



Strengthening families strengthening communities

A five year delivery framework for
supporting Troubled Families 2015/2020



achieving
for children

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Foreword

Achieving for Children has been commissioned to deliver the Government's Troubled Families Programme on behalf of the Royal Borough of Kingston upon Thames and the London Borough of Richmond upon Thames. This delivery framework sets out how we will work together to implement Phase 2 of the Troubled Families Programme.

Excellent multi-agency working and practical interventions have helped us to turn around some of the most complex families. Since 2012, we have managed to improve the lives of 415 families across both boroughs. The lessons we have learnt and the experiences we have gained from Phase 1 of the programme have helped us ensure our work with families can be even more effective as we move into Phase 2 of the programme and beyond.

Despite significant progress made, there is still plenty to do. The greater reach of Phase 2 of the programme and tougher financial climate mean that we must be intelligent in our approach to identifying families, understanding what the biggest concerns are and ensuring that we shape services around those needs. We must support families as early as possible, provide a single lead professional and deliver creative and flexible interventions.

All of the families on the current programme are known to more than one organisation and despite the best intentions and numerous separate interventions, for many families the cycles of dependency, poor school attendance and criminality have continued across the generations. This has not only been at a huge cost to the public purse, but at a huge cost to the families themselves. We should not expect the traditional interventions run separately by different agencies to produce different results.

That is why Achieving for Children's approach to the Troubled Families Programme must be different, ensuring that agencies work together with the family and local community to engage and actively challenge each member of the family.

The approach is simple – to work in collaboration with partners to identify the most vulnerable and complex families and to offer an intensive multi-agency intervention programme that addresses the family's needs and supports sustained change to their future lives. This is about systems change and a joined-up approach.

We would like to thank everyone who has been involved in the development of this delivery framework. Working together, we can integrate our services around families and reduce the dependencies and costs of these families on our organisations.

A handwritten signature in black ink, reading "Robert Henderson". The signature is written in a cursive style with a long horizontal line extending to the right.

Robert Henderson

Deputy Chief Executive, Achieving for Children

1. Troubled Families Programme: Phase 2

National position

In June 2013, the Government announced plans to expand the Troubled Families Programme for a further five years from 2015/16 and reach an additional 400,000 families across England. £200 million has been committed to fund the first year of the five year programme.

The Government has identified that 690 families in Kingston and 640 families in Richmond could be eligible for support over the life of the programme.

£1,000 per family will be paid as an attachment fee to Achieving for Children to help establish an intervention service and support. For each family that successfully achieves outcomes, an additional £800 is available.

A grant for the troubled families coordinator, multi-agency team and data analysts has been paid to Achieving for Children. This includes funding to work with the Government on the collection and analysis of evidence to demonstrate what outcomes have been achieved.

Eligible families

Phase 2 of the Troubled Families Programme builds on the existing model, but intends to go further and wider than the previous programme, attempting to reach even more families.

There are now six areas which entitle families to be eligible for the programme. Each family must have at least two of the following six issues:

- parents and children involved in crime and anti-social behaviour;
- children who have not been attending school regularly;
- children who need help, including those in the early years;
- adults out of work or at risk of financial exclusion and young people at risk of worklessness;
- families affected by domestic violence and abuse; and
- parents and children with a range of health problems.

This broader range of areas provides greater opportunity to include more families, particularly those that are not currently eligible, but it requires much stronger partnership working to collectively tackle concerns and measure success.

As with the Phase 1, Phase 2 also uses a payment by results approach and pays additional money where Achieving for Children is able to demonstrate tangible success. Success is measured in two ways:

- sustained and significant progress compared with all the family's problems at the start of the intervention; and
- an adult in the family that has moved off benefits and into continuous employment.

To achieve sustained and significant progress, families must achieve goals and targets against all of the six eligible headline areas as set out in a Troubled Families Outcomes Plan. Outcomes must be tangible and evidence-based.

Measuring success

Success on the programme will primarily be measured through a Troubled Families Outcomes Plan and must cover all of the six headline areas (where they apply). The plan will be used to verify submissions to the Department for Communities and Local Government (DCLG) and to claim payment by results. More information is available in the [measuring success section](#).

Success will also be measured through two national tools: the Family Progress Data Collection and Cost Saving Calculator.

The Family Progress Data Collection seeks detailed information about the characteristics and problems of at least 10% of families across a broad range of public service areas, including health, crime, education, worklessness, child protection and housing, and measures the impact support is having on families. The information will be used to help government map the profile of families reached by the expanded programme and build a strong evidence-base for continued investment ahead of the next central government spending review.

The Cost Saving Calculator is an evaluative tool which enables Achieving for Children and its partners to calculate the savings achieved through the delivery of the current programme, by looking at families actual outcomes before and after intervention. At least 25% of the cohort will be measured.

Verification of results

Achieving for Children will put in place robust result verification and validation systems with the Joint Kingston and Richmond Audit Service so that we can be assured that payment by results claims are genuine and evidence-based. As with the current programme, results will be claimed under the powers of the local authority's Chief Executive.

The Government will undertake regular spot checks of a sample of claims for payment. This will include a review of local authorities' Troubled Family Outcomes Plans.

2. Developing the strengthening families model

In the boroughs of Kingston and Richmond, the Troubled Families Agenda is known as the Strengthening Families Programme. The programme forms one targeted element of a range of services on offer within Prevention and Early Help to children and young people in the local area.

The development of the model for Phase 2 has been based on extensive learning from Phase 1 and the Richmond Phase 2 Pilot delivery, locally (see [Appendix 1](#)) and nationally¹. It has considered the needs of the families that have been worked with ([Appendix 2](#)), the way in which information has been used to identify families and measure success, and how partners have been involved in the development of the programme and in working together to improve outcomes for families on the ground.

The strengthening families approach is underpinned by the belief that families, with the support of local services and the community they live in, can improve their situation and find solutions to problems by building on their strengths rather than their weaknesses. This approach has been built into current practice and delivered through the localities² model.

It has been shaped by the principle that early intervention is always preferable to high cost and intrusive interventions when issues have been allowed to escalate. Although research shows that the most impact can be made during a child’s early years, early help is not just for very young children, as difficulties may emerge at any point throughout childhood and adolescence. Our [Early Help Strategy](#) sets out our approach for addressing this vision in more detail.

Achieving for Children values

The Strengthening Families delivery framework is underpinned by Achieving for Children’s values. The table below sets out how the values are translated into practice.

Putting children and young people first	The child and family are at the centre of service planning and delivery at a strategic and operational level, and are involved in shaping these services to ensure they best meet their needs.
Focusing on quality and innovation	<p>There is one front door into services for children and their families, with expert staff available to ensure they are able to access the right professional at the right time.</p> <p>Families are supported by expert and highly skilled professionals who use evidence-based interventions to effect change, evaluate the impact of the interventions and obtain on-going feedback from families on the outcomes of their work.</p> <p>Partners invest in provision which targets families who are considered as most in need of support from the Strengthening Families Programme.</p> <p>Commissioned services are clearly targeted to meet the needs of individual children and families, based on a sound analysis and understanding of need and evidence of what works best.</p> <p>Data and intelligence is used to shape current and future of services for</p>

¹ Further information: the analysis can be found in the [London Councils report on Troubled Families](#)

² Practitioners in Kingston and Richmond are co-located in a multi-agency environment in nine local areas known as localities. They pool knowledge and resources, as well as to share information and expertise to best support children and families.

	families on the Strengthening Families Programme. It is used to understand the characteristics of families most in need, what resources they are using, how much they cost and how effective they are.
Valuing diversity and championing inclusion	<p>There is a whole family approach based on a family assessment of need, ensuring that each family member has their individual needs identified, and a clear plan in place to address these and the goals to strive for.</p> <p>Families and local communities are supported to help themselves and solve their own problems.</p>
Being a listening and learning organisation	The voice of the child or young person is heard within the assessment and intervention process, and wherever possible, the family owns the assessment and intervention plan.
Working in partnership to improve our services	<p>Partners should commit, wherever possible, to investing resources and funding in early intervention and prevention to ensure that children, young people and families' needs are identified and responded to as swiftly and effectively as possible and to prevent the escalation of need.</p> <p>Families' needs are best met by an integrated and joined-up approach from all the relevant agencies in a 'team around the family' and interventions are coordinated by a lead professional and are reviewed regularly.</p> <p>Families experience a seamless and integrated approach as service users that minimises disruption and inconsistency in their experience of professionals, interventions and services.</p> <p>There is a common process and language for integrated working across all partners and agencies who work with children and their carers, and this is supported.</p>

Understanding need

A number of different data sources³ have been used to identify the key areas of concern for the families being prioritised to participate in Strengthening Families Programme. This intelligence has been used to shape and design the programme and to tailor it to the needs of families in Kingston and Richmond boroughs.

Current thresholds for inclusion in the Strengthening Families Programme are relatively high for the Kingston and Richmond boroughs. As a result, most families in Phase 1 are already known to a number of agencies. Assessments have often already been completed and work to improve outcomes is underway.

Table 2 sets out the percentage and numbers of families that have been identified under each criterion as part of the programme⁴.

³ Data collected from Achieving for Children's Strengthening Families spreadsheet, Common Assessment Framework Analysis and national data as a result of information gathered from the Family Monitoring Tool.

⁴ As at 26 May 2015

	Richmond		Kingston	
Total no. families identified	237		270	
Crime criteria matched	136	57.4%	142	52.6%
Education criteria matched	188	79.3%	172	63.7%
Work criteria matched	195	82.3%	211	78.1%

Table 2: families identified under each troubled families criteria

Family profile

Nationally, data has indicated that the typical troubled family has the following characteristics:

- families have on average 2.5 children compared to 1.7 children nationally;
- 40% of families have three or more children compared to 16% nationally;
- 25% have children under 5 years old;
- 49% are lone parent households, compared to 16% nationally; and
- ethnicity was recorded for the main carer in the family, of which 78% were recorded as White, British.

The nature of the criteria (offending rates and exclusions from school) sways the programme towards older children. At identification, the majority of children were aged between 13 and 17 years old (70.7% Richmond and 61.7% Kingston). The average age is 15 years in both boroughs. This has meant that some families with younger children have not been eligible for the programme, despite the age ranges 0 to 4 (20% Richmond and 23% Kingston) and 5 to 11 (40% Richmond and 39% Kingston) being highly represented in common assessments.^{5 6}

In line with our Early Help Strategy and national research which states the most impact can be made during a child's early years, we will prioritise families from the earliest possible opportunity. This will be undertaken by working with families in children's centres, liaising with health visitors and school nurses.

Boys are over represented in the programme (59% Richmond, 63% Kingston) and this is reflected in all of the criteria particularly offending and fixed term exclusions. This is in line with the data captured in common assessments (65% Richmond, 58% Kingston). Service provision has been tailored to reflect this demographic change with programmes designed to help boys engage in programmes and a good mix of male and female key workers.

Educational issues

Children in a pupil referral unit or alternative provision and those with fixed and permanent exclusions account for considerable numbers of families on the Strengthening Families Programme (79.3% Richmond and 63.7% Kingston). This is unsurprising given that specific concerns around schooling can result in eligibility for entry to the programme. However, the

⁵ As at May 2015

⁶ 37% young people in Richmond and 38% in Kingston aged 12 to 19 have a CAF as at September 2014.

national data suggests a significant level of education challenges and problems face the children in troubled families.

- 46% families included a child with a behavioural problem as assessed by their school.
- 56% of families include a child who has persistent unauthorised absence from school (the official measure for persistent unauthorised absence is 85% attendance or less). To put this into context, nationally around 5% of pupils are persistent absentees.
- 30% have children with a fixed-term exclusion and 16% have children who are permanently excluded.
- 28% have children attending a pupil referral unit or some form of alternative provision.

Crime and anti-social behaviour

In total, 59% of families on the programme in Richmond and 57.4% in Kingston have been involved in crime and anti-social behaviour. This compares to 52.6% of families nationally on the programme. National data breaks this down further by the following information:

- 26% included a young person involved in anti-social behaviour and 11% an adult involved in anti-social behaviour in the last six months;
- 15% of families include an adult with a proven offence in the last six months;
- 6% are identified as having a prolific and priority offender (PPO) in the household. This is someone identified by police and partners as committing a disproportionate amount of crime who will be designated as a PPO under their local integrated offender management programme; and
- 42% had at least one police call-out to the home in the last six months.

Out of work benefits

High levels of out-of-work benefit claims are linked to families on the programme (82.3% Richmond, 78.1% Kingston). This compares to 83% of families nationally on the programme and 17% of all other households.

Naturally, these figures correlate with local data within the Common Assessment Framework, where financial issues feature as one of the top three wider family issues identified through the CAF process, particularly where home situation is the CAF trigger (26.3% Richmond and 13.6% Kingston). More CAFs are initiated in the most deprived areas of the boroughs, notably Heathfield, Whitton and West Twickenham in Richmond and North Kingston and Kingston Town in Kingston.

Of the lone parent families in this group, 83% were not working, compared to 36% of lone parent families nationally. It appears that this group of families is particularly far from the labour market on entry to the programme.

Local concerns

As well as the crime, education and work needs that have been picked up through the identification process, families also have at least one other key issue or area of concern. This has been captured using a variety of local criteria.

Parental mental health and substance misuse

Many parents have experienced or are experiencing some form of mental or emotional health need. One of the primary wider family issues identified in the CAF, particularly under the home situation trigger, is parental mental health. This accounts for 35.8% of families in Richmond and 19.7% in Kingston. These concerns are particularly prevalent in the 0 to 4 age category (40.2% Richmond, 23.2% Kingston).

Nationally, 46% of adults in the Troubled Families Programme have a record of having a mental health problem, and a third of families have a clinical diagnosis of a mental health problem. In addition, there is often a gap in provision as many adults do not meet the high thresholds for intervention from adult social services.

Parental substance misuse is the fourth highest wider family concern in Richmond, particularly under the CAF home situation trigger. This accounts for 19.8% of families in Richmond and 6.8% in Kingston.

Nationally, 14% of families include an adult dependent on alcohol and 13% dependent on drugs. As context, there is a national estimate that 4% of people in England are alcohol dependent. In this sample, 4% of families were receiving treatment for alcohol dependency, a reflection of very severe alcohol problems.

Parental domestic violence

Domestic violence is also a prevalent feature in the families being worked with. Data from the Multi-agency Risk Assessment Conference (MARAC) (part of a coordinated community response to domestic abuse) has been used to include families in the programme as have records of police call outs, but often domestic violence remains unreported or the victim withdraws their allegation, so it is difficult to identify and measure improvement.

As at September 2014, CAF analysis shows that domestic abuse has been one of the key wider family issues, particularly featuring under the home situation trigger, accounting for (36.6% in Richmond and 17.7% in Kingston). It features particularly highly in the 0 to 4 age range and in the most deprived localities of the boroughs.

Nationally, 29% of troubled families were experiencing domestic violence or abuse on entry to the programme. This compares to around 7% for the general population nationally. In a survey of troubled family coordinators, 60% said that less than half of the cases that involved domestic violence were known about at the point of referral.

The prevalence of domestic violence experienced by families has frequently been cited by troubled families' coordinators as a major concern, one borne out by this data.

Special educational needs

In Kingston and Richmond there has been a notable increase in the number of children identified and diagnosed with special educational needs (SEN) and disability. This is as a result of more children being born with difficulties and those difficulties being identified and diagnosed more quickly.

Many of the families on the programme have a child with additional learning needs or a disability who is being supported in school or by other providers. This is replicated in national data which has found that 39% of troubled families have a child with SEN, compared to 19% of the national average.

Children are presenting with more complex needs which can mean that parents and schools find behaviour more challenging, and additional resource or support is needed from specialist providers. This is particularly notable with pupils moving into adolescence.

At its worst, these issues manifest as a breakdown in the family home and the school stating that they are unable to continue to meet the needs of the pupil.

There has also been a steady increase in children receiving a diagnosis of autism, with autism currently accounting for 31% of children with a statement of special educational needs. Since 2012 the total number of pupils with a main presenting need of autistic spectrum disorder has increased by 9% in Kingston and 45% in Richmond.

Nationally, 20% of troubled families have children who have been clinically diagnosed with attention deficit hyperactivity disorder (ADHD). As context between 2% and 5% of children in the UK population are estimated as having ADHD.

Parenting and involvement with children's social care

Another local indicator that has been used to include families is whether they have had any involvement with Children's Social Care within the last three years. This measure often indicates that there is underlying child protection or child in need concerns that need continued support delivered at a lower level. It also highlights where parents have parenting problems often as a result of their own parenting experiences.

Many of the children on a CAF have been stepped down from Children's Social Care, indicating that there is still a significant level of support needed to ensure that families are back on track and effectively dealing with concerns. Of the home situation trigger, 27.8% in Richmond and 19.7% in Kingston were cases held by Children's Social Care.

Nationally, of the sample, 23% have children identified as a child in need⁷ and 12% of families have children on a child protection plan. The data shows that 6% of troubled families have children who are being looked after by the local authority. This suggests a high crossover between the children that social services are most concerned about nationally and the troubled families population.

A significant proportion of families have been assessed by the key worker as having parenting problems. The experience of the Troubled Families Programme is that many parents in these families do not have experience of being parented well themselves. Practical help with setting routines and boundaries for children and giving praise is a core part of how family intervention key workers support families.

Child sexual exploitation

Child sexual exploitation is when children and young people receive something as a result of performing and/or others performing on them, sexual acts. Those exploiting the child or young person have power over them because of their age, gender, intellect, physical strength and/or resources. Although there are very low numbers of young people who have been sexually exploited in Kingston and Richmond, those who have been are known to be missing education, are known to police and have involvement with social care.

Areas of local deprivation

Kingston and Richmond are amongst the least deprived boroughs within London; however there are pockets where poverty and deprivation is more pronounced, and we have found that more of our troubled families live in these areas. Families are often living next to some of the most affluent areas in London.

⁷ Children who under Section 17 of the Children Act 1989 have been identified by children's services as being likely to have their health and development impaired without support, the key issues are likely to be abuse, neglect or family dysfunction

In Richmond, the wards of Heathfield, Hampton North, Whitton and Ham, Petersham and Richmond Riverside have significantly higher percentages of children living in low income families than the rest of the borough. In Kingston, three wards, Norbiton, Tolworth and Hook Rise and Chessington North and Hook, have the highest percentages. Social housing pockets in Coombe Hill, Old Malden and Berrylands also show high percentages.

Families in these areas are supported through Achieving for Children's localities model where practitioners work in a multi-agency environment to deliver interventions in the local area, through children's centres, schools or youth centres.

3. Designing and consulting on the model of delivery

The breadth of the new programme means that our strategic ambitions must be integrated to demonstrate tangible success across all the work we and partner agencies do. It must be about practical, joined up solutions for families, whoever their services are delivered by alongside of maximising the use of partnership resources and intelligence.

Therefore, families identified as part of the Strengthening Families Programme will be supported by every practitioner working with children, young people and families, whether that is in a children's centre, school or doctors, with the Family Support Service, educational welfare, police, probation, JobCentre Plus, health agencies, Children's Social Care or Youth Offending Service. This will be joined up through integrated assessments and implemented through joint mechanisms such as the team around the family meetings.

A partnership approach was adopted to help design the strengthening families' model. Key stakeholder partners have shared knowledge and intelligence about the type of support that is most needed for these families and the needs that are most prevalent. They were involved in determining how support for families is prioritised, what success means, as well as shaping the menu of support that they can access alongside of shaping up governance arrangements for the programme delivery.

This delivery framework is owned by all agencies and sets out the local areas' commitment to working together to support the Strengthening Families Programme.

4. Implementing the strengthening families model

The Strengthening Families Programme represents one targeted element of a range of services on offer within Prevention and Early Help to children and young people in the Kingston and Richmond boroughs.

The families that are eligible for the programme must have three defining characteristics. They must:

- have a multitude of differing problems and issues;
- use many services across the borough and therefore be of high cost to the public purse; and
- have a chance of turning their lives around with the targeted support of different agencies.

The small number of families who are included on the programme must meet a number of set national criteria and local priorities, as well as give consent to participate. The national criteria are the main areas which the Government considers to be the indicators of a troubled family. The local priorities are the issues key organisations in the Kingston and Richmond boroughs have deemed to be of greatest concern.

Families will continue to receive support from all of the services currently in place in children's services as well as additional and priority support from a strengthening families multi-agency team. By being part of the programme, these families sign up for additional help and money, but they also form part of the national programme and the monitoring and evaluation that accompanies it (see section on success measures). Lead professionals must also recognise that they will need to work with the Strengthening Families Coordinator and data analysts to support this.

It is important to state that not being eligible for the programme does not preclude families who need help from receiving it. They will continue to be supported by the range of agencies who currently work in children’s and family services.

Figure 1 shows where most families on the Strengthening Families Programme are expected to be on the continuum of need.



Figure1 Continuum of need

Governance of the Strengthening Families Programme

To oversee the delivery of the programme and to ensure that there is a clear partnership approach both strategically and operationally, two multi-agency stakeholder groups have been established with clear terms of reference:

- The Strengthening Families Strategic Group is made up of senior officers within children’s services, police, health, CAMHS, JobCentre Plus, children’s centres, the voluntary sector, schools and housing. The group takes a borough-wide approach to the management and leadership of the Strengthening Families Programme, sets the strategic direction, looks at emerging trends and provides and marshals resources to tackle problems identified. It meets quarterly.
- The Strengthening Families Partnership Forum is an independently chaired, multi-agency operational group which oversees the progress and tracking of individual families. It will focus on operational issues and ensure the integrity of the programme. It will make sure that the interventions and resources are in place from all agencies and all agencies help families achieve their goals. It will meet monthly for the first three months of the programme and then quarterly, before the strategic group.

The Strengthening Families Multi-Agency Team

A Strengthening Families Multi-Agency Team has been established with the aim of providing additional capacity and expertise to families identified as eligible for the Strengthening Families Programme across Kingston and Richmond.

The service is coordinated by the Strengthening Families Coordinator and includes designated key workers with specialism in adult social work, parenting, domestic abuse, adult substance misuse alongside employment advisers seconded in from the DWP.

The programme is also supported by two data analysts to gather and utilise local intelligence to enable effective prioritisation of families and ensure that the goals and targets set for each family are monitored and reported to government and that payment by results are claimed.

Accessing the Strengthening Families Programme

Nominations route

External agencies and practitioners can access the programme through a nominations route to the Single Point of Access (SPA) using the SPA referral form. The form captures the key details of the family and the criteria they meet to access the programme. The family's consent must be sought before a nomination can be made.

The SPA will provide an initial screening of the nomination against agreed criteria shared with the team. If the nomination about a family is already allocated to a service or lead professional, the nomination details will be sent directly to the Strengthening Families Coordinator who will make direct contact with the lead professional.

Nominations that have not been allocated to a service or lead professional will go for assessment with the relevant team (Children's Social Care or Early Help Services) as is normal practice. The Lead Professional will be responsible for brokering Strengthening Families support.

The internal nomination process will be established in line with AfC internal business processes to ensure right families are prioritised in consultation with respective service managers. The internal nominations process will be publicised internally and reviewed periodically to ensure it is fit for purpose.

Once the nomination has been made, the coordinator will double check the family's eligibility (national criteria and local priority) then send the information to the strengthening families data analysts to find the evidence-base for each of the identified criteria against the data sources they have access to. If a family does not meet the eligibility criteria, they will continue to receive support through Children's Social Care, Family Support Service or the Youth Offending Service.

Families only need meet one of the following local criteria to be included in the programme. For Phase 2 the strategic criteria will be:

- any child stepping down from a child protection plan to become a child in need;
- children who are at risk of child sexual exploitation;
- children who are 2 years and eligible for funding for free childcare;
- parents who have been recorded as victims of domestic violence;
- parents who have reported misusing alcohol and drugs;
- parents who have been recorded with mental health or emotional wellbeing concerns; and
- children who have been diagnosed under an education, health and care plans with autism or ADHD.

Once the families meet the criteria, the nominations will go through a strengthening families checkpoint process, to be prioritised based on the number of strategic local priorities the family meet, as well as:

- the number of agencies the family is currently working with (as a proxy for high cost); and
- what the likelihood of turnaround is.

Once the decision to include the family on the programme has been made, the coordinator will determine the level of support the family needs to achieve progress and success.

Data identification

Families can also be included on the programme via a data identification process. Each quarter, data analysts will look at a range of data sources to help with the identification of families who have not yet been included on the programme. This will also include key intelligence sources from partners, for example, names of families that may be at risk of financial exclusion as a result of welfare reforms, or families who are known to police through their localities workers.

After the eligible families have been identified though the data route, they will go to the checkpoint for prioritisation in consultation with respective service managers from Referral and Assessment, Child Protection Team, Disabled Children’s Team or Family Support Services.

Prioritising the needs of families

Once a family’s needs have been assessed, they have been deemed eligible and have consented to participate the Strengthening Families Programme, the checkpoint group will prioritise them into three levels of need. See figure 2 below.



Figure 2: Hierarchy of needs

High or complex needs

Those families that need most help will be supported by a Strengthening Families Multi-Agency Team, providing the additional capacity if required to identify and resolve long standing and deep-rooted problems. These families will also have priority access to the additional expert help that is offered by the Strengthening Families Multi-Agency Team and a budget to help the lead professional support specific needs of the families, for example providing school uniforms or home maintenance.

Additional expert help

Families that need expert help to move forward, for example, help in getting back to work, or support to tackle a mental health issue, will be provided with expert help from the Strengthening Families Multi-Agency Team. This additional support will complement existing initiatives to improve the families' outcomes. All families eligible for the programme will have priority access to the officers providing expert help. A budget to help the lead professional support specific needs of the families is also on offer. This may be delegated to the family so they can commission support directly.

Monitoring

Families eligible for the programme who are working well with their current lead professional will be included in the programme, but the Strengthening Families Multi-Agency Team will not provide any additional resource, although access to a budget will be available to help the lead professional support specific needs of the families may be on offer. The progress of these families will be monitored by the Strengthening Families Coordinator to ensure that they are meeting their goals, keeping on track and do not deteriorate.

Integrated working and strengthening families

Team around the family model

The 'team around the family' model, supported by a lead professional, is integral to the strengthening families approach in Kingston and Richmond, as it is throughout Achieving for Children and its partners. The model provides a foundation for all agencies working with children, young people and their families so they are able to work together, join up provision and provide personalised, wraparound interventions.

The nature and complexity of some of the families involved in the programme means that a multi-agency and co-located approach is needed to support all aspects of an individual's or family's needs. Having local agencies working together in close proximity also allows them to react nimbly and devise pragmatic solutions or workarounds to the barriers they encounter.

Role of the lead professional

The role of the lead professional is pivotal in providing challenge and support to families. The lead professional develops a relationship with the family, getting to grips with the whole family's issues, their strengths and weaknesses and listening to their voice. They work intensively with them to help change their lives for the better for the long term. They are responsible for helping the family navigate the system and coordinate other professionals working with a family.

Common assessments

The family's needs will be assessed using one of three key assessment methods, family Common Assessment Framework (CAF) and team around the family model, asset assessment (Youth Offending Services) and the single, initial, or core assessment (Children's Social Care). The assessments will take into account the needs of the whole family, including any children in the household (including those not receiving direct intervention) parents and any other significant adults. Where the assessment does not capture the whole family because it focuses primarily on the child or adult receiving the intervention (this may be because interventions are being delivered by health or the voluntary sector), a common assessment will be completed by the lead professional in the

Strengthening Families Multi-Agency Team to capture the needs of the whole family holistically.

Personalised, wraparound interventions

Most of the families on the Strengthening Families Programme necessitate personalised, intensive interventions that are highly tailored to the recipients' individual circumstances. This approach answers the 'what's different' question about the Strengthening Families Programme.

Support provided to strengthening families is usually more than statutory services can offer. It is often delivered at home or in the local area because the child or parent cannot or will not attend sessions held elsewhere. A range of different strategies may be used, for example, multi-systemic therapy⁸ or family group conferencing⁹, to look at the dynamics between family members and understand how a child's school attendance or offending behaviour may be influenced by a parent's mental health or substance misuse.

Locality teams

Kingston and Richmond locality teams bring together a range of practitioners and agencies around a local area with the aim of supporting local service development and delivery. The localities enable practitioners to understand each other's roles and work streams and help to make the team around the family model work. They also help to develop a community-based response to working with strengthening families and provide locally based services to target specific needs.

Measuring success and the outcomes plan

Success on the programme will primarily be measured through a strengthening families outcomes plan using a combination of hard data collected from reporting systems and soft intelligence from the lead professional.

The families' needs and areas for improvement will be identified when the lead professional first conducts their assessment. If the family agrees to participate in the programme, the lead professional will work with them over a number of sessions to agree the goals and targets that they would like to work with them to achieve. The targets and goals must link to the relevant national criteria and local priorities that brought them into the programme, for example if they have been included on the programme because the young person has committed an offence, they must show improvement in this area and this must be captured in the outcomes plan.

Progress will be monitored as part of the team around the family and social care reviews, and reported back to the Strengthening Families Team using the outcomes plan. This will help to demonstrate whether improvement has been made and if the family is eligible for a payment by result claim. Although it is difficult to put a timeframe on achieving success, initial support is expected to be provided for six to nine months, with monitoring of the family for up to a year to ensure that success is sustained.

The lead professional plays a vital role in agreeing and communicating what the goals and targets are with each family and in completing the outcomes plan. They must be able to commit to the monitoring and tracking of outcomes of the families they are working with, as it

⁸ An intensive, family-focused and community-based treatment program for chronic and violent young people

⁹ A formal mediated meeting between family members and professionals, such as social workers, about the care and protection of a child or young person

is the assessment of outcomes that enables the data analysts to make the claim for payment by results.

When an outcome plan is completed, any agreed budget will be paid to the lead professional for each family. This can be used to help build resource into complete the paperwork required or used to support the family directly.

Family progress data and cost saving calculator

Success will be measured through two national tools: the Family Progress Data collection and Cost Saving Calculator.

The Family Progress Data collection seeks detailed information about the characteristics and problems of at least 10% of families across a broad range of public service areas, including health, crime, education, worklessness, housing, child protection and housing and measures the impact support is having on families. The information will be used to help government map the profile of families reached by the expanded programme and build a strong evidence-base for continued investment ahead of the next central government spending review.

The Cost Saving Calculator is an evaluative tool which enables Achieving for Children and its partners to calculate the savings achieved through the delivery of the current programme by looking at families actual outcomes before and after intervention; at least 25% will be measured.

The lead professional will be expected to assist the data analysts in the completion of these tools.

Performance management

The progress of families on the programme will be overseen by a number of interested groups, organisations and individuals. A number of key performance measures have been developed to ensure that progress is on track manage overall performance. Performance management oversight will be provided via the AfC Protection and Early Help Performance Board and Strengthening Families Strategic Board.

Training and development

A programme of practical training and development sessions will be run for staff in line with AfC workforce development programme and needs of Strengthening Families programme.

Lessons learnt from Phase 1

Many lessons have been learnt from the implementation of Phase 1 of the Troubled Families Programme and these will be considered as the programme moves into Phase 2.

Lesson 1:

The success of the Strengthening Families Programme relies on a protection and early help approach

Achieving for Children has placed a strong emphasis on the delivery of early intervention and prevention. Services work together in multi-agency teams based in localities. Practitioners use common assessments and are lead professionals. This model of delivery is vital for ensuring that everyone joins up at the earliest possible opportunity. Going forward, the aim is to mainstream the strengthening families model across the whole of Protection and Early Help, and Social Care.

Lesson 2:

The need to build stronger partnerships and ensure multi-agency leadership

Following Phase 1, it was recognised that more engagement with partners was required so we could work together to identify families eligible for support, deliver multi-agency interventions and to measure and then celebrate success.

As a result, greater efforts have been made in Phase 2 to consult with partner agencies and ensure that they are able to contribute fully to the design and implementation of the programme. Two multi-agency groups have been established – a Strengthening Families Strategic Group that provides leadership across the programme and a Strengthening Families Panel that decides at an operational level which families are most in need and can access the programme.

All agencies will also have a greater understanding about which families are receiving support from the programme.

Lesson 3:

Phase 1 was too restrictive and focused on older children

Despite being a troubled family, a number of families were not eligible for the programme as they didn't meet the national criteria for the programme. This was particularly the case for children in the early years. The national criteria swayed the programme towards families with teenagers. Phase 2 is less restrictive, so a broader range of families is on the programme. The local priorities take into account the particular needs of the two boroughs so will reach those that need the most help (see section on understanding need).

Lesson 4:

Inter-agency information sharing is essential

Data sharing agreements between key agencies have enabled services to share information about families that were eligible for the programme, as well as when progress had been made in a timely manner. Without this, the programme would have stalled. There were, however, some difficulties experienced with health services as their data sharing arrangements prevent sharing child or family level data, and this has not yet been fully resolved.

Lesson 5:**The lack of DWP advisers in Kingston and Richmond has prevented progress to work for families**

Kingston and Richmond were not eligible for DWP adviser support which left a gap in the support provided to parents wanted to get back into work. Around 80% of the families on the programme are claiming out of work benefits so the impact has been significant. Two advisers have been employed for Phase 2 which should help to provide more tailored and practical support in getting parents back into work.

Lesson 6:**Central funding enabled targeted, specialist support and should continue**

In a context of on-going spending reductions, the funding received as part of the Troubled Families Programme has helped to support and embed the early intervention and prevention model in Achieving for Children. The funding has also enabled the analysis of data and cost savings of the programme.

Troubled families cases studies

Case one

Family composition and situation

Mother, father and two children aged between 13 and 18

The family have been known to social services for approximately 16 years. The case was stepped down to Early Help Services approximately 11 months ago. Both parents have had substance misuse problems, predominantly with heroin and alcohol. Dad has been sober for approximately five years and mum has just completed a period in a rehab clinic. Dad has openly disclosed his trouble with the police as a younger man, and a recent incident with his neighbour that could lead to a custodial sentence. Both his children have been affected by their parent's drug and alcohol use especially due to diminished parenting capacity. The younger child is a 14 year old boy and has a diagnosis for Attention Deficit Hyperactivity Disorder (ADHD). The main concern is for both children due to anti-social behaviour and non-school attendance

Since being involved with the Strengthening Families Team (SFT)

The allocated SFT key worker recognised there needed to be an intensive intervention package delivered to this family through a multi-agency approach. Through information derived from the Common Assessment Framework (CAF) the worker ensured regular professionals meetings took place to complement the team around the child (TAC) approach.

Through information sharing and robust planning, tasks were delegated to all professionals involved to ensure specific outcomes were met. Thus, the younger child's anti-social behaviour decreased and his school attendance improved. At this point, it is important to highlight that this would not have been possible if child and adolescent mental health professionals had not been fully committed to this intervention due to their expertise with ADHD.

Furthermore, the Special Educational Needs Service worked very closely with the SFT key worker to ensure the younger child was able to access the curriculum by being placed in an appropriate educational establishment. Finally the SFT key worker organised for both parents to receive one-to-one parenting through Triple P¹⁰ to help introduce effective boundaries into their parenting style.

Outcomes achieved

Parents were able to introduce effective boundaries by completing a Triple P parenting course with both parents, which in turn enhanced family life.

Parents were able to successfully administer their sons ADHD medication which helped facilitate an improvement in educational attainment and a reduction in anti-social behaviour, which in turn contributed to an improvement in family life.

Both mum and dad were able to access potential training opportunities to improve chances of gaining paid employment.

¹⁰ a parenting programme which gives parents simple and practical strategies to help them confidently manage their children's behaviour, prevent problems developing and build strong, healthy relationships.

Case two

Family composition and situation

Single mother and four children aged between 6 and 18

The family has a long history of involvement with social services that spans across 10 years. Both older children have been on children in need plans and have performed fairly badly at school. Their mother has experienced domestic violence with previous partners and suffers from acute mental health concerns. Mum disclosed being sexually abused as a child and having experienced the care system from a very young age.

Mum has been arrested on numerous occasions for possession of illegal substances with intent to supply. The eldest son has been involved in anti-social behaviour and been arrested for possession of cannabis. Mum is currently experiencing issues with her finances and has raised concerns around being able to keep up with general household payments.

Since being involved with the Strengthening Families Team

Initially, the family were very reluctant to engage with services due to negative experiences with social workers. However, through perseverance and non-judgemental way of working, the allocated key worker was able to build a positive relationship. Consequently, he successfully completed a CAF assessment which in turn informed his interventions to meet positive outcomes alongside other agencies.

Teachers, mental health professionals and SFT key workers worked to support the children to improve their school attendance and improve the home environment through targeted work around mental health concerns.

Outcomes achieved

An adult social worker facilitated the mother's access to mental health support, initially through counselling services to improve her wellbeing.

There was a reduction in anti-social behaviour due to one-to-one work with SFT key worker.

The eldest son was successfully introduced to potential training opportunities through working with SFT key worker.