



**Birmingham  
Early Help Strategy  
2021-2023**

# Contents

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## **Birmingham Early Help Strategy 2021-2023**

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|  |    |
|--|----|
| Background and Introduction            | 3  |
| Our Vision & Birmingham's Big Ideas    | 5  |
| Early Help in Birmingham               | 6  |
| Right Help, Right Time. Layers of need | 7  |
| Family's needs in Birmingham           | 9  |
| Indices of Deprivation 2019            | 11 |
| Early Help Offer                       | 13 |
| Key Achievements                       | 14 |
| Measuring Quality & Impact             | 16 |
| Principles as a Partnership            | 18 |
| Governance                             | 20 |
| Our Response to Emerging Needs         | 21 |
| Our Priorities – Action Plan           | 23 |
| Key Success Indicators                 | 29 |
| Feedback                               | 34 |



BIRMINGHAM  
**Safeguarding  
Children**  
PARTNERSHIP



## Background and Introduction

We are pleased to present the Birmingham Early Help Strategy for 2021-2023. Birmingham Partners have given their commitment to completely refresh and re-energise our approach to maximising the potential of this multi-agency strategy.

Birmingham Children's Partnership was formed in 2019, to work together to tackle systemic challenges. We needed a **System design**. The Covid-19 emergency has taught us how quickly we can change our services and support for families. As we find a new normal, one thing is certain, that we do not want to lose the progress we have made in localities, communities and partnership working. Whilst this strategy sets out our ambitions, we now know we can do this, and help generations of children, young people and families to thrive and flourish in Birmingham.

The purpose of this strategy is to set out how partners who work with children, their families and carers will deliver services in a way which enables children to maximise their potential, are kept safe and where appropriate, prevents escalation of needs that require targeted or intensive interventions from statutory services.

The strategy sets out the ambition of all the partners in Birmingham to deliver the Right Help at the Right Time for children, their families and carers by providing support and early help that enables children to thrive within their family environment and improve their long term outcome and goals.

In Birmingham, as a partnership we have commitment to work together when considering the needs of a family as a unit and to ensure that families receive a coordinated approach to be supported with a lead Person who will make sure that the needs, views and wishes of the children are fully understood and central to the support they receive.

To help make this happen we formed the Birmingham Children's Partnership in 2019. It was based on a simple idea: to work together to tackle systemic challenges. It is led by chief executives from the local authority, children's trust, health commissioners and providers, the police and voluntary sector body.

A small central team was set up to accelerate priority projects, and as the pandemic approached, we were forming a transformation plan and investment strategy with the ambition to have the best early help in the country.

### System design

Unless a city like Birmingham becomes good at catching needs early and at scale, we will always chase our tail and be forced to put the cash into late intervention. It is a straight-forward concept that we turned into the following simple five-point strategy:

1. **Significantly increase the capacity of help for families.**
  - a. We can't afford to do this ourselves, so we need help in the community, in schools and other universal services, and online support to be as accessible and effective as possible. If we let go of the concept that public services are the only way of helping families, we find there are a lot of other resources that can make a huge difference and reduce demand.

## **2. Connect our most vulnerable families to this support.**

- a. For example, by training professionals in what is in their community and how to introduce a family to a group or service. Or through widely advertising a simple list of universal early help, such as our “From Birmingham with Love” campaign.

[www.birmingham.gov.uk/love](http://www.birmingham.gov.uk/love)

## **3. Develop personal relationships between professionals.**

- a. They can then connect around the family without the barriers of referrals, unnecessary process and handovers.
- b. We’ve established multi-agency teams around 500+ schools, split the city into 10 localities, and are introducing a new case management system across all partners. This mirrors relational practice and co-production with families which underpins our operating model.

## **4. Work with children and young people to develop a compelling vision.**

- a. It feels easier to design the perfect “target operating model” with a “programme management office” and tell everyone what to do, but this approach doesn’t reflect reality. Professionals will only change because they understand the vision; it connects them to why they came into the job, and they are inspired and empowered to improve. With more than 1,000 organisations and 50,000 staff in the Birmingham early help system we had to create an authentic vision — so worked with

young researchers and 4,000 children and young people across the city to amplify their voice and shape the vision, service design and outcome dashboard.

## **5. Sweat the governance.**

- a. We’ve made a concerted effort to improve our boards, so they make a tangible difference. For early help, we’ve set up a powerful alliance with an independent chair that is underpinned by a legal section 75 pooled budget and will link into the emerging Integrated Care System structures in the health service. The Early Help Alliance has teeth: with full control as the design authority, commissioner of the 10 localities, and provider of resources to each locality.
- b. New multi-agency Design Teams (including users and frontline staff) tackle the so-called “wicked issues”— which are complex problems that can’t be solved by one agency or even the public sector alone, common examples include poverty or obesity – and are empowered to change our service models. And we’re proud of our two transformation apprentices, with experience of our services, who are already making a fundamental impact on boards and through service design.

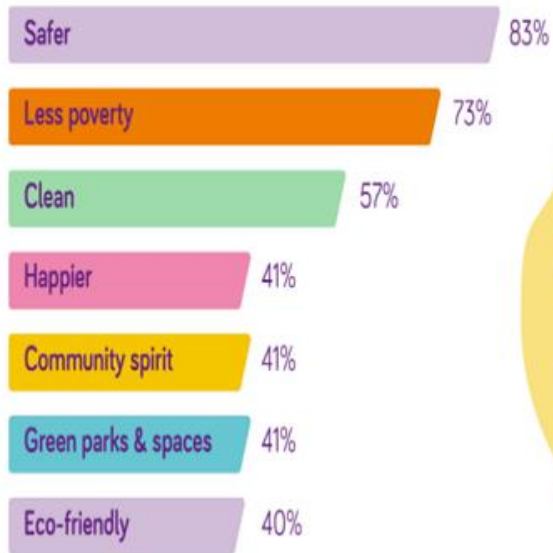
This design has not been developed in isolation: it is built on foundations laid in the vision of early help from the Ministry of Health, Communities and Local Government. That we would focus on working at a locality level having 10 geographical boundaries.

We know children and families have had a tough experience during the pandemic, so it’s even more important that as Birmingham bounces back, we prioritise their development, outcomes and

experience. This led us to...

## Our Vision

Nearly 4,000 children and young people took part in surveys and workshops. They were asked what are the top five things you want for Birmingham? This is their vision for the City [vision for the city](#)



value our children and young people.

### Invest in early help

Early help is everyone's business, and the responsibility of all professionals. We are investing to support families before their needs get worse.

### Lift children out of poverty and adversity

Through this investment we will reduce the number of children growing up in poverty, invest in jobs, education and outdoor spaces, and reduce needs such as mental ill-health, substance misuse and domestic abuse



## Birmingham's BIG IDEAS

### Be a child friendly city

We celebrate our youth and super-diversity, and

# Early Help in Birmingham

## What is Early Help

By early help we mean the total support that improves a family's resilience and outcomes or reduces the chance of a problem getting worse.

In Birmingham, we are committed to making a difference to the lives of children and young people. We want Birmingham to be a place where all children and young people thrive and feel safe from harm.

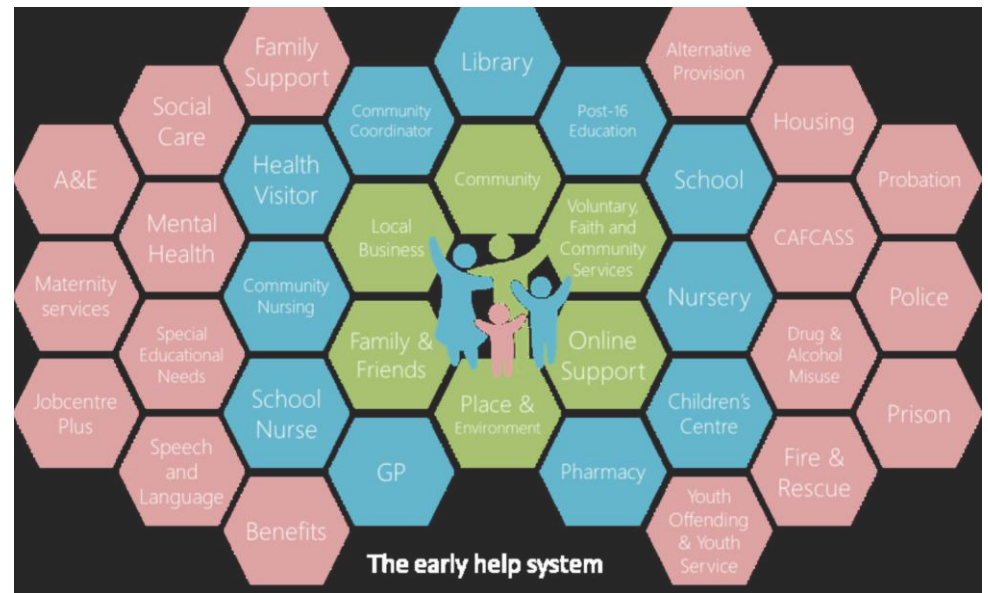
We recognise "It takes a city to raise a child", so by us all working together and helping families access the right help and support at the right time, at the earliest opportunity we can support children and young people to meeting their full potential and try to stop the challenges or difficulties that they are facing from escalating for them and their family.

A range of agencies are involved in identifying where families need additional support, and in providing early help. Over 50,000 people work in early help from universal through to acute services in Birmingham

This strategy will support us to have a consistent and coordinated approach across the partnership, so all families can expect the same support and good quality service no matter what their needs are and where they live.

### The Early Help System

- Important to people, **GREEN** shows friends, family and the community that keep us all resilient.
- Universal Services for people in **BLUE** include schools and GPs.
- **PINK** indicates more acute services that provide focused help when needed



# Right Help, Right Time

## Layers of Need

Right Help, Right Time evaluates the needs of children, young people and families in Birmingham, ensuring that our resources are targeted where they are most needed and will have the most impact by working within our layers of need

Having a strong early help offer is extremely important in ensuring we provide families with the support they need as soon as they need it, the Right Help at the Right Time preventing problems from escalating. Serious problems can cause

Birmingham has four layers of need these layers are

**Universal needs** - a range of services such as maternity services/health visiting services, school nursing, GP practices, early years, school and education settings, housing and youth services are provided as a right to all children including those with universal plus, additional and complex needs.

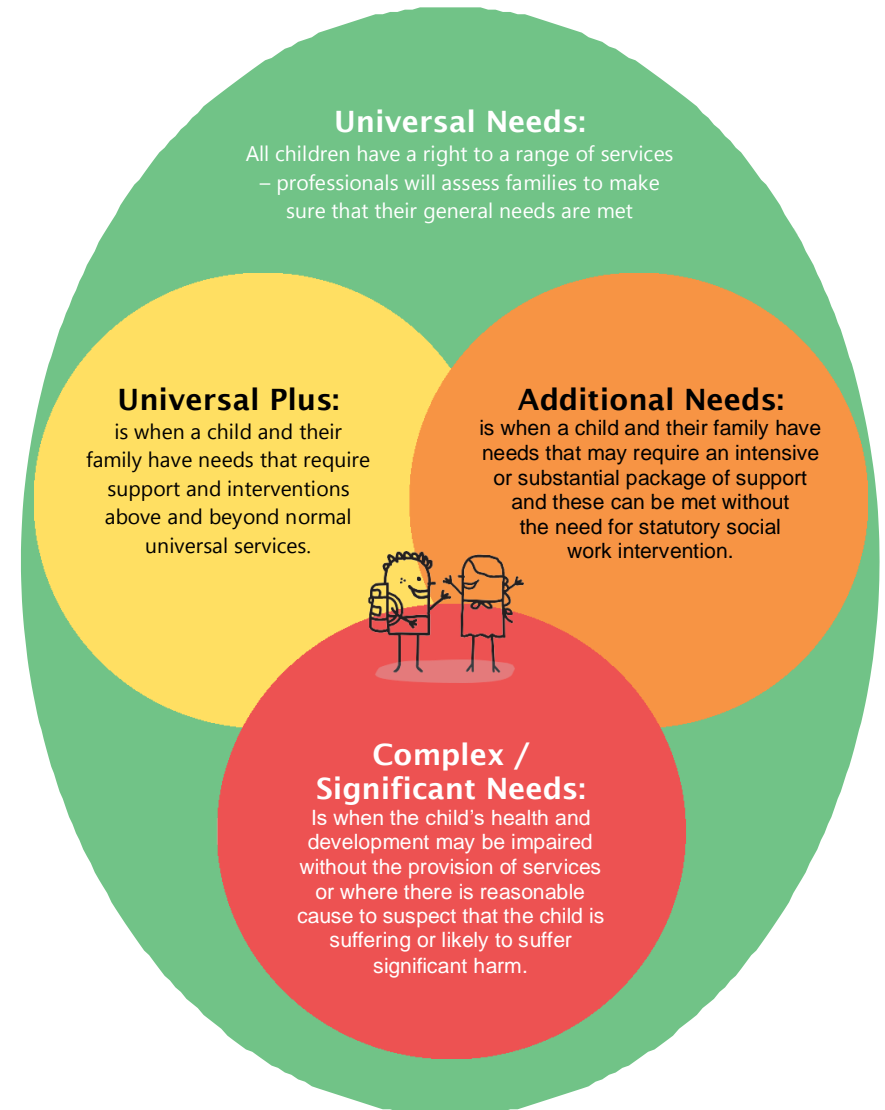
These services are also well placed to recognise and respond when extra support may be necessary. This may be because of the child's changing developmental, health and wellbeing needs or because of parental or family circumstances

Children with Universal Plus needs are best supported by those who already work with them such as health professionals, children's centres, school settings, organising additional support with local partners as needed. This can be through an Early Help Assessment and an Our Family Plan

For children with Additional needs a co-ordinated multi-disciplinary approach is usually best led by a professional already known to the family. The lead professional will engage the family and other professionals to co-ordinate support through one plan

Children with complex and significant needs are those whose

health and development may be impaired without the provision of services, disabled children, or those where there is reasonable cause to suspect they may be at risk of significant harm



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The Early Help Locality Teams can support the Lead Professional and family in a more intensive way. To access the Early

Help Locality Teams click or type this link into your web browser: <https://bit.ly/familycf> and complete the Family Connect Form.

For children with **Additional needs** a co-ordinated multi-disciplinary approach is usually best led by a professional already known to the family. The lead professional will engage the family and other professionals to co-ordinate support through one plan. Where the support needed is more than a lead professional can organise effectively, the Early Help Locality Teams can support the lead professional and family in a more intensive way.

To access the Early Help Locality Teams, click or type this link into your web browser: <https://bit.ly/familycf> and complete the Family Connect Form.

Children with **Complex and Significant** needs are those whose health and development may be impaired without the provision of services, or who are disabled, or those where there is reasonable cause to suspect they may be at risk of significant harm. Examples of specialist services include children's social care, accessed via CASS; Child and Adolescent Mental Health Services (CAMHS), accessed via Forward Thinking Birmingham; and Youth Offending Services.



# Family's Needs in Birmingham

## Demographics

Birmingham is the youngest city in the country with a super-diverse population, (over 1.1 million). This makes Birmingham, one of the most populated cities in the UK. There are over 400,000 children, young people and young adults in the city under 25.

### If Birmingham is a village....

- We would have 100 children. There would be:
  - 51 boys
  - 49 girls
  - 19 children would be aged 0-4
  - 19 aged 5-9,
  - 27 aged 10-17
  - 36 aged 18-25
- The children's ethnicity would likely be:
  - 53 White British (with 5 white 'other')
  - 14 Pakistani
  - 7 Other ethnicities
  - 6 Indian
  - 4 Black Caribbean
  - 4 Mixed ethnicities
  - 3 Bangladeshi
  - 3 Black African
  - 1 Chinese

We need a **shared understanding of the life experience of children** and young people growing up in Birmingham.

### Of our 100 **before Covid-19**...

- 1 child or young person is **looked after** by the Council
- 7 live in a household where an **adult** experienced **domestic abuse** in the last year
- 19 children are living in a household where an **adult** has one or more of **the toxic-trio** at an acute level
  - Mental ill-health, drug and alcohol abuse, domestic abuse)
- 24 children will suffer with diagnosable or lower level adverse mental health
  - 12 children would have a recognised **mental health disorder**
- 41 children and young people would be growing up in **poverty and deprivation**
- In three localities more than half are in **poverty**

**Despite this, 62 children will say they are happy**

# Indices of Deprivation 2019 (IoD2019)

## National Context

1<sup>st</sup>  
Most  
deprived



32,844<sup>th</sup>  
least  
deprived

There are 32,844 small areas (Lower-layer Super Output Areas) in England, with an average population of 1,500

The Index of Multiple Deprivation (IMD) combines information from seven domains to produce an overall relative measure of deprivation. The domains are: **Income; Employment; Education; Skills and Training; Health and Disability; Crime; Barriers to Housing Services; Living Environment**

<https://www.gov.uk/government/statistics/english-indices-of-deprivation-2019> Mapping by domain/area [https://dclgapps.communities.gov.uk/imd/iod\\_index.html](https://dclgapps.communities.gov.uk/imd/iod_index.html)

### Income

(22.5%)



Measures the proportion of the population experiencing deprivation relating to low income

#### Supplementary Indices



**Income Deprivation Affecting Children Index (IDACI)**

measures the proportion of all children aged 0 to 15 living in income deprived families



**Income Deprivation Affecting Older People Index (IDAPOI)**

measures the proportion of those aged 60+ who experience income deprivation

### Employment

(22.5%)



Measures the proportion of the working age population in an area involuntarily excluded from the labour market

### Education

(13.5%)



Measures the lack of attainment and skills in the local population

### Health

(13.5%)



Measures the risk of premature death and the impairment of quality of life through poor physical or mental health

### Crime

(9.3%)



Measures the risk of personal and material victimisation at local level

### Barriers to Housing & Services

(9.3%)



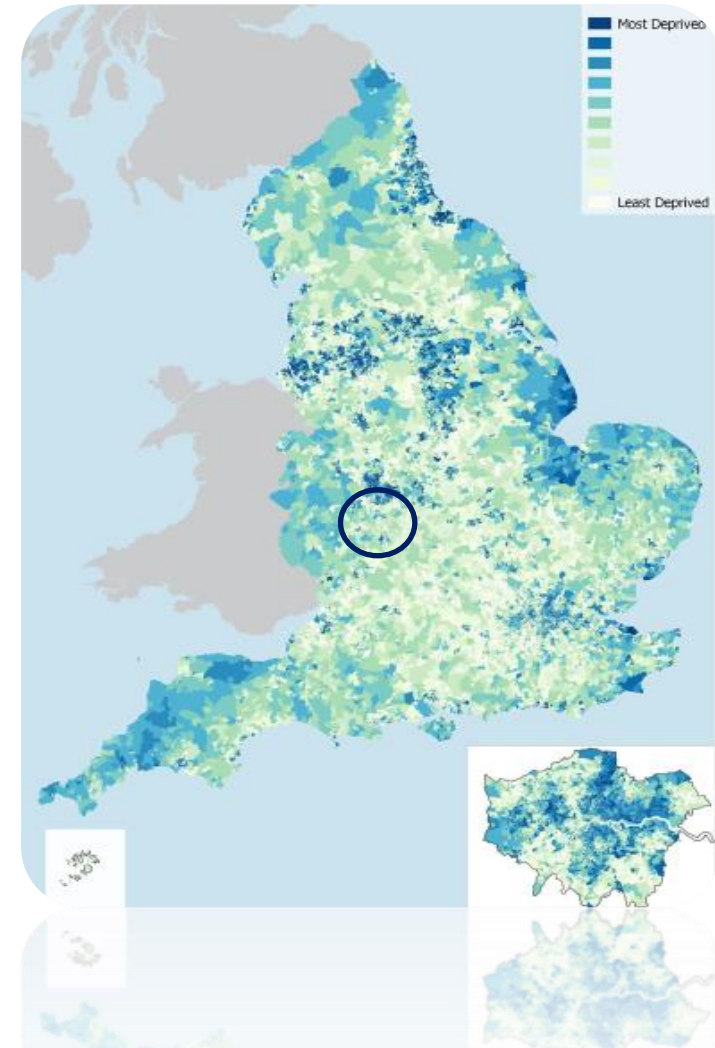
Measures the physical and financial accessibility of housing and local services

### Living Environment

(9.3%)



Measures the quality of both the 'indoor' and 'outdoor' local environment



# Birmingham Context (IoD-2019)

## Regional Ranking

1. Birmingham
2. Sandwell
3. Wolverhampton
4. Walsall
5. Coventry
6. Dudley
7. Solihull

### Deprivation by Parliamentary Constituency

MHCLG do not produce deprivation data for wards and constituencies. However, they do provide a methodology for aggregating LSOA data into higher geographies and this has been used to create rankings for the city's constituencies and wards (page 9) for the IMD.

Hodge Hill is the most deprived constituency in Birmingham followed by Ladywood and Erdington. All three areas have IMD scores that would rank them in the top 10% most deprived neighbourhoods nationally. Sutton Coldfield is by far the least deprived constituency and is somewhat of an outlier from the other 9 constituencies being in the 7th deprivation decile (the 30% least deprived areas).

| Rank | Constituency                  | IMD Decile |
|------|-------------------------------|------------|
| 1    | Hodge Hill Constituency       | 1          |
| 2    | Ladywood Constituency         | 1          |
| 3    | Erdington Constituency        | 1          |
| 4    | Hall Green Constituency       | 2          |
| 5    | Yardley Constituency          | 2          |
| 6    | Northfield Constituency       | 2          |
| 7    | Perry Barr Constituency       | 2          |
| 8    | Edgbaston Constituency        | 3          |
| 9    | Selly Oak Constituency        | 3          |
| 10   | Sutton Coldfield Constituency | 7          |

### Most deprived local authorities based on Rank

1. Blackpool
2. Manchester
3. Knowsley
4. Liverpool
5. Barking and Dagenham
6. Birmingham
7. Hackney
8. Sandwell
9. Kingston upon Hull
10. Nottingham

### Most deprived local authorities based on Score

1. Blackpool
2. Knowsley
3. Liverpool
4. Kingston upon Hull
5. Middlesbrough
6. Manchester
7. Birmingham
8. Burnley
9. Blackburn with Darwen
10. Hartlepool

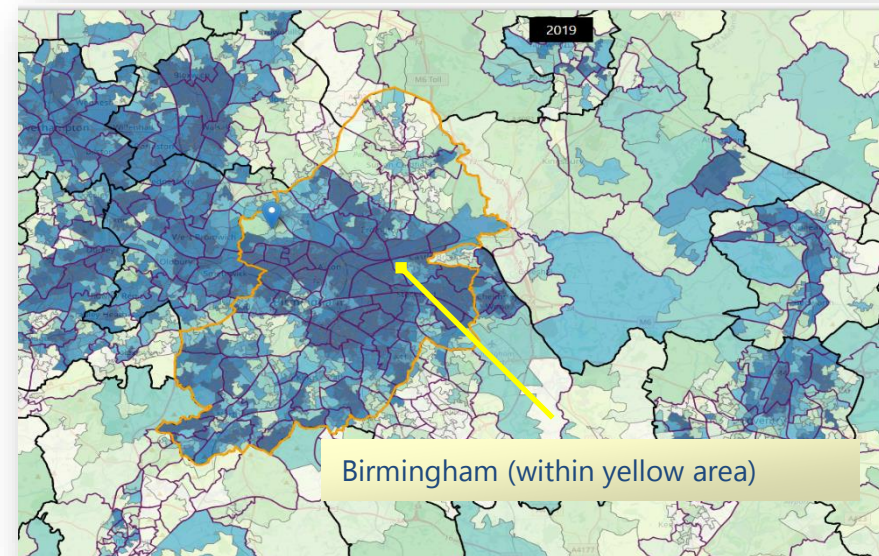
### Most deprived local authorities based on the Proportion of LSOAs in the most deprived 10% nationally

1. Middlesbrough
2. Liverpool
3. Knowsley
4. Kingston upon Hull
5. Manchester
6. Blackpool
7. Birmingham
8. Burnley
9. Blackburn with Darwen
10. Hartlepool

Table 3: The 20 local authority districts with the highest proportion of neighbourhoods in the most deprived 10 per cent of neighbourhoods nationally on the IMD 2019, and change since the IMD2015

|     | Local Authority         | IMD2019                      |  | IMD2015                      |  | Percentage point change from 2015 |
|-----|-------------------------|------------------------------|--|------------------------------|--|-----------------------------------|
|     |                         | Count of LSOAs in 1st Decile | % of LSOAs in 10% most deprived nationally | Count of LSOAs in 1st Decile | % of LSOAs in 10% most deprived nationally |                                   |
| 1.  | Middlesbrough           | 42                           | 48.8%                                      | 42                           | 48.8%                                      | 0.0                               |
| 2.  | Liverpool               | 145                          | 48.7%                                      | 134                          | 45.0%                                      | 3.7                               |
| 3.  | Knowsley                | 46                           | 46.9%                                      | 45                           | 45.9%                                      | 1.0                               |
| 4.  | Kingston upon Hull      | 75                           | 45.2%                                      | 75                           | 45.2%                                      | 0.0                               |
| 5.  | Manchester              | 122                          | 43.3%                                      | 115                          | 40.8%                                      | 2.5                               |
| 6.  | Blackpool               | 39                           | 41.5%                                      | 36                           | 38.3%                                      | 3.2                               |
| 7.  | Birmingham              | 264                          | 41.3%                                      | 253                          | 39.6%                                      | 1.7                               |
| 8.  | Burnley                 | 23                           | 38.3%                                      | 20                           | 33.3%                                      | 5.0                               |
| 9.  | Blackburn with Darwen   | 33                           | 36.3%                                      | 28                           | 30.8%                                      | 5.5                               |
| 10. | Hartlepool              | 21                           | 36.2%                                      | 19                           | 32.8%                                      | 3.4                               |
| 11. | Bradford                | 104                          | 33.5%                                      | 101                          | 32.6%                                      | 1.0                               |
| 12. | Stoke-on-Trent          | 51                           | 32.1%                                      | 48                           | 30.2%                                      | 1.9                               |
| 13. | Halton                  | 25                           | 31.6%                                      | 21                           | 26.6%                                      | 5.1                               |
| 14. | Pendle                  | 18                           | 31.6%                                      | 16                           | 28.1%                                      | 3.5                               |
| 15. | Nottingham              | 56                           | 30.8%                                      | 61                           | 33.5%                                      | -2.7                              |
| 16. | Oldham                  | 43                           | 30.5%                                      | 32                           | 22.7%                                      | 7.8                               |
| 17. | North East Lincolnshire | 32                           | 30.2%                                      | 31                           | 29.2%                                      | 0.9                               |
| -   | Hastings                | 16                           | 30.2%                                      | 16                           | 30.2%                                      | 0.0                               |
| 19. | Salford                 | 45                           | 30.0%                                      | 43                           | 28.7%                                      | 1.3                               |
| 20. | Rochdale                | 40                           | 29.9%                                      | 38                           | 28.4%                                      | 1.5                               |

Note: table based on 2019 local authority configurations. For 2019, Halton and Pendle rank 13<sup>th</sup> and 14<sup>th</sup> respectively and are presented here with the same percentage of LSOAs in the 10% most deprived nationally according to the IMD2019 due to rounding. North East Lincolnshire and Hastings (17<sup>th</sup>) are equally ranked according to the IMD2019.



# Our Early Help Offer

## **Significantly increase the capacity of help for families.**

In response to the pandemic and deliver an effective early help offer Birmingham has established 10 localities with different voluntary sector organisations, who are all aligned to the Birmingham Children's Trust Early Help Teams all services play an extensive role in providing early help to families in Birmingham to deliver hands on practical support at a much earlier point of need.

The ten localities are accessed by either a professional requesting support with an early help assessment whereby a specialist worker may be allocated to the family plan to deliver timed specific interventions with the family or child such as Autism strategies, allocate a youth mentor to work alongside teenagers or housing specialists and many more. Families can also directly request support from the locality they live in by phoning or completing the family connect form online.

A family can access a range of interventions to support their needs and prevent escalation into more specialist services, programs currently on offer include:

Freedom Programme working with victims of Domestic Abuse, Parenting Programmes such as Triple P, ACES working with effect of trauma, None Violent Resistant (NVR) working with parent and child, PACT this deals with teenage abuse on parents, Healing Together domestic abuse programme, plus 1-2-1 practical support in the home, Sign posting- Social prescribing.

A Family Plan that outlines the working hand in hand with the family and School, Nursery, Health colleagues and many more. This unique model puts us more in touch with our voluntary, community, faith groups and families, enabling us to draw on community resources and connections.

Birmingham also offers an Early Help team who sit within the front door of Birmingham Children's Trust Children's Advice and Support Service (CASS) to offer support to agencies using the Early Help Assessment framework which is based on our Signs of Safety practice model, in order to ensure that assessments are robust and result in clear and focussed multi-agency action plans that support children and families to achieve their best outcomes, Early Help Assessments (EHA) and Plans registered are audited and detailed feedback is provided.

Audits of the ten localities are undertaken with partners monthly, to assure threshold and service offers are consistent across the ten localities in Birmingham

## **Barriers to Housing Services - Temporary Accommodation**

We know that Birmingham housing is in crisis and we need to work as a system to overcome the impact, with over 3500 families living in Temporary Accommodation (TA) we understand the impact this has on our children and families, to tackle this early help is now being delivered direct from Housing front door to prevent families becoming homeless. The partnership joined together in delivering hands on practical support and offering resources to families currently in Temporary Accommodation. This strategy will set out that more needs to be done to deliver early help preventing homelessness

## **Health and Disability**

Getting to families Health and other family needs factors early is important to us. Many families who access acute services such as Birmingham Children's and Woman's Hospital Accident and Emergency Department don't need emergency treatment but do have a range of other risk factors that health colleagues can't always deal with. To support these families, Birmingham's approach has been to deliver an EH offer in the Children's Hospital A&E dept offering a full range of services to engage families into Early Help to prevent escalation into more specialist services and CASS requiring social work intervention

## **Education**

We know that school exclusions in Birmingham is higher than its statistical neighbours, we understand the need to work together to reduce temporary and permanent exclusions by delivering good early help at a much earlier point to crisis supporting education children and families. This strategy will set a plan to deliver a Pathway to Inclusion reducing the number of pupils facing exclusions in Birmingham

To enable true partnership working the Team Around the School (TAS) has been designed to support all 500 schools and Nurseries to build relationships with local services who can support them provide early help in education, each setting has a list of identified providers from Local Early Help Police officers, Education Psychiatrist, Locality Early Help Teams, Youth Offending Teams and more

## **Living Environment - Neglect**

In 2020 the Birmingham Children's Partnership set out its plan to establish a Neglect operations group to tackle the long-standing neglect starting in two pilot areas of the city. The operations group would be chaired by Health and Birmingham Children's Trust to oversee the implementation of the childhood neglect strategy – It set out its aims to appoint a Neglect Lead Manager to assist with the implementation of the Graded Care profile 2 GCP2 and produce guidance by April 2022. The pilot projects would then be evaluated by March 2022 to inform the rollout of a new multi agency practice model through the Early help system supporting localities.

## Key Achievements

- Over 2000 Early Help Assessments have been completed since April 21
- The total number of Family Connect Forms (FCF) received into the 10 localities between April 2021 and March 2022 is 38,857
- 22,000 households received financial support from the Household Support Fund since December 2021 and 13,150 of these applications resulted in families asking for more help and a FCF being triggered.
- Supported over 19955 children, young people and families through digital, signposting and brief interventions, that otherwise would not have received help, reducing demand to acute services.
- From June – August 2021, we have delivered intervention to 3500 individuals requesting an Early Help Intervention
- 7,200 families have received financial assistance in 2021, resilience funding, supermarket vouchers prior to the household support fund
- 7,000 young people have access to Kooth mental health support
- 8,000 families have received help from a programme of community grants in 2020
- 1,112 families have accessed on-line parenting support training since July 2020
- The Community Connectors and the EH teams have delivered 2179 early help promotion sessions on the Early Help System since April 2021, reaching 24,664 professionals.
- Community Connectors have mapped over 3,500 community groups across the city and a user-friendly data base is now being developed to help partners and families can access this information
- An Early Help Handbook has been designed on the local offer to help partners and families navigate services
- Team around the school tool has been developed to support education build relationships with their local partners

# Measuring Quality & Impact

## How do we monitor quality?

A sample of Early Help Assessments and plans are audited regularly using a multi-agency approach, leaders from preventative services and partner agencies all take part. The intention of this is to ensure that the key partners have a common understanding of what good Early Help intervention look like and to allow partners to feed back to their work forces where there is scope for improvement in practice.

Some of the key issues identified are their quality assessments and the linkage between assessment and actions, secondly the maintenance of momentum in Early Help Plans.

| Quality Target Outcome | Period           |                 |
|------------------------|------------------|-----------------|
|                        | Apr 20 - Sept 20 | Oct 20 – Mar 21 |
| Requires Improvement   | 50.41%           | 41.67%          |
| Good                   | 40.50%           | 52.08%          |
| Outstanding            | 9.09%            | 6.25%           |
| <b>Grand Total</b>     | <b>100.00%</b>   | <b>100.00%</b>  |

We understand our early help offer and our agency’s contribution: the volume and quality of the work we undertake. This is shared with the partnership at multi-agency partnership meetings such as the Local Safeguarding Children Partnership (LSCP) and Children’s Trust and any potential barriers to effective early help are shared and addressed.

Managers at all levels also have additional responsibilities: We ensure our workforce has the support, skills and training they need to deliver good quality support to families.

In 2022 each locality team will undertake regular bi-monthly audit sessions, to learn more about how partners are cooperating in the support for a family, these local audits will complement the city-wide auditing work being led by BCT. Actions from the audit work will be monitored to see that lessons are learnt.

# Measuring Quality & Impact

## How will we know if we are successful?

Ultimately, we will evaluate our success against the difference we make to the lives of our children and young people. We will use the following sources to inform us on how well we are performing, what's working well, and where we need to take action to achieve change. Our key indicators for success will be measured via a dedicated scorecard.

### Qualitative Measures

Multi-agency Early Help Assessment and plan audits will be developed to evaluate the quality of our work to support families across the partnership. Findings from these audits will be reported to the BSCP. Measures will also include using the 'my family wheel' to measure distance travelled, other measures include direct feedback from families, feedback from partners and in particular schools, and case studies that describe the help offered.

### Quantitative Measures

- The number of children entering the Children in Care System
- The Number of statutory assessments being required
- The number of families requiring Children social care Intervention following early help (Re referral)
- School attendance will be higher with children having better outcomes
- Less children will have been excluded from school
- Less children suffering with emotional mental health long term conditions
- Less Children affected and impacted by domestic abuse

### Feedback

A feedback survey will be developed for families, to gain feedback on the quality of our services and their experiences from children, young people, parents and carers. Feedback from families will also be sought through the audit process. This feedback will inform further service developments.



# Principles as a Partnership

## How to make every contact count (The Birmingham Way)

Birmingham has committed to make every contact count when talking to children and families. Birmingham practitioners have agreed to work with families in a relationship-based practice manner by Asking, Listening and Acting.



Making Every Contact Count (MECC) is an approach to behaviour change that utilises the tens of thousands of daily interactions professionals have with citizens, to support them in making positive changes to their health, wellbeing, debt, housing, adaptations, environment, social needs, etc.

MECC enables the opportunistic delivery of advice and guidance through established health and social care relationships and interactions that help nudge different behaviours. MECC is especially important now: During the COVID-19 pandemic, needs have changed, as have the way we connect; in many ways connections with citizens have reduced due to the pandemic. This means it is more important than ever to use what interactions staff do have to make every contact count.

### Be Curious - Listening

Build rapport - Look for signals - Mirror Listening – Affirm - Summarise

### Be Curious - Ask, Acknowledge, Act

When to raise the issue - open discovery questions - Be Positive - Provide Information

### Be Curious - Helpful phrases

### Be Curious - Behaviour change

Capability – Motivation – Opportunity

### Be Curious: Build your confidence

How might this conversation be improved?



# Principles as a Partnership

Our principles for working together to deliver effective early help as a partnership are: We expect everyone to make Every Contact Count. Whilst we are ambitious for change, these reforms will be a thousand small steps that we take together

1. Leaders trust each other, and there is a willingness to solve problems as a system and share risks
2. We collectively rebalance investment from acute services to early help for children and families
3. Frontline practice shifts to whole family working and coproduction with families
4. Services and systems are more connected: multiagency teams are based in localities and professionals are part of the community
5. We share data and intelligence to help target those most in need
6. We focus on relationships and bring more compassion to service delivery and our processes

**These principles and vision form a scaffold for everyone to shape their services and support around.**



## Partnership Culture Checks

We know we have a strong partnership early help offer when

1. Families can approach anyone working with them to ask for support, and that person will respond quickly to assess their needs and start conversations with the right people to identify how they will be supported. A multi-agency plan will be in place and regularly reviewed
2. Everyone is happy to act as the lead practitioner/person and champion the interests of children and young people
3. We respect and build on the relationships and trust families have in us. We stay involved with families and we champion their interests. We act as a link between services: we don't just refer on to another service

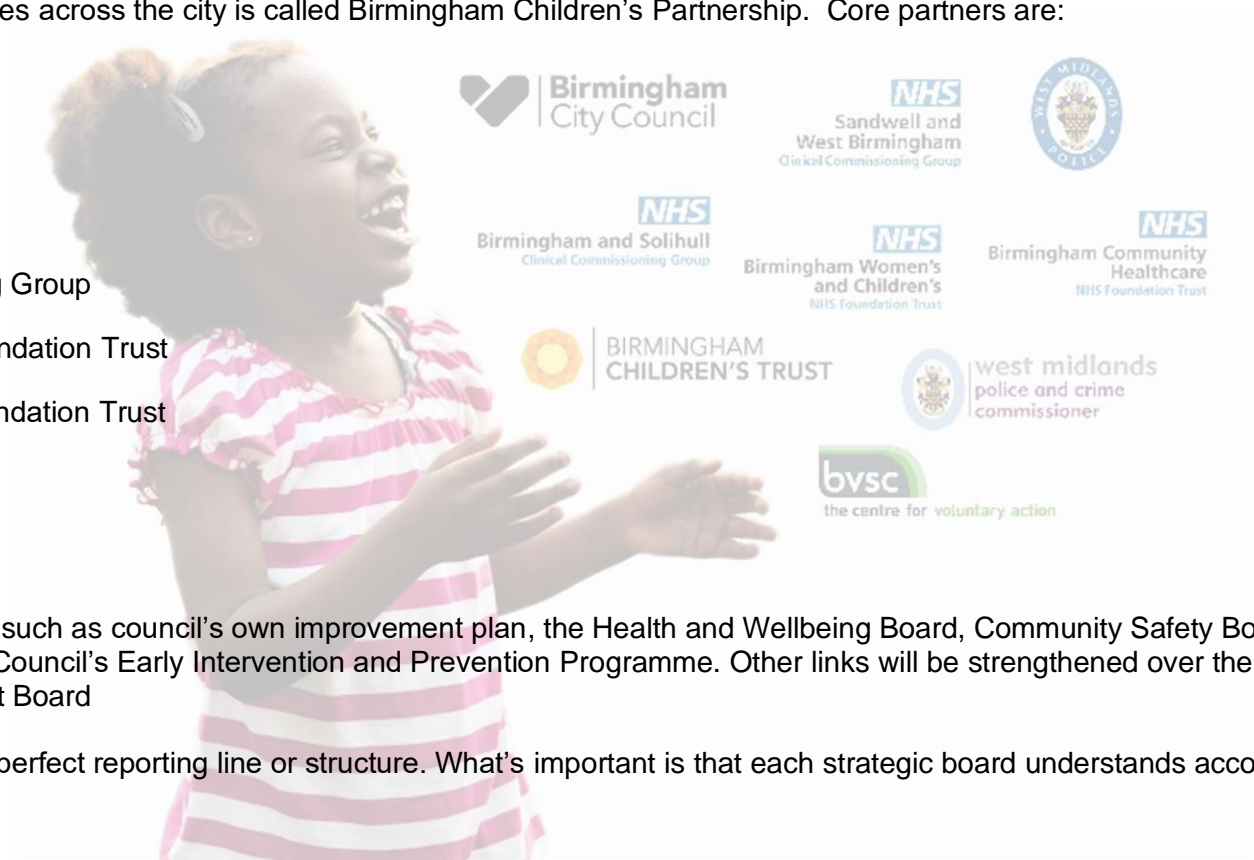
# Governance

The Birmingham Children's Partnership will oversee progress against this Early Help Strategy.

BCP has asked that the Early Help Partnership Board monitor performance and impact of the early help system and report back to the BCP Board on a regular basis. A summary of the work will be published in the Birmingham Safeguarding Children's Partnership Annual Report, which is also scrutinised by the Health and Wellbeing Board and Birmingham Council's Children and Families' Overview and Scrutiny Committee.

The group responsible for children and family outcomes across the city is called Birmingham Children's Partnership. Core partners are:

- Birmingham City Council
- Birmingham Children's Trust
- West Midlands Police
- Birmingham & Solihull Clinical Commissioning Group
- Birmingham Community Healthcare NHS Foundation Trust
- Birmingham Women and Children's NHS Foundation Trust
- Birmingham Voluntary Sector Council



Other strategies affect children and family outcomes, such as council's own improvement plan, the Health and Wellbeing Board, Community Safety Board, the Life Course Board, Local Enterprise Partnership and the Council's Early Intervention and Prevention Programme. Other links will be strengthened over the coming year including School Forums and the SEND Improvement Board

Because of the complexity of the system, there is no perfect reporting line or structure. What's important is that each strategic board understands accountability, relationship with others and escalation pathways.

## Our Top 3 Priorities:



### **Priority One (1) Reduce the Impact of Domestic Abuse on Children**

We will focus on reducing domestic violence and emotional abuse, adopting victim led provision and addressing the impact on children and others.

There are large number of families and children affected by DA and working across the partnership we will build a better early help offer for DA.

### **Priority Two (2) All Children Receive a Good Education**

We will work to reduce and prevent the risk of exclusion and ensure to provide Early Help to those whose attendance is low.

We will support schools and work closely in partnership with the schools' exclusions steering group to ensure that early help assessments are supported and build an understanding of the wider needs of children and families.

### **Priority Three (3) Supporting Children & Families with a SEND need to access appropriate services**

We will ensure families experiencing SEND receive support and that the Early Help offer works for all.

We will work closely with the SEND Improvement Board to develop a more systematic response to the needs of children and families with SEND, and that there is a clear early help offer that is promoted to all families.

## Our Response to Emerging Needs

Our action plan will keep the 3 priorities as a thread throughout all our work with families to be successful.

Some of our initiatives include resources and capacity to the partnership to deliver effective early Help

1. **Coaching and Mentoring:** Birmingham Children's Trust are exploring ways to secure capacity from the partnership for coaching and mentoring and are looking to match fund provision around key triggers for vulnerability such as transition, exclusion, prevent
2. **Support SEND Transformation** – There are key improvements required both in the Trust and in the Local Authority (Trust Development Plan, SEND recent inspection) that require a transformation around services to children with Special Educational Need. Supporting Family Grant has funded an Autism provision to wrap around Early Help cases and provide a more focused and specialist response to Autism and related SEN.
3. **Reducing Parental Conflict:** Conflict between parents whether together or separated is felt acutely by children caught in the middle. Strong evidence is emerging (Early Intervention Foundation) suggests where conflict is frequent, intense or poorly resolved it can harm children's outcomes well into adulthood and have a significant negative impact on children's mental health and long-term life chances. Education and even physical development can be regressed and a sense of attachment. Think Family have secured grant funding from DWP in a second phase to RPC, for workforce development and want all partners to enhance their awareness and practice around this significant area of need

This is not Domestic Abuse which would instead require a more significant and immediate response, for risk to be addressed and individuals made safe.

4. **Domestic Violence, breaking the cycle** – Recently the Trust has established a lead role around Domestic Violence and Abuse and through Think Family, the Local Authority Grant from Supporting Families is funding two new contracts. A Domestic Violence and Abuse victims' contract and a perpetrator programme to address the risk of future Domestic Violence victims.

## Early Help Priorities Action Plan:

### An Early Help Action Plan – This is a working document.

| Ref  | Task   | Lead              | Complete by | Impact  |
|--|--|-------------------|-------------|---|
| <b>1. The Partnership has the right infrastructure to support the development of early help services</b> |  |                   |             |   |
| 1a   | To lead a partnership approach to develop a pathway to reduce school exclusions  | AD Early Help     | On-going    | More children having an early help response reducing school exclusions      |
| 1b   | Make sure that strong leadership and reporting is in place and that all organisations are accountable to build multi-agency early help teams in localities | EHPB              | On-going    | Leaders can demonstrate and evidence improvements in service delivery       |
| 1c   | Support the development of Locality Steering Groups in the 10 localities   | EH Steering Group | July 22     | Priorities are agreed locally, and action plans are developed and monitored |
| 1d   | Measure the impact of improved Joined-up working across all services including children' social care and adults  | EH Steering Group | On-going    | Outcomes measures for children and families show positive benefits          |
| 1e   | Embed an Early Help recording, case management system (ECINS)  | AD Early Help     | On-going    | All schools and health partners use ECINS to plan early help for families   |
| 1f   | Optimise financial resources – Family Hubs, and links with BCC Early Intervention and Prevention programme,  | All partners      | On-going    | Capacity continues to develop in the Early Help System                      |

| Ref  | Task  | Lead   | Complete by  | Impact   |
|--|---|--|--------------|--|
| 1g   | Optimise financial resources – use of grants/bids across the localities   | Birmingham City Council Commissioning & Early Help Partnership Board | On-going     | Early Intervention Grants distributed and aligned with locality and community priorities for families  |
| <b>2. Support the understanding of RHRT, thresholds and pathways</b> |   |  |              |  |
| 2a   | Refresh and promote thresholds document and processes Right help Right Time   | All partners, Community connectors, EH coordinators                  | September 22 | At six monthly reviews, audits reflect a greater agency understanding of when children young people and families require early help services |
| 2b   | Refresh agency knowledge about early help services that are available in local communities and referral pathways (Community Connectors) | Community Connectors   | On-going     | Families report that they have been offered a range of local support services that meet their needs  |
| 2c   | Review refresh and develop new step-down procedures across the levels of need down from CSC into Universal services/ EH                 | AD Early Help  | July 22      | Improved consistency and smooth transfer of families as their support needs change   |
| 2d   | Empower and enable agencies to feel the confidence to intervene/get involved early  | Early Help teams in each locality                                    | On-going     | Agencies report that they feel supported and empowered to engage with children and families earlier through partnership support              |
| 2e   | Develop improved working links between the Integrated Front Door and the Virtual School Hub   | EH Steering Group  | September 22 | Improved communication and information sharing is evident and is making a difference   |
| 2f   | Improve links between Early Help and Adults Services to   |  |              | Whole family working model is more   |

| Ref  | Task  | Lead                | Complete by  | Impact  |
|--|---|---------------------|--------------|---|
|  | help reduce the impact of parental conflict including the roll out of DWP Training across sectors   | AD Early Help       | Sept 22      | evident with parents reporting that they are better able to support their children  |
| 2g   | Strengthen our Early Help offer to vulnerable groups of children and young people, such as care leavers who are parents and, children who are home educated or on part- time timetables | EH Steering Group   | July 22      | Children and vulnerable young people report that they feel better supported and know where to go to for help from their Lead person/worker    |
| <b>3. Understand the training need required, to ensure that practitioners are enabled to co-produce high quality assessments and plans</b> |   |                     |              |   |
| 3a   | Review the impact of the new Early Help Assessments and planning process, considering best practice nationally and the Signs of Safety approach   | Each locality team  | On-going     | Quality of Assessments and plans are improved and families report that they feel more empowered to take control of their lives                |
| 3b   | Roll out the tool that practitioners can use to measure neglect GCP2  | Neglect Coordinator | September 22 | Feedback from practitioners and agencies report that they are more confident in recording confidently. Audits evidence recording improvements |
| 3c   | Support locality teams to reflect on and deepen their Signs of Safety practice through observation and support within multi-agency group supervision                                    | EH Steering Group   | On-going     | Practitioners can evidence a maturity in their understanding of SoS and strengths within families and local communities                       |
| 3d   | Strengthen the offer of support for partners leading Early Help work including refreshing skills of staff to hold multi-agency meetings with families                                   | EH Coordinators     | On-going     | More partners undertaking Early Help Assessments and planning with families across the localities   |



| Ref  | Task   | Lead                         | Complete by      | Impact  |
|--|--|------------------------------|------------------|---|
| <b>4. Improve Audit and Quality Assurance function</b> |  |                              |                  |   |
| 4a   | Develop locality Early Help Audits with the new audit tool   | EH Steering Group            | Start by July 22 | Shared understanding from the new Audit findings and learning embedded in training and future commissioned services   |
| 4b   | Refine and improve early help performance scorecard and reporting  | EH Steering Group            | September 22     | New Performance scorecard accurately reflects the impact of EH Service delivery across the whole system in Birmingham |
| 4c   | Report the audit findings and early help performance to key boards, such as the BCP, BSCP on a regular basis   | Early Help Partnership Board | On-going         | Shared understanding from the new Audit findings and learning embedded in training and future commissioned services   |
| 4d   | Embed the current feedback survey to gain feedback on the quality of our services and the experiences from children, young people and their families | Locality Teams               | July 22          | Feedback from the survey feeds directly in to service reviews and practice improvement across agencies                |

| Ref  | Task  | Lead                         | Complete by  | Impact   |
|--|---|------------------------------|--------------|--|
| <b>5. We understand the needs of children and families in Birmingham, and we have the right range of services to meet these that can be accessed locally</b> |   |                              |              |  |
| 5a   | Ensure the Joint Strategic Needs Assessment is informed by the early help strategy and local needs.   | Early Help Partnership Board | On-goings    | The Early Help needs of Children and Families are reflected in the JSNA on a place basis to inform joint commissioning plans                     |
| 5b   | Review the range of programmes and interventions available in Birmingham by levels of need and locality based on locality needs analysis, and identify any duplication or gaps in our service | Locality Steering Groups     | On-going     | All agencies understand that presenting needs and challenges for children, young people and families in place and are able to respond swiftly    |
| 5c   | Develop a partnership commissioning plan for Early Help   | Early Help Partnership Board | September 22 | Shared investment is in place to maximise available pan-agency investment in the right place   |
| 5d   | Develop easily accessible and effective ways of communicating and getting feedback from our children and families e.g. pen portraits, use of social media                                     | EH Locality Teams            | On-going     | Children and Families report that they understand what help is available for them and they are able to access support where and how they need it |
| 5e   | Improve how we involve children and young people in the development of EH services  | EH locality teams            | On-going     | Children report that they can influence service design and can feel the improvements that they contribute  |

| Ref   | Task   | Lead                                     | Complete by | Impact  |
|---|--|--|-------------|---|
| <b>6. Our workforce is equipped with the knowledge and skills to achieve improved outcomes for children</b> |  |  |             |   |
| 6a  | Develop a more targeted Early Help training offer and promote the revised offer in local multi-agency training sessions, school, sessions. | EH coordinators,<br>community connectors | On-going    | The EHT Board receive regular updates from the front line and supports changes to training commitments accordingly      |
| 6b  | Develop and provide training in the role of the Lead Professional for whole family working   | EH coordinators,<br>community connectors | On-going    | Practitioners across organisations report that they feel more confident to intervene early when families need help      |
| 6c  | Develop a communication strategy to communicate new tools, guidance and best practice  | EH Steering Group,<br>Locality teams     | On-going    | Practitioners across organisations report that they feel more confident to intervene early when families need help      |
| 6d  | Develop and communicate information and online resources to families to equip them with the skills they need to support each other         | EH Steering Group                        | On-going    | Practitioners can evidence a maturity in their understanding of SoS and strengths within families and local communities |

## Key Success Indicators

| Outcomes   | How will this be achieved?   | Key Outcome Indicators  |
|--|--|---|
| <p>Children, young people and families feel happier, healthier, safer, more valued, more accepted, more responsible for their actions, more positively engaged in their community and successful in achieving their goals.</p> | <ul style="list-style-type: none"> <li>• Effective direct work with the child/young person and family: effective assessment, planning and review of the needs of children, parents and families</li> <li>• The child's voice is heard throughout and their experience and understood within the context of the family</li> <li>• Creative solution-focused and whole family approach</li> <li>• Increased capacity of parents to provide consistent, safe, caring and effective parenting to meet the needs of their children</li> </ul> | <ul style="list-style-type: none"> <li>• % of children that improved overall across outcomes</li> <li>• % of parents that improved overall across outcomes</li> <li>• % of children that feel happy at closure</li> <li>• % of children that feel healthy at closure</li> <li>• % of children that feel safe at closure</li> <li>• Effectiveness of Early Help audit (qualitative)</li> </ul>                       |
| <p>Families experience a positive family life</p>  | <ul style="list-style-type: none"> <li>• The child's voice is heard throughout and their experience and understood within the context of the family</li> <li>• Creative solution-focused and whole family approach o The needs of parents are identified and met, resolving issues that were impacting on parenting capacity, and increasing the capacity of parents to provide consistent, safe, caring and effective parenting to meet the needs of their children</li> </ul>  | <ul style="list-style-type: none"> <li>• % of families with improvement overall across all key indicators of positive family life</li> <li>• % of families with improvement overall in their:               <ul style="list-style-type: none"> <li>– healthy lifestyles</li> <li>– relationships</li> <li>– learning and development</li> <li>– community engagement</li> <li>– safeguarding</li> </ul> </li> </ul> |

|  |   |   |
|--|---|---|
| <p>Children and young people's needs are met early, preventing them from escalating to need specialist services (appropriate escalation and de-escalation)</p> | <ul style="list-style-type: none"> <li>• Increasing front line practitioners' skills and confidence in working with children, young people and families early and in the identification and management of risk</li> <li>• Thresholds understood by professionals and applied consistently</li> <li>• Social work support</li> <li>• Children, young people and families have swift, appropriate access to the right help the right time</li> <li>• Develop an integrated locality support service to provide targeted early help to children and families</li> <li>• Build the capacity of parents, carers and communities to provide support and early help to their friends, neighbours and their community.</li> </ul> | <ul style="list-style-type: none"> <li>• Number and % of children with a closed Early Help plan that within 3 months of closure: <ul style="list-style-type: none"> <li>– have had a referral to the Initial Contact Team</li> <li>– have not had a referral to the Initial Contact Team</li> <li>– have had no further Early Help support</li> <li>– have had further Early Help support</li> </ul> </li> <li>• Number and % of children open to Early Help that have a referral to the Initial Contact Team (and the outcome of that referral)</li> <li>• % of children that have closed to social care that have de-escalated to Early Help</li> </ul> |
| <p>Children, young people and families have swift, appropriate access to the right help at the right time</p>  | <ul style="list-style-type: none"> <li>• Single point of coordination</li> <li>• Timely, appropriate response to all requests for support</li> </ul>  | <ul style="list-style-type: none"> <li>• % of Family Connect Forms allocated within 1 week.</li> </ul>  |
| <p>Identifying early help at the first signs of problem and in early years providing accessible services to parents and children at the right time</p>         | <ul style="list-style-type: none"> <li>• Simple, clear pathways</li> <li>• Resources targeted at those most in need and effective</li> <li>• signposting</li> <li>• Child/young person's journey through services is smooth and well-coordinated</li> <li>• Early Help systems and processes have minimum bureaucracy</li> </ul>  | <ul style="list-style-type: none"> <li>• Timeliness of response to unassessed need – from identification of unassessed need to allocation to service</li> <li>• Timeliness of response to requests for consultation</li> <li>• "Stepping in" audit, "step down" audit and "step up" audit results (qualitative)</li> <li>• Service user feedback</li> <li>• Practitioner feedback on accessibility.</li> </ul>  |

## Your thoughts matter

If you have any views on this Strategy or how we can improve our services, please contact us:  
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