# Index

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foreword</td>
<td>3</td>
</tr>
<tr>
<td>Strategic links</td>
<td>4</td>
</tr>
<tr>
<td>What is early help?</td>
<td>4</td>
</tr>
<tr>
<td>Drivers for change: national context</td>
<td>4</td>
</tr>
<tr>
<td>Drivers for change: local context</td>
<td>5</td>
</tr>
<tr>
<td>Cheshire West and Chester: needs analysis</td>
<td>5</td>
</tr>
<tr>
<td>Vision</td>
<td>7</td>
</tr>
<tr>
<td>Features of effective early help</td>
<td>7</td>
</tr>
<tr>
<td>Principles: Think Family</td>
<td>8</td>
</tr>
<tr>
<td>Cheshire West and Chester early help priorities</td>
<td>9</td>
</tr>
<tr>
<td>Overview of early help and prevention in CW&amp;C</td>
<td>9</td>
</tr>
<tr>
<td>CW&amp;C Children’s Services</td>
<td>10</td>
</tr>
<tr>
<td>What will the Starting Well Service offer in terms of early help and prevention</td>
<td>11</td>
</tr>
<tr>
<td>Key challenges</td>
<td>13</td>
</tr>
<tr>
<td>How will we know if we have made a difference?</td>
<td>13</td>
</tr>
<tr>
<td>Governance</td>
<td>14</td>
</tr>
<tr>
<td>Appendix 1: Cheshire West and Chester Council Plan</td>
<td>15</td>
</tr>
<tr>
<td>Appendix 2: Health and Wellbeing Strategy 2015-2020</td>
<td>16</td>
</tr>
<tr>
<td>Appendix 3: West Cheshire Children’s Trust Children and Young People’s Plan 2015-2019</td>
<td>17</td>
</tr>
<tr>
<td>Appendix 4: Performance measures</td>
<td>18</td>
</tr>
<tr>
<td>Useful links</td>
<td>19</td>
</tr>
</tbody>
</table>
For

ever

This Strategy is a starting point for all West Cheshire strategic partners to consider how early help, delivered in partnership with children, young people and families can improve life chances, particularly for families experiencing complex and multiple difficulties. This means adopting a whole systems approach to service delivery to ensure families receive early help as soon as difficulties emerge.

Evidence and local experience shows that providing help at the earliest stage and the earliest age, working in partnership with the family, increasing the reach of children centres, tackling the root causes of problems, and effectively targeting support makes the biggest difference. This needs partners, including the Council, NHS, early year’s education professionals and the voluntary sector, to work together.

This Early Help Strategy supports and enhances children and families services strategies that currently exist within Cheshire West and Chester Council and describes the most important issues for us relating to early help.

Our priority is to identify, understand and respond quickly to the needs of children, young people and their families. Consistent assessment processes across all early help agencies in west Cheshire will support people to achieve their full potential. Our interventions will help avoid the escalation of problems that many face, will support families to become more resilient and will help them to resolve their problems, avoiding the need for acute services.

Our residents have highlighted that getting the best start in life is important to them. Ranking it as one of their top five priorities, people recognise that getting the right early help will open up opportunities later in life. Our ambition is for children and families to achieve the best possible outcomes and through this strategy we are committed to delivering effective prevention and early intervention for all who need us.

Councillor Nicole Meardon
Cabinet Member for Children and Families
Cheshire West and Chester Council
**Strategic links**
The overarching strategies for Cheshire West and Chester are: Cheshire West and Chester Council Plan; Helping the Borough Thrive 2016-2020, the Health and Wellbeing Strategy 2015-2020 and West Cheshire Children’s Trust Children and Young People’s Plan 2015-2019, detailed in appendices one to four. The Early Help Strategy is aligned to these strategies. In addition, partners have a number of strategies that align with the Early Help Strategy, including the Neglect Strategy of the Safeguarding Children Partnership (SCP)\(^1\), Homelessness Strategy and Housing Strategy.

**What is early help?**
Early help is intervening as soon as possible to tackle issues emerging for children, young people and their families. Although research shows that the most impact can be made during a child’s early years, problems may emerge at any point throughout a child’s life. Effective intervention may therefore be offered at any point in a child or young person’s life in order to prevent problems from being entrenched or escalating. Evidence also suggests that an early response is more effective and cost efficient than a later acute one. Early help is a process which may occur at any point in a child or young person’s life. The continuum of need in Cheshire West and Chester defines the universal plus and partnership plus responses to addressing unmet need.

**Drivers for change: national context**
Early help has been recognised for some time as critical to supporting children to reach their full potential. Ofsted published a thematic inspection of how local partnerships are delivering early help in March 2015. It estimated that over two million children in the UK today are living in difficult family circumstances. Interest nationally is also growing in early help and in particular a need to demonstrate effectiveness in order to produce cost savings in more specialist and acute services.

Investing and developing a systems approach to child and family practice within early help is key to achieving a workforce that is targeted and impactful and improves outcomes for children at a local level. Our local approach is reflective of the national picture driving forward innovative systems changes that have a significant impact on the lives of our most vulnerable through addressing inequality disadvantage. This drive has been reflected nationally drawing on research which has meaningfully influenced and shaped how we create services at a local level.

Our research and values based approach has been drawn from the findings in the Marmot Review: Fair Society, Healthy Lives (February 2010), The Foundation Years: Preventing Poor Children becoming poor Adults (Frank Field December 2010), Early

\(^1\) Cheshire West and Chester Safeguarding Children Partnership (SCP) replaced the Local Safeguarding Children Board on 24th June 2019. The SCP reflects the new duties on ‘three Safeguarding Partners’, namely the Local Authority, Police and Clinical Commissioning Groups to work together, and with other partners locally (known as Relevant Agencies), to safeguard and promote the welfare of all children in the area.

Drivers for change: local context
Expansion of the Troubled Families programme:
Cheshire West and Chester Council became an Early Adopter of the Expanded Troubled Families Programme in January 2015. The local authority initially committed to work with 1730 families as part of the programme with the potential to draw down funding of £4million over the five year period. In June 2016 we agreed to increase the number of families we would work with by 90. This takes the total number of families Cheshire West and Chester will work with to 1820 over the lifetime of the programme.

In the initial programme there were four priorities: crime, Anti-Social Behaviour (ASB), education and worklessness. In the Expanded Programme an additional three priorities were introduced: domestic abuse, health and children who need early help. The expanded programme placed a greater emphasis on getting families into continuous employment and in April 2015 Cheshire West and Chester were allocated two Department of Work and Pensions (DWP) Troubled Families Employment Advisors.

Refresh January 2019:
In March 2018, following a successful spot check in 2017 and work on detailed proposals, Cheshire West and Chester was one of fourteen areas nationally chosen to be awarded ‘Earned Autonomy’ status. This guaranteed Cheshire West its remaining Troubled Families funding by March 2020. The focus as part of this agreement will be to expand the existing multi-agency iART front door arrangements; develop an ICT solution that allows partner agencies appropriate access to e-TAF; and provide additional coordination resource to support the successful rollout of the Winsford Integrated Public Services Hub.

---

**Troubled Families Identification and Prioritisation**

- Family must include:
  - With 1 problem each:
    - Multi-agency multi-profile: multiple problems
    - High risk to public order
    - Back to school guidance

- Family must have a minimum of 2 problems:
  - Minimum 2 Problems within the family where Worklessness is a feature
  - Minimum 3 other problems where Worklessness is not a feature

---
Cheshire West and Chester: needs analysis

The number of children and young people aged 0-19 was 74,400 in 2016 and is forecast to increase by 7% to around 79,500 by 2026. It is vital that they are supported and if the borough is to thrive we must start with our children and young people (2016 mid-year estimates, Office for National Statistics, licensed under the Open Government Licence v.3.0. 2015 based population forecasts produced by Insight and Intelligence Team, CW&C).

We know a child’s family background and circumstances have a huge influence on their later life. For example, children living in poverty may be, developmentally, up to nine months behind children from more advantaged backgrounds by the age of three.

The latest child poverty statistics (HMRC children in low-income families’ local measure) relate to a snapshot of data taken on 31 August 2014. The rate of child poverty for children aged under 16 in Cheshire West and Chester is 15.9%, which equates to approximately 9,230 children. The rate for all dependent children (including 16-19-year-olds who live with parents, are unmarried, in full time non-advanced education or unwaged government training) is 15.5%, which equates to around 10,640 children. These rates are lower than the England average of 20.1% for under 16’s and 19.9% for all dependent children. Though Cheshire West and Chester experiences relatively low child poverty compared to England and the North West, at a very local level some small areas (Lower Super Output Areas) record rates in excess of 40%.

We also know that children in our more deprived areas have significantly higher rates of excess weight and hospital admissions for accidental injury. As well as material poverty, the life chances of children and young people are hampered if families experience wider issues around poor health, parenting, drug and alcohol abuse, worklessness and poor housing. For example in Cheshire West and Chester:

- Breastfeeding rates are worse than the England average – breastfeeding rates at 6-8 weeks were 36.2% in Cheshire West and Chester compared to 44.3% in England (CW&C Insight and Intelligence Team and Public Health England 2016/17).

- In terms of childhood obesity in Cheshire West and Chester 20.5% of reception year children and 33.6% of year 6 children were either overweight or obese in 2015/16 (public health outcomes framework).

There is a significant educational achievement gap between those children who are eligible for free school meals and those who are not, children who are in care and those who are not, and those who receive any form of special educational needs support compared to those who do not. For example:
The percentage of children with free school meal (FSM) status achieving a good level of development at the end of reception year was 46% in 2015/16 compared to 72% of children not eligible for FSM (Department for Education: EYFS attainment data).

Key stage two: of children eligible for FSM, 31% achieved the expected standard in 2015/16, in reading, writing and mathematics at the end of key stage two compared to 56% of their peers (Department for Education: Key stage 2 attainment data).

Key stage four: for children eligible for FSM, the average attainment 8 score at the end of key stage four was 35.9 in 2015/16 compared to an average score of 53.0 for their peers (Department for Education: Key stage 4 attainment data).

Residents reinforced the importance of getting the best start in life, ranking it among the top five priorities overall. There was a recognition that getting this right opens up opportunities in later life and that a family based approach was important. In particular, the services relating to children centres were valued and it was felt that this priority needs to link with supporting families into work.

Vision
Our vision is that through effective prevention and early intervention work the escalation of problems that people face will be avoided and their life chances improved.

Our ambition is that all partners in Cheshire West and Chester will work together to ensure there is a strengths based approach used by all universal and targeted service providers. This can be achieved by the consistent application of the Team Around the Family assessment process to inform a SMART plan; that interventions are evidence based and support children and young people to achieve the best outcomes. This approach will support families to become more resilient, develop their capacity to prevent issues from escalating, resolve problems and avoid the requirement of acute services in the future.

Working together collaboratively we will achieve this by:

- Ensuring all partners understand and apply the continuum of need
- Team Around the Family Assessments and plan are the vehicle used by all partners to provide early help
- Ongoing investment in the Early Help and Prevention service for those families with complex and multiple needs at Partnership Plus
- Effective commissioning, including pooled budgets addressing needs
Features of effective early help
Learning from local serious case reviews has informed practice. The cases taught us that early help must be informed by robust assessments, using appropriate assessment tools. Early help is effective when it is provided to the right families. Accurate application of threshold of the continuum of need is critical to ensure that families receive the right support. Robust supervision in early help cases is critical to support workers in their practice. Supervision and case discussions must develop confidence in practitioners that professional curiosity underpins risk assessment and risk management. Explanation of the symptoms (presenting behaviours) should always be accompanied with hypotheses as to the cause. Robust information sharing is key to a strong multi-agency approach to early help.

- A multi-agency and integrated response that brings a range of expertise through a Team Around the Family approach.
- A relationship with a trusted lead professional who can effectively engage the child and their family and coordinate the support needed from other agencies.
- An approach that empowers the family and helps them to resolve their own challenges and builds resilience for their future. This includes support to move into employment.
- An approach that sees the child or young person’s needs in the wider family context.
- Accessible to all of the community.

Principles: Think Family
A proportion of the adult population experience difficulties which, not only make the individual vulnerable, but can impact on all family members; these include factors such as domestic abuse, substance misuse, mental health and disability. Whilst most of these parents are committed to their children and want the best for them; the presence of additional vulnerabilities can sometimes render the parent/carer unable to provide safe and effective care for themselves and/or their child/children. Therefore, professionals need to think about the needs of the whole family regardless of whether it is an adult or child that they are working with.

When considering any vulnerabilities or risks that have been identified practitioners should consider the support available to the individual and family from extended family, the wider community and other professionals. “Thinking Family” does not require complicated change or for everyone to be an expert in every aspect of family life – it is an approach whereby in their day to day roles, all practitioners across adult and children’s services are identifying, considering and appropriately responding to the safeguarding needs of all family members.
Think Family, places a responsibility on all practitioners to respond to identified issues from signposting and referral, through to providing services. It requires professionals to communicate with others working with different family members and coordinate those efforts for the best outcomes for the whole family, using Team Around the Family (TAF). Think Family should be adopted by all practitioners whether working with children or adults.

Principles of Think Family

1. Working with the whole family requires a co-ordinated approach. Early identification of needs and a timely response is key to supporting families and protecting both children and adults at risk.
2. There should be ‘No Wrong Door’ - contact with any service offers an open door into a system of joined-up support.
3. Providing support tailored to need – working with families to agree a package of support best suited to their particular situation.
4. The wellbeing of children and their families is best delivered through a multi-agency approach with different services across children’s and adults working effectively together.
5. Assessment and subsequent work with families’ needs to be made within the context of understanding their individual circumstances and underpinned by a motivational approach to engaging parents, carers and young people.
6. Parenting capacity is best assessed with the joint input of workers from adults and children’s services with support where appropriate from services with specialist expertise.
7. Family members will be listened to and their wishes and feelings explored. The needs and beliefs of the adults must not marginalise the needs of the children.

Cheshire West and Chester early help priorities

- To identify the needs of children, young people and their families across the continuum of need at the earliest opportunity.
- To understand and respond quickly to the needs of children and young people and families across the continuum of need.
- To support the refocusing of resources from crisis intervention to prevention
- To support families to achieve their full potential and thereby mitigate the impact of issues such as child poverty and health inequalities
- To facilitate multi-agency partnership working to improve outcomes for children, young people and families.
- To consistently apply assessment processes across all early help agencies working in the borough.
Overview of early help and prevention in CW&C

The Safeguarding Children Partnership (SCP) and the Children’s Trust ratify and endorse the continuum of need (CoN). Early help services should form part of a continuum of help and support to respond to the different levels of need of individual children and families. For the model to work, all practitioners, whichever organisation they represent must understand the CoN and apply thresholds accurately and appropriately. It is imperative that all professionals have a good working knowledge of the CoN and where relevant use the SCP Escalation and Resolution Policy when agreement about threshold cannot be reached.

The West Cheshire continuum of need was revised and relaunched in October 2016 and sets out how to access early support, the thresholds for single and multi-agency agency interventions at all levels, and when to consider a referral for a social care led ‘single assessment’.

To support earlier identification and intervention the SCP and Children’s Trust partners are committed to using the Team Around the Family approach to the assessment of the needs of children, young people and their families. Each practitioner has an individual responsibility for commencing a TAF where additional needs are identified. This does not necessarily mean that this practitioner will go on to be the lead professional for a resultant plan. The lead professional needs to be the right one for the child and their family.

Partner engagement with TAF, regardless of the fact it is not a statutory assessment is critical to the child and their family. It is recognised that preventative intervention may reduce the need for further intervention in the future. A Team Around the Family plan should be developed following the completion of the assessment and agreed at a multi-agency TAF meeting.
CW&C Children’s Services
Cheshire West and Chester has a single integrated front door; i-ART (launched May 2016) the single point of contact, relating to children and their welfare, for members of the public living in west Cheshire and professionals such as GPs, health visitors, teachers and police officers. The team offer advice and support families and professionals to receive the most appropriate help with concerns about the welfare of a child and families requiring a multi-agency response and individuals affected by domestic violence and abuse. i-ART works closely with the police and the Domestic Abuse Family Safety Unit. A social work manager is supported by senior social workers, i-ART officers, social workers, early support officers, independent domestic violence advocates and partners from agencies such as health, police, housing and drug and alcohol services.

The Early Help and Prevention Service is comprised of:

- family case work
- support for people affected by domestic violence and abuse
- targeted support services; including parenting support
- support for young people leaving school and moving into further education or employment
- accessible targeted youth services to engage young people across the borough
- community safety to help protect our local communities.

A parenting team will work directly with families at the partnership plus on the continuum providing both one to one and group interventions designed to achieve positive outcomes for families and children. (The following programmes will be delivered across all district areas; Triple P, Triple P Teen and 123 Magic). Working in partnership with both local, regional and national organisations and services we will continue to develop the wider service offer for families, establishing clear pathways to support.

The service aims to take a lead in raising greater awareness of the impact parental conflict has on child outcomes. The service is currently developing a workforce development offer that will equip frontline practitioners with the skills, knowledge and confidence to effectively recognise and respond to inter-parental conflict.

“Being able to identify the signs of relationship difficulties and provide early support to prevent conflict between parents can make a positive difference not only to children’s outcomes, but also to the health and wellbeing of adults and families” Creating a Local Family Offer lessons from local authority pioneers 2017.

The Positive Parenting; Inter-Parental Relationships conference in autumn 2017 acted as a stake holder engagement event and launch of our workforce
development offer and Positive Parenting; Inter-Parental Relationships practitioner toolkit.

Refresh January 2019:

- 123 Magic is now being delivered by partners as part of our Universal offer through schools.
- Youth Connect 5 can be accessed by professional and families through the Local Offer.
- Our parenting Team are delivering Triple P 0-12 years and Triple P Teen along with 1-1 to Partnership Plus families on the Continuum of Need.
- These families are also receiving a group session targeting parental conflict at the end of Triple P courses.
- 2 of our parenting practitioners attended Train The Trainer training in November 2018 which will now allow them to roll our ‘How to Argue Better Training’ to CW&C and Partners.

What does the Starting Well Service offer in terms of early help and prevention?
The Council commissioned a new and innovative integrated ‘Starting Well’ service as of 1 January 2018. This will bring health and education together to provide every child with the opportunity to have the best start in life.

The foundations of this model are based on early identification, early help and prevention. Some examples of how this will be achieved:

- Adopt district teams that will work more closely to develop a deeper understand of the local populations’ needs and use the varied and specialist skills within these teams to respond to need more efficiently.
- Potential to streamline referral processes due to the single workforce being created.
- Early years workers with a caseload of targeted families will be working hand-in-glove with health visitors and the wider workforce to better support the families’ needs.
- Potential to support the child/family beyond the traditional ‘handover’ between health visitor and school nurse (public health nurse) as the child approaches five years. As a single service – if the child or family benefit from remaining with the staff member responsible for their care, this will happen. It means that the child or family will transition to the next phase of the Starting Well pathway when appropriate.
- Integrated 2 – 2½ year review.
- Workforce development and capacity building knowledge exchange and upskilling the workforce.
• Raising the standards of early identification by facilitating brief intervention training towards ‘making every contact count’.
• Lead family nurse will also become the Starting Well workforce development lead – ensuring specialist skills and knowledge is shared across the workforce.
• Mapping the 0-19 years pathway to ensure the service is working towards high impact areas/areas of priority to achieve an outcomes-based mantra.
• Sharing the Starting Well pathway with wider partners to ensure a joined-up approach to early identification and partnership working. This includes: ensuring evidence of the use of the SCP Multi-Agency Assessment Toolkit is captured and monitored; embedding the Future in Mind ‘THRIVE’ model for emotional health and wellbeing; strong links with Brio Leisure around wellbeing (facilitating a family approach to physical activity and diet) and streamlining the adult and child weight management service offer.
• The service is also tied in with speech and language development that will be offered through children’s centres (such as Starting Well staff utilising the WellComm screening tool and working with SaLT services to better support those requiring specialist intervention).
• Strengthening the midwifery pathway in order to broaden the reach to pregnant women via the antenatal contact – linked to early identification of need.
• Parenting programmes and targeted services will continue to be delivered from children’s centres in order to further strengthen partnership working.
• 0-19 network will be established to bring together a wide range of stakeholders and partners that share a common goal to ensure every child has the best start in life. The network will focus on the high impact areas that are relevant to CW&C in order to improve service delivery/joined-up working and reduce inequalities.

**Key challenges – refreshed January 2019**

• Public service budgets – we recognise that there are budget challenges. Public service budgets are reducing. It is critical that preventative work remains high on the agenda so that the future demand on acute services is reduced. As an example, Troubled Families funding is due to come to an end in 2020 after being received in a range of forms since 2012.
• The impact on families of the changes to the benefits system.
• Increasing numbers of children with Special Educational Needs and Disabilities (SEND).
• Increasing volume of contacts at children’s services front door service, i-ART.
• Absence of evidence of holistic assessment and interventions for children and families by universal services prior to contact with the integrated front door i-ART.
How will we know if we have made a difference?
We are committed to supporting families to achieve better outcomes for children. We want to narrow the gap by improving the outcomes for children who experience higher levels of disadvantage than their peers.

Within CW&C Prevention and Early Help Service workers evidence outcomes using the Early Help and Prevention Outcomes Guide which has been developed to ensure that all case workers operating across the service are supporting delivering and coordinating achievements for families in a consistent and standardised way.

All early help services share the responsibility for improving outcomes for children and their families as well as their service specific outcomes.

The authority and its partners track progress against a range of national and local indicators as detailed within appendix 4.
**Governance**

The Health and Wellbeing Board will oversee the strategic delivery of this strategy with responsibility for overseeing the delivery of the strategy resting with the Children’s Trust Executive. The day to day management of the work is undertaken by the Early Help and Prevention Strategy Board.

---

**Governance arrangements**

- **Cheshire West and Chester Health and Wellbeing Board**
- **LSCB**
  - A statutory body consisting of agencies and professionals responsible for promoting and safeguarding the welfare of children and young people
- **Sub-regional Complex Dependency Board**
- **Children’s Trust Executive**
  - This partnership, made up of organisations from the public, voluntary, community and faith sectors, commission or provide services for children and young people and their families
- **Progress updates on children’s elements of model**
- **Early Help and Prevention Strategy Board**
- **Safeguarding and TAF updates as requested**
- **Two-way knowledge sharing and progress updates**
Appendix 1: Cheshire West and Chester Council Plan

The Council plan, Helping the Borough Thrive, outlines the ten priority outcomes for the authority.

**Thriving residents:**
  i) All of our families, children and young people are supported to get the best start in life.
  ii) Vulnerable adults and children feel safe and are protected.
  iii) Older people and vulnerable adults are compassionately supported to lead fulfilled and independent lives.

**Thriving communities:**
  iv) Cleanest, safest and most sustainable neighbourhoods in the country.
  v) Good quality and affordable housing that meets the needs of our diverse communities.
  vi) Vibrant and healthy communities with inclusive leisure, heritage and culture opportunities.
  vii) Our resources are well managed and reflect the priorities of our residents.

**Thriving economy:**
  viii) People are well educated, skilled and earn a decent living.
  ix) A great place to do business.
  x) A well connected and accessible borough.
Appendix 2: Health and Wellbeing Strategy 2015-2020

West Cheshire Children's Trust works with and reports to the Health and Wellbeing Board (HWBB). This ensures that priorities in the HWBB are reflected in the Children and Young People’s Plan and to act as the delivery mechanism for those priorities to the HWBB.

Health and Wellbeing Strategy 2015-2020

The vision for Cheshire West and Chester Health and Wellbeing Strategy is to improve the health and wellbeing of our local population and reduce health inequalities, enabling residents to live more fulfilling, independent and healthy lives. We will do this by working with communities and residents to improve opportunities for all to have a healthy, safe and fulfilling life.

<table>
<thead>
<tr>
<th>Priority</th>
<th>High Level Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>Starting Well</td>
<td>Every child and young person has the best start in life in Cheshire West and Chester.</td>
</tr>
<tr>
<td>Living Well</td>
<td>People lead more healthy lifestyles and can make the healthy choice the easy choice.</td>
</tr>
<tr>
<td>Mental Health</td>
<td>Improved mental health, wellbeing and personal resilience for our residents.</td>
</tr>
<tr>
<td>Ageing Well</td>
<td>Older residents are living healthier and more independent lives feel supported and have a good quality of life.</td>
</tr>
</tbody>
</table>
Appendix 3: West Cheshire Children’s Trust Children and Young People’s Plan 2015-2019

West Cheshire Children’s Trust’s vision: in west Cheshire we will work together to support families to keep children and young people happy, healthy and safe.

West Cheshire Children’s Trust Strategic Outcomes 2015-2019

1. To promote and improve the emotional health and wellbeing of children, young people and their families (Emotional Health and Wellbeing).
2. To support our Children in Care and Care Leavers to enable them to achieve their full potential (Children in Care and Care Leavers).
3. The needs of children and young people with Special Educational Needs and Disability are met (SEND).
4. Intervening in a joined up way at the earliest possible stage to prevent problems escalating with children, young people and their families (Prevention).
5. To promote the development of children in the Early Years so that the gap in outcomes between vulnerable children and their peers is closed (Early Years Closing the Gap).
Appendix 4: Performance measures

1. An increase in the percentage of referrals to i-ART accompanied by appropriate assessment tools e.g. Home Conditions Assessment, Graded Care profile, Risk Indicator Checklist.

Baseline: Currently stands at less than 5% 2017/18

Target: A 5% increase each year

January 2019 refresh:

2018/2019 up to 31st December 2018: 9.2%

This increase is due to the changes to the front door and the expectations of partner agencies.

2. An increase in the number of contacts made to i-ART that are accompanied by a current or recent Team Around the Family Assessment

Baseline: 22% of contacts by professional to i-ART (across the last year) had a current or previous TAF.

Target: A 5% increase annually

January 2019 refresh:

2018/2019 up to 31st December 2018: 17.7%

This increase is due to the changes to the front door and the expectations of partner agencies.

3. An increase in TAF initiation by partner agencies.

Baseline: 750 TAFs opened by agencies during 2016/17. (Health – 132, Schools – 569)

Target: A 5% overall increase with a focus on health (15% increase) and schools (10% increase).

January 2019 refresh:

2018/2019 up to 31st December 2018: (Health – 100, Schools – 578)

(Data Source: Agency TAF Dashboard & EHP TAF Dashboard December 2018)

2018/19 figures demonstrate an 11.6% increase in partner TAFs initiated during the reporting period which exceeds the 5% target set. Rates of initiation across Education partners have increased by almost 30% which reflects the good work and progress of schools partners and the Invest To Save TAF team. Rates within health services are
below the 15% target at just under 10% and improving rates of TAF initiation across the sector remains a priority for 2019-20; targeted work with Starting Well and Midwifery alongside the development and implementation of initiatives such as the i-ART to SW e-TAF pathway and potential extension of Operation Encompass will further support this work.

4. A reduction in repeat safeguarding referrals for children

**Baseline:** 19.9% for 2016/17

**Target:** 14% by 2020 (KPI)

January 2019 refresh:
2018/2019 up to 31st Dec 2018: 19.4% of CSC referrals were within 12 months of a previous open referral

Targeted work is undertaken and reviewed by Children’s Social Care SMT on a monthly basis in relation to practice and trends in relation to re-referral rate. Slight reduction noted up to Dec 2018 in comparison to 2016/17 figures. When compared to both regional and England figures, performance is good and % below average indicating area we are performing well and striving to improve further.

5. To work with and achieve significant and sustained outcomes for 1820 Troubled Families; as per the national definition, by 2020. (KPI)

**Baseline:** 391 Troubled Families (2016/17)

**Target:** 2018/19 – 1400 Troubled Families (cumulative figure)
2019/20 – 1820 Troubled Families (cumulative figure)

Refresh January 2019:

**Performance:** 2017/18 – 921 Troubled Families

This is a cumulative, five year indicator in line with the national Troubled Families Programme. In order to have achieved significant and sustained outcomes in each case and be counted towards the measure, the outcomes being worked towards with the particular family must have been sustained for at least 6 months.
Useful Links


4. West Cheshire Children’s Trust - [http://westcheshirechildrenstrust.co.uk/](http://westcheshirechildrenstrust.co.uk/)