

Together for Families (TFF) Phase II Strategy

Background and context

Research shows that outcomes for families with multiple needs can be poor. These families encounter many different professionals over the course of their lives, who are often only able to work with them for a short period of time on a specific issue. As a result of this we see many families whose outcomes do not improve as we have not been able to grapple with the root causes of their problems.

We spend disproportionately more on families with multiple needs than the 'average' family. Some estimates indicated that Local Authorities spend around £7,795 on an average family in its area, compared to £76,190 for a family with multiple needs. With budgets tightening we cannot afford to waste money in this way.

Research from the implementation of the Common Assessment Framework in Cambridgeshire (C4EO) and the Family Intervention Partnership team (York Consulting Ltd, 2014) shows that outcomes can be dramatically improved and money can be saved by taking a coordinated Think Family approach.

The Together for Families Project was established in 2012 in response to the national Troubled Families initiative and built on the High Demand Families initiative locally in Cambridgeshire. The Together for Families Project is now responding to the new requirements of Phase II of the national Troubled Families initiative by interpreting these requirements into a vision which responds to the context locally.

Locally and nationally there is a great deal of interest in how the methodology within this project can be applied to wider cohorts, such as vulnerable individuals and other groups. This will be the subject of a wider piece of work and is not covered by this Strategy, however the principles within and the learning from this work will inform the wider work.

Phase II of the national Troubled Families initiative presents a new set of opportunities:

1. An expectation nationally that the Troubled Families initiative will be used to drive **service transformation** across the public sector towards working with whole families with co-ordinated, well led and sufficient interventions
2. The implementation of a **shared multi agency outcomes framework** which places emphasis on the performance of a multi agency team around a family to produce **sustained** and **significant** outcomes as opposed to the performance of a single agency in relation to a number of key indicators. The outcomes framework needs to be structured around the nationally defined 6 problem areas:
 - Parents and children involved in crime or anti-social behaviour
 - Children who have not been attending school regularly
 - Children who need help
 - Adults out of work or at risk of financial exclusion and young people at risk of worklessness
 - Families affected by domestic violence and abuse
 - Parents and children with a range of health problems

3. The implementation of an intelligence led approach to identifying families who should be in receipt of public services. This will require greater **sharing of cohort level data to identify families** with multiple problems requiring intervention, the ability to match and manage this information, and **monitor progress** and **costs saved**.

Vision: Together for Families

The overall vision for the Together for Families project is:

By 2020, all agencies working with children, young people, adults and families in Cambridgeshire will be working in a think family approach. Think Family means improving outcomes for children, young people and families with multiple needs by considering and understanding the needs of all family members and co-ordinating the support they receive from children's, young people's, adult's and family services in a single family plan co-ordinated by a Lead Professional.

Key components of a Think Family approach 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 familysupport 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 transfersfamilies 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 practicesunderstand the perspective of other professionals to enable better multi agency working.
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Case study illustrating the Think Family Approach

The Hardman family had been referred to social care several times as a result of neighbours hearing fighting and shouting in the home and being aware children were present, and the housing provider being concerned due to the unhygienic and unsafe state of the property and significant rent arrears. Social care had offered support to the family as children in need, but the parents had refused support. There are 3 children in the family, aged 12, 9 and 3.

The Housing Officer, who still had concerns, contacted a Family Researcher within the Advice and Coordination Team for further advice and support. Due to the information sharing agreements with Partner agencies, the Family Researcher was able to identify that due to a recent violent offence against an acquaintance at the local pub, the step father was on license with BENCH Community

Rehabilitation Company (CRC) and that the mother occasionally visited the local Children's Centre when in crisis to access the local foodbank. They also identified that the secondary school was experiencing difficulties with the behaviour of the 12 year old and had recently excluded him. The primary school had no particular welfare concerns about the child but said that the family rarely came to parents' evenings and the 9 year old was below expected levels of attainment. The Children's Centre Family Worker had started to build a relationship with the mother and had previously asked whether she required any longer term support but the mother always said she was fine and the Family Worker had no suspicion / cause of concern for the family.

In discussion with the Advice and Coordination Team, the Family Worker agreed to act as **Lead Professional** and was able to persuade the mother to engage in a whole **family assessment** to understand the whole picture and the causes for the problems. The Step-father at first was reluctant to work with the family worker as part of the assessment, but the CRC Offender Manager was able to reinforce the importance of this and agreed that his engagement with the assessment and subsequent plan would count towards the hours of contact he needed to have with CRC. Having completed the assessment, the Family Worker called a **Team Around the Family meeting** with the parents, Housing Officer, Offender Manager, and the children's schools. The 12 year old also attended for part of the meeting. Between them they developed a **Family Support Plan** based on the outcomes agreed the family were working to and the actions required to reach them. The plan involved support for dealing with significant debts through a voluntary agency, strategies between home and school with behaviour management; improving the home conditions and mediation work between the mother and step-father.

There were set backs in the plan when the family stopped paying back their rent arrears and there was a further referral to social care following a physical fight between the mother and step-father with the children present. The social worker who received the case in the Integrated Access Team (IAT) spoke to the Family Worker as they could see from the system on which they recorded that the family worker was the identified Lead Professional. They agreed that rather than conducting a social care assessment, the IAT social worker would visit with the Family Worker to reinforce the importance of engaging with the plan in place to **avoid a transfer of the case** to other services. At this time, the Housing Officer was also frustrated as progress was slow and usually with the level of rent arrears, court action would have been progressing (which could ultimately lead to eviction). It was later identified through the Team Around the Family that the children had never been to the dentist. The Family Support Plan was amended to reflect support being needed to improve the identified health issue.

6 months later, the family have made progress. They have alternative methods for dealing with conflict, violence has stopped, the 12 year old's behaviour at school has improved, the rent arrears are gradually being paid off and the condition of the property although not perfect is much improved. Importantly, the family have a good relationship with the professionals and are responsive to challenge and making changes in their lives.

Key Objectives for the Together for Families Programme

1. To develop an infrastructure to enable co-ordinated support to be provided to a cohort of families meeting the national criteria who are a priority for Cambridgeshire agencies
2. To ensure each TFF family receives co-ordinated support which leads to a sustained improvement in their lives

3. Demonstrate how change has been sustained for these families and how money has been saved through the TFF approach
4. To support all agencies who work with children, young people, adults and families to develop Think Family working in Cambridgeshire and use the evidence of effectiveness of this approach to provide the business case for continued and deep rooted delivery of services in line with the Think Family approach.

Objectives 1 and 2 – Infrastructure for the Think Family approach and ensuring a co-ordinated response

The Together for Families Project in Cambridgeshire will create a more co-ordinated approach to working with families using the Think Family approach outlined above. A diagram representing this process is attached at Appendix 1. This process builds on the Common Assessment Framework (CAF) strategy developed in Cambridgeshire from 2006. The Together for Families project will support the embedding of a number of key infrastructure developments to ensure the Think Family process is embedded and facilitated across partner agencies:

1. The CAF will become a **Family CAF** assessment to enable full assessment of the families' needs. The new assessment process will recognise that not all professionals are able to conduct a full family assessment but that the majority should be able to initiate the process. The new assessment process will include the ability to identify the key problem areas under the new TFF criteria that families are experiencing. It will also include the new privacy and consent statements required for families to be included in the cohort. The social care **Single Assessment** guidance will also be amended to include the new privacy and consent statements.
2. There will be a **specific, managed cohort of families** who meet at least 2 of the 6 national criteria, present a relatively high cost to public services *and* would benefit from better co-ordination of activity between agencies. The existence of a cohort enables a specific focus on this group of families towards the adoption of a Think Family approach and is therefore an essential ingredient in service transformation. The national target for identification is 2820 families over 5 years however the cohort should not be limited to this figure.
3. We will place **markers** of which families are on the cohort on partner agency case management systems to ensure professionals at the front line are aware of which families have a Lead Professional and require a co-ordinated Support Plan. Whilst professionals often attempt to find out who else is involved in a family, this often fails due to families not informing them, lack of time or limited knowledge of services in the local area. This will act in a similar way to the original intentions of ContactPoint.
4. We will create an **Advice and Co-ordination Team**, a multi-agency resource, who will facilitate Think Family working by:
 - a. Providing a contact service giving **advice and information** for young people, parents and professionals about local services, guidance about accessing them, and signpost to self-help resources. It is important that there is particular expertise in relation to mental health given the rise of referrals and need around mental health. The central function of this service is around informed sign posting and connecting people to the right help.
 - b. Providing a **co-ordination service** to support Think Family working – specifically intelligence gathering and sharing between agencies, identifying a Lead Professional, facilitating referrals and monitoring Team Around the Family activity (including assessment completion, TAF meetings, LP changes and closure).
5. The Advice and Co-ordination Team (ACT) will work with the Together for Families Data Team to use **multi-agency intelligence** (data matching) and **multi-agency research** in relation to the families' current circumstances to identify families who may need a Think

Family approach but aren't currently receiving one. The ACT will share this information appropriately with professionals to enable an intelligence led response.

Objective 3 - Evidencing sustained change for families and cost savings for agencies

As a partnership we need to evidence that this approach is effective to provide an ongoing business case for continuing with this Think Family process. Phase II of the national troubled families initiative helps provide the tools for this as it requires each upper tier local authority area to create a **shared outcomes framework** to evidence sustained and significant improvement with families. It is also a requirement to provide 13 measures of **Family Progress Data** which combined with data which will be sought and matched at national level for families (**National Impact Study**) will provide **Cost Savings** information for all families in the cohort. It is important that as far as possible these requirements are built into the Think Family process to avoid over-collection and duplication of effort. This information has the potential to provide an incredibly rich source of information about the impact of our services on families in Cambridgeshire.

We will build the requirements for the Outcomes Framework into the Family CAF and Support Plan templates to ensure the process for **evidencing sustained and significant** improvement is integrated into the Think Family process.

We will work with partners to identify the best method for collection of the 13 measures of family progress data (see Appendix 2). This is likely to need to be done via the Lead Professional. Appendix 3 shows how in the Think Family case study the evidence of effectiveness, and also sustained and significant progress could be collected.

Objective 4 - Enabling Service Transformation

This is an ambitious agenda and as such requires proper investment in change and support for change.

1. **All partner agencies** will consider establishing a **Think Family Project Approach** to assess how they can implement or work with the Think Family process and the key infrastructure changes within their agency. This will be in line with a shared specification (see Appendix 4) including a number of key areas: leadership and management, Think Family process, workforce development, data sharing and cohort management and quality assurance and evaluation. Support will be available from the central project team. The Together for Families Steering Group may also make recommendations that funding from the TFF budget should be used to create champion roles to support change management.
2. We will continue to build a network of **Think Family supervision** groups via a team of clinical supervisors to support professionals with managing difficult or stuck cases and also to support ongoing skills development in relation to working with whole families.
3. We will continue to provide **Think Family training** for professionals - with some training targeted at those services and professionals who are likely to be Lead Professional and some targeted at those who are not.
4. We will continue to provide access to a **personalisation budget** to enable Teams Around Families to be creative and respond to gaps within their Support Plans.
5. We will create two **Think Family Developer** posts in children's social care to help understand how the Lead Professional role relates to the role of children's social care units.

National investment – local financial plan

Phase II of the Troubled Families national programme will require Cambridgeshire to work with 2820 families.

The Troubled Families Unit will pay £1,000 attachment fees for starting work with families, and £800 for positive outcomes achieved, Payment By Results (PBR). They will also pay £200,000 per year service transformation grant in recognition of the high level of expectation around service transformation, data sharing, matching and evaluation. Whilst the programme has cross party commitment, it is still possible there may be some change in the programme including funding if there is a change in government.

Potential 5 year income

- Attachment fees over 5 years are therefore £2,820,000
- PBR is therefore £2,256,000
- Service transformation grant of £1,000,000
- Additional Early Starter grant £25,000
- Underspend from Phase I - tbc £1,130,000
- Total potential over 5 years £7,231,000
- Potential average per year for 5 years - £1,446,200

Year 1 confirmed income

- Service transformation - £200,000
- Early Starter grant - £25,000
- Attachment fees – 479,000 (target of 479 families)
- Underspend from Phase I tbc£1,130,000 and will be carried over to add to Phase II funds
- Total - £1,834,000

Payment by Results claims

We will be in a position to begin claiming for sustained and significant progress with families from May 2015. There is no intention to attempt to make claims this soon as we will not have had sufficient time to evidence sustained and significant progress. The TFF team are aiming to begin claiming early 2016. There will be 2 opportunities per year to submit claims.

Whilst the ability to attract the full PBR is dependent upon evidencing sustained and significant progress with 2820 families, therefore there is a risk inherent within the project that the full PBR would not be achieved if families do not make sufficient progress.

Plans for use of investment Year 1 (2015/16)

Spend detail	Cost 15/16	Reason for investment	How will we know if this has been effective?
Service Transformation	£675,977	<p>Overall project leadership, co-ordination, management.</p> <p>Ensuring meet government requirements</p> <p>Ensuring ability to make full PBR claim</p> <p>Provision of central co-ordination of work with families to enable Think Family practice. Providing knowledge and capacity to support services embed Think Family.</p> <p>To provide training to Lead Professionals and support to embed Think Family Practice</p> <p>To provide supervision to Lead Professionals and support to embed Think Family Practice</p>	<p>Progress against Project Plan</p> <p>Achieving full PBR claims</p> <p>Evaluation framework</p>
Contribution to Family Intervention Partnership	£500,000	<p>Continued investment in direct work with most complex families.</p> <p>Independent evaluation shows FIP saves £3.40 for every £1 spent.</p> <p>As agreed by the TFF Steering Group</p>	<p>Performance management framework in operation</p>
Personalisation budget	£75,000	<p>Initial Evaluation shows use of a small budget improves outcomes for families</p>	<p>Audit framework to be developed along with Family CAF audit</p>
Total	£1,250,947		

Beyond 2015/16

It is important for Partners to consider beyond Year 1 how best the TF funds can be used to support the overall vision of the project.

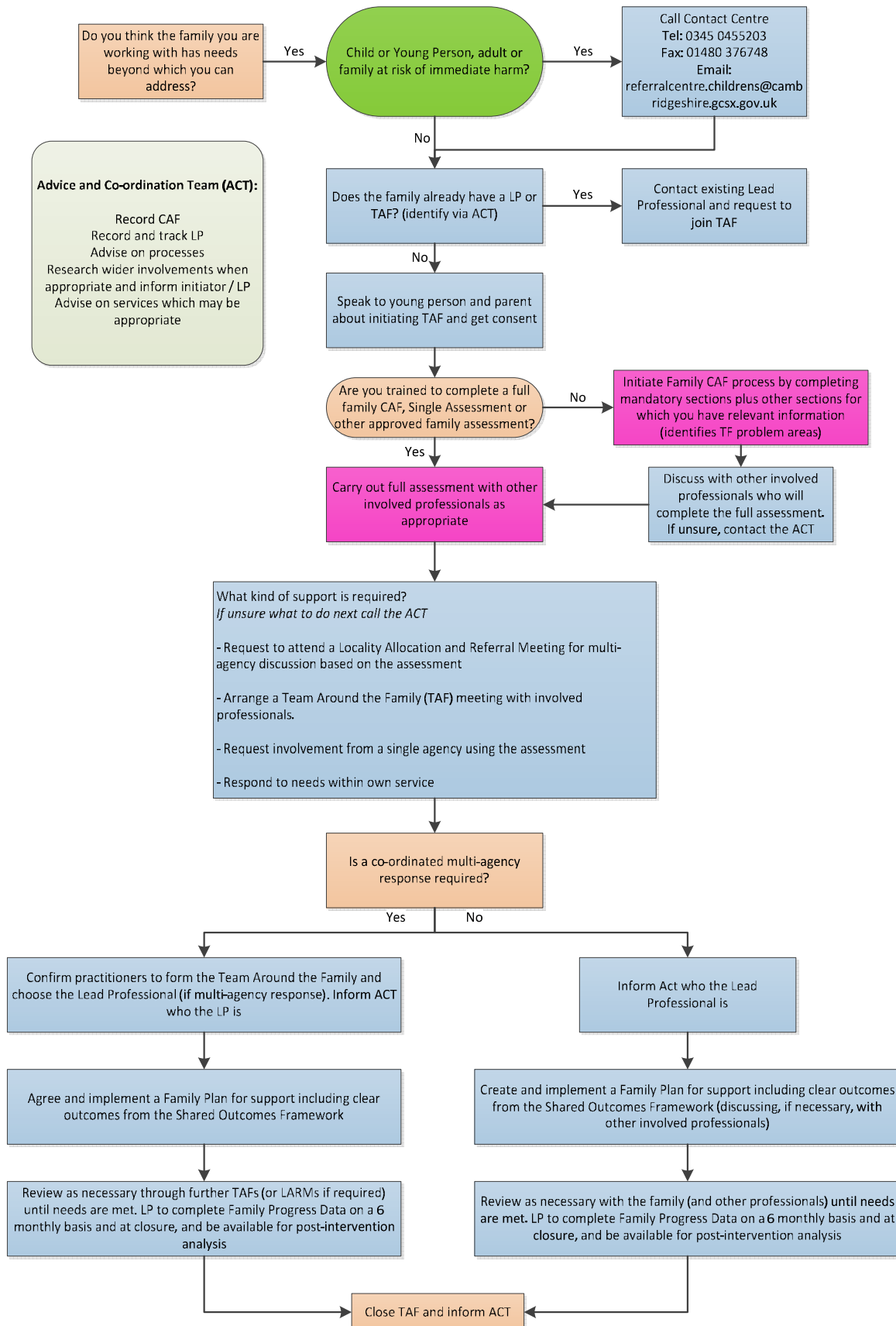
There have been a number of ideas for how the funds could be used including:

1. Continued investment in the areas outlined above
2. Investment in Early Help services
3. Continued investment in intensive family services such as FIP and Multi Systemic Therapy which are facing significant reductions in budgets from 2016/17.
4. Further investment in social care to enable Think Family working alongside statutory safeguarding role
5. Think Family Advisors in partner agencies to support development of Think Family practice

A proposal will be developed further by the TFF Steering Group for consultation.

Appendix 1 – Think Family Process

Think Family Process



Appendix 2 – Family Progress Data required for all families

Priority	Category	For Each	Proposed FPD Indicator
Essential	Crime	Adults and Children	Number of ASB incidents resulting in further action (last 12 months)
Essential	Crime	Adults and Children	Number of ASB incidents resulting in no further action (last 12 months)
Essential	Crime	Household	Number of domestic violence incidents (last 12 months)
Essential	Crime	Household	Number of police callouts (last 12 months)
Essential	Health	Adults and Children	Engaging in alcohol misuse (number of months out of last 12)
Essential	Health	Adults and Children	Engaging in drug misuse (number of months out of last 12)
Desirable	Housing	Household	Number of evictions (last 12 months)
Desirable	Housing	Household	Number of homelessness applications (last 12 months)
Desirable	Housing	Adults and Children	Number of weeks homeless (in temp accommodation) in last 12 months
Desirable	Housing	Household	Rent arrears (value owed)
Essential	Employment	YP (18-24)	NEET (number of months out of last 12 months)
Desirable	Education	Children	Missing from school (number of months out of last 12 months)
Essential	Health	Adults and Children	Suffering from mental health issue (number of months out of last 12 months)

Appendix 3 – Case study illustrating the Think Family Approach

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dentist. The Family Support Plan was amended to reflect support being needed to improve the identified health issue.

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Evidencing effectiveness, and sustained and significant progress with the Hardman family

- During the assessment, the Family Worker, as part of the analysis, identified the family's 'baseline' which consisted of two parts, the previous experience of the family (historical) and where the family were likely to be in 6-12 months time (forecast) if the current needs were not addressed. It was possible to see that without significant intervention, that there was a large chance that the family could be evicted, the step-father would be in breach of his license, the children's achievements at school would be below expected levels of progress and social care would become involved.
- The Family Worker also gathered the Family Progress Data during the assessment period using a template.
- When the Family Support Plan was developed, the Lead Professional chose some indicators from the Outcomes Framework (making them relevant to the family whilst still retaining their meaning) which could demonstrate that the situation had improved. They chose:
 - All of the children had fewer than 3 fixed term exclusions and no permanent exclusions across 3 consecutive terms
 - All the children have achieved (or are on track to achieve) the appropriate level of attainment at the end of the appropriate Key Stage
 - All children are registered with a dentist and have had a check up within the last six months
 - There was a debt / rent arrear reduction plan in place and being adhered to and a subsequent reduction in debt
 - Both parents attended an accredited parenting course and implementing new strategies over a 6 month period
 - A Family CAF was implemented and successfully completed and no-one in the family was re-referred to services within 6 months
 - There was at least a 60% reduction in offending across the household in the last 6 months
 - There were Improved scores against all areas of Family Assessment (*indicating family resilience had increased*)
- These measures were used to help the Team Around the Family continue to focus on the outcomes they were working towards and help everyone to recognise the progress being made.
- At the end of the intervention the Family Worker provided the Family Progress Data once more, and with agreement with the family and the members of the TAF, closed the TAF. The TFF data team checked that progress had been made against the outcome measures chosen. Once sufficient time had lapsed to evidence change against these measures, the TFF team made a result claim.

Appendix 4 – Multi-agency specification for service transformation

Leadership and management

Component	Example
A self assessment has been conducted in relation to each of the elements of the specification to understand current position (template self assessment to be provided)	
The implementation of service transformation Think Family within the organisation in line with the specification has been adopted as a corporate objective	South Cambridgeshire District Council have identified Together for Families as a corporate objective
A lead officer for service transformation Think Family within the organisation has been identified	
A project team with relevant representatives in relation to all aspects of the specification has been established with a clear terms of reference (template ToR to be provided)	Jobcentre Plus (JCP) have established a project team
A project plan to implement all aspects of the service specification has been created (template project plan to be provided)	

Think Family Process

Component	Example
Decisions have been reached about how services within the agency will work with the Think Family Process— key areas for consideration	
<ul style="list-style-type: none"> How can services act in the Lead Professional role? How can services start a CAF assessment? If not how else could engagement with the Think Family process be promoted? How can services complete a full CAF assessment? How will services consider the wider needs of family members? How will services support the gathering of information to inform assessment of family needs and update the Lead Professional on their involvement on a regular/agreed basis How will services ensure the work they undertake is reflected in the Support Plan and works towards the common goals agreed by the Team Around the Family How will services commit to attend Team Around the Family meetings as a core 	<ul style="list-style-type: none"> JCP have identified 4 specialist work coaches who will start CAF process and potentially act as Lead Professional. Are creating a baselining questionnaire to enable mainstream work coaches to understand the wider needs of the family members. Will contact Lead Professionals for all families with a marker on the DWP Labour Market System to ensure information is shared Have created a 'journey' for families on the cohort to ensure work coaches continue to communicate with Lead Professionals 4 specialist work coaches will attend TAF meetings if JCP presence is needed

Component	Example
<p>function of their role to ensure work is well co-ordinated and consequently more effective with families</p> <ul style="list-style-type: none"> • How will services share information with other professionals in the Team Around the Family as agreed as part of the Support Plan • How will services respond differently when they see the 'marker' 	
Consideration has been given to whether any additional measurement tools are needed to evidence sustained and significant improvement and tools have been created and implemented	JCP Introducing a work outcome star to evidence when families are making progress towards work
Consideration has been given to whether any organisational policies or practice standards need to change to reflect changes to practice and amendments have been made and revised documents shared with relevant staff	
Consideration has been given to whether job descriptions and person specifications need to change to reflect changes to practice and amendments have been made	

Workforce development

Component	Example
Consideration has been given to how staff will need to engage with the Think Family supervision to support practice and relevant staff have been asked to attend	Locality Teams Locality Team staff are expected to attend Think Family supervisions
Consideration has been given to which Think Family training modules staff need to attend - the Lead Professional modules or the overview module. A plan has been created to ensure their attendance	
Consideration has been given to how recruitment processes may be amended to include questions or tests which promote recruitment of those who already 'think family' and also create the expectation from the start of the Think Family process	FIP All FIP workers are tested at interview on their ability to Think Family.
Consideration has been given to how induction plans could be amended to create the expectation of staff working to the Think Family process and attending relevant Think Family training	Family Workers Think Family modules have been included in the workforce development and induction plans of family workers
Consideration has been given to whether any staff need basic adult and child safeguarding training	Inclusion Arranged for safeguarding training for all

Component	Example
Consideration has been given to whether safeguarding policy is needed/ should be revised	Inclusion Updated and refreshed safeguarding policy

Data sharing and cohort management

Component	Example
The agency has signed up to Together for Families Phase II Information Sharing Agreement	City Council Have been working with the TFF Project Team to agree the new ISA
Work has been undertaken to identify if it is possible to create markers on the organisation's case management system(s), how this could be managed and plans implemented	Police Set markers for families who are working with FIP and intend to set markers for all TFF families
Work has been undertaken to identify if data sets can be shared with the central TFF data team for the purposes of identifying families	Schools Have shared data sets of young people on alternative provision for the purposes of identifying families

Quality Assurance and Evaluation

Component	Example
An appropriate supervisor has been identified for any staff undertaking Lead Professional role	
An appropriate person has been identified to sample CAFs and Support Plans, or tools used to promote Think Family approach against an agreed set of standards	JCP 2 members of staff will be responsible for sampling work done by work coaches to check they are at required standard
An appropriate person has been identified to observe front line professionals practice and assess against an agreed set of standards, or aspects of Think Family process expectations have been included in existing observations	JCP 2 members of staff will be responsible for sampling work done by work coaches to check they are at required standard
Think Family Performance Measures detailed below have been adopted	

Partner Performance Measures

How Much Did We Do?	How Well Did We Do It?
<i>All measures broken down by the following (where relevant); District, Ward, Locality / Area, Children Centre Reach Area, Lead Professional, Need / Criteria met, Agency, Service Team</i>	
<i>Where possible, each measure will have a baseline and forecasting element</i>	
# families who meet the TF criteria which are / have been worked with	% of families who meet the criteria and have / are being worked with in relation to the annual TFF target
# professionals who have undertaken the Think Family training programme	% of professionals who reported that the Think Family training met their needs
# enquiries into the Advice and Co-ordination Team from professionals	% of ACT service users who were satisfied with the response
# (service transformation) project milestones met across the Partnership	% of professionals who report that their organisation has supported them in working using the Think Family approach
# professionals who have accessed the Think Family Supervision Groups	% Supervision group attendees report positive value of attendance
# professionals who have accessed the 1:1 support from a Think Family Specialist Clinician	% of CAF assessments assessed as 'good' or above
# Family CAFs completed	% of personalisation budget requests approved
# Single Assessments completed	% of professionals who score 'good' or 'outstanding' on the element of their observation of professional practice which relates to Think Family
# of personalisation budget requests approved (and amount)	% of professionals who report their response in a case has been different due to the TF Marker being placed on their MI systems
# of Think Family markers being placed on agency MI Systems	% of TAFs where relevant partner agencies are engaged in the TAF meeting
# of agencies who have signed the ISA and are subsequently sharing cohort level data with the TFF central team	% of service users satisfied with the multi-agency response received

Is Anyone Better Off?

All measures broken down by the following (where relevant);

District, Ward, Locality / Area, Children Centre Reach Area, Lead Professional, Need / Criteria met, Organisation, Service Team

Where possible, each measure will have a baseline and forecasting element

families sustaining the changes

% of all possible agencies adopting the Think Family approach as part of their strategic objectives

Costs avoided due to successful sustained intervention

% of all agencies headline TF performance measures heading in a positive direction

families identified as needing support where no agency was currently involved

% of agencies achieving all service transformation project milestones

Family CAFs closed with no outstanding needs

% of agencies who have placed vulnerability markers on their MI systems

strategies / programmes developed based upon the information collected as part of the TF programme

% of agencies who regularly share information / intelligence on vulnerable families

of Think Family performance measures adopted by agencies

% of families who received a multi-agency intervention achieving sustained and significant progress

% of agencies using information / intelligence gathered during the programme to inform policy / decision making

% of professionals who report that their Management Information System provides the support they need to Think Family

% of professionals who report they are following / supporting the Think Family approach in all of their cases

% of professionals who attended Think Family training reporting that they have applied their new learning 6 months after training