

Cambridgeshire Early Help Strategy 2016

Executive Summary

'Early Help' refers to preventative and early intervention support provided to families which is aimed at stopping problems deepening, avoiding crises and ultimately reducing the demand for specialist and statutory intervention services.

Our Vision for Early Help is for a fully collaborative model with families and communities at the centre. Early help cannot be provided or controlled by any one organisation or individual, it requires 'system leadership', with the efforts and contributions of all partners coming together to drive effective help. This strategy therefore aims to drive greater flexibility and allow professionals, volunteers, community organisations, families and individuals to collaborate.

This strategy sets out how the partners across Cambridgeshire will work together to provide and facilitate early help for families and work to build the capacity within families and within communities to be more self-sustaining. The strategy considers the key features of an effective early help system to be:

- Taking a Think Family approach
- Using and building the capacity within communities
- A focus on strengths and independence
- Aligned and seamless support from across public services

The strategy provides a framework for a partnership approach to early help and identifies some specific areas for focus as we continue to develop our arrangements.

What is the focus of the early help strategy?

Early help is about identifying families who are beginning to struggle, stopping problems deepening and preventing the need for costly specialist or crisis interventions with effective early action.

Public services deliver forms of 'early help' every day. It might be about preventing low level misdemeanours from developing into serious crime, tackling non-attendance at school before it becomes an entrenched pattern, helping families with chaotic lives to establish structured routines, addressing health issues in young children before they impair life chances or helping a family address their financial issues before they are evicted for non-payment of rent.

The early help approach is central across the range of needs. The principle applies equally to safeguarding work, family functioning, family health and mental health, work to support inclusion, educational achievement, special educational needs, further learning and employment prospects and issues such as poverty, offending and substance misuse.

This strategy sets out how public services for children, young people and their families will work together to provide and facilitate early help for families. The new model described is about what public bodies will do, what service we will provide and how we will work together. But the key theme within this strategy is that this professional early help offer can no longer be separate from all the support that children and families receive from within their community, from informal networks of support and from the voluntary sector. This strategy is about a partnership between the public sector and the public, working together.

Why do we need early help?

The evidence for early help is clear. There is a wealth of underpinning research highlighting that preventative and early intervention support achieves better outcomes for families and significant financial benefits for public services. Key national research examples include;

- Graham Allen, MP – *smart investment massive savings 2011*
- Frank Field, MP – *the foundation years preventing poor children becoming poor parents 2010*
- Professor Marmot – *fair society healthy lives 2010*
- C4EO – *grasping the nettle; early intervention for children, families and communities 2010*

Locally in Cambridgeshire our partnerships have already invested significantly in early help and prevention arrangements and we are building this strategy from a strongbase. However it is clear that we need to continue to focus on early help when we observe that;

- Demand across the range of specialist services including the Police, acute health services, mental health teams, Children's Social Care, the justice system, special schools and others remains high and in many cases is rising. The strides we have made in more effective early intervention have been matched by rising need or the uncovering of needs which were previously hidden from view.
- There is a financial imperative across the public and voluntary sector to reduce this demand, as all public and voluntary sector agencies are responding to very major budget reductions and pressures – the current model is unsustainable.

Each family we work with will have unique circumstances, needs, strengths and relationships and we want the help we offer to be flexible enough to respond to the individual and specific needs of each family. Looking across our communities and current services we have built a detailed understanding of the needs, risks and the key issues facing families in Cambridgeshire. Some of the key issues early help must focus on include;

- Cambridgeshire has some areas of concentrated need and hidden poverty in many otherwise affluent areas. Welfare benefit reforms and the economic climate are having a direct impact on the economic resilience of families and we are seeing increased use of food banks, short term loans and other indicators of poverty and hardship. We want to help families and prevent poverty having an adverse impact on outcomes for children
- There is a rapidly growing population, with over 23,900 more 0-19 year olds expected by 2031, with the greatest increases in the south of the County. We want to ensure new communities have early help in place and there are no gaps in support across the county

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- Nearly a fifth of the child population have special educational needs or a disability and this number is rising. We want to ensure children can access high quality education and plan together with families for children to move into an adulthood which is as independent as possible and in which they can thrive
- A large number of children and families we are working with do not have good mental health and there is evidence that levels of mental health need are rising. We want to ensure that people can get help quickly and that it is available within community settings.
- School attendance and attainment across vulnerable groups is not as strong in Cambridgeshire as we expect it to be. We want to accelerate the achievement of children in vulnerable groups, ensure they remain in education, and reach the high attainment expectations we have for them.
- In general the numbers of young people entering education employment and training are high, but not as high as they should be for the most vulnerable. We also know that nationally and locally the challenge for young people of moving into employment with strong career prospects is greater than ever.
- Children whose families need but don't find help in their early years often have more complex needs in adolescence, requiring costly specialist services. We want to link families together, helping them through the challenging early years and offering targeted support to families who are really struggling.
- There are many families facing up to multiple and sometimes longstanding problems. Families living in sometimes chaotic households which feature substance misuse, anti-social behaviour, worklessness, mental health concerns, problems with housing and money, domestic abuse and relationship breakdowns. These families need our focussed and intensive support, with public services and local communities collaborating together to help understand the issues, gain trust, problem solve and support and challenge families to help turn things round.

How can we make support sustainable: basing early help within communities

As public service budgets come under ever increasing pressure the way we deliver and facilitate early help will have to change.

The amount of money we will have available for professional early help services will be less and less and therefore cannot represent the sustainable solution. So this strategy is based on a model which links the support from professional early help services much more closely than before to the support provided within families and communities.

We already know that it is the support from friends, neighbours, other families in the community; from volunteers and from local groups that most frequently makes the difference in people's lives. Professionals are not necessarily the best people to deliver. Even where families have more complex or specialist needs, support can often be found from within voluntary and community organisations or from local people with experience of a similar situation and the desire to help.

We must make best use of the huge range of help that already exists within communities. Where there are gaps in support, all the evidence suggests that engaging local people and basing our support on their aspirations, needs and strengths will be better than designing it in isolation or focussing narrowly on whether service thresholds have been met.

As we develop our early help offer we will need to get better at helping families build their own resilience, better at working alongside the voluntary sector and better at linking people together so they can help one another without the support of public services.

If we can drive this greater flexibility and allow professionals, volunteers, community organisations, families and individuals to collaborate it will make the whole system most resilient and more sustainable.

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The diagram below illustrates this concept of public sector support building on a base of capacity within communities.



The base of the model is the support families have from within their communities. Public bodies need to facilitate and help establish this kind of support network and consider the contribution they can make alongside services.

Building on this foundation is the vital contribution of universal services such as schools, GPs, libraries, community health and community policing. These services are often the ones which first identify families which are struggling, who can use their regular contact to develop the best relationships with service users and can provide support in a familiar and trusted setting.

Where families have needs which cannot be fully met by community support or universal services then we need a range of targeted professional early help services. Wherever possible we want to drive this targeted support towards time-limited problem solving interventions rather than long-term involvement.

At the top of the model are the specialist and intensive services which are still vital. We want to reduce demand for these but where they are needed we want them to operate effectively alongside (rather than instead of) the help within communities, within universal services and from targeted early help.

Within this model

- We always look first to the early help that can be provided from within families and communities. Public services will facilitate this kind of community led support.
- There would be increasing support and involvement from public services for increasing levels of need and vulnerability – but this would always build on and be alongside help from within families and communities rather than replacing it.
- All of the help provided at different tiers would be organised collaboratively together around a single plan for each family – the process is not about referral

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between tiers, but about the collective contribution of all partners to meeting needs

- The focus is on building strengths and independence for families – with the goal being to reduce the long-term reliance on higher tier public services.
- More targeted, intensive or specialist help will aim to be time-limited wherever possible, with universal services, families and communities representing the sustainable and longer term sources of support.

This model does not represent an easy solution or even a well-ordered system of support. We will not be able to offer public services to every family we would like to help, nor will we be able to somehow create a huge wealth of new capacity within communities. The reality will be 'messier'; public services won't always be in a position to lead or commission, instead having to be far more creative in working with the capacity that already exists in communities and being as much prepared to follow and to be commissioned.

This model represents a challenge for public services but it is not a wholly new concept. There are already many examples of integrated, family and community-led early help work across Cambridgeshire - the task now is to build on this and tailor and apply the model to the needs of each community in Cambridgeshire.

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Outcomes and Success Measures: How will we know it is working?

The overarching objectives and outcome for early help are;

1. To address emerging needs in families before they reach crisis point
2. To build the confidence, skill and capacity of families so they can succeed independent of public services
3. To help build and make most use of the range of early help available in communities, supporting the voluntary and community sector to thrive and local people to come together
4. To reduce the demand on specialist public, voluntary and community sector services
5. To ensure children and young people are ready for and attend school, make expected progress and go on to have the skills, qualifications and opportunities to succeed in the employment market.

Public services will use a wide range of performance measures to assess effectiveness but across the partnership we will know we are succeeding if;

- The number of referrals to high cost and specialist services reduces
- More children, families and adults can have their needs met within universal services
- The voluntary sector thrives and volunteering expands
- New community groups appear and provide an ever increasing range of support
- Children, families and adults receive help that allows them to be as independent of services as possible
- The boundaries between community groups, voluntary and charitable sector work and statutory public services are removed
- Community buildings are well used
- Children, Families and Adults receive joined up support which includes the help from their community network as well as support from professionals
- People playing an active role in services, those who have benefitted from our services will offer their own help to others;

What are the key features of an effective system?

A Think Family Approach

A focus on families and the inter-related needs of children and adults is vital. The aspirations, strengths, desires, needs and problems of people within families are almost always inter-related and in this context our responses need to be 'whole family' rather than narrowly focussed on one family member or a particular presenting issue. By understanding issues in the family context we can have a greater impact and ensure support is coherent and joined up rather than disjointed and piecemeal. We must continue to understand the needs of individuals and in particular never lose sight of any risk of harm to children; but our involvement and planning will always be better if they work within the context of the family as a whole.

Different practitioners and organisations will bring particular skills and focus to their work with families and will need to collaborate together, especially for families with complex needs. But our strategy includes a clear expectation that everyone offering early help will 'think family' and work to consider the outcomes for the whole family in their approach. Seeing children and their parents and guardians together as a family unit to be supported collectively will drive far better outcomes than working separately.

In Practice

The Common Assessment Framework (CAF) will continue to be the primary method of coordinating the work of practitioners from different organisations around families.

The think family concept is being pioneered through our Together for Families Programme which is supporting professionals to work flexibly together. As the programme progresses we will apply the learning and work towards the point where the together for families methodology is the overarching service model and mind-set for all of early help, no longer limited to just the specific cohort of families in the programme.

The key components of the Think Family approach which we will embed across the partnership are:

- **One Lead Professional** – nominated to co-ordinate the work with the family.
- **One thorough family assessment** – which considers the needs of the whole family, how the issues inter-relate and the wider context and relationships which surround presenting issues
- **One overarching family support plan** – whilst we recognise that some agencies have to use a particular plan due to statutory requirements, there should still be one overarching support plan will be managed by the Lead Professional and reviewed regularly with the family and professionals involved through team around the family meetings.
- **A team around the family** – professionals will endeavour to ensure all relevant professionals are involved in their team around the family.

- **Limiting transfers families experience through our services** - one coordinated intervention is more effective than services taking it in turns and transfers between teams consume time, energy and so incur cost.
- **Commitment to putting the family's needs at the centre and overcoming professional difference** – for the professional to have a willingness to be open and reflective about their thinking and practices understand the perspective of other professionals to enable better multi-agency working.

An example of what this will mean for a family - The Think Family approach will mean that a family receiving support from public services will have one lead professional to facilitate coordinated support.

Using and Building the Capacity within Communities

If we can provide early help which keeps families together, builds their capacity to support each other into the future, and forges strong connections with sources of local support within the local community we will achieve better outcomes and reduce the reliance on costly public services. Our strategy will therefore include a strong focus on the ability to understand and build family relationships and relationships within the community.

We recognise the inherent strengths within communities, and we will provide the right environment for local community groups to thrive. These small, locally-driven groups are often better at meeting the needs of their own communities, and are able to lever other sources of support and funding to add value to their offer.

In Practice

Our model is for public services to think creatively about how they can meet the needs of children and families by working alongside local groups and voluntary sector organisations and helping local people to contribute. We should expect that help from family members, from peer mentors, from community and charitable groups and other sources would feature in the support plans for all families receiving support, alongside or instead of the actions public services will deliver. Practitioners will be knowledgeable about the capacity in local areas and skilled at identifying how this can be matched with families in different circumstances.

We will help people to help others within their own communities by:

- **Identifying, training and nurturing parent, young people or older people peer supporters** so that people with emerging or additional needs can access the early help and support they need from people that they trust, thus preventing escalation to higher cost services.
- **Considering the concept of reciprocity** across all of our provision, to encourage people to help other people so that people who do access services and overcome challenges can build upon this success by supporting others
- **Supporting and actively promoting new governance arrangements**, like cooperatives and mutuals, to give communities the opportunity to design and

run their own services so that they can better meet the needs of their own communities

- *Changing the role of our Early Help staff so that it includes **recruiting and deploying a team of peer supporters** or community volunteers – and providing the workforce development that will be needed to implement this*
- ***Developing a network of local neighbourhood hubs** which can host and coordinate community support*

An example of what this will mean for a family - A struggling new parent could be provided with a peer supporter to provide regular contact and supported introductions to local the local Children's Centre and other voluntary group, with support from a professional as required.

A Focus on Strengths and Independence

Early help should always be provided with consent, choice and control for families, based on their wishes. Moreover it should be focussed on building the strengths and capacity within families to meet their own needs rather than establishing a dependence on services at an early stage. Helping parents and families to gain skills, confidence and self-esteem can be a more effective approach than direct intervention from the public sector.

A strengths-based perspective recognises the resilience of individuals and focuses on the potentials, strengths, interests, abilities, knowledge and capacities of individuals, rather than their limits, needs, diagnoses or similar. The model puts the family-practitioner relationship at the centre and ensures that families determine the interventions they have from public services as well as the actions they will take themselves to grow and change. Our early help work will be honest, assertive and challenging where necessary, being clear with families about what needs to change and how they can get help.

In Practice

For the most part our early help offer is therefore time-limited and based on setting goals for families to reach and continue to thrive long-after public services have withdrawn. Even where we know that needs will be long-term, such as for families with children with special educational needs or disabilities, our intention is to plan realistically with families for the whole life-course making a plan which anticipates a time when direct support will be less, links with the local community will be greater, and they will need to be as independent of the public sector as possible.

Our Together for Families programme has also developed further the use of small flexible personal budgets for families. The budgets can be used for a variety of reasons, such as promoting engagement with the family, incentivising change, or responding to a gap in services. These budgets can provide for the small extra spending which makes the difference – from white goods, carpets and clothes to transport, repairs and counselling. There is very little limit on what the budget can be used for as long as it can be clearly linked to sustainable outcomes for families. The

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use of the budgets is agreed between the family and the lead professional with a clear focus on how it is contributing to achieving outcomes.

This principle is extended for children with disabilities where early help is offered primarily through self-directed support which puts children and families directly in control of the resources to meet their needs and allows them to design the support they want.

The personal budget and self-directed model is also being expanded in the wider SEND sector, alongside the development of the single Education, health and care (EHC) plan for children with special educational needs. The SEN Commissioning Strategy sets out how our assessment of need will always look first together to how needs can be met from within the family and community before providing additional support to meet unmet needs. We will extend these principles in developing our commissioning intentions using Whole Life Approach to Personalisation¹. This encourages professionals to work with families to explore and map all the resources that the child, young person, family and community have and can be used to self-direct their lives.

An example of what this will mean for a family –a budget holding lead professionals would enable a family to have greater control over available resources meeting the needs of that family in a more creative and effective way.

Aligned and Seamless Support from Across Public Services

It is vital that families experience a seamless service and don't need to repeat their stories unnecessarily or engage separately with different parts of our partnership. In addition to a shared assessment and a shared plan, our strategy is to align working practices and arrangements between organisations wherever possible. We will therefore explore and maximise opportunities to work across sectors to:

- Create joint or multi-disciplinary early help teams
- Co-locate teams or make flexible use of shared space
- Integrate working practices
- Integrate Commissioning Arrangements
- Establish clear information sharing agreements
- Identify joint training opportunities

Recognising that sometimes specialist services will need to work alongside early help or respond where early help isn't working and that where this happens early help needs to be able to escalate issues quickly, provide higher threshold services with as much information as possible and be ready to support again if appropriate.

¹ <http://www.in-control.org.uk/media/83027/whole%20life%20approach%20to%20personalisation.pdf>

Appendix 1 Cambridgeshire Early Help Strategy In Practice

The LSCB has overseen the development of a shared Model of Staged Intervention (MOSI) which is at the centre of the integrated early help offer. It provides a shared language for practitioners across organisations to discuss levels and types of need as so decide which service or support will be best able to help. This shared language and the associated guidance helps practitioners consider the full range of types of need, gives clarity around thresholds and when and how to involve other services in early help. The MOSI is attached as an appendix

The early help model is underpinned by a strategic commitment to information sharing across all the key public bodies in Cambridgeshire. A strategic Information Sharing Framework sets out common standards and also helps to ensure that information that is shared is managed consistently and securely.

<http://www.cambridgeshire.gov.uk/council/access-to-information/information-sharing-framework.htm>

We have established a network of Multi-agency Locality Allocation and Referral Meetings (LARMs) aimed at providing a co-ordinated and integrated response to identified needs. They have a focus on resource allocation, information sharing and problem solving for children/young people with more complicated or less clear needs.

The joint Multi-Agency Referral Unit (MARU) incorporates the local authority, police, health services, community groups and other partners and provides a multi-agency risk assessment and referral system to deal with the safeguarding of vulnerable children, adults and missing persons and instances of domestic abuse. The MARU accepts and directs contacts received from any source, including police, education, health, NSPCC and members of the public and uses both current and historical information from all partners to make threshold decisions and achieve a timely and coordinated response from the right services.

An example of what this will mean for a family - improved identification of a family that needs early help and facilitated support to prevent their problems getting worse.

What does the Early Help Strategy mean for a family?

The following example is used to demonstrate how the revised strategy for Early Help services may impact upon the lives of one fictional family.

The Wilson Family

Lily Wilson (28 years old) and Tom Wilson (35 years old) live in Cambridgeshire with their three children Joe (12 years old), Louise (8 years old), Evie (11 months old).

Tom suffers from depression and struggles to maintain regular employment. Lily works part time in a local bakery, having recently returned from maternity leave. They are having problems financially and have run up some debt. Lily and Tom are having problems with their relationship. Both parents are finding it hard to cope with the children. Lily is increasingly anxious and turning to alcohol as a means to help her cope. Joe is struggling to settle into secondary school and has become withdrawn; Lily fears he is being bullied. Louise's teacher has spoken to Lily and Tom about Louise's behaviour which has included some instances of her hitting other children. Lily is concerned that Evie is not yet crawling, given that Tom and Louise were crawling from eight months.

What would we do?

A Family Worker (or other lead professional) would be nominated to coordinate work with the Wilson family. A family assessment would be undertaken to establish the issues the family is experiencing and how their needs might be met. A support plan for the Wilson family would be managed by the Family Worker and regularly reviewed with the family.

We would draw upon the support of specialist services so for example:

- The Health Visitor based at the local Children's Centre discusses concerns and provides support and advice about Evie's development.
- Lily and Tom attend a parenting programme to help them develop effective discipline strategies and improve their relationship with their children
- It is identified that Joe is being bullied; this is addressed by the school.
- Tom is supported to build his skills with the aim of securing more permanent employment
- Tom is referred to his GP to review his depression.
- Lily is encouraged to join a local alcohol support group.

We would establish what wider networks of support the Wilson family has and how they might help to support the family. We would look at local and community activity that the family could engage with for support e.g. access to local groups who support depression for Tom. Through this work with the family we would look at increasing the parents' resilience, we would be assertive and challenge where necessary and be clear on what needs to change.

What we wouldn't do

We would no longer provide support without consideration of the whole family and wider issues involved. We would not maintain long term support; our focus would be to support the family to support themselves.

Strategic Arrangements

We have strong partnership and strategic arrangements in place for children and families in need of early help in a range of priority areas.

Priority Group of Children and Families	Early Help Arrangements
Families facing multiple problems	<p>Where families have needs which are complex, entrenched and in particular where they have already attempted to be addressed by a range of agencies the Together for Families Programme seeks to work differently to find solutions. We have used the additional payment by results funding from government to enhance the work focussed on identifying families with interrelated and complex needs and developing ways of working with between teams in the County Council, District Councils, the Police, Job Centre Plus, health services, voluntary and community groups and others which facilitate coordinated support. This has included the significant expansion of our Family Intervention Partnership Service, with 10 additional workers recruited and professionals from the Police and District Councils being attached to the Service. There has also been a systemic workforce development programme, Investment in development of family CAF, investment in specialist clinicians and the establishment of a Family Researcher' function in the Multi-Agency Safeguarding Hub.</p>
Domestic abuse	<p>The multi-agency Domestic Abuse Partnership works to reduce the harm, risks and costs associated with domestic abuse and to prevent these crimes occurring across Cambridgeshire. The County Council's primary dedicated contribution to addressing domestic abuse is the Independent Domestic Violence Advocate (IDVA) Service and this team works in close partnership with the Police and other safeguarding agencies to reduce and minimise the impact of domestic abuse in households.</p> <p>We have developed the Cambridgeshire Domestic Abuse Strategy through our Strategic Partnership. This is driving effective victim support, the development of successful direct interventions with families, robust safeguarding of children living in households with domestic abuse and raising awareness in schools and communities about domestic abuse and the damage it can do to lives.</p>

<p>Children could underachieve due to social - economic factors</p>	<p>School are leading the drive across Cambridgeshire to improve the attainment of children from deprived backgrounds or with other barriers to learning. Joint work between schools, the local authority, families and communities is delivered through the Accelerating Achievement Strategy which includes making maximum use of the additional pupil premium funding to secure extra help for children and their families.</p> <p>The Multi-agency Child Poverty Strategy 'Breaking the Cycle' is tackling issues linked to worklessness, helping families find support in their communities, has established a multi-agency response for families who risk losing their homes and is working with the voluntary sector to provide help and support to families in severe poverty. This multi-agency strategy coordinates the efforts to tackle poverty across all Cambridgeshire local authorities, voluntary sector organisation, welfare and work support teams, community organisations and the range of public sector partners.</p>
<p>Child and parental mental health issues</p>	<p>Our partnership approach to children's mental ill health and wellbeing has a particular focus on developing an enhanced early help offer to address emerging and less complex mental health concerns. A partnership emotional wellbeing and mental health strategy sets out how we can ensure that mental health is seen as the business of the whole of the public sector and all partners coordinate efforts alongside the specialist teams in the NHS Foundation Trust.</p>
<p>Special Educational Need and Disability</p>	<p>Our multi-agency Early Support Programme identifies families with children with complex and lifelong disabilities at an early age and ensures that health, local authority and other support services are coordinated around them. The programme helps them meet their child's needs in the early years and make a positive transition to school.</p> <p>Our SEN Local Offer sets out the huge range of help available to families with children with additional needs. It is designed to help them find both specialist and community-led support, to allow children to attend and succeed in school and help them plan for independence and success in adulthood. The SEND Commissioning</p>

	<p>Strategy sets out a template of how services for SEND will be commissioned in the future.</p> <p>The early help offer includes services for children with disabilities. Within the County Council the local offer is delivered by short breaks and self-directed support teams and includes a short break provision with Action for Children jointly commissioned by the County Council and health commissioners.</p>
Substance Misuse	<p>The Cambridgeshire Drug and Alcohol Action Team (DAAT) is a multi-agency partnership working to implement the National Drug Strategy. The DAAT agencies to provide specialist treatment and targeted prevention work for substance misusing clients who live in Cambridgeshire.</p> <p>The Cambridgeshire DAAT comprises senior staff from the Clinical Commissioning Groups; Police; Probation; District Councils; County Council, HM Prison Service and representatives of local services.</p> <p>The Work of the DAAT covers prevention and treatment of drug use as well as strong action to tackle drug supply, and related crime and anti-social behaviour.</p>

Areas for Development in Partnership

As we seek to develop and implement our strategy and early help model we have identified a number of specific key areas for further focus in our partnership work.

- **Troubled Families Phase 2:** We want to build on the success of our programme to date, spreading the learning from the focussed work with our families with the most complex needs to our wider work with all families. We will continue to embed the 'think family' principle across our services and will invest the phase 2 funding in direct support for families and helping teams collaborate even more closely and effectively to tackle entrenched needs.
- **Joint Commissioning:** Our Joint Commissioning Board and arrangements provide a platform to consider how we can align and redesign services for greater impact. We want to consider a more integrated delivery model for some services such as community health services working more closely alongside Locality Teams.
- **Community Resilience and Development:** We want to consider how community development and community based teams across organisations can collaborate much more closely to maximise their reach and impact. This includes teams in County Council adult, family and children's services, District Council community development functions, community health teams and the huge array of voluntary sector work. Similarly we will look to ensure that physical community resources are fully exploited, including how Children's Centres, Libraries, community centres, schools, GP surgeries, job centres and other buildings can become truly flexible community hubs. This work must also include furthering the relationship between statutory public services and the voluntary sector, maximising the potential of voluntary organisation to act as providers of key services, agreeing joint working practices and ensuring the knowledge of communities held by VCS organisations is best used.
- **Early Help Coordination:** We want to develop our ability to match families with early help across organisations and to help families to navigate the system to get the support they need. We want to make it easier for local people and practitioners across organisations to know where to go for support and which services are available where. This includes developing our awareness of early help available when referrals are made to more specialist services including Children's Social Care.
- **Information Sharing and Targeted Intervention:** We want to develop our strategic information and intelligence sharing to enable better targeting. Tools such as the 'Risk of Non-Participation Indicator (RONI)' have been successful in using a set of known indicators of need to target help to the right children and families. We want to explore how similar data sharing and tools across

organisation could help us identify families at an earlier stages and provide support before needs escalate, and in particular how this approach can support children at key transition points in their journey through education.

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