

PAUSE PLYMOUTH

PART I Briefing Paper

12 March 2020



Background

The Pause service model

Pause is a trauma informed model of therapeutic, practical and behavioural support offered to women who have experienced (or are at risk of experiencing) a cycle of recurrent care proceedings leading to removal of their children into local authority care.

Interim outcomes sought from the Pause service:

- Women experience a 'pause' from pregnancy (so they are able to focus on own needs and goals)
- Improved stability and employability
- Improved wellbeing and sense of self
- Better engagement with services

Longer term outcomes sought from the Pause service:

- Women gain greater control over their lives, including their reproductive health;
- Women create the foundations on which to move forward to a more positive future;
- More integrated and responsive services which are better able to support women at risk of experiencing a cycle of repeated care proceedings;
- Fewer children are taken into care.

Whilst Pause does not seek to reunify mothers with children already removed from their care, many women are able to recommence or improve the quality of contact with their children; the service therefore has the potential to improve lifelong outcomes not just for the women themselves and any future children they may have, but also for their existing children.

The key elements of the Pause model are set out in Appendix I.

Plymouth's implementation approach

The first Pause service was piloted in Hackney in 2013. When Plymouth implemented Pause in April 2019, there were approximately 20 Pause practices operating in other areas, however Plymouth was the first local authority in the country to commission an external provider (Trevi House) to deliver a Pause practice via a 'social outcomes contract' approach.

Within this approach (previously known as a 'social impact bond'), commissioners successfully secured circa £1m of social investment to implement the service. In addition, a circa £0.5m grant was secured from the Department for Culture, Media and Sport (DCMS) Life Chances Fund. Upon successful achievement of specified social outcomes, this grant will contribute towards repayment of the social investment, helping to support sustainability of Plymouth's integrated system of services.

Commissioners and our social investment partner (Bridges Outcome Partnerships) have shared learning from developing our social outcomes contract with a number of other local authorities, some of whom are now exploring implementation of Pause via a similar approach, thereby helping to increase the number of women who will potentially benefit from this service nationally.

Overview of local need

Analysis of children's social care case files revealed that (as at January 2019), there were 122 women in Plymouth who had experienced more than one episode of care proceedings leading to

removal of a child from their care, and who were therefore potentially eligible to participate in the voluntary Pause programme. In total, 408 children had been removed from those mothers, an average of 3.3 children each. The highest number of children removed, from one mother, was 10.

Age profiling showed that 68% of the women had become mothers before they were 20, and 97% by the age of 25.

The prevalence of presenting issues amongst the 122 women was as follows:

- Domestic Abuse – 89%*
- Mental Health – 79%*
- History of social care involvement (as a child) – 54%
- Experience of local authority care (as a child) – 29%
- Drugs – 54%
- Alcohol – 45%
- Criminal Justice – 25%
- Learning Difficulty – 13%
- Physical Health – 8%
- Sex work – 7%

*issues with significantly higher prevalence than Pause national had seen in other local authority areas which had completed similar 'scoping' exercises.

Pause national also confirmed the likelihood that further issues would be discovered/disclosed once women started receiving intensive relationship-based support from a Pause practitioner.

Hackney's 2013 feasibility study highlighted a range of further risk factors impacting women vulnerable to recurrent proceedings:

- 'Chaotic' lives and/or the influence of a controlling partner and/or concern over the impact of contraceptives on their body leads to contraception not being prioritised or well managed;
- Women experience a desire for the nurturing experience of pregnancy, for a child to love - and to be loved – and a belief that their next pregnancy may result in them keeping the child.

Progress to date

Engaging eligible women

In April 2019, the new Pause Plymouth practice began outreach activity to make contact with women identified as potentially eligible for the service. Many of the women are clearly living with significant trauma and 'chaos', and are mistrustful and sometimes hostile towards 'services'. Despite this context, and through the skill and tenacity of the practitioners, 23 women have so far agreed to participate in the voluntary programme and are currently engaging well with the support offered. To date, none of the 23 women have left the programme, there have been no further pregnancies amongst them (and therefore they are able to focus on their own needs and goals), and no further care proceedings have been instigated by the local authority involving those mothers.

Partnership working

This level of engagement has also been enabled by partner agencies - initially through their assistance in locating the women where current addresses were not known to children's social care, and then through their timely and flexible responses to requests for support/services, which has helped the Pause team establish credibility and build trust with the women. Those partner agencies include Police, Community Sexual Health, Community Dentistry, First Light, Plymouth

Domestic Abuse Service, Adult Mental Health Services, Plymouth Hospitals NHS Trust, Psychiatric Liaison Service, Job Centre Plus, Harbour Drug & Alcohol Service, Housing (NB: This may not be an exhaustive list).

Early impact

The women working with Pause are extremely vulnerable and many do not ask for help easily for a variety of reasons, including feelings of shame, stigma and fear of judgement. However, 9 of the women are attending the Sunflower Women's Centre (some for groups and courses, some for twice-weekly drop-ins and some for both). The Sunflower Centre is also run by Trevi House, and the Pause team report that being based there has been very helpful in terms of being able to link women to this wider support.

At the initial stage of the programme, there is a focus on providing practical support to enable stability:

- One woman has moved into full time employment (a first for her);
- Following practical help from the Pause team enabling her to return to her own flat, one woman ended her relationship with an abusive partner and has since had the courage to ask for support to speak to the police about him. This is a significant step forward for the woman;
- Pause have supported a third of the women to engage with the Community Dentistry service – including hand holding during dental extractions. This has proved to be a vital element of the relationship-based support Pause practitioners are providing and is making a big difference to the women, some of whom have been living with chronic pain prior to treatment. A number of women report that they had adopted a 'strategy' of deliberate neglect of their personal hygiene, including oral hygiene, in order to avoid the sexual advances of violent male partners. This further evidences the prevalence of domestic abuse and sexual violence experienced by many of the women. Following dental treatment, some women are reporting that they feel able to smile in public without embarrassment for the first time in years. One woman is so pleased with the service she received, she is keen to participate in a future journalistic feature to raise awareness of the Community Dentistry service.

What women say about Pause

A couple of examples of feedback the Pause team have received so far:

"I have had support from the Pause team from early September 2019; though it's been a short time I've benefited so much from their support. Most people would find doing fun things easy, I can struggle. Pause team have given me the confidence to achieve this! I'm grateful to the team for picking me up and helping me take a Pause in my life and have made me find self-worth."

"When I first met Pause I was desperate to change my life. One of the first things I asked for help with was to get a safe contraceptive; I was too chaotic to sort it myself. Pause has been the support that my family wasn't."

Early system learning

Seven women shared their experiences during the Pause practice launch event in October 2019, which has opened a dialogue about how their experiences could inform training of social work students and newly qualified social workers.

Next steps

The current capacity of the Pause practice will enable up to 48 women to work with the programme over a 3 year period. The Life Chances Fund has indicated that there may potentially be an opportunity to apply for additional grant funding during 2020; if this opportunity materializes and Plymouth is subsequently successful in securing an additional grant award, this would create scope for increasing the capacity of the practice to work with a larger number of women.

Meanwhile, and whilst the multi-agency partnership response to the Pause practice has been very positive to date, the Pause Practice Lead will continue activity to raise and maintain awareness of the aims of the programme, to ensure that local pathways of support for the women working with Pause are developed and maintained, and to sustain the momentum the practice has successfully achieved so far.

Appendix I – The Pause Model

The diagram below highlights the key elements of the systemic Pause model of therapeutic, practical and behavioural support:



The Pause model starts by looking at the woman's life as it is and the factors that may have led to her children being removed, makes a shared assessment of the woman's goals and the strategies that can help to improve things, motivates the woman and mobilises resources to help her address the identified issues.

The model recognises that factors such as domestic abuse, substance misuse, mental ill health and poverty are often interlinked with each other and with the woman's feelings of self-worth, making it difficult for her to deal with the complexity of issues she faces.

Pause practitioners use their professional judgement and skill to create an holistic bespoke programme tailored to meet the unique emotional, psychological, behavioural and practical needs of each individual women, enabling her to tackle the root causes of destructive patterns, develop new skills and avoid further trauma.

Pause practitioners work with women for a period of up to 18 months, after which they can choose to continue with a further period of lighter touch 'next steps' support, according to their needs and goals at that time.