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Building a more family-centered children's social service: A system approach

#### Introduction

What can help to keep families thriving and children safe and flourishing? Meeting their needs and aspirations. But doing so takes an ecosystem. Community, education, health, housing, justice, and children's systems all contribute to critical aspects of well-being.

In this five-part series, we're looking at how to build a more effective children's social service. In part one, we highlighted promising trends, including using a whole-of-family approach and centering the voices of lived experience in policy and program design. Around the world, reform is underway. Underpinning it is the need for a strong whole-of-system response, which we'll discuss here in part two.

#### A system approach improves outcomes for all children

A system response sets up families for success. Such a response identifies concerns as early as possible and responds in an integrated and collaborative way when help is needed.

Often, this already happens at the local and regional level. The challenge is scaling this to whole systems, with an all-encompassing response – one that's characterized by integrated support, better information sharing, and multi-agency involvement.

This isn't a novel concept. Almost 15 years ago, UNICEF contracted the University of Chicago to develop a conceptual framework for a systems approach in child protection. The resulting paper noted that society can't view child safety concerns in isolation. What's needed, instead, is an approach that "promotes a holistic view of children and child protection that necessarily engages the full range of actors involved in protecting children's rights."

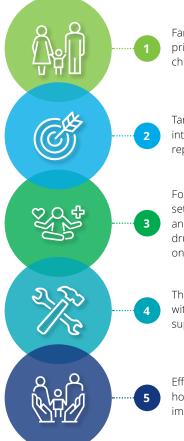
Many jurisdictions have set out new, proactive ambitions for reforming their children's social services. They've understood that in the past too many people have had to deal with siloed public service offerings, which are not always easy to access or coordinate. As a result, children and families often fell through the cracks and come at risk of harm.

A whole-system approach involves prevention, early intervention, and multi-disciplinary responses. It has the potential to be more effective in the moment and to reduce downstream needs.

The stronger the broader system, the more likely fewer children will need social services – and the better the response will be for those who do.

#### Features of a system response

We've studied significant transformations in children's social services and talked to many of the people leading them. There is no one-size-fits-all approach. Scaling what works locally – or adopting practices from elsewhere – requires consideration of local context, communities, and capabilities. However, a solid whole-of-system approach tends to have five defining features.



Families and children have equitable access to universal services, from primary health care to education to housing. These are delivered in a child-centered manner and provided to those most at-risk and excluded.

Targeted, resourced services are focused on prevention and early intervention to respond when needs first arise, including navigation and representation for families.

For those with complex or compounding needs, providers invest in a core set of stabilizing interventions that prevent further harm and help families and children's needs to de-escalate. Interventions – including mental health, drug and alcohol support, and wraparound family supports – are focused on prevention and provide a pathway to sustained outcomes.

There are sufficient incentives, tools, and information to work collaboratively with children and families and the community and organizations that are supporting them.

Effective accountabilities and outcomes-based monitoring are in place, holding the whole system to account for child-centered responses and improving the outcomes of those most at-risk and excluded.

Let's look at each in more detail.

#### Equitable access to universal services

Many of society's most vulnerable children are missing out on universal services, which often reduces their long-term health, well-being, and employment outcomes.

Children and young people who are in care, or who are working with children's social services, are more likely to be educationally disengaged and excluded, and less likely to be achieving.<sup>2,3</sup> They are also more likely to have poorer physical and mental health and be more likely to miss regular and age-related health checks.<sup>4</sup>

There are many factors that can contribute to these outcomes. Some children have moved often, which has made continuity of care and services more difficult. Others may have neurodiversity and behavioral challenges, which may take time to diagnose and support.

To support policy planning and service interventions, we should make better use of data to understand the under-served populations, the barriers to access, and pivot points where children and families disengage. When jurisdictions have a sound population health view and grasp the barriers to accessing service, solutions can flow from that knowledge to better serve children and families.

An example of this in *New Zealand*, where Māori children and children from low socio-economic cohorts have poorer health outcomes, is the National Child Health Information Platform (NCHIP). As part of efforts to increase equitable access to health care provisions, NCHIP is a digital platform that brings together child demographic data with key health milestones including immunizations, first year core contacts, and general practitioner (GP) enrollment. The platform provides practitioners with a wealth of information to have better conversations with families and to identify early when checks are being missed. Evaluation has shown significant increases in GP enrollment, and that the solution mitigated the impact on priority groups during the COVID pandemic.<sup>5</sup>

#### Targeted resources for prevention and early intervention guided by data

Prevention (preventing needs from arising) and early intervention (responding early to needs) are well-established core social services concepts. Despite the evidence supporting prevention and early intervention, many jurisdictions struggle to maintain the resources for and focus on these responses. That is particularly true when it's hard to quantify (in the short term) the impact of avoiding a poor outcome.

A system approach to prevention and early intervention requires two things. One, long-term resourcing. Two, an evaluation, established from the outset, that can demonstrate the social and economic benefits of the associated investment.

In the **United Kingdom**, for instance, the Sure Start government program, launched in 1999, provided holistic support to families with children under the age of 5. This was achieved through a local network of one-stop shops that offered health services, parenting support, early learning and child care, and parental employment support.

Decades on, the program has continued to evolve, and evaluation of the program continues to demonstrate long-lasting benefits around health status, educational achievement, and employment.<sup>6,7</sup> Research found that Sure Start not only shifted the curve for those most in need but also improved outcomes in the wider geographic area.

The broader system organizations, outside of children's social services, need to understand their own data (and share it safely and securely, with relevant permissions) to better identify the families that are falling short of desired outcomes.

The wealth of data now available to agencies, coupled with the evidence of evaluation, creates an opportunity. It's a chance to better understand both early warning indicators and the touch points that could have the greatest impacts. Where agencies can connect the dots across organizations, this becomes even more powerful. It helps to also connect the dots across patterns of behavior, needs, and circumstances that can support earlier intervention.

At a population level this information can improve service design and delivery. The idea is to address barriers, increase tailored support, and enhance trauma-informed practices (grounded in an understanding of the impact of trauma and exposure to dangerous experiences). At an individual level this can also help case workers and families themselves identify and act early.

#### Investing in stabilizing interventions

For children and families with highly complex needs<sup>8</sup> and who are experiencing multiple disadvantages, we see a common set of connected challenges. This includes housing insecurity, physical and mental health, neurodiversity, unemployment, child poverty, substance use, and offending.

To meet the needs of families experiencing multiple disadvantages, successful organizations invest in a core set of integrated interventions: housing stability, mental health, drug and alcohol supports, and wraparound family support.

However, a common challenge across jurisdictions is that currently responses are often challenge-based rather than person-centered. That, along with constrained resources, means that families and children may be working with multiple agencies. They're unable to get their needs met in a coordinated and sequenced way.

Joint commissioning and delivery across the necessary interventions can help stabilize families more quickly. With these core services in place, children and families are better placed to engage with children's social services to address specific challenges and improve outcomes sustainably from a place of stability.

#### Incentives, tools, and information to work collaboratively

Once they're dealing with major complexities, most social services recognize that they need different ways of responding. That includes bespoke services, multi-agency responses, family support navigation models, and increased representation for families.

For families, it also helps to be able to tell their story once, with professionals working together on shared assessments and coordinated case management.

We know that organizations face barriers in working together, and providers face hurdles in securing (and servicing) sufficient and long-term funding from multiple funders.

A more integrated system can align commissioning to outcomes rather than services. It can promote accountability for impacts, while providing flexibility around how services are delivered. Integrating commissioning for those with the most complex needs also means a single point of accountability.

A suitable budget for those experiencing a need for services from multiple places will likely help with collaboration. So will the right data and digital infrastructure (more on that later in this series). Frontline staff usually have the desire and the expectations to work more effectively and collaboratively. However, they're often constrained in how they work together, from joint planning to information sharing.

With appropriate collaboration, agencies can do an even better job of taking a prevention mindset and providing needed supports at the earliest opportunity.

#### Effective accountabilities and outcomes-based monitoring

Most jurisdictions monitor a set of expectations around children receiving support from children's social services. This goes beyond broad monitoring of children's rights, experiences, and outcomes.

The expectations vary in several ways, including:

- Their remit which populations and which organizations they monitor
- Their focus outcomes-based, rights-based, standards-based, and service quality
- How they're monitored data analysis, thematic reviews, response to failures or complaints

Despite these differences, there are a common set of underpinning factors that enable successful monitoring:

- Accountability to children. Incorporating the voice of children and young people into the focus and work
  of monitoring organizations, providing reporting to young people and their advocates, and holding
  the impact and experience of the child across services at the heart of the assessment process and
  frameworks.
- Monitoring the broader system. Ensuring that all organizations that play a role in improving outcomes for our most vulnerable children have clear accountabilities and are held to them.
- Anchoring in outcomes. A strengths-based approach to monitoring against positive well-being outcomes.
- An independent voice. Ensuring that monitoring accountabilities are independent from both political influence and the organizations being monitored.
- Monitoring both conformance and performance. Conformance monitoring (are we doing things right?) provides confidence that organizations are working effectively and to their accountabilities. Performance monitoring (are we doing the right things?) enables the system to understand if organizations and responses are having the greatest impact that they can.
- Promoting learning in the system. Monitoring information can provide transparency and spotlight good practice and opportunity for improvement. Disseminating that learning widely, and holding the system accountable for acting on it, supports cycles of improvement.

### Case study: United Kingdom – North Yorkshire's Safeguarding Children Partnership

In the United Kingdom, the North Yorkshire Safeguarding Children Partnership (NYSCP)<sup>9</sup> has implemented a multi-agency approach to children's services, helping to ensure the safety, well-being, and success of children across the region.

The whole-of-system partnership involves the North Yorkshire Council, North Yorkshire Police, and the Humber and North Yorkshire Integrated Care Board. They collaborate to emphasize early identification of risks, shared accountability, effective information sharing, and a focus on continuous learning and improvement.

NYSCP's strategic plan focuses on four key themes: a safe life, a happy life, a healthy life, and achieving in life. Each pillar has a series of enabling actions, ranging from efforts to reduce offending and anti-social behavior, to better support for schools in understanding challenges, expanded mental health services, school readiness, and school improvement strategies. Together, these provide the needed wraparound services.

The partnership also emphasizes proactive intervention through its Early Help Strategy,<sup>10</sup> using a strengths-based assessment tool to identify and respond to the needs of children and families. After completing the assessment, the practitioner discusses with the family what steps are needed to address any worries or unmet needs and coordinates the Early Help Plan. A Team Around the Family (TAF) can also be established to coordinate supports to achieve the family's desired outcomes.

Among the NYSCP's innovative programs are the No Wrong Door initiative, which replaces traditional residential care with community-based hubs. The Trusted Relationship Service offers support to children at risk of criminal exploitation. And the Multi-Agency Screening Team (MAST) ensures consistent and secure information sharing across social care, police, and health services, facilitating swift and appropriate responses to child welfare concerns.

The NYSCP has created a clear structure to succeed, with distinct responsibilities. It provides guidance and support to relevant agencies that help safeguard and promote child welfare (e.g., health, education, volunteer sector, criminal justice, local government, and public service). As an added key layer, an independent scrutineer reviews NYSCP's activities and chairs executive meetings to provide assurance of the effectiveness of the multi-agency arrangement.

This is a system where partner organizations and agencies collaborate, share, and co-own the vision for how to achieve improved outcomes for vulnerable children.

In the multi-agency arrangement, organizations hold one another to account effectively and share information to facilitate more accurate and timely decisions for children and families. There is early identification and analysis of new safeguarding challenges and emerging threats. Learning is promoted and embedded in a way that local services can become more reflective and implement changes to practice. Most important, the children of North Yorkshire are safeguarded and their welfare promoted.

The tenets of the approach have been implemented by a number of other local authorities in the United Kingdom, supported by impact and process evaluations to understand outcomes for children.<sup>11</sup>

#### Leading a system response

Children's social services organizations have an understanding of the unique and complex needs of families. They're also the ones that manage the fallout when the broader system hasn't been able to meet those needs. And they're keenly aware of the risk factors and support models that are effective.

Even though these organizations are much smaller than their counterparts in health care or education, they're uniquely positioned to take more of a leadership role in system change. Child protection agencies have a critical role as an advocate and are set to quickly and meaningfully provide access to services across siloed government ministries.

System change takes strong leadership that's committed and courageous. For those in children's social services, stepping up can mean working across organizational boundaries and into communities to achieve better outcomes.

This might take the form of identifying and addressing systemic barriers to family and child outcomes. Agencies can amplify what the unmet needs and gaps for at-risk and excluded families are – for example in service availability or in workforce knowledge and skills – and the impact that they have.

Sometimes, there can be barriers to working together, too. Other leadership roles include strengthening cross-sector leadership relationships, forums, and decision-making. Children's social services organizations can also take lead roles on joint action planning, integrated responses, and sharing evidence and learning.

Within children's social services, there's a great capacity to advocate, educate, and collaborate in a way that draws the strengths of the system together. That will ultimately help improve practices, service and responses.

A final critical role is supporting a system to have the knowledge, skills, and capability to work with children. Part three of this series will explore what constitutes an enabled workforce – in skills, data, and technology – before we turn to evidence-based responses (part four) and what needs to be done to drive bold change (part five).



### Case study – The Abu Dhabi Department of Community Development

The Abu Dhabi Department of Community Development was established in 2018 to drive quality in the social sector in Abu Dhabi. In 2023 the Department developed a social service workforce strategy – spanning social workers, psychologists, counselors, psychotherapists, applied behavior analysts, and social care support workers working with vulnerable individuals including children, the elderly, and people of determination (people with disabilities).

The strategy revealed significant gaps in the social care support worker segment, where a lack of standards and training was contributing to workforce shortages and skills gaps. The research also found that stronger collaboration among adjacent sectors, including health and education, as well as increased participation from private and third-sector providers would be required to meet the Department's goals. At the time, there were limited opportunities for professionals and policymakers across these sectors to learn from one another, share good practices, or innovate. As a result of the new strategy, in October 2024 Abu Dhabi hosted its first Social Care Forum focusing on the workforce, new models of care, and technology advancement in the sector. The forum was open to not only social care professionals across the public and private sector but also from education and health as well as policymakers and students.



## Endnotes

- 1. "Adapting a Systems Approach to Child Protection: Key Concepts and Considerations," Save the Children, UNICEF and UNHCR.
- 2. "Transition Support Services: Post care outcomes analysis by Transition Support Services eligibility populations," Oranga Tamariki Ministry for Children, May 2024.
- 3. "The lifelong health and wellbeing of care leavers," policy briefing on the evidence from "Looked after children grown up," October 2021.
- 4. "Interventions and approaches to support practicioners in completing physical and mental health and wellbeing assessments (and act on findings during the care journey) for looked-after children and young people," National Institute for Health and Care Excellence Guideline No. 205, October 2021.
- 5. Digital platform improves child health equity study suggests Health Informatics New Zealand (hinz.org.nz)
- 6. "The short- and medium-term impacts of Sure Start on educational outcomes," Institute for Fiscal Studies, April 9, 2024.
- "The health effects of universal early childhood interventions: evidence from Sure Start," Institute for Fiscal Studies, October 13, 2022.
- 8. There is no common definition for complex needs and are described differently across jurisdictions. For the purpose of this series, we use it to refer to families and children who have a combination of health and social needs that are impacting their wellbeing, are likely to need support to access services, and are often being supported by multiple agencies. A useful discussion of complex needs definitions can be found in "Families with complex needs: International Approaches," New Zealand Social Policy Evaluation and Research Unit, November 2015.
- 9. "Welcome to North Yorkshire Safeguarding Children Partnership."
- 10. "Early Help Strategy," North Yorkshire Safeguarding Children Partnership.
- 11. "No wrong door model Trial evaluation," What Works for Children's Social Care.

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