# Schools Forum – Central Expenditure Contribution Impact Statement

Schools Forum contribution underpins early help, preventative and targeted support and intervention for families in Nottingham City.

## Overview of the Services: Early Help and Targeted Family Support

Total Budget:	Early Help - £6.266m
	Targeted - £4.538m
	TOTAL - £10.804m
CEG Contribution:	£0.981m
Other Contributions:	£1.049m Youth Justice Board
	£1.430m Public Health
	£0.404m Priority Families
Number of Children Supported:	Circa 20,550 per annum

# **Funding Allocation:**

Area	Intervention	Reach
Case	Case Management of Targeted Family	Circa 2,500
Management	Support (whole family or child only). This	TFST (per year)
– Priority	includes:	Circo OFO Forby
Families / Child Only	<ul><li>Engagement (gaining consent)</li><li>Assessment of needs</li></ul>	Circa 950 Early Help (per year)
Offind Offiny	- Development of a tailored plan	ricip (per year)
	- Regular safeguarding visits and direct	
	work with families	
	Brokering support from other partners to meet identified needs	
	- Escalation to Children's Social Care (CSC)	
	- Supporting sustainable de-escalation	
	from CSC	
	In Targeted Family Support cases are open for 6 months on average. In Early	
	Help cases are open for 3 months on	
	average.	
Parenting	Delivery of Triple P Parenting, Non-	See below for
Programme	Violent Restraint, Teen ADHD	course by
Delivery	Programme, Caring for Kids, Stronger	course analysis
	Families (delivered in partnership with WAIS).	
Family	See Case Study attached.	Brokered on a
Network		case-by-case
Meetings		basis.
Children's	CCs deliver open access and targeted	207,948
Centres &	services for families with a child aged 0-5	attendances –
Play and	years (also work with siblings). Outreach	17,105
Youth	for particularly vulnerable parents	individuals
Services	(targeted groups are CiN, SEND, DV,	14,511 children

Teenage Parents and Workless	registered at
Households).	CCs.
Play & Youth Services deliver open	10,873 reached.
access and targeted play & youth	2530 of target
sessions. Youth service delivers themed	group reached
projects on key PSHE areas to build self-	with 2214
esteem and confidence. Examples are	sustained
CSE, bullying, DV and positive	contact.
relationships.	

#### **Intended Outcomes:**

- Improved resilience in families by reducing financial vulnerability, reducing worklessness and increasing work readiness.
- Improved attendance at school and behaviour in the classroom leading to a reduction in exclusions
- Reduction in trilogy of risk factors substance misuse, parental mental health and domestic violence.
- Improved parenting skill and competence
- Early intervention and prevention reduction in the number of families requiring more specialist intervention or children being accommodated.
- Reductions in behavioural issues, youth offending and broader impact on communities
- Improved personal, social and emotional wellbeing of children and young people.
- Improved school readiness and earlier identification of additional needs.

#### **Impact**

### **Priority Families**

Below is a summary of some key outcomes data in relation to the impact of our intervention for families.

- Worked with nearly 1500 families in Phase 2 of the Priority Families Programme.
   Average length of intervention is 6 months and have to evidence that outcome is sustained for up to 3 terms (depending on the need identified).
- The majority of Nottingham's Priority Families are supported by Nottingham City Council's Early Help and Targeted Services.
- Claimed for significant and sustained progress for 642 families (over 2,000 individuals) since 2015.
  - √ 30.2% of families (194) had education needs identified at the start of intervention (persistent absence, repeated fixed term exclusion etc.). This totalled 336 education issues and we delivered positive outcomes against 69.6% of those issues identified.
  - ✓ Poor attendance was identified as an issue for 223 individuals in the families above and 186 (83.4%) of those individuals had sustained attendance at 90% or over for at least 3 terms by the end of the intervention.

- √ 58.1% of families (373) had worklessness identified as an issue.

  Worklessness was identified as an issue for 955 individuals within those families and we were successful in supporting 68% (649) individuals to make progress to work or to find work.
- ✓ Domestic violence was identified as an issue in 370 families and 1102 individuals in those families. We were successful in reducing the incidents of DV for 69.6% (768) of those individuals.
- ✓ Health issues (parental substance misuse, parental mental health etc.) were identified in 54.2% of families (348) with 762 individual needs identified. We delivered significant and sustained outcomes against 68.8% (524) of those needs identified.

#### **Parenting Programmes**

Early Help and Targeted Services run 3 types of parenting programmes.

- 1) Under 2s Parents as Early Educators (Early Help)
- 2) 3-8 years Me and My Child (Early Help)
- 3) 8 years + Triple P, NVR and ADHD (Targeted Services)

#### Early Help Programme - Me and My Child

Between September 2016 and June 2017 47 parents have completed the 'Me and My Child' programme to date with a retention rate of 80% on attendance through the first 3 cohorts.

#### <u>Cohort 1 September – December 2016</u>

	Attendees at Start	Number completing course	Percentage completing the course (retention rate)	Average Progress star score at start (out of 60)	Average Progress star score at end (out of 60)	Percentage showing positive impact of course	Number of cases re-referred to CIS following course.
North Locality	5	5	100%	35.6	44	80% (one parent scored lower at the end than at the start)	1 now allocated in EH 1 now allocated in CAMHS
Central Locality	6	6	100%	49.6	58.8	100%	0
South Locality	10	6	60%	43.3	56.3	100%	0

#### Cohort 2 January - March 2017

	Attendees at Start	Number completing course	Percentage completing the course (retention rate)	Average Progress star score at start (out of 60)	Average Progress star score at end (out of 60)	Percentage showing positive impact of course	Number of cases re- referred to CIS following course.
North Locality	9	5	55.5%	47	55	100%	0
Central Locality	6	6	100%	44	53	100%	0
South Locality	8	4	50%	52.75	58	100%	0

#### Cohort 3 April - June 2017

	Attendees at Start	Number completing course	Percentage completing the course (retention rate)	Average Progress star score at start (out of 60)	Average Progress star score at end (out of 60)	Percentage showing positive impact of course	Number of cases re-referred to CIS following course.
North Locality	9	6	67%	32	53	100%	0
Central Locality	2	2	100%	60	60	100%	0
South Locality	8	7	87.5%	48	55	100%	0

#### **Targeted Programme - Triple P, NVR and ADHD**

Between November 2016 to July 2017 177 parents/carers of 376 children started the programmes (and have thus received some parenting strategies) whilst 134 parents of 284 children fully completed the programme. This is a retention rate of 70% across all the courses.

# Appendix 1 Parenting Groups November 2016 - July 2017

	Course	Venue	Start Date	Parents starting group	Children	Parents completing	Children	Programme Completion (retention)	Average Pre- course SDQ	Average Post- course SDQ	Percentage showing positive impact
1	Triple P Teen (N)	Southglade	01/11/2016	9	23	4	8	44.4%	22	21	100%
2	Triple P Teen (C)	College Street	02/11/2016	6	14	4	13	66.7%	8.4	6.6	100%
3	Triple P Teen (S)	Trent Vineyard	04/11/2016	12	22	7	16	58.3%	20	17	100%
4	ADHD	Mary Potter	28/11/2016	7	17	6	15	85.7%	No data	No data	No data
5	NVR (N)	Bulwell CC	01/12/2016	7	14	2	4	28.6%	23.5	9.5	100%
6	Triple P Teen (S)	Windmill Academy	12/01/2017	9	19	6	12	66.7%	26.5	20.5	100%
7	Triple P Teen (C)	Mary Potter	17/01/2017	8	15	7	12	87.5%	20	14	100%
8	Triple P Teen (C)	Broxtowe CC	18/01/2017	4	13	2	6	50.0%	27.5	No data	-
9	Triple P Teen (N)	Bulwell	26/01/2017	7	18	4	11	57.1%	17	16	100%
10	ADHD	Bulwell	26/01/2017	11	21	7	19	63.6%	22	20	70%
11	Triple P Teen (S)	Clifton YP Centre	27/01/2017	4	10	4	10	100.0%	33	25	100%
12	ADHD	St Ann's	01/02/2017	5	12	5	12	100.0%	25	23	100%
13	Triple P Teen (N)	Sherwood	03/02/2017	5	15	2	4	40.0%	17	14	100%
14	NVR (N)	Sherwood CC	22/02/2017	8	18	4	11	50.0%	22	25 (one parent scored their child higher)	
15	Triple P Teen (N)	Bulwell	14/03/2017	5	10	5	10	100.0%	20	16	100%
16	Triple P Teen (S) (Spanish)	St Anns	01/04/2017	2	3	2	3	100.0%	No data		
17	Triple P Teen (C)	Mary Potter	18/04/2017	8	18	7	14	87.5%	21	16	100%

18	ADHD	St Ann's	19/04/2017	2	3	2	3	100.0%	16.5	10.5	100%
19	ADHD	Bulwell	20/04/2017	6	14	5	10	83.3%	25	22.4	100%
20	NVR (S)	St Ann's	27/04/2017	8	19	6	15	75.0%			
21	Triple P Teen (S)	Meadows	28/04/2017	6	8	5	6	83.3%			
22	NVR (C)	Mary Potter	17/05/2017	2	7	2	7				
23	Triple P Teen (N)	Southglade	06/06/2017	13	15	13	15				
24	NVR (C)	Broxtowe CC	12/06/2017	8	10	8	10	Course			
25	ADHD	Mary Potter	15/06/2017	5	10	5	10	Ongoing			
26	Triple P Teen (S)	St Ann's	30/06/2017	8	23	8	23				
27	Triple P Teen (N)	Southglade	03/07/2017	2	5	2	5				
	Totals			177	376	134	284	70%			

High Need 20-40

Some Need 16-19

Low Need 0-15

#### FAMILY NETWORK MEETING CASE STUDY

This case involves 5 children the family network meeting focused on 2 of the children aged 15 and 9. All the children are subject to a CIN plan and have been open since 2015. The 15 year old is living outside of the family home following physical and emotional arguments between him and his mother which took place in front of the other children. The young person is living with his partner aged 17 and his mother. The subject child's mother was unhappy with this arrangement but the young person is refusing to return home. Mother refused to provide financial support to the carer at the arrangement as she felt that this would be condoning him living there.

For this young person the plan was to look at alternative options of where the young person could live in the event of him no longer being able to remain in the current private fostering arrangements and to build the relationship between the young person and his mother and between the mother and the private foster carer. The risk if the private fostering arrangement broke down was that there could have been a family breakdown with a risk of accommodation.

There was also a high level of concern about education; previously the young person's attendance was at 23%.

For the 9 year old the focus of the plan was to support mother to help the 9 year old manage his feelings so that he would be able to stay in school as he has already received 4 exclusions for his behaviour.

#### **Outcome**

The network were able to develop a plan for the 15 year old, they agreed who would be responsible for providing his GCSE books and school uniform.

Mother voluntarily agreed to set up a standing order of the young person's child benefit to the private foster carer.

The young person was able to talk about a very recent incident that had happened at school where school were considering a10 day exclusion. The social worker was able to deal with the issue straight away at the meeting by raising the concerns with the safeguarding lead.

The network also came up with a plan for where the young person could live should he have to leave his carer's home. The plan also included ways in which the mother and young person could spend positive time together.

For the 9 year old the network developed a plan of reward systems should the child manage his feelings so that he could stay in school and provided mother with weekly respite.

#### **Feedback**

The young person attended and said that he had not wanted to attend because of his previous experience of being at meetings however that everyone had the chance to hear everyone's opinions.

They felt every family should be offered the opportunity to have a FNM before a professional meeting as it would help prepare families. That this meeting is different as other meetings you feel that you have to be in fighting mode you don't feel judged.

"It was different to other meetings because we had come up with the plan that we weren't being told what to do".

All agreed that it had gone far better than they thought it would. There was laughter and jokes during the meeting and at the end mother and the private foster carer hugged.