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Separate letters for  
Hartlepool, Middlesbrough, Redcar and Cleveland and Stockton Borough Councils

November 2015

Dear Jane

**RE: CHILDREN'S EARLY HELP REVIEW**

Thank you for commissioning the Children's Early Help Peer Review. The team received a warm welcome and excellent co-operation and support throughout the process. It was evident to us that all those we met were enthusiastic about how your early help services within the local authorities and working with partners can be developed and improved.

Following the scoping work undertaken as phase 1 earlier this year we agreed that the review would focus on:

- The role of partners in the development and delivery of early help
- Testing of thresholds and early help practice through auditing ten early help cases from each Council and through observations of practice including of first contact arrangements
- The resources available and their deployment in each borough for early help services

In addition, in the course of our work we have gathered information on governance and performance management and systems that we will also comment on. These stand alone and should be read in conjunction with the letter.

This letter sets out our findings. It has attached as appendices reports on the audit findings and the First Contact observation for your borough.

We used our experience to reflect on the evidence presented on early help through documentation and meetings with managers and practitioners from local authorities, NHS bodies, Police, Schools, and the Voluntary and Community Sector (VCS) in the four local authorities. We are grateful to you, your staff and partners for the open and direct way

they discussed their work. With all we could see their passion and commitment to improve outcomes for children and families in your borough.

## **1. Governance and Strategy**

The Early Help Strategy needs to be led and governed by a strategic partnership connected to existing governance structures. This means a children and young people's strategic partnership chaired by a senior leader from one of the statutory partners and which has a clearly defined relationship to the Health and Wellbeing Board and the LSCB. This body needs to have the membership, mandate and capacity to drive the development of the Early Help strategy and its implementation and performance management. It was evident that where such leadership is not or has not been present the Early Help strategy's development is slow and implementation, coordination and performance management are all less effective.

All the LSCB chairs are clear that they do not see the LSCB in this leadership role. They see the LSCB's role as needing to focus on safeguarding and child protection and in its quality assurance and monitoring impact role in respect of early help.

Discussions with partners that work across more than one local authority boundary reflected their desire to have more commonality of approach between the local authorities. We speculated that servicing four partnerships may mean that partners are less able to provide the senior leadership and input to each partnership.

All the partnerships are local authority led. It was reflected to us by some partners that they may be too local authority centric. The Early Help strategies of the local authorities reflect this in varying degrees. Some are explicitly local authority strategies while others have been developed with partners as joint strategies. However all read as primarily local authority documents. This reflects that the local authority has the leadership role for early help and there is pressure on the local authority to ensure there is an early help offer i.e. national guidance and Ofsted.

Now that in varying degrees the early help offers are in place this may be a good time to look at whether within each partnership there is an appetite for more distributed and systemic leadership of the early help strategy. This would require very explicit discussions with partners about their part in providing distributed and systemic leadership.

It was evident from our discussions that there is not a common understanding of what the terms early help and prevention mean. This absence of a common understanding inhibits clarity about roles and the development of a clear view of what the early help offer and the pathway within that offer should be. This is an area where a common approach across the four local authority areas would help partners to promote and embed such a common understanding.

One approach to this would be articulating a common ambition for children and families across the four local authority areas with its own branding. An example of

this approach is the work Leeds City Council has done with partners to develop a vision and strategy for a “Child Friendly Leeds”.

### **Stockton**

We saw evidence that the Stockton Children and Young People’s Partnership (SCYPP) is providing effective leadership to the development and delivery of the Early Help Strategy. This was seen in how services in Stockton are being reshaped under a single AD for Early Help, Partnership and Planning, and in examples of new initiatives such as the development of the Fairer Start programme which has wide community engagement and is chaired by the chief executive of a local voluntary sector agency.

A Report on the revised “Early Help Proposal” went to the SCYPP on 23<sup>rd</sup> September. We would note that this proposal is to strengthen early help and edge of care services rather than being purely about early help. This is a Local Authority led initiative. The Multi-agency early help partnership has been involved in some of the proposals.

Schools are engaged in strategic partnerships which is very positive and is reflected in their engagement and delivery in operational partnerships.

## **2. The Role of Partners and Partnership in early help**

### **1. Operational partnerships.**

We saw many examples of good operational partnership working. The mechanisms are slightly different in each local authority but all have elements of locality based working and the development of early support arrangements with and to schools. We also saw a variety of innovative schemes being taken forward to try out new approaches e.g. Fairer Start in Stockton, Encompass in Hartlepool, Team Around the School in Middlesbrough and no schools exclusions in Hartlepool

We saw evidence of early help improving outcomes for children and families with each local authority continuing to build on the success of their Troubled Families work. The enthusiasm of practitioners is an important part of this positive approach to families who must benefit from their work with staff who believe in what they are doing and bring enthusiasm to their work.

Services for disabled children and their families and for those with special educational needs were not a particular focus for the review. Where these service areas were discussed it was evident that there has been positive progress in implementing the Education, Health and Care changes.

An operational area where more commonality across the four local authority areas would help is having a common document describing thresholds. A revised threshold document is being developed for Stockton and Hartlepool Boroughs as part of the development of the Multi-Agency Children’s Hub (MACH). For partners working

across all four local authorities the different expression of thresholds is potentially confusing. Our observation would be that the differences between the current documents are more of style than substance.

The differences in interpretation of the application of consent have an operational impact. It appeared to us that in some First Contact arrangements the local authority staff were taking on the seeking of consent that should have been dealt with by the professional making the referral. We also saw one example of where information was being shared usefully but without sufficient regard to issues of consent.

Finally we saw commitment and enthusiasm to the Hartlepool/Stockton MACH. What was less clear was whether there is sufficient consensus about the longer term vision for the MACH and what its scope will be. There are also unresolved issues about the resources required and whether additional resources are required or not.

### **Stockton**

Examples of good operational partnerships seen included:

- Operation Gremlin between the Police, Youth Directions and local voluntary organisations for young people
- Council commissioning of voluntary agencies in a way that builds local capacity and is seen as co-production e.g. Big Life, Harbour and Eastern Ravens Trust
- Awareness of the Early Help strategy in schools
- CAF team facilitating early help practitioners in other agencies but particularly schools
- Improvement in School Nursing services through their reshaping to have nurses linked to each school
- Targeted mental health in schools (TAMH) works well

### 2. NHS Partners:

The NHS landscape is undoubtedly difficult for partners to navigate and understand given the pace of change over the last three years and the many changes of personnel in key roles. While local authorities and other partners such as the Police can appear complex to NHS colleagues they have not experienced the same rate of organisational change. Even when there have been substantial organisational changes i.e. reshaping how early help services are organised in local authorities, there is often continuity of staff which means relationships are maintained.

Given this complex landscape and the need for collective effort to be effective we would suggest that there is an Early Help Review led by the Children and Young People's partnerships, either working across the four partnership on or on a North & South Tees basis. We suggest it is aimed at clarifying the roles of the key NHS agencies and identifying what the priorities are between the NHS bodies and partners for progressing the development of early help services.

We saw in the example of how CAMH services have developed over the last couple of years, benefiting from substantial investment from commissioners, what can be done when clear priorities are set and there is an effective governance structure and project management. There was universal recognition of the improvement in CAMHs

services while recognising there was more to do. There was confidence that more would be done. Similarly the work on Street Triage between the Police and mental health services was another example of impact being achieved where clear priorities are set for change supported by good delivery. This could be a useful starting point for thinking further about how adult mental health services contribute to the early help offer for children and families.

The well-received changes in the organisation of School Nursing in Stockton were another example of this kind.

The transfer of school nursing, health visiting and family nurse partnership commissioning to local authorities offers opportunities for integration, co-location and engagement. This is an opportunity for the local authorities to show how they can develop their system leadership capability given the strong interest of NHS stakeholders including GPs, schools, nurseries and other early years providers and acute health services in these services.

### **Stockton**

- Evidence of good operational relationships with CAMH provider
- Enthusiasm for re-commissioning of HV and School Nursing
- Successful reshape of School Nursing already undertaken
- Opportunities to engage GPs in specific services developments they are interested in i.e. HV re-commissioning. They did engage with the reshaping of School Nursing
- Relationships with CCG and Commissioning Support Unit (CSU) not clear enough and reflected in comments above about the need for clearer designation of roles and priorities between the LAs and the CCG and CSU

### **3. Police**

The view of the Police contribution to early help is positive as they meet if not exceed the expectations colleagues have of their contribution. There is a strategic commitment to early help which enables a positive response from Police partners. The Police want, and with further cuts probably need, to try to shape their delivery corporately across the four local authorities. They are significantly affected by the diversity of approaches across the four local authorities. The service has to consider efficiencies and effectiveness of both its delivery and the processes which underpin them. There are clear opportunities for the service to rationalise its partnership delivery but to do so they need partner support in return.

They wish to be heard more as a partner. They wish to be central to the shaping of the future local multi-agency vision and policy, evidencing a real appetite to lead, either alone or with partners, any agreed developments concerning the provision of safeguarding and Early Offer of Help services.

The Police Service does not separate out its operational activity for adults and children but considers vulnerability at any age as its core business. The service needs to have partners recognise and be sensitive to this approach in the development of services. Multi Agency working for the police is about children and adults so the concept of the

MACH, as much as they are supporting it, is causing them to separate functions around intelligence, research and decision making for children and adults. They would prefer this is avoided.

There is a desire from local Police to do more at an operational level. The ability of neighbourhood policing staff to support local discussions and decision making within the early help arena is now being recognised nationally. Police input at early help locality discussion is helpful in adding knowledge concerning a family as well as in identifying the best person to be the lead professional. Their input at one of three early offer locality discussions observed by the review would have been extremely helpful in both adding knowledge concerning a family as well as in identifying the best person to be the lead professional.

We noted that domestic abuse triage is undertaken by the police as a single agency within a police environment with no partners present or readily available for discussions. Further triage/assessment then takes place within social care First Contact. It is widely recognised that joint triage for both the victim, for safety planning by police and Independent Domestic Violence Advocate (IDVA) services, and for any children involved is hugely effective and supports both the Multi Agency Risk Assessment Conference (MARAC) process as well as decisions for interventions on behalf of the children at whatever appropriate level.

This joint triage activity we assume will be delivered within the MACH or any Multi-Agency Safeguarding Hub (MASH) style of working. However there could be benefit in starting joint triage earlier and working to the same method across the four local authorities.

### **Stockton**

The discussion on the MACH and with the senior Police team showed differences of view on the vision for the MACH. While the Police are signed up for this there are areas of concern they have which they would like more fully recognised. The issues appear to be about the direction of development for the MACH for the future i.e. whether it will develop adult safeguarding functions in the future.

#### **4. Voluntary and Community Sector (VCS)**

It was evident that there are strong and established relationships across partners and that each local authority has a well-established and very active VCS.

Where there was more variability was in how far the VCS felt it was included in the shaping and development of services. This was expressed in how well the VCS felt they were supported by the local authority through their commissioning of services and in building capacity in the VCS. There were good practice examples of how the local authority had enabled local VCS organisations to successfully compete for commissioned services. For the VCS they wanted local authorities to take an inclusive view of how needs could be met and seek the best qualified provider rather than give preference to their own provision.

The VCS want recognition of how they bring substantial additional resources into the area and how local authorities can help facilitate the VCS in this. They also welcome the opportunity to take on leadership roles and it was evident that there are individuals and organisations with the capability to take on leadership roles in the development of early help services and who can contribute to the development of more distributed leadership.

### **Stockton**

The Stockton VCS representatives seen were very positive about the role the Council and CCG have played in developing capacity in the VCS to enable VCS organisations to respond to commissions for services and in developing co-production. The Council is seen as being inclusive and not seeking to protect its own services but taking a whole borough view of what is the best approach to commissioning services to meet needs.

There was good awareness of the early help strategy in the VCS and strong buy-in to its core objectives. The leadership role in the VCS for the Fairer Start programme is seen as evidencing the local authority's inclusive approach and willingness to share leadership.

While the VCS is well informed about the early help strategy there remains more to do to help understanding of the early help pathway for children and families, thresholds and ensuring the voice of the child is heard.

### **5. Local Authority Partnership**

We saw a growing recognition that more can be done by working together across partners and potentially across local authorities. All the local authorities are facilitating building confidence in early help practice across the partnerships. All have directed significant resource into the early help offer.

Each local authority has its own areas of innovation and experimentation. We think there must be greater opportunities for sharing learning from this work and in particular considering which approaches are having the most impact. Examples would be Hartlepool's work as part of the Transformation Challenge award and the Fairer Start programme in Stockton.

Of necessity the local authorities have taken on a leadership role and this has at times been and needed to be quite directive. As the shape of early help services becomes clearer this may be an opportunity for the local authorities to take more of a system leadership role and expect more leadership from partners and allow partners the space within which to take on leadership roles.

### **Stockton**

Whilst there has been a long history of working across the Tees Valley Local Authority area on a number of developments, Stockton Children's Services have been reluctant to invest time in exploring developments across Children's Services if it has been of the view that the impact would have a potentially negative impact or benefits were not proportionate to the amount of time invested. The local authority has some concerns

however that the Tees Valley combined Local Authority proposals may add additional challenges when working across the five local authority areas because of the additional partner agencies that would need to be involved.

### Schools

Schools are making a substantial contribution to the early help offer in all four local authorities. They employ a range of staff who deliver early help services. Quantifying this contribution might well help develop the dialogue with schools about the scope of their role and what the role of the local authority is in supporting and developing the early help offer from schools. Schools early help services work better when there is support from a local authority early help team. We saw evidence that when schools collaborate this delivers improved outcomes. Schools can see that early help can help improve attainment and contribute towards the outcomes they are measured on.

The level of collaboration between schools varies across the four local authorities and where this is weaker this is not helpful to the strength of the early help offer. This collaboration is also likely to assist schools engagement with strategic forums and we think this kind of engagement is important for promoting distributed leadership for early help and safeguarding.

### Stockton

Schools in Stockton seem to have a good awareness of the Early Help strategy and their role in delivery. Relationships with the Council came across as positive. As noted above in the section on operational partnerships there was good evidence that these were working for schools.

Schools have seen impact from early help work on attendance and engagement with education.

They recognise there is more to do in understanding what early help means, understanding roles, seeing early help as integral to jobs and not an add on and communication between practitioners and schools which is too variable from excellent to poor.

## **3. Testing of thresholds and early help practice**

We audited ten early help cases in each local authority area and undertook practice observations including of the first contact arrangements. There are separate reports for each local authority on the case audits and the observations of the first contact arrangements. These are contained in appendix 1 and 2 attached to this letter.

## **4. Performance management and Systems**

We also looked at the performance management and related systems that support early help. These seem to us to be integral to ensuring good early help practice.

To encourage the development of shared responsibility and accountability for early help we think an outcomes framework agreed across the four local authorities and their partners would be helpful. The four LSCBs have commissioned work to develop a shared outcomes and performance management framework. If this is



successfully delivered then having a shared framework for early help would provide a comprehensive framework to understand and evaluate performance. At present all the partnerships struggle to demonstrate the impact of their early help services. In particular to understand whether the current services and the way they operate are likely to reduce in the short or medium term demand for specialist services including child protection and looked after children services.

The absence of such a framework means it is harder to hold agencies to account or to identify if they understand their responsibilities for performance management of early help services.

There is a need for better data to hold the system to account and understand such key issues as whether the right children and families are receiving early help services and statutory services. Better data would assist improved service commissioning. Key to this is an effective electronic system to record and report on early help work and which can be used by all partners. There are some good systems in the local authorities i.e. eCAF but none provide all that is required.

Such systems combined with mapping of workflow are needed to understand the capacity of the early help system and to be able to distribute early help resources in a way that will maximise their impact.

There also needs to be clarity about where the multi-agency performance management for early help is located. The four LSCBs have identified their role in overseeing the quality of early help work but given they are not leading the Early Help strategies it does not seem appropriate that they have the lead role in performance management. This would be best performed by the Children and Young People's Strategic Partnership which has the lead for the Early Help strategy.

### **Stockton**

The presentation of the Stockton activity data in a workflow is very helpful. The inclusion of early help data into the workflow would help provide a full picture of activity across the continuum of need. Ideally this would also include the activity of partners.

## **5. Resources Employed**

We have looked at the information provided on resources employed for early help. It is not presented in a consistent enough format to draw any conclusions other than it appears that the resources available in each Borough for early help are significantly different. A spreadsheet showing some of the information for each Borough was given to the peer team. This is based on Stockton's classification of expenditure with items entered for the other Boroughs where this is available.

The spreadsheet also includes the figures from the NE LAs benchmarking exercise which further evidences the apparent differences in resources available for early help services across the four boroughs. We think this would warrant a deeper exploration. This would require time and resources from the local finance teams to

undertake the detailed work to achieve comparability of information and the subsequent detailed analysis required.

### **Points for consideration**

We make the following summary points for your consideration:

1. That you pursue with partners, the development of a common vision for children and families across the four Tees Local Authorities.
2. The growing political appetite for closer working across the four authorities could help the above suggestion a reality but we recognise the addition of another local authority adds another layer of complexity.
3. Consider whether such a joint vision could be the start of work to bring greater convergence to the way early help services are organised and delivered across the four boroughs including:
  - Thresholds
  - Service pathways
  - Service design
  - Performance management
  - EH plans
  - Electronic case management systems
4. The Children and young people's strategic partnerships, either working across the four partnership on or on a North & South Tees basis conduct a review with NHS bodies of early help priorities and working arrangements.
5. Develop of a common approach to data collection and performance management of early help services, building on the work already commissioned to develop a common approach to performance management across the four LSCBs.
6. Review the management of the process in First Contact services so that you are confident it is compliant with Working Together guidance and provides clarity on the status and timescales for work throughout the process.
7. Develop opportunities to share learning from research and analysis and the many early help initiatives and innovations being made across the four boroughs.
8. Develop a Middlesbrough and Redcar and Cleveland MACH or (MASH) based on a common model with the developing Stockton and Hartlepool MACH

We hope this letter is a helpful reflection of the findings from this Early Help review. The Children's Improvement Advisor for the North East Region, Ann Baxter, has been sent a copy of this letter and will be in touch with you to discuss the findings. Ann can be contacted by email: [baxter.ann@icloud.com](mailto:baxter.ann@icloud.com) or by phone on 07577495153. A copy of the letter will also be sent to the LGA Principal Adviser for the NE Region Mark Edgell.

Once again, thank you for agreeing to receive a review and to everyone involved for their participation.

**Peter Rentell**

**Programme Manager (Children's Services)  
Local Government Association**