An evaluation of Leicester's Early Help Model

(incorporating the Troubled Families Programme Evaluation Phase 2: 2015- 2019)

A self-assessment of Leicester's Early Help Service Transformation Journey

April 2019

Contents

1. Introduction

This report is an assessment of the impact of Leicester's Early Help Model incorporating the Troubled Families programme on the delivery of 'early help' services from a range of partners across Leicester City. 'Early Help' means providing help for children, young people and families as soon as problems start to emerge or where it is likely that issues will impact negatively on children's outcomes. Early help services can also provide help for families when they are already involved with statutory and specialist services, as part of a plan to support them to no longer require this level of involvement.

Several key reports have been published that support the need for Early Help: The **Allen** report (1) on intervening early in a child's life, the **Field** report (2) on preventing generational poverty, the **Munro** review (3) of children's care services, the **Tickell** review (4) of early years and the **Marmot** review (5) of health. All make a strong and evidenced base case for early help services asserting that no agency can provide this support alone and that greater co-ordination and joint working across and within agencies is required.

In January 2011 the first report of Graham Allen's review, [Early Intervention: the next steps](#), was published. This report recommended that an independent Early Intervention Foundation (EIF)should be established, with a role to include:
- supporting local people, communities and agencies
- leading and motivating the expansion of early intervention
- evaluating early intervention policies based on a rigorous methodology and a strong evidence base
- developing the capacity to attract private and public investment to early intervention.

The Early institute foundation was established in 2013 and has been fulfilling the objectives of the roles outlined above over the last five years and as recently released its new strategy 2018 -2023 that directs the EIF through the second five years of its life, further cementing the critical role of early help. More recently one of the reports published **Evaluating Early Help – A guide to evaluation of complex local early help systems (April 19)** (6) sets out six principles for evaluating early help for children and families. Web addresses for the various reports can be found in the Appendices.

This report has been produced in lieu of the national Troubled Families cost-benefit analysis and associated evaluation findings that the government hopes will be available during the financial year of 2019 -2020. In the absence of national evaluation findings this report establishes what Leicester has developed, implemented and achieved to support the improvement of outcomes for Troubled Families against a backdrop of budgetary pressures and increasing demands to services where the pressure on resources will continue to increase.

This report also recognises and acknowledges the successes of Leicester City Council's early help service, in particular, the Children Centre and Family Support Service (CCFS) which benefits directly from Troubled families funding and evidences the need to focus the work of the council's Early Help and Prevention Service to reduce demand on statutory and high cost services.

1.1 The Troubled Families Programme

Troubled Families is a transformation programme that encourages and incentivises services to work in a new way for families with multiple problems, taking an integrated multi agency, 'whole family' approach that recognises and deals with their overlapping and interconnected problems and histories.

The Troubled Families (TF) grant is the current funding provided from Government to support local authorities with prevention services for children, young people and families. Prior to the TF grant, funding provided was referred to as the Early Intervention Grant, Family Intervention Project and Surestart Grants) The council's children centre and family support service within EHP receives an annual contribution of £1.2m from the Troubled Families grant which has been in place since 2012. The overall budget for this service is 6.4m which is made up of 4.2m portfolio, co-location costs from external providers and the TF grant.

Ambitious targets were set for local authority areas to identify Troubled Families within their area and provide support to achieve sustained and significant progress against headline issues, **120,000 families nationally for phase 1 of the programme (2012-15) and 400,000 families for phase 2 (2015-20) with a payment by results approach to incentivise this work.**

Achieving these targets requires a fundamental shift in public service delivery to ensure the provision of more effective early help and support for the most complex families through joined up local services with the longer-term pay-off being a reduction in the demand placed on costly reactive services to pick up the pieces when a family's problems aren't gripped and addressed head on.

1.2 Structure of the report

This report is structured as follows:

1. **Introduction to the early help model incorporating the troubled families (TF) programme**, highlighting Leicester City's approach and performance to phase one of the programmes that ran from 2012 – 2015.
2. **Historical context - An overview of the expanded phase two of the TF programme,** launched in 2015 and concludes in 2020. We first illustrate the significant changes from phase one and detail Leicester Cities overall approach addressing how the programme was developed to ensure that programme could deliver against increased outcome measures and a new financial framework and payment structure.
3. **A focus upon the governance and structure of the early help model**, providing a comprehensive overview of delivery from strategic oversight to the impact upon practitioners delivering intervention and families who have been supported through the delivery structures.
4. **A review of performance of the TF programme to date**, illustrating how significant outcomes are being achieved to meet families identified needs. This section is then concluded by detailing how the early help model is influencing transformational change, this is illustrated through the troubled family's self-assessment that is required by the Troubled Families programme team annually.

The blue boxes throughout the report detail the voices of the various stakeholders in the programme, within the appendices are included a number of cases studies that demonstrate how families have benefited from integrated whole family working.

2. The Troubled Families Programme: Phase 1 - 2012 to 2015

2.1 Phase 1: A Summary

Phase 1 of the Troubled Families programme was launched in 2012 following the 2011 riots in some parts of England. The then Prime Minister David Cameron set out plans to invest £448 million over the course of the Parliament to turn around the lives of around 120,000 troubled families in England.

Each local authority in England was provided with an indicative number of troubled families in their area, based on population estimates, indices of deprivation and child well-being and tasked with identifying families meeting the troubled families' criteria (set out in the table below). This equated to 1140 families in Leicester.

The Ministry for Housing, Communities and Local Government estimated that the cost of intensive intervention with a family was around £10,000. As part of the Troubled Families programme, it would pay 40% of this (£4,000), in a payment-by-results model, when a family was 'turned around' (see above).

The framework document referenced MHCLG analysis that existing programmes would have 'turned around' one in six families eligible for support, even without the Troubled Families programme, and therefore this 40% would only be paid for five out of every six families helped.

Part of the £4,000 would be paid up-front as an 'attachment fee' (£1,000), with the rest paid when a family was defined as having been 'turned around'. The proportion paid up-front would decrease year on year, to reflect the higher initial set-up costs. The up-front fee made up 80% of payment in 2012/13, 60% in 2013/14 and 40% in 2014/15.

2.2 Leicester's Approach – The THINK Family Programme

Prior to the development of Leicester's Early Help Strategy and the council's Early Help and Prevention Service model, a strategic and operational board was set up, comprising 20 different agencies to develop and oversee the delivery of the phase 1 troubled families programme. It was agreed that the local approach be named 'THINK Family' in order to better reflect the aims of the programme, which were to:

- provide additional resource for family intervention. This was achieved by the creation of the 'THINK Family team' - 18 FTE workers recruited to work with families with older children, an identified gap in provision.
- making it easier for services to work together. This involved work to improve the use of data, creating an information sharing agreement, appointing single point of contacts within the different agencies to ensure workers could get in touch with each other, promotion of family working and services via a website and e-briefing and development of a workforce development plan to improve family working skills.

Phase 1 Troubled Families Criteria

Households with 2 or more of the following criteria were eligible for inclusion in the programme:

Are involved in crime and anti-social behaviour
- Households with 1 or more under 18-year-old with a proven offence in the last 12 months; AND/ OR
- Households where 1 or more member has an anti-social behaviour order, anti-social behaviour injunction, anti-social behaviour contract, or where the family has been subject to a housing-related anti-social behaviour intervention in the last 12 months.

Have children not in school
- Has been subject to permanent exclusion; three or more fixed school exclusions across the last 3 consecutive terms; OR
- Is in a Pupil Referral Unit or alternative provision because they have previously been excluded, or is not on a school roll; AND/ OR
- A child has had 15% unauthorised absences or more from school across the last 3 consecutive terms.

Have an adult on out-of-work benefits

Cause high costs to the public purse ─ Local discretion (Leicester did not apply discretionary criteria

Phase 1 Troubled Families Outcome Measures

The family had to achieve all 3 of the education and crime/anti-social behaviour measures set out below where relevant:

- Each child in the family has had fewer than 3 fixed exclusions and less than 15% of unauthorised absences in the last 3 school terms; and
- A 60% reduction in anti-social behaviour across the family in the last 6 months; and
- Offending rate by all minors in the family reduced by at least 33% in the last 6 months.; OR

At least one adult in the family has moved off out-of-work benefits into continuous employment in the last 6 months eligible for inclusion in the programme.

2.3 The Model

The flow chart illustrates Leicester's delivery model.
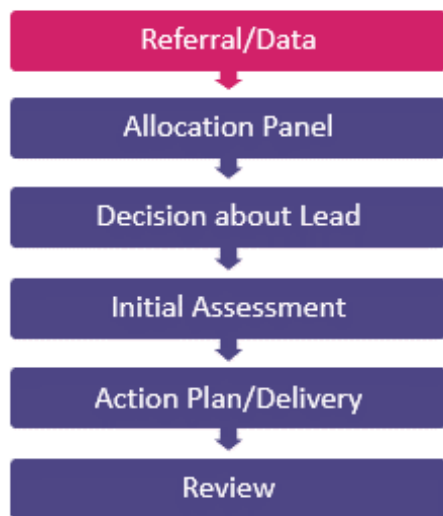
1. Families were either referred into the programme or identified through a data matching exercise highlighting families that hit 2 or more of the eligibility criteria. The majority of Leicester's families were identified through the latter.
2. Each referral or identified family was considered at a multi-agency allocations panel which sought to share information known to each agency regarding the family and make a decision about who would lead the case. This might be an agency already involved or 1 of 15 delivery partners dependent on who was felt to be most appropriate. 3. Once allocated, an initial assessment was completed, followed by the creation of an action plan and subsequent delivery of support to the family, with regular reviews over an average 9-month period of intervention.

2.4 Performance

1400 families were identified and worked with through the 3 years of phase 1.
Of these:

- 1140 achieved the outcome measures described above, representing a 100% turn around rate.
- 26% of families engaged in the programme achieved continuous employment, compared to just 10% nationally.
- 88% of families achieved a reduction in offending behaviour/ASB or improved school attendance compared to 89% nationally.
- There was a non-engagement rate of just 3.4%
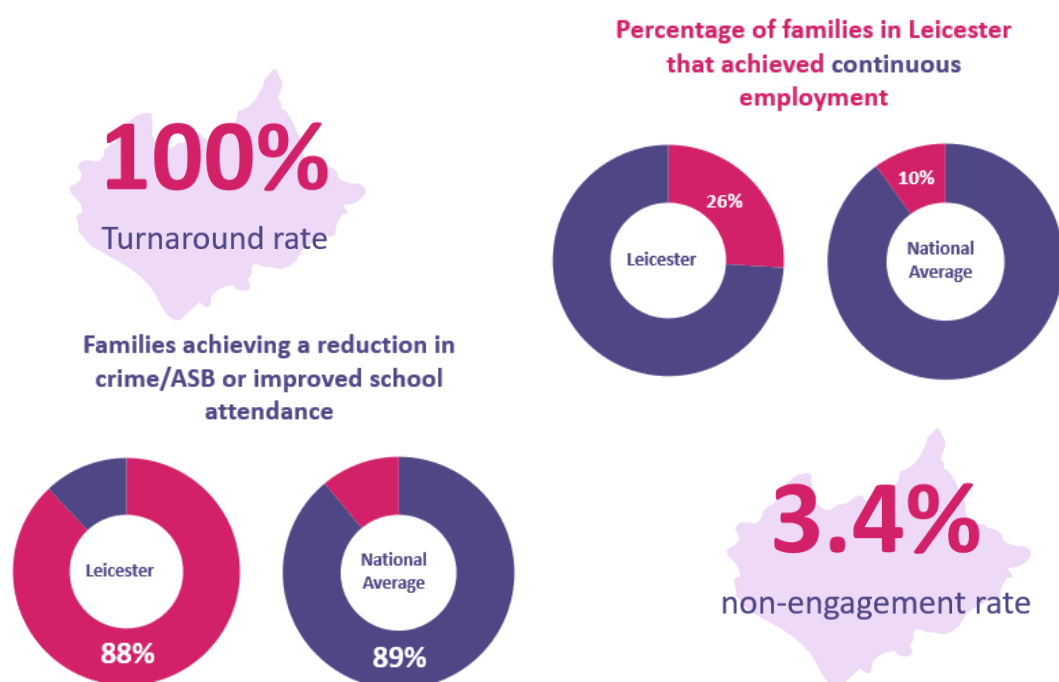
2.5 Other achievements

Other achievement of phase 1 include:

- **Partnership working** – 20 different agencies contributed to the development, design and oversight of the programme, with 15 different agencies taking a lead on casework.
- **Information Sharing** – use of data to identify families was a new approach and made possible with the support of senior managers across the agencies. This was underpinned by an information sharing agreement that supported safe sharing of data across the different agencies including Leicester City Council, Leicestershire Partnership Trust, DWP, Police, DV Services, and Voluntary Sector partners.
- **Changes in family working practice** – utilising a 'dedicated worker' to assess the needs of the whole family and develop an understanding of the interplay of issues affecting the family; to co-ordinate support across agencies as well as providing 1:1 specialist, practical hands on support; to be persistent and assertive in their attempts to engage the families and ensure improvements achieved by the family were maintained.

2.6 Phase 2

In August 2014, the then Prime Minister announced that the Troubled Families programme was to be expanded with £920 million allocated to help and reach an additional 400,000 families. The need to build on the foundations built through the THINK Family Programme and mainstream 'troubled families' through the Early Help model would be the best way to achieve the genuine service transformation required to achieve the results for the expanded Troubled Families programme (a.k.a. phase 2).

3. The Early Help Model: 2015 - current

3.1 Phase 2: A Summary

Phase 2 of the Troubled Families Programme started in April 2015. Leicester, as an authority had performed well in phase 1 and therefore was invited to start early so began to attach families from 1st January 2015. Leicester was initially tasked to attach 3990 families to the Programme, but this was reduced to 3940 from year 2.

Guidance for phase 2, the 'Financial Framework for the Expanded Troubled Families Programme', sets out the framework and principles for phase 2 which aligned firmly with Leicester's Early Help Model and included:

3.1.1 Expanded Eligibility Criteria

To be eligible for the expanded programme, each family must have at least two of the following six problems (see table 2 for the full criteria):

- Parents or children involved in crime or anti-social behaviour.
- Children who have not been attending school regularly.
- Children who need help: children of all ages, who need help, are identified as in need or are subject to a Child Protection Plan.
- Adults out of work or at risk of financial exclusion or young people at risk of worklessness.
- Families affected by domestic violence and abuse.
- Parents or children with a range of health problems.

3.1.2 Working with Families

The Framework detailed four family working principles which had to apply to all families declared as 'engaged' under the programme and for which a claim is made:

- there will have been an assessment that takes into account the needs of the whole family;
- there is an action plan that takes account of all (relevant) family members;
- there is a lead / key worker for the family that is recognised by the family and other professionals involved with the family; and
- the objectives in the family action plan are aligned to those in the local authority's Troubled Families Outcomes Plan.

3.1.3 Troubled Families Outcome Plans

Each local authority was required to develop a Troubled Families Outcome Plan (TFOP), detailing the outcomes considered by each local area to represent success - measured on a family by family level – against the programme's six headline problems.

The plan was to be developed with the support of local partners and services, internal auditors and local strategic leaders with sign off through local governance arrangements it also needed to reflect local priorities and service transformation goals. As such, the plan could be a living document and updated, with appropriate governance, to reflect changing priorities. This plan underpins the implementation of Leicester's Early Help Strategy 2016-19.

3.1.4 Profile of Families within Phase 2

The profile of families within the Troubled Families Programme from 2015 – 2019 identified as needing support in the following areas:

Mean household size **= 4.23 people**

36.6% are lone parent families with an average of 2 children living in the household

8.3% of household members **are less than 5 years old**

Main carers tend to be **female** (60.2%) **, be aged 20 - 34** (43.6%) **and** identify as **White British** (56.2%)

There are **families in every ward who** identify as a Troubled Family and **need help**, **Western is the highest with** 11.1% (467)**, Knighton is the lowest** with 1.5% (62).

68% Employment, Education and or Training **(2,626)**   10% Crime **(386)**
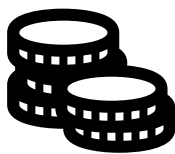
43% Education **(1,642)**   28% Domestic Violence **(1,077)**

39% Health (includes substance misuse and mental health) **(1,510)**

57% need help with parenting, housing, managing debt and finances and developing resilience **(2,200)**

3.1.5 Claims and Payment Terms

Retaining the payment approach of phase 1, funding was available in 2 parts: an upfront attachment fee of £1000 per eligible family attached to the Programme and a results payment of £800 the local authority could demonstrate that an eligible family has either:

1. Achieved significant and sustained progress (as defined within the TFOP) against all problems identified at the point of engagement and during the intervention; or
2. An adult in the family ceased their out of work benefit claim and sustained continuous employment for 26 weeks if previously claiming JSA or 13 weeks if previously claiming Employment Support Allowance

3.1.6 Audit and Spot Checks

As with phase one of the programme, results are self-reported by local authorities' Troubled Families teams. However, the Government's response to the Public Accounts Committee (PAC) report on the programme noted that additional checks would take place for phase two, compared to previously:

- The local authority's internal audit service should check and verify at least a representative sample of results for each claim before it is made. All claims made must be valid on the date that they are submitted and must be certified by a section 151 officer.
- In addition to any quality assurance processes agencies employ, each local authority is now subject to two spot checks during the lifetime of the programme. The spot checks now include a visit by a Department expert, as well as scrutiny of local authority data systems, and these visits include an interview of local authority keyworkers to assess local practice.

Voice of the Stakeholder - The Spot Checkers

Throughout the course of the programme, each local authority is visited twice for the purposes of a spot check. As the programme includes a PBR element, the spot check visit is crucial aspect of the required auditing procedure. During the visit to Leicester undertaken in 2017, a 10% sample of claims was checked during the session to ensure adherence with the criteria as established in the Financial Framework, as well as against the families' outcomes plan.

The feedback (detailed below) was very positive; processes in place were seen as robust and recommendations to change the processes was not made. Spot Check Feed Back: 100% of the cases stood up to scrutiny:

- Good access to a range of data
- Interface with DWP is a real strength (model of good practice)
- Revised early help offer is of good quality, the review of the liquid logic system and early help assessment is welcomed
- Development of the early help assessment allocations hub is positive

A further spot check is due in 2019-20.

3.1.7 Service Transformation

Alongside delivering outcomes for families, as part of the development of the early help model, Phase 2 of the TF Programme also placed a greater emphasis on the transformation of services supporting families. A dedicated Service Transformation Grant provided funding to support this aspect of the Programme and the Early Help Service Transformation Maturity Model (STMM) was developed to help local authorities and their partners' evidence and assess their performance against the six strands:

- The family experience of transformed services
- Leadership
- Strategy
- Culture
- Workforce development
- Delivery structures and processes

Alongside the STMM, the national Troubled Families Team subsequently developed a Data Maturity Model to enable local authorities to assess the effectiveness of their data systems; to plan their next steps; benchmark their progress against other local authorities; and to advance the way data is managed and used by the local authority and their partners.

3.1.8 Evaluation

In order to evidence changes in outcomes for families, the impact of the early help model informed by the TF Programme and resultant cost savings, all local authorities are asked to provide four main forms of information. This set of information is vital in tracking success and holding the programme accountable nationally:

- National Impact Study (NIS): The National Impact Study provides a quantitative assessment of the impact of the programme, by matching data about individuals in the Troubled Families Programme to national administrative datasets held by government departments (e.g. Police National Computer, National Pupil Database and DWP's benefits systems). The National Impact Study uses the details supplied by local authorities of families being worked with as part of their local Troubled Families Programme and a comparison group of similar families who are not receiving the programme's services. Analysis of the data is made every six months throughout the course of the programme.
- Family Progress Data (FPD): For those key indicators that are not available in national datasets, local authorities need to submit information on thirteen indicators for all the families they are working with pre-intervention and during intervention.
- Costs of local delivery: Information relating to costs of delivering targeted integrated whole family services in each area for use in the cost savings calculations that are built into the Troubled Families Information System and automatically generated for each local authority based on outcomes from NIS / FPD compared to local costs.
- National Troubled Families annual online staff survey: All areas will be asked to undertake an online survey about their approach to delivery of the Troubled Families Programme, and to give access to a keyworker survey for keyworkers in their area.

3.1.9 Finance

As described in the previous sections, funding from the National Troubled Families Team has been made available in 3 different strands:

- Service Transformation Grant: An annual, set, payment to support the co-ordination of the programme and service transformation activity
- Attachment Fees: An annual payment received based on agreed target numbers of families to be attached for the year - £1000 per family
- Payment by Results: Money claimed throughout the year for cases where evidence of success (as detailed in section 2.1 above) can be shown - £800 per family

In addition, the Office of the Police and Crime Commissioner (OPCC) has contributed funding to Leicester's programme.

The breakdown of core funding received to date is shown in Table 1 and Chart 1.1. The majority of this funding has been offset against the budget for the council's Children Centre and Family Support service within the wider Early Help and Prevention service. Some core funding and payments by results income was used to support the TF delivery partners and commissioning of bespoke services as outlined at table 3 on page 26.

Table 1: Troubled Families Programme Funding

YEAR	Service Transformation Grant	Attachment Fees	Payment by Results	OPCC Funding	Total
2015-16	394,000.00	878,000.00	43,200.00	89,250.00	1,404,450.00
2016-17	337,500.00	1,043,000.00	116,800.00	89,250.00	1,586,550.00
2017-18	350,000.00	1,025,000.00	269,600.00	114,750.00	1,759,350.00
2018-19	350,000.00	797,000.00	526,400.00	114,750.00	1,788,150.00
2019-20	262,500.00	197,000.00	N/A *	114,750.00	574, 250.00

*projected 1.1m PBR

1.1 Troubled Families Programme Funding
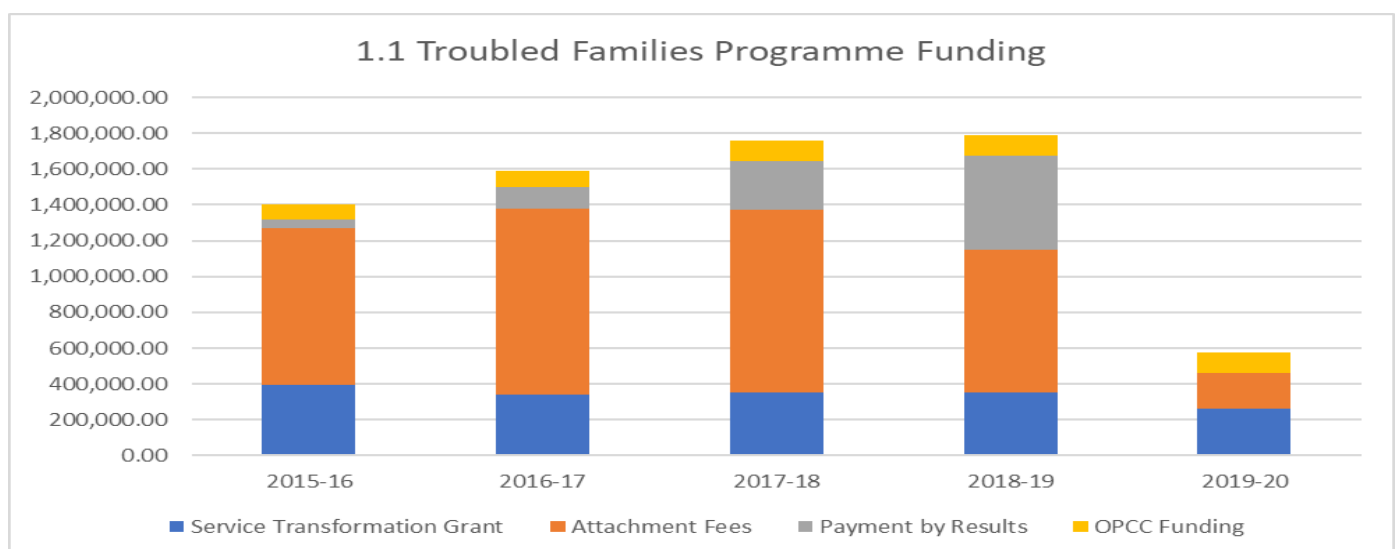
Nb. PBR income for 2019-20 has been excluded however based on previous claims, it is projected that we should achieve a claim rate of 35% which equates to 1,379 PBR claims totalling £1.1m.

Table 2: Eligibility Criteria and Outcome Measures

This table provides a summary of the eligibility criteria for inclusion within the TF programme and early help model, the outcome measures as listed in Version 10 of the Family Outcomes Plan (March 2019). Full details of outcome measures are detailed within Leicester's TFOP (See Appendices 1)

Children not Attending School		Offending Behaviour		Worklessness and Financial Exclusion	
The Indicators	The Outcomes	The Indicators	The Outcomes	The Indicators	The Outcomes
Children who… • Are not attending regularly • Have been excluded from school (fixed term or permanent) • Are in Alternative Education for Children with Behavioural Problems • Not registered with a school/alternative setting • Professional concerns regarding suitability of full-time education	Over 3 consecutive school terms each child in the household… • Has an attendance rate of at least 90% or; • Where school attendance less than 40% prior to intervention, show an improvement in attendance of at least 40% • Has less than 3 fixed term exclusions/less than 10 days fixed term exclusions School leavers who were persistently absent… • Are in education employment or training	A child… • That has committed a proven offence in last 12 months Parents… • In prison with less than 12 months until release • Currently subject to a licence or supervision in the community (following release from prison) • Currently serving a suspended sentence or community order Parents or children… • That have received an ASB intervention in the last 12 months • Nominated by Professionals due to concerns about potential crime or offending behaviour	A reduction in… • Number of proven offences • Number of ASB interventions Adults have… • Arrest leading to arrests leading to an outcome	Adults… • On an out of work benefit or universal credit Young people… • Who is not in employment, education or training • About to leave school with few qualifications and no planned education, employment or training Families… • At risk of financial exclusion e.g. unmanageable debt, rent arrears	Adults… • Move into continuous employment (and sustain it for 6 months if claiming JSA or 3 months if claiming ESA) • Have made at least 2 steps towards work e.g. childcare organised, created a professional email address and written a CV, undertaking volunteering, work experience or attending a course to improve skills Young people… • Are in education, employment or training Families… • Feel more confident in managing their finances and report a reduction in debt

Families with Health Problems		Families affected by Violence Against Women or Girls		Any Child in Need of Help	
The Indicators	The Outcomes	The Indicators	The Outcomes	The Indicators	The Outcomes
Parents or children… • With mental health problems • With drug or alcohol problem • With mental or physical health concerns e.g. unhealthy behaviours resulting in problems like obesity, malnutrition or diabetes New mothers… • With mental health or substance misuse or other health factors associated with poor parenting	Parents and children… • Are registered and are accessing health services to meet their needs • Report improved levels of wellbeing and health • Have reduced or ceased harmful alcohol or drug use • Are accessing public health services • Have engaged in work, education, training or volunteering	Parents and children… • That have experienced (currently or historically) or are at risk of experiencing Domestic Abuse, Sexual Violence or Honour Based Violence • Are known to have perpetrated Domestic Abuse, Sexual Violence or Honour Based Violence in last 12 months • One call out to home address or family member in last 12 months logged with police	If the violence is current… • The number and severity of incidents has reduced • Family members report feeling somewhat or much safer If the violence is historic… • Family members report improved wellbeing	Children… • Identified as needing early help • In need under section 17, Children Act 1989 • Subject to enquiry under section 47, Children Act 1989 • Subject to a Child Protection plan • Identified as having a delay in speech and communication • Is entitled to 15 hours free early education for 2-year olds and has not taken this up • Identified by professionals having problems of equivalent concern to any of the above e.g. where there are CSE concerns or children have been going missing	At the end of intervention… • Early help intervention closed with number of identified needs reduced • CIN or CP cases stepped down to early help with no subsequent re-referrals for 3 months • CSE risks reduced • Parents/carers have improved parenting skills • 2-year old FEE entitlement has been accessed • A package of short break support is in place • Stable and safe accommodation is in place

3.2 Leicester's Approach

For phase 2 of the Programme, Leicester wanted to build on the foundations established via the Early Help Model developing a strengthened multi agency approach using the Early Help Assessment model of working in order to create an integrated workforce wide approach to supporting families with multiple and complex needs.

As outlined within Leicester's Early Help Strategy 2016-19, an Early Help assessment is where children, young people and their families require support from a multi-agency team around the family response at an early help threshold to prevent escalation of issues. Leicester City Council and their partners have adopted an approach to early help assessments being completed within an agencies own structure and processes as a Lead Practitioner adhering to the principles outlined below:

- Consent gained
- An assessment of need is undertaken with an action plan in place
- A focus on outcomes for children and their families
- A team around the family approach (whole family work) must be in place
- Regular review of the plan
- Management oversight must be in place

This illustration below highlights the key changes implemented in the transition from Phase 1 to Phase 2.

Think Family

- ~~Think Family Workers~~
- ~~Standalone 'Think Family service'~~
- ~~Think Family referrals~~
- ~~Think Family Allocations Panel~~
- ~~Think Family Paperwork~~

Early Help Assessment

- Family support workers
- Integrated model of working accessible to all corners of the workforce
- Requests for Early Help
- No wrong door principle for referrals to Social Care and Early Help
- EHA's allocated via a multi-agency hub
- Case recording via LiquidLogic Early Help Module

This meant:

- The existing Think Family workforce became Family Support Facilitators - bringing their skills and expertise in working with older children to the Family Support Service
- The principles of Think Family were reflected in the Early Help Assessment (EHAs) but moved the focus away from a standalone service and towards a model of working for the whole multi agency workforce
- Think Family referrals became requests for targeted early help support or EHAs – these addressed issues highlighted through multi-agency case file audits where lack of understanding regarding eligibility criteria had led to referrals being missed.
- The cessation of the THINK Family Allocations Panel – requests were reviewed by the Early Help Response Team – a team that had been created and co-located within Duty and Advice (one front door) to bridge that gap between statutory and non-statutory services, with capacity to gather information from partners sought and pulled together to inform the first team around the family (TAF) meeting
- A move to the Liquid Logic Early Help Module (LLEHM) for recording of all EHA cases – the LLEHM was made available to partners to record their EHAs, enabling a centralised approach to record of all TF work, monitoring of outcomes and facilitation of information sharing between professionals.
- The reconfiguration of council early help services in 2017 developed a strengthened interface with key areas such as children's social care and public health. The co-location of early years services, health services and the voluntary sector with council early help services within Children, Young People and Family Centres has greatly improved the shared ownership and delivery of a partnership early help offer for families.
- More notably the impact on referrals to children's social care has been significant. There have been some excellent results evidencing the impact of this closer way of working has had to prevent families from requiring longer term statutory intervention at a higher cost. There has been a year on year increase with cases being stepped down from children's social care (CSC) to council early help services for families who no longer meet safeguarding thresholds but still require support to address multiple issues and build resilience to meet their needs independently. Within 2018-19, key outcomes include:

There were 16,233 contacts to CCFS: 75% of those supported through Advice Point (advice, signposting and short term support up to 6 weeks)
4,800 families were supported through Children Centres & Family Support
1,600 children stepped down from CSC to CCFS – less than 1% step back up after 12 months overall, of those that came from a single assessment, 5.2% were re-referred
1,325 children supported from CCFS casework, 2.8% re-referred back to Early Help after 12 months.
0 – 2 Year Pathway and Pre/Post birth parenting assessments – 78% were positive with the majority of families remaining at home. Year on year cost avoidance on residential parenting assessments and potential LAC as follows: Residential Parenting Assessments expenditure

Year	Spend	Comments
2017-18	1.1m	
2018-19	492k	Introduction of 0 – 2 pathway
2019-20	128k	Court directed assessments

Rickter Scale Distance Travelled score – 46% movement towards desired state

- Significant resource was put into training partners in the early help model of working and in use of the LLEHM (see the section on workforce development below), however it was identified within the first year of Phase 2 that the tracking of EHAs alone would not enable the identification of the Phase 2 target number of families. A decision was made to review how the work of key services working with families could be counted as part of the phase 2 targets and as appropriate, bring these partners onboard with the programme (see the section on delivery partners below for further details).

The following sections detail the infrastructure put in place and activity undertaken as part of the early help model to underpin the transformation of services with an early help offer.

3.3 Governance and Strategy

3.3.1 The Early Help Strategic Partnership Board
Direct governance of the TF programme is provided by Early Help Strategic Partnership Board (EHSPB) which is comprised of senior public/ voluntary sector partners. The board oversee the implementation of the local authority and partners Early Help Strategy and reports directly to the Leicester Children's Trust.

During 2018, the EHSPB meeting schedule alternated between themed deep-dive sessions and business meetings:
- 'Business' meetings focus on core governance activity e.g. exploring the impact of the authority's early help offer
- Deep dive sessions focus in on a key issue from within the 6 key troubled families areas of focus to develop a shared understanding of the local picture of need and service provision; encouraging agencies to reflect on their own early help offer service provision and how it can be adapted to address the issue, if not already; providing an opportunity to facilitate links between agencies and; developing innovative solutions to address gaps as required.

3.3.2 The Early Help Locality Partnership Boards
Early Help Locality Partnership Boards are the name given to a group of locality-based professionals, community members and service users who all meet regularly together. The main purpose of the locality partnerships is to jointly plan and deliver early help services across the city. This includes providing localised oversite of the aims and objectives of the Troubled Families programme and focusing upon how needs are met that are identified within the Troubled Families outcomes plan. Within the council's early help and prevention service, Leicester City is divided into 6 areas called clusters which are aligned with health services; each cluster has its own partnership board of local agencies supporting work within its own locality. For the year 2018-19 and currently, the boards collectively agreed three city wide targets:

- School readiness: Ensuring that every child is ready to engage in and benefit from early learning experiences.
- Domestic Abuse: Focus upon the promotion of healthy relationships.
- Adolescent Mental Health: Recognising the challenges that today's teenagers face and developing initiatives to support adolescents through these challenges.

Each EHLP has been allocated £10,000 to spend before the 31st March 2020 on developing local initiatives through the recognition that when organisations come together, the shared knowledge and expertise supports the development of agreed and shared work programmes that will meet the needs of the children, young people and families they work with, addressing outcomes identified within the Families Outcomes Plan. Examples of what the partnership boards have overseen:

- Get Up and Go - is a city-wide summer initiative. It is about encouraging children, young people & families in the city to be physically active. It was the first time we introduced the GU&GO summer initiative 2018 which was delivered at local parks and Children, Young People and Family centres. GU&GO will be delivered city wide in partnership with public health throughout summer, 2019.
- School readiness – targeted work in areas focusing on younger siblings of children who were not school ready at the end of the winter term of foundation. Partnership events with health and schools to provide information and guidance for parents getting their child ready for school.
- Earn & Learn - targeted campaign in each cluster with pop up events providing advice and information to our local parents and exploring returning to work, training/retraining or volunteering.
- Emotions in Motions – a groupwork programme supporting children aged 8 – 12 with low level mental health issues to address problems at an earlier stage and reduce demand on statutory services. This is a city council offer, however EHLP's are looking to use partnership funding to extend this to train partners in the delivery of the groupwork programme and target older children and young people.

3.3.3 The Early Help Strategy
The Early Help Strategy for Leicester City sets out the vision for all partner organisations working with children and families in Leicester to improve children's lives by working in partnership to raise aspirations, build achievement and protect the most vulnerable. The strategy links to national agendas and links these with the local picture. It sets out ambition for families including:

- Children and young people's needs are best met when addressed in the context of the whole family,
- Children, young people and families develop resilience if there are protective factors in place such as good school attendance; and parents in or actively seeking and ready for work
- All children and families have a right to receive high quality early help services that are appropriate to their needs and take their views and lived experience into account, irrespective of their circumstances or background

The web address for the strategy can be found here www.leicester.gov.uk/earlyhelp and in Appendix 8.

3.3.4 Health Check Meetings

Following Leicester being placed in 'recovery', fortnightly, then monthly Health Check meetings, chaired by the Director of Social Care and Early Help, were established with the key agencies responsible for delivery of the Troubled Families Programme including a mix of City Council agencies and non-Council agencies; 16 different services and agencies in total.

The health check meeting had a significant impact on Leicester's troubled families programme performance in year four (2019-20) with an increase PBR claim rate of **245%** in 2019-20 compared with the first three years of the programme after the meetings started.

The health check's value includes;

- **Providing a forum for communicating key messages to partners:** this enabled the reframing of conversation regarding the early help model from 'what's in it for me' to a need to act to ensure income that would be used to support local families is not lost.
- **New partners and increased data sharing:** strengthened strategic oversite ensured that a wider number of partners could attach families that they were working with to the programme and the sharing of data enables partners to understand how they are meeting outcomes for families in order to claim payment by results.
- **Improved relationships with children social care:** prior to recovery, social care had been a delivery partner of the troubled families programme but discussions regarding what this meant for practice had been difficult to progress. Following the initial health check meeting, the Programme Manager was able to meet with managers from within 3 different social care departments to discuss the Programme and contribution that could be made by each department. This resulted in:
  - The worklessness conversation tool being written in the Single Assessment Teams assessment schedule and an expectation that Social Workers address worklessness as part of their plan
  - A new cohort of cases being identified from within the Disabled Children's Service with agreement for the 'TF outcomes form' to be completed by DCS workers for every case
  - A new cohort of cases being identified within the Person's from Abroad team, with agreement that workers record their work in line with the Early Help model and Families Outcomes Plan.

3.3.5 The Infrastructure Team

A virtual central team illustrated in the structure chart below,
works to support and oversee the programme. Key functions of the team are as follows:

Function	Staffing	Purpose
Leadership	Troubled Families Coordinator (Chief Operating Officer) Director of Social Care and Early Help Head of Service Service Manager	• Overall management oversight of the programme • Provide scrutiny and challenge • Partnership engagement and development • Service Manager – line management responsibility of the TF Programme Manager
The Programme Manager	1 x 0.6 FTE	• Management of Central TF Team and oversight of data, worklessness and FSW and EHCO (until March 2019) workstreams • Partnership engagement and support – reviewing partnership work and developing approaches/support packages to enable services work to be counted as part of the Programme
Performance roles	1 x 0.8 FTE Business Support Officer 1 x Admin 1 x 0.8 FTE Data (seconded from DWP) Ad hoc support as required - Outcome and Data Performance Officer (from Central performance team)	• Processing of data to support identification and attachment of families to the programme • Processing of data to enable payment by results claims to be submitted • Working with audit to verify PBR claims • Compilation of data to support National Evaluation of TF (NIS and FPD)
Worklessness Team	2 x Early Help Employment Advisors (seconded from DWP)	• Provision of 1:1 support to families to explore and make progress towards work, training and learning • Provision of support to colleagues across the council to develop their skills and confidence in addressing worklessness as part of family working
Family Support Workers in Education Welfare	2 X FSWs	• Provision of support to the Education welfare team to ensure families identified as having more complex needs can receive timely intervention to ensure TF outcomes are achieved
Early Help Assessment Co-ordinators	1 FT Senior Early Help Co-ordinator 2 x FT Early Help Co-ordinator	• Supporting the development of the LLEHM to ensure the system is utilised effectively and supports evidence of TF outcomes • Administration of the Allocations Hub • Support for partners delivering EHAs

Voice of the Stakeholder: Managers

A survey of managers within LCC and external delivery agencies was undertaken during December 2018 and January 2019. Management roles ranged from Team Manager level through to Chief Operating Officer.

There is clear focus on integrated, whole family working
- Managers were able to articulate the aim of working in an integrated way to support families to achieve the agreed outcomes as part of the Early Help Model incorporating the 'troubled families programme'
- Approaches to sharing this vision varied, with some managers describing an array of active approaches e.g. embedding 'whole family working' within staff supervision, amending of processes and paperwork to reflect the Early Help Assessment model, distribution of a monthly blog featuring TF updates and sharing of performance indicators while other comments appear to reflect more passive approaches e.g. sharing of information, attendance at meetings.
- A commitment to integrated working was demonstrated by an array of examples at both frontline and strategic level

'Recovery' has had a positive impact on the level of commitment and buy-in to the programme
- Being in recovery was cited a number of times and described as having led to increased scrutiny and monitoring of the programme via PBR performance, monthly reports, requests for additional information, discussions in supervision
- Health Check Meetings were cited as a key mechanism form driving the agenda forwards

'Early Help' as a concept is not consistently understood across the multi-agency management groups
- Some responses from the management group indicated that there is ambiguity regarding what early help actually is i.e. is it an approach, or is it a service?
- Responses also highlighted a lack of understanding regarding the impact of early help. The flow of information was regarded as 'good' and statistics were cited to illustrate impact, but it was clear that there is not a unified view across the management groups

Managers feel there is a lack of coherent strategy underpinning the transformation agenda
- Areas of development identified included commissioning strategy, a need to align with certain key services/agendas and the JSNA

3.4 Delivery Structure and Processes

3.4.1 EHA approach and principles
The Early Help Strategy for Leicester sets out the Early Help Assessment as the approach for supporting families with multiple and complex needs and a set of EHA principles have been published underpinning this, namely: written consent from the family; an assessment of the family; an action plan; a focus on outcomes; utilisation of a TAF process; management oversight and timely reviews. The principles provide clarity for the partnership on the expectations of an EHA approach and aim to ensure a level of consistency for families receiving intervention across different services.

Partners are supported to embed the principles of the EHA model through an extensive training offer, good practice templates and guidance provided, shadowing opportunities and access to Early Help Assessment Co-ordinators to support with using the principles and accessing the case recording electronic system.

Follow-up checks are undertaken of all known EHAs in the city to ascertain existence of EHA principles after allocation of cases and data collated shows that principles are in place across most cases, but that this is inconsistent. For example, during quarter 1 of 2018-19, 60% of EHAs reviewed had an action plan in place, rising to 79% in quarter 2 and dropping down to 63% during quarter 3, implying that that practices are becoming embedded, although ongoing support is required to ensure that the principles are continually met. Quarterly reports of the audit findings are submitted to the Local Safeguarding Childrens Board to ensure scrutiny and challenge is provided to the partnership in order to drive up standards.

3.4.2 The Partnership Allocations Hub
The Early Help Assessment Partnership Allocations Hub, established in 2017, reviews requests for Early Help Assessments and triages to the most appropriate agency to pick up as the Lead Practitioner. Agencies undertake the EHA within their existing agency processes but must ensure they are compliant with the standards and expectations for EHA's. Support for partners to adhere to these principles is provided by Early Help Coordinators (EHCOs) via the provision of practical resources to assist with the undertaking of an EHA, sharing of information regarding agencies involved in the case and troubleshooting issues that partners may encounter.

Voice of the Stakeholder

"I think the city council early help service is fabulous, someone is always there to help me in some way".

Jo Watson, SENCO – Alderman Richard Hallam Primary School

Data, collated by the EHCOs, indicates that the majority of EHAs allocated through the Hub are still led by practitioners from across council services. The EHCOs will be focusing on supporting schools to engage with the EHA model during 2019 and collection of data regarding EHAs being undertaken outside of the Allocations Hub in order to better understand the local picture of provision.

3.4.3 Early Help Delivery Partners for the Troubled Families Programme
Direct work with families identified as meeting 'troubled families' eligibility criteria is undertaken by 16 partners in Leicester: 9 council services and 7 non-council agencies. Each agencies' processes undergo scrutiny before being added as a delivery partner to ensure work is delivered in line with the core principles of the programme and Leicester's Early Help model i.e. that there is a named, lead worker, an assessment of the whole family and an action plan that aligns with the TFOP. Where aspects of work do not align with the TFOP, support is put in place to enable the agency to address the missing area of work. A common example of this relates to agencies not addressing worklessness. In these instances, the conversation tool (see delivery structures and processes section) is shared and referral routes to access support from the employment advisors are agreed. Staff teams are briefed on how to use it and how to access support and as required follow-up

support is offered via further briefing, employment advisors working from the agencies offices and setting up 1 to 1 meeting with staff to review caseloads and offer support. Further details of the work undertaken with each service is shown in Table 3 (see below).

Table 3: Use of TF core funding and payments by results income to support delivery partners.

(Figures are year to date for phase two (2015- 2020) unless otherwise stated)

All of the delivery partners were supported by the TF Infrastructure Team to embed practice as part of the early help model follows:

a) Review their model of working with families to ensure alignment with the Early Help Strategy ethos and principles

b) Review their assessments to ensure that headline issues were identifiable

c) Review case closures and outcomes reporting to ensure outcomes were reportable

d) Identification of appropriate data sharing protocol

e) Discussion regarding approaches to worklessness

Delivery Partner	Additional funding from TF core funding and PBR income	Ongoing development activity provided by TF Infrastructure Team
Connexions	None – within existing resources as part of overall remit.	Briefings with staff on how to identify appropriate cases
Disabled Children's Service	None – within existing resources as part of overall remit.	1:1 meeting's with staff to understand practice Briefings on TF, use of outcomes forms and Worklessness Support Offer Sharing of conversation tool Sharing of outcomes form to support identification of TF cases and
Early Help and Prevention: Children Centres and Family Support	Yes – average of 1.2m annually offset against overall budget, allocated to TF infrastructure team, frontline staff and management.	Briefings with staff team Outcomes workshop Development and launch of conversation tool to support assessment of needs in relation to worklessness Monthly briefing Redesign of LL to ensure system is outcome focused.
Education Welfare	Yes - 70k 2 x Family Support Workers to support families open to EWS.	Review of attendance format and development to ensure inclusion of prompts relating to all TF headline issues included Development of assessment tool to support exploration of wider family issues for staff to use on home visits Regular briefings at service meetings Worklessness Specific briefings for staff Recruitment of 2 x Family Support workers to provide timely support to families identified as having more complex needs
Early Help and Prevention: MST	Yes - 630k Expansion of 1 x MST CAN Team	Catch-up meetings with service manager to review progress and agree any development actions
Social Care	None – within existing resources as part of overall remit, however reconfiguration of early help services provided a joint work team for social care.	Sharing of Conversation Tool Briefings for staff on worklessness support Co-location of worklessness support team

Delivery Partner	Additional funding from TF core funding and PBR income	Ongoing development activity provided by TF Infrastructure Team
PFA	None – within existing resources as part of overall remit.	1:1 meeting's with staff to understand practice Development of new outcome for inclusion on TFOP to support PBR claims for this service
Early Help and Prevention: Targeted Youth Support	Yes – 99.4k Time limited funding for a dedicated post within the youth service to embed TF principles and the EHA model.	Worklessness Specific briefings for staff
Early Help and Prevention: Youth Offending	Yes – 120k Time limited funding for a dedicated post within the youth service to embed TF principles and the EHA model.	Regular catch-up meetings with TF Lead in YOS to agree development actions Briefings to staff on TF Briefings to launch conversation tool on worklessness support offer Co-location of worklessness support team
ADHD Solutions	Yes – 45k Specific contract to support families were a child has ADHD and they meet the TF criteria. Sept 18 – Mar 2020.	Briefings with staff on how to identify appropriate cases
Barnardos	None directly from TF - within existing resources as part of overall remit. However, there is a separate contract for 80k per year for bespoke support for young carers.	Sharing of conversation tool and agreement on referral route for support worklessness team
Leicestershire Partnership Trust	None directly from TF- within existing resources as part of overall remit. However, there is a separate contract for 10m per year for delivery of the Healthy Together Programme (Health Visiting and School Nursing).	Briefing with team manager to go through outcomes form and how it should be used Development of new outcome for inclusion on TFOP to support PBR claims for this service
UAVA	None directly from TF – within existing resources as part of overall remit However, there is a separate contract for 812k per year for bespoke support for families suffering from domestic violence.	Development of bespoke package of support from worklessness team for UAVA service users
National Probation Service	None - within existing resources as part of overall remit	Briefings for staff on Early Help
Derbyshire, Leicestershire, Nottinghamshire and Rutland Community Rehabilitation Company	None within existing resources as part of overall remit	Sharing of outcomes form with family details/needs
Turning Point	None directly from TF - within existing resources as part of overall remit However, there is a separate contract for bespoke supporting young people and adults with addressing and reducing their substance misuse.	Briefings for staff on Early help, TF and use of Outcomes form

3.4.4 Commissioning

In addition to using TF funding to support delivery partners in the programme, Leicester's approach to commissioning has involved both direct commissioning of activity and active contribution to the development of a divisional commissioning strategy. To date around £500,000 has been invested in commissioned services.

This approach broadly reflects national findings in relation to commissioning. In a survey of Troubled Families Coordinators undertaken by Ipsos MORI it was found that:

- Coordinators are generally satisfied with the commissioning process in their LA.
- Most are satisfied that it is based on an assessment of local needs and what works in practice (both 72%).
- However, they are slightly less satisfied that it is based on comprehensive and reliable data and that there is appropriate input from a range of agencies (62% and 58% satisfied).

Examples of commissioning activity to support families living in Leicester and the broad aims of Leicester's Early Help Model follow.

The Centre for FUN and Families

The Centre for Fun and Families is a Leicester based charity established in 1990. The objectives of the organisation are to assist and support parents, carers and teenagers who are experiencing behaviour and communication difficulties with their families.

Recognising the importance of working with local providers, Troubled Families funding has been used to commission the charity to deliver Living with Teenagers group work parenting programme; Living with Teenagers is a specialist targeted group work programme that is designed for parents and carers who are experiencing behavioural and communication difficulties with teenagers.

During the last two years the centre have delivered supporting anxious child group, working with parents to develop an understanding of the impact of anxiety experienced by teenagers. The charity is funded to deliver ten courses per year and each course is expected to reach a minimum of 90 families, to date over 600 families have received intervention. The programmes are delivered in cooperation with Children Centres and Schools and are delivered based on indicators of need identified through data that Early Help and Prevention gather. Post group evaluation consistently illustrates that parenting confidence is increased for 90% of all participants. Appendices 2 illustrates evaluation from a recent group delivery of Living with Teenagers.

> Voice of the Stakeholder
>
> *"Enjoyed the sessions & feel better knowing I am not alone. I feel since attending the group, my own behaviour & style of communication has changed & therefore helping to build a better relationship with my daughter."*
>
> Parent who attended Living with Teenagers course

Appendices 2 provides an example of an evaluation of a Living with Teenagers course delivery.

Safe Families

Safe Families for Children is a charity that operates across the UK working in partnership with Local Authorities to provide an effective intervention for families facing a crisis. Safe Families have a network of volunteers from across the community who are ready and trained to support families through befriending, providing short term respite and helping with resources and services. Safe Families mission is better outcomes for children and families, and they seek to achieve this through three key objectives:

- Stabilise families in times of crisis
- Prevent child abuse and neglect
- Reduce the flow of children going into care by 10%.

The Safe Families model is to offer a family in crisis a team of volunteers that can support them; each offer is unique depending on the needs of the family but can include:

- Host Friends – Approved homes that can offer to look after children over night from a couple of nights to a couple of weeks not exceeding 28 days. The overnight respite falls under section 17 short breaks legislation Children Act 1989
- Family Friends (to the parent, children or whole family) – Approved volunteers who come alongside the parents, children or whole family offering support, mentoring, befriending, fun activities, days out or anything else the support plan has agreed.
- Resource Friends – individuals who offer services or goods to support a family, such as DIY and gardening or white good and furniture.

Voice of the Stakeholder
Safe Families for Children was recently honoured to win the prestigious Family Award from the Centre for Social Justice. The award was given in recognition for connecting over 1,500 isolated families with volunteers in their community every year.

Safe Families said:
"We recognise that this award is only possible because of the partnerships we have with you in Leicester, along with the other 30 local authorities we work with across the country. We are hopeful that this award will bring with it some positive publicity and further recognition of the work of volunteers both locally and nationally"

Andy Cook, Chief Executive of the Centre for Social Justice think tank, said:
"The CSJ recognises Safe Families' compassion, generosity and efficiency in helping families to rediscover hope. Above all, those who work on the ground in often unforgiving situations deserve immense gratitude."

Appendice 3 provides a summary report of the intervention provided from July 2018 to March 2019.

Voluntary Action Leicestershire

Voluntary Action Leicestershire (VAL) is a charity that gets people into volunteering, helps community groups and organisations thrive and provides essential services. VAL has been part of the Voluntary and Community Sector (VCS) in Leicester and Leicestershire for over 50 years. Our work has always evolved with the times but kept local people at its heart.

Troubled Families funding was used to commission VAL from April 2015 – Dec 2018 to support workforce development for staff employed by the authority and associated partners to develop a greater understanding of Early Help as a way of working so that there is a greater understanding of what all organisations need to do to for their own early help offer to contribute to the local Early Help Model. To support this alongside improving practice and delivery, VAL:

- Delivered a range of events for staff such as briefing sessions, workshops, forums and training programmes (refer to page 37-38 for delivery detail)
- Linked to the councils Early Help web pages, hosted a range of webpages to provide information to support early help practitioners across the multi-agency workforce
- Work with the council's Early Help and Prevention Service to draft, disseminate and evaluate a monthly, multi-agency E-Briefing for Leicester based family workers and stakeholders.

Appendices 4 provides a summary report of the intervention provided for quarter April 18 – June 18

3.4.5 Supporting Families Towards or Into Work

Supporting families to make progress towards or into work was a focus in Phase 1 of the troubled families programme, however PBR claims could be made without progress to work having been achieved. For phase 2, with the requirement for outcomes to be achieved against every need identified, a significant strengthening of the approach towards addressing worklessness was needed to truly support transformation for families. It was also a mandatory requirement of the TF programme for it to be addressed when identified in every eligible case for PBR claims to be made.

The response to worklessness is well developed, although understanding the long-term impact of the support provided in relation to worklessness is under developed. Evaluating the impact of the support provided, it is clear that worklessness is often overlooked in order to ensure outcomes are met that appear to impact directly upon the safety of children. The focus has greatly benefited from partnership working between the City Council, DWP and the GREAT Project. A summary of the roles played within the partnership are shown in Table 4.

Key elements of the success of the approach to worklessness include:

The creation of a definition of progress to work
A definition of progress to work was developed and embedded within the family outcomes plan to support workers to understand the range of steps that can be undertaken by families in making progress to work. A list of activities graduating from basic steps to ensuring financial stability through to more involved activities such as volunteering, and training was created, using recognised progress to work steps accepted by the Job Centre Plus. Utilising this approach has ensured that sustained and significant progress can be measured and recognised for all families, regardless of their starting point.

The Conversation Tool
In recognition of the cultural change required to support workers in feeling comfortable discussing worklessness with families an assessment tool was developed. The 'Conversation Tool' was based upon a 'Work Readiness Assessment' and provides workers with a structure and language to use to discuss work and aspirations with families. The tool supports the identification of steps that can be taken in order to achieve 'progress to work' and in addition is accepted as a referral form for more intensive support from the either the Early Help Employment Advisors or GREAT Project. An anecdotal example of the impact of the conversation tool on the confidence of staff was a comment received by a Family Support Worker, a year after the tool was launched, that 'talking about work is easier than taking about crack cocaine.'

The Conversation Tool is now used by the vast majority of TF delivery partners.

The Triage Panel
The Triage Panel is held weekly and attended by both the EHEAs and GREAT to consider all referrals for support and make a decision regarding which team will pick it up. The advantage of this process has been:

- **Ease** – a completed conversation tool acts as the referral for both providers and means workers do not have to complete separate paperwork or consider eligibility criteria.
- **Families accessing the right support, first time** – the representatives of the two providers making decisions regarding who will pick up the case means that the provider with the most relevant support offer can pick the case up, capacity issues across the 2 providers can be taken into consideration and families ineligible for support from one provider will get picked up by the other
- **Increased capacity** – the joint working approach has vastly increased capacity meaning more families have been offered support. Since the Triage Panel started in May 2017, 556 referrals have been received of which 218 were allocated to an EHEA and 308 were allocated to the GREAT Project.

Table 4: Summary of the roles of the key partners in the Worklessness Support offer

DWP	City Council	GREAT Project
The DWP have supported phase 2 of the TF programme by providing 2 Early Help Employment Advisors (EHEAs) and 1 Early Help Employment Support Data Officer, who have made a significant impact by: • Working directly with families, • Supporting family workers across services to develop their skills and confidence in talking to families about worklessness • Provision of information, advice and guidance on specific cases to resolve issues in relation to benefit claims • Delivery of briefings and workshops to promote approaches to addressing worklessness • Development of tools and processes to support families to access support as required (see below) • Facilitating the sharing of information in support of identification of families eligible for inclusion on the programme and payment by results claims processes	Hosting of the DWP staff members: • Provision of work space and line management to staff Bespoke workforce development • Development of conversation tool, protocols and pathways • Multi-agency workforce development programme Strategic Partner of the GREAT Project: • Supporting the bid process • Supporting recruitment and development of staff to the project (e.g. assisting in interview days, providing group and 1:1 training as required) • Providing space with Children Young People and Family Centre's for GREAT Employment Advisors to operate from • Strategic oversight of the Project via the Early Help Strategic Partnership Board	A Big Lottery/ESIF funded Project providing support to families to make progress towards or into work: GREAT Project Employment Advisor's work 1:1 with family members to: • Identify and plan family member's journey towards employment or training goals, • Support family members to access a range of specialist provision via the Project's delivery partners The GREAT Project also provides a monthly update of progress to work steps achieved by families receiving support through the Project to support payment by result claims processing.

Cases referred to the Triage Panel

Year	Number of cases referred to Triage Panel	Number of cases referred to EHEA	Number of cases referred to GREAT
2017 - 18	246	94	130
2018 – 19	310	124	178

Please note: the number of cases allocated does not equal the number of cases referred to the Triage Panel. Some cases cannot be allocated – reasons include the family member already being in work, families moving out of area etc

Co-working and co-location.

The approach of the EHEAs and GREAT project has been developed to recognise and support the Early Help approach: the employment advisor will recognise the referrer as the 'key worker' and ensure the plan of work aligns with the wider aims of the families plan. This sits in line with the aim that families do not undergo multiple assessments or have to liaise with multiple professionals working independently of the other.

This is further supported by the co-location of EHEAs and GREAT Employment Advisors within Children's Centre's across the city which facilitates the sharing of information and advice and ensures families can access provision within their community.

Voice of the Stakeholder:
Joe Tuke Director, National Troubled Families Team

I was particularly impressed with the Troubled Family Employment Advisors seconded in from Jobcentre Plus and the way in which they've been integrated into your services - not only working effectively with individual families but in supporting other family workers to also provide families with the right kind of support and challenge about taking steps toward employment. The national Troubled Families Programme places huge importance on employment and upon the culture shift amongst non-specialist staff which has been a necessary pre-cursor to them having the kind of employment-related conversations which families deserve and which help them set and reach stretching but attainable goals. This is already a real strength of the programme in Leicester.

Feedback received following the May 2016 visit from the National Team

Worklessness, analysis of outcomes met

The following demonstrates the numbers of families attached to the programme through the early help model that have worklessness identified as an outcome, families that have achieved progress to work and fulltime employment.

Year	No. families with an adult on an out of work benefit	No. achieving Progress to Work	% of workless cohort achieving Progress to Work	No. achieving Continuous Employment	% of workless cohort achieving Continuous Employment*
2015 - 16	807	127	15.7%	135	16.7%
2016 - 17	813	122	15%	73	9%
2017 - 18	699	130	18.6%	22	3.5%
2018 - 19	288	54	18.75%	6	2%

* Please note:

Cases will be monitored for up to a year after intervention ends to identify families where benefit claims close due to employment It is recognised that the improvements made to the family functioning can lead to improved employment prospects, but it can take time to find work.

Once an adult moves off benefits and into employment, this must be maintained for up to 6 months to be counted as 'continuous employment'. The continuous employment numbers above do not reflect those in employment that have not reached the required maintenance period. Claims are made when progress to work steps are achieved.

Non-Case Work Activities Undertaken by the EHEAs over 2018 - 19

- Delivering presentations, workshops and training — 16
- Helping to prioritise families — 16
- Modelling work with families alongside key workers — 1
- Trouble shooting / providing advice and guidance — 49
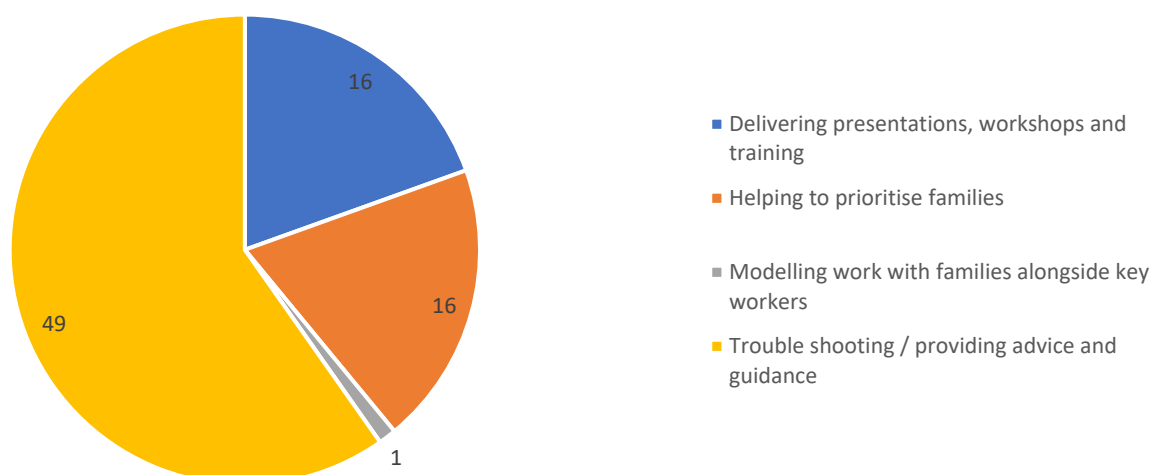
The EHEA's have invested in working with teams and individuals to ensure that messages about worklessness are understood. Bespoke packages have been established to support team development, in the last year 16 sessions were delivered. Delivery is provided upon request, across the partnership several teams have requested support, including CIN teams, education welfare, targeted youth service and the children centres and family support service. However, it is clear that delivery upon request is not having the desired impact, therefore, a far more systematic approach is required to ensure all teams receive support. Similarly helping to prioritise families which involves coaching individuals to support families and troubleshooting (answering all worklessness related questions) has only been accessed on 65 occasions with the capacity to access this more regularly.

In light of the above it is easy to see why the lack of progress to work is still the most common individual reason for being unable to make a payment by results claim and the results of the family survey, indicating that just work was part of the plan for just 48% of eligible families, shows that further work is required to make addressing worklessness a key part of family working, however significant progress has been made and good foundations have been laid on which to further progress.

A key plan for 2019-20 is to widen attendance at the Triage Panel to include other local providers of support. This will be particularly important if work is to continue post 2020 after the GREAT Project funding ceases (in August 2019) and Troubled Families Programme ends.

3.4.6 Self-evaluation using a distance travelled tool - The Rickter Scale

The Rickter Scale, a tool for assessing, a motivational, multi-sensory assessment and action planning process, designed specifically to measure soft outcomes and distance travelled, was rolled out across the Children's Centre and Family Support service in 2016 with a requirement to be used as part of all Early Help Assessments.

The tool is used to support families, parents and children to reflect on how they feel about a range of chosen topics (e.g. employment, accommodation, confidence) on a scale of 0 – 10 before the start of intervention, they are then asked to scale where they would like it to be in the future. This is repeated mid-way and at the end of the intervention. The process empowers the individual, encouraging them to see the 'bigger picture' and realise how different aspects of their life impact on each other. Through dialogue, families, parents and children can explore possibilities, make informed choices, taking responsibility for their own goals and set a realistic action plan. Periodically, progress can be measured, and goals reassessed.

The Children Centres and Family Support service within Early Help and Prevention use a range of boards to consider different aspects of a family's circumstance. For this evaluation, we have considered the 'Lifeboard' which measures a range of generic issues that may impact upon a family's circumstance and impact upon their motivation to change. Examples of this in practice are illustrated in the case studies that are included in the appendices.

The table below represents outcomes of assessments completed on 100 families supported by the council's children centre and family support service. From the information provided there is positive movement toward desired state across all headings (45.83% positive movement across all areas) with significant positive movement in relation to education/employment, relationships, alcohol and drug use.

Lifeboard	Baseline	Desired	Latest Review	Distance Travelled Baseline to Latest Review	% Movement Towards Desired State
Employment / Training / Education	4.3	8.3	6.0	1.7	42.5%
Accommodation	4.6	9.0	6.3	1.7	38.6%
Money	5.4	8.5	6.3	0.8	29%
Relationships	6.5	8.6	7.4	0.9	42.9%
Influence (R)	3.6	3.1	2.8	0.8	100%
Stress (R)	6.9	3.3	5.2	1.6	
Alcohol (R)	1.4	1.2	0.9	0.6	100%
Drugs (R)	4.2	2.2	3.0	1.2	60%
Health	5.6	8.5	6.8	1.2	41.4%
Happiness	5.6	9.2	7.1	1.5	41.7%
Average for all headings	5.59	8.23	6.80	1.21	

% Movement Towards Desired State Across All Headings: 45.83%
*heading (R), a positive measure is a reduction 10-0

Voice of the Stakeholder: Families

A survey of 60 families contacted 3 months after intervention from a delivery partner of the Early Help model had finished was undertaken between September 2018 and January 2019 to ascertain the families' view of the service they had received. The key findings of the survey are as follows:

Families' experience of service reflects the key principles of early help i.e.
- They had a named lead worker: 82% of respondents were able to name their main worker
- There was an action plan in place: 79% of the families surveyed stated that they had an action plan and of these, 90% felt they had been involved in putting the plan together and plans were given an average rating of 9.2 out of 10 for ease of understanding of the plan.

Worklessness is on the agenda but needs to be embedded further
- 48% of the respondents not already in work or retired stated their plan had involved actions about getting back to work.
- These families were receiving support from a range of agencies and examples of support provided include help to access training, ESOL classes, college, write a CV and visit the job centre. The range of practical support provided illustrates that worklessness is on the agenda, but with 52% of respondents indicating work was not included in their plan it is clear further work is required to make this a standard part of the support offered to families

Ongoing support is in place for the majority of families after formal intervention ceases
- 80% of respondents identified family/friends or named a specific agency they were receiving support from since the intervention had ceased. The remaining 20 % stated that no one currently helped with their family. It isn't clear from the survey the extent to which families need further support after intervention. It is envisaged that as the signs of safety approach becomes embedded in Leicester development of support networks to maintain changes made by the family should increase.

The majority of families were positive about the intervention they had received
- Levels of positivity regarding the changes that had been made were given an average rating of 8.1, although 13.5% of respondents gave a rating of 5 or less out of 10.

An average rating of 8.4 was given to the question 'how satisfied were you with the service you received on a scale of 1 to 10'? 16% of respondents gave a rating of 5 or less. Comments regarding how the service could be improved related to a need for more consistency during intervention, which upon further examination related to changes of lead practitioner, for example when intervention was stepped down from early help to social care.

3.4.7 Workforce Development

Workforce Development within the Social Care and Early Help Division (SCEH)
Within the Council's Early Help Service there is robust support for the development of a skilled and competent workforce:
- Regular supervision and annual appraisals inform learning and development needs across staff
- There has been a recent refresh and strengthening of a Workforce Strategy and Workforce Progression framework to launch an ASYE offer for newly qualified social workers, apprenticeship pathway for frontline staff and managers across SCEH and a comprehensive training programme informed by appraisals, serious case reviews and audit findings.
- A 3-year implementation plan to roll-out the Signs of Safety methodology began in 2018. This includes staff training, development of systems to align with the methodology and support practice and development of development opportunities such as reflective practice sessions to ensure the skills are embedded across the workforce.

Workforce Development within the Early Help and Prevention Service
Post remodelling there has been considerable investment in the development of all roles within the service focusing upon skills to enhance assessment and intervention, the three key delivery roles have all received training in three key evidence-based programmes. There are now a substantial number of evidence-based interventions which have good evidence of improving children's outcomes when they are offered in response to identified risks. Research conducted by Ipsos MORI illustrated that 62% of keyworkers working with troubled families use accredited programmes. The Early Help Institute state that approaches can support the four key domains of children's development: physical, cognitive, behavioural, and social and emotional. The institute also identify evidence-based programmes designed to meet need within each domain. Within the children's development the institute identify Parents as First Teachers (PAFT) has providing, good evidence of improving children's early language development and other cognitive outcomes, the Early Help service has invested heavily in the programme, training all Children Centre teachers. Focusing upon behavioural development, Triple P Parenting Programmes, provides good evidence of reducing child behavioural problems. All family support workers within Children Centres and Family Support have been trained to deliver Triple P to deliver individual support and a minimum of 18 Triple P groups across the city annually.

Multi-Agency Training Programmes
Across the partnership, multi-agency training opportunities have been made available via a multi-agency safeguarding training programme and the Early Help Multi-Agency Workforce Development Programme, both co-ordinated by Voluntary Action Leicestershire (VAL) (Please see Page 29 for more information about VAL). All the training is made available to all relevant services regardless of sector, via an online platform used specifically to promote training to local partners. From 2015 - 2018 the Early Help Programme facilitated more than 200 training sessions covering subjects including:

- Assessment skills
- Working with young women
- Mental Health Awareness
- What is Early Help?
- Having difficult conversations
- What is the lead professional?
- Liquid logic training

- Worklessness workshops
- Rickter Scale
- Change Readiness

The training was attended by a range of local partners (including Health, SEND, Housing, Community Safety and Education Welfare).

Quarterly evaluation reports provide evidence of impact and demonstrate that on the whole partners moved there understanding from a limited or average understanding to a very good understanding. Quarterly evaluations are reviewed by the Early Help Strategic Partnership Board and future training programmes are established based upon the outcomes of those discussions.

The Early Help monthly briefings are widely received by a range of partners on average the click rate is around 400-600 per month. The content of the briefings are diverse covering a range of subjects that relate to Early Help, below is an example of the content from Summer 2017:

• LLR LSCB Neglect Toolkit and Survey Audit
• A useful tool for the VCS - Liquidlogic Early Help Module (LLEHM)
• CARE SILVER (Prevent) - Confidently Addressing Radicalisation Extremism
• Free online training opportunities - Child Sexual Exploitation (CSE) | Female Genital Mutilation (FGM)
• Rutland County Council Early Help Youth Service Support Programme
• LSCB Safeguarding Learning Event: Neglect, Learning from Reviews and Child Sexual Exploitation
• Get to know the GREAT Project – open day invitation
• The Inspire Project (youth project)
• Multi-agency ADHD awareness training

Note: The 2019 – 2020 workforce development programme will be delivered by Leicester Safeguarding Childrens Board.

Early Help Schools Guide
Leicester Education Strategic Partnership (LESP) established an Early Help Task and Finish Group comprising partners from Primary Schools, Secondary Schools and the Local Authority to identify how to support schools to understand and engage with the Early Help agenda. It was agreed that an Early Help guide would be created that would establish a set of 'Early Help commitments' and the activities required by schools to ensure they are up-to-date and engaged with the early help agenda.

To ensure that the guide reached all local schools and was understood, funding was sought and granted from the LESP for Early Help to commission a consultant, with specialist knowledge of the education sector, to launch the guide (Please see Appendices 5) and undertake visits to each school and college across the city to support the implementation, of the guide. To date 60 schools have engaged with the delivery, 29 out of the 60 schools have now published their early help offer on line. To date 27 visits have been made to audit the quality and content of each school's early

help offer, the audits are showing that schools have developed a greater awareness of early help and have robust offers in place. Although the work of the consultant as now ceased, the Troubled Families Programme Manager is now working with the Closing the Gap group (formally LESP) to ensure that there is a continuation of the work so that all schools have a published early help offer.

The guide details four core elements of a school's Early Help Offer:

- Pupils, parent/carers and staff are clear on the early help offer available through the school
- Partners, working to support families alongside schools have clarity regarding the early help offer of schools; supporting effective multi-agency working
- They are up-to-date with and part of local and national approaches to the delivery of early help support for more vulnerable families
- They have evidence of their commitment to the personal development and wellbeing strand of the Ofsted Framework

Whilst it is acknowledged that schools will be able to provide and support early help principles it is also recognised that schools may require ongoing support to assist in delivery. To address this need further support is available from LCC's Early Help Service, supported by a team of Early Help Coordinators. The coordinators are placed to provide schools with guidance in relation to thresholds and pathways, support the completion of assessments aligned with Early Help principles and will establish networks that will empower schools to support each other. Support from the Early Help Coordinators such as troubleshooting in accessing Liquid Logic, good practice templates for Early Help Assessments, advice etc is available through a range of mechanisms.

Voice of the Stakeholder: Frontline Workers

A survey of frontline workers from the council's Early Help and Prevention Service which is comprised of the Children's Centre & Family Support Service, Youth Offending Service, Multi-Systemic Therapy & Function Family Therapy Teams and Youth Service was undertaken in December 2018 to ascertain their views with regards to the transformation of services in Leicester City. The headline findings of the survey are as follows:

Training is well valued, but work is required to ensure consistency of opportunity and the embedding of workforce development

- Staff reported that training received had been delivered 'at the right time' and 'relevant to practice', citing a range of training including evidence-based practice and opportunities from partners.
- A common theme regarding how training could be improved related to part time working and workload being a barrier to training and administrative staff feeling there was no training of relevance available to them

Workers understand family working but are still unsure regarding information sharing

- 98% of respondents indicated they recognised the principles of family working and were focussed on family assessment, action plans and outcomes in their work
- 92% of respondents indicated that they work with other agencies to achieve shared priorities for family work
- The responses to the survey show that workers are not fully confident with regards to information sharing. Issues cited related to not knowing who the right or 'correct' person is to speak to and the level of detail to be shared, rather than being unsure of sharing information due to consent-based issues. This is a typical issue that replicates national findings.

Workers feel well supported but feel opportunity for progression is lacking

- Workers clearly understood the impact of their work and were able to cite a range of methods they utilise to assess this
- 80% of workers felt 'supported and have regular development reviews, peer support opportunities and opportunities for reflective practise development'. Comments received reflect the commitment of the authority to the on-going development of staff
- 63% of respondents felt that 'promotion opportunities are few', however comments suggest that workers view of progression is quite siloed, indicating that progression is not viewed as being linked with integrated working.

4. Performance to Date

This section provides a summary of performance data available to date, in lieu of national evaluation findings that will be provided over the forthcoming financial year.

Table 5: Attachments and Payments by Results Claims for the Troubled Families Programme

TF Delivery Partner	2015 – 16		2016-17		2017-18		2018 - 19		All			
	Attachments	PBR Claims	Attachments	PBR Claims	Attachments	PBR Claims	Attachments (up to Feb 2019)	PBR Claims	Total Attachments	% of cohort allocated to service	Total PBR	% of attached cases resulting in PBR Claim
ADHD Solutions	1		1		1		71	49	74	2%	49	66%
Barnardos	2		5		6		40	2	53	1%	2	4%
Connexions	3						72	37	75	2%	37	49%
DCS							78	7	78	2%	7	9%
Early Help	377	32	362	78	219	160	149	151	1107	28%	421	38%
Education Welfare Service	227	5	302	29	185	49	6	58	720	18%	141	20%
Leicestershire Partnership Trust	1	1			1		1		3	0%	1	33%
MST	33	5	19	7	10	10	11	10	73	2%	32	44%
PFA							44	19	44	1%	19	43%
Social Care	290	8	320	17	352	86	280	286	1242	31%	397	32%
Targeted Youth Support	27		26		2		59	28	114	3%	28	25%
UAVA	5		3		1		197	12	206	5%	12	6%
YOS	28	2	35	14	37	20	36	14	136	3%	50	37%
Other	11	1	38		32				81	2%	1	1%
	1005	54	1111	145	846	335	1044	678	4006	100%	1197	30%

This table above illustrates the most basic of success measures for Leicester's TF Programme: a summary of the numbers of families attached to the programme and number of PBR claims made the table shows:

- Approximately 1000 families have been attached to the programme each year (with the exception of 2017-18, bringing the total number of attachments (as at Feb 2019) to 4006, exceeding Leicester's target of 3940
- 77% of families attached have been supported by council services: Children Centres and Family Support, Education Welfare Services or Social Care
- For the first 3 years of the programme, families were predominantly attached to just 6 city council services – Children Centres and Family Support, Education Welfare Services, Multi Systemic Therapy, Social Care, Targeted Youth Service and the Youth Offending Service
- New partners brought onboard during 2018-19 led to the TF cohort being spread across a much broader range of providers
- At this rate of attachment, it is expected that 6000 families will have been identified and attached by March 2020
- PBR claim numbers have increased year on year:
- 211% increase in claims between year 1 and 2
- 314% increase between year 2 and 3 (service transformation implemented)
- 186% increase between year 3 and 4 (service transformation embedded)
- A total of 3,940 claims can be submitted over the life of the programme, which equates to £3,152 000 of available funding
- 1,416 claims have been made to date, equating to £1,416,000 of funding already claimed and a further £1,736,000 still available to claim - this would require a 200% increase in claims from year 4. At the current claim rate, we are projecting that we will achieve a claim rate of 1,379 claims in 2019-20 which equates to £1.1m by March 2020.
- The 3 services with the highest claim rates (ADHD solutions, Connexions and MST) account for just 5% of the TF cohort. However, these services are specialist in nature using an intensive bespoke approach working with fewer families.

The 3 services with lowest claim rates (Barnardos, DCS and UAVA) are all newer partners to the programme and the claim rates are reflective of the a number of factors including only sharing data on new cases and therefore insufficient time passing for cases to have become claimable, sharing of historical data, yet to fully processed by the TF team (at the time this data was collected) and outcomes data not yet having been shared for all cases.

Table 6: Non-Claimable Cases for the Troubled Families Programme 2015 – March 2019*

TF Delivery Partner	Total Number of non-claimable cases	% of attached cases resulting in 'no-claim'	Moved out of area		No Assessment/ Action Plan		No Evidence of Intervention		Non-engagement/ Withdrawn Consent		Not Eligible		Other		Outcomes Not Met		Restricted Record		Work Outcome Not met		Not Specified	
			Number of cases	% of non-claimable cases	Number of cases	% of non-claimable cases	Number of cases	% of non-claimable cases	Number of cases	% of non-claimable cases	Number of cases	% of non-claimable cases	Number of cases	% of non-claimable cases	Number of cases	% of non-claimable cases	Number of cases	% of non-claimable cases	Number of cases	% of non-claimable cases	Number of cases	% of non-claimable cases
ADHD Solutions	1	1%			1	100%																
Barnardos	1	2%													1	100%						
Connexions	2	3%			1	50%					1	50%										
DCS	16	21%									16	100%										
CCFS	548	50%	25	5%	34	6%	9	2%	130	24%	64	12%	3	0.6%	148	27%	9	1.6%	126	23%		
Education Welfare Service	391	54%	12	3%	136	35%					29	7%			71	18%	1	0.3%	141	36%	1	0.3%
MST	15	21%	3	20%											4	27%			7	47%	1	6.7%
PFA	18	41%	4	22%							6	33%			4	22%			3	17%	1	5.6%
Social Care	474	38%	63	13%			9	2%	17	4%	80	17%	5	1.%	94	20%	10	2.1%	190	40%	6	1.3%
Targeted Youth Support	76	67%	6	8%	11	14%	3	4%	31	41%	5	7%			10	13%	1	1.3%	9	12%		
UAVA	23	11%	18	78%			1	4%											4	17%		
YOS	57	42%	6	11%	6	11%			3	5%	2	4%			22	39%	1	1.7%	16	28%	1	1.7%
All	1622	41%	137	8%	189	12%	22	1%	181	11%	203	13%	8	0.5%	354	22%	22	1.4%	496	31%	10	0.6%

*There may be more than one reason why a case is not claimable.

[1] The number of projected claims includes the number of cases already identified for submission and subject to audit plus the expected the number of cases still to be identified in advance of the submission deadline.

[2] Cases resulting in no pbr are cases where there is no possible opportunity to make a PBR based on the most recent intervention. Reasons include: outcomes not being achieved; work outcome not achieved (i.e. all other outcomes were met but progress to work was not achieved); family moving out of area; disengagement/withdrawal of consent; no assessment or action plan; ineligible (i.e. further examination of the case found there to be less than 2 headline TF issues); other (e.g. significant change in family characteristics requiring closure of record and creation of new record to reflect new situation).

This data shows:

- Two of the three services with the highest no-PBR claim rate account for delivery of 49% of the TF cohort
- The most common reason for cases to be unclaimable are due to outcomes not being met (22%) and the work outcome not being met (31%).
- Achieving progress to work has been one of the biggest culture changes of the TF programme, which the data reflects, as do findings in the previous chapter. Despite development of the conversation tool to support the identification of needs and potential steps to work that could be undertaken by family members claiming out of work benefits and the availability of specialist employment advisors, it is clear further work is required to reduce the number of cases being left unclaimable due to a lack of progress to work. Clear messages from management that this is the business of all people working with families are required together information and guidance to support workers to understand what 'progress to work' looks like.
- A relatively high number of cases (12%) were unclaimable due the absence of an assessment and action plan - the TF team reviewed and refined the process of attaching families to prevent cases lacking assessments and action plans being attached, however, due to issues relating to the manual processing of data and limited access to some data systems it is not always possible to ascertain with complete certainty that there is an assessment or action plan. E.g. for EWS, this information is collated within the attendance panel notes, however, where an attendance panel invite has been issued for an EWS case, it isn't possible to tell if the parent attended without checking each individual record - due to the intensive and time consuming nature of this task, it was decided to attach cases where attendance panel notices had been issued in good faith that would have taken place.
- A similar number of non-claimable cases were due to cases not being eligible for inclusion in the first place - this is an issue that has largely been resolved with improved and more accessible case recording (e.g. movement from paper files to use of LLEHM)
- Non-engagement is another area of note, accounting for 11% of non-claimable cases and seems to be an issue and predominantly withdrawal after intervention has started. This will always be an issue whereby voluntary engagement and consent is required to work with families. The TF Infrastructure Team have refined their processes to avoid attaching families that have disengaged before work begins.

Table 7 - Achievement of Outcomes

Nationally in the 19 – 24 months after families joined the programme compared to families in the comparison group: children looked after are reduced by 32%, Juvenile convictions are reduced by 15%, Adult custody is reduced by 25% and those seeking employment is reduced by 11%. (Please see appendices 6). Within Leicester City this table illustrates the percentage of outcomes met in all areas have increased which would have a direct impact upon the presenting issues identified above.

Specifically, the table shows that:
- With regards to offending behaviour, domestic abuse, children in need of help, children not attending school and adults moving into continuous employment, there has been an increase in the overall achievement of outcomes in relation to these headline issues over the 3 years.
- With regards to achievement of progress to work/NEET/financial exclusion the overall level of achievement has remained the same, with a dip in 2017-18. This reflects findings throughout the report that addressing worklessness is one of the biggest challenges for services leading TF cases which is also reflective of the national findings.
- With regards to families with health problems, whilst there has been an overall increase in the achievement of outcomes, there was a decrease in the 2nd year this data was collected which may be reflective of the cohort of families supported as there are no apparent contributing factors over this period.

Measure	At March 2017	At March 2018	At March 2019
Parents and children involved in crime and anti-social behaviour	% of cases where offending outcomes achieved	% of cases where offending outcomes achieved	% of cases where offending outcomes achieved
Offending by all minors in the family reduced by 33% in the last 6 months	**46%**	**68%**	**73%**
No family member has been subject to an ASB intervention in last 6 months	Of 243 individuals worked with where youth offending was identified as a need, 112 showed a reduction in offending.	Of 316 individuals worked with where youth offending was identified as a need, 215 showed a reduction in offending.	Of 410 individuals worked with where youth offending was identified as a need, 300 showed a reduction in offending.
Families affected by domestic violence and abuse	% of cases where DV outcomes achieved	% of cases where DV outcomes achieved	% of cases where DV outcomes achieved

	% / details	% / details	% / details
Incidents of DV/SV have reduced in severity during the period of intervention compared to the 6-month period prior to start.	**51%** 380 cases have triggered for 'DV' End of intervention reports received for 127 of these families indicate 65 families have achieved one of the DV outcomes detailed opposite	**55%** 679 cases have triggered for 'DV' 469 of Cases completed/ processed report 257 of these families have achieved one of the DV outcomes detailed opposite	**68%** 1208 cases have triggered for 'DV' 875 of Cases completed/ processed report 599 of these families have achieved one of the DV outcomes detailed opposite
Adult victims and children in the family report a greater ability to keep themselves safe			
The impact of historic DV/SV is reduced for victim and children			
Children in need of help	% of cases where children in need outcomes achieved	% of cases where children in need outcomes achieved	% of cases where children in need outcomes achieved
Family needs are met or being managed by services as appropriate	**39%** 556 cases have triggered for 'children in need of help' End of intervention reports received for 76 of these families indicate 30 families have achieved one of the children in need of help outcomes detailed opposite	**55%** 1335 cases have triggered for 'children in need of help' 708 of cases completed/ processed report 290 have achieved one of the children in need of help outcomes detailed opposite	**71%** 2408 cases have triggered for 'children in need of help' 1671 of cases completed/ processed report 1179 have achieved one of the children in need of help outcomes detailed opposite
Family no longer requires Social Care involvement			
Parents/carers have improved parenting skills sufficiently to enable them to handle problems that might arise in the future.			
Child not attending school	% of cases where education outcomes improved	% of cases where education outcomes improved	% of cases where education outcomes improved
All school age children have a school place and attend at least 90% of			

possible sessions on average across three consecutive school terms.	**15%**	**34%**	**50%**
Each child in the household has received less than 3 fixed term exclusions in the last 3 consecutive terms and less than 10 school days of fixed term exclusion during this period	Of 1192 children identified as 'not attending school', 184 have achieved one of the education outcomes detailed opposite	Of 1661 children identified as 'not attending school', **572** have achieved one of the education outcomes detailed opposite	Of 1790 children identified as 'not attending school', **900** have achieved one of the education outcomes detailed opposite
School leavers who were persistently absent or had multiple exclusions are in Education Employment or Training.			
Families with health problems	% of cases where health outcomes were achieved	% of cases where health outcomes were achieved	% of cases where health outcomes were achieved
Adults and children have access to, and engage with health services, as appropriate, to meet their health needs.	**56%**	**46%**	**64%**
	717 cases have triggered for Health	1042 cases have triggered for Health	1522 cases have triggered for Health
Adults & children report improved health & well-being at the end of intervention.	End of intervention reports, received for 218 of these families indicate 122 families have achieved one of the health outcomes detailed opposite.	797 of cases completed closures/processed indicate 369 families have achieved one of the health outcomes detailed opposite.	1225 of cases completed closures/processed indicate 778 families have achieved one of the health outcomes detailed opposite.
Adults & children have reduced or cease their harmful alcohol and/or drug use at end of intervention.			
Adults on out-of-work benefits, Young People who are NEET, families at risk of financial exclusion	% of cases where work outcomes were achieved	% of cases where work outcomes were achieved	% of cases where work outcomes were achieved
An adult in the family has moved off benefits and into continuous employment	**7.1%**	**9%**	**10%**
	Of 1485 families worked with where an adult was identified to be on an out-of-work benefit,	Of 2155 cases triggered for an adult being on an out-of-work	Of 2643 cases triggered for an adult being on out-of-work

	106 have achieved continuous employment	benefit, **198** have achieved continuous employment	benefit, **254** have achieved continuous employment
An adult in the family is taking steps towards work	**34%**	**29.5%**	**34%**
Young people in the family are in Education Employment or Training.	1613 cases have triggered for Work/NEET/Financial Exclusion	2281 cases have triggered for Work/NEET/Financial Exclusion	2825 cases have triggered for Work/NEET/Financial Exclusion
The family feel more confident in managing their finances and have accessed services in relation to debt and budgeting, as appropriate.	End of intervention reports, received for 304 of these families indicate 103 families have achieved one of the work outcomes detailed opposite: 91 of these cases relate to an adult on an out-of-work benefit achieving 2 or more steps towards employment.	Cases completed closures and/or processed report 674 have achieved one of the work outcomes detailed opposite or into work (as above)	Cases completed closed and/or processed report 969 have achieved one of the work outcomes detailed opposite or into work (as above)

Nb. The outcomes achieved are directly linked to what was identified as an issue at the start of intervention therefore could be just one or all measures. For example, if non-school attendance and exclusions were both identified at the start of intervention, they would need to be an improvement in school attendance above 90% and less than 3 fixed term exclusions in the last 3 consecutive terms and less than 10 school days of fixed term exclusion during this period.

4. Performance Analysis April 2015 – March 2019

To evaluate the performance of the Early Help Model on families identified as TF, analysis for has been carried out from the Corporate Service Transformation Team in three main areas:

- The continuing needs of families following intervention, i.e. has TF had an impact on the level of need experienced by families
- Re-referral rates i.e. has the model had an impact on the number of referrals to other services in the short-term following intervention and therefore met the needs of the family at the time of intervention
- Population Comparison i.e. has the model and offer had an impact on the overall population to reduce the number of the most complex / acute cases

The following sections show the results of this analysis.

4.1 Change in lead service rates

This section identifies changes in the lead service to families attached to the TF Programme. Once a family has been identified as eligible for inclusion on the programme, their details are included on the troubled families' database and tracked over time: where the case passes between agencies, for example from education welfare to Early help, the change in lead with be identified on the database.

This section presents information on the timescales applicable to these changes in lead.

For the purposes of this section, the number of changes in lead has been used as a measure rather than the number of cases / families.

Three-time frames have used to measure this:
- Within 6 months of intervention
- Between 6 & 12 months of intervention
- Over 12 months between referrals

Furthermore, changes in lead have been analysed for different cohorts of families as follows:
- All families with the troubled families programme
- Those families which are classed as Child in Need i.e. have had a social care intervention
- Those families with children subject to a Child Protection Plan
- Those families with children who are looked after LAC
- The following table shows the results of this analysis:

The findings are shown in table 8, which illustrates that:
- For all cohorts, 70% of changes in lead agency (18%/26%) occur within 12 months of the start of intervention.
- For all cohorts the highest level of change in lead agency occurs within 6 months of intervention start
- Cohorts with more acute / complex needs (attributed by the level of intervention) are more likely to have a change in lead, however this change occurs over a longer time frame.

Change in Lead Service Rates In Brief

Families attached to the programme are tracked over the life of the programme. As families move between services, their records will be updated to reflect the new lead agency.

Examination of the data regarding change in lead service shows that where a family moves between services, this occurs relatively quickly (within 6 months) and families with the highest level of need are more likely to experience a change in lead.

This demonstrates efficient multi-agency working with cases moved on to more appropriate services as need increases or decreases in a timely fashion.

Table 8: Change in lead agency rates over time elapsed from start of intervention

		Within 6 months	6 - 12 months	Sub-Total	Over 12 months	Grand Total
Overall	Number of Changes in Lead	579	296	875	411	1286
	% of changes in lead	12%	6%	18%	8%	26%
	Total cohort	4992				
CIN	Number of Changes in Lead	160	226	386	546	932
	% of changes in lead	5%	7%	12%	17%	29%
	Total cohort	3200				
CPP	Number of Changes in Lead	87	108	195	279	474
	% of changes in lead	3%	3%	6%	8%	14%
	Total cohort	3347				
LAC	Number of Changes in Lead	39	50	89	135	224
	% of changes in lead	7%	9%	15%	23%	38%
	Total cohort	585				

At the time of writing this report, it has not been possible to produce a comparison statistic showing a 'normal change in lead rate' due to the method by which data is captured. However, the evidence suggests that given the relatively high change of lead agency rates in the short-term following commencement of intervention, this is demonstrating efficient multi-agency working with cases moved on to more appropriate services as need increases or decreases in a timely fashion.

The table below shows the percentage of households who identified as having one or more needs as outlined within the Troubled Families criteria:

Crime	Education	In need of help and protection	Work	DV	Health
386	1642	2200	2626	1077	1510
10%	43%	57%	68%	28%	39%

*Some families have more than one need
Of the TF cohort, approx 50% of the families had at least two of needs above, followed by almost 30% having three needs.

4.2 Continuing Need

This section examines family's needs over the series of interventions that have been provided. In order to carry out this analysis, needs have been linked to the provision that has been made and ranked to provide an order of magnitude of acuteness of need.

Table 9 shows the levels of need attributable to each service with Tier 1 being the most acute and Tier 3 being the least acute:

Continuing Need In Brief

By examining the level of support received over the course of the intervention received by a Family, we can see that family's needs reduce over time.

Table 9: Assumed tier of need based upon service intervention

Tier 1	Tier 2	Tier 3
Social Care	Children's Centres & Family Support Multi Systemic Therapy	ADHD Solutions Barnardos Connexions Disabled Children's Service Education Welfare Service Leicestershire Partnership Trust Persons from Abroad School

This tiered system has then been applied to all families identified as Troubled Families and subsets within them to demonstrate the impact on families' needs that services are having. The following groups have been analysed:

- All cases within Troubled Families programme
- Cases where there has been no PBR claim
- Cases which have had social care involvement and there has been a PBR claim made
- Cases which have had social care involvement and there has not been a PBR claim made

The graphs in figure 1 show the continuing need analysis over involvements for these cohorts. Reducing need indicates a closure of the case or follow-on intervention at a lower tier of need, increasing is the converse of this and no change indicates a case that continues at the same tier of need.

The graphs show that for all cohorts there is evidence that through interventions with Troubled Families their **acuteness of need is reducing over time.** As an example, from the table below, 81% of families either ceased having a need after one intervention or reduced their needs as they moved into the second intervention which would suggest the intervention provided was the right one, 11% of families had more needs with 9% continuing to have the same level of need before moving into the second intervention which would suggest the intervention was not working. The following table shows this in percentage terms for all TF cases:

Table 10: Percentage of cases under each direction of need by intervention

	Int 1	Int 2	Int 3	Int 4	Int 5
Reducing	81%	78%	80%	83%	89%
Increasing	11%	14%	11%	14%	0%
No change	9%	8%	9%	3%	11%

Figure 1: Direction of need between interventions

The vast majority of families who had intervention support evidenced reducing their needs regardless of achieving a PBR claim as per the outcomes framework
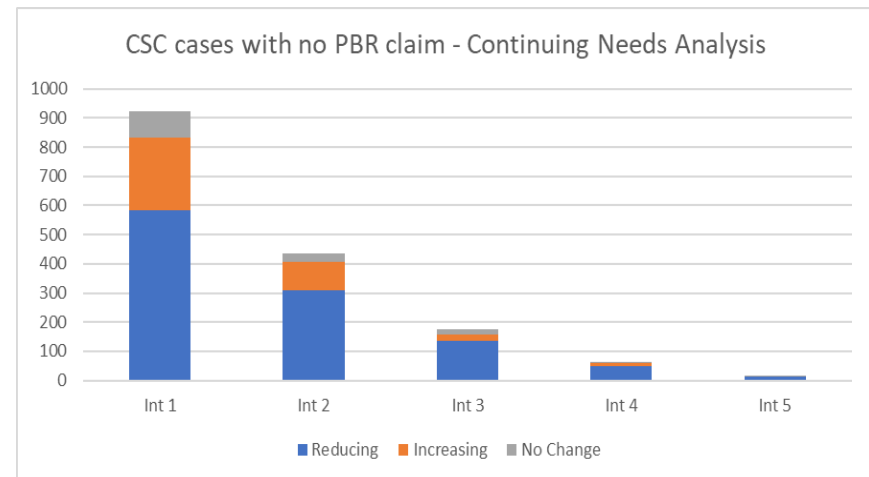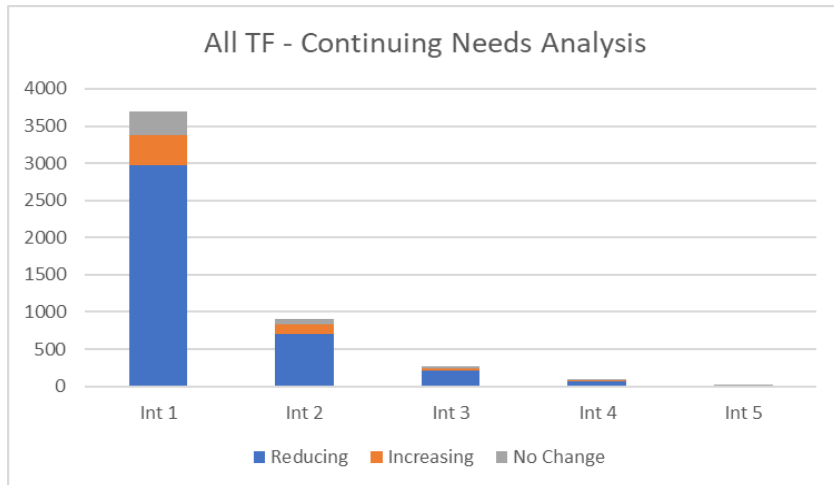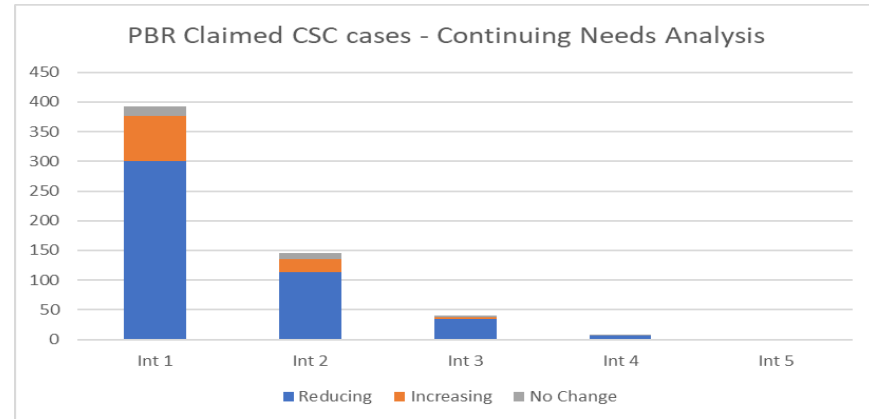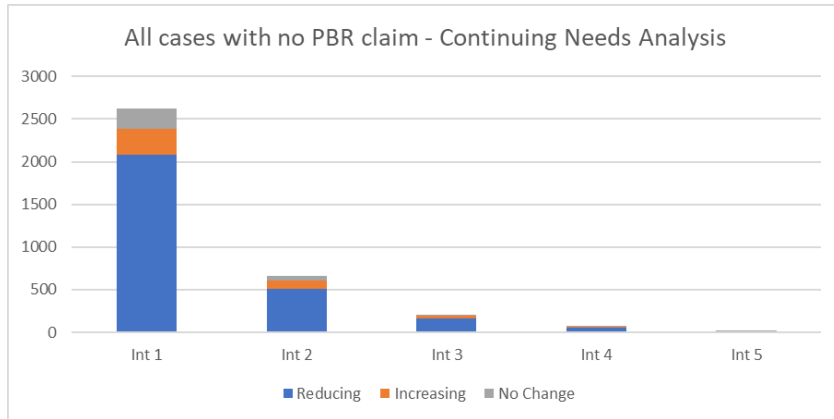
4.3 Population Comparisons

This is a measure that has been used in the Ministry for Housing, Communities and Local Government publication "Supporting disadvantaged families: Annual report of the Troubled Families Programme 2017-18". This compares the proportion of families within the TF programme subject to a set of need indicators with a comparison group of families with similar characteristics, measured prior to the commencement of the TF programme. The principle is that this is a proxy measure for showing the impact of TF against the needs of the children's population.

The need indicators used for this comparison are:
- Children In Need (CIN)
- Children with Chid Protection Plans in place (CPP)
- Looked After Children (LAC)

The following tables show results of this for the comparator group:

Table 11: Comparison Group proportions

Children in Need	Comparison Group
0-6 months before intervention	32.3%
0-6 months after intervention	32.7%
6-12 months after intervention	30%
Percentage point change before and after	-2.4%
Percentage change before and after	-7.3%

Looked After Children	Comparison Group
0-6 months before intervention	0.2%
0-6 months after intervention	0.9%
6-12 months after intervention	1.2%
Percentage point change before and after	1.0%
Percentage change before and after	424.3%

Child Protection Plans	Comparison Group
0-6 months before intervention	5.5%
0-6 months after intervention	8.1%
6-12 months after intervention	6.8%
Percentage point change before and after	1.3%
Percentage change before and after	24%

The tables above show that for this comparison group:
- 32.3% of children were identified as CIN prior to attachment to a Troubled Families style programme
- 0.2% of children were identified as LAC prior to attachment to a Troubled Families style programme
- 1.2% of children were identified as CPP prior to attachment to a Troubled Families style programme

The above comparator group has been measured over a time period of 18 months which has not been possible to recreate with the data available locally and a snapshot of data as at December 2018 has been used instead to compare.

Figures for LCC and comparisons are shown in the table below. It is known however that this comparison group was measured in 2015 and so the 6-12 months after intervention figure from the tables above have been used to compare, it being the closed approximate date to the collection of LCC data.

Table 12: Comparison of LCC proportions to comparator group

Status	Comparison Group	LCC TF	% point change	% change
CIN	30%	28.85%	1.15%	3.8%
CPP	6.80%	14.77%	-7.97%	-117.2%
LAC	1.20%	1.95%	0.75%	-62.3%

Because the above table is based upon a snapshot rather than over time, it is not possible to draw conclusions against the performance of TF. The national report was taken from a study over 18 months. It is suggested that this measure is retaken in 3 – 6 months' time which will allow more conclusions to be drawn regarding the impact of TF.

However, the table above does indicate that:
- The LCC TF programme is prioritising those with the most complex / acute needs in that the proportion of LAC and CPP are both higher than the comparison group
- The LCC TF programme cohort is comparable in terms of proportion of CIN cases with the national comparison group

As a summary of the above, statistical analysis has shown that:
- There is strong supporting evidence that TF programme is having an impact to reduce the severity and acuteness of needs of families over time and by extension therefore having an impact on the number of social care cases that are being referred
- The evidence suggests that given the relatively high change of lead agency rates in the short-term following commencement of intervention, efficient multi-agency working is in effect with cases moved on in a timely fashion
- Evidence suggests that the families with the most acute / complex needs/higher cost are being prioritised for inclusion in the TF programme.
- The throughput of cases is good with families accessing the right intervention at the right time with less cases becoming stuck.

4.5 Notes on Data Quality
The data for identifying and tracking troubled families is stored on numerous different systems around different Leicester City Council departments. The Troubled Families team makes every attempt to ensure that the data for families on its own tracking systems are as up to date and as accurate as possible.

Due to the incompatibility of the various systems from where this data is collected, it is unavoidable that inconsistencies will appear in the data in terms of the various interventions of different agencies.

Social Care data is obtained from Liquid Logic which also makes it difficult to match people into 'family' groups as it works very much on an individual level. Again, this can cause inconsistencies when trying to track referrals.

Despite the difficulties encountered, every effort is made to ensure that data kept by the Troubled Families team is maintained to an as accurate as possible standard.

5. Conclusion: The Early Help Service Transformation Maturity Assessment

The Early Help Service Transformation Maturity Model was first published in November 2016 by the Department for Communities and Local Government to provide a clear explanation of what was meant by 'service transformation' alongside measurable indicators of progress to support local authorities to undertake a self-assessment of their progress towards 'maturity' within their early help model and offer. The assessment initially offered as guidance became a mandatory requirement for all local authorities, with an expectation that assessments be undertaken annually and accompanied by an action plan detailing next steps.

The initial self-assessment for Leicester was undertaken in September 2017 via desktop analysis of the structures, processes and performance of the early help partnership, establishing a baseline picture of service transformation.

A subsequent assessment was undertaken during December 2018-January 2019 and utilised a range of methods to gather contributions from across the partnership. This included focus groups, interviews, surveys and questionnaires from a range of stakeholders including families, frontline workers, managers of delivery services, senior managers within Leicester City Council, including the Strategic Director for Social Care and Education and Chief Operating Officer and Strategic Boards such as the Early Help Strategic Partnership Board and Early Help Locality Partnership Boards: at least 160 individuals contributed to the assessment. The findings of which have been included in this report

The transformation strands, scope of assessment and self-ratings for the 2 assessments are shown in table 12 and show that over period between the two assessments, Leicester's Early Help Partnership has progressed and moved closer to 'mature' across all strands except for the families experience of service, which wasn't rated in 2017 and delivery structures and processes for which the ratings have remained the same.

A review of the evidence provided for the most recent assessment would suggest that the following factors had the most significant impact on the progress achieved:

- **Time:** the 2017 assessment refers to several structures (e.g. the Early Help Partnership Allocations Hub) that had recently been established. The passage of time enabled the embedding of these structure, supporting transformation. Furthermore, the accumulation of performance data supports the evidence of impact and service transformation.
- **Recovery:** being placed in recovery from the national TF team led to increased scrutiny from the most senior levels of management within the local authority which has raised the profile of the agenda across management levels. Furthermore, 'recovery' supported a reframing of the conversation regarding the 'troubled families programme' from 'what's in it for me' to a focus on potential lost income that would be used to support local families.
- **Restructuring the meeting schedule of the Early Help Strategy Board**: by alternating between business meetings focussing on programme governance and 'deep-dive' sessions

focusing on the partnership's contribution to the 6 headline areas of need identified under the troubled families programme, increased understanding and buy-in to the programme has been developed across the wider partnership of early help providers in the city.

- **Health Check Meetings:** regular meetings with agencies delivering early help services as TF leads to provide scrutiny and challenge led to a quick and significant impact on service transformation.

Table 13: The Early Help Service Transformation Matrix – Summary of Assessment Criteria and Self-Assessment Ratings
Possible ratings: Early, Developing, Maturing or Mature

Strand	Scope	Self-Assessment Rating September 2017	Self-Assessment Rating January 2019
The Families' Experience of Transformed Services	- Services integrated around families – and having one person focusing on the family rather than several (one worker). - Recognition from services that individuals are operating in the context of a family and so need to be dealt with as such (one family). - Focus across all relevant services on what the family needs to change and a common endeavour around families (one plan).	No rating	Developing
Leadership	- Focus on services that best meet local need - Commitment from leaders across partners to outcome-focussed, whole family working, which may include collaborative commissioning processes and shared or pooled budget arrangements - Understanding of demand management, using evidence and analysis to anticipate and manage future demand locally - Appreciation of links to wider local and national transformation programmes, including adult social care and health integration and reform of children's services	Developing	Maturing
Strategy	Evidence of clear strategic commitment by all local partners to: - deliver integrated family-focussed, outcome-based services; - commission services based on sound evidence of what works, working collaboratively with partners and service users on service design and delivery; - prioritise and commission services that manage future demand using data to measure and forecast demand on services; and - use cost-benefit analysis to understand the effectiveness of local services and act on the results.	Early	Maturing
Culture	- Principles that underpin meaningful system and cultural change, communicated clearly across partners and to the community in a way that is accessible and meaningful - staff taking personal responsibility and ownership to ensure they work across boundaries to support families effectively	Developing	Maturing

Strand	Scope	Self-Assessment Rating September 2017	Self-Assessment Rating January 2019
Workforce Development	• Understanding of the principles of family working (family intervention factors) – a focus on a whole family assessment and family plan and an understanding of the impact of their work • Access to the right training at the right time • Ability to use sound evidence-based, outcome-focussed practice and learning from their own experience as well as from peers • Staff supported by appropriate organisational structures with sound governance arrangements alongside supervision arrangements, performance monitoring and promotion opportunities • cross-partner workforce training plans and commitment to shared resources	Developing	Mature
Delivery Structure and Processes	• Commitment by partners to deliver integrated working structures with sound evidence-based practice in place • Shared ambitions for outcomes for families, using the local Troubled Families Outcome Plan • Delivery structures that enable staff from different disciplines to work together to shared priorities and outcomes • High-quality whole family assessments in a shared format across partners • Agreed data sharing protocols supported at strategic and operational level • Shared data systems enabling identification and prioritisation of families needing help, monitoring of family progress and outcomes and cost benefit analysis of interventions	Developing/ Maturing	Developing/ Maturing

5.1 Key Takeaway Points

The families being supported by early help delivery partners have a diverse range of multiple and complex needs. Families in Leicester require support from early help services in particular with parenting, housing, domestic abuse, mental health, managing debt and finances and developing resilience.

The city council early help services has played a key role in leading the transformation of services to deliver the programme effectively. The Early Help Assessment model has been key in ensuring a whole family multi-agency response is used to support families to become more resilient and meet their needs independently and with universal services.

More notably the impact on referrals to children's social care has been significant. There have been some excellent results evidencing the impact of this closer way of working has had to prevent families from requiring longer term statutory intervention at a higher cost. There has been a year on year increase with cases being stepped down from children's social care (CSC) to council early help services for families who no longer meet safeguarding thresholds but still require

support to address multiple issues and build resilience to meet their needs independently. (Refer to table on page 18)

Other key conclusions to note are:

a) **The experience for families is positive and outcomes are better**
   o Families were, in the main, positive about the intervention they had received with levels of positivity regarding the changes that had been made because of interventions were given an average rating of 8.1 out of 10.
   o An average rating of 8.4 was given to the question 'how satisfied were you with the service you received on a scale of 1 to 10'?
   o Families' experience of service reflects the key principles of knowing why services were involved i.e. 90% felt they had been involved in putting the plan together and plans were given an average rating of 9.2 out of 10 for ease of understanding of the plan.

b) **The workforce is more skilled and confident**
   o Within the council's services, there is robust support for the development of a skilled and competent workforce.
   o Across the partnership, multi-agency training opportunities have been made available which have resulted in the workforce reporting increased awareness of the TF programme and confidence to work in a new way using the TF principles.
   o Staff reported that training received had been delivered 'at the right time' and 'relevant to practice', citing a range of training including evidence-based practice and opportunities from partners.
   o Whilst it is acknowledged that schools will be able to provide and support Early Help principles it is also recognised that schools may require ongoing support to assist in delivery.
   o Workers understand family working but are still unsure regarding information sharing principles.
   o 80% of workers felt 'supported and have regular development reviews, peer support opportunities and opportunities for reflective practise development'
   o 98% of respondents indicated they recognised the principles of family working and were focussed on family assessment, action plans and outcomes in their work

c) **Senior managers are committed to a shared response but there is more to be done collectively**
   o There is a clear focus on integrated, whole family working.
   o Having an intense focused approach has had a positive impact on the level of commitment and buy-in to the programme.
   o 'Early Help' as a concept is not consistently understood across the management groups.
   o Managers feel there is a lack of coherent strategy underpinning the transformation agenda particularly around commissioning

d) **There is a robust approach to addressing worklessness, but this is not consistent across the partnership**
   o With regards to achievement of progress to work/NEET/financial exclusion the overall level of achievement has remained the same, with a dip in 2017-18. This reflects findings throughout the report that addressing worklessness is one of the biggest challenges for services leading TF cases. However, the approach to worklessness has been commended from the national team and will continue to be an area for development.
   o Feedback received following the May 2016 visit from the National Team, Joe Tuke Director, National Troubled Families Team stated: *I was particularly impressed with the Troubled*

Family Employment Advisors seconded in from Jobcentre Plus and the way in which they've been integrated into your services - not only working effectively with individual families but in supporting other family workers to also provide families with the right kind of support and challenge about taking steps toward employment. The national Troubled Families Programme places huge importance on employment and upon the culture shift amongst non-specialist staff which has been a necessary pre-cursor to them having the kind of employment-related conversations which families deserve and which help them set and reach stretching but attainable goals. This is already a real strength of the programme in Leicester.

A summary of the key outcomes achieved through the delivery of the programme include:

Measures of impact at case closure	% of cases where outcomes achieved At March 2017	% of cases where outcomes achieved At March 2018	% of cases where outcomes achieved At March 2019
Offending by all minors in the family reduced by 33% in the last 6 months. No family member has been subject to an ASB intervention in last 6 months	46% (112 out of 243)	68% (215 out of 316)	73% (300 out of 410)
Incidents of domestic violence and abuse have reduced in severity compared with the 6 months prior. Families report a greater ability to keep themselves safe. The impact of historic DV/SV is reduced for victim and children.	51% (65 out of 127)	55% (257 out of 469)	68% (599 out of 875)
Families no longer require social care involvement. Family's needs are being met or managed by services as appropriate. Parents/Carers have improved parenting skills to enable them to manage problems that might arise in the future.	39% (30 out of 76)	55% (290 out of 708)	71% (1,179 out of 1,671)
School age children are attending school on average for 90% of the time across 3 consecutive terms. There are less than 3 fixed term exclusions in the last 3 terms which equated to less than 10 days. School leavers who were persistently absent or had multiple exclusions are in education, employment or training.	15% (184 out of 1,192)	34% (572 out of 1,661)	50% (900 out of 1,790)
An adult in the family has moved off benefits and into continuous employment	7,1% (106 out of 1,485)	9% (198 out of 2,155)	10% (254 out of 2,643)

Measures of impact at case closure	% of cases where outcomes achieved At March 2017	% of cases where outcomes achieved At March 2018	% of cases where outcomes achieved At March 2019
A young person/adult is taking steps towards work and feel more confident in managing their finances addressing their debt.	34% (103 out of 304)	29.5% (674 out of 2,281)	34% (969 out of 2,825)
Families have access to, and engage with health services, as appropriate, to meet their health needs. Adults & children report improved health & well-being at the end of intervention. Adults & children have reduced or cease their harmful alcohol and/or drug use at end of intervention	56% (122 out of 218)	46% (369 out of 797)	64% (778 out of 1,225)

Nb. To make a successful PBR claim, you have to achieve all of the outcome measures identified at the start of intervention.

To support the evaluation, the corporate Service Improvement and Transformation Team was commissioned to complete a statistical review of performance. These findings are summarised as follows:

- There is strong supporting evidence that TF programme is having an impact to reduce the severity and acuteness of needs of families over time and by extension therefore having an impact on the number of social care cases that are being referred.
- The evidence suggests that given the relatively high change of lead agency rates in the short-term following commencement of intervention, efficient multi-agency working is in effect with cases moved on in a timely fashion.
- Evidence suggests that the families with the most acute / complex needs are being prioritised for inclusion in the TF programme.

5.2 Current position and areas for development

As of June 2019, Leicester city has 'attached' 4,129 families to the programme with 1,416,000 (35.9%) payments by results claims made. This equates to £1,152,000 of PBR funding already claimed and a further £1,736,000 still available to claim. At the current conversion rate, it is expected that 1,379 PBR claims will be made in 2019-20 totalling £1.1m by March 2020.

The council's children centre and family support service within the Early Help and Prevention budget includes an annual contribution of £1.2m from the Troubled Families grant. Therefore, if there is no continued grant from 20/21, the budget will be in deficit. The current programme ends in Mar 2020, however there has been encouraging reports that some level of funding will continue for local authorities. It is envisaged that this will not be known until Jan 2020 therefore to mitigate against any potential service reductions and maintain the current budget position, any PBR claims will be used to offset against the 20/21 budget whilst a decision is made about future provision.

The information contained within this report and summarised in the maturity matrix demonstrates the net worth and impact the programme has had upon service transformation which is heading in a positive direction which will impact upon the conversion rate which is predicted to peak during year 5. To re-enforce positive direction and increase conversion rate the next key steps are:

Recommendation	Action	Suggested Responsible Lead
Recommendation 1	Strategic leads to consider how the issues identified by both the workforce and families can be addressed collectively to improve outcomes for families in Leicester.	Early Help Strategic Partnership Board (EHSPB)
Recommendation 2	Strategic leads to review the evidence and undertake a further review of the impact measures used to ascertain: - The extent to which these provide a meaningful measure of impact - How this is communicated and understood across the partnership - Profiling of predictors to inform targeting of resources - Identify gaps and ways of addressing these	EHSPB
Recommendation 3	Undertake 'family follow-up surveys' on regular basis to ensure families experience is at heart of service planning	TF Infrastructure Team
Recommendation 4	Consider reviewing the definition of Early Help to ensure the partnership is clear on the meaning of the term.	EHSPB
Recommendation 5	Development a programme of shadowing/inter-agency working opportunities to support workers development and understanding of how other agencies work	TF Infrastructure Team
Recommendation 6	Expand the current support offered to schools and develop a bespoke programme to increase the number of schools leading Early Help Assessments.	Director of Social Care and Early Help
Recommendation 7	Explore how we continue to retain a specialist worklessness resource alongside embedding this as a routine way of working within the multi-agency workforce.	Head of Service: Early Help and Prevention and EHSPB
Recommendation 8	Overcome barriers to day to day information sharing identified through workers survey.	EHSPB
Recommendation 9	Continuation of the health check meetings both internal and external to ensure positive scrutiny challenge and support to the partnership.	Director of Social Care and Early Help
Recommendation 10	Develop performance systems across the partnership that are outcome focused.	EHSPB

6. Appendices

Appendix One – Leicester Families Outcomes Plan (Pages 63-71)
As a requirement for Phase 2 of the Troubled Families Programme and as part of a wider performance framework for Leicester, the Family Outcomes Plan has been created to help identify and address the needs of those families who have multiple and complex needs related to the 6 criteria set out and details the local ambition to significantly and sustainably improve the lives of local families.

Appendix Two – Fun and Families Living with Teenagers Course Evaluation (Pages 72–75)
This groupwork programme is commissioned by Leicester City Council using Troubled Families payments by results funding and was aimed at parent/carers whose children were aged 11-16 with behaviour difficulties.

Appendix Three – Safe Families Quarterly Evaluation Report (Pages 76-83)
Safe Families is commissioned by Leicester City Council using Troubled Families payments by results funding to recruit and train local volunteers to support families open to social care and early help with short term respite befriending and resources.

Appendix Four – Voluntary Action Leicester Workforce Development Quarterly Report (Pages 85-88)
VAL were commissioned by Leicester City Council to provide a multi-agency workforce development programme, website and newsletter to upskill the early help workforce across all agencies working with families in Leicester.

Appendix Five – Leicester Education Strategic Partnership Early Help Schools Guide (Pages 89-101)
LESPOG commissioned LCC Early Help and Prevention Services to develop a bespoke guide for schools, with commitments and an audits tool to enable them to identify their own contribution to early help and their support for families.

Appendix Six – National Troubled Families Summary of outcomes (Page 102)

Appendix Seven – Links to tables and references (Page 103- 104)

Leicester's Family Outcomes Plan

Version 9 (9 August 2018)

As a requirement for Phase 2 of the Troubled Families Programme and as part of a wider performance framework for Leicester's Early Help Model, the Family Outcomes Plan has been created to help identify and address the needs of those families who have multiple and complex needs related to the 6 criteria set out below and details the local ambition to significantly and sustainably improve the lives of local families where:

1. Children have not been attending school
2. Parents and children have been involved in crime or anti-social behaviour
3. Adults are out of work or at risk of financial exclusion or Young People are at risk of worklessness
4. Parents and children have a range of health problems
5. Families are affected by domestic violence and abuse
6. Children need help: children of all ages, who need help, are identified as in need or are subject to a child protection plan

The plan represents a common set of outcomes for all agencies and partner organisations to achieve, in order to reduce risk and vulnerability for families, encourage service transformation and reduce the demand on public services.

1. **Children who have not been attending school**

Leicester's strategic goals

- Plan sufficient & appropriate high-quality educational places
- Ensure every school/setting is good or outstanding
- Secure good leadership and governance in all schools

- Close the gap for vulnerable groups
- Improve progress and outcomes in mathematics
- Sustain improvement in literacy
- Reduce persistent & unauthorised absence

Indicators

1.1 A child whose average attendance over the last three consecutive terms has not been regular:
- o Where the absence has not been explained by statutory exceptions (including authorisation for exceptional circumstances).
- o Where the level of absence – even where it is covered by statutory exceptions – is a cause for concern.

1.2 A child who has received at least 3 fixed term exclusions in the last 3 consecutive school terms; or a child at primary school who has had at least 5 school days of fixed term exclusion in the last 3 consecutive terms; or a child of any age who has had at least 10 days of fixed term exclusion in the last 3 consecutive terms.

1.3 A child who has been permanently excluded from school within the last 3 school terms.

1.4 A child who is in alternative educational provision for children with behavioural problems.

1.5 A child who is neither registered with a school, nor being educated in an alternative setting.

1.6 A child nominated by education professionals as having school attendance problems of equivalent concern to the indicators above because he/she is not receiving a suitable full time education.

Sustained & Significant Outcome What success will look like	Measure How we will measure success	How reported/recorded How and where we can obtain this data
1.1 All school age children have a school place and attend at least 90%, (excluding authorised absences) of possible sessions on average across three consecutive school terms	The attendance rate for each school aged child in the household over 3 consecutive terms.	ONE.net database, county school data. Keyworker / lead professional report at start, review & close, school input. EWO input
1.2 School age children with attendance below 40% prior to intervention show an improvement in attendance of possible sessions of at least 40%	The attendance rate for school aged children in the household over 3 consecutive terms.	ONE.net database, county school data. Keyworker / lead professional report at start, review & close, school input. EWO input
1.3 Authorised absence no longer a concern to education professionals	Closure of cases to Education Welfare Service where authorised absence a concern	ONE.net database, county school data. Keyworker / lead professional report at start, review & close, school input. EWO input
1.4 Each child in the household has received less than 3 fixed term exclusions in the last 3 consecutive terms and less than 10 school days of fixed	The number of fixed terms exclusions each child has received over 3 consecutive terms	ONE.net database, county school data. Keyworker / lead professional report at start, review & close, school input. EWO input.

term exclusion during this period		
1.5 School leavers who were persistently absent or had multiple exclusions are in Education Employment or Training.	School leavers are in Employment, Education or Training	Keyworker /Lead practitioner assessment at start, review & close. Connexions data (Client Information Caseload System)

2. Parents and children involved in crime or anti-social behaviour

Leicester's strategic aims
To work together to prevent and reduce offending; To reduce crime and the fear of crime; To assist communities and victims of crime; To reduce the harm caused by substance misuse to communities; To reduce drug related crime and associated anti-social behaviour; To work in partnership to improve outcomes for vulnerable young people including those who have offended or who are at risk of offending (Safer Leicester Partnership aims).

Leicester's strategic goals	
• Reduction in offending • To reduce fear of crime • To create stronger neighbourhoods • Reduction of first time entrants to the criminal justice system	• To reduce drug related crime and associated anti-social behaviour • To work in partnership to improve outcomes for vulnerable young people including those who have offended or who are at risk of offending

Indicators
2.1 A child (under 18 years old) who has committed a proven offence in the previous 12 months.
2.2 An adult or child who has received an anti-social behaviour intervention (or equivalent local measure) in the last 12 months.
2.3 An adult prisoner who is less than 12 months from his/her release date and will have parenting responsibilities on release.
2.4 An adult who is currently subject to a licence or supervision in the community, following release from prison, and has parenting responsibilities
2.5 An adult currently serving a community order or suspended sentence, who has parenting responsibilities
2.6 Adults and children nominated by professionals because their potential crime problem or offending behaviour is of equivalent concern to the indicators above

Sustained & Significant Outcome What success will look like	Measure How we will measure success	How reported/recorded How and where we can obtain this data
2.1 No proven offences by minors in the family in the last 6 months	The number of proven offences by under-18 year olds in a 6 month period.	Keyworker/lead professional assessment at start, review & close. YOS / IOM data
2.2 No family member has been subject to an ASB intervention in the last 6 months	The number of ASB interventions in a 6 month period	Keyworker/lead professional assessment at start, review & close. Sentinel/LASBU data
2.3 No arrests of adults within the family leading to an outcome within the last 6 months	The number of arrests leading to an outcomes in a 6 month period	PNC/Police data

3. Adults out of work or at risk of financial exclusion or young people at risk of worklessness

Leicester's strategic aims
Tackling worklessness & youth unemployment; Improving skills & delivering quality training (Leicester to Work Strategy)

Leicester's strategic goals

- Supporting people on their journey to back to work
- Tackling worklessness & youth unemployment;

- Improving skills & delivering quality training

Indicators

3.1 An adult in receipt of out of work benefits or an adult who is claiming Universal Credit and subject to work related conditions.

3.2 A child who is about to leave school, has no/ few qualifications and no planned education, training or employment.

3.3 A young person who is not in education, training or employment.

3.4 Parents and families nominated by professionals as being at significant risk of financial exclusion. This may include those with problematic / unmanageable levels and forms of debt and those with significant rent arrears.

Sustained & Significant Outcome What success will look like	Measure How we will measure success	How reported/recorded How and where we can obtain this data
3.1 An adult in the family has moved off benefits and into continuous employment	Continuous employment is 6 months for those previously claiming JSA, and 3 months for those claiming ESA or IS.	Keyworker /Lead practitioner assessment at start, review & close. DWP data
3.2 An adult in the family is taking steps towards work	2 or more of the following steps have been undertaken: • Obtained ID (e.g. passport, birth certificate, driver's license) • opened a bank account • benefit sanctions reviewed or lifted • organise childcare • organise respite care • Start skills training • Complete basic skills training • Create a professional email address • Write a CV • Register with a job brokering website • Register with an employment agency • Start a work experience placement or volunteering • Complete/maintain a work experience placement or volunteering	Keyworker /Lead practitioner assessment at start, review & close or DWP confirmation.

	• Attending JCP appointments (if ESA SG) • Attending additional JCP appointments IS (O) or IS (LP) • Engage with the EHEA or GREAT Navigator In addition, achievement of either of the following outcomes can count as 1 step towards work, where the issue was identified as a barrier to work: • Adults have access to, and engage with health services, as appropriate, to meet their health needs. • Adults have reduced or cease their harmful alcohol and/or drug use at end of intervention.	
3.3 Young people in the family are in Education Employment or Training.	Family members aged 16 – 24 years old are in Employment, Education or Training	Keyworker /Lead practitioner assessment at start, review & close. Connexions data (Client Information Caseload System)
3.4 The family feel more confident in managing their finances and have accessed services in relation to debt and budgeting, as appropriate.	Family members report a reduction in debt and increased confidence in managing their finances. Family members report movement towards their 'desired state' in relation to money on the Rickter Lifeboard	Keyworker /Lead practitioner assessment at start, review & close

4. Parents and children with a range of health problems

Leicester's strategic aims
Improve outcomes for children & young people; Reduce premature mortality; Improve mental health and emotional resilience (taken from closing the gap, Leicester's joint health & well-being strategy)

Leicester's strategic goals	
• Reduce infant mortality • Reduce teenage pregnancy • Promote healthy weight & lifestyles in children and young people • Increase physical activity and healthy weight • Reduce smoking & tobacco use • Reduce harmful alcohol & drug consumption • Improve the identification & management of life limiting illnesses	• Promote the emotional well-being of children and young people • Address common mental health problems in adults and mitigate the risks of mental health problems in vulnerable groups • Support people with severe & enduring mental health needs

Indicators

4.1 An adult with mental health problems who has parenting responsibilities or a child with mental health problems

4.2 An adult with parenting responsibilities or a child with a drug or alcohol problem

4.3 A new mother who has a mental health or substance misuse problem and other health factors associated with poor parenting. This could include mothers who are receiving a Universal Partnership Plus service or participating in a Family Nurse Partnership.

4.4 Adults with parenting responsibilities or children who are nominated by health professionals as having any mental and physical health problems of equivalent concern to the indicators above. This may include unhealthy behaviours, resulting in problems like obesity, malnutrition or diabetes.

Sustained & Significant Outcome What success will look like	Measure How we will measure success	How reported/recorded How and where we can obtain this data
4.1 Adults and children have access to, and engage with health services, as appropriate, to meet their health needs.	Adults and/or children are registered with and are accessing health services to meet their needs (as appropriate) e.g. the GP, Dentist, Sexual Health Advice, Breastfeeding Support, Active Lifestyles, Smoke Free Homes	Keyworker/lead professional assessment at start, review & closure
4.2 Adults & children report improved health & well-being at the end of intervention.	Adults and/or children engage with an appropriate level of support/report improvements in wellbeing and/or physical, mental or emotional health or Family members report movement towards their 'desired state' in relation to health and happiness on the Rickter Lifeboard or Adults are engaged in work/education/training/volunteering.	Key worker/lead professional assessment at start, review & close
4.3 Adults & children have reduced or cease their harmful alcohol and/or drug use at end of intervention.	Family members engage with an appropriate level of support/report a reduction in harmful alcohol and drug use. or Family members report movement towards their 'desired state' in relation to drugs and/or alcohol (as appropriate) on the Rickter Lifeboard	Key worker/lead professional assessment at start, review & close
4.4 Adults & children are engaging in and maintaining healthy lifestyle choices at end of intervention	Adults and children are accessing public health services such sexual health advice, healthy weight, breast feeding, active lifestyles. Have stopped smoking in house or car are registered at GP and registered with a dentist.	Key worker/lead professional assessment at start, review & close

5. Families affected by domestic violence and abuse

Leicester's strategic aims Prevention; Support & Protect

Leicester's strategic goals

- Increase the number of people accessing domestic abuse services across Leicester City
- Improve support for victims and their families in Leicester
- Improve safety of repeat victims of domestic abuse in Leicester City
- Effectively manage Leicester City perpetrators to reduce harm caused
- Improve confidence within communities and satisfaction of users of our domestic abuse services in Leicester City

Indicators

5.1 A young person or adult known to local services has experienced, is currently experiencing or is at risk of experiencing domestic violence or abuse.

5.2 A young person or adult known to local services has experienced, is currently experiencing or is at risk of experiencing sexual violence or abuse.

5.3 A young person or adult known to local services has experienced, is currently experiencing or is at risk of experiencing 'honour-based' abuse.

5.4 A young person or adult who is known to local services as having perpetrated an incident of domestic violence or abuse in the last 12 months.

5.5 A young person or adult who is known to local services as having perpetrated an incident of sexual violence or abuse in the last 12 months.41

5.6 A young person or adult who is known to local services as having perpetrated an incident of so-called 'honour-based' violence or abuse in the last 12 months.

5.7 Been subject to a police call out for at least one domestic incident, including for so-called 'honour-based' abuse, in the last 2 months.43

Sustained & Significant Outcome What success will look like	Measure How we will measure success	How reported/recorded How and where we can obtain this data
5.1 Domestic incidents, including honour based violence and sexual violence have reduced in severity during the period of intervention compared to the 6 month period prior to start. (if current DV/SV)	The number and severity of domestic, honour based or sexual violence incidents at start and end of intervention (self-reported / data)	Keyworker/lead professional assessment at start, review & close. Police / IOM data
5.2 Adult victims and children in the family report a greater ability to keep themselves safe (if risk is current))	Family members report feeling somewhat or much safer at end of intervention	Keyworker/lead professional assessment at start, review & close
5.3 The impact of historic DV/SV/honour based violence is reduced for victim and children	Family members report feeling improved wellbeing or Family members report positive movement towards their 'desired state' in relation to happiness and relationships on the Rickter Lifeboard	Keyworker / lead professional assessment at start, review & close

6. Children who need help: children of all ages, who need help, are identified as in need or are subject to a Child Protection Plan.

Leicester's strategic aims
Protect and promote the welfare of all children and young people; Ensure that a co-ordinated approach to Early Help is adopted through an offer of integrated support to vulnerable children, young people and families.

Indicators
6.1 A child who has been identified as needing early help. This may include children below the threshold for services under Section 17, Children Act 1989.
6.2 A child who has been assessed as needing early help.
6.3 A child 'in need' under Section 17, Children Act 1989.
6.4 A child who has been subject to an enquiry under Section 47, Children Act 1989.
6.5 A child subject to a Child Protection Plan.
6.6 A child nominated by professionals as having problems of equivalent concern to the indicators above
6.7 A child identified as having a delay in speech language and communication skills. This can include children not reaching the threshold in the communication domain at the 2-2.5 year old health check carried out by health visitors.
6.8 A child / family who is entitled, or has previously been entitled to 15 hours free early education for two-year-olds and has not taken this up.

Sustained & Significant Outcome What success will look like	Measure How we will measure success	How reported/recorded How and where we can obtain this data
6.1 Family needs are met or being managed by services as appropriate.	Intervention closed due to work being complete, and families identified needs have been met or are being managed with support of services, as appropriate	Keyworker assessment/Liquidlogic/ Police / IOM data, DWP data, ONE.net database (as appropriate)
6.2 Family no longer requires Social Care involvement.	CIN or CP cases closed or stepped down to Early Help Services with no subsequent re-referrals to Social Care for 3 months.	LiquidLogic
6.3 Children and young people being or at risk of being sexually exploitation are identified and supported to stay safe.	Risk factors have been identified, addressed and intervention to build resilience delivered	Keyworker assessment/Liquidlogic/ Police / IOM data, DWP data, ONE.net database (as appropriate)
6.4 Parents/carers have improved parenting skills sufficiently to enable them to handle problems that might arise in the future.	Families identified needs have been met or are being managed with support of services, as appropriate.	Keyworker assessment/Liquidlogic/ Police / IOM data, DWP data, ONE.net database (as appropriate)

6.5 Family has accessed Early Years Entitlement and child/children are attending provision regularly.	Nursery place accessed and attendance is regular.	Nursery Census and Head Count
6.6 A package of short break provision is in place for the family and the child is engaging with this.	Short break provision package in place and child engaging	Keyworker assessment/ LiquidLogic
6.7 Stable and safe accommodation in place for the family and a package of support in place to ensure children's needs are met	Family has accommodation in place, assessed as safe and stable. Package of support in place.	Keyworker assessment/ LiquidLogic

Appendix Two: Living with Teenagers Evaluation

Living with Teenagers Programme Evaluation			
Venue	Centre for Fun and Families, 177-179 Narborough Road, LE3 0PE		
Start date		**Finish date**	
Number of sessions	10	**Day / Time**	
Group workers			

Highlights:

- 13 parents and carers attended the group, and 11 completed 4 sessions or more.
- 127 difficult behaviours were identified before the group; 34 completely disappeared and a further 36 reduced in frequency. Thus in total **the programme beneficially affected 70 of the 127 difficult behaviours - an improvement of 55%.**
- For all the questions asked on confidence of participants, 46% of answers showed improvement on the pre-programme situation, and only 5% of answers showed a negative.
- Everyone rated the programme over all as "Excellent" or "Very Good" and everyone said they would recommend it to other parents.

Introduction and background

This group was commissioned by Leicester City Council and was aimed at parent/carers whose children were aged 11-16 with behaviour difficulties. The group was promoted to referrers within the City.

Referrals and Attendance	Numbers	% of total
Number of referrals made to the group	33	
Number of referrals which CFF were able to contact (7 no response)	22	67%
Of the 33 contacted, 11 did not respond; 10 were no longer interested in the service and 7 went back on the waiting list for another group		
Number of home visits made to referred families	10	38%
Number of parents* who started the programme	13	
Retention rate (No. of parents completing the programme - 4 or more sessions)	11	85%
Number of participants that have completed 100% (7/7 sessions)	5	38%

Referrals and Attendance	Numbers	% of total
Number of participants that completed 6+ sessions	8	62%
Number of participants that completed 5+ sessions	9	69%
Number of participants that completed the pre questionnaire	11	85%
Number of participants that completed the post questionnaire	11	85%

*number of parents is not the same as number of referrals.

Source of referrals		
Referring Agency	**Number referred**	**Number on Group**
FSW	15	2
School	2	0
Self	6	1
Health	1	0
EHRT	3	2
CAMHS	1	0
CYP&FS	5	1
Total Referrals	**33**	**6**

Diversity information of participants and the help they needed to attend the programme			
gender	ethnicity	disability	interpreter needed
7 women, 6 men	9 White British; 3 Asian; 1 African Caribbean.	13 not disabled; 1 disabled	1

The parents / carers who attended the sessions had 18 children.

Ages:	0 - 3 yrs	4 – 7 yrs	8 – 10 yrs	11 – 13 yrs	14 – 16 yrs	16+
Female	2	2	2	3	1	0
Male	0	0	2	4	2	0

Group Dynamics, strengths and weaknesses:

What went well?
- Good attendance from the very beginning, despite having other commitments eg coming straight from work, child care issues, working long shifts and night shifts.
- Good cross section of people who were very supportive of one another regardless of different backgrounds (professional affluent families and lower incomes, social support.)
- Group was made up mainly of couples which promoted working together and adopting a consistent approach to parenting. They also noted that communication within the families had greatly improved.
- All parents were totally committed and engaged in the programme, doing home tasks, and trying different strategies at home with lots of positive feedback.
- All the parents agreed they enjoyed the sessions and would miss them when the programme finished. They were extremely supportive of one another offering lifts, advice, and help. Lots of food was brought in at the end celebration session and phone numbers were exchanged.
- Many parents appeared to grow in confidence as time passed e.g. a mum who was very anxious and shy in the beginning really came out of her shell.

Venue:
- Good – no problems.

Taxis:
- Generally good and much improved on the previous group.
- On occasion there were some late pick ups

What could have been better?
- One of the parents was very dominating, expressing his strong opinions to the rest of the group. He also came across as overbearing towards his partner, often speaking on her behalf. This was addressed by working in small groups separating him from his partner, which meant she grew in confidence and was able to express her views more.
- It was unclear how much the parent with the interpreter gained from the sessions, however she did attend 6 sessions and seemed to enjoy the social side of it. Her husband appeared to benefit more despite his limited English.

Group workers:
- Worked well together to create a positive working atmosphere.
- Facilitators had worked together before and continued to develop their working partnership, including lots of humour and positive reinforcement.
- The materials were well received and put to good use.
- Jude, who came in for the final 2 sessions commented that there was a positive working atmosphere within the group. Jude was fully accepted by the parents and slotted in well.

Outcomes for Parents / Carers from the pre- and post- programme questionnaires							
Participant	difficulties			were difficulties post-group less frequent than pre-group?			
	before	after	% change	better	same	worse	% improved
A	11	12	-9%	3	7	2	25%
B	11	13	-18%	3	2	8	23%
C	8	7	13%	2	2	3	29%
D	9	6	33%	3	1	2	50%
E	18	10	44%	7	2	1	70%
F	18	12	33%	9	2	1	75%
G	11	9	18%	0	7	2	0%
H	8	5	38%	4	1	0	80%
I	11	10	9%	2	4	4	20%
J	11	6	27%	2	3	1	33%
K	11	3	73%	1	1	1	33%
TOTAL	**127**	**93**	**27%**	**36**	**32**	**25**	**39 %**

For this group of parents as a whole, the 127 difficult behaviours reduced by 27% by the end of the programme. The frequency of the surviving 93 difficult behaviours reduced by 39%.

So, 127 difficult behaviours were identified before the group; 34 completely disappeared and a further 36 reduced in frequency. Thus in total **the programme beneficially affected 70 of the 127 difficult behaviours - an improvement of 55%.**

Confidence of Parents/Carers.

We asked the participants to score the following questions on a scale of 1 to 10 pre-programme and asked the same questions again at the last session to see if the programme had generated improvements for them			
by the end of the programme…	**improved**	**stayed the same**	**worsened**
As a parent/carer, do you feel confident?	4	6	0
Do you have a good relationship with your child?	5	5	0
Do you have good communication with your child?	2	7	0
Do you experience conflict between you and your child?	5	4	1
Do you feel stressed as a parent / carer?	5	3	1
Do you understand your child's needs?	5	3	2
Do you feel supported in your role as a parent / carer?	5	4	1
Totals 68 replies	**31**	**32**	**5**
Percentages	**46%**	**47%**	**5%**

*Not all parents answered every question

So, for all the questions asked on confidence of participants, 46% of answers showed improvement on the pre-programme situation, and only 5% of answers showed a negative.

Participants' evaluation of the weekly sessions. We asked the parents / carers to give us feedback on the format of the programme and the topics covered. *Not all parents answered every question					
	No	**some** of the time	**most** of the time	**all** of the time	**% all or most**
Did you find sharing your concerns with other parents useful?		0	5	4	100%
Has attending the group helped you better understand your own behaviour?		1	3	4	88%

	too easy	**just right**	**too difficult**	**% just right**
Were the topics pitched at the right level for you to understand?	0	9	0	100%

	no	**possibly**	**yes**	**% yes**
Would you recommend the group to another parent / carer?	0	0	9	100%

What topics covered on the group were most useful to you?	The "escalator" part was the most useful for myself; it helped me realise not to let the situation get out of hand and let X calm and then talk to her. "When and then" works well for me so found this most helpful. "When and then". Showing who is in charge. Parenting styles; boundaries and restrictions; know and when; Communication. ABC; When and Then; Boundaries; Time for yourself. When and then; Sanctions; How to change situations. Identifying different behaviours; being clear on how to tackle unwanted behaviour / focus on positives; understanding teenagers more and their brains. Increasing wanted behaviour; understanding teenage brain / development.
What additional subjects do you think the group should cover?	Maybe more work on family roles and how people in a family work together. Management of behaviours; continuation with boundaries; emotional impacts on behaviours.

	Strategies for teenagers that parents may be able to share with their teenager if possible.						

Please rate the following on a scale of 0 to 5 where:
0 = Very Poor, 1 = Poor, 2 = Fair, 3 = good, 4 = Very Good,   = Excellent
(Please tick one box for each question)

the use of…	0	1	2	3	4	5	% very good or excellent
Flip paper	0	0	0	3	2	4	67%
Role play	0	0	0	2	3	4	78%
Handouts	0	0	0	2	3	4	78%
Video clips	0	0	0	2	4	3	78%
Discussions	0	0	0	0	3	6	100%
Parental Resource Packs	0	0	0	1	3	5	89%
please rate the following:							
Venue	0	0	0	3	2	4	67%
Room	0	0	0	2	3	4	78%
Seating	0	0	0	3	2	4	67%
Group workers	0	0	0	0	2	7	100%
Group size	0	0	0	1	1	7	89%
Time of group	0	0	0	1	2	6	89%
The group overall				**0**	**1**	**7**	**100%**

Quotes/Comments from the evaluation and during the group:

It's been lovely getting to know different people and knowing that we are all dealing with things that are similar to each other. Everyone has been really supportive and had some really good ideas on how to manage difficult behaviours. Keep up the good work.

I have enjoyed the group and meeting other parents and the group workers.

I have found attending the group quite interesting, being able to discuss issues and behaviours with others and not feeling like I'm incapable of parenting again and setting boundaries.

I have enjoyed the weekly session and Rob, Sue and Jude have been amazing and we feel that the tools we have been given over the 7 weeks have started to improve our home life. Thank you so much – you're diamonds.

This sort of parenting course should be available to all parents. Valuable information was shared and also an opportunity to look at your teenager from a different perspective. Thank you!

Appendix Three: Safe Family summary report of intervention July 18 – March 19

Quarterly Report for Leicester City

Reporting period

☐ Quarter 1	☐ Quarter 2	☒ Quarter 3	☒ Quarter 4

Date form completed: 21 March 2019

Part 1. Service Delivery

Incoming referrals

- From 20 July 2018 – 20 March 2019, Safe Families have received 29 contacts for families identified as needing support, and 1 contact for a care leaver. The care leaver referral will not be included in this report.
- 69% of contacts received (20 families) were identified as Category 2 - on a trajectory into care by the referrer.
- The source of referrals is split between Social Care (52%) and Early Help (48%)

- Safe Families have accepted 25 of the 29 referrals to date.
    - Of the 4 not accepted, 2 may go on to be:1 referral is in the process of being risk assessed and 1 is on hold pending a court decision.
    - 2 referrals were declined by Safe Families at point of referral; 1 due to the adult risk being too high, and 1 due to lack of engagement from the referrer.

Current headlines

- 11 families have active support or support due to start soon
- 5 families are being assessed for a volunteer match
- 3 families have been closed with support having been provided
- 1 family is on hold
- 48 children have benefitted or are currently benefitting from support
- 6 bednights have been provided to a total of 3 children in 2 different families

Progress towards target

The contract began on 20 July 2018. We are 8 months into the contract year and in order to be on track for supporting 60 families, we should have by now been supporting 40 families. Safe Families is therefore significantly behind target, with the primary reason being a lack of incoming referrals.

Safe Families staff have attended cluster meetings for Early Help staff and are now attending every Edge of Care and MASP meeting possible in order to increase referral rate.

1.2 Children Hosted

Local Authority	Unique Families			Unique Children			Hosting Instances			Total Nights			Total Bed Nights		
	YTD	Last	All	YTD	Last	All	YTD	Last	All	YTD	Last	All	YTD	Last	All
Leicester City	2	0	2	2	0	2	4	0	4	7	0	7	7	0	7
Total	**2**	**0**	**2**	**2**	**0**	**2**	**4**	**0**	**4**	**7**	**0**	**7**	**7**	**0**	**7**

Hosting experiences

Family 1

Safe Families initially supported R (M9), living with his grandmother while his dad B was completing a drug rehabilitation program. We continued support when R moved back to live with B, providing monthly hosting during the day. When it became clear that B had not been able to sustain being abstinent from drugs, the host family hosted R overnight on 2 separate weekends. R has now been taken into foster care and is staying there while the Social Worker looks for other family members who can care for R. While staying with the foster carers, R has asked about seeing his volunteer family and contact has been made between the foster carers and the volunteer family. The volunteer family are planning to see him in order to help with the transition and to remain as positive people in R's network.

Total = 5 bed nights.

Family 2

Safe Families have been supporting a young mum (who is a care leaver) and her newborn baby boy for around 6 months. They have been connected to an older couple who have befriended them, helped them move house, attend appointments and give emotional support while mum's partner is being assessed by Social Care. This month Mum needed to attend a medical appointment in London overnight so the volunteers hosted the baby for 2 nights to allow her to do this.
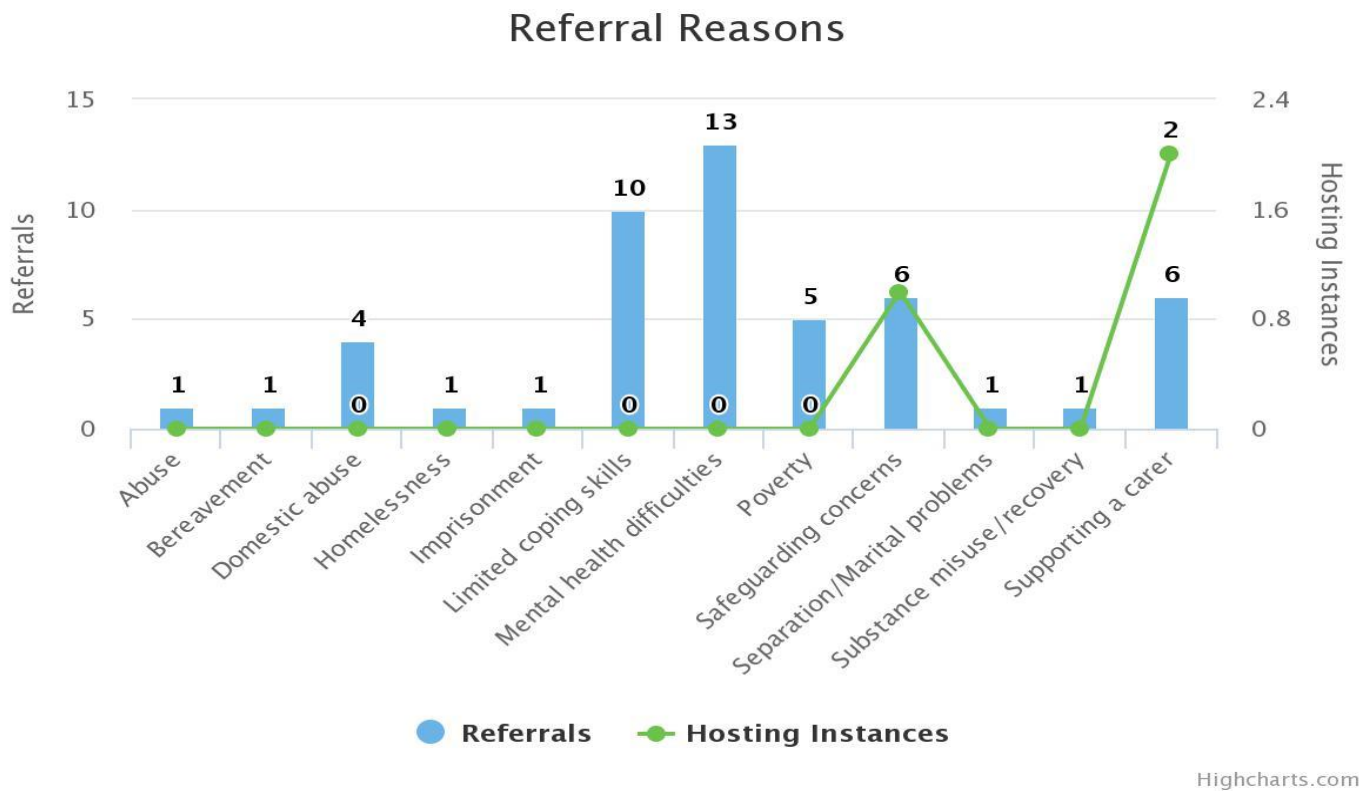
Total = 2 bed nights.

1.3 Origin of Referrals

The geographical spread of referrals is as follows;
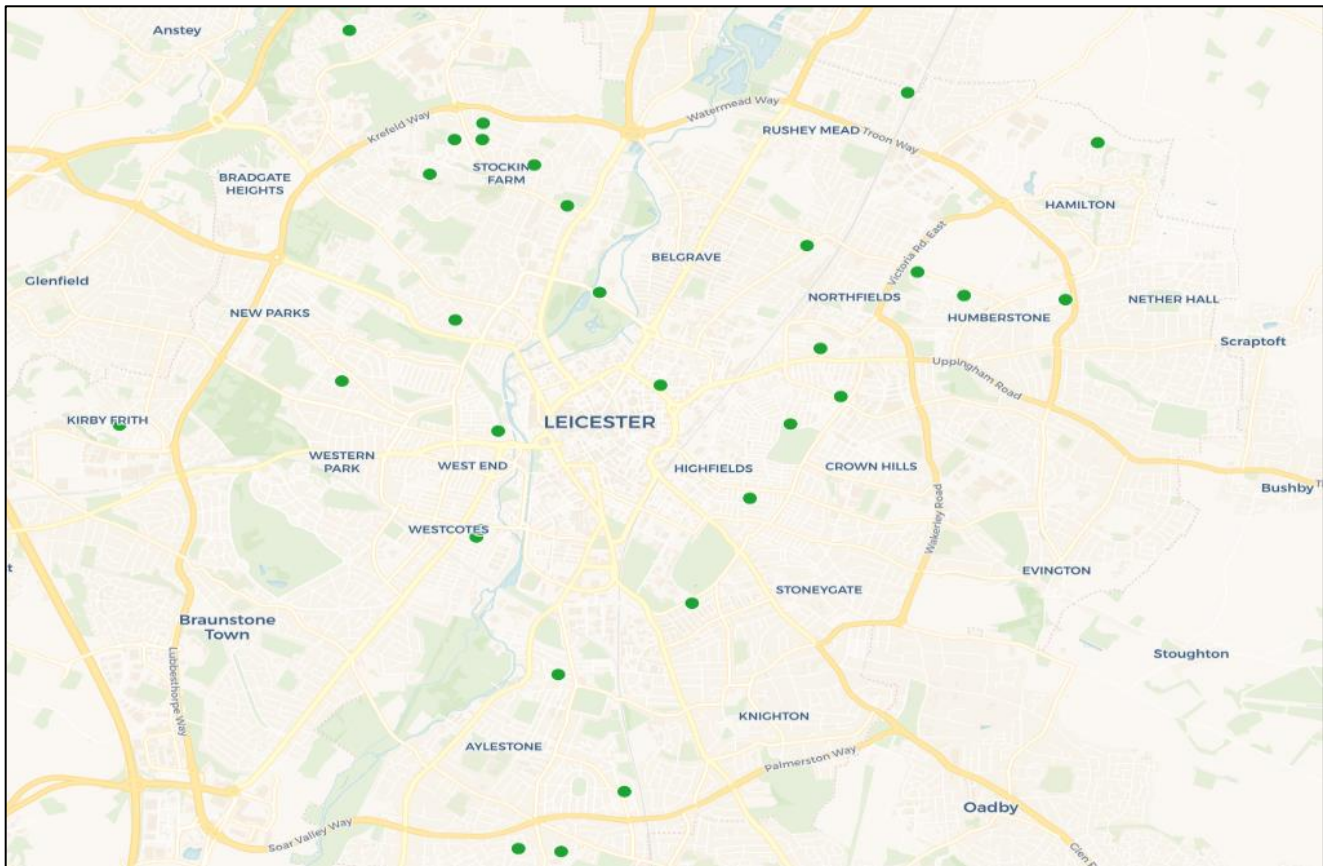
1.4 Referral reasons

Referral Reasons

1.5 Referral closures

- 2 referrals have been declined by Safe Families at point of referral
- Of the 25 accepted referrals, 5 have not gone on to receive support.

The 5 referrals have been closed for the following reasons:
- 1 family declined support at the initial visit but would like to be re-referred in the future
- 1 family was matched with a volunteer but disengaged saying she felt better
- 1 family began MST support
- 1 family had a positive change in family circumstance before our support began
- 1 family separated, and the child went to live with a family member

1.6 Volunteer recruitment

Volunteer recruitment is meeting the demands of the contract. Since October 2017, Safe Families staff have given 30 presentations to potential volunteers and run 9 training sessions.

Local Authority		Host Homes	Family Friends	Resource Friends	Total Volunteers	Growth This Year	Recruited YTD	Recertified YTD
Leicester City	Approved	14	39	38	79	40	17	3
	In Training	4	16		18	7	18	1
	OVERALL	*18*	*55*	*38*	*97*	*47*	*35*	*3*

A map showing the geographical locations of current volunteers:
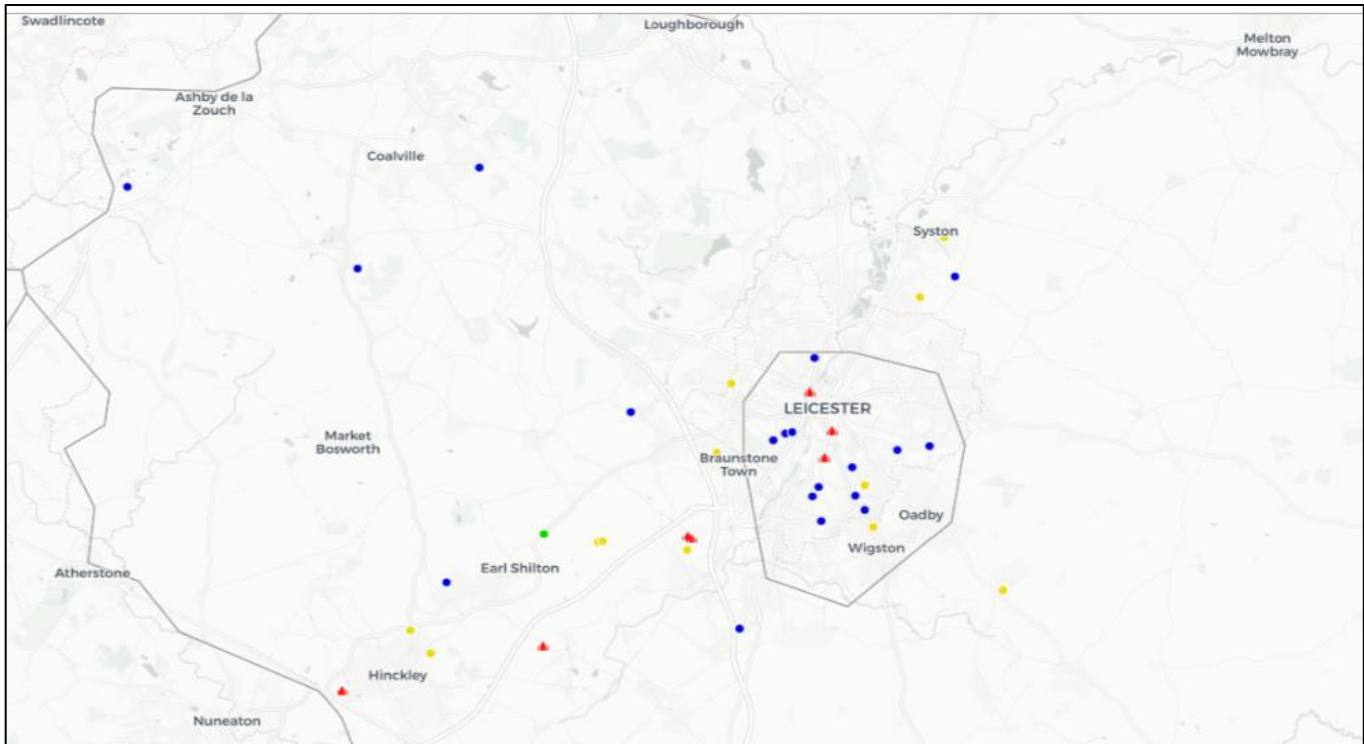
Volunteer demographics

Gender	%
Female	82.7%
Male	17.3%
Totals	*100%*

Ethnicity	%
Asian/Asian British - Indian	3.8%
Black/African/Caribbean/Black British - African	3.8%
Black/African/Caribbean/Black British - Caribbean	7.7%
Black/African/Caribbean/Black British - any other background	3.8%
Mixed/Multiple - White and Asian	1.9%
Mixed/Multiple - White and Black Caribbean	1.9%
Mixed/Multiple - any other Mixed/Multiple background	0%
White - English/Welsh/Scottish/Northern Irish/British	59.6%
White - Irish	1.9%
White - any other white background	5.8%
Not Supplied	9.6%
Totals	*100%*

Age	%
Under 20	5.8%
20-29	21.2%
30-39	11.5%
40-49	23.1%
50-59	19.2%
60-69	11.5%
70-79	7.7%
Totals	*100%*

Language	%
French	1.9%
Gujarati	1.9%
Hindi	1.9%
Shona	1.9%
Spanish	1.9%
Swahili	1.9%
None Specified	92.3%
Totals	**100%**

*Languages are stored against the household so all individual volunteers will be counted from a household listed as speaking a language.

**Volunteers who speak multiple languages will be counted against each.

1.7 Risks to delivery

Low number of referrals as previously mentioned. Safe Families is keen to be very proactive in this area with direction and support from staff within the Local Authority.

Part 2. Outcomes

Our aims within this contract are to;

- Connect isolated families into their communities through high quality volunteer support
- De-escalate cases to a lower level of support required from Childrens' Services by improving the resilience of families to cope with life situations.
- Reduce the flow of children coming into Care
- Achieve cost avoidance savings for Leicester City Council

Due to the relatively short time that has passed, it is difficult to analyse the impact of the work we have done with families on case closures, de-escalation and avoidance of children entering the care system.

We have completed outcome hexagons at initial visit, monitoring reviews and closure reviews. Results are below. Some early closures skew the data at this stage, however, the positive change between home visits and reviews are noticeable.

Stage	#	Social Networks	Wellbeing	Confidence	Physical Needs	Family Relationships	Positive Parenting
Home Visit	21	4.3	4.5	4.1	5.7	7.0	6.3
Review 1	3	7.3	7.0	6.7	8.7	8.0	8.3
Closure	3	4.7	3.7	4.3	5.0	5.7	5.0
Maintained/Increased		100%	80%	100%	80%	80%	80%
Decreased	5	0%	20%	0%	20%	20%	20%
Average Change		+2.6	+1.2	+1.4	+2.4	+0.6	-0.4

Part 3: Continuous Improvement

3.1 Next Quarter Development

Volunteer recruitment
The addition of supporting care leavers to the contract in March 2019 has implications for our volunteer recruitment. We are now actively recruiting volunteers from across key towns in Leicestershire who may be able to support care leavers who move out of the Leicester City area. We have a new member of staff starting in April 2019 who will be responsible for continued recruitment and management of volunteers.

Volunteer training
In addition to the initial training of volunteers, we will be providing extra training to volunteers over the next year on a variety of topics including; engaging with care leavers, attachment disorders and safeguarding refreshers.

Leicestershire
We are exploring connections within Leicestershire to begin work there as it will be mutually beneficial to both areas to have volunteers who can cross local authority boundaries.

Part 4: Finance

Safe Families and Leicester City Council are still negotiating as to how many referrals the contract will be for; 80 or 100.

Part 5: Compliments and Complaints

If you have received any compliments and/or complaints during this monitoring period please provide an anonymised list briefly outlining the compliments and/or complaints.

No of Complaints – None
No of Compliments – One (below)

20 Feb - Left by Referrer in Midlands and South Yorkshire // Leicester City (Family ID 15629)
SFFC and volunteer have been sensitive to the families needs and have been a great support to the family.

Feedback from stakeholders July 2018 – Mar 2019

Exit surveys are conducted by phone within 1 month of our support ending.
The results below are limited as we haven't closed many families yet!

Family exit survey results:

All Family Survey Responses

Local Authority	Responses	Q1 Avg	Q2 Avg	Q3 Yes	No Response
Leicester City	0			0	1
Overall	*0*			*0*	*1*

We will continue to persevere with contacting families who are closed.

All Referrer Survey Responses

Local Authority	Responses	Q1 Avg	Q2 Avg	Q3 Avg	No Response
Leicester City	1	10.00	10.00	10.00	0
Overall	*1*	*10.00*	*10.00*	*10.00*	*0*

1. How did the support provided perform against your expectations?
100% of people responded 8, 9 or 10.
2. How likely would you be to recommend another family to Safe Families?
100% of people responded 8, 9 or 10.
3. How likely would you be to recommend Safe Families to colleagues?
100% of people responded 8, 9 or 10.

All Volunteer Survey Responses

Local Authority	Responses	Q1 Avg	Q2 Avg	Q3 Avg	No Response
Leicester City	2	9.00	8.00	9.00	0
Overall	*2*	*9.00*	*8.00*	*9.00*	*0*

1. How well do you feel Safe Families supported you during the hosting/befriending?
100% of people responded 8, 9 or 10.
2. How positive was the overall experience for you (and your family)?
100% of people responded 8, 9 or 10.
3. How likely will you be to support another family in the future?
100% of people responded 8, 9 or 10..

Appendix Four: Voluntary Action Leicester quarterly report
Early Help Workforce Development Programme Quarterly Report
April - June 2018 – Quarter 1

Liquidlogic Early Help Module (LLEHM)

What was delivered?					
Topic	Sessions planned	Overall capacity	Sessions cancelled	Number of delegates booked on	Number of delegates trained this quarter
Liquidlogic Early Help Module (LLEHM)	3	30	1	10	9

The above numbers include one cancellation, one non-attendee and one unauthorized booking.

Attendee Numbers by Agency			
Housing	0	Early Years (nursery staff, childminders, parent and baby group organisers)	2
Schools (including teaching staff, support staff, domestic)	4	SEND and Inclusion Services	0
Family Support	2	Community Safety and Welfare	0
Social Care	0	LCC Youth Support Services (includes youth workers, employment advisers, EWOs)	0
LPT (including school nurses, health visitors, hospital staff)	1	Voluntary & Community Sector	0

Successes
• Work undertaken to secure the roll out of skills based Early Help training in 2018   • The quality of the delivery of the Liquidlogic training is highlighted through the evaluation qualitative evidence/feedback comments from the delegates who attended the training for this quarter
Key Issues
• Bookings for Liquidlogic Early Help Module (LLEHM) training were at a third of potential capacity   • One training session was cancelled due to only one delegate booking onto this training event
Key Recommendations
• If the Liquidlogic training is still a priority for external agencies then greater promotion is required. The Liquidlogic profile needs raising in relation to the work of the Early Help team, Early Help Assessments and as an invaluable safeguarding tool   • To advertise and promote the Early Help training for 2018 by the end of 2017, with active marketing and cascading of this opportunity to key partner agencies to whom this will be of benefit to   • It is also important to consider any way in which the trainer can move the evaluation scores for the session learning objectives from an 'average understanding' to a 'clear understanding' and to consider what the current barriers may be to delegates feeling that they have a 'clear understanding' of Liquidlogic by the end of the training session   • It is important that the trainer/s and strategic managers consider the implications of the implementation of the General Data Protection Regulation (GDPR) in relation to Liquidlogic   • To publish an article in the Early Help Newsletter for frontline practitioners to be provided with an overview of the General Data Protection Regulation (GDPR)
Actions taken since last quarterly report

- 'A useful tool for the VCS - Liquidlogic Early Help Module (LLEHM)' article was published in the July addition of the Early Help Newsletter
- The evaluation questions were reviewed and changed for Liquidlogic Early Help Module (LLEHM) to be meaningful in terms of the data measured and evaluated since the Part A and Part B training sessions were reduced to one training session to meet the training requirements of external staff
- A procurement task has taken place in which a training provider was selected to deliver Early Help training in 2018. The two identified training topics are Assessment Skills and Engaging Families & Difficult Conversations.

Web statistics for the period

Early Help Training - 292 page views

About Early Help - 85 page views

The Early Help Strategy for Leicester – 33 page views

Post Session Self-Evaluation Scores

1	2	3	4	5
Very limited understanding	Limited understanding	Average understanding	Clear understanding	Very clear understanding
Please rate your understanding of Liquidlogic Case Recording System			3	
Please rate your understanding of how the use of Liquidlogic contributes to Early Help case management			3	
Please rate your understanding of data protection and security linked to Liquidlogic			4	
Please rate your ability to search records using Liquidlogic			3	
Please rate your understanding of the Contact and Early Help Assessment Pathways			3	
Please rate your ability to interrogate the system and find information such as Lead Practitioner and Assessment			3	

Key themes regarding what participants learnt

Participants felt they had gained a good basic knowledge of the Liquidlogic system. Consensus within the feedback comments was that the training had provided delegates with an overarching understanding of the functions, navigation and benefits of using the Liquidlogic system. Attendees of this training also repeatedly reflected that they felt enabled to go back to their setting and begin to access Liquidlogic with confidence.

How practitioners who attended will apply this learning to their practice
Practitioners stated that they intended to use the Liquidlogic system to support their practice in the following ways:

- To use the system when making referrals and when identifying needs
- To access Liquidlogic as an external member of staff to get up-to-date information on a family
- To use Liquidlogic when working with children accessing Early Help services
- To locate children/families on the system and chart/update/amend information
- To enlist families in need who are not already on the system and to make the Early Help team aware of their situation
- To track developments in terms of emerging needs and allocated support

General feedback from the session

The evaluation scores depict an average score of 3 (average understanding) for all of the above evaluation questions. This is with the exception of the question 'please rate your understanding of data protection and security linked to Liquidlogic', which had an average score of 4 (clear understanding). It must, however, be highlighted that the legislation in regard to data protection for all organisations operating within the UK is due to change from 25 May 2018, in which the UK will be working within the legislative framework of the General Data Protection Regulation (GDPR). It is, therefore, important that the trainer/s and strategic managers consider the implications of the implementation of the General Data Protection Regulation (GDPR). It is important to maintain this evidence of clear understanding in regard to data protection in relation to Liquidlogic. It is also important to consider any way in which the trainer/s can move the evaluation scores for the session learning objectives from an 'average understanding' to a 'clear understanding' and to consider what the current barriers may be to delegates identifying that they have a 'clear understanding' of Liquidlogic by the end of the training session. It has been acknowledged within previous reports that as the Liquidlogic training requires practice, ongoing use and practical application, this is often reflected in the evaluation scores that delegates feel able to rate themselves at the end of a 3 hour training session.

Changes from last quarter

'A useful tool for the VCS - Liquidlogic Early Help Module (LLEHM)' article was published in the July addition of the Early Help Newsletter.

The evaluation questions were reviewed and changed for Liquidlogic Early Help Module (LLEHM) to be meaningful in terms of the data measured and evaluated since the Part A and Part B training sessions were reduced to one training session to meet the training requirements of external staff (staff not employed by Leicester City Council).

A procurement task has taken place in which a training provider was selected to deliver Early Help training in 2018. The two identified training topics are Assessment Skills and Engaging Families & Difficult Conversations. This training will be live on the Children's Workforce Matters website from November 2017 and will then be promoted across the Early Help workforce accordingly.

Recommendations

- If the Liquidlogic training is still a priority for external agencies then greater promotion is required. The Liquidlogic profile needs raising in relation to the work of the Early Help team, Early Help Assessments and as an invaluable safeguarding tool
- To advertise and promote the Early Help training for 2018 by the end of 2017, with active marketing and cascading of this opportunity to key partner agencies to whom this will be of benefit to. A surge in promotional activities centred around the roll out of the 2018 Early Help training should also result in an increase to the Early Help web statistics that are highlighted in this report.
- It is also important to consider any way that the trainer/s can move the evaluation scores for the session learning objectives from an 'average understanding' to a 'clear understanding' and to consider what the current barriers may be to delegates identifying that they have a 'clear understanding' of Liquidlogic by the end of the training session
- It is important that the trainer/s and strategic managers consider the implications of this legislation change in relation to the General Data Protection Regulation (GDPR)
- To publish an article in the Early Help Newsletter for frontline practitioners to be provided with an overview of the General Data Protection Regulation (GDPR)

Early Help Newsletter

During the period the following articles have featured within the Early Help Newsletter:

- The GREAT Project: Do you work with family members who are looking to move into employment or training?
- LLR LSCB Neglect Toolkit and Survey Audit
- A useful tool for the VCS - Liquidlogic Early Help Module (LLEHM)
- CARE SILVER (Prevent) - Confidently Addressing Radicalisation Extremism
- Free online training opportunities - Child Sexual Exploitation (CSE) | Female Genital Mutilation (FGM) | Prevent | Forced marriage
- EDRMS – Request to delete process (Leicester City staff only)
- Rutland County Council Early Help Youth Service Support Programme
- Get Into Retail with Marks and Spencer
- Get Started with Football with Leicester City Football Club
- LSCB Safeguarding Learning Event: Neglect, Learning from Reviews and Child Sexual Exploitation
- An insight into the Gypsy and Traveller way of life – conference opportunity
- Get to know the GREAT Project – open day invitation
- Service Update for Liquidlogic
- The Inspire Project (youth project)
- New training opportunities to raise awareness of Child Sexual Exploitation
- Multi-agency ADHD awareness training

Early Help
A Guide for Schools

Amend this document to reflect your school's Early Help offer.

Support • Strengthen • Thrive

Introduction

Early Help is a strategic priority of the Leicester Education Strategic Partnership. This guide has been created as part of the work of the Leicester Education Strategic Partnership Operation Group (LESPOG) to:

'…manage a planned range of improvement and development activities in conjunction with education partners to ensure that significant progress is being achieved to meet the LESP's strategic priorities and objectives.'

LESPOG established an Early Help Task and Finish Group comprising partners from Primary Schools, Secondary Schools and the Local Authority to identify how to support schools to understand and engage with the Early Help agenda. It was agreed that a set of 'Early Help commitments' be created to set out the activities required by schools to ensure they are up-to-date and engaged with the early help agenda.

This document, compiled by a local Schools SEND Hub, details a set of Early Help Commitments which will enable local schools to ensure that:

- Pupils, parent/carers and staff are clear on the Early Help support available through the school
- Partners, working to support families alongside schools have clarity regarding the early help offer of schools; supporting effective multi-agency working
- They are up-to-date with and part of local and national approaches to the delivery of early help support for more vulnerable families
- They have evidence of their commitment to the personal development and wellbeing strand of the Ofsted Framework

The ultimate goal is to ensure all children, young people and families receive the right support, at the right time reducing the need for referral to statutory services.

How this guide works
This guide has four sections:

	Section	Content	Purpose	Page Number
1	**What is Early Help?**	What Early Help means Early Help in Leicester The role of Schools	To enable schools to understand what early help means and the role of schools in the delivery of it.	3
2	**Schools Commitments**	A set of 4 Early Help commitments , together with advice and information on implementation	To provide clarity regarding the activities Schools should undertake to ensure they are up-to-date and engaged with the early help agenda.	5
3	**Early Help in Schools**	A list of example early help activities undertaken within schools and how the impact of these can be measured	To provide a starting point for individual schools to define and evidence the impact of their Early Help offer	7
4	**Early Help Commitments Audit Tool**	Audit tool and Action Plan	To enable schools to understand actions required to implement the Early Help Commitments	12

1. What is Early Help?

Early Help' means providing help for children, young people and families as soon as problems start to emerge or where it is likely that issues will impact negatively on children's outcomes. Early help…

- Is for children of all ages and not just the very young,
- Can be very effective in supporting a child, young person and/or their family to step down from statutory services as well as preventing the escalation of issues.
- Is important because there is clear evidence that it results in better outcomes for children.

LCC recognise that Early help is a term that describes much of the everyday work of schools.

Early Help in Leicester

The vision of all partner organisations working with children and families in Leicester is to improve children's lives by working in partnership to raise aspirations, build achievement and protect the most vulnerable.

This is based on the belief that:

- Children, young people and families develop resilience if there are protective factors in place such as: a positive relationship with an adult; good literacy and communication skills; good school attendance; and, parents in or actively seeking/ready for work

- Children's needs are best met when help is offered in a universal setting within a socially mixed group and early on when problems start to emerge

- Children and young people's needs are best met when addressed in the context of the whole family, meaning that parents/carers/siblings' needs are addressed with consent as part of a holistic and integrated Early Help response

Early help services should **support** and **strengthen** families so that they can **thrive**.

The Role of Schools

Day to Day Support
Most families, most of the time, can get on with their lives quite happily with little or no outside help. If they need help it is usually provided by universal services, such as schools.

Focused Pastoral Support
All families can have times, however, when difficulties arise and they either may not recognise it or may not know how to start putting things right. Schools play a role in supporting families to address these difficulties through more focused pastoral support, which might include bringing in support via an external agency.

Early Help Assessment
For those children and families whose needs and circumstances make them more vulnerable, or where schools need the support of other agencies to meet the needs of the family, a co-ordinated multi-agency approach is usually best. In Leicester this is achieved through undertaking an Early Help Assessment and assigning a Lead Practitioner to work closely with the family to ensure they receive the support they require. Schools should be a key partner in any multi-agency work to support families

2. School Commitments to the Early Help Offer

The following four commitments are the core elements to your school's Early Help Offer.
By signing up to and implementing these commitments your school can ensure:

- Pupils, parent/carers and staff are clear on the Early Help support available through the school
- Clarity for partners, supporting improved multi-agency working
- Delivery approaches of early help support for more vulnerable families is up to date with local offers
- Helps evidence commitment to the personal development and wellbeing strand of the Ofsted Framework

1. The Designated Safeguarding Lead (a key decision maker) is responsible for Early Help as part of their safeguarding role.			
What	Who	Advice/Ideas for Implementation	Measurable Outcomes
The Designated Safeguarding Lead (DSL) should have responsibility for Early Help as part of their understanding regarding the appropriate response to concerns about a child.	This could be your - Head - Deputy - Assistant - SENCO - Senior Leadership Team	DSLs to familiarise themselves with their schools early help offer DSPs to ensure they are familiar with the **_EHA Referral Process_**	DSPs can confidently articulate their School's Early Help offer DSP's are clear on how referrals for EHAs are made

2. At least one member of staff is trained in the use of LiquidLogic. – Thoughts on this?			
What	Who	Advice/Ideas for Implementation	Measurable Outcome
The LiquidLogic Early Help Module (LLEHM) is an electronic case recording system for Early Help Assessments. Attending the training will enable partners to access the LLEHM on a read-only basis, which will enable them to: - See if pupils within their school have previously received are currently receiving support via Leicester City Council's Children Centres and Family Support Service - Track EHA requests and outcomes of cases	This could be your: - DSPs - Pastoral Support - Family Link/Support Worker - Behaviour Mentor	Appropriate school staff to attend LiquidLogic Early Help Module Training	Relevant staff have attended the 2 half day LiquidLogic Early Help modules Individual login received and working

that have been to the Partnership Hub			

<table>
<tr><td colspan="2" style="background:purple;color:white">3. The school has a defined and published Early Help Offer.</td></tr>
</table>

Setting out your early help offer can improve how partners work with you to make sure support offered to families begins at the earliest opportunity and in the best way possible.

Step One - define your offer	Step two – publish your offer
Use the list below to help you define your Early Help Offer i.e. what your school does to prevent problems from escalating.	

<table>
<tr><td style="background:purple;color:white">4. Students, Parents,/Carers and Staff know how to access Early Help support within school</td></tr>
</table>

Students, parents/carers and staff should have an awareness of the schools Early Help offer and know how to access Early Help support within the school.

Awareness raising routes, and key staff who are likely to be involved might include:

Group	Suggested awareness raising routes	Key staff that will need an awareness in order to support this group
Children and Young People	- Assemblies - Theme weeks - Display information on school notice boards	Any trusted adult within the school environment e.g. - Class teacher - Behaviour mentor - Nurture leader - Lunch supervisor - Teaching assistant - Educational Psychologist - Other agency support worker - Office staff - School nurse
Parents / Carers	- Include information in newsletters - Display information on school notice boards - Have copies of this leaflet available for parents	Any trusted adult in school e.g. - Class teacher - Behaviour mentor - Nurture leader - Lunch supervisor - Teaching assistant - Educational Psychologist - Other agency support worker - Office staff - School nurse
Staff	- Include as standing item in staff meetings - Include in staff briefings - Share this leaflet with staff - Through safeguarding training	- Designated Safeguarding Lead - Family support / link worker - SENCo - Pastoral support worker

3. Early Help in Schools

Use this list to:

- Define your schools early help offer – feel free to add your own provision – the list is not exhaustive.
- Identify data sources from which you can evidence the impact for Personal Development, Behaviour and Welfare Support services which have an impact on improving outcomes for students and their families.

Make sure the list is signed off and dated and a review date agreed

Inspiration guide for opportunities gives some support ideas and materials to inspire you and the team around the Early Help offer in your school.

Attendance			
Primary Offer	☺	Secondary Offer	💡
100% attendance rewards - Attendance data monitored by assigned staff - Lates detentions and letters home treated as a measure of disadvantage - Letter home at 95% attendance - EWO (Educational Welfare Officers) who attend relevant meetings - Family liaison officer **First day calling** - Home visits - Meet and greets with DSP **Monitoring groups in high mobility or absence requests** - Organising transport or walking bus to enable young people to attend - Personal attendance plans - Reward charts for good attendance and on time - School nurse (where there's a medical condition) - School Gateway/ Truancy calls - Wrap around care breakfast and after school clubs		- Attendance data reviewed and actioned - Education Welfare Officer - Detentions and letters home as interventions - Opportunities for meet and greets of pastoral staff **Certificates/Trophies linked to attendance** - Transport freely available to access School - Personal attendance plans - School nurse if applicable	
Measurable outcomes across keystages			
- Overall and individual pupil attendance improves - Improvement in PA (Persistent Absence) data - Reduction in number of leave of absence requests - Reduction in number of penalty notices issues - Lateness data shows reduction in number of interventions - Whole school targets are met			

Transition

Primary Offer	☺	Secondary Offer	💡
• Stories of moving from School to School • Extra visits/induction for vulnerable students • EYST (Early Years Support Team) • Health visitors / school nurse • **Induction Day** • Links with PBSS • Open evening • Pupil passport • SALT (Speech and language therapists) • Support online application for parents • **Transition programme with designated link teacher** • U-Explore • Visits for prospective families • Work with key partners		• Connexions worker for LAC students • Careers library • Dedicated careers advisor • Open evening • Pupil passport • SEMH team (Social Emotional and Mental Health) • **Social stories in an engaging manner** • Support with post-16 UCAS Progress applications • **Link between educational phases** • Visits for prospective families	

Measurable outcomes across keystages

• Pupils obtain a place at their chosen school
• Support families with appeals
• Family needs are met whilst awaiting placements

SEMH

Primary Offer	☺	Secondary Offer	💡
• Charity links such as Barnados • Bereavement counselling / groups • **CAMHS (Children, Adolescent Mental Health Service)** • Drawing and Talking Therapy • Educational Psychologist • Emotions in motions • Family link worker • **'Get out' cards** • Laura centre • Lego therapy • **Mentors and Nurture groups** • Pastoral Support Programme • Play Therapy • Staff training in dyslexia, ADHD • Virtual school team		• Behaviour mentor • Bereavement counselling / groups • **CAMHS (Children, Adolescent Mental Health Service)** • Family link worker • **'Get out' cards** • Lunch clubs • Sports Co-ordinator (inclusive sports leading to achievements for a wide range of students) • Anger management programmes	

Measurable outcomes across keystages

• Pupil learning data shows improvement
• Reduction in number of safeguarding disclosures

- Reduction in number of high / low level behaviour incidents
- Increase in pupils self-help skills
- Reduction in fixed term exclusions
- Assessments show that emotional needs e.g. Boxall Profile / Goodmans SDQ etc…

Staying Safe

Primary Offer	☺	Secondary Offer	💡
'Bikeability' - Relevant policies and procedures eg Data Protection - Advice point and Early help response - Anti-bullying champion and award **Assemblies** - Care plans - DAS (Duty And advice Service) - E-safety - Home visits - Library leaders - Link Police Community Support Officer - Literacy champion **Parent workshops** - PEP/LAC meetings - PHSE (Personal Health Social Education) Or PDC (Personal Development Curriculum) **Prefect system** - Prevent e.g. FGM (Female Genital Mutilation) / Forced marriages - School nurse Health Shop - Tracking of incidents e.g. CPOMS - Vice Principal post leading on PDBS - Whole school safeguarding training		- Relevant policies and procedures eg Data Protection - Anti-bullying champion and award - E-safety **Newspaper club** - Library leaders - Link Police Community Support Officer - NHS stop smoking - Pastoral leader meetings and training - Personalised pathways (ASDEN, Future Pathways, college courses) - PHSE (Personal Health Social Education) Or PDC (Personal Development Curriculum) **Student partners and/or Student Counsellor** - Support group for Students with additional support needs	

Measurable outcomes across keystages

- Anti-bullying award achieved leading to a greater awareness of bullying within the community and a zero tolerance approach to bullying incidents
- Increase in turn-over of families accessing Social Services/Family Support Worker
- Welfare and neglect issues on Social Services caseload is reduced
- All parents have signed and are adhering to the AUP (Acceptable User Policy) via the AUA (Acceptable User Agreement)
- Quality displays evidence pupils new learning
- An increasing percentage of parental engagement
- An up-to-date rolling programme of CPD (Continued Professional Development) in relation to Safeguarding / Training for all staff (2 years – DSP and 3 years – all staff)

Supporting Families			
Primary Offer	😊	**Secondary Offer**	💡
- Bereavement counselling - Community lunch **Curriculum days / evenings** - Family link / support worker (available at parents evenings or drop ins) - Support for form completion inc financial support and housing - Home visits **Parents evenings** - Pastoral support - SENCo - SENDIASS (Special Educational Needs and Disabilities Information Advice Support Service) - Signposting to external agencies and training **Workshops** - Wrap around care		**Noticeboards for awareness raising** - SENCo - Bereavement counselling - Community lunch - Curriculum days / evenings - Family link / support worker (available at parents evenings or drop ins) - Support for form completion inc financial support and housing	
Measurable outcomes across keystages			
- Pupil learning data shows improvement - Uptake of support services increases - Reduction in number of DNAs (Did Not Attend) to appointment - An increasing percentage of parental engagement			

The local community			
Primary Offer	😊	**Secondary Offer**	💡
- Community events – fairs, choirs, lantern parade - Complementary Schools - Donations from community for PTA (Parent Teacher Association) - Governors **Community Links such as Fire, PCSO and businesses** - Religious groups **Supporting charities**		- Community events – fairs, choirs, lantern parade **Governors** - Community Links such as Fire, PCSO and businesses - Religious groups - Supporting charities - Youth group	
Measurable outcomes across keystages			
- Families have a better understanding of the wider community - Reduction in the percentage of Anti-Social Behaviour incidents - Reduction in PCSO call outs			

The Curriculum			
Primary Offer	☺	Secondary Offer	💡
1:1 / group work **Assemblies** - Booster classes - Citizenship delivery - Inter-school events - Subsidised school trips / visits **Theme weeks**		- Alternative provision **Careers education** - interventions - PDC - PHSE	
Measurable outcomes across keystages			
% of children attending a school club - Pupil learning data shows improvement			

Signed and agreed by	
Head Teacher *Date*	Chair of Governors *Date*
SENCo *Date*	Designated Safeguarding Lead *Date*
Insert Date Date Completed	*Insert Date* Review Date

Please add/delete boxes as appropriate

4. Early Help Commitments Audit Tool

This Audit Tool has been created to help your school assess progress towards achievement of the four Early Help Commitments which can be used to evidence Ofsted requirements. The tool provides:

- An action plan with suggestions regarding the actions your school can take to meet the outcomes – please add, delete or amend actions as appropriate.
- A place to record the outcomes achieved

RAG ratings

At risk of not achieving	On track, work started	Completed

The Designated Safeguarding Lead (a key decision maker) is responsible for Early Help as part of their safeguarding role				
Actions Required				
Outcome	Action	When	Who	RAG rating
Designated Safeguarding Lead has responsibility for Early Help as part of their understanding regarding the appropriate response to concerns about a child.	Identify responsible DSL(s)			
DSLs have attended 'What is Early Help' briefing	Visit Early Help Training website and book place on training			
DSLs have attended Early Help Assessment Training	Visit Early Help Training website and book place on training			
Outcomes Achieved		Complete?	Details	Review Date
Designated Safeguarding Lead has responsibility for Early Help as part of their understanding regarding the appropriate response to concerns about a child.		*Yes/No*	*Insert name of responsible DSL(s)*	*Insert date*
DSLs have attended 'What is Early Help' briefing		*Yes/No*	*Insert date*	
DSLs have attended Early Help Assessment Training		*Yes/No*	*Insert date*	

At least one member of staff is trained in the use of LiquidLogic

Actions Required

Outcome	Action	By When	Who?	RAG rating
At least one member of staff is trained in the use of LiquidLogic.	Identify appropriate staff to receive training			
Appropriate staff to attend training	Visit Early Help Training website and book place on training			

Outcomes Achieved

Name of staff member	Attended Part A LiquidLogic Training	Attended Part B LiquidLogic Training	LiquidLogic Login received?
Insert name of trained staff	*Insert date*	*Insert date*	*Tick*
Insert name of trained staff	*Insert date*	*Insert date*	*Tick*

The school has a defined and published Early Help Offer

Actions Required

Outcome	Action	By When	Who?	RAG rating
There is a defined Early help offer for the school	Use the Early Help in Schools list to identify the Early help provision available through the school – delete the type of provision not offered and add additional elements on to the list			
	Get your schools Early help List signed off			
	Agree a review date			
The Early Help offer is published	Identify how and where to publish your schools early help offer			
	Publish your schools early help offer			

Outcomes Achieved

		Complete?	Date	Review date
There is a defined Early help offer for the school		*Yes/No*	*Insert date*	*Insert date*
	Details	Complete?	Date	Review date
The Early Help offer is published	*e.g. website, noticeboards*	*Yes/No*	*Insert date*	*Insert date*

Students, Parents,/Carers and Staff know how to access Early Help support within school

Actions Required

Outcome	Action	By When	Who?	RAG Rating
Children and young people, have been made aware of how they can access early help within the school	Identify key staff who Children/Young People can talk to about Early Help			
	Identify how to train/raise awareness of this responsibility with these staff			
	Deliver training/awareness raising to these staff			
	Identify appropriate methods to deliver information on Early help in school to Children and Young People			
	Deliver messages regarding Early Help to Children and Young People in school			
Parents/Carers have been made aware of how they can access early help within the school	Identify key staff who Parents/Carers can talk to about Early Help			
	Identify how to train/raise awareness of this responsibility with these staff			
	Deliver training/awareness raising to these staff			
	Identify appropriate methods to deliver information on Early help in school to Parents/Carers			
	Deliver messages regarding Early Help to Parents/Carers			
Staff have been made aware of how they can access early help within the school	Identify key staff who Staff can talk to about Early Help			
	Identify how to train/raise awareness of this responsibility with these staff			
	Deliver training/awareness raising to these staff			
	Identify appropriate methods to deliver information on Early help in school to Staff			
	Deliver messages regarding Early Help to Staff			

Outcomes Achieved

	Complete?	Details	Review Date
Children and young people have been made aware of how they can access early help within the school	Yes/No	Insert date	Insert date
Parents/carers have been made aware of how they can access early help within the school	Yes/No	Insert date	Insert date
Staff have been made aware of how they can access early help within the school	Yes/No	Insert date	Insert date

Troubled Families Programme

Helping up to **400,000** families with multiple complex needs

"I don't know where I would be if [keyworker] hadn't come to work with me, I'd lost hope"
Mother

98%

Troubled families coordinators say the programme is effective at achieving whole family working.

78%

Keyworkers say the programme is effective at achieving long-term change in families' circumstances.

95%

Troubled families employment advisers say the programme is effective at achieving long-term positive change in families' circumstances.

Almost 400,000
families worked with in a whole family way with funding from the programme.

Over 20,000
families where one or more adult has succeeded in moving into continuous employment.

Over 171,000
families achieved significant and sustained progress.

The programme is **funding:**

MORE early help and keyworkers coordinating support for families

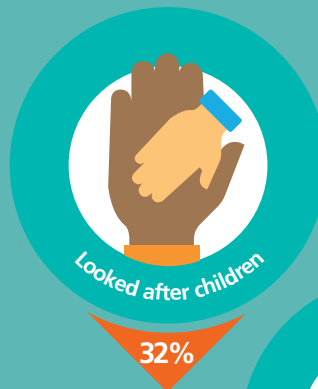**INTEGRATION** of services in communities

TRAINING for whole family working

INTELLIGENCE and data sharing to better understand the needs of families and what works

COMMUNITY SUPPORT for families so they are more resilient in the long term
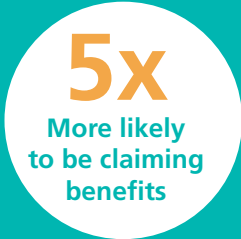
Better outcomes for families

In the 19-24 months after families joined the programme compared to families in the comparison group:

Looked after children
32%

Juvenile convictions
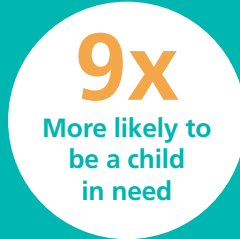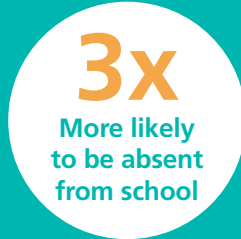**15%**

Juvenile custody
38%

Job seekers
11%

Adult custody
25%

"It made me want to actually aspire to be like her [keyworker] in the future, and help other mums to see the light" **Mother**

These are percentage changes and relate to those on the programme only

Compared to the rest of the population, in the year before starting the programme

adults were:

5x More likely to be claiming benefits

9x More likely to have a caution or conviction

children were:

3x More likely to be absent from school

9x More likely to be a child in need

Families have at least **two headline** problems:

- Poor school attendance
- Worklessness and financial exclusion
- Crime/antisocial behaviour
- Children needing help
- Domestic violence
- Poor physical & mental health

Local authorities receive payments of up to **£1,800 per family** who achieve successful outcomes

The programme achieves its aims through:

EARLY intervention

WHOLE family working

Voluntary & community sector
One family
Police
Schools
Health services
Local authority
One keyworker
One plan

MULTI-AGENCY working

MEASURING outcomes and data

A whole family approach means each family has a named lead worker, a full assessment of the problems they face and an agreed plan with stretching goals

Appendix Seven. Tables

1: Troubled Families Programme Funding
The breakdown of core funding received to date

2: Phase 2 Eligibility Criteria and Outcome Measures
Provides a summary of the eligibility criteria for inclusion within the programme and the outcome measures as listed in Version 10 of the Family Outcomes Plan

3: Use of TF core funding and payments by results income to support delivery partners.
Breakdown of the funding and support provided to enable key partners to achieve attachments and PBR

4: Summary of the roles of the key Partners in the Worklessness Support offer
Overview of each partners role in delivering worklessness support to eligible families

5: Attachments and PBR
Illustrating the most basic of success measures for Leicester's TF Programme: a summary of the numbers of families attached to the programme and number of PBR claims made

6: Non-Claimable Cases
Clear evidence of reasoning behind no PBR status on cases

7: Achievement of Outcomes
Breakdown of the percentage of outcomes met in all areas

8: Change in lead agency rates over time elapsed from start of intervention
Showing results of effective agency working through troubled families programme

9: Assumed tier of need based upon service intervention
Showing the tiered system that has then been applied to all troubled families' cases and subsets within them to demonstrate the impact on families' needs that services are having.

10: Percentage of cases under each direction of need by intervention
Shows reduction of intervention need in percentage terms for all TF cases

11: Comparison Group proportions
Table showing the results for the comparator group using the need indicators:
- Children In Need (CIN)
- Children with Chid Protection Plans in place (CPP)
- Looked After Children (LAC)

12: Comparison of LCC proportions to comparator group
Table showing figures for LCC and comparisons
13: The Early Help Service Transformation Matrix
Summary of Assessment Criteria and Self-Assessment Ratings

References

i) Allen, G. (2011) "Early Intervention: the next steps", *London: HM Government Cabinet Office* http://www.dwp.gov.uk/docs/early-intervention-next-steps.pdf

ii) Field, F. (2010) "The Foundation Years: preventing poor children becoming poor adults - The report of the Independent Review on Poverty and Life Chances", *HM Government*

iii) Marmot, M. (2008), "Review of Health Inequalities – Fair Society, Healthy Lives", *Institute of Health Equity*

iv) Munro, E. (2011) "Munro review of child protection: final report - a child-centred system", *Department for Education, London: TSO*

v) Tickell, C. (2011) "The Early Years: Foundations for life, health and learning", *Department for Education, London: TSO*

vi) "Working Together to Safeguard Children" (2018), *London: HM Government*

Useful links

- Action for Children: Early intervention – where now for local authorities
- Early Intervention Foundation - Reports
- Leicester Children's Trust – Early Help Strategy
- Early Intervention Foundation – Evaluating early help: A guide to evaluation of complex local early help systems