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## AGENDA

<b>Committee</b>	CHILDREN AND YOUNG PEOPLE SCRUTINY COMMITTEE
<b>Date and Time of Meeting</b>	TUESDAY, 9 OCTOBER 2018, 4.30 PM
<b>Venue</b>	COMMITTEE ROOM 4 - COUNTY HALL
<b>Membership</b>	Councillor Lee Bridgeman (Chair) Councillors De'Ath, Philippa Hill-John, Joyce, Morgan, Murphy, Phillips, Taylor and Singh  Patricia Arlotte (Roman Catholic representative), Carol Cobert (Church in Wales representative), Rebecca Crump (Parent Governor Representative), Karen Dell'Armi (Parent Governor Representative) and Hutchings

*Time approx.*

- |          |   |         |
|----------|---|---------|
| <b>1</b> | <b>Apologies for Absence</b>  | 4.30 pm |
|          | To receive apologies for absence.   |         |
| <b>2</b> | <b>Declarations of Interest</b>   |         |
|          | To be made at the start of the agenda item in question, in accordance with the Members' Code of Conduct.  |         |
| <b>3</b> | <b>Minutes (Pages 3 - 8)</b>  |         |
|          | To approve as a correct record the minutes of the meeting on 11 September 2018.   |         |
| <b>4</b> | <b>A New Delivery Model for Family Help and Support in Cardiff - Draft Cabinet Report (Pages 9 - 56)</b>  | 4.35 pm |
|          | To consider and review a Draft Cabinet Report on a new delivery model for Families Help and Support in Cardiff prior to Cabinet on 11 October 2018. |         |

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**5 Families First Annual Review 2017/18 ad Future Development Proposals (Pages 57 - 136) 5.40 pm**

To consider and note the Families First Annual review 2017/18 and discuss and assess the future proposals for Families First.

**6 Way Forward 7.30 pm**

To review the evidence and information gathered during consideration of each agenda item, agree Members comments, observations and concerns to be passed on to the relevant Cabinet Member by the Chair, and to note items for inclusion on the Committee's Forward Work Programme.

**7 Urgent Items (if any)**

**8 Date of next meeting - Tuesday 13 November 2018 at 4.30 pm**

**Davina Fiore**

**Director Governance & Legal Services**

Date: Wednesday, 3 October 2018

Contact: Mandy Farnham,

02920 872618, [Mandy.Farnham@cardiff.gov.uk](mailto:Mandy.Farnham@cardiff.gov.uk)

CHILDREN AND YOUNG PEOPLE SCRUTINY COMMITTEE

11 SEPTEMBER 2018

Present: Councillor Bridgeman (Chairperson), Councillors De'Ath, Philippa Hill-John, Joyce, Morgan, Murphy, Phillips, Taylor and Singh

Co-opted Members: Carol Cobert (Church in Wales representative), Rebecca Crump (Parent Governor Representative) and Karen Dell'Armi (Parent Governor Representative)

20 : APOLOGIES FOR ABSENCE

Apologies for absence were received from Patricia Arlotte. The Chairman welcomed Chloe Burrage, the Youth Council representative to the meeting and invited her to attend future meetings and sit with Members, so that she can participate in the meeting.

21 : DECLARATIONS OF INTEREST

None received.

22 : MINUTES

The minutes of the meetings held on 12 June and 10 July 2018 and the minutes of the Joint Community & Adult Services and Children & Young People Scrutiny committees held on 4 July 2018 were agreed as a correct record and signed by the Chairperson.

23 : PROVISIONAL PERFORMANCE OF CARDIFF'S SCHOOLS 2017 REPORT

The Chairperson welcomed Councillor Sarah Merry (Deputy Leader and Cabinet Member for Education and skills), Nick Batchelar (Director of Education and Lifelong Learning), Suzanne Scarlet and Natalie Stork (Performance and Information Management) to the meeting.

The Chairperson invited Councillor Sarah Merry to make a statement in which she noted the continuing issues of results for Looked After Children, but stressed that this is a very small cohort of pupils; similar concerns for EOTAS pupils and Free School Meal Pupils as there had been in previous years, but this was a national issue. Cardiff was performing well compared to some parts of Wales but there was room for improvement and the results were largely positive.

The Director added that a more definitive picture would be available in January. It was noted that the self-improving system established through the consortium was helping performance overall and this needed celebrating whilst still acknowledging that there was more to be done. He added that the picture in Primary schools was strengthening and strong but there was still a need to focus on 'All Learners' especially youngsters who have moved around in the system, are experiencing social factors outside the school or are home schooled etc. He acknowledged that there was a minority of pupils for whom the system is not working and those off role are not

performing well. More information would be included in the Annual Performance Report later in the year.

The Chairperson invited questions and comments from Members.

Members asked what the reasons that children were being educated outside of the mainstream setting. Officers advised that there were a variety of reasons including Special Educational Needs, Electively Home Schooled, those not able to succeed in mainstream settings due to health or social issues and those pupils who are not suited by a curriculum setting and need a more vocational offer.

Members discussed what needs to be done to prevent pupils leaving mainstream settings and officers noted that there needed to be challenge and support available to schools with youngsters at risk of leaving, there also needed to be restorative approaches and mediation, more transparency and vigour in the referrals mechanism and a more detailed look into the processes to ensure there isn't a minority of schools having all the youngsters who are difficult to manage. All agreed there was a role for Governors in this too.

Members noted that 39.5% of Cardiff pupils are moving on to study A Levels and asked how this compared with other authorities. Officers advised that the National rate is 40% so Cardiff was in line.

Members asked what the rest of cohort went on to do and officers advised that they look at destinations in the autumn and then categorise the information, but generally there was a variety of destinations such as college and training. Officers agreed to bring this information back later in the year.

Members referred to children moving schools and noted that some children could be Looked After Children and moving foster care or moving area and requested a breakdown of these figures. Officers agreed to bring this information back to Committee.

Members noted the gender breakdown in the performance figures but asked if there were any other demographic breakdown such as ethnicity available. Officers explained that they do have that information and it would be in the Annual Report in January. There were breakdowns by ethnic group, EAL etc. and each school was profiled by characteristics, the challenge advisors in the consortium then take up any issues with the individual schools.

Members referred to EOTAS pupils and requested more information on who accesses providers and home tutoring, whether there was a lack of providers of whether the capacity was adequate. Officers explained that they were not happy that there were too many youngsters who did not achieve the core results. They considered that the range of providers could be reduced and there could be more assertive gatekeeping over who are used and more dialogue about how they work with the Council. Members considered that there should be more honesty and focus around those who need to use the service.

AGREED – That the Chairperson writes to the Cabinet Member on behalf of the Committee expressing their comments and observations discussed during the Way Forward.



## 24 : CARDIFF 2020 - 2025 PROPOSALS AND CURRICULUM AND SKILLS BRIEFING

The Chairperson welcomed Councillor Sarah Merry (Deputy Leader and Cabinet Member for Education and skills), Nick Batchelar (Director of Education and Lifelong Learning), Suzanne Scarlet and Natalie Stork (Performance and Information Management) to the meeting.

The Chairperson invited the Director of Education and Lifelong Learning to make a statement in which he outlined that we were close to 2020 and there was a need to look ahead at aspirations and shared goals and strategies to achieve them. There was also a need to look at what education in Wales should look like in a decade. He explained that this was a partnership document where the Council plays a leadership role, education is a public good and as outlined in the Capital Ambition so much hinges on a good education system. He added that Wales needs a credible currency in education.

Referring to the convention, it was noted that there shouldn't be just teachers, but people from the forefront of universities and businesses for a more informed understanding of issues that will be faced in the future. Officers explained the format and timings for the convention and advised that invitations were due to be sent imminently.

The Chairperson thanked Officers and invited questions and comments from Members.

Members asked why there were no parent representatives at the convention and were advised that there would be Governors invited and it was up to the Governing Bodies to decide which Governors attended, unfortunately there was a challenge on numbers being able to attend the convention. Officers agreed that parents needed to be engaged more fully in general.

Members asked how it could be ensured that there was good representation from the professional and business element in Cardiff. Officers advised that as part of the Cardiff Commitment, the Council was committed to bringing partners together to connect growth in the economy and education; invites were being sent via Economic Development and lots of businesses had committed to attend, it was hoped there would be six different growth sectors represented.

Members noted that Church in Wales and Roman Catholic schools were represented and asked if other Faith schools were too. Officers explained that the respective diocese had been involved in the convention but there aren't the same structural connections with other faith schools. The Cabinet Member stated that they are well represented on the SACRE committee which covers all religious groups and that Cardiff and Welsh SACRE would be feeding into the curriculum side of things.

AGREED – That the Chairperson writes to the Cabinet Member on behalf of the Committee expressing their comments and observations discussed during the Way Forward.

25 : CHILDREN'S SERVICES PERFORMANCE MANAGEMENT INFORMATION  
- QUARTER 1 REPORT

The Chairperson welcomed Claire Marchant Director of Social Services and Irfan Alam Assistant Director Children's Services to the meeting.

Members were provided with a presentation on Children's Services Quarter One Performance after which the Chairperson invited questions and comments from Members.

Members asked how many places would be available in the five new children's homes. Officers advised that there would be approximately 20 places available for children who are currently in residential placements, some out of county. It was noted that there would be no more than five beds per home. The Director added that they are working on a commissioning strategy for Looked After Children in tandem to look at provision going forward, including provision types, short term/crisis and step down provision towards foster care.

Members referred to the proportionate assessments and asked if it would be worth considering a less restrictive timescale for this group of staff. Officers advised they had tried various options of managing the duty system but due to the volume of referrals there needs to be certain number of staff on at any one time; unless there was reduction in demand the pressures wouldn't change, Early Help Provision will help going forward but won't reduce pressures straight away.

Members asked about staff vacancies and whether exit interviews were conducted to establish why people were leaving. Officers advised that exit interviews are conducted and that most people are leaving due to being burnt out by the pressures of intake and assessment and child protection. It was noted that many people move into different parts of the service where the demand is not so high. Members asked if there was a difference in pay grade for those in the higher pressure roles and were advised there were not.

Members discussed Independent Fostering Agencies IFA's and noted that the foster carers are not paid more than those working with the Council, there needed to be more encouragement to get foster carers to work with the Council and the Council needs to be as effective as a business as the IFA's are. Members noted that historically Cardiff had a poor reputation for fostering and the IFA's capitalised on that and targeted Cardiff. Members noted that there are over 20 providers based in Cardiff. Officers explained the Scottish model whereby fostering has been not for profit provision for 15 years, so there are no organisations who are allowed to operate and make a profit, the Welsh Government are actively looking at this currently. The Chairperson stated that he would like a cross party motion to support this.

Members asked about the numbers of Police referrals and whether this was helpful or whether more training was needed. Officers explained that it was difficult as some referrals don't need to come but they could in the future and also some just need recording. What was needed was a joined up system that both the Council and the Police can access but that would be something for the future.

Members discussed the fostering market Officers explained there needed to be targeted marketing, the offer needed to be clear, there needed to be a business model and the team is committed to respond slickly; it was important that if interest was increased it could be managed.

Members asked what work was being done with other partners to drive intelligent referrals through Adverse Childhood Experiences ACE's. Officers stated that ACE's can add to referrals as the Police prioritise ACE, it was noted that Early Help, resilience and intervention would help but currently there is nowhere else to go.

Members asked what support was offered to adoptive parents. Officers advised that there is an arrangement with the Vale of Glamorgan, Merthyr and RCT adoption collaborative and a specific function for post adoption support. The Director considered that adoption breakdown could be a KPI and that adoptive support through transitions in life needs investment.

Members noted that some people are put off fostering as the interview is so intense, Officers explained that Intake and Assessment needed to be robust as people need to know what is involved.

Members asked if there would be a price cap in relation to partnerships with the Vale of Glamorgan and were advised that fees are being looked at regionally to align fees.

The Chairperson advised that there would be a Task and Finish Group on Mental Health and Wellbeing for young people and asked if Children's Services would be able to offer someone to sit on the group. Officers advised that there would be.

AGREED – That the Chairperson writes to the Cabinet Member on behalf of the Committee expressing their comments and observations discussed during the Way Forward.

## 26 : WORK PROGRAMME

Members were asked to agree the work programme as set out in the report.

Members were advised that there would be a Task and Finish Group on Child Mental Health and Wellbeing. Volunteers were sought for that group and it was agreed that Councillor Mike Phillips would Chair the group, volunteer Members would be Councillors Murphy, Taylor and co-opted Members would be Rebecca Crump, Karen Dell'Armi and Patricia Arlotte. Members were advised that Councillor Lee Bridgeman would be an expert witness on the Task and Finish Group.

RESOLVED to note the contents of the report and agree the work programme.

## 27 : WAY FORWARD

Members discussed the information received and identified a number of issues which the Chairman agreed would be included in the letters that would be sent, on behalf of the Committee, to the relevant Cabinet Members and Officers.

28 : DATE OF NEXT MEETING

The next scheduled meeting of the Children and Young People's scrutiny committee is on Tuesday 9 October 2018 at 4.30 pm.

29 : URGENT ITEMS (IF ANY)

None received.

The meeting terminated at 6.50 pm

***This document is available in Welsh / Mae'r ddogfen hon ar gael yn Gymraeg.***

**CYNGOR CAERDYDD  
CARDIFF COUNCIL**

**CHILDREN & YOUNG PEOPLE SCRUTINY COMMITTEE**

9 October 2018

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**A NEW DELIVERY MODEL FOR FAMILY HELP AND SUPPORT IN  
CARDIFF – DRAFT CABINET REPORT**

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**Purpose of Report**

1. To provide Members with the opportunity to consider and review the Draft Cabinet Report (copy attached at **Appendix A**).

**Background**

2. The Committee is fully aware that effective early help and family support can reduce the number of children who experience poor outcomes through their childhood because they have experienced abuse, trauma, neglect or exploitation, raise educational attainment and aspirations of children, young people, and their parents, and minimising expenditure on safeguarding and care by strengthening families.
3. Included in the Council's Delivering Capital Ambition Corporate Plan under the objective to make "Cardiff a great place to grow up" was the commitment to "Enhance Early Help by March 2022 to support children and families before their needs escalate to the point that they require statutory interventions by:  
Agreeing a refreshed Early Help / Preventative Strategy – "Further develop effective early help for families, so that fewer children need to be looked after by the Council".

**Issues**

4. The current arrangements for early help are not reducing the number of referrals received by children's services. There is also growing pressure on Education, with increasing of children educated other than at school.

5. The Multi-Agency Safeguarding Hub (MASH) receives all children's safety and wellbeing, and presently over 50% of cases have no action taken.
6. Family support is provided in partnership with Tros Gynol Plant Cymru, however current funding levels only provide limited early intervention help. Parenting services and family information service are managed alongside flying start and are not aligned with Children's Services.
7. In addition there is currently no clear pathway for families who need help but do not require children's social care and there is a pressing need for a more coherent approach to early intervention and prevention services.
8. The draft Cabinet report seeks to enable Cardiff Council to respond to the challenges and issues that it faces by considering a proposed future arrangement, which could bring together existing services and to further build on these to provide a comprehensive early help support service for families and children. This new model would meet the statutory requirement to provide Information Advice and Assistance for all families while providing more intensive support for those who need it on a "right help, right time" basis.
9. Aims of the service will be to:
  - Provide a clear pathway into services;
  - Provide timely information advice and assistance, reducing the need for ongoing support;
  - Enable families with emerging short-term problems to be better helped to manage these problems, build resilience and avoid the need for longer-term support;
  - Better support families with complex problems, to prevent the need for statutory intervention, taking a relationship based whole family approach;
  - Improve the range of services available for families who are involved with statutory safeguarding and care services to be able to secure the best possible long-term future and enable them to step down to support services as soon as this is safe;

- Develop a shared understanding and language across the city, developing a “no wrong door” approach with all partners fully engaged in supporting families; and
- Improve outcomes for families and children across a range of indicators including improved school attendance and prevention of the need for care.

### **Overview of the proposed new Family Help and Support model**

10. The proposed new model, which is included in more detail in **Appendix 2**, contains a new approach to family help and support based on 3 new family support services:

- A Family Gateway service to respond to all referrals and enquiries and offer information and advice. (Para 27 – 34)
- A closely-linked Family Help service to respond promptly to families who need some short-term support, including a combination of signposting, practical assistance and help with parenting. (Para 35 – 38)
- A Family Support service which is able to work with families with more complex or severe problems and where there is a real risk that without intensive support, more significant intervention would be needed. (Para 39 – 41)

11. The report explains that the proposed service will be council run, however the services will link closely to commissioned third sector services and will source external interventions as appropriate (Para 64 – 59).

### **Safeguarding, Care and Support**

12. The Family Support function will work alongside and complement the existing Children’s Services Safeguarding Care and Support services. Changes to the referral process will impact on the MASH service as they will no longer receive referrals directly from partner agencies. This will reduce the number of referrals allowing the MASH to focus on those safeguarding cases which need a multiagency approach. (Para 62 – 66).

13. The report also sets out the Governance Arrangements for the work of the family Help and Support Service, which will be overseen by the improving outcomes for Children Board. In addition the operational arrangements will be overseen by Early Help Management Board chaired by the Director of Social Services and involving the Director of Education, and partners from Housing, Health and Police.(Para 60-61).

14. The report of the Corporate Director People and Communities recommends to the Cabinet that :

- i. To approve the future approach to Family Help and Support set out in this report.
- ii. In line with the Council's Budgetary Framework, commit expenditure in relation to future years of up to £500,000 in order to meet the requirements of the new service as set out in this report.
- iii. To delegate authority to the Director of Social Services (in line with her statutory responsibility to ensure that preventative services address the care and support needs of the population) in consultation with the Cabinet Member for Children and Families, Director of Education and Corporate Director Resources to take the necessary actions to implement the new Family Help and Support Service.

### **Scope of Scrutiny**

15. The scope of this scrutiny is for Members to:

- Consider and review the contents of the draft cabinet report.
- Pass on any observations, comments or recommendations to the Cabinet Member for Children and Families prior to the consideration of the Draft report by Cabinet.

### **Way Forward**

16. Councillor Graham Hinchey (Cabinet Member for Children and Families), Sarah McGill (Corporate Director People and Communities), and Claire



Marchant (Director of Social Services) will present the report to the Committee, and will be available to answer any questions Members may have.

17. This report will also enable Members to provide any comments, concerns or recommendations to the Cabinet Member prior to its consideration by Cabinet.

### **Legal Implications**

18. The Scrutiny Committee is empowered to enquire, consider, review and recommend but not to make policy decisions. As the recommendations in this report are to consider and review matters there are no direct legal implications. However, legal implications may arise if and when the matters under review are implemented with or without any modifications. Any report with recommendations for decision that goes to Cabinet/Council will set out any legal implications arising from those recommendations. All decisions taken by or on behalf of the Council must (a) be within the legal powers of the Council; (b) comply with any procedural requirement imposed by law; (c) be within the powers of the body or person exercising powers on behalf of the Council; (d) be undertaken in accordance with the procedural requirements imposed by the Council e.g. Scrutiny Procedure Rules; (e) be fully and properly informed; (f) be properly motivated; (g) be taken having regard to the Council's fiduciary duty to its taxpayers; and (h) be reasonable and proper in all the circumstances.

### **Financial Implications**

19. There are no direct financial implications arising from this report. However, financial implications may arise if and when the matters under review are implemented with or without any modifications.

## **RECOMMENDATIONS**

The Committee is recommended to:

Review the information contained in the draft Cabinet Report, attached at **Appendix A**, together with information provided at the meeting and provide

any recommendations, comments or advice to the Cabinet Member and / or Corporate Director People and Communities prior to the report's consideration by Cabinet.

**Davina Fiore**

**Director of Governance and Legal Services**

**4 October 2018**

**CITY OF CARDIFF COUNCIL  
CYNGOR DINAS CAERDYDD**

**CABINET MEETING: 11 OCTOBER 2018**

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**A new delivery model for Family Help and Support in Cardiff**

**REPORT OF CORPORATE DIRECTOR PEOPLE AND  
COMMUNITIES**

**AGENDA ITEM:**

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**PORTFOLIO:** Children & Families (Councillor Graham Hinchey)

**Reason for this Report**

1. To set out a new delivery model for integrated early help and prevention services for families, children and young people in line with the Council's Capital Ambition's commitment to having an enhanced Early Help provision.
2. To provide an update and more detail on the delivery of Early Help following the Cabinet Report in July 2017 on the Family First Programme: Arrangements for Recommissioning.

**Background**

**The Benefits of Prevention**

3. There is a widespread understanding that effective early help and family support can:
  - Reduce the number of children who experience poor outcomes through their childhood because they have experienced abuse, trauma, neglect or exploitation for longer than they needed to.
  - Raise educational attainment and aspirations of children, young people, and their parents, thereby enabling access to better employment opportunities in the longer term.
  - Minimising expenditure on safeguarding and care by strengthening families. With a limited number of available foster placements and residential placements now costing on average £3,800 per week, taking early action to prevent care placements can be cost effective.

## Early Help for Families: Strategic Context

4. Recent research on Adverse Childhood Experiences has demonstrated that the first few years in children's lives shape their future development, and influence how well children do at school, their on-going health and wellbeing and their achievements later in life. A strong focus on the first few years of children's lives leads to huge economic, educational, social and emotional benefits later on, both for individuals and for society as a whole
5. Research also suggests that it is important to intervene at the early stages of a problem, whatever the age of a child, to prevent issues from escalating.
6. Included in the Council's Delivering Capital Ambition Corporate Plan under the objective to make "Cardiff a great place to grow up" was the commitment to "Enhance Early Help by March 2022 to support children and families before their needs escalate to the point that they require statutory interventions by:
  - Agreeing a refreshed Early Help / Preventative Strategy" Further develop effective early help for families, so that fewer children need to be looked after by the Council".
7. This report aims to bring forward a key aspect of that commitment due to its significant importance.
8. The Rights of the Child is a guiding principle that underpins the early help agenda and this report aims to further recognise that all children have the right to be treated with dignity and fairness, to be protected, to develop to their full potential and to participate. In taking forward its commitment to the Rights of the Child, the Council has pledged to make Cardiff a Child Friendly City, where every child has the right to grow up in an environment where they feel safe and secure, have access to basic services and clean air and water, can play, learn and grow and where their voice is heard and matters. The proposed new Family Help and Support Service will be a key deliverable of the Child Friendly City.
9. The Institute of Public Care at Oxford Brookes University have been commissioned to carry out a wide ranging review of current arrangements for early help and to identify good practice in the area of early intervention and prevention. The report will guide the incremental rollout of the integrated service and initial good practice review (appendix 1) has specifically informed the development of the family help and support model.

## Current Challenges and Issues

10. Children's social services are working with increasing numbers of referrals, undertaking an increasing number of assessments and the Council is responsible as Corporate Parent for the highest ever level of looked after children. Recent data indicates that in the first quarter of 2018/19, 1,745 children were supported with a Care and Support Plan in

Cardiff. The numbers of children in need open to Children's Services are on an upward trajectory, rising overall from 667 children in April 2016 to the current position of 864 August 2018.

11. It is clear that the current arrangements for early help are not reducing the number of referrals received by children's services. The first quarter of 2018/19 saw an increase of 16.3% compared when compared to the final period of the previous year.
12. There are also growing pressures on Education, with increasing numbers of children educated other than in school. In 2018 there were 348 pupils education other than at school (EOTAS), which is 30% increase on 2017 (268 pupils) and 70% increase from 2016 (205 pupils). There are schools across Cardiff's poorest communities where pupil attendance remains below the Cardiff Ambition target of 95% and there remains a high number of in-year transfers between schools linked to behaviour and relational issues.
13. There are numerous reasons for these increasing pressures including the effects of austerity and increasing complexity of the issues facing families. The impacts have been seen nationwide, however, some local authorities have progressed to develop a more holistic approach to preventative service integration and the learning from these authorities will help to inform Cardiff's approach.

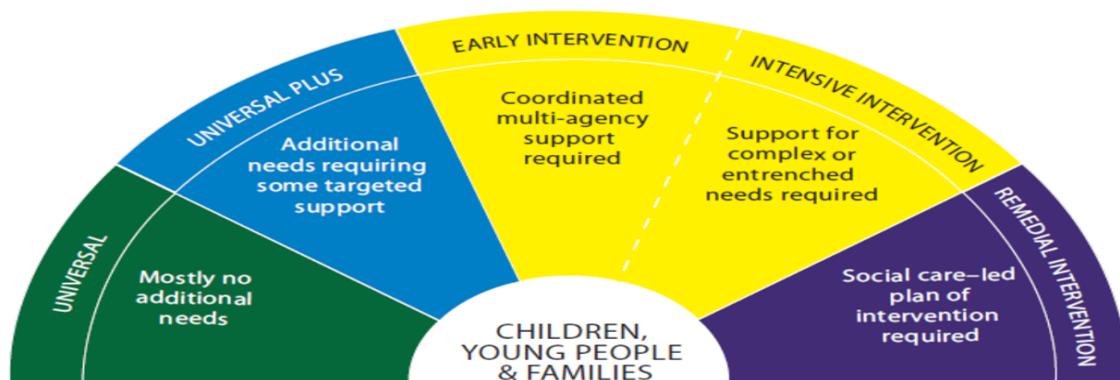
#### **Issues with Current arrangements**

14. The Multi Agency Safeguarding Hub (MASH) was introduced in 2016 and all concerns for children's safety and wellbeing are referred into the MASH. Fewer than 20% of referrals to the MASH progress to a Children's Services intervention. While some cases are referred for early intervention this number is low, just 15% or 3,292 children during 2017/18. In 51.8% of cases referred to the MASH, no action is taken.
15. Family Support is currently provided through a partnership arrangement between Tros Gynal Plant Cymru and Children's Services. The service operates a free-phone number for advice and information, co-ordinates a team around the family approach and offers intensive key working for the families stepping down from care. The current funding levels enable Tros Gynal to provide limited early intervention help. Of the 1,786 calls to the Tros Gynal Plant helpline in the first quarter of 2018/19 only 49 visits were carried out. 77 referrals were made to Team around the Family.
16. Parenting services are delivered and managed alongside the Flying Start infrastructure as is the Family Information Service which provides information about child care and activities. These services are not currently closely aligned with Children's Services' family support services.
17. There is currently no clear pathway for families who need help but do not require children's social care and there is a pressing need for a more coherent approach to early intervention and prevention services.

## Issues

### ***Proposed future arrangements***

18. There is an opportunity to bring together existing services and to further build on these to provide a comprehensive early help support service for families and children. This new model would meet the statutory requirement to provide Information Advice and Assistance for all families while providing more intensive support for those who need it on a “right help, right time” basis.
19. Aims of the service will be to:
- Provide a clear pathway into services
  - Provide timely information advice and assistance, reducing the need for ongoing support.
  - Enable families with emerging short-term problems to be better helped to manage these problems, build resilience and avoid the need for longer-term support.
  - Better support families with complex problems, to prevent the need for statutory intervention, taking a relationship based whole family approach.
  - Improve the range of services available for families who are involved with statutory safeguarding and care services to be able to secure the best possible long-term future and enable them to step down to support services as soon as this is safe.
  - Develop a shared understanding and language across the city, developing a “no wrong door” approach with all partners fully engaged in supporting families.
  - Improve outcomes for families and children across a range of indicators including improved school attendance and prevention of the need for care.
20. The service provided will be proportionate to the needs of the individual family or child. For some families simple signposting and advice will be sufficient, others will need a greater degree of intervention. The service will have a strengths based approach and will use proven techniques to help families build resilience and avoid the need for ongoing support. More intensive support will be provided where needed, to avoid future safeguarding issues.
21. A comprehensive range of services will be offered, helping families across the spectrum of need illustrated in the Welsh Government children’s services ‘windscreen’ below:



### Overview of the proposed new Family Help and Support model

22. The proposed new model, which is included in more detail in [appendix 2](#), contains a new approach to family help and support based on 3 new family support services:

- A **Family Gateway** service to respond to all referrals and enquiries and offer information and advice.
- A closely-linked **Family Help** service to respond promptly to families who need some short-term support, including a combination of signposting, practical assistance and help with parenting.
- A **Family Support** service which is able to work with families with more complex or severe problems and where there is a real risk that without intensive support, more significant intervention would be needed.

23. These Family Help and Family Support services will refer into a range of other services operated by both council and partners to ensure that the families and children receive the help they need. These services range from universally available help, such as money advice, to specialist therapeutic and health related services.

24. Partnership working is key to this model, with close working between statutory partners and voluntary sector being essential if the families and children in need are to be identified and their needs fully met.

25. The service will follow the best practice principles as below:

- **Strengthening Families**, encouraging resilience, repairing relationships within the family – using proven techniques e.g. motivational interviewing, restorative practices, family group conferences.
- **Whole Family Approach** – understanding the needs of the whole family, not just focusing on the mother

- **Relationship based approach** — working in partnership with families, listening, being respectful and empathetic – a trauma informed approach.
- **Right support at the right time** – less reliance on thresholds, flexible support. Tailored support developed with the family, clear plan/desired outcomes.
- **Developing a shared understanding and language across the city** – “no wrong door”
- **Understanding the impact of poverty** – routine use of advice and into work services to maximise income and resolve family income and housing issues.
- **Rights of the Child** – ensuring that the voice and the views of children are considered.

26. The services proposed are described in more detail below:

### ***The Family Support Gateway***

27. The Gateway will act as a single point of contact for all concerns relating to families, children and young people across the city. It will be accessible by professionals and the public, and it will meet all of the Council’s obligations for Information, Advice and Assistance under the Social Services and Wellbeing (Wales) Act 2014.

28. The Gateway will help families and professionals to navigate the system and provide a clear pathway into the services that they need. It will include a user-friendly website and telephone service to provide practical information, advice and assistance on issues such as:

- Child behaviour
- Common child health concerns
- Parenting support
- Child care
- School attendance
- Domestic violence
- Resettlement difficulties
- Isolation

29. It is recognised that families may need help with a wider range of problems and therefore the Gateway will also be able to provide advice on the help available with:

- Housing
- Mental health
- Substance misuse
- Debt / money issues
- Employment problems



30. The Gateway will work closely with a range of partners to ensure that cases can be referred effectively into appropriate services. For some key services the Gateway will be the sole route into provision.
31. Staff will be fully trained to undertake proportionate assessments drawing on the 'Signs of Safety' framework already in use across Cardiff. The service will have clear protocols in place to enable it to act as a responsible and effective front door and the staff will have sufficient information, training and experience to triage cases effectively with appropriate and effective supervision.
32. All professional referrals for early help or support will be received by the Gateway which will triage referrals and aim to find the most appropriate service to meet the needs of the family.
33. Safeguarding referrals will also be received by the Gateway and these will be assessed by qualified social workers. Where appropriate, referrals will be made to the MASH or safeguarding services.
34. The Gateway will be a significant improvement to current arrangements, providing a clear pathway into services. By signposting people more effectively to sources of assistance, it is anticipated that issues will be resolved at an early stage and reduce the demand for more intensive support services.

### ***Family Help Function***

35. Where a family requires more help than can be provided by the Gateway or where a full assessment of need is required, referral will be made to the new Family Help team. This team will work with the family to explore their issues and help them to develop their own action plan.
36. The level of intervention required will depend on the needs of the family however this could include establishing contact with other professionals involved, support to attend appointments as well as directly providing advice and support. The Family Help Advisor will normally continue as the key professional, supporting the family to achieve its plan over the period. The expectation is that for the majority of families help would end upon completion of the action plan period.
37. Family Help Advisors will be trained in Signs of Safety, safeguarding, parent-child attachment and restorative approaches and will be able to deliver parenting interventions. They will also be able to provide basic benefits, budgeting and housing advice and be very aware of the community services available to help further with these issues.
38. The amount of support provided will be tailored to the needs of the family with the greatest focus on those who, without help at this stage, would be very likely to require more intensive support or statutory intervention in future; families whose needs can be met by provision of information and advice alone will receive this via the Gateway.

### ***Family Support***

39. Where the family require more intensive support this will be provided by the Family Support Service, which will work with families with complex or severe issues where there is an imminent risk that without intensive support, they are likely to require further safeguarding intervention or care.
40. The Family Support Unit will be a multidisciplinary range of professionals co-located and working together to find the right solution for the family. The services offered will comprise a range of evidence based family interventions / programmes as well as practical help, signposting and advice. The right intervention for the family will be decided following discussion with a range of key professionals. The Family Support service will provide a sufficiently robust service to allow some children to step down from care.
41. Each family will have a key worker who will be able to directly deliver the intervention/programme, and who will liaise as needed with other professionals involved with the family. The service will use the Signs of Safety framework and will encourage a strengths-based approach to increase resilience however it is recognised that some of these families may require a longer period of support.

### ***Close working with partners***

42. The Family Help and Family Support Service will be city wide and will offer support to families with children at a range of different ages. However, there will be a strong emphasis on linking extensively with each of the local communities across Cardiff, building on the Ely / Caerau locality working pilot.
43. In particular the service will establish strong links with local primary and secondary schools, offering regular opportunities for liaison, case advice and joint working. Schools and all who work in them are an important part of any early help /family support system, their ongoing relationships and knowledge of families and children allow them to identify issues at an early stage. Schools are one of the highest referrers into the MASH but regrettably at present many referrals do not meet the threshold for early help. A partnership between the new Family Help and Support Service and the schools could facilitate access to preventative services, improve attendance and educational attainment. The new service will work closely with schools especially during the development period to ensure they can easily capture and report concerns relating to a child / young person's wellbeing and where appropriate access timely help and support.
44. Another key partner are South Wales Police who refer the highest number of cases into the MASH and are often the first responders to family crisis. Of the police referrals a large proportion are relating to

domestic abuse and the newly commissioned Violence Against Women, Domestic Abuse and Sexual Violence (VAWDASV) service offers opportunities to improve the pathway for these cases, even where the risk has been identified as low / medium.

45. Health also refer a significant number of cases to the MASH, many of these are safeguarding issues, greater join up with the Early Help provision in Flying Start will improve links with Health Visitors and will improve joint working on a wider range of families.
46. Links to Youth Services and Youth Offending Services are also key, together with close working with the Adolescence Resource Centre and the proposed new City Centre Youth Hub.

### ***“No Wrong Door” Approach***

47. There are numerous third sector and statutory organisations, council services and housing providers that will be brought into the wider partnership to form a “No Wrong Door” approach to service delivery. Training will be provided to services at appropriate levels to allow them to fully take part in improving outcomes for children and build on the Child Friendly City objectives.

### ***Outcomes and Quality***

48. Monitoring of performance and key outcomes will be built into the service, to ensure that the impact of the services can be measured. An outcomes framework will be developed to capture key data at a population and individual family / child level.
49. Clear processes and quality monitoring will be embedded in the service from the start to ensure a consistent standard of service.
50. Systems will be fully reviewed to ensure that they capture the journey of families as they move through services and, where possible, share data across health, education and social services.

### ***Workforce Development***

51. To be able to fully respond to the needs of families, children and young people a fully skilled workforce will be required, trained in a variety of approaches that are proven to lead to better outcomes. By integrating the early help /family support work it will be possible to train across specialisms giving greater continuity for families. A full training programme will be set which covers a wide range of information and interventions including:
  - Childhood development
  - Trauma and the effects on early brain development
  - Restorative approaches
  - Motivational interviewing
  - Bonding and attachment

- Evidence based parenting programmes
- Counselling
- Safeguarding children / Signs of Safety.
- National Occupational Standards for working with parents
- Identifying and supporting children's language and communication skills

52. In addition training will include a wide range of advice and information that could be helpful to assist families to improve their financial or housing situation or address health issues.

53. This training would not be limited to those directly employed within the early help / family support services but will be extended to key workers who work with families, children and young people in other services and agencies to support a systematic change using the "no wrong door" approach.

### **Management and Resourcing**

54. It is proposed that the new Family Help and Support Service comprising of the Family Gateway, Family Help and Family Support Services will be Council run; this will provide the greatest flexibility and control in service provision, however the services will link closely to commissioned third sector services and will source external interventions as appropriate.

55. To achieve these new services a number of existing council and external commissioned services will be brought together including:

- Early Help Provision currently provided by Tros Gynnal Plant.
- Flying Start and the Parenting Services currently based in Education.
- Social worker input will also be required within the service with some posts transferring from the existing Support 4 Families Help and Support Service. Resource will transfer from the current Early Help service and also from the MASH, which will be receiving fewer, more appropriate referrals as a result of the change.

56. This will join up a range of early intervention, health and therapeutic services and create a truly integrated approach to early help and prevention services.

57. The new Gateway, Family Help and Support Service will be managed within the People and Communities Directorate. The Gateway and Family Help by the Assistant Director for Housing & Communities. The Housing & Communities service already provides the first point of contact and preventative services for Adults. The Family Support Service will be managed by the Assistant Director for Children Services and will be closely aligned to the MASH. In line with the statutory responsibility the Director for Social Services will provide the professional oversight of the whole service. While managed within People and Communities this will

be a service for the whole council and for partners, working collaboratively to help address a wide range of issues.

58. Approximately £1.27 million of Families First grant funding will be used to fund the services. As it is proposed that the new services will replace those currently offered by Tros Gynnal Plant, TUPE arrangements will apply.
59. Bringing together existing resources together with the Families First funding will help to offset most of the costs of the service however it is anticipated that some additional funding will be required if a comprehensive early help and prevention service is to be offered. Implementation of this model will require funding of £500,000 as part of the coming budget round. This service will be part of a set of integration proposals across the whole spectrum of need, aimed at improving the Council's offer in terms of early help. Every effort will be made to offset this contribution with grant funding where possible.

### **Governance Arrangements**

60. The work of the Family Help and Support Service will be overseen by the Improving Outcomes for Children Board. In addition an Early Help Management Board will be established to oversee the operational arrangements chaired by the Director of Social Services, involving the Director of Education and other key partners. This is in keeping with the statutory duties vested in the Director of Social Services under Part 8 of the Social Services and Wellbeing (Wales) Act 2014. The duty requires the Director of Social Services to 'ensure that preventative services are provided or arranged specifically to address the care and support needs identified by the population assessment'.
61. The Early Help Management Board will comprise partners from housing, education, health, police and social services. It will provide leadership and oversight to the Family Help and Support Service. It will review service quality and performance information to allow the impact of the range of services to be understood, and take decisions within its delegated authorities, to use resources flexibly to address needs. The partnership structures allow the opportunity, over time, for other services, such as primary mental health services, to be integrated, or work in partnership with, the this model of early help and family support.

### **Safeguarding, Care and Support**

62. The Family Support function will work alongside and complement the existing Children's Services Safeguarding Care and Support services. Changes to the referral process will impact on the MASH service as they will no longer receive referrals directly from partner agencies.
63. This will reduce the number of referrals allowing the MASH to focus on those safeguarding cases which need a multiagency approach. This change presents an opportunity for the MASH to work in a more integrated way with Children's Service's intake teams in a multi-agency

safeguarding system. Almost half of referrals from MASH to children's do not result ongoing care and support. This highlights opportunities to make better use of capacity by reducing hand-offs between the two parts of the service.

64. The 'windscreen' of need presented earlier in this paper highlights, at the most acute end of the spectrum, the need for Children Services led targeted 'remedial' family support. This is required when risks to a child's safety and wellbeing are so high that if they are not managed intensively a child will become looked after. Services at the edge of care services have proved successful in preventing family breakdown in the most challenging of circumstances.
65. In 2016-17 the Adolescent Resource Centre (ARC) was established with the aim of reducing the numbers of adolescents being brought into public care. This has been a real success, reducing the number of adolescents becoming looked after by a third within the first year. The ARC team adopt a whole family approach that recognises that parents and carers must be supported to understand how their behaviour has impacted and influenced their children. By supporting the parents and carers directly, they are enabled to take responsibility for their children's behaviour and situation in a positive and constructive way and make the changes they need to achieve the family's goals. Meeting their needs will in turn ensure they can meet the needs of their children. In supporting families to achieve their goals, there is a wide range of support on offer including a trusted worker, parenting advice, practical support, activities to repair and rebuild relationships, evidence-based interventions, therapy and counselling. It is this existing infrastructure that the additional resources will be joined with, replicating the good practice. Learning from this good practice an aligned range of intensive family support is being developed for younger children at the edge of care.
66. This is crucial if the number of looked after children is to reduce in the short term.

## Consultation

67. IPC have provided independent advice and support to the work to strengthen early help and support. Over the summer of 2018 they have conducted a range of interviews within the Council and with partners to understand their views on current arrangements and the emerging model. Analysis of the interviews highlight strong support for the development of an early help hub and front door for children's services that is separate to the MASH. They also highlight the need for consensus that the model of early help and family support within this paper is helpful. Partners recognised the need for a casework service sitting below statutory children's services which has substance and capacity, for clarity around thresholds and step up step down from children's services. Partners fully supported implementation of effective, evidence-based family help and support from April 2019.

68. A multi-agency workshop session was held on 24th September 2018 that was facilitated by IPC. The event was well attended with over 45 representatives across a range of organisations. At the workshop the outline proposals were discussed for everybody to give their view on the strengths of the model, any concerns they have and how these could be overcome. There was a lot of positive support throughout the different groups at the workshop and agreement that it could have a very successful impact on the lives of many families in Cardiff. A summary report of those comments is attached in appendix 3.

69. Client consultation will be built into the new model to ensure that regular feedback is received from the families, children and young people on the services provided.

### **Next Steps**

70. This is a significant change requiring review of staffing, systems, processes and accommodation across several departments/organisations.

71. Should the future model be agreed staffing structures would then be developed and consultation would take place on these with partners and the staff affected. Detailed processes, quality assurance arrangements and workforce development plans will also be designed and fully discussed with partners.

72. The aim will be to have the core services in place by April 2019, however it is anticipated that the service will need to continue to develop after this date to achieve the full model described above.

### **Reason for Recommendations**

73. To agree a new approach to Family Help and Support, to improve Information, Advice and Assistance services and to further develop the help and support available to families.

### **Financial Implications**

74. The proposal for the future approach to Family Help and Support as set out in this report will include the bringing together of a number of existing Council and externally commissioned services and their budgets in order to provide a new delivery model for integrated early help and prevention services for families and children in line with the Council's Early Help Strategy. This will include approximately £1.27 million of Families First grant funding with some realignment of existing services including insourcing the early help provision currently provided by Tros Gynnal Plant. Any TUPE implications arising from this will need to be managed within legislative requirements and the budgets available to the new service.

75. In order to fully fund the new service, additional budget of £500,000 is anticipated to be required with effect from 1st April 2019 and this would

need to be provided as part of the Council's budget for 2019/20. A financial pressure bid will be submitted as part of the budget process, however in order for the new arrangements to be progressed sufficiently so that the core services can be in place by April 2019 it is recommended in this report that in line with the Council's Budgetary Framework, Cabinet commit expenditure in relation to future years of up to £500,000 for this purpose. This will continue to be reviewed as part of the budget process and the level of the commitment reduced where it is feasible to do so without negatively impacting on the new service.

76. The new approach to Family Help and Support will have a range of benefits including the potential to reduce the pressures and the high level of costs currently being experienced by Children's Services and will support potential budget savings in this area.

#### **Legal Implications (including Equality Impact Assessment where appropriate)**

77. The new delivery model set out in this report will meet the statutory requirement under section 17 of the Social Services and Well-being (Wales) Act 2014 under which the Local Authority must secure the provision of a service for providing people with information and advice relating to care and support and assistance in accessing care and support.
78. An Equality Impact Assessment has been undertaken and is attached in Appendix 4.

#### **HR Implications**

79. There are significant HR implications of this proposal.
80. There are implications for current employees in the new delivery model that may affect current working arrangements. The trade unions and staff affected have been consulted on the proposal and this will continue should Cabinet decide to agree the proposal. Corporately agreed processes are in place to manage any staff changes and these will be applied in this case.
81. Also as the model includes the insourcing of services, there may be Transfer of Undertaking (Protection of employment) Regulations 2006 (as amended) (TUPE) implications. If this is the case, then this will be managed within legislative requirements and full consultation will take place with trade unions and affected employees from the outgoing provider.

#### **RECOMMENDATIONS**

Cabinet is recommended to:



1. To approve the future approach to Family Help and Support set out in this report.
2. In line with the Council's Budgetary Framework, commit expenditure in relation to future years of up to £500,000 in order to meet the requirements of the new service as set out in this report.
3. To delegate authority to the Director of Social Services (in line with her statutory responsibility to ensure that preventative services address the care and support needs of the population) in consultation with the Cabinet Member for Children and Families, Director of Education and Corporate Director Resources to take the necessary actions to implement the new Family Help and Support Service.

**Sarah McGill**  
**14<sup>th</sup> September 2018**

*The following appendices are attached:*

- Appendix 1: Institute of Public Care at Oxford Brookes University
- Appendix 2: Family Help and Support Model
- Appendix 3: Summary of workshop comments
- Appendix 4: Equality Impact Assessment

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## Research on Good Practice – Early Help

### Context – what works

Early help and support for families can be described as:

*‘...both a style of work and a set of activities which reinforce positive informal social networks through integrated programmes. These programmes combine statutory, voluntary and community and private services and are generally provided to families in their own homes and communities. The primary focus is on early intervention aiming to promote and protect the health, well-being and rights of all children, young people and their families, paying particular attention to those who are vulnerable or at risk.’*

Pinkerton et al., 2004<sup>1</sup>

There is a widespread understanding across the UK that effective early help and family support can help to secure two primary goals for councils and their partners:

- Firstly, to reduce the number of children who experience poor outcomes through their childhood because they have experienced abuse, trauma, neglect or exploitation for longer than they needed to.
- Secondly, to meet fiscal responsibilities by minimising expenditure on safeguarding and care by the Council (with, for example, some placements now costing Councils in Wales as much as £15,000 per week).

The evidence base for early help / intervention through family support is continually developing, and ‘what works’ in one local context may fail in another very different environment. However, there are some things known across the UK about how best to design, organise and deliver targeted family support, and Cardiff Council has drawn on analysis by the Institute of Public Care at Oxford Brookes University to summarise these themes.

Perhaps most significantly, national research emphasises that commissioners and managers of early help services should secure **both** effective services or interventions **and** effective multi-agency assessment and referral systems to optimise impact on families with additional needs with needs greater than one service or agency can address:

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<sup>1</sup> Pinkerton, J., Dolan, P & Canavan, J. (2004) Family Support in Ireland A paper for the Department of Health & Children. Dublin: Stationery Office



These areas are overlapping in that:

- Systems often include services/interventions (for example Lead Professional or Key Worker activity can and arguably should include some element of direct work with the family).
- A range of family support services frequently contribute to system arrangements or themselves take the lead role in these arrangements, and so can also be seen as part of the whole family or whole system approach.

### Early help for families

When we talk about early help, the research suggests that, although it is certainly best to intervene as early as possible in a child's life to prevent problems from escalating<sup>2</sup>, it is important also to attend to early stages of a problem at whatever age, and both can be cost effective<sup>3</sup>. Early help<sup>4</sup> is most effective when it includes:

- Effective team around the family or similar
- Attention to effective engagement of families in change and proactive breaking down of barriers to participation including through being non-judgemental, active listening, practical 'quick wins'
- Whole family approaches
- Multi-component approaches linked to family needs
- Strengths-based and solution-focused interventions
- Targeted approaches (targeting individual families or vulnerable communities)
- Focus on supporting improvements in parent functioning and parenting

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<sup>2</sup> The evidence demonstrates how deficiencies in early years' experiences have an enduring impact on the child's subsequent development. The worst and deepest brain damage occurs before birth and in the first 18 months of life when the emotional circuits are forming (Marmot 2010 Fair Society, Healthy Lives – A Strategic Review of Health Inequalities in England). Also Field, F (2010) The Foundation Years: preventing poor children becoming poor adults and the recently published cross-party manifesto 'The 1001 Critical Days: The Importance of the Conception to Age Two Period' (2013)

<sup>3</sup> Cost effectiveness is referred to in the DfE/Wave Trust report 'Conception to Age 2 – the age of opportunity' (2013). Returns of between £1.75 and £19 on every £1 invested have been demonstrated by 9 Social Return on Investment studies

<sup>4</sup> Compared to reactive services when problems are complex

- Services and interventions that draw on tested methodologies (that have a strong theoretical or evidence base), and fidelity to specified methodologies in the delivery<sup>5</sup>

The Early Intervention Foundation has recently identified the importance of programmes which can address, between them, in particular three key (often related) needs:

- Improved attachment security
- Improved child behavioural regulation
- Improved child cognitive development

Examples of evidence-based<sup>6</sup> early help programmes addressing these needs relating to families with younger children include:

- Group parenting programmes such as Triple P (0-16) and Incredible Years Parenting / Webster Stratton (0-12 years)<sup>7</sup>
- Family Nurse Partnership (for children 0-2 and vulnerable first-time mothers)<sup>8</sup>
- Support to address maternal (post-natal) depression<sup>9</sup>
- Programmes that seek to improve parental verbal stimulation and early learning practices with their infants / toddlers

Examples of evidence-based programmes addressing these needs relating to families with older children include:

- Cognitive behaviour therapy (CBT) for young people with behaviour problems, depression, school refusal and other issues
- Group parenting programmes such as Triple P (0-16) or Strengthening Families (10-14).

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<sup>5</sup> Allen G (2011) Early Intervention: the next steps; Centre for Excellence and Outcomes (2010) Early Intervention and prevention in the context of integrated services – evidence from C4EO Narrowing the Gap Reviews; the Munro Review of Child Protection

<sup>6</sup> Note that 'evidence-based' depends on interpretation including in particular whether randomised control trial evidence is required or something different (note RCT is generally considered to be the 'A' standard but other well-conducted studies do also add to our understanding and are often relied upon as 'B' standard evidence

<sup>7</sup> A more extensive list can be found in the DfE and Wave Trust report 'Conception to Age 2 – the age of opportunity: Framework for local areas service commissioners' (2013)

<sup>8</sup> The evidence base is stronger in the USA than in the UK, where the early findings of a randomised control trial involving FNP pilot sites (Robling, M. et al (2016) Effectiveness of a Nurse-Led Intensive Home Visitation Programme for first time teenage mothers (Building Blocks): a pragmatic randomised control trial, The Lancet, Vol 387, No. 10014, January 2016) have been mixed. A further evaluation is now underway and due to report in 2018

<sup>9</sup> See the RRR for Perinatal Support

## Support for families with more complex and/or chronic needs and children on the edge of care

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Evaluative research shows that there are a number of helping methods that have a good record of reducing the impact of later incidence or complex family needs. The features of more effective support for families with more complex or chronic needs include those outlined above for early stage help, and in addition:

- More intensive interventions (but still with broader base of multi-disciplinary support).
- A longer period of intervention is usually required overall – i.e. 12-18 months, but this can include an element of ‘step down’ to less intensive support after a period of intensive intervention.
- Assertive, persistent Key Workers with lower caseloads and high levels of skill in working with families.
- Even closer attention to helping parents or carers to develop internal motivation to change and to address their issues that are likely to get in the way of considering or making changes for example, substance misuse, domestic abuse or parent mental health issues<sup>10 11</sup>

It is clearly important to select an evidence-based programme or set of methodology(ies) or approach(es) for intervention with families who have complex needs, however Ofsted’s ‘Edging Away from Care’ report (2011) strongly suggest that fidelity to the chosen methodology is even more important than the actual choice of model.

Programmes of intervention with a high level of evidence base (usually involving a randomised control trial study) are mostly those that are manualised and relate to intensive work with young people and their families, for example: Functional Family Therapy or Multi-Systemic Therapy. However, some other studies are beginning to identify the evidence-based components of effective family support at a higher level of need. For example, a 2016 evaluation of a high level and highly successful family support service working with families with complex or chronic needs in Newport, Wales<sup>12</sup> found that, in addition to working very intensively with the family in the first few weeks of the intervention, effective services provided a ‘golden combination’ of therapeutic and practical approaches for the duration of the intervention, as illustrated in the table below:

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<sup>10</sup> In addition to the references at 11. above, Interface Associates (2011) Troubled Families ‘What Works’; and Ofsted (2011) Edging Away from Care

<sup>11</sup> Innovation Programme ‘Wave 1’ findings published by DfE in 2017 including: Burch, K. et al (2017) Social Care Innovations in Hampshire and the Isle of Wight: evaluation report, DfE, March 2017

<sup>12</sup> Successful working with families in the statutory arena: an evaluation of the Newport Family Assessment and Support Service: Summary Findings (May 2016) published by the Institute of Public Care (<https://ipc.brookes.ac.uk/publications.html>)

Example therapeutic approaches	Example practical approaches
Confident exploration of the past (cycles of behaviour & relationships and impact of childhood experiences & parenting approaches & domestic violence)	Parenting tips –reference to evidence- based programmes that can be delivered 1:1 – including suggesting, ‘modelling’, ‘doubling back’ when problems arise. The context for this work is often parent: mental health issues; substance misuse; lack of experience of effective parenting in their own childhood; learning disability.
Theraplay and other playful approaches to strengthening attachment	Providing information e.g. about how inter parental conflict affects children / how to de-escalate conflict
Ongoing support for motivation to change including to reach out to external supports for DV, SM, MH	Basic financial and housing advice and support
Therapeutic work with individual child members of the family – particularly young people engaged in or at risk of sexual exploitation, poor mental health, challenging or aggressive behaviour, non-school attendance	Advice about how to keep children safe
Work with all family members on relationships and how to relate to each other in a positive way	Work with parents around keeping the house sufficiently clean so as not to be a risk to the children

Other key attributes of this successful model included:

- Support provided ‘up front’ to families to develop internal motivation to change – including through the application of motivational interviewing techniques<sup>13</sup>
- Use of highly visual distance travelled tools (which families interviewed for this evaluation suggested were highly motivational)
- High levels of guidance (toolkit and standards for practice) and ongoing supervision of practitioners providing interventions

<sup>13</sup> The stages and theory of change was first described by James Prochaska and Carlo Diclemente (1982) including reference to: pre-contemplation; contemplation; determination / preparation; action; maintenance leading to lifestyle /behaviour change; possible lapse; contemplation etc. Their work has informed the development of motivational techniques

Finally, in terms of those families with the most complex problems nearing breakdown and on the edge of care, there is also a growing evidence-base on what kind of combination of services work most effectively:

- Rapid response for young people at risk of homelessness / entry into care includes an element of family mediation, practical support and access to appropriate accommodation or supported housing and other services (depending on age).
- Attention to family engagement and ‘contracting’ – a creative and tenacious family focus at all first points of contact including if appropriate reminding legal guardians of their legal duties to young people.
- Clear, evidence-based model(s) for intervention such as Functional Family Therapy and Multi-Systemic Therapy selected with regard to the presenting characteristics of young people presenting on the edge of care<sup>14</sup>. High levels of fidelity to the chosen programme.
- Assertive, persistent key workers for young people and their families with low caseloads – able to work skilfully with families for extended periods of time including an intensive initial phase. The quality of the key worker relationship with families is the factor most commonly cited as the difference between success and failure.
- Responsive access to broader services including positive activities; Family Group Conferencing; CAMH services.
- Investing to make reconciliations safe and sustainable.

Officers in Cardiff have used the IPC evidence summarised above to inform the outline design of the strategic delivery model for prevention, early help and support described below, particularly in terms of:

- Recognising the importance of good quality information, advice and assistance to all families
- Emphasising the importance of early help for families who need some early help, and of intensive support for those with complex or long-term problems, and that the detailed design of these services needs to be different.
- Ensuring that the right skills, capacity and experience is available to families at different points in the range of services.
- Investing sufficiently and focusing on the right families so that the number of children in Cardiff needing safeguarding or substitute care away from their birth families is reduced, securing better outcomes for them and reduced costs to the Council.

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<sup>14</sup> Generally speaking, MST is considered a good fit where the child’s behaviour constitutes ‘wilful defiance’ and is driven more by peer, school or community factors. FFT is considered a better fit where the child’s behaviour is driven more by family issues such as high conflict, histories of neglect or psychiatric concerns, or where the caregiver is initially reluctant to participate



# Family Help & Support - Gateway

Professionals – Education,  
Police, Health, Probation

Public – Families, Children -  
all members of the public

Page 37  
Anyone  
(professionals/public) who  
has a concern about the  
well-being a child or wants  
to find out what support is  
available ALL come  
through this route

## The gateway

Dedicated  
Phone line



E-mail



Online information  
accessible from any  
device



### Includes:

- Family Help Advisors
- Social Worker oversight

### Services provided by the Gateway:

- Information, advice and signposting
- Proportionate assessment and triage into appropriate services
- Practical Information, Advice & Assistance

E.G. Help with:

- Child behaviour
- Child Care
- Parental Support
- School Attendance



# Family Help & Support - Model



## Family Help (Housing & Communities)

## Safeguarding, Care & Support (Childrens Services)

Gateway and Family Help Unit		Parenting Unit
<b>Gateway Team:</b> <ul style="list-style-type: none"> <li>Advice and signposting</li> <li>Proportionate Assessment /Triage</li> <li>Allocation to gateway controlled services / Referral to Mash</li> <li>Whole family approach including youth offending prevention services</li> <li>Telephone / Email / Online Referral</li> </ul>	<b>Family Help Team</b> <ul style="list-style-type: none"> <li>Short term support for families who need more than one service and cannot access these directly.</li> <li>Focus on resilience</li> <li>Develop personal action plan</li> </ul>	<b>Parenting</b> Home based Education Psychology led parenting interventions Community level evidence based parenting programmes including programmes for inter-parental conflict; Community based engagement groups, modelling best practice (Stay & Play)

Family Support
<b>Family Support Team</b> <ul style="list-style-type: none"> <li>Longer term support for more complex families</li> <li>Social worker QA</li> <li>Families under acute stress</li> <li>Step down from statutory services</li> <li>Work towards resilience using strengths based approaches</li> <li>Meet range of needs.</li> </ul>

Mash & Intake and Assessment
<ul style="list-style-type: none"> <li>Wellbeing Assessment</li> <li>Strategy discussion</li> <li>Child protection investigation (sec 47)</li> <li>Child protection conferences</li> <li>Care proceedings</li> </ul>

Targeted Intensive Services
<ul style="list-style-type: none"> <li>Parenting assessments</li> <li>Management of child protection plans</li> <li>Management of care proceedings</li> <li>High level prevention /pre-</li> </ul>

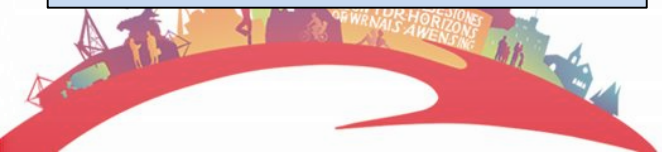
Interventions	
Adolescent Resources Centre	Edge of care younger children
Think Safe	13+

Looked After Children and Leaving Care
<ul style="list-style-type: none"> <li>Childrens homes</li> <li>Fostering</li> <li>Parental placements</li> </ul>

Youth Offending Service
Supervising court orders Supports victims Oversees intervention programmes

Referrals
Gateway Controlled Services - access controlled through the Family Support
Services with multiple referral points - Feeding back to the Gateway)- eg homestart
Community Services – existing services using normal referral methods- Eg Into work. Possible data sharing to be explored.

Training and Outreach
Developing a virtual team – schools etc
No wrong door / one Cardiff approach
Promoting Signs of Safety / Strengths based approach



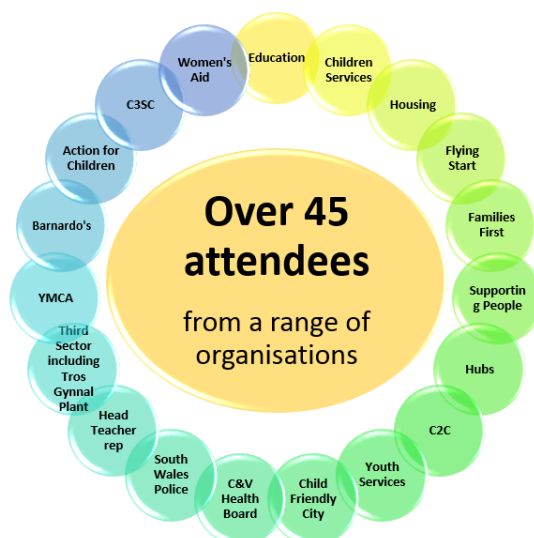


# Workshop: Family Help and Support in Cardiff

## Introduction

On the 24<sup>th</sup> September 2018, a large multi-agency workshop took place with the aim of setting out a proposed delivery model for integrated early help and prevention services for families and children.

The workshop was facilitated by the Institute of Public Care (IPC) and was very well attended with over 45 people representing various organisations across Cardiff.



To set the scene for the workshop, various people presented to provide detail on why and how we are reviewing our current arrangements, as well as providing some early findings. It also included the proposed high-level future approach that included the creation of 3 new services.

- **Family Gateway** - Primary route in for all referrals and requests for help
- **Family Help Service** - Rapid response to families needing short term intervention
- **Family Support Service** - To work with families facing more complex or severe issues

Based on these three services, attendees were then given the opportunity in small groups to discuss each of the services in turn while answering the following questions.

- What are the strengths?
- What are your concerns?
- How can we address any concerns?



## Workshop: Family Help and Support in Cardiff

### Key Findings – Overarching Themes

There was a lot of positive support throughout the different groups for this model and agreement that it could have a very successful impact on the lives of many families in Cardiff. In addition, the consensus was that the benefits would be far reaching for many of the organisations that were at the workshop.

Many strengths and concerns crossed over. Some areas were identified as critical to the success of the model and that, if done correctly, would be a strength, there were concerns however that if not done correctly this could impact on the service. The task worked well because then it gave all attendees an opportunity to make suggestions on how to address these concerns so that these critical areas could be implemented successfully.

Some of the overarching themes that were discussed throughout the 3 new services were:

**Workforce Development:** A key theme that came through was that the model could only be as successful as the staff delivering it. Staff at each part of the model would need to be highly skilled and there would need to be a comprehensive training package in place that would need to be fully supported. This would include; ensuring ease of access to appropriate services, a complimentary IT system and a manageable workload.

**Performance / Resource Management:** The level of resources in each of the services was unknown at the time of the event and this posed some concerns that the potential level would not meet the demand levels. A full performance framework is required to not only monitor how well demand is being met, but also to determine what is working and having an impact on families.

**Engagement:** This was twofold with, concerns about families engaging with each aspect of the model, but also ensuring that professionals engage with the model and have the reassurance that families will be supported.

**Detail Development of the Model:** Linked to the above, it was raised that it is crucial that as the model develops and becomes operational, continued engagement should be sought from a range of stakeholders, including Children and Young People, Schools, Police (PSCO's) and the Third Sector Partners.

**Threshold Levels:** The detail on the threshold levels and who would get what level service was considered important also that throughout the model there should be a seamless service for the family.

# Workshop: Family Help and Support in Cardiff

## Specific Themes – Gateway

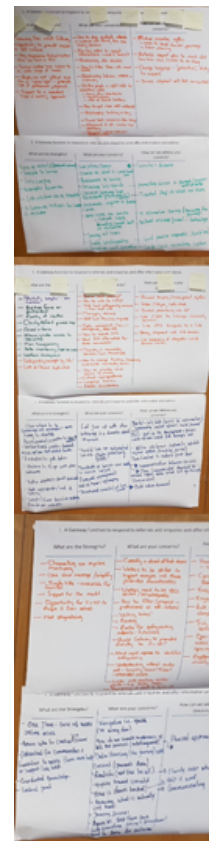
### Strengths

There were lots of positive comments on the gateway aspect of this model and the key theme coming through mainly concurred that this model would **simplify the current arrangements and would be clear and accessible**. It was also felt that it would be clear for professionals and families on where to go and that there would be ease of access when they do. This linked in well with the opportunity to promote/market the service with all potential users, which in turn would lead to the positive of self-referrals.

Not only was the accessibility of the gateway seen as a strength, but also that it will provide a **clear pathway** into other services and the support to navigate those resources. This was especially thought to be the case in terms of the focus on building positive partnerships with the third sector. The view was also that this would enable better use of available resources by giving the appropriate level of service for the needs of the family.

In terms of the operation of the gateway itself, there were positive comments in relation to the inclusion of **safeguarding oversight and support by social workers** and that it will be consistent with the signs of safety approach. Further positive comments were received on the ability of this Gateway to seamlessly align and **refer to other Gateways** currently in operation.

In addition, the ability to **manage demand** through the gateway will enable us **to improve monitoring and understand the needs** of people presenting in Cardiff. This will also enable us to quality assure, understand what interventions work and inform future commissioning.



### Concerns and how these can be addressed

A key concern was that the referrer needs **confidence in the gateway and reassurance** their referrals will be acted on appropriately. Part of the solution identified was to build in some type of feedback into the system so that the referrer knows what has happened as a result of their referral.

Another key concern was ensuring the staff had the **skill level and the right training** to be able to support everyone coming through the gateway. It was thought that the learning from the integrated adult services model could help inform the recruitment and training.

Highlighted was the need (when further developing the service) to seek the views of families especially the **voice of the child/young person** in ensuring their needs are captured. Within this development phase, the opportunity to involve Police Community Support Officers (PCSO's) was raised, as they have a crucial role to play in the overall model.

Concerns were also raised about the **long-term funding** of the service and also its ability to meet all the demand, especially reacting to **safeguarding concerns in a timely manner**. It was noted that strong performance management would need to be put in place, both operational in terms of response times, but also to provide the evidence of the impact that the service is having.

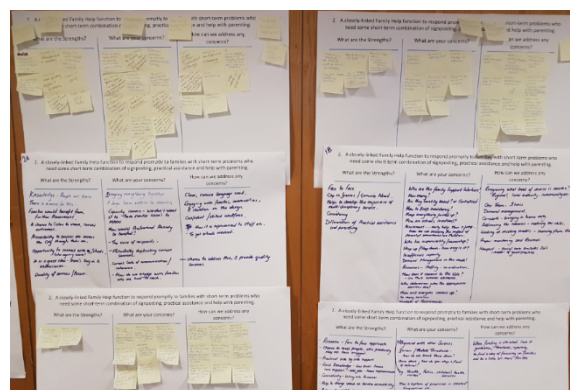
Additionally, there were some practical concerns/solutions that attendees thought needed consideration for the service to work. These included

- Having a Freephone Number
- Opening Times for when the service is needed / Appropriate out of hours messaging
- Including a face to face service
- Language barriers
- Portal/Automated Service – self-help (access to information)
- Seeking consent for referrals and need for compliance with GDPR

## Specific Themes – Family Help

### Strengths

On this aspect of the service, there was again a lot of positive comments and it was felt there was a genuine need for the service to be provided. This was most prevalent in having people to assist as well as simply signposting, especially to provide **practical help** in a range of areas. This included low-level parenting, housing advice and connecting with community-based programmes.



The Family Help Service would be able to provide a proportionate response to family's needs and have the potential to help those who have previously not engaged with services. It was also felt that the Family Help Service would be able to connect to schools.

### Concerns and how these can be addressed

A key area of concern was how this team would get **families to engage** from the outset and there were quite a few ways that this could be overcome. Namely by:

- engaging with families, communities and children in the design
- getting schools involved
- encouraging the referrer to begin the process of engaging and sell the service to the families

Another key area of concern centred on the overall **availability of the service** and this included question on

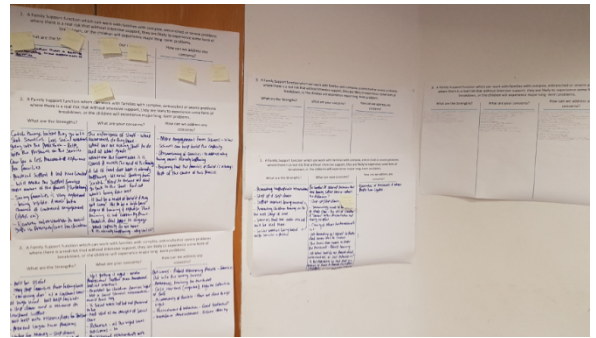
- how many staff
- are they centrally or locality-based
- where will the service be delivered
- caseload capacity
- demand management – and anticipating the number of referrals the team will need to deal with

Again, concerns about training and ensuring that staff were appropriately trained and supported was raised. In addition to the points covered previously, it was raised that the co-location with the Gateway and the Family Help Team would improve understanding of each other's roles.

## Specific Themes - Family Support

### Strengths

A key strength of the Family Support Team was that (in addition to providing initial **crisis intervention**) they would be able to provide **longer periods of support**. During this time, they would be able to work with the **whole family** in a range of evidence-based interventions.



The Family Support Team would be able to help families **step down** from Children's Services and (in comparison to preventative work which would take time to see a positive impact), this would have an immediate impact.

There was a lot of support for this element and the consensus was that getting this right would prove value for money. It was further felt that the impact of helping people before they reach crisis would help a lot of different areas.

### Concerns and how these can be addressed

There were similar concerns to the Family Help Team **around resources** and ensuring that it is the right level to **meet the demand**. Plus, ensuring the **right skills** and **level of training** is in place for staff delivering this service.

Specific concerns about this team and the **links to Children Services** were made in relation to

- the level of children's services involvement
- that this is social work, but shouldn't look/feel like that to families
- not using this service as an as an overspill of Social Care

The use of data was raised as crucial and this was not just data sharing between professionals but also robust monitoring to look at family's entering and exiting to measure improvement.



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<b>Project Title: Family Help and Support</b>
<b>New</b>

<b>Who is responsible for developing and implementing the Policy/Strategy/Project/Procedure/Service/Function?</b>	
Name: Jane Thomas	Job Title: AD Housing and Communities (project lead)
Service Team: Joint project Childrens Service & Housing and Communities	Service Area: People and Communities
Assessment Date: 20.9.18	

**1. What are the objectives of the Project?**

To set out a new delivery model for integrated early help and prevention services for families and children in line with the Council's Early Help Strategy.

**Overview of the proposed new Family Help and Support model**

The proposed new model contains a new approach to family help and support based on 3 new family support services:

A **Family Gateway** service to respond to all referrals and enquiries and offer information and advice.

A closely-linked **Family Help** service to respond promptly to families who need some short-term support, including a combination of signposting, practical assistance and help with parenting.

A **Family Support** service which is able to work with families with more complex or severe problems and where there is a real risk that without intensive support, more significant intervention would be needed.

Aims of the service will be to:

- Provide timely information advice and assistance, reducing the need for ongoing support.
- Enable families with emerging short-term problems to be better helped to manage these problems, build resilience and avoid the need for longer-term support.
- Better support families with complex problems, to prevent the need for statutory intervention, taking a relationship based whole family approach.

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- Improve the range of services available for families who are involved with statutory safeguarding and care services to be able to secure the best possible long-term future and enable them to step down to support services as soon as this is safe.
- Develop a shared understanding and language across the city, developing a “no wrong door” approach with all partners fully engaged in supporting families.
- Improve outcomes for families and children across a range of indicators including improved school attendance and prevention of the need for care.

**2. Please provide background information on the Project**

**Early help for families**

1. Recent research on Adverse Childhood Experiences has demonstrated that the first few years in children’s lives shape their future development, and influence how well children do at school, their on-going health and wellbeing and their achievements later in life. A strong focus on the first few years of children’s lives leads to huge economic, educational, social and emotional benefits later on, both for individuals and for society as a whole
2. Research also suggests that it is important to intervene at the early stages of a problem, whatever the age of a child, to prevent issues from escalating.

**Current Challenges and Issues**

3. Children’s social services are working with increasing numbers of referrals, undertaking an increasing number of assessments and the Council is responsible as Corporate Parent for the highest ever level of looked after children. Recent data indicates that in the first quarter of 2018/19, 1,745 children were supported with a Care and Support Plan in Cardiff. The numbers of children in need open to Children’s Services are on an upward trajectory, rising overall from 520 children in April 2016 to the current position of 630.
4. It is clear that the current arrangements for early help are not reducing the number of referrals received by children’s services. The first quarter of 2018/19 saw an increase of 16.3% compared when compared to the final period of the previous year.
5. There are also growing pressures on Education, with increasing numbers of children educated other than in school. In 2018 there were 348 pupils

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education other than at school (EOTAS), which is 30% increase on 2017 (268 pupils) and 70% increase from 2016 (205 pupils). There are schools across Cardiff's poorest communities where pupil attendance remains below the Cardiff Ambition target of 95% and there remains a high number of in-year transfers between schools linked to behaviour and relational issues.

6. There are numerous reasons for these increasing pressures including the effects of austerity and increasing complexity of the issues facing families. The impacts have been seen nationwide, however, some local authorities have progressed to develop a more holistic approach to preventative service integration and the learning from these authorities will help to inform Cardiff's approach.

**Issues with Current arrangements**

7. The Multi Agency Safeguarding Hub (MASH) was introduced in 2016 and all concerns for children's safety and wellbeing are referred into the MASH. Fewer than 20% of referrals to the MASH progress to a Children's Services intervention. While some cases are referred for early intervention this number is low, just 15% or 3,292 children during 2017/18. In 51.8% of cases referred to the MASH, no action is taken.
8. Family Support is currently provided through a partnership arrangement between Tros Gynol Plant Cymru and Children's Services. The service operates a free-phone number for advice and information, co-ordinates a team around the family approach and offers intensive key working for the families stepping down from care. The early intervention help available is very limited. Of the 1,786 calls to the Tros Gynol Plant helpline in the first quarter of 2018/19 only 49 visits were carried out. 77 referrals were made to Team around the Family.
9. Parenting services are delivered and managed alongside the Flying Start infrastructure as is the Family Information Service which provides information about child care and activities. These services are not currently closely aligned with Children's Services' family support services.
- 10. There is currently no clear pathway for families who need help but do not require children's social care and there is a pressing need for a more coherent approach to early intervention and prevention services.**

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**3 Assess Impact on the Protected Characteristics**

**3.1 Age**

Will this Policy/Strategy/Project/Procedure/Service/Function have a **positive differential impact** on younger/older people?

	Yes	No	N/A
Up to 18 years	x		
18 - 65 years	x		
Over 65 years			x

**Please give details/consequences of the differential impact, and provide supporting evidence, if any.**

The change will have a positive impact on children and young people and their parents. The new service will provide a clear route into information advice and assistance and will build on and enhance support services for all levels of need. It will provided tailored intervention such as parenting support, as well as signposting into other services such as money advice and housing.

**What action(s) can you take to address the differential impact?**

None – impact is positive

**3.2 Disability**

Will this Policy/Strategy/Project/Procedure/Service/Function have a **positive differential impact** on disabled people?

	Yes	No	N/A
Hearing Impairment	x		
Physical Impairment	x		
Visual Impairment	x		
Learning Disability	x		
Long-Standing Illness or Health Condition	x		
Mental Health	x		
Substance Misuse	x		
Other	x		

**Please give details/consequences of the differential impact, and provide supporting evidence, if any.**

There will be a positive impact on those with disabilities.

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<p>While specialist services for children with physical and learning disabilities are out of scope of this service, parents can still contact the gateway for the more general advice and assistance thereby having positive impacts.</p> <p>It is envisaged that many of the parents accessing the support services will have mental health and /or substance misuse issues. Young people and children may also suffer from these issues. Therefore training of support staff will be tailored to meet this need specifically. The wrap around support provided will be particularly beneficial for these families and children.</p>
<p><b>What action(s) can you take to address the differential impact?</b></p>
<p>Ensure that training provided fully addressed the issues of mental health and substance misuse</p>

**3.3 Gender Reassignment**

Will this Policy/Strategy/Project/Procedure/Service/Function have a **no differential impact** on transgender people?

	Yes	No	N/A
<p><b>Transgender People</b> (People who are proposing to undergo, are undergoing, or have undergone a process [or part of a process] to reassign their sex by changing physiological or other attributes of sex)</p>		x	

<p><b>Please give details/consequences of the differential impact, and provide supporting evidence, if any.</b></p>
<p>There will be no differential impact</p>
<p><b>What action(s) can you take to address the differential impact?</b></p>
<p>N/A</p>

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**3.4. Marriage and Civil Partnership**

Will this Policy/Strategy/Project/Procedure/Service/Function have a **no differential impact** on marriage and civil partnership?

	<b>Yes</b>	<b>No</b>	<b>N/A</b>
Marriage		x	
Civil Partnership		x	

**Please give details/consequences of the differential impact, and provide supporting evidence, if any.**

There will be no differential impact, parents will be assisted whether married, civil partnership or lone parents.

**What action(s) can you take to address the differential impact?**

N/A

**3.5 Pregnancy and Maternity**

Will this Policy/Strategy/Project/Procedure/Service/Function have a **positive differential impact** on pregnancy and maternity?

	<b>Yes</b>	<b>No</b>	<b>N/A</b>
Pregnancy	x		
Maternity	x		

**Please give details/consequences of the differential impact, and provide supporting evidence, if any.**

There will be a positive impact on pregnant women and young mothers as the information and support available to them will be enhanced.

**What action(s) can you take to address the differential impact?**

None required

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#### 3.6 Race

Will this Policy/Strategy/Project//Procedure/Service/Function have **no differential impact** on the following groups?

	Yes	No	N/A
White		X	
Mixed / Multiple Ethnic Groups		X	
Asian / Asian British		X	
Black / African / Caribbean / Black British		X	
Other Ethnic Groups		X	

**Please give details/consequences of the differential impact, and provide supporting evidence, if any.**

Unfortunately there is limited information about the ethnicity of those being referred into the Mash as in many cases this is not recorded (see table below). However no differential impact is anticipated.

Careful consideration will be given to meeting the needs of those with language issues and equalities training will be a standard requirement for staff in the service.

Nationality	Percentages	Total referrals
NULL	54.6%	11666
British	40.9%	8751
Czech	0.5%	115
Bangladeshi	0.3%	74
Somalian	0.3%	56
Romanian	0.2%	49

**What action(s) can you take to address the differential impact?**

Steps will be taken to ensure that the Gateway and support service is fully accessible to those with language requirements.

Equalities training will be standard for all staff in the services.

#### 3.7 Religion, Belief or Non-Belief

Will this Policy/Strategy/Project/Procedure/Service/Function have a **no differential impact** on people with different religions, beliefs or non-beliefs?

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	Yes	No	N/A
Buddhist		X	
Christian		X	
Hindu		X	
Humanist		X	
Jewish		X	
Muslim		X	
Sikh		X	
Other			

**Please give details/consequences of the differential impact, and provide supporting evidence, if any.**

No differential impact is anticipated

**What action(s) can you take to address the differential impact?**

Equalities training will be standard for all staff in the services.

**3.8 Sex**

Will this Policy/Strategy/Project/Procedure/Service/Function have a **positive differential impact** on men and women?

	Yes	No	N/A
Men	X		
Women	X		

**Please give details/consequences of the differential impact, and provide supporting evidence, if any.**

Gender of the children referred into the Mash is equally balanced between male and female (see below). However in terms of parents, there is likely to be a disproportionately high level of female clients. A positive impact is expected for these clients who will be able to access services more easily.

Gender	Percentages	Total referrals
Male	47.8%	10210
Female	47.5%	10148
Unborn	1.5%	321
Unknown	3.3%	700
<b>Total</b>	<b>100.0%</b>	<b>21379</b>



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<b>What action(s) can you take to address the differential impact?</b>
None required

**3.9 Sexual Orientation**

Will this Policy/Strategy/Project/Procedure/Service/Function have a **positive differential impact** on the following groups?

	Yes	No	N/A
Bisexual	x		
Gay Men	x		
Gay Women/Lesbians	x		
Heterosexual/Straight	x		

<b>Please give details/consequences of the differential impact, and provide supporting evidence, if any.</b>
More clients are likely to be heterosexual, however the impact will be positive on all groups.
<b>What action(s) can you take to address the differential impact?</b>
None

**3.10 Welsh Language**

Will this Policy/Strategy/Project/Procedure/Service/Function have a **no differential impact** on Welsh Language?

	Yes	No	N/A
Welsh Language		x	

<b>Please give details/consequences of the differential impact, and provide supporting evidence, if any.</b>
The service will cater equally for welsh speakers

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### Equality Impact Assessment Corporate Assessment Template

#### What action(s) can you take to address the differential impact?

Some posts will be Welsh essential to ensure equal service can be provided

#### 4. Consultation and Engagement

What arrangements have been made to consult/engage with the various Equalities Groups?

None to date however as the project progresses clients will be consulted about the detailed delivery of the service.

#### 5. Summary of Actions [Listed in the Sections above]

Groups	Actions
Age	
Disability	
Gender Reassignment	
Marriage & Civil Partnership	
Pregnancy & Maternity	
Race	Steps will be taken to ensure that the Gateway and support service is fully accessible to those with language requirements.
Religion/Belief	
Sex	
Sexual Orientation	
Welsh Language	Some posts will be Welsh essential to ensure equal service can be provided
Generic Over-Arching [applicable to all the above groups]	Equalities training will be standard for all staff in the services.

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### Equality Impact Assessment Corporate Assessment Template

#### 6. Further Action

Any recommendations for action that you plan to take as a result of this Equality Impact Assessment (listed in Summary of Actions) should be included as part of your Service Area's Business Plan to be monitored on a regular basis.

#### 7. Authorisation

The Template should be completed by the Lead Officer of the identified Policy/Strategy/Project/Function and approved by the appropriate Manager in each Service Area.

Completed By : Jane Thomas	Date: 20.9.18
Designation: AD Housing & Communities	
Approved By: Sarah McGill	
Designation: Corporate Director	
Service Area: People and Communities	

- 7.1 On completion of this Assessment, please ensure that the Form is posted on your Directorate's Page on CIS - *Council Wide/Management Systems/Equality Impact Assessments* - so that there is a record of all assessments undertaken in the Council.

For further information or assistance, please contact the Citizen Focus Team on 029 2087 2536 / 3262 or email [equalityteam@cardiff.gov.uk](mailto:equalityteam@cardiff.gov.uk)

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**CYNGOR CAERDYDD  
CARDIFF COUNCIL**

**CHILDREN & YOUNG PEOPLE SCRUTINY COMMITTEE**

**9 October 2018**

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**FAMILIES FIRST ANNUAL REVIEW 2017 – 2018 and FUTURE  
DEVELOPMENT PROPOSALS**

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**Purpose of the Report**

1. The purpose of this report is to provide the Committee with an opportunity to review and note the Families First Annual Review 2017/18 (copy attached at **Appendix A**).
2. The Director of Social Services will also brief the Committee on the future development proposals for Families First.

**Background**

3. Families First is a Welsh Government programme to fund the development and promotion of effective multi-agency systems and support for children, young people and families, particularly those living in poverty. It is designed to recognise the specific needs of different families and the common requirement for multiple agencies to provide holistic and integrated packages of support.
4. One of the main aims of Families First is to provide timely help for families when they start to experience difficulty, to prevent problems from escalating. It also aims to work with families who need extra support to increase their confidence to return to work and improve their family income.
5. Families First is about working *with* families who say they need a bit of extra help or services, rather than doing things *to* or *for* them. Involvement in the programme is entirely voluntary. Families First has also been designed to

recognise the specific needs of different families and the requirement for multiple agencies to provide joined-up packages of support by becoming a 'Team Around the Family' where this is needed.

6. The main challenge for 2017-18 is to manage a smooth transition to new programme arrangements. Recommissioning of Families First presents significant opportunities but this will also require changes in the way we do things.

### **Families First in Cardiff**

7. The Families First programme comprises six 'packages' that provide coordinated services on a particular theme. Each involves a consortium of different providers who work with a Lead Provider:

- Early Years
- Child & Youth Engagement (Connect 8-25).
- Sustainable Employment.
- Healthy Lifestyles.
- Emotional & Mental Health and Wellbeing (Cadarn).
- Disability Focus.

8. Tros Gynnal Plant provides two services that are central to the overall Families First programme in Cardiff. Team around the Family and Freephone service provides a range of support for families who are experiencing difficulties to help resolve their problems and prevent escalation and the families First Freephone service acts as a central access point to the programme.

### **Future Family First Proposals**

9. The Director of Social Services will also verbally brief the Committee on the future plans and direction of Families First in Cardiff.

## **Scope of the Scrutiny**

10. The report will provide Members with the opportunity to note the progress made in the management, monitoring and achievement of agreed outcomes of the Welsh Government funded programme for 2017/18. Members may also wish to reflect on the proposed future development of Families First evaluate the proposals effectiveness in:
- a. addressing the challenges facing Cardiff
  - b. clear outcome measures and
  - c. management and monitoring arrangements:

## **Way Forward**

11. Sarah McGill, Corporate Director People and Communities, Claire Marchant, Director of Social Services and Angela Bourge, Operational Manager, Strategy Performance and Resources, will present the Annual Review and explain future Families First proposals, following which they will all be available to answer questions Members may have.
12. Members may wish to reflect on the Families First Annual Review 2017/18 together with any additional information provided at the meeting and provide any comments, concerns or recommendations to the Cabinet Member, Council Officers and the Council's Chief Executive and Partnership Board.

## **Legal Implications**

13. The Scrutiny Committee is empowered to enquire, consider, review and recommend but not to make policy decisions. As the recommendations in this report are to consider and review matters there are no direct legal implications. However, legal implications may arise if and when the matters under review are implemented with or without any modifications. Any report with recommendations for decision that goes to Cabinet/Council will set out any legal implications arising from those recommendations. All decisions

taken by or on behalf of the Council must (a) be within the legal powers of the Council; (b) comply with any procedural requirement imposed by law; (c) be within the powers of the body or person exercising powers on behalf of the Council; (d) be undertaken in accordance with the procedural requirements imposed by the Council e.g. Scrutiny Procedure Rules; (e) be fully and properly informed; (f) be properly motivated; (g) be taken having regard to the Council's fiduciary duty to its taxpayers; and (h) be reasonable and proper in all the circumstances.

### **Financial Implications**

14. The Scrutiny Committee is empowered to enquire, consider, review and recommend but not to make policy decisions. As the recommendations in this report are to consider and review matters there are no direct financial implications at this stage in relation to any of the work programme. However, financial implications may arise if and when the matters under review are implemented with or without any modifications. These financial implications will need to be considered before any changes are implemented. Any report with recommendations for decision that goes to Cabinet/Council will set out any financial implications arising from those recommendations.

### **RECOMMENDATIONS**

That Members review the information contained in **Appendix A** together with any additional information provided at the meeting and submit any comments, concerns or recommendations to the Cabinet Member, Council Officers and the Council's Chief Executive and the Cardiff Partnership Board.

**DAVINA FIORE**

Director of Governance and Legal Services

2 October 2018



# Cardiff

## Families First

# Annual Review

## 2017-18

### Draft for Scrutiny





For further information on Families First in Cardiff, please contact the central Families First Team in Children's Services:

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# 1. INTRODUCTION

## 1.1 What is Families First?

'Families First' is a Welsh Government-funded programme to promote effective multi-agency support for children, young people and families. One of the main aims of Families First is to provide timely help for families when they start to experience difficulties, to prevent problems from escalating. In this way, Families First makes an important contribution to the provision of early intervention and prevention services. It has also supported implementation of Cardiff's Early Help Strategy.

Families First sits alongside Communities First, Flying Start and Supporting People as key elements in the Welsh Government's strategy for tackling poverty. During 2017-18, Cardiff became a pilot for 100% 'Funding Flexibility' in the use of funding from ten Welsh Government funding streams.



*Families Learning Together*

## 1.2 How does Families First work with families?

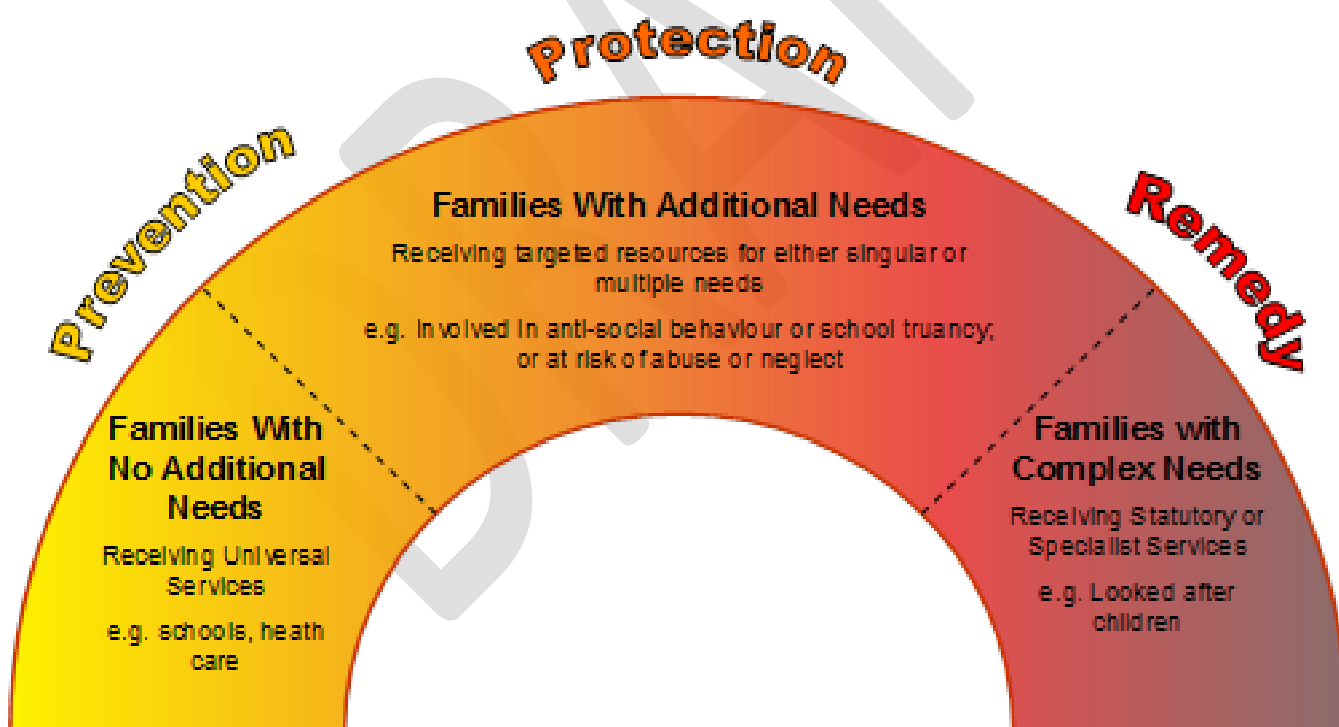
Families First is about working *with* families who say they need a bit of extra help or services, rather than doing things *to* or *for* them. Involvement in the programme is entirely voluntary.

Families First has also been designed to recognise the specific needs of different families and the requirement for multiple agencies to provide joined-up packages of support by becoming a 'Team Around the Family' where this is needed.

In line with guidance from Welsh Government, the services provided by the Families First programme are designed to be:

- **FAMILY-FOCUSED:** taking a whole-family approach to improving outcomes
- **BESPOKE:** tailoring help to individual family circumstances
- **INTEGRATED:** with effective coordination of planning and service provision across organisations, ensuring that needs assessment and delivery are jointly managed and that there is seamless progression for families between different interventions and programmes
- **PRO-ACTIVE:** seeking early identification and appropriate intervention for families
- **INTENSIVE:** with a vigorous approach and relentless focus, adapting to families' changing circumstances
- **LOCAL:** identifying the needs of local communities and developing appropriate service delivery to fit those needs, with particular regard for the opportunities to link with the Flying Start, Integrated Family Support Services (IFSS) and Communities First programmes

### 1.3 The Spectrum of Services



The Spectrum of Services above covers the range of needs from 'prevention', where families' needs can be met through universal services, through 'protection', where families may need some targeted additional support, through to remedy where families need statutory interventions.

The Families First programme provides services for those families who are generally coping but just need some additional help at a specific time, or the right information to get them back on track (prevention at tiers 1 and 2), through to services for families with higher levels of needs (protection at tier 3), but who do not meet the criteria for a social services intervention (remedy at tier 4).

## 2. FAMILIES FIRST IN CARDIFF 2017-18



Putting Families First  
in Cardiff

*Families First continued to deliver important services for families during 2017-18. However, following the publication of new Guidance in April 2017, the year was also a transition year for a review and recommissioning of the whole programme.*

*Programme managers and providers made every effort to maintain delivery and minimise the impact on families during this time. However, the review suggested that significant changes should be made to the way in which services were delivered.*

*This report provides further information about the programme, and about the review and recommissioning process that took place during the year.*

### 2.1 Overview of the first Programme in Cardiff

Cardiff Council manages the Families First programme. The first programme was designed to meet Welsh Government's requirements but also to fit with local ways of working and to make sure that the services met Cardiff's needs.

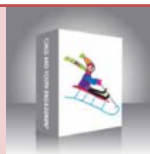
The original Families First services started at the beginning of April 2013. The specifications were based on an assessment of needs carried out as part of the development of Cardiff's first integrated plan, *What Matters*.

The resulting programme delivered five 'packages' of coordinated services on a particular theme during 2017-18. Each involved a consortium of different providers who work with a Lead Provider:



#### **Early Years**

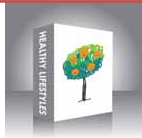
Provides a range of support for families with babies or young children (under the age of 8) and for pregnant women. Cardiff and Vale University Health Board lead this package.



#### **Child & Youth Engagement (Connect 8-25)**

Makes sure that children and young people do well in school, college or work and get the support they need from their families. City of Cardiff Council's Education Service leads this package.





## Healthy Lifestyles

Helps families to deal with things like diet, exercise, smoking and sexual health and to live healthy lives. Cardiff and Vale University Health Board leads this package.



## Emotional & Mental Health and Wellbeing (Cadarn)

Supports children and young people who are anxious or unhappy. Barnardo's leads this package.



## Disability Focus (Disability TAF)

Provides extra help for families who have a disabled child. This can provide key working as part of the Team Around the Family approach. Action for Children leads this package.

The original programme included a sixth package, Sustainable Employment. However, the Families First team decommissioned this service at the end of 2016-17, in line with the direction of travel in the new Guidance. There are other funding streams for 'into employment' services and so Welsh Government asked Families First not to provide this element any longer. The funding released enabled the development of an enhanced 'front door', Support4Families.

## Support4Families

In addition to these five strategically commissioned 'packages' of support, Cardiff Council also commissioned two city-wide services that would provide a central point of contact and higher-level support for families with more complex needs.

During 2017-18, the Families First team worked with Tros Gynnal Plant (now TGP Cymru) and Children's Services to extend the Families First Freephone and Cardiff Team around the Family (CTAF) to develop Support4Families.

**Support4Families is a core team of Family Practitioners who provide:**

- Telephone information and advice about early help services and support for families
- Telephone support and advice for professionals who work with families, including up to date information about Families First services
- Face to face meetings with families who need additional help to complete a proportionate assessment that will identify their needs – these meetings can take place in the family's home or in another venue in which the family feels comfortable
- Support to establish a Team Around the Family for families with more complex needs
- Children's Services Social Worker presence to provide assistance and advice in relation to safeguarding matters and whether a case should be escalated to Cardiff Children's Services



The Support4Families number is 0808 800 0038.

There is also a Freetext number 80800 – messages should start with FamiliesFF.

## Infrastructure



There are also a number of very important elements of 'infrastructure' support, which underpin work across the programme. This includes:

- Work with Young Commissioners/Young Inspectors, which ensures that young people are involved in planning and monitoring delivery of services
- Provision of TheSprout website for young people which makes sure that information about services is provided in an accessible form
- A Parenting Coordinator, who ensures that parenting services are quality assured and evidence-based
- Use of Time Credits to reward and encourage volunteers within the programme

The sections below carry further information about these Families First services. They also include case studies, which illustrate the difference that they are making to families.

**All the data provided in this report is taken from information reported by Families First projects in their RBA report cards (see 2.2 below) and anonymised data returns. However, to understand this information, there are a couple of things to note:**

- Individuals and families are counted each time they access a separate project so may be counted more than once in aggregate information. This is a formula agreed with Welsh Government.
- Individuals counted in report cards include existing service users *and* new service users. Anonymised data is only collected in relation to new individuals, so appears to reflect lower numbers. (Anonymised data for existing service users would have been gathered and reported in the previous year.)
- Within report cards, the 'Better Off' information recorded relates to the numbers reported in the 'How Much' section. However, the information reported in these sections of the infographics may be taken from different report cards. This means that the figures do not directly relate to each other. In particular, 'How Much' information relates to delivery across the Programme (for the overall infographic) or a package (for the individual infographics). However, the 'Better Off' information relates only to individuals taking part in projects that deliver against that particular measure (e.g. only the 'into work' projects collect data about numbers getting into employment).
- Additionally 'Better Off' information is collected after a piece of work has ended, so relates only to individuals whose cases closed within the year, not all individuals accessing the project.





# Cardiff Families First



## Overall Performance 2017-18

### How much did we do?

**419**

JAFFs completed

**17,916**

individuals accessed a commissioned project 2017/18



**964**

families called Support4Families/ Families First Freephone

### How well did we do?

**97.8%**

participants reported being satisfied with the service they received

**94.6%**

participants completed their intervention



**1025**

participant parents reported improved ability to support their child's learning and development (of 1,068)



**2439**

families felt better able to make changes in their lifestyles and behaviours



**337**

families with a disability reported improved emotional wellbeing



**2507**

participants reported improved emotional mental wellbeing (of 2,788)



**1572**

parents benefited from a parenting intervention (of 1,746)

### How is anybody better off?

2017/18 figures



Support 4 Families Free Phone  
0808 800 0038



Website  
[www.cardiff-fis.info/cardiff-families-first](http://www.cardiff-fis.info/cardiff-families-first)



## 2.2 Monitoring Progress and Audit

Results Based Accountability [RBA] is the framework for measuring the difference that Families First services make to families. Performance monitoring of each of the services delivered is based around three key questions:

- How much did we do?
- How well did we do it?
- Is anyone better off as a result?

Each of the services has a detailed report card with performance measures based on these key questions and in line with the service levels set out in their original tenders. The report cards also provide monitoring across the six Neighbourhood Partnership areas of Cardiff.

Each quarter, the central team map the performance measures in these individual report cards against national performance measures which are reported to Welsh Government.

The central Families First team also work with Lead Providers to ensure robust financial reporting. This helps the team to monitor whether funding has been spent effectively and in line with the plan that had been agreed with Welsh Government. However, for a further year, Welsh Government asked for any identified underspend to be returned rather than reallocated to alternative or new work.

### Wales Audit Office pilot

Cardiff Council was part of a Wales Audit Office pilot to look at how funding has been used to deliver outcomes. The pilot took place during 2017-18 but looked at reporting from the previous year, 2016-17. It covered a number of areas of the Council's work, including Families First.

During the pilot, audit staff went in to projects to look at arrangements for reporting performance as well as finance. They randomly selected a cross-section of projects from each package and examined the chain of reporting, from the data gathered from service users through the chain of reporting to inclusion in the Progress Report to Welsh Government.

While there were no serious issues, the audit did confirm the difficulties caused by having such a complicated reporting chain involving sub providers, lead providers and a central team. This had

Measuring Performance 2014-2015															
Activity/Project: Families Learning Together				Providers: Cardiff Council - CAVC											
ID: CY&E 2.1		Outcome(s) met: 2,3,4 & 7		Funding Allocated: £82,500				Actual Spend: £82,500.00							
Number of individuals with open cases carried over from 2013/14: 0															
Number of children with open cases carried over from 2013/14: 0															
Number of parents with open cases carried over from 2013/14: 0															
Customer Group: Families accessing full & half day course															
How Much?	Q1	Q2	Q3	Q4	Cumulative	Baseline Target	How Well?	Q1	Q2	Q3	Q4	Baseline Target			
# of full day courses	3	2	0	2	7	8									
# of half day courses	4	4	0	4	12	12	% of children rating courses as good or excellent	0%	100%	100%	100%	100%	90%		
# of children accessing courses	41	47	0	44	132	144									
# of children completed the course	0	37	42	36	115										
# of parents accessing courses	37	45	0	42	124	144	% of parents rating courses as good or excellent	0%	94%	96%	100%	100%	90%		
# of parents completed course	0	34	41	34	109										
Is Anyone Better Off?															
Number							Percentage								
	Q1	Q2	Q3	Q4	Cumulative	Baseline Target	Q1	Q2	Q3	Q4	Actual to date	Baseline Target			
# & % of children will have improved language skills	0	37	42	36	115	130	0%	100%	100%	100%	100%	100%	90%		
# & % of children will make progress from their previous attainment level	0	37	42	36	115	115	0%	100%	100%	100%	100%	100%	90%		
# & % of children will report feeling more positive about their learning	0	37	42	36	115	130	0%	100%	100%	100%	100%	100%	90%		
# & % of children achieving individual targets from the workshop card	0	37	42	36	115	130	0%	100%	100%	100%	100%	100%	90%		
# & % of parents will report more positive relationship with schools	0	32	38	36	106	122	0%	100%	100%	100%	100%	100%	90%		
# & % of parents achieving individual targets from the workshop card	0	34	41	34	109	109	0%	100%	100%	100%	100%	100%	90%		
# & % of parents will have improved language skills	0	34	41	34	109	130	0%	100%	100%	100%	100%	100%	90%		
# & % of parents to achieve Agreed Cymru accreditation	0	36	41	34	105	115	0%	100%	100%	100%	100%	100%	90%		
# of parents by Neighbourhood															
Cardiff North				Cardiff East				Cardiff South East							
Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
3	1	0	0	0	0	0	0	12	6	0	0	0	0	0	0
Cardiff West				Cardiff South West				City Centre & South Cardiff							
Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
0	0	0	0	1	1	1	1	0	0	0	0	21	17	0	0
Quarterly Total				Overall Total											
Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
37	45	0	42	124											
Out of Area				Out of Area Total											
Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
0	0	0	0	0				0				0			
Quarterly Comments															
Families Learning Together run full day (one day a week for one term) and half day (half a day a week for one term) courses for parents and children for whom English is an additional language in schools across the city. The main aim of the programme is to break the cycle of underachievement and to increase parental knowledge and understanding of literacy and numeracy in the home curriculum. In addition to this parents are encouraged to progress into further studies or into the workplace. Family Programmes aim to foster a more positive relationship between home and school and many of the parents who participate go on to help on a voluntary basis at school. Parents and children are taught separately for part of the course with an emphasis on language development. All parents are offered the opportunity to complete Agreed Cymru accreditation. In addition parents and children work together in a joint session focusing on language activities to support the school curriculum.															
No courses are run during Q3. However, in terms of the evaluations for How Well and Better Off measures, evaluations are completed in Q2 for Q1 courses, in Q3 for Q2 courses and in Q4 for Q4 courses.															
Q1: No young people carried over as evaluated at the end of last year and results are in last year's reports. Courses started in April/May and will finish in July. Outcomes for 45 children and 38 parents on full and half day courses carried over to Quarter 2. Numbers recruited to courses slightly lower than projected (target = 8 per course). Families Learning Together continue to work with individual schools to recruit to each course and to reach target families. Schools in Quarter 1 are Ninian Park Primary, Lakeside Primary, St Joseph's R.C. Primary, St Albert's R.C. Primary, St Mary's the Virgin R.C. Primary and St Paul's C. in W. Primary.															
Q2: Outcomes are for courses which started in April/May and finished in July. Numbers recruited to courses slightly lower than projected (target = 8 per course) and not all parents who started completed the course. Families Learning Together continue to work with individual schools to recruit to each course and to reach target families. Courses started in Q2 (Sept) evaluated at end of course in Oct (quarter 3). Schools in Quarter 2 are Stacey Primary, Grogan Primary, St Mary's R.C. Primary, St Philip Evans R.C. Primary, Kitchener Primary and Glyncroft Primary.															
Q3: No courses started due to courses being run during school term time. Courses started in Q2 (Sept) and ended during Q3 (Dec).															
Q4: Schools in Quarter 4 are Severn Primary, Moorland Primary, Baden Powell Primary, Adamstown Primary, Birchgrove Primary and Both Park Primary.															

**Report cards enable close monitoring of performance measures**

already been identified in the programme review and has informed the monitoring arrangements that are being put in place for the new programme.

## 2.3 Meeting the needs of a diverse population

Cardiff has the largest and most diverse urban population in Wales. Families First services provide anonymised data about their service users to improve our business intelligence. The central team monitor this information to ensure that we are reaching the right target groups and providing services that are available to all who need them across the city.

The anonymised data enables the team to analyse where service users live across the city, their protected characteristics, language needs and family members etc. However, this detailed information is only gathered for those families and individuals who work with Families First services on an extended basis.

In total, detailed information was collected in relation to 7,818 service users over the 2017-18 reporting period. This represents an increase of 4.91% on the previous year's total of 7,452.

*“Cardiff as the largest LA in Wales, by population and budget, has differing challenges in implementation of Families First to the rest of Wales; particularly relating to the diverse communities living in the city.”*

National Evaluation of Families First, Year 3 Local Authority Feedback, Ipsos MORI Ecorys on behalf of Welsh Government

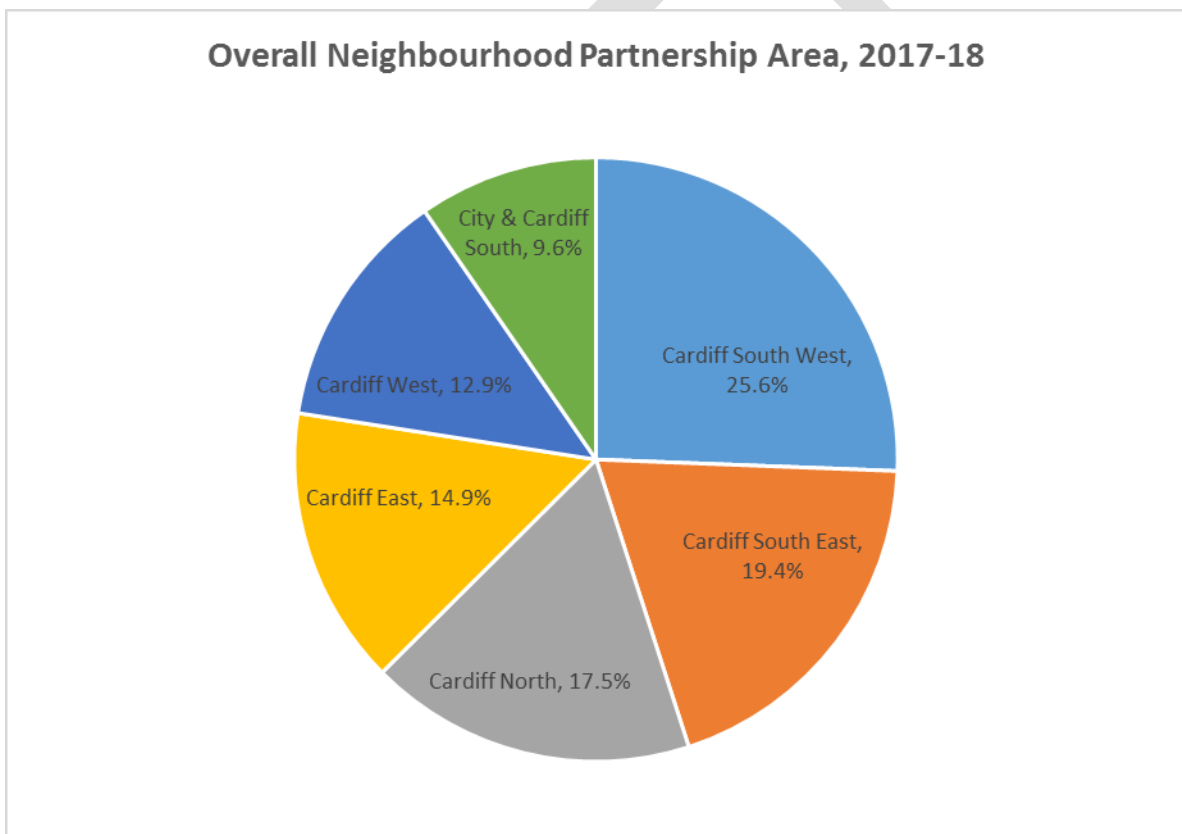
### HEADLINE FACTS ABOUT FAMILIES FIRST SERVICE USERS IN CARDIFF

- The largest group of service users by age and gender were females in the 25+ age group (17.8%, suggesting that mothers and other female carers were most likely to access services. However, more males than females accessed services across the whole 0-16 age range with the next largest group being males aged 5-8 years (10.5%).
- The majority of service users identified themselves as White British or White Welsh (5,015 out of 6,831). However, service users reflected the range of ethnicities in Cardiff as a whole, with the next largest numbers identifying as Ethnic Group Other (311) and Black or Black British African (206).
- This also means that Families First delivered services to families with a range of different home languages. Of the 6,572 who reported home language, 92.4% classified their home language as English. However, the next highest reported home languages were Czech with 1.4% and Arabic. Only 9 service users reported their home language as Welsh.
- 1,546 individuals reported a disability – of these, 88.7% were disabled children and 11.3% disabled adults.
- Families accessed services from all parts of Cardiff: the largest number of individuals reported by neighbourhood partnership area came from Cardiff South West (25.6%).

- Out of the 7,784 referrals, the largest number were Self-Referrals (41.7%) with Schools and Education (17.4%) providing the second highest number of referrals.

Families First programme is able to respond based on identified need, not a service user’s postcode. The data enables the Families First team to monitor delivery of services for families living in different Neighbourhood Partnership areas across Cardiff.

**Figure 1: Service Users by Neighbourhood Partnership Area, 2017-18**

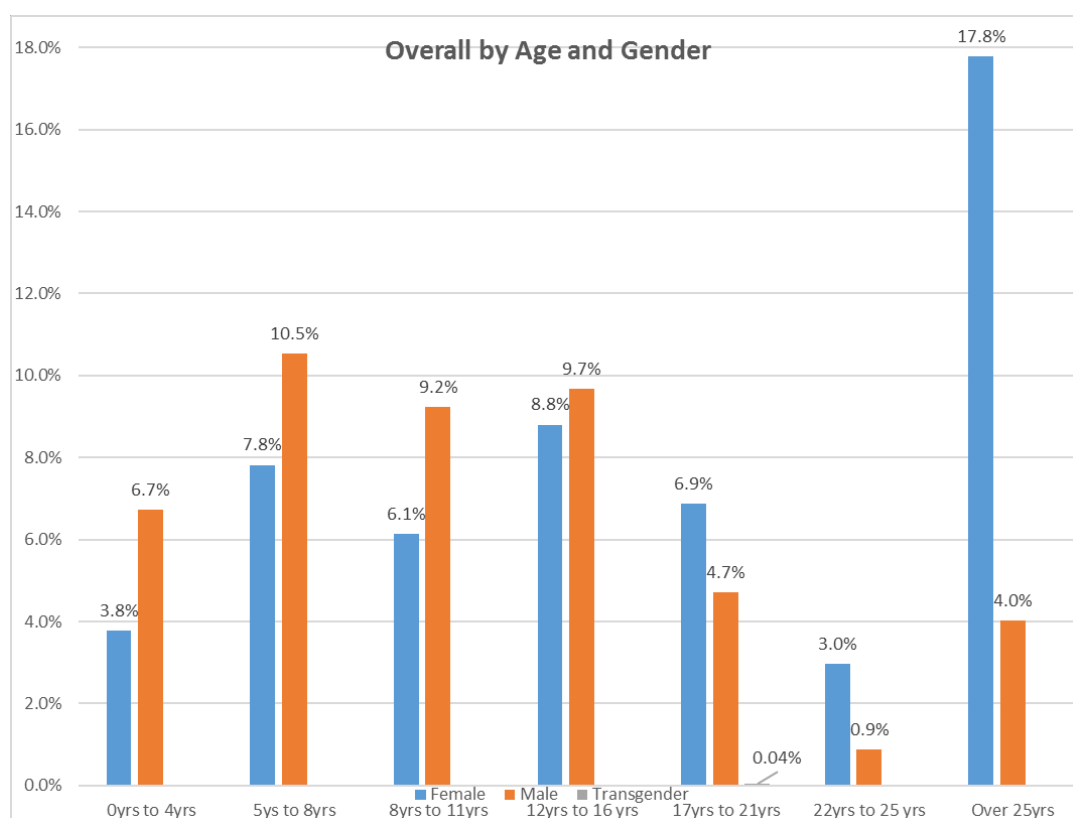


*Baseline of 7,784 represents 99.6% of the total number of service users*

In previous years, data has shown that there are families who need additional help in all parts of the city, not just the ‘Southern Arc’. The programme delivers services to families in every ward of the city.

The programme also works with families with children of all ages from pre-birth up to 25 if the young person is vulnerable. Figure 2 below provides more detailed breakdown of the age and gender of Families First service users.

**Figure 2: Service Users accessing Families First in Cardiff, by age and gender, 2017-18**



Baseline of 7,737 represents 99% of the total number of service users

Table 1 shows the distribution of referrals for service users by source. The largest number were Self-referrals, which accounted for 3,245 referrals (41.7%). This was followed by Schools and other Education Services, which accounted for 1352 referrals (17.4%).

**Table 1 – Distribution of referrals by source**

Source of referral	Total	Source of referral	Total
Self Referral	3,245	Housing Services	106
Schools and education services	1,352	Police	73
Third Sector	1,254	Child and adolescent mental health services	70
Health visitors	454	Other employment support services	41
Children's Social Services	352	Job centre Plus	15
Other Primary Services	289	Adult Social Services	10
TAF/Freephone	205	Adult Substance Misuse Services	6
Other	192	Careers Wales	2
GPs	118		
		<b>Total</b>	<b>7,784</b>

Baseline of 7,784 represents 99.6% of the total number of referrals

The 10 schools with the highest level of referrals/ service users are shown in Table 2 below:

**Table 2 – Top ten schools referring**

Rank	School	No of Referrals/ service users
1	St Teilo's Church in Wales School	72
2	Eastern High School	63
3	Willows High School	50
4	St Illtyd's Catholic High School	47
5	Millbank Primary School	45
6	Fitzalan High School	35
7	Cantonian High School	28
8	Cathays High School	28
9	Plasmawr High School	26
10	Grangetown Primary School	24

While a significant majority of service users had English as their home language, the table below illustrates the diversity of the home languages of Families First service users. The table shows the top 20 languages.

**Table 3 – Distribution of service users by home language**

Language	Total	Language	Total
English	6,076	Tigrinya	13
Czech	96	Urdu	12
Arabic	64	Romanian	10
Bengali	61	Spanish	10
Portuguese	24	Welsh	9
Albanian	17	Amharic	8
Kurdish	16	Polish	8
Farsi	15	Iranian	7
Punjabi	15	*Other	83
Slovak	15		
Somali	13	<b>Total</b>	<b>6,572</b>

Baseline of 6,572 represents 84.1% of the total number of service users

The full reports on the data collection for 2017-18, 2016-17, 2015-16, 2014-15 and 2013-14 are available on:

<https://cardiff-fis.info/parenting/cardiff-families-first-programme/delivering-families-first-in-cardiff/>

### 3. TEAM AROUND THE FAMILY



# AND SUPPORT4FAMILIES

*Over the life of the first programme, Tros Gynnal Plant has provided two services that have been central to Families First in Cardiff: the generic team that supports Team around the Family [TAF] working and the Families First Freephone Service that acts as a central information point for the programme. During 2017-18, these services became the basis of new arrangements to provide a clear front door for early help services: Support4Families.*

## 3.1 Cardiff Team Around the Family model and 'Think Family'

A Team Around the Family [TAF] model of working is a central requirement of the Families First programme. The National Evaluation of Families First confirmed the success and importance of this approach to working with families during the first programme. As a result, the new Guidance asked for this approach to continue.

The model is based on the principle of 'Think Family', which is also a key principle in Cardiff's Early Help Strategy. It recognises that the wellbeing of other members of the family, and the way that the family functions as a whole, has a direct impact on the wellbeing of the child or young person. Some parents have additional needs in their own right that affect their ability to meet the needs of their children.

The Think Family approach therefore encourages the development of services that:

- offer an open door into a system of joined-up support at every point of entry
- look at the whole family and co-ordinate care
- provide support that is tailored to need
- build on family strengths.

The TAF model was developed to support this way of working.

***"Parents are the most significant influence on children, and parenting has profound consequences for their future lives, so it is important to persuade parents that engaging in their child's development can make a difference, and to build positively on their existing strengths and actively involve them in decisions." Cardiff Early Help Strategy***



The Families First Freephone service was introduced in the second year of the programme. The aim of the service was to provide a central access point to information about both the Families First programme in Cardiff and other services that families might need. It quickly established itself as a vital resource.

The main element of the Freephone was to provide information and advice about services over the phone to families and professionals. However, if needed, an experienced family practitioner could also go out to talk with a family about their needs and about the services that might be right for them.

The TAF service and the Freephone were managed alongside each other, so if a 'Freephone' visit identified that a family needed additional support to form a team around them, the family would transfer to the full TAF process.

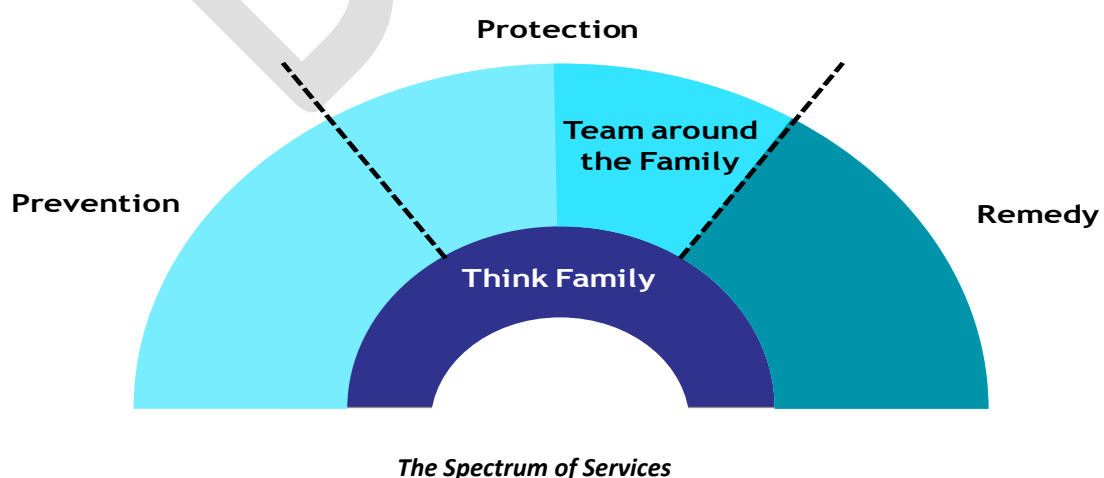
### 3.3 Reviewing the model and development of Support4Families

The Social Services and Wellbeing Act requires a new approach to the provision of Information, Advice and Assistance [IAA], and a proportionate response for families who are below the level where a 'care and support' plan is needed. The Early Help Strategy and the review of Families First, particularly how the TAF model related to arrangements in Children's Services, provided very powerful drivers for a set of proposed changes to the TAF and Freephone arrangements.

The Team Around the Family model was designed to support families who were experiencing difficulties and to help those families resolve their problems to prevent things from escalating.

The target group for support from the dedicated TAF team were families with complex needs, who required an intervention from four or more services. The Spectrum of Services below shows where the Team Around Family team is placed in relation to other services.

**Figure 5: Where TAF support is placed on the Spectrum of Services**





The original criteria were set to target the families who would benefit most from help to identify the support they needed and to coordinate the services involved. However, feedback from stakeholders identified that these criteria sometimes acted as a barrier and needed to be more flexible. Some practitioners said that they did not refer families when they were unsure how many services they needed, even if they considered the family had needs that were not being met. Others pointed out that some families might have very high levels of need for support, but in one or two particular areas.

At the same time, Children's Services were experiencing a very high level of contacts coming through to the Multi-Agency Safeguarding Hub [MASH]. A high proportion of these did not require a Children's Services intervention. However, this data was very powerful. It suggested that the existing arrangements did not pick up many of the families who would benefit from early help support at an early enough point. It also suggested that some of the people who made referrals to MASH were not aware of the other kinds of support that were available.

Finally, discussions were taking place with Children's Services about the appropriateness of the TAF model for families who were 'stepping down' from Children's Services. These families had been working with targeted Children's Services teams, but no longer needed a higher-level intervention. However, they still needed support to prevent them from re-presenting.

In the light of these circumstances, the Families First team commissioned Tros Gynnal Plant to pilot a new approach in a partnership with Children's Services. The pilot built on the existing TAF and Freephone arrangements, but with the aim of developing clearer arrangements for identifying and targeting the families who were most at risk of either escalating or re-presenting to Children's Services.

In addition to providing an expanded helpline service, the new agreement also provided added capacity for the TAF service to be able to respond more flexibly to the needs of families. This includes families who are 'stepping down' from Children's Services.

The report from Cardiff University informed the new model of working, but SPICE also supported a further piece of consultation with families to choose the name for the new service: Support4Families.

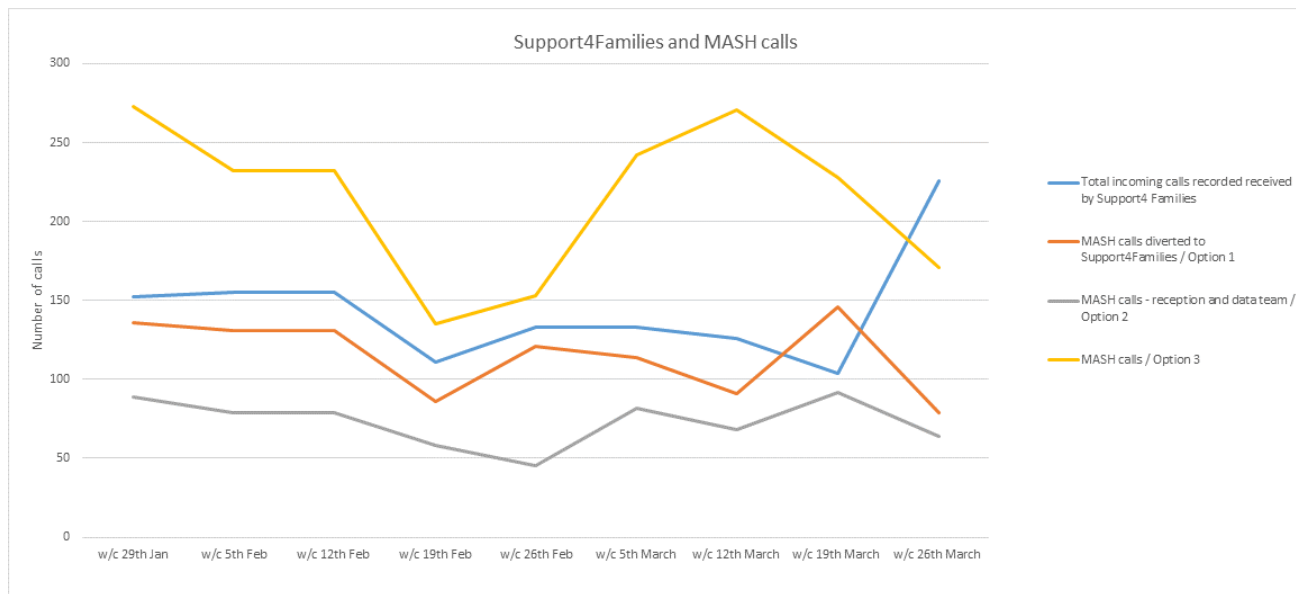
The new arrangements mean that practitioners can refer any families to Support4Families, and the response will be appropriate and proportionate, based on the needs of the family.

Families and professionals can contact Support4Families directly on the old Families First Freephone number (0808 800 0038). However, the new arrangements also introduced an option for people calling the MASH line to divert to Support4Families if their call did not clearly relate to a safeguarding issue. Children's Services Social Workers provide the reassurance that all calls will receive the most appropriate response and can be escalated if serious concerns are identified.

The 'divert' went live on 27<sup>th</sup> November 2017. Analysis of calls during the first quarter of operation suggests that these new arrangements were successful in reducing the numbers of lower-level calls being made to MASH. However, further work is taking place in 2017-18 to develop the arrangements.

Figure six below shows the rates of calls coming in to MASH and Support4Families during the first quarter. There was a slight drop in calls to Support4Families in the last week of March because there was a short break in service while the team moved to larger premises.

**Figure 3: Calls to Support4Families and MASH**



Breakdown of calls (Jan - March)	Number
Relevant recorded calls	1275
Calls from families (recorded)	569
Calls from professionals (recorded)	706
Requiring info only	518
Requiring advice and assistance	830
Requiring Social Worker involvement	293
Diverted to MASH	312
Outgoing calls	1019
Visits for face to face assistance	70

Main Issues (Jan - March)	Number
Emotional Well-being	239
adult	82
child	157
Parenting	130
Child development	99
Education	87
Family Relationships	84
Health	82
adult	36
child	46
Contact	78
Housing	32
Finance and Employment	29
Community	27

### 3.4 The Joint Assessment Family Framework (JAFF)

Welsh Government Guidance requires all Families First programmes to use a Joint Assessment Family Framework [JAFF] in work with families. The JAFF is a tool to help families identify their strengths and needs and develop a family plan.

The TAF teams in Cardiff (generic and disability teams) use the JAFF to help structure their work with families. The approach is about engagement with the family to identify what concerns them. The teams draw on their experience of restorative approaches to ensure that they work *with* families to do this.

Since the original Cardiff JAFF was agreed, a number of important developments have taken place:

- The Improvement Project Manager for Prevention and Partnerships in Children's Services ran a pilot to test out whether other practitioners could use the JAFF as proposed in the Early Help Strategy. This pilot identified that practitioners needed to have the right skills and experience in working with families to be able to use it effectively.
- Children's Services introduced a Signs of Safety approach in their work, including in the way they complete Wellbeing Assessments. This introduced a new strengths-based approach in line with the restorative approach in Families First.
- The implementation of the Social Services and Wellbeing Act said that individuals who required 'assistance' (as part of IAA) should receive a 'proportionate' wellbeing assessment. If Support4Families is to provide the IAA function, assessments will need to meet the criteria for this.

In response, Families First and Children's Services took the following steps:

- The outcomes of the JAFF pilot informed the development of proposals for the new Families First programme, including Early Help Family Support workers who will be part of the wider Support4Families team (mobilising from September 2018). The new services will provide additional practitioners who are linked in to local communities and schools, and who are able to work appropriately with families.
- Children's Services provided training in Signs of Safety for the TAF teams to ensure that their work with families was consistent with the new approach.
- There is a review underway to adapt the JAFF so that it fulfils the criteria for a proportionate assessment.



Tros Gynnal Plant  
Standing up for Children

# TAF/Freephone Support4Families



## Performance 2017-18

### How much did we do?

**206**

JAFFs completed



**849**

Children and Young people  
benefitted from work with  
TAF and Support4Families



**1876**

telephone calls received by  
Support4Families/FFF including  
964 calls from families

**589**

adults benefited from  
work with TAF and  
Support4Families

### How well did we do?

**100%**

of professionals  
felt engaged in the  
TAF process

**100%**

callers reported that the  
Support4Families service  
was informative



**100%**

of adults, children and young people  
felt central to the TAF process and  
that their voices were heard.

**100%**

of those completing an evaluation following use of Support4Families  
felt they had a better understanding of services to support their needs.

**100%**

families involved in TAF and completing an  
evaluation found working with TAF beneficial.

**100%**

TAF families completing an  
evaluation felt their plan worked.

### How is anybody better off?

2017/18 figures



Support 4 Families Free Phone  
0808 800 0038

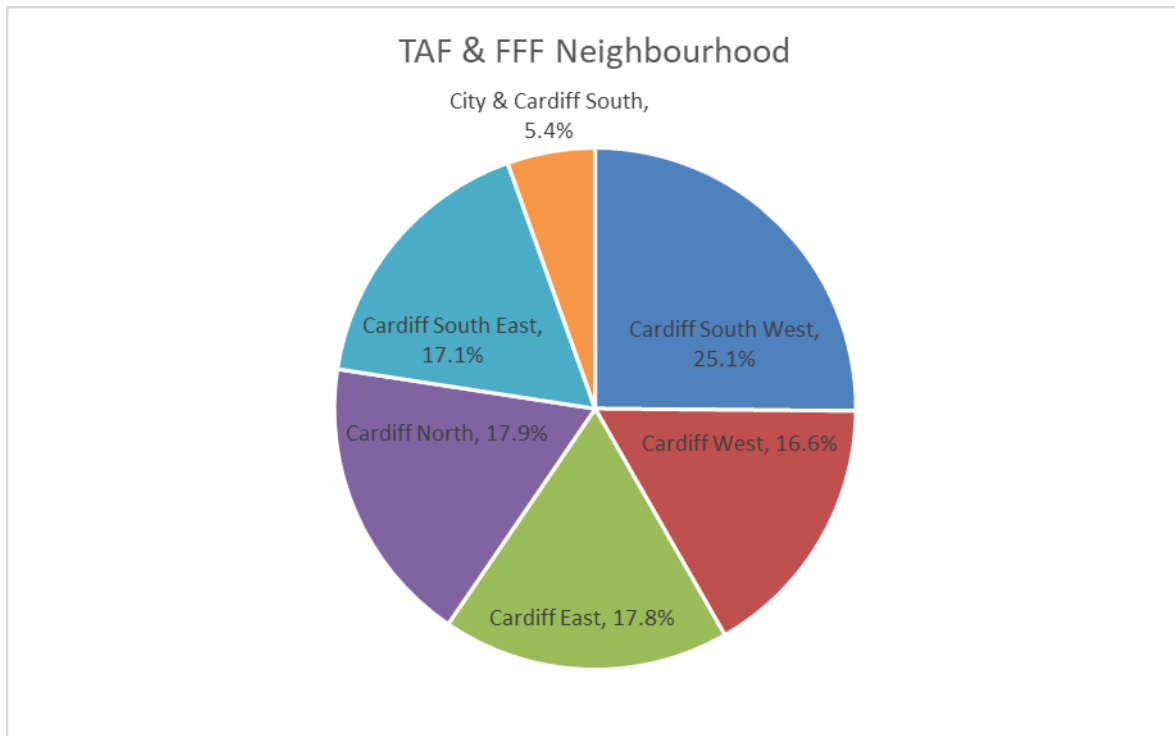


Website  
[www.cardiff-fis.info/cardiff-families-first](http://www.cardiff-fis.info/cardiff-families-first)



Families accessing the service come from across the city. Similar to last year, Cardiff South West represents the highest percentage of service users at 25.1%, with Cardiff North the next highest at 17.9%. City and Cardiff South has the least with just 5.4%. The chart below is a combination of TAF and Families First Freephone data.

**Figure 4: Service Users by Neighbourhood Area**



*Baseline of 1,285 represents 93.7% of the total number of service users (i.e. individual family members)*

**Feedback from service users**

*"They actually listened to our needs and wanted to help."*

*"You always calmed me down when I was anxious and helped my bad thoughts go away."*

*"I'm more confident about services for my son and glad he has a chance to get the needed help."*

*"The TAF worker was friendly, approachable, knowledgeable and positive."*

*"I feel we would have fallen apart without his help."*

## CASE STUDY 1

### Call to Support4Families

Support4Families took a call on 8<sup>th</sup> December 2017 from a Mum who needed some advice regarding finances. She explained that her child tax credits had been changed and she was concerned about being able to buy food for her children (3 boys, aged 8-16). She was borrowing money from her family to manage but this was not sustainable as her child tax credits would not be resumed until April. She had already tried to contact the Money Advice Centre and spoken to Child Tax credits who said that they were unable to help. She was very upset on the phone. The worker checked that there was no immediate risk to the children, which there was not as Mum was borrowing money from family to feed them. As Mum was upset and the situation required further thought than the obvious services that Mum had already contacted, a visit was arranged for within the next few days.

During the visit, it transpired that the family also had significant debts and the bailiffs often knocked on the door. Mum also had poor mental health and was worried about the impact on the family as one of the children was quite anxious and they were not able to afford family days out together. The eldest son, who had ADHD, had also recently become a father so was trying to provide for his new baby. He was employed and doing well in work and the other two children were doing well in school, which was positive.

Mum was supported to ring the council and arrange for a Welfare Liaison Officer to come out to the family in January to discuss payment plans and benefits advice. Mum was also signposted to Speakeasy drop-ins in case she could not wait until January and a food voucher was provided to help the family out in the run-up to Christmas.

Mum did not want any support for her mental health but the worker discussed possible services that would support the middle child with his anxiety. Mum was also sent some information on free family days out and some information around free sports sessions going on that the children could access.

A couple of weeks later we were also able to give the family some Christmas presents that were donated to Tros Gynnal Plant from St David's Appeal so Mum was able to give the children something to open on Christmas morning.

## CASE STUDY 2

### Family Stepped Down from Children's Services to Support4Families

Support4Families Team Around the Family team received a referral from Children's Services. A handover meeting took place with the Social Worker and the family concerned. The immediate family consisted of one child (aged 13), one parent (mum) and two grandparents. Shortly after the referral was taken, Grandmother passed away due to longer-term health issues.

The family identified their needs as:

- Help to improve school attendance for the daughter
- Support for daughter to access emotional and wellbeing services
- Help to ensure the family was on the right level of welfare benefits
- Mental health review for Grandad and support for his bereavement and anxiety.
- Parenting support for Mum to ensure she was best able to support her daughter returning to school and managing her anxiety

There was concern for the child's emotional wellbeing: her attendance at school never exceeded 50% and hit just 13% after the death of her grandmother. UHW had been supporting her to manage anxiety and physiological symptoms for the past two years.

Prior to Support4Families/TAF involvement, there had been a referral to Children's Services after the hospital paediatrician became concerned with the daughter's anxiety and low school attendance. Mum admitted that she has little confidence in her ability to parent and to support her daughter in her education. Parenting was identified as a key need.

The mother suffers from anxiety and has a learning difficulty; she is also hard of hearing and short sighted. She had not accessed help or support for herself at all, so none of these issues was being managed effectively. She had neglected her own health in order to prioritise her child's needs.

As there was so much going on, the aim of the intervention was to help the family identify their needs and recommend which services would be best placed to work with the family to support them in reaching their goals. It was important in this case to work restoratively so that everyone's voice could be heard and to draw on the family's strengths – much of this was linked to the wider family, which consisted of three sisters and a host of cousins, nephews and nieces. To enable this the TAF practitioner spent time with family members individually and allowed the professionals to capture the voice of the young person. The TAF Family meeting consisted of 14 family members and no professionals. The meeting enabled the family to agree the plan, and assign the actions agreed to family members.

The High School spoke about the young person's progress in school and the strengths that she had displayed. The school provided a safe place for the daughter to talk about her feelings and to seek solace in the school 'snug' when her anxiety flared up.

UHW Paediatrician and Psychologist provided high level emotional and well-being support for the young person but also for Mum who finally found the courage to disclose information about her daughter's early experiences – it was thought that these were causing her anxiety even after so many years.

The TAF practitioners secured parenting support, which provided parenting classes to the Mum on a 1:1 basis in the family home. They also referred her to Cardiff Mind for ongoing emotional wellbeing support.

The family GP provided Mum and Grandad with a lot of support to ensure that they were accessing mental health services in the community and that their medication was managed and reviewed regularly.

Diverse Cymru supported Mum and Grandfather to find out more about their benefit entitlement and to help Mum transfer onto a correct benefit.

British Red Cross provided a mentor to help manage Grandfather's anxiety levels and mental health needs – the Manager regularly came to the family home to play guitar with him as it soothed his nerves.

The family are more positive about their future now; they are better supported by their wider family. They recognise there is a long way still to go, but are motivated to make small steps to a better future together.



*Activities for working with families*



## CASE STUDY 3

### Family contacting Support4Families stepped up to Children's Services

A mother rang in to the Support4Families helpline. She was struggling to pinpoint exactly what support she needed but said that she had previously used drugs and felt like she could relapse if she did not get some support. Mum has two young boys, aged 2 and 5 months and lives with her husband. Mum was struggling to identify needs via on the telephone and was distressed, so a visit was arranged.

During the visit Mum, Dad and their two sons were present. On first impressions, home conditions were good. However, Mum soon disclosed that she was using crack cocaine and heroin every other day. Dad said she had spent £1000 of her Open University money on substances in the last 5 weeks. Dad said he would give her money as otherwise she would find money by other means.

The practitioner rang the Support4Families Social Worker, with consent from the family and explained the situation. The social worker spoke to Mum, explaining that she had requested the practitioner record as much information as possible with the family in order to make a complete referral to Children's Services to obtain the support Mum was requesting. The practitioner, led by the social worker, asked non leading questions to gather information. Mum said she is on a methadone programme and that her son had previously been on the Child Protection register.

The practitioner used the Signs of Safety approach to look at worries and strengths in the family. The strengths identified were that Dad was a good support but was struggling to cope with Mum's drug use. There were also concerns about isolation, with the family feeling they had little social or family support. The 2 year old was attending nursery and doing well according to Dad. Mum said that she was not providing the emotional support her baby needed but Dad was a protective factor. Scaling was used with the family to help them identify where they currently felt that were, and where things could be. In the worst possible situation, Dad felt they would not be able to continue living where they are and the family would break down, Mum's substance use could increase, impacting her ability to provide care needed for the children.

Mum felt she could not engage with community resources to support with substance use as this puts her in contact with other users. In the past, this has led to her being offered substances and as such was a risky situation. Mum said the only thing that makes her stop using is the risk of being on the Child Protection register.

The Support4Families practitioner explained that they would have to refer the family to Children's Services. The Family said this is what they wanted. The practitioner completed a MARF (referral form) and through consultation with the social worker, the case was stepped up for assessment to Children's Services. Children's Services are now exploring legal proceedings.

The Support4Families helpline was a vital resource to instigate this family contacting us and getting the timely step up into Children's Services.

Partnership and consultation with the Support4Families social worker was vital in this situation, as was the step up procedure.



## 4. EARLY YEARS

The Early Years package provided a range of support for families with babies or young children (under the age of 8) and for pregnant women. Cardiff and Vale University Health Board led this package and worked closely with health and early years professionals. The package also made good use of volunteer and peer support through services like Home Start.

### 4.1 Delivery in 2017-18

The Early Years package provided support for families across the whole of Cardiff and is complementary to the Flying Start provision, which is available only in certain areas. Services on offer included:

- Parenting support for parents of children under 8
- Support for mothers experiencing post-natal depression
- Stay and play and targeted childcare
- Support for speech and language development
- Dietetics support for good nutrition in the early years
- Support for families affected by domestic violence
- Welsh language activities for families with young children

During 2017-18, the package continued to provide very valuable services directly to parents who were struggling to cope with their young families. However, a very important part of the way in which the package operates is to provide training and support to improve the skills of the early years workforce in certain areas. This included training in nutrition and healthy eating, speech and language support and motivational interviewing.

Providers within this package tried to maintain delivery throughout the year. However, the uncertainty about future delivery did have an impact. Some staff moved on to more secure employment, while a number of services, such as the parenting services, stopped taking referrals during the final quarter so that they could successfully complete service delivery with service users.



# Early Years Package Performance 2017-18



2017/18 figures

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 0808 800 0038

 **Website**  
[www.cardiff-fis.info/cardiff-families-first](http://www.cardiff-fis.info/cardiff-families-first)



## 4.2 Reviewing arrangements for early years provision

Establishing good parenting practice in the early years is essential for children and families to get off to the best start. However, the package provided a number of different parenting options, in different areas of Cardiff and delivered by different providers. There was also a range of other types of service but delivered only in specific areas of Cardiff. In line with feedback from stakeholders, the priority was to move to a more coherent service offer. This is being done in the following ways:

- Reducing the number of services available, but with the main focus on parenting in line with the Families First Guidance;
- This includes a single Parenting Service, which is managed alongside Flying Start to ensure greater consistency in the approach for families in non-Flying Start areas as well as additional opportunities to benefit from any spare capacity in, for instance, childcare;
- A grant agreement with Cardiff and Vale University Health Board, to include on-going support for important complementary services, such as speech and language support and dietetics – however, the Health Board will now be able to focus on its own delivery rather than managing delivery by other partners;
- Ensuring that all services, such as a new Early Years Volunteer Support Service delivered by Home Start, cover the whole of Cardiff (while still being complementary to Flying Start).

## EARLY YEARS CASE STUDY 1

### Support Service for Young Parents and Families

Practitioners delivering 1:1 parenting to young parents identified that along with the usual anxieties, they often felt overwhelmed when it came to mess. This was having an impact because it was restricting the experiences that they were prepared to expose their children to. Consequently, it was potentially also having an impact on their children's development.

A group intervention was planned to help parents to explore the benefits of messy play. Before the group started, workers told parents about the benefits of messy and sensory play, and the importance of developing new experiences. Along with the fun element, they advised them that this sort of engagement also has the potential to help tackle anxieties and behaviour.

Along with exploring sensory play for children, the group also promoted the importance of self-nurture for the parents taking part.

What developed exceeded the initial expectations when it came to helping lower these parents' anxieties along with supporting positive parent-child engagement.

The group ran for six weeks with good attendance throughout. Parents not only fully engaged with the messy play, but also said that it made them feel more relaxed. This then became an environment where they felt open to discuss feelings of anxiety. Together they suggested differences they could include in their daily life to help challenge these feelings. Practitioners discussed the possibility of inheriting anxieties, but also passing them on.

One parent in particular had expressed anxiety when seeing her son messy or dirty and restricted activities he was exposed to, to the point that she rarely left the house and even refused to send him to nursery. Following the intervention this parent was now requesting MORE messy activities on an evaluation form that she'd completed and signed.

The families reported that they had really enjoyed these sessions and identified the differences that they had felt following exposure to experiences while attending this group.

Families reported having felt a direct difference to anxieties that they had previously felt and that it left them with a better understanding of coping strategies. They also identified the importance of playing with their children.

## EARLY YEARS CASE STUDY 2

### Early Years Parenting

B's health visitor referred her into the service following a diagnosis of Post Natal Depression. She had recently separated from her husband and returned to live in Cardiff.

B's husband serves in the forces; she felt extremely isolated and had lost a lot of confidence.

When the practitioner first met B, she was very low. She did not feel as though there was a healthy bond with her daughter and even though she loved her and cared for her, she did not feel a connection with her.

After accessing one to one support and with assistance, B was able to talk to her GP about her health conditions. Her GP then prescribed medication to help with her mental health.

The service continued to offer B support on a one to one basis looking at self-esteem and confidence, and also setting future goals. They went for walks, looked at colleges and attended local playgroups, with the goal that B would be able to meet other parents in the area.

B was unable to talk to her family about how she was feeling and felt a failure talking about post-natal depression. However, after a couple of sessions, B was able to start talking to her family. Her family have been very supportive and now understand that B needed support.

Following on from the one to one sessions B attended a parenting group.

Since attending the group sessions, her confidence has increased and she is often a 'go to' person for other mums in the group. She participates with group discussions and has become a 'role model' for other mums. This has helped her with her confidence and, as a result, B has now applied to attend a counselling course in college and has applied to become a volunteer with a third sector organisation.

B's relationship with her daughter has improved immensely. She said that all of a sudden she had felt a 'rush of love', which she had been waiting for. B said that she is very grateful for the support that the service provided, as this has now given her a new lease of life. She said that she was previously at the point where she did not think that she had a future ahead for herself with her daughter.

The service has observed a massive change in B and hope this continues once their programme has completed. B is still able to access stay and play sessions.



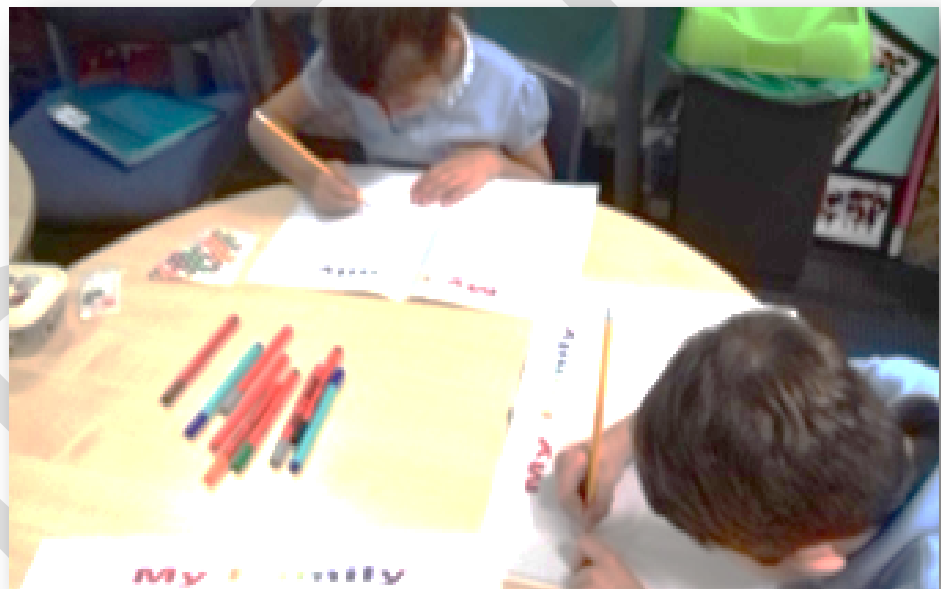
## 5. CONNECT 8-25: Child and Youth Engagement

### 5.1 Delivery in 2017-18

Connect 8-25, the Child and Youth Engagement package provided a range of services to make sure that children and young people do well in school, college or work and get the support they need from their families. Cardiff Council's Education Service led this package, which involved delivery by seven different organisations working with a wide range of schools across Cardiff.

Services provided included:

- Support for Parenting through the Parenting 8-25 services delivered by Barnardo's and Action for Children across the city with special provision for younger parents
- Support for families who have English as an additional language



*Work with Teulu project*

- Youth mentoring and Learning Coach projects to reduce the number of young people not in education, employment or training
- Bespoke education provision for young people run by Cardiff & Vale College
- Advice for homeless young people through Llamau's service in the Basement@33

Programme managers for the package played a key role in helping to ensure that providers were able to maintain services throughout 2017-18. Inevitably, the uncertainty about future commissioning decisions did have an impact on delivery in the package. Some services stopped taking referrals during the final quarter. However, services that were due to end in their current form ensured that they completed work with service users.



# Child and Youth Engagement Performance 2017-18



2017/18 figures

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## 5.2 Reviewing arrangements for Parenting and Youth Support

Lead officers for this package also worked with the central team to review arrangements so that Families First could strengthen the links and relationship with schools and other youth services. This was crucial to inform the services needed in the new programme.

The original commissioning approach had required Cardiff Council services to go through the same tender process as external providers. In the end, this had resulted in Education Service delivering a number of different projects, but spread across a couple of different packages. The commissioning approach this time recognised that the Education Service was best placed to deliver the main Parenting and Youth Support Services.

The central Families First team confirmed this approach early in 2017-18. This enabled the Education Service to start planning the new delivery arrangements.

The Youth Engagement and Progression Framework had already informed the delivery of key elements of youth mentoring, pre and post-16. This is part of a multi-agency approach, with strategic involvement of Careers Wales and secondary schools in Cardiff, which enables effective targeting of additional support for young people.

These core arrangements for youth mentoring will continue as part of the new Youth Support Service. However, during 2017-18, work also started to develop important new aspects that build on the success of the existing arrangements. In addition to the development of plans for an integrated Parenting Service, two of the most important developments are set out below.

### a) Developing a 'Graduated Response' with schools

The Youth Service had developed a Vulnerability Assessment Profile [VAP] in response to the requirements of the Youth Engagement and Progression Framework. This now operates in all Cardiff secondary schools to 'flag' and 'rag' young people using key vulnerability data. In this way, it acts as a referral tool for youth mentor support for those young people at risk of either disengaging or not entering education, employment or training [NEET].

Engagement with schools identified that they wanted a clear process for identifying when families needed additional support as well. Rather than develop an additional tool, Education Service proposed to use the VAP tool. However, there were a number of issues to be addressed:

- There were technical restrictions: the VAP was a hybrid of electronic and manual systems, and data was not 'real time'.
- The tool had been developed for identifying young people at risk of becoming NEET, but there were other indicators that might be needed to identify when families needed additional support.
- The VAP was only being used in secondary schools.

Education officers used Families First funding to develop the tool so that it would underpin a clear 'graduated response' to children, young people and families for schools:

- Developing it into a 'live' data source that will help to ensure support is offered / delivered in a much more proactive way. This will enable both schools and central services to 'see' the same data at the same time.
- Training staff in both schools and central family support services to use a common system to identify vulnerable children and young people, to share information on interventions provided and to improve the co-ordination of service responses.
- Enhancing the VAP to include additional wellbeing indicators and characteristics, in order to build a wider picture of the children / young people and families we should be working with.
- Extending the tool to all primary schools across the city, to ensure we are targeting support at the earliest opportunity.
- Exploring the links to other data sources that exist within and outside of the local authority, including Flying Start data, Youth Offending Services and Health, to enable a good use of data and avoid duplication of support.

Schools use the original VAP to identify and refer young people for youth mentoring. In the same way, the new version will also be able to identify children and parents who need additional support, so that schools can refer them through to the Support4Families 'early help front door'. The front door arrangements will include a team of Early Help Family Support Workers (mobilising from September 2018), who will be able to work with schools to respond to these families at the earliest opportunity.

### **b) Developing a City Centre Youth Project**

The arrangements for using the VAP will help to identify children, young people and families who still have links with schools. However, the Youth Support Services should also ensure that they meet the needs of young people who have left school.

During 2017-18, exciting discussions started to explore the development of a City Centre Youth Project, which would provide a one-stop-shop for young people aged 16+. The project aims to bring together all of the main services and programmes to make the most effective use of available funding and provide a joined-up provision for vulnerable young people.

Supporting People are leading the project, which will need to draw down capital funding, as well as revenue funding for service delivery. However, Families First have been involved from the beginning as part of our commitment to align with other programmes (which will now be included in the Funding Flexibility pilot). Families First has extended the Family Mediation Service delivered by Llamau for 12 months, but this project will then be included in Supporting People commissioning. In addition, Families First will be aligning delivery of other services, such as post 16 youth mentoring and counselling.

## CHILD AND YOUTH ENGAGEMENT CASE STUDY 1

### Basement - Llamau

S (aged 20) found herself at risk of homelessness following the breakdown of a relationship. The relationship had ended after S had lost her baby late into the pregnancy and the couple struggled to come to terms with this. They had prepared their house for the arrival of the baby and S could not bear to be there, so she went to stay with her ex-foster carer. (S's parents and grandparents had died when she was younger). This was only a temporary arrangement as it was a one-bedroom property. The ex-foster carer gave S 28 days' notice to find somewhere else to stay as the property was too small and as such the relationship was strained.

S also has mobility issues. She was involved in a car crash at three months pregnant and then later, complications during the stillbirth made things worse. She relies on a wheelchair a lot of the time and also has carers coming in three times a week. S has also discovered that she is pregnant again.

The issues identified were: Housing, untreated mental health issues, support around health, learning difficulties & independent living skills, and assistance with benefits.

Following work carried out with Basement staff, S is now in appropriate temporary accommodation. It has disabled access and has been adapted to her needs. She also has a support worker to help her develop her independent living skills and ensure that she is linked in to appropriate services. She is registered with the local authority for longer term 'move on' accommodation.

Project staff were able to identify who was already working with S and provide them with information about the current situation. They also identified areas where support was missing and put in appropriate referrals. This built up a network of people who could then provide more informed, integrated and effective support for S.

The relationship with her ex foster carer has also improved now that she has her own accommodation.

## CHILD AND YOUTH ENGAGEMENT CASE STUDY 2

### Connect 825

The Connect 825 Befriending service worked with two brothers: one brother was aged 13 years and the other aged 19 years. Both have a diagnosis of ADHD. The older brother also has a diagnosis of ASD and the younger brother has a diagnosis of OCD. During the initial assessment with the family, it was clear that they both had a good relationship with one another. The boys live with their mother and their grandmother. The family are a close unit that spend a lot of time together.

In the first few weeks of the intervention, games were introduced about getting to know one another and understanding emotions. Both children engaged well with this. They learned from one another how to respond in certain situations. They also were able to link appropriate emotions to scenarios.

The older brother was just about to finish college. The worker discussed what he would like to do after college. He came up with some ideas and decided he would download an application form for a sports centre. Since this visit, he has sent in an application and is waiting to hear back about an interview date.

From our sessions, the worker felt the younger brother was struggling more with regulating his own emotions. The worker spoke with his mother and suggested that the service went to see him in school for some 1-1 support work. The young person agreed that this was something that he would be really interested in. During one to one sessions together, discussion has centred on his on-going issues in school, his self-esteem, how he perceives himself and coping mechanisms. The session about self-esteem allowed him to realise how many positive traits he had. He was surprised that he had so many positive characteristics. This was beneficial for the younger person because through the session he was reassured that even when things are going well, it does not mean that you do not have bad days sometimes. This normalised emotions for him and allowed him to see himself in a different way. Work continued on a 1-1 basis.



## 6. HEALTHY LIFESTYLES

The Healthy Lifestyles package provided a range of services which helped families to deal with things like diet, exercise, smoking and sexual health and to live healthy lives. Cardiff and Vale University Health Board lead this package. Public Health Wales are also an important partner and ensure that interventions are evidence-based.

### 6.1 Delivery in 2017-18

The services on offer over the past year included:

- A 'Fit Fun' project, which took the place of the old MEND project
- Healthy Lifestyles projects, promoting play/activities and healthy eating for 8-13 year olds and 13-18 year olds
- Sexual Health Education through supporting Sex and Relationships Education [SRE] in schools and the C-Card scheme and Sexual Health Outreach Team for young people
- The Strengthening Families Programme – helping parents and children work together to build strong and healthy relationships
- Ty Gwyn Summer Scheme providing play and respite for young people with complex disabilities

The package continued to deliver throughout the year, despite the uncertainty over future delivery following commissioning.



*Healthy Lifestyles Food and Play*

## Healthy Lifestyles Package Performance 2017-18



2017/18 figures

 Support 4 Families Free Phone 0808 800 0038
  Website [www.cardiff-fis.info/cardiff-families-first](http://www.cardiff-fis.info/cardiff-families-first)



## 6.2 Reviewing delivery of health-related elements

Healthy relationships and lifestyles remain important factors for building resilient families.

The original commissioning approach had required Cardiff and Vale University Health Board to tender for contracts alongside other providers. The new commissioning approach recognises that there are certain services that are needed to support Families First delivery, which can only be delivered by the UHB. The commissioning plan

The sexual health project delivered by the YMCA continued to provide preventative work in support of Cardiff's strategy to address Child Sexual Exploitation. Tackling Child Sexual Exploitation is an important priority for Cardiff. Although it affects a relatively small proportion of young people, the impact on their lives can be massive.



*Sexual Health Outreach Team*

## HEALTHY LIFESTYLES CASE STUDY 1

### Healthy Lifestyles Service – Cardiff and Vale University Health Board Dietetics team

The Gold Standard Healthy Snack Award (GSHSA) or equivalent nutritional standard is awarded to afterschool clubs and childminders if they are providing the recommended healthy snacks and drinks and following hygiene and environmental guidelines.

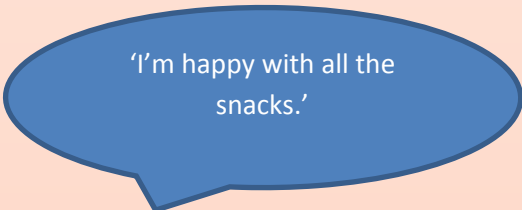
The award encourages activities around healthy eating. Participant provided evidence of recent activities including children fruit picking, preparing their own sandwiches, writing about their favourite healthy foods through questionnaires and bubble diagrams. Less recent activities included fruit faces and caterpillars, fruit obstacle course.

Relevant baseline training and reaccreditation training is delivered by the Band 6 Dietitian following our Nutrition Skills for Life Programme of courses, units and modules. All resources for these courses have been developed on an all Wales Public Health Dietetic basis and then bought in by Families First for this stream of the project.


Guidelines for the GSHSA have been produced between Families First and Flying Start Early Years teams, and also include the older age range. These are provided to childcare providers either electronically or printed if requested. In addition, guidance on how to put together a GSHSA portfolio has been designed by the team and is distributed if required.

Parents have been very positive about the award and are always keen to find out what it involves.

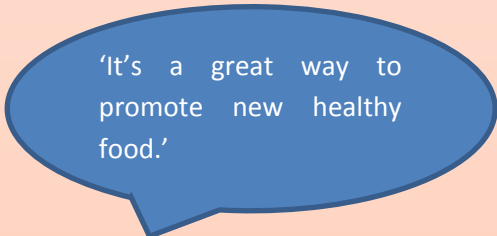
Responses from parent questionnaires were all positive. Comments include:



'I'm happy with all the snacks.'



'Great to encourage healthy eating.'



'It's a great way to promote new healthy food.'



## HEALTHY LIFESTYLES CASE STUDIES 2 AND 3

### Sexual Health Outreach Team [SHOT]

#### Group Session – St Mellon’s Youth Centre

The senior youth worker from St Mellon’s Youth Centre contacted the SHOT team asking for sexual health sessions to be delivered to their junior group on a Tuesday. Young people attending the youth club had asked the youth worker if they could have more information around sexual health as they did not feel they had received enough help with this in school. The group wanted to be able to ask a professional the questions around sexual health that they would not usually ask a teacher, and wanted it to be in a confidential space.

For this evening session, we focused on delivering to the girls first, and booked in a follow-up session for the boys. Fourteen girls, ranging in age from 13-15, attended the group. They had many questions they wanted to be answered. The SHOT team started the group session by having an informal chat, letting the girls get to know them and finding out what sexual health information they wanted. Later on in the session we then brought activities out for demonstrating some of the information and answers that they wanted.

The young people attending the session benefitted from the information given to them. It was extremely positive that they asked for the sexual health session to be delivered themselves. The young people were able to ask the questions that they had wanted information about in a safe and confidential environment.

More sessions were booked for the boys and further sessions with the girls around keeping safe/risky behaviours and keeping safe online.

#### One to One

A young 13 year-old, J, was referred to SHOT to work on a range of issues including risk of sexual exploitation, sexual risk taking (including online), and general sexual health. J had been expelled from school in year 7 because of aggressive behaviour, so was not in education.

A youth worker referred J because there was an on-going police case regarding a sexual assault that took place by a young male friend. Because she had been expelled, J had missed basic Sex and Relationship Education that would have been delivered in school. The young person’s knowledge about SRE, and how her body works, was very poor.

SHOT started sessions with J and one of her friends at the youth club she attends because this is where J felt most comfortable. Sessions are now delivered on a one to one basis.

The initial one-to-one session focussed on puberty and how the body works. It was then that the worker identified limited literacy skills. J enjoyed writing, as she does not get the chance to write very often. J and the worker came up with the idea of making her own booklet about the work completed with illustrations. They discussed and explored the changes that young people go through during puberty. Continuing support will cover relationships, consent, contraception, keeping safe (including online) and sexually transmitted infections.

The young person has benefitted from the sessions, as her knowledge was very limited when it came to sexual health and keeping herself safe.



## 7. CADARN – Emotional & Mental Health and Wellbeing

“Cadarn” is the emotional and mental health package for children, young people and families across Cardiff. The package supports children and young people to look after themselves but also helps others around them to develop positive approaches to children and young people’s mental health.

### 7.1 Delivery during 2017-18

The package provided a range of services for all age groups of children and young people:

- Ely and Caerau Children’s Centre supported families to emotionally support very little children
- Pyramid project provided clubs for 7 – 14 year olds to have a good time, learn how to worry less and be happier
- Bounce Back supported older young people reaching the end of their time in school



Their package also offered services to particularly vulnerable groups:

- Cardiff Against Bullying helped children who are being bullied but also worked with schools to prevent bullying
- Gofal i Chi provided special support for young carers
- There was support for Asylum Seekers and Refugees through the Free2Be project, some of whom have been through traumatic experiences
- The bereavement service helped families which have been devastated by the loss of a family member

This package works with some very vulnerable young people and families who are experiencing significant emotional and mental health issues. For this reason, it was particularly important to be able to complete interventions. For this reason, a number of services did stop taking further referrals during the final quarter and there was a significant impact on service delivery.

# CADARN Package (Emotional and mental health)

## Performance 2017-18



2017/18 figures

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## 7.2 Reviewing delivery of emotional and mental health services

Providing appropriate support for families experiencing emotional and mental health issues continues to be one of the top priorities. The Population Needs Assessment as well as consultation with young people have confirmed the importance of this. For instance, Mental Health was the second most important area identified by Cardiff young people in the Make Your Mark consultation to define the priorities for the UK Youth Parliament. (It received 1340 votes, while Curriculum for Life received the most votes at 1538.)

Throughout 2017-18, emotional and mental health also continued to be one of the top three presenting issues for families coming to Support4Families. However, the original Families First Programme did not offer counselling or other forms of support to adults in families who were experiencing low-level mental health issues but who did not meet the criteria for statutory mental health services. This was identified as a gap in provision.

The new Families First services will provide continuing support for young people in a number of different ways as well as addressing the gap in provision for parents and carers:

- The new Youth Support Service will be continuing to work with schools to ensure that they have their own strategies but also involve the right partners to help deliver. This will become part of the arrangements for Curriculum for Life.
- The new Families First Family Wellbeing Service will provide a therapeutic service that is complementary to other related services, such as school counselling service, the Emotional Wellbeing Service delivered by CGL and statutory CAMHS. It will provide a combination of one to one counselling for children, young people and adults, as well as whole family therapy.
- The Family Wellbeing Service will also continue to provide targeted support for families affected by bereavement, trauma and loss, and asylum seeker and refugee families.
- The new agreement with Cardiff and Vale University Health Board will provide advice for professionals to ensure that service users receive the right level of support. This element will also support joint working arrangements between the different elements of statutory and non-statutory provision as part of the 'front door' to mental health services.



**Work with CAB**

## CADARN CASE STUDY 1

### Barnardo's Child and Family Bereavement Service

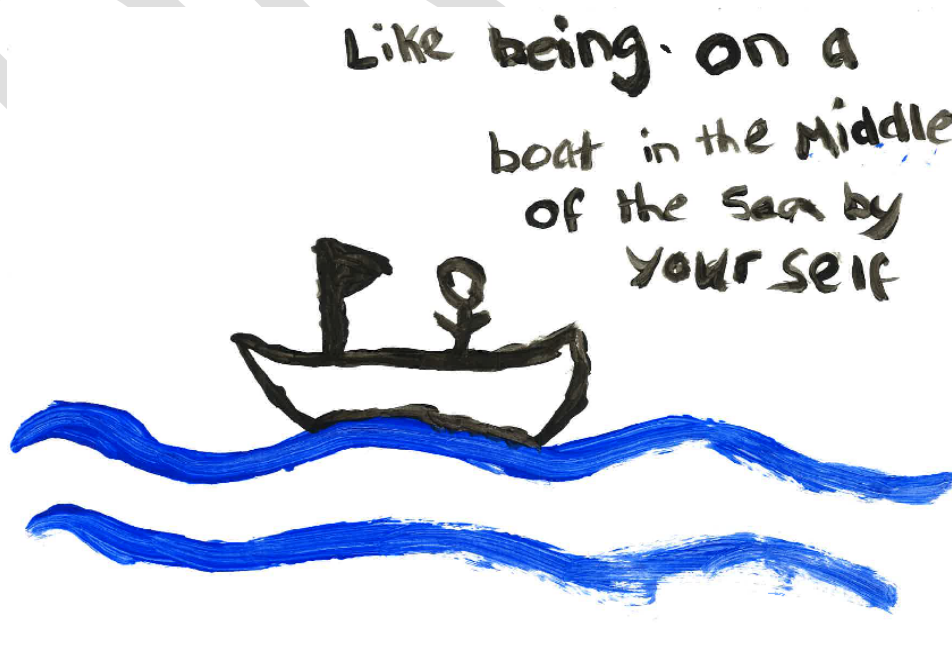
A mother and her two children were referred to the Bereavement Service due to the sudden death of a sibling. It was felt that the death was having a direct impact on the mother's capacity to parent. There had been repeated incidents of self-harm, one of which was an overdose that resulted in hospitalisation.

Following an assessment, therapeutic support for the mother was identified as a priority. An interpreter was also required as English was not the mother's first language. Her engagement with the service was supported by the referring service, who transported her to sessions.

In the initial assessment phase, a suicide risk assessment and safety plan was completed. A contract for the sessions that detailed the safety, confidentiality and nature of the work was also developed between the service user, interpreter and practitioner. Added to the contract was time before or after the sessions where the interpreter could meet with the lead practitioner for support, given the nature of the intervention.

The service user fed back that the sessions have been very supportive. She felt that they helped her to develop coping strategies and now feels stronger.

When the suicide risk assessment form was reviewed there were notable improvements: the seriousness of threat of suicide had reduced from level 3 (not able to give assurance to not act on suicidal thoughts) to a level 2 (suicidal thoughts but will not act on them) and no incidents of self-harm. Work has continued with this family.



*Barnardo's Bereavement Service*

## CADARN CASE STUDY 2

### Free2Be

The Free2Be project provided support for asylum seekers and refugees, working with families whose traumatic experiences were impacting on family life.

B is an 8-year-old refugee from Syria who recently settled in Cardiff with his family. B's school was concerned about his lack of confidence and the difficult feelings he appeared to be struggling with. Creative and practical activities enabled B to develop a sense of belonging in Cardiff and a positive identity for himself, to consider ways he could keep himself safe and to identify trusted adults he could talk to if he has any worries. Regular sessions took place in school using the same interpreter: this enabled a positive relationship and rapport with B.

B's Mum attended a parenting group, which supported her to develop a sense of familiarity and belonging in Wales as well as understand the UK education system. The school reported improvements in B's confidence, which was evident in the way he interacted and talked to staff by the end of the intervention.

Alison Prowle, from the University of Worcester, included Free2Be in research into the experience of asylum seekers. The project will be used as a case study in her forthcoming book, *Making a difference in the Children and Families Workforce*.

*"I was so impressed with Barnardo's Free2Be Service. The staff are so knowledgeable and committed to their role, and the sensitivity and attuned responsiveness they display towards the families is exemplary. The project clearly builds on family/individual strengths and empowers families to move forward, despite challenging circumstances.*

*"I was very privileged to spend time with the parents, who gave specific examples of the numerous ways in which the project has helped their family. I worked most closely with Sophie Reed [project worker] whose passion, extensive knowledge base and positive personal dispositions for working with families were truly inspiring!"*

*Alison Prowle, University of Worcester*





## 8. DISABILITY FOCUS

All the packages in Cardiff Families First programme have to ensure that their services are accessible for disabled family members – both children and adults. However, the Disability Focus package provides additional specialist help for families who have a disabled child. This can provide key working as part of the Team Around the Family approach for those families who need it (the Disability TAF). Action for Children as the Lead Provider works closely with the team of specialist providers in the package to provide a coordinated response.

### 8.1 Delivery during 2017-18

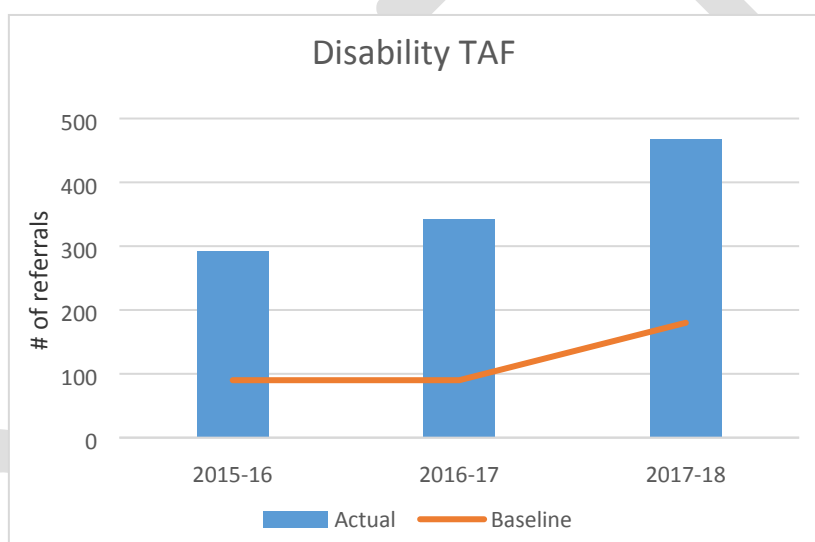
The package uses a family-led approach, working with them to assess their needs and develop a family plan. Key workers work with families to identify the services that might be able to help them and then to co-ordinate support providing a Disability Team Around the Family. This team uses the same Joint Assessment Family Framework as the generic TAF team to ensure consistency in work with families. Disability services recorded information and support for over 800 families during the year. Of these, the key working team worked with 208 families to complete a JAFF and provided Team Around the Family support.

#### Disability TAF Families (key working) – Main Sources of Referrals

Type of Organisation	Number of referrals
Third Sector	709
Self - referral	378
Other Primary Care Services	152
TAF / Freephone	95
Health Visitors	61
Schools and other Education Services	54
Other	37
Children's Social Services	22
GPs	13
Adult Social Services	8
Child and Adolescent Mental Health Services	4
Job Centre Plus	1
<b>Total</b>	<b>1,534</b>

The Disability Focus package continued to collaborate with the Disability Futures programme during 2017-18. One of the most important developments has been use of the Integrated Care Fund [ICF] to enhance the provision of the *'Better than a Booklet'* sessions delivered at St David's Hospital. These sessions ensure immediate access to information for families who have just seen a paediatrician with their child. The collaboration enabled the sessions to increase to a 5-day a week provision to target more families at first point of contact. This has proved a very effective way to ensure that families receive the information and support that they need as early as possible.

Better Than a Booklet and the Disability Team Around the Family team provide a front door to early help services for families with a disabled child. There has consistently been high demand for this service, as illustrated by the following graph showing referrals for the Disability TAF and key working service against baseline targets over the past three years. The increase in the baseline reflects additional funding awarded in recognition of the pressures on the service.



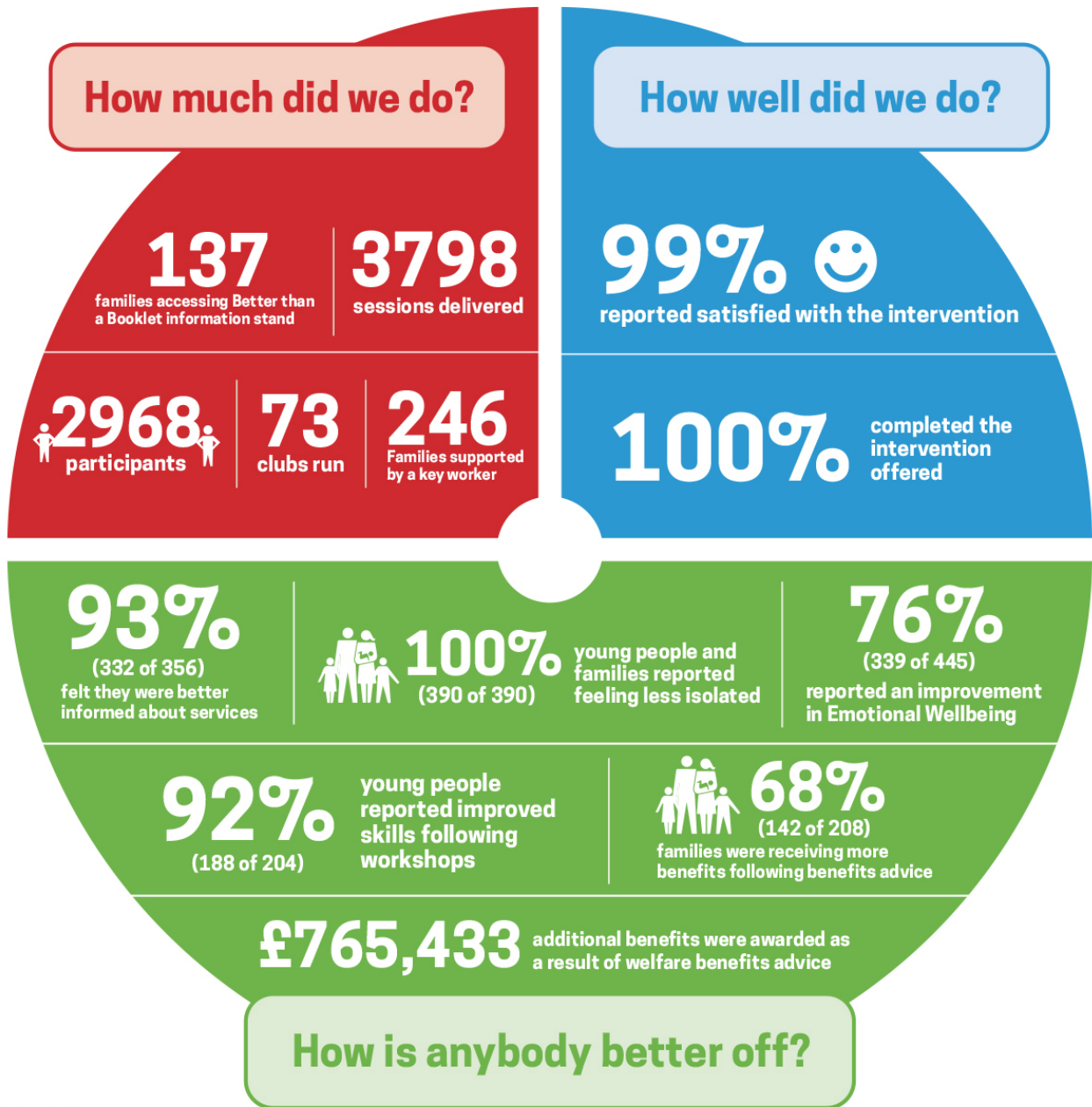
Key workers draw on any services that the family needs, but the package has also offered:

- Direct 1:1 support or group work for young people in relation to independent living skills, learning about self-care. This is delivered in a safe environment, tailored to each young person's needs.
- An integrated youth provision
- Support for parents through direct 1:1 support or group work to support them with any areas they are struggling with, including parenting skills, letting go, being informed and being involved.
- Specialist support for BME families coping with a disabled child/children
- A welfare and benefits advice service which has provided information, advice, support and advocacy to support families with a child with additional needs to maximise their income and sources of support



# Disability Focus

## Performance 2017-18



2017/18 figures

 **Support 4 Families Free Phone**  
 0808 800 0038

 **Website**  
[www.cardiff-fis.info/cardiff-families-first](http://www.cardiff-fis.info/cardiff-families-first)



## DISABILITY FOCUS CASE STUDY 1

### Disability Team Around the Family Team

The Disability TAF key worker initially completed a JAFF assessment with the family in order to assess their overall needs. The child, S, has bilateral profound hearing loss and had recently had a cochlear implant operation. Disability Team around the Family have been working with the Cochlear Implant team in St David's to ensure that the correct support was in place. This included ensuring that the local nursery that S was due to attend was up to date on training about the cochlear implant and best communication strategies. This ensured that all staff in the nursery were aware of and understanding of his needs.

DTAF also worked with a worker from the National Deaf Society on home visits to ensure that Mum and Dad were aware of what they could access in Cardiff for Deaf children and parents of Deaf children. They now attend creative hands play one Saturday a month where they meet other parents and children.

The worker also successfully applied for a grant from the Boparan Trust for more communication therapy. DTAF liaised closely with the specialist Deaf teacher to ascertain where S is in the communication programme and to ensure that the work fits in with and complements the work of the specialist deaf teachers. This means the YP is getting more hands-on therapy weekly.

DTAF worked holistically with the whole family to ensure that all their needs were met. This included support for S's brother, who also has hearing difficulties and presents with some behaviour concerns. In response to this, the DTAF worker referred the family to 1:1 support. Weekly sessions commenced with Mum and the children on behaviour. The sessions help them to think about ways to communicate how they feel.

The Welfare Benefits service has also been involved to ensure mum is getting carers' allowance and the correct DLA for both children.

The DTAF service referred mum to the Parent Nurture Programme, which had a profound positive effect on mum. This course enabled her to build confidence in parenting. Regular meetings were organised with Mum, Dad, the National Deaf Society worker and often the specialist teacher as well. These meetings ensured that there was an effective communication network at all times and any emerging needs were recognised and dealt with at an early stage.

## DISABILITY FOCUS CASE STUDY 2

### Independent Living Skills – Souperchefs one to one project

The young person, M, was identified by the school he attends (Woodlands High) and was chosen to participate in the Souperchefs project in order to boost his confidence and further develop his cooking skills. As he was older than 16, and close to leaving school age, it was felt that an opportunity like this would really benefit him in his future life.

The intervention was an opportunity for M to develop his cooking skills, as well as other kitchen skills e.g. health and hygiene, kitchen safety etc. Money management and social skills were also developed through opportunities provided during the course.

The Independent Living Skills project provided funds to buy an initial stock of ingredients e.g. flour, spices. The purchasing was managed by the volunteer. Each week, M would total up the day's takings, taking into account the weekly spend, and work out the profit for each week.

The Souperchefs project is a ten-week intervention that took place at Ely Family Centre. Each week M would work on different skills in the kitchen. For example, M made homemade white & brown bread and soup and served them to staff who had placed an order. M has speech and language difficulties, but he had gained enough confidence to announce that lunch was ready over the centre's Tannoy system and take payment for meals. Staff would then join M for lunch, which was not only useful for his social skills, but also a confidence boost when staff complimented his excellent cooking skills! After lunch had finished, he would collect up all of the dishes, wash, dry and put them back into their correct place and ensure the kitchen was cleaned efficiently and returned to its normal state.

Over the duration of the intervention he became more independent each week, as his confidence grew. He worked on his own initiative, and he enjoyed being hands-on in a kitchen environment.

*"A section of our school action plan is aimed at preparing for the future and furthering student's independent life skills. In spite of his severe learning difficulties, M has shown he is capable of getting a job as he has a part time job in a pub. [He] has further developed, away from school, his confidence, independence, social and practical skills."*

Feedback from staff member at Woodlands High School

## 8.2 Improving access to information about services

Information about a condition and the forms of support that are available, are crucial for families who have just received a diagnosis or are going through a diagnosis. Information also remains vitally important as children grow older and their needs change. Families First has been working with the Disability Futures programme to improve arrangements for families to receive the information and support they need.



One of the most important developments during 2016-17 was the launch of the Index. The launch took place in March 2017 so 2017-18 was the first full year for this new provision.

The Index details services available for disabled children and young people in Cardiff. The Cardiff Index is following a model that was already running in the Vale of Glamorgan.

The Index Newsletter ensures families of children and young people with disabilities or additional needs are kept up to date with the latest information concerning services available to them.

The Index also provides a much clearer picture of the families with children who are disabled or have additional needs for professionals. Statistical information from The Index provides practical data for the planning and co-ordinating of services across Cardiff.

The joint arrangement with the Vale of Glamorgan means that there is much more consistent provision of information for families across the region. During 2017-18, the Disability Index Officer post was established properly on a regional basis.

### Promotional Activity

- Four Index newsletters produced
- Index webpage on FIS website (including online registration form and index newsletters)
- Index advert on GP screens in Cardiff
- 'Max Cards', providing discounts to activities, given to all families on the register

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## KEY FINDINGS 2017-18

- There were 220 new registrations to The Index in Cardiff between 1 April 2017 and 31 March 2018 - this means that there was a total of 362 children on the register by the end of March 2018
- 5% of those on The Index have Speech and Language Difficulties
- 34% of children and young people on The Index in Cardiff have ASD and 49% have a Learning Disability
- 17% of referrals to The Index come from schools
- 12% of those registered on The Index have a Social Worker
- 55% of children on The Index in Cardiff have a Statement of Educational Need

The Index has helped to identify an increasing number of families who have said that they need support for their child's disability, but do not have a statutory care and support package. (28% of those registered in 2016-17 had a social worker, compared with 12% of the total in 2017-18.) This means that the Index is successful in establishing contact with those families and making them aware of alternative forms of support that they can access in their communities. This is an important element in the early help jigsaw.

### Future Development

- New contact has been established with the University Hospital Wales. We are waiting to hear from the head nurse to be given permission to have a presence in one of their outpatient waiting rooms.
- In consultation with Health Visitors, we will be amending The Index registration forms to only capture relevant information. This will make the form appear and be simpler to complete and could result in increased registrations.
- The team are going to link with Children's Community and School Nursing teams to promote the Index and ask for their support to get parents to register children on it.

### 8.3 Reviewing Disability Focus services and the Disability Futures Programme

Families First is committed to commissioning in line with the recommendations and findings of the Disability Futures Programme. The two teams did a great deal of work together in 2017-18 to develop plans for future delivery. This has also included the exploration of joint working with the Vale of Glamorgan to ensure more consistent services across the region.

The Disability Futures programme informed decisions about delivery in 2018-19. This included consultation with the operational group and with parents. There were a number of areas where new approaches were still being piloted. As a result, it was agreed to extend some of the current Disability Focus package for an additional 12 months to enable more time for commissioning plans to be developed. However, there were some changes in line with the agreed direction of travel:

- The core services for disabled young people and their families were maintained. These provide, the Disability TAF and key working service, specialist parenting, Independent Living Skills and Integrated Youth Provision.
- However, other elements of the original package are now being delivered in other ways:
  - The Additional Learning Needs and Educational Tribunal (Wales) Act ensures advocacy for any young people who need an Individual Development Plan. The Education Service are continuing to fund SNAP Cymru to provide this for those young people who need it. However, the new approach of Families First is to provide practitioners who will be able to support young people and their families to have their needs met without the need for a specialist advocacy service.
  - The Disability Index now provides information for families, so Families First is no longer funding the service previously provided by Cardiff and Vale Parents' Federation.
  - The Welfare Benefits service provided by Diverse Cymru has now been incorporated into the support provided by Cardiff Council's Hubs. Families First provides additional capacity for home visits and to support families through to Tribunal if needed.
- Feedback from parents emphasised clearly the importance of having appropriate out of school and holiday provision. Decommissioning some of the original elements (as outlined above) has enabled us to put funding into a joint pilot with the Disability Futures Programme to develop provision.

In 2018-19, Cardiff will be bringing forward plans for commissioning the following services:

- A Support4Families Disability Service, which will provide a specialist disability response within the front door arrangements. This will include the continuation of Better Than a Booklet as well as key working and parenting support.
- A combined Independent Living Skills and Integrated Youth provision, which is flexible to meet the needs of young people in transition to adult hood and complementary to other support that is available via other routes.
- A model for out of school and holiday provision.



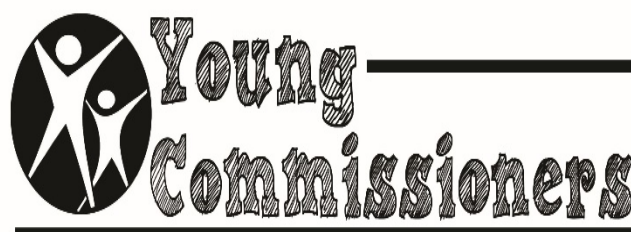
## 9. INVOLVING SERVICE USERS

### 9.1 Involving Young People

Young people were involved as Young Commissioners when the current programme was commissioned and have remained involved to make sure that providers involve children and young people in the planning and delivery of services.

The second year evaluation of Families First carried out on behalf of Welsh Government by Ipsos MORI noted the Young Commissioners work in Cardiff as an example of good practice.

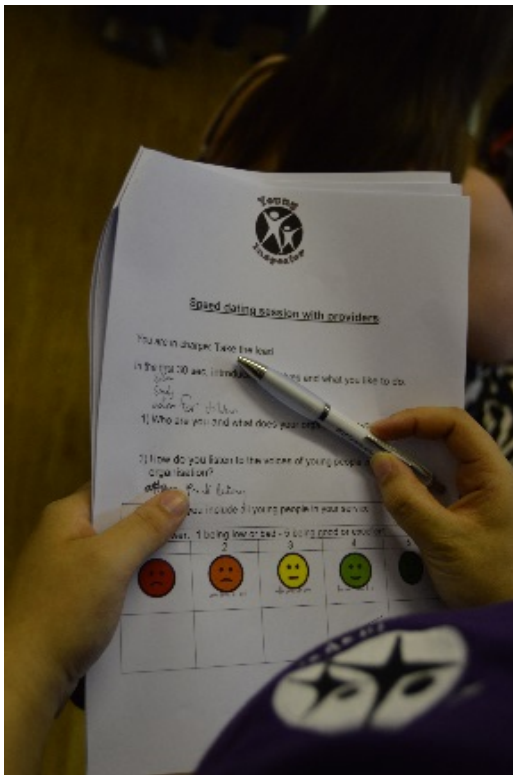
It was also recognised as good practice in preparation for Cardiff becoming a Child's Rights Partner with UNICEF as part of the programme to become a Child-Friendly City.



#### Young Inspectors Group

DRAFT

One way in which the young people have played a very important role is in making sure that Families First services demonstrate good practice in involving their service users. Throughout the life of the first programme, the Young Commissioners Officer has worked with young people and supported them to carry out inspections of services against the National Participation Standards.



All the young inspectors go through an in-depth training programme lasting over 10 weeks in total for each course. During the training, they learn about the National Participation Standards, Confidentiality, Safeguarding and Children's Rights. All the Families First packages have now passed, with the young people rating them as achieving against all of the seven participation standards.

The central Families First team have also used the findings from the Inspection Reports to help inform the approach taken in the new Programme. One of the consistent findings is that we need to improve the information about services so that young people are more aware of what is available for them.



## Young Commissioners

Involvement of young people in the commissioning of the first Families First programme won a National Innovation Award at the first Welsh Government Procurement and Innovation Awards. The central Families First team worked closely with the Young Commissioners Officer during 2017-18 to make sure that they followed this good practice in the new commissioning arrangements.

Twenty children and young people were recruited from two UNICEF rights-respecting schools in Cardiff, as well as various organisations across the city. The Young Commissioners Officer and Families First team organised an information session and invited young people to attend with their parents. During the session, they provided information about the programme, an opportunity to meet the staff. Young people were then able to sign up to be part of the Families First Young Commissioners project.



The Young Commissioners then started to find out all about Families First. They also undertook a training programme and residential to look at commissioning, Children's Rights (UNCRC) and participation, as well as finding out what the commissioners (Cardiff Council Children's Services) want in their new services. As part of their training residential, the group worked on team building and attempted to reach the summit of Pen-Y-Fan on a very cold December afternoon!

As part of their training young people were split into smaller groups to look at individual work streams and were supported by 'Lead Young Commissioners'. These were older young people who have a variety of experiences from sitting on Inspection and Interview panels to running their own project groups and work within Cardiff Youth Council.

The Lead Young Commissioners also worked hard in developing young person friendly versions of the specifications for the rest of the young people, as well as supporting them and providing peer mentoring through the process

The Young Commissioners assessed applications and received presentations from organisations for four externally commissioned services:

- Early Years' Family Support Service
- Family Wellbeing Service
- Health Relationships Service
- Youth Information Service

They also met with the officers responsible for developing the in-house Parenting and Youth Support Services, to look at the developing plans and provide feedback.



## CASE STUDY

### Yasmin - Lead Young Commissioner

Yasmin has been an influential figure within Cardiff Youth Council for well over 18 months. Originally studying at Willows High School and being Head Girl, Yasmin attended a Grand Council event and decided to join CYC.

Yasmin has gone on to attend Cardiff High Sixth form where she is currently sitting her A-levels before heading off to university. Yasmin has worked on a number of different projects within CYC, including the emotional and mental health project group, as well as being a member of the Children & Young People Advisory Board working alongside Cardiff Council and UNICEF on the child friendly cities initiative. Yasmin joined the Young Commissioners project as a Lead Young Commissioner due to vast experience and supported members of her package group through the process of commissioning.



"Through young commissioners I have gained many interpersonal skills and it has been so much fun working on the project. As a young person it is difficult to have your voice heard or think your opinion matters, but young commissioners opens a new door for young people to experience decision making and voicing opinions. My experience was so enlightening and informative, the residential really pushed my limits and helped me realise the value of team work and how to guide and understand young people. The official process of commissioning allowed me to understand how certain aspects matter and how the council runs most of these projects, an insight that would be impossible to gain without young commissioners. Overall not only did the program help us young people develop and expand our skill range but involving young people with making decisions that affect them promises better outcomes of services commissioned. The experience is nothing that I would ever experience again truly unique and crucial to create more informed adults." Yasmin 16, Cardiff

## 9.2 Involvement of Parents and Carers

It was also important to involve adult members of families in the decision-making. The Parent Network had provided support for parents and carers in the first commissioning process. However, the Network had ended. In its place, the Families First team worked with Spice to support parents and carers – Spice are experts in working with community members, as well as being responsible for the Time Credits scheme.

The adults who took part were as positive about their involvement as the young people were. The following case study tells one parent's story.

### CASE STUDY

I have recently earned Time Credits through Spice and taking part in the re-commissioning of Families First as a parent commissioner.

I have two boys and moved to the UK with them ten years ago, moving to Cardiff just over two years ago. I had to learn English from scratch when I arrived, whilst trying to build up a social and support network, which I didn't have when I arrived here. I became involved in services and had a key worker through Team around the Family who has supported my family through this period of change.

I was able to volunteer through TAF, getting involved in interviews and sitting on the panel. TAF also invited me to come and take part in a workshop hosted by Spice, who were looking into ways in which they can engage with parents from across the city. I was keen to engage with all these activities, as being alone in a city has really empowered me to take control and try to utilise my skills a lot more to help the community.



Cont'd...

I kept in touch with Spice and they invited me to take part in the re-commissioning of Families First. I loved this idea, as having been a service user before, I feel I can represent those who are going through the process of finding support, and help those who aren't yet through the other side like I am.

Taking part in the commissioning process was amazing. I didn't appreciate before how much time and effort the Council put in to finding the right organisations to deliver the services and how much focus was on the journey of a service user. I felt important, and I felt my experiences and opinions were valued and I was able to help make a real change. I also learned a lot, I saw how decisions are made but it also gave me more of an insight in to other cultures and helped me to develop my language skills.

Earning Time Credits has been an amazing experience. I hadn't heard of Spice or Time Credits before but it has helped me meet new people, make friends and enjoy my free time. Spice worked really hard to support us to go through the process and I feel like my time has been recognised. I got to go to the theatre for the first time since being in the UK with the new friends I made which isn't something I could ever do before. I work, volunteer, study and parent and have never had time to do something for me. We have met up since and done different activities which I am so happy about.

It is important for wellbeing to take part in the community. When you don't have friends or a support network it feels good to feel close and a part of this community. It is good for the kids to see me take part in these activities and not give up: it shows them how good life can be. Sometimes it is easy to give up, but I couldn't for them and I am excited to do more and live our lives to the full. Thank you.



## Families First evaluation meeting

### Commissioning Project Launch

The Project was officially launched by Cabinet Member for Children and Families Cllr Hinchey and Children Services Operational Manager Angela Bourge on the 11<sup>th</sup> of January 2018 in County Hall. The Young Commissioners were presented with their Certificates and T-shirts and Cllr Hinchey thanked the young people and parents for their role within this very important work.



*Councillor Hinchey with Young Commissioners and Parent Commissioners*

Cardiff Young Commissioners – Families First Project has been shortlisted a Youth Work Excellence Awards 2018! The awards evening will take place on 29 June 2018 at the Principality Stadium in Cardiff

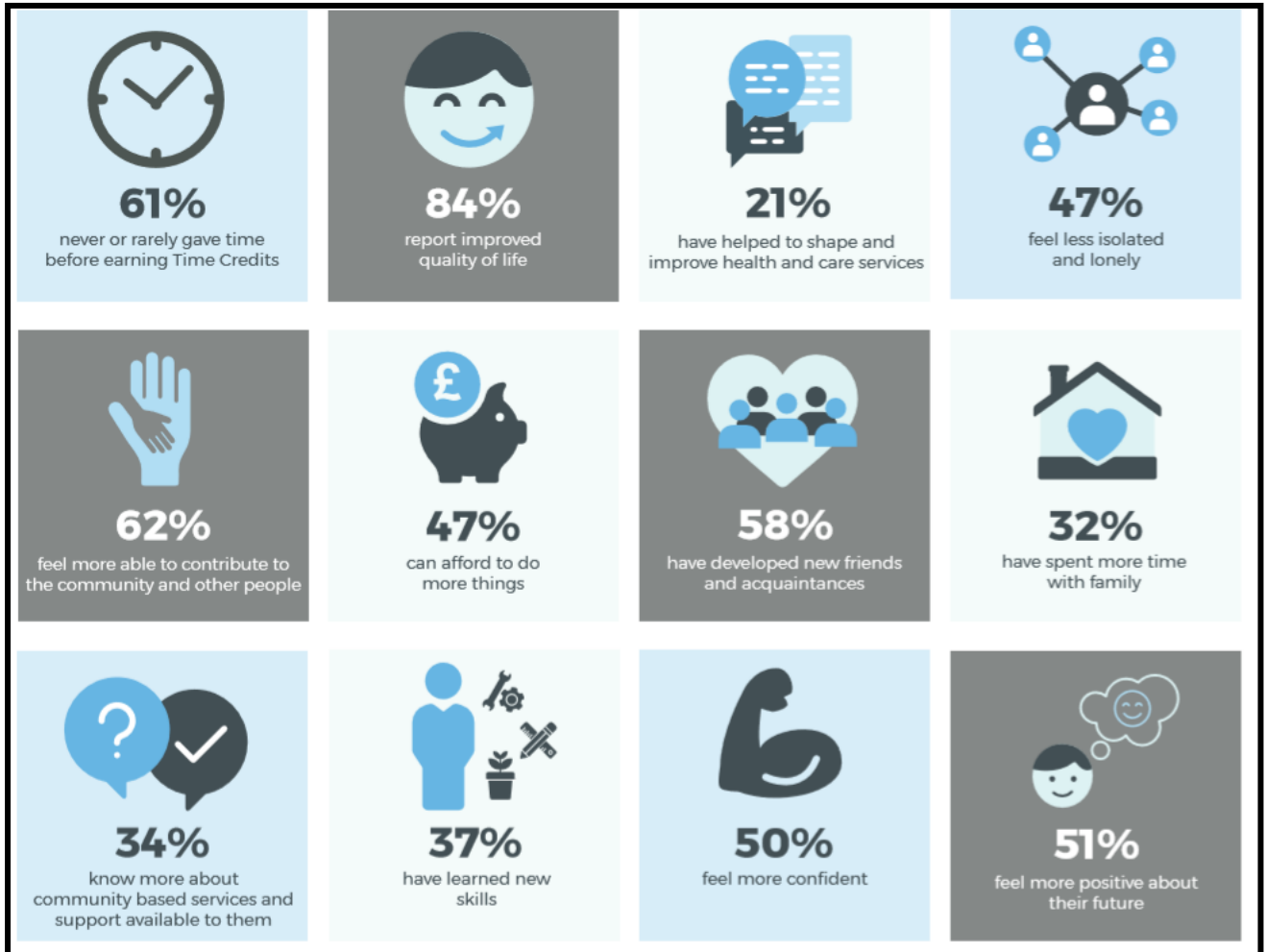
### 9.3 Time Credits

Support for involvements of parents is just one example of the way in which the Time Credits programme has helped to improve the engagement of families in Cardiff. 2016-17 was the first full year of Time Credits working with the Families First programme and enabled the scheme to be rolled out across the whole of Cardiff. The programme is delivered by SPICE through a joint arrangement with Housing and Communities.

Time Credits are a great tool for building communities. People can earn a Time Credit by donating an hour of their time in doing something positive for a participating group or organisation. In return, they then receive one Time Credit, which they can spend at a range of community, leisure and cultural

venues across Cardiff and beyond. The benefits are huge: more people volunteering more often, who then get to spend Time Credits on their families, increasing their own wellbeing.

The infographic below demonstrates the impact of Time Credits in Cardiff during 2017-18:





# 10. Providing Information

Availability of good information about services is crucial, both for practitioners working with families and for family members themselves. One of the consistent recommendations coming from the Young Inspectors is for providers to improve the availability of information about their Families First services. The same message has also come through very strongly from consultation with parents and carers during the year, as well as from stakeholder engagement sessions with professionals.

## 10.1 Family Information Service and Dewis Cymru

Provision of information about services and support is a crucial element in the provision of Information, Advice and Assistance under the Social Services and Wellbeing Act 2014.



**Dewis Cymru**  
Have choice and take control

**Dewis Cymru** has been adopted across Wales as the website to provide the 'information' element about health and social care services.

The **Family Information Service** [FIS] also has a statutory responsibility to provide information for families. Since the start of the programme, Cardiff FIS has made sure that they carry information about the Families First services on their website.

The FIS website now provides a 'skin', which means that a search on the FIS website accesses the same information that is stored on Dewis. This arrangement means that providers will not have a number of different websites to update or have to provide the same information numerous times. The focus will be on keeping Dewis up to date and this will then provide access to consistent and comprehensive information for other websites.



However, Dewis relies on providers to confirm every six months that their information is up to date. It soon became clear that many organisations were not doing this. Families First provided additional capacity to FIS during 2016-17 to make sure that relevant organisations had updated information about their services for families. This work continued into 2017-18.

Work also began to review the information available. To start with, Families First information was updated so that families and providers would be kept up to date about changes in the programme. Discussions also started about how FIS would become part of the Information, Advice and Assistance provided by Support4Families.



*Cardiff Family Information Service and Disability Index Team*

## 10.2 TheSprout

It is important that young people also have access to information about the services available for them, and in a format that they like.

For this reason, Families First also supports **TheSprout**, Cardiff's Youth Information Service, to provide information, advice and links to services for young people to make sure that they get the help they need.



Sprout logo providing link to website

ProMo-Cymru provide this website. They work with an editorial group of young volunteers to ensure relevant information is produced in a way that resonates with young people.

TheSprout encourages young people, and organisations that work with them, to upload articles, events, pictures, and videos.

While many first visit TheSprout for the opinion pieces, 'What's on' previews and personal stories written by 11-25s, they soon find the comprehensive info section, written in a language and tone that is relatable and jargon-free.

In addition to the website, TheSprout has a large social media presence across Facebook, Twitter and Instagram, ensuring young people can access information through their preferred platforms.





### Members of theSprout Editorial Board

TheSprout team also provides engaging and educational workshops in schools and community centres, to make young people aware of where to get information about the services they may need. In 2017-18, TheSprout created and delivered a new session, 'Create Your Own £1 Billion Company'. ProMo-Cymru created a bespoke closed social network for TheSprout, to allow young people the opportunity to create and brand their own business and learn the differences between social media for personal and professional use. This session, along with others such as 'Make Your own GIF', 'What Is Copyright' and 'Create Your Own Music Video' were delivered at schools and youth centres across the city.

### HEADLINE FACTS ABOUT THE SPROUT

- TheSprout had **27,092** visits during the year (not hits, but visits, in other words real people using the site and staying on for a significant time)
- TheSprout continued to gain followers on Facebook, Twitter and Instagram, and now has a combined reach of over 7,500 followers
- **359** articles were submitted, **80%** of these were from young people.
- **Over 100** young people were involved in the editorial board of TheSprout.
- **222** young people attended workshops run by TheSprout.
- **91%** of young people who attended these workshops, reported they feel more confident in using TheSprout to find youth information
- TheSprout met over 2,300 young people at events across the city.

Comments from young people in TheSprout survey:

*"My experience was so useful and interesting! TheSprout.co.uk is perfect for my curiosity and problems, I often read articles and information about interesting and important subjects!!"*

*"Awesome. Huge help over the past few years!"*

*"It has really allowed me to come out of my shell more and experience a new form of communication. I've always wanted to become a book editor when I'm older, because of my great love of books and reading. Nobody really believes that I can do it, they think I should just focus on something else. But writing articles here and asking advice, has made me believe in myself a bit more!"*

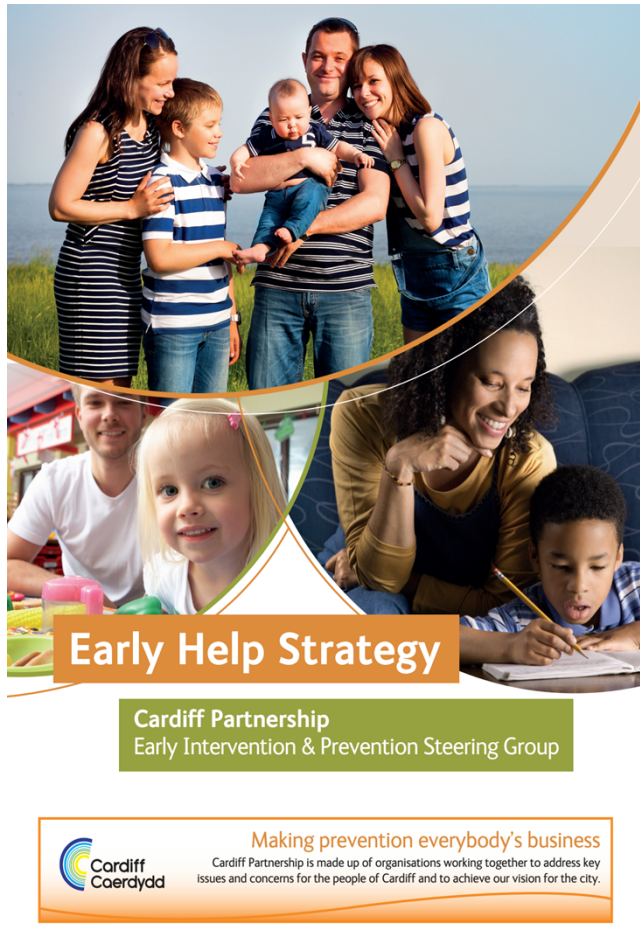
And from professionals...

*"Thank you so much for today Andrew, we had excellent feedback about your session from the pupils and staff! Well done! We will be in touch soon."*  
Deputy Head Teacher at Cardiff West Community High and Head of Curriculum

*"Just to say thank you so much for attending our Year 9 day on Friday, our students benefited so much from the sessions you delivered. I hope that we will be able to work with you again in the future."* Teacher at Fitzalan High School

# 11 DEVELOPING AND IMPROVING SERVICES

## 11.1 Early Help and the role of Families First in preventative services



The Early Help Strategy sets out Cardiff's approach for responding to families with appropriate and timely support when needs arise. It proposes a 'Think Family' approach with a shared, strengths-based ethos (underpinned by Restorative Approaches) for all services that work with families in Cardiff.

All the key statutory services, as well as the main third sector organisations working with families in Cardiff, have signed up to the Strategy.

One of the principal aims is to reduce the number of families needing higher tier interventions, particularly Children's Social Services.

Early intervention is also one of the main aims of the Families First programme and Families First has played an increasingly important role in the implementation of Cardiff's Early Help Strategy.

Since the launch of the Strategy in October 2015, the Improvement Project Manager (Prevention and Partnerships) has been working with partners to improve arrangements for early help. When responsibility for Families First moved into Children's Services, it provided a new opportunity to review how the programme could contribute to those early help arrangements.

During 2017-18, the focus was on providing a clearer access point to services, which resulted in the development of Support4Families (see section 3 above). This work is now being taken forward as one of the main projects of the Improving Outcomes for Children Board as part of the new Public Services Board delivery arrangements.

During 2018-19, we will also be reviewing and refreshing the Strategy to make sure that it takes account of the new context and identifies the priorities for further developments.

## 11.2 Supporting Parenting: Cardiff Parenting Framework

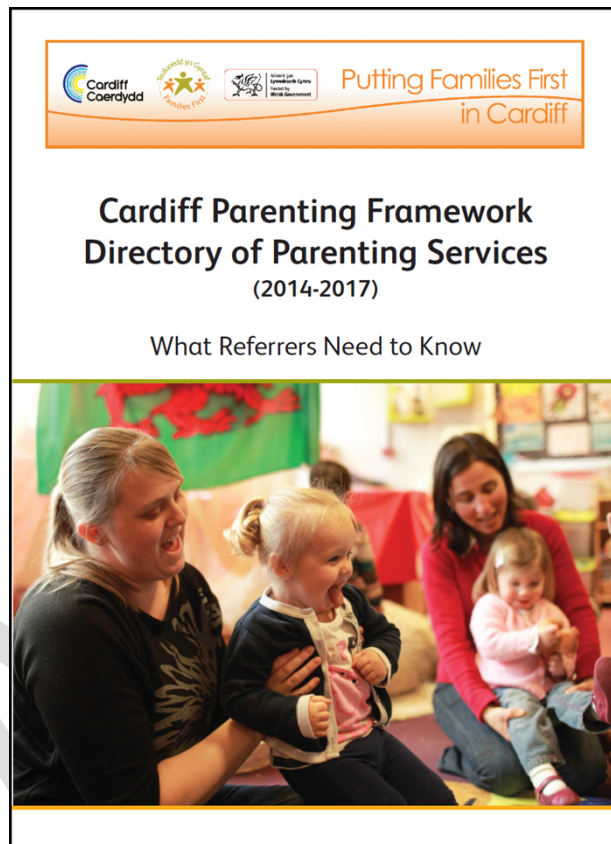
Parenting programmes are an essential element of support for parents and carers within the Families First programme. They can play a particularly important role in providing early help for families that are finding it difficult to cope. There has been a steady demand for parenting services since the programme started in Cardiff.

Parenting Programmes and Parenting Services serve a distinct function to support the acquisition of parenting techniques in parents/carers to strengthen family relationships and family resilience and to reduce family breakdown.

The Families First team worked with the Parenting Coordinator to develop plans for a new Families First Parenting Service. This responded to feedback from stakeholders who wanted a clearer service offer.

The new service will offer a range of different, evidence-based programmes, designed to meet the needs of parents in various circumstances, including pregnant women, young parents and parents of teenagers. It will also deliver in line with the Welsh Government's *Parenting in Wales: Strategies for Working with Fathers* to ensure effective engagement with fathers.

However, rather than having separate projects, delivered by a number of different providers, in different parts of Cardiff, it will be managed as one, integrated service. The new arrangement to deliver in-house also means that there can be a much more effective arrangement to manage delivery alongside Flying Start. This will ensure greater consistency for families across Cardiff.



Cardiff Families First adopts the definition of parenting from the Welsh Government Parenting Action Plan:

***'An activity undertaken by those who bring up children, this includes mothers and fathers, foster carers and adoptive parents, step-parents, and grandparents. In some cases, siblings also undertake a parenting role. All of these play a crucial role in giving the children in their care a flying start in life, providing the best basis for children's and young people's growth and development. Local authorities also act as corporate parents for children and young people in their care.'*** (PAP p.7)



### 11.3 Families First – Helping to Make Rights a Reality in Cardiff

Cardiff is committed to developing a child’s rights approach, working with Unicef to be globally recognised as a Child Friendly City. To achieve this ambition, the best interests of children and young people must be the primary concern in making decisions that may affect them (Article 3).

Families First is committed to making Cardiff a place where children and young people are able to enjoy and to know about their rights under the United Nations Convention on the Rights of the Child (UNCRC) (Article 4). Families First’s commitment to involving young people through the Young Commissioners and Young Inspectors was recognised as good practice in the original submission. Everyone who delivers Families First services will need to share the values and principles set out in the UN Convention to promote, protect and make children’s rights a reality in Cardiff.

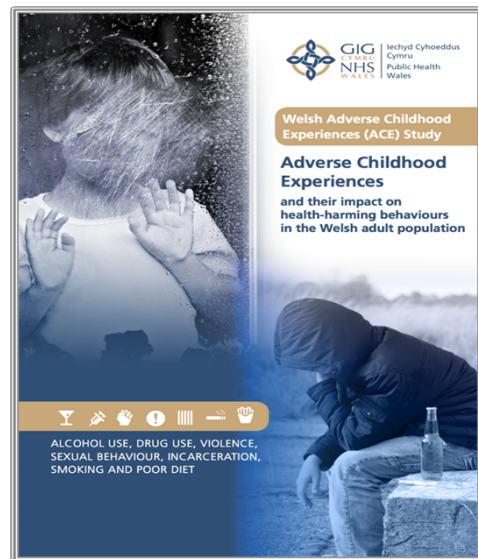
In particular and in line with the UN Convention, Families First will work with children and young people regardless of their race, religion, abilities, whatever they think or say and whatever type of family they come from (Article 2) and will ensure that they have a say in the decisions that affect them (Article 12).

Members of the Families First central team have contributed to the development of the Action Plan. The programme is able to contribute to the three badges that Cardiff has identified as priority areas: Education, Health and Family & Belonging.

### 11.4 Adverse Childhood Experiences<sup>1</sup>

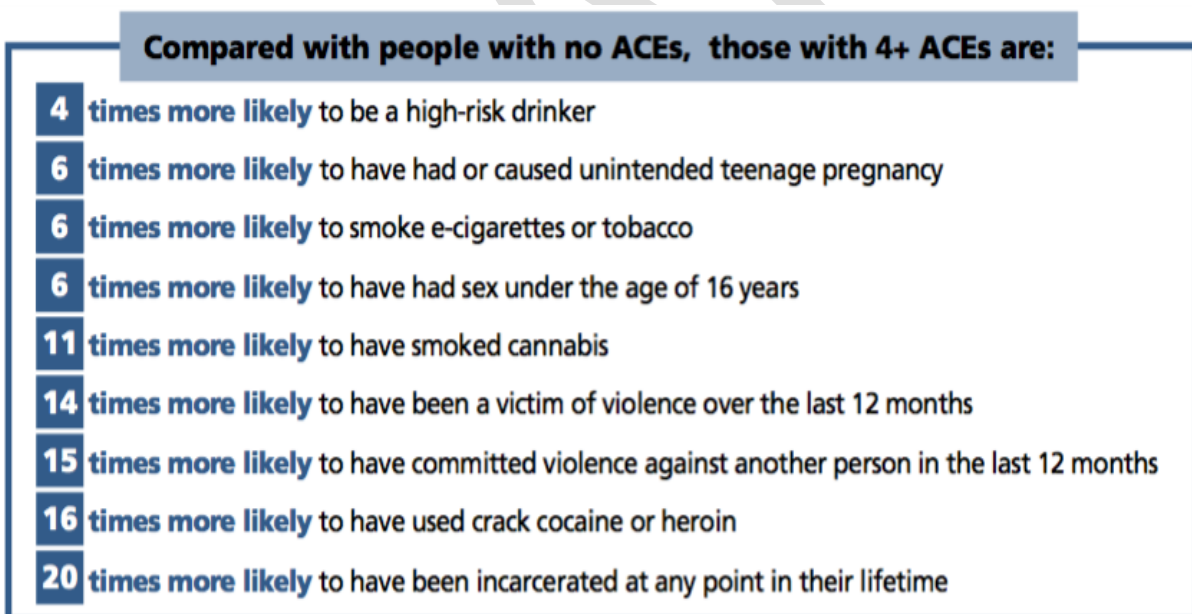
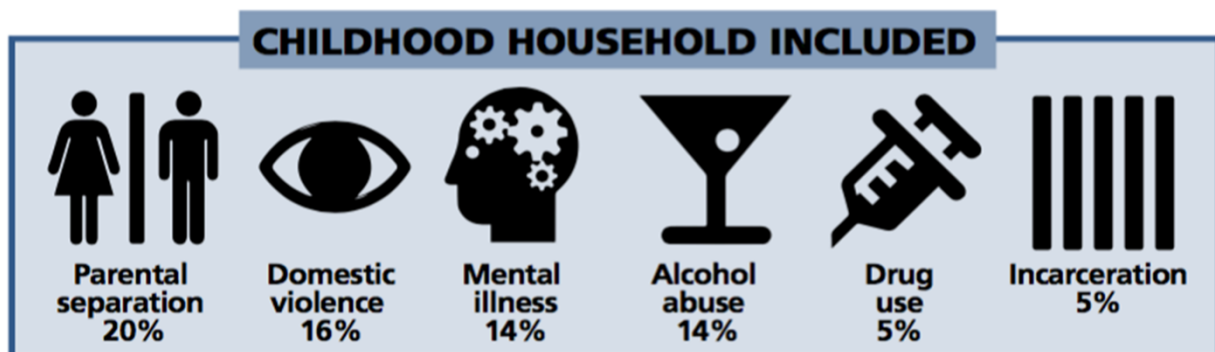
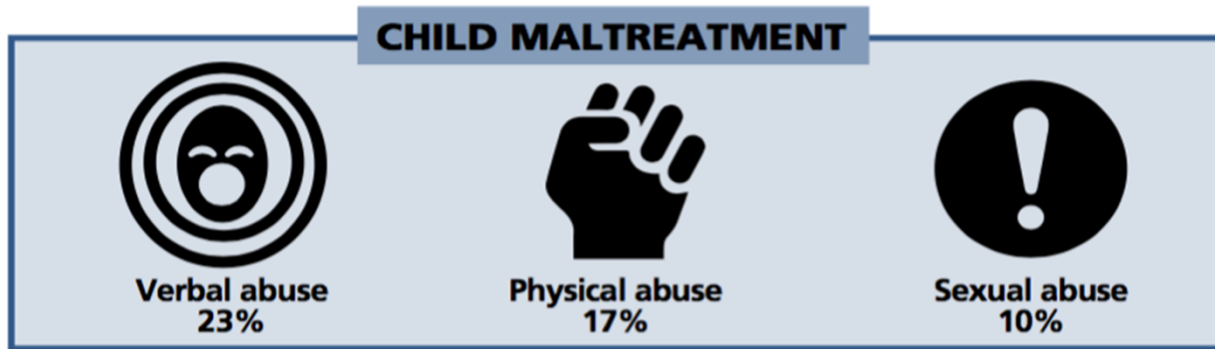
In 2015, Public Health Wales published the first of its reports considering the impact of Adverse Childhood Experiences [ACEs] on health-harming behaviours amongst the adult population. The new Guidance for Families First, which Welsh Government issued during 2016-17, requires local areas to consider ways in which services can both prevent ACEs and mitigate their impact.

The ACE reports outlined the results of a long-term piece of work across Wales. This found that the existence of four or more Adverse Childhood Experiences resulted in a much higher likelihood of an individual developing health harming behaviours later in life. This study clearly demonstrates the impact that ACEs have on the neurological development of young people and the effects of a high ‘allostatic load’, including on young people’s ability to concentrate and learn. It has also provided evidence to support the potential long-term contribution of early help services in mitigating and preventing Adverse Childhood Experiences.



<sup>1</sup> <http://www.wales.nhs.uk/sitesplus/888/page/88504>

## How many adults in Wales have been exposed to each ACE?



Families First has a vital role to play in helping to reduce the number of ACEs that children experience and to mitigate their impact. This represents a longer-term preventative role, which should help to reduce the number of negative outcomes outlined above.

During 2016-17, TGP Cymru started a piece of work to track ACEs experienced by the children of the families referred for Team Around the Family support. They noted any ACEs that came out as part of their assessment but did not ask any additional questions specifically related to ACEs.

ACE	2017/18	Welsh Average
Verbal abuse	4%	23%
Physical Abuse	3%	17%
Sexual Abuse	5%	10%
Parental Separation	66%	20%
Domestic Violence	30%	16%
Mental Illness	34%	14%
Alcohol abuse	7%	14%
Drug Abuse	7%	5%
Incarceration	9%	5%
No recorded experiences	19%	53%
1 experience	29%	20%
2-3 experiences	44%	13%
4+ experiences	8%	14%

This information is indicative and cannot be interpreted as statistically significant. However, it does give an insight into the kinds of issues that Families First families are experiencing and confirms that we are already reaching a disproportionate number of children whose experiences to date place them at risk of poor outcomes as adults. This suggests that the programme is working with the right families:

- The percentages of children experiencing different forms of abuse are lower than the Welsh average. However, any families where children are experiencing significant abuse will be more likely to fall within the remit of Children's Services.
- The percentages of children experiencing parental separation, mental illness and domestic abuse are significantly higher than the Welsh average and confirm these as key issues for Families First families.
- The percentages of children experiencing no ACEs is significantly lower than the Welsh average, but the percentages experiencing 1-3 ACEs is significantly higher, suggesting that we are successfully targeting the families where there is a risk of ACEs. However, the percentages of children experiencing four or more is also lower than the average. Again, these families will be more likely to fall within the remit of Children's Services.

## 11.5 Demonstrating Impact

Cardiff Families First team is working with the all-Wales Coordinators' Group to explore ways to measure the impact of Families First services. Analysis of the families' experience of ACEs, and how services can help to reduce and mitigate their impact, is part of this. However, the group has also commissioned a piece of work to develop a tool that will demonstrate 'cost avoidance' associated with the provision of preventative services. Evidence of cost avoidance is required in the new Families First guidance and is also likely to be included in the measurement of outcomes as part of Funding Flexibility.

## 11.6 Aligning programmes and Funding Flexibility

Families First is one of a number of family and anti-poverty programmes that have been put into place by the Welsh Government. These programmes have all had separate guidance and programme management arrangements, but all contribute to similar outcomes.

From the start, Cardiff made arrangements to align these programmes so that they were working together to deliver services that meet local needs. Recommissioning of Families First provided opportunities for joint commissioning some elements of the new programme with domestic violence and housing-related services.

Alignment took another important step forward in 2017-18, when Cardiff was chosen as a 'pathfinder' for 100% funding flexibility across 10 related grants:

- Supporting People
- Flying Start
- Families First
- Legacy Fund
- Promoting Positive Engagement for Young People
- Childcare and Play (formerly Out of School Childcare)
- Homelessness Prevention
- Rent Smart Wales Enforcement (formerly Independent Living)
- St David's Day Fund
- Communities for Work Plus (formerly the Employability Grant)

The pathfinders are testing out a single grant approach in 2018-19. For 2019-20, Welsh Government are considering creating a single Early Intervention, Prevention and Support Grant; no decision has yet been made on this. Welsh Government have commissioned an independent evaluation to inform a decision by Cabinet Secretaries and Ministers.



*Families Learning Together*



# 12. SUMMARY AND NEXT STEPS

## 12.1 Summary

Cardiff Families First programme continued to deliver important services during 2017-18 and services worked hard to maintain provision for families, despite a reduction in funding:

- The most important development during the year was the transition to new programme arrangements for Families First. The central team worked with legal and procurement services to manage this – the first time around, external consultants had been brought in.
- Involvement of young people in the commissioning process was nominated for a Youth Excellence Award. SPICE also worked with parents and carers, who spoke very positively about their involvement.
- Despite the uncertainty, the Families First providers still provided support and services for 17,916 children, young people and families.
- Stakeholder feedback had identified the need for a clearer point of access to information and advice – more effective arrangements for early help is also an important priority for the Early Help Strategy. In response, the central team worked with Tros Gynnal Plant and Children’s services to establish **Support4Families**. This now provides a clear access point for Information, Advice and Assistance on **0808 800 0038**.
- During the year, 467 families accessing Families First services benefited from support to complete an assessment (Family Plan) and 285 went on to receive additional support from a Team Around their Family.
- The working relationship with schools and Education was strengthened, and the new delivery arrangements were developed in consultation with them. Families First also invested in the electronic systems needed to provide a graduated response. This will extend use of the Vulnerability Assessment Profile [VAP].
- The Disability Index provided regular newsletters for families with a disabled child/ren. During the year, 220 new families registered. This means that 362 now receive better information about support and services, as well as providing improved intelligence about families and their needs for planners.
- Through the life of the programme, over 4,600 parents said they have benefited from the parenting support they received and over 10,500 participants in wellbeing services reported improved emotional and mental health.
- **A massive thank you to everyone who helped to deliver crucial support and services for families in Cardiff through the first Families First programme.**

## 12.2 Next Steps

2017-18 was a period of transition when there were significant changes introduced. There will be some additional developments in 2018-19, but the priority is to embed the new arrangements and to make sure that all our stakeholders are clear.

- All services in our new programme will be available for families across Cardiff based on need rather than post code – the only exceptions are some of the early years interventions, which are complementary to Flying Start services.
- During 2017-18, the Families First team worked with Children’s Services and Tros Gynnal Plant to develop and pilot **Support4Families**. This service will need to be recommissioned, with arrangements to ensure that it plays an effective role so that families know where to go for support, and receive the right services at the right time.
- The new arrangements will include **Early Help Family Support Workers** (mobilising from September) who will link in to local neighbourhoods and school clusters as part of the ‘front door’.
- We will also be working with Cardiff Council **Communications** Team, Cardiff Family Information Service and the Sprout to make sure that we have good communication so that families know how to access the support they need. This information is also important for professionals.
- The new **Families First Parenting Service** has been mobilising to provide a range of parenting interventions, from pregnancy through to families coping with teenagers. This is being managed alongside Flying Start to provide a more consistent approach to parenting across the city.
- We are continuing to work with the Education Service and with schools to develop a more consistent way to identify when families need additional help. This will also help us to provide support at an earlier stage to prevent situations from escalating to a safeguarding concern. This includes rolling out the **Vulnerability Assessment Profile** to primary schools.
- We will also be working with **Health** to develop clear pathways, especially for Health Visitors who identify that families need additional support and for young people and adults with mental health problems.
- **Young Commissioners** will be taking part in any new commissioning during the year. In the same way, SPICE will be supporting parents and carers to get involved to have a say. Young people will also start in their role as Young Inspectors again, working with the central team to evaluate delivery by the new services.
- Involving young people in this way reflects Families First’s commitment to young people knowing about and accessing their rights. The programme will contribute to the action plan that Cardiff is developing to be recognised as a **UNICEF Child Friendly City**. Families First services will be able to contribute to the three local badges chosen with young people: Healthy, Education and learning, and Family and Belonging.

# FAMILIES FIRST PROGRAMME MAP (mobilising from 1<sup>st</sup> April 2018)

## FAMILY GATEWAY

### Central Support4Families team: 0808 800 0038

- Telephone information and advice about early help services for families and practitioners
- Face to face meetings providing assistance for families who need additional help to complete a proportionate assessment that will identify their needs (Family Plan) – these meetings can take place in the family's home or in another venue in which the family feels comfortable
- Support to establish a Team Around the Family for families with more complex needs
- Children's Services advice and consultancy to ensure families receive the right level of support
- Primary mental health advice – provided by Cardiff & Vale UHB (September 18)
- Collaboration with Family Information Service

### Families First Early Help Family Support Workers

- Support for families with lower level needs including assessment for a Family Plan (Sept 18)

## STRATEGICALLY COMMISSIONED SERVICES

### Families First Youth Support Services

- 'Right2' support for young people in schools
- Youth Mentors and targeted youth support
- City Centre Youth Project and Family Mediation and housing advice (with Supporting People)
- Families First Healthy Relationships Service (inc. Sexual Health Outreach Team/C Card)
- theSprout Young People's Information Service

### Families First Support for Parenting

- Parenting Service providing evidence-based parenting programmes (from pregnancy and with children 0 – 18)
- Early Years Volunteer Family Support
- Cardiff & Vale UHB support for dietetics and speech & language
- Support for families affected by Domestic Abuse (with Supporting People)

### Families First Family Wellbeing Service

- Specialist support for families to deal with bereavement, trauma and loss, and inter-parental conflict
- Counselling support for parents, children and young people with low level mental health problems

### Families First Disability Focus (with Disability Futures Programme/ICF)

- Early Help Front Door: Better than a Booklet support in paediatric clinics
- Key working and Disability Team Around the Family support
- Specialist parenting support
- Independent Living Skills and Integrated Youth Provision
- Support for families to maximise income via Welfare Benefits
- Pilot to develop informal respite opportunities
- Disability Index and Newsletter

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