



South Gloucestershire

# Early Help Strategy for Children, Young People & Families

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2019 – 2024

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South Gloucestershire  
**CHILDREN,  
YOUNG PEOPLE  
AND FAMILIES  
PARTNERSHIP**



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# 1 Foreword

This Strategy sets out the vision and strategic priorities for Early Help in South Gloucestershire for the period 2019 to 2024.

Early Help means getting timely and effective support to children, young people and families who need it. It aims to enable children to flourish and to enhance long term outcomes and life chances. Early Help refers both to help in the critical years of a child's life (including pre-birth and pregnancy) and also to responding as soon as possible, at any age, through childhood and adolescence when difficulties emerge.

We aim to build a culture together where children, young people and families are engaged in conversations when things are not going well, or where there may be a risk of problems arising, working alongside those families and empowering them to find their own solutions. These conversations can occur at any time and in any setting and may involve one or a number of services or agencies. The help that is offered will range from giving advice to direct work and will require strong commitment, a common purpose and common ways of working across the partnership.

In writing this strategy we have listened to the views of children, young people, families, partners and stakeholders. This was through a series of meetings and engagement events and through public consultation between January and March 2019. All feedback received has been considered for this version.

Successful delivery of Early Help depends on partnership working across a wide range of agencies, services and settings. We are determined to work as a partnership to achieve the best possible Early Help outcomes for all children, young people and families across South Gloucestershire.

We the undersigned agree to be accountable for ensuring the delivery and implementation of this strategy.

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# 2 Our Vision

## OUR VISION

*Our vision is that every child and young person in South Gloucestershire should have the best start in life, thrive, and be prepared for a successful adult life.*

We will provide all our children and young people with the

# BEST

# S

Safe

# T

Thriving

# A

Achieving  
and aspiring

# R

Ready for  
the future

# T

Together

# IN LIFE



# 3 Our Principles and Ambition for Early Help

## OUR CORE PRINCIPLES FOR EARLY HELP IN SOUTH GLOUCESTERSHIRE

### We will:

- Empower families to take responsibility by working with them, not doing things to or for them.
- Recognise that family, friends and community can be the most effective and sustainable forces of “help”.
- Enable support at the right time, in the right place, in the right way.
- Raise awareness and support the rights of all children and young people in accordance with the UN convention for the rights of the child.
- Work in partnership to make best use of shared resource, skills and knowledge.
- Embrace a strengths based, whole-family approach to finding sustainable solutions.
- Build our work on an evidence informed approach.
- Understand the power of good communications both with families and with colleagues.

## OUR AMBITION FOR EARLY HELP

### What children and young people can expect from the Early Help Offer:

- I will feel safe, valued and respected.
- I am recognised as an individual and am free from any discrimination.
- I will be at the centre of all decisions and will only need to tell my story once.
- My voice will be heard and will influence the planning of help and services.
- It will be understood that things that have happened to me might affect me at different times in my life, when I might need some extra support.

### What parents, carers and families can expect from the Early Help Offer:

- I am recognised as an individual, who has unique characteristics and needs, and am free from discrimination.
- The diverse needs of all of my family are recognised.
- My views and opinions are listened to.
- I am encouraged and empowered to support my family.
- It is recognised that some of my past and current experiences may impact on me as a parent.
- It will be understood that I may need support with other areas of my life in order to be a good parent.

**What professionals and organisations can expect from the Early Help Offer:**

- I understand my role and responsibilities in relation to the Early Help Offer in South Gloucestershire.
- I am empowered to take responsibility to ensure that children, young people and families receive the support they need.
- My employer, colleagues and partner agencies I work with are committed to the principles and processes that underpin the Offer.
- I have access to training and support.

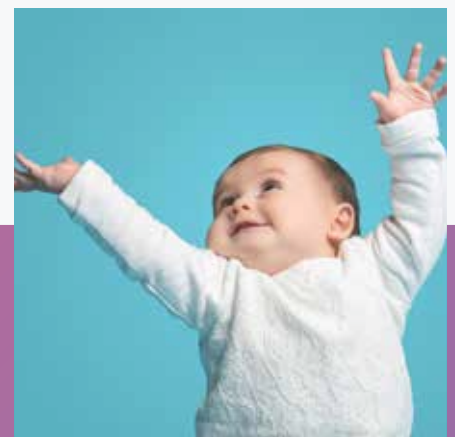
## 4 Introduction to Early Help

Early Help means getting timely and effective support to children, young people and families who need it. It aims to enable children to flourish and to prevent long term and damaging outcomes.

Early Help refers both to help in the critical years of a child's life (including pre-birth and pregnancy) and also to responding as soon as possible, at any age through childhood and adolescence when difficulties emerge. This strategy is predominantly relating to children and young people aged pre-birth to 18, but with an additional focus on supporting young people who need it across the transition to adult support and services.

Early Help prevents escalation of problems and enables interventions to take place before critical thresholds are crossed and pathways become more irreversible for young people.

Children and young people with Special Educational Needs and Disabilities (SEND) will have equal access to the Early Help Offer alongside the more specialist services they may require.



# 5 Early Help - The National Context

## THE STATUTORY BASIS FOR EARLY HELP

'Working Together to Safeguard Children 2018' sets out the statutory guidance for Local Authorities and their partners. 'Keeping children safe in education: Statutory guidance for schools and colleges: September 2018' sets out the statutory guidance for schools and colleges. Extracts from both these documents can be found in Appendix 1.

## THE CASE FOR EARLY HELP

The importance of Early Help has been a common theme in research and in a number of government reviews over the past decade. Quotes from a selection of these are included below. Further examples can be found in Appendix 2.

### Realising the Potential of Early Intervention - Early Intervention Foundation 2018

'Leaving problems unresolved in childhood doesn't only impact on the lives of individuals and families it also impacts on society and the economy, by undermining the wellbeing of communities and reducing people's opportunities to live positive and successful lives. Acting early to support children at risk of poor outcomes can build healthier, happier and more productive communities, and produce a range of economic benefits that significantly outweigh the costs of intervening.'

Early intervention is not a panacea for all of society's problems, nor is it a financial coping strategy for local or central government. It is a vital way of providing children with the skills and resilience they need to succeed in life, and of mitigating the negative impacts of poverty and other forms of disadvantage'.

### Evaluating early help. A guide to evaluation of complex local early help systems. Early Intervention Foundation 2019

'Generating good quality evidence of impact, particularly of systems involving a range of agencies and services, is difficult. It takes time, and requires capacity, resources and capability, all of which are in short supply in local services.

We need to build capacity to use and generate evidence in children's services. This means

equipping those delivering early help with the skills and resources required to measure the impact of their service and, in turn, to generate good quality evidence.'

### Developing an effective local early help offer for children and families - Local Government Association / Isos partnership March 2019

"An effective early help offer brings together local partners to provide good quality early support for children and families that builds their resilience, prevents difficulties from escalating and leads to better outcomes that are sustained."

### Early Intervention: The Next Steps - Graham Allen January 2011

'I recommend that future expansion of early intervention programmes should favour those which combine strong evidence bases with impact of crucial stages in the development of social and emotional bedrock in children and the present network of children's centres should use such approaches to identify and meet the needs of vulnerable children and families.'

### The Munro Review of Child Protection: Final Report, a Child-Centred System: Eileen Munro

'Preventative services can do more to reduce abuse and neglect than reactive services. Many services and professions help children and families so co-ordinating their work is important to reduce inefficiencies.'

### Fair Society, Healthy Lives: Michael Marmot 2010

'The foundations for virtually every aspect of human development – physical, intellectual and emotional – are laid in early childhood. What happens during those early years, starting in the womb, has lifelong effects on many aspects of health and wellbeing, from obesity, heart disease and mental health, to educational and economic achievement. Later interventions, although important, are considerably less effective if they have not had good early foundations.'

## ADVERSE CHILDHOOD EXPERIENCES (ACES)

ACEs (Adverse Childhood Experiences) are negative experiences in early life and childhood that can have an impact on future health and wellbeing throughout life. There is a significant



and growing body of evidence that stressful experiences during childhood have a profound impact on an individual's life chances.

These experiences alter development of the brain and of the hormonal, nervous and immunological systems. Research has shown a clear relationship between ACEs and poor physical and mental health and socioeconomic outcomes. Evidence suggests that risk increases with the number of ACEs a person experiences. Adults who have experienced ACEs are more likely to be raising their children in similar environments.

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### **UNITED NATIONS CONVENTION ON THE RIGHTS OF THE CHILD (UNCRC)**

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This legally-binding international agreement sets out the civil, political, economic, social and cultural rights of every child, regardless of their race, religion or abilities. The UNCRC consists of 54 articles that set out children's rights and how governments should work together to make them available to all children. Under the terms of the convention, governments are required to meet children's basic needs and help them reach their full potential. Central to this is the acknowledgment that every child has basic fundamental rights. These include the right to:

- Life, survival and development
- Protection from violence, abuse or neglect
- An education that enables children to fulfil their potential
- Be raised by, or have a relationship with, their parents
- Express their opinions and be listened to.

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### **ECONOMIC BENEFITS OF EARLY HELP**

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Nationally and locally public sector spending continues to be reduced and there is a need to look at reduction of high cost interventions. Finding robust evidence that demonstrates explicitly that investment in Early Help will realise direct future economic benefit has never been straight forward. However, a growing body of research is beginning to show that such investment can reduce the demand for high-cost intervention at a later stage. There are good grounds to believe that earlier rather than later investment will lead to ongoing benefits not only in saving expenditure of higher cost services, but by enabling children and young people to have a greater opportunity of acquiring skills and resilience which will lead to greater opportunities in adulthood.

### **Extracts from The Early Intervention Foundation (EIF) Realising the Potential of Early Intervention - October 2018**

'Benefits from early intervention accrue to the whole of society and the wider economy, not just to public services and government bodies. The long-term 'pay-off' to society may be particularly large where early intervention offers the potential for labour market gains, such as improvements in employment and earnings'.

'One analysis using data from the British National Child Development Study suggests that people who have experienced either physical or mental health problems in childhood could earn around £400,000 less over their lifetime than those who have not. Even small improvements in attainment, particularly for children at risk of the poorest academic outcomes, have the potential for large economic pay-offs. The Department for Education has previously estimated that individuals who achieve five or more good GCSEs (as their highest qualification) have lifetime productivity gains worth around £100,000 on average, compared to those with qualifications below this level. When compared to children with no qualifications, the returns on having five or more good GCSEs increase significantly, to around £260,000. Crucially, these returns are widely shared: these figures reflect overall gains in productivity, including increases in earnings and employment that benefit the individual as well as the effects of increases in tax revenue and associated benefits to employers'.

### **Intervening Late Costs the Public Sector £17 billion annually:**

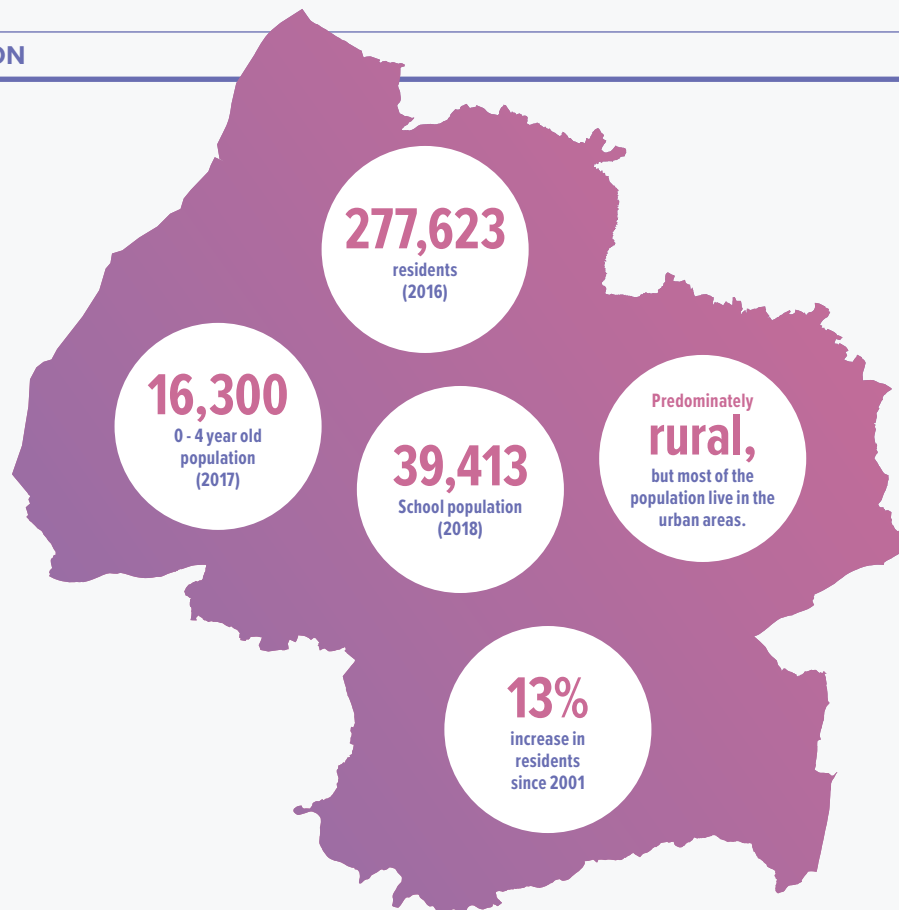
'Costs of late intervention for children and young people add up to £17 billion a year across England and Wales (in 2016/17 prices). These estimates capture the resource pressures on acute, statutory services that are required when children and young people experience difficulties, many of which might have been prevented. This includes, for example, the costs of children taken into care, the costs to the health system of youth alcohol and drug misuse, and the costs to the criminal justice system of youth offending. It is not possible to say from these numbers how much the public sector could feasibly save from investing more in early preventive services. However, this clearly shows that considerable resources are wasted within the public sector in tackling issues that could have been dealt with sooner, and where the long-term outcomes for society could have been improved'.

*The cost of late intervention from EIF analysis 2016.*

# 6 Early Help - The Local Context

National and local policy has shaped this strategy alongside local data described below.

## POPULATION



## DEPRIVATION

- South Gloucestershire is, on the whole, a relatively affluent area with pockets of deprivation. Based on the Index of Multiple Deprivation (IMD) for 2015 only 16% of local authority areas in England are estimated to be more affluent than South Gloucestershire.
- 18% of South Gloucestershire’s population live in the 40% most deprived neighbourhoods nationally. Through an analysis of deprivation information, South Gloucestershire has identified 5 “Priority Neighbourhoods”; Staple Hill, Patchway, Yate, Cadbury Heath and Kingswood.

## CHILD POVERTY

- The child poverty needs assessment undertaken in 2014 identified over 6,000 children are living in poverty in South Gloucestershire, two thirds of whom are living outside priority neighbourhood areas. More recently, End Child Poverty produced Child Poverty figures in Jan 2018 at Local Authority and parliamentary constituency level, for both before and after housing costs. For South Gloucestershire the figures are: 5780 children (10.03%) before housing costs, and 9367 children (16.25%) after housing costs. Most families in poverty have at least one adult in work.

## ADVERSE CHILDHOOD EXPERIENCES (ACEs)

- In the English National ACE Study (2014) almost half the population (47%) experienced at least one ACE, with 9% of the population have 4 or more. Modelling that for the South Gloucestershire population of 212,900 adults aged 20+ (2016) means that 100,063 adults have experienced at least one ACE, with 19,161 adults having 4 or more.

## HEALTH

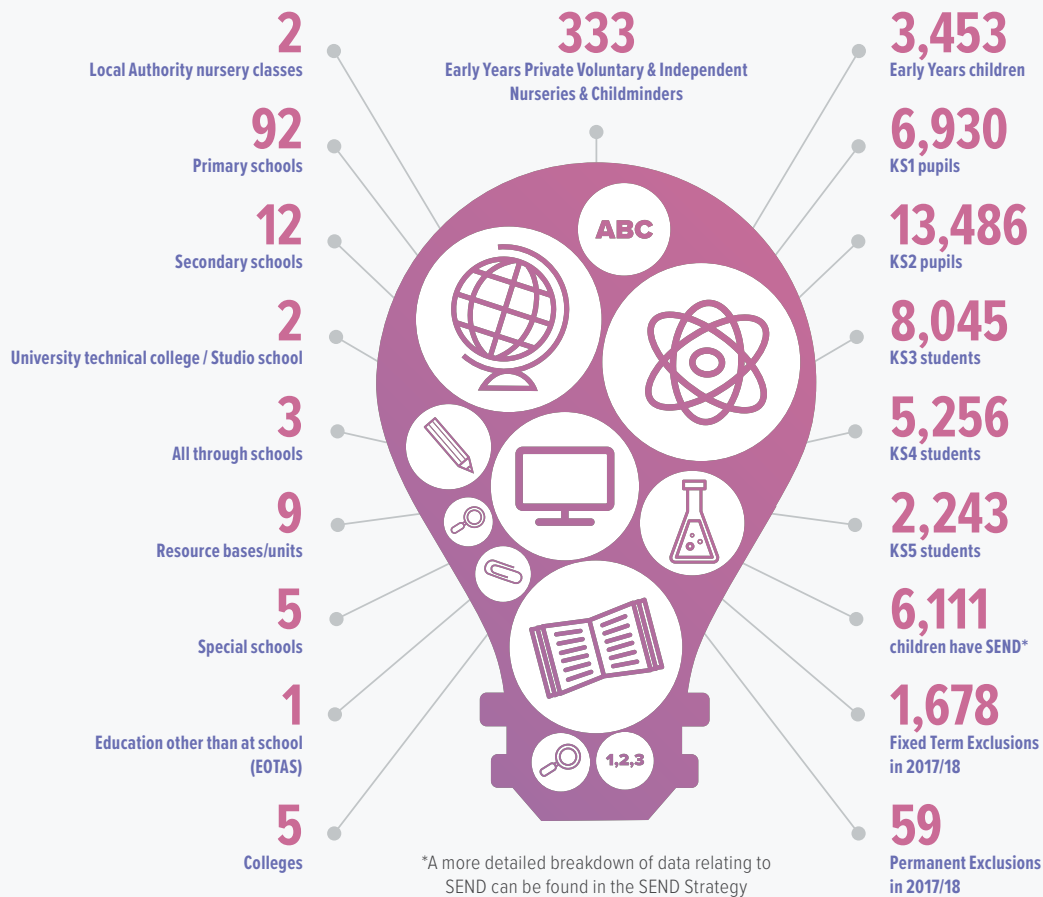
- Rates of infant mortality have consistently fallen over the last decade. In 2011-13 there were 20 infant deaths in South Gloucestershire. The infant mortality rate was 2.1 per 1000, considerably lower than the England rate of 4.0 per 1,000 and amongst the lowest in the South West.
- Overall, comparing local indicators with England averages, the health and wellbeing of children in South Gloucestershire is better than England.
- The teenage pregnancy rate is lower than England, with 53 girls becoming pregnant in a year.
- 8.5% of women smoke during their whole pregnancy which is lower than England and the South West.
- 78.4% of mothers initiate breastfeeding which is lower than the England percentage. Breastfeeding at 6-8 weeks: Work is underway to improve data completeness but available data does suggest improved breastfeeding numbers at 6-8 weeks.
- Rates of sexually transmitted infections continue to be highest in young people, peaking in those aged 15-24.
- 17.8% of reception age (4-5) children in South Gloucestershire were overweight or obese in 2014/15. This is lower than the South West and England averages. In year 6 children (age 10-11), 27.0% were overweight or obese.

- In South Gloucestershire, the Online Pupil Survey found that 66% had at least 4 hours of physical activity per week, the level of activity was higher in secondary schools (74%) compared to primary schools (63%).
- The 'What About YOUth' survey 2014/15 showed that 9% of 15 year olds in South Gloucestershire were current smokers, higher than the England average of 8.2%. The online schools survey indicates that rates of smoking in Year 10 are significantly higher in those who are entitled to Free School Meals.
- The South Gloucestershire Online Pupil Survey found that 26% of secondary pupils in year 12 (age 16-17) reported that they drink sometimes (monthly) or weekly. Of the pupils who drink, the percentage reporting getting drunk regularly (weekly and daily) is 25%, similar to neighbouring areas.
- In the same age group, 9% have tried illegal drugs and 22% had been offered illegal drugs. The percentage that reported that they had tried an illegal drug rose from 1.3% in year 8 to 13.3% in year 10 and 16.3% in year 12.

## MENTAL AND EMOTIONAL HEALTH

- Based on national rates it is possible to estimate that around 4,800 children and young people aged 5-19 may have a mental health problem in South Gloucestershire.
- The Online Pupil Survey undertaken in 2014/15 found that 7.2% of secondary pupils were habitual self-harmers.
- The rate of child inpatient admissions for mental health conditions at 91.8 per 100,000 is similar to England.
- Hospital admissions due to mental health conditions has increased over the last 5 years as have admissions for self-harm in those under 19. Local rates of hospital admissions relating to/as a result of self-harm are similar to the national average.

**EDUCATION**



**2018 OUTCOMES AND TREND DATA**

In the Early Years Foundation Stage the percentage of pupils achieving a Good Level of Development is six points above provisional national level and an increase from the previous year. Disadvantaged Free School Meals (FSM) outcomes have declined from 62% to 54.7%.

In Year 1 the percentage of pupils reaching the phonics screening standard is at 85.3% and above national. The percentage of FSM pupils meeting the standard has risen from the previous year to 67.6%.

At the end of Key Stage 1, the percentage of pupils achieving the expected standard in reading (79.7%), writing (74.1%) and mathematics (80.3%) is above national level in all three measures. There has been a decline in results for disadvantaged pupils against the 2017 outcomes.

At the end of Key Stage 2, writing and English Grammar, Punctuation and Spelling (EGPS)

attainment at the expected standard are above national level. Reading, writing, mathematics and EGPS outcomes have improved for all disadvantaged pupils in Year 6 and show a three year improving trend. Progress is above national level for writing at the end of Key Stage 2 and shows a three year improvement. Progress for disadvantaged FSM pupils has improved in reading, writing and mathematics at the end of KS2.

At the end of Key Stage 4 outcomes are below national level for GCSE exams, though performance has improved over the last three years. Attainment in English and Maths at KS4 is also below national. In 2018 39.9% of South Glos pupils achieved a Grade 5 or above in both English and mathematics, compared to 43.2% nationally. 2018 figures are still provisional.

Fewer young people age 18 entered higher education locally (50%) compared to England (59%).



Attendance for 2018 was on average at 95.9%, for primary schools with FSM attendance averaging at 92.9%. The percentage of over 30% broken weeks showed a slight increase to 7.5% in primary schools and a decrease in secondary schools to 7.8%.

### **THE TROUBLED FAMILIES PROGRAMME**

- Locally known as Families in Focus this began its second phase in 2015 and is supporting the council's transformation of Early Help supporting families with multiple, complex problems through a whole family approach and coordinated practical support. Support for families includes a wide range of issues such as debt, poor mental health, crime and school-related issues.
- With additional funding from central government, the programme runs until March 2020, contributing to the commitment to the 20/20 vision of: Intelligent use of data to plan our interventions, adopting the Whole Family approach and a focus on outcomes.

### **CHILDREN IN NEED, CHILD PROTECTION AND LOOKED AFTER CHILDREN**

The rate of Children in Need (including those that are subject to Child Protection or Looked After Children) as at 31 March 2018 was 285 per 10,000 children and young people. The rate of Children in Need has increased since March 2017 but remains better than the rate seen across England and the South West region; the increase in the number of Children in Need since March 2017 places South Gloucestershire in-line with its closest statistical neighbours.

The rate of Children and Young People subject to Child Protection has increased year on year since March 2014 (with a significant increase between March 2017 and March 2018), standing at 41 per 10,000 children and young people as at 31 March 2018. Whilst the rate of Child Protection is lower than that seen across England as a whole, it is in-line with the rate seen across the South West and is higher than its closest statistical neighbours.

Similarly, the rate of Looked After Children has increased annually since March 2016, with a rate of 34 per 10,000 children and young people as at 31st March 2018. Despite these increases

South Gloucestershire has one of the lowest rate of Looked After Children in England and is lower than the rate seen across the South West region and its closest statistical neighbours.

### **EMPLOYMENT**

- The employment rate in the second quarter of 2015/16 was 80.7% which is an increase of 1.8 percentage points on the same point in the previous year. This keeps South Gloucestershire firmly amongst the top performing authorities in the country.
- The percentage of young people aged 16 to 17 not in education, employment or training or whose activity is not known is similar to England at 5.8%.

### **DOMESTIC ABUSE**

- It is difficult to assess the true level of need due to significant under-reporting of domestic abuse incidents. An estimated 5,517 women and 3,801 men in South Gloucestershire are subject to domestic abuse. In 2013/14 the police recorded 2,880 domestic abuse incidents and in 2014/15 they recorded 252 sexual offences. Rates of domestic and sexual abuse are below the England average. In an online schools survey in South Gloucestershire, 16% of pupils were subject to or had witnessed abuse, with 3% stating this was quite often or on most days.

### **YOUNG CARERS**

- The 2011 census identified 524 children in South Gloucestershire aged 0 to 15 who were carers. Family income and GCSE attainment is significantly lower than non-carers. Young carers in work at age 20 or 21 are more likely to be in lower skilled occupations.

### **YOUNG OFFENDERS**

- Between July 2017 and June 2018 rates of first time entrants (FTE) to the criminal justice system aged 10 -17 were lower than the previous year and lower than England and the South West. There have been no youth custodial sentences since 2016.

# 7 Early Help Priorities for Action

The Early Help Strategy will be implemented through the following priorities, which are of equal importance.

- 1** Early **understanding** of the diverse needs of children, young people and families.
- 2** **Access** to information, advice, guidance, support and signposting within the local community.
- 3** Effective **partnership** responsibility, response and accountability.
- 4** Coordinated **planning and provision** of support.
- 5** Demonstrate a **positive impact** on the lives of children, young people and families.

Further information on the key themes and success measures of these priorities can be found in **Section 8**.

# PRIORITIES

# 1

## **Early understanding of the diverse needs of children, young people and families.**

Timely identification of need by partners and communities to prevent problems before they develop, or at the earliest possible stage. Having conversations with families, building on their capacity and empowering them to support their children and young people to achieve positive outcomes. Understanding how protected characteristics (as defined within the Equality Act 2010) may impact on the likelihood of need.

# 2

## **Access to information, advice, guidance, opportunities, support and signposting within the local community.**

Parents / carers, children and young people are empowered through availability of accessible information about the range of opportunities, advice and support available, including that provided by the community, voluntary and independent sectors.

# 3

## **Effective partnership responsibility, response and accountability.**

Partners work together to offer coherent and integrated Early Help services. Practitioners have the appropriate skills, development and training. Duplication is avoided and resources aligned, in order to get best value for money. Accountability across partner agencies is clear and agreed.

# 4

## **Coordinated planning and provision of support.**

Services and provision is planned, wherever possible, to be based within communities, making the most of local resources and delivering support at the most local level. All groups and ages, including adolescents and those with mental health needs, have been considered in planning. Smooth transitions are planned at key points in a child/young person's life, including transition to adulthood, between services, between school/settings and between professionals.

# 5

## **Demonstrate a positive impact on the lives of children, young people and families.**

Outcome measures evaluate progress in achieving outcomes and capture sustainable change. Outcomes demonstrate that services are effective and make a difference to the lives of children, young people and families. Outcome measures include feedback from children, young people and families.

# 8 Actions and Outcomes

## How will we measure our success?

We will know that our Early Help Strategy is effective when children, young people and families confirm that it is making a difference to their lives. Successful Early Help should have an impact on the lives of children and young people and their future life chances.

Below are the key actions and outcomes for each of the 5 priorities. Successful Early Help will also contribute to long term partnership performance measures, as one of a number of contributory factors. Appendix 3 sets out a range of indicators to which successful Early Help may contribute in the longer term.

## Priority Outcomes

### **PRIORITY 1**

**Early understanding of the diverse needs of children, young people and families.**

#### **KEY ACTIONS:**

- Develop a clearer understanding of the impact of Adverse Childhood Experiences (ACEs) on children, parents and carers.
- Embed a strengths based, person-centred, solution focused way of working.
- Share good practice across partners on ways of empowering families and building resilience.
- Ensure that, when appropriate, Early Help plans are in place, shared with families and informed by an assessment of need.
- Understand how protected characteristics impact on likelihood of need.
- Recognise that a wide range of factors may be impacting families (eg debt, housing).
- Strengthen information sharing mechanisms between partner agencies.

#### **HOW WILL WE KNOW WE ARE SUCCESSFUL?**

- Practitioners are ACE aware and ACE informed.
- Service users report joined up and coordinated support focussed on their needs and strengths.
- Practitioners understand protected characteristics and their impact on the likelihood of need.
- Family resilience is increased and the capacity to help families find their own solutions is enhanced.
- Partners have access to the information they need to effectively work together and have access to advice and support from professionals.



## PRIORITY 2

**Access to information, advice, guidance, opportunities, support and signposting within the local community.**

### KEY ACTIONS:

- Provide information that is comprehensive, up to date and easy to find and understand, for families and professionals.
- Develop community and family networks where consistent information, advice, guidance and signposting is available for the local community.
- Design the South Gloucestershire Early Help Partnership Offer.
- Provide information which is accessible to all individuals.

### HOW WILL WE KNOW WE ARE SUCCESSFUL?

- Children, young people and families are able to access information about opportunities.
- There are clear family and community networks in every locality to access information, advice and signposting.
- The Early Help Partnership Offer is comprehensive, understood and available.

## PRIORITY 3

**Effective partnership responsibility, response and accountability.**

### KEY ACTIONS:

- Implement the Early Help Partnership Offer for families, with key partner agencies understanding their role and accountability for the delivery of services.
- Clarify, define and communicate the role of the South Gloucestershire Children's Partnership in holding partners to account and in monitoring Early Help.
- Include outcomes for Early Help in commissioned contracts and consider joint commissioning of services across partner agencies.
- Produce a three year Early Help Strategy action plan.
- Map essential and desired skills, training and provision of training across partners.
- Partners develop the Compass model (p27).
- Partners include information about what Early Help has already taken place if a referral is made for safeguarding or other services.

### HOW WILL WE KNOW WE ARE SUCCESSFUL?

- The South Gloucestershire Children's Partnership endorse and monitor the three year Action Plan.
- Roles, responsibilities and accountability of partners are clearly defined, understood and accepted.
- Early Help outcomes are included in commissioned contracts.
- Early Help is referenced in partnership strategies and action plans.
- Core competences for Early Help are agreed across partners.
- Practitioners and managers across the partnership access good quality, relevant training.
- Families report that their experience of help has been well coordinated.

## PRIORITY 4

### Coordinated **planning and provision** of support.

#### KEY ACTIONS:

- Develop provision around existing cluster groups and new family and community networks.
- Undertake a gap analysis of current Early Help support and provision.
- Ensure coherence with the SEND Local Offer in relation to Early Help.
- Ensure a clear Early Help offer for adolescents.
- Identify Early Help Offer for children, young people and families with emotional and mental health needs.
- Provide opportunities for service users to participate and be involved in decision making regarding new and existing services.
- Develop innovative ways of working that draw on local knowledge and experience and respond to the changing demographics in communities.
- Develop and embed smooth transfers between schools and settings at key transition points.

#### HOW WILL WE KNOW WE ARE SUCCESSFUL?

- Case audits and comments from families demonstrate family centric and community based actions.
- Children, young people and families report seamless transitions between services, practitioners and localities.
- Services are family-focussed, working with children, young people and their families and involving them in service planning to meet their needs.
- Families report that they experience timely access to services and prompt delivery of agreed actions.
- There is reduction in the level of demand for specialist services.

# PRIORITY 5

Demonstrate a **positive impact** on the lives of children, young people and families.

## KEY ACTIONS:

- Agree and implement an outcomes tool to monitor the impact for the child, young person or family ('distance travelled').
- Agree a data set and key performance indicators to measure the impact of Early Help.
- Develop feedback from service users so that it is integral to service planning, informs performance management and is used to design the future delivery of Early Help services.
- Develop outcome measures that include direct input from service users.
- Develop ways to deliver feedback to service users so that they are assured they are listened to.

## HOW WILL WE KNOW WE ARE SUCCESSFUL?

- All partners have methods of regularly seeking service user feedback.
- Service users are confident that their views are used to inform decisions about their support and about the structure of service provision.
- Children, young people and families are satisfied with and positively endorse the help and support they receive.
- The impact of Early Help is systematically analysed.
- All partners are able to provide data on Early Help outcome measures.
- Senior leaders will regularly review data and report to partnership boards.

## HOW WILL SUCCESSFUL OUTCOMES BE MEASURED?

Details about actions, baselines and measurement of success will be included in the three year action plan. This will include measures from existing partnership action plans. Methods for measuring success will include:

- Service user feedback
- Performance reports to South Gloucestershire Children's Partnership. This will be subject to change following the current review of these two boards.
- Staff training and performance management records
- Reporting against distance travelled measures, as part of an outcomes tool, where there has been a service or intervention
- Reporting against partners' action plans
- Rates of service referrals and access across partners

# 9 The Early Help Partnership Offer

Everyone has a responsibility to encourage the development of healthy, happy children, young people and families. The role of families in the physical, emotional and social development of children and young people must not be underestimated; it is vital that families are able to provide the care and opportunities children need from an early age through to adulthood.

In order for this to happen, we also recognise that the past and current experiences of parents and carers may impact positively or adversely on their children and families and that the type of support that families can access should reflect this.

Together we aim to develop an environment where families have easy access to the right information or support they need when they need it. We want families to be well informed, in control of the important decisions they need to make and able to address issues and problems without unnecessary contacts or interventions from services.

The Early Help Partnership Offer is not about one setting, agency or service. It includes providing information, advice and help to families so they can access the wide range of opportunities all families need to thrive in their communities. Examples include access to safe green spaces in which to play, appropriate housing, financial security, good quality universal services and settings such as nurseries and schools, health services and leisure services. It also includes more specific advice or help for those who may need it at some time.

The Offer will reflect the rapid and significant changes that are occurring from conception to adulthood to ensure it is relevant to families as needs are changing.





## THE KEY ELEMENTS OF THE EARLY HELP PARTNERSHIP OFFER WILL INCLUDE

- **Information** - that is easy to find, helpful and comprehensive for families. A new website will include local information for everyone. There will also be access to information within communities such as community centres, children's centres, health centres, schools/educational settings and town and parish council buildings.
- **A culture** - where families are able to have trusted conversations with those they are in contact with, from any setting or service, about information they need, or worries they have. These conversations will lead to families being guided and supported to the right information or help they need in a way that is most accessible for them.
- **A Core Offer** - a description of the core range of available opportunities and services for children, young people and families as well as additional opportunities and services in specific communities that are responding to local needs.
- **An age related focus** - to ensure the offer can respond to the changing needs of children, young people and those that care for them i.e. In early childhood (pre-birth to 11 years) and adolescence (11-18 years and up to 25 for some more vulnerable young people).
- **A focus on transitions** - supporting children and young people through significant points of transition which for some can be a difficult time. This includes transitions at key stages of education, between services and to adulthood where opportunities and services can be very different from those accessible up to the age of 18.
- **Working together** - a model for working together that keeps families at the heart of any work and is well coordinated. This includes a new point of contact called Compass, which will help families and workers to navigate to the right place for advice and support on how and where to access appropriate early help. The model of working together is described in section 10.



# Developments to support the delivery of the Early Help Offer

## **Community Networks**

We will establish Early Help family and community networks in a number of geographical 'cluster' areas. Each network area will be co-ordinated by a steering group of local stakeholders. The network will aim to ensure that communication across services and settings in local areas is effective, raising awareness of opportunities that are available to families and ensuring effective joint and integrated working. They will use population information and feedback to respond to local requirements, identifying local needs and assets (including buildings and services) and developing local partnerships and plans to deliver services together.

Each Network will look slightly different to reflect a local approach, but the expectation is that each will have at least one main focal point where families know they can go to access information, advice or help. This will also be a focus for the planning and delivery of services in that area. Opportunities will be available across the range of community based assets in that geographical/community based networks (e.g. children's centres, community centres, libraries, GP practices) and will include outreach options that are appropriate to local need. Consideration will be given to whether there will be one network covering the whole age range or two to cover early childhood (pre-birth to 11 years) and adolescence (12-18 years).

The range of network partners is likely to include representation from midwifery, health visiting, early years settings, school nurses, educational settings, children centres, libraries, family support services, GPs, community and voluntary agencies, police, health workers, youth work, town and parish councils, leisure centres and others providing services in the community.



### **Early Childhood**

Settings and services that work during the pre-birth, early years and primary phases will be well coordinated and clear to families within their communities. Children's centres will continue to provide programmes for families with children 0-5 years but will be developed to be part of the wider offer for the early childhood phase (pre-birth to 11 years). This will vary from centre to centre according to local need and the range of related services and programmes that could be delivered in and around children's centres.

### **Adolescence**

Information, help or services for young people will be responsive to the significant physiological and psychological changes and rapidly changing needs of this age group. This includes the importance and influence of peers and others outside their family network, new kinds of relationships, increasing autonomy, increased experimentation, the significant role of social media and the important decisions young people are needing to make as they approach adulthood. If young people are needing additional help, workers will work together using the agreed working together model described in Section 10 ensuring that young people have the opportunity to develop trusting relationships with adults and their parents/carers are included in plans and actions.

In addition we will develop a new multi-agency response for those young people who may still be at risk of poor outcomes including a risk of exclusion, exploitation or family breakdown. This might be in spite of efforts by their network or a Team around the Child (TAC) to identify and resolve problems. The adolescent support team will be a small, multi-agency team of different professional backgrounds resourced from a range of partners. The team will be accessed via referral and will work alongside the wider network of workers and services within the young person's community. The work of the team will be 'relationship-based', providing opportunities over time for a young person to build a trusting relationship with one or more adults. It will also aim to support the young person to build healthy networks within their communities, with opportunities to participate in positive activities, peer support and group work. Critical to this approach will be an understanding of the wider physical and social environment in which a young person lives, their networks, and an understanding of acceptable levels of risk for healthy adolescent development.



# 10 How We Will Work Together

## Conversations with families

We aim to build a culture together where children, young people and families are engaged in conversations when things are not going well – or where there may be a risk of problems arising – working alongside those families and empowering them to find their own solutions. These conversations can occur at any time and in any setting and may involve one or a number of services or agencies. Families must feel safe in asking for help. The help that is offered will range from giving advice to direct work and will require strong commitment, a common purpose and common ways of working across the partnership.

This includes a whole-family approach to understand the lived experience of children, where strengths can be identified and the impact of what's not working well is understood. Addressing underlying issues for example parental conflict, poor family relationships, isolation, worklessness/poverty and housing will have a more long-lasting, positive impact for the family and lead to better outcomes for children.

To support this workers will use the Signs of Safety approach. This will enable children, young people and their families to be actively involved in the process of identifying needs and the plans to address them. It also brings together naturally connected people to provide life-long connections and stability for families.

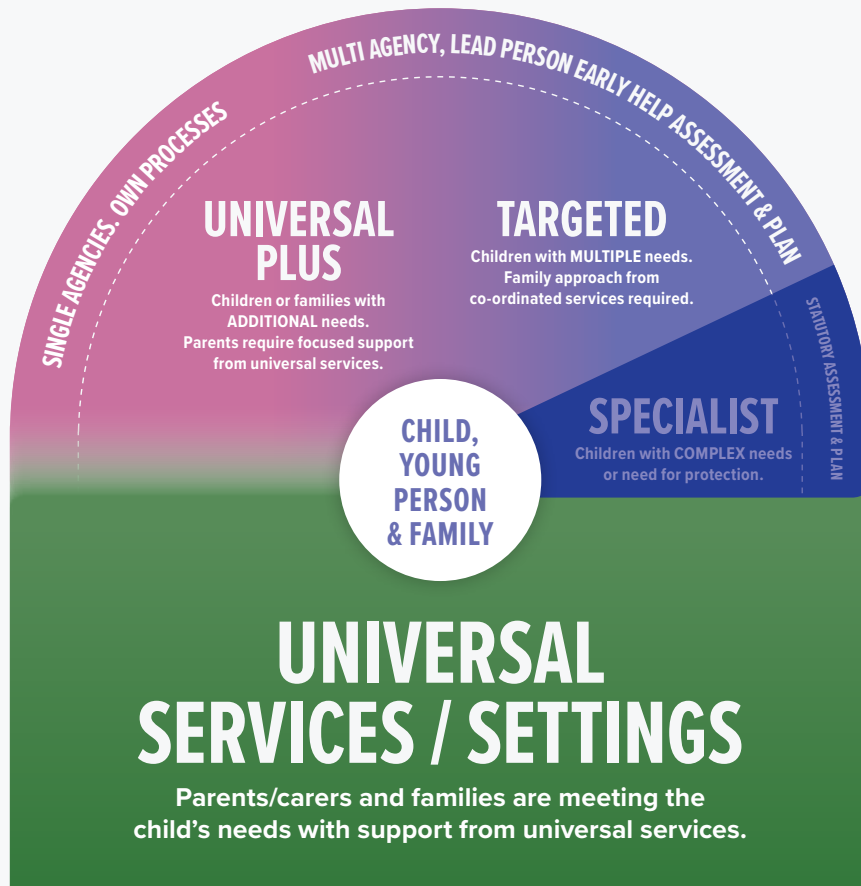
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# Response to Levels of Need

## The ‘Early Help Window – Response to Levels of Need’

The diagram below aims to illustrate different levels of need and response. These are always underpinned by universal services and settings.



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### AT ANY LEVEL IN ANY SETTING:

Early identification of need, when things are not going well or there is a risk of things not going well.

Engaging children, young people and families in conversations including what information or help they may need.

**UNIVERSAL**

The majority of children, young people and their families will have access to the opportunities they need to thrive within universal settings. This includes education and health settings and in communities such as parks, libraries and leisure facilities.



## UNIVERSAL PLUS

Universal settings provide additional information, advice, support, guidance or services for individual children or families where needed, or will link to another agency or service for particular information or advice. Each setting will use its own processes to identify and assess needs, involve families and agree and review actions. Examples of effective processes and tools used in a range of settings will be shared and coherence with the common Early Help assessment processes is encouraged.

## TARGETED

The identified, additional needs of a child, young person and their family are best met from a coordinated, multi-agency approach, regardless of the level of service (i.e. could be a range at universal, or universal plus, or could include a specialist service). Please see example Partnership Offer - Early Childhood Opportunities / Adolescent Opportunities in Appendix 4. The four key elements of the common ways of working at this level are:

- **A Lead Person** – ideally already known to the family, who can build a trusted relationship with them, coordinate the assessment and action plan and is a point of contact for the family.
- **A Team Around the Family (TAF)** – the lead person and the family together identify who else needs to be involved to contribute to the actions needed. This can include other agencies but also people from within the family network.
- **Early Help Assessment and Plan** – the lead person and the TAF work alongside the child, young person and family to identify strengths, worries and actions. Actions are agreed, coordinated and regularly reviewed.
- **Information Sharing and Consent:** Safe information sharing is essential for a plan to be effective. Families are actively involved and provide consent for information to be shared.

## STATUTORY AND SPECIALIST SERVICES

These services are generally accessed following specific assessments to establish need and criteria for the service. Universal services should remain informed and involved, to ensure that children, young people and their families continue to receive ongoing support, regardless of whether the specialist service remains involved.



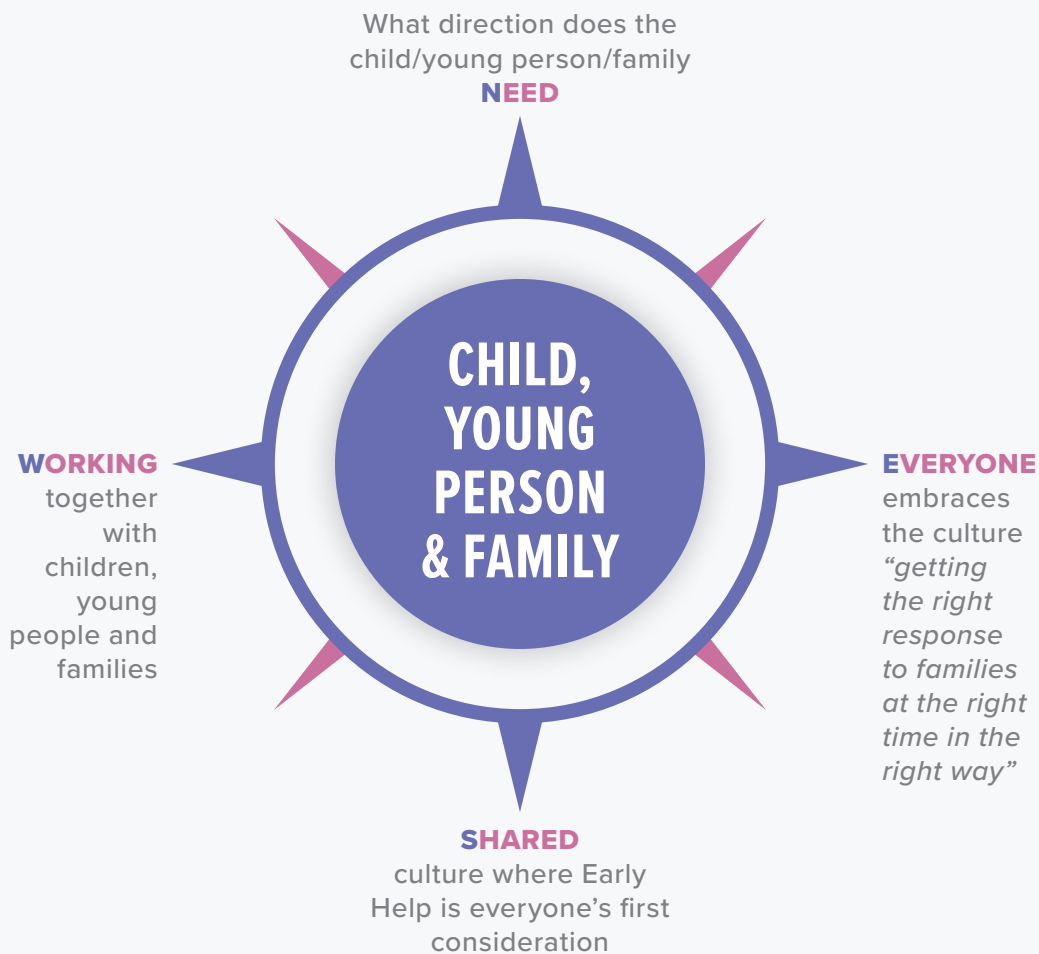
# Navigating the right response at the right time

A new point of contact called **Compass** will be established to help families, agencies and settings navigate to the right information or support. **Compass** will also provide advice, support, guidance and training in relation to how we will work together (Early Help Assessment processes).

**Compass** will include dedicated Early Help Partnership workers from the Council and representatives from a range of other agencies.

The focus of **Compass** is Early Help with a **separate contact for advice or referrals where there are safeguarding concerns.**

**If additional support or services are needed,** a request for help can be made to **Compass** by including the Early Help Assessment and Plan. The request should detail additional information about what the Team Around the Family is worried about that may need additional, targeted support.

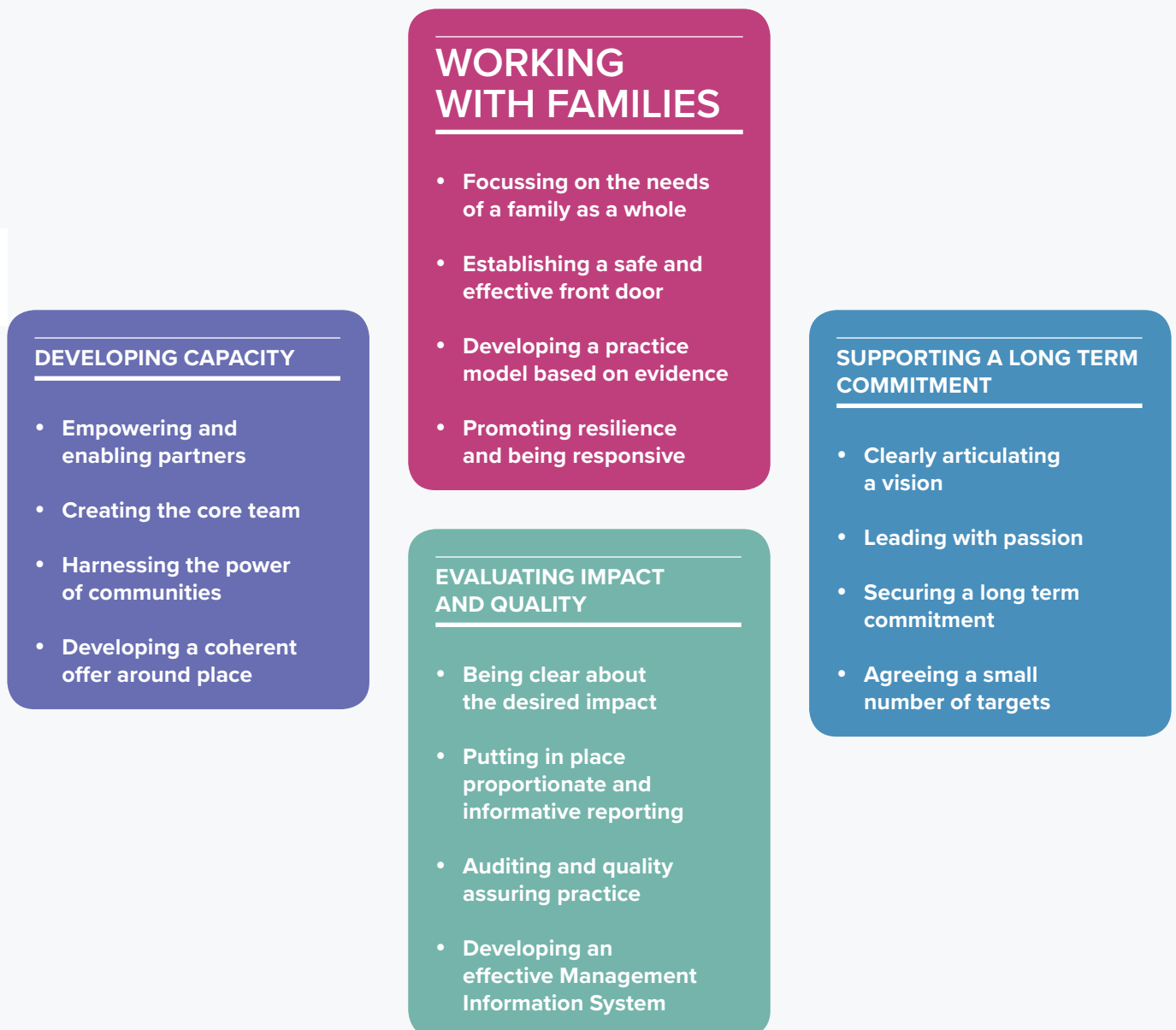


# 11 Making it Happen

Implementation of the Early Help Partnership Strategy will be detailed in a partnership implementation plan covering the life of this strategy (2019 -2024). This will be a dynamic plan which will be reviewed and updated on a six monthly basis to ensure that it is able to adapt to the pace of progress, as well as new developments, research and opportunities.

Recent research\* explored the common elements for success in developing early help for local authorities and their partners, and identified sixteen key enablers which fit within four main dimensions. These are shown in the diagram below. Each local area needs to take their own distinctive approach to early help and our intention is to use the findings from this national research, whilst adapting our approach to the needs of children, young people and families in South Gloucestershire.

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Governance of the Early Help Partnership Strategy will be provided by the multi-agency South Gloucestershire Children, Young People and Families Partnership Board. The South Gloucestershire Local Safeguarding Children Board will have oversight and scrutiny of the Early Help Strategy and will receive an annual report on Early Help. This governance arrangement will be subject to change following the 2019 review of these two boards.

The planning and delivery is not the responsibility of one group or agency, but is dependent on partnership working, resources and shared culture across a wide variety of agencies and settings. The following partners including members of these multiagency boards:

- **Avon and Somerset Police**
- **Avon Fire Service**
- **Bristol, North Somerset and South Gloucestershire Clinical Commissioning Group (BNSSG CCG) and Health providers**
- **Department of Work and Pensions**
- **Further Education colleges**
- **Primary, Secondary and Special Schools**
- **Probation (National Probation Service and Community Rehabilitation Company)**
- **South Gloucestershire Council**
- **Voluntary, Community and Social Enterprise sector providers**
- **Town and Parish Councils**

*\*The key enablers of developing an effective partnership-based early help offer: final research report' LGA & Isos Partnership, March 2019.*



# 12 Glossary

<b>ACE</b>	Adverse Childhood Experiences	<b>JSNA</b>	Joint Strategic Needs Assessment
<b>ART</b>	Access and Response Team (front door to children and young people Council Services )	<b>LAC</b>	Looked After Children (now Children in Care)
<b>BSS</b>	Behaviour Support Service	<b>NEET</b>	Not in Education Employment training
<b>CAMHS</b>	Child and Adolescent Mental Health Service	<b>OfSTED</b>	Office for Standards in Education
<b>CC</b>	Children Centres	<b>PEP</b>	Personal Education Plan
<b>CCG</b>	Clinical Commissioning Group	<b>PLC</b>	Pathway Learning Centre which is the EOATOS service and PRU
<b>CCHP</b>	Community Children's Health Partnership	<b>PRU</b>	Pupil Referral Unit
<b>CIN</b>	Children in Need	<b>Protected Characteristics</b> - Under the Equality Act 2010 the following are protected characteristics; age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, sexual orientation.	
<b>CP</b>	Child Protection	<b>PSP</b>	Pastoral Support Plan
<b>DfE</b>	Department for Education	<b>SC</b>	Social Care
<b>DH</b>	Department for Health	<b>SEMHD</b>	Social, Emotional and Mental Health Difficulties
<b>EH</b>	Early Help	<b>SEND</b>	Special Educational Needs and Disabilities
<b>EI</b>	Early Intervention (sometimes used in place of EH)	<b>Signs of Safety</b> - A model for working with families which balances an exploration of danger/harm alongside indicators of strengths and safety.	
<b>EIF</b>	Early Intervention Foundation	<b>SGC</b>	South Gloucestershire Council
<b>EHC plan</b>	Education Health and Care plan	<b>TAC</b>	Team Around the Child
<b>EOTAS</b>	Education other than at School	<b>TAF</b>	Team around the Family
<b>EWO</b>	Education Welfare Officer	<b>TFI</b>	Troubled Families Initiative
<b>FIF</b>	Families in Focus (local response to the Troubled Families Initiative)	<b>VCSE</b>	Voluntary, Community and Social Enterprise sector
<b>FNP</b>	Family Nurse Partnership	<b>YOT</b>	Youth Offending Team
<b>FYPS</b>	Family and Young People Support Service		
<b>HV</b>	Health Visitor		
<b>IEP</b>	Individual Education Plan		

# Appendix ①

## Statutory Guidance on Early Help

### Working Together to Safeguard Children 2018

Chapter 1 paragraphs 1 to 16 sets out the statutory guidance in relation to:

- Identifying children and families who would benefit from Early Help
- Effective assessment of the need for Early Help.
- Provision of effective Early Help services
- Accessing help and services

#### **Paragraph extracts from Working Together to Safeguard Children 2018:**

1. Providing Early Help is more effective in promoting the welfare of children than reacting later. Early Help means providing support as soon as a problem emerges, at any point in a child's life, from the foundation years through to the teenage years. Early Help can also prevent further problems arising; for example, if it is provided as part of a support plan where a child has returned home to their family from care, or in families where there are emerging parental mental health issues or drug and alcohol misuse.
2. Effective Early Help relies upon local organisations and agencies working together to: identify children and families who would benefit from Early Help, undertake an assessment of the need for Early Help, provide targeted Early Help services to address the assessed needs of a child and their family which focuses on activity to improve the outcomes for the child.
3. Local authorities, under section 10 of the Children Act, have a responsibility to promote inter-agency co-operation to improve the welfare of all children. Identifying children and families who would benefit from Early Help.
4. Local organisations and agencies should have in place effective ways to identify emerging problems and potential unmet needs of individual children and families. Local authorities should work with organisations and agencies to develop joined-up Early Help services based on a clear understanding of local needs. This requires all practitioners, including those in universal services and those providing services to adults with children, to understand their role in identifying emerging problems and to share information with other practitioners to support early identification and assessment.

6. Practitioners should, in particular, be alert to the potential need for Early Help for a child who: is disabled and has specific additional needs; has special educational needs (whether or not they have a statutory Education, Health and Care Plan); is a young carer; is showing signs of being drawn into anti-social or criminal behaviour; is frequently missing/goes missing from care or from home; is at risk of modern slavery, trafficking or exploitation; is at risk of being radicalised or exploited; is in a family circumstance presenting challenges for the child, such as drug and alcohol misuse, adult mental health issues and domestic abuse; is misusing drugs or alcohol themselves; has returned home to their family from care; is a privately fostered child.

11. The provision of Early Help services should form part of a continuum of support to respond to the different levels of need of individual children and families.

12. Local areas should have a comprehensive range of effective, evidence-based services in place to address assessed needs early... Services may also focus on improving family functioning and building the family's own capability to solve problems. This should be done within a structured, evidence-based framework involving regular view to ensure that real progress is being made.

## Keeping children safe in education Statutory guidance for schools and colleges September 2018

Statutory guidance for schools and colleges in relation to Early Help is set out in paragraphs 6, 7 and 27

### **Paragraph extracts from Keeping children safe in education Statutory guidance for schools and colleges September 2018:**

6. School and college staff are particularly important as they are in a position to identify concerns early, provide help for children, and prevent concerns from escalating.

7. All staff have a responsibility to provide a safe environment in which children can learn and all staff should be prepared to identify children who may benefit from Early Help.

27. If Early Help is appropriate, the designated safeguarding lead (or deputy) will generally lead on liaising with other agencies and setting up an inter-agency assessment as appropriate. Staff may be required to support other agencies and professionals in an Early Help assessment, in some cases acting as the lead practitioner. Any such cases should be kept under constant review and consideration given to a referral to children's social care for assessment for statutory services, if the child's situation does not appear to be improving or is getting worse.



# Appendix ②

## National Context - The case for Early Help

### **The Foundation Years, Preventing Poor Children Becoming Poor Adults: Frank Field 2010**

'We have found overwhelming evidence that children's life chances are most heavily predicated on their development in the first five years of life and a shift in focus towards providing high quality integrated services aimed at supporting parents and improving the abilities of our poorest children during the period when it is most effective to do so. It is family background, parental education, good parenting and the opportunities for learning and development in those crucial years that together matter more to children than money, in determining whether their potential is realised in adult life.'

### **A fresh start to tackling youth crime. A briefing for Police and Crime Commissioners. The Independent Commission on Youth Crime and Antisocial Behaviour 2014**

'Policy makers across the political divide have increasingly recognised the potential for well-evidenced prevention programmes to prevent antisocial behaviour and deliver better outcomes for children and young people. The creation of an Early Intervention Foundation (EIF), following reports to the government by Graham Allen MP, is a tangible sign of the shift that is taking place. The EIF's partners in a government-backed What Works Network includes the College of Policing'.

### **Science and Technology Committee Evidence-based early years' intervention - 2018**

'Despite the opportunity presented by such [early] interventions, their provision is fragmented and highly variable across England, with inadequate effective oversight mechanisms for the Government and others to monitor what local authorities are delivering. There is no clear, overarching national strategy from the UK Government targeting childhood adversity or early intervention as an effective approach to address it. Co-ordination between the different Government departments whose areas of responsibility relate to childhood adversity or associated problems could be improved.'

### **Early Help: whose responsibility? Ofsted Thematic Inspection 2015**

This thematic inspection evaluated the effectiveness of the Early Help services for children and families provided by local authorities and their partners. The report drew on evidence from inspection, from examining cases in 12 local authorities and from the views of children and young people, parents, carers, practitioners and managers. It sets out recommendations for Government, Local Authorities and Children's Partnerships.

### **'We Should Have Been Helped from Day One':**

#### **A Unique Perspective from Children, Families and Practitioners. 2013 Findings from LARC5 by the National Foundation for Educational Research.**

'One of the key factors in ensuring families are supported in a timely and effective way, and do not enter a cycle of needing regular support (through the 'revolving door'), is to offer more effective early intervention and preventative advice and support. Practitioners and families agreed that more needs to be done to offer help early through universal settings (particularly in regard to parenting support). Further, they noted that more needs to be done to promote the availability of support services and to correct any misconceptions about local services, particularly children's social care.'

## THE EARLY INTERVENTION FOUNDATION

*The Early Intervention Foundation (EIF) founded by Graham Allen MP became an independent charity in 2013. It aims to assess the evidence of what works, to advise local authorities, charities and potential investors on how to implement Early Intervention and to advocate for Early Intervention to key decision makers nationally and locally, making the case for a pre-emptive approach to social problems and demonstrating why a solid social and emotional foundation for children and young people is so important for individuals, communities and society at large. As a member of the Government's 'What Works Network' EIF has a pivotal role in providing evidence and advice on Early intervention.*

*'For children, better social and emotional skills, communication, the ability to manage your own behaviour and mental health mean a stronger foundation for learning at school, an easier transition into adulthood, better job prospects, healthier relationships and improved mental and physical health. These all result in a greater chance for individuals to flourish, a fairer society and better future parents. Because if we improve the capabilities of our children, we improve the skills and assets of the next generation of parents. Early Intervention represents an intelligent approach to spending. It requires small investments to deal with root causes, rather than the much greater costs of dealing with the after-effects. It allows us to act in a less intrusive, more cost-effective way on to prevent high cost interventions further down the line.'*

*'A child's development score at 22 months already carries information about likely education outcomes at 26 years. A study of boys assessed by nurses at age 3 as being 'at risk' found that they had two and a half times as many criminal convictions as the group deemed not to be at risk at age 21. Vocabulary at age 5 has been found to be the best predictor of whether children who experienced social deprivation in childhood were able to escape poverty in later adult life.' Feinstein Director of Evidence EIF, Dunedin study 2004*

*'There are now a substantial number of early intervention approaches which have good evidence of improving children's outcomes when they are offered in response to identified risks. Early intervention approaches can support the four key domains of children's development: physical, cognitive, behavioural, and social and emotional' Realising the Potential of Early Intervention – October 2018*

*'Studies consistently show that short-term improvements within these four areas of child development can lead to benefits throughout childhood and later life. Long-term benefits associated with effective early intervention include increased income and employment opportunities, reductions in crime and increased life expectancy' Realising the Potential of Early Intervention - October 2018*

# Appendix ③

## Long Term Partnership Performance Measures

Successful Early Help will contribute to long term performance measures. Whilst effective Early Help should have a positive impact on these indicators it will not be solely responsible for them as there are a range of external factors which impact on these outcomes. The measures below are based on the Children Young People and Families Partnership Plan 2016 -2020 and from outcomes which are tracked by a number of different boards and forums. All these proxy indicators are potentially linked to the success of Early Help over time. To enable focus on a small number of key targets, those in **bold** have been identified as the most relevant to Early Help in South Gloucestershire. These will be the focus of monitoring:

- **Number and % of referrals and re-referrals to Social Care.**
- **% of children achieving a successful level of educational achievement at each of the Key Stages.**
- **Increase number of Early Help Assessments.**
- Uptake of entitlement to free child care for eligible 2, 3 and 4 year olds.
- % of children who are 'school ready'
- Reduced gap between the educational attainment of disadvantaged children and their peers.
- Increase in the number and % of young people aged 16-19 starting a traineeship or apprenticeship.
- Increased % of young people who are in employment, education or training (EET).
- Reduced % of children living in poverty.
- Reduction in the number of pregnant women smoking at time of delivery as a proportion of those smoking at booking.
- Increased breastfeeding initiation and at 6-8 weeks.
- Reduction in hospital admissions caused by unintentional and deliberate injuries.
- Reduction in young people who are first time entrants to the criminal justice system.
- **Decreased % of fixed term and permanent exclusions.**
- **Increased % of students attending school regularly and reduction in % of broken weeks.**
- **Reduction in childhood obesity at reception and Y6.**
- Reduction in % of young people requiring high level mental health services.
- Reduction in number of families reaching the threshold as vulnerable victims of domestic abuse.
- Improved perception by the public of anti-social behaviour in the local area.
- Reduction in % of children and young people missing and/or vulnerable to child sexual exploitation.
- Reductions in young people misusing drugs and alcohol.
- Reduction in number of young people reporting as homeless.
- Reduction of inequalities and advancement of equality of opportunity for all protected characteristics.
- Rates of Looked After Children, rates of Children Subject to a Child Protection Plan and rates of Children in Need.
- Decrease in number of teenage parents.

# Appendix ④

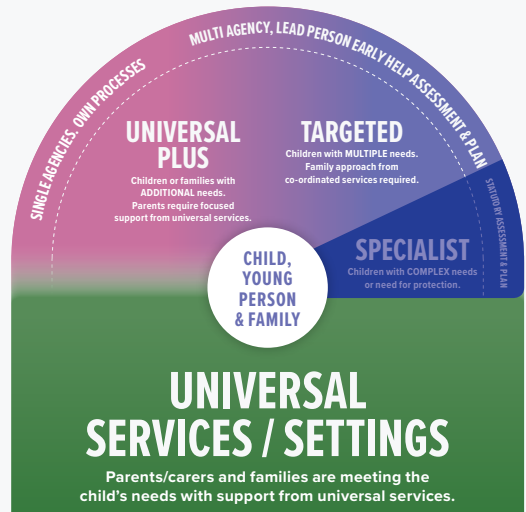
## Early Help Partnership – Early Childhood Opportunities

UNIVERSAL PLUS

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UNIVERSAL SERVICES

Speech & language therapy	Community Paediatrics	Child safety equipment scheme	Early years portage
Independent & financial support agencies	Education Psychologist Support within Schools	Housing support	Young parent support (Parenting and independence skills)
Mindyou Emotional wellbeing website	Parenting programmes (Training Strategy and advice)	Community programmes project and learning to promote life skills Resilience skills development and training	Counselling and wellbeing 1-1 support
Community transport	Peer support programme(s)	Antenatal & Infant mental health services	Targeted parenting programmes for families with early years & teenagers
1 Big database	Relationship courses for adults	Breastfeeding support	Mentoring services
Family lives Parentline family support & bullying	Social and health care drop in sessions	Reach Healthy weight	
Mental Health Voluntary services in the community	Counselling and wellbeing session group or 1-1 support (limited sessions)	Smoking cessation support	
Money management	Transition support in schools	Outdoor activities	
Wellbeing Services NHS and VCSE	Children's centre programmes	Baby Massage groups	
Additional support in schools	Understanding & supporting behaviour	Public Health Nurses (School Nurses)	
Midwives (pre-birth & delivery)	Optician	Breakfast club & after school activities	School / community Health Nurse
Health visitors (under 5)	Dentist	Children's hospital	Libraries membership & events
GP / Practice nurse	Health Clinics	Early years settings & nurseries	Free prescriptions and other health benefits
			Independent financial support agencies
			Voluntary groups
Other related Information and advice	Information, advice and guidance portal	Compass Information	SEND Local Offer



**Orange text** denotes examples of potential development or growth needed.

Debt advice	Toileting, eating/feeding support	Family Nurse Partnership (FNP)
Health specialists	Housing support	Behaviour management
Children's centres	One You South Gloucestershire	Ante natal & infant mental health
Domestic violence support to children & young people	1-1 Outreach Group and 1-1 support	Family & young person support service (FYPS)
Relationship courses for adults		

TARGETED

E.g. social care  
 Child and Adolescent Mental Health Services (CAMHS)  
 Youth Offending Service (YOS)

SPECIALIST

Social groups / clubs	Citizen Advice Bureau	Vocational Education	Online support hub	One You South Gloucestershire
Holiday clubs	Bookstart	Family and Friend support	Childcare funding/ vouchers	Schools
Department for working pension employment	Police	LGBTQ	BME support	
Health promotion campaigns info and advice	Children's Community Health Services	Adult services information and advice	Community learning course 18+	

# Early Help Partnership – Adolescent Opportunities

UNIVERSAL PLUS

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UNIVERSAL SERVICES

<p><b>Drug and Alcohol</b> info &amp; advice in schools</p>	<p><b>Return home interviews</b> (for children who have been missing – FYPS)</p>	<p><b>One You South Gloucestershire</b></p>	<p><b>Community &amp; voluntary sector youth provision</b></p>	<p><b>Independence Training Flat</b></p>
<p><b>Drug and alcohol helpline</b></p>	<p><b>Youth service activities for vulnerable groups</b></p>	<p><b>LGBTQ support</b></p>	<p><b>Community &amp; voluntary sector family support provision</b></p>	<p><b>Young parent support</b> (Parenting and independence skills)</p>
<p><b>Homechoice Social Housing</b></p>	<p><b>Peer support programme(s)</b></p>	<p><b>Children’s centres</b></p>	<p><b>Targeted parenting programmes for families with teenagers</b></p>	<p><b>Targeted Workshops 16+</b> Budget and life skill - Basic cooking &amp; healthy eating</p>
<p><b>Off the record outreach in schools</b></p>	<p><b>Community Transport</b></p>	<p><b>Education Phycologist Support within Schools</b></p>	<p><b>Family nurse partnership</b></p>	<p><b>Virtual School for advice &amp; consultancy</b></p>
<p><b>Unity Sexual Health</b> contraception treatment and advice</p>	<p><b>Parenting programmes (Training Strategy and advice)</b></p>	<p><b>Apprenticeship programme</b> (guaranteed interview scheme for disadvantaged groups)</p>	<p><b>Family &amp; young person support service (FYPS)</b></p>	<p><b>Targeted youth activities</b></p>
<p><b>Sexual health and relationship</b> informed advice</p>	<p><b>Volunteering Matters website</b></p>	<p><b>Community programme’s and project and learning</b> to promote life skills Resilience skills development and training</p>		
<p><b>Community Paediatrics</b></p>	<p><b>HYPE</b> - Helping Young People (children &amp; families) to Engage.</p>	<p><b>Wellbeing Services</b> NHS and VCSE</p>	<p><b>UNIVERSAL SERVICES / SETTINGS</b> Parents/carers and families are meeting the child’s needs with support from universal services.</p>	
<p><b>Mindyou</b> emotional wellbeing website</p>	<p><b>Social and health care drop in sessions</b></p>	<p><b>Counselling and wellbeing session group or 1-1 support</b> E.g. Talking Therapies and Off The Record</p>		
<p><b>FRANK website</b> (drugs information, help &amp; advice)</p>	<p><b>Domestic Violence Information and advice helpline and programmes including Rape and Sexual abuse support</b></p>	<p><b>Transition support in schools</b></p>		
<p><b>Other Mental Health voluntary services in the community e.g. Second Step Rethink Mental Illness</b></p>	<p><b>Money management</b></p>			
<p><b>Schools and colleges Curriculum Personal, social, health and economic education (PSHE programme).</b></p>	<p><b>Careers Planning in schools</b> Vocational profile workbook</p>	<p><b>Employment fairs and events</b></p>	<p><b>Student loans</b></p>	<p><b>GP / Practice nurse</b></p>
<p><b>Peer on Peer education schemes paid</b></p>	<p><b>Police</b></p>	<p><b>National Careers Service</b></p>	<p><b>Duke of Edinburgh</b></p>	<p><b>Public health nurses (school nurses)</b></p>
	<p><b>Schools and colleges work experience programme</b></p>	<p><b>Post 16 further education and higher education local provision</b></p>	<p><b>Student Finance England</b></p>	<p><b>Health Clinics</b></p>
<p><b>Other related Information and advice</b></p>	<p><b>Information, advice and guidance portal</b></p>	<p><b>Compass Information</b></p>	<p><b>SEND Local Offer</b></p>	<p><b>Care Leavers Local Offer</b></p>



**Orange text** denotes examples of potential development or growth needed.

