



# HILLINGDON

LONDON

## Children and Young People's Services

### Early Intervention and Prevention Services

#### Strategic Direction Document 2015 - 2016

#### 1. Purpose of Document

1.1 This document sets out the strategic direction for Early Intervention and Prevention Services. Its purpose is to provide clear terms of reference for all service staff, serving as a guide to inform service planning, development and delivery. It accompanies *the **Early Intervention Service Plan (attached as appendix 1)*** and also relates to the strategic direction and purpose of the Early Intervention and Prevention Strategy.

1.2 It may also be used to share with internal and external partners so that they understand the nature and purpose of the service, the priorities it is responding to and the outcomes it seeks to secure with families.

#### 2. Definition of terms

2.1 Our work needs to be informed by a clear understanding of the terms we use to describe service activity. The following definitions are offered in order that all staff and stakeholders understand and can relate to the meaning of our work and the terms that define it.

#### Prevention

2.2 Work undertaken with families, usually in a universal setting, that takes place without the need for external referral or any demonstration of additional need. Preventative activity is located at level 1 (universal services received by all) of the continuum of need as defined in the *'Hillingdon Safeguarding Children Board Threshold's Guidance and Hillingdon Children & Young People's Social Care Assessment Protocols 2014'* (attached as appendix 2).

2.3 Preventive activity should not be considered as intrusive. The most effective prevention is the creation of communities and environments that enable people to flourish.

2.4 Preventative activity is consensual in nature. It is a universal part of family life and plays a major role in enabling them to develop the personal, social, intellectual capabilities, capacity and resilience to prosper.

2.5 Universal services are also the most likely to be in a position to identify early problems or risks given that they work with the majority of families on an ongoing basis, schools for example. If problems cannot be resolved in a universal context or are recognised as being serious or complex they may be escalated for specialist and targeted intervention. Preventive activity may also be focussed on families or communities who feature in a particular “at risk” or vulnerability category. Definition of risk and vulnerability are discussed later in the document.

### **Early Intervention (stepping in to provide early help)**

2.6 Early intervention is concerned with working with families identified as having additional support needs (Level 2 of the continuum of need). This work can be provided by universal and / or targeted services. It is recognising that family interest is likely to be best served by stepping in to help in a universal context. This means working together with families and communities, endeavouring to build any support required into everyday life as opposed to stigmatising families as problematic and signposting or referring them to services that may be perceived as alien or threatening. It should also be noted that the best and most appropriate solutions are often within local communities and provided by universal services.

2.7 In many instances the beneficiaries of early intervention will be individuals who experience difficulties that could hinder their capacity to prosper unless they receive assistance to overcome problems at the first opportunity. The outcome of such assistance is informed by the ambition to avoid or minimise the human and financial cost of problems that escalate and become entrenched.

2.8 Early intervention work focuses on preventing difficulties escalating and becoming more complex, often by seeking to equip families themselves with the skills and resilience to deal with the difficulties they are currently experiencing and those that may arise in the future.

2.9 Early intervention is not restricted to interventions early in the lives of family members. ‘Early’ in this context means intervening as soon a problem arises to minimise the risk of impact on outcomes and potential escalation.

## Vulnerability

2.10 Vulnerability, within the context of our work, relates to circumstances in which families or individuals may find themselves or situations they may be experiencing whereby they are potentially more susceptible to risk and poor outcomes than others.

2.11 The vulnerability may be as a consequence of personal or social status or experience. Vulnerability may also be long or short-term depending on the circumstances. It can also be associated with personal and social attitudes and behaviours towards difference and diversity that may lead to restricted access to services.

2.12 It is recognised that all individuals and families experience problems. The majority have the capacity, capability and support networks to manage and overcome any such problems so that they don't impact on the families' ability to prosper. It is also recognised that some communities, families and individuals are more vulnerable than others and therefore may be more at risk to poor outcomes than their peers.

2.13 In certain circumstances these individuals and families may find it more difficult to recognise risk or manage problems that may arise. They may also have a number of vulnerabilities, the combination of which results in diminished capacity to deal with issues they may face.

2.14 The table below is offered for illustrative purposes and describes the vulnerability categories used in relation to entitlement to free 2 year old childcare. Additional and common descriptors of potential vulnerability have been added for reference.

2.15 The descriptors in the table do not represent a definitive list. Early intervention is concerned with being aware of individual and family vulnerability that may adversely affect outcomes and identifying where timely support may be proactively required to mitigate risk.

<b>Vulnerability Categories</b>	
<b>Category</b>	<b>2 year old offer vulnerability descriptors</b>
Family	Under-represented groups in terms of take up in services
Parental	Teenage parents not in receipt of Care to Learn
Parental	Parents with significant health issues or disabilities that impair their ability to parent children a child/children
Parental	Children from families with 3 or more children aged under 5
Parental	History of domestic violence in family
Parental	History of substance misuse in family
Parental	Lone parents
Child / YP	Children in care
Child / YP	Children subject to a Care Plan
Child / YP	Children identified by Social Care as a Child in Need
Child / YP	Children with developmental or learning delay
Child / YP	Children with disabilities

Child / YP	Children in temporary accommodation
<b>Generic descriptors of potential vulnerability in addition to the above</b>	
Family	Residents of deprived areas
Family	Family living in poverty
Family	Family members with limited basic skills
Child / YP	Children and young people at key points of transition (moving from primary to secondary school)
Child / YP	Children and young people experiencing loss or bereavement
Child / YP	Being a young carer
Child / YP	Being a young offender
Child / YP	Being in care or a care leaver
Child / YP	Being from an ethnic group whose outcomes are disproportionately poorer than others
Child / YP	Lesbian, gay, bi-sexual or transgender young people
Child / YP	Disengagement from employment, education and training
Child / YP	Children and young people with speech, language and communication difficulties
Child / YP	Children and young people vulnerable to sexual exploitation
Child	Born with a low birth weight
Child	Children and young people with disabilities and special education needs
Family	Child and / or family with emotional health and well-being problems
Family	Child and / or family with health problems
Family	Adult worklessness

## Risk

2.16 Risk can be defined as exposure to danger. Risk taking is an important learning process for children, young people and families. Exposure to risk enables learning in terms of understanding the benefits and consequences of making certain decisions.

2.17 Risk taking involves judgement and balance, with decision makers required to have the knowledge, awareness and experience to consider the value and likelihood of the possible benefits of a particular decision against the seriousness and likelihood of the possible harm.

2.18 Individual and family circumstances, including levels of vulnerability can influence engagement in risk related behaviour. They may compromise capacity to negotiate presenting risks positively. The table below sets out some of the common risks child, young people and families may be required to negotiate.

<b>Risk factors</b>
<b>Risk descriptors</b>
Misuse of alcohol and illicit substances
Engagement in unsafe sexual behaviour
Perpetrating or being a victim of abuse including domestic violence
Engagement in anti-social and / or criminal behaviour
Being socially disengaged
An inability or unwillingness to learn from experience
Low aspirations
Inability to be a 'good enough' parent
Being 'radicalised'
Being subject to sexual exploitation
Attitude and motivation to change
Not participating in employment, education and training, including pre-16's not accessing full time education
Being out of work or at risk of financial exclusion and young people at risk of unemployment
Living an unhealthy life-style (Poor diet, nutrition and smoking)
Low confidence and self-esteem
Inability to effectively communicate
Poor emotional health and well-being
Limited educational achievement including insufficient progress in 6 early years developmental stages

2.19 Again this is not a definitive list of risks. The descriptors are offered for illustrative purposes in order to clarify the definition of risk as it relates to prevention and early intervention.

2.20 There is an inter-relationship between risk and vulnerability. Poor management of risk can result in vulnerability; vulnerability can result in families being exposed to higher and increased levels of risk without the means to negotiate associated negative outcomes.

2.21 Early intervention and Prevention Services will seek to identify and offer targeted support to potentially vulnerable individuals and families. Targeted activity will be focused on those who need help that they have been unable to access and that they would benefit from. Targeted activity is primarily concerned with enabling families who may not prosper without additional help. It seek to enable families to develop the skills, knowledge, capability and resilience to recognise and successful manage risks in a manner that support learning and avoids danger leading to negative impact.

## Resilience

2.22 The previously described definitions pay reference to the building of resilience as a desired outcome. Understanding what we mean by 'resilience' is therefore central to enabling us to provide the right kind of support and interventions to develop resilience in the families with whom we work.

2.23 Resilience within the context of our work can be defined as enabling individuals and families to develop the capacity to successfully navigate the challenges they may experience.

2.24 Resilience can be seen as the capacity of an individual or family to 'bounce back' from adverse experiences. The required capacity can be described as a set of capabilities which may be drawn upon when presented with a particular challenge. They include:

- Aspiration, sense of self, application, self-direction, self-regulation (behavioural and emotional), empathy and tenacity to achieve short and long-term goals.

2.25 The capabilities associated with resilience can be seen as protective factors in being able to manage vulnerability and risk. Early Intervention and Services is concerned with providing support and interventions which enable individuals and families who are at risk of poor outcomes to develop and draw upon these capabilities.

### 3. Strategic Direction

3.1 Informed by our understanding of risk, vulnerability, resilience and the role prevention and early intervention work plays in enabling families to develop the capabilities required to avoid negative outcomes, we as a service need to be clear about our ambition for the families with whom we work. The following is offered as a vision for our service to realise:

#### Vision

3.2 ***Hillingdon families are safe, healthy, prosperous and self-reliant because they have the aspirations and means to succeed***

#### Service Purpose

3.3 As a service it is our purpose to contribute to realising this vision by:

3.4 ***Working together with families who need our support so that they may develop the skills, knowledge, resilience and capabilities required to be self-reliant and prosper***

3.5 We do this by securing:

- **Child and Family Development Services:** Securing and providing a range of early learning, childcare and family development services delivered through early years centres and children's centres;
- **Targeted Programmes:** meeting the needs of families by securing and providing targeted programmes of developmental activity that enables children, young people and families to develop the behaviours, skills and capabilities to avoid or overcome problems and risks;
- **Key-working Services:** Meeting the needs of families by providing integrated 1-1 support and challenge to enable them to overcome problems including those identified within the terms of the Troubled Families programme, those concerned with school absence and non participation in education employment and training, and
- **Youth Offending Services:** meeting the needs of young people who have come to the attention of criminal justice agencies by delivering intervention and tracking services with a view to reducing the likelihood of further offending behaviour.

3.6 We work in collaboration with a range of agencies and partners in order to realise our vision and deliver against our service purpose including associated activity such as the 0-19 Healthy Child Programme.

3.7 Our services are organised into the 4 areas of service outlined above. ***Service Structure Charts (attached as appendix 3)*** describes the service and its constituent parts. It also outlines our service relationship with key internal and external partner services.

## Principles

3.8 In addition to our service vision and purpose the following underpinning principles inform our work. These principles will be evident in all we do to secure the best possible outcomes for families:

- ***Working together with families and communities*** to building knowledge, skills and capacity to enable them to thrive;
- ***Putting children and families first*** and at the centre of all we do by recognising that each family and child is unique, with differing and changing needs that are best assessed and responded to by understanding things from their perspective;
- ***Focusing on families most in need of additional support*** by being aware of those who need and would most benefit from help and swiftly connecting them to the support they require;
- ***A 'tell us once' approach***. Listening, understanding and responding to what children, young people and families are telling us;
- Providing ***timely, cost effective*** and ***outcomes focused*** support. Stepping in when most likely to make a difference in a way that improves outcomes and reduces personal and financial cost;
- ***Working collaboratively*** in order to make best use of our resources by sharing information in a safe and timely way and working together to bring collectively capacity and expertise to bear in order to resolve a problem or risk; and
- ***A 'no wrong door' approach*** for children and families needing help. Developing an integrated approach to providing support so that agencies act as the gateway to a wider menu of services. Those who identify an issue or need, 'hold the ring' as lead professional until such a time as the role is formally passed on or the presenting issues are resolved.



## Outcomes

3.9 Having defined our ambitions, service purpose and principles the following information sets out the high level outcomes we seek to secure through our work with families

3.10 We work as an integrated and complimentary family of service teams and practitioners, in collaboration with partners and families themselves to secure the following outcomes for our families:

- **Strong Families:** families thrive because they have developed the skills, knowledge, behaviours, capabilities and resilience to do so;
- **Safe Families:** families stay safe because they are resilience to and able to effectively manage risks and protect themselves from harm;
- **Healthy Families:** families are healthy because they have obtaining the skills, knowledge, behaviours and capabilities to lead healthy and socially responsible life-styles; and
- **Economically Prosperous Families:** families prosper because they have secured the means to live independently through sustained engagement in employment, education and training.

3.11 Our work is focused on achieving these outcomes. We will do so by agreeing service priorities and associated activity to attend to these priorities. Our priorities and service delivery activity will be accompanied by a set of performance indicators and outcome measures which will be enable us to assess the impact of our wok in achieving the outcomes we aim to secure with our families.

3.12 We will develop and utilise a **Service Performance Web (draft attached as appendix 4)**. This framework will be used in order to enable us monitor and evaluate our work and assess how successful we are at improving outcomes for families.

## 4. Service Priorities

4.1 Our service priorities are derived from a number of sources. These include those that are specified and relate to statutory duties such as those concerning the provision of youth offending services for example. Other sources include priorities arising from the Joint Strategic Needs Assessment (JSNA) and those determined through relevant strategies such as the Early Intervention and Prevention Strategy and the Health and Well-being Strategy.

4.2 In addition we have priorities that are generated through monitoring and evaluation of current service delivery and knowledge obtained through local engagement with families and communities.

4.3 The priorities within this document are referenced as either:

- Primary (P) - priorities that are core business for Early Intervention and Prevention Services. Those that we will directly attend to in accordance with our service purpose, capacity and expertise; or
- Secondary(S) - priorities that we may contribute to.

4.4 Our service priorities for 2015 - 2016 have been separated into two categories:

- **Service delivery priorities** - those concerned with work undertaken directly with families; and
- **Continuous improvement priorities** - those concerned with work that enables us to operate as effectively and efficiency as possible in order to meet the needs of the families we seek to support.

4.5 They have also been aligned to the family 'problem areas' defined by the extended Troubled Families programme.

4.6 The following tables set out the priorities we will attend to through delivery of activities within our Service Plan together with reference to the source from which they have been drawn.

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<b>Service delivery priorities</b>	
<b>Priority</b>	<b>Reference source</b>
Helping people to lead healthier and more independent lives (P)	Joint Strategic Needs Assessment and Health and Well-being Strategy
Promoting economic resilience (P)	Joint Strategic Needs Assessment and LBH Employment Strategy
Preventing exploitation (sexual exploitation, radicalisation and involvement in youth violence related activity) (P)	Joint Strategic Needs Assessment, CSE Strategy and Prevent Strategy
Preventing Serious Youth Violence and anti-social behaviour (P)	Joint Strategic Needs Assessment and Health and Well-being Strategy
Preventing negative outcomes associated with young people's engagement in risk related behaviour (alcohol and substance misuse) (P)	Joint Strategic Needs Assessment and Sustainable Communities Strategy
Reducing the number of adolescents being accommodated (P)	Joint Strategic Needs Assessment and Children and Young People's Service priority
Enabling families to 'step down' from statutory services (P)	Joint Strategic Needs Assessment and Children and Young People's Service priority
Improving child and adolescent emotional health and well-being (P)	Joint Strategic Needs Assessment and CAMHS Strategy
Improving family emotional health and well-being (P)	Joint Strategic Needs Assessment and CAMHS Strategy
Increasing parental capacity, aspirations and skills building (P)	Joint Strategic Needs Assessment and Children's Centre Core offer
Reducing first time entrants to the youth justice system (P)	Joint Strategic Needs Assessment and Youth Justice Board
Reducing in re-offending rates (P)	Joint Strategic Needs Assessment and Youth Justice Board
Reducing use of custody for young offenders (P)	Joint Strategic Needs Assessment and Youth Justice Board
Sustaining young people's in employment, education and training and working in collaboration with schools to minimise absenteeism and identify and place children missing education (CME) (P)	Joint Strategic Needs Assessment and DFE and OFSTED statutory guidance
Adults out of work or at risk of financial exclusion (P)	LBH Employment Strategy
Young people at risk of worklessness (P)	Joint Strategic Needs Assessment
Child development and school readiness (P)	Joint Strategic Needs Assessment and Children's Centre Core offer
child and family health and life chances (P)	Joint Strategic Needs Assessment Children's Centre Core Offer
Meeting the needs of families affected by domestic violence (P)	DV strategy
Providing sufficient early learning and childcare opportunities (S)	Joint Strategic Needs Assessment

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<b>Organisational priorities</b>	
<b>Priority</b>	<b>Priority Activity</b>
<p>1. Knowing which families are most in need of our support</p>	<ul style="list-style-type: none"> <li>• Gathering and dissemination of needs assessment information and intelligence (individual and population) in order to put families in need of help in contact with those best placed to provide it</li> <li>• Development of information sharing processes and protocols</li> <li>• Ensuring that there is effective communication between the service and internal / external partners</li> </ul>
<p>2. Enabling families to develop the resilience to overcome emergent problems at the first opportunity</p>	<ul style="list-style-type: none"> <li>• Consistent application of the lead professional role and use of the early help assessment, team around the family and inter-agency referral processes</li> <li>• Develop processes to monitoring the quality and impact of use of early help assessment and team around the family processes</li> </ul>
<p>3. Enabling families most in need of targeted services to access them and overcome presenting difficulties</p>	<ul style="list-style-type: none"> <li>• Consistent application of the lead professional role and use of the early help assessment, team around the family and inter-agency referral processes</li> <li>• Strengthening of processes to enable swift family access to targeted services</li> <li>• Ensuring targeted interventions are focused and deliver agreed outcomes in a timely manner</li> </ul>
<p>4. Enabling families to develop the resilience to overcome more significant and complex problems</p>	<ul style="list-style-type: none"> <li>• Strengthening of processes to enable swift family access to targeted services</li> <li>• Strengthening of processes that enable families to be 'stepped down' from social care</li> <li>• Ensuring targeted interventions are focused and deliver agreed outcomes in a timely manner</li> <li>• Ensuring that there is effective internal communication between in-service teams and with social care teams</li> </ul>
<p>5. Enabling families to develop the resilience to step down and away from the need for statutory intervention</p>	<ul style="list-style-type: none"> <li>• Develop the Service Performance Framework and Outcomes Plan</li> <li>• Develop monitoring, evaluation and tracking processes</li> <li>• Develop systems enable the voice of the family to be obtained in order to inform service development and evaluation</li> </ul>

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	<ul style="list-style-type: none"> <li>• Improve and increase case quality development and audit activity</li> <li>• Develop our case recording and management information systems in order that we may capture qualitative and quantitative information to measure significant and sustained family progress</li> </ul>
<p>6. Providing the best quality service</p>	<ul style="list-style-type: none"> <li>• Develop our staff</li> <li>• Develop our quality assurance processes including case auditing arrangements</li> <li>• Apply effective performance management processes</li> <li>• Develop participant engagement processes</li> <li>• Develop our monitoring and evaluation processes</li> </ul>
<p>7. Using the resources at our disposal to best effect</p>	<ul style="list-style-type: none"> <li>• Ensuring service delivery teams are fully staff</li> <li>• Fully utilising available budget</li> <li>• Translating inputs to planned outputs and outcomes</li> <li>• Ensuring available capacity is fully used for target beneficiaries</li> <li>• Opportunities for joint working and sharing resources across EIS are actively explored</li> </ul>

4.7 The identified priorities contained within this paper will be attended to through implementation of actions detailed within the Service Plan