

<u>Committee and Date</u>	<u>Item</u>
<p>People Committee – children and young people</p> <p>29th November 2017.</p>	<p><u>Public</u></p>

Early Help Family hubs

Responsible Officer Karen Bradshaw – Director of Children’s Services
e-mail: Karen.bradshaw@shropshire.gov.uk Tel: Fax:

1. Summary – This report highlights the detail for People Committee approval to progress.

The Early Help Partnership in conjunction with Shropshire Council has aligned its Early Services to working with whole families across a 0 – 19 (upto 25 for a child with disability), and focussing its scarce resources on tackling the root cause of these families problems. Early Help Family Hubs are a way of bringing multi agency, multi disciplinary teams together. Co located, where possible, with the right skills mix to stick some of Shropshire’s most complex families – like glue. This transformational change programme will ensure that families that don’t need a children’s statutory intervention – won’t get one, ensuring high cost specialist services are dedicated to protecting children and young people from significant harm.

The recommendations in this report highlight the decisions and approvals needed to get the implementation plan under way. The delivery of Early Help Family Hubs will save £875,000 by March 2019, as a contribution to Shropshire Councils financial savings plan.

The Head of Early, Partnerships and Commissioning has supported a People Committee cross party task and finish group – to help with general understanding of the proposal, to facilitate a clearer knowledge of the evidence of need highlighted by robust data, and to provide the space and thinking time to ask relevant questions. The task and finish group recognises the need to develop more joined up Early Help Services via an Early Help Family Hub – combining resources and expertise of the Early Help Partnership.

2. Recommendations

- To comment on the general direction of:
 - The Early Help family hub model

- The savings programme associated with the delivery of Early Help Family Hubs – including the restructure and staff review
- The consultation programme to ensure citizens and the public are fully engaged in new service design and delivery from their experience
- The timescale for delivery
- Approve the closure of some children's centres which will be de registered/designated with the Department of Education.

REPORT

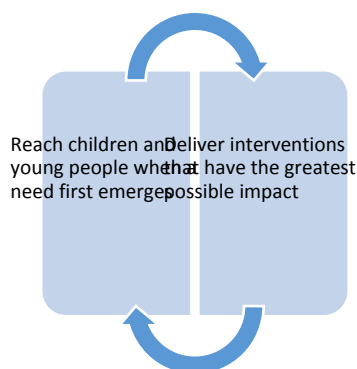
Early Help Partnership Vision - Our shared commitment

Shropshire Councils Early Help Strategy sets out our shared commitment to deliver effective Early Help to children, young people and families. Shropshire's Early Help Partnership vision is that children and young people are at the heart of everything we do. They are important now and in the future, they are the next generation. Children and young people need to enjoy their childhood and adolescent years and grow up to be responsible citizens contributing to our County life.

It is our intention that children and young people have supportive families, live safe from harm, fulfill their potential, are healthy and have positive and fulfilling lives.

What is Early Help

Early Help is an approach to maximise the chances of this vision becoming a reality for every Shropshire child and young person aged 0 – 19 years old and up to 25 for young people with Special Educational Needs and Disabilities. Early Help is a way of working that supports children in the early years of their lives, or early on in the emergence of a problem at any stage of their lives. Our definition of Early Help is one that can be practically applied by any professional in any context. Our definition of early help is to:



Why is Early Help important

Early Help is a high priority nationally and in Shropshire for two key reasons. Effective Early Help has a positive impact on the lives of children and young people. This has been evidenced through several reviews - led by Graham Allen MP, Rt

Honorable Frank Field, Dame Claire Tickell, Professor Eileen Munro, Sir Michael Marmot in addition to Working Together (2013) and work by the Centre of Excellence in outcomes (C4EO) and more recently Ofsted.

Sir Michael Marmot underlined the significance of early help in the following way, *“Giving every child the best start in life is crucial in securing health and reducing health inequalities across the life course. The foundation for virtually every aspect of human development – physical, intellectual and emotional – are laid in early childhood. What happens during these early years, starting in the womb, has lifelong effects on many aspects of health and well-being”*

Effective Early Help has a positive impact on public finance in a context of significant financial pressures. Effective Early Help reduces demand for higher cost services. Conversely, late help has a high human cost and a high financial cost. Indeed the Early Intervention Foundation report estimated a £17 billion national cost of late intervention. Our aim is for a redirection of our finite resources from high cost, late intervention to prevention and early intervention support services. In this context, there is a strong motivation to get Early Help right in Shropshire.

Our Shropshire context

Shropshire is a large, rural, sparsely populated county situated in the West Midlands. Latest mid-year estimates for 2015 show that Shropshire has a population of 311,380, of which around 59,300 are children and young people aged between 0-17. More of our population live in rural areas than in urban areas.

The majority of Shropshire’s children and young people are safe and in the community, do well at school, and are healthy. However, the number of children known to Children’s Social Care and having a Child in Need Plan, Child Protection Plan or being Looked After could be lower if Early Help supported families earlier before problems became a safeguarding concern.

Throughout 2016/17 Shropshire Council helped many young people. Whether through Early Help services, where we saw more families assessed for Early Help services or the Strengthening Families programme, which has now engaged with over 700 families. Children with higher needs entered the social care system where we saw a slight increase in the numbers of Looked after Children and stability within the number of Children on Child Protection Plans and Children in Need Plans. When children have the type of issues that require help from the Council, their education can suffer, attendance drops and crime can increase, including drugs and gangs.

The number of families accessing A&E rather than accessing local community Early Help Services is on the increase. The ‘toxic trio’ of domestic abuse, mental health issues, and drug and alcohol abuse are significant issues for some Shropshire parents, not helped by rural isolation, which impacts on their children. Some families have deeply entrenched multi-generational problems. It is clear that growing up in poverty has a negative impact on a child’s health and development. Not only is deprivation identified as a risk factor in itself, but it also contributes to other risk factors from early in life. Infants on low income families for example are less likely to be breastfed and more likely to be with a low birth weight, both of which factors are identified in increasing the likelihood of obesity. They are more likely to be fed sugary food and drinks, which increase the likelihood of obesity and tooth decay.

Furthermore, potential behaviour and resources that impact on cognitive development to ensure a child is ready for school has been linked to socio economic status of a child's parent, and there is a clear relationship between levels of deprivation with a Local Authority area and the health development of their children and young people.

Children's good development can be measured across three independent and reinforcing domains: development and school readiness (including communication and language), social and emotional development and physical health (including key indicators such as tooth decay and obesity) and harm (including avoidable injuries and A&E issues).

The primary objective of Shropshire's Early Help service is to close the gap between the most disadvantaged children and their peers in relation to these aspects of their development and life outcomes.

Shropshire's Early Help Strategic objectives

- ✓ To identify the needs of children and young people and their families across a continuum of need
- ✓ To understand and respond quickly to the needs of children, young people and families
- ✓ To support the refocusing of resources from crisis intervention to prevention
- ✓ To support families to achieve their full potential and thereby mitigate the impact such as child poverty and health inequalities.
- ✓ To support an action learning approach that ensures learning and evidence informs future service design and delivery. This includes listening to what children and families have to say about what best helps to prevent problems occurring or escalating
- ✓ To provide the context for multi-agency partnerships to work together to improve outcomes for children, young people and families for generations to come

Early Help complementing existing strategies

- Ensure Family hubs create new ways to access and use services through Shropshire Councils Digital Transformation programme – which aims to improve the customer journey. Including opportunities to utilise the Early Help module within Liquid Logic to share information which is proportionate, relevant and appropriate for those who need access.
- Making the most of co-location and collaboration by commissioning 0 – 25 public health nursing – using the Lancaster model of assessment for all key contacts to ensure optimum child development
- Utilise Shropshire's out of hospital transformation strategy – to drive integration - through the prevention programme work stream – Healthy Lives
- Joint partnership with the new 0 – 25 emotional health and well being services aimed at tackling issues related to mental health and increasing emotional health and well being
- Support the delivery of the 2/3/4 year old quality day care ensuring ease of access to quality pre school provision

- Supports the current Youth Activities commissioning strategy which aims to work with voluntary, community and independent sectors to deliver quality universal and geographically targeted youth activities across Shropshire
- Invest in phase 2 of the Strengthening Families (Troubled Families) with a focus on improving outcomes across six 'family issues': school attendance, children in need of help, adult worklessness, young people not in education, training or employment, children affected by domestic abuse and families suffering from long term mental and physical health.
- Ensure the SEN Early Help pathway support the implementation of appropriate level Education, health and social care assessment, to deliver more inclusive support to children with a disability or special educational need and their families

The principles of how the Early Help Partnership will work together

The way that we work together is important. The following guiding principles set out the way we strive to work with families, together as practitioners:

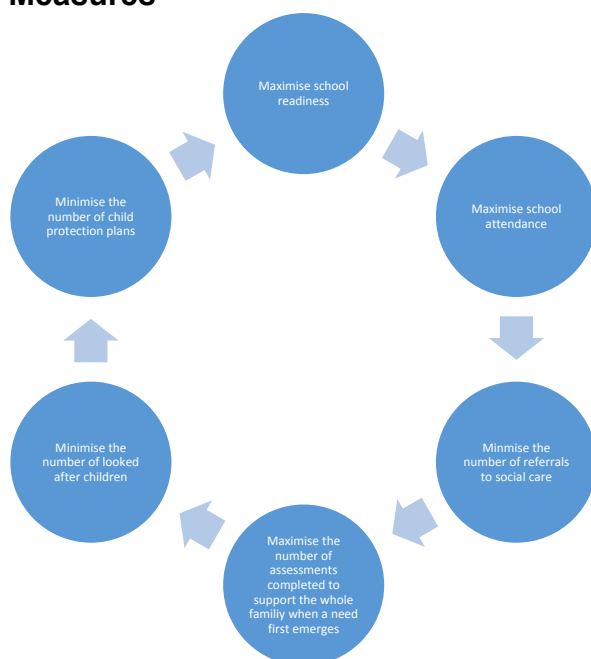
- The experience, well-being and giving children and young people a strong voice, is central to everything we do so children are safe
- Effective Early Help is the responsibility of everyone in Shropshire. This includes organisations working directly with children, young people and families such as schools, the police, the housing sector, Shropshire Councils services, Shropshire Clinical commissioning Group, Shropshire Community Health NHS Trust and community, voluntary and independent sector groups and organisations.
- Parents have the primary responsibility for the care and development of their children, growing up in a loving environment where there are strong attachments. The family is the primary resource. We believe that most parents want the best for their children. We will build trusting relationships with parents in order to support them and to build on the strengths and skills they have to bring up their children
- We will work with the whole family and recognise the uniqueness and diversity of each family and family member
- We will work with families to enable the development of positive extended family, personal and community networks so that families access positive informal support
- We will work with families to identify needs and root causes rather than with presenting issues at the earliest opportunity
- We will deliver and target the right evidence based support, at the right and will flexibly endeavor to ensure the best outcomes for children, young people and their families. We will stick with families rather than just referring them on
- We will regularly evaluate the impact of our work with individual families and learn from this through measuring success outcomes of interventions delivered and seeking feedback from children and families on their perceptions of the effectiveness of work with them
- We will involve families in shaping, designing and delivering support and services
- We will use shared resources and assets more effectively and creatively together. This includes buildings, finances and most significantly people – the strengths of families and professionals

How will we know Early Help is working?

The overall aim is to develop a cohesive Early Help offer embedded within the whole family approach that builds protective factors and family resilience, enabling families to help themselves, reducing expenditure on costly reactive services. Our ambition is that families, particularly those with multiple and complex needs will have access to coordinated Early Help in accordance with need as soon as difficulties are identified. The offer is personalised, multi-agency and evidence based. Children and Young people in those families will live safe, healthy and fulfilling lives and develop into responsible citizens, thereby breaking the intergenerational cycles of risk and vulnerability. Families will become more resilient and develop capabilities to prevent and resolve problems. Social capital and resilience within communities will be identified and enhanced.

Out of 125 Early Help practitioner survey respondents – 90% are confident identifying level of risk against the Shropshire Safeguarding Children's Board multi agency guidance on threshold criteria.

Early Help Measures



The following output measure which constitutes a proxy indicator of an effective co-ordinated Early Help offer will also be adopted:

- Increase in the number of open Early Help assessments completed per agency

An updated Early Help Performance management framework is currently being developed with partners – and will include measures to ensure that practice is informed by feedback from children and their families about the effectiveness of help, care and support they receive from the time it is first needed until it ends. In April 2016 a new data collection system - ECINS was introduced – in the long term the system will help to report and feedback progress against Early Help Measures – in the short to medium term it is vital that all staff who need access to the system and who are engaged in the delivery of Early Help services, know how to use the system, are

informed of its benefits and receive feedback about success and improvements that need to be made.

Early Help Communications – 67% of the 125 respondents (Early Help Practitioner survey) feel changes in Early Help have been communicated very well or fairly well

See appendix 1 for the current full Early Help Menu, with links to access contact details and more information.

EARLY HELP FAMILY HUBS – SUPPORTING TO CHILDREN TO THRIVE

Shropshire Council and The Early Help Partnership Board is committed to exploring a new approach to working with families, children and young people. The new ways of working will emerge from a collaboration between services and communities and they will provide an engine for whole system transformation. The goal for this new way of working will be to support and sustain communities where children and young people can thrive.

These services will be universally available, but in those neighbourhoods and communities in Shropshire, where there is currently a higher number of children and families surviving not thriving, a focus on targeting resources will be needed. This may in some cases include co location of small teams who together form the basis of hub working, who are easily accessible within the community, or it may mean an integrated team that is identified as focussing on a neighbourhood and that spends time there understanding the community and becoming known to its residents.

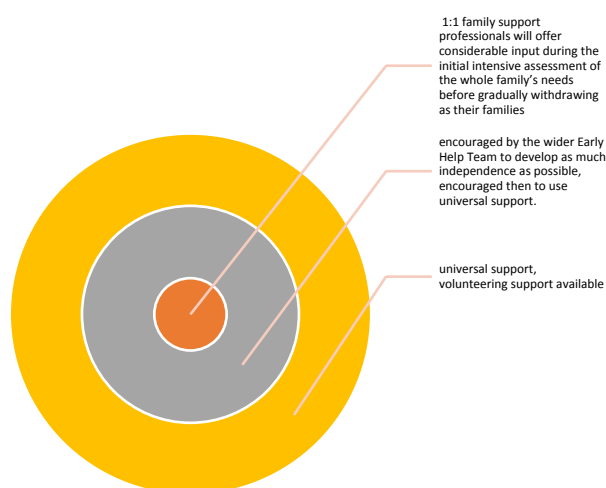
In communities that have a family hub, children, young people and families will be encouraged to use the space and access help from services when they need it, in other neighbourhoods, children and families will be able to access these family services via schools or via the main contact points of Shropshire Council using digital technology, or through other community facilities that already support and deliver Early Help – this is known as hub and spoke model.

Key design principles for new ways of working – creating solutions from a family's perspective

1. Offer simplicity and clarity of access to services and support for children, young people and families – if families need information to support their decisions and help them earlier then quality advice, information and advice will be available either through the Early Help web pages or through FPOC – there will no wrong door
2. The approach taken by all Early help staff will be to help families move from surviving to thriving – using the strengths and assets within the household
3. Professional family networks will be made up of staff that are well connected to each other and within communities, treat people with respect, are humane and form trusting relationships. The aim is to offer practical hands on support and to make their families stronger and independent.
4. 1:1 family support professionals will offer considerable input during the initial intensive assessment of the whole family's needs before gradually withdrawing

as their families, encouraged by the Early Help Team develop as much independence as possible, encouraged then to use universal support.

5. These professional teams will be trusted to be professional, working in small self-governing teams – providing a whole range of Early Help support services such as 1:1 family support, parenting groups and 1:1 parenting work, emotional health and well being support aimed at children, young people and parents, 0 – 25 public health nursing contacts alongside evidence based interventions that get to the root cause of families problems
6. Services will be responsive and quick to support, with staff that are doers and are able to adapt and change
7. Process and systems will be designed with service users and professionals and remove obstacles and bureaucracy to ensure 60% of any staff time is spent with families
8. Families want a professional who can listen to them, think together how they can pick up their lives, what help they need and what other people can do for them, this includes volunteering opportunities as some family networks are farther away – although this should be seen as an option not an obligation.
9. Where buildings are a feature, they will offer environments that feel safe and where children, young people and families feel welcome



Key partners see the value of Early Help Family Hubs and are flexible in their approach to co locating staff where possible – while understanding that a hub and spoke model will be required to ensure coverage for the whole of Shropshire. Ensuring every family that needs help knows where to get it.

Family Hubs

One hub – will target practical hands support to a 0 – 25 population and their families based in the first instance on the cohort of Strengthening Families. This will differ per hub as demographics related to poverty and deprivation differ.

One plan - 1:1 family support will be available via one assessment and family plan with a differentiated response according to level of need. Having one named Early Help Worker with responsibility for all elements of the family plan reduces confusion, overlap and the possibility of inconsistent communication.

One team – one key worker across all levels of need - 1:1 family support professionals will offer considerable input during the initial intensive assessment of the whole family's needs before gradually withdrawing as their families, encouraged by the Early Help Team develop as much independence as possible, encouraged then to use universal support. The team will have a persistent, assertive and challenging approach who do not give up. As a well known and trusted range of organisations, working as one team can sometimes engage where statutory services can't. A dedicated Early Help worker will provide support at all levels of need and across the step up/step down boundaries for as long as a family needs it to be independent.

One family – the team adopts a family approach to assessment, planning and intervention

Understanding Shropshire's communities is central to a focussed use of resources. Good data and effective information sharing is key to understanding local need. Analysing data to propose likely need and testing proposals through robust governance with family hub teams and at locality level will help us to prioritise focus for activity and set up the tracking using the family web star outcome impact tool to see how positive an impact the team has had.

In Early Help Family hubs the aim is to offer a model of distributed leadership across a highly trained staff team allowing for dissemination of best practice and knowledge sharing.

By setting the boundaries of hub areas, by using data profiles including Strengthening Families data down to street level – which use a range of criteria eg parents who are unemployed, children and young people not attending school, anti-social behaviour, domestic abuse, children in need of help, families with long term mental and physical health needs – we have triangulated with first-hand knowledge of communities, likely needs and potential support we would offer to improve outcomes, and that geographic boundaries match community's needs.

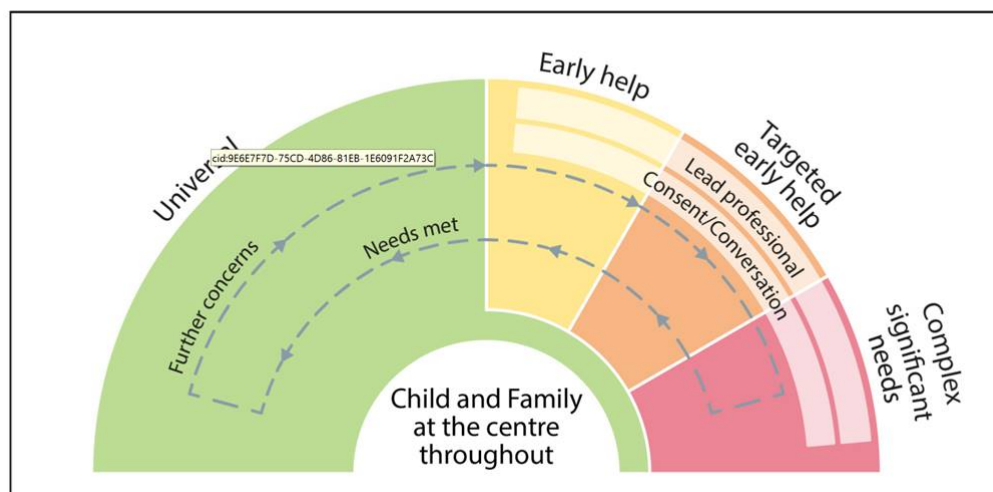
Whilst Shropshire is rich in Early Help and Prevention services – it needs co-ordinating so that families do not receive multiple appointments and do not need to complete multiple referral forms to access the support they need.

By aligning with Shropshire's community resilience strategy which engages community groups and helps to build community capacity and family resilience, the aim is to help families to help themselves. There is a diversity of universal provision already provided in communities from job clubs, debt advice, all in breaks for children with a disability, youth activities, coffee mornings and social activities, stay and play sessions, family and adult learning activities, and sports clubs – information is available through Shropshire councils community directory. In order to avoid duplication – the hub team will build strong relationships with families and the local community to understand what their strengths are. A menu of provision will be available in each hub area and all known activities to support families will be available on the Family Information Service website that families can access and easily accessible Early Help web pages.

Our delivery model includes a continuum of Early Help provided by a range of organisations including voluntary and community groups addressing different levels of need. The family hubs will bring together an integrated multi-agency, multi-disciplinary team to ensure earlier identification of emerging need and to provide a faster response.

Early Help graduated model

Continuum of need



Also known as the windscreen of need – provides the support available at all tiers of needs

The flow of work

There are currently step down/up pathways that are supported by conversations between managers within children's social care and Early Help, that include planning and decision making – which is recorded on both Carefirst and Ecins. This planning helps to ensure that family's needs and ongoing support is clear and a handover period is in place to ensure there isn't drift and delay. Professionals and practitioners in Early Help are clear about the ongoing work that needs to be undertaken to have the greatest possible impact for children and young people.

An Early Help allocation panel helps to support the work being allocated to the right worker with the right skills and knowledge. In the future these allocation panels will be required in each hub to ensure the assessment gets swiftly underway with the most vulnerable families – who receive support from a key worker who has the most appropriate level of skills and knowledge to deliver interventions, practical hands on support, and sticks to the family like glue. There are a range of case studies below that takes a families birds eye view of what they can expect to receive, when they live in different parts of Shropshire.

Family case studies

Every hub team will respond to family's needs and presenting risk factors – linked to the Strengthening Families criteria highlighted earlier in this report, until they are independent and would benefit from universal support.

Harlescott – one family, one hub, one worker, one plan

Where required the Harlescott family will be supported by intensive 1:1 family support – with an assessment of need undertaken and a family action plan created. The family may have come into the Early Help panel via a recommendation for Early Help accompanying a 'no further action' decision from assessment team in children's social care. The family have been checked against the 6 Strengthening Families criteria for an intensive family plan response. The team looking after the care of this family will look at baseline data with regards to anti social behaviour and co ordinated action against domestic abuse (CAADA). A dedicated member of this team will work intensively with this family for upto 12 months to a family plan which will seek to capture and address relevant risk factors (using Martin Calder risk assessment tool) to prevent escalation back into children's social care. If the child was subject to a child protection plan or child in need plan then the Early Help worker would liaise with the social worker who was allocated to ensure there is no resource duplication or inconsistent messages being given to the family.

Oswestry

The single parent family from Oswestry will have an open family assessment on their son which was undertaken by the school following identification of needs with regards to parenting capacity, re parenting skills and knowledge and health inequalities. The sons behaviour has been problematic and this and his health needs are impacting on his ability to thrive in school. A non intensive family support plan would be developed to address these issues. Elements of the plan will include: a named school Early Help worker who will support the family via evidence based approaches to develop their parenting confidence, safe and well check via the fire

service will ensure the home is risk free in connection to fire safety. In addition the family will be able to access evidence based parenting programmes based on the Solihull approach. Son able to access local universal youth provision to ensure he is socialising, meeting peers etc. Mum would be invited to attend smoking cessation, healthy eating – cooking on a budget delivered at the Centre down the road or appropriate family learning courses.

Broseley

A focus in the Boseley area is linked to deprivation aligned to health inequalities which demonstrate risk factors which are likely to be experienced by family's ie poor diet and social/financial exclusion. Local intelligence tells us that young teenage men hanging about outside pubs. A universal response would include information, advice and guidance on healthy eating – for parents and carers. Universal youth provision targeted at this area will engage the young men, (put their time to good use), themed support delivered by the school nursing service will be available in nearest secondary school. A universal response from organisations who deliver advice and support around worklessness eg job centre plus – will link parents to employment, training and skills provision across Shropshire.

Hub Team Development

This will ensure the family hub team have an overarching quality assurance framework ensuring quality of practice in supporting families and the right tools to the job.

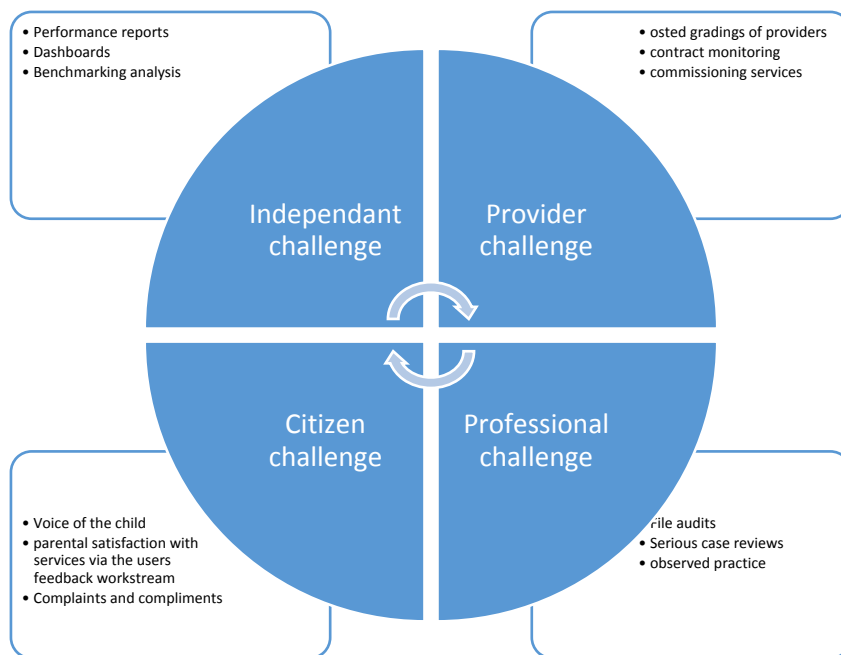
Martin Calder – risk assessment

Training will be available to children's social care and Early Help staff to ensure they understand how to use the tool to manage degrees of risk.

Graded Care Profile 2 – validated assessment tool in aiding practitioners in the assessment of child neglect. It is a way of helping practitioners to understand how well a child is being cared for, across all areas of need where there are concerns of neglect.

Quality assurance framework – continuous improvement framework articulates how the Early Help Partnership alongside Children's Services manages and measures quality. Improving the consistency in the quality of work improves outcomes for Shropshire's children. This supports the development of a culture that expects and values high standards that improve the quality of services for users and carers. These aspirations and standards drive up expectations, improve learning and strengthen outcomes and impact. It is informed by learning from audits, single agency learning reviews and serious case reviews overseen by children's services and Shropshire's Children's Safeguarding Board. It has close links to the workforce development strategy 2016 and supports a workforce that ensures that children and

young people in Shropshire are kept safe through high quality services provided by qualified, resourced and a skilled children's workforce.



Family Web star – outcome impact tool – already used for supporting and measuring change. Family web star both measure and supports progress for service users towards self-reliance, independence other goals and sustained progress. The family web star is designed to be completed collaboratively as an integral part of key work in plotting where the family is on their journey, with positive practice in relation to tracking individual development and progress against multiple vulnerabilities.

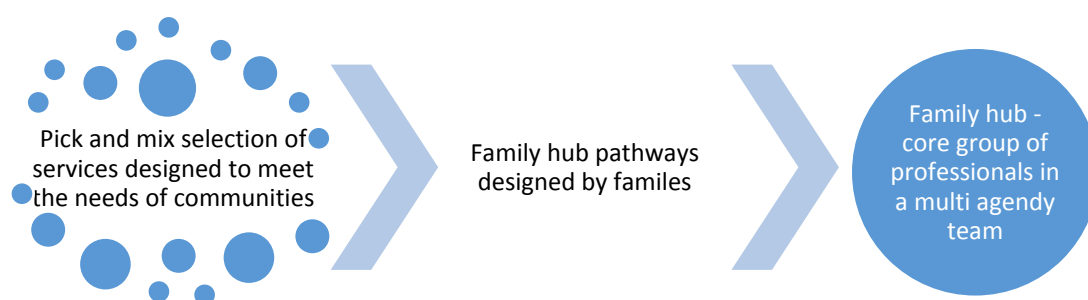
Early Help Family Hubs – refocussing capacity

Because of the transformational nature of this work and to ensure that staff on the ground are engaged in operationalising the strategy into reality – aligned with making the savings a reality it is envisaged that the implementation spans two financial years, ie August 2017 – to the end of March 2019. The reality is that some areas of Shropshire are needier than others and tend to be concentrated in market towns. Given the rural nature of Shropshire – there is still a requirement to reach out to other parts of Shropshire where issues are being highlighted through schools.

Given a savings target of £875,000, there will be a need to rationalise the number of buildings used to deliver family hubs. Given the scale of the savings this has impacted on front line staff – in particular Children's Centres and Targeted Youth Support staff.

To mitigate against the risk of escalating costs in children's social care – it will be essential that the Early Partnership supports delivery – and all Early Help providers play their part in delivering quality Early Help services with a relentless focus on the most vulnerable families. This diagram highlights the move to fully integrated teams working together from different disciplines – using the skill and expertise of the whole team to support children and young people 0 – 19 and upto 25 for families with a child with disability. Whilst there is a nucleus of core service professionals, families will be supported by the wider early help and prevention system which includes

GP's, schools, voluntary and community sector, commissioned youth activities, day care sector and specialist services.



Financial and premises modelling

This section of the report describes how the savings will be implemented and when.

	C.C	Description	Budget (as per Samis)	Below the Line Costs	Savings	Net Budget excl BTL
	30D03	Children's Ctr Phase 2 Gen	314,890	43,690	- 875,000	1,146,200
	30D05	Craven Arms Area CCtre	93,050	34,760		58,290
	30D14	Nth Shrewsbury Area CCtre	168,640	59,940		108,700
	30D15	Oswestry Area CCtre	144,960	66,040		78,920
	30D17	Bridgnorth Area CCtre	51,470	14,860		36,610
	30D18	Whitchurch Area CCtre	92,580	34,670		57,910
	30D20	Central Shrop East CCtre	54,280	23,360		30,920
	36901	Targeted Youth Support	540,040	13,200		526,840
		Current Budget	1,459,910	290,520	- 875,000	2,044,390

The premises highlighted defines the current thinking of family hub sites of which there are 8 suggestions – further work is underway to consider impact on Education strategies which include schools admissions need to provide extra education space, and the 2/3/4 year offer to provide quality day care. When the hubs are delivered there will be 6 in total. A hub in the Bridgnorth area of Shropshire is a requirement given the evidence of the level of need, and the opportunity to co locate an Early

Help hub partnership team. As yet no site is fit for purpose, and a further conversation with asset management will be required to find a solution to this issue. Where buildings are not required and are currently designated as a children's centre they will be designated.

Premises we own?					Premises we lease/pay maintenance fees		
Bishop's Castle Primary	Stokesay Primary, CA	St Lawrence Primary, CS			Rocksprings, Ludlow	Pontesbury Medical Centre	
Sunflower House	Honeysuckle Lodge	Buttercup Lodge	Richmond House				
Woodside Primary	Holy Trinity, Oswestry	Holy Trinity Demountable	Baschurch Village Hall	Morda Primary, Oswestry	The Centre, Oswestry	St Martins School	
St Mary's Bluecoat	Albrighton Primary	St Andrew's Primary, Shifnal			Severn Centre, Highley		
St. Peter's Primary, Wem	Longlands Primary, Drayton	Ellesmere Primary	Whitchurch Infant	Market Drayton Infant			
Meole Brace Primary	Crowmoor Primary						

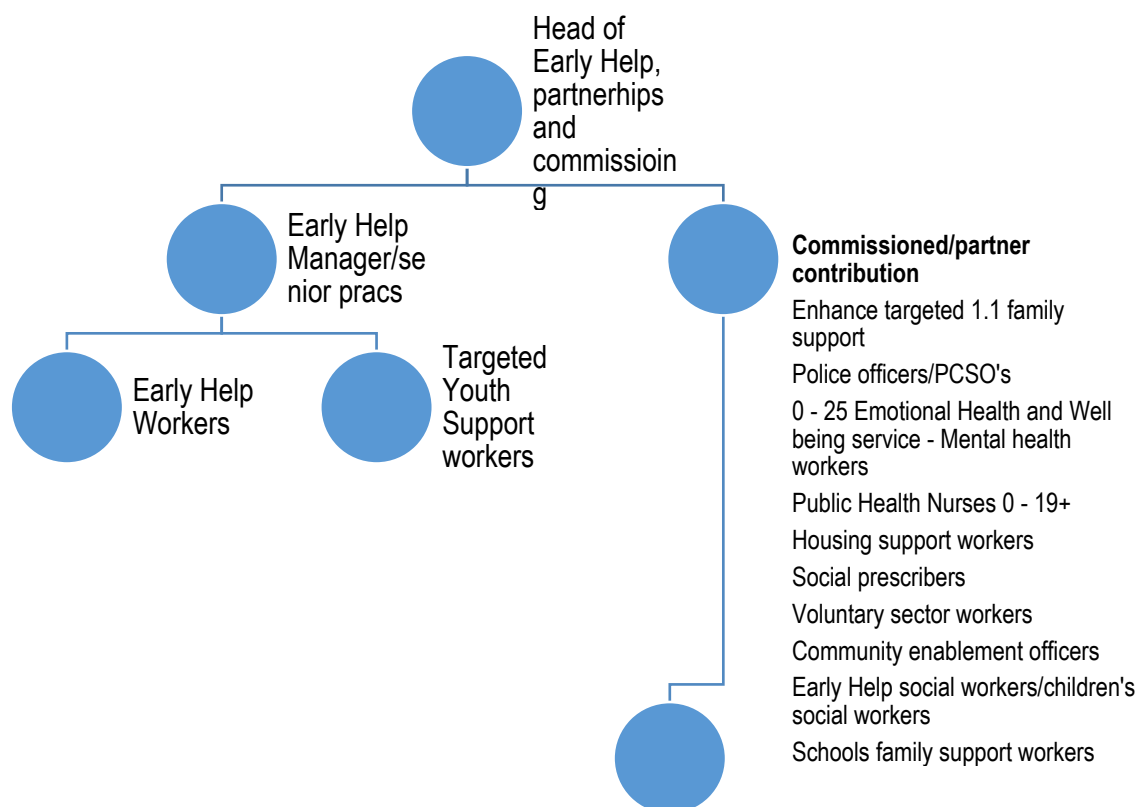
Savings proposal

The option below provides the detail related to the savings programme – at the level required there is an impact on front line staff – the risk will be mitigated against by ensuring that vacancies and reductions by natural wastage will be brought forward first before front line posts are reduced and lost. The detail below provides the current whole time equivalent staff and the reductions proposed (in blue). The proposal below also highlights a level of income generation by working closely with schools who have indicated that they would be interested in jointly commission family support workers the costs of which will be matched by the Troubled Families grant until March 2020.

							Option 1
Savings Options		Current FTE	Proposed FTE				
		52.7	33.1				
Expenditure Reduction							
Contracts							
SYA Contract Saving (already achieved)				-		32,500	
				-		32,500	
CC Staffing		40.7	24.0				
Not backfilling any vacancies		5.9	-	-		142,630	
EH Managers		2.0	2.0				
Area Leaders		3.2	2.0	-		48,580	
Family Support Workers		25.6	20.0	-		145,040	
Business Support		2.7	-	-		56,920	
Cleaning Assistant		0.4	-	-		6,970	
Creche Co-ordinator		1.0	-	-		24,760	
Creche Staff (All on casual hours)		Casual	-	-		64,580	
Creche Staff (Current Pressure)							
Travel Reduction, as the result of above changes (estimate)				-		5,000	
				-		494,480	
TYS Staffing		12.0	9.1				
Senior Practitioner		1.0	1.0			-	
Youth Workers		7.5	5.0	-		100,940	
Support Workers		2.5	2.5			-	
Clerical Assistants - (0.4FTE managed vacancy)		1.0	0.6	-		7,550	
				-		108,490	
Family Information Service		2.6	1.0				
Co-ordinator		1.0	1.0				
Information Assistants (0.6FTE not occupied)		1.6	-	-		41,870	
				-		41,870	
Premises (estimate)							
Reduction of buildings occupied		25 Buildings	6 Buildings	-		281,350	
				-		281,350	
Income Generation							
Schools Pilot (Current Pressure)						30,000	
Schools Pilot (Targeting 1/4 of PS's - £4k each plus match funding from SF)							
Parenting Team (Self-Funding)							
Leasing Properties to generate income (to be reviewed)							
						30,000	
		Saving Achieved		-		886,820	
		Saving Target		-		875,000	
		Surplus / (Pressure)				11,820	

Early Help family hub proposed structure

The diagram below ensures the skill mix for multi agency, multi disciplinary teams, co located in a family hub.



Engagement

If approval is given to proceed evidence from work already undertaken in 4 pilot sites will help to provide structure and lessons learned. Front line staff and managers have great ideas about how family hubs can be implemented with a focus on improving outcomes for families in communities where children and young people can thrive.

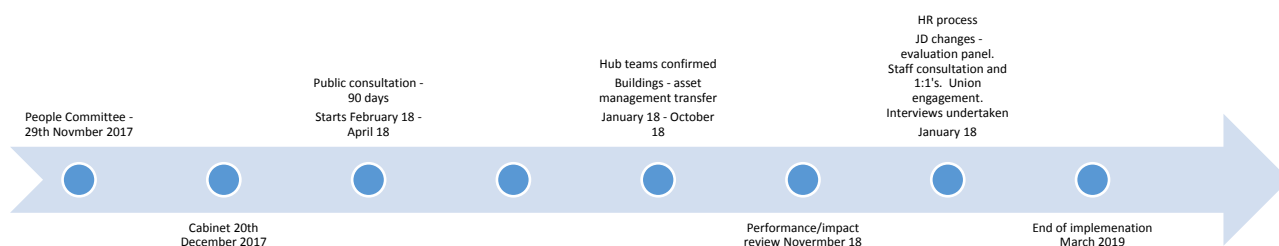
A parent/carer/agency consultation will take place with parents/carers, children and young people to understand both positive and negative impact on the closure of children's centres and to have due regard to limiting discrimination – see Equality Impact Assessment below for detail.

Mobilisation and Implementation

A phased approach to implementation will be planned to ensure family hubs are up and running, full effect of savings programme completed by March 2019.

Workstreams to ensure implementation will be developed through the Early Help Partnership Board – Chaired by the Head of Early Help, Partnerships and Commissioning with the support of a project manager. An implementation plan outlining key tasks, lead roles and timescales will be in place to ensure delivery milestones are met and risks to final completion mitigated against.

Timeline



Risks

- Project management methodologies drive programme delivery – but doesn't change hearts and minds and staff feel excluded from design
- The Early Partnership of stakeholders, and organisations don't provide the support to ensure whole family working is undertaken, meaning that less families have access to quality support that gets to root cause of families problems
- Public concern and a negative response to the changes leads to decisions not being approved and timescales for implementation slips
- Other savings programmes being delivered within Shropshire Council directorates ie public health – increases the savings target in Early Help and more front line staff are lost

3. Risk Assessment and Opportunities Appraisal

Equality Impact Assessment – development of Family Hubs – closure of children's centres

Shropshire Council is committed to promoting equality and participation in all its activities, whether this is related to the work we do with our external stakeholders or whether this is related to our responsibilities as an employer. As a public authority we are also required to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations when making decisions and developing policies. To do this, it is necessary to understand the potential impacts of the range of internal and external activities on different groups of people.

Evaluation Decision

There are four options open to you if you find a significant difference:

1. No barriers or impact identified, therefore activity will **proceed**.
2. You can decide to **stop** the policy or practice at some point because the evidence shows bias towards one or more groups
3. You can **adapt or change** the policy in a way which you think will eliminate the bias, or
4. In **extreme cases** or where **positive action** is taken you can **justify it**. For example, if the policy would require the use of animals in the research in a particular country. You've looked at the policy or practice from every angle, considered all available options carefully, and there still seems no other proportionate way to achieve the aim of the policy or practice. Then you are going to continue with this policy or practice knowing that it may favour some people less than others.

In most cases, where disproportionate disadvantage is found by carrying out EIAs, policies and practices are usually changed or adapted. In these cases, or when a change has been justified you should consider making a record on the project or the corporate risk register.

Depending on the nature of the policy change, event or funding activity, the responsibility of who should complete the assessment, who should be consulted, and who should sign off the EIA will vary. Ultimate responsibility on whether an EIA is required and the Evaluation Decision(s) made after completing the EIA lies with the SRO, budget holder, project board or the most relevant senior manager. Further advice is available from your Equality, Diversity & Inclusion lead contact, HR, Peer Review Team, or the Events team.

Equality Impact Assessment

Question	Comments
1. Policy/funding activity/event being assessed	The development of Early help family hubs – and the closure of some children’s centres. Consultation with the general public and those who are affected the most.
2. Summary of aims and objectives of the policy/activity	<p>Shropshire Councils financial constraints means that it is necessary to deliver a more focussed and targeted Early Help service to support Shropshire’s most vulnerable families, and stop them from being inappropriately referred to children’s statutory safeguarding services, if they don’t need to be. A savings programme £875,000 is necessary – in order to find this level of savings – rationalising buildings first before front line staff reductions is possible. The creation of family hubs in the most deprived areas of Shropshire will help teams to focus their skills and knowledge in supporting families to be more resilient. Services will be provided by skilled teams that ensure the wider Early Help Partnership is able to contribute resources and staff to provide skills mixed teams.</p> <p>Proposals will be required to make the case for the specific intractable development challenge(s) they will address and explain why the proposed Family Hubs is the most appropriate approach. Each Hub will be required to demonstrate a well-integrated, interdisciplinary approach, research excellence and a realistic pathway to impact.</p> <p>Priority will be given to proposals that address really challenging problems with genuinely radical and potentially transformative approaches.</p> <p>Assessment of family hubs will be developed by use of detailed data and evidence specifying areas of greatest need, whilst ensuring robust universal provision is also available.</p>
3. Is it possible the proposed change in policy or activity could discriminate or unfairly disadvantage people?	A consultation period is established to ensure key line of enquiry can be facilitated with the public, stakeholders, staff and organisations across Shropshire. We aim to reach people most in need of help – there are currently families getting support from a number of organisations to help with problems they are

<p><i>(Advice should be sought from HR. If not relevant, record reasons and evidence; the remainder of the form need not be completed)</i></p>	<p>facing as a family, but this support isn't always joined up. The causes confusion and frustration for the family and it doesn't always make things better quickly or in a way that lasts. The Early Help Family Hubs will support families earlier, so their circumstances improve quicker and problems don't become too difficult to manage. To do this we aim to bring together all the people/practitioners who work with children and young people and their families in those early days when problems are getting tough, by creating 6 Early Help Family Hubs. The new service would be modelled around family workers who will be based in the community so they are closer to where the families who need our support live. This means that they can reach out to work with families at home or in places they are most comfortable</p>
<p>4. What involvement and consultation has been done in relation to this policy? <i>(e.g. with relevant groups and stakeholders)</i></p>	<p>The development of this proposal has engaged with stakeholders from the wider Early Help Partnership through an Early Help Conference held in July 2017. Key lines of enquiry/questions raised asked stakeholders to prioritise the needs of families and the support they need in the future to improve outcomes for children and young people. Using data from the Strengthening Families cohort down to street level, JSNA and A&E data to ensure stakeholders could prioritise areas where the most vulnerable families live. In the main stakeholders agreed that multi agency, multi disciplinary teams, co located where possible would be a solution to focussing resources on the most vulnerable.</p>
<p>5. Who is affected by the policy/funding activity/event ?</p>	<p>Children and Families Staff</p>
<p>6. Arrangements for monitoring and reviewing actual impact of the policy/funding activity/event</p>	<p>Monitoring and review will primarily through Council's scrutiny function, approval and decisions will be via Council and Cabinet which ever is most appropriate.</p> <p>In addition, the Early Help Partnership board will play a vital role in ensuring stakeholder engagement and delivery.</p> <p>To help minimise the potential impacts of this we have ensured that the call for outline proposal will be open for as long as possible and a minimum of 90 days, to ensure both</p>

	market town and rural engagement can take place.
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Group	Is there a potential for positive or negative impact?	Please explain and give examples of any evidence/data used	Action to address negative impact (e.g. adjustment to the policy)
Disability	Potential negative impact – however based on current policies this is very low risk.	Data is collected regarding disability at proposal stage Adjustments will be made throughout the consultation process where appropriate.	A flexible approach will be necessary to ensure disabled stakeholders, parents or children can engage in consultation, via a range of means email, questionnaire, and venues with disabled access, without discrimination.
Gender reassignment	Potential negative impact – however based on current policies this is very low risk.	Data is collected regarding gender at the proposal stage.	A flexible approach will be necessary to ensure stakeholders, parents or children can engage in consultation, via a range of means email, questionnaire, and venues to help ensure unbiased consultation Flexible terms and conditions are in place to appropriately support applicants who require time to attend psychiatrist/psychologist appointments or who are undergoing gender reassignment involving medical interventions. Adjustments are made throughout the consultation process where appropriate.
Marriage or civil partnership	Impact expected to be neutral.		
Pregnancy	Potential		A flexible approach will

and maternity	negative impact – however based on current policies this is very low risk.		be necessary to ensure stakeholders, parents who are pregnant or who have young children are able to access the consultation and engagement process. Adjustments can be made throughout the consultation process where appropriate to assist individual mothers.
Race	Potential negative impact – however based on current policies this is very low risk.	Data is collected regarding race at the proposal stage, and forms part of the Shropshire's context for describing the demographics of the county	Throughout the consultation, those delivering the consultation activity are required to follow best practice in taking positive steps to ensure those members of the public who are from a racial minority are fully engaged and their views collected.
Religion or belief	Impact expected to be neutral.	This information is collected as above	As above
Sexual orientation	Potential negative impact – however based on current policies this is very low risk.	This information is available at proposal stage.	Throughout the consultation, those delivering the consultation activity are required to follow best practice in taking positive steps to ensure those members of the public who are from the LGBT community are fully engaged and their views collected.
Sex (gender)	Potential negative impact – however based	Data is collected regarding gender identify	Throughout the consultation, those delivering the consultation activity are

	on current policies this is very low risk.	at the proposal stage	required to follow best practice in taking positive steps to ensure those members of the public who are men and women, are fully engaged and their views collected.
Age	Potential negative impact – however based on current policies this is very low risk.	Data is collected regarding age at the proposal stage.	Throughout the consultation, those delivering the consultation activity are required to follow best practice in taking positive steps to ensure that children and young people are fully engaged and their views collected.

Evaluation Decision: Proceed

1. No barriers identified, therefore activity will **proceed**.
2. You can decide to **stop** the policy or practice at some point because the data shows bias towards one or more groups
3. You can **adapt or change** the policy in a way which you think will eliminate the bias
4. In extreme cases or where positive action is taken you can **justify it**.

Will this EIA be published: Yes

Date completed: 15/11/2017

Review date (if applicable): N/A

5. Financial Implications

The Early Help Family Hub model will ensure £875,000 is saved by co locating multi agency, multi disciplinary teams in areas of greatest need. Whilst ensuring those families that don't live in these areas have access to Early Help services when they need the, with robust universal services that will up and sort out issues emerging really early on. Given the transformational strategy to deliver family hubs to focus on Shropshire's most vulnerable families – the timescale for delivery is by March 2019.

5. Background

Early Help Family Hubs – refocussing capacity

Because of the transformational nature of this work and to ensure that staff on the ground are engaged in operationalising the strategy into reality – aligned with making the savings a reality it is envisaged that the implementation spans two financial years, ie August 2017 – to the end of March 2019. The reality is that some areas of Shropshire are needier than others and tend to be concentrated in market towns. Given the rural nature of Shropshire – there is still a requirement to reach out to other parts of Shropshire where issues are being highlighted through schools.

Given a savings target of £875,000, there will be a need to rationalise the number of buildings used to deliver family hubs. Given the scale of the savings this has impacted on front line staff – in particular Children’s Centres and Targeted Youth Support staff.

To mitigate against the risk of the loss of Shropshire Council’s paid employees – it will be essential that the Early Partnership supports delivery – and all Early Help providers play their part in delivering quality Early Help services with a relentless focus on the most vulnerable families. This diagram highlights the move to fully integrated teams working together from different disciplines – using the skill and expertise of the whole team to support children and young people 0 – 19 and upto 25 for families with a child with disability. Whilst there is a nucleus of core service professionals, families will be supported by the wider early help and prevention system which includes GP’s, schools, voluntary and community sector, commissioned youth activities, day care sector and specialist services.

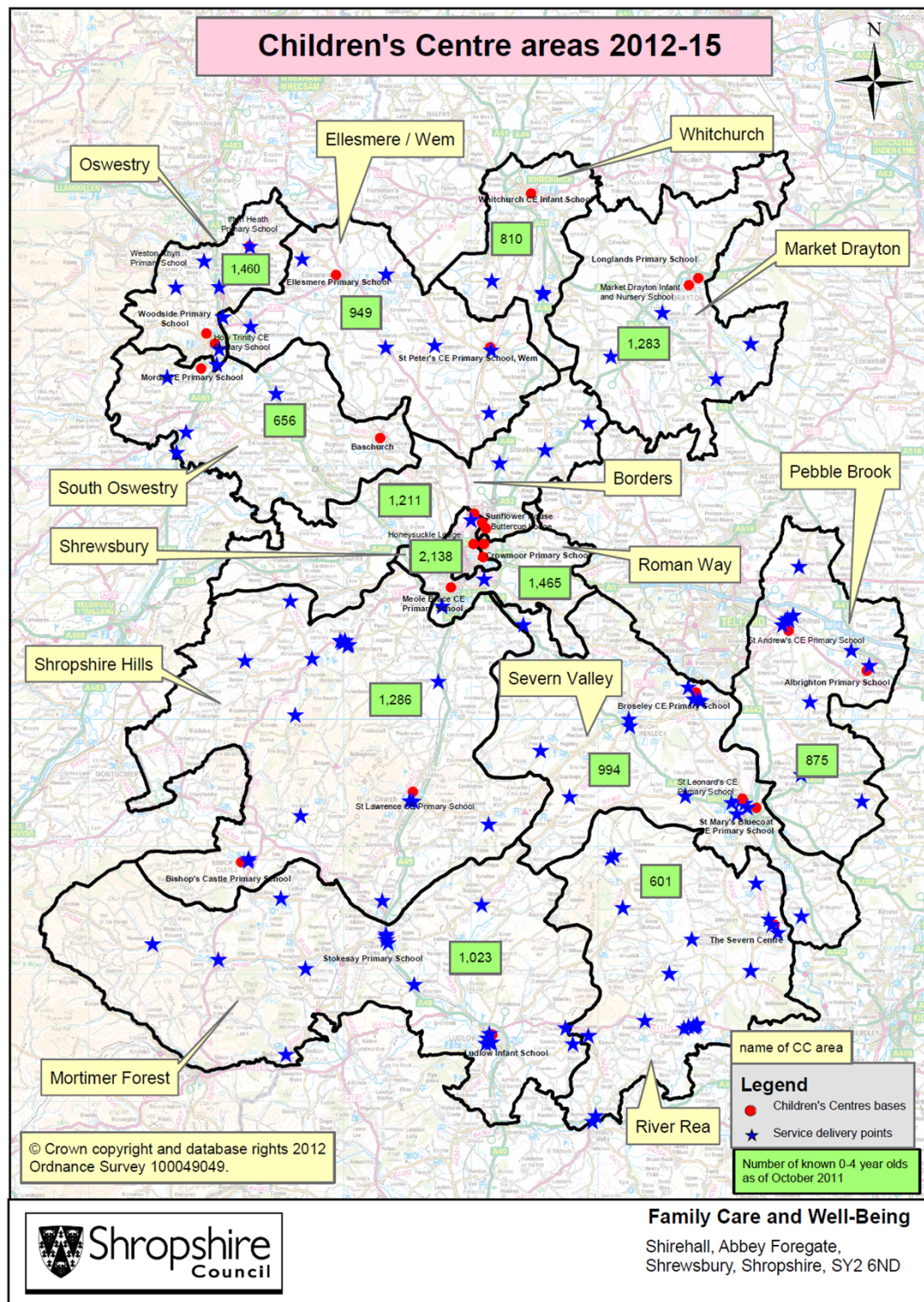
6. Additional Information

List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)
Cabinet Member (Portfolio Holder) Cllr Nick Bardsley
Local Members: Scrutiny – People Committee – children and young people
Appendices

Appendix 1 – Children’s Centres map

Appendix 2 – Early Help offer/menu

Appendix 1 – Children's Centre map



Appendix 2 - Shropshire's Early Help Offer

Links to sites providing information, advice and guidance on a wide range of issues as well as activities and organisations available to young people and their families on a universal, Early Help and targeted levels of need.

- [Early Help Website](#)
- [Family Information Service \(FIS\) information and resource packs](#)
- [Family Information Service Directory](#)
- [SEND Local Offer](#) - For families with young people with Special Educational Needs and disabilities.
- [Shropshire Youth Association](#) - Positive Activities, youth club based activities, voluntary youth sector. (This link can break [general information can be found here](#))
- [Energize - Sports Partnership](#) (NB this link can break [general info can be found here too](#))
- The local authority has sports development officers who can help young people and families' access sport clubs and activities. Contact Sean McCarthy 01743 255933

Early Help happens across a huge spectrum of services – here are some of the most widely used which can complement Early Help and Social Work plans and could be utilised as part of step down processes.

- Schools Pastoral Support – does vary hugely but please do consider the support the school can provide
- [Targeted Mental Health Support \(TaMHS\)](#) Schools have staff trained to deliver these interventions. Renee Lee (01743 253942) can tell you which school is trained to deliver each programme.
- [Increasing Access to Psychological Therapies \(IAPT\)](#) CBT approach to mental health support from young people aged 16+ (once their exams are finished)
- [Young carers project](#) Delivered by Carers Trust 4All [Referral Form](#)
- [School Nurses](#)
- [Health Visitors](#)
- [Family Nurse Partnership](#) Intensive support for pregnant teenagers.
- [All In short breaks for children with SEND](#)
- [Understanding your child online and groups](#)

- [Universal children's centre services](#) A range of group sessions across the county.
- [West Mercia Women's Aid](#) Support for women in abusive relationships – including Freedom Programme which is also delivered currently by Children's Centres. Current CC booking line 01743 253942

Targeted Early Help

These services are either in house or are commissioned by the Local authority and should be considered once the above options have been taken into account.

TYS, Lifelines, Children's Centres (targeted support), Parenting and EnHance require referrals through the [Step down process](#) on the procedures online pages.

- [Targeted Youth Support \(TYS\)](#)
- [Lifelines](#)
- [Targeted Children's Centres support](#)
- [Parenting Team](#)
- [EnHance](#)
- [Autism West Midlands](#)
- [Child and Adolescent Mental Health Service \(CAMHS\)](#)
- [Shropshire Strengthening Families](#)

TYS and CSE – please note Targeted Youth Support will support young people on CIN and CP plans where there is an assessed CSE risk. Please complete a Request for Intervention Form, found on the Early Help website [forms page](#) and drop it in to COMPASS along with a copy of the Social Work plan.

Stepping Down to Targeted Early Help - Please follow the processes [here](#) on the Shropshire Council Procedures on line pages.

Additional services of interest focusing on young people who have been involved in low-level crime or anti- social behaviour. See referral forms attached to the email.

[ARC - Accessing Resources in the Community](#) Mentoring programme funded by the Police and Crime Commissioner for 17-25 year olds. Delivered by YSS.

More Than Sport - a diversionary project hosted by Energize using the power of sport and volunteering activities linked to sport, for example, catering, grounds maintenance. Young people 16-24 years. No link available, contact Nick Herbert 01743 297194

