

London Borough Of Hillingdon

Report of the Children, Young People & Learning Policy Overview Committee 2015/16

The Effectiveness of Early Help to Promote Positive Outcomes for Families

Members of the Committee

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CHAIRMAN'S FOREWORD

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

The areas of prevention and early intervention, which are the focus of this review, are, of course, not only of value in the early years of a child's life. However, it may be that this is when they are of greatest benefit. This is due to the fact that a child's future development and achievements are built upon their experiences early in life.

The Council's Early Intervention and Prevention Service was fully established in September 2015, although it is important to note that a number of the services were previously provided under a different management structure. It is clear that these are already making a positive contribution to early intervention and prevention. Equally, it is heartening to see the plans being progressed to develop the service over the next couple of years.

Notwithstanding the progress made to date, the review has identified a number of areas where improvements should be considered. As with many services, the Council cannot deliver Early Intervention and Prevention Services effectively in isolation and indeed, relevant Government issued guidance states that 'LAs should work with partners to promote prevention and early intervention and offer early help'.

Effective service delivery requires that relevant, good quality, up-to-date data is available and that this is shared regularly with key service providers. This review has found that such sharing can prove to be challenging. Equally, staff need to receive high quality training to ensure that they can perform their jobs to the best of their ability. Work is already well underway, but steps will need to be taken to ensure that training provision reflects and continues to reflect the development of the Early Intervention and Prevention Plan.

Promotion of available services to families and to partner organisations is key to ensure that resources are allocated effectively and more importantly, to ensure that the benefit to families is maximized. A need to further embrace the various available online tools has also been

identified, although it is acknowledged that more traditional methods of information sharing will continue to play an important role.

The allocation of funding that the Children's Centres receive is potentially contentious. The question of whether each centre should receive an equal amount of funding or whether funding should be based upon specific local need is not one that can be answered easily, but given the discussions and evidence presented during the review, it is an issue that the Committee feels to be worthy of further consideration.

Following the undertaking of a review by a Committee of the Council, it is normal for an update on progress made, with regards to implementation of the review recommendations, to be presented to the Committee. This is typically submitted around one year after the review. Given the ongoing development of Early Intervention and Prevention Services, the Committee is requesting that it is provided with an update report before the end of 2016, with a view to this leading to regular progress reports. This will help to monitor and steer delivery of the Early Intervention and Prevention Services Plan. We look forward to assisting with this important work.

Finally, I would like to thank all the witnesses who helped the Committee to gather evidence, either by attending a Committee meeting or by allowing my colleagues and I to meet with them at some of the Children's Centres in the Borough.

Councillor Jane Palmer
Chairman of the Children, Young People & Learning Policy Overview Committee

RECOMMENDATIONS

The Children, Young People and Learning Policy Overview Committee recommends:

- 1) That Cabinet endorses the work undertaken by the Council to support families through the provision of Early Intervention and Prevention.
- 2) That the Cabinet Member for Education and Children's Services considers the following recommendations in light of the Committee's review:
 - a) That officers further develop partnership working in order to ensure effective delivery of early intervention and prevention services to promote positive outcomes for families. In particular, this would be achieved through:
 - i) Developing the use and sharing of data and intelligence required for effective service delivery, so that individuals, families and communities in need of early support are identified and supported.
 - ii) Identifying how the effectiveness of partnership and collaborative working can be enhanced.
 - b) That officers further investigate how the early help offer can be effectively promoted to families and professionals, with a particular focus on digital promotion.
 - c) Within existing resources, consideration be given as to whether funding that Children's Centres and the Key Working Service receive should be dependent on local levels of need or whether funding should be allocated universally.
 - d) That officers seek to ensure that principles and best practice in relation to the provision of early help are embedded through the provision of training and development to early intervention staff and practitioners.
 - e) That an assessment of the development and implementation of the new services be undertaken once the changes have become embedded, with consideration given to a progress report to the Cabinet Member and the Policy Overview Committee's meeting towards the end of 2016. If considered appropriate, this could be followed by regular progress reports to the Committee.
- 3) That the Cabinet Member for Education and Children's Services recommends that the following areas be investigated further in light of the Committee's review:
 - a) That a review be undertaken of Child and Adolescent Mental Health Services (CAMHS) at the earliest possible opportunity during 2016/17. It is further proposed that this be a joint review to involve the Children, Young People and Learning Policy Overview Committee, the External Services Scrutiny Committee and other bodies, if appropriate.
 - b) That the concerns raised during the review in relation to levels of child obesity in Hillingdon be passed to the relevant Council Committee(s) and officers for them to consider whether further investigation or review would be appropriate.

- c) That concerns raised during the review in relation to child dental health be passed to the relevant Committee and officers, while noting that a review of child oral health in Hillingdon was undertaken by the Social Services, Housing and Public Health Policy Overview Committee earlier in 2015, with an update due to be considered by the Health and Wellbeing Board in 2016.

BACKGROUND TO THIS REVIEW

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

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

Defining the review

In order to undertake the Committee's review effectively, it is first necessary to define what is meant by the key terms of prevention and early intervention.

There are a number of definitions of prevention and early intervention in use. For the purposes of the review, these have been defined as follows:

Prevention

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

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

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

Early intervention

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

The Centre for Excellence and Outcomes in Children and Young People's Services (C4EO) identifies as follows the potential for early intervention with individual children and with families and with populations at risk: "Intervening early and as soon as possible to tackle problems emerging for children and young people and their families or with a population most at risk of

developing problems. Early intervention may occur at any point in the child or young person's life".

Graham Allen MP describes early intervention as "providing the social and emotional bedrock for all children". In order to achieve this he describes a life course approach with children being 'School Ready' (by the age of 5), 'Child Ready' (by the age of 11) and 'Life Ready' (by the age of 18). He also identifies a range of evidence-based early intervention programmes, split by the developmental stage of the child and whether they are aimed at all children or those in need.

Review Focus

This review of the Effectiveness of Early Help to Promote Positive Outcomes for Families covers the Council's Early Intervention and Prevention Service. This was fully established in September 2015 as a consequence of transformation activity undertaken within the overall Children's Pathway Transformation Programme.

The new service comprises four divisions that have been created by a combination of aligning existing services within the overall service structure and by disestablishing previous services in order to create new service areas. The four service areas are:

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

In addition to the above services, the externally commissioned 0-19 Healthy Child Programme has been aligned to Early Intervention and Prevention Services.

During the 2014/15 municipal year, the Committee undertook a review entitled 'Reducing the risk of Young People Engaging in Youth Crime and Anti-Social Behaviour.' The review made a number of recommendations that related to Youth Offending Services. An update on this review is due to be presented to the Committee in March 2016. Due to this and the fact that the Committee did not hear evidence from Youth Offending Services during the current review, no specific recommendation recommendations have been made in relation to Youth Offending Services.

Review Context

Bearing in mind the wish to establish a more coordinated and structured approach, an initial Early Intervention and Prevention Strategy was developed in 2014 - 2015. In addition to responding to national and local policy drivers regarding the provision of support for children, young people and families, the Strategy was informed by review work undertaken as part of the Children's Pathway Transformation Programme. The transformation programme undertook a range of 'discovery' activities in relation to services and processes which support children, young people and families. This discovery activity identified areas where changes to existing provision would be beneficial.

There are four tiers of intervention provided to families, based upon their needs. These are as follows:

- Tier 1 - Universal Services: These are services that are available to or are provided to everyone.
- Tier 2 - Targeted Services: This involves meeting the needs of families by securing and providing targeted programmes of developmental activity that enable children, young people and families to develop the behaviours, skills and capabilities to avoid or overcome problems and risks.
- Tier 3 - Specialist Services: Where a family has continuing or more complex needs, the child / family may be referred to other services that specifically address these needs.
- Tier 4 - Acute Needs. The children and families with the most significant and worrying needs are referred for statutory intervention by social services.

Where additional needs are identified which universal provision cannot cater for, the child or family may be referred to tier 2, targeted services. The child/family may then work with a tier 2 professional to address the additional needs. If further needs present themselves, the child / family may be referred once again to another service to address the presenting needs; this could be in tier 3, specialist services. Some of the most serious cases will be referred for statutory intervention by social services at tier 4.

A key aim of Early Intervention Services is to enable families to be able to 'step down'. This stepping down process aims to enable the services provided to families to be moved from tier 4 to tier 3 services, from tier 3 to tier 2 services and from tier 2 to tier 1 services. This is undertaken, while taking care to ensure that families feel adequately supported, in order to reduce the likelihood of problems re-emerging. It is, therefore, sometimes necessary for families to be moved, at least temporarily, back to a higher tier of provision.

The Children's Pathway Transformation Programme review identified that a child / family was often referred to a variety of services for support. Having taken the family out of universal provision, professionals could often find it difficult to return the family to only being reliant on universal services. A number of possible reasons were identified for this, including the risk that universal providers may become disconnected with the journey that the child / family has taken or the family finding it difficult to re-engage or 'step-down' from targeted support provided.

In summary, the findings of this review were as follows:

- Some families' problems escalate because agencies do not collectively and effectively respond to their needs early enough.

- The array of services available is complex and not always well co-ordinated, with different systems and definitions of need. Families can struggle to navigate their way to the support they require.
- A relatively small number of families with complex needs are responsible for a disproportionate amount of the workload of many agencies. These families do not always receive a joined up response to prevent and / or resolve the issues they face.
- Where issues are identified, services are sometimes too swift in seeking to refer the whole family on, when they could support the family, or individual family members, through their own service.
- Children and family services need to find new ways to work effectively together to ensure that problems and safeguarding risks for children, young people and families are identified early and that swift and co-ordinated interventions are made.
- Children and families encountering difficulties can sometimes experience many independent service interventions over time, several years in some cases, without problems being resolved.

A wide variety of work was undertaken following the initial review. The fact that a number of findings proposed within the current review relate to the previous findings, is indicative, both of the fact that the Council's Early Intervention and Prevention was only fully established in September 2015 and also of the iterative, ongoing nature of the work.

Evidence Gathering

The Committee undertook a series of three witness sessions. These included evidence presented by a number of Council officers, in addition to a youth worker and three young people who had been involved in the 'Unique Swagga' programme. This programme is delivered by the Targeted Services division of the Early Intervention and Prevention Service. Three Members of the Committee, including the Chairman and Labour Lead, accompanied officers on visits to three Children's Centres in the Borough - Harefield, Nestles Avenue and Cherry Lane. In addition to meeting staff and centre users, a session took place with Key Working Staff and with three parents who had experience of the Key Working service provided by the Council.

A full breakdown of witnesses who provided evidence to the Committee can be found in Appendix B; The Terms of Reference for the review can be found in Appendix A. The Committee was extremely grateful to those who gave their time to attend a witness session and especially to the parents and young people who volunteered their time to discuss what were, in some cases, challenging and potentially upsetting issues.

Where appropriate, reference has been made to the evidence collected during witness sessions in the main body of this report.

Review Structure

A simple structure was utilized for the undertaking of the review, with the first witness session setting the context of the review. The second witness session enabled understanding of how the need for early help is identified and responded to. The role that early intervention plays in enabling emergent problems to be resolved, without the need for social care intervention, was considered as part of the evidence presented to the Committee.

The third witness session aimed to demonstrate how services provide early support in ways which lead to the resolution of emergent problems, ensuring that the problems did not become more entrenched or escalate. Consideration was given as to how significant and sustainable change is achieved through the provision of early help.

The recommendations for this review have been presented as a single set of recommendations. This is to reflect the overlap between the evidence presented to each of the witness sessions and the information obtained from the Children's Centre visits.

In addition to the areas of work covered by the main recommendations within this review, a number of related issues were highlighted by witnesses during the review. These issues do not fall within the remit of Early Intervention and Prevention Services and are also not areas of work that fall directly under the Committee's Terms of Reference. Accordingly, these issues, which have been included as part of recommendation number three of the review, will be passed to the relevant Council Committees and officers as appropriate.

RECOMMENDATIONS IN DETAIL

The evidence received by the Committee demonstrates that there are a wide variety of services already in place that provide early intervention and prevention. These services are, thereby, contributing to the effectiveness of early help to promote positive outcomes for families. This is partly due to progress made since the full launch of the Council's Early Intervention and Prevention Service in September 2015. It is also due to the fact that many of the services on offer were being provided previously and are now being provided under the new structure.

The Committee was informed that a refreshed Early Intervention and Prevention Plan had been developed and was in the process of being implemented. This document defines the work undertaken by Early Intervention and Prevention Services and outlines the priorities of the service. Development of the Plan has been informed by a range of documents, including the Joint Strategic Needs Assessment (JSNA). It is acknowledged that high quality early intervention and prevention services cannot be delivered in isolation. The Committee was advised that an Early Intervention and Prevention Strategy was in the process of being refreshed and further developed by the Council, in collaboration with a number of key partners. This work includes arrangements for collaboration and coordination of the work with a range of agencies, alongside 'step up' and 'step down' procedures between Early Intervention and Prevention Services, Social Work Teams and the wider range of services available to families in the Borough. This work is underpinned by the overall aim of ensuring the early identification of and engagement with, families in need of early help.

The Early Intervention and Prevention Services Plan defines the outcomes that the service is aiming to realise, along with operational objectives to ensure that the desired outcomes are secured. Each of the objectives set out in the plan has a relationship to high level strategic outcomes and to strategic priorities drawn from the JSNA.

Meanwhile, The Early Intervention and Prevention Services Performance Web, a draft of which was presented to the Committee, aims to provide a service framework to enable performance in order to secure agreed outcomes to be effectively monitored and evaluated. The Performance Web also includes indicators and measures which will demonstrate whether the desired outcomes are being achieved, or not.

At an operational level, there are many examples of services already being in place that are effective in promoting positive outcomes for families. A few examples of this are provided below.

The eighteen Children's Centres in the Borough aim to improve outcomes for young children and their families and to target services at families in the greatest need. Three Member visits were undertaken to Children's Centres in the Borough as part of the review. These received generally positive feedback from parents, both with regard to the Children's Centres themselves and in relation to their experience of the Council's Key Working service. One example of a well received service provided by the Children's Centres were 'Attention Hillingdon' sessions. These eight week courses have been developed for children who would benefit from additional support in developing their attention and listening skills, and their parents. Parents who had experience of provision through the Council's Key Working Service spoke of how they had been helped to end social isolation and assisted to obtain skills that would both support them to enhance their parenting skills and to help them to find work.

Young people who had experienced the Unique Swagga Programme, which was provided by the Targeted Programmes service area, found that the programme had provided them with

invaluable information in relation to a diverse range of issues, such as body image, sex related issues, peer pressure and smoking. The participants felt that they were listened to by programme staff and that they were not judged. They felt that without participation in the programme then they may not have considered the consequences of their actions as fully. The young people also considered that the programme was useful because it could cover key issues in more depth than school could.

Given the positive evidence received by the Committee in relation to the development of the Early Intervention and Prevention Service so far, it is recommended:

1

That Cabinet endorses the work undertaken by the Council to support families through the provision of Early Intervention and Prevention.

It was acknowledged during the review that the provision of early intervention and early help were only likely to be effective if they were based upon robust data. For example, meaningful performance indicators, which were key to ensuring effective service delivery, could only be developed if officers had access to accurate and timely data. Data was also required to enable services to be properly targeted. It was questioned whether the Council had access to all the data necessary in order to facilitate such targeting and as such, it was suggested that if further work identified that it did not, that officers should further investigate potential sources of information and how these matched individual service requirements. It is noted that performance indicators and a scorecard are already in the process of being developed, which should contribute towards addressing this need. However, data was not yet available to inform specific target setting in all areas.

Witnesses interviewed during the review felt that where sufficiently accurate and timely data was available, this was not always being shared as extensively or as regularly as it could be. In particular, the Children's Centres felt that the data sharing arrangements could be improved, although it was acknowledged that data sharing with partners could be a challenge when identifying and supporting vulnerable families. This was partly due to data protection concerns. Work was being progressed with the Early Intervention and Strategy Group to strengthen arrangements. It was suggested that links with the Children's Centres were improving following the recent appointment of a service manager responsible for this element of Hillingdon's early intervention and prevention offer.

The use of data is already being developed by the Council, with 'Clearcore', data matching software providing an opportunity to identify families who are experiencing multiple challenges, but who may only be known by individual organisations. Within the Key Working Service, the aim is to physically co-locate individual services in order to enhance soft data exchange and improve practitioner standards. An existing example of the targeted use of data was joint working by the NHS and youth services where young people were admitted to accident and emergency due to alcohol. This was also demonstrated during the recent External Services Scrutiny Committee review of 'Alcohol Related Admissions Amongst Under 18's.'

Statistical information presented to the Committee during the review demonstrated that wards in the south of the Borough tended to have a high population of children and young people, while wards in south also tended to experience higher levels of deprivation and consequently, higher eligibility for free school meals. It was also noted that increasing birth rates would contribute to an increased number of young people in the Borough over the next twenty years. The

Committee requested that officers ensure that consideration be given to demographic factors as services were developed.

A wider need for partnership working to be enhanced was identified. One of the conclusions of the previous review work undertaken as part of the Children's Pathway Transformation Programme in 2014/15 was that 'Some families' problems escalate because agencies do not collectively and effectively respond to their needs early enough.' The review also concluded that 'The array of services available is complex and not always well co-ordinated'. It is clear that much positive work has been undertaken since this conclusion was drawn. However, the current review has evidenced that there are still further improvements to be made.

The current review was informed that referrals to the Key Working Service (which launched in April 2015) by partners were made in conjunction with the usage of Early Help Assessments (EHA). One of the principles underpinning the use of the EHA and the associated Team Around the Family process is that family problems can and are often best resolved by the identifying agency, without the need to refer to another organisation. The Assessment tool had been designed in conjunction with partners from Hillingdon's Local Safeguarding Children Board (LSCB). This ensured that the process was inclusive of all partners from the outset. Efforts were made to ensure that all organisations working with families and with children aged 0-18 were aware of Hillingdon's Early Intervention and Prevention Services and the range of services on offer from Children's Centres, Targeted Programmes and the Key Working Service. This was done through attendance at service area team meetings, training events and making bespoke one-to-one training available for all partner organisations.

Notwithstanding the positive progress made to engage with partners to provide support and increase awareness of the Council's offer, officers agreed that further work needed to be undertaken. In particular, the number of Early Help Assessments that were provided (92 between January and August 2015) was relatively low compared to the total number of requests made for Early Intervention and Prevention Services, Key Working Services (227 since April 2015). This was partly because there were a range of other assessment routes available to families likely to be in need of help. Also, as the service, was non-statutory, families could not be forced to accept an offer for an Early Help Assessment to be undertaken. Work would take place with partners to increase the number of EHA Assessments. There is also a need to consistently ensure that all relevant colleagues are aware of and are using the EHA process and tools. This is a challenge, that the Key Working Service is working to a plan to meet, as the aim is to enable and ensure usage across all internal and external partner services.

Availability and provision of suitable housing was an issue faced by many families using Children's Centres. Staff assisted by ensuring that the case was logged with the Council's Housing Service and, where relevant, by emphasising the urgency of the case. However, it was felt that joint working with the Housing Service was an area that could be improved as it could sometimes be challenging to get an adequate response when referring a particular case.

The issue of engagement with schools was highlighted, with it being suggested that although schools could be quite proactive in contacting parents with concerns about their children, they did not often share concerns with the Council or other partners. It was felt that cooperation with schools could present a challenge as the majority were not controlled by the local authority. Schools were already being encouraged to share more general information about issues requiring potential early intervention. More general efforts were being made to strengthen working relationships with schools.

It is therefore recommended:

2a

That officers further develop partnership working in order to ensure effective delivery of early intervention and prevention services to promote positive outcomes for families. In particular, this would be achieved through:

- i) Developing the use and sharing of data and intelligence required for effective service delivery, so that individuals, families and communities in need of early support are identified and supported.
- ii) Identifying how the effectiveness of partnership and collaborative working can be enhanced.

A number of information raising activities are already undertaken through the Team Around the Family and consideration is being given as to how information could be shared with other organisations more effectively. Early Intervention and Prevention Services are also promoted on the Council website. This can sometimes be problematic due to legislation with regard to data sharing.

Concerns were expressed during the review that, although a wide range of services was being provided, these were not always being fully utilised. Committee Members were also concerned that there appeared to be a low awareness of some of the services offered by Early Intervention and Prevention. The need for work to be undertaken to promote these services is acknowledged, with it being suggested that this would include a dialogue with universal service providers in order to understand how they could promote Early Intervention and Prevention Services.

Services provided by the Children's Centres are promoted in a variety of ways. This included word of mouth, promotion via pre-schools, leafleting of particular roads and promotion via local secondees from the Department for Work and Pensions. Linking in to recommendation 1a, targeted promotion does require being able to make use of accurate and timely data in relation to potential centre users. More widely, within the Children's Centres and the Key Working Service, promotion of services could be a challenge as it was not always known which families were in need of support until the service received a 'cry for help.' It was noted that the Early Help Assessment and Team Around the Family offer within Key Working Services was available to residents via the Council's website. A number of case studies had been produced to help promote the Children's Centres and it was considered that this work could be continued or expanded.

The information provided to new mothers was discussed in a witness session and as part of the discussion with users of the Key Working Service. This identified that a variety of information was provided to new mothers via health visitor visits. This included information about Children's Centre provision. It was suggested that an even wider range of information could be provided, including the use of 'Bounty' packs¹, which were sometimes provided to new mothers. There

¹ 'Bounty' packs are provided in a number of areas across the country. The spending of public money on the packs is considered to be controversial by some as a private company is responsible for producing and supplying the packs.

was also a need to balance the provision of information with ensuring that new mothers did not feel overwhelmed by the information that they received.

The young people who attended the third witness session of the review as attendees of the Unique Swagga programme felt that it was important to promote the programme and the other opportunities available through social media. The young people were already aware of some promotional activity taking place via Facebook but felt that promotional work should be undertaken through other channels, such as Twitter and Instagram. It was suggested that these platforms could be utilized more extensively and that promotional activity should be increased more generally. With regard to use of social media, it is noted that work is already being undertaken to rationalize Council use of social media, which officers are asked to be mindful of when investigating activity in this area.

It is therefore recommended:

2b

That officers further investigate how the early help offer can be effectively promoted to families and professionals, with a particular focus on digital promotion.

During the review, there was discussion about the capacity of existing services, such as Children's Centres, to provide the targeted support required by families, especially given that some wards lacked Children's Centres or early years facilities. It was acknowledged that capacity would need to be considered as part of the developing strategies and that both qualitative and quantitative analysis would be required of relevant data.

There are no plans to increase the overall budget for Children's Centres, but it is possible for resources to be prioritised according to specific need. Some staff at the Children's Centres suggested that they would benefit from being able to recruit additional professionals in support of volunteers, but acknowledged the budgetary challenges associated with this.

It has also been suggested that Children's Centres and Key Working provision in areas of the Borough with the highest need should receive more funding than those in the more affluent parts of the Borough. It was further suggested that the current multiple centre funding model for Children's Centres should be reviewed, with this regard.

The Committee notes that each Children's Centre currently receives a budget for staff and a budget for premises costed at a rate of £70 per m². The eighteen Children's Centres within the Borough are grouped into three geographic localities. Each locality receives a budget for the delivery of services to be procured at a local level to meet the needs of residents within the area. The amount given to each locality is calculated using the following four factors in relation to children living within the wards served by the locality. The factors include the total population of children under 5 years; the percentage of children living in poverty; the percentage of children underachieving at the end of the Early Years Foundation Stage and; the percentage of children classed as obese aged 5. This funding formula means that the funding provided to the locality as a whole should reflect needs within it. However, the allocation of funding to individual Children's Centres within a locality will not necessarily fully reflect the needs of the population it serves. While acknowledging that there are benefits of the current funding arrangements, the Committee requests that officers consider the current arrangement and provide an update to Committee in due course

The value of the Children's Centre Locality Groups was questioned on one of the Centre visits as it was felt that the system amounted to micromanagement, which could also result in unnecessary duplication. A previous case where the Locality Group had assigned funding for crèche workers, who had also been funded separately by the Children's Centre, was highlighted as an example of such duplication.

It was suggested during the review that key workers now covered too wide a geographic area and that their effectiveness could be improved if they were based in a particular locality, as had previously been the case. This, however, is not the view of the Key Working service management. It was acknowledged during the review that budgetary constraints may make consideration of this option difficult.

It is therefore recommended that:

2c

Within existing resources, consideration be given as to whether funding that Children's Centres and the Key Working Service receive should be dependent on local levels of need or whether funding should be allocated universally.

A variety of training support is already available for partner agencies and their staff to help ensure that they are able to take on what is known as the Lead Professional role within the Team Around the Family (TAF). TAF is a multi-agency team that supported 170 families between April and September 2015. It is part of the Key Working Service. Families are supported to overcome problems with the support of all relevant partners, via a managed and co-ordinated process - 'The Team Around the Family.' The Lead Professional role involves working within the community and taking a lead in the monitoring the TAF. The role could be assumed by anyone within the child related workforce. However, there appeared to be a reluctance among a number of partners to take on the Lead Professional role as they could see this as being an "extra" responsibility. It was hoped that through the provision of information and targeted training, that this could be addressed over time.

In relation to Early Help Assessments (EHAs), all partner organisations are able to access an e-learning programme and detailed guidance has been produced for professionals and parents / carers. A variety of information and guidance has been published on the Council's website. Staff from partner organisations are also offered advice, when required. A number of EHA Champions have been recruited to provide advice on the EHA and TAF processes. The EHA champions are supported and given the opportunity to discuss any barriers they may be facing with regard to the EHA tool and accessing Early Intervention.

Going forward, there is a need to ensure that all relevant colleagues are aware of and are fully using the EHA process and tools. Part of the challenge will be to ensure usage across all internal and external partner services. The aim is to continually increase and improve the application of the EHA process with ongoing communication with partner agencies, attendance at service area meetings, and continued review.

Some training has been provided to staff in relation to the Early Intervention and Prevention Services Plan, since its launch in September 2015 and a comprehensive professional development package for staff is being designed within the Key Working Service. Officers

acknowledge that further training will need to be developed in relation to the Plan and individual elements contained within it, as the services become fully established and embedded.

Staff at some of the Children's Centres visited emphasised the need for ongoing training opportunities to be made available to them. While existing training provision was seen as being adequate, it was suggested that consideration could be given as to whether additional support could be provided, either on an ongoing basis or through more ad-hoc provision.

It is therefore recommended:

2d

That officers seek to ensure that principles and best practice in relation to the provision of early help are embedded through the provision of training and development to early intervention staff and practitioners.

As noted previously, the Council's Early Intervention and Prevention Service was only fully established in September 2015. Therefore, there cannot realistically be an expectation at this stage that services will have been fully embedded and implemented. The previous recommendations within this report are indicative of the fact that there is still a significant amount of work to be undertaken.

Given the infancy of the services and the wide area of service provision that they cover, the Committee considers that it would be beneficial for it to keep a watching brief on developments to ensure that the development of the service is successful in ensuring promotion of positive outcomes for families and realising the Hillingdon Early Intervention and Prevention Strategy Group's vision that 'Hillingdon families are safe, healthy, prosperous and self-reliant because they have aspirations and means to succeed'.

The Early Intervention and Prevention Strategy, that is currently being developed, covers the period up until the end of 2018. This will aim to ensure that children, young people and families are assisted so that:

- Problems don't arise in the first place (prevention).
- Problems are nipped in the bud (early intervention).
- Something is in place for needs or problems that are serious, will not respond to early help or will endure (specialist and targeted intervention).

The overview role proposed by the Committee could involve a progress report later in 2016 and, if appropriate, further consideration as part of the Policy Overview Committee's future work programme.

A three stage approach is being advocated in order to ensure that the strategic aims are realised. Phase One (2015-16) will focus on agreeing early intervention and prevention strategic direction, priorities and embedding principles across the partnership. It will also enable collective understanding of partner activity and seek to develop a planning framework to enable joint planning and commissioning of services.

Phase two (2016-17) will focus on the joint planning and delivery of services. Activity will include joint needs assessment analysis, joint commissioning of services and integrated planning

across partner agencies. Meanwhile, Phase three (2017-18) will see the bringing together of phase one and two outcomes in a manner that leads to a fully integrated and mature approach to planning, delivering, evaluating and jointly commissioning early intervention and prevention activity across the partnership.

It is therefore recommended:

2e

That an assessment of the development and implementation of the new services be undertaken once the changes have become embedded, with consideration given to a progress report to the Cabinet Member and the Policy Overview Committee's meeting towards the end of 2016. If considered appropriate, this could be followed by regular progress reports to the Committee.

Other Recommendations

This section covers issues that have been raised during the course of the review that do not directly relate to the work of the Early Intervention and Prevention Service or to areas covered by the Children, Young People and Learning Policy Overview Committee's Terms of Reference. The Committee considers that it is important that these issues are not overlooked and has therefore made recommendations that these concerns are referred to the relevant Council Committees for them to further investigate what action they consider to be appropriate.

Difficulties in making referrals to Child and Adolescent Mental Health Services (CAMHS) or other providers and in obtaining effective support in relation to mental health issues were found to be challenging by a number of staff that participated in the review. Notwithstanding this, the overall working relationship with CAMHS was seen as being positive.

The Committee has previously considered recommending the undertaking of a joint review of CAMHS, which would also involve the External Services Committee and other bodies as appropriate. This was based upon concerns that have previously been expressed in relation to CAMHS, including feedback provided during the Committee's previous review of youth crime and anti-social behaviour.

Officers have previously advised that it would be most appropriate to review CAMHS from Spring 2016 onwards. This suggestion was made to enable an assessment to be made of the the current and ongoing changes being made to CAMHS and the revised CAMHS Strategy that the Key Working Service is contributing to.

Notwithstanding the ongoing work to strengthen CAMHS provision, the Committee is of the view that a full review of CAMHS should be undertaken as soon as is reasonably practical in 2015/16.

Accordingly, it is recommended:

3a

That a review be undertaken of Child and Adolescent Mental Health Services (CAMHS) at the earliest possible opportunity during 2016/17. It is further proposed that this be a joint review to involve the Children, Young People and Learning Policy Overview Committee, the External Services Scrutiny Committee and other bodies, if appropriate.

Data presented to the Committee during the review indicated some concerning levels of childhood obesity in Hillingdon. 21% of 4-5 year olds in Hillingdon were obese. Although levels in Hillingdon compared reasonably well against London and national averages, what was of more concern was the increased levels of obesity amongst the year 6 cohort when compared to 4-5 year olds, with 34% of 10-11 year olds in Hillingdon being overweight or obese. Concerns were expressed during the review about the significant differences in childhood obesity levels between wards in Hillingdon. It was stated during the evidence presented to the Committee that the obesity figures demonstrated the importance of healthy eating and of providing information about healthy eating.

While noting that the issue of obesity is already being addressed through an obesity strategy, the Committee recommends that:

3b

That the concerns raised during the review in relation to levels of child obesity in Hillingdon be passed to the relevant Council Committee(s) and officers for them to consider whether further investigation or review would be appropriate.

Concerns were also expressed during the review about child dental health in Hillingdon as the dental health of young children was acknowledged to be amongst the worst in London. The Child Oral Health Survey (published September 2014 and revised in January 2015) for 3 year olds showed that the dental health of children was particularly poor in Hillingdon with it having the highest rate of early childhood caries, which is the breakdown of teeth due to the activities of bacteria, of any London Borough. The rate in Hillingdon stood at 16%, compared to a London average of 5.3%. It was anticipated by review witnesses that two recently new NHS dentists in the Borough and the various work being undertaken with local primary schools would help to address the issue of poor child dental health.

Since 1 April 2013, local authorities have been statutorily required to improve the health of their population, including oral health. This requirement and the relatively poor child dental health locally led to the Council's Social Services, Housing and Public Health Policy Overview Committee undertaking a single meeting review of child oral health in February 2015.

The recommendations arising from this review, which were agreed by Cabinet in May 2015, included an instruction for officers to prepare a report in partnership with Public Health England and NHS England on the uptake and effectiveness of dentistry services for children and for this to be referred to the Cabinet Member for Social Services, Health and Housing and to the External Services Scrutiny Committee or Health and Wellbeing Board as appropriate for consideration in 2016. This work is currently being progressed and it is anticipated that this will be presented to the Health and Wellbeing Board for consideration in early 2016.

The Children, Young People and Learning POC does not wish to duplicate the work already been undertaken by other Committees, including the actions resulting from the Social Services, Housing and Public Health Policy Overview Committee.

It is therefore recommended:

3c

That concerns raised during the review in relation to child dental health be passed to the relevant Committee and officers, while noting that a review of child oral health in Hillingdon was undertaken by the Social Services, Housing and Public Health Policy Overview Committee earlier in 2015, with an update due to be considered by the Health and Wellbeing Board in 2016.

Appendix A - Terms of Reference

The following Terms of Reference were agreed in the review scoping report.

Setting the context

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

Understanding and responding to need

5. To explore how the need for early help and preventative intervention is assessed and responded to. Activity will include consideration of Joint Strategic Needs Assessment findings and other related sources of intelligence.
6. To consider how poverty and other factors can increase the likelihood of prevention or early intervention being required.
7. To explore approaches to assessing individual and family need.

Assessing impact and outcomes

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

Appendix B - Witnesses

Witness sessions for the review were held on 9 September, 7 October and 25 November 2015. These sessions heard from the following witnesses:

Witness Session 1 (9 September 2015)

Setting the context and understanding the services

Tom Murphy - Head of Early Intervention Services, LBH

Deborah Mbofana - Health Promotion Manager, LBH

Witness Session 2 (7 October 2015)

Understanding and responding to need

Dan Kennedy - Head of Business Performance, Policy & Standards, LBH

Belinda Hearn - Early Intervention Officer, Early Help Assessment and Team Around the Family, LBH

Deborah Bell - Service Manager, Key-working Service, LBH

Dr. Steve Hajioff - Director of Public Health, LBH (written submission only)

Witness Session 3 (25 November 2015)

Assessing impact and outcomes

Tom Murphy - Head of Early Intervention Services, LBH

Dan Kennedy - Head of Business Performance, Policy & Standards, LBH

Claire Fry - Service Manager - Child and Family Development, LBH

Chris Scott - Service Manager - Targeted Programmes, LBH

Nicola Brown - Clinical Service Manager and Professional Lead for Children's Nursing Services / Health Visitor Lead, CNWL-Hillingdon (the witness submission was presented to the Committee by Deborah Mbofana)

In addition to these witness sessions, visits were undertaken to the following Children's Centres:

- Cherry Lane
- Harefield
- Nestles Avenue

The visit to Nestles Avenue also included a meeting with staff from the Key Working Service and with three parents who had experience of using this service. A summary report covering this visit was produced for consideration by the Committee as part of the review.

Appendix C - Background Reading

To assist with the writing of this review, reference has been made to the following background information.

- **Minutes and witness statements from witness session 1:**
<http://modgov.hillingdon.gov.uk/ieListDocuments.aspx?CId=323&MId=2444&Ver=4>
- **Minutes and witness statements from witness session 2:**
<http://modgov.hillingdon.gov.uk/ieListDocuments.aspx?CId=323&MId=2445&Ver=4>
- **Minutes and witness statements from witness session 3:**
<http://modgov.hillingdon.gov.uk/ieListDocuments.aspx?CId=323&MId=2446&Ver=4>
- **Notes of visit to Children's Centres (included in papers for witness session 3)**
<http://modgov.hillingdon.gov.uk/documents/s29687/Notes%20of%20Childrens%20Centre%20Visits.pdf>
- **Early Intervention and Prevention Services - Strategic Direction Document 2015 - 2016**
<http://modgov.hillingdon.gov.uk/documents/s29682/Appendix%201%20-%20Early%20Intervention%20and%20Prevention%20Services%20Strategic%20Direction%20Document.pdf>
- **Early Intervention and Prevention Services Plan**
<http://modgov.hillingdon.gov.uk/documents/s29686/Appendix%202%20-%20Early%20Intervention%20and%20Prevention%20Services%20Plan.pdf>
- **The Early Help Assessment (EHA) and The Team Around The Family (TAF)**
www.hillingdon.gov.uk/eha
- **Early Intervention Foundation**
www.eif.org.uk
- **Hillingdon Joint Strategic Needs Assessment**
www.hillingdon.gov.uk/jsna
- **Local Health Profiles**
<http://localhealth.org.uk/#v=map4;l=en;z=498645,196289,19034,25113>
- **London Datastore - Population Statistics**
<http://data.london.gov.uk>
- **The Munro Review of Child Protection**
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/175391/Munro-Review.pdf
- **Nomis - Labour Market statistics provided by the Office of National Statistics**
www.nomisweb.co.uk