



#### **DESCRIPTION OF THE PRACTICE**

## 1. Title of the practice

Integrated Care and Support for Children in Malta

## 2. Organisation responsible for the practice

Foundation for Social Welfare Services (FSWS)

## 3. Contact person(s)

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## 4. Summary of the practice

In Malta there is a growing movement in social services to provide more integrated support to children.

This is being supported by the creation of roundtables and memorandum of understandings between children's services and other services to promote more integrated approaches.

For example, risk assessment forms have been created for professionals working in other services to have a clear set of risk criteria for children, with guidance on when child protection teams should be involved.

The child protection service is establishing closer connections to NGO providers of alternative child care, to encourage ways of working that promote the best interests of the child.

Coordination also extends to schools where every school has a child protection social worker posted to be able to identify and provide support to children who may be at risk.

A network of coordinated services is being developed for preventative action. This includes child protection, home based therapy services, psychology unit services, addiction services, and parenting programmes.

Beyond this, there is growing coordination with the criminal justice, and judiciary systems, where social workers are receiving training on how they can apply more holistic assessment tools which can be used to identify the risk of violence for the child.

There are also plans to increase cooperation with police and health services.

# 5. National/regional/local context of the practice

This initiative is being implemented by the Foundation for Social Welfare Services (FSWS) which operates across the country.





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Senior leaders across the different services are involved in roundtables to plan how more integrated approaches can be implemented.

Also, social workers from child protection are placed in different services (drug and addiction service, schools).

# 7. Target group

Children and families

## 8. Aims of the practice

Improve coordination between different services so that support is focussed on the whole range of needs for a child and family.

### 9. Issues for social services

| Service Integration/        | Χ | Service                               | Χ | Contracting         |  |
|-----------------------------|---|---------------------------------------|---|---------------------|--|
| Cooperation across services |   | Planning                              |   |                     |  |
| Technology                  |   | Skills development (of the workforce) |   | Quality of services |  |
| Others:                     |   |                                       |   |                     |  |

# **ANALYSIS OF THE PRACTICE**

#### 10. Status

| Pilot project (ongoing)     |  | Project (ongoing)    | X | Implemented practice (restricted areas) |  |
|-----------------------------|--|----------------------|---|---|--|
| Pilot project (terminated ) |  | Project (terminated) |   | Widely spread practice/rolled out       |  |

### 11. Scope of the practice

Describe the setting of the practice, considering the following criteria:

- Micro level practice: practice that involves individuals at local level
- Meso level practice: practice that involves organisations or communities
- Macro level practice: practice that involves large population groups

Meso: The practice focusses on creating connections between different services in Malta.

# 12. Leadership and management of the practice

Description of the leadership of the practice, considering the following criteria:

- Collaborative management: shared between large partnerships, often of central, regional and local representation
- Organisational management: by one organisation
- Professional management: managed by a single person
- Shared management: shared with no defined leadership





Organisational: The child protection service of FSWS is reaching out to other services to improve coordination.

## 13. Engaging stakeholders in the practice

Description of the engagement of stakeholders, considering the following criteria:

- Individual practice: individuals have sought practice change
- Network approach: one or more organisations develop a network
- Collaborative approach: large collaboration with relevant stakeholders

Network: The practice focuses on building closer working arrangements between different services in Malta.

#### 14. Involvement of service users and their families

Description of the involvement of service users, considering the following criteria:

- Team involvement: service users and carers were part of the practice team
- Consultative: a consultative body of users was set up for an on-going dialogue and feedback
- Involvement in care: person-centred approaches to care/support

The practice is primarily focussed on achieving closer coordination between the different services, which can promote a more child-centred view.

## 15. Costs and resources needed for implementation

Description of how the practice is financed, considering the following criteria:

- Within existing resources: staff time and other resources are provided 'in-house'
- Staffing costs: costs for staff investment
- Joint/Pooled budgets: two or more agencies pool budgets to fund services
- Funded project: external investment

Within existing resources

# 16. Evaluation approaches

Description of the evaluation method of the practice, considering the following criteria:

- Multi-method: use of both a qualitative and a quantitative approach
- Single method: qualitative or quantitative approach
- Audit: looks at data sources such as existing medical records, and/or other routinely collected service
  data
- Informal: refers to in-house service evaluation using locally designed tools and/or collecting opportunistic feedback
- No evaluation
- An evaluation is planned

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| 17. Measurable effects of the practice and what it has achieved for |  |  |  |  |
|---|--|--|--|--|
| Service users   |  |  |  |  |
| Formal care givers  |  |  |  |  |
| Informal carers   |  |  |  |  |





| Organisations   |  |  |  |  |  |
|---|--|--|--|--|--|
| Other   |  |  |  |  |  |
| 18. Anticipated or 'aspirational' effects of the practice and what it has achieved for  This category can include outcomes which are not documented, quantified or properly evaluated. They can include such elements as improved knowledge, quality, workforce, etc. |  |  |  |  |  |
| Service users   | More integrated approaches will prevent situations where children and families are subjected to uncoordinated and fragmented interventions with numerous professionals involved.  Instead joint working by professionals enables more complex and child-centred support, which can improve outcomes. |  |  |  |  |
| Formal care givers  |  |  |  |  |  |
| Informal carers   |  |  |  |  |  |
| Organisations   | The new working methods are in the early stages, but are already believed to be having a profound impact through stronger relations between services and a more cooperative environment.   |  |  |  |  |
| Other   |  |  |  |  |  |
|   |  |  |  |  |  |

# 20. Sustainability of the practice

Description of whether the practice is sustainable, considering the following criteria:

• Potential for sustainability: practice was newly started or is on-going/not yet mainstreamed. How could the practice be sustained (in terms of resources)?

19. How the practice has changed the way the service is provided (lessons learned)

- Organic sustainability: service users have been empowered to take the practice forward
- Established: the project has been operational for several years

There is potential for sustainability, as the practice has been developed through existing resources.

# 21. Transferability of the practice

Description of whether the practice has been transferred, considering the following criteria:

- Transferred: transfer to other regions, countries, service user groups, etc.
- Potential for transferability: there is interest from the outside; elements of the practice have been taken up and used elsewhere; material for transferability (for ex. training material) has been developed