

# Children, Young People & Learning Policy Overview Committee

# Review Scoping Report 2015/16

# The effectiveness of early help in Hillingdon in the prevention of negative outcomes for families

# Aim and background to review

It is estimated that over two million children in the UK today are living in difficult family circumstances. These include children whose family lives are affected by parental drug and alcohol dependency, domestic abuse and poor mental health. It is crucial that these children and their families benefit from the best quality professional help at the earliest opportunity. For some families, the difficulties they face can escalate if they do not receive early help. This can lead to children being more at risk of suffering significant harm.

Independent reviews and research have long championed approaches that provide early help for these children and their families. As Professor Eileen Munro highlighted in her review of child protection, "preventative services can do more to reduce abuse and neglect than reactive services". Local authorities and their partners are focusing increasingly on early help and prevention services for families. Many, including Hillingdon are now establishing a more coordinated and structured approach to this crucial role.

This review aims to consider the effectiveness of prevention and early intervention work in Hillingdon. In order to achieve this aim the following objectives are proposed:

- To understand the range of early help available to families;
- The understand the way in which these services are organised and coordinated, including the interface between early intervention services and social care;
- To consider the difference early help is making to the lives of families in Hillingdon; and

 To identify the scope for improvements to existing services or provision of additional services.

#### What do we mean by early help, prevention and early intervention?

It is generally acknowledged that it is better to prevent problems from developing in the first place and to provide help early when problems are first recognised to prevent them from escalating. The consequences of not doing this are increasing demands on more complex services, greater use of resources and children and young people suffering harm, due to difficulties which might have been preventable.

While prevention and early intervention are not only of value in the early years of a child's life, it may be that this is when they are of greatest benefit. This is due to the fact that a child's future development and achievements are built on their experiences early in life.

Many definitions of prevention and early intervention have been developed. The following summaries are common to most of these:

#### Prevention

Prevention aims to reduce the risk of worse outcomes by preventing a problem from occurring in the first place.

*Universal* prevention approaches are accessible to all children and families and can bring benefit to all, but particularly to those who are at greater risk of poor outcomes.

*Targeted* prevention focuses on those who are more likely to develop problems, but do not have them currently, to reduce the risk of problems developing.

#### **Early intervention**

The Early Intervention Foundation describes Early Intervention as "taking action as soon as possible to tackle problems that have already emerged. Its purpose is to reduce the likelihood of poor long-term outcomes for children, their families, as well as society at large whilst being cost-effective. Although it is not the same as prevention, in reality early intervention and prevention programmes and strategies often co-exist". In addition, the Foundation emphasises that early intervention should take a multilevel, holistic approach with sectors working together, sharing data and information about needs, and delivering services so that families receive consistent and integrated support. The focus should be on working with children and families rather than doing things to them.

The Centre for Excellence and Outcomes in Children and Young People's Services (C4EO) identifies as follows the potential for early intervention, both with individual children and families, and with populations at risk: "Intervening early and as soon as possible to tackle problems emerging for children and young people and their families or with a population most at risk of developing problems. Early intervention may occur at any point in the child or young person's life".

Graham Allen MP describes early intervention as "providing the social and emotional bedrock for all children". In order to achieve this he describes a life course approach with

children being 'School Ready' (by the age of 5), 'Life Ready' (by the age of 11) and 'Child Ready' (by the age of 18). He also identifies a range of evidence-based early intervention programmes, split by the developmental stage of the child and whether they are aimed at all children or those in need.

### **Terms of Reference**

To meet the previously mentioned aims and objectives the following Terms of Reference are proposed:

#### **Setting the context**

- 1. To gain an understanding of the range of early help available to families in Hillingdon;
- 2. To gain an understanding of how this help is accessed and organised; and
- 3. To gain an understanding of the role intervention services plays in reducing 'front door' demand for social care services and in supporting families to 'step down' from the need for statutory intervention; and
- 4. The review will consider services provided by:
  - a. The Council;
  - b. The voluntary and community sector;
  - c. Schools;
  - d. Public Health Services: and
  - e. Health Services.

#### Understanding and responding to need

- 5. To explore how the need for early help and preventative intervention is assessed and responded to. Activity will include consideration of Joint Strategic Needs Assessment findings and other related sources of intelligence; and
- 6. To explore approaches to assessing individual and family need.

#### Assessing impact and outcomes

- 7. To consider the impact and outcomes of early help;
- 8. To identify gaps in the early help offer;
- 9. To identify where improvements might be made to the early help available to families; and
- 10. To propose ways in which the Council could work more effectively with its partners to meet families' need for early help.

#### **INFORMATION & ANALYSIS**

It is proposed that this review follows the very simple structure of first setting the context, then understanding need and finally considering the impact and outcomes arising from early help activity. The witness sessions have been themed with a view to following this structure. The structure is offered as a broad outline in order to ensure that all key aspects of the review are covered. Members are welcome to revise this structure and to add additional themes as they see appropriate.

#### Setting the context

It is proposed that consideration will be given to the wide range of services offering early help to families, thereby providing Members with a clearer idea of the current, agency-wide response as it stands today. This will be a key session in the facilitation of a successful review as it will form the basis on which Members may consider the impact of the help offered and identify potential gaps in both service and organisational arrangements. The reasons as to why families may need early help are as wide and varied as the range of services and opportunities available to them to resolve emergent problems. As such, a significant proportion of this review will focus on clarifying what constitutes early help, who provides it and how it is offered and accessed.

#### Understanding and responding to need

This element of the review will focus on understanding how the need for early help is identified and responded to. There are a range of processes in place to determine the needs of families who may be experiencing emergent challenges. These challenges may become entrenched, complex and potentially harmful without additional support to overcome them. The swift and early identification of concerns is central to the provision of effective early support. Members will wish to understand how need is identified and responded to as part of the review process. This understanding will include considering the role early intervention plays in enabling emergent problems to be resolved without the need for social care intervention. This part of the review will also consider how early intervention services work in collaboration with social care to enable families to 'step down' and away from the need for social work intervention.

#### Assessing impact and outcomes

This will seek to understand how services provide early support in ways which lead to the resolution of emergent problems, ensuring that the problems do not become more entrenched or escalate. Consideration will be given to how significant and sustainable change is achieved through the provision of early help.

## **WITNESS, EVIDENCE & ASSESSMENT**

The table below sets out the possible witnesses that could be invited to present evidence to the Committee. It is proposed that witnesses are invited to attend themed sessions to ensure that the two core areas highlighted above are dealt with comprehensively and strategically. Members are reminded that this is not an exhaustive list and that additional witnesses can be requested at any point throughout this review.

Session Information	Suggested Witnesses
Agree revised scoping report (24 June 2015)	The scoping report will be presented to the Committee. Members will have the opportunity to agree or propose alternative witnesses.
Setting the context and understanding the services (9 September 2015)	<ul> <li>S Head of Early Intervention Services (LBH)</li> <li>S Early Intervention lead for health services</li> <li>S Early intervention lead for public health</li> </ul>
Understanding and responding to need (7 October 2015)	<ul> <li>Performance and Intelligence</li> <li>Public Health (JSNA)</li> <li>Service Manager, Key-working Service</li> <li>Early Intervention Officer (Early Help Assessment and Team Around the Family)</li> </ul>
Assessing impact and outcomes (25 November 2015)	<ul> <li>S Service Managers, Early Intervention Services</li> <li>Children's Centre and Early Years Service representatives</li> <li>Healthy Child Programme lead officer</li> <li>VCS representative</li> <li>It is suggested that a separate session(s) is / are arranged for a small number of Members with service beneficiaries e.g. children, young people and families. Facilitation of a separate session would help keep the number of witnesses attending the Committee to a manageable level and help those groups of people to feel more at ease in the sharing of information.</li> </ul>
Consideration of Draft Final Report (13 January 2016)	The draft final report will be presented by Chairman of the Committee.
Consideration of Final Report by Cabinet (11 February 2016)	The draft final report will be presented to Cabinet by the Chairman of the Committee. Cabinet may approve, amend or reject as many of the report's recommendations as it wishes.

Members may also wish to consider whether appropriate site visits should be undertaken on areas in which they require further information.

#### <u>Assessment</u>

As is standard practice for a Policy Overview Committee review, once a report's recommendations have been agreed by the Cabinet, officers will be asked to begin delivering the necessary changes. The monitoring of officers' work is a fundamentally important aspect of the Committee's work and, as such, regular reports on progress can be requested by Members and a full update report will be added to the future work programme of the Committee.

#### Resource requirements

This review will be undertaken within current resources. The plan set out above will be coordinated and delivered by Democratic Services. The additional resource of staff time required to present, collect and format evidence for witness sessions will also need to be considered. This will cut across a number of services including Children and Young People's Services and Public Health.