

Early Help Annual Report 2024 - 2025

Link to key priorities of the corporate plan, Shropshire's Economic Growth Strategy 2022-2027 and the Shropshire Plan

Shropshire living the best life.

Our purpose:

To work with our partners and communities to deliver the vision and priorities for Shropshire

Service Realignment

After an independent review in February 2023, Early Help Services were aligned with Children's Social Care in the People's Directorate as of April 3, 2023. Leadership was strengthened by seconding the Principal Social Worker and Service Manager for Quality Assurance into the Service Manager for Early Help role to lead a transformation programme.

Systemic Issues

The review found the Early Help service structure to be 'top heavy' with managers and lacking sufficient case-holding staff. This led to significant waiting lists and delays. Additionally, there had been no partnership-owned Early Help Strategy since 2018.

Funding Challenges

Much of the Early Help service is grant funded, mainly through the Supporting Families Programme. In 2022-2023, Shropshire achieved only 73% of its potential grant, despite support from external consultants.

Recommendations

Increase Targeted Family Support:

To achieve future grant targets, Shropshire should increase the number of families receiving targeted support (family support).

Rebalance Staffing

Address the 'top heavy' structure by increasing case-holding staff and reducing management layers to improve service delivery and reduce delays.

The Early Help Transformation Programme

Took place from May 2023 to June 2024, was led by experienced staff from the Office of the Chief Executive and Early Help Service. The initiative tackled multiple workstreams, such as strengthening partnerships, refining strategies for youth, SEND, and families, improving the service 'Front Door', supporting families, and developing Family Hubs and the workforce. Over seventy teams and organisations—including voluntary partners—shaped the Early Help Strategy, known as "How Can I Help?". Broad consultations were held, notably with over 2,000 young people

contributing via a Youth Survey and the design of a new Early Help website. The Department for Education partnered Shropshire with Staffordshire, offering mentorship and emphasising the value of strong data practices. Ultimately, the programme resulted in a more efficient structure with increased frontline staff, clearer management, specialist roles, and sufficient budgeting for all necessary posts.

Structure and changes to enhance practice

A revised front door for children's services, including the Early Help and Support Team (EHAST), was introduced on 06/09/2023. This ensured that all families and professionals contacting children's services received appropriate support, with specialist roles such as Domestic Abuse Engagement Leads and a Lads and Dad's Worker. As a result, contacts to Early Help rose by 297%, significantly reducing the need for social work intervention. Fewer than 20% of families engaged by EHAST required further support from Targeted Early Help.

The new Early Help Strategy, titled 'How Can I Help?', was formally launched on 16/07/2024, with well-attended sessions for partners and schools.

The introduction of a new practice framework and standards led to the average Targeted Early Help intervention dropping from 444 days in 2022-2023 to 147 days in Q4 2023-2024. There was an 83% increase in families supported compared to the previous year. The re-referral rate to Targeted Early Help was under 10%, and escalation to children's social care reduced from 11% to 1% in 2023-2024.

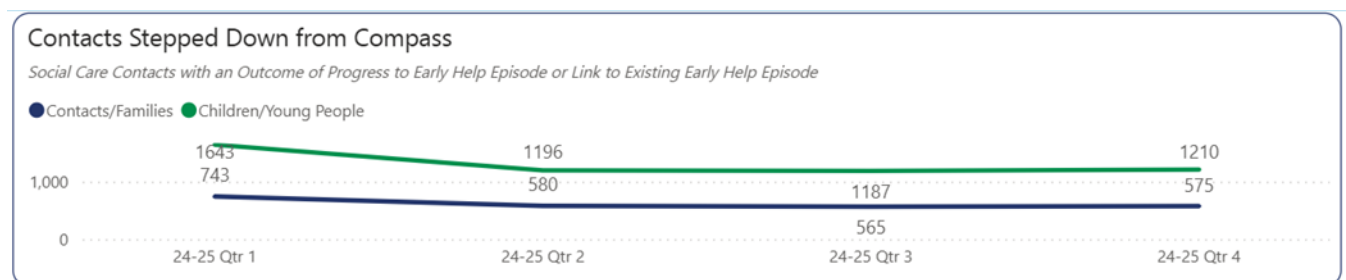
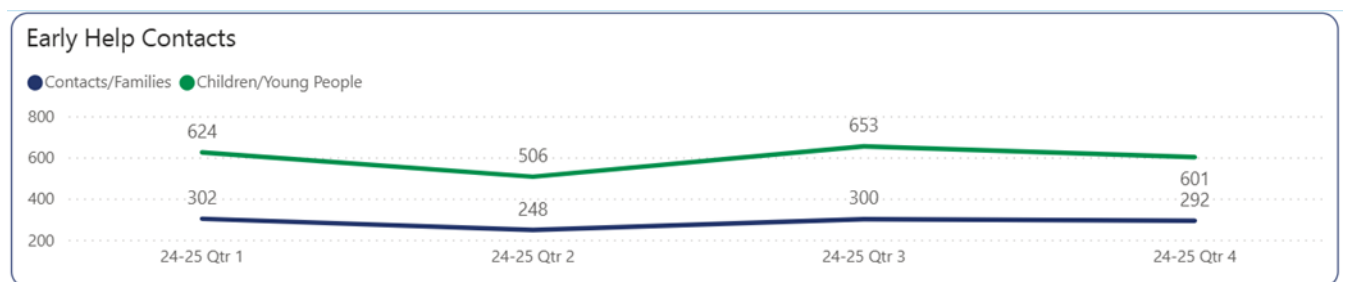
Despite shorter intervention times, parent satisfaction improved significantly, with 73% rating the service 9 or 10 out of 10 in Q4 2023-2024, up from 57% the previous year.

DATA what does it tell us

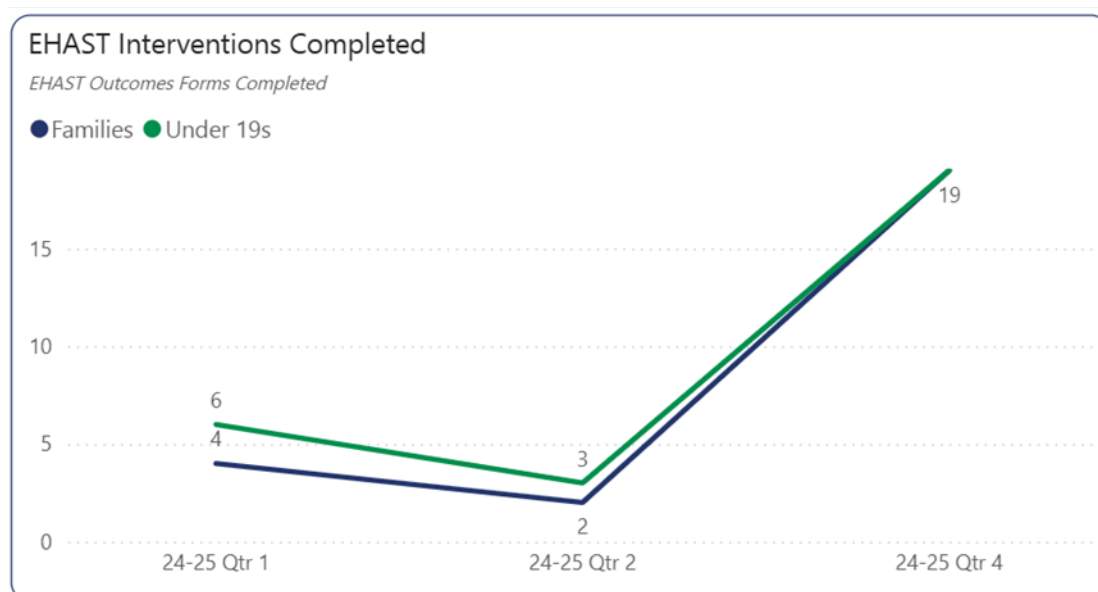
- Potential grant funding for the year 2024-2025, we exceeded the target of 456 and managed to achieve a total of 536 so an achievement of 118% of the funded target.



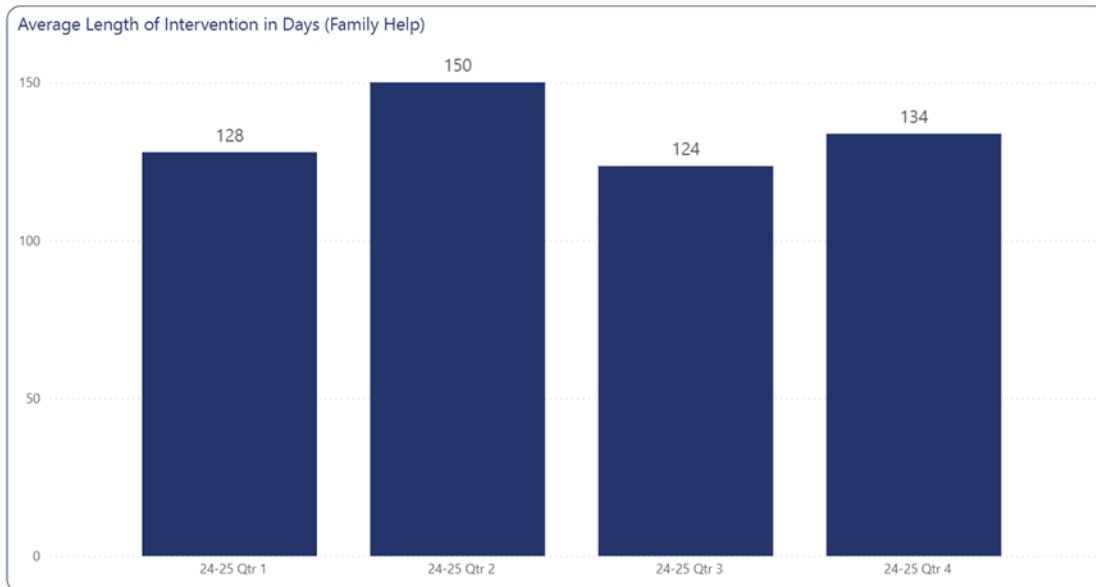
Early Help contacts totalled 1142 compared to 2463 from compass. We do not have the figures from 2023-24 to compare to due to the way recording changed following the EH transformation & recording.



EHASt have worked with 667 families of which 25 stepped up to TEH with is only 3.75% of the cohort with an average intervention of 9 days.

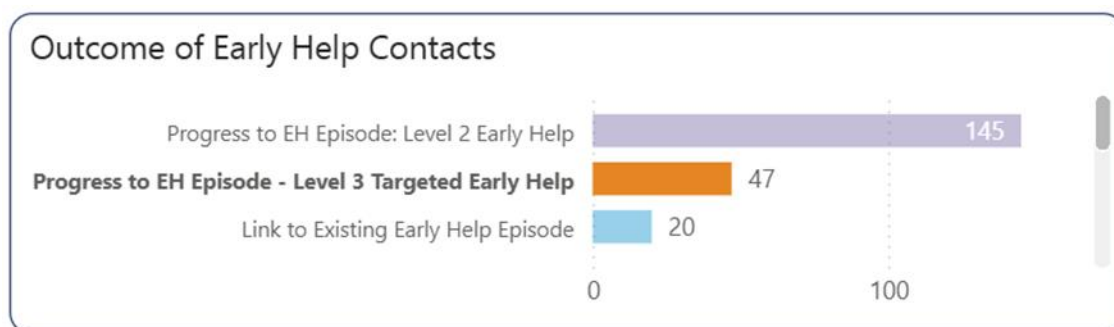


The average length of TEH interventions has reduced slightly, averaging out at 134 days per intervention over the year 2024-25.

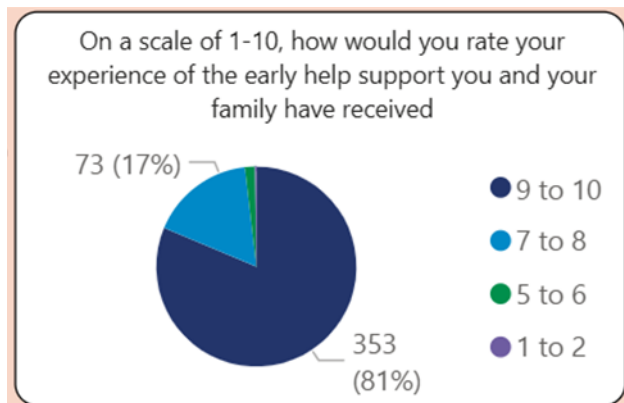


There has been a 31% increase in families worked with in TEH compared to the previous years' increase of 83% (however, this increase is expected to be due to process changes following transformation and the figure should level out over the coming years).

Re-referrals / repeat contacts into TEH are 47 of 239 repeat contacts so re-referral rate is 19.6%. This has increased however, repeat contacts into Social care is still at 1% with only 3 of 239 repeat contacts requiring escalation to Level 4.



81% of parents rate the services at 9 or 10 on a 10 scale which is a big increase from the previous year's 73% in 2023/24 and 57% from 2022/23.



Early Help and Support Team: EHAST

The Early Help and Support Team (EHAST), operating the Early Help Front Door, play a pivotal role in aligning local services. This approach is designed to place families at the centre of support, ensuring that their needs are identified early and addressed proactively. EHAST's commitment to prevention and early intervention is reflected in its robust strategy for signposting both families and professionals to the most suitable pathways of support.

By working in partnership with statutory and voluntary sector organisations, EHAST ensures that families experience a seamless journey through the support system, reducing duplication and improving outcomes.

EHAST Front Door serves as a single point of access for families and professionals seeking help, advice, or intervention. This service is designed to be accessible, responsive, and supportive, offering a gateway to a spectrum of services tailored to the individual needs of families. The front door not only provides information and guidance but also acts as a triage system, directing families to appropriate pathways such as early help, social care, or specialist services, depending on their needs.

Preventive opportunities are at the heart of EHAST. By identifying issues at the earliest possible stage, EHAST can intervene before problems escalate, helping families to build resilience and maintain stability. This approach reduces the need for more intensive statutory intervention and supports the government's vision of empowering families to thrive within their communities.

Role of the team members within EHAST offer short-term, targeted interventions to families identified through triaging. Their work is grounded in the principles of focusing on building trusting relationships, empowering families, and facilitating access to wider support networks. Interventions may include practical advice, emotional support, parenting guidance, and help with accessing community resources.

These interventions are outcome-focused, with clear goals established in collaboration with families ensuring families are equipped with the tools and knowledge needed to sustain improvements. Where appropriate, families may be signposted to additional services or support.

Pilot Child In Need Support Team Overview

The Child in Need (CIN) Pilot Programme, initiated on 1st October 2024, aligns with the updated 'Every Child Matters' guidance, permitting Early Help services to manage CIN cases. This initiative is designed to enhance service efficiency and effectiveness, ensuring that children and families receive timely and appropriate support. The families transferred to the Pilot already have already had an assessment completed by a social worker who has identified the need for a Child In Need plan (CIN). Cost and Time Efficiency

By enabling Early Help services to manage CIN cases, the programme aims to reduce the demand on statutory social work services, thereby achieving cost savings and improving service delivery times. The CIN Pilot represents a strategic effort to optimise resource utilisation, enhance service delivery, and improve outcomes for children and families. Through careful planning, adherence to statutory guidelines, and ongoing evaluation, the programme aims to provide high-quality support within a framework that meets regulatory expectations and serves the best interests of children in need. This pilot also supports the implementation of the national reform Family First Partnership.

Youth Support Team

Key Areas of Work

Youth Voice & Participation: Enabled young people's input on local projects (e.g. Market Drayton skatepark, media initiatives), conducted a Safe Spaces Report with 500+ participants, and promoted discussions on identity, digital pressures, and trust. Notable rise in youth co-facilitation.

Community-Based Youth Work: Delivered detached youth work in high-need areas (Ellesmere, Oswestry, Market Drayton), engaged vulnerable groups (Bulgarian, Afghan youth), and reached 1,471 young people in 164 sessions during Q4.

Strategic Development: Drafted Youth Strategy, planned Youth Partnership Trust, and transitioned to a locality-based model for tailored delivery and early intervention.

Monitoring & Performance: Launched recording system aligned with Youth Work Outcomes; data now better informs deployment and supervision, though improvements needed in written observations and impact evidence.

Successes

Innovative Projects: Youth-led Market Drayton Skatepark improvements, collaborative Toilet Project addressing exclusion and health, McDonald's partnership for NEET engagement, and a youth-led safety media project.

Professional Development: Assistant Youth Workers achieved Level 3 Youth Work Practice qualification.

Peer Learning & Engagement: Oxfordshire Peer Review participation, stronger relationships with schools and councils, creative use of community spaces, and the EmpowerHER group's positive outcomes.

Challenges

Staffing & Capacity: Ongoing vacancies and reduced FTE, especially in Shrewsbury and South; managers stretched with face-to-face delivery.

Safeguarding & Complexity: 129 Q4 sessions involved safeguarding or wellbeing issues; recurring themes include emotional dysregulation, trauma, and inconsistent engagement.

Data & Systems: No suitable case management system and inconsistent staff recording practices.

Coverage & Reach: Teams overstretched across localities; community profiling for 18 areas adding to workload.

Next Steps

Complete community profiling for Youth Partnership planning.

Finalise and consult on Youth Strategy (including youth-friendly version).

Embed the locality-based working model.

Advance the Youth Partnership Trust.

Enhance data recording and monitoring.

Strengthen early intervention with schools.

Expand inclusion work for marginalised groups.

Develop consistent referral and signposting pathways.

Impact

Greater youth engagement in community decisions.

Improved wellbeing through targeted youth work.

Empowerment of young people as active citizens.

Safer, more cohesive communities.

The Local Youth Transformation Pilot (LYTP)

This is a Shropshire Council initiative running from September 2025 to March 2026, designed to reform youth services countywide. It uses targeted grant funding to address gaps and build a sustainable, integrated youth support system.

Key findings highlight:

Severe underfunding—98% cut since 2010; only £3 per head spent in 2023/24 vs. £34 nationally.

Fragmented provision and limited collaboration between local authorities, VCSE, schools, and councils.

Majority of young people (8 in 10) have never accessed a youth club; high unmet needs in mental health, careers advice, and anti-bullying support.

Barriers include rural isolation, poor transport, cost, and lack of awareness.

Workforce shortage and inconsistent training/safeguarding.

Project Design & Use of Funding

The LYTP will deliver seven integrated projects aligned with pilot objectives:

Culture Change: Embed statutory youth duty and system leadership through training and a Youth Provider Charter.

Youth Governance: Establish a three-tier model to ensure youth voice shapes decisions, coordinated by a Youth Democracy Worker.

Partnership Development: Launch and scale Local Youth Partnerships (LYPs) with a new Foundation to guide countywide provision.

Infrastructure: The Foundation will offer governance tools, training, evaluation, and coordination for sustainability.

Workforce Development: Strengthen and expand the youth workforce, deliver cross-sector CPD, and train at least 150 staff.

Youth Work in Schools: Pilot three school-based hubs to deliver groupwork, drop-ins, and 1:1 support.

Programme Management: A dedicated team ensures accountability, evaluation, and system alignment.

Funding prioritises frontline delivery, infrastructure, staff training, and robust monitoring.

Strategic Alignment

The project supports Shropshire's strategic goals in children's participation, family services, education, safeguarding, and public health. It advances prevention, inclusion, and resilience, dovetailing with national objectives.

Expected Outcomes

1. By August 2026, Shropshire aims for:
2. Youth voice embedded in governance.
3. Countywide Youth Partnerships and a supporting Foundation.
4. Improved workforce pathways.
5. School-based youth work tested and ready to expand.
6. A co-produced Youth Offer Plan guiding future investment

Parenting team

Collaboration with BeeU Crisis Team

Referrals to the Parenting Team Helpline increased by 17 since June, driven by direct calls from parents/carers via the crisis team and the 'Waiting Well' scheme.

The team now provides proactive support calls to parents/carers, moving beyond simple signposting to more active engagement.

Understanding Your Teen Workshop

Delivered to 34 parents/carers at Meole Brace secondary school.

All participants (100%) found the workshop beneficial, with 86% rating it as very beneficial.

Positive feedback highlighted increased patience, understanding, and practical parenting strategies gained from the session.

Early Help Introduction Training

Training was delivered to a multi-agency audience and is now scheduled to occur bi-monthly, supporting ongoing professional development and partnership working.

Group delivery: Understanding Your Child and Sleep Tight

Offer of groups, including specific SEND groups continues to be delivered Shropshire wide. A mixture of face to face as well as virtual groups, co-delivered with schools as well as BeeU.

Play Practitioners

Interventions are provided to support children and families who have experienced trauma, with a focus on understanding and managing emotions. Practitioners also use Portage to support families with children with SEND

Solihull Approach professional training

Training delivery to a multi-agency cohort, on average 6 times a year to approx. 12 professionals continue to embed the parenting strategy and the Solihull Approach across all services and professionals working with children, young people and families across Shropshire. Ensuring a common framework, language and way of working with families when supported on a multiagency basis.

Strategy

Shropshire Council's Parenting Strategy is closely aligned with national frameworks and the Foundations Practice Guide, emphasizing trauma-informed, evidence-based approaches (notably the Solihull Approach).

Workforce Capacity: There are pressures on the team's ability to provide individualized support, especially for Level 1–3 families. Consideration should be given to expanding practitioner roles and capacity.

Service Gaps: Opportunities exist to strengthen links with GPs, maternity, and antenatal services, and to provide consistent face-to-face support at Family Hub Drop-Ins.

Accessibility: Lack of childcare during group sessions is a barrier for some families. Exploring solutions could improve engagement.

Continuous Improvement: Recommendations include further training in coaching techniques for practitioners, enhanced male engagement, and ongoing quality assurance through supervision, feedback, and outcome tracking.

Parenting team review to be initiated in line with the national reforms Family First Partnership

These achievements reflect a strong focus on proactive support, effective partnership working, and positive outcomes for both parents/carers and professionals.

Family Information Service (FIS)

The Family Information Service (FIS) continued to carry out its statutory function of providing information, advice and support to parents of children and young people aged 0-19 years. The service celebrated 25 years of delivering information since first being introduced in Shropshire in the year 2000.

The FIS responded to over 600 direct enquiries from parents but delivered information to many more through its digital channels.

The FIS social media posts reached 837,266 accounts, and follower number increased to nearly 10,000.

The online directory of local, regional and national services, organisations and events had 112,809 views and 71,146 users and continues to be a popular route through which parents are accessing information.

Subscriber numbers to the FIS monthly newsletter continued to grow, with over 800 parents receiving information through this route.

We produced in house a new video introducing the FIS and explaining the support all parents can access through the service.

The FIS undertook research with Shropshire parents to understand more about their current information needs and anticipated information needs. The results of this research will help the service to develop and continue to meet the needs of families in Shropshire.

Plan to move forward

A service development plan will be completed to respond to changes in legislation and local need, this will include an enhancement to our digital offer, exploring emerging technologies and utilising the skills within the team.

A new corporate directory system will be launched at the beginning of April 2025, which will also include the FIS online directory. The team will need to ensure information is migrated accurately as part of this implementation, and that parents can continue to access the information they need.

SEND Local Offer

The SEND Local Offer continued to carry out it's statutory function of providing information, advice and support to parent carers of children and young people with special educational needs and disabilities.

The SEND Local Offer website hits show that it is being well used, with over 30,000 visits at the end of the year and with over 100,000 pages viewed. The Local Offer also provides information through although routes, such as social media, and an electronic newsletter, which is issued every half term and has close to 5,000 subscribers.

The SEND Local Offer also meets with parent carers in the community and attends the regular Meet and Chat SEND drop in sessions, Understanding your child with SEND groups, and SEND coffee mornings organised by partner organisations.

We have monthly meetings with parent carers to co-produce the Local Offer and the work is guided by a termly multi-agency project group.

We have been continuing to push forward with a local offer specifically for young people and hope to secure some funding for this.

The year has been a challenge as we have been without the part time Local Offer Development Officer, who was seconded to support another team.

Plan to move forward

A new corporate directory system will be launched at the beginning of April 2025, which will also include the SEND Local Offer online directory. The team will need to ensure information is migrated accurately as part of this implementation, and that parents can continue to access the information they need.

We will prepare the Local Offer for the SEND inspection, ensuring that it is complaint and we demonstrate the work which has been undertaken to meet the needs of parent carers.

We hope to be able to stabilise the staffing resource for the Local Offer so that further development and the day-to-day maintenance of the directory can be guaranteed.

We responded to a total of 604 enquiries, processed 183 applications for All In membership. There are 1164 members of All in as at the end of March 2025. Our social media posts reached 837,266 accounts We have a following of 9,600 accounts across our social media channels

112,809 views to our online directory

71,146 users of our online directory

831 subscribers to the FIS newsletter

1,018 subscribers to the Early help Newsletter

4,984 subscribers to the SEND newsletter

[SEND Local Offer website year-end figures](#)

Year-end total

Visits 30,649

Page Views 100,134

Unique visitors 14,936

Returning visitors 1,824

[Early help website year-end figures](#)

Year-end total

Visits 10,679

Page Views 42,018

Unique visitors 5,425

Returning visitors 772

[The Participation Impact Board](#)

This was instituted in August 2024 and was co-chaired by Siobhan Hughes (Early Help Service Manager) and Donessa Gray (Assistant Director) and co-ordinated by the Early Help Participation Lead, Becky Wells, who started in post in June 2024.

The board has been held bi-monthly. It has been well attended by a range of local authority officers from across Early Help, Childrens Social Care, the Virtual School,

Commissioning, Adult Social Care, Health, as well as external providers, such as Shrewsbury Colleges Group, Shropshire's Parent and Carer Council (PACC) and SYA (Voluntary Youth Sector)

The terms of reference for the groups was to create a participation strategy, assess current levels of participation through self-assessment as a group. Identify where participation is working well and where there are gaps and a need for improvement, have an oversight of participation related work happening within Shropshire as a whole, not only that happening in our own areas. Create collaboration and connections between participation services across the local authority. For the group to be a safe space to share and develop ideas and receive support from others in similar roles. By the end of 2024-25 the Participation Strategy had been agreed by the group and the Lundy model of participation adopted, which identifies four key areas of focus:

Space: Ensuring children have the physical and social environments to express their views with consideration given to their needs. This demonstrates respect for their wishes and feelings, creates trust and provides an environment where they can speak as freely as they wish to.

Enabling children to articulate their opinions and perspectives and allowing their voices to be heard on issues that are important to them.

Providing an audience for children's views and making sure they are heard by the right people.

Ensuring that children's views have an impact on decision-making processes by taking them seriously and holding decision makers accountable for the inclusion of their feedback.

As the board developed it was clear that there is a range of participatory activities that take place across the partnership, from children and young people being involved in the creation of social care plans, to the Virtual School Council, the Children in Care Council, and that it is embedded within the practice of our Youth Support Team, and that greater co-ordination was required.

In addition to co-ordinating the IMPACT board and carrying out a range of research tasks to support the development of the strategy, Becky Wells, the Participation Lead in Early Help had, at the end of 2024-25:

With the support of staff from The Virtual School, carried out the first recruitment training with 6 young people, with the aim of running it monthly. Three of the young people had diagnosis of ASD, two of them attended a specialist education provision, and two young people were involved with part of the Virtual School

Held the inaugural Parent Advisory Group, drawn from parents who had expressed an interest in having a say in the way services are designed and delivered.

Family and Community Hub Offer –

Central Team:

Top Achievements

Early Help Service Promotion: Visited 5 secondary schools in central Shrewsbury, focusing on schools with weaker links. Promoted Early Help (EH) services, including hub delivery, integration panels, Team Around the School, Lead Professional roles, and EHM training.

Outcomes: Increased referrals to Integration Consultation Panels, two school teams completed EHM training, improved school understanding of EH services.

Next: Further school visits with EHAAT, allocate Family Support Workers (FSWs) by area, strengthen school relationships.

Community Drop-ins: Established monthly “Coffee & Chat” at Meole Community Hub with partners (SDAS, DWP). Attendance doubled from Q1 to Q2. Sunflower House weekly sessions maintained strong attendance.

Next: Monitor attendance, collect feedback, deliver themed sessions, review locations for accessibility and growth.

Reduced Intervention Length: Average intervention reduced from 260 to 115 days (Q1) and 191 to 110 days (Q2) through monthly supervision, 4-week plans, and regular audits.

Next: Continue monitoring and refining intervention strategies.

Top Challenges

Low Attendance at Integration Panel Meetings: Decline in partner agency attendance due to capacity and funding issues.

Next: Promote panels in EHM training/network meetings, engage partners for consistent attendance.

Key Progress and Challenges

Reduction in Intervention Length: Average period reduced to 110 days (Q2), moving towards a 12-week model. Actions include monthly supervisions, regular audits, and a focus on continuous improvement.

Learning from Audits: Audit findings and best practice shared in meetings. Focus on capturing the child’s voice, involving non-resident parents, and maintaining SMART family plans. Q2 audits graded 85% Good (up from 50% in Q1).

Capacity to Expand Service Delivery: Challenges balancing hub expansion with caseloads (FSWs manage 26–30 children). Support sought from the 0–5 Team, recruitment underway, exploring volunteer support and Families First Programme.

South Team

Overview of Effective Interventions

In 2024/25, the Early Help South Team maintained timely, impactful interventions, with an average duration of 16 weeks. This approach reduced family disengagement from 8 cases in Q2 to 1 in Q3. Tailored support addressed complex issues such as mental health, domestic abuse, and school attendance, resulting in improved family relationships, emotional well-being, and safety. Reflective supervision and peer reviews enhanced the quality and consistency of interventions.

Community Engagement & Increased Footfall

The team expanded its presence in community spaces, notably in Ludlow and Bridgnorth, leading to increased family engagement through events such as stay-and-play sessions and open access clinics. The Ludlow Hub operated five days a week with volunteer support, although venue changes affected collaboration. Greater engagement has fostered trust and improved access to support, despite ongoing challenges with space and staffing.

Conclusion

The team achieved significant progress, improving intervention timeliness and family engagement, and embedding audit learning into practice. Their work supports the Savings Plan via place-based and volunteer-led initiatives, despite staffing and infrastructure constraints. Continued leadership support and strategic focus on hub stability, partnership development, and broader access are essential for sustaining and building on these successes in line with the Shropshire Plan.

North Team –

Significant progress: Improved efficiency, engagement, and outcomes for families as part of an ongoing transformation.

Episodes of Targeted Early Help (TEH): 390 families supported (↑17% from previous year), demonstrating increased reach.

Level 2 Partner Episodes: 340 episodes (↑0.6%), indicating stable partnership engagement.

Intervention Timeliness: Average intervention duration reduced by 46% (from 230 to 123 days), enabling quicker support.

Hub Activity: 740 contacts (↑44%); Health Visitor contacts at 262. Increased footfall due to Stay and Play sessions and better data capture.

Service User Feedback: 90% of parent carers and 85% of children rated services very highly (9/10 or above).

Case Closures: 229 total closures; 64.6% achieved all outcomes, reflecting intervention effectiveness.

Quality Assurance: 22 audits completed; 68% rated 'Good', 4.5% 'Outstanding', showing improved coverage and quality.

Transformation Impact: Enhanced data capture, increased engagement, improved planning and supervision, and strong user satisfaction.

Summary

The North Early Help Team has delivered notable improvements in service delivery, intervention speed, and user satisfaction. Sustained focus on robust data, partnership working, and hub engagement will continue to drive positive outcomes next year.

O-5 Offer

Covering the whole county

With 4 FTE Family Support Workers (which equates to 5 FSWs) and a Lead.

Supporting at level 3 'Families who need more help' – to be consistent with the hub teams and recognising that our partners can and do provide level 2 support for 'Families who need help'.

Health Visitors – attending Health Visitor team meetings, regular meetings with Health Visitor lead, supporting families together.

Midwifery services – attendance at midwife Safeguarding Multi Disciplinary Team monthly meetings, delivering 'Introduction to Early Help' sessions to midwives, attending Midwife team meetings, meeting with Midwife leads, supporting families together.

Perinatal Mental health - meetings with Perinatal Mental Health Lead to share what our services offer, Lead to 0-5 team meeting, supporting families together.

Neonatal Team – meeting with Neonatal team lead, attending Neonatal team meeting and visit to ward, supporting families together and Early Help being part of the discharge plan.

Early Years settings – attendance at Early Years Network meetings termly, and other Early Years training sessions or focus meetings e.g. SEN, DSL, supporting families together.

BeeU Vig – sharing what our services do at 0-5 team meeting, supporting families together

Within the Early Help service, there are ten dedicated teams operating across Shropshire, each specialising in delivering preventative interventions and comprehensive, tailored support to families in need. These teams work collaboratively with local communities, schools, health professionals, and social care agencies to identify families who may benefit from early intervention. By addressing concerns at the earliest possible stage, the Early Help teams aim to prevent issues from escalating and to promote positive outcomes for children and young people.

Each team is composed of skilled practitioners who provide bespoke support packages, which may include parenting advice, assistance with accessing education or health services, and help in managing challenging circumstances such as financial hardship, housing instability, or mental health concerns. The teams are strategically located to ensure coverage across both urban and rural areas of Shropshire, enabling them to respond promptly and effectively to local needs.

Over the past year, the Early Help service has continued to strengthen its partnership work, sharing expertise and resources with a wide range of statutory and voluntary sector organisations. This joined-up approach enables families to receive coordinated support, reduces duplication, and ensures that interventions are both timely and effective. As a result, the Early Help teams have played a critical role in improving the wellbeing and resilience of children, young people, and their families throughout the county.

Author of report: Donna Ward Service Manager

06/11/25