

# Early and Effective Intervention: ‘The clue is in the name’

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## 1. Background

Early and Effective Intervention (EEI) is based on the principles of Getting It Right For Every Child (GIRFEC). It was introduced in 2008 through *Preventing Offending by Young People: A Framework for Action*, and is one of the strands of the Whole System Approach (WSA) to youth offending rolled out in 2011. It aims to ensure young people in or at risk of offending receive appropriate, proportionate and timely support in order to abstain from further offending.

Research on the subject of Early and Effective Intervention is almost non-existent. A limited number of evaluation reports has been published (such as Murray et al., 2015; MacQueen & Fraser, 2011; Consulted, 2009), however no extensive research has been undertaken. To address these gaps, there are three ongoing PhD research projects in Scotland looking into EEI. They focus on the experience of those involved in and affected by multi-agency decision making; the conceptualisation and practice of diversion and early intervention, centred on the decision-making junctures for young people 16 and 17 throughout the Youth Justice System; and the WSA with a specific focus on EEI and diversion from prosecution. The legislation and policy on which EEI is based (GIRFEC; Preventing offending by young people – A framework for Action; Preventing Offending: Getting it right for children and young people), attempt to establish and frame EEI without suggesting a process or practice framework, perhaps to allow flexibility in implementation. However, based on the limited information available, it is suggested that: approaches to early intervention and diversion implemented in Scotland (as well as in England and Wales) vary considerably, and most practitioners consider their local approaches to be original, however they are not familiar with practice outside their locality (Kelly and Armitage, 2015; Consulted, 2010). With this in mind, concentrating on the perceptions professionals hold of what constitutes good practice may provide further evidence into what good practice is. It can also feed into future implementation and provision of high quality services to children and young people in or at risk of offending.

## 2. Aim

The aim of this paper is to identify the principles underpinning good practice in EEI as perceived by professionals. The professionals (from front line practitioners to managers and policy makers) come from a variety of organisations and agencies across the public and third sector involved in EEI with at least two years of experience in this field. Based on seven semi-structured interviews conducted between October and November 2015 and follow up interviews in March 2016, a collection of professionals' viewpoints has been assembled. They depict their diverse views and points of convergence as shaped by their experiences within their employing organisations and specific roles. These diverse perspectives are drawn together to provide a comprehensive picture of what EEI professionals believe about EEI and its implementation and to inform anyone with an interest in EEI about its development. Bearing in mind the limitations of the sample size and nature (non-probability sample of seven participants selected for their accessibility), it also offers empirical evidence of what is working well, what are the challenges in EEI and what can be done to promote good practice among agencies and organisations in a wider setting.

### 3. What is EEI?

The professionals who agreed to share their knowledge come from a range of backgrounds with varied experiences and views (such as Scottish Children's Reporter Administration, Getting It Right for Every Child team-Scottish Government, Action for Children). However, it was agreed the cornerstone of EEI is ensuring children and young people in or at risk of offending are given the opportunity to engage with effective interventions at an early stage, while respecting their rights and the rights of their families. EEI is seen by some professionals in the field as a specialist service, even though based on their experience (and according to *Preventing Offending by Young People: A Framework for Action*), it should not be considered as such. Successful implementation and improved outcomes rely on the cooperation, coordination and adjustment of processes of a range of public, independent and third sector bodies, and their ability to provide proportionate and effective support at an early stage. For this reason, EEI should be part of a wider network of services available to children, young people and their families as its purpose is to divert through universal services, when possible. It should be incorporated within services already in place and easily accessible, to facilitate and support engagement; any service can potentially be involved and offer support as part of EEI.

### 4. Prerequisites of good practice

There are four main themes with regard to good practice in EEI (and in general) that have been identified by the professionals participating in the study: education and health; communication; information sharing; and recruitment of professionals.

#### Health and Education

*'Broadly, EEI can be very effective when education are strongly engaged', 'Another big barrier would be the lack of ownership from health'*

The first point of good practice noted by professionals is having health and education actively involved in EEI. There is a strong need for education and health to consider the place of EEI within their remit and for its significance to be acknowledged. These services are facing great pressures due to heavy workload, limited capacity, time constraints and conflicting demands that lead to low prioritisation of EEI. However, as universal services they can be key players in facilitating and implementing effective approaches. Also, health and education offer a wider network of services that are easily accessible by children, young people and their families. It could be used to provide enhanced support through universal targeting in neighbourhoods with high concentration of criminogenic factors, and in turn have the maximum impact on communities.

The knowledge and expertise of professionals, particularly in education, can prove to be a major asset in facilitating the approach to young people, knowing young people and their needs in depth, and designing timely and proportionate individualised interventions. As a

service in contact with children and young people from the early years of their life, they can help in building confidence, emotional literacy and resilience, positive behaviour and promote wellbeing through a personalised approach. It was stressed how education can have a significant role even before a referral reaches EEI: education professionals can initiate existing processes to address young people's needs before a referral is made. They are more likely to identify potential issues and flag previous incidents of concern since they are more likely to monitor children/ young people, their progress, and their family and social environment. It is expected that education will have a greater involvement in EEI following the full implementation of the Children and Young People (Scotland) Act 2014 on August 31, 2016 through the introduction of the Named Person Service.

The health service is accessible by families and children since the earliest stages of life. It can have a pivotal role in identifying and responding early to potential mental and physical risks, and setting in motion the necessary processes for an effective and timely intervention. The perception of limited involvement of the health service so far has acted as a barrier to good practice and effective interventions. However, it was acknowledged that engagement from health and education professionals can vary according to the professional's role and level within the organisations. Although there are links in place between health and education and EEI professionals, they are considered to be weak; there is a lack of awareness with regard to the support offered to children and young people by the universal services that impedes the competence and timely support of EEI. Even though some EEI professionals are aware and make use of relevant services offered by health and education, some others are unacquainted with them; this can result in a limited provision of services due to lack of communication.

## Communication

*“Clear line of communication”, ‘Being able to have effective systems for communication’*

The second point identified is the fundamental principle of clear and concise communication that utilises universal protocols and processes, encourages feedback, and is frequently assessed and amended in accordance to the changing needs of the agencies and organisations involved. In cases where collaboration among agencies and partners is in place, various procedures and processes developed according to the needs and functions of each one of them, hinder successful communication. Agencies might be more than willing to share information and knowledge, however their procedures often come between good intentions and successful outcomes. As they are designed for different purposes they create confusion: every organisation has its own aims, objectives and agenda which guide the organisational make up and culture. For this reason, there are various organisational structures and guidelines that on occasion are not compatible with each other (e.g. strategic plans and internal policies).

In the cases where issues pertinent to the design and implementation of EEI arise (either on front line or strategic level), there is a lack of willingness in bringing the matter in front of the wider professional community. It was mentioned that there is a hesitance to escalate issues due to potential discredit and its implications with regard to the agency itself and the individual's working relationships. However, the knowledge to be gained even through

seemingly failed attempts is invaluable. Any fear of disapproval should be superseded as collective efforts to establish 'what works', successful or not, could lead to amendments of current practice and policy, and boost fruitful interventions for children and young people.

In terms of promoting and making EEI known widely, a clear and consistent picture of what EEI is, its purpose and benefits, and where it fits in the WSA still remains unclear to some professionals working with children, young people and their families. The need for clarity is closely linked to information sharing issues which, if not addressed, could potentially lead to a lack of commitment, motivation and faith in the overall approach.

## Information Sharing

*'Some information was getting sat on for too long, that's had a knock on effect on some of our referrals'*

The third point of good practice mentioned by the professionals is effective, clear and timely information sharing, a theme closely related to communication. It is a decisive factor in safeguarding the welfare of children and young people, and enabling interventions that are directed to them at an early stage. Information sharing across agencies and partnerships is mostly on a local rather than on a national level. However, a consistent and steady flow of information throughout Scotland could improve EEI implementation and effectiveness on various levels. It could facilitate the design and implementation of universal processes and systems, the creation and promotion of a uniform picture of EEI without affecting the individuality of each case (and its subsequent intervention), lead to higher numbers of referrals, assist in locating appropriate referrals, and establish strong links among partners.

Particular consideration should be given to information sharing during the referral process. The information shared between the referrer and the practitioner receiving the referral should be up-to-date and well-timed. The level of information shared should include the appropriate agencies and follow the young person's needs, the offence committed and support to be offered. These are all integral parts of the process that, along with the recruitment of experienced professionals, play a major role in the successful outcome of a particular intervention and overall development of EEI.

## Recruitment of professionals

*'The right people around the table', 'The right people in the team'*

The final point of good practice was identified as having the right people in the right places, with the authority to make decisions on a local and national level, and a sense of shared responsibility regarding the support of young people. It was stated that agencies and organisations involved in the implementation and promotion of EEI should ensure professionals have the appropriate skill-set and will, top-down endorsement to support a complex structure such as EEI and provide young people with practical skills. Also, staff movement (from management to front line practitioners) can be a regular obstacle. The

expertise and skills developed by practitioners, as well as consistent management and promotion of EEI, can be impaired as knowledgeable team members are moving on to other posts and organisations. It was suggested that these especially apply to Police Scotland, Crown Office and Procurator Fiscal Service (COPFS), and education and health as key agencies within the EEI structure.

Moreover, EEI dedicated staff who put forward actions without unnecessary delay and are invested in its philosophy, besides being an example of good practice themselves, further promote and support good practice; especially when supported by senior management and encouraged to plan jointly and set strategic goals. Similarly, there should be a wide range of professionals involved in EEI strategic planning. Ideally all agencies and organisations need to be well informed of EEI and contribute to a common vision and strategic direction. For this, there might be a necessity for sufficient planning structures and processes that promote inclusion. All the above strengthen the links and communication between partners, establish a clear purpose and direction for EEI and highlight its advantages. Furthermore, they facilitate access to resources and ensure EEI professionals are aware of services and partnerships available to them on a local and national level. Finally, they introduce national standards and consistency throughout the Local Authorities, in line with GIRFEC and Children and Young People (Scotland) Act 2014, without compromising the need for flexibility.

## Conclusion

The EEI process takes place on a national level and is set to ensure that young people in or at risk of offending receive timely, effective and proportionate support in order to desist from further offending. Successful management and implementation of EEI relies heavily on the facilitation and active engagement of the universal services of health and education; clear and concise communication, unrestricted knowledge transfer and effective collaboration among partners; timely and appropriate information sharing on a national level, during the referral specifically as well as throughout the whole process; and recruitment of staff who are invested in EEI, have common strategic goals and full support from management. Professionals across agencies, organisations and ranks, are of the opinion that essential points as the ones presented above are what makes a difference. They have a positive impact on EEI, the lives of children and young people in or at risk of offending, their families and the public. Moreover, they support the capacity of those involved to attain the best outcomes for themselves and their community. Furthermore, these points are not EEI specific; they have a universal application on services and processes outside EEI's remit.

Lastly, the purpose of this paper is to identify perceptions of good practice in terms of processes; however, there is still a grave lack of information about the early intervention work that proves effective in relation to outcomes. Further research on this specific topic will help in establishing a rounded account that can ensure we are indeed getting it right for children and young people.

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