

## Case Study 1

This family was referred to a Dudley Children’s Centre in July 2012 by a health visitor who suggested that the family provides mother with some support with behaviour management for the youngest child (referred to as child A) who is one of five children. The family has experienced significant trauma over the last few years and domestic abuse has played a significant part in this trauma. As a result of the domestic abuse, the child A had not had any social interaction outside the family home due to mother being reluctant to leave the house alone as she was in fear of her life.

The Children’s Centre offered this family support and the child A has been attending Time for Two’s since September 2012. To support mother and child A, a flexible induction process was undertaken to enable child A to settle at his own pace and for mother to gain trust within the centre. Control measures have also been put in place to enable mother to continue to feel safe using the Children’s Centre’s provision and to avoid further incidences of threat from the abuser’s family members. Security measures have been put in place in the reception area to ensure that child A is only collected by previously identified persons. A photograph of the father is held at the centre so should he attempt to collect child A that there is an early recognition which enables staff to respond appropriately to the needs and safety of the child and his mother.

For child A, staff observed the following positive impact:

- Improvement in speech, language and communication skills
- Improvement in behaviour
- The early intervention will continue through until nursery provision hence consistently building on child A’s school readiness and social skills in an environment where both the child and the mother feel safe and secure and have built positive relationships with professionals

For the mother, staff observed the following impact:

- Child A’s attendance at the session has enabled his Mother to attend weekly counselling sessions with victim support following the violent assault from her ex partner
- Mother has had to attend court appointments to reinstate the restraining order following further threats from her ex partner, child A’s attendance in time for two’s has allowed Mom to attend these appointments knowing that child A is in a safe environment. Mom is able to attend the family links parenting programme. Mom attends this group with her eldest son who is 18. Mother has begun to recognise that some elements in her parenting have an impact on all of her children’s behaviour. It is also giving her eldest son an insight into parenting and appropriate adult role modelling
- Mother has made new friends and widened her social support networks with other parents who use the provision
- Child A attending his time for two’s placement allows time for one to one work within the home environment without the child being present and protects him from having to hear mom’s distress.

To date, this provision has made a considerable positive impact to both child A and his mother and has improved their quality of life as a whole. Mother has built trust with the professionals at the centre and feels that she can phone the Children’s Centre at anytime with any concerns and is offered flexibility with the Time for Twos provision enabling mother to attend her appointments.

**TOTAL COST OF CHILDREN’S CENTRE’S INTERVENTION- £1949 per annum in this case.**

**(Childcare costs – cost neutral due to separate central government funding).**

## **Case Study 2**

This family was referred to a Dudley Children’s Centre by a health visitor. The family was new to area and therefore requested an introduction to services. The family has moved around from borough to borough. There are now 3 children in the family. They previously lived in Worcester (where child N was subject to a child protection plan) and then moved to Wolverhampton in March 2010 (where child N was still subject to a child protection plan). The family has issues with domestic abuse and the father has ADHD and was in prison when child N was born.

Child N started to attend the Children’s Centre nursery from September 2011 and the parents were encouraged to bring other children to appropriate groups. Following an incident in January 2012, the children were removed from the parents and brought into care of the local authority, a SECTION 47 (Child Protection) investigation started, agreement of care was recommended. The children were deregistered from CP plan and their needs were met through the looked after process.

In September 2012, the children were returned to their mother’s care only with a full support package from all agencies involved, including Children’s Centre services.

The centre offered the following support to this family:

- 1 -1 support/monitoring/attendance at all relevant LAC/CP/Core group meetings from outreach worker @ NPNSCC/home – ongoing involvement.
- Stair gates & Fireguard supplied/delivered to home.
- Family Links Nurturing Programme offered and attended – mum.
- Domestic Abuse course sessions – mum
- Advice/guidance re: routines, sleep, sterilising, health & hygiene, etc.
- Child In Need place initially offered and attended, followed by Time for two’s provision for L, ongoing.
- Child In Need place initially offered and still attending, to be followed by Time for two’s provision to start January 2014 for K, ongoing.

**TOTAL COST OF CHILDREN’S CENTRE’S INTERVENTION- £3129 per annum in this case i.e. £1043 per child**

**(Childcare costs – cost neutral due to separate central government funding).**

### Case Study 3

This family have two children, one aged two years and five months and the other is one year old. The family were referred to a Dudley Children's Centre from Children's Services in August 2012 requesting that the family be engaged into groups. Concerns were raised from midwifery team around Mothers use of heroin and history of the use of crack cocaine whilst being pregnant with her second child.

Mother is a long standing drug user, her drug use is erratic, Mother has used methadone and street heroin sporadically. However the Father to the youngest sibling was the protective factor for the children. The children witnessed a domestic violence incident between Mother and Father, Mother ended the relationship and moved in with Maternal Grandmother who has quite complex health needs. A referral was made to Children's services. Father to the youngest sibling committed suicide within a month of the relationship ending, Mother found him dead in their flat. Following the recent events and the uncertainty of the situation, the children became subject to a Child In Need Plan. The concern was raised that Mother had never parented the children alone. A comprehensive support package was put into place; however Mother continued to prioritise her drug use over her children's needs. The children are now subject to a Child Protection Plan. Youngest sibling was placed into temporary foster care after Maternal Grandmother took the eldest sibling on holiday. Alongside this, the youngest sibling was offered a Child In Need place at the Children's Centre's childcare provision to ease the pressure on Maternal Grandmother.

One to one Family Support was offered. Due to the range of professionals involved, a CAF was raised where the Children's Centre worker was identified as the lead professional. Regular liaison with all professionals from Health, Housing and Drug rehabilitation was required including attendance at a post- natal group.

To date, the family have accessed Stay and Play, Peep One's, Family Links, Citizens Advice Bureau, Black Country food bank through the children's centre, Time for Two's and have engaged well with the CAF.

The oldest sibling has accessed the time for two's place. Engagement with this service is excellent, Mother engaged with the family group times at the end of the sessions. Mother has built good relationships with key workers. By accessing a time for two's place, key workers noted that this child showed a delay in speech and language development. A referral for Speech and language has been made. The time for two's place has provided a consistent and stable environment throughout the recent changes in the children's lives. The place has also widened Mother's support networks through meeting with other professionals on a daily basis.

At present, Maternal Grandmother is the protective factor in the children's lives while Mother remains the main carer under Maternal Grandmothers supervision and remains to reside in maternal Grandmothers house. Both children will remain subject to a Child Protection Plan until professionals are satisfied that Mother can prioritise her children's needs over her drug use, clean drug samples are to be provided over a period of time. A

community based assessment will be completed after this period of clean drug samples with a view to the children living with their mother.

**TOTAL COST OF CHILDREN’S CENTRE’S INTERVENTION- £2126 per annum in this case i.e. £1063 per child.**

**(Childcare costs – cost neutral due to separate central government funding).**

**N.B.**

The current average external foster placement costs that Dudley is paying are:

- under 5s - £37,400 pa
- Ages 5 - 10 - £39,300 pa
- 11+ - £40,600 pa

Internal fostering, based on level two fee and allowance is:

- 0-4 - £10, 900 pa
- 5-10 - £12 400 pa
- 11-15 - £15 400 pa
- 16+ - £18 700 pa

The current external residential placements average cost is £152 700 pa. (These are currently all aged between 10 and 18 years.)

**Therefore, the cost benefit of Children’s Centre provision is significant. It can be demonstrated that Children’s Centres support has re-united families and enabled them to remain together.**