

MEDWAY Early Help Strategy: 2021-2024

Medway Early Help Partnership

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1. Foreword

Foreword by the Early Help Partnership Board

"As Lead member I am delighted to support the Early Help Strategy. We are determined that this strategy will make a difference for Medway's children and families"

Cllr Josie Iles
Portfolio Holder for Children's Services
(Lead Member)

"In Medway Children's Services, early help is a priority area for improvement and so we are excited to introduce our new Early Help Strategy."

Lee-Anne Farach - Director of People – Children and Adults

"Effective early help is a key priority of the Medway Safeguarding Children Partnership (MSCP). This partnership approach to early help is key to ensuring children and families receive the right support at the right time for the right duration."

Medway Safeguarding Children Partnership (MSCP)

"This Strategy is fully in line with our Child Centred Policing vision – focusing on early intervention and doing the right thing to safeguard and support our young people."

Kent Police

'As primary schools, the Early Help strategy is a key part for the our front line support for children and families.'

MELA, 2021

Medway Secondary Schools are committed to working in partnership with the Early Help Strategy as part of the holistic support for children and families

MSHA

"The Strategy offers a real opportunity for all partners and agencies, working together to make a real positive difference to the wellbeing of children and families in medway."

NHS Kent and Medway CCG

"The Medway Early Help Strategy provides a sound foundation for collaboration with children, families and the professional network that is aimed at achieving good outcomes that are truly preventative."

Gillingham NSPCC Service Centre

2. Context

All About Medway

Medway is an emerging city, set around the River Medway within the Thames Gateway Growth Area. There are 5 main towns in the area: Chatham, Gillingham, Rochester, Strood and Rainham, as well as significant rural areas.

In June 2020 the Office for National Statistics released the mid-2019 population estimates which indicated that the population of Medway was 278,556.

The majority of the population (89.6%) in Medway are classified as White, with the next largest ethnic group being Asian or Asian British (5.2%). This is similar to the England and Kent populations. Data from the 2019 school census shows that 72.4% of pupils in Medway were White British and 26.7% of pupils were of minority ethnic backgrounds. This may suggest a large change in the overall population distribution in Medway since the 2011 Census. Some wards are considerably more diverse than others. The three wards with the most ethnically diverse school populations are Chatham Central, Gillingham North, and Luton and Wayfield. Within these wards 51.6% to 57.9% of pupils are White British and at least 42.1% of pupils are of minority ethnic backgrounds.

Medway is ranked 93rd most deprived Local Authority of 317 in England in the latest indices (IMD2019).

Medway has a younger population than nationally, with proportionally more younger people and working-age residents and fewer older people. Medway has a younger median age of population at 38 years compared to 40 years for the UK.

Overall, comparing local indicators with England averages, the health and wellbeing of children in Medway is similar to England.

Public health interventions can improve child health at a local level. In Medway:

- The infant mortality rate is similar to England with an average of 13 infants dying before age 1 each year.
- The teenage pregnancy rate is similar to England, with 110 girls becoming pregnant in a year. This is an improving picture as historically Medway had a higher than England rate.
- 15.2% of women smoke while pregnant which is worse than England but represents a significant drop from 19% in 2017.
- 71.5% of new-borns received breast milk as their first feed.

- The MMR immunisation level does not meet recommended coverage (95%). By age 2, 90.9% of children have had one dose.
- Dental health is similar to England. 25.5% of 5 year olds have experience of dental decay.
- 11.6% of children in Reception and 22.2% of children in Year 6 are obese.
- The rate of child inpatient admissions for mental health conditions at 69.3 per 100,000 is similar to England. The rate of self-harm (10-24 years) at 365.4 per 100,000 is lower than England.

Educationally, 73.7% of children have achieved a good level of development at the end of Reception (higher than England). However, GCSE attainment is below the England rate.

The level of child poverty varies across wards but the overall Medway rate is similar to England with 18.8% of children living in poverty. The rate of family homelessness however is higher compared to the England average.

In 2019, there were 64,979 children under the age of 18 years living in Medway.

This strategy is predominantly relating to children and young people aged pre-birth to 18, but with an additional focus on supporting young people who need it across the transition to adult support and services.

COVID-19

Throughout the development of this strategy, the world has been responding to the COVID 19 pandemic. Nationally, this has meant a number of 'lockdowns', periods of school closure, closures of local businesses and a significant change to the way services can be delivered and accessed.

For some families, the pandemic will have been an opportunity to reconnect with one another and build bonds and relationships, whereas for many families we know that this has been an incredibly stressful time with relationship difficulties, new pressures such as home-schooling, and a significant reduction in natural support systems such as friends and family.

Whilst the long-term impact of the pandemic remains to be seen, it is acknowledged that many families will have struggled under significant pressure during the COVID pandemic. The impact of the COVID pandemic will undoubtedly lead to an increase in requests for Early Help intervention, the Early Help Partnership Board will continue to monitor the impact on Children and Families.

A Partnership Approach

In order to deliver effective early help to children and families, it is essential that a complex and diverse range of professionals come together to agree a single approach that ensures that services are seamless and focused on the needs of children in Medway.

As part of the Medway Safeguarding Children's Partnership, relevant partners come together to ensure that children are safeguarded across Medway. Medway Council, Kent Police and Kent and Medway Clinical Commissioning Group (CCG) are the three safeguarding partners that make up the MSCP. Other agencies including Health Providers, Education, CAFCASS, National Probation Service, Kent Fire and Rescue Service, Medway Youth Offending Team, the voluntary sector, community and faith groups, housing providers, and sports groups are included as relevant agencies.

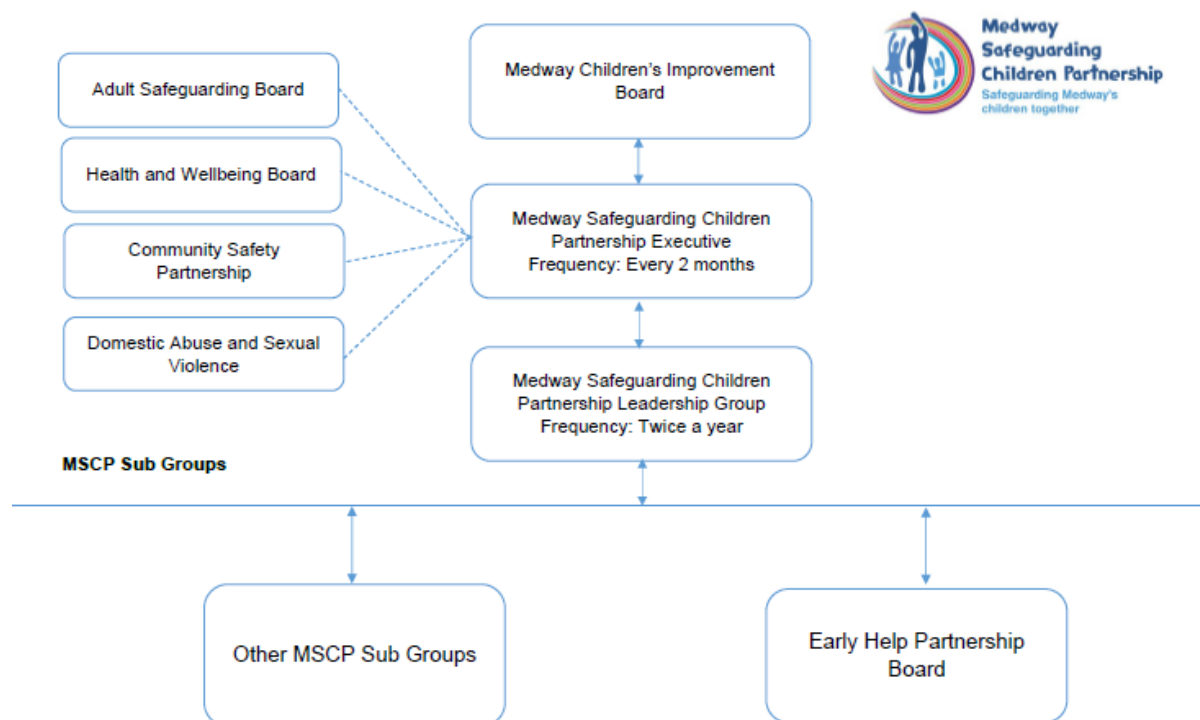
There are 110 schools and education providers in Medway, as well as thousands of voluntary sector organisations. Medway Voluntary Action (MVA) supports not-for-profit organisations, groups, and community members to develop skills and build resources. They and the organisation "Simply Connect" (helping to connect the community) provide key information about the range of organisations in Medway. More detailed information about each of these organisations can be obtained through the following websites:

<http://www.vcconnectsystem.org.uk/MedwayVAOnlineDirectory/AdvancedOrganisationSearch.aspx>

<https://medway.simplyconnect.uk/>

Effective Early Help relies upon local organisations and agencies working together. In 2020 the Early Help Partnership Board was established in Medway to drive a multi-agency approach that would strengthen our offer to families and ensure that children receive early support as soon as a problem emerges. The board reports to the Medway Safeguarding Children Partnership, (MSCP). Ensuring effective early help for children is one of the priorities for the board 2020-2022.

The diagram below shows the governance arrangements for the MSCP in Medway, including the Early Help Partnership Board.



3. Introduction

What is Early Help?

Early help is the term used by agencies in Medway to describe support to potentially vulnerable children, young people and their families as soon as problems start to emerge. Although research shows that the most impact can be made during a child's early years, early help is not just for very young children because problems can emerge at any point throughout childhood and adolescence. Children and families are therefore entitled to early help if and when they need additional support.

The purpose of early help is to prevent issues and problems from escalating by building resilience. This is achieved through prompt and targeted interventions to families by those who know them best.

In summary early help is a shared responsibility and not a distinct service.

“Early Help is everyone's responsibility”

How do we do it?

Most children's needs are met by their family or universal services that are available to everyone. These are provided as a right to all children, young people and their families.

However some children require support above that provided by universal services to ensure that their education, health, social and developmental needs are met. For these children additional support may be provided by a single agency, or by a number of different agencies working together, with a lead professional co-ordinating the work.


“The right conversations, with the right people at the right time”

Our Strategy

As a partnership we have worked together at all levels to ensure that our approach and services best support children and families in Medway. We have a single vision, joint priorities and services which are delivered in harmony to ensure the best possible outcomes for children.

This document sets out our strategy and early help offer. It is one of a suite of documents that support and safeguard children in Medway.

“Together we are stronger”



“Early Help has helped me with my behaviour, helped me with a lot of things... so thank you Early help and thanks for everything”

9 year old, Medway resident

4. Vision

In order to agree our vision across the wide partnership in Medway, a multi-agency workshop was held in December 2020. Over eighty partners attended the workshop, creating a range of visions which were then discussed and voted for.

The vision below is therefore the vision that all partners agreed:

“Our vision of Early Help is to empower whole families as equal partners to safely make and sustain positive change. We do this by increasing their confidence, resilience, and aspirations. Each family's individuality is celebrated and support is tailored and unique, enabling families to own their responsibilities with clear direction and focus. We aim to ensure easy access to support from agencies where appropriate. Our approach is strengths based, taking away labels and judgements, increasing understanding and supporting good communication and challenge to help families to reach their potential. In doing this we are open, honest, realistic, inclusive, and always work in partnership.”

5. Principles

As a partnership, we share a common set of principles which inform all of our practice. In Medway our approach to early help is guided by the following principles:

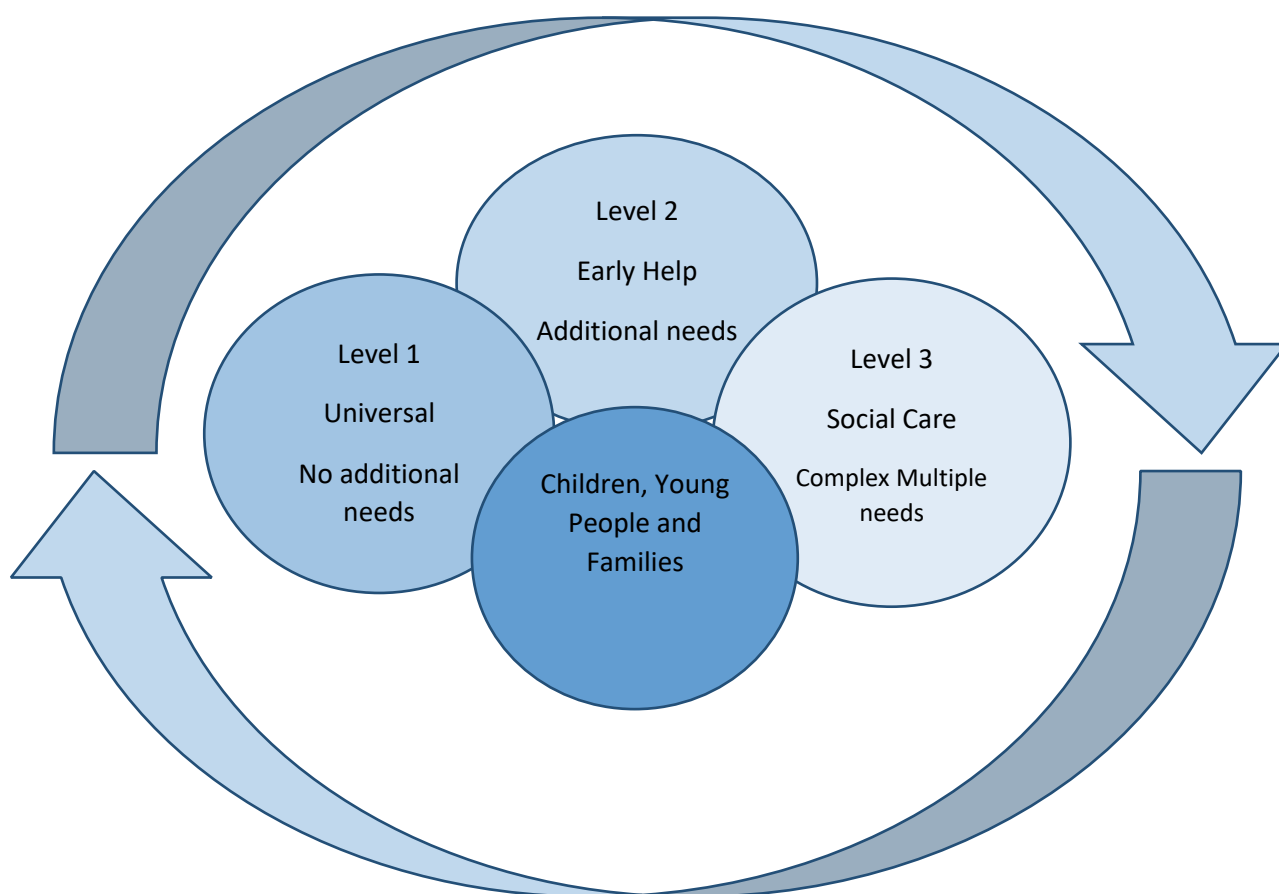
1. To ensure that children, young people and families are safeguarded.
2. To ensure that we actively listen and hear the voices of children, young people and families in order to shape family centred support.
3. To promote the health and wellbeing of children, young people and families in Medway.
4. To address inequalities and promote equity and equality of opportunity for children in Medway.
5. To work with families as equal partners to promote resilience and positive choices to help children to reach their full potential.
6. To drive cultural change within Medway, so that parental support is seen an entitlement whereby all families and communities can access support without fear of stigma or judgement: promoting the concept of “child friendly Medway”
7. To ensure that early help services are timely, co-ordinated, transparent, needs led, accessible (both in person and digitally) and adequately resourced.

6. Continuum of Need

Children's needs vary at different times and in different circumstances. Early help services need to be based on a clear and consistent understanding of need. This requires all practitioners, including those in universal services and those providing services to adults with children, to understand their role in identifying emerging problems and to share information with other practitioners to support early identification and assessment. In Medway we have therefore constructed a continuum of need to identify the right support at the right time. Early help sits at level 2 within the model. The diagram below summarises this. We recognise that at different times families' needs may change and so they may move between levels. The continuum of need is therefore not a linear approach but a cycle, illustrating how needs and support can change.

Continuum of Need

The level of support can change in line with the level of need.



Level 1: Children with no additional needs

Children with no additional needs are children whose health and developmental needs will be met by good parental care and the universal services that are available to all children.

Universal services are available to all Medway children and families whatever the level of concern and most children will be kept safe from harm and able to reach their full potential with support from services such as schools, nurseries, childminders, youth projects, police, midwives, health visitors, GP's, Job Centres, Libraries, housing, voluntary and community groups and organisations.

Level 2: Children with additional needs

Children with additional needs are children who require support above that provided by universal services to ensure that their education, health, social and developmental needs are met. They may be vulnerable and showing early signs of abuse and/or neglect, but often their needs are not clear, not known or not being met.

Additional support may be provided by a single agency, or by a number of different agencies working together, with a lead professional co-ordinating the work.

This kind of additional support is described as "early help" or "early intervention", as it seeks to provide help and support to children, young people and their families in the early stages when concerns are identified, and to avoid those concerns escalating. However, the level of need or risk is not such that involvement by statutory children's social care service is required. Targeted support for SEN is called SEN support and requires that a child or young person has been identified as requiring high quality inclusive teaching in order to make good levels of progress and will be on the school SEN register (or equivalent in further education).

Level 3: Children with complex/multiple needs or in need of protection

Children with complex multiple needs require specialist services in order to achieve or maintain a satisfactory level of health or development or to prevent significant impairment of their health and development and/or who are disabled.

In addition, for some children where there is reasonable cause to suspect that they are suffering or are likely to suffer significant harm then a children and families assessment led by a qualified social worker will be undertaken.

If the conclusion of the assessment by the social worker is that continued social care involvement is required to prevent impairment of the child's health or development suffering, a "child in need" (CIN) (S.17) plan setting out the contribution of all agencies to meeting the child's needs will be prepared and implemented with contributions and agreement from the relevant agencies.

If the suspicion of significant harm is substantiated, and is assessed as likely to continue, a multiagency "Initial Child Protection Conference" (ICPC) (S.47) will consider what further action is required to protect the child.

This level also includes children in specialised services in residential, day patient or outpatient settings for children and adolescents with severe and/or complex health problems, and children who are remanded into custody.

The Medway Threshold Guidance 'A multi-agency guide to assess levels of need and identifying the most appropriate support in Medway' and introductory threshold video can be accessed [here](#).

7. Early Help Support for Children and Families – Our Offer

Assessing Need through Conversation

Early Help is focussed on additional support that a family needs to enable them to thrive and for children to meet their potential.

All support for families therefore begin with a conversation. Although an assessment of need involves the gathering and analysis of information it is not a desktop exercise, it is through personal interaction with children and their families, and the ability to hear other professionals' voices.

In the vast majority of cases there are opportunities for professionals working with children to engage with them and their family in early and constructive conversations as and when concerns arise.

Most conversations, observations and interactions will start with the child and their family because an issue has arisen which may cause concern for the professional or lead to uncertainty about the welfare of a child. Working with the child and their family to address worries as they arise, rather than waiting for concerns to escalate is appropriate for the majority of children and can ensure much needed consistency for a family. Providing encouragement to families, building on their strengths and sharing information with or about the family to other services that might help are all key ingredients to promoting children's wellbeing.

We also recognise that where concerns regarding children exist, there may be involvement from various agencies and possibly with other family members. Each of these different professionals will hold important information and play a crucial role in supporting a family. This is why conversations are vital and why drawing professionals and family together in a co-ordinated way within the Early Help Assessment and Plan process is helpful to the whole family.

Having a conversation doesn't always result in increased levels of intervention. It may be that, as a result of having a conversation with the family and/or other professionals, and sharing information and seeking advice, the needs of the child or young person can be met within universal services, even if these need to be changed or the approach adapted.

Intervention Plans

Intervention plans are currently used in Medway Council's Family Solutions (Early Help) and are being rolled out across the partnership. They are designed to be timely but also ensure that families access the support and services they need to address concerns that may require more than a single universal offer but do not have the level of complexity to require an early help assessment (See below).

Intervention plans support an agency or practitioner to explore strengths and issues with a family and their professional network. The plans identify a maximum of five outcomes for the family to achieve within 6-8 weeks. The emphasis is therefore on providing brief and focused intervention to be reviewed at the end of the 6–8 week timescale.

Early Help Assessment

In Medway, the Early Help Assessment is the process for supporting children, young people, and families with additional needs through early identification, swift intervention, and a planned, co-ordinated response. It is used across the levels of need including Special Educational Needs and Disability (SEND).

The Early Help Assessment can be used by all agencies including health, schools, academies, early years settings and colleges as part of the graduated response to meet the needs of children and young people to record, monitor and evaluate support, intervention and progress against outcomes set.

The Early Help Assessment aims to: identify the support needed; empower children, young people and their families; and provide a timely, seamless service if needs escalate. The Early Help Assessment supports families through early help to escalating complex needs and urgent needs that require a statutory response from children's social care.

The Early Help Assessment can then be used as supporting evidence to inform a statutory assessment of Education, Health, and Care needs if this is required in the future.

The Early Help Assessment assesses a child's needs across four key areas:

- Health and Wellbeing
- Development needs, educational attainment and achievement
- Parenting/caring
- Family and Community

The completed EHA should be submitted to support any referrals to Children's Services but it is not a pre-requisite. For full information about Early Help, advice, and guidance please see the link below.

Early Help Assessment Review (EHAR)

The purpose of the EHAR is to bring together the family and practitioners with the appropriate skills to meet the identified needs of the child and family and develop a family outcomes plan. The parents and practitioners concerned will agree the most appropriate person to undertake the Lead Professional role. Goals will be identified, and regular reviews undertaken. The focus is on a child-centred approach, positive engagement with the family, increased community involvement and collaboration between agencies.

Lead Professional (LP)

All families receiving early help support will have a Lead Professional. The Lead Professional will usually be the practitioner who is best placed to provide consistent support to the child and family and will probably have initiated the Early Help Assessment or Intervention Plan. The Lead Professional will support the child and family co-ordinate different agencies to ensure that the help they are all offering fits together seamlessly. The Lead Professional will ensure that children and families are actively involved in:

- all stages of the process
- identifying desired outcomes
- agreeing actions
- agreeing when outcomes have been achieved and support is no longer needed.

Early Help Services

In order to ensure that children and families receive the best possible support to meet their needs, we have a range of services, which are summarised in the table 1:

Early Help in Medway

Local Authority Family Solutions (Early Help)	Police & Criminal Justice Agencies	Education	Health	Community Services	Partnership Projects
Integrated working with Children's Social Care	Medway Task Force	Schools	Medway Community Health (GP, health visiting, midwifery, school nursing)	Housing	Violence Reduction Unit
Integrated working with SEND and Disabled Children's Service	Youth Engagement officers	Early Years settings and providers	Medway Young Person's Wellbeing Service	DWP and Job Centre Plus	Serious Youth Violence
Children and Family Hubs	Police and community support Officers (PCSOs)	Information, Advice and Guidance (IAG) Medway	Adult Mental Health Services	Voluntary and Charity Services	Domestic Abuse Recovering Together
Youth Centres	Local Schools Teams Officers	Adult Education	Counselling Services	Religious Settings and Communities	DICE Programme
Inclusion and Attendance	Community Safety Units	Medway Apprenticeship Scheme	Sexual Health Services	Medway Foodbanks	Commissioned Services
Adolescent Service	National Probation Service (NPS)	Parenting Programmes and Support	Public Health Medway Initiatives	Debt and Financial Support	Gillingham FC
Youth Offending Service	Victim Support Services	PSHE and RSE support and delivery	Acute Health Services		Oasis domestic Abuse Service
Integrated working with Adult Services			Substance Misuse Services		
			A Better Medway – Health Improvement services.		

A detailed outline of the early help services in Medway and contact details can be found in the Medway Service Directory:

<https://www.medway.gov.uk/directories>

Increasing concerns

We know that for the vast majority of children receiving support early before problems escalate it will ensure that they do not require prolonged support from professionals. However for some children with more complex needs this may not be the case. It could be an Early Help Assessment is not enough. In these situations, conversations may need to focus on whether statutory services are needed to ensure the child reaches their potential under S.17 The Children Act (1989) or to keep a child safe from harm under S.47 The Children Act (1989).

Where professionals become more concerned about a child they will use the continuum of need outlined on P12 to have a conversation with their supervisor, line manager or designated safeguarding lead. They will share their concerns and agree what else needs to happen to meet the child's needs and reduce any risks to their safety.

Worried about a child;

<https://www.medwayscp.org.uk/mscb/info/5/mscb-1/34/worried-child>

8. Strategic Priorities

The Early Help Partnership has agreed the following strategic priorities for action for 2021-24:

- To ensure a consistent understanding of the early help offer across the partnership so that families know how to receive help when they need it.
- To ensure that the Early Help Partnership Board supports operational staff to deliver the priorities within this plan.
- To ensure that processes are fit for purpose. In the first year this will include:
 - Implementing a new delivery structure of targeted early help support across the partnership
 - Revising and implementing the threshold document across the partnership
 - Taking a partnership approach to review the early help assessment to ensure that it is aligned with other key processes and models including Signs of Safety
 - Improving step-up and step down processes to ensure that families receive the right level of support as needs change
- To build capacity and skills across the partnership and in the community to support children with additional needs in order to reduce the risk of needs escalating so that a statutory response is required.
- To work with families and communities to design local services.
- To further develop partnership working and information sharing, ensuring that all key strategies are aligned.
- To deliver multi-agency group work to families, maximising the expertise of professionals across the range of agencies in the early help partnership.
- To understand, share and further develop direct work resources and maximise community assets
- To ensure the interface between case management systems across the partnership.
- To ensure that the delivery of services are underpinned by research, evidence based practice and a rolling programme of training across the partnership. Training will be aligned with other strategies such as the

Neglect Strategy and the Parenting Strategy to ensure improved awareness, early recognition of concerns and a shared language.

- To promote innovation and encourage new and creative ways of working.
- To agree common outcomes, a core early help dataset and develop a robust process of QA and auditing in order to ensure consistency, assess impact and outcomes, as well as assess quality and inform ongoing continuous improvement.
- To undertake needs and undertake gap analysis to inform ongoing developments and commissioning to ensure that needs are met.

Each of these priorities underpin a range of different individual agency plans and partnership strategic plans. See next section. Section 9.

9. Action Plans

The key priorities identified in Chapter 8, are being taken forward through a range of different agency documents and plans:

- MSCP Strategic Plan 2020-2022. Priority Five: Effective Early Help
- MSCP Annual Report
- MSCP - A multi-agency guide to assess levels of need and identifying the most appropriate support in Medway
- Kent and Medway Safeguarding Children Procedures
- Medway Council Early Help Action Plan
- Medway Early Help Plan on a Page
- The Kent Fire & Rescue Service (KFRS) Training plan.
- The 0-19 Integrated Health Contract for Health Visiting, School Nursing and Specialist Health Services (22 principles)
- A Better Medway – Health Improvement Services – “Easier ways to be healthy.”
- Maternal Smoking Strategy
- Obesity Whole System Plan
- Climate change emergency action plan
- Carer's strategy
- Social prescribing 5 year plan
- Oral health strategy (in development)
- Kent and Medway Domestic Abuse Strategy with Medway specific action plan
- Infant Feeding Strategy
- Medway Community Safety Partnership plan
- Medway Safeguarding Children Partnership Neglect Strategy

- Medway Safeguarding Children Partnership Parenting Strategy

10. Measuring Success

The Early Help Partnership Board is responsible for collating evidence to demonstrate the quality, effectiveness, and impact of this strategy. In order to do this, the Early Help Partnership Board has agreed a performance dashboard, which is summarised in the diagram on the following page. Together we have agreed a core set of key performance indicators which are grouped into three areas:

- Families' access to services;
- Intervention provided; and
- Outcomes.

How will we know we have been successful?

Using the Early Help performance dashboard, the Partnership Board will regularly monitor the key performance indicators across the partnership. It is expected that the implementation of this strategy will result in:

- *More families being empowered and enabled to take control of their lives;*
- *More families being supported in their local communities, avoiding the need for higher levels of intervention;*
- *Positive outcomes for children, young people and families as a result of the intervention that we provide.*

Early Help Partnership Board – Performance Dashboard

Access

- Contact & Referral Data for all early help services including Medway Council's Family Solutions (Early Help)
 - ✓ *Numbers by source*
 - ✓ *Identified need*
- Re-referrals into Early Help
- Waiting Lists

Intervention

- Numbers worked with by all early help services
- Early Help Assessments started by Hubs and Partners
- Number of Intervention Plans
- Length of intervention / support

Outcome

- Number of "Step Ups" to Children's Social Care
- Number of "Step Downs" from Children's Social care to Early Help.
- Outcomes achieved - % of cases achieving positive outcomes on closure.
- Multi-agency auditing through the Case file Auditing Group (CFAG)
- Feedback from children and families:
 - ✓ % of those supported that feedback that the service was timely; helpful; and resulted in them being empowered to meet their own needs.

