

National Drug Team of the Year 2008

Drugs, Alcohol and Families

an integrated response to families with
complex needs

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Workshop outline

- Overview of service model & evidence base (presentation)
- A vision for family services; skills and engagement across professional boundaries (discussion and activity)
- The wider evidence :A National model – views of families and practitioners (DVD)

Rationale

Substance misuse affects the **whole family**

- Most problems for children arise because of parental problems
- Children at most risk of neglect/serious harm and poor outcomes into adulthood. Including increased risk of substance misuse
- Nationally over half of all CP cases involve parental substance misuse. 60 % of children entering care
- Between 1-10 and 1-14 children go home to a parent with serious drug or alcohol problem

Families First ?

- Fully integrated, jointly commissioned children and adults' team
- Offers an evidenced based, innovative model of working with the whole family
- Strong track-record of delivery to most vulnerable children & families

“Families First works differently from other social workers.....(you) going in every day has made us more determined” Parent



Bridging the Gap

Children's services

- Child focused
- Immediate response
- Transparency
- Risk elimination

Substance misuse services

- Adult focussed
- At client's pace
- Confidentiality
- Harm minimisation

Families First aims

To support all members of the family affected directly or indirectly by adults substance use.

To create positive change in the way families function to enable children to remain safely at home wherever possible

More recently :-

Tackling the impact of intergenerational disadvantage - YCFIP



Service Model

Framework for interventions based on three key collaborative elements:

- 1. Intensive family interventions and support (Option 2)**
2. Adult Social Work interventions and Carers' support
3. Safeguarding the Unborn Baby – Management of integrated approach to substance misusing pregnant women in treatment

Service commissioning

- Identify and engage with families with most complex needs /multiple disadvantage
- Greatest risk of poor outcomes and greatest cost
- Model that develops skills and capacity- services and families
- Children & Young Peoples Trust priorities
- Cross cutting priorities

Opportunities

- Joint commissioning /pooling of budgets
- Integrated governance common vision and agreed outcomes for families
- Added value/efficiencies
- Investing in the family /supporting longer term changes
- Identification of longer term needs

Evidence base and outcomes

DH funded research (2006-8) in response to Hidden Harm LJM U

- Positive impact on care status
- Reduction in drug/alcohol use
- Reduction in family conflict, positively parents felt they were coping with parenting role
- Improved child health and emotional wellbeing
- Families brought closer together - wider family members/supporting longer term changes

'I have stopped using because of it (Families First)' Parent

'All families who had reported heroin or crack cocaine use at baseline or former use prior to research and had since had their children placed back in their care did not report any Class A drug use at six or twelve month follow up' LJM U 2008



Evidence base and outcomes

DH funded research (2006-8) in response to Hidden Harm LJMU

- Cost effective approach
- Kinship care prevented short term care entry, providing significant cost savings to LA
- Skills and dedication of team members instrumental in meeting families' needs

'Majority of parents felt participation in the intensive intervention resulted in a range of positive outcomes' LJMU 2009



Discussion and activity

- How do services respond to children whose families have complex problems
- How can we deliver more effective support and earlier intervention
- What would it look like

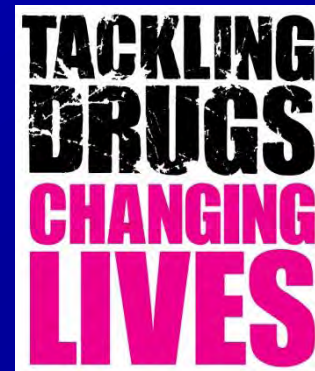
Option 2 DVD

views of families and professionals

Final comments and reflections

Families First

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