



What Works *for*
**Children's
Social Care**

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DEVOLVED BUDGETS: AN EVALUATION OF PILOTS IN THREE LOCAL AUTHORITIES IN ENGLAND

Executive Summary





What Works for Children's Social Care

Acknowledgements

We would like to thank the staff in Hillingdon, Darlington and Wigan for their enthusiasm and cooperation with the evaluation throughout. Their willingness to let us observe the difficult work they do is very much appreciated, and the insights they offered were invaluable. We would also like to thank the young people and families who took part in our observations and interviews. It is not always easy to have a researcher observing social work sessions, or to discuss the difficulties that are the focus of Children's Services intervention. We are therefore most grateful to those who gave up their time to enable us to conduct this evaluation. The pilots all benefited from the leadership of highly dedicated managers and support staff, and their open and proactive approach to working with us has benefitted the evaluation greatly. Finally, we would like to thank our colleagues in Cardiff University, particularly Laura Cook, David Wilkins and Adam Pierce for their assistance in preparing the report.

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Authors

Westlake, D., CASCADE, School of Social Sciences, Cardiff University; **Corliss, C.**, CASCADE, School of Social Sciences, Cardiff University; **El-Banna, A.**, Warwick Clinical Trials Unit, University of Warwick; **Thompson, S.**, CASCADE, School of Social Sciences, Cardiff University; **Meindl, M.**, CASCADE, School of Social Sciences, Cardiff University; **Talwar, R.**, CASCADE, School of Social Sciences, Cardiff University; **Diaz, C.**, CASCADE, School of Social Sciences, Cardiff University; **Folkes, L.**, CASCADE, School of Social Sciences, Cardiff University; **Addis, S.**, CASCADE, School of Social Sciences, Cardiff University

About What Works for Children's Social Care

What Works for Children's Social Care seeks better outcomes for children, young people and families by bringing the best available evidence to practitioners and other decision makers across the children's social

care sector. We generate, collate and make accessible the best evidence for practitioners, policy makers and practice leaders to improve children's social care and the outcomes it generates for children and families.

About CASCADE

CASCADE is concerned with all aspects of community responses to social need in children and families, including family support services, children in need

services, child protection, looked after children and adoption. It is the only centre of its kind in Wales and has strong links with policy and practice.

To find out more visit the Centre at: whatworks-csc.org.uk,
or CASCADE at: sites.cardiff.ac.uk/cascade

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FOREWORD

Good social work can make a profound positive difference to the life of a young person and their family – of this there should be no doubt. For some families, even the best social work cannot make a difference in the face of barriers both big and small – that's why we commissioned the three projects in this report, to look at what happens when social workers are backed up by additional financial resource.

When we began working with Darlington, Hillingdon and Wigan, we didn't know exactly what would happen, as we left many of the details to local authorities – and individual social workers – to decide.

As we saw in the interim reports, it can be difficult to embrace a new way of working, so it's pleasing to see that many of these initial challenges were overcome. The report contains a number of interesting findings, and some points for reflection – and I'd encourage you to read them all – but for me the most important two are about the people involved, rather than the money.

First, there's a recurring theme that social workers appreciated the autonomy they were given to spend money in a way that they thought would help the family. As well as respecting the professionalism of social workers, it also takes down a potential barrier to involving families in decisions.

Second, most of the individual transactions were small, less than £20, and seem to have been spent on one of the fundamentals of social work – building relationships. In any future research in this area, we'll want to look at how this spirit is maintained, and what impact it has.



Michael Sanders

Executive Director

What Works for Children's Social Care



EXECUTIVE SUMMARY

Introduction and background

Over the last two decades the number of children in care has grown substantially, from 50,900 in 1997 to 78,150 in 2019 (DfE, 2019, Biehal et al., 2014). Although care is the best option for some children, concerns have been raised by policy makers, practitioners and academics about the unprecedented scale of this increase and its implications for children, families and the state. Interventions that provide additional resources to families have been identified as having potential to address this issue. This report presents findings from three pilot evaluations that explored how 'devolved budgets' might be used by Children's Social Care to provide resources to families and reduce the need for care. The 'devolved' element of the intervention reflects the idea that social

workers working closely with families are best placed to know what help they need to create sustainable change and keep children safely at home.

Pilots in Hillingdon, Darlington and Wigan offer insights about different approaches to implementing devolved budgets. Hillingdon used the funds to help adolescents, mainly those at risk of extra-familial harms related to various forms of exploitation. Darlington worked with families with children who were at risk of care entry. Wigan used devolved budgets with families where the goal was reunification from care, and families where children were at high risk of entering care. Decision-making about expenditure was devolved to frontline social workers to some extent in all three pilots.

Figure A: Summary of each pilot

| Pilot Authority | Target group | Number of families | Main focus | Expected budget per family |
|-----------------|------------------------------------|--------------------|--------------------------------------|----------------------------|
| Hillingdon | Adolescents and their families | 95 | Extra-familial harm | £4,000 |
| Darlington | Families with children aged 4-16 | 35 | Risk of care entry | £10,000 |
| Wigan | Families with children of all ages | 78 | Risk of care entry and reunification | £4,000 |

Methods

The evaluations were organised into three phases. In Phase one the evaluation team at CASCADE developed an initial logic model to articulate theory and implementation; Phase two involved refinement of the logic model and assessment of early implementation; and Phase three aimed to understand how devolved budgets worked once they had become established and explore early evidence of their impact. Our research questions explore:

- feasibility:** can the intervention be delivered practically and are there systems and processes to enable the intervention to be easily scaled?
- evidence of promise:** what potential benefits do stakeholders (e.g. social workers, children, and families) identify, and do there appear to be any unintended consequences?
- indicative evidence of impact:** what evidence is there that the intervention can have a positive impact on outcomes?

- d. scalability:** To what extent is the intervention used as anticipated and is the programme sufficiently codified to operate at scale?

To address these questions, we undertook interviews with practitioners, managers, young people and parents, focus groups with professionals, and observations of practice. We also collected some quantitative information from social work case questionnaires and administrative records.

Key Findings

1. All the pilots were successful in devolving decision making to social workers, and processes supported them to provide resources to families quickly and without bureaucracy.
2. Budgets were used for a wide variety of purposes and in creative ways. This included material, practical and financial help, where items such as clothing and essentials were provided, nursery provision and driving lessons were supported. In addition, the budgets supported engagement with young people, through paying for meals or activities. Therapeutic help was also a focus in all three pilots, in some cases covering gaps in existing provision or overcoming long waiting lists.
3. More unusual uses of budgets included paying for a replacement vehicle for a parent, purchasing a caravan as accommodation for grandparents (who were of Gypsy Roma traveller heritage) to act as Special Guardians, renovating parts of houses to improve the home environment, settling rent arrears, and arranging for a child to travel overseas and stay with relatives away from contextual harms.
4. These brought clear benefits for children and families, and perspectives on the intervention were broadly positive. There was evidence of collaborative working that involved families, but most workers did not tell families how much resource was available.
5. Some families felt decision making about spending should be further devolved to give

them more choice about how resources are used.

6. The rate and amount of spending was lower than expected in all three pilots. Forecast spending was overly optimistic about project implementation, and it became clear that smaller amounts were enough to help many families. Other explanations for this lower than expected spend include workers being used to a more frugal local authority culture and not having the confidence to spend.
7. Progress has been made in all three pilots since the interim reports were published. Workers had become more comfortable with delivering the intervention and had demonstrated a wide variety of uses for devolved budgets.
8. For some families, budgets were used to help children remain with birth families. However, many of the children and families involved do not seem to have been at risk of entering care imminently.

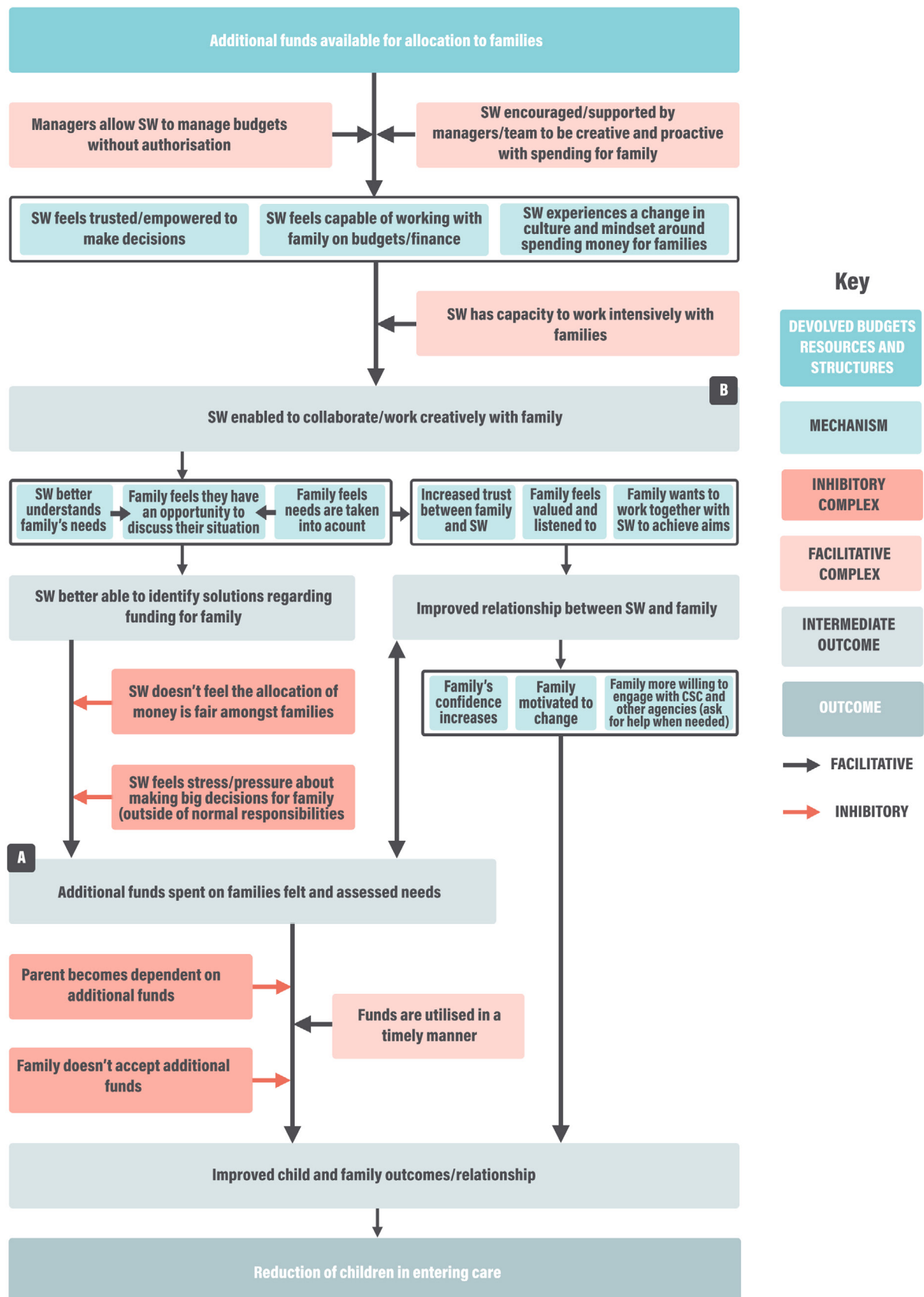
Discussion

We present a logic model that described the intervention, with two key pathways. Pathway A is relevant for families who have practical or material needs that can be met by the provision of goods, or therapeutic needs that require services. When social workers spend the additional funds to meet a family's needs in a timely manner, this can lead to improvements in home conditions, relationships within the family, behavioural or psychological changes, and reduce the need for children to enter care. Pathway B is based around improved relationships between social workers and families that increase the chances that a family will engage and make changes.

In some ways the wide variety of uses that workers found for budgets is a testament to the creative problem solving that the pilots set out to encourage. Yet this poses a challenge for future evaluations that will need to focus more on the impact devolved budgets have on care outcomes, where the mechanism of each individual item of spending in achieving this common goal might be very different.



Figure B: Overarching logic model



Conclusions and recommendations

This study aimed to describe and understand how devolved budgets were implemented and how they might be theorised to help families and reduce the need for care. We offer the following recommendations.

1. **Test this intervention at a scale that enables more rigorous evaluation:** The pilots are credited with a wide range of benefits for children and families, and for workers and managers. The intervention has potential as a way of working and is worth exploring further.
2. **Free social workers up to make spending decisions:** Social workers thrived when they were freed-up to make spending decisions, spent less than expected, and managed budgets carefully. Local authorities should seek to enable workers to exercise this freedom, whether or not they implement devolved budgets per se.
3. **Learn more about the different ways budgets are used and the impact they have:** The current studies have looked at devolved budgets in relation to reducing the need for children to enter care, but it is evident that many of the most creative uses of budgets were found where the level of concern was less serious and children were not at risk of entering care imminently.
4. **Develop the intervention to better target the range of social care outcomes:** As social workers used budgets with a wider range of families, not just those who were at imminent risk of care, the impact of devolved budgets on outcomes beyond care entry should be explored. Alongside this, there should be further efforts develop devolved budgets as an intervention that has an impact on care outcomes.



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NOTES



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info@whatworks-csc.org.uk


 @whatworksCSC
whatworks-csc.org.uk





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Social Care**

info@whatworks-csc.org.uk

 @whatworksCSC
whatworks-csc.org.uk

