

Swindon's Early Help Strategy Strategy 2017 - 2022



Swindon's Early Help Strategy





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Welcome to Swindon's Early Help Strategy



Introduction

All partners in Swindon are working together, to ensure that the borough has a bright future ahead and that it continues to be a great place to live, work and visit for generations to come. However, we know that for some families this bright future is not guaranteed. There are over 52,004 children and young people aged 0-18 living in Swindon and we want to

ensure that they are all able to take advantage of the benefits of living here. Most do, but there are some children and young people who cannot, or who need help to do so. Swindon is a town of geographical inequality and poverty. The place we are born, or the place we live, is likely to dictate our life chances, unless actions are taken to change this.

Swindon's Child Poverty Needs assessment recognises the importance of providing intervention at the early stages when families are experiencing difficulties. Latest data (Index of Multiple Deprivation 2015) shows us that 64% of Swindon children living in one parent families are living in poverty. This contrasts sharply with children living in two parent families; where the rate of poverty is just 9%. This means that a child living in a lone parent family is almost seven times more likely to be living in poverty than a child living in a two parent household. Latest evidence (Selwyn 2016) suggests that a child with special educational needs receiving free school meals, has a '70% likelihood of being referred to social services in the future'. Early intervention has a big part to play to proactively work with these families before they hit crisis so that they avoid having to access costly social care interventions later in the child's life.

Early intervention is already established as a core principle in many areas of working and there is substantial commitment and energy to support and work with families. However, there is a sense that early intervention could be more coordinated and that the strategic direction could better channel early intervention and prevention work to make the most of strong partnerships, existing good practice and further targeted investment.

It is also clear that even with this commitment, and pockets of good practice, there is more work needed to deliver the step change required to achieve better outcomes for the Swindon population. For example, inequalities in life expectancy remain stubbornly in place across the town. A sixth of all children still live in poverty, with as many as one in two experiencing the effects of poverty through income deprivation in some areas of Swindon. A coordinated approach to prevention and early intervention work, building on community strengths and resilience, offers a solution for better outcomes as well as reducing demand on statutory services whilst also having the potential to save money over time.

This is a shared responsibility and requires commitment across the partners to ensure we tackle problems early on for children, young people and their families. With reducing resources it is clear Swindon Borough Council cannot be the primary provider for all children needing preventative services. Through strong partnership working between internal service teams and organisations such as the Police, government agencies, local support groups, schools, charities, businesses and local communities, we can target our resources to get the best outcomes at all stages of childhood, and support the most vulnerable. Our focus is to ensure children are supported early to reduce the need for statutory intervention.

This strategy sets out the priorities that Swindon has agreed as the focus of our joint work for the next five years.



1. Vision for Swindon

Swindon Council and partners are committed to ensuring that every child is given the support they need to grow and thrive. We want children to enjoy life, establish healthy relationships and stay safe from harm. Many families will need minimal support from services but some children and their families need higher levels of support. In this case, the partnership will work with the family to develop their parenting skills and to make sure that children are safe from harm.

The focus on working with families to build resilience and wellbeing is articulated in our vision for Swindon 2017-2022 and Swindon's Joint Health and Wellbeing Strategy through the following priorities:

- Swindon's children are safe, free from harm and able to grow and prosper
- Every child and young person in Swindon has a healthy start in life.
- To improve mental health, wellbeing and resilience for all.

The Swindon partnership commitment to early intervention is demonstrated through the range

of services and activities that are already in place across the borough. Our aim is to pro-actively engage with families to prevent problems occurring, and where they do, to reduce the impact and stop them from escalating.

Our Early Help Strategy seeks to address inequalities of health, wealth and opportunity in Swindon through co-ordinating, brokering and commissioning the right kind of help and support at the right time to local communities. We are committed to using local data and intelligence to help identify current and emerging need and jointly plan to address the need.





1.1 Early Help Strategy Aims

This strategy aims to drive partners to work together to plan, commission and deliver a range of provision to help children, young people and their families get support as quickly as possible when the need arises. Our strategy aims, over a 5 year period, to:

- help children, young people and families build resilience and self-reliance to enable them to find their own solutions when problems develop
- Ensure the right help is given at the right time and right place across all levels of service provision, to ensure earliest possible identification and prevention of escalation.
- Deliver a much more co-ordinated response to cases requiring multi agency and multidisciplinary support below the thresholds for statutory intervention.
- Improve the health, wellbeing and emotional resilience of vulnerable children and young people and families within Swindon

partnership working is built upon working together and delivering a whole-family approach

1.2 Early Help Principles and Values

Our Early Help Strategy is underpinned by the following principles and values:

- Early Help is 'everybody's business' and we intervene earlier at the first signs of potential issues.
- Early Help is about building emotional intelligence, capacity and networks in communities to keep children, young people and their families healthy and make things happen locally.
- To deliver a visible, integrated local offer that is accessible.
- To deliver good quality, evidence-based and timely interventions which are cost effective and add value.
- Our partnership working is built upon working together and delivering a whole-family approach.
- Our workforce will be confident and be supported to engage and intervene with children, young people and their families to offer Early Help.
- Families will be empowered to actively participate in Early Help assessments and in drawing up plans and goals
- Where unmet needs involves two or more agencies, there is a commitment at the first point of contact to undertake an assessment and produce an Early Help Record and Plan (EHR&P), irrespective of whether that need falls within the immediate area of expertise of that professional
- To use peer support networks and community assets, not just professionals, to transfer knowledge and capabilities about Early Help.
- Early Help Our offer will promote the independence and self-reliance of children, young people and their families by providing supportive relationships and connections within local communities that can help people or families continue to survive and thrive

2. Drivers for change

2.1 National Context

Recent national reviews undertaken by Marmot (2010), Munro (2010), Allen (2011) and Tickell (2010) have highlighted the importance of Early Help for improving children's life chances and delivering better outcomes for them and their families. The sooner we can help families, the less likely it is that their situations will worsen. Our Early Help Offer will take account the following key messages from the Munro (2011) review:

- Preventive services will do more to reduce abuse and neglect than reactive services
- Co-ordination of services is important to maximise efficiency
- Within preventive services, there needs to be good mechanisms for helping people identify those children and young people who are suffering or likely to suffer harm from abuse and neglect and who need referral to children's social care

The 'Working Together to Safeguard Children' (2015) guidance places an emphasis on the importance of Early Help in promoting the welfare of children, together with clear arrangements for collaboration. We want to ensure that our Early Help Offer reflects the ambitions of this guidance. The guidance recommends that professionals should, in particular, be alert to the potential need for Early Help for a child who:



- is a young carer
- is showing signs of engaging in anti-social or criminal behaviour
- is in a family circumstance presenting challenges for the child, such as substance misuse, adult mental health, domestic violence and/or
- is showing early signs of abuse and/or neglect and/or sexual exploitation



improving children's life chances and delivering better outcomes

Early Help includes both interventions early in life (with young children, including prenatal interventions) and interventions early in the development of a problem (with children or young people of any age). It covers universal interventions which are offered to everyone to prevent problems developing (e.g. GP practices, midwives, health visitors, school nurses, early years, schools, play and youth provision). It also includes targeted interventions that are offered to particular children, young people and families with existing risk factors, vulnerabilities or acknowledged additional needs in order to protect them from developing problems or reducing the severity of problems that have started to emerge. With the right support, children, families and communities can become resilient and are in a better position to bounce back and thrive when faced with new challenges.

The Swindon Early Help Strategy strongly recognises the contribution of the wider partnerships as well as local communities in ensuring the safety and wellbeing of families, children and young people. We believe Early Help is not a single agency responsibility and requires a whole family approach owned by all stakeholders working together to support children, young people and families. This includes Health, Police, Probation, Schools/ Education, Children's Social Care, Adult Services, Housing, Voluntary and Community organisations, Charitable Foundations and the wider public.

There is a growing body of research evidence that suggests that intervention as early as possible pays off, early in the life of a child and early in the life of a problem. It is therefore crucial we ensure the right balance of investment across universal, targeted and specialist services. Through working in partnership with family members to deliver services that respond to their needs, we can build on their strengths and give them the best chance of making a positive difference to children's lives.

Our primary aim is to help children, young people and families find their own solutions to problems and to build family resilience and wellbeing to prevent problems developing in the future.

Universal services are those that are available to all families and they play a key role in ensuring

families receive Early Help and support before problems develop further. Most children will access universal services successfully and have their needs met by their family and informal support systems with minimal intervention from professionals. To effectively deliver universal services within the context of Early Help, it is essential agencies and professionals recognise the importance of early identification of need. Through working collaboratively to effectively co-ordinate services at a local level, we can help families to identify their own solutions to problems. This is dependent on:

- The provision of the healthy child programme, a schedule for public health services covering care from 28 weeks of pregnancy through to age 19 which delivers evidence-based health, wellbeing and resilience programmes for every child
- Making information available to families so that they can find out what services there are and where and how they can access them when they need them
- Providing general advice and information
- Assessing and identifying unmet needs through the use of Early Help Records and Plans (EHR&Ps)
- Monitoring needs in a low-key way and be ready to step in if the family exhibits signs that indicate a more targeted response is required
- Being aware of the range of targeted and specialist services available and understanding how to link with them.

If delivery and support is right at this 'universal' stage, the demand for more targeted and specialist support should reduce. In Swindon, we have seen an increase in the number of children becoming Looked After since 2009 with a significant rise since 2015 / 2016. Findings from some national research that reviewed a number of children in care cases indicated that in almost half of the cases, something 'probably' or 'definitely' could have been done to prevent the child becoming Looked After. Our ambition is to deliver better Early Help so families benefit from preventative rather than reactive services. This approach should reduce the need for statutory intervention and provide more cost effective solutions to supporting children and their families and better outcomes for children, young people and families.

2.2 Local Context

We have used Swindon's Joint Strategic Needs Assessment (JSNA) alongside an analysis of local user data to understand where in the Borough families are likely to require support.

Using local insight, we can design and target services to the areas that will have the biggest impact for tackling problems early on for children, young people and their families.

Key issues for Swindon's Early Help Strategy:

- Research tells us that pregnancy and a child's early years are a time of vital importance to a child's future health and wellbeing. Parents are central to this.
- Each year there are approximately 3000 births to Swindon residents. The under-five population is about 7% of the all-age population in Swindon, a higher proportion than in England or the south west. In Swindon 25% of under-ones are part of a BME community, and in Central ward 45% of under-fives are from a BME community.
- Over 120 languages are spoken in schools in Swindon
- Significant health inequalities in Swindon have been identified in the Joint Strategic Needs Analysis (JSNA) with children from poorer households tending to do worse on cognitive and behavioural outcomes at ages 3 and 5, and this disadvantage persists through childhood
- The Swindon Health Visitor survey (2015) of families with a child under the age of one identified the three most common reported health needs indicators as being low income (21%), parents who smoke (19%) and depressed or mentally ill parents (16%).
- In Swindon, 9.2% of 5 to 16 year olds are estimated to have a mental health disorder
- There are estimated to be 100 young people in Swindon who require, but are not receiving a mental health service

- From the 2011 census 1.4% of 0 to 15 year olds and 1.7% of 16 to 24 year olds in Swindon consider their daily activities to be 'limited a lot' by long term health problems or a disability
- In Swindon, approximately 1,500 children and young people are exposed to domestic abuse each year
- Neglect and emotional abuse are the main categories leading to a child protection plan
- In Swindon, being a child in a lone parent family increases the likelihood of child poverty from 9% to 64%.
- In 2014/15 -2016/17, in Swindon, there were 40 admissions to hospital due to alcohol specific conditions (in under 18s) and 100 for substance misuse (in 15-24 year olds).
- 362 children were subject to a child protection plan at 31st March 2018, a rise from 244 in 2016/17. Swindon has a higher rate (73.88 per 10,000 population under 18) than the national average (43.3) and statistical neighbours (46.4).
- Approximately 385 children are known to drug and alcohol treatment services as having parents who are drug or alcohol dependent – it is predicted there are approximately an additional 1,260 children living in Swindon with drug / alcohol dependent parents



As part of Swindon's Joint Strategic Needs Assessment, Children and parents/carers were asked for their view – they told us what was important to them:

- Having support from someone you can trust
- Recognising the value of social connections
- Having more information about what is available online
- Not to be judged when we ask for help
- Continuity of care with the same professionals being involved
- Using words we can understand
- Not having to tell my story over and over again
- For professionals to speak to and listen to the young person rather than just their parents.
- To know where to go or how to get help
- To be clear who does what
- To get help when we need it and not have to wait a long time
- For services to be flexible and close to home.

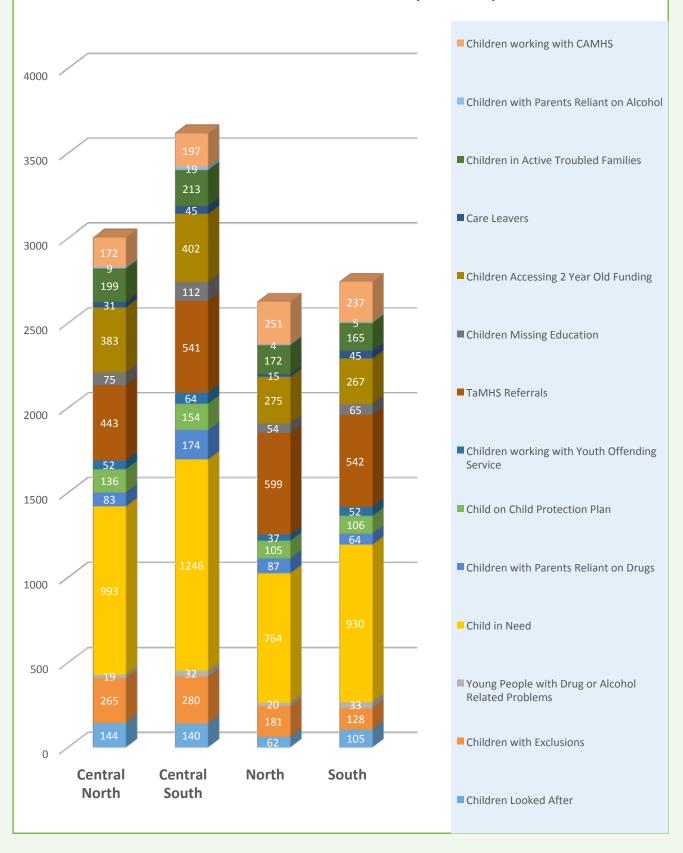
Children Accessing Early Help and Social Care Services 2016/17

We have developed a geographical focus for our Early Help Offer through the creation of multidisciplinary locality teams which have strong links with local communities. Swindon has four locality teams: Central North, Central South, North and South. These locality teams are best placed to identify need and to support their local communities in accessing services. The locality teams have a key role in facilitating strong links with both internal and external partners as well as ensuring there is a shared understanding of thresholds and intervention levels.



Vulnerable Children by Locality 2016/17

The number of children accessing early help & social care services in Swindon by locality



Proportion of local population accessing Early Help and Social Care Services 2016/17

Central North Population 2016/17

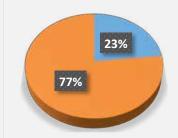


Accessing Early Help or Social Care Services

Not Accessing Early Help or Social Care Services

TOTAL POPULATION: 8,946
NUMBER ACCESSING SERVICES: 3,120 (35%)

North Population 2016/17



Accessing Early Help or Social Care Services

Not Accessing Early Help or Social Care Services

TOTAL POPULATION: 17,286

NUMBER ACCESSING SERVICES: 4,017 (23%)

Central South Population 2016/17

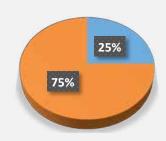


Accessing Early Help or Social Care Services

Not Accessing Early Help or Social Care Services

TOTAL POPULATION: 14,432 NUMBER ACCESSING SERVICES: 4,322 (30%)

South Population 2016/17

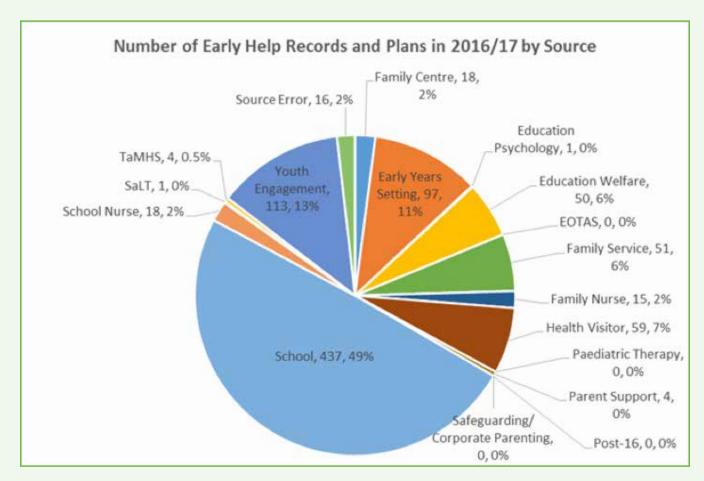


Accessing Early Help or Social Care Services

Not Accessing Early Help or Social Care Services

TOTAL POPULATION: 16,060

NUMBER ACCESSING SERVICES: 4,017 (25%)



The chart above shows the number of Early Help Record and Plans (EHRPs) by assessor. 684 EHRP were completed in 2016/17 compared to 2986 social care statutory assessments. This clearly indicates the need to shift the focus to ensure families get help sooner to prevent needs escalating and reduce the need for statutory intervention. This strategy will support better working across the partnership in using Early Help Records and Plans to undertake a thorough assessment of the whole family's situation to ensure families receive support that responds to their needs and builds on their strengths.

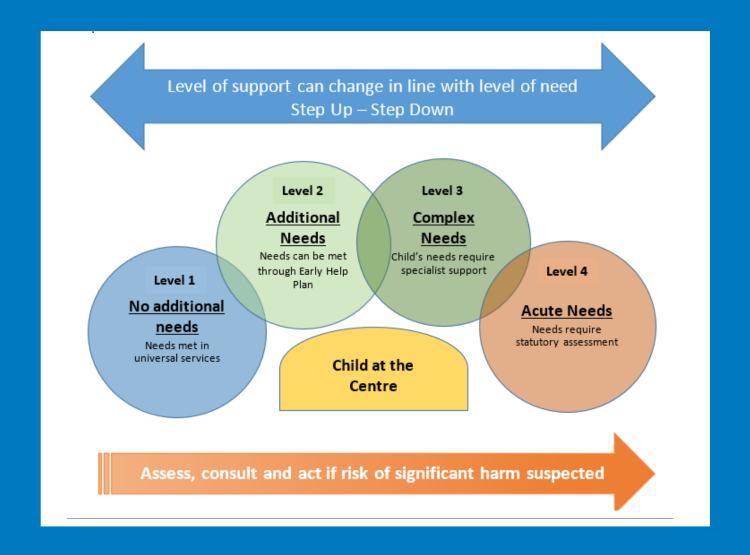


3. Swindon's Early Help assessment and planning process

Our strategy for Early Help is based on the model of a continuum of need, recognising needs can change over a period of time depending on circumstances. In turn, this requires clarity about how all public services can support the delivery of effective Early Help, whether they are services that operate on a universal, targeted or specialist basis.

Swindon's 'Right Help at the Right Time' Guide to assessing levels of need and identifying the most appropriate support illustrates how Early Help provision is part of a continuum of help and support with the child at the centre. We must strive to ensure we maximise the use of universal services within the context of reduced public

funding. We understand that some families will require additional support, perhaps even intensive support at times, and all professionals need to be aware of their responsibilities to safeguard and protect children and engage in providing Early Help.





A Multi-Agency Safeguarding Hub (MASH) has been created to deal with all contacts to Children & Families. The primary aim of this team is to receive all contacts to Children & Families; gather rich information to enable a robust decision to be made. The service aims to provide a rapid, effective and responsive screening, triage and decision making service to all those seeking assistance for vulnerable children and families at initial point of contact: aiming to ensure that children's needs are identified early so that services can be targeted early into the life of the problem. The team is co-located with Police, Early Help and Health colleagues to ensure the timely and accurate sharing of information between early help; social care, police and health

When it is clear a child may have additional needs that can't be met by universal services, an Early Help Record & Plans (EHR&P) may be required to ensure that the best possible support is provided to the child and their family. The Early Help Record and Plan is the common process in Swindon for supporting children, young people and families with additional needs through early identification, swift intervention and a planned, coordinated response. The aim is to consider the needs of the child or young person in four key areas:

- Health and Well-being
- Development needs, educational attainment and achievement
- Parenting/caring
- Family and Community

The intention is for all children and young people, irrespective of their circumstances, to have the best start in life, to grow up safe, stable and healthy, to fulfill their potential and make a contribution to their community.

The Early Help Record is the first part of the single assessment process that aims to empower children, young people and their families and provide a timely, seamless service if needs escalate. The Early Help Record and Plan supports families through early help to escalating complex needs and urgent needs that require a statutory response from children's social care and/or an Education, Health Care Plan to respond to special educational needs and/or disability.

The practitioner who identifies the needs gains consent from the young person, parent or carer to undertake an assessment, following which he or she coordinates an Early Help Record and Plan and initiates, if appropriate, a Team Around the Child and Family (TAC/F) meeting.

The purpose of the TAC/F meeting is to bring together practitioners with the appropriate skills to meet the identified needs of the child and bring together family members who can join the TAC to jointly develop a support plan. The parents and practitioners concerned will agree the most appropriate person to undertake the Lead Professional role.

Goals will be identified and regular reviews undertaken, with the focus on a child-centered approach, positive engagement with the family, increased community involvement and collaboration between agencies.

4. An integrated Early Help Offer

Our ambition is to revitalise our offer of Early Help across Swindon. We will work closely with key partners to jointly review strengths and areas for development against the following areas to ensure that the best possible offer is available:

4.1 Strategic and structural fit

- A common understanding of early help
- Strategic buy-in and direction from across the partnership which supports a clear vision and co-ordinated early help offer.
- Links with adult services across health, social care and probation to ensure alignment with our early help offer.
- Evidence that Early Help services and interventions that already exist are evaluated to ensure they are needs led, good quality, cost effective, evidenced based, timely and co-ordinated
- Early help is part of a whole system approach and is based on a clear understanding of local need
- Partners are working together to jointly commission wherever possible

4.2 Workforce, practice and organisation

- Our Early Help Offer has appropriate social work input to provide a basis for practical family support linked to core social work principles.
- Staff across the partnership have good awareness, knowledge and understanding of Early Help
- Case management and Information systems are integrated across the partnership to support the sharing of information
- Job descriptions include well-defined core skills and competencies required for delivering early help including ability to engage effectively with both children and adults
- There is co-ordinated management oversight of cases at EHCP/TAC level
- Clear information sharing protocols are in place which underpin integrated working

- A joint performance management framework is in place to measure the impact of Early Help, particularly where cases need to be escalated to social care despite previous interventions
- Roles of different services in supporting the Early Help pathway are clearly defined to ensure we are not inappropriately over-relying on individual services or partners

4.3 The child's journey

- Information systems support integrated Early Help working across the continuum of need
- Early Help offer is well defined and focuses on the child's journey and not confined to 'step up/ step down' or 'tiers' of provision.
- There is clear articulation and expectations of the nature and level of social care involvement where thresholds are not met and after child protection plans are ceased.
- Good co-ordinated Early Help, TAC and Social Care resources are evident at the 'front door' via integration, co-location and ownership of shared thresholds.
- Early Help Records and Plans and case notes are recorded and accessible across the system.

4.4 Learning and improving

- Early Help is a strategic priority for the LSCB and there is a joint understanding of accountability
- Robust measurement is in place to assess the impact of Early Help using qualitative, quantitative and outcomes-based evidence
- A process is in place which seeks regular service user feedback to quality assure and improve the early help offer.
- A joint process has been established to robustly track, monitor and review Early Help processes, plans and outcomes to identify areas for further development.

5. How we will measure success

A set of key performance measures have been identified to enable the partnership to evaluate the impact of revitalising our local offer of Early Help across and the track progress in implementing the Early Help Strategy.

Impact of Early Help	Performance measures (at borough level)
More children living safely at home	 Number of Children in Care (CiC) Number of children on a Child Protection Plan Number of children identified as a Child In Need Children who have gone missing Children at risk of child sexual exploitation The rate of offences against children Hospital admissions caused by unintended and deliberate injuries to children and young people Reported incidents of domestic violence Number of Troubled Families achieving significant and sustained outcomes
Families access help and support at the earliest opportunity	 Improved outcomes for child / family Number of Early Help Assessments (EHR&P) completed Uptake of early education by eligible 2 year olds
More young people are ready for school, work and life	 Number of 18-24 year olds Not in Education, Employment or Training Progress on the Strengths and Difficulties Questionnaire (SDQ) for Children in Care or all children needing Early Help School attainment % of pupils for whom pupil premium is paid Attainment for Children in Care 90% school attendance School exclusions
Improved health for both parents and children and young people	 % of infants recorded as being totally or partially breastfed at 6-8 weeks % of all live births at term with low birth weight Reduce the number of pregnant women who smoke % of homes that are smoke free Increase smoke free sites for areas where children play % of schools with smoke free school gates % of children ages 4-5 and 10-11 years classified as overweight or obese % of young people at aged 15 years who are currently smokers Rate of emergency hospital admissions for intentional self-harm (10-24 years) Rate of under 18 admissions to hospital for alcohol specific conditions Rate of conception per 1000 females under 18 and under 16



Swindon Borough Council are amongst many local authorities operating within a climate of unprecedented challenge for the public and voluntary sector as demand for specialist services rapidly increases against a backdrop of reducing resources. For some families (nationally estimated at 30% of the population), difficulties arise which, if addressed early enough, can be prevented from escalating into costly statutory service intervention. If Early Help is not offered in a timely manner or not at all, this can in the worst cases result in children's social and emotional development being irreparably impaired and family breakdown.

If effective, Early Help empowers families to regain control of their circumstances and help transform the lives of vulnerable children without state support and have a secondary, though equally important, positive effect on cost effectiveness. The central importance of early intervention in enabling children and adults to reach their

full potential has been set out in a number of government reports published nationally and these recommendations have inspired much of this Early Help Strategy.

Poverty – financial, social and health deprivation, remains the leading predictor of poor life outcomes. In Swindon one in every six children lives in poverty and in four of our most deprived areas almost every other child is living with the effects of poverty. The two factors identified that make it significantly more likely that a child in Swindon is living in poverty are worklessness and living in a lone parent family.

Enabling everyone to have fair access to the opportunities Swindon offers means addressing the root causes of poverty in the places where we know people are struggling. We need to work jointly with our partners and communities to revitalise our Early Help Offer to change this.

7 Recommendations:

The priorities for embedding Swindon's Early Help Strategy are highlighted below and will be implemented through a robust action plan. These include:

- 7.1 The Council working closely with key partners (e.g. schools, youth justice, health, voluntary and community services, housing and adult services) to ensure that the best possible offer of Early Help is available for people living in Swindon.
- 7.2 Ensuring Early Help support across the partnership is aligned to the Early Help principles and approaches and Early Help is part of the core business for improving the life chances of children.
- 7.3 Using robust needs assessments to understand the nature and extent of the needs in local communities to effectively plan and commission Early Help services and address any gaps in provision or targeted programmes.

- 7.4 Providing clarity about the responsibilities of local agencies to help families early and improve the quality and consistency of using Early Help Records and Plans (EHR&Ps) across the partnership to assess needs and plan support to improve children's lives.
- 7.5 Effectively monitor the impact of Early Help through a Swindon-wide Early Help Performance Framework to identify key issues, local gaps, impact and success.
- 7.6 To establish a multi-agency Early
 Help working group to be accountable
 for overseeing the development and
 implementation of a robust action plan to
 support the delivery of the Early Help Strategy
 and Local Offer.



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This information is available on the internet at www.swindon.gov.uk. It can be produced in a range of languages and formats (such as large print, Braille or other accessible formats) by contacting the Tel: 01793 445500 Fax: 01793 463982

E-mail: customerservices@swindon.gov.uk