



Family Support Emergency Childcare Services Evidence Based Scoping Paper – updated July 2020

Background

The CHANGE: Childcare and Nurture Glasgow East project has carried out engagement work with the community on the barriers to accessing childcare, with over 200 families and services locally since 2016.

Response from the community

During the community engagement phase of the project a recurring issue was highlighted by families and professionals; the need for a supportive service which could provide emergency childcare, during stressful or difficult time. Often families in the project area need to attend emergency appointments, sometimes at short notice, and require a safe childcare option they can access, with qualified professionals.

Parents and carers report that they often need to bring their children along with them to healthcare appointments, as an alternative option is unavailable. This means they are unable to fully disclose their feelings or symptoms during their appointment due to the sensitivity of the discussion or because their child needs their attention, making assessing the support and care they need difficult.

A number of our key partners have shaped and supported this proposal:

"SAY Women supports CHANGE: Childcare & Nurture Glasgow East proposal for providing access to crisis creches and playgroups for families during emergency and medical appointments. In our experience, young women find it very distressing to attend medical appointments where they need to discuss sensitive information while their children are in the room. Young women often face many barriers including lack of family support and the high cost of childcare which makes it very difficult to access crucial appointments. Disclosures of information to the GP are inappropriate when witnessed by children. Our accommodation project is in the East End of Glasgow and

therefore the availability of this service would benefit many of the families we work with greatly."

Rebecca Grant, National Trainer, Say Women

Health Professionals and Family Practitioners report accompanying parents /carers to medical appointments to assist them with looking after their child.

The professional requires to remain in view of the parent/carer making it difficult to engage the child in an activity and often leading them to become distressed. This makes it difficult to complete the appointment.

"Health Improvement observe that people with the most limited social connections are often the most vulnerable e.g. women that have been trafficked, women fleeing domestic abuse, refugees and asylum seekers. These women often have no one available to provide the sort of ad hoc childcare that allows them to attend support services or indeed to try to improve their life circumstances e.g. one worker sat with a baby in the waiting area of a local college whilst the baby's mother attended an interview for a place. The place had to be offered first before formal childcare could be accessed."

Ruth Donnelly, Health Improvement Lead

"I think this is a wonderful proposal and I do believe the customers it would serve would benefit greatly from it. I have over 34 years' experience in DWP and have covered many different job roles, including reception/customer service, personal adviser, Incapacity Benefit Personal Adviser and Office manager.

There have been many occasions where customers have attended with young children and have become quite distressed throughout the interview which can be very upsetting for the young child leading the parent to feel even worse. I have interviewed customers with serious illnesses and again, in the presence of their child, they have not felt able to fully confide in me at that time. This has had a serious negative impact on the support I could offer and in other circumstances I could foresee the non-disclosure of some facts in these situations potentially having an adverse effect on their claim.

The examples I quoted were for those occasions where the customer attended the office, I believe that there will have been many more lost opportunities to support vulnerable customers by their inability to perhaps visit some form of support network when they maybe felt they could possibly better their situation."

Nigel Docherty, Third Party Provision Manager, Department for Work and Pension)

The need

The following reasons have been identified by parents, carers and services for emergency childcare:

- *A sudden illness or accident*
- *Feelings of desperation or helplessness*
- *Emotional distress or frustration*
- *Domestic violence*
- *Homelessness*
- *Drug or alcohol treatment*
- *A medical or mental health situation*
- *Legal obligations*
- *Financial situation*
- *Employment, training or housing situation*
- *Other crisis situations which require support*

Glasgow's Family Support Strategy 2020-23 identifies four priorities¹:

1. All family support activity delivered by the Children Service's Partnership and external partners will be aligned across the city, by Year 2.
2. All funding of family support services by the Children Service's Partnership and external funders will be strategically aligned by Year 3.
- 3 Our Children Service's Partnership will invest within universal, early intervention and intensive family support services, citywide by Year 1 to strengthen the family support infrastructure.
4. Establish a neighbourhood approach to family support, citywide by Year 3.

Models of emergency childcare support

Professionals and parents and carers have indicated two models of support that would be of particular benefit. Both uphold the principles of GIRFEC and are underpinned by a preventive and early intervention approach.

It is proposed that these models would be developed in partnership with the local community, the Children's Services Executive Group, the North East Children's Services Locality Group, the North East Health and the Social Care Partnership, the Care Inspectorate, the CHANGE Hub, and through further engagement with relevant local forums and organisations.

¹ Glasgow's Family Support Strategy 2020-23. Available at:
<http://www.glasgow.gov.uk/councillorsandcommittees/viewSelectedDocument.asp?c=P62AFQDN0GUTT181DX>

During the development phase of both services, a clear referral process and policies and procedures would be established.

Model 1: “Crisis Creche” *(term is used at this stage for reference purposes only)

This model would provide parents and carers with the opportunity to book their children into a short “creche” session with qualified staff in a relaxed environment, for a short period of time, while attending healthcare appointments. This option should be free of charge.

There is a possibility this service could also be used for parents/carers to access with their child, to ensure their child is calm before accessing any child health clinic appointments.

This service will operate every day for more than 2 hours a day, it will be required to be registered with the Care Inspectorate.

Proposed location

A possible location could be within the new Health and Social Care Hub, to be housed on the current Parkhead Hospital/Mental Health Resource site at 81 Salamanca Street, Parkhead. The new expanded Health and Care Hub will give local people access to state of the art health and care services under one roof. Planning for the building has begun and it is due for completion in 2023.

The Hub will be a focal point for a wide range of health and care services for the east end and the wider north east and will include GPs, pharmacy, community dental practice.

Model 2 “Crisis Playgroup” *(term is used at this stage for reference purposes only)

This model would provide registered childcare with a qualified staff team in a relaxed, calm and stimulating environment, and would most likely offer morning or afternoon places of approximately 4 hours **(it would not provide overnight care)**.

This service could be used where a block booking is required over a period for example, if the parent/carer is required to attend a series of counselling appointments. There should be little or no cost to families accessing the service.

A short settling in period would be built into the initial session/s to reassure the child and parent/carer as the child would be attending on a regular basis.

For those children who are regular attenders' personal plans would be put in place.

Proposed locations

1. Further engagement with local groups to investigate if the “crisis playgroup” could be incorporated into existing services which offer family support (with an option for business and/or funding support).
2. Identifying partner/s and premises to set up a new venture which meets the community need and together exploring funding and /or business support.
3. To investigate locating this service in the Health and Social Care Hub in Parkhead.

Option 3 is the preferred option.

Why the Health and Social Care Hub is the preferred option

The Health and Social Care Hub will house some services which require those attending to have extensive regular support. If they have children, accessing these services would lend itself to the block booking system for the crisis playgroup mentioned earlier in the report.

Services likely to be housed in the hub include:

- *Specialist Children's Services (CAMHS and Community Paediatrics)*
- *Rehabilitation and enablement services*
- *District nursing*
- *Health visiting and school nursing*
- *Social Work children and family teams*
- *Older people's mental health services*
- *Learning disability services*
- *Sandyford East sexual health services*
- *Primary care mental health services and psychotherapy services*
- *Health and social work Alcohol and Drugs Services*
- *Criminal justice social work services*
- *Health improvement services*
- *Acute hospital services (especially outpatient clinics), such as chronic pain clinics, older people services, speech and language therapy, physiotherapy.*
- *City wide health and social care learning and development hub City*
- *Parkhead Library*
- *Community and third sector use of meeting rooms, such as a recovery cafe and space for mental health peer support groups.*²

² Glasgow Health and Social Care Partnership Newsletter Fed 2019. Available at: https://glasgowcity.hscp.scot/sites/default/files/newsletter/North%20East%20Hub%20News%20Letter%20February%202019_1.pdf

Ratios & space requirements

Both services would require to be registered by the Care Inspectorate. The space and ratio requirements are outlined in the Scottish Government Space to Grow document.

Space

Current Care Inspectorate expectations:

- For children under two years - a minimum of 3.7 square metres, per child
- For children aged two years to under three years - a minimum of 2.8 square meters, per child
- For children aged three and over - a minimum of 2.3 square meters, per child

The space referred to is defined as space for children's play and movement. This should not include toilets, changing facilities, storage space, space taken up by set fixtures and fittings or any space identified for other use i.e. kitchens, staff/parents or community space.

Ratios

Under 2s – 1 practitioner: 3 children

2 to 3s – 1 practitioner: 5 children

3 & over 1 practitioner: 8 children

If all children are 8 or over 1 practitioner: 10 children³

The Space to Grow document which provides design guidance for early years and childcare services highlights that children of different ages attending the services will be fluid, and needs may be complex, therefore advice will be sought on space and ratios by the Care Inspectorate.

“The Care Inspectorate may agree to vary the ratios up or down where warranted, for example attendance of children with additional support needs, the layout of the premises and additional support staff on the premises. It is the responsibility of the provider to ensure that children's care and learning needs are always met. Where there are a number of

³ Space to Grow (2017). Available at: <https://www.akpscotland.com/wp-content/uploads/2017/09/Space-to-Grow.pdf>

*children with additional support needs, providers may have to vary the ratios to meet children's individual learning and support needs."*³

Secure entrance

A secure entrance is essential to support safety and monitor access. Some examples could include:

- a bell entry system
- a glazed panel on the door or at the side of the door which allows the staff member to see who is outside
- keypad entry
- a video security system at the main door, accessed remotely, can help staff to monitor the entrance without having to leave the childcare areas.³

Qualified staff

Both services will support an early intervention approach around a child and family wellbeing. Practitioners will assist in identification of families requiring additional support to prevent them from reaching a crisis point.

As well as having the relevant Early Years qualifications, practitioners ideally should be trained in play therapy.

Where appropriate, consideration will be given to health professionals accessing the service to carry out assessments with the children. The opportunity for practitioners to take part in outreach work, i.e. home visits with Health Visiting team or supporting Child Health Clinics will be explored.

The Glasgow's Family Support Strategy 2020-23 (Draft 9) states:

"Glasgow's families' needs are diverse and constantly evolving, to address these needs it is fundamental to deliver family support services at a neighbourhood level, pulling together resources from Glasgow City Health and Social Care Partnership (HSCP), Education Services, Glasgow Life and third sector to work in partnership and deliver holistic support for children, young people and families. Building on the four key strengths identified: focus on families, skilled workforce, good practice and partnership working. The HSCP, Education Services, Glasgow Life and third sector organisations are committed to working in partnership with Community Planning Partnerships and other partners with the focus on helping children, young people and families stay

together. Through transparency of processes, sharing knowledge and resources.

It is vital when commissioning family support services that organisations can respond at a neighbourhood level, whilst capturing children, young people and families' views to inform service practice and delivery.

Children's services partnership tests of concepts (taken from Glasgow's Draft Family Support Strategy)

Education Services - Eligible 2s

The expansion to 1140 hours of Early Learning and Childcare within early years nursery provision provides the opportunity to work in partnership to increase the uptake in eligible 2-year olds nursery provision across the city. Education Services have embarked on engagement and awareness raising sessions across the city to increase the uptake.

In addition to this Education Services are currently scoping how eligible 2 statutory funding can be utilised to provide both nursery provision and family support working alongside the third sector.

Outdoor Early Learning & Childcare

Education Services have commissioned a research evaluation exploring the cognitive impact of outdoor play of children's health and wellbeing. Glasgow University will evaluate test sites in Castlemilk, Tollcross and Drumchapel along with 12 Glasgow City Council Nursery sites.

Children's Healthy Weight Pre-Fives

A gap was identified in relation to pre-five healthy weight support for NHS GG&C board wide. Our universal pathway will provide the mechanism by which to address this via child healthy weight (CHW) interventions with children and families within this age group. The Health Visitor / Family Nurse Partnership intervention will be strengthened through additional training in child healthy weight and tools and techniques which support the adoption of healthy family meals and will contribute a minimum of 3 sessions. Additional intervention will be provided by home based support and access to existing community cooking activities. Each locality will host a would test of concept initiative where additional capacity of a 0.5 wte Health Care Support Worker or Third Sector Provider is identified to deliver additional follow up CHW interventions with families in the local area.

Children's Neighbourhood Scotland

Children Neighbourhood Scotland is a placed based initiative within Glasgow's East End, which aims to bring together resources, people and organisations within that community to improve the lives of children there. The approach builds on the success of the Community Planning Partnership's Thriving Places within this area and working with three local primary schools. It is anticipated that this test of change will expand to two further sites within the city. This is the initial test of change in order to deliver Glasgow's community approach to family support and early intervention.

NSPCC Together for Childhood

NSPCC Together for Childhood is a placed based initiative in Govan, Glasgow's south side. This test of concept explores child development and looks to build a shared language between families and professionals using metaphors to explain child development. There are six metaphors these complement the existing HSCP Central Parenting Team Triple P and Solihull approaches strengthen our commitment to families that we want to support families to stay together. There is also a focus on child poverty within the Govan area.

Glasgow Life Family Support – Holistic Needs Assessments

A partnership approach between Education Services and Glasgow Life, has provided the opportunity for Glasgow Life to deliver family support within a primary school setting, utilising a holistic needs assessment to identify and address family's needs. This work is based on the best practice model delivered within Bridgeton Learning Centre previously by Education Services, Glasgow Life and Clyde Gateway. This model enables families, once supported to access family learning and activities, improving literacy, numeracy and reduce social isolation.

Education Services Family Learning and Support

Family engagement and family learning are part of the quality improvement framework that schools use to continually strive to improve the delivery of services and support families to be better able to support their child's learning and development.

There are a range of approaches to family engagement across Glasgow that are funded through Education Services, Glasgow's Attainment Challenge and the Pupil Equity Fund. The services delivered include: a range of practical support to families, building resilience and family learning.

Family Support Role – Education Services

Education Services are currently reviewing their Education Liaison Officer Role, with the aim of building family support clusters within school environments. Supporting families to access early intervention family support, addressing family's needs and concerns and supporting children and young people to attend school/increase attainment.

Glasgow Families Together

Glasgow Families Together this innovative test of concept will explore building a collaborative infrastructure between HSCP and the third sector in order to support families within communities through early intervention, which would result in only higher need cases remaining with Social Work Services. The evaluation and learning of this model will be continually feed into the commissioning framework(s) for family support.

Funded on a three-year basis from The Big Lottery and HSCP, this initiative will pilot a collaborative approach to partnership working. Duty referrals to social work will be assessed and appropriate referrals that require early intervention and support will be passed to Glasgow Together, whereby families will be supported based on their needs by the most appropriate third sector organisation. Barnardo's has responsibility of the management and day to day running of the service. A range of other third sector organisations make up a tiered approach to support, with six primary providers, although there is wider support available within the second tier of support if families require this.

Intensive Family Support Service (IFSS)

HSCP Intensive Services Team working in partnership with CELCIS and Third Sector Providers will seek to design, implement, and commission a model of family support for those who require intensive support in addition to social work interventions. This is aimed at families with children on the edge of care, aiming to support families within their homes and communities and reduce the likelihood of children being received into statutory care. We are using an active implementation approach to commissioning of intensive services for families, which will afford Glasgow the opportunity to build a new model of partnership working with both third sector and families.”¹

Later in the document it is highlighted that:

“The four key challenges that emerged from discussions with professionals in relation to accessing family support services were

referral criteria, funding, service model and capacity and out of hours provision. These are the four key areas that will be addressed when commissioning family support services.

Out of Hours Provision is not currently sufficiently provided to allow needs at crisis point to be addressed.”¹

What has CHANGE done so far?

The CHANGE project has completed the following activity in relation to this proposal:

- Carried out further community engagement and scoping with families and services locally to ascertain the difference this type of support would make to the community.
- Carried out planning sessions with CHANGE Hub members and Children and Young People’s Collaborative Improvement Advisor to investigate levels of support required and potential solutions based on the community response.
- Met with the HSCP Locality Engagement Officer and regularly attend the Locality Engagement Forum to gain knowledge of the development of the Parkhead Health and Social Care Hub so far and input CHANGE’S evidence with regard to the need for emergency family support in the area.
- Requested representation on the HSCP Project Board so that this is prioritised and kept on the agenda.
- Met with officers from Children’s Services Planning shared scoping report and acted on actions given, including more information about the family’s circumstances being included and costings provided.
- Taken the concept to the NE Vulnerability Subgroup to ask if it could feature on their mental health subgroup action plan. This is currently under consideration as the sub-group is experiencing some changes.
- Shared the previous version of this scoping paper with Member of Parliament David Linden and CHANGE’s Policy and Participation Officer met with him to discuss it in more detail.
- Shared the previous version of this scoping paper with the National Poverty Leads Group and CHANGE’s Policy and Participation Officer presented on it to the group.

Case studies from the CHANGE Hub members

In March 2020 the CHANGE Hub⁴ members were asked to revisit how a holistic creche/playgroup model could support their work and give the best possible outcomes for families. Members felt that having access to essential services and childcare housed within one facility would be of considerable benefit to let families get the support they need while their children are well cared for within the same facility. It would also support early intervention steps to be put into place where required. CHANGE Hub members shared some examples of issues families that they are working with are experiencing:

- Poly drug use affecting parents' clarity to care for families
- Budgeting – coping with changes and high Annual Percentage Rate (APR)costs
- Court attendance – separation
- Anxiety not being able to go out the house
- Child aged 4 talking about parent's alcohol use using term 'half bottle'
- Building confidence to get back to work or anxiety at not being able to go out to work
- Lack of appropriate clothing for weather in some cases children having no socks
- DWP contacting families just to check everything is okay sends families into a panic and can affect benefits
- Caring responsibilities of young people and other siblings
- Judgement from others in the community for families living with addiction issues
- Social isolation especially around shopping. Support with digital skills could enable people to access online shopping and fresher ingredients and more choice than in a corner shop.
- A number of parents/carers in the area rely on friends and family, such as grandparents, to look after their children. Since the COVID 19 outbreak and due to social distancing measures and a number of people shielding, this may no longer be a viable option for some parents/carers seeking to access appointments and respond to urgent situations.

⁴ The CHANGE Hub was set up to help to respond to the project's community engagement process and is a multi -agency group of 37 individuals who represent 26 different organisations across the area.

The Hub's primary focus is to help to support and guide the direction of change needed to create positive outcomes for families. Members do this by using Children and Young People's Improvement Methodology and identify and carry out tests of change that will help to create long-term sustainable results.

Approximate costings

The CHANGE Hub asked Stepping Stones for Families to provide an estimated costing for these services. These costings were updated as of March 2020.

- On a creche by creche basis: £17.50 for a risk assessment of the room/venue to be carried out by staff
- £17.50 per staff member per hour (based on 2 staff at 3.5 hours) = £122.50 per session.

To provide a more permanent facility an initial investment cost would be in the region of £250,000

This costing however must be flexible as it would be dependent on the discussions on the model.

Impact of COVID 19

Families that reside in the CHANGE project area are amongst the worst affected by Covid-19 related deaths across Scotland, with Parkhead alone recording 31 fatalities, the highest number in Glasgow.⁵

Due to lower levels of household internet access⁶, many families in the CHANGE area do not have the flexibility to be able to attend appointments online, a practice which has been adopted by many public services since Covid-19 lockdown restrictions were introduced. Therefore, making face-to-face appointments more accessible has added importance in the area.

Since lockdown measures were implemented in March, demand for support has been continually increasing in high poverty areas such as the CHANGE area. Many families who were just about coping now find themselves in a more vulnerable and chaotic situation.⁷

There is evidence of increased stress levels for families living in the CHANGE area, with significant concerns around the impact of lockdown, overcrowding, job losses, relationships strain and coping with meeting additional support needs and caring responsibilities. In an area which already

⁵ National Records of Scotland (2020). Available at: <https://www.nrscotland.gov.uk/covid19stats>

⁶ Scottish Household Survey (2018). Available at: <https://www.gov.scot/publications/scotlands-people-annual-report-results-2018-scottish-household-survey/pages/4/>

⁷ Children's Neighbourhood Scotland – Early insights into the COVID-19 response (2020). Available at: <https://policyscotland.gla.ac.uk/wp-content/uploads/2020/05/PSCNSEarlyInsightsCOVID198May2020.pdf>

has high adverse mental health, easy access to health and wellbeing services has taken on added importance.⁷

In the wake of Covid-19 and lockdown, additional resource and new approaches will be required to maximise community-based support for mental health and wellbeing.

Targeted engagement and service provision that addresses the needs of the local people will be essential to make services accessible for families.⁸

Next steps

- The CHANGE team requested to Children's Services if a pilot could be tested in an existing Health service on a smaller scale, while also investigating existing groups who could house these services in case this option was not available, this would enable CHANGE with potentially Stepping Stones for Families and our Hub partners to test what works.
- CHANGE Hub members to remain engaged in the process. They have the knowledge of "how this can be done" and have access to a variety of community and strategic links to support the development of a test. They have formed a working group to support this development and are able to support in an advisory capacity as required.
- Where appropriate the CHANGE team can act as facilitators for example supporting with requirements outlined by regulatory bodies i.e. Care Inspectorate and/ or in a business support capacity.
- Investigate opportunities locally with strategic key contributors for support for example linked to the work of the Family Support Strategy.
- Ensure scoping and any future process is shared with the relevant strategic and community partners.
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⁸ Glasgow Centre for Population Health – Supporting community recovery and resilience in response to the COVID-19 pandemic (2020). Available at: https://www.gcph.co.uk/assets/0000/7854/COVID19_Comm_Recovery_FINAL.pdf

