



Early Help Annual Report 2020 - 2021

Executive Summary

This report provides a summary of the work carried out across some of Sefton's Early Help partnership. These services work alongside partner agencies supporting children, young people and their families as part of a 'Team around the Family', helping them to reach their potential, prevent issues from escalating and enabling them to lead happier and healthier lives.

Our response during the pandemic

- Early Help have adapted their delivery model to ensure support could be provided through virtual means. This enables regular contact to be maintained between families & professionals.
- Food parcels and activity packs were delivered to families during periods of lockdowns.
- A range of interventions were delivered virtually, providing much needed emotional support to children and young people.
- Family Wellbeing Centres have provided COVID secure settings to enable partners to deliver the Sefton Community Learning Service. This has provided opportunity for 46 courses to be delivered to over 200 adults living in Sefton.
- Development of stronger links with Education, piloting a 'Team around the school' approach with 7 schools identified as having the highest number of pupils being supported by Early Help.
- South Sefton Huddle transferred to virtual facilitation, the continuation of the huddle during the pandemic has ensured a co-ordinated response to our communities.

Performance Data

Early Help Performance 2020-21

- ◆ There has been a 22% increase in families progressing to Early Help Assessments. A 4% decrease has been seen in assessments completed.
- ◆ 29% increase in families plans being reviewed
- ◆ 13% increase in families plans closed with 'aims achieved'.
- ◆ Repeat episodes have increased from 486 to 532.
- ◆ 14% increase in families closed due to being 'unable to engage'.
- ◆ 29% increase in cases stepped up to Children Social Care.

Turnaround Families success

- ◆ In 2020/2021 Sefton's target imposed by the Ministry of Housing and Local Government (MHCLG) was to achieve 372 successful family outcomes – which Sefton achieved!
- ◆ The government has launched the next phase of the Troubled Families Programme, it has been renamed the Supporting Families Programme.

Audit Findings

What our audits have told us?

- Our initial response and timeliness to offering support impacts on the levels of engagement Early Help are experiencing.
- Our assessments are parent led and do not consistently capture the voice of the child or provide an understanding of the lived experience. A 'whole family approach' is not consistently embedded.
- Management Oversight and supervision has improved over the last 3 months, this was identified as a key area of development in April 20.
- Early Help plans require 'reviews' to be completed in a timely manner, drift in planning has impacted on the length of plans and families achieving outcomes.
- Relationships are a key strength of lead workers.



Our response to audit findings

- An Early Help engagement toolkit has been developed to provide a supportive resource to practitioners. In addition, a 15-day tool has been implemented within the EHM system to provide consistency to practice.
- A revised Early Help Assessment is being launched W/B 3rd May 2021, the assessment adopts a strengths-based approach and is informed by the Sefton Model of practice.
- A supervision policy has been developed and implemented in Early Help, a supervision tool has been implemented in the EHM system to support effective supervision.
- Monthly locality reports and performance meetings are being held with Localities, this will provide greater accountability and scrutiny.
- Quality Assurance bulletins are shared quarterly, this provides the partnership with feedback on audit findings and links quality assurance activity to practice.
- Quality and practice standards have been developed to support consistent practice.

Our partnership approaches

- The Early Help Partnership group has continued to meet virtually throughout COVID, this has provided ongoing governance of Early Help delivery.
- Sefton CVS co-ordinated a Level 2 pilot with a key focus on guided self-help. The success of the pilot has led to further developments and continuation of the offer.
- Police referrals have increased by 74% from 1730 in 19/20 to 3002 in 20/21. This is a positive indication of Police considering Early Help in their decision making.

Future Areas for Development

Development of a 'Team around the School' approach'

Increased scrutiny and moderation of quality assurance, to include participation from families 'capturing their voice'.

Driving quality and practice of Early Help, ensuring all partners are engaged and accountable

Development and agreement of 'Five Foundations of Early Help'

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Early Help in Sefton

The majority of children in Sefton lead happy and healthy lives, are part of loving families who take good care of them and support them to reach their potential. All children in Sefton deserve the best possible start in life; but unfortunately, there are some who face disadvantages that affect their development, which impacts on their future potential, health and happiness. Providing 'Early Help' plays a vital part in offering these children and their families the support they need to reach their full potential and keep them safe.

In Sefton we have a rich partnership of Early Help services who work to support families every day. These range from: education settings who are vital in providing learning and support for children, young people and families and which provide a safe place for children to thrive and learn; universal health services such as midwives, GPs, health visitors and school nurses; the police teams; and our vibrant voluntary and community sector partners.

This report provides a summary of the work carried out across some of Sefton's Early Help partnership. These services work alongside partner agencies supporting children, young people and their families as part of a 'Team around the Family', helping them to reach their potential, prevent issues from escalating and enabling them to lead happier and healthier lives.



“The total support that improves a family’s resilience and outcomes, or reduces the chance of a problem getting worse”

As the national vision defines, effective Early Help services can prevent problems from occurring and can tackle them head on when they do, before problems get worse. It also helps to build resilience in families, developing strength and skills that prepare children for adult life and help families to cope better with the challenge’s life throws at them.

Early Help takes many forms from community support from family and friends, local businesses and community organisations; universal services such as nurseries; Schools; GPs; Midwives and Health Visitors, through to more targeted services. Some services will play a role in the provision of both a universal and targeted offer such as our Family Wellbeing Centres who provide a universal offer open to all but have a targeted approach through an Early Help Assessment. The Police, and Health Visitors also offer both universal and targeted support, using their universal offer to identify risk early and follow up with more targeted support where necessary.

Some services are specifically targeted to certain vulnerable groups such as young people and adults dealing with substance misuse, housing issues, mental health support. There are also targeted programmes in schools to improve children’s social and emotional skills and other issues. Evidence clearly shows that early intervention has the strongest impact during the first few years of life, it is also true that effective interventions can improve children’s life chances at any point during childhood and into adolescence.

Collaborative working between Early Help services and children’s social care is crucial to support seamless transitions for families into and out of statutory child protection services, ensuring families receive the right support, in the right place and at the right time.

In Sefton these relationships continue to develop, and systems mature which ensure we prevent as many families as possible from entering or re-entering statutory services.

Early Help is only effective if there is a truly integrated offer and partners work together to support families, children and young people. Strong partnerships are a key feature of how we work in Sefton and we will continue to build and develop these partnership arrangements for Early Help and work to improve our support for the communities of Sefton. This report will showcase some of the good practice developed over the past twelve months and highlight areas for future development.



Early Help During a Global Pandemic



The Early Help offer during the past twelve months, has as far as possible, flexed and morphed to meet the changing restrictions and demands presented during a year of lockdowns and significant restrictions.

The impact of the global pandemic on services is probably yet to be fully realised, however it has been well documented that physical and domestic abuse, has soared during lockdown; isolation; young carers taking on even more responsibility; families feeling the strain due to mental health challenges, job losses, alcohol and drug misuse problems, and bereavements have recorded National highs as a result of the pandemic. Concerns have also been raised Nationally that young people are potentially more vulnerable and are at risk of being drawn into youth violence and county lines drug activities or being criminally exploited.

The LGA In its publication, '**A child-centred recovery**', says the number of children in care has been rising each year and could increase further as a result of COVID-19. It also warns that the impact of the virus may fall harder on disadvantaged children, who are likely to need even more support. Therefore, over the coming months and years it is essential that the Early Help offer with Sefton is flexible enough to meet the true extent of the yet unknown demand on services.

Early Help Performance over 12 months

**22% increase
in episode
starts over
the past 12
months**

**29% increase
in reviews
completed**

**13% increase
in aims
achieved
within case
closures**

**Repeat
episodes have
increased
from 486 to
532**

**4% decrease
in
assessments
completed**

**14% increase
in families
Early Help
were unable
to engage**

**16% increase
in episodes
ended**

**29% increase
in number of
cases stepped
up to CSC**

Referrals

Over the year, referrals from schools have decreased by 19% from 831 to 670

Police referrals to Early Help over the year have increased by 74% from 1730 to 3002

Referrals from Health have remained most constant with just a 10% decrease

Referrals from Housing have seen a 44% increase



The Early Help Strategy – Delivery model

The Early Help Strategy acknowledges that to have a mature early help system we need to transform the way professionals work with each other and with families, and to develop the right culture, systems and behaviours that support the delivery of the model across the partnership.

The key areas for development during 2020-2025 are:



Establish Effective Leadership, Partnership working and Governance



Establish easy to use Early Help online information and advice



Develop a suite of tools for early help practitioners to use – ensuring a whole family strength based consistent approach to working with children and families



Develop effective and timely processes for sharing information between agencies



Refresh structures and pathways that support the access to early help



Develop a skilled and competent workforce across the partnership



Develop a joint commissioning framework for early help

Partner Contributions – Turnaround Families

The Government's National Troubled Families Programme, known locally as the "Turnaround Families Programme" is designed to support families with multiple and complex needs. Our approach to the Turnaround Families Programme is not about a single team, it's a whole service delivery model whereby we can measure outcomes for the families that we work with, The Programme has focused on an integrated, whole family approach to ensure lasting change and improving outcomes for families.

For families to be accepted onto the programme, as part of the expanded offer, they must meet at least two of the current six headline criteria:

- Parents or children who are involved in crime or anti-social behaviour.
- Children who have not been attending school regularly.
- Children of all ages, who need help, are identified as in need.
- Adults out of work or at risk of financial exclusion, or young people at risk of worklessness.
- Families affected by domestic violence and abuse.
- Parents or children with a range of health problems.

The results payment can be claimed by a local authority if it can demonstrate that an eligible family has either:

- Achieved significant and sustained progress, compared with all their problems at the point of engagement, or

- An adult in the family has moved off benefits and into continuous employment.

Each family's achievement of 'significant and sustained' progress is assessed against a locally defined Troubled Family Outcomes Plan - the "ASPIRE" model.

The Outcomes Plan includes information on what a significantly improved outcome is for all six headline family problems covered by the programme, what will be measured to establish that the outcome has been achieved and the timeframes against which the sustainability of these outcomes will be measured.

Two staff continue to be seconded from Job Centre Plus into Sefton Turnaround Programme to support the efforts to decrease the number of adults out of work in a more targeted and structured way.

Progress

In 2020/2021 Sefton's target imposed by the Ministry of Housing and Local Government (MHCLG) was to achieve 372 successful family outcomes – which Sefton achieved!

The government has launched the next phase of its Troubled Families Programme, renaming it The Supporting Families Programme.

Partner Contributions – Parenting 2000

Parenting 2000 offer a range of service options which support Early Intervention and Prevention some of which are highlighted below.

Targeted Therapeutic support to help Children and Young People make better choices in life

Roots & Wings (R.A.W.), A 9-month project to enable children and young people to make better life choices in turn protecting them against involvement in criminal activities and prevent them from being vulnerable to predators with criminal intent.

50 Children and Young people aged between 10 years and 14 years joined an online programme that provided a combined approach of an extended series of one-to-one counselling sessions – and a six-week therapy-led creative group. Providing participants with an understanding of how their mind and thought patterns worked, providing knowledge and tools to overcome barriers to resilience and wellbeing. Covering: stress and anxiety, assertiveness skills, anger and conflict, strategies to develop positive thinking, identity & self-esteem and growth mindset

Participants showed strong therapeutic outcomes. Using the Rosenberg self-esteem scale children and young people consistently showed significant progress within the 12-week programme. An example of this would be an increase from a Rosenberg score of 13 at the start and 22 at end.

Parenting Programmes

We have delivered 3 Youth Connect 5 (YC5) online Parenting Programme delivered over 5 day by a qualified therapist which helps parents to understand the adolescent mind. It equips them to better help their child/young person with their emotional /mental health.

'This is the most effective helpful parenting course I have ever been on – I have learnt so much. I recommend this to all parents who are struggling'

Alchemy Youth Club

Continued to deliver both Junior (age 9-11 years and Senior (age 12-18 years) youth club sessions at its Southport & Crosby Centres; adjusting to restrictions required. Activities have included:

Support Groups

Walk and Talk Eco therapy sessions with our Educational Psychologist in Residence Dr J. These sessions were aimed at well- being in particular releasing trauma.

Session hosted by a Self- Love Coach to promoted self- esteem.

'Youth Circle' to support young people better manage their emotions and for personal development

Emotional support sessions - managing stress anxiety and anger management.

Youth cafe

Provides a hot meal and relax relaxing. quiet supportive environment to ease children back into 'school life' and support struggling families.

"My daughter comes along to junior youth sessions and attends the beach support sessions. She absolutely loves coming along and it really helps her to socialise and make friends. It helps her mental health especially during lockdown. Thanks for all your help and support alchemy youth club"

"Alchemy has been amazing in helping to keep my daughter's positive mental health"

"Coming to club has made me a better person"

"Good youth club. Good activities. Good vibes. Good people."

Case Study – ACES Intervention (adult) – Family Wellbeing

BL was referred by social care due to his own ACES and the adversities his children have experienced, through his toxic relationship and breakup from their mum. There were issues linked to her alcohol and drug misuse and BL had gained full time care of his children.

ACE checklist: BL was assessed as having 8-10 ACEs linked to the checklist.

Impact of support/intervention.

During the programme BL related to his past experiences and found, what he was learning and hearing from the content and other group members was relevant to his current family life. Each week he was able to refer to an experience at home where he had used something from the toolkit. For example, he was able to respond to and acknowledge his sons' emotional needs seeing behaviour in a different light and felt better and able to listen and respond in a calm supportive manner. His son had been acting differently for a few weeks and he felt that putting into practice what he had learnt, his son was able to tell him that he had been bullied and he was then able to support him in a positive way. He was able to respond to behaviours more consistently with consideration for what was going on for his child emotionally.

BL also reported supporting his child in school. He was able to use and encourage assertiveness in a positive way and consider his child's position. This had a knock-on effect of improving his relationship with his son. He was also able to relate to adult relationships differently and said that he felt if he had done the course 5 years ago it would have helped him to make changes in his relationship to avoid family breakdown and that now he can work towards being able to communicate as a parent with his children's mother.

Voice of the participant following engagement

Thank you for all you have taught me in the past 10 sessions. I honestly did just attend the initial chat and first session for the sole purpose of box ticking. I answered the initial questions how I thought you wanted to hear them and for that I am sorry, but the course was pushed on me and it was made clear I had to do it, to tick their boxes too. But I am really grateful they did. By session 2 I was there for me I seen and heard things that I related to in so many ways, not only from you but (mainly from you,) but also from the other lads on the course. I could see by session 2 it was going to make a difference for the better for me and to me. Little did I know back then just how much of an impact it was going to have on me and the way which I look at certain situations. I can honestly say from the bottom of my heart I am a much better man now than when I started. I used to get into heated talks with professionals' especially social workers and school. I didn't have the knowledge or tools to be able to handle the situation without getting wound up, stressing and coming across aggressive and agitated. You have taught me these tools. You have taught me in a way that made it sink in. You have taught me without making me feel like a child or a lesser person. You have let me speak my mind and then got me to think about what has just come out of my mouth. I have been on other courses they too were fantastic but the way they were delivered let them down. I think if I had done this 5 year ago, I would have understood in a different way so we would still be together now I do understand from all this stuff I think I could forgive her for what she did to me and will be able to talk to her (as a parent).

Case Study – ACES Intervention (Young Person) – Family Wellbeing

AH and family were referred to Early Help following an anonymous call to MASH, raising concerns about mother having a verbal argument with AH outside the family home, being verbally abusive towards AH. The caller was also concerned about mother's treatment of AH compared to the other children.

AH was Identified by School and Early Help as having ACEs and that she may benefit from the ACEs programme.

Ace's vulnerability checklist:

- Risk of Sexual/Criminal exploitation
- Low level mental health
- Parental separation/bereavement
- Risk of exclusion from mainstream education or low attendance
- Risk of offending behaviour
- Exposure to Domestic Violence

As a direct result of the programme AH's attendance and behaviour in school has improved. AH is no longer at risk of permanent exclusion, she attended school through-out COVID due to her additional needs - ADHD. AH has been recently involved in the application of her EHCP and understands this will support her learning needs whilst attending school. AH has shared that she feels more mature and said; *"I am getting along much better with my Mum."*

AH said she has really enjoyed attending the ACEs programme. She feels she has become more aware of her feelings and thoughts throughout the course and has enjoyed spending time with the group. AH engaged well throughout the course, showing creativity, maturity and building a good bond with the rest of her peers.

AH shared that she feels more mature and settled in herself, and she feels the ACEs programme has really helped her. AH has agreed to share her views during a media production based on the ACEs programme. AH attended every session and actively engaged through-out.

The distance travelled for AH was evidenced and risks linked to ACE vulnerabilities reduced.

- **Risk of Sexual/Criminal exploitation-** AH has engaged in the session regarding keeping safe and reflecting on dangerous situations, AH contributed to the session, recognising risks and vulnerability and shared in the evaluation that she is now more aware of vulnerabilities linked to CE.
- **Low level mental health-** AH shared that she feels happier in herself and has grown in confidence and improved her self-esteem.
- **Parental separation/bereavement-** AH said she feels more mature in understanding her parent's separation.
- **Risk of exclusion from mainstream education or low attendance-** AH has improved her attendance and behaviour in school. School lead has fed back that AH's educational attainment has improved, attendance has increased, and she is not at risk of exclusion.
- **Risk of offending behaviour-** AH has engaged well in reflecting on her behaviour and considering her thoughts and actions linked to her risk-taking behaviours in the community.
- **Exposure to Domestic Violence-** AH said she feels she can cope with her emotions better and has learnt about negative automatic thoughts.

Family Wellbeing and Police Partnership

The North Locality, particularly Southport, has seen a significant increase in Young People involved directly in or on the periphery of Organised Crime Gangs (OCGs). This was recognised via the Multi Agency Child Exploitation (MACE) meeting.

The MACE meeting is co-chaired by LSCB and the Police. Professionals attend from the Local Authority and partner agencies, including; Health, Catch 22 and Venus. The purpose of the MACE meetings is to share information and intelligence to increase the safety, health and wellbeing of children at risk. A risk management plan is constructed that is implemented to provide essential support to all those at risk and reduce the risk of harm.

In April 2020, the Locality Manager requested a 'Sharing Intelligence' meeting with the Police and Early Help. Information shared during the 'Intel' part of the MACE meeting led her to believe that Early Help Workers and Seniors may have relevant contributions. The meeting attendees escalated on both sides, with additional Police departments joining and the involvement of YOT.

The Information Sharing event led to the Police being able to identify an 'unknown' adult male who they had been trying to name for some time. Since the meeting, an EHW created a Relationship Map/Genogram and was able to share this critical information via the Police 'Tell Us' website.

A further product of the meeting has been the acknowledgement that many of the Young People involved have either been diagnosed, or are in the process of being, with ASD/ADHD. This has led to the Local Authority including the Police in future training around Neurodiversity. The Locality Manager has asked for the Police MACE Chair to be included in the recently formed 'Medical Pathways & Criminal Diversion' group.

Impact:

- Relationship mapping/Genograms identify links and emerging patterns
- Plans to hold regular 'Sharing Intelligence' briefings
- Widen participation to Children's Social Care and Education
- Joint training with all agencies where possible to raise awareness of Neurodiverse presentation in Young People
- Early Help informed of high level, complex covert operations
- Increased knowledge and understanding across the workforce

South Sefton Huddle

The South Sefton Huddle is a meeting of a range of professionals who work on a service delivery footprint which identifies the “Place”. It offers a forum that supports and promotes effective multi-agency working regarding locality related issues both on an individual basis and in relation to common themes and issues. It aims to ensure we identify the needs, assets and demands that exist in a place and work together, using shared information to improve outcomes for families together. The core purpose of the Huddle is to ensure that we use intelligence to put the right resources and assets in place, at the right time, to support families who need our help the most.

Impact

A young Mum with a toddler and new born baby living in poor housing conditions supported through Careers Connect was brought to the Huddle meeting. The team pulled together to consider immediate needs. Housing standards contacted the private landlord to review home conditions, Health Visitor, Careers Connect and RS Landlord from the Poets Streets housing pilot are liaising to support Mum.

Bedford Primary brought a case to the Huddle where a parent was living in unsuitable accommodation, which was impacting on children’s learning. Even though the family were living on the border of Liverpool, school were given the advice on agencies working in Liverpool. School supported Mum to access support through Liverpool services to improve living conditions and find suitable accommodation.

Feedback from Adult Social Care

“I Have been attending the Huddle for over a year and find it incredibly helpful as it enables cases to be analysed by multiple professionals, who see things in a different way, or are aware of services in Sefton that Adult Social Care are not aware of. This has resulted in positive outcomes for several cases I have brought, including identifying how services such as Households into Work can offer 1:1 support for vulnerable members of our community, which is a service I had not heard of before attending the Huddle.”

“The Huddle promotes the ‘One Council’ vision, for example, I brought a case to Huddle as a gentleman was due to be evicted from his One Vision Property as his father (the official tenant) had passed away and he had no proof as to how long he had lived there, putting at risk the tenancy. I brought the case to ask for this gentleman to be supported with finding an alternative property. Instead, the representative from the Council Tax team was able to confirm how long the gentleman had lived at the property, and as One Vision Housing were at the Huddle, they could then confirm this gentleman had been living there for long enough to take over the tenancy, subsequently cancelling his eviction. This meant the gentleman was able to stay at his property permanently which was a fantastic outcome. My team often approach me to take their cases to the Huddle which demonstrates that social workers in the South Adult Social Care team really value what this forum can bring to their case management.”

“Outside of Huddle meetings, I have developed networks and relationships with those who attend, making things so much easier if I need to quickly get some information and advice from other departments as the relationship is already there.”

Partner Contributions – Health Engagement in Early Help

Health agencies have continued to support the Early Help agenda within Sefton. This includes representation on the Early Help Partnership Group from acute and community Health Trusts (Southport & Ormskirk Hospital, Alder Hey, Merseycare, Liverpool Women's Hospital and North West Boroughs Healthcare), Public Health and CCG Designated Nurse Safeguarding Children. From April 2021 the Assistant Operational Director (Sefton) for North West Boroughs Healthcare NHS Foundation Trust will take over chairing the Group on behalf of the multi-agency partnership.

Health agencies represented on the LSCB are committed to developing a new Model of Practice within Sefton and have supported its development through the Operational Delivery Group, a sub group of the Early Help Partnership Group.

The impact of increased awareness and engagement of health partners in the Early Help agenda is evidenced through referral data. Data highlights a steady increase in contacts from 0 in October 2019 to 97 in Q3

(December) 2020 from health partners. There was a peak in contacts to 139 in Q2 and the subsequent fall may be because of COVID restrictions where both changes to service delivery and access to services by families may have impacted on the identification of families requiring Early Help support. The increase in referrals to Early Help may also be a consequence of the implementation and raised awareness of the revised LSCB Level of Need document. The revision and further strengthening of this document has been supported by health partners and includes additional guidance for the unborn child. This document clearly references the Early Help referral process and descriptors of need that can be supported through an Early help Assessment. Audit activity of health referrals to Sefton MASH highlight the number of referrals made that require stepping across to Early Help have reduced and may be indicative of more appropriate use of the Early Help referral pathways.

Partner Contributions – We Are With You

We Are With You practitioners support the coordination of substance misuse treatment, mental health and family interventions. Seeking to address the following outcomes: Reduce the harms associated with substance misuse; Support children in relation to child protection and safeguarding; Promote positive parenting efficacy and family functioning.

Impact of family focused work	Impact of young people focused work
<p>78% of all referrals resulted in a treatment start. 47% of families are still currently engaging in treatment and 20% have been successfully discharged with the parent becoming drug or alcohol free or reducing usage.</p>	<p>70 % engaged in treatment whether that was at a structured level or a brief intervention level. 60% completed successfully either becoming substance free or reducing use to desired goals.</p>



Over the last year, there has been a great multi-agency working within our team and Early Help. Each member of our team at the We Are With You service has attended numerous multi-agency meetings regarding any families that had been referred into the MASH team for potential assessment. This proved really good and would highlight any potential clients in need of, or already receiving support from, our service. This was a great collaborative way of working and demonstrated excellent partnership within all necessary services and gave each service an opportunity to be involved in the 'next steps' for these families identified as in need of support. Justine Poland

Partner Contributions – Mersey Care Foundation Trust

Service user Penelope has been known to Mersey Care Foundation Trust (MCFT) since before the birth of her last child 4 years ago and has two other older children.

The support Sefton Early Help provided was framed around the family in the last 18 months. The support to Penelope a MCFT service user who had an enduring mental health illness enabled her to cope with her eldest children, who over the period were diagnosed as having ADHD and supported Penelope who was a single parent handle her own mental illness.

The support provided through Sefton Early Help mitigated some of the adverse child experiences which would have affected the children.

The Consultant responsible for Penelope’s care from MCFT reported that, “his patient would have been lost without the support” and “would dread its withdrawal”, since it has been so supportive during CVID. The support has also been beneficial for Penelope’s mental health since it reduced anxiety and stress.



Partner Contributions – North West Boroughs

The 0-19 service through the delivery of the Healthy Child Programme is ideally situated to readily identify those families who may benefit from further support from a multi partnership approach through the Early Help Agenda. All 0-19 staff have been trained and are aware of the Early Help agenda and process, and when a single agency response from ourselves is not sufficient to meet the needs of our children and young people, our staff are able to liaise with our Early Help partners to ensure an appropriate Early Help assessment is completed to provide the right scaffolding for our Sefton children to achieve their optimum health, social and developmental outcomes.

Within the appendices there are several case studies demonstrating the work from both Health visiting and school health. Both case studies evidence the valued role health visitors and school health bring to the Early Help partnership, through collaboration with our multi-disciplinary colleagues actively seeking to encourage our families and young people to engage with the Early Help process, and be part of their own journey of care ensuring the right support is offered at the right time by the right specialism which in turn facilitates quality interventions for our Sefton families and children.

March 2020 saw the re-launch of the Locality Integrated Health Steering group and it was agreed that this group would report into the Early Help Partnership Board quarterly. However, unfortunately this work has been negatively impacted by COVID-19 and a decision was taken to suspend the steering group temporarily, as all services within the partnership have had to prioritise their individual COVID-19 response. This work is planned to be reviewed and progressed as part of multi-agency restoration and recovery in June 2021.

Partner Contribution – Youth Offending

Extensive research within the field of Youth Justice has shown that if children and young people enter the traditional court system, they are more likely to re-offend than if they are diverted from this system.

if a child commits an offence where there is enough evidence for police to charge, resulting in the possibility of conviction, where appropriate, in partnership with the police, YOT will consider an Out of Court Disposal (OCD)

Each child referred for an OCD is assessed by YOT staff in conjunction with partners. The assessment considers the child's family history, education and lifestyle with emphasis on any Adverse Childhood Experiences resulting in trauma. The child's views alongside parent/carer views are evidenced. The victim of the child's offence is also contacted, so that their views are considered about what level of OCD disposal is relevant. The assessment considers underlying causes of the behavior and what can be offered to build the child's resilience to prevent re offending. Assessment are discussed by the YOT OCD Panel who are responsible for determining the outcome having considered the seriousness of the offence, previous offending and victims views.

Impact

Between April 2020 and April 2021 Sefton YOT dealt with 191 children and young people via OCDs, meaning that most of these children have been prevented from receiving criminal convictions in court.

Of these 191, 80 received Community Resolutions (CR) and 62 received Community Resolution Plus (CR Plus) an extended voluntary programme of

intervention and support to address more serious or repeat offending behaviours.

Those who received a simple CR were offered a short programme to help them not re-offend. Whereas CR Plus cases were offered up to 6 months of intervention and support including sessions related to their own offence, support with re engaging in education and sessions to help them understand the impact of their offence on the direct victim and wider community.

Where trauma or mental health issues or substance misuse are identified, with consent are referred to partner agencies such as CAMHS, Venus and We Are With You

All children and young people dealt with via out of court disposals are encouraged to engage in some form of Restorative Justice with their victim either directly or indirectly.

Since November 2021 a new diversionary opportunity has been made available; where it has been decided that it is not in public interest to take further action regarding a particularly low-level offence. Using Outcome 22, Sefton YOT has so far diverted 37 young people to We Are With You for educational support around substance misuse.

Between April 2021 and April 2022 just 6 children received Youth Cautions and 6 received Conditional Youth Cautions. As the Youth Caution signals first time entry into the Youth Justice System albeit outside of the formal court arena, Sefton's out of court programme can be seen as being highly successful in terms of preventing children entering the system.

Developing stronger links with Education Partners

Following an internal review of process, a pilot with 7 schools was developed to determine a consistent and collaborative approach to Family Wellbeing's relationship and practice with schools.

Progress

- All Schools on the pilot took an active part and targeted interventions have been delivered in all schools.
- Regular meetings have enabled a discussion on open cases with relevant support and advice offered.
- Relationships have improved as has the use of the Early Help Module, with a number of schools accessing additional training
- A consistent format for monthly meetings with schools has been developed, supported by a management information system, to generate reports

Common Early Help Themes Identified

- Mental health and the impact of Covid-19 on children and young people's learning.
- Hidden ACES and mental health of parents linked to home schooling and anxieties linked to returning to school for pupils shared.
- Schools have requested additional information re extended early help offer and suggestions linked to a "market place event" for schools was proposed.

Access to the wider Early Help Offer

- Sefton Carers to offer a drop-in service to all schools.
- Universal and Level 2 offer has been shared.
- Active Sefton offer has been shared

Pilot schools have reported the benefits of monthly support meetings.

Next Steps:

- To roll out the model to all schools and for each school to have a consistent core offer from their nominated Early Help Link Worker
- To further develop the Team around the School approach to include other services

Partner Contributions – Community Learning

From September 2020 Sefton Community Learning Service have been delivering from Cambridge Family Wellbeing Centre providing well needed learning to the most vulnerable people within our catchment area. In total 46 courses have been delivered covering a range of topics including: a range of ESOL courses, employability, food safety, customer services, IT, Kickstart and French; reaching over 200 attendees

Feedback from learners

- I have felt secure whilst undergoing lessons, as we are adequately spaced away from other students. I feel as though the advice from the tutor was assuring and allowed me to feel safe under the current circumstances.
- I feel secure in the room environment and have received good advice and guidance from the tutor.
- Advice and guidance from the tutor was very good.
- Never felt insecure.
- The tutor was extremely vigilant and helpful

Feedback from Staff/Tutors

- Light and airy lovely building to work in.
- All facility's available making it easier to access tutor resources.
- Carparking facilities makes tutors feels safe.
- I have loved working from Cambridge Family wellbeing. It is quiet and relaxed. I'm able to check learners are signing in for Track & trace due to the window in reception and using hand gel on entry. Lovely and light rooms to work in, good ventilation when needed.



Partner Contributions – Light for Life (LFL)

LFL Early Help has supported a number of families in the past twelve months within recommended Covid 19 guidelines. Our Early Help worker has provided support with 'doorstep' visits, telephone and video calls and referring to appropriate agencies and utilising other LFL services to assist families during the 'lockdown' phases of the pandemic.

LFL is currently working with 8 families; seven in North Sefton and one in Central Sefton. Seven of these families are female lone parents and one is a couple with children. The focus of support to these families is addressing housing issues by assisting with rent arrears, property disrepair and accessing appropriate housing through Property Pool Plus and in the Private Rented Sector. Additional support has been provided to maximise income by assisting with claims for appropriate benefits, referring to local charitable organisations, e.g., food banks, Salvation Army, utility funds, furniture and referrals to Sefton at Work to help access employment.

A further seven referrals have also been received during the last 6 months. Two of these families left the Sefton area before support began and two decided they no longer wanted to receive Early Help support. The remaining three families were stepped up to social care during their Early Help plan; two of which had been assisted to secure social housing tenancies through LFL Early Help.

Case Study 1

A family, who are originally from Romania, have been granted Settled Status in the UK. Both parents work full time but earn a low income and had not claimed any benefits. Support was provided to help them apply for Universal Credit, which was granted, and to help the family register with a dentist. They were also assisted to apply for Property Pool Plus as they live in an overcrowded flat. They have savings and hope to buy their own home in the near future; they were assisted to access a mortgage advisor to discuss their options.

Case Study 2

This family consists of a female lone parent with four children, two of which are adults. The Early Help involvement identified a need for support for the mum's mental health and referrals were made to Parenting 2000, GP and RASA for ongoing support. The youngest daughter was also referred to Parenting 2000 for therapeutic services. Joint working was undertaken with Southport College regarding one of the children and a referral was made to Connexions for careers support. Supporting evidence has been supplied to Property Pool Plus to ensure their Priority Banding is as high as possible in order to facilitate a home move. Regular contact with school has been made throughout support, in addition to regular TAF meetings regarding the family's wellbeing. The family have also been supported to access local food banks and the 'Food Pantry' as well as financial support with utility grants.

Partner Contributions – CVS



Sefton CVS offers support to Early Intervention through a number of different projects, engagement on various Boards and also in the delivery of training some aspects are highlighted below.

The Every Child Matters Forum

The Every Child Matters Forum is the co-ordinating body for the Voluntary, Community and Faith Sector in Sefton working with Children, Young People and Families, with 425 members. It is facilitated by Sefton CVS and has representation on the Health and Well-Being Board, with two sub groups CWAN & Thrive.

There were 7 Forums this year topics discussed in the last 12 months were:

- 15 May 20 - The Sector's Response to COVID19 – Virtual Delivery
- 29 May 20 - Updates on COVID19 Response and Delivery
- 26 June 20 - Voice of the Child – LSCB
- 31 July 20 - Back to School Support – CCG
- 10 Sep 20 - The Thrive Model (A framework for supporting mental health and wellbeing support)
- 4 Dec 20 - Managing Allegations Against Members of the Workforce and Safeguarding
- 5 Feb 21 - Engaging Difficult to Reach Families in The Census and a workshop – How to Engage Children and Young People in Lockdown

VRP Communities of Practice

Sefton CVS continued to develop the two Communities of Practice – based in North and South Sefton.

Meetings allowed members with funded VRP projects offering support projects for children and young people in Sefton get together. Topics discussed included:

- Reflection on delivery during COVID 19 – Challenges, what worked well, what could be done differently
- Training needs
- Linking together to support each other – share learning and good practice
- Police and Community
- Monitoring and reporting

The Young Advisors (YAs) have been involved in gathering the voice of the child across Sefton projects include:

- Voices Video – YAs ran a film project asking young people about positives and things they were looking forward to during COVID19 – <https://www.youtube.com/watch?v=cROx7sDI2RQ>
- Pan Mersey Project funded by VRP – asked young people what needs to be put in place to prevent young people committing and being victims of violent crime.
- Sefton CAB met with YAs to find out how to make information and services more accessible to young people.
- SYMBOL (Sefton Youth Making Better Opportunities with Leaders) Meetings took place over Zoom facilitated by YAs with Seniors Leaders from Sefton Council, Elected Members and Young People.

Perinatal Support Programme

- Sefton CVS accessed funding from Cheshire & Merseyside Women & Children's Partnership to deliver support to improve Maternal Mental Health.
- Organisations that have received grants and are delivering services are: Parenting2000, Venus, Feelgood Factory, SWAN Centre and Home-Start.

Partner Contributions – CVS



Following workshops held at an Every Child Matters Forum A model for an Early Help Level 2 pilot emerged.

The model involved two community hubs (one North, one South) which would deliver guided self-help with a lighter Early Help form being used. The hubs would link with Front Door, Family Wellbeing Centres and other community VCF projects. This would address a high number of families in Sefton that were not accessing any support but had been identified as needing support through Early Help.

Funding was received at the end of January 2021 via the Violence Reduction Partnership (VRP) to enable the pilot to take place. A working group was established; coordinated by Sharon Cotterall (Sefton CVS). Members were: Amie Clarke (QA Sefton), Jacqui Finlay (Sefton) Nigel Bellamy (Sefton CVS) Janine Hyland (PK2) and Lorraine Webb (Venus).

Referral Process and Delivery

Referrals for the Early Help Level 2 Pilot (EHL2 Pilot) came from Sefton’s Front Door—referrals were direct into specific trays on EHM for these cases. Amie Clarke liaised with staff in The Front Door to ensure referrals were appropriate.

Workers at Parenting 2000 and Venus received additional EHM system training. This allowed all data to be recorded appropriately.

The target for referrals for the pilot was 5 per week for each project.

Meetings took place with front line workers and the EHL2 working group which allowed great communication and joint working. A trouble

shooting approach for any issues throughout the pilot was adopted, working closely with workers at PK2 and Venus. This approach was crucial as the pilot was for an initial 8-week period.

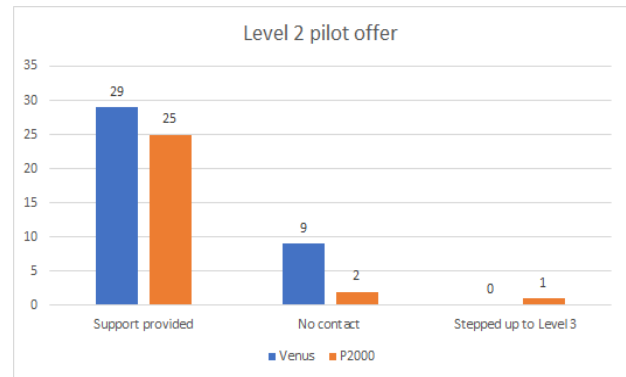
Thanks to the commitment from all partners in making this pilot a success.

When more intensive support was needed

- If a family needed full EHL3 Assessment they were referred internally for this within PK2 and Venus if capacity would allow
- If capacity did not allow PK2 and Venus had a named Senior Early Help Worker to contact at their agreed Family Wellbeing Centre

Key data

- ◆ A total of 66 families were identified and referred to PK2 & Venus for the Level 2 pilot
- ◆ 83% of families received support through advice, guidance and signposting
- ◆ 16% of families were not contactable by means of telephone call, text message or letter
- ◆ One family was transferred to Level 3 support for an Early Help assessment to be completed



Partner Contributions – SWACA (Sefton Women’s and Children’s Aid)

SWACA, as Sefton’s primary commissioned provider of domestic abuse support services, (alongside the IDVA service), has been through a period of very significant and fast-paced change this year. Due to additional funding SWACA has been able to reinforce staff and systems capacity and invest in a number of key areas:

- **Child on Parent Violence / Abuse (CoPVA)** – working in partnership with others SWACA has established a CoPVA Project, increasing the intensity of focus on harm caused **to** parents **by** children / young people (under 18), living in Sefton.
- **Early Intervention Service** – SWACA has introduced an Early Intervention Service, to support service users identified with particularly low confidence and self-esteem, who struggle to engage with SWACA’s full support services, and tend to move in and out of service regularly.
- **Refuge** – additional funding was secured to refurbish the existing Refuge and increase available staffing. Unfortunately, for health and safety and operational reasons, the facility has been closed. We are hoping to re-open Refuge, with upgraded facilities, in the near future.
- **The Mirror Project** – additional funding has been secured to scale up our structured, time-limited, and intensive adult Women group work programme – The Mirror Project.
- **Volunteer Counselling Service** – SWACA and SWAN Women’s Centre have together created a Volunteer Counselling Service for SWACA service users, aligned with SWACA’s existing Psychotherapy Service.
- **Sefton Women’s Alliance** – (informal title) involving Venus / SWAN / SWACA focusing on the needs of Women in Sefton, (including addressing unmet need). This is an exciting area of work, with significant potential benefits.
- **SWACA internal systems** – SWACA has developed an upgraded IT system, and development of a new website, which will improve access to information, advice and guidance, and access to our services.
- **Research** – we are hoping to be able to invest, and further secure, resources in developing a research unit as a key component of SWACA’s organisational resources. We continue to provide DA learning and development / training support for partners and a strong research perspective will further enhance this support.
- **Male victims service** – SWACA is currently exploring options to develop a ‘pilot’ male victims service. There remains a significant gap in this area, for post-IDVA support for male victims, in Sefton. SWACA has transferrable skills and experiences to bring to this important area of DA support work.

Thornton- Venus Therapeutic Early Help Project

Background:

All partners in the Sefton Children and Young People's IAPT (Improving Access to Psychological Therapies) Partnership have trained staff across their teams. A challenge for the Partnership is integrating systems and referral pathways.

From March 2021, a 5-year project between Family Wellbeing and Venus will begin to develop a therapeutic Early Help offer based at Thornton Family Wellbeing Centre.

Progress:

The staff team has been identified for the initial phase of the project and a stakeholder group established to explore the positive impacts and potential challenges of this model and how to ensure engagement of communities in the ongoing development of the partnership. A subsequent Operational planning group are exploring day-to-day staffing, the offer, referral routes and pathways

Expected Outcomes:

- Improved offer for therapeutic services for Early Help
- An integrated referral pathway for IAPT programmes
- A centre of excellence for Trauma Informed Practice
- A collaborative cross sector partnership
- More efficient and effective use of resources



Training

In line with the new Model of Practice, and through external funding from VRP - training in Conversations for Change and Trauma Informed Practice have been available across the partnership.

Trauma Informed Practice

Building capacity and capability for a high-quality trauma and ACE informed multidisciplinary workforce across the Sefton Partnership has been a key priority. Training has supported the embedding of trauma informed approaches, underpinned by knowledge and understanding of adverse childhood experiences as a key part of the development of a strengths-based model for practice, of which delivery of trauma informed care or families is a key element. Training targeted professionals and support staff who work across the multidisciplinary workforce which support the Children's Partnership.

Over 100 staff from across the partnership have attended 'Toxic stress and community resilience' training which took the form of:

- A recorded webinar followed by an interactive tutorial supporting participants to reflect on their own practice and apply their learning to strengthen and embed their own skills for trauma informed practice;
- Access to on line learning and research papers on the KCA website
- Utilisation of the KCA '*Mending Hurts*' workbook

Conversation for Change

Since the introduction in the Autumn 9 Conversation for Change sessions have been delivered capturing 154 staff from across the partnership. The 3 x 3 hr. sessions focus on providing participants with a sound introduction and grounding in the communication technique of Motivational Interviewing. The technique can be useful when working alongside people who have mixed feelings about making change. The technique recognises that our motivation to make change is greater when we discover the good reasons ourselves. Conversation for Change offers a strength-based method of communicating with people about making changes in their lives.

Summary of Audit Findings

In the last 12 months Early Help has seen the introduction of a Quality Assurance framework, auditing schedule and a significant amount of quality assurance has been undertaken across our partnership. A total of 678 audits have been completed comprising of joint auditing with Children Social Care, full case file audits and thematic dip samples. The level of audit activity has been influential in recognising the key areas for development in Early Help and our strengths of which we look to enhance further over the next 12 months.

What our audits have told us?

- Our initial response and timeliness to offering support impacts on the levels of engagement Early Help are experiencing.
- Our assessments are parent led and do not consistently capture the voice of the child or provide an understanding of the lived experience. A 'whole family approach' is not consistently embedded.
- Management Oversight and supervision has improved over the last 3 months, this was identified as a key area of development in April 20.
- Early Help plans require 'reviews' to be completed in a timely manner, drift in planning has impacted on the length of plans and families achieving outcomes.
- Relationships are a key strength of lead workers, audits that 'meet good' evidenced where initial relationships are formed and consistent contact are maintained with families.



Our response to audit findings

- An Early Help engagement toolkit has been developed to provide a supportive resource to practitioners. In addition, a 15-day tool has been implemented within the EHM system to provide consistency to practice.
- A revised Early Help Assessment is being launched W/B 3rd May 2021, the assessment adopts a strengths-based approach and is informed by the Sefton Model of practice.
- A supervision policy has been developed and implemented in Early Help, a supervision tool has been implemented in the EHM system to support effective supervision.
- Monthly locality reports and performance meetings are being held with Localities, this will provide greater accountability and scrutiny.
- Quality Assurance bulletins are shared quarterly, this provides the partnership with feedback on audit findings and links quality assurance activity to practice.
- Quality and practice standards have been developed to support consistent practice.



Areas for development 2021/22

- Review of the quality assurance framework and audit tool to reflect the new Early Help Assessment. This will include a greater focus on practice rather than process.
- Focus on practice week to take place September 2021, this will provide an opportunity to celebrate good practice and highlight the achievements of Early Help.
- Implementation of a moderation process to strengthen auditing and support a responsive approach to audit findings.
- Greater inclusion of children and families in quality assurance.

Governance

Early Help Partnership Group

The Partnership Group has continued to meet throughout COVID and partners have discussed a range of matters including: Level two pilot work with CVS, Venus and Parenting 2000, updates from SWACA, Career Connect and PCSO's. Alongside hearing feedback from audit findings, agreeing quality standards and workforce development principles. Regular updates were also received from other forums and partner groups such as Early Years Development Group and Model of Practice. The Early Help Partnership Group reports directly to the Children and Young Peoples Board.

Performance and Quality Assurance Sub Group

This group with representatives from across the partnership are focussed on driving performance across Early Help. They meet bi-monthly recently discussing how to remove barriers around accessing training have been tackled along with how the partnership can begin to address the rise in referrals of social and emotional needs. Going forward it is hoped that good practice and development areas are identified and shared across the partnership.

Communication and engagement Sub-group

Draft terms of reference are in place and initial priorities have been set including:

- Develop a draft EH Comms Strategy and implementation plan
 - Re-launch the use of the Early Help Knowledge Hub
 - Mapping channels of communication
- Going forward meetings will be held bi-monthly.

The Shadow Board

Work has been ongoing to develop a shadow Board to put the views of children, young people and families experience of Early Help Services, central to Early Help improvement and development.

The shadow board will enable young people and adult members to feel empowered, informed and have the capacity to have their voices heard at the decision-making table.

Working alongside CVS and other partner agencies to date 9 young people have been recruited and are currently undergoing induction which will carry with it accreditation. Adult members are actively being sought so the board can be fully functional within the next few months.

Future Areas for Development

Development of a 'Team around the School' approach'

Increased scrutiny and moderation of quality assurance, to include participation from families 'capturing their voice'.

Driving quality and practice of Early Help, ensuring all partners are engaged and accountable

Development and agreement of 'Five Foundations of Early Help'

