

Update from MASH – November 2019

Current MASH Structure – Permanent and Stable Workforce

- * Service Lead
- * 2 x Group Managers
- * 1 x Group Manager – Early Help
- * 6 x Practice Managers (all permanent)
- * 8 x Senior Practitioners (PT/ FT)
- * 16 x Social Workers (PT/ FT)
- * Admin Manager
- * 8 x Administrators
- * 7 x Mash Referral Advisors
- * 6 x CFW's

Multi-Agency Professionals within the MASH

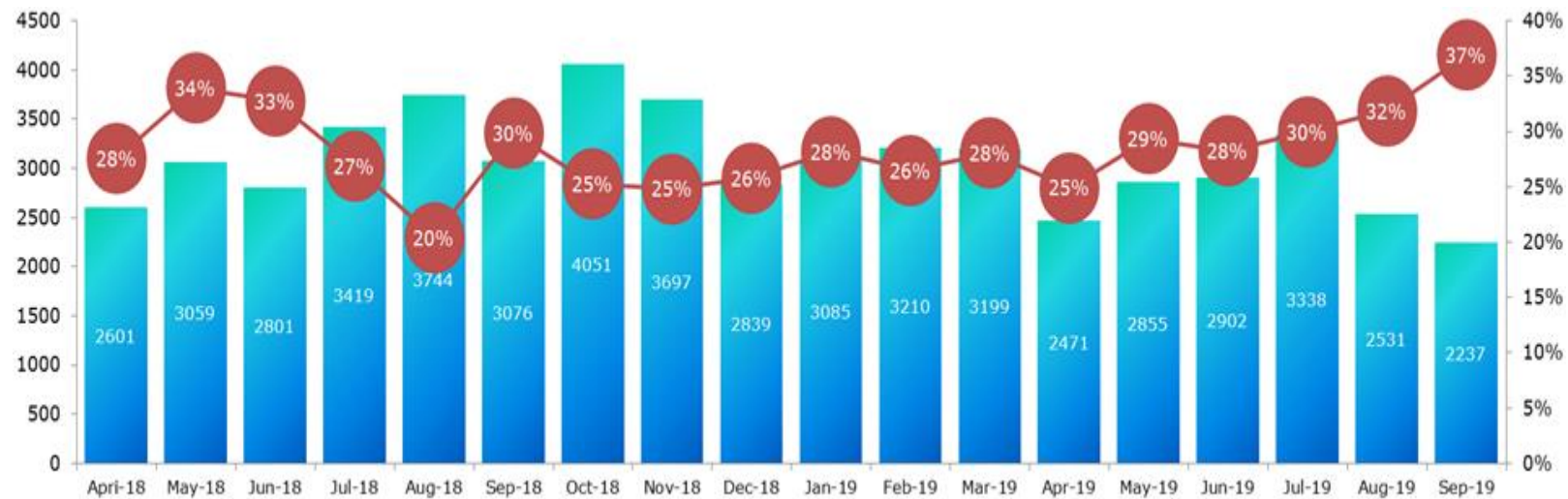
- * Child Disability Social Worker
- * Police
- * WORTH
- * Connect
- * Housing
- * Probation
- * 2 x Health Reps
- * 2 x Education
- * LADO
- * Ambulance (start date TBC)

Progress Updates 2018-2019

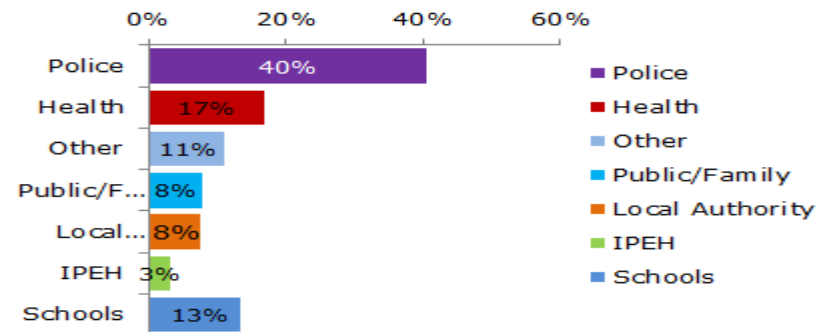
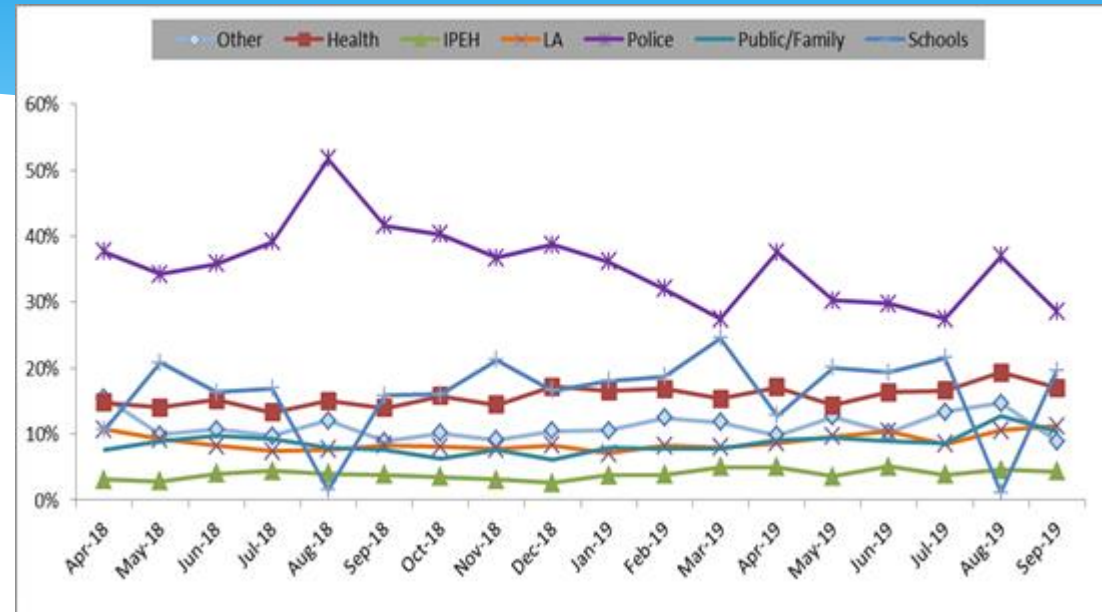
- * Streamlined processes with other teams taking responsibility for their work
- * Customer service centre
- * SOS group supervisions
- * Regular auditing
- * Stable permanent workforce
- * Increase in agency partners
- * Change in ragging system

Performance Data 2018-2019

* Contacts continue to average from 2400 to 4000 per month.



Contact Sources



Contact Conversion Rates

- * Police are the highest percentage (56.6%) that resulted in No Further Action. This is expected given the high number of notifications received from police which do not warrant further intervention from MASH.
- * Early Help referrals, whilst being responsible for a small number of contacts received into the MASH, actually make up 32.5% of work passed for a Child and Family Assessment.
- * Police and Education are identified as the main referrers whose information is passed for strategy discussion.

OFSTED

- * Inspectors could see that we have continued to strengthen and develop the MASH since their focus visit, performance is tightly overseen by the service lead.
- * 'Very positive' that there is permanent staff with good morale.
- * Partnership presence is new for education and health, who have been embedded for six months, and access to these databases are positively providing information to strategy meetings.
- * The quality of referrals from partners is not always as we would want and more work needs to be done by our partners to improve these.
- * Consent is not always obtained by partners, leaving more work for the MASH to do.
- * Decision making is timely, inspectors did question the threshold on some cases, suggesting that MASH is taking responsibility for some referrals that they don't always need to.
- * The quality and effectiveness of the strategy meetings are an area of strength for the MASH.

Exercise – Become one of us!

- * In pairs 'RAG' the referral
- * Write your rationale together and what you feel needs to happen next
- * Read the remainder of the referral and discuss whether you agree with the findings/ outcome

RAG RATING

RED – URGENT – WITHIN 4 HOURS

AMBER – LIKELY TO BE A CFA – WITHIN 24 HRS

GREEN – CFA/ EH? – WITHIN 72 HRS