



WILTSHIRE CHILDREN AND YOUNG PEOPLE'S TRUST AND WILTSHIRE SAFEGUARDING CHILDREN BOARD

Early Help Strategy (2013-2016)

Draft for consultation - Sept 2013

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EXECUTIVE SUMMARY

The Wiltshire Children and Young People's Trust and Wiltshire Safeguarding Children Board's Early Help Strategy sets out our proposals for Wiltshire's early help offer. We want to achieve the best possible outcomes for children and young people by providing the right help as soon as it is needed.

The Early Help Strategy sets out what we currently do, the improved outcomes we want to see for children and young people and our priority objectives to achieve this:

- > Objective 1: Ensure the best start in life
- > Objective 2: Gaining the skills required to begin school
- > Objective 3: Being ready for adult life
- > Objective 4: Develop a family-based approach to early help
- > Objective 5: Develop effective structures and processes to access early help

Intervening early is a priority within the Wiltshire's Children and Young People's Plan (2012 – 2015) and is key to improving outcomes for children, young people and their families.

Providing help early can assist with managing risk and prevent children and young people from harm. This can prevent problems from escalating to a level where they require statutory and specialist support.

"Preventative services can do more to reduce abuse and neglect than reactive services. Many services and professions help children and families so co-ordinating their work is important to reduce inefficiencies and omissions."

The Munro Review of Child Protection: Final Report, *A child-centred system*, Professor Eileen Munro, May 2011

The early help approach is supported by a wide body of evidence which proves that providing support during the early years produces the best outcomes for vulnerable children. It is much better to identify and address problems early on rather than wait and respond once difficulties have become more serious. Providing help at a later stage when a crisis point has been reached is often less effective, more costly and negatively impact on outcomes and life chances. Early help includes a focus on the foundation years but problems can emerge at any point throughout a child's journey to adulthood.

We will continue to consult actively with children, young people, families and professionals during the formal 3 month consultation period. The final strategy and agreed priorities will align with budget planning for 2014/15.

SECTION ONE: AMBITION AND CONTEXT

1. INTRODUCTION including definitions

The Wiltshire Children and Young People's Trust and Wiltshire Safeguarding Children Board's Early Help Strategy sets out our ambition for the development of early help services.

What do we mean by early help?

"Early help means providing support as soon as a problem emerges, at any point in a child's life, from the foundation years through to the teenage years.

Effective early help relies upon local agencies working together to:

- Identify children and families who would benefit from early help;
- Undertake an assessment of the need for early help;
- And provide targeted early help services to address the assessed needs of a child and their family which focuses on activity to significantly improve the outcomes for the child. Local authorities, under section 10 of the Children Act 2004, have a responsibility to promote inter-agency cooperation to improve the welfare of children."

Working Together to Safeguard Children, A guide to inter-agency working to safeguard and promote the welfare of children, March 2013.

The definition of early intervention adopted by The Centre for Excellence and Outcomes in Children and Young People's Services (C4EO) expert group is:

"Intervening early and as soon as possible to tackle problems emerging for children, young people and their families or with a population most at risk of developing problems. Effective intervention may occur at any point in a child or young person's life.

This definition includes both interventions **early in life** (with young children, including prenatal interventions) and interventions **early in the development of a problem** (with children or young people of any age). It includes universal interventions that are offered to an entire population to **prevent** problems developing, and targeted interventions that are offered to particular children, young people and families with existing risk factors, vulnerabilities or acknowledged additional needs in order to **protect** them from developing problems or to **reduce the severity** of problems that have started to emerge." *Early intervention and prevention in the context of integrated services: evidence from C4EO and Narrowing the Gap reviews, August 2010.*

Consultation question 1: We have included 2 definitions of early help - which definition of early help do you prefer? Is there a better definition which we should use?

2. OUR AMBITION AND COMMITMENTS

2.1 Our vision

The Wiltshire Children and Young people's Plan 2012-2015 sets out our vision for children and young people in Wiltshire:

'To improve outcomes for children and young people in Wiltshire; ensure good safeguarding practice; reduce, prevent and mitigate the effects of child poverty; and enable resilient individuals, families and communities'.

In realising our vision we will listen and respond to the voice of children, young people, parents and carers.

Early intervention is one of the three key themes of the Children and Young People's Plan and is woven through the high level outcomes that we want to achieve:

- All children and young people make the best possible start in life.
- All children and young people are safeguarded from harm.
- More children and young people are able to remain with their families when safe to do so.
- More vulnerable children and young people are able to achieve outcomes and progress in line with their peers.
- More children and young people live above the poverty line.
- More children and young people benefit from a healthy lifestyle.
- All children and young people are equipped with skills, knowledge, opportunities and attitudes to make a successful transition to adulthood.

Appendix 1 includes information on early intervention priorities in commissioning strategies.

The Wiltshire Safeguarding Children Board (WSCB) also has a focus on the development of an 'early help' offer in line with the Munro Review on improving safeguarding practice. The WSCB is the key statutory mechanism for agreeing how relevant organisations in Wiltshire cooperate to safeguard and promote the welfare of children. The priorities of the Wiltshire Safeguarding Children Board Business Plan are shaped around key themes, one of which is early help.

2.2 Our commitments

We are committed to the following:

- Ensuring ease of access children, young people and families should be able to access a range of appropriate services at the time they need them and in places that make sense to them.
- Targeting services by clearly identified need.
- Working with and empowering children, young people and their families by ensuring they are at the heart of service design and delivery and by supporting them to develop the capabilities and resilience they need to help themselves, be self-sufficient and to take control of their own lives.
- Addressing needs in the context of the whole family working in a holistic way, addressing wider problems and tackling causes rather than symptoms.
- Being outcome-focused and evidenced based to ensure that services focus on making a difference to the lives of children, young people, and families.

3. NATIONAL CONTEXT

Research consistently demonstrates that providing early help is more effective in promoting the welfare of children than reacting later. Children and families also prefer this approach. Providing early help:

- Can narrow the gap for children who are at risk of poorer outcomes (*Waldman, 2008, Karoly, Kilburn, & Cannon, 2005; Statham and Biehal, 2005*)
- Improve practice, outputs and outcomes by attending to risk and protective factors at an early stage, focusing on causes of problems not symptoms (the 2010 Marmot Review, 'Fair Society, Health Lives' was clear that "later interventions are considerably less effective if children have not had good foundations")
- Improve inter-agency working by encouraging partners to think and work together to plan and deliver services in a seamless way
- Increase user-involvement and staff satisfaction due to a greater focus on reaching out to families and working proactively to engage children and families with different needs before crisis intervention is required and using a seamless model of delivery (Dartington Social Research Unit, 2005)

All local authorities and partner agencies are operating in a climate of reducing resources so it is critical to look at ways of working that reduce costs but still deliver positive outcomes for their population. Appendix 2 includes information on Early Help practice in other local authorities. There is considerable evidence to indicate that early intervention is cost effective - savings of between £5,000 and £450,000 per family have been reported from a sample of 80 cases (Local Authority Research Consortium). Most Common Assessment Framework (CAF) processes cost under £3,000 whilst more complex cases can cost up to £8,000 (Local Authority Research Consortium).

3.1 National Policy

Current government initiatives supporting the development of effective early help include:

- The Troubled Families programme in Wiltshire we refer to complex families. This is
 part funded by central government, and involves local authorities working with partners
 to help 120,000 troubled families in England (circa 500 in Wiltshire) turn their lives
 around by 2015. Early Help is intrinsically linked to this agenda and the work to improve
 specific outcomes for children/families and reduce demand on specialist services.
- Investment in childcare funding for disadvantaged 2 year olds (in addition to funding for 3 and 4 year olds).
- A continued focus on the importance of Children's Centres as a local resource for families with young children but undertaking more targeted work (new statutory guidance produced in May 2013).
- An increase in the number of Health Visitors (in response to a pledge made by the Prime Minister in 2010) and the implementation of the National Healthy Child Programme with a focus on more intensive Health Visitor support for vulnerable families (known as Universal Partnership Plus).
- Establishing a new national Early Intervention Foundation in April 2013 whose mission is to be "an independent, authoritative voice campaigning to change the culture from late intervention to early intervention at national and local level. We will champion and promote Early Intervention across the UK. We will seek to take Early Intervention to scale by the widespread adoption of evidence-based early Intervention programmes, policies and practice, so as to improve outcomes for children and families in every locality that needs it".
- A new Ofsted framework for the inspection of children's services which will be launched in autumn 2013. This is currently out for consultation and proposes a focus on the journey of the child and looking at the delivery of early help. The current framework for inspections of local authority arrangements for the protection of children also includes a focus on early help.
- Government sponsored reports from Professor Eileen Munro and MPs, Frank Field and Graham Allen have all stressed the importance of intervening earlier. Professor Eileen Munro in her review of child protection writes of the need to develop "all-encompassing and pervasive early intervention culture" and "Preventative services can do more to reduce abuse and neglect than reactive services. Many services and professions help children and families so coordinating their work is important to reduce inefficiencies and omissions."

• The draft Children and Families Bill, based on the Green Paper: Support and Aspiration – a new approach to SEN and Disability, supports a move towards early identification and earl help and a focus on holistic assessment and provision.

Since the Children's Act 2004, early help has been at the heart of national policy for children. And now the government, in the publication of the revised statutory guidance 'Working Together to Safeguard Children' April 2013, is very clear that the duty to cooperate to promote the wellbeing of all children in the authority's area means that every Local authority and its partners in the LSCB and Children's Trust should set out clearly its early help offer to children and families.

4. LOCAL CONTEXT

In Wiltshire there are 114,130 children and young people aged 0-19 (2013 mid-year estimate). The majority of these have their needs met through engagement with universal services; however there are some who require additional help and support. The diagram on page 10 provides an overview of the population of children and young people aged 0-19 in Wiltshire according to level of need.

As part of the **Troubled Families initiative**, the government has estimated that there are 500 families with complex needs in Wiltshire who will require support to achieve outcomes such as improved school attendance, a reduction in offending and anti-social behaviour. In 2013/4, we intend to work with 279 troubled families.

A survey of **Health Visitors'** caseloads (October 2010) in Wiltshire identified 11.6% of families with young children had complex needs.

Wiltshire has 6.3% young people (794) who are **NEET** (Not in Education, Employment or Training). This is slightly higher than the national figure of 6.2%. Many of these young people are vulnerable with unmet needs. Schools can now receive information on young people on roll who are at risk of NEET from the Children's Services Information Team. The overlap between those at risk of becoming NEET (the RONI indicator) and those who have a CAF is currently only about 4%.

There are 1,875 children with a **statement of SEN** in Wiltshire (2.4% of the population), and approximately a further 10,000 on **school action/school action plus**. The most recent full year figures (2012) show a significant rise in the number of early year's statements and statements at primary level.

Consultation is to start in September 2013 on the creation of a fully integrated Special Educational Needs and Disability (SEND) 0-25 service. The focus of the service will be on providing early and earlier intervention for children and young people and their families. A detailed service specification will be developed following consultation.

Teenage conception rates - the under 18 conception rate per 1,000 girls (15-17) is 22.9% (2011) and below the national average of 30.9%.

Community Safety - 3,700 children are known to have experienced a domestic abuse incident (children present at a domestic abuse incident reported to the Police – Wiltshire Domestic Abuse Strategy 2009-2011). However, only 1 in 5 domestic abuse incidents are reported to the Police.

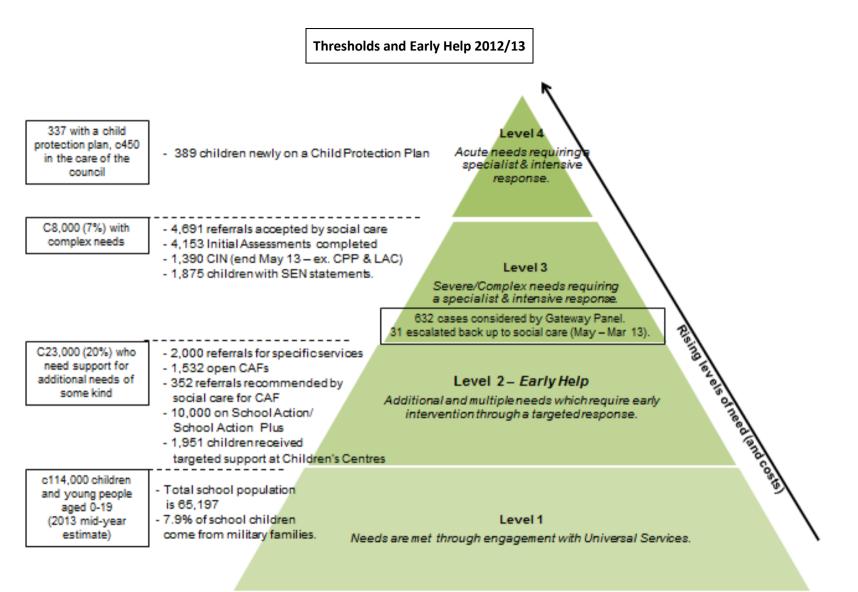
Hidden Harm in Wiltshire

A key issue for Wiltshire, as in other areas, is a lack of understanding of the size of the problem of Hidden Harm.

- The current data recording by Wiltshire agencies and services explicitly identifies a maximum of 209 children, 1,028 parents and 562 families where Hidden Harm is likely to be an issue (Wiltshire JSA for Health and Wellbeing, 2012/13).
- In Wiltshire, around 17,621 parents (9%) may feel that they have engaged in alcohol or drug use that they believe has had a negative impact on them or their children; a negative impact is broken down as an impact on the ability to parent, a financial impact, an emotional impact, or other impact (Substance Misuse Needs Assessment 2010/11, Children and Young People's Trust Board, Wiltshire Council).
- It may be estimated that only 6% (n=1028) of parents engaging in negative alcohol or drug usage are currently receiving treatment.
- There may have been as many as 30,019 children experiencing Hidden Harm in Wiltshire in 2010; with only 0.69% (n=209) being actively identified and supported.
- Wiltshire's health visiting teams are supporting a large number of vulnerable families. The key Hidden Harm factors present were parental smoking and parental mental illness. There were 251 reports of alcohol abuse and 179 reports of drug abuse, which suggests that health visitors are in an excellent position to identify Hidden Harm.

Poverty and deprivation

- In 2010, there were 12% or around 11,000 0-16 year olds living in poverty. This is well below the national average of 21%. 72% of these children live in lone parent families.
- In 2013, around 5,400 or 8.4% of children were eligible for free school meals, compared to the national average of 18%. The areas of greatest deprivation are located in parts of Trowbridge, Salisbury, Chippenham, Westbury, Calne and Melksham. Salisbury St Martin Central is in the 10% most deprived Lower Super Output Areas with regards to health deprivation and disability in England.
- There are 1,200 children eligible for 2 year old funding; this figure is based on an assessment of eligibility related to take up of benefits.



Data supplied by Wiltshire Council Children's Service's Information & Performance Team. Source: Early Help Data – Safeguarding Improvement Board, July 2013

4.1 The case for early help – demand on statutory services

In common with other areas of the country during 2012/13, Wiltshire had a growing number of referrals to Children's Social Care, an increase in children with child protection plans and an increase in the number of children in care.

Research in spring 2013 indicated that there is still a high level of inappropriate <u>calls</u> into social care (over 70% of all contacts and referrals into Referral and Assessment are not related to significant safeguarding concerns). This is alongside an increase in the number of CAFs being registered.

Local Authorities across the country are responding to this challenge by joining up services, ensuring that there is no duplication between services, pooling spending and shifting the focus of services onto tackling the root causes of problems. Many are using an early help approach to address the source of problems by providing support as soon as issues arise. Early help is therefore critical to reducing demand and spend on specialist services.

	meeting)	:							\mathbb{K}			
		Wiltshire								English	Statistical neigh	
	Indicator	2011/12	2012/13 prov	Jan to March 2013	RAG	Apr to May 2013	RAG	DOT	2013/14 estimate based year to date	2013/14 Target	average 2011/12	Average 2011/12 (denotes good +)
1.	Number of CAFs active	1038	1441	1441	G	1532	G	↑	1532		-	-
2.	Number of contacts (excl those that went to referral)	10307	10379	3722	G	2285	G		13710		-	-
3.	Number of referrals in year	3486	4690	1070	А	640	G		3840	4055	-	-
4.	% referrals which led to initial assessment	73%	89%	87%	G	92%	G	↑	92%	77%	75%	81% (77%)
5.	Number of children in need at end of period (CIN/CPP/LAC)	2100	2122	2122	G	2200	G		2200	2400	-	-
6.	Rate of children in need per 10,000 under 18	203	208	208	G	217	G	↑	217	237	326	253 (248)
7.	Number becoming subject to CP plan during the year	243	389	109	A	78	R		468	365	-	-

The table below is an extract from the Safeguarding Improvement Board Data Set (July 2013 meeting):

		Wiltshire										Ctatictical paigh
	Indicator	2011/12	2012/13 prov	Jan to March 2013	RAG	Apr to May 2013	RAG	DOT	2013/14 estimate based year to date	2013/14 Target	English average 2011/12	Statistical neigh Average 2011/12 (denotes good +)
8.	Rate per 10,000 becoming subject to a CP plan during the year	24	38	43	A	46	R	€	46	36	46	36 (40)
9.	Number of looked after children	416	453	453	А	446	А		446	430	-	-
10.	Looked after children rate per 10,000	41	45	45	А	44	А	÷	44	42	59	41 (36)
11.	Children who started to be looked after – numbers	179	194	48	G	20	A		120	182		
12.	Children who started to be looked after – rate per 10,000	18	19	19	G	12	A	↓	12	18	24	18
13.	Children who ceased to be looked after – numbers	154	153	31	A	23	A		138	203		
14.	Children who ceased to be looked after – rate per 10,000	15	15	12	А	14	A	÷	14	20	24	18

Consultation question 2: Do the current threshold arrangements allow families to access support at the right time?

Consultation question 3: What might be the reasons for the rate of Wiltshire Children in Need (per 10,000 under 18) being <u>below</u> statistical neighbour averages and the rate of both children becoming subject to a Child Protection Plan during the year and of looked after children being <u>above</u> statistical neighbour averages?

5. EARLY HELP SERVICES

Wiltshire had a Peer Review in February 2013 which commented that "Wiltshire has a lot of early intervention services" but needs to "consider the degree to which early help is impacting on social care pressures".

Set out below is the list of the current Early Help services and resources in Wiltshire:

Draft for consultation Sept 2013

- Children's Centres
- District Specialist Centres
- Programmes and strategies offered by the Early Years Team include Reading Recovery, Better Reading Partners, the Reader Leader Project, Social and Emotional Aspects of Development (SEAD), Inclusion Development Programme (IDP), BLAST and Talk Boost
- Early Intervention Team (Early Years)
- Family Learning Service
- Youth Development Centres
- Library Services and resources for children and young people e.g. Bookstart, Rhymetimes, Storytimes and Summer Reading Challenge
- Connexions Personal Advisers (including SEND 0-25 Service)
- Motiv8/Young Person's Substance Misuse Services
- Youth Offending Prevention Service
- Behaviour Support Service
- Educational Psychology Service
- Education Welfare Service
- Specialist SEN Service
- Ethnic Minority Achievement Service (EMAS)
- Travellers Education Service
- Family Information Service
- Young Carers Services
- Counselling Services
- Primary Child and Adolescent Mental Health Services
- Wiltshire Families First (Action for Children)
- CAF Coordinators
- Health Visitors and School Nurses
- > Youth Offending Services including the Prevention Project and Out of Court Disposals

We acknowledge that some services also provide a universal offer, e.g. Health Visitors.

Social care can only be effective if there is a viable early help offer. Although we acknowledge that there are reducing resources in many targeted children's services within the local authority, we are committed to doing everything we can to retain services and resources where we know that they are making a positive impact.

The national policy direction, including Troubled Families and a renewed focus on intervention early in a child's life (0 - 2 years), and significant budget reductions within the local authority, suggest we should look for opportunities to further integrate services to clarify and ensure a sustainable early help offer.

During the consultation period, we will involve agencies in more detailed service mapping including on activity and impact. We will also develop up-to-date local Early Help market

position statements building on the local Joint Strategic Needs Assessments (JSNAs), with information about need, projected need and planned outcomes.

Consultation question 4: Are there any more early help services which we need to consider during the development of this strategy?

5.1 Expenditure on services

There is a relatively large resource for early help services (approximately £21m, including Health Visitors, School Nurses and 2 year old free entitlement funding), but it is difficult to see the impact of early help services on reducing referrals into children's social care.

The expenditure is set out below:

	Expenditure £
Children's Centres (incl. District Specialist Centres)	4,462,500
Early Intervention Team (Early Years)	1,151,900
Youth Development Centres	1,363,900
Connexions Personal Advisers (including SEND 0-25 Service)	614,800
Motiv8/Young Person's Substance Misuse Services	225,300
Youth Offending Prevention Service	201,200
Behaviour Support	852,200
Educational Psychology	865,400
Education Welfare Service	407,100
Specialist SEN Service	943,200
Ethnic Minority Achievement Service (EMAS)	400,300
Travellers Education Service	196,300
Family Information Service	160,000
Young Carers	42,000
Counselling	30,000
Primary Mental Health Services	578,000
Wiltshire Families First (Action for Children)	800,000
CAF Coordinators	124,600
Health Visitors and School Nurses	5,000,000
TOTAL	18,418,700
2 year old free entitlement funding in nurseries/at child-minders (includes "trajectory funding")	2,866,800
3 and 4 year old free entitlement funding	14,926,100
TOTAL	17,792,900

In 2013/14, Wiltshire Council committed approximately £900,000 for the Short Breaks Scheme. Designed in consultation with parents and carers, the scheme aims to meet the individual needs and interests of children and young people who have special educational

needs and/or disability and *who require additional support* to access leisure activities or 'short breaks'.

In addition, there is approximately £8m in pupil premium within Wiltshire's schools which should help close the educational attainment gap.

6. KEY IMPACT INDICATORS

The Early Help Strategy will play a pivotal role in securing the high level outcomes set out in the Children and Young People's Plan (2012-2015). We are developing a range of early intervention and prevention key impact indicators. The likely impact indicators are:

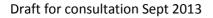
- Tackling inequalities in low birth weight to improve health outcomes in childhood and adulthood
- Readiness of children to start school at age 5
- Improving foundation stage profile results for vulnerable and disadvantaged groups
- Improving literacy and numeracy attainment at ages 11, 16 and 19
- Success in closing the gap in educational attainment between children and young people from different socio-economic backgrounds
- Reduction in the number of children and young people missing school
- Reduction in persistence absence
- Reduction in the rate of teenage pregnancies
- Reduction in the number of children and young people experiencing poverty
- Increased numbers of children and young people self-reporting a high level of wellbeing
- Increased numbers of 16-18 year olds participating in education, employment and training
- Increased numbers of young people engaging in positive activities
- Reduction of anti-social behaviour
- Reduction in the number of young people offending including first time entrants to the criminal justice system
- Reduction in re-offending rates
- Number of contacts made to children's social care
- Percentage of referrals to children's social care going on to initial assessment
- Number of children requiring statutory child protection intervention
- Reduction in the number of children and young people in residential home placements including a reduction in the number placed in homes rated as less than "good" by Ofsted
- Reduction in the number of SEND young people going to residential, out of county, educational or social care settings
- Analysis of patterns and trends in young people attending GUM (Genito Urinary Medicine) clinics
- Analysis of patterns and trends of Child Trafficking Investigations

- Levels of children and young people admitted to hospital for non-accidental injuries including self-harm
- Reduction in substance abuse
- Reduction in inappropriate caring responsibilities
- Improving attendance and attainment of looked after children
- Number of children in need under Section 17 of the Children Act
- Supporting parents in to work and sustaining employment

Over the duration of the Strategy we would expect to see an increase in coordinated early intervention through a single plan following completion of a CAF, a reduction in referrals to statutory/specialist services such as Children's Social Care and CAMHS, and a decrease in the number of troubled families identified as part of the Troubled Families Payment By Results scheme.

We will explore further some of these impact indicators, particularly regarding child sexual exploitation.

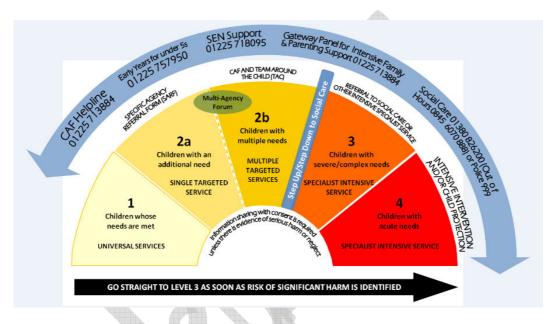
Consultation question 5: Do you agree with the proposed key impact indicators? Are there any other key indicators we should include?



SECTION TWO: WILTSHIRE'S APPROACH TO EARLY HELP

7. ACCESSING EARLY HELP SERVICES

The Thresholds for Safeguarding Document produced by WSCB and the Children's Trust sets out our framework for early help:



The key elements within Wiltshire's current model of access to early help are:

- Early support within universal settings.
- Recommendation by the local Multi-Agency Forum (MAF) on whether a child or young
 person's difficulty can be resolved through a single agency or whether a CAF should be
 completed. MAFs exist in community areas to promote and deliver early intervention for
 vulnerable children and young people aged 0-19 in their communities through regularly
 bringing together children's services practitioners to address concerns about individual
 children or groups of children in their area.
- Completion of CAF and bringing together a Team Around the Child (TAC) to provide support; with support to the Lead Professional and all CAF processes provided by the CAF Coordinator team.
- A Gateway Panel that provides access to family and parenting support services when a CAF has been completed and early help through a Team Around the Child process has not led to change for the child/family.
- A protocol covering the interface between Social Care and CAF processes to ensure that there is effective step-up/step-down between specialist and targeted services to avoid the 'baton being dropped', particularly if a case is being passed down from level 3 to

level 2, either because Social Care have finished their intervention but a level of support is still required, or because it is a referral that does not meet the social care threshold.

8. SUMMARY OF KEY MESSAGES FROM INITIAL CONSULTATION

During the development of this Strategy, we held a conference to consult with a range of practitioners about our current approach to early help and developing our early help offer. We also held a workshop with key managers involved in our Children's Trust and Wiltshire Safeguarding Children Board. The feedback was consistent and is summarised below:

- All services need to take a family approach rather than focusing on the individual child/young person (recognising the impact of parents' behaviour/lifestyle on the child or young person and that the key to change often lies with services that work with adults).
- Many staff in our children's workforce are not clear on the full range of support/services that are available for children and families in Wiltshire.
- Some staff lack confidence to intervene with children and their parents the focus is often assessment and then signposting on to another service.
- There is widespread support for a core competency approach to workforce development to help develop a shared understanding and language to promote better integrated working.
- Managers need to encourage staff to participate in joint work with other professionals and to support staff taking on the role of the Lead Professional.
- Practitioners say there is a need for greater clarity in understanding and describing what we do in early help. There was a request for the strategy to map the offer.
- Practitioners and managers stated that it would be useful to have a single contact point for advice on thresholds and to get the right help to a child/family rather than leaving the referrer to try and decide which service is most appropriate.
- Practitioners say there is a need for training to better assess risk.

Feedback from staff who attended the Early Intervention Conference in January 2013 showed that whilst the majority of participants agreed that 'Wiltshire has a good range of early intervention services', there were low levels of agreement with the statement 'Wiltshire agencies are working well together for early intervention'.

We will be consulting with children, young people and their families on the development of this Strategy.

Consultation question 6: We will be asking families to help us define what early help best supports them. What else should we ask?

9. WILTSHIRE'S EARLY HELP OFFER

The proposed priority objectives of Wiltshire's Early Help offer are set out below. These objectives will form the major part of the consultation.

Objective 1: Ensure the best start in life

We will continue to:

- Deliver evidence based parenting programmes through Children's Centres, schools and partners.
- Consider what support particular target groups of parents and parents-to-be need e.g. teenage parents, parents with special educational needs and disabilities, looked after young people and care leavers.
- Provide free entitlement funding for 2 year olds that meet the government's criteria. In Wiltshire, 20% (726) will be eligible and they will be linked with their nearest Children's Centre to provide holistic family support.

Priority actions might also include:

- Setting up an intensive service to support parents of babies/very young children (aged 0 – 2). This would be similar to the Family Nurse Partnership model, led by Health Visitors, with a focus on good early childhood development and ensuring secure attachments between parents and babies. This type of service is often focused on teenage parents but the approach could also be used where we know a parent-to-be is likely to struggle with parenting (for example, this could be due to a mental health difficulty, learning disability or involvement in substance misuse).
- Involving Children's Centres in working with parents to promote and establish early communication skills, for example, collaboration with the National Literacy Trust through the 2 year Department for Education funded project to work with 10 Children's Centres in areas of highest need.

Consultation question 7: What are the priority actions to ensure the best start in life?

Objective 2: Gaining the skills required to begin school

We will continue to:

• Deliver the collaborative model within the Speech and Language Therapy Service which includes training for all settings and schools.

- Develop language for life through the continuation and development of Reading Recovery, Better Reading Partners and the Reader Leader Project.
- Improve support for children, young people and families experiencing difficulties with school attendance.
- Provide effective advice and guidance to schools regarding children and young people missing from education.
- Encourage and support schools and settings to adopt the Achievement for All approach (a whole school improvement framework which raises aspirations, access and achievement of vulnerable and disadvantaged pupils, including those with SEND, EAL, looked-after children and free school meals, as supported through funding via the pupil premium).
- Provide better support at transition for vulnerable groups of children between primary and secondary school.

Consultation question 8: What are the priority actions to support children to gain the skills required for school?

Objective 3: Being ready for adult life

We will continue to:

- Promote confidence, positive self-esteem and resilience, especially within the context of child sexual exploitation.
- Provide mentoring and professional counselling in conjunction with partners.
- Develop programmes that intervene to support relationships alongside practical support to keep young people engaged in ordinary life and positive activities and begin to think about work and further education.
- Support young people to remain in education, employment or training.
- Provide young people with good quality accommodation and support which promotes independent living.
- Ensure that the Youth Offending Team works with complex families

Consultation question 9: What are the priority actions to support young people to be ready for adult life?

Objective 4: Develop a family-based approach to early help

Priority actions might include:

• Using the Complex Families project to create more effective links with services supporting adults (e.g. adult mental health services, substance misuse services, disability services and support where there is domestic violence or offending).

Consultation question 10: What are the key services which support the development of a family-based approach to early help? What more should we do in this area?

Objective 5: Develop effective structures and processes to access early help

We will continue to:

- Improve the CAF and TAC processes:
 - Linking the CAF (Early Help assessment) with the Social Care Single Assessment to support the journey of the child from early help to Children's Social Care (and 'step down' back to early help where appropriate).
 - Improve the capacity and quality assurance role of the CAF Coordinators to create additional resource to support effective early help.
 - Improved training, advice and support offer to Lead Professionals.
- Supporting closer links between the Wiltshire Families First service provided by Action for Children (working at level 2b) and the Children's Social Care Intensive Family Support Service (working at level 3 and 4).
- Development of a stronger Early Help case management approach.

Priority actions might also include:

- Better coordination of the single point of access for getting early help for a child/family. This would ensure that the referrer focuses on need/area of difficulty for the child/family, rather than requesting a specific service. During the consultation process we will explore ideas for improving access to early help in the light of the planned developments of the Multi-Agency Safeguarding Hub (MASH).
- Better coordination through the role of the Lead Professional where more than 1 service or intervention is required.
- Setting out and publicising a Core Offer of Early Help so that children, families and universal services are clear about help that can be provided.
- Development of locality-based Early Help Hubs covering children and young people aged 0 – 19 which could tie in with Wiltshire's campus developments. Local

Authority staff working within these Hubs (from a range of currently separate services) would link with their local Children's Centres, Health Visiting and School Nursing Team, and the Primary Mental Health Service to provide a Core Offer of early help to children, parents, schools and early years settings and GPs.

• Development of Early Help Standards to underpin the work of a range of staff and to set out our expectations for all providers of services.

Consultation question 11: Do you agree with the priority actions for objective 5, development of effective structures and processes to access early help?

Consultation question 12: Do you think a single point of access should be at local level or a centralised process, and why?



SECTION THREE: MAKING IT HAPPEN

10. THE DEVELOPMENT NEEDS OF THE CHILDREN'S WORKFORCE

We need to consider how to develop the children's services workforce to provide staff with the confidence to undertake effective early intervention with families. This is part of our Complex Families project but also links with the Wiltshire Safeguarding Children Board training programme.

Safeguarding and early intervention induction training will be offered to all those working children's services in Wiltshire from autumn 2013.

11. GOVERNANCE

The joint Children's Trust and Wiltshire Safeguarding Children Board's Early Intervention Sub-Group will be responsible for the development and implementation of the Strategy. This will involve monitoring and reporting progress regularly to the Children's Trust Commissioning Executive and the Wiltshire Safeguarding Children Board.

12. IMPLEMENTATION

A comprehensive implementation plan will be developed which will detail the actions which are required in order to support delivery of the priority objectives set out in the Strategy.

Successful implementation of the Strategy is a significant task that requires consistent and effective joint working and partnership between all stakeholders.

13. REVIEWING AND MONITORING

Children's Services Commissioners will work with all stakeholders to provide six monthly progress reports on the implementation of the Strategy to both the Wiltshire Children and Young People's Trust Commissioning Executive and Wiltshire Safeguarding Children Board.

Young people and their families will be regularly involved in the monitoring and review of the Strategy, and this will be facilitated by the Wiltshire Council Voice and Influence Team.

14. RISK ASSESSMENT

A comprehensive risk register will be completed for the Strategy.

15. EQUALITY IMPACT ANALYSIS

A comprehensive Equality Impact Analysis will be completed for the Strategy.

Appendix 1: Early Intervention Priorities in Commissioning Strategies

The Children's Trust has adopted a commissioning approach to service planning and development. All commissioning strategies assess needs, consult, and then make recommendations on how services should be configured to meet particular outcomes and making the best use of available resources. Whatever the focus of the strategy, they seek to review the entire landscape of delivery paying attention to how services and systems work together and whether that works for children, young people and families. This means that each strategy includes a focus on early intervention.

The following strategies have been approved by the Children's Trust and their implementation is contributing to the strengthening of Wiltshire's early intervention offer.

Family and Parenting Support Strategy

This strategy identified the gap in services at level 2b which involved families with complex needs accessing support from services only if a crisis occurred, but where the needs of these families were beyond the capacity and expertise of level 2a services. The strategy led to the development of a range of a new parenting support services. Wiltshire Families First is a level 2b service which provides intensive support to families where there is family breakdown caused by one or more of the following factors; substance misuse, domestic violence, substance abuse or mental illness. Family Group Conference Service was relaunched in April 2012 and is now provided by Daybreak. The in-house family support service Social Care Intensive Family Support Service has been re-designed. The two existing geographical teams have been re-shaped into two County wide teams – one for contact and assessment and one for Intensive Family Support. This will allow a greater focus on intervention for families needing help. The service launched in its new form on 1st October 2012.

Emotional Wellbeing & Mental Health Strategy

The following early intervention initiatives have been implemented:

- Information on services available in Wiltshire to support children and young people's emotional wellbeing and mental health are available in the 'Little Book'
- There is increased support and development to frontline practitioners via training opportunities such as the Youth mental health first aid training and "Bouncing Back and Adapting to Change" conference which considered ways to encourage and support developing resilience in children and young people

- A review of counselling services has led to jointly commissioning a counselling service for primary-school aged children to be in place from 1st September 2013
- A review of the support and services provided to young carers in Wiltshire has been undertaken and Spurgeons have been contracted to deliver services for young carers from July 2013. In addition to the mentoring and breaks services, it is intended to extend the services to include counselling, advocacy, support in education and a clear link to a new transitions service

Children in Care Commissioning Strategy

This includes a priority to achieve a range of cost effective 'edge of care' services which promote good outcomes by enabling children and young people to remain living safely with their families, where appropriate. These services assist families and extended families to better care for and support children and young people; and provide direct support to children and young people. Where children do return home after a period of care, the risks will be assessed and support provided if required.

11-19 Strategy

As a result of the 11-19 strategy, a specification for the Integrated Youth Service has been developed. The Service will provide a predominantly targeted and early intervention service for young people with identified needs, working mainly at the 2a and 2b threshold of need. Part of the offer will include targeted support and early intervention for those who are on the edge of care, provided by 4 full time adolescent support workers. Access to the service these support workers provide will be via the Gateway panel where they will work closely with the Intensive Family Support Service.

Appendix 2: Early help practice in other local authorities

Many local authorities are in the process of reviewing and developing services to set out a clear Early Help offer in line with the expectations of the government's guidance in "Working Together". The majority are looking at an integrated approach to service delivery and a single point of access for early help to make it easier for children and families to get the help they need. Set out below are the key developments in a number of other rural counties similar to Wiltshire.

Gloucestershire County Council

Emerging early help offer is being developed, shared across a range of services.

Youth Support Service reconfigured with a more targeted & assertive approach – focus on hotspot areas and tailored wrap around packages for young people in communities and schools. Interdisciplinary team comprised of youth offending staff, ex Connexions Personal Advisers, youth workers etc.

Within the Youth Support Service Case Responsible Officers hold and coordinate individual cases. Programme Officers focus on delivering interventions, mainly via Youth Support Centres & Central Hubs.

Enhanced role for voluntary and community sector organisations in delivering universal youth work using council buildings.

Turn Around for Children project providing an interdisciplinary approach (health, social workers etc) to intensively supporting parents/carers whose children (0-5 years) are on the brink of going into local authority care. Focus on young parents with drug & alcohol problems - based on the Family Nurse Partnership model.

A virtual team called Families First is providing an intensive response to troubled families.

Youth Liaison and Diversion project (funded by the Department of Health through the Youth Justice Board) working with young offenders to prevent involvement by statutory/specialist services.

Worcestershire County Council

Early Help Strategy includes plans to develop 6 integrated early help service arrangements covering age 0 - 19, one for each of its district areas. This will form an overall early help service offer across the county.

Circa £8.5m of council funding is to be split between the 6 districts according to need. A service specification has been developed focused on achieving improved outcomes for children and young people aged 0 - 19.

The council is exploring different potential delivery models (one provider, consortia, lead organisation with subcontractors). There is a strong focus on market development and a comprehensive Market Position Statement has been published.

The direction of travel is to outsource delivery. Children's centres will be included in the contract and a payment by results model is being considered for providers.

The council's website includes an Early Help Hub which provides family advice and support.

Oxfordshire County Council

Single integrated early intervention service in place, delivered through 7 hubs and 44 Children's Centres. The service provides early intervention and specialist services to children, young people and families with additional and complex needs.

The offer consists of family support, parenting programmes, direct work, consultation and advice, open access and targeted sessions for young people, professional counselling, restorative justice and support to access education, employment or training opportunities.

Dorset County Council

Single integrated Early Intervention Service with 4 district based integrated locality teams in place for a number of years, delivering early help aligned to Children's Centres and youth and community centres also run by the council.

Core offer very similar to that offered by Oxfordshire but described slightly differently so includes 'delivery of evidence based parenting programmes', outreach work in rural locations, promotion of a positive school experience, individual support to parents, targeted individual support to child/young person, assistance with transitional periods in a child's life.