## Minutes

Meeting title	Early Help Board
Date	21 <sup>st</sup> March 2017
Present	Debbie Forward, Alice McColl, Amanda Davies, Jo Lewitt, Sarah McCluskey, Caroline Dowson, Melanie Hodgson, George Samios, Paula Bromley, Heidi Limbert, Katy Crabbe, Fiona Lloyd-Bostock, Marie Porter, Marcia Burgham, Alison Woodiwiss, Penny McKissock, Jenny Hyde
Apologies	Denice Burton, Chrissie Hardman, Julie Evans, Rebecca Potter, Leigh Zywek

	Action
Minutes and Matters Arising	
<ul> <li>The meeting confirmed that further refresher training is required around thresholds. This includes training around the levels of risk at levels 3 and 4 of the threshold document; training on how to analysis and articulate the risk to children and young people; awareness of service and interventions that are available to support families to mitigate and manage risks and support them at early help stage where appropriate. It would also be useful if this included building agency confidence to challenge and use the escalation policy where appropriate. Action: DF to feedback to Workforce Development Group</li> <li>JL confirmed that FNP will report into Best Start in Life.</li> <li>Terms of reference currently being added to the document mapping groups and chairs.</li> <li>Action: PB to circulate to Early Help Board once complete.</li> <li>MB confirmed that the screen cast to demonstrate how to download and use the Early help App is nearly ready.</li> <li>Action: MB to circulate once complete.</li> <li>The Early Help App should now be available for B&amp;NES staff on citrix.</li> <li>There is no current homelessness protocol, but one will be developed. MP is looking at other LA protocols for working with families found intentionally homeless. There have also been concerns recently with families exempt from S17 support with no recourse to public funds, where human rights assessments need to be completed.</li> <li>SC has arranged training for 16 staff through Family Links, to enable them to deliver parenting courses. Staff attending will be across a range of teams and agencies.</li> <li>FNP referrals haven't increased. JL confirmed looking at reducing capacity.</li> </ul>	PB MB

## The Virtual Early Help Team / Virtual Hub development

PB explained that a virtual early help team/hub is being developed. Officers from social care, integrated working, the interface officers and Connecting Families will work together, share information and provide a more a more joined up service for those cases which do not meet the threshold for social care but may benefit from early help. The virtual hub / team will have a database and use protocols from the Troubled Families agenda to share information. A system is being developed to track who is being worked with and identify who needs more targeted support. The virtual hub / team should be operational from 1<sup>st</sup> April. The existing Connecting Families Allocation Panel has expanded to become a wider multi agency early help allocation panel for more complex cases which come through the virtual early help team where a discussion needs to take place to assess which services would be most suitable.

The Request for Service form (previously known as C2) is currently being updated. Safeguarding risks can be flagged on this form, which is then sent in to Duty. If it is clear that thresholds have been met then Duty will pick the case up and if more information is needed to make a decision the case would go to MASH. NFA which would benefit from early help will be made as a referral to the allocation panel. The panel is evolving to include referrals for teenagers and has representatives from Youth Connect and Compass on it. There is no health representative on the panel at present.

Anyone making a referral should go directly to the service if they know which service they needed , or complete a CAF if this is what is required.

There are several documents being developed for the Virtual Early Help team / hub. These are:

- Early help offer leaflet. This was looked at by young advocates from Southside and as a result of their input the leaflet is currently being re-drafted. This leaflet will be available for practitioners to give to families.
- One minute guide to the early help offer. This is a brief guide to show how everything will fit together.
- Early Help offer. This is a longer document detailing the B&NES offer and including a glossary of terms.

There will be a launch event for the Virtual Early Help hub/team and offer in May. A flyer will be circulated with all the details. It would be helpful to include promotion of the following at this event:

- Big 6 App for practitioners and families, which provides information on the top 6 conditions children commonly present with for urgent care.
- Wellbeing College
- Early Help App

Mary Tovey is joining the Interface Team from April and she and MP will take on more step-downs, ensuring robust, SMART action plans with the right agencies. Richard Baldwin has also put in more resource to triage.

PMcK said it was also important to recognise the value of universal services and services that anyone can drop into, as people do use them and selfidentify and ask for the help they need, which can be empowering. MP/ PMcK

<ul> <li>Actions:</li> <li>PMcK to bring an update on the new service funded as part of the St Johns coalition against poverty to the next meeting.</li> <li>PB to ensure GPs are aware of the virtual hub/team development through Sarah Pritchard (CCG comms)</li> </ul>	РВ
Early Help Offer	
This is currently being updated and will be ready for the launch in May. <b>Action:</b> PB to circulate draft offer in advance of the launch for comment.	РВ
Capturing Activity Data from non-commissioned services	
<ul> <li>SMc attended to update the Board on this work. SMc is a Strategic Commissioning Offer and oversees the delivery of the children and young people's plan. The plan is based around the 3 outcomes: <ul> <li>Children and young people are safe</li> <li>Children and young people are healthy</li> <li>Children and young people have equal life chances</li> </ul> </li> <li>The plan was overseen by the Children's Trust Board, which has now been disbanded and it is now overseen by the Children and Young People's subgroup of the Health and Wellbeing Board.</li> <li>There was a discussion at the sub-group about capturing activity data and added value from non-commissioned services e.g. numbers worked with, ages and what the service delivers. Information about Early Help could also go to these services who sometimes find they have low level concerns about the children, young people or families they are working with.</li> <li>SMc is working with Sue Evans on how to collect this information.</li> <li>DF reports annually to LSCB on the effectiveness of early help and it would be useful to be able to provide this information as part of the report.</li> <li>A lot of groups are linked into the children and young people's network but it would be good to also get out further to groups such as after school clubs. AMc has offered to help SMc taking forward this piece of work.</li> </ul>	SMc AMc
Maturity Model- Culture Strand	
The service transformation maturity model was designed by the Troubled Families programme as a way of assessing the maturity of early intervention across 5 different strands and transforming services to be more joined up. At the last meeting the Board looked at the maturity of early help partnership work in relation to the leadership strand. This meeting it was agreed to look at the cultural strand. It would be useful for the Board to consider shared values for working with families and challenging the breaking down of cultural issues. There is a list of Early Help principles set out in the Early Help Strategy, which will also be incorporated into the Early Help Offer. The culture strand of the maturity model talks a lot about values, which are not explicitly identified in the Strategy. There are many aspects of culture to be considered, including organisational culture and cultures within families. The values held by practitioners influence the way in which families are worked with. There was a discussion about organisations working under a managerialist agenda and those that	

co-operate as learning organisations. The latter is interesting as a theoretical approach, which draws in expertise and perceives everybody as an expert. There may already be values across organisations held in common. <b>Action:</b> Everyone to email EW with existing organisational values so that these can be pulled together in a column exercise to look at next time and take a view on values that can be embraced across organisations.	
Early Help Action Plan	
<ul> <li>DF suggested that the Board focus on a few key actions as priorities for 17/18. Agreed that these would be:</li> <li>Developing and implementing a quality assurance framework for early help which as minimum includes assessment, plans and reviews and ensuring management oversight within organisations.</li> <li>Improving timely access to early help to ensure we are meeting all early help needs through the development of the virtual early help hub/team within the council for those which do not meet the threshold for social care but who would benefit from early help.</li> <li>Work with adults: Developing Think Family approaches and mapping and developing pathways with DHI, Adult mental health services, domestic violence services and housing.</li> <li>Demonstrating the effectiveness of early help through the development and introduction of a core data set for early help outcomes and showing the effectiveness of partnership.</li> </ul>	
<ul> <li>Other considerations for the Board in relation to the action plan include:</li> <li>Recognising the roles of different agencies and what they bring</li> <li>Supporting practitioners 'Team around the practitioner'. Supervision should be essential. This needs to be looked at under the quality of practice priority.</li> <li>AMc updated on the action about increasing awareness of attachment and trauma. NICE guidelines were looked at last summer. Margaret Fairbairn, CAMHS commissioner has written a CAMHS transformation plan, which provides support to practitioners working with mental health issues, often presented through behaviour. Theraplay training is being increased and the Nurture Outreach service supports schools in getting ready for children entering reception class. CAMHS hubs are available in secondary schools, but there is a gap in provision for children transitioning into year 7. This is being addressed in the CAMHS re-commission.</li> <li>Reminder for organisations to ask MP if they feel they would benefit from a step-down workshop. Sarah Kirk <u>sarah kirk@bathnes.gov.uk</u> now provides admin for these workshops, so please contact Sarah with any requests.</li> </ul>	EW AMc/ PMcK
<ul> <li>Actions:</li> <li>Highlight the top three priority areas of work for the board and move them to the top of the Early Help action plan so we have a real focus on them this year.</li> <li>AMc/ PMcK to talk to the DAP about what would be a joint priority around early help and domestic abuse</li> <li>DF to talk to George O'Neill about going to the Mental Health Forum to agree a priority area of work.</li> </ul>	AMC/ PMCK DF AD MB AII EW

AD to talk to Joint Commissioning Board about substance misuse	
work.	
• MB to re-convene housing group.	
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Introduction to the People and Communities Communications Team	
Mel Hodgson introduced herself as the People and Communications Team	
lead. Since the Family Information Service has been cut there is no longer a	
telephone number for information, but Mel's team are able to provide	
information and promote services through communications in a number of	
Ways:	
<ul> <li>Local service information is now available on 1BD Bathnes, rather than 1BD.</li> </ul>	
<ul> <li>Rainbow Resource provides information for families, children and young people where there is an additional need.</li> </ul>	
Wellbeing Options, replaces Well Aware and has a wealth of	
information for adults needing support and their families and carers.	
There are facebook pages for these resources as well, which provide	
news and details of activities. Mel's team can advertise clubs and	
events for services on these facebook pages.	
There is a rainbow resource card, which entitles free access to a	
range of places in B&NES and MH is looking at further developing this.	
<ul> <li>The team goes out to one stop shops to talk to people about how they</li> </ul>	
can help and distribute postcards with the web site resources details.	
The team also goes to team meetings, baby and toddler groups and	
stakeholder events to raise awareness.	
The team works closely with CCG communications team and with	
Kath Fallon from the SEND partnership.	
Please contact Mel or her team with anything that it would be helpful	
to have on any of the resource websites or facebook pages. Mel is	
also helping with the Early Help App promotion.	
Updates from Task and Finish Groups:	
Housing	
MB to re-convene the group.	
Best Start in Life	
Regional event coming up which will look at comparison of what is being	
offered in antenatal services. Will present local data against 0-5 outcomes at	
the next meeting. Provider leads will be invited to the next Best Start in Life	
meeting.	
Any concerns with the transition to Virgin can be flagged with JL/AW.	
Question of secure email has already been raised via a number of routes.	
Update on CAMHS re-commission	
Presentation on the re-commission and feedback questions were circulated	
with the papers for this meeting. Margaret Fairbairn is consulting with a	
range of Boards and groups about the re-design and feedback to Margaret	

design and there is an opportunity to meet with Oxford Health coming up to give views.	
CAF Audit Group	
Suzanne Cheng attended to talk about the findings of the CAF audit group. The CAF audit group is a multi-agency group meeting quarterly, with Suzanne as interim Chair. The audit findings from the last CAF audit are very much in line with previous 3 CAFs audited during development of new CAF audit tool to assess the quality of assessments and plans. There are still inconsistencies in the quality of CAF assessments and plan and particular concerns around the superficial identification of strengths and needs across domains (health, learning, parents and carers and families and environment), lack of clarity and understanding of risk and plans not being clear what difference plan will make to child's life and outcomes. While there needs to be a balance of whether an assessment and plan are there to meet a parent or a child's needs, the impact on the child of meeting a parent's needs should be made more explicit.	
<ul> <li>Actions:</li> <li>DF explained now that the quality and effectiveness of Early Help is part of the LSCB work, the agencies represented on the early help board and commissioners need to take these specific issues away to address within their own organisations or to be raised through the commissioning process where agencies are not represented. DF reminded everyone that individual organisations are responsible for completing CAFs and accountable for ensuring their quality through management sign off. All to review the quality of CAFs held by their organisations and feedback to July's meeting.</li> <li>The audit group to bring quarterly audit findings to Early Help Board to review and action. The board may need to notify LSCB where we are struggling to drive improvement where wider engagement is required.</li> <li>SC to share toolkit with Board members when completed.</li> <li>DF to speak to RB about a joint email to service managers as a call to action for agencies to ensure the quality of their CAFs and ensure they have management oversight and sign off where they are Lead Professional.</li> <li>DF to convene a T&amp;F group to develop a Quality Assurance Framework for Early Help as part of the LSCB assurance framework.</li> </ul>	All agencies and commissio ners
AW, CD and PB are both interested in joining the group. These number of CAFs audited will increase to 10 CAFs in April and then to 20 at each audit to be more representative. A more sophisticated service breakdown will be possible once more CAFs are being reviewed.	SC

The findings circulated to the Early Help Board show what information available. The descriptions contained within the findings are based on Ofsted criteria and findings from serious case reviews, CD.	IS DF SC DF
AOB	DF
<ul> <li>DF to circulate updated Terms of Reference for comment</li> <li>Neglect Strategy has been circulated and a toolkit has just been agreed. This is to help gather and analyse information and provide guidance on recognising and defining neglect. LSCB neglect training</li> </ul>	DF
has also been reviewed. Neglect toolkit to come to Early Help Boar in May.	0

## Summary of Actions

Circulate summary of Boards and Groups once TORs have been added       PB         Circulate Early Help App screen cast once completed       MB         Circulate draft Early Help Offer       PB         Action Against Child Poverty to go on agenda for the next meeting       EW and         PB to ensure GPs are aware of the Early Help Hub through CCG comms       PB         Email organisational values to EW       All         Early Help Action Plan       EW         • Highlight the top three priorities and move them to the top of the Early Help action plan.       AMc/         • AMC/ PMCK to talk to the DAP about what would be a suitable joint DV action       AD         • DF to talk to George O'Neill about the mental health priority and attending the Mental Health Forum.       MB         • AD to talk to Joint Commissioning Board about substance misuse work.       MB         • MB to re-convene housing group.       All to send any other updates for the action plan to EW.       EW         • EW to circulate updated plan with the minutes.       SC       DF         CAFs       • CAF audit group to bring quarterly audit findings to Early Help Board.       NF         • Notify LSCB where we are struggling to drive improvement.       SC       DF         • CAFs where they are Lead Professional and ensure management sign off. Joint letter to go out from DF and Richard Baldwin.       DF         • DF to convene T&F gro		
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