

Early Help and Preventative Services

One Year Plan 2014-15

**Working smarter to achieve improved outcomes
through integrated service delivery**

DRAFT

July 2014

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NB: Please note that references to the Common Assessment Framework (CAF) are now referred to as Early Help Assessment (EHA).

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Scope and Purpose of the Plan

The purpose of this Plan is to set out what will be achieved in the first year of transforming Early Help and Preventative Services in Kent. It includes priorities for service development and change, the improvements needed to assessment processes, case management and data systems, and ambitious targets to improve outcomes for children, young people and families. There are clear expectations that we will see an impact on reducing the numbers needing children's social care services and there are opportunities to make efficiencies in early help services that deliver better outcomes at lower cost.

Kent's Early Help and Preventative Services delivery model is:

- Locally organised and delivered to be responsive and timely
- Multi-disciplinary and multi-agency to ensure a continuum of support for children, young people and families
- Targeted on clearly identified need
- Integrated to ensure a continuum of support for children and families from pre-birth to 19
- Family focused so they can take more responsibility for themselves and be involved
- Focused on clearly demonstrating an impact on outcomes employing effective case management
- Risk based and needs led

This requires significant culture change and new ways of working, with higher levels of skill among staff to support children and young people safely at earlier levels of intervention and to be more expert at working with whole families. The One Year Plan, therefore, sets out a range of workforce development needs and expectations for improved working practices.

Aligning Early Help Services against the Continuum of Need

The diagram below shows how this early help action plan maps onto the continuum of need used in Kent. The different levels of need of individual children and families also form part of a continuum of help and support provided by Early Help and Preventative Services to respond to those children and families who would benefit from early help following an assessment.

The agreed multi-agency 'Levels of Need' are:

Level 1: Universal, where needs are met through engagement with universal services such as schools, children's centres, GP services, youth clubs and where prevention is a priority.

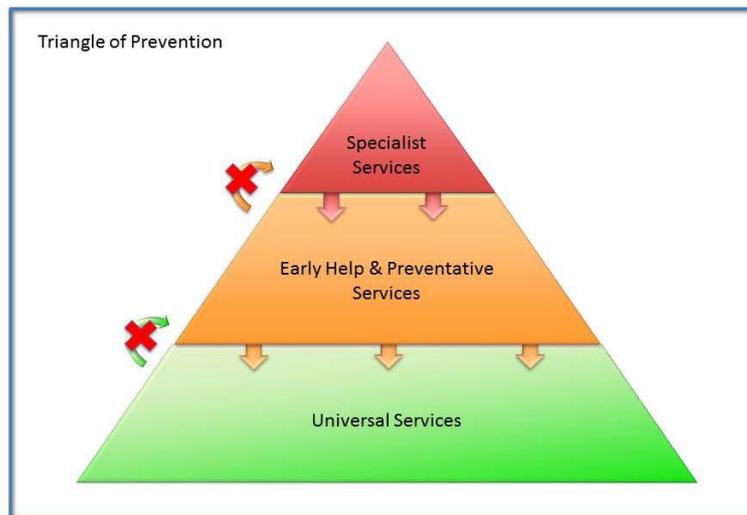
Level 2: Targeted, where early help is available to address emerging or existing problems which, if not addressed, are likely to become more serious and need more specialist input.

Levels 3 and 4: Specialist, where needs have become serious and there is a greater likelihood of significant harm, requiring the intervention and protection of statutory services. Level 3 refers to children in need and child protection and Level 4 refers to children in care.

Level 2 is often differentiated into targeted support that is provided within schools, youth hubs and children's centres in response to the additional needs of children and young people, and a further level of targeted support provided by external services.

The Early Help Service will be working with universal and specialist provision, ensuring that targeted support is available to those who need it, in whichever setting, and when they need it most. However the core work is targeted support to children and families at Level 2 with more complex and multiple needs that sit below the thresholds for children's social care.

The diagram below positions Early Help and Preventative Services as a targeted service between specialist and universal provision. The arrows pointing down the pyramid indicate that early help services will prevent problems escalating and will support children to "step-down" from higher levels of support. The arrows with crosses through, demonstrate the impact of early help services in preventing the need to "step-up" to more intensive support interventions.



What is Early Help?

Early Help means intervening as soon as possible to tackle problems emerging for children, young people and their families or working with a population most at risk of developing problems. Early Help reflects the widespread recognition that it is better to identify and deal with problems early rather than respond when difficulties have emerged and intervention can be less effective and often more expensive.

Early Help can give families the opportunity to regain control of their circumstances without formal statutory interventions, such as children in need and child protection circumstances.

Range of Preventative Services

From April 2014, the Early Help and Preventative Services Division provides services to vulnerable children, young people and families and is delivered through Kent Integrated Family Support Service (KIFSS) for 0-11 year olds and Kent Integrated Adolescent Support Service (KIASS) for 11-19 year olds. They will work in a joined up way to provide whole family support. These services incorporate:

- Children's Centres
- Troubled Families Programme
- Early Intervention and Family Support Workers
- EHA Co-ordinators
- Attendance and Inclusion
- Support for Gypsy, Roma and Traveller children
- Youth Work
- Youth Offending
- Connexions Targeted Support for NEET young people
- Services for Young People's Substance Misuse
- Teenage pregnancy and sexual health
- There will also be more joined up work with CAMHS, School Nursing and Health Visiting, together with a more co-ordinated approach to commissioning children's health provision.

Local District Lead Roles

The key local district lead roles to support children, young people, families, schools and early years settings are:

- KIASS Manager and Casework Manager
- KIFSS District Manager and Early Help Professional
- Troubled Families District Co-ordinator
- Specialist Teaching and Learning Service (STLS) District Co-ordinator
- District Integrated Family Service Manager (Specialist Children's Services)

Every school now has a named Early Help contact. Details of the contacts were circulated to schools in May 2014 as part of the Early Help Prospectus.

Common Challenges

In order to harness the commitment of staff and partners to the activities in this Action Plan, we need to overcome a number of challenges.

- Building a coherent strategic approach for early help and prevention that consistently delivers good outcomes for children and families
- Address the challenge to make our way of working more efficient and save money whilst improving service delivery
- Target resources more effectively to need
- Integrate services and systems better, so that services are coordinated and systems talk to each other
- Improve the measurement and evaluation of the impact of early help
- Identify what good early help looks like and build on this successful practice
- Improve analysis of data and intelligence by developing an integrated data management system that can inform priorities and targets
- Map the cost of early help to understand the costs of current interventions and devise a financial model that maps costs against benefits

Overcoming these challenges are priorities for this Action Plan.

Current Position

Key Information about the Scale of Need

Pupil Population

There are approximately 346,600 children and young people under the age of 19 years in Kent. This is 23.2% of the total population.

Child Poverty

- Approximately 18% of children and young people live in poverty (56,000) in Kent, in families with less than 60% of the median income
- 14% claim free school meals
- 65% of children in poverty are aged 10 and under
- 69% of children in poverty live with a lone parent
- 33% of those are in a lone parent family with two children
- 26% live in Thanet and Swale
- The greatest child poverty is in Swale, Thanet, Shepway, Dover and Gravesham with rates over 20%

Statutory Social Care

- Current Specialist Children's Services (SCS) caseload is 10,655
- Child Protection numbers 1177
- Children in Care (CiC) numbers are 1842
- There were 19,741 referrals to March 2014
- There were 5250 re-referrals (26%) to March 2014

Early Help Assessment (EHA) and Team Around the Family (TAF)

- In 2013-14 there were 3754 EHA completed assessments
- Children and young people with TAF support numbers were 7149
- 3,690 TAFs closed
- 1,554 TAFs closed with outcomes achieved
- 464 TAFs escalated to SCS
- 1,153 cases were stepped down by SCS

Troubled Families

- The target is 2560 families
- Families identified to date 2274
- Families worked with 2153
- Families fully engaged with at present 700
- 755 families have been turned around (29% compared to national average 33%)
- The highest target numbers are in Swale (369) and Thanet (364)

Children's Centres

- There are 64,738 children registered at Children's Centres
- Children estimated from disadvantaged homes, 9700
- Children with Special Educational Needs and Disabilities (SEND) 1257

Pupil Referral Units

- (PRU) single registrations 218
- Dual registrations 562

Absence from School

- Persistent absence numbers are 3800 Primary, 5444 Secondary

Youth Offending

- The case load (2013-14) was 1826 (involving 1423 young people)

Disadvantaged 2 Year Olds

- There are 2366 Children accessing free 2 year old childcare provision
- 3847 children are eligible

NEETs

- NEET numbers are 2867 which is 5.9% of 16-18 year olds
- 1110 are NEET vulnerable groups including
- 184 CiC
- 497 young parents
- 259 young people with Learning Difficulties and Disabilities (LDD)

Our Vision and Approach

Kent County Council will target early help services for the most vulnerable children, young people and families who require additional support, with a focus on delivering better outcomes. Children, young people and families will be able to access the right services at the right time in the right place. We will place them at the heart of everything we do, working in a more integrated way and avoiding, where possible, single service interventions which may lack coordination or result in wasteful duplication.

Our Vision is that every child and young person, from pre-birth to age 19, and their family, who needs early help services will receive them in a timely and responsive way, so that they are safeguarded, their educational, social and emotional needs are met and outcomes are good, and they are able to contribute positively to their communities and those around them now and in the future, including their active engagement in learning and employment.

The intention is to make a significant difference through early help, to prevent the escalation of needs where we can, and identify the likelihood of problems emerging in the first place. The service will also make a significant difference in reducing demand for statutory children's social care and to help 'step down' social care cases from Children in Need, Children with Protection Plans and Children in Care, where it is safe to do so.

Our Early Help approach is based upon four key pillars:

- Prevention - Reduce future demand by preventing problems arising or dealing with them early on. The task is to promote a bias towards early help and prevention, help people to understand why this is the right thing to do, the choices it requires as well as the benefits it can bring.
- Performance - Demonstrate a focus on improvement of outcomes, applying LEAN improvement methods to ensure services are effective and well designed, based on the best evidence and delivered by the right people to the right people at the right time.
- People - We will unlock the potential of staff, empower them to work together in new ways both with partner agencies and children, young people and families to redesign and co-produce services around their skills and networks.
- Partnerships – We will develop local partnerships and collaborations bringing partners together with schools and early years settings to deliver shared and improved outcomes.

Our approach is based on the following key elements:

- Provide a single service response so that families, children and young people do not need to move around the system and in and out of different services.
- Strengthen earlier intervention through universal settings and to deliver our early help services in families and in and around schools and other universal settings.
- Co-ordinate our services with NHS services, so that we get a more integrated approach with health visitors, school nurses, CAMHS and substance misuse and sexual health workers who all have a role in providing early help.
- Use the strengths of families to help themselves and ensure continuity of support for them until they feel things have improved.

Key Outcomes We Are Looking For

Having clear outcomes in mind helps us to do the right things and enables us to measure the impact of our early help interventions over time. They also provide us with performance data to drive continual improvements.

Early Help and Preventative Services will focus on the following key outcomes:

- Reduced need for statutory social care and more effective support for children and young people on the edge of care so that there are reduced numbers of children in care, child protection cases and children in need
- Increased numbers of children and young people who are stepped down safely from social care and who are not re-referred
- Increased use of the EHA and more successful outcomes as a result of EHA interventions
- Improved educational attainment outcomes and closing of attainment gaps at all ages
- Reductions in days lost to education through exclusion and absence, and in the number of permanent exclusions and rates of persistent absence from school
- Reduction in youth crime, re-offending and anti-social behaviour
- Reduced NEETs and improved participation in learning and training to age 18
- Improved readiness for school by vulnerable children at age 5
- Improved participation in 14-19 vocational pathways including increased take up of employment with training, apprenticeships and traineeships by vulnerable groups
- Reductions in substance misuse and teenage pregnancy
- Increased breast feeding and reductions in smoking by pregnant women and mothers
- Improved resilience and well-being for children and young people with reduced mental and behavioural problems and less demand for CAMHS services.

To assure ourselves of progress in achieving improvement in relation to the priorities we have developed a set of outcome measures to show the impact the new preventative services are having.

PRIORITY	KIFSS	KIASS
Safety	We will keep vulnerable and disadvantaged children safe without the need of specialist children's services	We will ensure that more young people receive help earlier so that their needs do not escalate and require support from specialist provision

PRIORITY	KIFSS	KIASS
Health	We will reduce health inequalities in the early years and during childhood and ensure we improve physical and mental health outcomes	We will ensure young people are helped to avoid harm from substance misuse and risky behaviours and they benefit from improvements in support for mental health and wellbeing
Participation and Achievement	We will ensure vulnerable and disadvantaged children access and participate in good quality childcare and education and achieve good outcomes at ages 5, 7 and 11	We will ensure that all young people aged 11-19 are positively participating in EET, achieving good outcomes at ages 16 and 18, and progressing well to employment or higher learning
Resilience	We will ensure early help services support children and families to be resilient and overcome barriers to achieving their potential	We will ensure that young people are resilient with good mental and emotional health, are able to make positive informed choices and become active and responsible citizens with strong personal networks

How We Will Measure Progress

In this Plan we set out clear targets for improved outcomes and we will monitor our progress in achieving them, in every locality in Kent and for the county as a whole. We will also compare our success with other similar areas and statistical neighbours and we will ensure we are in a good position to evaluate the most cost effective and efficient early help interventions that impact on improving particular outcomes for children and young people.

Early Help performance measures are set out on page 29. They will help us to determine the progress or distance travelled towards our stated outcomes, providing us with data to evidence whether this progress is sustained and cost effective over time.

An Early Help and Preventative Services Scorecard is available to enable the measurement and tracking of progress against service targets.

Progress So Far

1. Establishment of a New Early Help Division

In April 2014, the Early Help and Preventative Services (EH&PS) Division was established as a consequence of Kent County Council's transformation plan 'Facing the Challenge – Delivering Better Outcomes' which was agreed in September 2013. It sets out KCC's response to the need to transform the way we work to achieve better outcomes, while spending less. One of the key transformation themes is Integration and Service Redesign, which have brought together all Early Help and Preventative Services within the new Education and Young People's Directorate.

This is a significant piece of transformation activity for the County Council which is being delivered at pace. The Authority is aligning its available resources for early help and prevention to do more and achieve more than we do now, while looking for ways in which we can be more effective at targeting our resources to need, make savings and spend more effectively to have a greater impact.

The intention is to make a significant difference through early help, to prevent the escalation of needs where we can, and identify the likelihood of problems emerging in the first place. The service will also make a significant difference in reducing demand for statutory children's social care and to help 'step down' social care cases from Children in Need, Children with Protection Plans and Children in Care, where it is safe to do so.

Our change programme is informed by the overarching framework for children's services 'Every Day Matters': Kent's Children and Young People's Strategic Plan 2013-16, which requires all parties involved with children, young people and their families to work together to deliver integrated services. This Strategy states:

"A disproportionately high percentage of the budget is spent on a relatively small number of children with complex and acute needs. As a result, KCC has not invested sufficient resources in preventative services to the extent that we need to, if we are to succeed in shifting the balance between high level need and preventative services."

The creation of the Early Help and Preventative Services Division is a reflection of the County Council's desire to deliver improved outcomes for vulnerable groups.

2. Prospectus

In May 2014, an Early Help and Preventative Services Prospectus was published and circulated to Members, staff, all schools and partner agencies in Kent. This Prospectus set out our vision, ways of working and direction of travel for the newly formed Early Help and Preventative Services Division within the Education and Young People's Services Directorate. It makes the strategic case for a focus on early help and prevention and provides the rationale for change, in order to achieve better outcomes. This Prospectus sets out:

- What we mean by early help and prevention;
- Our context, scale of need, vision and key deliverables for improving outcomes;
- The services that will be available to deliver early help and prevention;
- The impacts and outcomes we want to achieve; and the metrics we will use to measure whether we are getting better at delivering improved outcomes for children, young people and their families.

3. One Year Plan (2014-2015)

In order to provide focus, improve effectiveness, deliver services more efficiently and more robustly, and measure positive outcomes for children, young people and families, this One Year Early Help Plan (2014-2015) has been developed. It sets out the key priorities, targets and actions for Early Help and Preventative Services to August 2015.

This Early Help Plan is focused on providing help and support to families in Kent that are experiencing difficulties, quickly and effectively.

In the first year there is a need to focus on developing service responses that are fit for purpose and evidence the impact and outcome of the new division. This will require a fundamental change in the way we do things, how business is undertaken and the manner in which staff and teams join up to provide one coherent and cohesive family plan. There will be a shift from individual and silo working to the development of services that respond to the needs of the whole family and are provided in a systemic and clearly understood pathway of response and service offer. This first year will necessitate combining the agenda to delivering savings through reducing demand whilst conducting a series of reviews and redesign of service delivery models. To achieve this we are working with our consultants Newton Europe to re-design services.

The priorities in this first year are determined by the need to demonstrate service effectiveness and to evidence the opportunity to reduce demand and provide better more effective services to families, children and young people.

We will develop a longer term 2015-2017 Plan following this One Year Plan (2014-2015), to ensure continued successful delivery against our key priorities.

Summary of Key Priorities and Actions (2014-2015)

Priority	What we will achieve	By when
Service Delivery Model	Define and deliver an Early Help offer which is better and more productive using evidence-based interventions to achieve positive outcomes for children and families.	September 2014
	Demonstrate the impact of Early Help and Preventative Services in reducing demand and realising reductions in expenditure.	July 2015
	Develop an integrated Early Help delivery model which achieves acceleration of phase 1 of the Troubled Families Programme and enables the achievement of turning around the lives of 7,000 families in Kent, by the conclusion of phase 2 of the programme.	July 2015
	Undertake a wider market review of Children's Centres to refine and target their future operation and improve their reach and efficiency.	April 2015
	Operate a whole-family approach and provide a single point of access to a co-ordinated 0-19 Early Help Service using named key-workers to support children, young people and their families in need.	September 2014
	Establish a think family approach. Employ the strengths of families to help themselves identify their own problems, needs and solutions. By supporting families to find sustainable solutions to their problems, Early Help aims to build resilience in children and families to overcome difficulties. This will include a co-production approach to designing and embedding new ways of working. To further support young people and families, a 0-19 on-line Virtual Advisory Team Service will be established.	November 2014 December 2014
	Trial and implement whole school approaches to resilience to support young people and families to participate and achieve through the HeadStart Kent initiative.	September 2014

Priority	What we will achieve	By when
	Undertake a scoping exercise, in partnership with schools to review, refine and target the operation of children's centres model across the localities to more effectively meet the requirements of the core children's centre offer and to ensure the effectiveness and reach of children's centres across Kent.	September 2014
	Wherever possible through universal services, children's and families' needs will be met, requiring Early Help services to be delivered more through universal settings such as schools, children's centres and early years settings. To support this, early years settings and schools will have a linked, named 0-19 Early Help contact.	September 2014
	Work with Kent Police to reduce the proportion of young offenders who re-offend, identifying what works and instituting changes in the Youth Offending Service Delivery Model.	July 2015
	Develop for each District, an Edge of Care Support Team to manage risk better in the community, providing help for complex Early Help cases.	September 2014
Performance Measures and Monitoring	Develop an Early Help Performance Scorecard. This will enable tracking and assessment of progress against service targets and key performance measures.	September 2014
	Institute service monitoring and review processes to monitor performance levels on a monthly basis.	September 2014
	Agree District targets for improvements as part of the development of Early Help District Implementation Plans.	September 2014
	Agree a clear set of performance measures with stretching targets across the 0-19 Early Help service.	September 2014
	Complete an evaluation of phase 1 of the Troubled Families Programme to inform future integrated Early Help service delivery.	July 2015
Data and Intelligence	Review, develop and procure an integrated information sharing and data gathering system, together with a single case management system to support effective joint working across KCC, Health, schools and other key agencies.	Draft specification June 2014 and procure by April 2015

Priority	What we will achieve	By when
	Map and align data sources and systems across services and partner agencies in order to analyse data into meaningful intelligence. This has been reflected in the production of District Datasets. This District Dataset provides baseline data about service usage and need and enables targets to be established, agreed, published and monitored on a regular basis to support improvement.	June 2014
	Improve children's centres data collection and analysis to assess and improve their reach and effectiveness in evidencing impact and improved outcomes.	December 2014
	Analyse and reduce the proportion of young offenders who re-offend using the Youth Justice Board re-offending toolkit.	July 2015
Integrated Service Delivery	Revise and refresh the Early Help Assessment process (CAF) to improve effectiveness and outcomes; provide a clear and simple pathway for children and young people's needs to be identified, assessed and a clear plan of support provided to the family.	January 2015
	Promote the development of a seamless, integrated 0-19 Early Help Service that delivers District-based integrated teams that work together to provide co-ordinated Early Help support packages that achieve agreed outcomes.	September 2014
	Develop District Implementation Plans for local Early Help teams, which include agreed caseload management levels.	October 2014
	Achieve better co-ordination of Early Help Services with Health professionals so that a more integrated offer is provided to universal and targeted service users; named Health Visitors, School Nurses, CAMHS, Substance Misuse and Sexual Health workers are available.	September 2014
	Work closely with schools, Early Years Settings and post-16 providers to help them improve and co-ordinate the Early Help they give to children and young people with additional needs.	July 2015

Priority	What we will achieve	By when
	Develop and implement a clear protocol for risk assessment and the stepping up and stepping down of cases to Early Help, with colleagues in Specialist Children's Services (SCS). Embedding effective working relationships with SCS is key to this step up/step down arrangement.	September 2014
	Implement the South East 7 and Kent and Medway Protocols to reduce the proportion of children in care in the Criminal Justice System, through implementation of agreed triage processes between key services and agencies.	July 2015
	Undertake joint case audits with Specialist Children's Services in respect of young people in care / leaving care to support them so that they do not enter the Criminal Justice System.	September 2014
	Work with Kent Police to introduce appropriate interventions to reduce the over-representation of Black, Minority Ethnic Young People within the youth offending population.	July 2015
	Work with KCC's Employability and Skills Team to reduce the number of NEETs, especially among young people in care and in the youth offending population.	July 2015
	Establish a pre-employment, pre-apprenticeship and pre-enterprise training programme to reduce the number of young people who are NEET, working with the DWP, Job Centre Plus and the Skills and Employability Team.	July 2015
Joint Commissioning	Review commissioning spend and priorities by undertaking a rigorous analysis of need to inform the re-commissioning of Early Help services that are value for money.	July 2014
	Develop and agree an integrated Early Help Commissioning Strategy to help diagnose risk and tackle the root cause of family needs, clearly specifying what services are needed and what is expected of them, so that resources are more effectively targeted and efficiencies achieved.	April 2015
	Ensure there are new integrated commissioning arrangements in place to deliver the Troubled Families Programme.	April 2015

Priority	What we will achieve	By when
Workforce Development	Provide development and training to grow a highly skilled 0-19 Early Help workforce, with a common core of knowledge and understanding about children's needs, so that they are confident in working with families to keep them safe and turn around their lives. This will require the design and delivery of a workforce development programme that improves the skills and capabilities of staff.	November 2014
	Develop a 0-19 Early Help contract with staff that clearly sets out expectations around work quality and quantity including caseload levels and support available to staff to achieve the standards identified.	March 2015
Communications and Engagement	Produce a regular Early Help and Preventative Services e-Bulletin for staff to inform and engage them in change activities.	July 2014
	Ensure that there is a "no decision about me, without me" approach by putting in place mechanisms to hear the voice of children, young people and families in Early Help assessment and service development and delivery.	January 2015
	Establish a comprehensive Early Help social marketing and campaigns programme using digital technology to improve delivery of advice and guidance to children, young people and their families.	July 2015
Resources	Develop a cost benefits and cost avoidance model that identifies the potential cost savings or benefits associated with a particular activity or intervention. By monetising the benefits of an intervention savings will be able to be projected more confidently and there will be clear evidence of the financial impact of early help interventions.	April 2015
	Deliver the Facing the Challenge savings for Early Help and Preventative Services through the work with Newton Europe, to include a series of efficiency reviews and service re-design, management re-structure and improved Information, Quality and Performance functions.	December 2014

Service Specific Focus and Priorities

The first four priorities that follow are common to KIFSS and KIASS, reflecting the ambition for a seamless, unified and integrated 0-19 Early Help Service.

Early Help Assessment Process

This is a major piece of transformational change which will see the new teams fully recruited to by July 2014. These teams will provide a single point of access with a **refreshed early help assessment process** that is currently in development and which, after completion and testing, will be ready for full adoption by November 2014.

Workforce Development

A key priority is to ensure staff are supported to develop their skills and develop new ways of working, and in conjunction with colleagues across the division we will design a **workforce development programme** that will be implemented by November 2014. This will ensure all our work is of high quality and delivers measurable impact and improved outcomes.

By March 2015 we will also have developed an **Early Help contract** with our workforce that clearly sets out expectations with regards to the quality of work expected, and the support that will be provided in helping staff achieve this.

To ensure increased confidence in managing risk in the community and supporting the reduction in consultations, referrals and inappropriate contacts with specialist children's services it is important to strengthen the understanding of thresholds and implement a systemic family intervention and 'think family' approach. This will involve ensuring that Early Help workers can use a range of techniques including family mediation, group conferencing, multi-systemic family therapy, Solihull and disorganised attachment to manage more complex cases in the community.

As part of managing risk more effectively in the community we shall also implement a single approach to supervision across 0-19 Early Help Services that is consistent with Specialist Children's Services, to improve the quality of casework. We will include partner organisations in the supervision arrangements and those volunteers and mentors engaged in supporting children, young people and families.

Engagement with Schools and Early Years Settings

A fundamental aspect of the service will be to increase the capacity of universal providers to improve their ability to identify and support children when issues are first identified. By September 2014 **all settings and schools will have a linked named worker from the Locality Early Help team** as a first point of contact.

Through the development of highly effective partnerships and strong, robust relationships with all partners charged with supporting children and their families we will reduce the need for intervention by specialist services.

Step Up and Step Down Protocol and Caseloads

By September 2014 we will have **agreed and implemented refreshed step up and step down protocol** that will allow for improved identification of risk and clearer pathways between Early Help and Specialist Children's Services.

This will result in an increased step down rate to Early Help Services of 15% in 2014-15 moving from 1145 to 1316 cases stepped down, with the projection of 40% increase to 1603 cases stepped down by 2017.

In terms of reducing cases that are escalated into SCS we aim to reduce this figure by 15% in 2014/15 from 600 to 510 cases, with a 40% decrease in 2017 taking the figure to no more than 360 cases.

We will operate caseloads of **18-24 families at any one time** in line with SCS. There is an expectation that this will be compromised of complex and less intensive early help assessments and youth justice cases (where relevant). This work will reduce the proportion of children and young people open to Specialist Children Services who are classed as Children in Need. By July 2015 we will have seen this number fall by 10% to 300 per 10,000 population from the current rate of 330.1 per 10,000. Through supporting these young people appropriately and, where possible, helping them have their needs met through universal and targeted services, we will also reduce the re-referral rate to Specialist Children's Services from 26.6% to 25% (a 6% decrease in actual numbers).

The percentage of Early Help Assessments closed where positive outcomes have been achieved will increase by 25% from the 2013/14 baseline of 66.6% to 82.5%.

Through more effective support and guidance, and access to a wider range of services that can provide single agency support or improved one-to one work with young people and families, we would expect to see a 15% reduction in referrals to SCS moving from 19,741 in 2013/14 to 16,779 by 2015; with step downs increasing by 30% from 1145 to 1490, and a 25% reduction in step ups into SCS from 600 in 2014 to 450 in 2015.

In 2014/15 we expect to see an increase in the numbers of children, young people and families with an Early Help Assessment completed per 10,000 per age group so that:

- Early Help Assessments completed per 10,000 per age group, 0-4 increases from 86 to 103.
- Early Help Assessments completed per 10,000 per age group, 5-11 increases from 132 to 154.

- Early Help Assessments completed per 10,000 per age group, 11-16 increases from 117 to 136
- Early Help Assessments completed per 10,000 per age group, 16-19 increases from 48 to 57.

With that in mind we expect to see an increase in the percentage of Early Help Assessments and Team Around the Family plans closed with a measurable positive outcome by 25% from 66% to 83%.

Kent Integrated Family Support Service (KIFSS)

Kent Integrated Family Support Service (KIFSS) is the 0-11 service strand of the newly established Early Help and Preventative Services. The service is at the beginning of a six month initial implementation phase which will see the completion of a major restructuring of Children Centre and Early Intervention teams into locality based Early Help teams whose role will be to meet the needs of children up to age 1. There will also be closer integration of the work of Children's Centres with schools.

To develop the service offer we will:

- Implement a **hub and spoke service model** across 17 identified localities that ensures a range of open access service delivery points through which we will also meet the requirements of the **Core Children Centre Offer**.
- Undertake an initial scoping exercise investigating the potential opportunities that could result from **schools becoming more involved** in, and in some cases responsible for, the successful delivery of this offer, which will be completed by November 2014.
- Support staff to develop strong relationships and work with whole families and their children, encouraging a culture of resilience with families being empowered to do more for themselves
- Focus on the family rather than simply the child, using systems based interventions to effect change.
- Promote the involvement of Families in reviewing the effectiveness of interventions as well as in service development and design.
- Undertake a wider market engagement exercise and service review of Children Centres in order to improve the quality and outcomes in each hub, and achieve further efficiencies.

To ensure young people receive help earlier so that their needs do not escalate, we will:

- Work with Specialist Children's Services to better understand the key factors that trigger children and young people becoming known to specialist services so that we can target our resources more effectively.
- Ensure there is a single point of contact for all assessment requests working with specialist services to provide an effective triage system for addressing complex needs earlier.
- Reduce the number of children and young people who become known to, or who are worked with Social Care, supporting effective step downs into Early Help

To ensure better reach and impact through improved targeted support, we will:

- Improve data collection and analysis to ensure a much sharper emphasis on the impact of the help offered with improved evidence of support reaching the most vulnerable families and target groups.
- Deliver accredited interventions that concentrate on improving parenting skills and promoting positive parent and child relationships and interactions in the family.
- Increase the engagement of those families at greatest risk of experiencing poor outcomes.
- Work with public health colleagues to help address improvements in areas such as breastfeeding rates and smoking cessation in pregnancy.
- Deliver a range of targeted interventions with identified schools where persistent absenteeism and high rates of exclusion are an issue.
- Promote the importance of learning through targeted interventions that support children's transition into school and between schools at Key Stage 2 and 3.
- Use a clear set of performance indicators that underpin a range of stretching targets across the whole 0-11 agenda. All staff will be aware of these and understand the targets for their local areas.

Kent Integrated Adolescent Support Service (KIASS)

Kent Integrated Adolescent Support Service (KIASS) is the new multi-agency integrated service for young people aged 11-19, bringing together staff and services from Youth Justice, Youth Work, Troubled Families and Inclusion and Attendance. A KIASS staffing structure is in place since April 2014, deployed across six double district areas each led by a KIASS Locality Manager.

To ensure we embed new ways of working we will:

- Establish a single point of access for all adolescent services including an on line advisory service, open access one stop shops and multi-disciplinary points of delivery for young people.
- Support staff to develop strong working relationships with young people and families, ensuring we do more to help families become more resilient.
- Establish a 'think family' approach within adolescent services, ensuring there is effective whole family support taking place.
- Establish a social marketing and campaigns programme using digital technology to improve the delivery of advice and guidance to young people and their families.

To ensure young people receive help earlier so that their needs do not escalate, we will:

- Reduce the number of young people who become known to Social Care, as part of the children in need assessment, supporting effective step downs into Early Help.
- Reduce the numbers of young people becoming known to specialist children's services due to Southwark judgement (200 by March 2014) or as part of the youth justice system.
- Support young people to move out of care through improved targeted engagement.
- Work with Specialist Children's Services to better understand the key factors that trigger young people becoming known to specialist services so that we can target our resources more effectively.
- Establish an Edge of Care Point Of Delivery (POD) in each District that can manage risk in the community through Early Help assessments for complex cases.
- Establish an engagement programme for young people to address risky behaviours including substance misuse and Children Missing return interviews.
- Ensure a single point of contact for all casework, quality management and working with specialist services to provide an effective triage system for addressing complex needs earlier and managing step down transfers.

To increase the number of young people who are participating in Education, Employment and Training, we will:

- Reduce persistent absenteeism from 6.7% in 2012/13 to 5.5% in 2014/15 (with a particular focus on addressing absenteeism in PRUs).

- Reduce by 25% the number of Fixed Term Exclusions from 6156 in Secondary schools in 2013/14 to 4617, and Permanent Exclusions from 76 in 2013/14 to below 40 in 2014/15.
- Ensure that each Secondary school and PRU has a named KIASS contact, and priority schools have a team around the school. This will be supplemented through the development of an online Virtual Advisory Team by December 2014.
- Support improved transition for vulnerable learners between Primary and Secondary school and from Key Stage 4 to post 16 learning and training, to ensure every young person has a positive destination.
- Trial and implement whole school approaches to developing emotional resilience and wellbeing using targeted interventions as part of the HeadStart lottery funded programme.
- Reduce the numbers of young people who are NEET from 5.5% in 2013/14 to 2.4% by July 2015, by targeting vulnerable groups, working with training providers, European Social Fund providers, Colleges, Children's Centres, Job Centre Plus, KCC Skills and Employability Team and KCC's Economic Development Unit to deliver pre-employment, pre-apprenticeship and pre-enterprise training programmes for young people.

To increase the resilience of young people, so that they are better equipped to make positive informed choices and become active and responsible citizens, we will:

- Improve partnership working at County and District level and enable much closer working with criminal justice agencies, Specialist Children's Service (SCS), education, health and the Voluntary Sector.
- Reduce youth offending, including the number of first time entrants into the criminal justice system, re-offending and custodial sentences. Reduce the numbers of young people who are first time entrants into the youth justice system from 698 in 2014 to 628 in 2015 (10% reduction).
- Reduce the disproportionate number of children in care in the criminal justice system by implementing the Kent and Medway Protocol and by July 2015 reduce the proportion of children in care in the CJS to 10% of the caseload (currently 52% in quarter 4 of 2014 to 47% in quarter 4 of 2015).
- Reduce the significant over representation of black and minority ethnic (BME) young offenders by working with Kent Police to address this important issue.

Over the last 3 years there has been a 37% decrease in the numbers of first time entrants to the youth justice system, with over 200 fewer young people year on year. Local authorities have delivered a significant reduction by taking whole authority

partnership approaches. By working with representatives from the County Youth Justice Board (CYJB) we will visit a number of authorities where this has been achieved to establish a multi-agency action plan to reduce first time entrants. In the interim we will:

- Use restorative approaches, social action programmes and resilience mentors (using the Rochester model) to support young people.
- Work in partnership with Kent Police to learn from high performing areas (Essex and Warwickshire)
- Develop a 'strengths based' or desistance approach with young offenders and prepare for the transfer of responsibility for managing junior attendance centres from 1 April 2015.
- By July 2015, we will reduce the proportion of young offenders who re-offend to 31% from 33.4%.

Kent Troubled Families Programme

The Kent Troubled Families Programme is the third biggest programme nationally and aims to improve the lives of 2560 families where there are significant problems with crime, unemployment and poor attendance at school. For each family, central government requires we should achieve at least two of the following outcomes:

- Reduce crime and anti-social behaviour
- Get the children to attend school regularly with minimal absenteeism
- Get adults back into work and off of "out of work benefits"

By May 2014 we have been successful in turning around 30% of the cohort, which is 755 families. This is good progress but below the national average of 33%. It has been delivered by an excellent partnership between the Police, Specialist Children Services, Schools and the Jobcentre Plus teams, with KCC taking the strategic leadership. District Councils have a key role to play in coordinating the delivery at a local level. There is much to achieve in the coming year, to achieve the national target of 100% of families meeting the outcomes required by April 2015.

To ensure we significantly improve the number of families turned around, we will:

- Understand the impact and effectiveness of services contributing to the Programme, and redesign and develop commissioning opportunities that improve the resources available and target these more effectively.
- Develop a service delivery model that is fit for delivering a new Phase 2 of the national programme that will commence in 2015.
- Redesign the delivery model in Kent to achieve integration of the programme into the core business of Early Help and Preventative Services.

- Agree a commissioning plan that achieves integrated services to support the early help and preventative services agenda to drive down demand and also supports the opportunity for families to be Stepped Down from specialist services.
- Complete the evaluation of Phase 1 and integrate the learning into Phase 2 of the national Troubled Families programme.
- Turn around 70% of families by April 2015.
- Use a Cost Calculator model to evidence reductions in the cost of public services generated through the programme.

Caseloads

At a county level, the Troubled Families caseload is 2560 families (over 3 years), increasing from April 2015 to an estimated 7500 families (over 5 years). These cases will be coordinated by Early Help and Preventative Services staff and will be part of their caseloads.

Developing the Model of Universal Provision

A key priority for Early Help and Preventative Services is to work with schools, early years settings and children's centres to strengthen their work to support vulnerable children and young people.

Many schools, for example, are centres of good practice in being inclusive schools that provide a wide range of additional learning and welfare support for vulnerable children and families. We will work with these schools to support them as hubs of provision around which we will align the work of children's centres and provide integrated Early Help Service teams around the schools. We will also work with and support other schools to develop further their early help offer.

A good model of universal early help provision in schools includes many of the following elements:

- Effective liaison and joint work with children's centres and youth hubs
- Good work to support transitions with children and families, into school, from Primary to Secondary School and at post 16
- Family support work and parenting programmes, together with a strong commitment to engaging hard to reach parents and helping to improve their capacity to support their children
- Designated staff to manage multi-agency work with external agencies and coordinate the CAF or early help assessment process and its outcomes
- Provision of additional services such as counselling, family and play therapy, assertive mentoring, mindfulness programmes, restorative approaches to managing behaviour and the use of nurture groups
- Effective child protection and safeguarding arrangements and good use of consultation arrangements with staff in Early Help and Children's Social Care services
- Good use of the Pupil Premium to ensure the needs of disadvantaged and under-achieving learners are met and they achieve better engagement and improved progress and attainment
- Effective strategies to reduce persistent absence and good support for absent pupils to catch up with learning
- Outreach work to families and home visiting, especially for nursery age children
- Effective SEND support and good use of the LIFT process to improve provision for pupils and advice and support for staff

- Active contribution to the local In Year Fair Access process to ensure solutions are found to meet the needs of hard to place pupils, and effective reciprocal arrangements with other schools
- Highly trained and effective teaching assistants who are skilled in supporting the additional learning and welfare needs of pupils
- A whole school approach to developing pupils' emotional resilience and well being and a graduated approach to addressing and improving the mental and physical health of pupils
- Effective engagement and joint work with the Troubled Families programme
- Good support for and active engagement with child in need cases, child protection plans and support for children in care, including effective partnership with the Virtual School to improve outcomes for children in care
- Effective use of the provision available through PRUs and alternative curriculum to address the needs of pupils at risk of exclusion, including a strong commitment to successful re-integration of pupils and a low rate of permanent exclusion
- Good partnership with Kent Police and Youth Offending services to address anti-social and offending behaviour

We will actively support this range of work in schools by aligning resources available through Early Help Services; by reducing the number and complexity of multi-agency contacts that have to be managed; by providing more specialist supervision for more complex cases where needed; by reducing and simplifying referral processes and waiting times; and by improving information sharing.

At the same time we will commit to training school staff, where appropriate and in situations where that will strengthen schools' early help and prevention work. We also recognise that there are opportunities to work with schools to make the best use of available resources when commissioning additional services.

Measuring Impact

Early Help Performance Scorecard

The Education and Young People's Directorate has developed a Performance Scorecard which is the monitoring tool for measuring progress against targets and agreed outcomes.

Early Help Performance Indicators and Targets

Detailed below are a set of clear indicators for measuring the difference the objectives in this one year plan will make. As we develop, further work will be undertaken to ensure we are measuring the things that really count and not just those things for which data is available, specifically the impact of services on key outcomes.

Early Help District Context Datasets

In parallel with the development of the Directorate Performance Scorecard, work has been undertaken to produce District Context Datasets which provide current baseline performance data. These Datasets have been circulated to staff. The evidence provided in the District Dataset offers baseline information to help the development of local priorities and performance measures that align to our key outcomes.

This baseline information is intended to be used to inform the development of District targets, which will be vital at the local authority level for improving the targeting of appropriate support in relation to needs.

District targets will be agreed for Early Help by October 2014 in order to assess and monitor progress locally and across the County, using the evidence about particular vulnerable groups and characteristics of families, children and young people that are more at risk than others and therefore in need of Early Help.

Variation in performance across Districts

The following table shows the range of performance for a snapshot of key performance measures across Districts in Kent currently.

	Performance Range	
Reduce the number of Primary permanent exclusions by 10%	Ashford, Dartford, Dover, Gravesham, Sevenoaks, Tunbridge Wells	Thanet
	0 (Sep 2013 – June 2014)	11 (Sep 2013 – June 2014)
Reduce the number of Secondary fixed term exclusions	Sevenoaks	Swale
	115 (Sep 2013 – June 2014)	1,173 (Sep 2013 – June 2014)
Reduce the level of persistent absence in the Secondary sector	Tunbridge Wells	Swale
	4.7% (2012/13)	8.2% (2012/13)

	Performance Range	
Reduce the percentage of NEETs overall	Sevenoaks	Thanet
	3.72%	8.12%
Reduce the number of first time entrants to the Youth Justice System	Canterbury	Ashford
	23.3 (<i>rate per 10,000 of 10-19 year olds</i>)	53.9 (<i>rate per 10,000 of 10-19 year olds</i>)
Troubled Families: percentage of phase 1 cohort turned around	Sevenoaks	Dartford
	21.6%	40.2%
Increase the percentage of TAFs closed with a positive outcome by 25%	Thanet	Canterbury
	52.0%	77.4

The expectation is that all Districts raise their performance against the measures in the table to the highest in the County. This will require colleagues to learn from each other, identify best practice and replicate it across all Districts promptly and effectively.

Monthly Management Activity Monitoring

To support the achievement of our performance indicators, Heads of Service will monitor on a monthly basis the following activity measures, both County and District wide and take necessary remedial action where data indicates activities are not progressing at the pace required to achieve the targets. These include, for example, the numbers of :

- EHAs / TAFs
- NEETs
- Step Up / Step Down cases
- Referrals into Social Care

Baseline data for these monthly activity measures can be found in a table at Appendix 2.

Early Help Information, Quality and Performance Unit

In order to do things differently, there is a need to sharpen our business performance. Accordingly, a new Unit has been established to support the work of the Division and lead on:

- Evaluation of impact and production of intelligence-based analysis to support delivery of services.
- Identification of best practice and its application to the work of the Division.
- Support for the use of LEAN processes to ensure continuous improvements in pathways and service processes to improve service delivery and outcomes.
- Quality assurance in order to ensure that what the service is doing is effective.

Early Help and Preventive Services Performance and Targets

Indicator	Performance		Target
	Kent 2014	National 2014	2015
Reduce referrals to Specialist Children's Services by 15%	19741		16779
Reduce re-referrals to Specialist Children's Services by 6%	26.6%		25%
Increase step downs from statutory Social Care to Early Help by 30%	1145		1490
Reduce step ups from Early Help to statutory Social Care by 25%	600		450
Early Help Assessments completed per 10,000 per age group, 0-4	86		103
Early Help Assessments completed per 10,000 per age group, 5-11	132		154
Early Help Assessments completed per 10,000 per age group, 11-16	117		136
Early Help Assessments completed per 10,000 per age group, 16-19	48		57
Increase the percentage of CAFs and TAFs closed with a measurable positive outcome by 25%	66%		83%
Reduce the number of primary fixed term exclusions by 10%	1107		1000
Reduce the number of primary permanent exclusions by 10%	26		23
Reduce the level of persistent absence in the primary sector	3.1%		2.8%
Reduce the number of secondary fixed term exclusions	6783		5625
Reduce the number of secondary permanent exclusions	76		39
Reduce the level of persistent absence in the secondary sector	6.7%		5.5%
Troubled Families: percentage of phase 1 cohort identified and worked with	84%	N/A	95%
Troubled Families: percentage of phase 1 cohort turned around	30%	N/A	70%
Reduce the percentage of NEETs overall	5.9%		2.4%
Reduce the number of NEETS coming from vulnerable groups	1142		890
Reduce the percentage of young women who become pregnant (per 1000 women aged 15-17)	25	26	23
Increase the percentage of Children's Centres receiving a judgement of good or better following Ofsted inspection	72%		75%
Increase the percentage of DWP identified 2 year olds taking up free entitlement	79%		83%
Percentage of funded 2 year olds in good or outstanding settings	85%		86%
Increase the percentage of children taking up 'free for two'	61%		80%
Reduce the number of first time entrants to the Youth Justice System by 10%	698	N/A	628
Reduce the rate of re-offending by young people	33.4%	35.3%	31%
Reduce custodial sentences as a percentage of court disposals	4.3%		3.5%
Reduce the number of Children in Care on the Youth Justice caseload (snapshot at end of each Quarter)	52	N/A	47
Increase the percentage of families with children under 5 living in poverty who are registered with a Children's Centre	TBA		TBA
Increase the percentage of priority families with children under 5 living in the area who have sustained contact with a Children's Centre	TBA		TBA
Increase the percentage of children with FSM achieving good levels of development in the Early Years Foundation Stage	48%	36%	50%
Increase the percentage of parents from target groups completing parenting or other programmes	50%		60%
Increase the percentage of children being breastfed at six to eight weeks and sustained over time	36%		40%
Reduce the percentage of babies born to mothers who still smoke at the end of pregnancy by 10%	13.1%		11.8%
Increase the number of vulnerable learners on apprenticeships	173		200
Increase the percentage of Children Missing Education offered suitable education within 30 days of becoming known	56%		70%
Number of families electing to educate at home who receive a visit by the LA	618		700
Reduce CAMHS caseload, for patients open at end of the month (May 2014)	8949		8000
Reduce the number waiting for routine treatment after assessment by CAMHS	484		350

Research and Best Practice

In order to achieve our key outcomes at the scale and pace needed, we will find out what is good and do more of it. We will apply more evidence-based early interventions about what works (research and policy) to our processes and systems (practice) to deliver improvements to children's and family outcomes.

We will assess what works to determine both the best early interventions available and their relative value for money.

We will assess our progress in planning and delivering Early Help by employing good practice from both local and national sources.

Local Best Practice

We will identify Early Years Settings and Schools that are engaging in good early help and share their approach widely for adoption by other education leaders and Early Help partners.

We will use the diagnostic work undertaken across KCC Children's Services by our partner, Newton Europe concerning current operational and financial performance to realign our services and resources to better meet need and therefore improve the quality of Early Help services and outcomes for users as well as increase Early Help's reach and effectiveness.

Improvement methodology will also deliver earlier action without significant up-front investment in services. It asks how existing services can perform better (or earlier) and demands rapid, small-scale changes. Accordingly, Early Help will utilise LEAN approaches to secure changes and improvements to services.

National Best Practice

The ambition is to deliver outstanding early help and achieve significant improvements, which include reductions in demand for more specialist and costly interventions. We will monitor and employ the findings of Ofsted, best practice in other local authorities and national initiatives such as the Troubled Families Programme and the work of The Treasury, and Early Intervention Foundation where it provides sound evidence of improved impact.

We will use the New Economy Unit Cost Database of Initiatives and Interventions, as it grows, to identify and replicate effective practice.

We will work with the Early Intervention Foundation to design and pilot cost effective interventions and learn from their work with 20 pilot local authorities determining how best to make early intervention a more effective reality on the ground.

We have undertaken an analysis of what Ofsted has identified as good Early Help to inform our self-assessment of effectiveness, (based on an analysis of recent Ofsted Inspection Reports of Children's Services in four counties judged to be Good and outstanding. These Common Characteristics of Good Early Help can be found at Appendix 1.

Resources for Early Help

The 2014/15 budget for Early Help and Preventative Services is set out below and includes all KCC's Medium Term Financial Plan savings that the service is required to make:

Early Help and Preventative Services Budget 2014-15	Proportion of Budget
Staffing	£27,411,100.00
Non-staffing costs including Commissioned Services	£22,538,600.00
Gross Budget	£49,949,700.00
Service Income	£5,157,500.00
Government Grants	£10,879,800.00
Total EH&PS Budget	£33,912,400.00

Wider Resources Available to Early Help	
Schools AEN Funding	£88.0m
Pupil Premium	£49.9m
STLS and Special School Outreach	£7.7m
PRUs and Alternative Provision	£11.8m
Free Early Years for 2 Year Olds	£17.6m
School Nursing	£5.0m
Health Visiting	£19.0m
Total	£199.0m

Understanding Costs and Effectiveness using Cost Benefit Modelling

There is now a body of evidence to show the case for investing in early intervention approaches to improve outcomes for children, young people and families. Investing early in the life of a problem, or when children are younger, can have greater benefits in the long-term and is therefore likely to be most cost effective. We will identify the extent of the potential cost savings that result from early help interventions.

We will work with KCC's efficiency partner, Newton Europe, to better understand how and where children's operational costs are currently spent, so that we can better assess the effectiveness of our current resource deployment and inefficiencies, duplications, gaps in provision and how well we target our resources effectively against need. We will use this work to make efficiencies and re-design our services.

An example of unit cost interventions is the cost of remanding a young offender to secure estate. A single bednight in a secure training centre costs £533 and £158 in a young offender institution. In 2013/14 we spent £774,000 on remands. New ways of working and maintaining the confidence of magistrates can reduce these costs.

Working with KCC's efficiency partner, we will develop a cost benefits and cost avoidance model that will enable us to identify unit costs of interventions, the most effective interventions and project savings for future years.

Efficiency Reviews

The Early Help Division is currently undertaking a number of efficiency reviews in order to achieve savings and deploy more resources to the most effective and needed commissioned services. These reviews include:

- Management Structures
- Business Support
- Children's Centres Delivery
- Commissioning Spend and Effectiveness

In addition, KCC will work with its efficiency partner Newton Europe, to analyse current spend on Children's Services, determine actual unit costs and develop a cost benefits and avoidance model to assess value for money and effectiveness of Early Help activities and interventions. This will enable us to more effectively deploy resources in the future and evidence the economic and financial business case for investment in Early Help and Prevention.

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Common Characteristics of Good Early Help

Identified following analysis of Ofsted Inspection Reports of Children's Services judged to be good and outstanding.

1. When partners/agencies have worries about children and young people, they **know who to contact to make an appropriate referral**.
2. The '**continuum of need**', a threshold for services document is well embedded in practice. The **Thresholds document** sets out services available and the criteria that triggers access to services and support. All professionals and partners know when the thresholds are met and who to contact. Threshold criteria for access to social care services are **well understood and owned by all staff so that referrals are appropriate** and result in fewer referrals overall and reduced numbers of re-referrals.
3. **Effective performance data** supports managers where delays may be affecting children and families. To ensure children and families improve, staff need regular performance information which shows what is working well and what can be done better. This will determine key actions by managers and staff.
4. There is an **effective and comprehensive early help offer delivered by Multi-Agency Teams and Children's Centres** which is having a significant and positive impact on outcomes for children and young people and prevents problems escalating.
5. Children and families who are assessed as needing early help and support receive good services from locally based multi-agency teams. The **support provided results in good outcomes that improve the lives of children**, young people and their families. Offers of early help to children and families need to clearly state how things will get better. **Plans should be clear and realistic** and set out the support available for families to help them make improvements.
6. **There is a strategy for early help** that provides clarity of direction and reduces the number of children who have a child protection plan or require specialist services and the number of children looked after. The strategy needs to show how the LA and partners are **moving away from a reactive approach to managing demand smarter**.
7. Young children and families receive good early help from Children's Centres, who are part of an integrated early help and preventative approach. The **impact of the Children's Centres needs to be measured and a system used to track children's progress**.
8. A **comprehensive directory** should be available of **local services** to provide good quality information, advice and guidance to professionals, in order that they can signpost effectively.
9. **Early Help support** needs to be **targeted in greatest areas of need**.

10. **All children who go missing from home, care or education are the subject of rigorous scrutiny by the LA.** The LA has good arrangements for identifying and tracking young people who are missing from home, care or education. Risks are identified and well managed. Timely information sharing, clear planning and actions to reduce risk and provide support to young people are evident. Reports are generated weekly on all missing children and arrangements are in place to investigate. **Schools know about their responsibilities and take appropriate action** when a child or young person is missing from education.
11. **EWOs target vulnerable children and young people to reduce the rate of persistent absence. Schools reduce the number of exclusions** through managed moves.
12. **Pathway plans** (including a range of education, employment and training opportunities) are consistently good quality to help in **supporting young people as they move towards independent living**. Young people aged 16 + who are homeless or at risk of becoming homeless are safeguarded and supported.
13. **The LA has set out high aspirations for the Early Help service and set ambitious targets for improving services.** Leaders and managers have clear plans for improving services based on a **good understanding of its strengths and weaknesses** and how these impact on service delivery, reflected in the re-alignment of services to improve outcomes. **Strategic priorities are clearly identified** in response to local need and national initiatives. These priorities are reflected through the early help strategic approach and robust commissioning arrangements which underpin the effective delivery of services.
14. **Self-assessment and a performance scorecard are used** to evidence focus and improvements.
15. **Systems are in place to ensure good information sharing** (including with health, schools, and pathways of referral). The information sharing reflects a clear shared understanding and approach between agencies.
16. Most **assessments are of good quality, timely, comprehensive and proportionate to risk**, resulting in appropriate decisions and planning, **with a direct offer of help to address identified needs**. The CAF is used well. **Early help assessments** are effective in determining the level of need and **are suitably outcome-focused** and reduce risks for children. The voice of the child needs to be present in assessments.
17. Multi-Agency Team **workers receive a good range of support, supervision and training**, to help them effectively address children and families' needs. This is reflected in a high quality workforce strategy.
18. **Focused investment in Early Help services** effectively targets the most vulnerable families. The support provided identifies those families who need statutory intervention earlier. A **growing number of children and families are receiving help and support at a much earlier stage**. As a direct consequence of this investment **statutory interventions are declining overall**. There should be an overall decrease in the number of children subject to a Section 47 child protection enquiry, fewer children are on child protection and children in need plans and there is a steady fall in the number of LAC.

19. There are **good arrangements for the transition of cases between teams, including both escalation and de-escalation** when children's circumstances and needs change. There are clear and safe arrangements in place to step down a case from statutory services to early help which ensures families are able to maintain improvements with less intensive support.
20. A **clear and thorough analysis of risk and protective factors** informs the planning and decisions being made to support and protect children.
21. The **Troubled Families** Initiative has been **effectively assimilated into Early Help** to ensure the integration of this service and its future sustainability.
22. The approach to **commissioning is based on a thorough analysis of needs** (using the JSNA) **to inform the use of resources and the delivery of services** across the partnership.
23. LAC need to be regularly attending and progressing at school and all have PEPs to support this. The **Virtual Headteacher challenges and supports school leaders to ensure tracked progress of LAC improves** to at least the levels expected for their age.

June 2014

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Monthly Management Activity Monitoring

Table to be inserted when populated

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