

Evaluation of Baby and Me Service: executive summary

[It's been] Life-changing... We've got everything we've always wanted and I never thought we were going to have. We honestly wouldn't be where we are today without the Baby and Me team... I don't think they realise just how much they have changed our lives and how much they have given us yet. We'll forever be thankful to them. (Father)

Baby and Me is at the vanguard of a growing movement in strategy and practice working to address key areas of concern for child protection and family justice, in particular the rising numbers of infants entering care in the first days and weeks of life. This innovative work – which involves changes to service, practice and professional cultures and attitudes – follows the evidence to work in trauma-informed and relationship-based ways with parents at risk of, or in the wake of, losing care of their infants in public family law proceedings.

Research in Practice conducted a mixed-methods evaluation of Baby and Me between May 2020 and July 2022 which explored the work of the service; the experiences of parents working with Baby and Me; the embedding of the work alongside health, social care, family justice and within the wider local system, and impacts of the service in relation to key aims identified in a Theory of Change workshop at the start of the evaluation.

Baby and Me was initiated through the long-term strategic partnership between Newport local authority and Barnardo's Cymru, and in the context of a wider commitment to developing trauma-informed practice at Newport City Council. The COVID-19 pandemic and subsequent lockdowns in Wales occurred within the first six months of the Baby and Me service, and had a substantial impact on how the programme was delivered in this period.

Key findings

- In the 22 months following the first birth of an infant to mother/parents working with Baby and Me, our analysis found a 31% reduction in the number of infants entering care in Newport within 14 days of birth.
- Internal monitoring, using a slightly different time period and dataset, found a reduction of 48% in infants under 14 days entering care from the point Baby and Me commenced in 2019.
- By either measure this is a very significant reduction, especially given the vulnerability of babies, and challenges of managing risk for this group. While in this period entry to care for Newport children in other age groups also reduced, the work of Baby and Me is attributed as a key factor by professionals across the local system in the reduction in removal of infants into care.
- The evaluation found the wellbeing and protection of infants held in sharp focus, with the team working in close partnership with children's social care, and professionals responding together to emerging risks of harm.
- We heard evidence of Baby and Me team's specialist skills and close working relationship with parents enabling increased depth of analysis of issues of concern, increased social worker confidence and evidence-informed assessment and decision making.
- The service is addressing systemic gaps where the needs of parents and babies were not otherwise identified or supported appropriately. Forming positive, on-going relationships with mothers/parents is, for some, helping to improve these adults' attitudes and trust towards other services.

About Baby and Me

Baby and Me provides relationship-based, trauma-informed support with mothers/parents in the pre and post-birth periods. The service operates independently but works closely with others, including children's social care and health services.

Referrals are made from children's social care and engagement with Baby and Me is voluntary. The referral criteria are as follows (although there is some flexibility in this):

- Mothers who are at least 12 weeks and no more than 24 weeks pregnant for whom there is a risk that a baby may be removed at birth.

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- A case is open to children’s social care in relation to the unborn child due to identified child protection concerns and / or risk of the child becoming looked after.
- Mother/parents are willing to work with the service.
- Mothers/parents experience mental health difficulties, history of substance use, learning difficulties, domestic abuse, and/or are young parents.

When a decision is made that a baby cannot remain in the care of their mother/parents, support from Baby and Me continues until the care proceedings have concluded, at which point mothers can receive support from the pan-Wales Reflect programme.

We've had some really positive feedback from families that have had babies removed. I think in some circumstances, parents realise that they aren't in a position to be able to care for their baby, but they appreciated being treated non-judgementally, with respect, being listened to and being made to feel like they've got some self-worth, really. (Professional, Baby and Me Senior Leader)

The core elements of the Baby and Me service are:

NSPCC Baby Steps	A group-based parenting programme. A mandatory element to the service, usually delivered in small face-to-face groups over seven sessions (some sessions were held virtually due to COVID-19).
Individual support worker	Bespoke 1:1 work in individual sessions with a support worker. This element focuses on current and historic issues to overcome barriers to successful parenting, and includes practical help to engage with other services.
Family Group Conference (FGC)	An optional element of the service where a facilitated family-led meeting occurs to address identified problems, strengthen support networks, and develop solutions.

The first families were referred to the Baby and Me service in September 2019, and the mixed-methods evaluation took place between May 2020 and August 2022. Following the initial Theory of Change workshop to map the intended links between the activities, outcomes and impacts for the service, the evaluation work comprised:

Mothers/parents receiving support from Baby and Me	Interviews with mothers/parents, including mothers who had been separated from their babies shortly after birth and those who had kept their baby in their care. Analyses of wellbeing self-reporting questionnaires completed by a small number of mothers/parents.
Professionals and partner services	Interviews and questionnaires with Baby and Me practitioners, senior leaders at Newport Council and Barnardo's Cymru, child protection social workers, health workers (including midwives and health visitors) and professionals from partner agencies.
Monitoring data	Analyses of monitoring data provided by the Baby and Me team and from the Welsh Community Care Information System.

Key findings

Baby and Me is providing trauma-informed and relationship-based practice. While keeping the wellbeing and protection of infants in sharp focus, Baby and Me's approach is affording parents respect, increased voice in planning, increased understanding of issues of concern and professional decision-making. The intensive input into relationship building has resulted in a richer understanding of families' needs and circumstances, supporting evidence-informed decision-making.

Parents working with Baby and Me

From my perspective, any unborn that we get that is going to be open to us, even on a care and support level, we refer to [Baby and Me], if they're willing to work with them. Nine times out of ten they are willing to work, and Baby and Me accept any referral, regardless of the complexities of the mum and baby... (Professional, Child Protection Social Worker)

The monitoring data shows that Baby and Me is working with the mothers/parents it intended to support and highlights the complex and intersecting needs of the mothers/parents being supported. These include histories of traumatic childhood including care experience, having previous children removed from their care, and intersecting issues of insecure housing, mental ill health and domestic abuse.

Professionals understood the importance of early referrals to the service and changes to children's social care systems now allow referrals from 12 weeks of pregnancy. Flexibility was valued where later referrals are received.

Assessment and decision-making

We have very clearly seen a reduction in the number of newborns who are removed. Absolutely no doubt about that... I know that I am seeing considerably fewer ADMs... The numbers of placement orders have dropped significantly.

I've currently got - waiting with the adoption service, I've only got four children waiting, which is the lowest we've ever had. Now, that's not just about Baby and Me. That's other stuff going on as well, but I do think Baby and Me is key in some of - in that in terms of our babies... In pre-proceedings in PLO pre-birth, whereas previously we almost certainly would have issued even if the baby had gone home, that's stopped, so we're not doing any of that at all. (Professional, other service)

Our analysis showed a reduction of 31% in the number of infants coming into care within 14 days of birth, based on an overall comparison of time periods before and after Baby and Me commenced in 2019. While entry to care for Newport children in all age groups in this period also reduced, the work of Baby and Me is attributed as a key factor by professionals across the local system in the reduction in removal of infants into care.

Limitations of the available data meant we were unable to match a truly comparative sample to compare care entry for babies involved with Newport children's social care against the outcomes for those whose mothers/parents worked with Baby and Me. Recommendations of the evaluation include that the further development of the Welsh Community Care Information System (WCCIS) should be informed by the Baby and Me monitoring data process in order to provide better data on the characteristics, previous experience of care proceedings, and needs of parents involved with children's social care.

Interviews with parents and professionals consistently suggest that this enhanced data recording is underpinned by Baby and Me practitioners' specialist skills, their focus on building trusting relationships, and the opportunity to invest time in working directly with parents.

This results in a more thorough understanding of mothers/parents' life circumstances, challenges and capacity to safely care for their child. Baby and Me practitioners are able to provide robust evidence for social workers on the extent to which mothers/parents have been able to make changes prior to the birth of their infant, improving confidence

in their decision-making. Where a decision is reached that an infant should enter care, Baby and Me involvement appears to have supported early permanence decisions, which has important implications in terms of longer-term outcomes for the baby.

Improved outcomes for parents

Before I was able to work with [Baby and Me worker], I would not have told the social workers... I would've hid it because I was terrified that they would've taken the baby. I would've cancelled any appointments... Because of the Baby and Me team [they] have given us that confidence and shown us what's possible and helped us build that relationship with [social worker]. (Mother)

Mothers/parents reflected on positive changes to their lives as a result of Baby and Me. They valued relationships with the team, felt respected, and took pride in the changes they had made. Mothers/parents reported developing new parenting knowledge and skills, increased understanding of professional concerns, and increased willingness to engage with the social worker and wider support being offered. For those accessing Family Group Conference, this was valued in improving parents' social and support networks.

Mothers who were separated from their baby at birth described their deep pain and anguish, but spoke too about how Baby and Me had helped support them through proceedings and post-separation.

Improved outcomes for babies

While I was pregnant, they were like, 'Right, you have a bond with him. Talk to him. Do this and that', and I'm just like - if I didn't do that, I wouldn't have had the bond with him I do now. (Mother)

Babies' physical, emotional and cognitive developmental trajectories are closely connected to their primary care givers' health and wellbeing and the bonding between them both before and after birth (Marmot, 2010, and House of Commons, 2019). There was evidence from the qualitative and quantitative data that mother/parental wellbeing improved as a result of support from Baby and Me.

The evaluation findings suggest Baby and Me improved professionals' understanding of mothers/parents' capacity to change, enabling well-reasoned decision-making at an earlier stage. On average, Baby and Me infants were on child protection plans earlier than comparator children, and these plans de-escalated within the first 12 months.

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Smoking during pregnancy adversely affects children's future health and development (House of Commons, 2019). While rates of smoking were substantially higher among mothers in the Baby and Me group compared to the general population, 62% reportedly reduced their smoking during their time with Baby and Me.

The importance of Baby and Me's ethos and approach

Well, I thought when they first came in, they seemed very nice, they seemed they were friendly. They weren't immediately coming in and you felt like you were being judged. (Father)

Trauma-informed practice and developing a trusting relationship with mothers/parents is central to the ethos of Baby and Me and was highly valued by parents. Working with fathers as well as mothers is a key feature of Baby and Me. Both mothers and fathers highlighted the positive impact of this and the employment of a dad's worker has facilitated fathers' engagement with the service.

We just grew really, really close, and I became on a level with her where I would be honest with her. I used to look forward to her ringing me, I used to look forward to her coming out. (Mother)

Low caseloads were a key factor in enabling the development of trusting relationships with mothers/parents, and providing an intensive, personalised service. The independence of the Baby and Me team from the case-holding social work team was highlighted by different professional groups as key to the successful operation of the service. Learning from the Baby and Me team was also credited in having a 'ripple effect' on supporting improved relationships between parents and social workers.

I think it works really well having the two teams... So, there is, often, things in conversations that our mums and our dads and our families will have, with family support officers, and family support, that they wouldn't necessarily want to have with us, because we're the big, bad social worker. Actually, it means that they [mothers/parents] can open up to them [Baby and Me workers]. (Professional, Child protection Social Worker)

Leadership and multi-agency working

I feel like we are kind of the blanket that kind of ties everything together. You know, they have often got lots of services involved and sometimes you just need that person to kind of pull it all together a little bit for them and streamline the service. (Professional, Baby and Me Team)

The long-term partnership and shared vision between leaders at Newport Council and Barnardo's Cymru has been a crucial enabling factor in establishing and embedding the Baby and Me service. Interviews with professionals across the local system stressed the importance of partnership working and clearly defined routes into services from a range of agencies. The role and expertise of the experienced child protection social worker leading the Baby and Me team was viewed as crucial in enabling changes to wider practice.

Baby and Me workers were described as having a good knowledge of available services and being tenacious in advocating for mothers/parents. Interviews with the Baby and Me team emphasised the importance of this aspect of their work in aspects such as health and housing

Workforce and capacity

Professionals discussed the need, and difficulty, of gradually stepping down support for mothers/parents as their time with Baby and Me ends. The overarching view from professionals and parents was that six months was about the right time to end support, but there was recognition that some mothers/parents continue to have ongoing difficulties and are likely to continue to need support, usually from universal/specialist services.

At the time of the first interviews with professionals (winter 2020), the Baby and Me team comprised a senior social worker, three family support workers, a specialist health visitor and a sessional midwife, supported by the senior leadership teams from Newport Council and Barnardo's Cymru. At the second interviews with professionals (Spring 2022), we heard how the team had grown to adapt to the emerging needs of the service with an additional family support worker joining the team in 2022 and a dad's worker recruited in August 2021. The nature and intensity of the work requires workers to be well supported through clinical supervision, and peer support.

The COVID-19 pandemic and staffing capacity were challenges for Baby and Me's intensive, team-led approach. Professionals in all services also reported high levels of midwifery and health visitor staff vacancies and turnover, leading to challenges in building and sustaining the necessary partnership working. Access to appropriate mental health support was a significant challenge for mothers/parents working with Baby and Me.

Recommendations

To continue to develop and improve the programme we recommended that:

- Newport City Council should (1) hold a partnership event to explore options for joint commissioning, and to secure strategic commitment to enable embedding health, mental health and perinatal roles into the programme, and (2) continue to work to increase availability of local mother and baby foster placements.
- The Baby and Me team should (1) continue to work with partners to improve the timeliness of first referrals to Baby and Me to maximise the time prior to birth for support and intervention, (2) consider how to further share learning from the programme to help services better prepare young people in and leaving care for parenthood, (3) continue the collection of monitoring data.
- Barnardo's Cymru and the Baby and Me team should consider how to further share learning from Baby and Me about providing respectful and humane responses for pregnant women at risk of being separated from their baby.
- The Newport City Council corporate data and performance team should consider adding the parent characteristics, previous experience of care proceedings, and needs to the WCCIS dataset for children's social care.

Honestly, it's amazing. I can't speak highly enough about the Baby and Me team. The work and investment that they do with the mums, is just invaluable. (Professional, Child Protection Social Worker)