

HAMPSHIRE COUNTY COUNCIL**Report**

Committee/Panel:	Health and Wellbeing Board
Date:	4 February 2015
Title:	Supporting (Troubled) Families Programme
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Report From:	Director of Policy & Governance

Contact name: Ian Langley, Strategic Lead STFP, HCC

Tel: 01962 845722

Email: ian.langley@hants.gov.uk

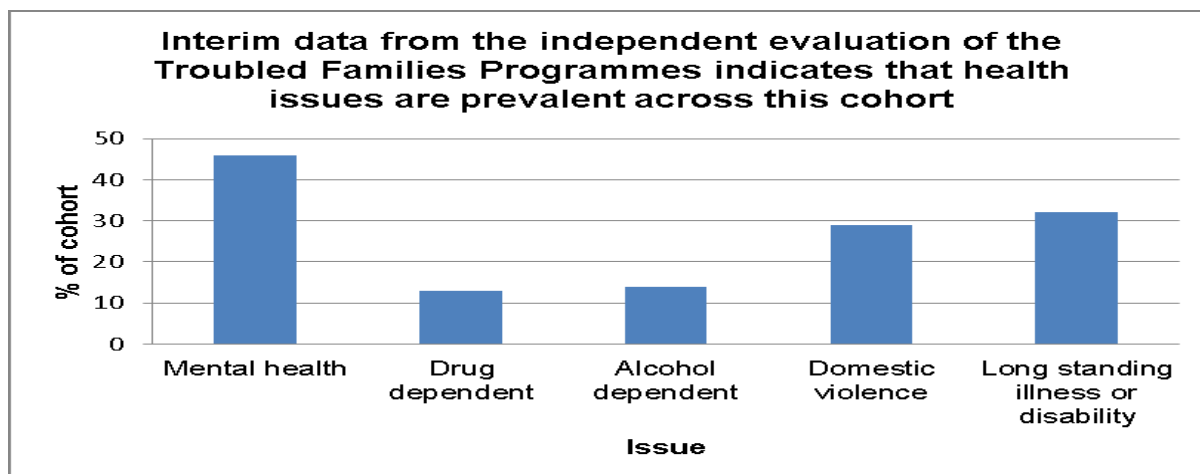
1. Summary

- 1.1 This report provides the Health and Wellbeing Board with an overview of the Supporting (Troubled) Families Programme in Hampshire as it enters its second phase. It outlines continuing strong progress in relation to improved multi-agency contributions and in terms of securing increasing numbers of positive family outcomes.
- 1.2 The second phase of the programme commenced on 1/1/15 and extended the identification of (troubled) families to those with health problems. This paper seeks to highlight the increased engagement from health partners that will be needed in phase 2 of the programme.

2. Contextual information

- 2.1 In 2012, the Government signalled its intent to ensure that 120,000 'troubled' families are 'turned around' by the end of the current Parliament. The programme seeks to reduce the current and future high cost of families on the public purse, improve the effectiveness of current spend and develop a new business model of improved coordination of service provision at a family level. The programme provides an opportunity to empower and support families with multiple problems and ensure that children who need help receive effective interventions and have the chance of a better life.
- 2.2 Improving the health of (troubled) families is critical. This means addressing the wider factors that shape health by working with local partners, and improving access to mental, physical and other health services. It also means improving healthy lifestyles, particularly in relation to multiple lifestyle risks that can be found together, for example, poor diet, alcohol, smoking and substance misuse. Improvements across these lifestyle factors, in turn, improve self-esteem and emotional wellbeing.

- 2.3 A healthy childhood is an integral part in developing a child's ability to learn. Earlier intervention to support better health and wellbeing provides an opportunity to break the cycle of poor outcomes for the future. Crucially it can prevent or delay the onset of health issues later in life, and it also helps to tackle local and national inequalities in health.
- 2.4 Poor health makes it harder for families to secure and remain in work, play a full part in their communities and realise their potential. The cost of crisis also diverts resources from others in need.
- 2.5 In 2013 the government announced that Phase 2 of the programme would be expanded to an additional 400,000 families during the next Parliament from May 2015. The extension of the programme, to agencies working differently and more collaboratively and the commitment to a more family centred approach that aims to tackle broader, underlying issues in a more cohesive, consistent and relentless manner than previously, is not a surprise. The direction of travel whether in this arena, the world of 'better care' or other related areas is very much aimed at improved collaboration, improved use of intelligence and data (obvious digital opportunities) and service provision that better leads to sustained results.
- 2.6 The delivery strategy for the Hampshire programme relies on ten district based Local Co-ordination Groups (LCG's) which are led by a Senior Responsible Officer (SRO) and consist of individuals from the range of agencies involved in working with and supporting 'in need' families. The SRO for each district is listed in Appendix C.
- 2.7 The 'Transform' intensive family support service (IFSS) is available and delivered to over 400 of the more complex families being worked with. The IFSS service provider is voluntary sector based consortium of four local and national organisations led by Barnardos. In December 2014, HCC's Cabinet agreed to extend Transform's contract by a further year until the end of 2015/16.
- 2.8 Participation by families in the programme is voluntary and the written consent of families (which includes permission to share information) is sought. Evidence from the interim independent evaluation of Phase 1 of the programme by Portsmouth University is that the vast majority of families do give their consent and engage with the STFP following an introduction to the co-ordinated support on offer by a professional they trust.
- 2.9 The following graph from the interim evaluation also highlighted health issues that are prevalent in the 1st Phase cohort of (troubled) families.



- 2.10 The positive direction of travel has also been independently endorsed by Ofsted following their recent inspection of services for children in need of help and protection, Children Looked After and Care Leavers (April 2014). Two of the random 20 or so 'open cases' Ofsted reviewed were children who formed part of a 'Troubled Family' and as part of their inspection, they interviewed senior officers involved in the programme. Ofsted concluded:

“The local Troubled Families programme is particularly well targeted and responsive to the needs of families, with good take-up by those families in most need. Although this is a long term programme, the early signs are that it is making a real difference for many families, leading to improved outcomes for families”.

3. Finance

- 3.1 Phase 1 of the programme benefitted from £1.4m additional funding from Hampshire County Council (£500,000 of which was from Public Health). The latter has been used to create Health Trainer posts to work with families, and widen the capacity of the School Nursing Service and the Youth Offending Team.
- 3.2 In the March 2014 budget, funding for the programme nationally was confirmed for 2015/16 and that high performing Local Authorities would be invited to start Phase 2 early in 2014/15.
- 3.3 Currently DCLG provide £4,000 (inclusive of reward) to Local Authorities for each family. In Phase 2 this will fall to £1,800 per family, with £800 reward instead of the current average of £1,600.

4. Performance

- 4.1 The programme has long surpassed the original DCLG target of identifying and working with at least 1,590 families across Hampshire over the three years to 31 March 2015. As at the end of December 2014 nearly 2,000 families had been identified and engaged with. This is positive news in all senses and is being achieved within the overall financial envelope for the programme.
- 4.2 To date six quarterly reward claims have been made to DCLG, and the number of positive family outcomes claimed has risen on each occasion up to

the most recent claim that we have just submitted. The Hampshire programme has never been about 'chasing the money' but that said, the successes to date in terms of family outcomes (now at 1,150 overall) gives confidence that 1,590 positive outcomes will be secured by 31st March 2015 meaning that the full financial provision from DCLG (£5.3m) will be allocated to Hampshire for the obvious benefit of families in need of support.

- 4.3 Within the overall 'successes' to this point, Hampshire continues to lead the way in terms of employment outcomes with 192 of the 1,150 positive family outcomes (almost twice the national average performance) linked to getting adults into work. Employment, self-esteem, economic security, role-modelling different behaviours are all key factors in whether or not and to what extent families will continue to look to, or require, help from public services.
- 4.4 Based on the latest quarterly claim, Hampshire will be one of a number of authorities who has both identified at least the original target number of families (1,590) and achieved positive results (1,150) for more than 65% of the target cohort. This 'double' will allowed Hampshire to be included in a second wave of 'early starter' authorities that begun work on the widened Government programme for 2015/16 on the 1st of January 2015.
- 4.5 Early analysis of the Year One successes (a year on) has shown some very welcome results e.g. 25 of 33 adults who have met the employment criteria, continuing to do so, 90% of families maintaining improved educational attendance, 90% of families maintaining reduced levels of crime and anti-social behaviour and 70% fewer police call outs.

5. Summary of Phase 2

- 5.1 DCLG has given Hampshire a Phase 2 target to identify and engage 5,560 families up to 2020. The 2015/16 target will be 1,112 families which is a significant increase on the current average of nearly 600 families per year.
- 5.2 Phase 1 of the programme used three criteria (youth crime/anti social behaviour, school attendance/exclusion & worklessness) to identify families. These areas all play a part in a family's health and wellbeing.
- 5.4 DCLG suggested 29 criteria that could be adopted in the Phase 2 Troubled Families Outcome Plan (TFOP) in which each Local Authority is required to detail locally agreed criteria to identify under six headings (see 5.6). The progress of families against criteria applicable to them have to be robustly evaluated locally prior to submission to DCLG to consider a reward payment.
- 5.5 During the autumn of 2014 key local stakeholders (including Health partners) were consulted to ascertain their views on what criteria should be contained in Hampshire's TFOP. As a result a TFOP currently containing 14 criteria was implemented on the 1st of January 2015. A copy of the TFOP is attached in Appendix D.
- 5.6 The new criteria fall under the following six headings, the first three of which relate to the current Phase 1 criteria;
 - a) Parents and children involved in crime and anti social behaviour.
 - b) Children who have not been attending school regularly
 - c) Adults out of work or at risk of financial exclusion and young people at risk of worklessness.

- d) Children who need help.
 - e) Families affected by domestic violence and abuse.
 - f) Parents and children with a range of health problems.
- 5.7 The first Phase 2 heading is a widening of the current youth crime/anti social behaviour criteria to include adult offenders within families on a Community Order and those in the last months of a custodial sentence.
- 5.8 The second heading on education attendance is largely unchanged with a focus still on children with poor school attendance or temporarily/permanently excluded.
- 5.9 The third heading shows a broadening of the current criteria to include families at risk of financial exclusion and young people at risk of worklessness. The former will include those families in debt, in particular those at risk of eviction. The latter fits well with HCC's ambition to provide 1,000 apprenticeships/traineeships for young people aged 16 to 23.
- 5.10 The three final headings are 'new'. All have a more specific focus on health and wellbeing. The first of these is 'Children who need help' linking to the Early Help offer and families with pre school children who fail to thrive. Health Visitors will a key group of staff in helping to identify the latter. This heading also includes families with children who go missing which is a key indicator of child sexual exploitation.
- 5.11 The final two headings are of no surprise due to the numbers of families in the current cohort where domestic abuse/substance misuse/mental health issues are prevalent. The final heading also includes families where obesity or malnutrition issues feature.
- 5.12 Families need to meet criteria under at least 2 of the headings in order to be considered becoming part of the Phase 2 cohort. In order to claim a reward payment, success will need to be shown against each of the headings the family met upon entry to the programme. So, if a family meets at least one criteria under each of the six headings, progress will have to be demonstrated against all six in order to be considered as a positive outcome.
- 5.13 The only exception to this remains family members entering and sustaining employment for six months for which a reward can be claimed in it own right. Hampshire should remain in a good position to claim for a good number of families in this way as DCLG have confirmed that the secondment of Job Centre Plus secondees will continue into 2015/16.
- 5.14 Data demands will increase due to the expansion of the programme and DCLG have recognised this by increasing the central co-ordination grant to each Local Authority. Following consultation in Hampshire this additional resource will be used to increase data capacity to work alongside both the STFP central team and the 10 Local STFP Coordination Groups.

6. Other key issues

- 6.1 The expansion in the number of families required to be identified/engaged in Phase 2 against the backdrop of falling DCLG contributions.
- 6.2 The Troubled Families Outcome Plan introduced on 1/1/15 with the 14 criteria to identify and measure/positive outcomes under each of the six Phase 2 headings will need to be promoted with health partners.

- 6.3 The increased reporting and data collation demands in Phase 2 which will be linked to Hampshire receiving the full DCLG grant.
- 6.4 In Phase 2 closer links with a greater range of partners (including health) will be required e.g. the National Probation Service/Community Rehabilitation Company in relation to adult offenders within families.
- 6.5 Ensuring the lessons from Phase 1 of the programme, in particular from the Portsmouth University evaluation are built into Phase 2. A copy of the interim evaluation report is available upon request.

7. Consultation and Equalities

- 7.1 See equality impact statement (section 2 Appendix B).

8. Future direction

- 8.1 The direction of travel for the widened programme has been anticipated for some time. For Phase 2 of the Hampshire STFP to succeed all partners will need to continue to work harder, smarter, and differently to make progress.
- 8.2 We know this will not be easy or straightforward, particularly against the backdrop of continuing financial reductions in the public sector. The leadership challenge will be significant but needs to be moved forward in an open and determined manner in order that scarce resources are better targeted than at present. Additionally, the number of working groups and different but related service initiatives will need to be combined into a set of more coherent local arrangements.
- 8.3 Nationally it has been identified that the health partners could do more in three particular areas to help:
 - 8.3.1 Identifying those families with health needs. This may mean combining data and intelligence from across the health system, and with families' agreement nominating families directly to local troubled families co-ordination groups (see Appendix C).
 - 8.3.2 Ensuring that the local health system is set up to meet families' needs promptly and effectively with other agencies, using clear pathways into the programme, as well as into services that meet the needs of those who are hardest to reach.
 - 8.3.3 Working with the Local Authority and other local partners to develop and deliver integrated services which effectively address families' needs. This may include approaches such as working as part of a multi-agency team, seconding health professionals into troubled families services and referring into existing health initiatives, and sharing information to establish a full picture of each family's needs.

8. Recommendations

For the Health and Wellbeing Board:

- 9.1 To note Phase 2 developments to date and Hampshire's early entry into Phase 2 of the programme on 1/1/15.

- 9.2 To note and actively promote Hampshire's Troubled Families Outcome Plan (Appendix D) to health partners.
- 9.3 To note and act upon the 3 key areas outlined in 8.3, in particular to promote the programme and family centred approach to health partners, especially the identification and engagement of families where pre-school children fail to thrive, domestic abuse exists or where substance misuse or mental/physical health issues are prevalent.

CORPORATE OR LEGAL INFORMATION:**Links to the Corporate Strategy**

Hampshire safer and more secure for all:	yes
Corporate Improvement plan link number (if appropriate):	
Maximising well-being:	yes
Corporate Improvement plan link number (if appropriate):	
Enhancing our quality of place:	yes
Corporate Improvement plan link number (if appropriate):	

Other Significant Links

Links to previous Member decisions:		
<u>Title</u>	<u>Reference</u>	<u>Date</u>
Supporting Troubled Families Programme (Cabinet)	4382	29 October 2012
Supporting Troubled Families Programme update (Cabinet)	5050	22 July 2013
Supporting Troubled Families Programme update (Cabinet)	6028	15 December 2014
Direct links to specific legislation or Government Directives		
<u>Title</u>	<u>Date</u>	
None		

Section 100 D - Local Government Act 1972 - background documents

The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)

<u>Document</u>	<u>Location</u>
None	

IMPACT ASSESSMENTS:

1. Equality Duty

1.1. The County Council has a duty under Section 149 of the Equality Act 2010 ('the Act') to have due regard in the exercise of its functions to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited under the Act;
- Advance equality of opportunity between persons who share a relevant protected characteristic (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, gender and sexual orientation) and those who do not share it;
- Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

Due regard in this context involves having due regard in particular to:

- a) The need to remove or minimise disadvantages suffered by persons sharing a relevant characteristic connected to that characteristic;
- b) Take steps to meet the needs of persons sharing a relevant protected characteristic different from the needs of persons who do not share it;
- c) Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity which participation by such persons is disproportionately low.

2. Equalities Impact Assessment:

- 2.1 An equalities impact assessment was completed by the programme team as part of the initial programme planning in October 2012. This highlighted that the programme may disproportionately impact upon families within particular age groups and families with women in the household due to the current DCLG definition of a troubled family.
- 2.2 This is a positive programme designed to improve the lives of some of Hampshire's most troubled families and communities, and therefore the impacts are likely to be positive.

3. Impact on Crime and Disorder:

- 3.1 A key objective of the programme remains to reduce offending and anti social behaviour amongst families targeted for support.

4. Climate Change:

4.1 How does what is being proposed impact on our carbon footprint / energy consumption?

Not applicable

4.2 How does what is being proposed consider the need to adapt to climate change, and be resilient to its longer term impacts?

Not applicable

STFP Senior Responsible Officers

SRO/LCG contacts

District	SRO	Email
Basingstoke	Mike Penny	mike.penny@hants.gov.uk
East Hants	Jo Utting	joanne.utting@easthants.gov.uk
Eastleigh	Min Partner	min.partner@eastleigh.gov.uk
Fareham	Narinder Bains	nbains@fareham.gov.uk
Gosport	Julie Petty	julie.petty@gosport.gov.uk
Hart/Rushmoor	Qamer Yasin	qamer.yasin@rushmoor.gov.uk
Havant	Tim Pointer	tim.pointer@havant.gov.uk
New Forest	Annie Righton	annie.righton@NFDC.gov.uk
Test Valley	Jan Lefley	jan.lefley@hants.gov.uk
Winchester	Lorraine Ronan	Ironan@winchester.gov.uk

WEBSITE: <http://www3.hants.gov.uk/supporting-troubled-families>

Hampshire Supporting (Troubled) Families Programme

Phase 2: 1 January 2015

