



In a joint inspection of services for children and young people, inspectors acknowledged that family support services were having a positive impact on children and family outcomes. They recognised the valuable contribution that the services made, working with families to deliver early intervention strategies. Inspectors identified that families waited too long for family support services. This was therefore identified as an area of improvement by Aberdeen Community Planning Partnership.

Our aim is:

By August 2019, 80% of families, who make a request for additional support, will receive an offer of an appropriate service within 30 days of receipt of the Child's Plan

Method

We identified a multi-agency team including representatives from public and third sector services providing support to families in their own homes. The team agreed to use the Model for Improvement to support their improvement aims.

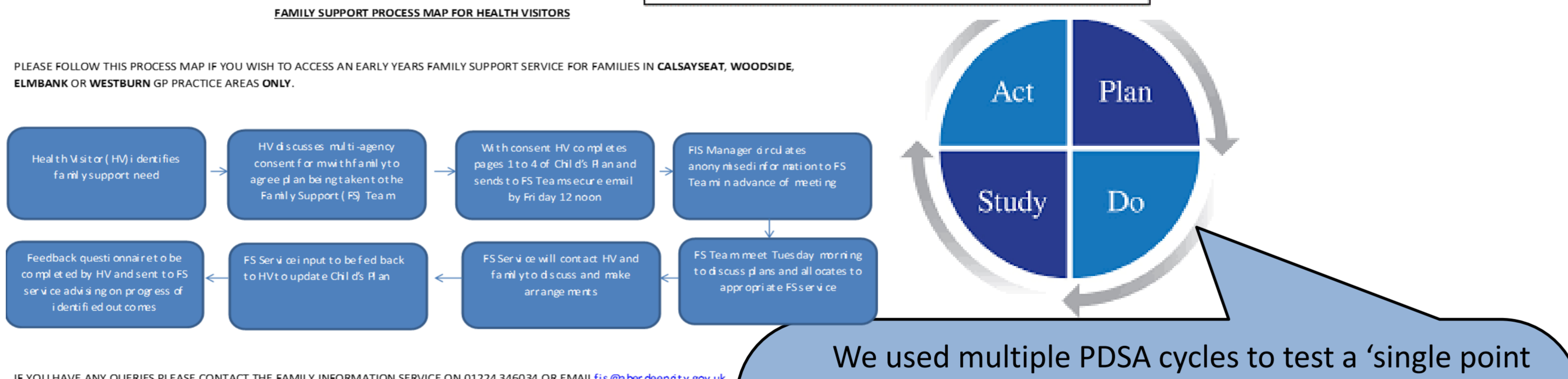
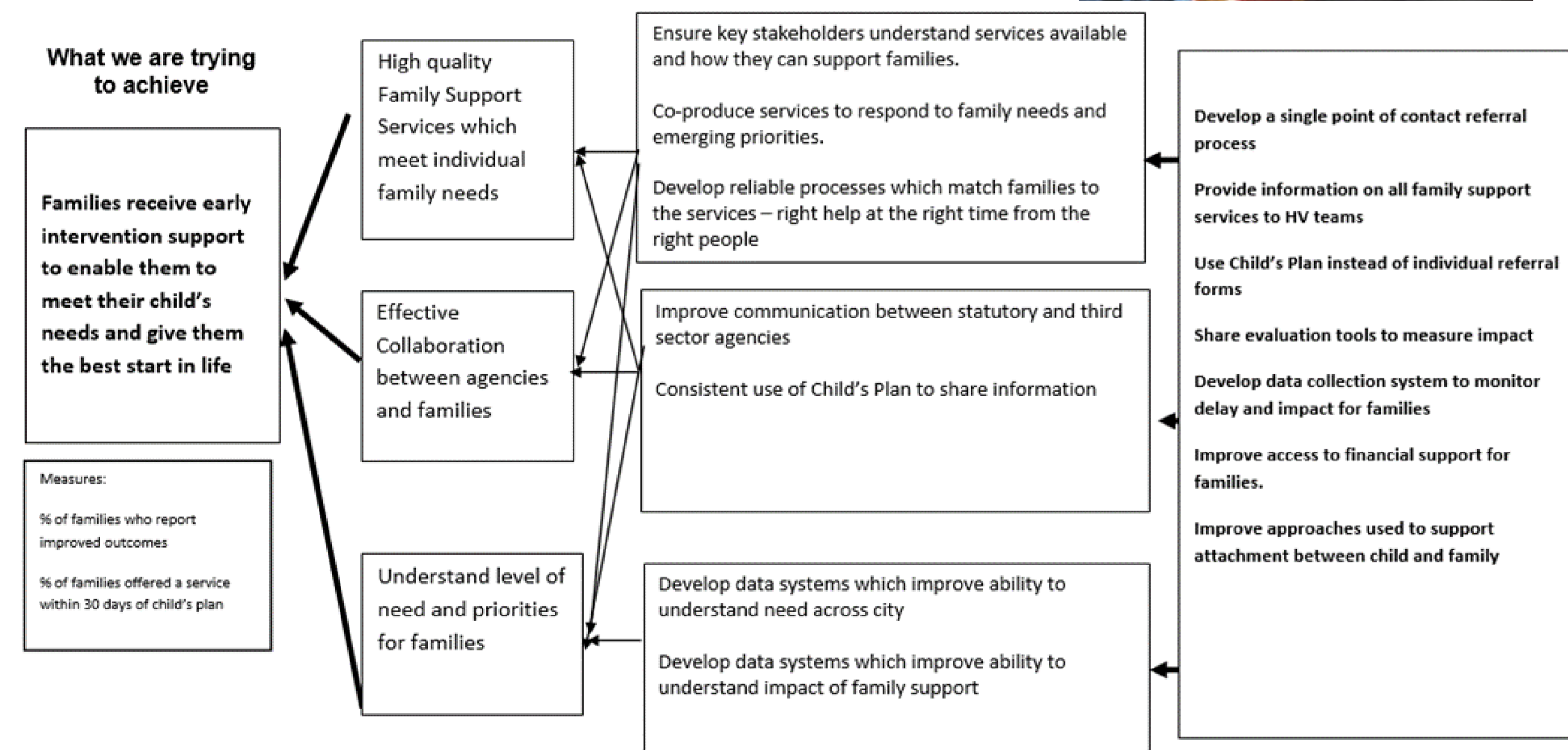
We gathered data to understand how the system was currently working and identify opportunities for improvement. Our initial data analysis helped identify that most requests for service were from Health Visitors. This highlighted the need to have one of the Health Visiting team as part of the Improvement team.

Analysis of the data gathered and feedback from families provided evidence that there was a delay between Health Visitors requesting a service on behalf of families and the service being offered. Families could wait for as long as 174 days between the date of referral and the date service was offered.

There was also evidence that Health Visitors were making multiple requests for services from a range of providers in an attempt to access support as quickly as possible.

- The multi-agency team agreed that there was need to improve systems and processes to:
- reduce the delay between the Health Visitor identifying a support need and the family being offered support from an appropriate service;
 - reduce the 'scatter gun' referral approach;
 - ensure early intervention to reduce the need for statutory services; and
 - work collaboratively to improve outcomes for Aberdeen's children and families.

Process Change



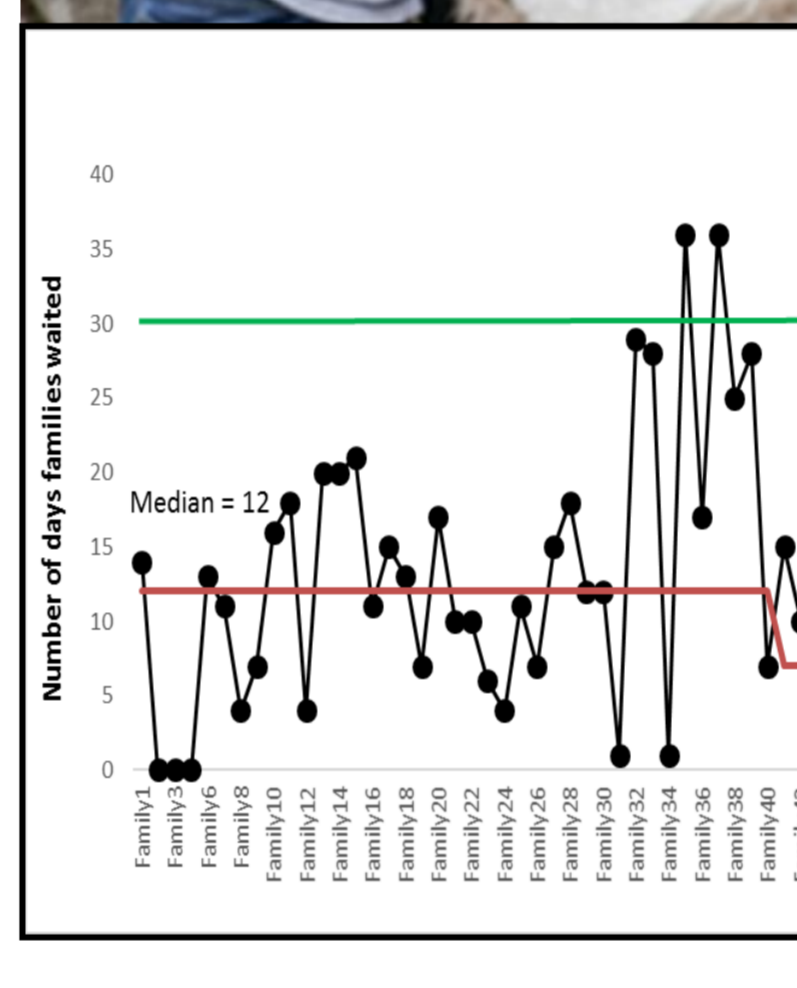
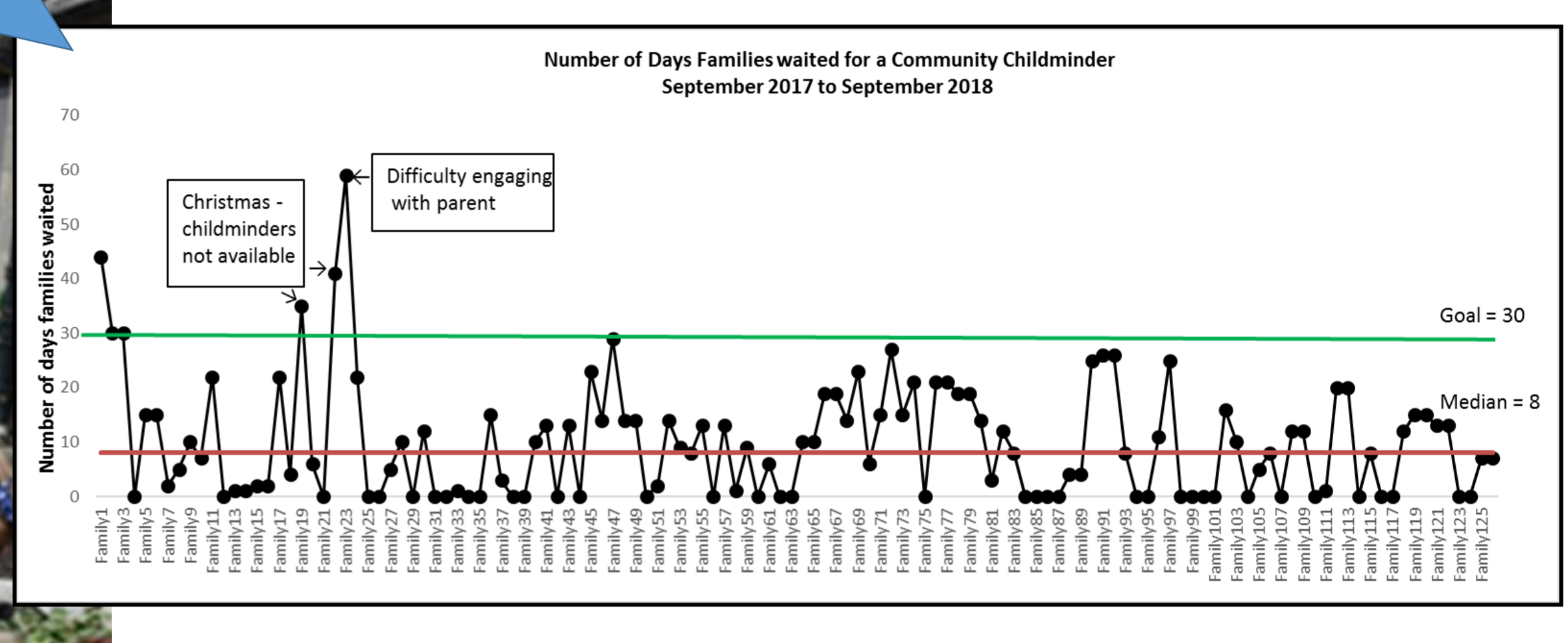
We used multiple PDSA cycles to test a 'single point of referral system' in one area of Aberdeen. This improved waiting times for some families but increased time for those out with the 'testing area'. Through our testing we learned that this could not be scaled up as organisations involved could not commit the time to weekly meetings and there was insufficient value added by meeting. Testing helped us to understand that use of the child's plan was one shared process that reduced delay for all services.

Key Learning Points

- Improving this complex system involving multiple agencies required action from each service to improve their own systems, as well as collaborative action on shared processes.
- We needed to invest time to build trust to enable the sharing and analysis of data as well as ideas for improvement. This also helped us make the decision to abandon a new process that was not supporting us to reach our aim.
- The structure of the Model for Improvement helped us to develop a shared goal and understand the importance of using data for improvement.
- Improvement and quality improvement thinking has become part of our day to day business

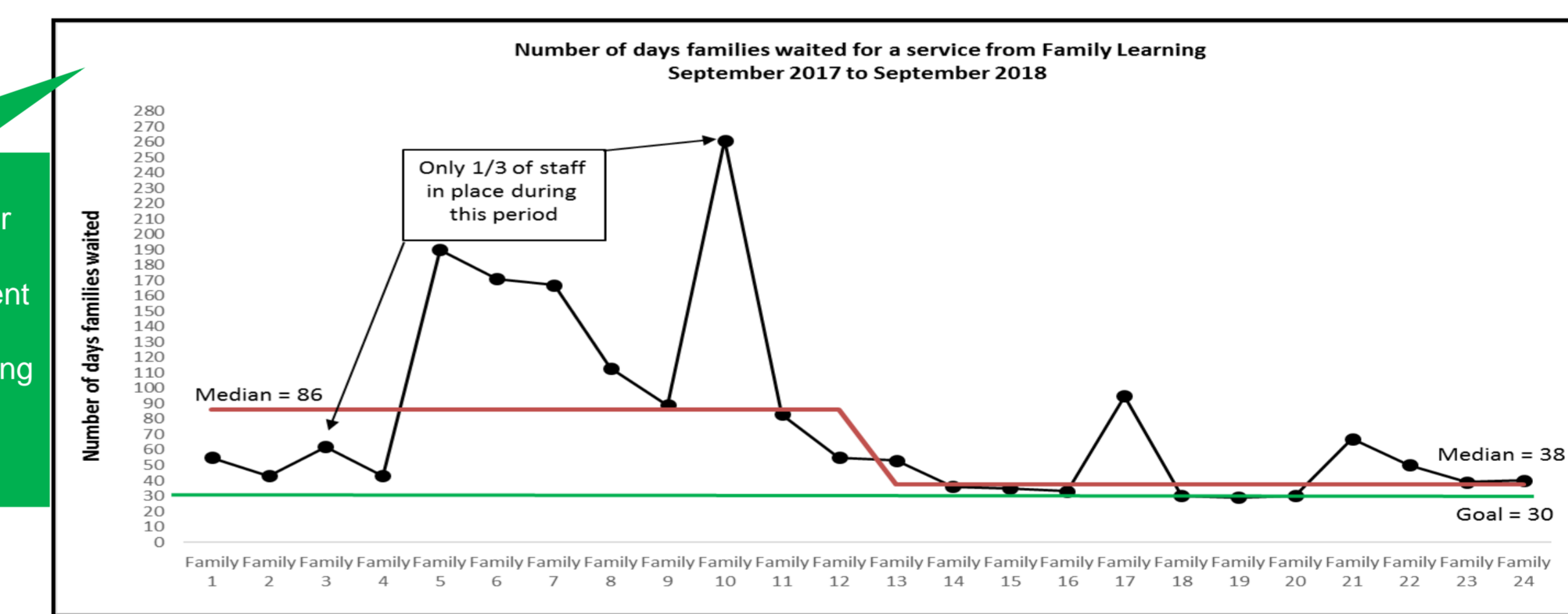
Results

"My daughter has grown in confidence, more willing to listen to others.... I feel my stress levels are halved.... the childminder has been very supportive throughout and for which I am so appreciated of." Parent



"With the pressure on statutory services Home-Start has become more and more important filling the gaps especially in the area of mental health where they prevent symptoms of depression, anxiety and agoraphobia worsening which can affect the wellbeing of the whole family". Health Visitor

"Mum is more able to manage her son's behaviour. Their bond has strengthened, and his development has progressed as a result of the work done with the Family Learning team." Health Visitor



Conclusions

We have reduced the time families wait. In one service, the **median** number of days that families waited was **54 days** between June 2016-December 2016, with some families waiting for over **100 days** for a service. During 2018, the **longest delay for one family** was **38 days**. All other families have received a service within 38 days with **100% of families** receiving a service within 30 days during 4 out of the past 12 months.

Another service had a **median** waiting time of **46 days** in 2016 with many families waiting between **60 to 100 days** for a service. Since September 2017, the service has received 81 referrals with 52 of these receiving a service within 30 days. The longest delay for **one family** has been **59 days**. All other families have received a service within 59 days.

In another service, the median time families wait has been reduced from **86 days** to **38 days** in the past 12 months.

Next Steps

- We are making stronger links with the Integrated Children's Services Board to ensure the improvement work is represented at a strategic level.
- We are developing a dashboard for each service to facilitate use of data and understanding of our systems.
- We are testing use of the Child's Plan to provide a reliable and consistent way to understand the impact of our work with children and families

