

1 Table of contents

1	Table of contents	1
2	Executive summary	2
3	Introduction	2
4	Impact of & response to Covid-19	3
4.1	Introduction.....	3
4.2	Impact of Covid-19 on young people	3
4.3	BMF response & its effectiveness.....	6
4.4	Impact of BMF on young people & their parents/carers	9
5	Learning from BMF	11
5.1	Providing effective support.....	11
5.2	Ensuring effective multi-disciplinary working.....	12
5.3	Working with the wider system	14
6	Conclusion	18

2 Executive summary

Introduction

Building My Future (BMF) is a multi-professional service, designed to support young people, parents/carers and schools/colleges where there may be difficulties accessing the curriculum or in attendance, due to complex additional needs. This report is a follow-up to the main BMF evaluation and focusses on: (1) how Covid-19 impacted on young people and their families and the extent to which BMF responded effectively; and (2) overall achievements from the previous four years and key lessons learned.

The report is based on new research conducted between January and May 2021. The research included interviews, focus groups and workshops with stakeholders (representing the BMF team, schools, Ealing Council, NHS and the wider system) and with parents/carers. It also draws on performance monitoring data and service use data.

Impact of Covid-19

Overall, interviewees reflected that Covid-19 had a mixed and sometimes significant negative impact on young people and families, including engagement with education and learning; feelings of isolation and loneliness; loss of social skills; emotional impacts including anxiety, stress, mental health and wellbeing; and family breakdown.

The requirement to work remotely due to the pandemic required the team to quickly adapt and flex their model of delivery. Stakeholders thought that the team adapted well in the circumstances and parents/carers and schools continued to praise the service and identified specific, tangible impacts of the programme for young people.

The experience of the BMF team highlighted a number of innovations that might be retained in the future, e.g. virtual meetings with professionals and with parents/carers, using technology to check-in more regularly with young people; increasing opportunities to co-work cases with other professionals; and anti-racism work. That said, the team's experience during lockdowns helped to emphasise the importance and impact of face-to-face assessments and direct work.

Wider lessons learned

Supporting young people at risk of placement breakdown

The key characteristics of providing effective support to young people at risk of placement breakdown are:

- Ensuring the support is delivered by multi-disciplinary, multi-agency team of experienced professionals.
- Focussing on earlier intervention.
- Co-producing the service and delivery with young people and their families.
- Having a codified model of practice that is whole-family, solutions focussed and strengths based.
- Being sufficiently resourced to enable direct work and tackle underlying needs.
- Taking a networked approach rather than operating in isolation.

Ensuring effective multi-disciplinary working

BMF highlighted the following effective practice in relation to ensuring multi-disciplinary working is effective:

- Ensure it is multi-agency as well as multi-disciplinary.
- Appoint the right people to the team.
- Build the right culture.
- Co-produce with young people and families to develop common goals.
- Codify ways of working to build a shared understanding.
- Commit to collaborative problem-solving and solutions-orientated approach.
- Ensure sufficient resources.
- Share offices and working spaces with each other and with other teams.

Working with the wider system

When working with the wider system it is vital to make the case for early intervention; proactively manage changes over time so stakeholders continue to understand the programme;

recognise the significant resource constraints of the wider system; and, measure impact holistically, not just cost-saving to capture the full value of the programme.

Conclusion

Stakeholders agree that BMF has been a very valuable programme which has created a substantial amount of learning and some legacy for the wider system. While delivery during Covid-19 was particularly challenging it also led to new learning about the value of virtual interactions in some circumstances which can be carried forward. Also, for the young people and parents who were supported by the BMF team, there is a hope that they will have been given a firm foundation from which to build, enabling them to achieve their full potential.

Update on next steps

With the innovation funding period completed, Ealing Council are exploring options to maintain ongoing access to the knowledge, skills and effective practice developed within the BMF team. As part of this, Ealing Council are putting in place a transition plan to an integrated team.

3 Introduction

Building My Future (BMF) is a multi-professional service, designed to support young people, parents/carers and schools/colleges where there may be difficulties accessing the curriculum or in attendance, due to complex additional needs. The team supports young people who are at risk of exclusion or withdrawal from society to stay in or return to participation and meaningful activity. BMF was developed by Ealing Council and partners, deploying funds from the Department for Education's (DfE) Children's Social Care Innovation Programme.

BMF started taking referrals in April 2018 and DfE funding was scheduled to end in March 2020. An evaluation report was published for this period¹. In March 2020, the DfE confirmed that transitional funding would be awarded to a limited number of Innovation Programme projects in 2020-21. BMF was selected to enable the DfE to continue to gather evidence about the programmes that were most effective. As part of the transition funding, the BMF team considered how it would be possible to adapt, scale and mainstream the approach beyond March 2021. The budget allocation for 2020-21 was £849,159.

In light of this extension, Cordis Bright was commissioned to undertake a follow-up evaluation focused on:

- How Covid-19 and the associated lockdowns impacted on young people and families and the extent to which BMF responded effectively.
- Taking-stock of overall achievements from the previous four years and identifying key lessons learned.

This evaluation report draws on the following evidence:

- Semi-structured interviews with 12 stakeholders representing the BMF team, schools, Ealing Council, NHS and wider system stakeholders.
- A workshop with four members of the Ealing Parent and Carer Forum.
- A focus group with 10 members of the BMF team.
- Semi-structured interviews with five parents/carers who had children supported by BMF.
- Performance monitoring data, quarterly reporting to the DfE and service usage data, including comparison with a historical matched-pairs counterfactual cohort.

Fieldwork was undertaken from January to May 2021.

¹ <https://www.cordisbright.co.uk/news/post.php?s=ealing-building-my-future>

4 Impact of & response to Covid-19

4.1 Introduction

This section looks at how the needs of young people and families changed as a result of Covid-19 and the associated lockdowns, how the BMF team responded, and the extent to which that response was effective.

As shown in Figure 1, there were a number of national and local policies which had a significant impact on all households in England in response to the Covid-19 pandemic. Perhaps most significantly for BMF, where a large proportion of support to young people was deployed in schools/colleges and other settings, these settings were closed (except schools for children and young people of key workers and those who were most vulnerable) for over five months over two lockdowns. Additionally, the instruction to 'work from home if you can' had an impact on how the team worked, with staff being predominantly home-based for most of the year.

Figure 1: Restrictions during the pandemic (March 2020 to March 2021)

	March	April	May	June	July	August	September	October	November	December	January	February	March	
School	Closed except keyworker's CYP / most vulnerable		Return for some year groups					Schools open			Closed except keyworker's CYP / vulnerable		Phased return	
Work	National lockdown 1: Work from home		Return to work if cannot work from home					Tier system	National lockdown 2: Work from home		Tier system	National lockdown 3: Work from home		Gradual easing of restrictions

4.2 Impact of Covid-19 on young people

Stakeholders highlighted a mixed and ever-changing picture in relation to the needs of young people during lockdowns. For some young people, these were a relatively settled periods as challenges faced with attending school and interacting with peers were reduced. A small number thrived, especially those who enjoyed engaging with school and learning virtually. For others, these were periods of escalating need, exacerbated by increased challenges faced by their families, e.g. working from home, furlough, unemployment, isolation, illness, bereavement. For others, there was a mixture of highs and lows across the year.

Where young people and their families faced challenges, they typically consisted of:

- **Problems with home schooling** (both practical and motivational). A number of young people lost their momentum on school progress or career development and some experienced substantial setbacks. A core of young people did not engage successfully with home learning, and their parents were not necessarily in a position to support them effectively.
- **Feelings of isolation and loneliness and loss of social skills** due to reduced social opportunities. BMF team members and school stakeholders highlighted that both of

these factors are likely to combine and may consequently result in particular difficulties returning to, and sustaining attendance at, school.

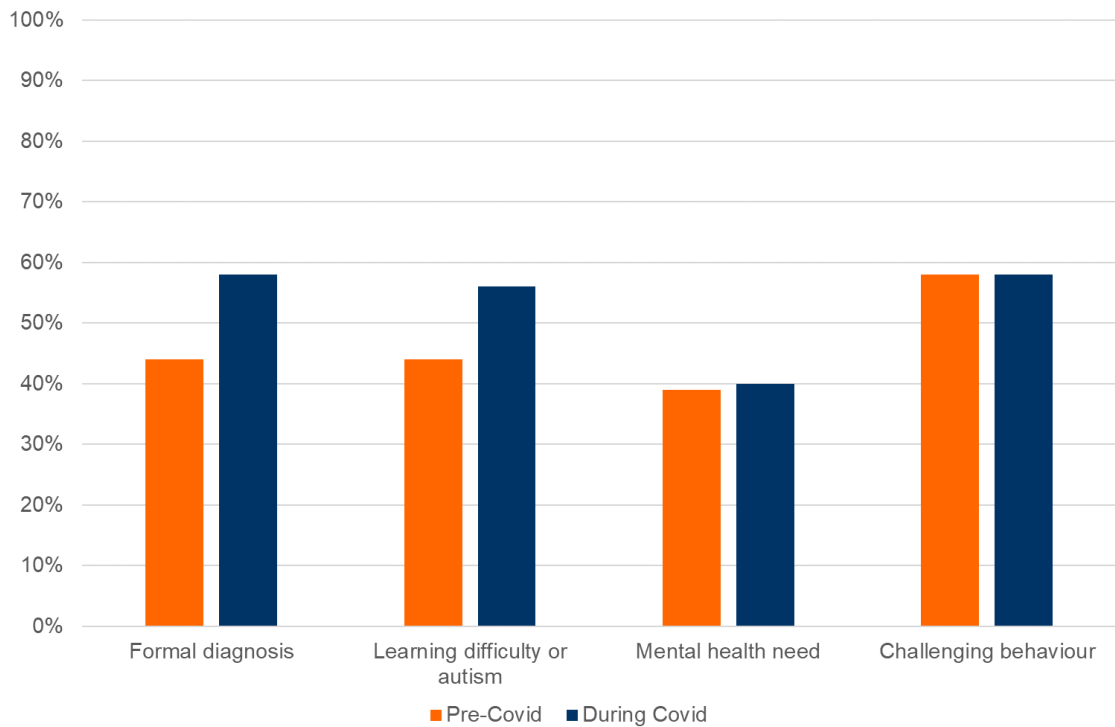
- **Emotional impacts** including anxiety, stress, mental health and wellbeing.
- **Family breakdown.** For some young people BMF was working with, these difficulties were magnified as a result of their underlying needs.

The mixed picture in terms of need is further demonstrated by management information data. Firstly, the number of referrals received over the period was relatively low. Between April 2018 and March 2019, BMF received 171 referrals. This reduced to 123 between April 2019 and March 2020 and dropped to 84 for the period from April 2020 to March 2021.

The reasons for this relatively low number of referrals during Covid are likely to be: (1) a result of BMF needing to wind-down for initial closure in March 2020 and only receiving relatively late notice of continuance. Referrals also tailed-off as the March 2021 closure date for BMF approached; (2) lower-than-planned capacity within the team reducing opportunities for proactive outreach (see section 4.3 for further information); and (3) young people and families having less contact with services and so need not being identified. This latter reason is further supported by the data which shows an uplift in referrals from September 2020 as schools fully re-opened.

Secondly, though numbers of referrals were relatively low, the percentage of young people with each presenting need was typically higher. Figure 2 shows that 58% of young people referred to BMF during Covid-19 had a formal diagnosis; 56% had a learning difficulty or autism; 40% had a mental health need; and 58% had challenging behaviour (compared to 44%, 44%, 39% and 58% respectively for young people assessed pre-Covid).

Figure 2: Percentage of young people at assessment with each presenting need (n=294 for pre-Covid, and n=84 during Covid)



Finally, further evidence of a core of young people with higher needs is demonstrated by the fact that during Covid, of the young people referred to BMF, 57% were judged to be eligible and received support from the team, compared to 47% pre-Covid. During this period, the BMF team also worked with young people already known to them.

On average, caseloads during the Covid period were 40, compared to 42 pre-Covid. This was due to the fact that existing cases were retained by the team for longer (in order to ensure emerging needs during lockdown could be met) and because the team was smaller in size than the period before Covid.

Reflecting on the Covid-19 period, stakeholders highlighted that this had helped to strengthen the case for holistic, whole family approaches to assessment on which BMF was based. These approaches helped to understand the context in which young people were living, the range of barriers they faced, and the strengths on which they could draw.

Looking to the future, there was concern, particularly among school and system stakeholders and parents/carers, that there might be a cohort of young people who have developed needs during the past year and who are not currently on the radar of services. These stakeholders were keen to ensure that there are services in place with sufficient capacity to meet the emerging and potentially rapidly escalating need. The end of BMF's funding led to concerns about what would be in place for these young people and whether other services would be funded for a sufficient period of time to ensure that longstanding needs were effectively addressed. As part of this, stakeholders asked for clarity from Ealing Council and NHS about the recovery plan for children and young people.

4.3 BMF response & its effectiveness

Overall, most interviewees felt that BMF responded well to the pandemic and continued to provide valuable support to young people and their families. The support moved mostly online which worked better for some families than for others. The sections below set out the key elements of the response and how this shaped BMF's effectiveness.

Timeliness & prioritisation of flexible support

Interviewees agreed that one of the key strengths of BMF during the Covid period was its ability to act quickly and flexibly due to a relatively low target caseload² which meant the team had capacity to adapt. When the first national lockdown happened, the team quickly responded by developing a Covid-19 assessment tool. This was rolled out to all current and recent young people involved with the service. This ensured they could prioritise the people with most need, taking into account a holistic view. One team member commented that the process of developing this tool was also a positive experience and helped ensure that the whole team were on the same page about who they were best placed to help and why. Additionally, new referrals were processed rapidly to minimise the wait time for people who needed the service. Finally, the team had scope to adapt as the nature of the lockdowns and need changed, i.e. later in the year re-focusing the team's work on supporting effective transition back to school.

Working virtually

In response to the first national lockdown, the BMF team changed to virtual delivery, and most team members continued with this approach throughout the year. This meant contact with young people, parents/cares and schools/colleges was typically undertaken via phone, SMS/WhatsApp and Teams. That said, a small number of the BMF team was able to return to face-to-face contact part-way through the year. Given the importance of direct face-to-face work with young people (see Figure 3) this was a welcome development. Some stakeholders (both internal and external) wondered whether, in retrospect, there could have been a quicker introduction of more face-to-face contact. That said, there was also recognition of the challenges that were involved and how BMF practice needed to be consistent with wider organisational policies/requirements and those of professional bodies.

In terms of type of support offered, in the main the pre-existing models of direct work were delivered remotely. That said, some team members trialled new or different approaches, including those with remote delivery at their heart. Stakeholders reflected that the team responded 'as well as they could' to the circumstances. There was overall agreement that the team's ability to respond during Covid-19 was enhanced by the fact that they worked within a pre-existing model that was flexible, adaptable, holistic and young person-focused. Changes in ways of working and the extent to which these were positive, negative or mixed are explored in Figure 3.

² Compared to statutory services.

Figure 3: The impact of working virtually during Covid-19

Generally positive	Mixed	Generally negative
<ul style="list-style-type: none"> • Team meetings were more efficient and attendance was logistically easier. • Less travel-time between meetings and appointments, meaning potentially more families could be contacted in one day. • Facilitated easier and more regular 'checking in' with families, especially those where there was a pre-existing relationship. Using SMS and WhatsApp text messages to check-in quickly and easily with the young people to capture emerging concerns in a timely manner was highlighted as a strength. • Contact with parents/carers was sustained and could have ongoing benefits into the future. • Increased the ability of more than one professional working with a young person and/or their family. It also enabled families to be worked with for a longer period of time. This meant that the team was able to respond to need as it arose. For instance, towards the end of the year the team changed their focus to help reintegrate young people already involved with the programme back into school. 	<ul style="list-style-type: none"> • More efficient contact with other professionals: both within and outside of BMF. But also lack of ad hoc contact. • Harder to sustain longer and more in-depth interventions with a young person or parent/carer. Remote delivery made it easier for beneficiaries to opt-out, plus the logistics of sustaining attention and interactions was inhibited by remote delivery. On the flipside, virtual working enabled more regular, shorter contacts. This was sometimes more suited to beneficiaries. It also meant that BMF could 'fill the gap' in situations where there was less contact between families and other services (e.g. schools). 	<ul style="list-style-type: none"> • Inhibited the team's ability to undertake holistic, whole-family assessments. • Inhibited the team's ability to work meaningfully with young people. Interventions were less suited to remote delivery and young people could more easily opt-out or not fully engage. Support would often have to be mediated via a parent/carer. This was not ideal, although had the benefit of increasing the skill and capacity of parents/carers to work with their child on an ongoing basis. • Affected ability to run the Life Skills aspect of BMF. This was an aspect of BMF that was praised in the previous evaluation. Despite the team's best efforts, it was difficult to translate this model into a virtual world, especially for new cases. • Due to a lack of face-to-face contact, there were limited opportunities to identify and respond to issues that were likely to arise as young people returned to school/college, e.g. anxiety, school refusers and hidden problems that would only be apparent when school got back to 'normal'. • Lack of face-to-face working also potentially led to fewer referrals as other professionals also had fewer direct interactions with children and young people.

Size & shape of the team

The team faced the additional challenge of losing staff due to uncertainty about whether the programme would continue, which led to ongoing recruitment difficulties throughout the pandemic. Having filled up to 100% of posts in 2019-20, the team started at just 51% of FTE in role in March 2020, and at best reached 73% due to difficulties recruiting people with scarce skillsets to short-term contracts.

BMF team members commented that the challenge of rebuilding the team was alleviated to an extent by the time that had been invested in codifying the BMF model, e.g. via the practice handbook. This meant that new members of staff could be onboarded quickly and efficiently and increased the chances of consistent and impactful practice.

Partnership working

Some stakeholders thought that Covid-19 put considerable strain on partnership working. Some of these strains were direct, e.g. partners being keen for seconded members of staff to return, and reductions in the number of referrals. Other strains were indirect. For instance, there was a perception that Covid-19 placed significant pressure on other teams and agencies and this required them to prioritise and focus on what was most important or urgent, which might not align with the priorities identified by the BMF team. The BMF team found it harder to refer young people into other services and the ability to establish new or deeper relationships with other agencies (especially schools and colleges) was impacted negatively by Covid-19.

That said, there were some positive experiences of partnership working during Covid-19. For instance, as outlined in Figure 3, the increase in virtual meetings meant that more professionals were able to join partner meetings to discuss cases and take a holistic perspective. Therefore, while there was a reduction in the unplanned, ad hoc meetings and problem solving that previously benefitted the programme, the more formal meetings became more valuable. In addition, there were instances of new or expanded relationships with external partners, e.g. Brentford FC Community Sports Trust who provided additional mentoring and positive activities.

In addition, as part of its plans to maximise the legacy of BMF, team members identified opportunities to balance direct work with young people with sharing knowledge, experience and skills with parents/carers and other professionals (e.g. school staff). BMF team members reported that this was positively received and increased the likelihood of work being sustained with young people beyond the lifespan of the programme itself and benefitting other young people who might face similar challenges.

Black Lives Matter

In response to the murder of George Floyd and the Black Lives Matter movement, the team invested time and resources to improve their anti-racist practice, i.e. a series of workshops about anti-racist practice and exploring systemic racism and unconscious bias, and periods of reflection about professional practice.

The team reported that this work had a positive impact on their values, team dynamics, understanding of their own biases and practice, and awareness of how their forms and policies might need to adapt. It also resulted in a tangible action plan. In turn, they thought that these changes had a positive impact on families. This is because the work

emphasised the importance of really listening to, and developing an understanding of, different perspectives and experiences.

All team members agreed that other teams and organisations could benefit positively from similar activities. There was a hope that the BMF team’s work could act as a model for other teams.

Other resources

During 2020-21, the team also used some of their resource to produce podcasts, including one about the intersection of racism and special educational needs and disability. A number of these were co-produced with parents/carers and young people. These were designed to capture and disseminate learning from the programme to ensure that it had a lasting impact.

4.4 Impact of BMF on young people & their parents/carers

All stakeholders agreed that it was challenging to create sustained impact for young people during the Covid-19 lockdowns. The reasons for this were multi-faceted, i.e. nature and scale of negative impact caused by Covid-19 and the associated lockdowns for young people and their families; and the impact of moving to remote delivery for BMF and for other teams/agencies. This is supported by management information data which shows that only 54% of cases closed during Covid-19 were as a result of work being completed (compared to a pre-Covid figure of 76%). Figure 4 also shows less positive feedback in relation to helpfulness of the support and whether it built confidence for young people, parents/carers and referrers.

Figure 4: Results of case closure questionnaires (n=81 for pre-Covid, n=15 for during Covid)

	Pre-Covid	During Covid
Did you find the BMF support helpful? (young person)	94%	73%
Do you feel more confident? (young person)	92%	73%
Did you find the BMF support helpful? (parent/carer)	93%	80%
Do you feel more confident? (parent/carer)	86%	73%
Do you feel more confident in your ability to support the young person with their needs? (referrer)	86%	87%

Nonetheless, semi-structured interviews with parents/carers highlighted positive impacts such as:

- Achieving positive outcomes for the young person:
 - Their child receiving mentoring support, which in turn improved their behaviour.
 - Sustaining a school placement in the face of challenging behaviour.

- Deployment of online and telephone support to help address challenging behaviour.
- Practical and psychological support to help address trauma and anxiety from being a victim of bullying, boosting confidence and trust in adults.
- Helping to sustain engagement in learning even when not attending school.
- Supporting parents to support their child:
 - Providing support to parents/carers so that they had skills and capacity to respond to their child's needs.
 - Supporting separated parents/carers with a focus on improving working relationships which in turn had a positive impact on the young person, especially in terms of confidence, motivation and behaviour.
- Building better relationships with school and other services:
 - Feeling like the BMF team was 'on their side' and could advocate for the best possible outcomes for the young people.
 - Acting as an effective bridge between the family and the school, helping to improve relationships and finding a suitable way forward and in a way that kept the young person at the centre of thinking.
 - Facilitating referrals to other services, e.g. sports-based mentoring scheme which in turn increased feelings of confidence and value.
 - Helping to find an alternative school better suited to the young person's needs.

5 Learning from BMF

This section looks back at the nearly four years of BMF and draws together the key learnings. Specifically, it explores lessons for working with young people at risk of school placement breakdown; how to make a multi-disciplinary, multi-agency model work well; and lessons for the wider system.

5.1 Providing effective support

There was agreement across stakeholders about the characteristics of effective support to young people at risk of school placement breakdown, i.e.:

- **Multi-disciplinary, multi-agency support provided by an experienced team.** This is explored further in section 5.2. There was overall agreement that such a model of support was impactful for the range of need that BMF supported, i.e. from early intervention to more established and complex needs.
- **A focus on earlier intervention.** The majority of stakeholders highlighted a pressure across the wider system to focus on problems that were well-established rather than emerging. These stakeholders also agreed there is a need to shift thinking and resources to earlier intervention. They highlighted three main reasons for this: (1) a moral imperative to provide support as soon as possible to stop need from escalating; (2) it is more effective to tackle issues at their earliest stages; and (3) that it would save the system money in the longer-term, by avoiding the need for more complex, longstanding support.
- **Co-production with young people and their families.** There are a range of benefits to involving young people and their families in programme design and service provision. At its centre is ensuring that the needs (and strengths) of young people and families are at the heart of decisions about (1) service design; (2) ongoing service development and improvement; and (3) design and implementation of care and support to individuals. The involvement of the Ealing Parent and Carer Forum (and later in BMF's implementation, other parent/carer representative groups, e.g. CONTACT Ealing) was highlighted as an example of this, as was the involvement of young people and their families in decisions about the care and support they received.
- **Codified model of practice that is whole family, solutions-focused and strengths-based.** This helps to ensure that: (1) practitioners have a common and joined-up approach to working with young people and families; (2) that support takes into account the needs and strengths of the whole family, including identifying opportunities to build the skill and resilience of family members; (3) that support is focused on facilitating solutions to problems/challenges and not simply the provision of a discrete service. This, in turn, builds-in innovation and creativity; and (4) ensures that support builds on strengths thereby increasing the chances of sustaining impact beyond the lifespan of a particular intervention. As part of this, there was overall agreement across stakeholders of the benefits of having guidance on the length and intensity of support that young people and families should receive. But, at the same time, they thought that there should be sufficient flexibility to enable support to be extended where required.

- **Sufficiently resourced to enable direct work** and to tackle underlying as well as presenting needs. All stakeholders agreed that having sufficient time, resources and expertise to undertake direct work with young people was particularly important in achieving positive impact. In parallel, stakeholders highlighted that BMF has demonstrated the importance of also working directly with other family members and other services working with the young person (especially schools/colleges) so that impact can be sustained beyond the lifespan of BMF support.
- **An approach that is networked**, i.e. recognises and builds upon the fact that a range of highly skilled and experienced people (beyond the BMF team) are working with and supporting the young person. Key characteristics of this approach included: (1) strong, collaborative relationships with schools/colleges; (2) commitment to continuous improvement and demonstrating change in the light of feedback from partners; (3) choosing a healthy balance between providing support and challenge to schools/colleges. As part of this, team members' experience was highlighted as particularly influential in ensuring advice was delivered empathetically and credibly. Schools appreciated regular visits from the team which reassured them that the BMF team understood how the school functioned, the wider context, and how things were changing over time.

Other aspects of support that stakeholders highlighted as influential in helping to avoid school placement breakdown was:

- Holistic assessment, quick decision-making and prompt support.
- Ability to deliver support in a range of settings/contexts, especially in homes and schools.
- Support that is targeted at key points of transition in the young person's life, e.g. between primary and secondary school.

5.2 Ensuring effective multi-disciplinary working

A key feature of the BMF model is that it is multi-disciplinary (Cordis Bright, 2020). There was agreement across stakeholder groups about what needed to be in place to ensure that this was an efficient and impactful way of working:

- **Multi-agency as well as multi-disciplinary.** The BMF team consisted of staff from a range of practice backgrounds who were drawn from and employed by (or seconded from) a range of agencies. This particular model of multi-disciplinary team working had a number of added benefits such as: (1) access to relevant case management systems, enabling the team to have a holistic picture of need and interventions to date; (2) it facilitated connections into other services, e.g. for further advice, signposting or referrals; (3) staff gained a greater understanding of each other's practice, which facilitated new or more effective combinations of support; and (4) it strengthened the standing of advice given by members of the team, i.e. it was seen as not only advice from the BMF team but from the wider services from which staff were drawn.
- **Appointing the right people to a new team.** Team members were experienced, confident and credible in their own disciplines and, importantly, they wanted to work in

a multi-disciplinary way. They also came to the team with knowledge of 'the system' in which they worked and the ability to leverage this expertise.

- Investing time up-front and throughout to **build the right culture**. The team united around a common purpose and vision, which was developed collaboratively with them and with young people and their families. The team felt they benefited from effective leadership which worked continuously to avoid professional silos and ensure good knowledge about, and respect for, each other's specific expertise. There was a commitment to continuous learning which helped to contribute to a culture of mutual respect and trust. Team members noted because the team was relatively small and made of experienced individuals it made it clearer what distinct perspective each person could bring and discouraged professional cliques.
- **Co-production with young people and families to develop common goals**. This is explored further in section 5.1. The added benefit of this approach is that it helped to ensure that the needs of young people and their families were at the centre of decision-making, enabling professionals to align around a common objective.
- **Codified ways of working to build a shared understanding** (e.g. via the practice handbook) helped to ensure that team members felt secure and able to receive challenge and to challenge others. It also meant that new team members could be easily and efficiently absorbed. Each young person had an allocated lead worker but practitioners noted they all felt responsible for each case. Practitioners also noted the value of doing joint work and joint visits. Within the model, each practitioner felt able to bring their own expertise without feeling a need to become a generalist 'case-worker' and work outside their skillset while still ensuring the child had the support they needed.
- **Committing to collaborative problem-solving and solutions-orientated approach**, building on team members' different strengths as well as working closely with the young people and families, rather than thinking of them as passive 'recipients' of support. Team members saw multi-disciplinary team working as enhancing their own and each other's practice. Regular team meetings and communication supported this.
- **Having sufficient resources** to have relatively low caseloads for each team member, sufficient time to invest in building effective relationships with each young person and their family which in turn meant a better understanding of the underlying needs that underpinned their observed behaviours. It also meant that the team could dedicate more time to direct work with young people and families and that they could persevere with tackling issues/concerns as they arose or to tackle lack of engagement. Finally, the resources available to the team meant that the team had sufficient time to work together around individual young people, problem solve together, do joint working etc.
- **Sharing offices**. This helped to enhance the sense of a team with a shared objective. It also facilitated relationship-building and interactions (both structured and ad hoc). The BMF team also shared offices with our teams within Ealing Council and NHS. This had further positive impact in terms of building relationships, sharing information, signposting and problem-solving with wider teams.

The team encountered a number of barriers to effective multi-agency, multi-disciplinary working. The main ones were:

- **Fragmented databases:** the team found it extremely helpful to have access to the range of case management systems in operation across Ealing. That said, it also meant that case recording for BMF work had to be duplicated across multiple systems, as well as keeping the wider BMF up-to-date with progress. This created a lot of additional bureaucracy which, in turn, impacted on efficiency and effectiveness. The team was aware of this as a potential issue from the outset but found it difficult to make head-way.
- **Staff shortages:** there are shortages of staff in a number of disciplines within BMF. On a number of occasions, this has impacted on the team's ability to operate at full capacity. Most recently this was exacerbated over the past year, as services were keen to have seconded members of staff return to support responses to Covid-19, and applicants were hesitant to apply to join a team whose future was uncertain.

5.3 Working with the wider system

Lessons for the wider system fell under several different themes:

- Making the case for early intervention.
- Managing changes over time.
- The significant resource constraints of the wider system.
- Measure impact holistically, not just cost-saving.

Each of these is explored in more detail below.

Making the case for early intervention

The cost-benefit analysis from the 2020 evaluation showed that, compared to a historical matched-pairs comparison group, the BMF cohort experienced higher costs after 12 months of entering BMF. The refreshed analysis with a larger BMF cohort (see Appendix) confirms that this continues to be the case.

The majority of stakeholders were not especially surprised at these findings but emphasised that this did not demonstrate that BMF was ineffective. Rather, they argued that:

- The initial outcome of early intervention is often identifying higher need and, in turn, providing more support and therefore higher cost in some cases.
- A significantly longer timescale was needed (years and not months) for early intervention to create cost savings and cost avoidance for the wider system.
- A historical group may not be the most appropriate comparison group and that consideration should be given to implementing a contemporary comparison group in future evaluations.

Related to this, stakeholders highlighted that, on reflection, clearer guidance should have been established from the outset about how success would be measured and, specifically,

what criteria the team would need to fulfil in order to increase their chances of ongoing funding. At a number of points in time, there has been considerable uncertainty about the future of BMF. The lack of clear criteria was felt to have acted as a barrier to quick and effective decision-making. Thinking about this further, some stakeholders suggested that there would be advantages to having a consistent framework in place across the Council and other partners for assessing costs and benefits. This would enable like-for-like comparisons to be made across teams and services.

Managing changes over time

The nature of an innovation programme is that it develops over time and has space to adapt in the light of feedback. BMF trialled a number of changes, e.g. widening its age-range eligibility and working with young people with more complex/longstanding needs. Whilst stakeholders agreed that this was a very beneficial environment to work in, it also needed to be carefully managed. This was especially the case in relation to external stakeholders where there was a risk of confusion about the purpose of BMF. The BMF team recommended that in similar situations in future, stronger and clearer communication about changes to the model, why they were happening and whether they were being trialled or longstanding would help to retain buy-in to the programme across the system.

The significant resource constraints of the wider system

The majority of stakeholders highlighted that BMF helped to confirm that the wider system is under significant resource constraints³. This manifested itself in three main ways.

Firstly, external stakeholders highlighted that many of the aspects of the BMF model (especially co-production, direct work with young people, and multi-disciplinary team working) were recognised as effective, impactful practice to which they aspired. However, they felt that resource constraints and high caseloads acted as significant barriers to take-up.

Secondly, it confirmed that there were a number of young people who would benefit from support but where high eligibility thresholds and/or long waiting lists affected access to or timeliness of that support.

Finally, BMF prompted a number of conversations about where resources were best directed. For instance, could the system 'afford' a team like BMF or would these resources be 'better' invested in mainstream/statutory services. A range of opinion was expressed including:

- Resources and staffing would be most impactful if invested in mainstream/statutory services, which were under considerable strain. There was an argument that this would ensure that funding was directed at those with the most acute need. In contrast, other stakeholders argued that transferring the funding to mainstream/statutory

³ For further information about the wider context in relation to local government spending see <https://www.ifs.org.uk/research/197>.

services was unlikely to make a significant difference because the scale of financial pressures was so large: it would be a 'drop in the ocean'.

- BMF represented good value for money that would recoup its costs in the longer-term so was a worthwhile investment. This was especially the case if it could remain focused on creating impact for an additional tranche of young people, rather than 'filling the gaps' in capacity of mainstream/statutory services.
- There was an advantage to investing in a discrete team that could act as a catalyst and innovator for new ways of working from which other teams could learn. In contrast, other stakeholders argued that capacity of mainstream/statutory services was limited and could not respond to such new ways of working.

Measure impact holistically, not just cost-saving

BMF collected a range of data to help it understand its impact. From this experience, stakeholders agreed about the importance of having a portfolio of outcome measures that:

- **Collected feedback from young people and their families** about the support they received, its quality and impact. Ideally, this would be complemented by feedback from partners (e.g. schools) who also knew the young person. The data benefits from being a mixture of quantitative (so that it can be aggregated) and qualitative (to help understand the rationale for ratings).
- **Measured immediate and/or short-term changes in a young person's life.** The main rationale for this was to reflect the fact that, in the early stages, any changes achieved by the young person were likely to be relatively small or modest but that it was important to find ways of demonstrating this progress to boost confidence and encourage ongoing work. Most recently the BMF team were trialling Goal Based Outcomes⁴ and there were early indicators that this was a useful tool. A number of stakeholders highlighted that an added benefit of this tool is that it could be personalised to each young person. Other stakeholders raised concerns about the extent to which it could be easily aggregated and generalised.
- **Used a validated tool to measure distance-travelled and medium-term impact.** Although a number of practitioners used validated tools with some young people (e.g. Strengths and Difficulties Questionnaire⁵), this was felt by a number of stakeholders to be a gap across BMF that should be addressed in any future model. The benefits of using a consistent validated tool across BMF cases is that it: (1) would reliably measure change over time; (2) could be easily aggregated and generalised; and (3) could enable comparisons in achievements between groups and with other teams/services. That said, some stakeholders challenged this view, highlighting that it would be very difficult to find a tool that was sufficiently versatile to capture the range of need that BMF was seeking to address.

⁴ <https://www.corc.uk.net/outcome-experience-measures/goal-based-outcomes/>

⁵ <https://www.sdqinfo.org/>

- **Measured long-term system-wide impact.** As part of this, BMF measured wider service use and associated costs⁶ on entry, at six months and at 12 months. This was felt to be a valuable exercise but stakeholders thought that consideration should be given to a significantly longer time-frame (three to five years) and that it would be better to use of a comparison group that was contemporary rather than historical (to ensure that the analysis was comparing like-with-like).

⁶ Monitoring was against key areas of cost, e.g. school, social care services, youth justice, using tariffs from the Greater Manchester Combined Authority Cost Benefit Analysis Unit Cost Database. <https://www.greatermanchester-ca.gov.uk/what-we-do/research/research-cost-benefit-analysis/>

6 Conclusion

Stakeholders agree that BMF has been a very valuable programme which has created a substantial amount of learning and some legacy for the wider system. This includes:

- Identifying a gap in provision for young people with emerging needs.
- Highlighting the benefits of multi-agency, multi-disciplinary working and how this can be done effectively, efficiently and with impact.
- Demonstrating the power of having a quick, holistic, multi-professional approach to assessment, case formulation and planning.
- Confirming that a holistic, whole-family approach to assessment is most suited to fully understanding the needs of the young person and the strengths on which they can draw.
- Modelling effective co-production with parents/carers and with young people and demonstrating the important contribution that this can have on service design and individual support packages. The team emphasised that this did not necessarily take more time than traditional approaches, but required a shift in mindset so that parents/carers and young people could be brought into the conversations about them, rather than being treated as recipients of a service.
- Demonstrating the importance of having a clear, codified model of practice. This has benefits for: ensuring a common approach within the team; absorbing new team members; sharing lessons learned; and ensuring partners understand the support that is offered and how it is delivered.
- Highlighting the importance of having a consistent and well-rounded approach to measuring impact.
- Producing a number of resources that can be used by teams in Ealing but also further afield, including the practice handbook, practice bulletins, podcasts and anti-racism work.
- Cultivating a set of team members who can return to their substantive teams with new insight and tried-and-tested tools/approaches.

As the innovation programme funding wraps up it will leave a legacy of staff who have experienced and enjoyed new ways of working, making close links with people in other disciplines which they can call on in future. The team have also worked hard to ensure a documented legacy in terms of podcasts, an anti-racism action plan and learning sessions for people working with young people. There is also a hope of a lasting legacy in relation to the importance, and positive impact, of co-production with young people and families. Finally, for the young people and parents/carers who were supported by the BMF team, there is a hope that they will have been given a firm foundation from which to build, enabling them to achieve their full potential.

Update on next steps

With the innovation funding period completed, Ealing Council are exploring options to maintain ongoing access to the knowledge, skills and effective practice developed within the BMF team. As part of this, Ealing Council are putting in place a transition plan to an integrated team.

Appendix: Cost-benefit analysis

Purpose

The purpose of this exercise was to understand the extent to which a young person's involvement in BMF was associated with a reduction in the use of other services and, in turn, whether this avoided costs and/or created savings elsewhere in the system.

Methodology

Ealing Council provided two anonymised, service-user level data sets for the purpose of this analysis. The first included 93 young people that had participated in BMF. Though BMF worked with a larger number of young people that this, this cohort was chosen to avoid overlap with the Covid-19 period. This was because there was a high risk that those young people supported during Covid-19 would have a substantially different profile, need and experience to the historical comparison group (below). The second group was a historical comparison group of 155 young people that were judged would have been eligible for BMF if it had existed at the time. It was also the cohort on which the original business case for BMF was based.

The analysis compares three 6-month periods for both the BMF cohort and comparison group. This approach was used to model the planned BMF journey, which was intended to last a maximum of 6 months, and then capture a further 6 months of data to review whether impact was sustained in the period immediately after. In practice, some BMF interventions did not conform to the planned 6-month intervention, but the periods were standardised to ensure consistent reporting.

Cohort	Time period 1	Time period 2	Time period 3
Historical comparison group	At March 2017	6 months post March 2017	12 months post March 2017
BMF cohort	BMF referral	6 months post-BMF referral	12 months post-BMF referral

For young people at each point in time, data was collected in relation to their service use for the following services:

- Social Care status (i.e. Child in Need, Child Protection, Looked After Child).
- Adult Social Care status.
- Education and employment status including: (1) type of school attending; (2) whether the young person was not in education, employment or training; (3) whether the young person was subject to a fixed term exclusion; and (4) whether the young person was permanently excluded.
- Level of attendance at school, i.e. whether the young person was persistently absent.

- Youth justice status, i.e. whether the young person was a first-time entrant to the youth justice system; and whether the young person was receiving support to address anti-social behaviour.

Each service was attributed a tariff using the Greater Manchester Combined Authority Cost-Benefit Analysis Tool⁷ and the PSSRU unit costs of Health and Social Care 2019 report⁸.

Matching individuals to a historical comparator

Each of the 93 young people who had completed BMF were 'matched' to a similar young person within the comparison group, using a matched-pairs approach. The young people were matched based on the following criteria:

- Total cost at Time 1, $\pm 5\%$.
- Social Care status at Time 1.
- School Cost (if applicable) at Time 1.
- Age at Time 1.
- Gender at Time 1.
- Ethnicity at Time 1.

The young people were first matched by total cost, $\pm 5\%$. If there were multiple possible matches, then matches were refined using Social Care status. If there were still multiple matches, results were further refined using the above criteria. If after the final criteria were applied there were still multiple options, a match was chosen at random.

Refining the matching process

Following the initial process of matching each young person from the BMF cohort to a young person from the comparison group we reviewed the new matched comparison group. Two potential issues were identified:

1. After the initial matching process, a number of young people from the historical comparison group had been matched more than once to a young person in the BMF cohort. For example, one individual from the comparison group was the closest match in total cost, social care status, school cost and age for nine individuals in the BMF group. There was a risk, therefore, that a small number of young people may skew the matched comparison group.
2. Secondly, on a few occasions, the matched comparison group included a number of individuals who appear to have finished school at 18, but who were matched to BMF

⁷ Greater Manchester Combined Authority, "Cost-Benefit Analysis Tool", available at: <https://www.greatermanchester-ca.gov.uk/what-we-do/research/research-cost-benefit-analysis/> [accessed 27.02.2020]

⁸ PSSRU "Unit costs of Health and Social Care 2019", available at: <https://www.pssru.ac.uk/project-pages/unit-costs/unit-costs-2019/> [accessed 27.02.2020]

children who were younger and therefore continued at school. This potentially exaggerated the success of the comparison group in relation to cost avoidance, due to falling education expenditure.

To mitigate against these issues and to provide greater confidence in our assessment of overall trends, two scenarios were adopted:

Scenario 1: adjustments were made so that no individual from the comparison cohort was matched with more than five individuals from the BMF cohort. Where necessary, the next best match based on the initial matching criteria was used. Individuals from the BMF cohort who remained in school throughout the reporting period but were initially matched with individuals who had left school by time period 3, were then rematched with individuals from the comparison group who remained in school throughout the reporting period.

Scenario 2: all duplicate matches were removed, so that each individual from the comparison cohort was matched to only one individual from the BMF cohort. This resulted in a reduction of cohort sizes from 93 to 47.

By presenting these two scenarios, we hope to demonstrate the range in outcomes that might be feasible.

Profile of the two scenarios

Figure 5 and Figure 6 show that in both scenarios the BMF cohort and the comparison group were similar on a wide range of dimensions. We conclude from this that a comparison of service use and costs would be a comparison of like-for-like.

Figure 5: Profile of scenario 1

Criteria	BMF cohort	Counterfactual
Total number young people	93	93
Average age	14.9	15.1
Average cost T1	£10,423	£10,409
Number of LAC	3	3
Number of CP	0	0
Number of CIN	4	5
Number of ASC	3	1
Number of Primary school	6	8
Number of Secondary	59	58
Number of Special school	9 (5 Ealing, 4 independent)	9 (5 Ealing, 4 independent)
Number of PRU	6	8
Male/ female split	79 / 14	69 / 24

Figure 6: Profile of scenario 2

Criteria	BMF cohort	Counterfactual
Total number young people	47	47
Average age	16	15.4
Average cost T1	£12,668	£12,634
Number of LAC	3	3
Number of CP	0	0
Number of CIN	4	5
Number of ASC	3	1
Number of Primary school	2	4
Number of Secondary	23	22
Number of Special school	6 (3 Ealing, 3 independent)	6 (3 Ealing, 3 independent)
Number of PRU	4	6
Male/ female split	38 / 9	35/12

Results of the cost-benefit analysis

Figure 7 and Figure 8 show the results of the cost-benefit analysis. In both scenarios, the BMF cohort has a higher cost base at Time 3 than the comparison group, i.e. 6% higher costs in scenario 1, compared to a comparison group of 8% lower costs; and 10% higher costs in scenario 2, compared to a comparison group of 13% lower costs. **These calculations exclude the cost of the BMF team and the costs of any multi-agency input that the comparison group may have received.** The data shows that the main reason for these differences is that the BMF team was less successful at reducing school costs, e.g. by transitioning young people to less expensive provision. For instance, in scenario 1 the comparison group experienced a 16% reduction in school costs (equivalent to -£130,611), whilst the BMF cohort experienced a 9% reduction (equivalent of -£69,551). For scenario 2, the figures were 24% reduction (-£106,537) compared to 6% reduction (-£25,487).

Figure 7: Cost-benefit analysis for scenario 1

Domain	Historical comparison group					BMF cohort				
	T1	T2	T3	£ change T1-T3	% change T1-T3	T1	T2	T3	£ change T1-T3	% change T1-T3
Youth crime FTE	£28,957	£0	£21,718	-£7,239	-25%	£18,098	£0	£7,239	-£10,859	-60%
Anti-social behaviour	£0	£0	£0	£0		£673	£673	£0	-£673	-100%
Persistent absence	£16,902	£9,390	£5,634	-£11,268	-67%	£16,902	£18,780	£28,170	£11,268	67%
Fixed term exclusions	£833	£755	£392	-£441	-53%	£1,117	£382	£255	-£862	-77%
Permanent exclusion	£0	£2,536	£0	£0		£0	£2,536	£2,536	£2,536	
School cost	£803,524	£737,765	£672,913	-£130,611	-16%	£782,450	£760,301	£712,899	-£69,551	-9%
Is the young person NEET?	£0	£0	£4,637	£4,637		£9,274	£13,911	£32,460	£23,185	250%
CIN	£8,130	£6,504	£16,261	£8,130	100%	£6,504	£6,504	£32,522	£26,018	400%
CP	£0	£1,151	£1,151	£1,151		£0	£1,151	£2,303	£2,303	
LAC	£91,010	£91,010	£91,010	£0	0%	£91,010	£60,673	£151,683	£60,673	67%
Adults SC	£18,668	£30,992	£74,308	£55,640	298%	£43,316	£43,316	£55,640	£12,324	28%
SUB TOTAL	£968,025	£880,103	£888,024	-£80,000	-8%	£969,345	£908,228	£1,025,706	£56,361	6%

Figure 8: Cost-benefit analysis for scenario 2

Domain	Historical comparison group					BMF cohort				
	T1	T2	T3	£ change T1-T3	% change T1-T3	T1	T2	T3	£ change T1-T3	% change T1-T3
Youth crime FTE	£28,957	£0	£7,239	-£21,718	-75%	£18,098	£0	£3,620	-£14,479	-80%
Anti-social behaviour	£0	£0	£0	£0		£673	£0	£0	-£673	-100%
Persistent absence	£9,390	£7,512	£5,634	-£3,756	-40%	£9,390	£7,512	£9,390	£0	0%
Fixed term exclusions	£186	£225	£167	-£20	-11%	£745	£176	£196	-£549	-74%
Permanent exclusion	£0	£2,536	£0	£0		£0	£2,536	£2,536	£2,536	
School cost	£437,470	£389,585	£330,933	-£106,537	-24%	£416,396	£414,084	£390,909	-£25,487	-6%
Is the young person NEET?	£0	£0	£4,637	£4,637		£9,274	£13,911	£23,185	£13,911	150%
CIN	£8,130	£6,504	£14,635	£6,504	80%	£6,504	£6,504	£13,009	£6,504	100%
CP	£0	£1,151	£1,151	£1,151		£0	£1,151	£2,303	£2,303	
LAC	£91,010	£91,010	£91,010	£0	0%	£91,010	£60,673	£151,683	£60,673	67%
Adults SC	£18,668	£30,992	£61,984	£43,316	232%	£43,316	£43,316	£55,640	£12,324	28%
SUB TOTAL	£593,812	£529,516	£517,390	-£76,422	-13%	£595,406	£549,864	£652,470	£57,064	10%

Expanding the analysis to consider a longer time period

This report highlights a consistent view across stakeholders that a longer time period should be considered to assess the impact of Ealing BMF, i.e. that the benefits of early intervention require a number of years to materialise.

It has not been possible to undertake this analysis for the BMF cohort because of the impact of Covid-19. The needs of young people over this period are likely to have changed substantially which would have meant that an historical comparison group would not have been appropriate. In addition, a number of the indicators used for the cost-benefit analysis would not have been valid over the Covid-19 period, e.g. attendance at school and exclusions. Though Covid-19 was in many ways an unpredictable event, it helps to emphasise the advantages of using a contemporary comparison group rather than an historical one.