



Department  
for Education

# **Longitudinal follow up evaluation of Growing Futures**

**Evaluation report**

**January 2020**

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# 1. Executive summary

## The project

Growing Futures was a partnership approach and way of working led by Doncaster Children's Services Trust (DCST) which aimed to improve the outcomes of families, particularly children and young people, affected by domestic violence and abuse (DVA), through transforming the services that work with them.

It was funded from April 2015 to September 2016 by Round 1 of the Department for Education's (DfE) Children's Social Care Innovation Programme (Innovation Programme) and was operational between September 2015 and March 2017. Although the Innovation Programme came to an end in March 2017, some of the activities implemented under the approach have been incorporated into DCST 'business as usual'. In particular, the whole family approach and the role of Domestic Abuse Navigators (DANs) was continued. Although, the number of DANs has reduced from 10 to 4.<sup>1</sup>

Growing Futures was designed to address significant historical difficulties with multi-agency working and poor levels of trust between service users and services. Its specific aims were to:

- Reduce the emotional harm caused by DVA to children and young people (CYP).
- Directly support recovery from DVA for victims and their children.
- Significantly reduce repeat victimisation.
- Challenge the acceptance of DVA in families and their communities.
- Break the pattern of DVA as it re-presents in children and young people.

## The evaluation

An initial evaluation of Growing Futures was conducted between May 2015 and September 2016 by Opcit Research. The evaluation provided proof of concept for the Growing Futures model. For instance, the evaluation report (published in March 2017) focussed on the impact of the new model of working with families, as delivered by DANs, and processes which supported the model. It identified that Growing Futures was having a positive impact on DCST's relationships with families and communities, multi-agency

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<sup>1</sup> It was originally planned that there would 12 DANs in place. However, only 10 were appointed. 8 of these appointments filled DAN roles whilst two appointments became DAN managers.

working and some of the families who were supported by DANs. The initial evaluation report can be viewed [here](#).

In August 2018 Cordis Bright was commissioned by the DfE to work with DCST to conduct a longitudinal follow-up study of Growing Futures. The evaluation focuses upon the lasting impact of Growing Futures on families, CYP and on ways of working within DCST. As such, this evaluation covers the period after the funding period ended between March 2017 and March 2019.

The evaluation methodology employed for this longitudinal follow-up study includes:

- Review of strategic and operational documentation.
- Analysis of secondary/performance management data.
- In depth interviews with key stakeholders.
- In depth interviews with DANs, managers and social care staff.
- E-survey of key stakeholders.
- Case file reviews of DAN cases and social care cases.

## Key findings

Key findings from this evaluation included:

**Growing Futures has had a sustained impact on the delivery of services children and families receive.**

The primary change to service delivery which continues to have a sustained impact for families is the role of the Domestic Abuse Navigator (DANs), which has been adopted as part of everyday service delivery by DCST following the end of the Growing Futures funding period. There is consensus that the whole family model in Doncaster is underpinned by the role of DANs whose intensive work with the whole family was viewed as important for building lasting relationships and helping to overcome entrenched behaviours which result in domestic abuse.

There is evidence from interviews and casefile reviews that the whole family model of working has been implemented by other professionals. Stakeholders and social workers reported that DANs who had been in place for a number of years could now offer more experience, which was viewed as positive for families. Other areas of service delivery

which were sustained included the continued use of Signs of Safety and perpetrator programmes.<sup>2</sup>

**The whole family approach to working, central to the Growing Futures approach, has been sustained and impacts positively on family members.**

There is a wealth of evidence to suggest that the whole family approach through DANs' direct intervention work and efforts to consider all family members' wishes and feelings at different stages in a family's support from children's social care services has been sustained. The widespread adoption of Signs of Safety and the whole family model, as reported through qualitative consultation and evidenced in the case file review, also indicates that a whole family approach has been embedded in working practice Trust-wide.

Qualitative consultation with stakeholders, social care staff and DANs is positive about sustained increases in wellbeing and resilience for children and family members as a result of Growing Futures. E-survey responses were equally positive. However, the case file review analysis shows evidence of improved wellbeing and resilience had deteriorated post funding period, although this remained better compared with when Growing Futures was introduced. Due to the small sample size of the review caution should be applied in interpreting this finding.

**Work has continued to be developed which may not have occurred without the Round 1 Innovation Programme investment.**

Further work which might not have been developed without the investment of the Innovation Programme includes a Family Risk Assessment tool to complement the DASH risk assessment. However, it was not clear the extent to which this was being used. Stakeholders also reported that DCST-wide DVA-related policies and DAN practice guidance would need to be refreshed. Documentation shows that the Domestic Abuse Chief Officer Strategic Board, a multi-agency subgroup, are taking steps to develop and coordinate strategies to tackle domestic and sexual violence and abuse and the Practice Guide and Outcomes Framework was updated in April 2017.

A final addition is the creation of domestic abuse champions which have been placed in each of the four geographical localities of DCST.

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<sup>2</sup> Signs of Safety refers to an innovative strengths-based, safety-organised approach to child protection casework. For more information, see: <https://www.signsofsafety.net/signs-of-safety/> . Last accessed 16<sup>th</sup> January 2020.

## **Growing Futures continues to have ongoing impact.**

Growing Futures continues to have an impact on a number of outcome areas as well as some of the DfE's 7 practice features and 7 outcomes.<sup>3</sup>

- **Strengths-based practice frameworks have been implemented.**

There is clear evidence of DCST practitioners having a shared framework of understanding through the system wide implementation of the Signs of Safety approach which social care staff, DANs and stakeholders reported has been successfully embedded 'right across the Trust'. Analysis of case files from after the Growing Futures period also shows that it is an approach which is actively being used.

- **There is mixed evidence concerning whether multi-agency working has become more embedded within the culture of services since the implementation of Growing Futures.**

There is evidence from consultation with key stakeholders that the amount or quantity of multi-agency work has increased and the quality of multi-agency working has improved as a result of Growing Futures. However, analysis of case files suggests that the quality of multi-agency working may not have improved either during or after the Growing Futures period.

- **Referral pathways may have improved as a result of the implementation of Growing Futures.**

Interviews with DANs, social care staff and stakeholders suggest that referral pathways have improved in the last two years. The majority of DANs and social care staff were confident that they could describe the process for referring cases to DANs, as well as how lower risk cases involving domestic abuse could be referred to other services.

- **Key elements of Growing Futures have been sustained.**

Elements that have been sustained after the funding period included the DAN role, Signs of Safety, and the 'Getting On' programme. In addition, DANs continue to provide lunchtime seminars for professionals, alongside other forms of mentoring and training.

## **Implications and recommendations**

Key recommendations are listed below:

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<sup>3</sup> Evidence from Round 1 of the Innovation Programme led the DfE to identify 7 features of practice and 7 outcomes to explore further in subsequent rounds. These are discussed in section 5.

- **Recommendation 1.** DCST should consider reviewing resourcing of its DVA response in light of the evidence within this study and consider the positive impact that preventative work with lower risk cases could have in this area.
- **Recommendation 2.** Continuing professional development for DANs should be planned and resourced to ensure continuation of skilled direct work. Training for practitioners working alongside DANs should also be considered in order to grow knowledge and skills across all professionals working with DVA. Space should continue to be carved out for DAN professional development so skilled direct work can remain of high quality. This might also be beneficial for other practitioners who can learn from DANs.
- **Recommendation 3.** Recording by social workers and DANs should be improved to ensure consistency across DVA social care files, particularly for risk assessments using the DASH process and case file closure.
- **Recommendation 4.** Managerial decisions arising from assessments should be routinely recorded. Case closures could be strengthened with the completion and oversight of a DASH risk assessment detailing progress affecting the whole family including their views and wishes.
- **Recommendation 5.** Multi-agency work should continue to be strengthened as there was mixed evidence within the evaluation about the quality of this working practice.
- **Recommendation 6.** When implementing new ways of working, practitioners should understand the bigger picture of changes being sought and be engaged in early training with ongoing communication to update on progress and learning.
- **Recommendation 7.** The monitoring data collected should be reviewed and could be enhanced in order to benchmark the quality of work and evidence its impact. For example, whilst measures of children's social vulnerability status are useful it could also be beneficial to collect more specific performance management data especially around the role of DANs. Indicators could include:
  - The number of families that DANs engaged.
  - The number of children, perpetrators and adult victims that DANs engaged.
  - The number and type of direct intervention work carried out by DANs.
  - Performance metrics of DANs work including outcome measures for direct intervention work. For example, a measure of changing vulnerability status for the children that DANs had specifically worked with.
  - MARAC data including the number of re-referrals to MARAC following a DVA intervention.
  - Data on Looked After Children and specifically on changes in the number of days spent in care.

## **2. Overview of Growing Futures**

### **Project context**

Growing Futures was a partnership approach and way of working led by DCST which aimed to improve the outcomes of families, particularly CYP, affected by DVA, through transforming the services that work with them. The main principles underpinning Growing Futures were taking a whole family approach and doing so through multi-agency working.

Growing Futures was supported by £3 million from the Department for Education's Round 1 Innovation Programme and was in place from the summer of 2015, to the spring of 2017. However, the Growing Futures programme did not come to a complete end when the funding period finished with elements of the Growing Futures programme being continued. These elements are described in subsequent sections of the report.

### **Growing Futures aims and intended outcomes**

The Growing Futures programme aimed to improve outcomes for families particularly of CYP. The programme was originally designed to: address a gap in provision to support CYP's recovery from the trauma of living with DVA; improve 'whole family' working with families where DVA is a factor; address historic difficulties with multi-agency working and professional practice in DVA cases and improve levels of trust between service users and services which were previously considered poor.

As a result, the programme was designed to achieve the following objectives for families and CYP:

- Reduce the emotional harm caused by DVA to children and young people.
- Directly support recovery from DVA for victims and their children.
- Significantly reduce repeat victimisation.
- Challenge the acceptance of DVA in families and their communities.
- Break the pattern of DVA as it re-presents in children and young people.

### **Growing Futures activities and its legacy**

Growing Futures focussed on whole family working, therapeutic work, working with perpetrators and taking a flexible approach to who is assigned to working with individual family members and the approaches they employ. This section discusses what Growing Futures offered and its continued approach after the funding period ended.

Interviews with social care staff, DANs and stakeholders, and the review of DCST documentation suggest that the primary aspect of Growing Futures which has been continued is the DAN role. DCST reported that the initial funding period provided 'proof of concept',<sup>4</sup> and the role has now been mainstreamed in DCST services. However, due to the reduction in funding the number of DANs has been reduced from 10 during the funding period to 4.<sup>5</sup> One perpetrator engagement worker was appointed during the funding period and this has been sustained after the funding period. No other roles funded as part of Growing Futures have been retained.

The following outlines which Growing Futures activities have been continued post Innovation Programme funding period:

- 12 DANs were originally planned as part of Growing Futures. Post Innovation Programme funding period only 4 DAN roles have been funded.
- Provision of mentoring and training to professionals in allied services. Post Innovation Programme funding period, DANs continue to provide lunchtime seminars for professionals, alongside other forms of mentoring and training.
- Further development of the 'Getting On' programme and programmes for adult female victims, young women, and boys who have experienced domestic violence and abuse. The 'Getting On' Programme, which was further developed as part of Growing Futures, continues to be run twice a year.
- Workforce development through embedding Signs of Safety across the partnership and building capacity and competency in Parenting and Family Support Services to respond to families experiencing DVA. Post Innovation Programme funding period, DANs, social care staff and stakeholders reported that Signs of Safety was successfully embedded and is now an integral part of practice.
- Development during the Growing Futures period of a new strategic approach to domestic violence and abuse through a new Domestic Abuse Strategy. The Domestic Abuse Strategy remains in use.
- 1 Perpetrator Worker funded via Growing Futures. 1 Perpetrator worker has been retained post Innovation Programme funding.
- A Borough-wide Parenting Co-ordinator funded via Growing Futures. A Parenting Co-ordinator remains in place and is seconded from the council to DCST.

The following activities have been discontinued following the end of the Growing Futures period:

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<sup>4</sup> As outlined in a DCST presentation to Ofsted (November 2017).

<sup>5</sup> It was originally planned that there would be 12 DANs in place. However, only 10 were appointed. 8 of these appointments filled DAN roles whilst 2 appointments became DAN managers.

- A leadership coaching programme for leaders within relevant services.
- Development of a master's level course for practitioners.
- Delivery of a multi-agency conference to raise awareness of whole family working approaches.
- Further development of the Early Help hub.
- Provision of outreach and communications work within the community.
- Provision of a programme of action research with young people in Doncaster and a toolkit for schools and other children and young people's services.
- Young people-led research into generational attitudes to tolerance of domestic violence and abuse.

## **Additional work undertaken as a result of Growing Futures**

At the end of the Growing Futures period, DCST stakeholders reported that work was underway to develop a Family Risk Assessment Tool, which would complement the DASH risk assessment by providing a more holistic view of the family. Stakeholders reported that the tool has now been developed and presented to the Domestic Sexual Violence Theme Group (DVSA), but it is yet to be implemented given the complexities of developing such a tool.

In addition, stakeholders reported that DCST-wide DVA-related policies and DAN practice guidance would be refreshed. Documentation shows that the Domestic Abuse Chief Officer Strategic Board, a multi-agency subgroup, are taking steps to develop and coordinate strategies to tackle domestic and sexual violence and abuse. The Practice Guide and Outcomes Framework was updated in April 2017.

Another benefit of the Growing Futures programme has been that the Team Manager of the DAN service has attended multiple multi-agency national and local conferences to promote the work of Growing Futures and, in particular, the whole family model of working. As part of this, they have also been able to develop training on the whole family approach.

One final development which does not appear to have been part of the initial plan for Growing Futures or covered in the Round 1 Innovation Programme evaluation report, is the creation of domestic abuse champions in each of the four localities of the Trust. The champions were immersed in an intense DVA training package which included various information-based resources. These included a number of research papers published by the NSPCC and SafeLives. As a result, they are able to provide support and guidance within their areas and ensure that issues relating to domestic abuse are on the agenda.

## 3. Overview of the follow up longitudinal study

### Brief summary of Round 1 evaluation

The initial evaluation of Growing Futures took place between May 2015 and September 2016 and was conducted by Opcit Research. Opcit Research published an evaluation [report](#)<sup>6</sup> in March 2017, which focussed on the impact of the new model of working with families, as delivered by DANs, and processes which supported the model. It identified that Growing Futures was having a positive impact on DCST's relationships with families and communities, multi-agency working, and on some of the families who were supported by DANs.

Following this initial evaluation, in August 2018 Cordis Bright was commissioned by the DfE to work with DCST to conduct a longitudinal follow-up study of Growing Futures. The evaluation focuses upon the lasting impact of Growing Futures on families, CYP and on ways of working within DCST. As such, this evaluation covers the period after the funding period ended between March 2017 and March 2019.

### Longitudinal follow-up evaluation questions

The following outlines the key longitudinal follow-up evaluation questions which were developed collaboratively with DCST, Opcit Research and the DfE, following a review of documentation which included the Opcit Research evaluation of Growing Futures:

- What has been the impact of Growing Futures on: (a) sustained outcomes for families that received support during the funding period of the Round 1 Innovation Programme? (b) the delivery of services that families and children receive as a result of the Round 1 Innovation Programme investment?
- How does the whole family approach impact different members of the family who experienced support from the Round 1 Innovation Programme funding, including: Perpetrators; Adult victims; and Children.
- What work has been developed since the end of the first wave evaluation report which may not have occurred without the investment on innovation funding in Growing Futures?
- What is the ongoing impact of the DfE social innovation funded Growing Futures project on?
  - The number of repeat cases to MARAC.

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<sup>6</sup> Last accessed 9<sup>th</sup> March, 2020.

- The number of repeat referrals to social care where DVA is a factor.
  - The number of children admitted to care.
  - The relevant indicators of good practice identified from Round 1 of the Innovation Programme, i.e. 7 features of practice.
  - The relevant outcomes identified from Round 1 of the Innovation Programme, i.e. the 7 outcomes areas.
- Has joined up multi-agency working become more embedded within the culture of services in Doncaster since the implementation of Growing Futures?
    - Has the new 'whole family approach' model of working been successfully maintained since the Round 1 evaluation (and end of the funding period)? How has this impacted on ways of working?
    - Are priorities and processes more aligned between children's services, services for adult victims of DVA, and criminal justice agencies?
    - Has the project impacted working culture more generally?
  - How have referral pathways changed as a result of the implementation of Growing Futures? If so, in what ways?
  - How have changes since funding ended affected the impact of the project? Which impacts have been sustained/not sustained? What is the rationale for this?

## Longitudinal evaluation methods

Our methods for addressing the key evaluation questions are summarised below:

- Review of strategic and operational documentation.
- Analysis of monitoring data.
- In-depth interviews with 6 DANs / managers.
- In-depth interviews with 4 social care staff / managers.
- In-depth interviews with 7 key stakeholders.
- E-survey of referrers / DVA services.
- Review of 20 social care files (from during Round 1 of innovation programme funding period) where DVA is a factor with DAN involvement.
- Review of 9 cases from before and 10 after the Round 1 innovation programme funding period.

All research tools were agreed with DCST in advance of use in the field. More information about each method is presented in the following sections. More detail about each of the evaluation methods above are presented in Appendix 4.

## **Changes to evaluation methods**

Generally, the evaluation methods were applied as originally intended in the evaluation framework. However, we received a lower than anticipated response to the E-survey and due to changes in the way monitoring data has been collected we have not been able to look at trends before, during and after Growing Futures in the manner we had originally envisaged. See below for more information about the changes to monitoring data.

## **Changes to monitoring data**

In line with plans discussed in the original evaluation report, DCST have developed their approach to monitoring data since the outset of Growing Futures. As a result, DCST now collect a range of monthly indicators related to DVA. However, the indicators which are currently collected do not correlate with those used previously (see Table 49 for more information). As a result, it has not been possible to reconcile performance measures from before, during and after the Growing Futures period. The analysis within the following report focuses on January 2017 onwards, which correlates with the final period of Growing Futures and the period after it ended. As such, the analysis only considers whether any change which occurred towards the end of the Growing Futures period has been sustained.

As mentioned previously, the monthly indicators relating to DVA now collected by DCST provide an interesting picture of how children's vulnerability status has changed over time. This is a useful exercise, however, for the purpose of this evaluation more precise indicators linking the work of DANs to children's and families' outcomes would have strengthened the evidence relating to the sustained impact of Growing Futures. The current monitoring data provided means that we are not able to attribute any changes as a direct result of Growing Futures.

It would also have strengthened the evaluation to have been provided with the MARAC data which was provided in the initial evaluation to measure change over time. This would have made measuring the sustained impact of Growing Futures more comprehensive. However, DCST was unable to provide MARAC data in the format used in the Innovation Programme Round 1 evaluation due to changes in data recording procedures during the Growing Futures period.

## 4. Key findings

This section of the report presents the key findings from the longitudinal follow-up evaluation. In presenting the qualitative analysis we refer to DANs, social care staff and stakeholders, reflecting the core groups we have consulted. Furthermore, when presenting evidence from the case file review, we refer to 'before', 'during' and 'after' case files to show and compare the impact of Growing Futures before its introduction, during it and after the funding period came to an end. By analysing these three different time periods we hope to overcome a key limitation of the evaluation which is that different approaches to the collection of monitoring data means that directly comparing it with the original evaluation is challenging.

The following section presents the impact of Growing Futures on services and service delivery. The next two sections present the impact of Growing Futures on practice and on children and families. They include evidence for the practice features and outcomes as identified by the DfE in the Round 1 Evaluation Report.<sup>7</sup> Our longitudinal evaluation has found evidence for the following practice features and outcomes:

### **Relevant practice features**

1. High intensity and consistency of practitioner.
2. Systemic theoretical models.
3. Strengths-based practice framework.
4. Multi-disciplinary skill sets.
5. Family focus.
6. Skilled direct work.
7. Group case discussion.

### **Relevant outcomes**

1. Greater stability for children.
2. Reduced risk for children.
3. Increased wellbeing and resilience for children.
4. Increased wellbeing and resilience for families.
5. Reducing days spent in care.
6. Reducing repeat referrals to social care.

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<sup>7</sup> See Appendix 1: Case file analysis – DfE 7+7.

7. Reducing repeat referrals to MARAC.

## **The impact of Growing Futures on services and service delivery**

### **Changes to services**

Overall, there is evidence from qualitative consultation and our review of case files to suggest that the primary change to services which has been 'mainstreamed' post Growing Futures funding period is the role of DANs. This indicates that there has been a sustained change to services. There is also evidence from our review of case files that the Signs of Safety approach has been fully embedded in practice as well as a more consistent use of a whole family approach to supporting families where DVA is a factor.

When asked which aspects of Growing Futures had been sustained, DANs, social care staff and stakeholder interviewees tended to focus primarily on the retention of the DAN role. This is corroborated by the case file review which showed that in the cases where a DAN was involved post funding period (half of our sample) that they played a central role in the assessment, planning, implementation and case closure stages of a family's support.

Additionally, DANs, social care staff and stakeholders noted that the location of DANs had changed since the end of the funding period. Previously DANs were co-located with social work teams in the community. They have now been moved to an office and are based with police. Individuals who were interviewed had mixed views about the change in location. For some the move meant that DANs were more cohesive as a team, and better able to work collaboratively with other services in the building such as the Child Sexual Exploitation (CSE) team, and the DCST 'front door'. However, others suggested that DANs had been more accessible and visible when they had been located with teams in the community.

Individual DANs and social care staff identified several other aspects which continued after the Growing Futures period came to an end. These included DANs providing training for social care staff on completing DASH assessments and DANs delivering lunchtime training seminars for staff on topics related to DVA, and the 'Getting On' programme. Whilst DANs and social care staff reported that the 'Getting On' programme had continued, our review of a small sample of case files indicates that in these cases it was not an intervention commonly used by DANs either during or after the Growing

Futures period, with no evidence that they had referred young people to it.<sup>8</sup> However, this is perhaps to be expected; the 'Getting On' programme is designed to support families where there is evidence of teenage to parent abuse post separation of parents and after there has been a period of family stability. Referrals would therefore more likely come from Early Help as opposed to DANs, who in the main support domestic abuse in the adult relationship.

Analysis of case file reviews also indicates that the Signs of Safety approach has continued to be embedded in practice after the funding period ended, suggesting that this is a change to services which has been sustained. For example, analysis of the case files we received shows that before Growing Futures, the Signs of Safety approach was only used at the assessment and implementation stage in a small minority of cases, whereas this increased to the majority of cases in the 'during' and 'after' case files.

### **High intensity and consistency of practitioner**

High intensity and consistency of practitioner was identified as one of the DfE's 7 practice features. Case file analysis suggests a reduction in the intensity and consistency of practitioner after Growing Futures compared with the Growing Futures period. Qualitative consultation indicates that this might be due to reduction in the size of DAN workforce, although DANs were still reported to be delivering high levels of support.

During the Growing Futures period, DCST had planned to have 12 DANs. 10 were ultimately employed. After the Growing Futures period, the number was reduced to 4. Case file analysis suggests that in most cases there was only partial evidence of a high intensity and consistency of practitioner. This is an area which perhaps requires further exploration as there is not enough evidence to confidently link a reduction in the number of DANs to changes in levels of intensity and consistency of practitioner.

### **Systemic theoretical models**

Systemic theoretical models were also identified as a practice feature by the DfE. There is evidence that DANs are continuing to support the whole family via a range of interventions, showing that support is being put in place for victims, perpetrators and children.

Stakeholders reported that an aspect of the Growing Futures programme which has been maintained is the use of perpetrator programmes. These are now delivered by a

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<sup>8</sup> We reviewed a sample of 20 'during' and 10 'after' case files so it would not be fair to assume that the 'Getting On' programme was not being utilised as our sample is by no means representative. For example, in the case files we reviewed many of the children were not teenagers. As such appropriate caution should be applied to this finding.

Community Rehabilitation Company (CRC) to local authorities across South Yorkshire. This is also evidenced through case files, where we observed that in a minority of cases, as part of the DAN work perpetrators were referred to perpetrator programmes during and after the Growing Futures period. This was not the case before the programme.

Similarly, our analysis of case files shows a distinct change from focusing on supporting the victim and their children to supporting the perpetrator and wider family members too during and after the Growing Futures funding period, compared with case files from before.

## **Changes to service delivery**

DANs, social care staff and stakeholders commented on the reduction in the number of DANs after Growing Futures funding concluded. The majority reported that the remaining DANs were still able to provide a high level of support. However, a minority of stakeholders reported that this reduction meant that they were able to support fewer families, as DANs were then only able to focus on supporting families who have reached the high-risk threshold, while previously there had been scope for them to support slightly lower risk families. However, stakeholders reported that it was never the case that DANs would support lower risk families; rather, other professionals would be upskilled to be able to use a whole family model of working which could be applied to lower risk families. Therefore, better communication surrounding the role of DANs perhaps needs to be re-emphasised to stakeholders. A small number of staff and stakeholders also reported waiting lists for DAN support. However, this appears to be linked with a period when there was a vacancy within the DAN team, bringing their number down to 3, and it improved after the fourth position was re-filled.

DANs explained that the way in which they support families has not changed since the end of Growing Futures. The largest development has been in the level of experience and confidence in the team (some DANs having been in the role for up to 4 years). DANs, social work staff and stakeholders also reported that since the end of the Growing Futures period, the level of knowledge and confidence of other practitioners in understanding domestic abuse and supporting families has also increased. This was frequently attributed, at least in part, to the work of the DANs.

Review of the case files also suggests that the implementation of the DAN role has meant that the whole family approach to working has been sustained since the end of the Growing Futures period.

# The impact of Growing Futures on practice

## Practice features identified in Round 1

This section presents evidence found in this evaluation of 5 of the practice features identified in the first round of the DfE's Innovation Programme evaluation report. The following are evaluated: strengths-based practice frameworks, multi-disciplinary skill sets, family focus, skilled direct work and group case discussion. The other 2 features, high intensity and consistency of practitioner and systemic theoretical models, are addressed above in *The impact of Growing Futures on services and service delivery*.

### Strengths-based practice frameworks

A strengths-based practice framework is one which includes a widely owned and well-defined set of values and theoretical principles that underpin all work with young people and their families.

There is clear evidence of DCST practitioners having a shared framework of understanding through the system wide implemented Signs of Safety approach. Whilst Signs of Safety was not a Growing Futures activity it received funding at the same time and was implemented at a similar time. Stakeholders reported that Growing Futures supported the successful implementation of Signs of Safety, which promoted the use of strengths-based frameworks. This was evidenced via our review of case files, qualitative consultation and the E-survey.

Overall, the evaluation found that Signs of Safety has been embedded into working practices, with social care staff, DANs and stakeholders reporting it has successfully been embedded 'right across the Trust'. This was corroborated by our review of case files, with examples of Signs of Safety being used in supervision notes and case notes. Social care staff, DANs and stakeholders reported that, as a result of Growing Futures, there had been a real shift in behaviour and attitudes, and that there was now a strong focus on identifying strengths that may previously have been dismissed.

Furthermore, 11 of the 12 E-survey respondents who answered agreed or strongly agreed that Growing Futures had successfully improved the use of strengths-based frameworks. Similarly, 10 out of 12 agreed that this had been sustained since the end of the funding period.

Our review of case files indicates that Signs of Safety is still being actively used at the assessment stage and implementation stage of cases. This is different from the 'before' case files we reviewed, where whilst Signs of Safety was used in a minority of cases in the assessment of families, it was mainly used to look for Signs of Safety in the child and victim rather than also incorporating wider family members and the perpetrator into the process. Contrastingly, in the 'during' and 'after' case files reviewed, there are clear

examples of Signs of Safety being used in most cases. For example, Signs of Safety was used in child protection planning, in a DAN report to a child protection conference, and in case notes.

### **Multi-disciplinary skill sets**

Multi-disciplinary skill sets are a feature of practice when different professional disciplines with a range of skills and knowledge work consistently as a team to support families and make decisions together.

Overall, qualitative consultation suggests that the amount and quality of multi-agency working has improved as a result of Growing Futures. However, analysis of case files suggests that the quality of multi-agency working may not have improved either during or after the Growing Futures period.

The social care staff, DANs and stakeholders interviewed who commented on the topic reported that there was good multi-agency working across Doncaster. Some reported that this had generally improved as a result of Growing Futures, while others reported that multi-agency working was good regardless of Growing Futures. E-survey respondents largely agreed that Growing Futures had resulted in more aligned priorities between agencies both during (9 out of 12 respondents) and after the funding period (10 out of 12 respondents). In particular, DANs, social care staff and stakeholders commented on the fact that DANs are co-located with the domestic abuse service, and sit in the same building as the CSE team, police protecting vulnerable people team, and the referral and response and front door teams. They reported that DANs were well integrated with other practitioners within DCST. They also noted that the DANs were easy to contact for advice and support.

DANs and stakeholders reported that DANs attend pre-existing multi-agency meetings such as MARAC, and one stakeholder commented on the fact that training which has been developed partially or fully by the DAN team is provided across Doncaster to multiple agencies.

Analysis of case file reviews suggests that in all 3 periods evaluated, a number of agencies were involved in families' cases. There is evidence that the quality of multi-agency working had not consistently improved during the Growing Futures period or after it. Analysis suggests that in all 3 time periods, in the majority of cases multi-agency working was of adequate quality. There were slight improvements during and after the funding period within case files; for example, there were no instances of low-quality multi-agency working and a small minority of cases demonstrating high quality multi-agency working.

The one area which staff and stakeholders reported as a continued challenge was multi-agency working with the police. Some improvement was reported in working more closely

with police during the Growing Futures period. However, more recently, staff reported that the police had stopped attending meetings, and with the reduction in size of the DAN workforce, they did not have the capacity to keep close contact with police.

There is evidence from case file reviews and qualitative consultation that the use of multi-disciplinary skill sets has been sustained post Growing futures. For instance, the majority of DANs, social care staff and stakeholders who commented on whether the implementation of Growing Futures had resulted in development of multi-disciplinary skill sets within DCST responded positively. E-survey respondents were similarly positive. Generally, those interviewed focussed on the multi-disciplinary backgrounds of the DANs, and on how the DANs manager had focussed on providing training to support DANs to fill any gaps in their knowledge. A small number of DANs and social care staff reported that training provided by the DANs for others within the Trust had also extended the skill sets of other practitioners.

The analysis of case files suggests that multi-disciplinary skill sets have improved as a result of Growing Futures. For instance, most cases reviewed during the Growing Futures period showed evidence of the use of multi-disciplinary skill sets. This seems to have been sustained after the Growing Futures period came to an end, with all the 'after' Growing Futures period cases reviewed demonstrating either full or partial evidence of the use of multidisciplinary skill sets. This contrasts with the 'before' case files where in the majority of case files there was no evidence of the use of multi-disciplinary skill sets.

In case file reviews, the use of multi-disciplinary skill sets was primarily evidenced through meeting notes, case notes, the range of interventions used by DANs, the involvement of other agencies in a family's support and work with different members of the family.

## **Family focus**

Practice with a family focus is defined by practitioners working with the whole family to improve child outcomes. This was an area which was very well evidenced through qualitative consultation, case file analysis and E-survey responses, with social care staff, DANs and stakeholders all confident that Growing Futures had resulted in more family focussed practice within DCST.

The 'Whole Family Approach' model of working, which was implemented as part of the project, was described by one stakeholder as 'integral to everything [DANs] do'. This was supported by E-survey respondents, a majority of whom agreed or strongly agreed (11 out of 12 respondents) that Growing Futures had achieved and sustained its aim of introducing the Whole Family Approach. Both DANs and social care staff who were interviewed described how the Whole Family Approach had been successfully implemented and resulted in a shift in the way practitioners' approach domestic abuse.

For example, it supports practitioners to increase their confidence working with perpetrators (through training and shadowing) and with extended families.

One social worker explained how the development of the DAN role has enabled a more holistic approach to supporting families. Previously, high-risk cases would be allocated an Independent Domestic Violence Advocate (IDVA), who would focus on supporting the victim. The social worker suggested that DAN involvement complements this by ensuring there is a stronger focus on supporting children and perpetrators, and by linking adult and children's social care.

Our review of case files evidences a more consistent whole family model approach of working through the different stages of a family's support. For example, there was evidence of efforts to include wider family members as well as the perpetrator in the assessment stage. There was also evidence of a wide range of interventions being used with different members of the family, including perpetrator programmes. Case notes provided documented evidence of the child's wishes and feelings being considered as well as assessing the risk factors of both the victim and perpetrator.

There is evidence within case files that a whole family approach is more consistently being taken by all practitioners. In all 3 time periods (before, during and after), in the majority of cases reviewed, the assessment of families concentrated on ensuring that the victim and child are protected from the person causing harm through DVA. However, in the 'before' period there was less emphasis within assessments on the wider or extended family and community. In 'before' cases, the normal route of action was to make sure the perpetrator was no longer living in the family home and that the home had been secured (for example, with reinforced locks). In many cases, the perpetrator was not interviewed as part of the assessment process and in a minority of cases the risk that the perpetrator posed was not explained to the victim. There was also minimal evidence that other family members were involved in the assessment processes with grandparents only being included in a minority of cases.

Contrastingly, there is evidence in 'during' case files that the wider or extended family was more frequently considered in the family assessment. This is sustained in the 'after' case files. Examples include incorporating grandparents into the assessment process, including the wishes and feelings of children in the assessment, and highlighting key risk factors of both parents such as substance misuse. There was generally a greater emphasis on including the perpetrator in the assessment process.

According to social care staff, DANs, stakeholders and E-survey responses, the improved family focus seen during the Growing Futures period has been sustained since the programme came to an end. This is corroborated by our review of case files, where the whole family is more consistently considered in the assessment and intervention review stage.

Evidence is mixed at the planning stage, where in general there is a tendency to focus on safeguarding the child rather than considering the family as a whole. Case file analysis indicates that before Growing Futures, in the majority of cases there is only evidence 'to some extent' that planning considers the family as a whole. This contrasts with during Growing Futures, where 'to a large extent' there is evidence that planning considers the family as a whole. The picture is mixed in the 'after' period, where it is not clear whether planning considers the family as a whole.

However, in the other stages of the planning process it is clear from case file analysis that:

- As a result of Growing Futures, planning is more likely to result in a family support package being put in place. For instance, in the majority of 'before' case files reviewed, a family support package was not put in place. However, in the majority of 'during' and 'after' cases, it was.
- Planning is more likely to ensure that interventions are conducted in a way which ensures that victims and children are protected from the person causing harm during and after the Growing Futures period, compared with before the programme was introduced.
- Planning is also more likely to consider the wishes and feelings of the whole family when developing a plan as a result of Growing Futures. This is supported by case files where there is evidence 'to a large extent' in the majority of 'during' and 'after' case files that this is the case. In the cases before, there is evidence only 'to some extent'.

In the review of the interventions stage of supporting families where DVA is an issue, case file analysis indicates that the needs and progress of the family were more likely to be considered as a whole 'during' or 'after' the growing futures period. For example, the majority of case files reviewed in these two periods found evidence of this 'to a large extent' whereas there was only evidence 'to some extent' in the 'before' case files. In all three time periods reviewed where interventions had been put in place, there was evidence 'to a large extent' that:

- The views and preferences of the family are considered when reviewing interventions.
- The safety of the family is monitored throughout interventions.

In 'during' and 'after' case files there were examples of the victim's wishes being listened to and some evidence of the perpetrator being involved. There was also evidence that the perpetrator's contact with the family was monitored throughout interventions.

Finally, in all three time periods there is little evidence that decisions to close cases take a holistic view of the family's needs and whether these have been met. Examples where cases have not included the whole family in case closures are as follows:

- Cases being closed after limited direct work with children.

- Cases being closed when no visits have been undertaken to check how supervised contact is progressing.
- Children not having access to a DAN intervention because a parent had failed to cooperate with the intervention.

Further improvements regarding a more family focussed approach at the point of case closure could therefore be made. It should be noted that this was also a common theme before and during Growing Futures.

### **Skilled direct work**

Programmes enable staff to do skilled direct work through providing the right training, coaching and supervision to enable social workers and practitioners to deliver higher quality direct work. This evaluation provides a wealth of evidence to show that the introduction of Growing Futures had a positive impact on skilled direct work, and that this has been sustained post Growing Futures.

For instance, all the social care staff, DANs and stakeholders interviewed reported that Growing Futures had had a positive impact on the use of skilled direct work. The work of DANs with perpetrators, adult victims and children was particularly praised. DANs and social care staff noted that DANs had access to training and research which ensured that they were highly skilled. They also brought a range of skills to the role; for example, two of the DANs are qualified family therapists. Two social care staff also reported that their practice had improved as a result of shadowing and co-working cases with DANs.

A minority of social care staff also reported that their skilled direct work had improved as a result of training which was provided during through Growing Futures funding or had been provided by DANs since then.

Analysis of case files indicates that as a result of Growing Futures, there was an increase in the types of skilled direct work taking place with the whole family. Evidence suggests this has been sustained after the funding period. For example, DANs implemented a mixture of psychoeducational and psychotherapy interventions. The most popular interventions in the cases reviewed during Growing Futures included: emotional literacy, Solihull parenting, techniques from counselling, Cognitive Behavioural Therapy (CBT), solution-focussed therapy and collaborative therapy. After the Growing Futures period ended, the most commonly used interventions were Caring Dads, Solihull parenting, counselling, mindfulness and solution-focussed therapy. The review of case files shows that a range of interventions continued to be used after the Growing Futures period.

### **Group case discussion**

Undertaking group case discussion is described as teams discussing and making decisions collectively, within a context of clear shared approach to practice, including

multi-disciplinary team input. Overall, views on whether group case discussion increased and was sustained as a result of Growing Futures were mixed.

DANs reported positively that there were fortnightly case discussions and case mapping sessions within the DAN team. Outside the DAN team there was less consensus, with around half of social care staff and stakeholders reporting that group discussions had been in place previously, or that they had not seen evidence that their usage had increased or changed as a result of Growing Futures. Around half reported that group case discussion was more frequent than before the Growing Futures period; however, there was no consensus about whether this was the result of Growing Futures.

Similarly, E-survey responses were fairly positive with 8 out of 12 respondents agreeing or strongly agreeing that Growing Futures achieved its aim of improving the use of group case discussions, and 7 out of 12 thought that this had been sustained since then. The remainder disagreed or strongly disagreed.

The review of case files suggests that group case discussions were more frequent during and after the Growing Futures period, compared with before the programme was implemented. There was no evidence in the majority of case files from before the Growing Futures period that any group case discussions were taking place. In contrast, case files reviewed from the period during and after Growing Futures suggest that group case discussions were taking place, especially around CIN and CP cases.

## **Further practice features**

### **Quality of decision making**

As part of the case file review, we explored the quality of decision making throughout a family's engagement with DCST and how the impact of Growing Futures may have led to sustained impacts in this area.

In general, decision making was 'well evidenced' in the majority of cases after the Growing Futures period came to an end, at the planning of interventions stage, the implementation stage and the review of intervention stage. For cases where decision making was 'well evidenced' common features included:

- Managerial oversight.
- A clear audit trail.
- Recognition of different risks for different family members and consideration of the whole family in general.
- Evidence of step-down planning or child protection planning.
- Evidence of safeguarding measures.

In the majority of case files reviewed, decision making as part of the children's social care assessment was 'partially evidenced' with a minority of 'after' cases being 'well evidenced'. Decision making around case closures was not very well evidenced with only a minority of 'after' cases being 'well evidenced'.

In the majority of the 'during' Growing Futures case files that we reviewed, decisions were 'well evidenced' at all stages of a family's support (assessment, planning, implementation, review of interventions and case closure). In the 'before' case files the quality of decision making was varied with some cases concluding with 'no further action' when there remained a potential risk to the family.

The main concern flagged in the case file review of the 'after' cases was that there was information missing that could significantly impact on the quality of assessment and decision making. This contrasts with the 'during' case files where in the majority of cases it was not reported that any information was missing.<sup>9</sup>

## **Referral pathways**

At the time of the previous evaluation, DANs and professionals from allied services reported that while work had taken place to define the DAN role and referral pathways, there was still potential to improve referrers' understanding of how DANs could provide support, and how to refer into the DAN service. Interviews with DANs, social care staff and stakeholders suggest that this has improved in the last two years. The majority of DANs and social care staff were confident that they could describe the process for referring cases to DANs, as well as how lower risk cases involving domestic abuse could be referred to other services. In cases where stakeholders and social care staff were less certain about the exact process (often because they did not personally hold cases), they were confident that the information necessary was available on the DCST intranet, or that they could speak with the DAN manager to discuss the referral process.

Social care staff and stakeholders also praised the work of the DANs, as they were still seen as approachable and happy to discuss cases and offer guidance even when their referral threshold was not met.

## **Working culture**

A handful of social care staff and DANs reported that when their role was initially introduced there had been some challenges in integrating into the Trust. In particular, there were challenges within the management of the DAN team, and a degree of scepticism among existing practitioners about the extra value that the DANs brought. However, in all cases, the social care staff and DANs reported that the working culture

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<sup>9</sup> However, this finding should be interpreted with caution due to the small case file review sample size.

had improved significantly. They reported that as DANs have developed their knowledge and skills, and built relationships with other practitioners, they have become a valued part of the team. They also noted that changes within the structure and management of the DAN team since the Growing Futures period had had a positive effect. This is linked to DANs moving from co-location with social work teams in the community to being based with the police. This has led to the DANs being more cohesive as a team, and better able to work collaboratively with other services in the building such as the CSE team and the DCST 'front door'. In addition, since the Growing Futures period the size of the team reduced which meant a level of middle management was no longer needed. A stakeholder reported that this change in management led to greater accountability and stability for the team.

## **The impact of Growing Futures on children and families**

Whilst this evaluation primarily focuses upon outcomes achieved since the end of the funding period, we have also collected data on families' and children's outcomes prior to and during Growing Futures, helping us identify whether involvement with Growing Futures has had a sustained impact on children and their families.

The Round 1 evaluation report by Opcit Research identified a number of key impacts of Growing Futures:<sup>10</sup>

- Indication that there had been a reduction in repeat referrals to MARAC.
- Indication that the number of Looked After Children (LAC) cases in which DVA was an issue had reduced.
- A reduction in the proportion of cases of CIN where DVA was a factor.
- An increase in the number of specialist DVA risk assessments indicating a greater consistency of good practice.
- Families feeling that their wishes and concerns had been listened to and there was greater consistency of practitioner as a result of the whole family approach to working.
- Multiple benefits for the family from the implementation of the DAN role.

We were not able to report upon whether all these outcomes were sustained, due to the fact that different data were collected. For example, we were not able to explore whether there was a reduction in repeat referrals to MARAC or a continuing reduction in LAC cases where DVA was an issue.

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<sup>10</sup> The evaluators of the initial evaluation exercise caution in interpreting these findings arguing that reductions in these figures may be caused by confounding factors that are not attributable to the project.

## Practice outcomes identified in Round 1

This section presents evidence found in this evaluation of the practice outcomes identified in the first round of the DfE's evaluation report. 6 outcomes are discussed in this section: reduced risk, greater stability, increased wellbeing and resilience for children and for families, re-referral to social care, and re-referral to MARAC. The final outcome, number of children admitted to care, is not included, as evidence in this area from Growing Futures was inconclusive.

### Greater stability for children

There is mixed evidence regarding whether support as a result of Growing Futures has created greater stability for families after the funding period. Qualitative consultation suggests that Growing Futures has had a sustained impact on creating stability for children who had experienced DVA.

However, although the majority of 'during' case files provided good evidence of greater stability for children, this did not increase in the 'after' period, where only a minority of case files provided good evidence of this. However, there was still full or partial information in the majority of 'after' case files to suggest evidence of greater stability. This is an improvement compared with the 'before' period, where there was no or only partial evidence that this had been achieved.

Examples of evidence of greater stability in 'after' case files included:

- Children's school reporting differences in child's behaviour and attainment.
- Children being moved to live with grandparents or becoming looked after to provide greater stability in their lives.
- Children showing that they are much happier and more engaged at school or pre-school.

These findings should be interpreted with caution, given the small sample of case files reviewed.

In all cases, social care staff and DANs reported that Growing Futures had a lasting impact on creating stability for children who had experienced DVA. All of the stakeholders who felt able to comment on this also agreed that Growing Futures had helped create stability for children. Similarly, 12 of 13 E-survey respondents reported that Growing Futures continued to impact on creating greater stability and reducing risk for children.

DANs and social care staff suggested that there were 3 main aspects of Growing Futures which were having a lasting impact. First, the continuation of the DAN role ensured there were practitioners who could build relationships with families over time, and support safety planning. Second, linked to this, the practice of other professionals who work with

children affected by domestic abuse has also developed as a result of Growing Futures, both because of the training provided and because they are able to speak with DANs for advice and guidance. Third, the introduction of the Whole Family Approach has enabled practitioners to take a more holistic and flexible approach to supporting families, for example, looking at whether a perpetrator's family members may be able to look after a child rather than taking them into care.

Stakeholders also reported that the DAN role had been particularly impactful in creating greater stability. However, a minority of stakeholders noted that the DAN work was primarily with families at high risk and suggested that it would be valuable to focus on creating stability for families at the lower risk end of the spectrum too, in order to avoid escalation.

### **Reduced risk for children**

In general, evidence from consultation with stakeholders, case file reviews and data suggest that there has been a reduction in risk for children and their families, and that to a certain extent this has been sustained post funding period. Reasons for a reduction in risk were attributed to the whole family way of working and the role of DANs.

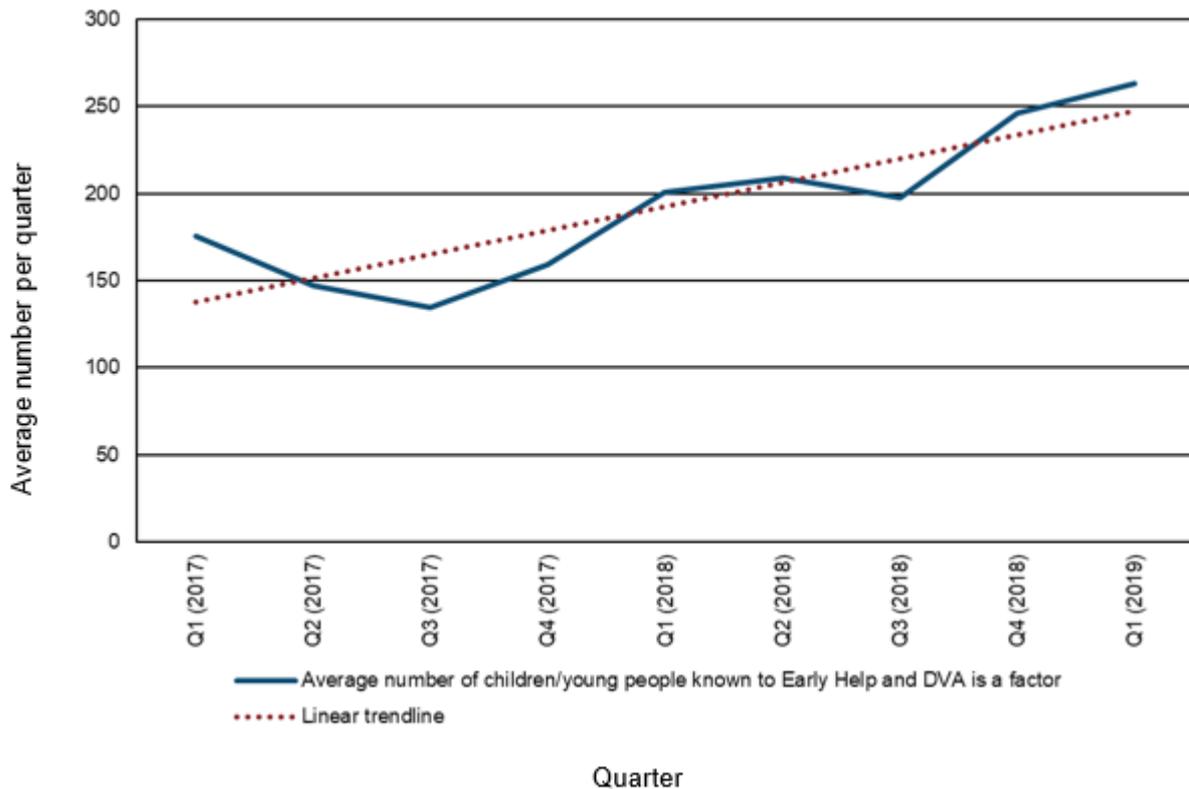
For instance, as part of the case file review we looked at the status of children before and after the DVA related intervention, to explore whether risk had been reduced effectively before, during and after the Growing Futures period. As our case file sample does not track the same families through the 3 periods and the sample is random it is difficult to comment on whether risk has been reduced from this part of the case file review. Our observations are:

- In the 'before' case files reviewed, the majority of cases were not known to DCST before the DVA related intervention took place, and the majority of these cases were closed after the DVA related intervention took place.
- In the 'during' case files, only a minority of cases were not known to DCST before the DVA related intervention took place. This perhaps shows an improved awareness and reporting of DVA incidents.
- However, this was not sustained in the 'after' case files where there seems to have been a rise in the number of children not known to DCST before the DVA intervention takes place, as shown in the majority of cases.
- There is little change between the number of children subject to a CIN plan or CPP either before or after the DVA related intervention took place in any of the three time periods analysed.

Monitoring data corroborates some of these observations. It shows that the average number of CYP known to Early Help where DVA is a factor increased between Quarter 1 2017 (January-March) and Quarter 1 2019 (January-March). This again suggests some

reduction in risk through more children/young people becoming known to social services (Figure 1).

**Figure 1: Average number of children/young people per quarter<sup>11</sup> known to Early Help and DVA is a factor**



Source: DCST monitoring data

There was a reduction in risk for children in families who received support from DCST and other agencies during the Growing Futures period, as evidenced in the majority of case files. Similarly, there is evidence that this reduced risk has been sustained after the Growing Futures period. Evidence of reduced risk in both the 'during' and 'after' case files included:

- Evidence of support for both the victim and perpetrator to prevent further domestic abuse.
- Evidence of the family working with agencies such as social care to reduce the prevalence of risk factors such as substance misuse.

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<sup>11</sup> The quarterly average is based on monthly numbers of young people known to Early Help and where DVA is a factor.

- Children becoming looked after or going to live with other family members for safeguarding purposes.
- Evidence of risks being explained to the victim who shows evidence of being able to identify these risks.

In the majority of 'before' case files, there was little evidence that as a result of support received from DCST and other agencies referred to by DCST that risk for the child had been reduced.

As part of the case file analysis, we also looked more specifically at the case closure process. This indicates whether cases were being closed after there had been a full attempt to gauge the risk levels posed to children and their families, both through a DASH risk assessment and the implementation of a clear step-down plan involving other agencies. In general, these processes were best implemented during the Growing Futures period compared with before and after. Analysis of the 'before' case files show that in none of the cases was a DASH risk assessment completed at any point during the family's involvement with DCST, and there was no clear step-down plan in place which involved other agencies in the majority of cases.

In the majority of 'during' case files, a DASH assessment was completed either at case closure or at a previous point in the family's engagement. Unfortunately, this does not seem to have been sustained after the Growing Futures period; in the majority of cases reviewed, a DASH assessment was not used at any point and none were completed at case closure. In the majority of 'during' and 'after' cases, there was still no clear step-down plan involving other agencies. However, there were a few case files where a plan was put in place compared with the 'before' case files.

All the DANs, social care staff and stakeholders interviewed who felt able to comment on Growing Future's impact on reducing risk for children reported that the project has had a lasting positive impact. E-survey respondents were also largely positive: 12 out of 13 agreed or strongly agreed that Growing Futures continued to impact on increased stability and reduced risk for children. The primary reasons that individuals considered Growing Futures to be impactful were that it increased the focus on working with families and particularly perpetrators, and increased practitioners' confidence to work with perpetrators.

The focus on perpetrators is corroborated by the E-survey, with 10 of 13 respondents either agreeing or strongly agreeing that the 'whole family approach' adopted as part of Growing Futures had a positive impact on outcomes for perpetrators during the funding period. Furthermore, the majority of E-survey respondents either strongly agreed or agreed that the Whole Family Approach continued to have a positive impact on perpetrators after the Growing Futures period. Two stakeholders also noted that alongside Growing Futures a perpetrator programme, Foundation 4 Change, was a

valuable avenue to support perpetrators to change as part of the Whole Family Approach. Since Growing Futures has concluded, Foundation 4 Change has been rolled out across South Yorkshire under the name Inspire to Change. This avenue is therefore still available.

One social worker explained that working with perpetrators is now seen as much more important, while another described how previously practitioners had been less proactive about this, for example, being less focussed on chasing if it was difficult to contact them. Social care staff and DANs explained that engaging with perpetrators helped reduce risk for children, because it enabled practitioners to have a more realistic and up to date understanding of the level of risk so that they could act accordingly. It also enabled them to engage with perpetrators to understand their behaviour and potentially access perpetrator programmes or other support. Similarly, building honest and open relationships with families enabled practitioners to assess and manage risk more realistically.

Social care staff and DANs described how practitioners within DCST had become more confident engaging with perpetrators. DANs and social care staff were described as co-working cases together very effectively where additional expertise was required. A stakeholder also explained that all of the domestic abuse training in DCST and the Community Safety Partnership is multi-agency, meaning that individuals throughout the trust had access to domestic abuse training which considered the Whole Family Approach, and put a focus on working with perpetrators, which had increased confidence and competency for some individuals.

In addition, one DAN noted that DCST have changed their approach to working with families, including working with families who want to stay together. They noted that with effective safety planning they were able to support families to stay together, which could reduce risk that is often highest post-separation. Stakeholders also reported that work with both parents enabled them to better understand the impact of domestic abuse on their children.

### **Increased wellbeing and resilience**

There is mixed evidence regarding whether support as a result of Growing Futures has created sustained wellbeing and resilience for children and their families after the funding period. All the DANs, social care staff and stakeholders who commented reported that Growing Futures had a lasting impact in increasing the wellbeing and resilience of children and young people affected by DVA. The majority of E-survey respondents also reported that Growing Futures continued to impact in supporting recovery and reducing emotional harm for children and young people.

The majority of 'after' case files provided full or partial evidence of improvement in the wellbeing of children compared with before the Growing Futures period where there was either no or only partial evidence that there had been an increase in wellbeing and resilience for children and their families.

In particular, individuals praised the quality of the DANs therapeutic work with children, and again highlighted the value added by having a role outside of the social work team that could provide more intensive support over a longer period, building up trust with families and personalising support to fit their needs. They also highlighted the DANs role in listening to children and working with them to understand healthy and unhealthy relationships. One stakeholder reported that the children who had received support from DANs have shown improvement in social relationships and behaviour in school. One DAN noted that the ways in which DANs were positively impacting on children's wellbeing and resilience was more related to having high quality practitioners, which could be DAN's family support workers, or social care staff, rather than the DAN role itself.

Social care staff and DANs also reported that the Whole Family Approach meant that work with parents had a positive impact on children's wellbeing and resilience because they focussed on strengthening families which wanted to stay together, or supporting victims to avoid future unhealthy relationships if they chose to separate.

### **Reducing days spent in state care**

The majority of DANs, social care staff and stakeholders interviewed did not feel that they could confidently comment on whether Growing Future's legacy was impacting on the number of days children spent in care. In one case, a DAN suggested that figures relating to this were not shared with staff, and it would be valuable to have more information. Responses from DANs, social care staff and stakeholders who commented suggest that the issue remains complex, as it did during the first evaluation.

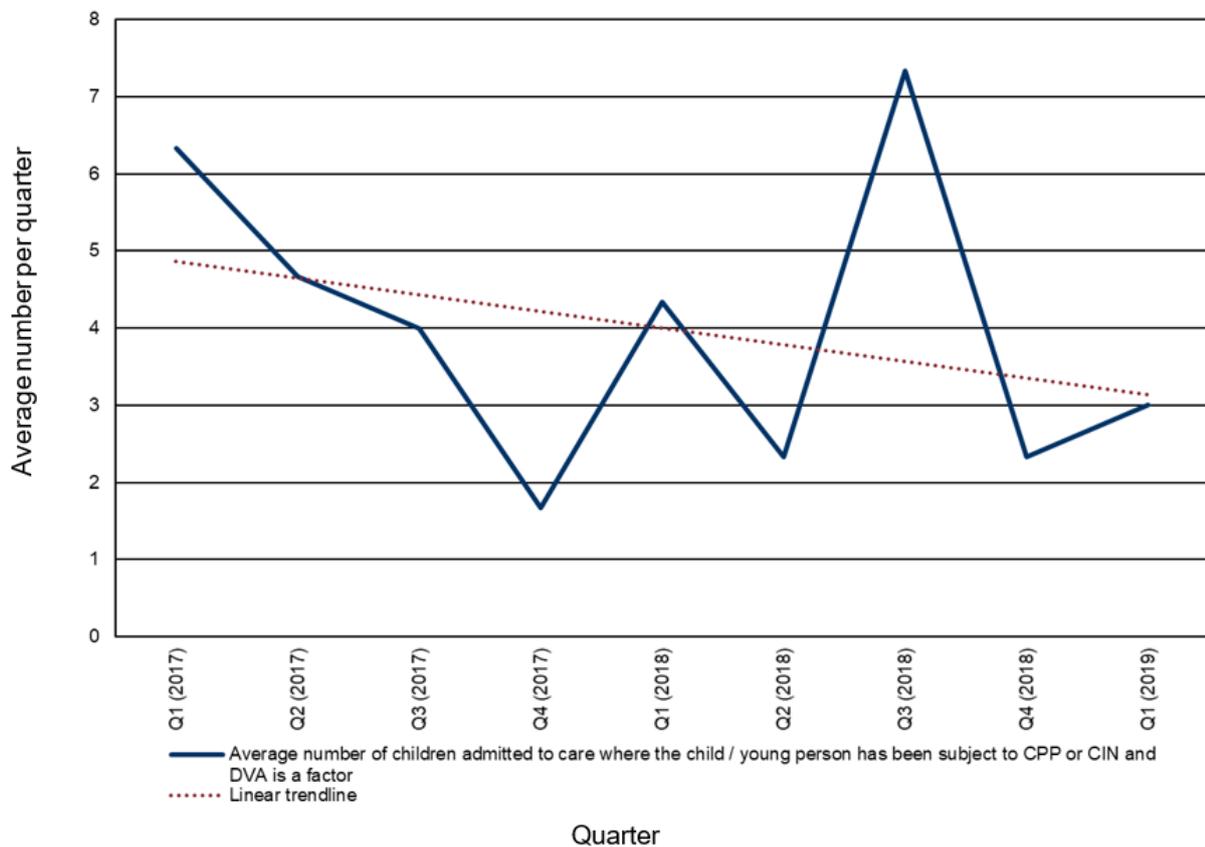
A small number of interviewees were cautiously optimistic that the work of DANs in particular reduced the number of days spent in care by children who directly received DAN support. One also noted that DCST had become better at making decisions faster and in a multi-agency way, which could reduce risk for children earlier on. However, 2 noted that changes to practice which resulted from Growing Futures could result in more days in care, because of risk being more accurately identified. Another also highlighted that DCST is still dealing with the legacy of previous approaches, which will impact on the number of days spent in care.

E-survey respondents were also less confident about the ongoing impact of Growing Futures on days spent in care and the number of children in care than any of the other

outcomes. In both cases, around half who responded reported that Growing Futures had an impact, while half disagreed or reported that they did not know.

The uncertainty surrounding the impact of Growing Futures on days spent in care is reflected in monitoring data available about the number of children admitted where the child/young person has been subject to CPP or CIN and DVA is a factor (this is for all children admitted to care, i.e. not just those supported by Growing Futures). Figure 2 shows that there were significant fluctuations in this number between Q1 2017 (January to March) to Q1 2019 (January to March), suggesting that it is not possible to say with confidence whether there has been a reduction in the number of children being admitted to and spending time in care.

**Figure 2: Average number per quarter<sup>12</sup> of children admitted to care across DCST where the child/young person has been subject to CPP or CIN and DVA is a factor**



Source: DCST monitoring data

<sup>12</sup> The quarterly average is based on the monthly number of children admitted to care where the child/young person has been subject to CPP or CIN and DVA is a factor.

## Reducing the number of repeat referrals to social care

There is mixed evidence regarding whether Growing Futures led to a reduced number of repeat referrals to social care where DVA is a factor. For example, monitoring data and our review of case files does not provide conclusive evidence that there has been a sustained reduction that can be attributed to Growing Futures. Furthermore, in qualitative consultation, the majority of those interviewed felt unable to comment on this outcome measure. However, E-survey respondents who answered the question reported that Growing Futures had a positive impact. 8 out of 13 respondents either agreed or strongly agreed that Growing Futures had led to a reduction in repeat referrals both during and after the programme came to an end.

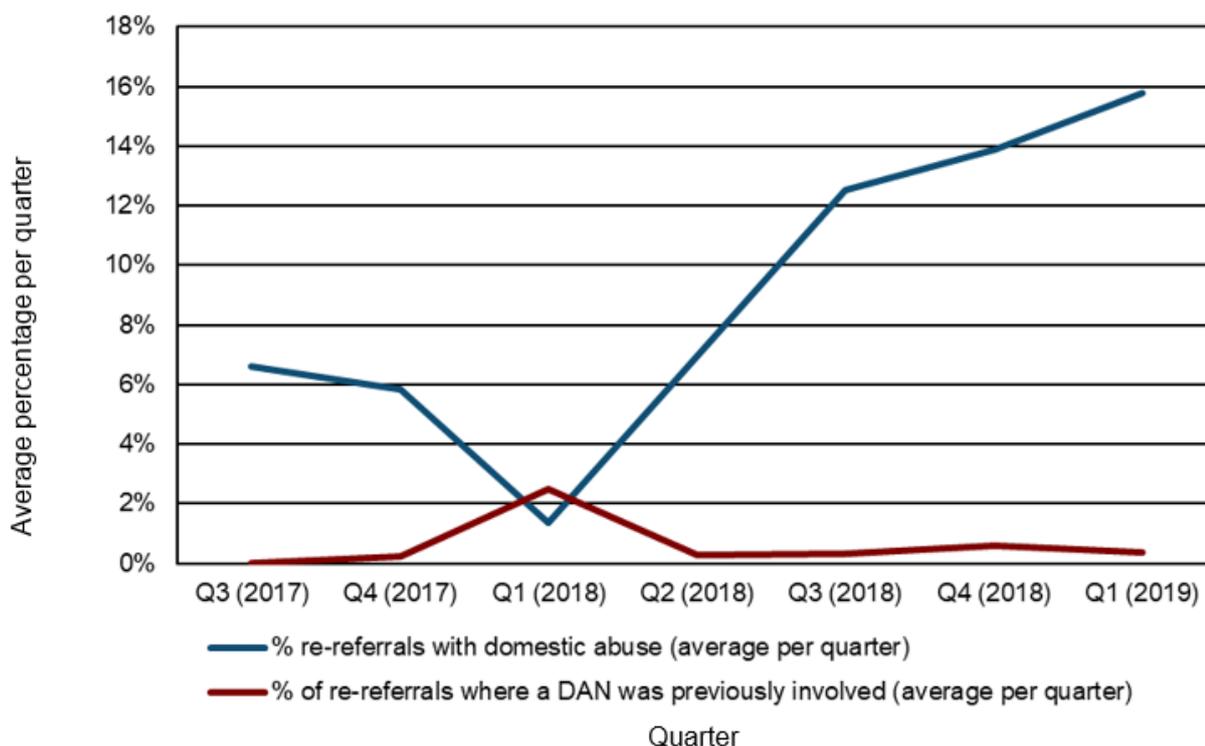
Analysis of case files indicates that a majority of 'after' case files reviewed were re-referred to social care, with a minority not being re-referred. While this marks a distinct departure from the decreases in re-referrals to social care during the Growing Futures period (a majority 'of during' case files were not re-referred to social care), it is still better than the 'before' period where all cases reviewed were re-referred.

The majority of DANs, social care staff and stakeholders interviewed were unable to comment on the impact of Growing Futures on repeat referrals. However, the majority of E-survey respondents who answered the question reported that Growing Futures had a positive impact. One individual involved with DANs reported that the re-referral rate to social care for cases where a DAN was involved was far lower than the average within DCST. However, they noted that the re-referral time period was 12 months, whilst DAN involvement may last longer than this, affecting the re-referral rate. Using data to track referral rates within 12 months after DAN case involvement ceases could provide a helpful source of information.

Monitoring data shows that repeat referrals to children's social care where DVA is a concern fell between Q1 2017 to Q1 2018, although they then rose between Q1 2018 and Q1 2019 2019 (Figure 3), making it difficult to comment on a trend. Figure 3 also shows the percentage per quarter of re-referrals to children's social care where a DAN was previously involved. This suggests that between Q1 2017 to Q3 2019 the percentage of re-referrals to children's social care which had previously involved a DAN remained low (less than 2.5%) but that this rose rapidly at certain points and was lower than the general percentage of repeat referrals to children's social care.

However, as mentioned, this might not be a fair comparison due to the referral time period and the fact that we do not know the size of the DAN caseload. This is corroborated by a minority of DANs and social care staff, who reported that in cases where there was DAN involvement the re-referral rate was significantly reduced. However, they highlighted that this makes up a small portion of cases involving domestic abuse which are referred to DCST.

**Figure 3: Percentage per quarter of re-referrals to children's social care where DVA is a concern compared repeat referrals where a DAN was involved**



Source: DCST monitoring data

### Reducing the number of repeat cases to MARAC

The majority of E-survey respondents (10 out of 13) agreed or strongly agreed that Growing Futures continued to have an impact on reducing re-referrals to MARAC. Around half of the DANs and social staff and a minority of stakeholders interviewed agreed. However, a large portion reported that they either didn't know, or were not aware of evidence supporting this.

Analysis of 'after' case files shows that no cases were re-referred to MARAC. However, it would not be appropriate to draw conclusions from this due to the small sample size.

### Other outcomes

#### Ongoing impact on children and families

In interviews with DAN's, social care staff and key stakeholders we explored whether or not they had witnessed any ongoing impacts for families who had received support during the Growing Futures period. The majority of DAN's, social care staff and key stakeholders interviewed reported that they could not confidently report on the ongoing impact of Growing Futures on families who received support during the funding period of Growing Futures.

A small number of social work staff and DANs who had worked more directly with families reported that only a few cases had returned needing further support (for example, being re-referred to MARAC). They attributed the success of the DAN work to their ability to build up trust over a longer period of time and their holistic approach to working with the whole family rather than previous approaches which focussed on working with individuals in isolation. A minority of social work staff and DANs also praised the quality of safety planning and risk management undertaken by DANs reporting that it was now more effective.

### **Improving support for victims**

The majority of E-survey respondents reported that Growing Futures continued to reduce repeat victimisation (9 out of 13) and support recovery (11 out of 12). However, a minority of respondents disagreed or strongly disagreed in both cases.

DANs, social care staff and stakeholders who commented on the impact of Growing Futures on adult victims who have received support since the end of the Growing Futures period were very positive. They noted that the implementation of the Whole Family Approach had a positive impact on the way in which practitioners work with adult victims. They described the service as 'victim focussed' and noted the value of engaging victims on their own terms, without placing responsibility for safeguarding children solely on them. Respondents to the E-survey also largely thought that the whole family approach had had a positive impact on victims during the Growing Futures period, and that Growing Futures had supported victims' recovery from domestic abuse.

## 7. Limitations of the evaluation

The following evaluation limitations should be considered:

- **Lower than expected engagement with the E-survey.** As discussed above, there were challenges in engaging stakeholders to complete the E-survey. When the low response rate was identified two approaches were taken. First, reminder emails were sent to the identified participants. Secondly DCST sent additional emails highlighting the importance of the evaluation. However, response rates remained low. We would suggest that because Growing Futures is no longer 'front of mind' for busy stakeholders, completing the survey was not prioritised.
- **The attribution challenges.** As part of this study we have conducted analysis of how key performance measures relating to domestic abuse have changed over time. However, caution should be taken in interpreting these findings. This is because factors other than Growing Futures may also have impacted on outcomes. Additionally, the time period covered is relatively short (January 2017-March 2019) and subject to fluctuation month by month.
- **Comparison with the initial evaluation.** As mentioned throughout this longitudinal follow-up evaluation, it has been difficult to make direct comparisons with the initial evaluation, as different methodological approaches were taken, and different monitoring data was provided. However, we have tried to overcome this through qualitative consultation where we asked different stakeholder groups questions about sustained change. Also, in the case file review we analysed cases from before, during and after growing futures to try and determine if any change as a result of Growing Futures had been sustained.
- **Caution about the representativeness of the review of case file review.** As part of this evaluation we conducted a case file review of 39 cases. This included 9 in the period before Growing Futures and 10 after the Growing Futures period.<sup>13</sup> This provided rich qualitative information and real insight for the evaluation. However, due to the small sample sizes involved, caution should be applied in interpreting and generalising findings based on this review.

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<sup>13</sup> We had planned to review 10 'before' case files but one of the cases provided had started before Growing Futures and then continued into the Growing Futures period so could not be included in the analysis.

## 8. Implications and recommendations

The evidence gathered for this evaluation suggests that certain key elements of the Growing Futures programme have been sustained and continue to have positive impacts for children and their families:

- **Whole family working.** As found in the initial evaluation, it was reported by stakeholders, DANs and social care staff that this model of working enhances professional's capacity to develop in-depth understanding of the family's problems and support them to change entrenched behaviours and attitudes which result in DVA. There is evidence from consultation with stakeholders, DANs and social care staff as well as the case file review that there has been a real cultural shift away from traditional approaches to domestic abuse, where the victim is supported and the perpetrator removed from the home, to supporting all members of the family.
- **The DAN role.** Based on evidence from interviews with stakeholders, DANs, social care staff and the review of case files, the continuation of the DAN role has supported widespread implementation of the whole family model of working across DCST. This is as a result of their direct work with families (including perpetrators) which allows them to build up trust with families and deliver interventions which suit their needs. There is also evidence to suggest that the DANs' multidisciplinary backgrounds have provided training opportunities for social care staff and extended the skills of other practitioners.
- **Signs of Safety approach.** The widespread adoption of the Signs of Safety approach across DCST has been viewed by stakeholders as a positive legacy from the Growing Futures period as it ensured that there is a common set of values which all practitioners can adhere to when working with children and their families.
- **Multi-agency working.** In the initial evaluation there was evidence that some efforts had been made to improve multi-agency working but work was still needed to bring clarity to referral pathways, service protocols, models of working and risk sharing. There is evidence from interviews with stakeholders, DANs and social care staff and the review of case files that two years on this continues to develop and improve. However, work needs to be done to maintain the quality of multi-agency working especially with the police.

The sustainability of the Growing Futures model will depend upon adequate funding of the DAN role as evidence from this evaluation suggests that this is a critical element of the approach.

## Recommendations

The table lists a number of key recommendations:

Recommendation	Evidence
<p><b>Recommendation 1.</b> DCST should consider reviewing resourcing of its Domestic Violence and Abuse (DVA) response in the light of the evidence within this study and consider the positive impact that preventative work with lower risk cases could have in this area.</p>	<ul style="list-style-type: none"> <li>• In-depth interviews with key stakeholders</li> <li>• In-depth interviews with DANs</li> <li>• In-depth interviews with social care staff</li> </ul>
<p><b>Recommendation 2.</b> Continuing professional development for DANs should be planned and resourced to ensure continuation of skilled direct work. Training for practitioners working alongside DAN's should also be considered in order to grow knowledge and skills across all professionals working with DVA. Space should continue to be carved out for DAN professional development so skilled direct work can remain of high quality. This might also be beneficial for other practitioners who can learn from DANs.</p>	<ul style="list-style-type: none"> <li>• In-depth interviews with key stakeholders</li> <li>• In-depth interviews with DANs</li> <li>• In-depth interviews with social care staff</li> <li>• Case file review</li> </ul>
<p><b>Recommendation 3.</b> Recording by social workers and DANs should be improved to ensure consistency across DVA social care files, particularly for risk assessments using the DASH risk assessment process and case file closure.</p>	<ul style="list-style-type: none"> <li>• Case file review</li> </ul>
<p><b>Recommendation 4.</b> Managerial decisions arising from assessments should be routinely recorded. Case closures could be strengthened with the completion and oversight of a DASH risk assessment detailing progress affecting the whole family including their views and wishes.</p>	<ul style="list-style-type: none"> <li>• Case file review</li> </ul>
<p><b>Recommendation 5.</b> Multi-agency work should continue to be strengthened as there was mixed evidence within the evaluation about the quality of this working practice.</p>	<ul style="list-style-type: none"> <li>• In-depth interviews with key stakeholders</li> <li>• In-depth interviews with DANs/managers</li> <li>• In-depth interviews with social care staff / managers</li> </ul>

Recommendation	Evidence
	<ul style="list-style-type: none"> <li>• Case file review</li> </ul>
<p><b>Recommendation 6.</b> When implementing new ways of working, practitioners should understand the bigger picture of changes being sought and be engaged in early training with on-going communication to update on progress and learning.</p>	<ul style="list-style-type: none"> <li>• In-depth interviews with key stakeholders</li> <li>• In-depth interviews with DANs/managers</li> <li>• In-depth interviews with social care staff / managers</li> </ul>
<p><b>Recommendation 7.</b> The monitoring data collected should be reviewed and could be enhanced in order to benchmark the quality of work and evidence its impact. For example, whilst measures of children’s social vulnerability status are useful it could also be beneficial to collect more specific performance management data especially around the role of DANs. Indicators could include:</p> <ul style="list-style-type: none"> <li>• The number of families that DANs engaged.</li> <li>• The number of children, perpetrators and adult victims that DANs engaged.</li> <li>• The number and type of direct intervention work carried out by DANs.</li> <li>• Performance metrics of DANs work including outcome measures for direct intervention work. For example, a measure of changing vulnerability status for the children that DANs had specifically worked with.</li> <li>• MARAC data including the number of re-referrals to MARAC following a DVA intervention.</li> <li>• Data on Looked After Children and specifically on changes in the number of days spent in care.</li> </ul>	<ul style="list-style-type: none"> <li>• Review of documentation</li> <li>• Analysis of monitoring data</li> </ul>

## Appendix 1: Case file analysis

The evaluation team designed a case file research tool for use with case files and DAN workbooks provided by DCST as part of the follow up evaluation of the Growing Futures Innovation Programme.

We analysed 39 case files altogether which included:

- 20 social care files from during the Growing Futures period where domestic abuse was a factor and there was DAN involvement. 1 of these included re-referral to MARACs.
- 9 retrospective cases (as a comparator group) where domestic abuse was a factor from before the Growing Futures period.
- 10 cases where domestic abuse was a factor from after the Growing Futures period. These were used to explore the lasting impact of changes to working practice and support for families as a result of Growing Futures.

The review of case files is focussed on identifying:

- How Growing Futures impacted on outcomes for families, children and working practice.
- The degree to which impacts for families and children supported by Growing Futures have been sustained.
- The degree to which changes in ways of working and referral pathways implemented as part of Growing Futures have been sustained or further developed since funding ended.
- The impact of any changes in ways of working and referral pathways on families and children supported by DCST since the Growing Futures funding period ended.

As such, the case file research tool is split into sections. The analysis is presented below in tables. It should be noted that one of the before case files did not fit the criteria of case file tool, as the child's support began before the Growing Futures period and continued into it. Therefore, this casefile was not included.

### Child details

This section presents details of the background information of the child.

**Table 1: Child details before the intervention took place**

Before the DA related intervention took place:	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
The child was subject to a child in need plan	0	5	1
The child was subject to a child protection plan	0	4	3
The child was a looked after child	0	2	0
The child was not known to the children's trust	7	9	6
Unclear from case file/workbook	2	0	0
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

**Table 2: Child details after the intervention took place**

After the DA related intervention took place:	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
The child was subject to a child in need plan	2	6	2
The child was subject to a child protection plan	0	3	1
The child was a looked after child	0	1	1
The case was closed	7	10	6
Unclear from case file/workbook	0	0	0
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

**Table 3: Child details at the time of case file review**

At the time of the case file review:	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
The child is subject to a child in need plan	1	3	2
The child is subject to a child protection plan	1	0	1
The child is a looked after child	0	1	1
The case has been closed	7	16	4
Unclear from case file/workbook	0	0	1
<b>Total</b>	<b>9</b>	<b>20</b>	<b>9<sup>14</sup></b>

## Assessment of families

This section looks at the assessment stage of a family's support, concentrating on 3 key areas: extent and quality of the whole family approach, a focus on practice and quality of decision making.

**Table 4: Does the assessment focus on ensuring that the victim and children are protected from the person causing harm through DVA?**

Does the assessment focus on ensuring that the victim and children are protected from the person causing harm through DVA?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Yes	7	20	8
No	2	0	1
Unclear from case file/workbook	0	0	1
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

<sup>14</sup> This column does not sum up to 10, as 1 of the cases was still open at the time of casefile review.

**Table 5: Where appropriate, has the assessment considered the wider or extended family and community in which they live?**

Where appropriate, has the assessment considered the wider or extended family and community in which they live?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Yes	4	14	8
No	4	6	2
Unclear from case file/workbook	1	0	0
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

**Table 6: Does the assessment identify the typology of DVA? (Intimate Terrorism, Violent Resistance, Situational Couples Violence, Mutually Violent Control)<sup>15</sup>**

Does the assessment identify the typology of DVA? (Intimate Terrorism, Violent Resistance, Situational Couples Violence, Mutually Violent Control)	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Yes	0	2	0
No	9	18	10
Unclear from case file/workbook	0	0	0
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

**Table 7: Is a DAN involved in the assessment?**

Is a DAN involved in the assessment?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Yes	0	20	5
No	9	0	5

<sup>15</sup> As part of the case file review, we looked through the social work assessment and case notes. There was no evidence that the typology of DVA was identified.

Is a DAN involved in the assessment?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Unclear from case file/workbook	0	0	0
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

**Table 8: Has a DASH risk assessment been completed?**

Has a DASH risk assessment been completed?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Yes	0	17	4
No	9	1	4
Unclear from case file/workbook	0	2	2
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

**Table 9: Is there evidence that Signs of Safety approach has been used?**

Is there evidence that Signs of Safety approach has been used?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Yes	5	19	9
No	4	1	1
Unclear from case file/workbook	0	0	0
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

**Table 10: To what extent are conclusions and decisions within the assessment well-evidenced?**

To what extent are conclusions and decisions within the assessment well-evidenced?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Well evidenced	4	18	3
Partially evidenced	5	2	6

To what extent are conclusions and decisions within the assessment well-evidenced?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Not well evidenced	0	0	1
Unclear from case file/workbook	0	0	0
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

**Table 11: Is there any information that is missing that could impact significantly on the quality of the assessment and decision making?**

Is there any information that is missing that could impact significantly on the quality of the assessment and decision making?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Yes	4	1	6
No	5	19	4
Unclear from case file/workbook	0	0	0
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

## Planning stage

This section looks at the planning stage of a family's support, concentrating on 3 key areas: extent and quality of the whole family approach, a focus on practice, and quality of decision making.

**Table 12: Is there evidence that assessment considers the family as a whole rather than focussing solely on safeguarding the child?**

Is there evidence that assessment considers the family as a whole rather than focussing solely on safeguarding the child?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
To a large extent	3	12	3
To some extent	4	6	3
Not at all	1	0	3
Unclear from case file/workbook	1	2	1
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

**Table 13: Does the planning result in the development of a family support package?**

Does the planning result in the development of a family support package?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Yes	2	19	7
No	6	1	3
Unclear from case file/workbook	0	0	0
<b>Total</b>	<b>8<sup>16</sup></b>	<b>20</b>	<b>10</b>

**Table 14: Does the planning consider how to ensure that interventions are conducted in a way which ensures the victim and children are protected from the person causing harm through DVA?**

Does the planning consider how to ensure that interventions are conducted in a way which ensures the victim and children are protected from the person causing harm through DVA?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
To a large extent	1	15	5
To some extent	4	5	4
Not at all	3	0	1
Unclear from case file/workbook	0	0	0
<b>Total</b>	<b>8<sup>17</sup></b>	<b>20</b>	<b>10</b>

**Table 15: To what extent are the wishes of the family considered in developing the plan?**

To what extent are the wishes of the family considered in developing the plan?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
To a large extent	1	12	5
To some extent	5	6	4
Not at all	2	0	1
Unclear from case file/workbook	0	2	0

<sup>16</sup> This 'before' column does not sum up to 9 as one of the cases was closed before a plan could be put in place.

<sup>17</sup> This 'before' column does not sum up to 9 as one of the cases was closed before a plan could be put in place.

To what extent are the wishes of the family considered in developing the plan?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
<b>Total</b>	<b>8<sup>18</sup></b>	<b>20</b>	<b>10</b>

**Table 16: Has an outcomes framework which defines appropriate outcomes and measures for the child and family been developed?**

Has an outcomes framework which defines appropriate outcomes and measures for the child and family been developed?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Yes	1	19	7
No	7	1	3
Unclear from case file/workbook	1	0	0
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

**Table 17: To what extent are conclusions and decisions within the planning stage well-evidenced?**

To what extent are conclusions and decisions within the planning stage well-evidenced?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Well evidenced	2	16	5
Partially evidenced	4	3	2
Not well evidenced	3	1	3
Unclear from case file/workbook	0	0	0
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

## Implementation

This section looks at the implementation stage of a family's support, concentrating on 2 key areas: a focus on practice and quality of decision making.

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<sup>18</sup> This 'before' column does not sum up to 9 as one of the cases was closed before a plan could be put in place.

**Table 18: Is a DAN involved in the interventions?**

Is a DAN involved in the Interventions?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Yes	0	16	5
No	9 <sup>19</sup>	0	5
Unclear from case file/workbook	0	4	0
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

**Table 19: If so, what work did the DAN undertake?**

If so, what work did the DAN undertake?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
<b>Psychoeducational:</b>			
Triple P Approach	0	0	0
'Getting On' Programme	0	0	0
Emotional Literacy	0	6	0
Caring Dads	0	0	1
Solihull Parenting	0	2	2
<b>Psychotherapy:</b>			
Techniques from Narrative Therapy	0	6	0
CBT Techniques	0	1	0
Techniques from Counselling	0	5	2
Mindfulness	0	0	1

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<sup>19</sup> We would not expect a DAN to be involved with interventions, as Growing Futures had not been developed at this point.

<b>If so, what work did the DAN undertake?</b>	<b>Before Growing Futures (Before November 2015)</b>	<b>During Growing Futures (November 2015 - March 2017)</b>	<b>After Growing Futures (After March 2017)</b>
Techniques from Solution Focussed Therapy	0	3	4
Collaborative Therapy	0	2	0
DBT	0	0	0
Other	1	14	7
<b>Total</b>	<b>1</b>	<b>39</b>	<b>17</b>

**Table 20: Is there evidence that Signs of Safety is embedded in practice?**

<b>Is there evidence that Signs of Safety is embedded in practice?</b>	<b>Before Growing Futures (Before November 2015)</b>	<b>During Growing Futures (November 2015 - March 2017)</b>	<b>After Growing Futures (After March 2017)</b>
Yes	4	18	9
No	3	2	1
Unclear from case file/workbook	2	0	0
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

**Table 21: To what extent are decisions taken well evidenced?**

<b>To what extent are decisions taken well-evidenced?</b>	<b>Before Growing Futures (Before November 2015)</b>	<b>During Growing Futures (November 2015 - March 2017)</b>	<b>After Growing Futures (After March 2017)</b>
Well evidenced	3	12	5
Partially evidenced	2	7	3
Not well evidenced	3	1	2
Unclear from case file/workbook	1	0	0
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

## Review of interventions

This section looks at the review of interventions stage of a family's support and concentrates on three key areas: extent and quality of the whole family approach, a focus on practice and quality of decision making.

**Table 22: To what extent does the review consider the needs and progress of the family as a whole?**

To what extent does the review consider the needs and progress of the family as a whole?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
To a large extent	1	15	6
To some extent	4	4	3
Not at all	1	0	1
Unclear from case file/workbook	0	1	0
<b>Total</b>	<b>6<sup>20</sup></b>	<b>20</b>	<b>10</b>

**Table 23: Are the views and preferences of the family considered when reviewing interventions?**

Are the views and preferences of the family considered when reviewing interventions?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Yes	3	18	7
No	2	0	3
Unclear from case file/workbook	1	2	0
<b>Total</b>	<b>6<sup>21</sup></b>	<b>20</b>	<b>10</b>

**Table 24: Is there evidence that the safety of the family is monitored throughout interventions?**

Is there evidence that the safety of the family is monitored throughout interventions?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Yes	3	19	8
No	2	0	2

<sup>20</sup> This column does not sum up to 9 because in 4 of the cases, interventions did not take place so could not be reviewed.

<sup>21</sup> This column does not sum up to 9 because in 4 of the cases, interventions did not take place so could not be reviewed.

Is there evidence that the safety of the family is monitored throughout interventions?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Unclear from case file/workbook	1	1	0
<b>Total</b>	<b>6<sup>22</sup></b>	<b>20</b>	<b>10</b>

**Table 25: Is there evidence that progress is recorded regularly?**

Is there evidence that progress is recorded regularly?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 -March 2017)	After Growing Futures (After March 2017)
Yes	3	17	7
No	3	3	3
Unclear from case file/workbook	0	1	0
<b>Total</b>	<b>6<sup>23</sup></b>	<b>20</b>	<b>10</b>

**Table 26: What tools were used to review progress?**

What tools were used to review progress?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Family Outcome Star	0	3	1
Signs of Safety Scaling	0	8	3
Three Houses/Variants	0	12	5
Wishes and Feelings	0	11	5
Genogram	0	7	3

<sup>22</sup> This column does not sum up to 9 because in 4 of the cases, interventions did not take place so could not be reviewed

<sup>23</sup> This column does not sum up to 9 because in 4 of the cases, interventions did not take place so could not be reviewed.

What tools were used to review progress?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
DASH risk assessment	0	17	4
Other (please specify)	3	5	1
None identified in case file/workbook	4	0	3
<b>Total</b>	<b>7</b>	<b>63</b>	<b>25</b>

**Table 27: Are the tools used appropriate?**

Are the tools used appropriate?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Yes	1	19	6
No	1	0	2
Unclear from case file/workbook	0	1	2
<b>Total</b>	<b>2<sup>24</sup></b>	<b>20</b>	<b>10</b>

**Table 28: To what extent are decisions arising from the review well-evidenced?**

To what extent are decisions arising from the review well-evidenced?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Well evidenced	1	17	6
Partially evidenced	2	2	0
Not well evidenced	2	1	4
Unclear from case file/workbook	1	0	0
<b>Total</b>	<b>6<sup>25</sup></b>	<b>20</b>	<b>10</b>

<sup>24</sup> The column does not sum to 9 because in 7 of the cases, no review tools were used.

<sup>25</sup> This column does not sum up to 9 because in 4 of the cases interventions did not take place so could not be reviewed

**Table 29: 'Did the case remain open after review for issues other than DVA?**

Did the case remain open after review for issues other than DVA?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Yes	0	9	2
No	6	11	9
N/A	3	0	0
Unclear from case file/workbook	0	0	0
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

## Case Closure

This section looks at the case closure stage of a family's support and concentrates on three key areas: extent and quality of the whole family approach, a focus on practice and quality of decision making.

**Table 30: To what extent does the review consider the needs and progress of the family as a whole?**

To what extent does the review consider the needs and progress of the family as a whole?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Yes	4	11	3
No	5	2	4
Unclear from case file/workbook	0	1	0
<b>Total</b>	<b>9</b>	<b>14<sup>26</sup></b>	<b>7<sup>27</sup></b>

**Table 31: Was a final DASH assessment completed before the family left the service?**

Was a final DASH assessment completed before the family left the service?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Yes	0	4	0

<sup>26</sup> Column does not sum to 20 as 6 of the cases were still open so the question is not relevant.

<sup>27</sup> Column does not sum up to 10 as 3 of the cases were still open so the question is not relevant.

Was a final DASH assessment completed before the family left the service?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
No - A DASH was not completed at any point	9	1	4
No - A DASH was completed previously, but not at case close	0	6	2
Unclear from case file/workbook	0	1	1
<b>Total</b>	<b>9</b>	<b>14<sup>28</sup></b>	<b>7<sup>29</sup></b>

**Table 32: Is there are clear step-down plan in place, involving other agencies?**

Is there are clear step-down plan in place, involving other agencies?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Yes	2	3	3
Partially	1	2	2
No	6	6	2
Unclear from case file/workbook	0	3	0
<b>Total</b>	<b>9</b>	<b>14<sup>30</sup></b>	<b>7<sup>31</sup></b>

**Table 33: To what extent is the decision to close the case well-evidenced?**

To what extent is the decision to close the case well-evidenced?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Well evidenced	3	9	3
Partially evidenced	3	4	2
Not well evidenced	3	0	2
Unclear from case file/workbook	0	1	0

<sup>28</sup> Column does not sum to 20 as 6 of the cases were still open so the question is not relevant.

<sup>29</sup> Column does not sum up to 10 as 3 of the cases were still open so the question is not relevant.

<sup>30</sup> Column does not sum to 20 as 6 of the cases were still open so the question is not relevant.

<sup>31</sup> Column does not sum up to 10 as 3 of the cases were still open so the question is not relevant.

To what extent is the decision to close the case well-evidenced?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
<b>Total</b>	<b>9</b>	<b>14<sup>32</sup></b>	<b>7<sup>33</sup></b>

## Multi-Agency Working

This section looks at the quality of multi-agency working.

**Table 34: Were other agencies engaged in the work with this family?**

Were other agencies engaged in the work with this family?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Yes	7	19	9
Partially	1	1	1
No	1	0	0
Unclear from case file/workbook	0	0	0
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

**Table 35: What was the quality of multi-agency work?**

What was the quality of multi-agency work?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
High quality	0	7	3
Adequate quality	6	13	7
Low quality	1	0	0
Unclear from case file/workbook	2	0	0
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

<sup>32</sup> Column does not sum to 20 as 6 of the cases were still open so the question is not relevant.

<sup>33</sup> Column does not sum up to 10 as 3 of the cases were still open so the question is not relevant.

**Table 36: Where any agencies missing who should have been involved at any stage of the case?**

Where any agencies missing who should have been involved at any stage of the case?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Yes	1	3	3
No	8	16	7
Unclear from case file/workbook	0	1	0
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

## DfE 7 features of practice and 7 outcomes

This section presents the evidence for the 7 features of practice and 7 outcomes from case files.

**Table 37: Is there evidence of the use of strengths-based practice frameworks?**

Is there evidence of the use of strengths-based practice frameworks?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Yes	2	20	8
Partially	3	0	2
No	2	0	0
Unclear from case file/workbook	2	0	0
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

**Table 38: Is there evidence of the use of multi-disciplinary skill sets?**

Is there evidence of the use of multi-disciplinary skill sets?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Yes	1	16	5
Partially	0	1	5
No	5	0	0
Unclear from case file/workbook	3	3	0
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

**Table 39: Is there evidence of the use of systemic theoretical models?**

Is there evidence of the use of systemic theoretical models?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Yes	5	14	9
Partially	0	4	1
No	1	2	0
Unclear from case file/workbook	3	0	0
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

**Table 40: Is there evidence of group case discussions taking place?**

Is there evidence of group case discussions taking place?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Yes	2	20	8
Partially	0	0	1
No	5	0	1
Unclear from case file/workbook	2	0	0
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

**Table 41: Is there evidence of high intensity and consistency of practitioner?**

Is there evidence of high intensity and consistency of practitioner?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Yes	2	13	3
Partially	1	7	6
No	3	0	1
Unclear from case file/workbook	3	0	0
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

**Table 42: Is there evidence of skilled direct work?**

Is there evidence of skilled direct work?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Yes	0	15	3

Is there evidence of skilled direct work?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Partially	0	3	6
No	7	2	1
Unclear from case file/workbook	2	0	0
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

**Table 43: As a result of support received from DCST and other agencies referred to by DCST, has risk for the child been reduced?**

As a result of support received from DCST and other agencies referred to by DCST, has risk for the child been reduced?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Yes	0	15	5
Partially	2	4	2
No	5	1	3
Unclear from case file/workbook	2	0	0
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

**Table 44: As a result of support received from DCST and other agencies referred to by DCST, has greater stability been created for the child?**

As a result of support received from DCST and other agencies referred to by DCST, has greater stability been created for the child?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Yes	0	15	4
Partially	4	4	3
No	3	1	3
Unclear from case file/workbook	2	0	0
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

**Table 45: As a result of support received from DCST and other agencies referred to by DCST, has the child's wellbeing been increased?**

As a result of support received from DCST and other agencies referred to by DCST, has the child's wellbeing been increased?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Yes	0	16	4
Partially	2	3	3
No	5	1	3
Unclear from case file/workbook	2	0	0
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

**Table 46: As a result of support received from DCST and other agencies referred to by DCST, has the family's wellbeing been increased?**

As a result of support received from DCST and other agencies referred to by DCST, has the family's wellbeing been increased?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Yes	0	14	4
Partially	2	5	3
No	5	1	3
Unclear from case file/workbook	2	0	0
<b>Total</b>	<b>9</b>	<b>20</b>	<b>10</b>

**Table 47: Since closure, has there been a re-referral to social care?**

Since closure, has there been a re-referral to social care?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Case re-referred to social care	9	7	4
Case not re-referred to social care	0	11	3
Unclear from case file/workbook	0	0	0
<b>Total</b>	<b>9</b>	<b>18<sup>34</sup></b>	<b>7<sup>35</sup></b>

**Table 48: Since closure, has there been a re-referral to MARAC?**

Since closure, has there been a re-referral to MARAC?	Before Growing Futures (Before November 2015)	During Growing Futures (November 2015 - March 2017)	After Growing Futures (After March 2017)
Case re-referred to MARAC	4	1	0
Case not re-referred to MARAC	2	14	5
Unclear from case file/workbook	3	3	2
<b>Total</b>	<b>9</b>	<b>18<sup>36</sup></b>	<b>7</b>

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<sup>34</sup> Column does not sum to 20, as 2 of the cases were still open so the question is not relevant.

<sup>35</sup> Column does not sum 10, as 3 of the cases were still open so the question is not relevant.

<sup>36</sup> Column does not sum to 20, as 2 of the cases were still open so the question is not relevant.

## Appendix 2: Analysis of performance/secondary data

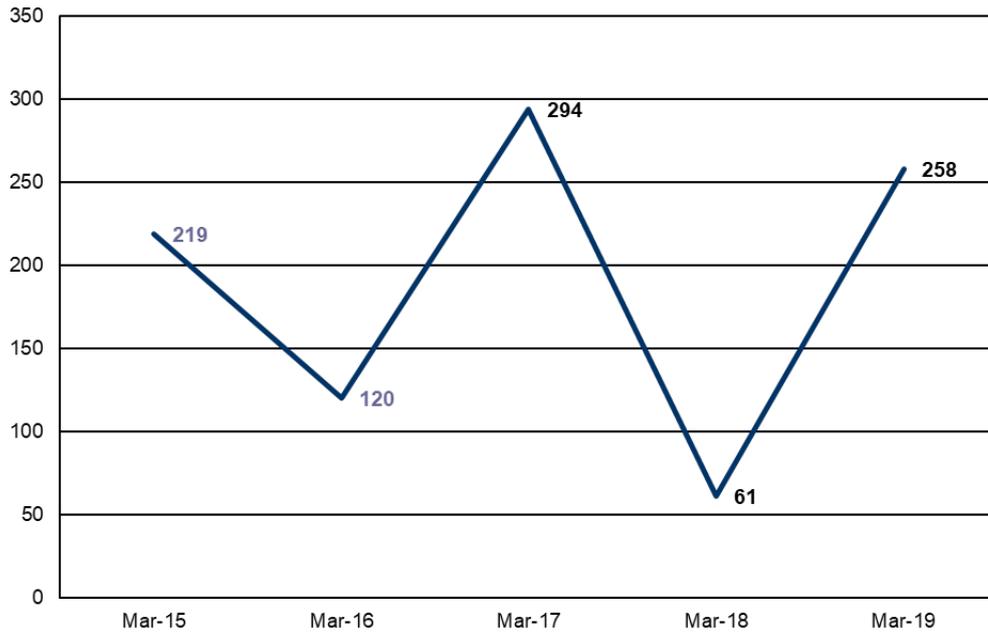
Data collected by DCST since the end of the Growing Futures period was evaluated to measure progress against KPIs. Analysis of this data is presented in section 4. Key findings.

It has been mentioned that comparison of data between the initial evaluation and this follow-up evaluation was difficult, as different methodological approaches were taken and different outcome measures collected. For example, the initial evaluation analysed MARAC data, but this was not possible in this follow-up evaluation as DCST now collect data in a different way.

Across both evaluations there was one indicator which was collected in both instances. This was around the number of CIN cases where DVA was a factor. In the initial evaluation, social care data on children's vulnerability status was collected. Data about the total number of children who were CIN in March 2015 and again in March 2016 were analysed. Estimated baseline data on the social vulnerability status of children indicated that 44.8% of CIN cases included DVA as a factor in March 2015, while 36.4% did in March 2016. As part of the longitudinal evaluation, we could estimate the actual number of CIN cases where DVA was a factor and compare this with figures provided by DCST for this evaluation. This is a rough estimate and while it may provide an interesting picture of changes in children's vulnerability status, it cannot be attributed to Growing Futures.

Figure 4 summarises this analysis. While there is a decrease in the number of CIN cases which include DVA as factor between March 2015 and 2016 (part of the Growing Futures period), the additional data shows that there is no clear pattern in changes in vulnerability status.

**Figure 4: Number CIN cases where DVA was a factor**



## Appendix 3: Performance management data table

Table 49 outlines data collected in the Round 1 Innovation Programme evaluation compared to the data collected and provided by DCST in the follow-up longitudinal study, and demonstrates why comparison was difficult.

**Table 49: Secondary/performance management data presented in the Round 1 evaluation report compared with the follow-up longitudinal study**

Data presented in the Round 1 evaluation report	Data provided by DCST for the follow-up longitudinal study
<p><b>Analysis of social care data on children’s vulnerability status</b></p>	<p><b>Analysis of social care data on children’s vulnerability status</b></p>
<p>Total number of children/young people in Child Protection Plan (CPP) or Children Looked After (CLA) in September 2015 and 2016, March 2015 and 2016 (not just where Domestic Violence and Abuse (DVA) is a factor).</p>	<p>Number of children admitted to care where the child/young person has a CPP or has been assessed to be a Child in Need (CIN) and DVA is a factor, January 2017 to March 2019.</p> <p><i>This cannot be compared as the original study looks purely at numbers of children who are CPP or CLA rather than those admitted to care who are subject to CPP or CIN. The original study does also not solely focus on DVA cases.</i></p>
<p>Total number of children/young people who are CIN in September 2015 and 2016, March 2015 and 2016 (not just where DVA is a factor).</p> <p>Estimated percentage of CIN cases where DVA is a factor.</p>	<p>Number of children/young people who are CIN and DVA is a factor.</p> <p><i>By using the estimated percentage of CIN cases where DVA is a factor we were able to estimate the number of CYP who are CIN in the original study. We were therefore able to compare this estimate with data collected in the longitudinal study (This is presented in Appendix 3).</i></p> <p><i>However, it must be remembered that this is only an estimate and the way in which these data are collected by DCST has changed.</i></p>

<b>Data presented in the Round 1 evaluation report</b>	<b>Data provided by DCST for the follow-up longitudinal study</b>
<i>No similar data collected.</i>	Repeat referrals to children's social care where DVA is a concern January 2017 to March 2019.
<i>No similar data provided.</i>	Repeat referrals to children's social care where a DAN was previously involved July 2017 to March 2019.
<i>No similar data provided.</i>	Number of children/young people known to Early Help and DVA is a factor.
<i>No similar data provided.</i>	Early Help Enquiries, Contacts and Referrals where Domestic Abuse is a presenting issue.
<b>Analysis of MARAC data</b>	<b>Analysis of MARAC data</b>
Analyses of MARAC data on the number of repeat referrals from 2 6-month periods in 2014 and 2016 – prior to and after the introduction of Growing Futures	<i>No similar data provided.</i>
Numbers of children and young people attached to MARAC referrals from 2 6-month periods in 2014 and 2016 – prior to and after the introduction of Growing Futures	<i>No similar data provided.</i>
MARAC referral sources from 2 6-month periods in 2014 and 2016 – prior to and after the introduction of Growing Futures.	<i>No similar data provided.</i>
Demographics of MARAC cases.	<i>No similar data provided.</i>
Number of MARAC cases.	<i>No similar data provided.</i>

## Appendix 4: Evaluation methods

The following provides further detail about methods used in this evaluation.

### Review of strategic and operational documentation

This review included the DCST Domestic Abuse Strategy and pathway documents; Domestic Abuse Chief Officer Strategic Board terms of reference; the DAN practice guide; the DVA joint competency framework; case management materials; anonymised examples of DAN workbooks; and Growing Futures system forms.

### Analysis of secondary/performance management data

Data collected by DCST since the end of the Growing Futures period was evaluated to measure progress against key performance indicators. However, the way data have been collected by DCST has changed since the Growing Futures period. This has made direct comparison and trend analysis challenging. Table 49 in Appendix 3 outlines data collected in the Round 1 Innovation Programme evaluation compared to the data collected and provided by DCST in the follow-up longitudinal study, and demonstrates why comparison was difficult.

The data provided for this evaluation creates an interesting picture of how children's vulnerability status may have changed during and after the Growing Futures period. For example, we can see how the number of children who are looked after has changed over time. However, these are generic measures and viewed in isolation make it difficult to attribute any changes to Growing Futures or more specifically the work of DANs. Therefore, to strengthen the evidence in this evaluation (which is primarily qualitative) it would have been useful to have been provided with more specific performance management indicators, including, for example:

- The number of families that DANs engaged.
- The number of children, perpetrators and adult victims that DANs engaged.
- The number and type of direct intervention work carried out by DANs.
- Performance metrics of DANs work including outcome measures for direct intervention work. For example, a measure of changing vulnerability status for the children that DANs had specifically worked with.

It would also have strengthened the evaluation to have been provided with the Multi-Agency Risk Assessment Conference (MARAC) data which was present in the initial

evaluation.<sup>37</sup> This would have made measuring the sustained impact of Growing Futures more comprehensive.

## **In-depth interviews with key stakeholders**

In-depth telephone interviews were conducted with 7 senior stakeholders, including leadership of Growing Futures and allied services. The interviews focussed on:

- The lasting impact of Growing Futures on families, children and young people and on ways of working within DCST.
- The progress of the project against its key aims since the Round 1 evaluation, including: reduction in repeat cases to MARAC, repeat referrals to social care where DVA is a factor and the number of children admitted to care.
- Changes in the service and its impact since the evaluation, and after the DfE funded period.
- Learning from the project.

## **In-depth interviews with DANs, managers and social care staff**

In-depth telephone interviews were conducted with 6 DANs and 4 social care staff and their managers. The interviews focussed on:

- The lasting impact of Growing Futures on families, children and young people and on ways of working within DCST.
- The progress of the project against its key aims since the Round 1 evaluation, i.e. reduction in repeat cases to MARAC, repeat referrals to social care where DVA is a factor and the number of children admitted to care.
- Changes in the service and its impact since the evaluation, and after the DfE funded period.
- Changes to referral pathways as a result of Growing Futures and since the end of the funding period.
- Learning from the project.

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<sup>37</sup> More about MARAC data and what it may include can be seen [here](#). Last accessed 9<sup>th</sup> March 2020. The original evaluation report by Opcit Research can be seen [here](#). Last accessed 9<sup>th</sup> March 2020.

## E-survey of key stakeholders

An E-survey of key stakeholders including referrers and DVA services was developed and implemented. The survey focussed on:

- The DVA services provided.
- The impact of Growing Futures on children and families who received support during and after the funding period.
- The impact of the Whole Family Approach.
- The impact of Growing Futures on ways of working.

The E-survey used the same approach to distribution as the E-survey in the original evaluation: a snowball method whereby respondents and service managers are asked to pass on the survey link to relevant people. We anticipated that this would result in a similar number of responses (160). However, despite multiple reminder emails from both Cordis Bright and DCST, response rates were low, with only 18 completed responses. This may be because Growing Futures was no longer seen as a high priority among stakeholders due to the funding period having ended.

## Case file reviews of DAN cases and social care cases

A review of 40 cases which included domestic abuse was conducted. However, we were not able to include one of the case files from before the Growing Futures period in the analysis. This was because whilst the family's engagement began before the Growing Futures period it continued after the programme had come to an end. Therefore, we could not analyse this case within the case file tool which was developed by Cordis Bright and agreed with DCST. Appendix 2 provides a full overview of the case file analysis presented in table format.

The case file analysis included:

- 20 social care files from during the Growing Futures period where domestic abuse was a factor and there was DAN involvement.
- 9 retrospective cases (as a comparator group) where domestic abuse was a factor from before the Growing Futures period.<sup>38</sup>

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<sup>38</sup> One of the 'before' cases could not be included in the case file review tool because the family's engagement began before Growing Futures and continued after the programme. Therefore, this case was not included in the analysis.

- 10 cases where domestic abuse was a factor from after the Growing Futures period. These were used to explore the lasting impact of changes to working practice and support for families as a result of Growing Futures.

The review tool explored:

- How Growing Futures impacted on outcomes for families, children and working practice.
- The degree to which impacts for families and children supported by Growing Futures have been sustained.
- The degree to which changes in ways of working and referral pathways implemented as part of Growing Futures have been sustained or developed since funding ended.
- The impact of any changes in ways of working and referral pathways on families and children supported by DCST since the Growing Futures funding period ended.

As such the tool was split into 8 sections. The first section concentrated on the child's details and vulnerability status (i.e. CIN, CLA, CPP) at the time of the DVA related intervention and afterwards. The subsequent five sections looked at different stages of children and their family's engagement with social services (assessment, planning, implementation, review of interventions and case closure). The seventh section looked at the quality of multi-agency working, and the final section focuses upon the DfE's 7 practice features and 7 outcomes.

The tool was designed to assess the extent to which there is evidence of a whole family model of working, good quality practice and good quality decision making in three different time periods: before, during and after Growing Futures in the 8 sections mentioned above. In some of the case file review questions, we used a scale to rank the evidence of a particular impact.<sup>39</sup> We have therefore reported our findings qualitatively using reporting terms such as majority/minority. The tool provided us with rich qualitative information which has given valuable insight. However, due to the small sample sizes involved caution should be exercised in interpreting and generalising findings based upon this review.

To ensure reliability of the findings two experienced members of the Cordis Bright evaluation team conducted the review. Both team members have extensive experience of working with children and families and both hold social work qualifications. They have also both either been the Director or Assistant Director of children's services. Therefore,

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<sup>39</sup> The common scales used in the case file review tool are : 'well evidenced, partially evidenced, not well evidenced, unclear from case file/workbook' and 'to a large extent, to some extent, not at all, unclear from case file/workbook' and 'High quality, adequate quality, low quality, unclear from case file /workbook'.

their review of the case files provided is guided by the case file review tool as well as their own knowledge and understanding of children’s services.



Department  
for Education

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**Reference: RR1061**

**ISBN: 978-1-83870-138-3**

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