 shows the total cases supported and closed over one year – the annual throughput.

<table>
<thead>
<tr>
<th></th>
<th>Annual cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>FAST</td>
<td>126</td>
</tr>
<tr>
<td>CSEP</td>
<td>76</td>
</tr>
<tr>
<td>RAST</td>
<td>44</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>246</strong></td>
</tr>
</tbody>
</table>

The sample of 121 cases we based our cost-benefit model on is statistically representative of the total annual throughput (246) of cases, with a confidence level of 88%.

In relation to the macro analysis, we have calculated steady-state running costs for FASH based on projected expenditure as follows:

- Annual Budget = total DfE and LBE funding over course of Innovation Programme (2015-17) = £2,309,206 / 3 years = £769,735

DfE grant money for commissioned/external services (£684,336) was excluded from the projected expenditure as this has not been spent.

Benefits have been based on annual turnover of cases (Table 13) and the average benefit for each team (Table 10):

- FAST = 126 x average benefit of £4,842 = £610,092
- CSEP = 76 x average benefit of £3,838 = £291,688
- RAST = 44 x average benefit of £11,792= £518,848
- Annual Total Benefits = £1,420,628

Table 14: Projected FROI at whole FASH service level

<table>
<thead>
<tr>
<th>No. of cases</th>
<th>Total FASH Annual Budget</th>
<th>Total Annual benefits</th>
<th>Service level FROI</th>
</tr>
</thead>
<tbody>
<tr>
<td>183</td>
<td>£769,735</td>
<td>£1,420,628</td>
<td>1.85</td>
</tr>
</tbody>
</table>

Table 14 shows that the return on investment at a whole service level is 1.85. For every £1 invested in FASH there is a return of £1.85. The difference between the micro and macro FROIs can be explained by overhead costs and a lower than expected annual throughput of cases.

**Comparison of FASH against comparator group**

A key aim of the economic evaluation was to establish the additionality of FASH support in terms of whether FASH offers greater value for money and positive outcomes for young people than the standard model of support. We can answer this question by comparing our historical comparator group with RAST cases, as these were of a similar nature/level of need.

The average costs, per young person supported, under the business as usual (BAU) approach support was £31,673, which compares to £10,801 (historical + FASH costs) for RAST cases. In regard to benefits, the average was £9,546 for our comparator group and £11,792 for RAST cases.
Appendix 4: Family Cost Studies

These cases present a summary of costs and benefits delivered for each family.

Family Case summary one

<table>
<thead>
<tr>
<th>Case details</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Age of young person</td>
<td>15</td>
</tr>
<tr>
<td>Status</td>
<td>Completed - no longer required social care support</td>
</tr>
<tr>
<td>Previous safeguarding concerns</td>
<td>Subject to a CiN plan.</td>
</tr>
<tr>
<td>Team</td>
<td>CSE</td>
</tr>
<tr>
<td>Duration of FASH support (months)</td>
<td>7</td>
</tr>
<tr>
<td>Key FASH worker</td>
<td>Youth Worker</td>
</tr>
<tr>
<td>Referrer</td>
<td>CAMHS</td>
</tr>
<tr>
<td>Assessment</td>
<td>C &amp; F assessment</td>
</tr>
</tbody>
</table>

This young person (aged 15) was referred to FASH because they were at risk of, or experiencing, child sexual exploitation. Prior to FASH, the young person was subject to a CiN plan.

Key objectives of support

The key objectives of support were to:

- improve family relationships
- keep young person safe from risk of CSE.

Intervention

The young person was supported by a Youth Worker in the CSE team for 7 months. Additional support from the FASH team included:

- psychologist
- activities and engagement officer.

The young person successfully completed support and no longer required support from social care.

Risks and outcomes

The following chart details the full risk profile for the young person, on entry to, and exit from, FASH support.
Costs and benefits

The costs associated with this case totalled £4,191, made up of £1,666 in historical costs and £2,525 in FASH support.

The fiscal benefits associated with this case included:

- reduced risk of CSE
- improved mental health/wellbeing of child
- improved family home
- reduced reliance on statutory services.

In regard to benefits (costs avoided) associated with looked after children, the Youth Worker recorded that the risk of the young person being taken into care prior to FASH support was low, and therefore not a benefit that can be claimed.

A summary of the costs and benefits delivered for this family is presented below.

<table>
<thead>
<tr>
<th>Cost-benefit Analysis</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Historical costs</td>
<td>£1,666</td>
</tr>
<tr>
<td>FASH costs</td>
<td>£2,525</td>
</tr>
<tr>
<td>Benefits</td>
<td>£5,709</td>
</tr>
<tr>
<td>FROI all costs (benefits / historical and FASH costs)</td>
<td>1.36</td>
</tr>
<tr>
<td>FASH FROI (benefits / FASH costs)</td>
<td>2.26</td>
</tr>
</tbody>
</table>
Family Case Summary 2

Background

<table>
<thead>
<tr>
<th>Case details</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>17</td>
</tr>
<tr>
<td>Status</td>
<td>Referred to other agency</td>
</tr>
<tr>
<td>Previous safeguarding concerns</td>
<td>Subject to a CiN plan.</td>
</tr>
<tr>
<td>Team</td>
<td>FAST</td>
</tr>
<tr>
<td>Duration of FASH support (months)</td>
<td>3</td>
</tr>
<tr>
<td>Key FASH worker</td>
<td>Social Worker</td>
</tr>
<tr>
<td>Referrer</td>
<td>Self-referral</td>
</tr>
<tr>
<td>Assessment</td>
<td>Housing needs assessment</td>
</tr>
</tbody>
</table>

This young person (aged 17) was referred to FASH because they were homeless or at risk of becoming homeless. Prior to FASH, the young person was subject to a CiN plan.

Key objectives of support

The key objectives of support were to:

- improve family relationships
- keeping young person out of trouble from anti-social behaviour
- keeping young person out of trouble from crime.

Intervention

The young person was supported by a Social Worker in the FAST team for 3 months. Additional support from the FASH team included a psychologist.

The young person completed FASH support but was referred to another support agency.

Risks and Outcomes

The following chart details the full risk profile for the young person, on entry and exit from FASH support.
Costs and benefits

The costs associated with this case totalled £2,674, made up of £1,904 in historical costs and £770 in FASH support.

There were no fiscal benefits relating to positive changes in risk, or a reduced reliance on statutory services, associated with this case.

Regardless of any change in risk factors, benefits were removed if the young person did not complete support (i.e. they disengaged from support or moved away) or, in the case
of FAST cases focusing on accommodation issues only, benefits cannot be attributed to the level and nature of support provided.

In regard to benefits (costs avoided) associated with looked after children, the Social Worker recorded that FASH supported the young person to find suitable accommodation.

A summary of the costs and benefits is presented below.

<table>
<thead>
<tr>
<th>Cost-benefit Analysis</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Historical costs</td>
<td>£1,904</td>
</tr>
<tr>
<td>FASH costs</td>
<td>£770</td>
</tr>
<tr>
<td>Benefits</td>
<td>£6,552</td>
</tr>
<tr>
<td>FROI all costs (benefits / historical and FASH costs)</td>
<td>2.45</td>
</tr>
<tr>
<td>FASH FROI (benefits / FASH costs)</td>
<td>8.5</td>
</tr>
</tbody>
</table>

**Family Case Summary 3**

**Background**

<table>
<thead>
<tr>
<th>Case details</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>16</td>
</tr>
<tr>
<td>Status</td>
<td>Completed - no longer required social care support</td>
</tr>
<tr>
<td>Previous safeguarding concerns</td>
<td>Subject to a CiN plan.</td>
</tr>
<tr>
<td>Team</td>
<td>RAST</td>
</tr>
<tr>
<td>Duration of FASH support (months)</td>
<td>4</td>
</tr>
<tr>
<td>Key FASH worker</td>
<td>Social Worker</td>
</tr>
<tr>
<td>Referrer</td>
<td>Self-referral</td>
</tr>
<tr>
<td>Assessment</td>
<td>FASH did not carry out a new assessment</td>
</tr>
</tbody>
</table>

This young person (aged 16) was referred to FASH for the following: experiencing family breakdown and at risk of being taken into care. Prior to FASH, the young person was subject to a CiN plan.

**Key Objectives of Support**

The key objectives of support were to:

- prevent escalation to LAC
- improve family relationships
- keeping young person safe from risk of CSE
- keeping young person safe from gangs
- keeping young person out of trouble from anti-social behaviour
• keeping young person out of trouble from crime.

**Intervention**

The young person was supported by a Social Worker in the RAST team for 4 months. No other FASH professionals were involved with support.

The young person successfully completed support and no longer required support from social care.

**Risks and Outcomes**

The following chart details the full risk profile for the young person, on entry and exit from FASH support.

![Figure 17: Case 95 risk profile](chart.png)
Costs and benefits

The costs associated with this case totalled £5,140, made up of £3,094 in historical costs and £2,046 in FASH support.

The fiscal benefits associated with this case included:

- reduced risk of CSE
- improved mental health/wellbeing of child
- improved mental health/wellbeing of parent
- reduced anti-social behaviour
- reduced criminal activity
- improved behaviour at school/college
- increased attendance at school/college
- did not become NEET
- reduced reliance on statutory services.

In regard to benefits (costs avoided) associated with looked after children, the Social Worker recorded that FASH prevented the young person from becoming LAC by resolving issues in the family home.

A summary of the costs and benefits is presented below:

<table>
<thead>
<tr>
<th>Cost-benefit Analysis</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Historical costs</td>
<td>£3,094</td>
</tr>
<tr>
<td>FASH costs</td>
<td>£2,046</td>
</tr>
<tr>
<td>Benefits</td>
<td>£24,745</td>
</tr>
<tr>
<td>FROI all costs (benefits / historical and FASH costs)</td>
<td>4.81</td>
</tr>
<tr>
<td>FASH FROI (benefits / FASH costs)</td>
<td>12.09</td>
</tr>
</tbody>
</table>
Appendix 5: Analysis of FASH Management Information

The following analysis is based on information collected through FASH practitioners, Enfield Data and children’s Services data.

![Figure 18: Allocation of cases](image)

More than half (54%) of the 121 cases supported and closed to FASH support were allocated to the FAST team. 61 (94%) of the 65 cases supported by FAST were supported for accommodation only.

On average, the families supported by FASH consisted of 2 children. The RAST team typically supported families with 3 children. However, in all but 4 cases, only one child in the family received support from FASH.

The age of young people supported ranged from 11 to 18. The average age of those receiving RAST and CSE support was 15 and for FAST support 16, which can be attributed to the accommodation element of FAST support.

Support prior to FASH

In relation to all cases supported by FASH, almost half (61) had not received support from social care before FASH. Fifty-one (42%) young people were supported under a CiN plan; 9 (7%) were looked after, and 3 (3%) had been subject to a CP plan. Figure 17 shows how pre-FASH support varied significantly between teams.
Consistent with the preventative nature of CSE support, 23 (80%) cases were not known to social care prior to support. The FAST case load predominantly consisted of those with no previous involvement from social care (35 cases (53%)) and subject to a CiN plan (28 cases (42%)). As to be expected, RAST cases had greater levels of support from social care, almost 60% (17 cases) were subject to a CiN plan, and 8 (28%) were looked after.

In regard to pre-FASH CiN involvements, the average duration was around 11 months, although, for CSE cases, the duration of support was typically lower at around 4 months.

Young people presenting to the FASH team (mainly RAST) as looked after were, on average, in care for 18 months.
Referrals

Figure 20 shows that a third (41) of cases supported were self-referrals. These were mainly young people presenting with housing issues. This was followed by cases put forward to the FASH team by the referral and assessments team (social care).

Although there is evidence of a range of agencies referring to FASH, due to the small numbers we are unable to say, based on this data, that the FASH service/referral system is well-known to all appropriate agencies in Enfield.

Table 15 details the top 2 sources of referrals by team. Interestingly, 39 (60%) of FAST cases were self-referrals. This could be attributed to the walk-in element of the FAST service. The majority of RAST cases came from social care. Encouragingly, two-fifths (11) of referrals to the CSE team were made by schools, which is a sign of the successful joint working critical to the preventative CSE support.
Table 15: Most frequent source of referrals by team

<table>
<thead>
<tr>
<th>Team</th>
<th>Source of referral</th>
<th>Count</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>FAST</td>
<td>Self-referral</td>
<td>39</td>
<td>60.0%</td>
</tr>
<tr>
<td>FAST</td>
<td>Referral and Assessment Team</td>
<td>12</td>
<td>18.5%</td>
</tr>
<tr>
<td>RAST</td>
<td>Referral and Assessment Team</td>
<td>15</td>
<td>53.6%</td>
</tr>
<tr>
<td>RAST</td>
<td>Child Protection and Family Support Team</td>
<td>3</td>
<td>10.7%</td>
</tr>
<tr>
<td>CSE</td>
<td>Education</td>
<td>11</td>
<td>39.3%</td>
</tr>
<tr>
<td>CSE</td>
<td>Police</td>
<td>6</td>
<td>21.4%</td>
</tr>
</tbody>
</table>

Figure 21 shows the reason for referral to FASH support and Table 15 breaks this down by team. Note – Case workers could select more than one reason for referral for each case.

Overall, two-fifths of young people (57) were referred to FASH because they were homeless or at risk of becoming homeless. Analysis of reasons for referral by team (Table 16), reveals that FAST cases accounted for nearly all (55) referrals of this nature.

As to be expected, the CSE team referrals centred predominantly (96%) on those at risk, or experiencing, sexual exploitation. RAST referrals were, typically, either due to family breakdown (57%) or reunification (39%).
Table 16: Reason for referral by team

<table>
<thead>
<tr>
<th>Reason</th>
<th>CSE Count (28 cases)</th>
<th>%</th>
<th>FAST Count (65 cases)</th>
<th>%</th>
<th>RAST Count (28 cases)</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>At risk of, or experiencing, child sexual exploitation</td>
<td>27</td>
<td>96.4%</td>
<td>2</td>
<td>3.1%</td>
<td>2</td>
<td>7.1%</td>
</tr>
<tr>
<td>Experiencing family breakdown and at risk of being taken into care</td>
<td>1</td>
<td>3.6%</td>
<td>21</td>
<td>32.3%</td>
<td>16</td>
<td>57.1%</td>
</tr>
<tr>
<td>Leaving care and returning home to their family (reunification)</td>
<td>0</td>
<td>0.0%</td>
<td>2</td>
<td>3.1%</td>
<td>11</td>
<td>39.3%</td>
</tr>
<tr>
<td>Homeless or at risk of becoming homeless</td>
<td>1</td>
<td>3.6%</td>
<td>55</td>
<td>84.6%</td>
<td>1</td>
<td>3.6%</td>
</tr>
</tbody>
</table>

Note: columns do not total as there was more than one referral reason per case.

**FASH support**

In the main, FASH was the primary case holder for the young people it supported – 115 (95%) cases. In regard to the 6 young people where FASH was not the case holder, support was typically led by the leaving care/looked after social care teams.

The majority of cases (99 (82%)) were held by FASH social workers. FASH youth workers were responsible for 22 (18%) of cases.

The average duration of FASH support provided to young people was 4 months. However, as shown in Figure 20, this average was skewed by a large proportion of short 6 involvements from the FAST team.

The box plot (Figure 22) below shows that RAST involvements tend to be longer, with an average (median) duration of 6 months. However, 50% of FAST cases were supported for 5 months or less and 25% between one and 3 months. This skew is perhaps due to the large proportion of FAST cases focussing on accommodation only issues for the young people they supported.

In terms of intensity of support, the average time spent directly supporting young people and their families per week was one hour for CSE cases, 2 hours for FAST and 4 hours for RAST. Indirect support (e.g. admin and liaising with other services) was around 2 hours per week across all teams.
For the majority of cases (96 (79%)), FASH workers recorded that they had carried out a formal assessment of the young person’s needs. The main reason for not completing an assessment was that one had already been undertaken by other agencies (e.g. the looked after team) and transferred to the FASH team. Figure 23 details the types of assessments used.

The most common form of assessment was a housing needs assessment (46%) and can be attributed to the large number of FAST cases that focused on accommodation issues.
Case workers were asked to identify the key objectives of support for each young person they worked with. The most frequent response was to improve family relationships (54 young people (45%)), which is logical as this objective is applicable to all types of FASH support and cross-cutting with other objectives, for example, improving family relationships to prevent the young person being taken into care, or reducing the likelihood of a young person absconding from home and placing themselves at risk of CSE. Table 16 details the key objectives of support, and Figure 22 breaks this down, proportionally to each team.

The objectives of support by team fit with the nature of intervention, with RAST and FAST focusing more on preventing children becoming looked after, and improving life at home for young people and CSE working to prevent sexual exploitation. RAST cases were more likely to have multiple objectives.
Table 17: Key objectives of support

<table>
<thead>
<tr>
<th>Objective</th>
<th>Count</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Improve family relationships</td>
<td>54</td>
<td>44.6%</td>
</tr>
<tr>
<td>Keeping young person safe from risk of CSE</td>
<td>43</td>
<td>35.5%</td>
</tr>
<tr>
<td>Prevent escalation to LAC</td>
<td>42</td>
<td>34.7%</td>
</tr>
<tr>
<td>Keeping young person out of trouble from crime</td>
<td>29</td>
<td>24.0%</td>
</tr>
<tr>
<td>Keeping young person out of trouble from anti-social behaviour</td>
<td>28</td>
<td>23.1%</td>
</tr>
<tr>
<td>Find suitable accommodation for the young person</td>
<td>27</td>
<td>22.3%</td>
</tr>
<tr>
<td>Keeping young person safe from gangs</td>
<td>22</td>
<td>18.2%</td>
</tr>
<tr>
<td>Improve parenting capacity</td>
<td>20</td>
<td>16.5%</td>
</tr>
<tr>
<td>Improve existing housing arrangements for the family</td>
<td>15</td>
<td>12.4%</td>
</tr>
<tr>
<td>Reunification after a period in care</td>
<td>15</td>
<td>12.4%</td>
</tr>
<tr>
<td>Find suitable accommodation for the family</td>
<td>6</td>
<td>5.0%</td>
</tr>
</tbody>
</table>

Figure 24: Key objectives by team

Approximately two-fifths (39%, 47) of cases had support from FASH professionals other than their case worker (social worker). Additional support was more prevalent in RAST cases with 16% (20 young people) requiring support from other professionals, which
compares to 17% (21 young people) for FAST and 5% (6 young people) for CSEP cases. Table 18 details the types of additional FAST support provided across the 47 cases.

### Table 18: Additional FASH support

<table>
<thead>
<tr>
<th>Cases support by other professionals</th>
<th>%</th>
<th>Total</th>
<th>Average (per case)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Psychologists</td>
<td>22</td>
<td>46.8%</td>
<td>105</td>
</tr>
<tr>
<td>Learning Mentors</td>
<td>15</td>
<td>31.9%</td>
<td>125</td>
</tr>
<tr>
<td>Activities/Engagement Officers</td>
<td>15</td>
<td>31.9%</td>
<td>98</td>
</tr>
<tr>
<td>Mediation</td>
<td>13</td>
<td>27.7%</td>
<td>60</td>
</tr>
<tr>
<td>Triage Workers</td>
<td>4</td>
<td>8.5%</td>
<td>19</td>
</tr>
<tr>
<td>Healthy Living Advisors</td>
<td>3</td>
<td>6.4%</td>
<td>5</td>
</tr>
<tr>
<td>Youth Workers</td>
<td>1</td>
<td>2.1%</td>
<td>2</td>
</tr>
<tr>
<td>Housing Officers</td>
<td>0</td>
<td>0.0%</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total number of additional interventions</strong></td>
<td><strong>73</strong></td>
<td><strong>100.0%</strong></td>
<td><strong>414</strong></td>
</tr>
</tbody>
</table>

Note: multiple-response question – total does not sum

Almost half (47%) of those requiring additional support were supported by FASH Psychologists. This was followed by Learning Mentors – who, in terms of hours, provided the most support.

One-quarter (29) of those supported by FASH were successfully referred to other support agencies. Agencies referred to included housing agencies, health and education services.

Needs have been ordered based on the frequency of needs identified as high and medium. Family conflict, education and behavioural issues were the most frequently reported needs presented by young people. RAST cases were more likely to exhibit high-level and multiple needs.
Table 19: Needs on entry to FASH support

<table>
<thead>
<tr>
<th>Concern</th>
<th>High</th>
<th>Medium</th>
<th>Low</th>
<th>No Concerns</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number %</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Conflict within the home</td>
<td>47</td>
<td>30.6%</td>
<td>14</td>
<td>11.6%</td>
</tr>
<tr>
<td>Risk of becoming NEET</td>
<td>35</td>
<td>16.5%</td>
<td>18</td>
<td>14.9%</td>
</tr>
<tr>
<td>Anger issues</td>
<td>23</td>
<td>24.8%</td>
<td>24</td>
<td>19.8%</td>
</tr>
<tr>
<td>Housing stability: tenancy issues</td>
<td>35</td>
<td>14.0%</td>
<td>12</td>
<td>9.9%</td>
</tr>
<tr>
<td>School/college attendance</td>
<td>22</td>
<td>20.7%</td>
<td>22</td>
<td>18.2%</td>
</tr>
<tr>
<td>Emotional and behavioural development</td>
<td>16</td>
<td>22.3%</td>
<td>28</td>
<td>23.1%</td>
</tr>
<tr>
<td>Anti-social behaviour</td>
<td>16</td>
<td>17.4%</td>
<td>12</td>
<td>9.9%</td>
</tr>
<tr>
<td>Parenting capacity</td>
<td>16</td>
<td>14.9%</td>
<td>21</td>
<td>17.4%</td>
</tr>
<tr>
<td>Mental health issues in child</td>
<td>16</td>
<td>19.0%</td>
<td>36</td>
<td>29.8%</td>
</tr>
<tr>
<td>CSE risk</td>
<td>9</td>
<td>18.2%</td>
<td>35</td>
<td>28.9%</td>
</tr>
<tr>
<td>Behaviour at school/college</td>
<td>14</td>
<td>13.2%</td>
<td>18</td>
<td>17.4%</td>
</tr>
<tr>
<td>Housing: environmental issues</td>
<td>22</td>
<td>5.8%</td>
<td>13</td>
<td>10.7%</td>
</tr>
<tr>
<td>Emotional abuse towards child/YP</td>
<td>12</td>
<td>12.4%</td>
<td>27</td>
<td>22.3%</td>
</tr>
<tr>
<td>Social and communication difficulties</td>
<td>11</td>
<td>13.2%</td>
<td>20</td>
<td>16.5%</td>
</tr>
<tr>
<td>Mental health issues in parent</td>
<td>16</td>
<td>13.2%</td>
<td>18</td>
<td>14.9%</td>
</tr>
<tr>
<td>Gang related activity</td>
<td>7</td>
<td>14.0%</td>
<td>17</td>
<td>14.0%</td>
</tr>
<tr>
<td>Criminal activity</td>
<td>12</td>
<td>9.9%</td>
<td>24</td>
<td>19.8%</td>
</tr>
<tr>
<td>Child neglect</td>
<td>12</td>
<td>8.3%</td>
<td>32</td>
<td>26.4%</td>
</tr>
<tr>
<td>Domestic violence</td>
<td>5</td>
<td>11.6%</td>
<td>20</td>
<td>16.5%</td>
</tr>
<tr>
<td>Physical abuse towards child/YP</td>
<td>6</td>
<td>8.3%</td>
<td>21</td>
<td>17.4%</td>
</tr>
<tr>
<td>SEND</td>
<td>4</td>
<td>4.1%</td>
<td>10</td>
<td>8.3%</td>
</tr>
<tr>
<td></td>
<td>High</td>
<td>Medium</td>
<td>Low</td>
<td>No Concerns</td>
</tr>
<tr>
<td>------------------------</td>
<td>------</td>
<td>--------</td>
<td>------</td>
<td>-------------</td>
</tr>
<tr>
<td></td>
<td>Number</td>
<td>%</td>
<td>Number</td>
<td>%</td>
</tr>
<tr>
<td>Obesity Diet</td>
<td>4</td>
<td>3.3%</td>
<td>4</td>
<td>3.3%</td>
</tr>
<tr>
<td>Poor physical health</td>
<td>2</td>
<td>1.7%</td>
<td>5</td>
<td>4.1%</td>
</tr>
<tr>
<td>Disability</td>
<td>3</td>
<td>2.5%</td>
<td>4</td>
<td>3.3%</td>
</tr>
</tbody>
</table>
Outcomes

Figure 25 shows the support status of young people on exit from FASH support. Half of those supported required no additional support and were closed to social care. One-fifth of cases (24) disengaged from FASH support.

The proportion of successful closures for CSE was 60.7% (17 young people), 52.3% (34 young people) for FAST and 15% (9 young people) for RAST.

Disengagement was most prevalent amongst CSE cases (9 young people (32%)), whilst RAST had very low levels of disengagement (2 young people (7%). One-fifth (13) of those supported by FAST disengaged.

More than a third (10 young people (36%)) of RAST cases remained open to social care. This compares to 2 (3%) FAST cases and zero CSE cases. This can be attributed to the higher starting point and needs of those supported by RAST.

Figure 25: Support status on exit from FASH support
Figure 26 shows the change in those recording high-medium needs on entry to FASH to exit from FASH. There was a reduction in all areas of need: in particular, conflict within the home, anger issues/aggression and housing stability issues.

Figure 26: Change in needs

With regard to preventing LAC, Figure 25 breaks down these outcomes by FASH team. As to be expected, RAST and FAST had the greatest impact in preventing LAC. Approximately half (32 young people) of those supported by FAST were accommodated in semi-independent or independent living arrangements.
Figure 27: LAC outcome by team

- Reunified with family
- Resolved issues with family/home
- Remained LAC
- No change
- N/A (not at risk of LAC)
- Found suitable accommodation for young person
- Found suitable accommodation for family

Number of cases

RAST  FAST  CSEP
## Appendix 6: Partners Completing the Partner Survey

### Table 20: Organisations completing a partner survey

<table>
<thead>
<tr>
<th>Service</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>CIN Service</td>
<td>LBE</td>
</tr>
<tr>
<td>Compass Young People’s Service</td>
<td>External/Voluntary Organisation</td>
</tr>
<tr>
<td>Youth Development &amp; Support Unit</td>
<td>LBE</td>
</tr>
<tr>
<td>Precious Moments &amp; Health Ltd</td>
<td>External/Private</td>
</tr>
<tr>
<td>Single Point of Entry</td>
<td>LBE Referral Point</td>
</tr>
<tr>
<td>Safer London Foundation</td>
<td>Voluntary Organisation</td>
</tr>
<tr>
<td>Referral and Assessment Team</td>
<td>LBE</td>
</tr>
<tr>
<td>Looked After Children</td>
<td>LBE</td>
</tr>
<tr>
<td>Youth and Family Support Service</td>
<td>LBE</td>
</tr>
<tr>
<td>Christian Action</td>
<td>Voluntary Housing Support</td>
</tr>
<tr>
<td>Cheviots (CWD)</td>
<td>Children’s Disability Service</td>
</tr>
<tr>
<td>Community Safety Unit</td>
<td>Police</td>
</tr>
<tr>
<td>Trouble Families</td>
<td>LBE</td>
</tr>
<tr>
<td>Youth Offending Unit</td>
<td>Youth Offending Service</td>
</tr>
<tr>
<td>Child Protection and Family Support Team</td>
<td>LBE</td>
</tr>
<tr>
<td>Leaving Care Service</td>
<td>LBE</td>
</tr>
<tr>
<td>Fostering Service</td>
<td>LBE</td>
</tr>
<tr>
<td>Adoption Service</td>
<td>LBE</td>
</tr>
<tr>
<td>Safeguarding and Quality Assurance</td>
<td>LBE</td>
</tr>
</tbody>
</table>
## Appendix 7: Steering Group Members

### Table 21: FASH steering group members

<table>
<thead>
<tr>
<th>FASH steering group members</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assistant Director, Children’s Services, London Borough of Enfield (LBE)</td>
</tr>
<tr>
<td>Head of Behaviour Support, (LBE)</td>
</tr>
<tr>
<td>FASH Service Manager, (LBE)</td>
</tr>
<tr>
<td>Head of CiN, (LBE)</td>
</tr>
<tr>
<td>Senior Commissioning Manager – Children and Maternity Services, Enfield CCG</td>
</tr>
<tr>
<td>Head of LAC, (LBE)</td>
</tr>
<tr>
<td>Evaluator, (York Consulting)</td>
</tr>
<tr>
<td>Head of Youth and Family Service, (LBE)</td>
</tr>
<tr>
<td>Business Support, (LBE)</td>
</tr>
<tr>
<td>Head of Community Safety, LBE</td>
</tr>
<tr>
<td>Evaluation Co-ordinator, (DfE)</td>
</tr>
<tr>
<td>Head of Commissioning, Schools and Children’s Services, (LBE)</td>
</tr>
</tbody>
</table>