

SWIFT Specialist Family Service

What is SWIFT?

- A jointly commissioned, multi disciplinary provider of specialist assessment and intervention
- Teams are structured by thematic risk presentation
- Intervention includes adult treatment
- Commissioners inform service specifications and oversee reporting activity for that agenda (eg. NDTMS, SDQ's)
- A collaborative commissioning arrangement exists for Pre and in Proceedings assessment, to include the following parental presentation:
 - Mental Health
 - Drug or Alcohol misuse and Family Drug and Alcohol Court
 - Learning Disability
 - Sexual Risk
 - Domestic Abuse
- Clinical team; children and adolescents and adults
- In addition, Specialist Services host Foundations

How is SWIFT Different?

- Joint or Collaboratively Commissioned Model.
- Truly multi-disciplinary, including management and reporting structure.
- Structure is based on parental risk presentation and bringing additional expertise to the assessment and intervention offer.
- Focus on what can we do – interventions
- Significant Clinical (including Psychiatry) and Probation workforce – few social workers.
- Focus on being meaningful for the family including access to ongoing or local services, rather than just producing evidence for a court process
- An ethics focus – not asking people to tell their stories to lots of different professionals who they never see again
- Within pre –proceedings and proceedings, using expertise to assist in the planning of assessments and interventions, as well as completing some of them.

How is a SWIFT assessment different?

- Formulated to ask the right questions
- Stable Workforce
- Offers a different kind of expertise to generic social care offer
- Workforce and service specification meets the expectations of “Memorandum of Experts”
- Can address the impact of parental behaviour upon parenting capacity, offers a prognosis and where appropriate negotiates access or provision of a suitable intervention plan
- Able to offer a multi professional assessment to get the right people involved at the start
- Can offer a team or a specialist approach to assessment
- The assessment is independent of social work case management but intervention plans can still include knowledge and referral to local community services

Process

- Referrals are only from Social Care Services or Peri Natal Unit
- Referrals can be made for Consultations, and drug and alcohol and mental health triage.
- More complex cases attend “Formulations”, a multi disciplinary meeting to consider the details of the case and plan a bespoke offer of assessment and intervention
- There are clear agreed guidelines for practice in these processes to ensure transparency and independence which have been agreed with the local judiciary.
- Assessments and interventions are still led by SWIFT although tweaked and adapted as necessary by lawyers and the judiciary.
- Less of a reliance on psychiatric and psychological one off and Global assessments. Looking for the gaps and applying the necessity test
- A word about LOI’s.
- Feedback from the Judiciary, CAFCASS and parent’s solicitors is NOW almost totally positive.

Adult Mental Health and Drug and Alcohol Provision

- For adult mental health provision 2018/19
 - 144 assessments completed leading to 62 interventions and only 13 referrals on to other services. Of these only 2 were to CHMT as we weren't able to meet their needs.
 - Only 15 disengagements
 - 20 consultations to external services
- For Adult Drug and Alcohol Provision 2018/19
 - 156 assessments leading 100 interventions and 20 referrals on to other services, mostly signposted to adult treatment services
 - Only 13 disengagements (17.5%) from 74 discharges.

FDAC within SWIFT

- Funding withdrawal of a separate FDAC team offer in 2018 / County Council budget reductions.
- Fits nicely into the existing SWIFT model, draws on the thematic approach with access to a multidisciplinary team, adds a much clearer structure and benefits from the FDAC Judge.
- Reduction in the number of additional assessments e.g. psychiatric/psychological, less need for parents to repeat their story, ethical, pulling together of resources.
- Currently have 4 cases in FDAC, potential scope for expansion if funding was available
- Involving parents who have been through the process in onward training offer

Service Offer

Cognitive Assessments and Cognitive + Assessments

PAMS and PAMS +

Triage – Drug and Alcohol and Mental health

Consultations – cross thematic risk team

Screening – particularly beneficial on CP cases, this offer includes drug testing

Adult Treatment Assessment and Interventions – Drug and Alcohol and Mental Health

Risk Assessments and Interventions – Domestic Abuse, Sexual Risk, NAI

Ability to Protect Assessment and Intervention - Domestic Abuse, Sexual Risk, NAI

5 Step and Steps to Cope – Drug, Alcohol and Mental Health Intervention

Safer Relationships – Domestic Abuse; Whole Family Approach including Perpetrator

Protective Parenting Intervention and Protective Behaviours – Sexual Risk

Therapeutic Service for children – ESCC Child Sexual Abuse pathway

Trauma Informed Intervention - Cognitive Analytic Therapy and EMDR

Psychological Assessment; adults and children and short term interventions

Psychiatric Assessment; adults and children

Child's Needs Assessments

FASD Assessments for children and young people

Family Therapy

VIG and Parenting Support

Oversee all parent and baby placements

Young Mother's Intervention

Oversight /Delivery of training in thematic risk areas across Children's Services

Foundations

Outcomes

- Reduction in total number of proceedings last 2 years defying national trends
- Foundations work has led to 15 women keeping subsequent babies in their care.
- Skilling up of Children's Services workforce (including early help) as expertise are used to facilitate and develop training as well as consult on specific cases.
- More consistent experience for families due to use of same underlying research and methods.
- Children are more likely to remain with their family (either with their parents or wider family members) than in Care Proceedings. Of the 10 children (7 families) completed within FDAC in 18/19, 4 (3 families) returned home to their parent(s), 4 (3 families) were placed permanently with family and 2 (1 family) were placed for adoption

Key Messages

- Experts need to ‘supplement’ and ‘add value’ to social work evidence.
- Independent but also integrated into safeguarding systems
- Pre-proceedings: an opportunity for multi-disciplinary assessment and intervention
- Develop transparency about what isn’t working and identify how collaborative practice can address gaps and risks, whilst also promoting strengths. Not a deficit model.
- Interventions are offered as a result of assessments but are also offered as an assessment in their own right i.e. intervention as assessment model.
- It’s taken 5 years to embed the processes underpinning our model but they are now supported by the Judiciary, Advocates and Cafcass.
- Foundations is the team dedicated to work with women to avoid repeat removals. This service is well established locally with good outcomes and has some differences to the Pause model.

SWIFT

“Intensive, high-quality intervention and consultation is provided through the local authority-led ‘Swift’ team, a multi-disciplinary service that provides specialist consultation, assessment and intervention across a wide range of need, including child exploitation, substance misuse, mental health, domestic abuse, relationship difficulties and parenting. Joint work between social workers and this service adds depth to social work assessments and provides effective, targeted direct work to families.”