DARLINGTON CHANGE PROJECT: DEVOLVED BUDGETS

INTERIM REPORT
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Acknowledgements

We would like to thank the staff at Darlington Borough Council for their enthusiasm and cooperation with the evaluation to date. 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. 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.

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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.

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EXECUTIVE SUMMARY

Introduction

In Darlington devolved budgets are being piloted to help reduce the likelihood of children and young people entering care. They are designed to be used to find creative solutions to family problems which require a quicker and more tailored response than can currently be provided. Decision making around the budgets is devolved to frontline social workers and their managers, who work collaboratively with families to decide how to spend them. In Darlington, the intervention is being delivered within all the children's social work teams (including Children with Disabilities).

Randomisation is being trialled as a way of distributing the devolved budgets. This allocation is not intended for evaluation, but as a fair mechanism for assigning budgets to families where funding is limited and there is ambiguity about their effectiveness to support families. This form of allocation also allows us to test the feasibility of running a full randomised controlled trial of devolved budgets in the future. Families are being randomly selected to either receive services as usual or to be eligible for a budget. Social workers for the latter group can apply to a panel of senior managers justifying the potential benefit of a budget for that family. Social workers who submit applications that are approved by the panel have discretionary spend of up to £1,000. Where considered to be of potential benefit, further approval can be sought for a spend up to £10,000 per family. Darlington Borough Council aims to allocate budgets to around 30 families to receive a budget with children across three age cohorts (0-4, 5-9 and 10-16).

This interim report is part of an evaluation by Cardiff University for What Works for Children's Social Care. In it we explore the progress of the pilot to date, focussing on its feasibility and evidence of promise during the set up and initial implementation period. A final report, in March 2020, will examine the remainder of the pilot and consider its short to medium term impact.

Methodology

We are taking a realist approach to understanding the nature and feasibility of the intervention. This report includes administrative data from the local authority, case questionnaires submitted by social workers, formal and informal interviews and observations with professionals, children and families, and focus groups with social workers and managers. It includes some basic quantitative reporting and a thematic analysis of qualitative data.

Key findings to date

To date 21 families have been selected as eligible for their social worker to apply for a budget where appropriate (15 have been allocated to the ‘business as usual’ group). Notably, applications to use the funding by social workers have only been made for seven of the families in the intervention group. Whilst practitioners were broadly positive about the processes that supported decision making, there were some teething problems with administration and the procedures, such as budget codes and choosing of contractors. There was also some reticence about allocating families to potentially have access to a relatively large budget when other families were receiving normal service. Whilst these reservations and anxieties about managing budgets did persist, social workers having immediate access to £1,000, as opposed to the usual £50 potentially available through s.17 funding panels, was viewed positively. It also cut out the risk of attending numerous panels only to be refused funds.

To date, budgets have been used for a range of purposes, including a garage conversion to expand and create space for a young person with Autistic Spectrum Disorder (ASD), home furnishings, therapeutic counselling for a parent, small items such as a beauty voucher, driving lessons, skip hire, and new furnishings. Managers feel that more information and training is needed to support social workers’ confidence and develop creative thinking when using budgets to support families in the most sustainable way.

Discussion

There are plenty of early signs that the pilot is promising and that it has the potential to achieve its aims. Social workers and senior managers are mindful that the focus of expenditure of the budgets is not quick fix solutions, rather they must be used to empower families and find sustainable solutions. Initial scepticism was also reported by senior management that the budget should not replace existing services, such as those provided by Child and Adolescent Mental Health Services (CAMHS) or available through s.17 funding. However, in this context, there is a clear message that using the devolved budgets to work creatively with families is showing early promise in terms of preventing care entry.
The disparity between the total number of families eligible for their social worker to apply for a budget (21), and the number where an application was submitted and budget has been spent (7) is notable. The barrier here seems to be primarily a reluctance among workers in applying for the budgets, so this is an area that needs further attention if the pilot is to be successful. Whilst reservations based on ethical concerns may explain some of this reluctance, it may potentially be the result of professional fatigue, low awareness and confidence in the process, as well as worries about additional workload as key factors. It may also result from the recognition by social workers that, whilst eligible to apply for a budget, financial resources would not necessarily benefit all families. We would, however, expect this to comprise a relatively small number of families, especially as Darlington has a high level of families facing income poverty (County Durham Community Foundation, 2017).

Darlington Borough Council are taking a proactive approach to identifying concrete ways to enhance the pilot. They have already recognised the need for more training and awareness raising of the project among social workers. They have also now employed support staff, whose posts were factored into the original proposal, to reduce the workload for social workers and provide practical support to families. These measures are likely to help in addressing some of the issues highlighted. One way of increasing access to budgets may be to re-position the child at the heart of the intervention, throughout the training and application process. Focussing the guidance and advice – including the discussions between workers and managers – on what devolved budgets can do for children may also fuel progress in relation to creative thinking around budgets. We pick up on these challenges in our recommendations below.

Conclusions and next steps

As with any new intervention, the early stages expose unexpected challenges which require pragmatic solutions. There was great enthusiasm among the social care staff who were interviewed and observed as part of the evaluation process, despite the challenges discussed above. There was also a sense that – across the workforce – members of the team were proactive and solution-focussed when considering how the pilot is going and how it can be improved. The promising early signs of what a devolved budget can provide for families is encouraging. However, the low uptake of applications is of concern. There are multiple reasons for this low use, and it is good to see the team in Darlington actively trying to address this issue. Challenges and learning from them is an expectation for the Change Projects.

One immediate implication is randomisation. The primary ethical justification for randomisation was the projection that demand would significantly outstrip funds available. The low uptake means this justification no longer holds and it is not therefore appropriate to continue randomisation. We therefore recommend suspension of the randomisation process. Family outcomes as a result of the receipt of a budget will be monitored closely, along with the impact of suspending randomisation. It is worth noting that randomisation was carried out with apparent success, and this indicates the possibility of randomisation in future studies if appropriate and ethically justified.

It will also be of interest to monitor whether the process of implementing the intervention becomes less burdensome to social workers now that the support workers are in post and whether this affects take-up by those eligible to apply for budgets. Our findings to date provide a basis for two further recommendations that might enhance the way the pilot is being implemented and maximise its chances of success. Therefore, our four recommendations are as follows;

1. Temporary suspension of the randomisation process as a way of allocating eligibility for social workers to apply for a budget, which should be reviewed after three months.
2. More training and awareness raising around the devolved budgets project.
3. Further work to understand the reasoning for social workers not applying for budgets. An initial focus on the existing group of families in the intervention group whose social worker has not yet applied to receive a budget may illuminate the reasons for this. Going forward, the budget decision-making could be emphasised by more explicit discussions at a pre-application stage about reasons for applying or not applying.
4. If uptake of budgets does not increase following the suspension of randomisation and increased awareness raising, the eligibility criteria for inclusion in the project (i.e. families having a child at imminent risk of entering care) should also be reviewed. Using budgets to support family reunification should be considered.
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INTRODUCTION

Rationale for devolved budgets project

The intervention being evaluated is part of a programme of three projects where ‘devolved budgets’ are assigned to social workers for the purpose of supporting children and families. It is predicated on the idea that social workers and families are best placed to know what help they need to create real change and keep children safely at home, and because finances are a problem for many families involved with Children’s Services.

In Darlington, significant funds are being used to help children and young people remain safely at home. Decision-making is devolved to frontline social workers and their managers, and the funds are designed to be used to find creative solutions to family problems.

Similar approaches have been used elsewhere to reduce care entry and increase reunification (e.g. Huebner et al., 2012; Shinn et al., 2017; Walker, 2008). This evidence suggests devolving budgets can reduce the likelihood of abuse and neglect, and consequently the numbers of children entering care. However, much of this evidence comes from studies conducted in the USA, and we do not yet know whether this is also the case in the UK.

Background to the project in Darlington

Darlington Borough Council designed an intervention based on devolved budgets and was successful in its bid to receive funding from the What Works for Children’s Social Care. Darlington Borough Council has devolved budgets to social workers to spend creatively with families whose children are at imminent risk of entering care. During this pilot, 30 families will be eligible to receive a budget devolved to their allocated social worker of up to £10,000 per family, depending on approvals. A further 50 families, with similar needs, will form a ‘business as usual’ group. It should be noted that this allocation is not intended for evaluation, but as a fair mechanism for assigning budgets to families where there is ambiguity about their effectiveness to support families. Whether a family enters the intervention (eligible to receive budgets) or ‘business as usual’ groups is decided through random allocation, using a spreadsheet provided to staff by the research team. This allocation mechanism also allows us to explore the feasibility of this kind of allocation in future. As the name suggests, the ‘business as usual’ group receives normal services and will not have access to devolved budgets. Once informed by the Interim Service Manager that a family has been allocated to receive a budget, the social worker is encouraged to put together an application setting out the background of the case and how they intend to use the budget to best support a family’s needs. Two project support workers were employed in late June 2019 to support social workers and families.

Darlington Council aims to empower social workers to be proactive and creative with the devolved budget, and for each family, social workers can draw down up to £1,000 without further authorisation. Any spending above this amount must be approved by Interim Service Manager. The intervention group will be split equally into three separate age cohorts, based on the age of the child of most concern in the family, 0-4 years (n=10), 5-9 years (n=10) and 10-16 years (n=10). The older age group have been drawn largely from the Keeping Families Together (KFT) team, which is a new team set up in 2019 to provide intensive support to families over a 6-12-week period. This age cohort has been identified for additional support due to the evidence which highlights the increased likelihood of them having negative care experiences, a larger number of placements and poorer educational outcomes (Sinclair, 2007).

The pilot evaluation

The project is a pilot of a new intervention and a feasibility study to explore data collection and the potential for evaluating devolved budgets at scale. Details of the design are available in the evaluation protocol, which was published prior to the start of the project in March 2019 (Westlake, Grey and Forrester, 2019). The pilot evaluation will focus primarily on the process of implementation, but it will also explore evidence of promise and indicators of success.

This interim report focusses on emerging evidence around implementation and feasibility during the early stages of the project. The final report, due for publication in March 2020, will build on these interim findings. It will provide a more detailed exploration of how and why the project was implemented as it was, including an analysis of any barriers and opportunities. It will also consider evidence of the impact of the pilot. Darlington is unique among the three devolved budget projects in that the feasibility of randomising families to be eligible for an application by their social worker to receive a budget or not is also being tested as part of this pilot.
METHODS

Summary of pilot evaluation design

We are taking a realist approach to understanding the nature and feasibility of the intervention. We aim to have a clear description of it, in the form of a detailed logic model that will be developed from the initial logic model included as Appendix 1 in the evaluation protocol (Westlake, Grey and Forrester, 2019). We will also use qualitative and quantitative data to describe the ways the intervention has been applied, and the indications of its impact that are available. The evaluation is structured as three phases; initial theory development, implementation, and progress in relation to short term outcomes.

The focus of this interim report is on implementation (described as Phase 2 in the evaluation protocol). The way the project is implemented is an important aspect of our evaluation for several reasons. First, it will be a key point of comparison between this project and two similar projects underway in other local authorities in England, as each one has designed a different intervention based on local circumstances. Secondly, it has clear implications for policymakers and other local authorities who might be interested in commissioning similar interventions, because seemingly minor details of implementation can have significant impacts on overall effectiveness. Finally, implementation issues are at the heart of the realist approach we are adopting in order to understand what works, for whom, and under what circumstances (Pawson, 2013). The final report will further examine implementation and progress in terms of outcomes, in order to develop and consolidate the programme theory.

Data used in this report

This report is based on data collected between March and June 2019. It includes administrative data from the local authority, case questionnaires submitted by social workers, formal and informal interviews and observations with professionals, children and families involved with the intervention, and focus groups involving social workers and managers delivering the intervention. The details of data collected to date can be found in Table 1.

<table>
<thead>
<tr>
<th>Data collection type</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case questionnaires completed by social worker for families who had budget applications approved (Budgets group)</td>
<td>7</td>
</tr>
<tr>
<td>Case questionnaires completed by social workers to date for families receiving services as usual (‘business as usual’ group)</td>
<td>6</td>
</tr>
<tr>
<td>Focus Group with social workers and managers</td>
<td>1</td>
</tr>
<tr>
<td>Interview with Advanced Practitioners</td>
<td>2</td>
</tr>
<tr>
<td>Interview with Interim Service Manager (Troubled Families &amp; Edge of Care)</td>
<td>1</td>
</tr>
<tr>
<td>Interview with Head of First Contact and Locality Services Children and Adult Services</td>
<td>1</td>
</tr>
<tr>
<td>Interview with Social Workers</td>
<td>5</td>
</tr>
<tr>
<td>Interview with Keeping Families Together workers</td>
<td>3</td>
</tr>
<tr>
<td>Observation with Social Worker and families (home visits to families)</td>
<td>5</td>
</tr>
</tbody>
</table>

In this report we draw on the data above, as well as our learning from meetings and ongoing communication with service leaders in Darlington.

Research questions addressed in this report

At this stage in the project our focus is on early evidence of feasibility and promise, as set out in the evaluation protocol (p. 4-5). In terms of feasibility, we consider aspects of initial set up and implementation, specifically:

- Was the scheme implemented as intended (according to the logic model)?
- What processes support delivery and governance; how are decisions made and who is involved?
- To what extent were families included as planned?
• How acceptable is the intervention to social workers and families?
• What are the barriers and facilitators for delivery?

In terms of early evidence of promise, we explore the following questions:
• What potential benefits do stakeholders (e.g. social workers, children, and families) identify?
• Do there appear to be any unintended consequences or negative effects?
• Is there evidence to support the intervention logic model?

Analysis underpinning in this report

Interim findings to date, presented below, were generated through thematic analysis which incorporated the data described above. Audio recordings of interviews and focus groups were reviewed by a second researcher (i.e. not the researcher who conducted the interview). They completed a basic thematic coding framework, noting down key themes and transcribing direct quotes that were deemed illustrative of these themes. The framework was then shared with the researcher who conducted the interview, and the analysis was discussed and refined in light of their input.

Overarching themes were brought together by the lead author and, in a final stage of analysis, these were discussed and agreed by the whole research team. The discussion incorporated our learning from wider data collection activities, including observations and other informal discussions. The resulting themes described below give robust early indications of how the devolved budgets project is progressing. We will revisit these in the second phase of data collection in order to refine and develop.

INTERIM FINDINGS

Project launch and initial implementation

Darlington Council started allocating families to be eligible for budgets in mid-April 2019, despite a delay caused by the evaluation team. The initial logic model was reviewed during focus groups with practitioners in the team and there was a broad agreement that it accurately reflected the setup of the project. Practitioners felt at this stage that the level of specificity in relation to mechanisms was appropriate, and that as the project progresses it would be possible to specify further based on experiences of casework.

There are two stages involved in families receiving budgets – first they need to be determined to be eligible for a budget, which is set out below under ‘processes and decision making.’ Training for social workers was informal and delivered as part of regular team meeting. Decisions on how best to support families in the most sustainable way using the devolved budgets is taken by the social worker in collaboration with families, with the guidance of the panel of senior staff.

Randomisation and throughput

To avoid uncertainty, Darlington Council opted to randomise eligible families prior to informing them that they were eligible for their social worker to apply for a budget. All families are deemed eligible for inclusion in the pilot if they have a child judged by social care staff to be at imminent risk of entering care within days or weeks. All families initially came via the safeguarding teams only, however, Darlington Council have now extended eligibility to the Children’s First Response team, which is a duty team, and the Children with Disabilities team.

Eligible families are initially divided into three groups by the age of the child of most concern. Only those families who are eligible to potentially receive a budget are informed of this by their social worker, who then makes an application. Families who are not allocated to the intervention group are not informed and continue to receive service as usual.

Table 2 shows how many families have been allocated to each group so far, by age cohort.
Table 2: Randomisation of families per age cohort

<table>
<thead>
<tr>
<th>Age cohort</th>
<th>Families allocated to intervention (budget) group</th>
<th>Families allocated to ‘business as usual’ group (no budgets)</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-4 years (up to the day before 5th birthday)</td>
<td>5(^1)</td>
<td>4</td>
</tr>
<tr>
<td>5-9 years (up to the day before 10th birthday)</td>
<td>4(^2)</td>
<td>4</td>
</tr>
<tr>
<td>10-16 years (up to the day before 17th birthday)</td>
<td>12(^3)</td>
<td>7</td>
</tr>
</tbody>
</table>

At the time of the fieldwork (June 2019), 21 families have been randomised to be eligible to receive a budget and 15 allocated to the ‘business as usual’ group. Notably, applications by social workers have only been made for seven of the families in the intervention group – a topic which we discuss further below.

**Challenges in identifying eligible families**

The teams in Darlington Council are currently experiencing some difficulties identifying families who have a child at immediate risk of entering care, especially in the youngest cohort. Typically, children are placed in foster care as soon as a serious risk is identified, meaning there is little or no time for a budget to be deployed effectively to prevent entry to care. The current eligibility criteria for inclusion in the project across all age cohorts is that families have a child at imminent risk of entering care. If recruitment to the lowest age cohort continues to be challenging, it has been agreed with the research team and WWCSC that they should increase recruitment to the other two age groups. Darlington will continue to monitor this situation and report back to the research team.

**Processes and decision making**

Once informed by the Interim Service Manager that a family is eligible for a budget, the social worker is encouraged to put together an application setting out the background of the case and how they intend to use the budget to best support a family’s needs. They then meet with a panel of senior staff to discuss the plan for that family and explore how the budget is proposed to work. Once this meeting has taken place, and managers approve the plan, social workers can draw down up to £1,000 without the requirement for further authorisation. Any spending above this amount, up to the value of £10,000, is subject to secondary approval from senior staff to ensure best value. To date, no application has been declined. Table 3 below details spends to date.

Families in the budget group are informed about the availability of additional funds by their designated social worker. The full amount available to families is not disclosed as a way of managing expectation and spending.

**Profile of families involved**

Six of the seven young people who accessed budgets and for whom we have case questionnaires had the legal status of Child in Need (CIN). The other young person had a Child Protection Plan (CP). The legal status of six young people in the ‘business as usual’ group for whom we have case questionnaires was more varied, with one at CIN status, three with CP Plans, one looked after and one having an Interim Court Order (ICO). Sources of referral included the police, health, education, probation and a CP transfer in from another local authority. Levels and types of risk were similar across both groups, with the addition of school absence, youth offending, child sexual exploitation (CSE) and historical sexual abuse in the ‘business as usual’ group. Figure 1 displays the combined main issues of concern in families in both groups. Some families had multiple issues of concern and therefore the numbers relate to the risk and not the number of young people and their families. As the numbers grow throughout the project, we will explore how the groups compare in more detail in the final report.

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1 Five families have been randomised to be eligible for an application by their social worker to receive a budget, but only one social worker has applied for a budget to date.

2 Four families have been randomised to be eligible for an application by their social worker to receive the budget, only two social workers have applied to date.

3 Twelve families randomised to be eligible for an application by their social worker to receive a budget. To date, only four social workers have applied to receive a budget.
Figure 1: Main issues of concern identified for all families

Themes identified to date

1. Purpose and function of budgets

Budgets were used for a wide range of activities. Budget spends have varied in quantity and included buying low cost items such as a £15 beauty voucher to incentivise school engagement, to larger items such as a private psychological assessment for Autistic Spectrum Disorder (ASD) costing £2,500, and the same amount to improve home conditions. One family were allocated the full amount of £10,000 to support ongoing kinship care of two young children whose birth parents have disengaged with Children’s Services. This will be used to purchase basic items such as clothing and furniture (beds) and includes the contingency for legal fees for legal support being sought in relation to an interim care order (ICO). Budgets will also be used to provide respite breaks and therapeutic services such as equine therapy. Figure 3 lists the amount and purpose of agreed budget spends to date.
<table>
<thead>
<tr>
<th>Family Code</th>
<th>Amount of budget agreed</th>
<th>Purpose</th>
<th>Goals</th>
</tr>
</thead>
<tbody>
<tr>
<td>DAR001</td>
<td>£5,100</td>
<td>Garage conversion</td>
<td>Reduce family stress. Create stability at home.</td>
</tr>
<tr>
<td>DAR002</td>
<td>£2,200</td>
<td>Moving costs and home furnishings</td>
<td>Reduce family stress by moving to suitable home with appropriate number of bedrooms.</td>
</tr>
<tr>
<td>DAR023</td>
<td>£800 (£15, £300, £88, £100)</td>
<td>Therapeutic counselling for parent Beauty voucher Football academy Roller skating Bowling</td>
<td>Support unresolved trauma, reduce family stress. Incentivise school engagement. Build children's self-esteem and develop more harmonious family relationships and family stability. Promote independence and address social isolation. Enable parent to apply for transport to support child with disabilities.</td>
</tr>
<tr>
<td>DAR025</td>
<td>£500 (£30, £1,000, £90)</td>
<td>Skip Hire Carpet Cleaner Industrial cleaning Lawn mover</td>
<td>Improve home conditions. Address family stress, re-engage young person with school. Enable a subsequent move to more appropriate housing.</td>
</tr>
<tr>
<td>DAR028</td>
<td>£2,500</td>
<td>Improving home conditions</td>
<td>Support continuation of kinship care.</td>
</tr>
<tr>
<td>DAR030</td>
<td>£10,000</td>
<td>Provide financial support to Grandparent including legal fees</td>
<td>Support continuation of kinship care and costs of ICO.</td>
</tr>
</tbody>
</table>

The relatively large amount potentially available to families (£10,000) has enabled social workers to work creatively with whole families and target support to individual family members as appropriate. An example of this is DAR023, where historic child abuse experienced by a parent has impacted parenting capacity and caused high levels of family stress. The budget has been used to access therapeutic services aimed at addressing these issues and improve parenting capacity and the home environment.

Violence towards parents has also been highlighted as a risk factor to care entry. This was identified in two families (DAR001, DAR009), with one young person experiencing a short out-of-home stay as a result of aggression towards a parent. This young person also has a history of self-harm and suicide attempts. In the two cases of violence directed towards parents, the young person has, or is suspected to have, an autistic spectrum disorder (ASD). The budget has been used to expedite an assessment for ASD, avoiding what is usually a waiting list of around two years.

Whilst cautious interpretation is needed for these interim findings, some early common themes are starting to emerge with regard to expenditure goals. Two families (DAR001 and DAR009) have children at risk of care entry due to unmanageable behaviours relating to suspected ASD. The social workers for these families are both using the budgets to reduce family stress and create a stable home environment. Budgets have also been used to de-escalate family tension in families where housing is inappropriate for the number and demographic of occupants, and where reduced parenting capacity has resulted in neglect or abuse. Budget expenditure has also been used to prevent care entry through the continuation of kinship care for two families (DAR002 and DAR030). A more in-depth analysis of common goals will be addressed in the full report.
2. Decision making and social worker autonomy

Devolved budgets have made accessing funds for supporting families a much less complex and convoluted process, with social workers now only needing to apply to one panel for whole family needs. One worker described how the intervention works in "cutting out a lot of red tape"; while another explained:

"I think it would have been a lot more stressful [without the budget] because that means that I’ll have had to fill a lot of paperwork for panels. [I] would’ve had to go to the education panel, complex needs panel, and resources panel. It has done away with a lot of paperwork and a lot of trying to justify why a child needs a service." (Social Worker, Interview).

Although some items may be obtained through existing s.17 funding, social workers reported a six week wait for an allowance of only £50. Having access to devolved budgets "relieves this" wait. The timescale for panel approval of receipt of a budget occurs, on average, within a week. Securing s.17 funding was also time consuming with no guarantees of acceptance by the decision panel. One practitioner illustrated the scarcity and uncertainty of s.17 funding when they explained "I only got s.17 money twice in four years ... s.17 money is really hard to get hold of." There was a sense that s.17 money is only available to those who can convince the panel they have “tried everything” to support family’s needs prior to receiving funds.

Moreover, the availability of larger amounts of money has enabled social workers to provide support in ways which would not have been feasible through using existing funds, as one social worker explained:

"The large amount of money, no way s.17 would have been able to provide that. With the garage it had to be done properly or it couldn’t have been done at all. We wouldn’t have been able to do that with s.17 money." (Social Worker Interview)

Whilst there is a reluctance to use budgets to supplement existing services, it was acknowledged that it may be necessary in some cases as the prevention of care entry remains the focus of expenditure, as highlighted by a senior manager, who explained "I was sceptical of using budgets to fund things that are already available, but without spending on a private mental health assessment, the child would have gone into care."

3. Ethical issues associated with randomisation

The technical aspects of randomisation appear to be going well, and staff in Darlington understand the rationale for allocating the funds in this way. However, some social workers felt it was unethical to randomise families, and that it unfairly supports some families and “doesn’t account for specific family conditions.” Interestingly some of those who thought the process “unethical” were those who hold a budget.

Social workers were also careful in how they introduced the intervention to families. Those working with families in the intervention group have therefore exercised caution when introducing the project to families and have not disclosed the full amount available:

"One potential ethical issue is that money could be seen as bribery, e.g. if case ended up in court, it could be deemed that we are giving financial favouritism to some families over others, especially when families know each other. A further reason for keeping budget amount from the families is to stop them sharing that with others who may not be eligible, and then they are wondering where their £10,000 is.” (Social Worker Interview)

Social workers were also conscious to prevent the focus of the intervention becoming more about “the amount of money available” and to keep the focus on what support social workers could now offer families through use of the devolved budgets,

"I haven't disclosed to the family that there's a devolved budget or how much money there is because it would be silly to do that because then it makes the money the focus of your intervention. So, I've just told them there is a little bit of funding to put some support in place to help the family." (Social Worker Interview).

4. Reluctance to use budgets

The disparity between social workers who had applied for a budget to date (n = 7) and those, whilst eligible to apply, had not (n = 14), came as a surprise to management who had, “expected a lot of applications at the beginning”. There were various reasons for this reluctance, including the concerns about ethics noted above. One manager also highlighted that “some social workers were uncomfortable managing the budgets” and that the perceived extra work involved may be viewed as “too much trouble.”
Workers may be more reluctant to do the work involved in providing the budgets if they felt families were, in fact, able to afford to pay for certain activities but may be unwilling rather than unable to do so. This raised questions, for some workers, about whether families were "deserving" of budgets, in the view of the social worker. In cases where various other forms of help had already been tried, and there was a feeling among workers that families had not made the most of this help, a sense of exasperation and frustration could influence how a social worker felt about the prospect of giving families a devolved budget. This was perhaps heightened where workers were aware of other families, who may be deemed more 'suitable' in the 'business as usual' group.

There was also a sense that it could be difficult to fit the budget work in with other aspects of what was happening for families:

"When you are in the middle of court proceedings applying for the budget does not always fit in with the timings specified by the court and therefore it's not uppermost in your mind." (Social Worker, Focus Group).

5. Sustainability, empowering families and avoiding dependency

Where budgets were being used, practitioners are clearly considering how the intervention could create sustainable changes. The garage conversion is one example, as they envisage the space to support younger siblings in the family, who are also thought to have undiagnosed ASD, in future. Another example is the purchase of driving lessons for a parent to help attend hospital appointments:

"We are going to put mum through driving lessons and book her driving test as she'll be able to get a disabilities car. This will be practical for the family as it'll help with everyday things like shopping etc." (Social Worker, Interview).

Notably, there was some evidence that families had reservations about the budgets. One senior member of staff observed that some families could be, “very proud about accepting such a large amount of money” and therefore reluctant or “uncomfortable” about doing so.

6. Administration, workload and challenges to implementation

For all the opportunities of having access to a substantial resource, there were also challenges. These included social workers feeling overwhelmed by the additional workload involved, and unclear about the processes involved. As one worker stated,

"It is all left to the social worker to do all the work, to sort all the quotes, to go and do the introductions, to keep going over to mum’s to check everything, and how we access the money nobody seems to know how it is done." (Social Worker, Interview)

The procedures for acquiring support were time consuming and the opportunity to access larger sums of money to support families meant that social workers were charting new territory regarding suppliers and contractors,

"We've been told we can only use companies that the council say is okay. There were no approved companies, so I had to set up on a system with our external HR which takes two weeks, then it takes another week to get a purchase order. The systems in place are not working and are prolonging the whole process." (Social Worker, Interview)

This was experienced as overwhelming due to the limited capacity available to social workers to complete all the work involved in budget application, such as compiling quotes etc. Social workers felt that having a list of local authority approved suppliers and contractors would be helpful. Darlington Council have now employed two project support workers who have come into post since our fieldwork, so it is hoped that these staff can help to resolve these challenges. Though employed later than intended, these posts were factored into the costs of the intervention. There was also a consensus among workers and managers that better training around budget management should be provided. One social worker felt that a barrier to application for a budget was the lack of knowledge about the availability of budgets.

Further challenges to implementing the intervention has resulted from the local authority being on an ‘improvement plan’ after an Ofsted inspection. One senior manager felt that this had posed a “challenge for social workers thinking creatively about budgets’, due to the need to balance “compliance against creativity’. She did feel, however, that, “creativity is coming through now” and that they are now overcoming the initial reticence about making the "leap from managing £50 to £10,000"
DISCUSSION

At this early stage we are beginning to see how devolved budgets are being implemented in Darlington’s children’s social work teams, including some early indications about the feasibility and acceptability of randomisation. There are plenty of early signs that the pilot is promising and that it has the potential to achieve its aims. Social workers are mindful that the budgets are not used as a quick fix solution nor as a replacement for existing services. In this context, there is a clear message that providing support where s.17 money would not be granted seems promising in terms of preventing care entry. As we might expect, there has been some unease among some workers about this method of allocating the intervention, but there is a broad acceptance of the rationale for doing it in this manner.

The disparity between the total number of families eligible for an application by their social worker to receive a budget (21), and the number who have received a budget (7) is notable. The barrier here seems primarily to be a reluctance among workers in applying for the budgets – due, in part, to the burden of work but also for other reasons – so this is an area that needs further attention if the pilot is to be successful. Of course, some families, because of their specific circumstances, may not benefit from the intervention and arguably it would not be right to apply for it for all eligible families. But, given the range of purposes they are being used for, we would expect this to be a relatively small group.

It is worthwhile unpicking the reasons for this reluctance, and we intend to delineate the mechanisms at play here further as the pilot progresses. As mentioned above, there have been some reservations based on ethical concerns around randomising families to be eligible for a budget. This may explain some of this reluctance. However, it may also be the result of professional fatigue, low awareness and confidence in the process, as well as worries about additional workload. The relationships between workers and families also seems to be a key moderator.

In all the projects to date the issue of relationships and relationship building has arisen, and in Darlington it appears that relationships are also crucial. Where relationships have been difficult or have broken down between social workers and families, it seems that - in some instances at least - this has proved a barrier to devolved budgets being delivered.

It is understandable that workers might be frustrated at a perceived unwillingness or lack of engagement from families, and it is reasonable for them to feel that the families selected need the help less than those who were allocated to the ‘business as usual’ group. Moreover, the way the application process is designed, with the need to actively apply for a budget, workers probably do not feel that they are withholding resources from families. Yet, this is in effect what seems to be happening in some cases, and this will be troubling for service leaders. It is also an issue that can only be addressed at a system or organisational level, and one that other local authorities would undoubtedly face if trying to implement devolved budgets. The challenges noted about the wider context of the authority’s improvement plan, and the tensions between compliance and creativity, add to this. Nonetheless, the creativity displayed so far suggests the optimism of service leaders is well placed.

Darlington Council is taking a proactive approach to identifying concrete ways to enhance the pilot. Leaders have already recognised the need for more training and awareness raising, and have now put in place the support staff intended to reduce the workload for social workers and provide practical support to families. These measures are likely to help in addressing some issues. A more difficult challenge will be to overcome the fatigue that workers experience when working in challenging circumstances and trying to engage families in the long term.

One way of increasing access to budgets may be to re-position the child at the heart of the intervention, throughout the training and application process. Focussing the guidance and advice – including the discussions between workers and managers – on what devolved budgets can do for children may also fuel progress in relation to creative thinking around budgets. We pick up on these challenges in our recommendations below.

The input from the Interim Service Manager and panel of senior staff are critical components at this early stage in shaping the creative thinking and in developing confidence of social workers’ decision-making. Like most public sector organisations, the local authority must comply with local government regulation and target-based criteria. This is especially pertinent as a result of a recent inspection which set targets for improvement. This has resulted in some conflict between ‘compliance versus creative’ thinking.

CONCLUSIONS AND NEXT STEPS

As with any new intervention, the early stages of implementation expose unexpected challenges which require pragmatic solutions. There was great enthusiasm among the social care staff who were interviewed and observed as part of the evaluation process, despite the challenges discussed above. There was also a sense that – across the
workforce – members of the team were proactive and solution-focussed when considering how the pilot is going and how it can be improved. However, the low uptake of applications is concerning. There are multiple reasons for this low use, and it is good to see Darlington Council actively trying to address this issue. Challenges and learning from them is an expectation for the Change Projects.

One immediate implication is randomisation. The primary ethical justification for randomisation was the projection that demand would significantly outstrip funds available. The low uptake means this justification no longer holds and it is not therefore appropriate to continue randomisation. We would, therefore, recommend suspension of the randomisation process. Family outcomes as a result of the receipt of a budget will be monitored closely, along with the impact of suspending randomisation. It is worth noting that randomisation was carried out with apparent success, and this indicates the possibility of randomisation in future studies if appropriate and ethically justified.

It will also be of interest to monitor whether the process of implementing the intervention becomes less burdensome to social workers now that the support workers are in post, and whether this affects take-up of budget applications.

The relatively large amount of money available to social workers has caused some anxiety. Alleviating such concerns and developing social workers’ confidence and creative thinking within a ‘compliance’ driven culture takes time and requires organisational support. We share the Darlington project leads’ views that social workers’ confidence and faith in the intervention will grow as it becomes better integrated within the procedural systems of the local authority and more established as a way of working.

**Recommendations and further questions**

Our findings to date provide a basis for four recommendations that might enhance the way the pilot is being implemented and maximise its chances of success;

1. Temporary suspension of the randomisation process as a way of allocating eligibility for social workers to apply for a budget, which should be reviewed after three months.

2. More education and awareness raising around the devolved budgets project is needed, together with increased administrative support with the application process.

3. Further work to understand the reasoning for social workers not applying for budgets. An initial focus on the existing group of families in the intervention group who have not yet received budgets may illuminate the reasons for this. Going forward, the budget decision making could be emphasised by more explicit discussions at a pre-application stage about reasons for applying or not applying.

4. If uptake of budgets does not increase post suspension of randomisation and increased awareness raising, the eligibility criteria for inclusion in the project (i.e. families having a child at imminent risk of entering care) should also be reviewed. Using budgets to support family reunification should be considered.

There are several questions raised that we will explore further during the next phase:

- To what extent are the budgets being used in cases where there is a real risk of care entry, and how far do they reduce this risk?
- How are devolved budgets conceived to reduce the risk of care entry, and what direct and indirect mechanisms can be theorised for this?
- How much should the budget for the average family be?
- What proportion of cases are deemed not requiring a devolved budget, and why?
- Can we identify a typology of devolved budgets, i.e. a range of types of uses that broadly fit the families included?
- What things are devolved budgets being used for that could be purchased from other sources, and what are the benefits for using devolved budgets rather than other sources?

In our final report we will refine and develop the logic model based on these findings and present a realist programme theory based on it.
REFERENCES


