

# [Integrated services essay sample](https://assignbuster.com/integrated-services-essay-sample/)

This report will show an understanding of current legislation, policy and practice within an integrated Children’s and Young People’s Service. Considering the history leading to current legislation and how these have informed practices and policies that are used by the Children’s workforce and also how the Common Assessment Framework and lead professional role supports practice and improves outcomes for children and their families.

Integrated working is where professionals from more than one agency or service work together to share common aims, information and responsibilities in order to provide early intervention in situations which could impact on children’s learning and achievement. Gasper (2010: 14) describes the process ‘ through listening, talking and exchanging ideas, new understanding develops’. Over the decades there have been a number of initiatives with the intention of encouraging services to work together.

Multi agency and integrated services are not a modern approach to the health and educational services of our society. Historically parents will have drawn on links within their close communities to support them with the care of children. Modern day life prevents this with families often not part of a support network and having to find childcare whilst they are working.

Since the mid nineteenth century the government have been implementing policies and laws to protect children from a life of poverty and to improve their outcomes in life by advising on a minimum standard of education and health care. The Prevention of Cruelty to, and Protection of, Children Act 1889 was the first of many to enforce criminal charges for the mistreating of children. This law was encompassed in the Children and Young Persons Act 1933 of which some sections are still applicable today particularly regarding the employment of children. This act brought together all existing child protection law into one single piece of legislation.

Following the brutal death of Dennis O’Neill at the hands of his foster parents in 1945, Sir Walter Monckton was commissioned to conduct an inquiry. The findings led to the setting up of The Committee on the Care of Children which inspired The Children Act 1948 and gave local authorities an increased role in professional services for children. Previously the church had mainly provided the services under the ‘ poor laws’ that were available to disadvantaged children. The new lead professionals that were created aimed to keep children within their families, and the Children and Young Persons Act of 1963 introduced the powers and duties to ‘ make available such advice, assistance and guidance as may promote the welfare of children by diminishing the need to receive children into or keep them in care’ which in theory were preventative measures.

The Children and Young Persons Act 1969 made it compulsory that local authorities take over the legal parental responsibility for a child. Concern during the following decade for children who were in care and the existing knowledge of children’s needs being met more effectively within a family environment led to Children Act 1975 and the Adoption Act 1976. This period of time also saw an increase in the amount of community run pre-school provision’s being available to children.

The Children Act 1989 gave every child the right to protection from abuse and exploitation and the right to inquiries to safeguard their welfare. Its central theme was still that children are usually best looked after within their family. The act came into force in England and Wales in 1991. It aimed to simplify previous pieces of legislation and began to make it clear to people working with children what their duties were and how they should work together by information sharing. The act also highlighted concerns with professional services that work with children and the lack of prevention of harm to children deemed to be at risk and states that children have a right to be provided with support where they are found to be in need of additional support.

Since New Labour came to power in 1997 they have introduced initiatives to encourage more collaborative working to improve outcomes for children, young people and their families as a whole. The boundaries that were present between health, education and social care made it difficult to provide seamless service delivery. One of the major developments were the Sure Start centres which were aimed at bringing together the different agencies and providing the best start for children under the age of five and their families. The specialist knowledge within the centres could help benefit all family members by providing help to access jobcentre plus, financial advisors and charitable organisations.

Every Child Matters put forward to parliament strategies and ideas relating to issues around parenting, young people’s activities, health and education services. It was published with the Lord Laming report which centred around the death of Victoria Climbie and the findings of poor accountability and a lack of multi-agency working and communication. Chemenais (2008: 1) writes that the Every Child Matters green paper acknowledges that children and young people cannot learn effectively if they do not feel safe, healthy or happy and that learning and wellbeing go hand in hand. There was a greater emphasis placed upon the voice of the child than was previously recognised within the implementation of support systems that were put into place. Childcare providers and educators have to take into account whether children would achieve five outcomes they are: Be healthy, stay safe, enjoy and achieve, make a positive contribution and achieve economic wellbeing (DfES, 2003)

The Children Act 2004 aimed to improve outcomes for all children. Focus was on parenting and families, early interventions and more protection for children who are deemed to be ‘ at risk’. Greater responsibility and accountability and the integration of services both locally and nationally. The act created a Statutory framework for integrated working between local authorities, health agencies and other relevant services.

The Common Assessment Framework is used to assess the needs of the child, who has been identified as not reaching the five Every Child Matters Outcomes, and how these needs should be met and which services should be accessed in order to get the most effective outcomes. There is training available across the agencies and practitioners from any background can raise an initial pre-assessment checklist for the Common Assessment Framework form. It is designed to provide early intervention and with the consent of the parents share information that they have chosen and decided to with other agencies supporting positive relationships. Early years practitioners, even during training, are expected to be able to improve existing information sharing processes and establish effective multi agency working as part of their ongoing professional development.

As a result of a Common Assessment Framework being raised a lead professional is appointed to co-ordinate the services and to act as the main point of contact for the family. This ensures that the family only tell their story once instead of several times over to each agency that may be involved. The lead professional will be appointed based upon the core skills that will be required to communicate with the child and their family including diplomacy and sensitivity to other’s needs. The role will involve building a close, trusting relationship with the family and co-ordinating and understanding the other agencies involved ensuring that deadlines are met and reports are submitted where appropriate.

The Childcare Act 2006 increased the free nursery education entitlement for three and four year olds and requires local authorities to reduce discrimination and improve outcomes for children. The act promised a Sure Start children’s centre in each community by 2010 offering access to integrated services. It also provided guidance for schools and the promise of out of hours school care from 8. 00am-6. 00pm by 2015. The outline framework for the new Early Years Foundation Stage Curriculum was published with a view to implementation being achieved by 2008. This incorporated two previous documents Birth to Three Matters and the Foundation Stage. The introduction of new registration requirements for childcare providers The Early Years Register and The Ofsted Childcare Register which is in two parts voluntary and compulsory depending on the age of children to be cared for. For more than sixty years there have been over seventy inquiries into children’s violent deaths. Each having similar findings. The recommendations are similar in each case surrounding multi agency working, information sharing and accountability disputes. Although legislation and policies are ever changing, is society really learning by previous mistakes and how much is down to human error and poor judgement? ‘ Coversely, there is evidence that when we do not work together there can be tragic consequences’ Reed and Canning wrote (2012: 48).

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Learning Outcome 2

This report is intended to evaluate the impact of integrated working on its service users. There are many factors that influence relationships between different agencies and the professionals that are involved with working with children. It is imperative to identify early on in the relationships any challenges and benefits of collaborative working and how these will impact on children, young people and their families. Despite having many benefits integrated working is not always the best solution to solve every problem. As Bruner’s (1991) work suggested, the outcomes for children and families will not improve if the collaboration itself is not operating effectively.

One of the identified benefits of collaborative working for children and their families are an increased use of services, families that require support from agencies are usually those who would be less likely to access them. By having a trust in someone that is providing a recommendation the families willingness to use services increase. When any service provider has an already existing relationship with an agency they are referring a family to, they can help to reassure them that they know the agency and that it is safe and welcoming. A factor to be taken into account when the lead professional’s role is decided will be the amount of administrative support that might be needed in any particular case, which is obviously dependant upon the level of need and involvement required. This may be provided within the lead professional’s employment position or from other members of the multi-agency team. This will need to be determined during the meetings and communications that take place in order to ensure that time is allocated within normal working hours for the coordination of the information.

The majority of the drawbacks of collaboration pertain to the professionals involved, such as feeling overwhelmed as a result of an increased workload bought about by their involvement in collaboration (Bruner, 1991). Another factor to take into account is the availability of the lead professional. For example, a school-based lead professional is not available during school holidays and should plan ahead with other agencies to ensure there is formally agreed ‘ cover’ to support the family. A lack of formal structure, accountability and clear roles should be outlined. The aims need to be shared and agreed from the offset and the lead professional needs to take control. The Department for Education (2012) reported that practitioners felt that by taking on the role of the lead professional it helped them to access services swiftly intervening before problems escalated further and that they were able to develop valuable skills for their own career development. Aubrey (2008: 117) writes that success is highly dependant upon the energy, imagination and expertise of individual professionals and their leaders.

Joint working can be difficult were there are perceived differences in professional status. A barrier to positive and effective inter professional practices can be different reporting structures and content used by the different professions. Workers from the medical or legal professions cannot attend all multi agency meetings they are invited to and will often send reports which contain wording that other professionals cannot easily decipher or may misconstrue. This can cause delay in the decision making processes which can be of the detriment to the family. The lack of knowledge of other professions can lead to a biased expectation and if the exchange of information is handled poorly the prejudices can be reinforced.

Poor collaboration leads to mistrust and conflict around referrals (Lockhart, 2006). It is reasonable to assume that, as a result, families may experience poorer outcomes. A good agreement at the outset of the collaboration between the groups involved would be regarding common language to be used and the need to ensure clarity in reporting information that is to be shared. This will reduce conflict of interest between parties and will reduce the time that may be wasting in making decisions. Aubrey’s investigation (2008: 117) into multi agency working concludes that effective working is not easily achieved, by its very nature it can be disruptive and conflicts over areas of responsibility could arise.

A more personal approach from someone working within a preschool, nursery or school environment who regularly see the child and their family and have the opportunity for more informal avenues of information sharing can be of more benefit than someone who sees the family once every three months sitting behind a desk without the interaction and only providing a professional opinion based on a small snapshot of time. There is more chance of a trusting relationship developing and therefore better outcomes and a need for less intervention for the service user. A research report Leading to Excellence (OFSTED 2008) found that organisations which provide high quality care and education are those which hold children at the core of what they do and where there is a continuous focus to excel.

Geographical boundaries will hinder accountability, budgeting and decision making particularly if the agencies are cross county as allocations for the use of facilities can govern what services are available. These boundaries must be overcome to benefit the children and family as Aubrey (2008: 117) states that despite barriers and constraints of performance, frameworks are able to make a difference whatever the circumstances. In certain circumstances. By providing services such as schools, health, family support and financial advice on the same site could help to promote joint agency working in support of earlier intervention from a range of services. A survey conducted by OFSTED (2008) reported that the children from the Sure start centres were being better prepared to begin school.

They were more confident, with better social, language and communication skills according to the head teachers of primary schools that were interviewed. Collaborative working within professional agencies itself will not build affordable homes for all who need them or create a substantial economy and employment opportunities for those living in poverty. It will not provide enough places for children considered to be at risk in children’s centres or early years settings. The threat of funding reductions by the latest government has put at risk existing provision and caused outrage from the experts that work in these centres and also the families that use the facilities that are already provided. Families need to be encouraged and inspired to be self sufficient and initiatives must incorporate not only professionals but the whole community and be able to act in a preventative measure rather than as damage control.

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