

CHILDREN & FAMILIES SCRUTINY & IMPROVEMENT COMMITTEE

TUESDAY 14 JUNE 2022 AT 10:00AM

CIVIC CENTRE, RIDLEY STREET, REDCAR, YORKSHIRE, TS10 1TD



CONTACT

Miss R Rynn
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1 June 2022

CIRCULATION

Councillors Rider (Chair), Hannaway (Vice Chair), Cook, Gray, Head, C Holmes, King, Rees, Thomson, Turner, Williams, Wells and Wilson.

Councillors Barnes, Kay, and Lanigan (Cabinet Members - For Information)

All Members of the Council (For Information)

Corporate Director for Children and Families

The Press [except for Confidential item(s)]

A G E N D A

	<u>Pages</u>
1. Apologies for Absence.	
2. To confirm the Minutes of the meeting held on 3 May 2022	2-7
3. Declarations of Interest	
4. Relevant Cabinet Reports	
Would Members please refer to their copy of the Cabinet Workbook for the meeting (these papers will follow)	
5. Q4 Performance Report	8-32
6. Family Hub Annual Report	33-75
7. Update from the Task & Finish Group	Verbal
8. Action Update	76
9. Any items the Chair certifies as urgent	

A Glossary of Terms is attached to the back of the agenda.

3 MAY 2022

CHILDREN & FAMILIES SCRUTINY AND IMPROVEMENT COMMITTEE

A meeting of the Children & Families Scrutiny and Improvement Committee was held on 22 March 2022.

PRESENT Councillor Rider (Chair),
Councillors Barnes, Cook, Gray, Hannaway, Head,
King, Turner, Wells, and Wilson.

OFFICIALS K Boulton, L Bulmer, N Hall, C Mahoney, R
Paterson, T Walker

IN ATTENDANCE Councillors Barnes, Kay and Williams

APOLOGIES FOR ABSENCE were submitted on behalf of Councillor Rees

DECLARATION OF INTEREST

Councillor Wells declared an interest in all matters relating to the Imaginarium as he is a member of the sub-group.

41. MINUTES

RESOLVED that the minutes of the Children & Families Scrutiny and Improvement Committee held on 22 March 2022 be confirmed and signed by the Chair as a correct record.

42. INTERVENTION ANNUAL REPORT.

The Corporate Director for Children and Families shared a presentation to highlight the annual intervention and early help assessment team annual report.

She explained that during 2021 a service rebrand exercise had taken place with the team moving from prevention to intervention. Roles had been amended to enable team members to undertake Early Help Assessments (EHA's), identify need and offer support in a timely manner.

Positively Supporting Families funding has been confirmed for three years, meaning the team could continue to gain strength.

As part of the ensuing debate the following points were made:-

- A Member asked for clarification around the number included in the annual report (186) and whether this was the number of families supported or individual young people?;
- The Corporate Director for Children and Families confirmed that professionals undertake a whole family assessment however also

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complete to one work with children therefore both figures are referred to in the report.

- A Member asked how data from missing interviews is used as an early indicator of a bigger problem and which are one off episodes?;
- The Corporate Director for Children and Families advised there are standard questions within mandatory fields to identify risks and also to help to understand reasons for them leaving the home. In addition to this, workers are skilled in understanding the reasons for the missing episode. Families who decline an interview are also reviewed to ensure there are no underlying risks.
- A Member queried whether the case note training involved consultation with young people, given that young people will have access to their files in later years?;
- The Corporate Director for Children and Families confirmed that workers are acutely aware following embedding the signs of safety model, that the voice of the child/young person is threaded through the case notes.
- A Member asked whether there is a figure for the number of families who refuse an assessment or support from the service, and whether the VCS are involved for families who are more likely to engage with them, rather than local authority services?;
- The Corporate Director for Children and Families advised that a young person can initially agree to support but then shows some reluctance to progress. In this instance there is an option to ask school to invite a staff member into the assessment to look at how best to support. The voluntary sector is included in this process.
- A Member requested details on how many young people have refused an assessment.
- The Corporate Director for Children and Families agreed to identify the number and share with Members.
- A Member asked whether the work with a young person could be unsettling for them;
- The Corporate Director for Children and Families advised that sessions are child led and not always in school but can be carried out in a community centre or as a walk and talk, depending on the wishes of the young person.
- A Member stressed that while they could see the reasons for assessing the whole family, it was important to also recognise the individual needs and worries of each family member.
- The Corporate Director for Children and Families confirmed that practitioners are skilled in understanding the reasons behind any missing episodes. A follow up takes place with both the young person and family to offer alternative strategies.
- A Member asked why the service was changed from prevention to intervention, as these have two very different meanings, and questioned whether this meant a change in what the service offers? The Member also asked why there appeared to be only positive comments captured in the annual report as negative comments could also drive improvement.

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- The Corporate Director for Children and Families advised that the name of the service changed from Prevention to Intervention, in, national discussions around what is early help from universal service to targeted support. In terms of feedback in the annual report the overall feedback is positive, however complaints are tracked, and due process followed. Families can sometimes become disgruntled, however this can often be resolved by managing expectations of what can be achieved. In addition to this there is an open door policy where any one can contact a member of the team and not just their worker.
- The Corporate Director for Children and Families confirmed that the last annual complaints report stated that there were 27 complaints received across the Directorate, with just two being received around Early Help services. Of these, one was informally resolved, with one moving to stage 1.
- A Member suggested the word agile is reconsidered.
- The Corporate Director for Children and Families advised that the word agile is used internally across the Local Authority, however agreed to consider the use of the word.

:- NOTED.

43. SUICIDE PREVENTION IN CHILDREN AND YOUNG PEOPLE.

The Corporate Director for Children and Families shared a presentation which included information around local and national data. Overall national rates are high, with some of the highest in the north of England. Suicide is the leading cause of death in males 20-49 years, with self-harm a known risk factor and particularly high in young people and women. Cruse bereavement support are a commissioned service working on suicide prevention and supporting families affected by suicide across South Tees.

There is a Tees suicide prevention action plan and strategy in place, with the aim of the strategy being a reduction in the suicide rate and better support for families affected by suicide. The action plan includes 5 key areas:

1. Reduce the risk of suicide in key high-risk groups
2. Tailor approaches to improve mental health in specific groups
3. Reduce access to the means of suicide
4. Provide better information and support to those bereaved or affected by suicide
5. Support the media in delivering sensitive approaches to suicide and suicidal behaviour
6. Support research, data collection and monitoring

As part of the ensuing debate the following points were made:-

- A Member sought clarification on the living losses;
- The Corporate Director of Children and Families confirmed this

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- could be loss due an absent parent of loved one.
- A Member queried whether families are included in decision making around shaping policies, training and support?;
 - The Corporate Director of Children and Families confirmed that as part of the monitoring with Cruse bereavement this information is recorded and used to help shape future services. Cruse also sits on the suicide task force as well as sitting on focus groups.
 - A Member queried whether work is undertaken with faith groups about the use of language and being inclusive?
 - The Corporate Director for Children and Families advised there has been an increase in faith organisations and extended services attending training which is positive.
 - A Member sought clarification around the length of time between the coroner's verdict and the family being informed of the outcome.
 - The Corporate Director for Children and Families acknowledged registering in a timely manner during the pandemic and recognised that each case is different in terms of how long it would take to arrive at a cause of death.
 - A Member asked whether there was any input into support services from the armed forces in terms of strategies and action plans.
 - The Corporate Director for Children and Families confirmed there is an Armed Forces mental health network which runs alongside the armed forces covenant which is very proactive. There is also representation on the task force.
 - A Member asked about the influence of the media and how they report suicides and whether it could highlight areas locally for people considering suicide.
 - A Member asked whether suicide tins are available for licencees as often they are at the frontline for some individuals.
 - A Member supported the change in language associated with suicide and questioned whether suicide prevention should sit as a Public Health responsibility.
 - The Corporate Director for Children and Families stressed that the decision for someone to take their own life is a very complex one involving a multitude of factors.
 - A Member asked what can realistically be done with suicide 'hotspots'?
 - The Corporate Director for Children and Families confirmed that, with regards to Huntcliff there is signage along the slipway and work is undertaken with the local pub along with additional signage there. Work has also been undertaken with Network Rail and the Police to change the structures of how people can access train tracks.
 - A Member asked how the bereavement service is accessed?;
 - The Corporate Director for Children and Families confirmed that the Police will leave a leaflet with the family. The majority of referrals are received via a GP. Once the referral is received Cruse will respond within 24 hours with an allocated worker.
 - A Member commented that the recommendations in the action plan could be more specific, given the complexity of the issue.

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- The Corporate Director for Children and Families advised that the action plan is Teeswide and not specific to Redcar & Cleveland but acknowledged the need for a refresh and strengthened to include a focus on children and young people.
- A Member asked whether there was any link between the reduction in youth funding and an increase in suicide in young people.
- The Corporate Director for Children and Families confirmed that, on looking at local trends and data, there has been no rise of suspected suicide deaths in our young people.
- The Chair advised of training on offer through Learning & Development and agreed to share this with Members.
- The Cabinet Member for Health and Welfare suggested that a lack of self-worth could be the factor to driving some young people to suicide and felt that there is not enough support given in schools.
- The Corporate Director for Children and Families confirmed that, when talking about young people, suicide rates are minimal, with no link to bullying in schools. All schools include awareness and suicide prevention on the curriculum, with direct work for professionals available with all age groups, including primary sector. Additional support is also put in place for any school and those surrounding schools directly impacted by suicide.
- A Member noted the likely impact of the pandemic on school leavers and sought assurance that this academic year will be different for school leavers.
- The Corporate Director for Children and Families acknowledged the impact of the pandemic on young people, parents and schools, and gave assurance that more robust plans are now in place, meaning staff can be sighted on both subject matter of papers and also be sighted on the young people. Schools have resources for young people and their parents/ guardians, to give as much support to young people throughout the period of exams and when leaving school.

:- NOTED.

44. EQUALITIES OBJECTIVES.

The Managing Director presented a report seeking approval of the Council's Equality Objectives for 2022, which would be considered by Cabinet on 10 May 2022.

As part of the ensuing debate the following points were made:-

- A Member asked whether data was available of Redcar & Cleveland's profile?
- The Strategic Policy Lead confirmed that each Local Authority is required to publish the information and work is being undertaken to compare it to the wider population.

RESOLVED that the Managing Director collate data and share as appropriate.

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45. **INVESTMENT IN OUR SCHOOLS.**

The Corporate Director for Children and Families gave an overview of the Investment in our School report, which had a focus on SEND provisions and looked forward to alternative provision.

As part of the ensuing debate the following points were made:-

- A Member sought clarity around the criteria for the new Tees Valley Free Special School.
- The Corporate Director for Children and Families confirmed that the school will support young people with a mixture of SEMH and autism, and that there is a need to be clear in the agreement that there is awareness and understanding of the different needs of the young people.
- A Member sought assurance around recent press detailing a lack of SEND provision nationally, and questioned whether this is the case locally?
- The Corporate Director for Children and Families confirmed there is not such an issue locally, that work is undertaken with parents and carers to identify suitable provision and work toward a solution for the young person.

:-NOTED.

46. **EDUCATION IMPROVEMENT STRATEGY 2021-2025**

The Corporate Director for Children and Families outlined the Education Improvement Strategy. The strategy has a focus on multi agency collaboration, along with improving on good practice and aspirational leadership.

:-NOTED.

47. **ACTION UPDATE.**

The Governance Manager presented an update on the progress made against outstanding actions from previous meetings of the Children & Families Scrutiny and Improvement Committee: – **NOTED.**



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Children and Families Scrutiny and Improvement Committee

Children & Families Performance Summary

January – March 2022



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Directors Opening Statement



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Corporate Plan Action Updates



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Action	Update	Next Steps
<p>Develop a Social Work Academy to secure high quality, skilled social work students into permanent positions within the children and families service.</p>	<p>We are currently in the process of trying to recruit a Project Lead.</p>	
<p>Redesign youth service assets to ensure community-based provision for young people.</p>	<p>Cabinet report addressing this completed and approved 29th March 2022. Cabinet approved the recommendation to conduct an independent review of the 3 existing Voluntary Management Committees and their working and financial relationships with the youth and community centres across the borough.</p>	<p>A consultant is in the process of being appointed and we hope for them to start work over the summer. Approximate timescales from Cabinet report:</p> <ul style="list-style-type: none"> • Summer 2022 – Engagement with various stakeholders including existing MCs, young people, local residents of the centres, youth and community staff, finance and legal colleagues, ward members. • By end of December 2022 – Report to Cabinet outlining findings, options and recommendations. • By end of March 2023 – Completion of any changes recommended.



Action	Update	Next Steps
<p>Working with partners, further develop our Family Hubs to provide universal and targeted services for those 0-19 years, in line with the newly published DfE Framework.</p>	<p>Redcar and Cleveland has been selected as one of the 75 LAs to receive a share of the £81.75m that will become available nationally over the next 3 years to further develop our local 0-19 Start for Life and Family Hubs model and programmes. The Early Help Service Manager and Family Hubs Manager have been engaged in attending various webinars and focus groups where the DfE and Department of Health & Social Care have been providing some basic information and consulting with LAs on their current thoughts around the framework and programme guide.</p>	
<p>Develop a multi-agency model of care to support adolescents in or on the edge of care to remain safely at home, thus improving their long-term life chances.</p>	<p>We have implemented the NWD model and opened our Hub on 01.09.21, initially supporting children on the edge of care as we await Ofsted registration for the residential element of the model. All specialist roles are now recruited to and will be based at Hub other than the police liaison officer role whereby interviews are scheduled to take place on 6.05.22. There has been some delay in the progression of Ofsted registration due to a change (Dec- Jan) and again in March of the hub registered manager. This post was successfully recruited to and the new manager commenced in post on 11.04.22. We now anticipate registration by end of June/ mid July.</p>	<p>The DfE will publish their ambitious framework and programme guide over the summer and a self assessment will be completed to enable us to sign up to the Family Hubs grant conditions which will include detailing how we already do or will endeavour meet the minimum expectations and which 'go further' options we will also aim to achieve by the end of the 3 year programme.</p>



Action	Update	Next Steps
<p>Develop a range of follow-on accommodation options for young people 16 + leaving care or unable to live at home safely.</p>	<ul style="list-style-type: none"> • Working with Beyond Housing as a partner to bid for funding to prevent rough sleeping for care leavers, the bid also links to the provision of a taster flat to try independent living for young people aged 17-21 years within a supported environment and as part of their pathway planning before making that further step into their own tenancy and independent living • Beyond Housing agree Care Leavers are a priority and can be nominated for properties available directly to the Council under their Redcare Schemes. • Continue to work with a range of housing providers to develop a range of housing options where the Council has direct nominations to place young people leaving care. • A pilot with North Star is underway with a dedicated support worker for 6 Flats for Leaving Care and a further 21 for Homeless. The scheme will deliver flexible support to sustain Tenancies. • The 6 flats for Care leavers with direct nomination rights by the Council to be available in May at Laburnum Road in Ormesby are nearing completion. • We have been successful in securing £272,000 to develop the Ridings building ourselves into an reception area and team office with 6 flats to support Unaccompanied young Children. • A Respite provision for Children with a disability to open in June (slipped from May as Ofsted visit 10th June as they wanted to see working building) supporting up to 9 individuals will develop independent living skills and offer a move on flat to trial independent living. • Accommodation officer continues supporting to deliver other options; • Supported Lodgings (recruit / retain placements) - we have 3 new supported lodgings provisions in process. 	<ul style="list-style-type: none"> • Await outcome from bid and agree property and location of Taster Flat. • Nominations to Beyond Housing scheme properties are being made by Care Leavers • We continue to work with a range of housing providers, RCVDA, Thirteen and Beyond Housing to develop a range of housing options where the Council has direct nominations to place young people leaving care. • Agree support model, nominations agreement and costing for the 6 flats for Care leavers at Laburnum Road in Ormesby. • The Ridings project to be taken to PMG on the 11th May 2022 for approval. Planning permission has been submitted. • Respite provision for Children with a disability to open 16th June (slipped from May as Ofsted visit is 10th June to see the building ready for use) supporting up to 9 individuals will develop independent living skills and offer a move on flat to trial independent living.



Action	Update	Next Steps
Develop a cross-council Care leavers Covenant	<p>We continue to develop the Care Leavers Covenant. So far we have:</p> <ul style="list-style-type: none"> •Put an arrangement in place to help Care Leavers access the Council’s Handyperson Scheme for assistance with home maintenance tasks when moving into a tenancy. •We have arranged access to support and advice for Care Leavers via the South Tees Affordable Warmth Partnership. •We have worked with Public Health and Everyone Active to enable all Care Leavers to access 3 months gym membership. 	The Care Leaver Covenant will continue to be shaped by the views of our Care Leavers who provide feedback via regular consultation via our Care Leaver representative on the group.
Now that we have excellent data about young people's education, employment and training status, strengthen partnerships working with education and training providers around individual young people to support their progress to further education, employment or training.	<p>We continue to receive monthly lists from all colleges and training providers so that any young people who are at risk of dropping out of college or training, or who have dropped out can be supported quickly. This approach is extremely robust and is not adopted by all local authorities and so gives us a true picture of which young people are in education or training and those who are not. Our Transition Mentors are working with those young people who are at risk of dropping out of college or training and are developing good relationships with pastoral and attendance teams so that a shared approach to this work is implemented. All NEET young people are supported by a dedicated Careers Adviser and provided with tailored support. We are currently undertaking a more detailed piece of research to look at the reasons for young people dropping out of college or training and findings from this will be shared with the DfE and college and training providers to help shape provision and the additional support young people may need to help them to remain in education or training.</p>	Analysis of the research finds as to why young people are dropping out of college or training.



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<p>Redcar and Cleveland schools to all have a Mental Health Champion, actively engage with the Mental Health Leads Network and Headstart in working towards achieving the Headstart silver quality standard or equivalent quality standard from another organisation. To support the smooth role out of the Mental Health Support Teams across 20 schools initially.</p>	<p>Completed. We are now working on the next wave for the next 10 schools in Redcar and Cleveland.</p>	



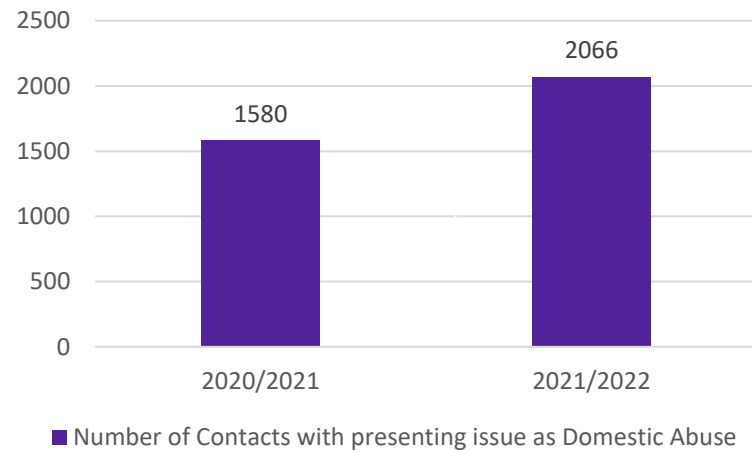
Early Help, Safeguarding and Children in our Care

What's Working Well



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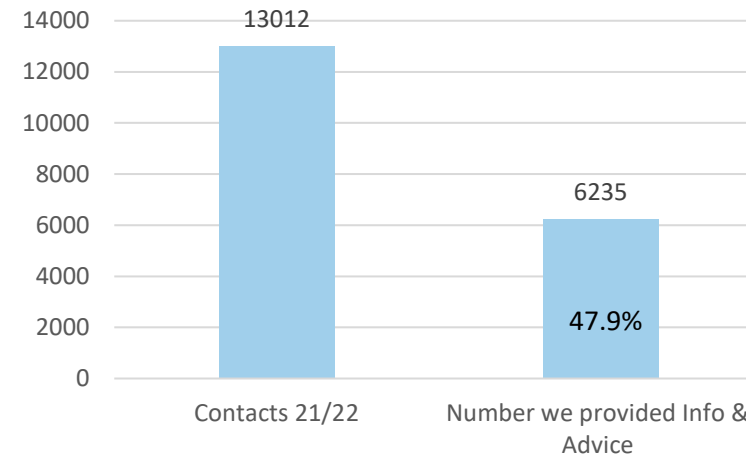
Number of Contacts with presenting issue as Domestic Abuse



Over the last year we have seen an increase in the number of Contacts with Domestic Abuse as the presenting issue.

As a result, we have now recruited a Domestic Abuse Practitioner to be based in the MACH.

Number of Contacts providing Information / Advice



Of the 13012 Contacts in 2021/22, 6235 (47.9%) were provided with Information and Advice. To support with this large number and improve responsiveness to referrers we are introducing a professional telephone line. This line is expected to launch at the end of May initially with Education partners.

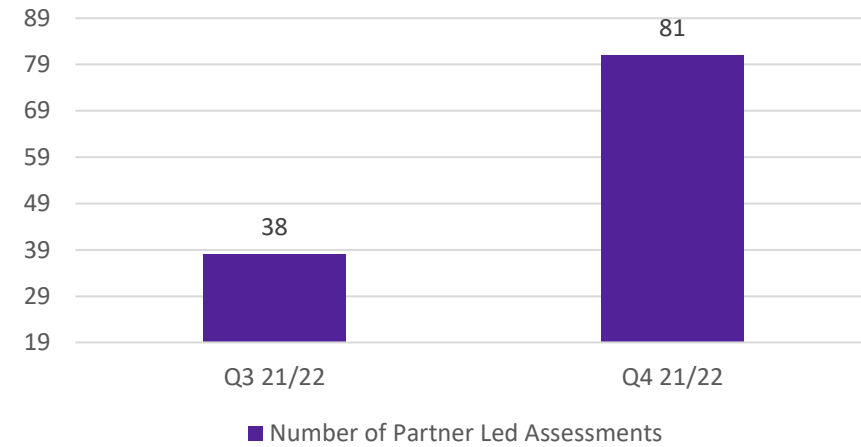
Early Help Assessments

Since the 1st October the new Early Help Assessment team of Early Help Coordinators have been undertaking Early Help Assessments with families who consent to an early help assessment but who have not met the threshold for statutory social work intervention, on referral from the MACH team.

In Q4, 62 Early Help Assessments were allocated to the team comprising of 26 families. The outcome of the EHA is as follows:

- 11 were stepped up to social care after or during EHA
- 2 declined Early Help support
- 13 were transferred to the Intervention Team
- 2 were transferred to the Health Visiting Team
- 1 was referred to Coatham House
- 1 was closed to Early Help Services and transferred to the Support Network.

Number of Partner Led Assessments



There has been a significant increase in the number of Early Help Assessments completed by partners over the last quarter from 38 in Q3 to 81 in Q4.

We now plan to quality assure the 'team around the family' process.

Supporting Families Programme

At March 2022, 225 Supporting Families claims were submitted enabling us to claim 100% Payment by Results (PBR).

Headline worries:

Parents and children involved in crime or anti social behaviour (50 Families).

Outcomes:

No known incidents of anti social behaviour and no crime involvement sustained in 6 months.

Headline worries:

Children who need help (225 Families)

Outcomes:

Families closed to Early Help, Social Care and VEMT Group for a minimum of 6 months and sustained.

Headline worries:

Families affected by domestic violence and abuse (100 Families)

Outcomes:

No known incidents of domestic abuse sustained for 6 months and closed to MARAC with no repeat referrals sustained for 6 months.

Headline worries:

Children who have not been attending school regularly (37 Families)

Outcomes:

All children have achieved above 90% attendance for 3 consecutive terms with under 3 fixed term exclusions and no permanent exclusions.

Headline worries:

Adults out of work or at risk of financial exclusion and young people at risk of worklessness (215 Families)

Outcomes:

4 claims made for families who have found employment, moved off out of work benefits and sustained employment for a minimum of 6 months.

221 Significant and Sustained family claims supported to make progress towards securing future employment and received advice and support around reducing debt.

Headline worries:

Parents and children with a range of health problems (201 Families)

Outcomes:

Families supported to access mental health service, alcohol treatment and rehabilitation programme and/or drug treatment programme.

Early Help, Safeguarding and CIOC

What We Are Worried About



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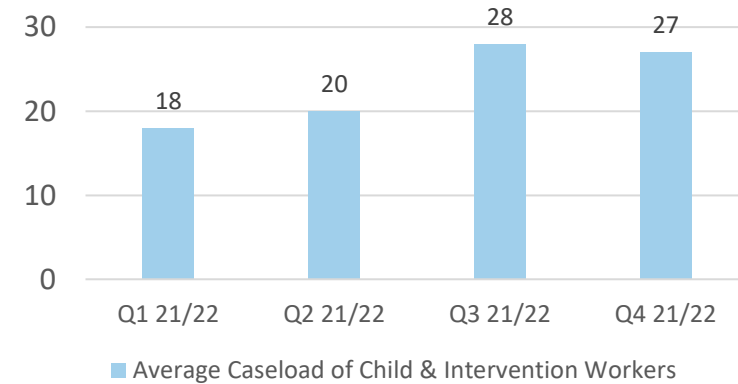
At April 2022, there were 17.8 vacancies (and 5.8 maternity) across the social work teams.

This is a regional and National problem and it has been recognised that there is a crisis in social work recruitment.

What we are doing about it:

We continue to try and recruit to these posts and are working with HR to discuss the difficulties in recruiting.

Average Caseload of Early Help Child & Intervention Workers



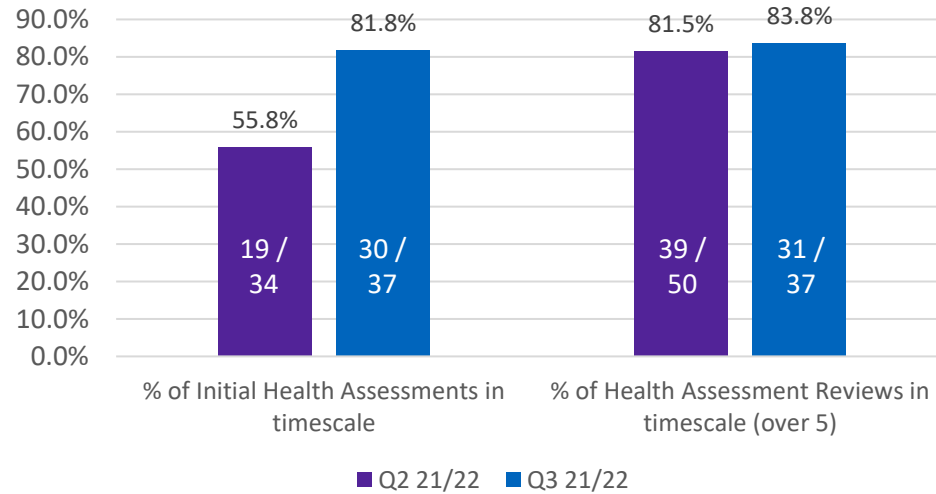
Over the last 2 quarters we have seen an increase in the Average Caseload of Child & Intervention Workers. This has been impacted by the non-work related sickness across Early Help. As a result of the increased caseload, at March 2022 there was a waiting list for 53 children.

What we are doing about it:

- Working with HR to address long term sickness and some staff have now returned to work.
- Recruiting to a vacancy and have had approval to recruit to a maternity backfill.

As a result the waiting list has now reduced to 1 child. Once this case has been allocated the waiting list will be closed.

Initial Health Assessments & Health Assessment Reviews



Over the last two quarters we have not completed 100% of CIOC Initial Health Assessments and Reviews (for over 5's) within target timescales.

Reasons for Assessments not being undertaken can vary including: children or their families isolating/Covid, appointments having to be rearranged, Unaccompanied Children who have no NHS number and older children in care refusing their reviews.

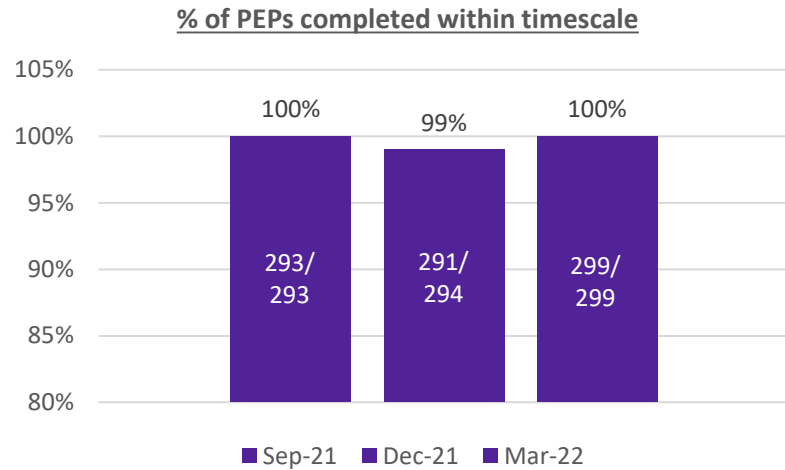
Health Assessments have recently been commissioned to another NHS Trust and is an area that we are focusing on.

Virtual School, SEND, Careers & NEETs and Inclusion

What's Working Well



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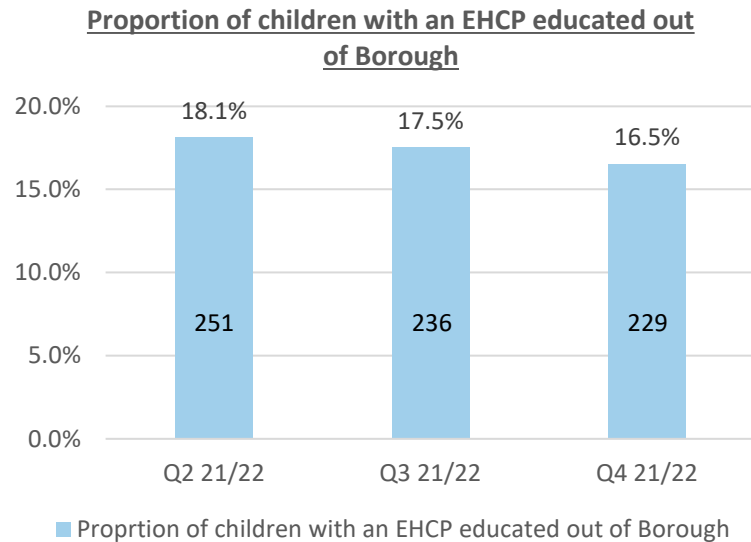
PEP completion times continue to remain high with 299 of 299 completed within timescale at March 2022.

A successful joint Virtual School Conference took place in February 2022 in which we launched some of our Trauma and Attachment Training.

We have also rolled out an app with content for Designated Teachers, Social Workers, Foster Carers, young people and Care Leavers.

In addition, our Virtual Reality Headset Training programme continues to support the delivery of trauma informed, child-centred practice, and is ongoing across the Children and Families Service and with our partners. We have received extremely positive feedback and evaluations from the sessions.





There has been a reduction in the number of children with an EHCP that are educated out of Borough.

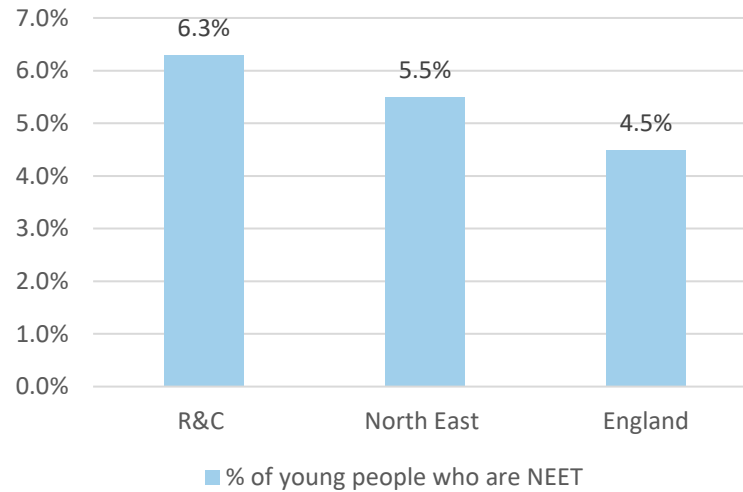
We continue work with Schools and providers to develop bases in Borough for children with EHCPs and the North East Autism Society to develop an outreach service for Schools.

Increased resources for CIOC and Care Leavers to support them into Education, Employment or Training

We have secured monies through Anglo American to deliver bespoke employability and independent living skills for our Children in Care and Care Leavers for up to 3 years.

We will now work with R&C Voluntary Development Agency to implement programmes.

% of SEND young people NEET / Not Known



Although the number of SEND young people NEET is higher than the North East and England Average, there are no young people missing, we know where they all are and have contact with circa 90% of them.

We are also ranked 5th best of 162 Local Authorities for our SEND NEET numbers.

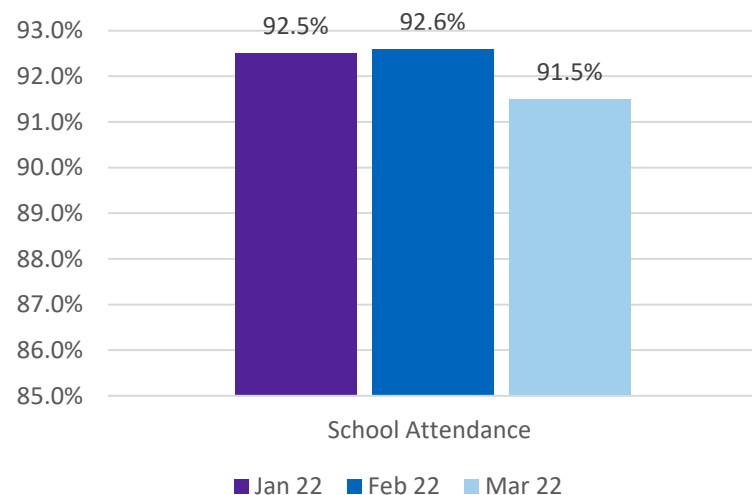
Virtual School, SEND, Careers & NEETs and Inclusion

What We Are Worried About



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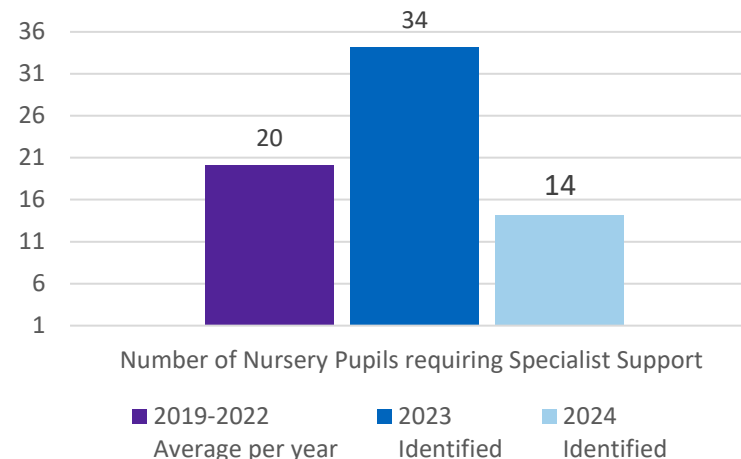
Decrease in School Attendance (Virtual School)



Given the COVID transmission rates in our local area over this past quarter, the overall school attendance of our full cohort remains relatively high in comparison with other virtual school cohorts.

What we are doing:
 VS will continue to monitor and provide support and guidance around this for each individual CIOC.

Increase in Nursery Pupils requiring Specialist Support



We are projecting a 50% increase in the number of Nursery Pupils requiring specialist support for 2023/2024. The average per year between 2019 and 2022 is 20 pupils. We have identified 34 pupils already for 2023 and 14 for 2024.

This is a national trajectory due to pupils not accessing any form of setting during Covid.

What we are doing:

- We have allocated placement funding to develop a specialist assessment Nursery at KTS to ensure we are identifying need and provision at the earliest point.
- We are exploring opening an additional SEND room at a local Nursery and currently completing a scoping exercise and architects report to show the feasibility of developing a SEND assessment base.

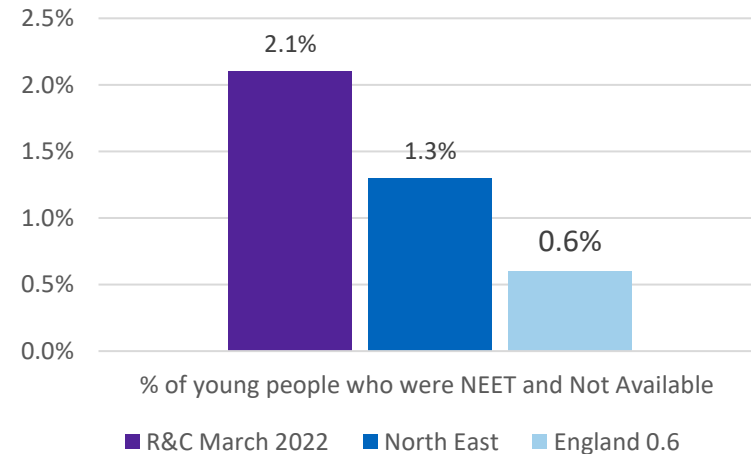
Number of Young People dropping out of College/Training

At the beginning of May 2022, there were 363 young people who have dropped out college or training.

What we are doing:

A questionnaire has been implemented to capture more detailed information about why young people are dropping out of college or training. We have received 41 responses to date.

% of young people who were NEET and Not Available

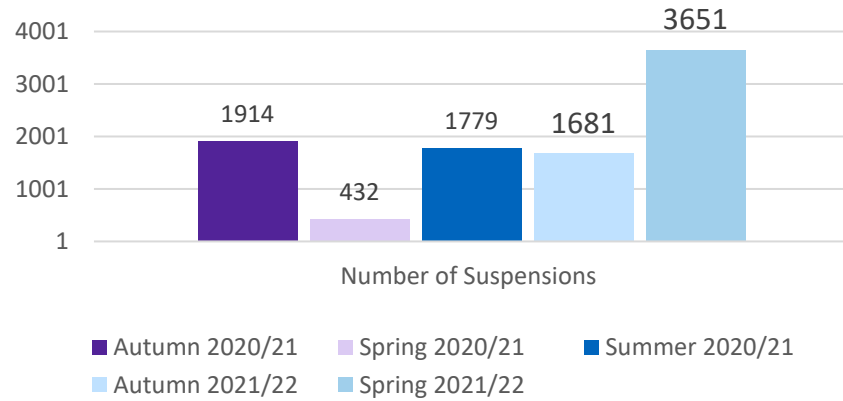


DfE published data highlights that in March 2022, Redcar and Cleveland had the highest recorded % of young people who were NEET and Not Available at 2.1% (66 young people).

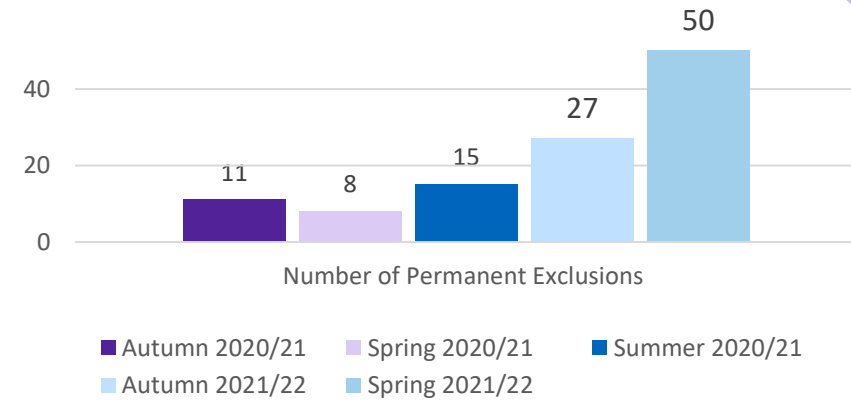
What we are doing:

We continue to work with this cohort and any agencies working with them so that they can participate in education, employment or training as quickly as possible once they are available.

Increase in Suspensions



Increase in Permanent Exclusions



Suspensions have increased since the Autumn term for all groups including SEND, EHCP, CP and CIOC.

There has been an overall increase in the number of PEX from 27 in Autumn 2021 to 50 in Spring 2022.

What we are doing:

- Training, advice and guidance from the Virtual School and Inclusion Team is provided to Schools to support inclusion practice.
- We are increasing EP capacity to support those with SEMH needs through co-ordinated support plans.
- We continue to have both suspensions and exclusions on the SEB and EIP agendas.
- Our Elected Members alongside Education Officers and reinitiate the Task and Finish group to seek assurance from the school system that exclusions and suspensions are given only as a last resort. A report is planned for November 2022. We have commissioned additional capacity to meet the increasing demand. We are working hard with specific schools with the highest suspension and PEX rates to tackle this agenda.
- We will bring partners together through a theory of change process to support young people remaining in the school system and reducing serious violent crime.

Thank you

Any questions?





Family Hubs' Service Annual Report 2021

Children & Families Directorate



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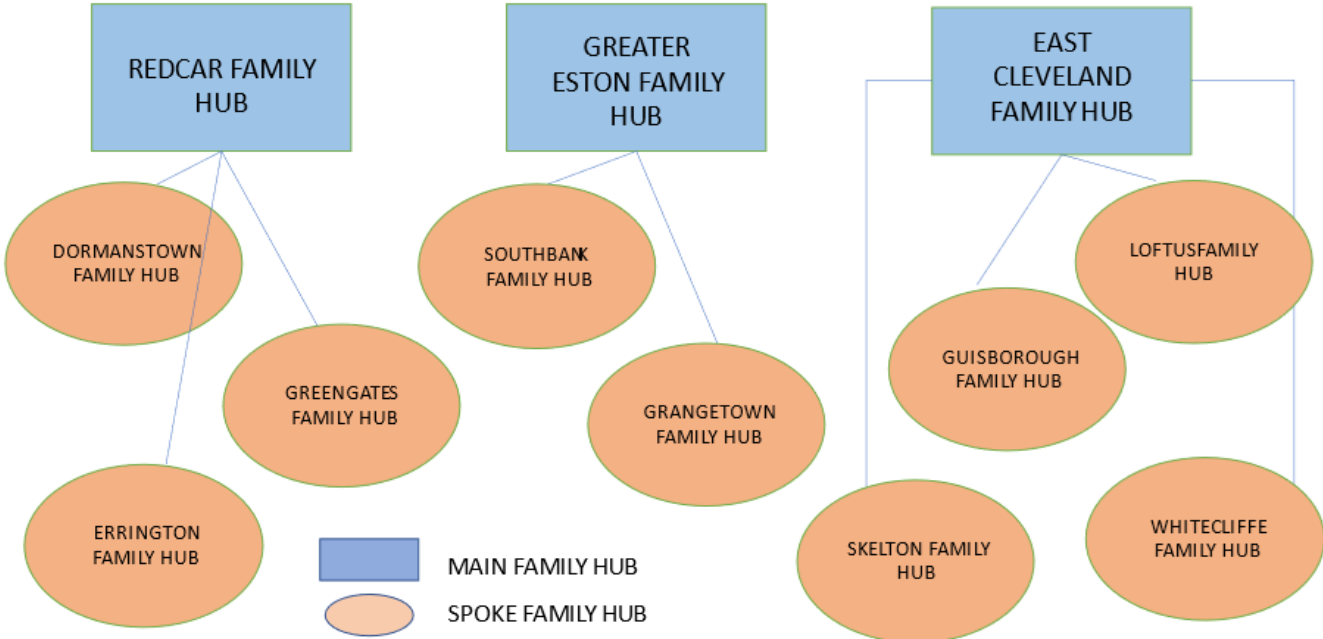
*Photos are of local children and families unless stated



1. Introduction

Our Family Hubs, previously known as Children’s Centres, support families with young children. This report provides information about service delivery and the programmes provided between January and December 2021, including the changes we made that allowed us to continue to deliver our interventions throughout the challenging time of the COVID 19 pandemic.

Our Family Hub provision is delivered as a Hub and Spoke model with a main family hub located in each area, providing children and families with an integrated early help prevention offer, and satellite hubs where services can be deployed as needed. Each of the Family Hubs bring together council services, including family hub support staff, health visitors, school nurses, Child & Family Intervention Officers and Careers and NEET Advisors. We are privileged to have retained our 12 Family Hubs throughout the borough so we can continue to deliver services to families within their own communities.



2. Service Context

The Family Hub Team brings together staff with a range of early years experience, parenting support and engagement skills, breast feeding and healthy eating knowledge, and administration skills to work as a team. The team mainly consists of early years trained practitioners, community engagement practitioners and business administration staff.

Over the last year we have continued to deliver both universal sessions open to all, and targeted support to those that require it. Targeted families are referred in to our services with details of the referrer's worries and the children's needs. With the continued COVID restrictions in place, the universal sessions delivered within the hubs were restricted on numbers to ensure we kept those attending as safe as possible. These capacities were increased in line with the government guidance, risk assessments, social distancing and the oversight of the health and safety team throughout the year. We worked closely with our health visitor colleagues to ensure those who really needed the peer support of these groups were prioritised.

Those interventions delivered within homes continued to include the use of personal protective equipment of masks, aprons, gloves etc. before entering the premises. The staff were encouraged to take up the offer of the early vaccination programme and continue to ensure that regular lateral flow tests are taken.

During the period of 1st January 2021 to 31st December 2021, the Family Hub service registered 1705 children and their families. This is an approximate 34.5% increase on registrations when compared to 2020 at the height of the pandemic. However, due to the



COVID restrictions we've had in place over the last year, this still represents a reduction of 1000 new registrations when compared to data in 2019, before the pandemic.

Despite this, we have provided 1227 individual families with a group intervention within our family hubs between January and December 2021.



3. Universal Offer—How did we do?

3.1 New Parents' Group

We have continued our new parents' group throughout the year, providing support for those who are isolated, struggling with low mood, or just really needing some peer support. The group capacity has been significantly reduced this year due to COVID restrictions and initially started with a virtual group, but we soon realised that the parents needed some face-to-face peer support. This was all risk assessed to ensure both staff, parents and babies remained safe.

The aims of this group are:

- To offer a safe space with lots of opportunities for play
- To promote parent/child interaction and positive relationships; talking with babies, mirroring sounds, gestures and movements, modelling baby-centred attuned relating play
- To encourage floor-play; Staff member has role as 'magnet on the mat' greeting babies directly
- To build relationships, promote baby socialisation and make connections within the group
- To promote a secure attachment bond between parents and their baby
- To promote health messages
- To support maternal emotional wellbeing and mental health support
- To promote responsive feeding



The group covers topics such as home safety, breastfeeding support, baby brain development, the importance of reading to your baby, maternity pay, starting solid foods and child development. The sessions explore play between parent and baby, including sensory, messy and mirror play; tummy time, story sacks, with lots of encouragement to extend this into the home environment.



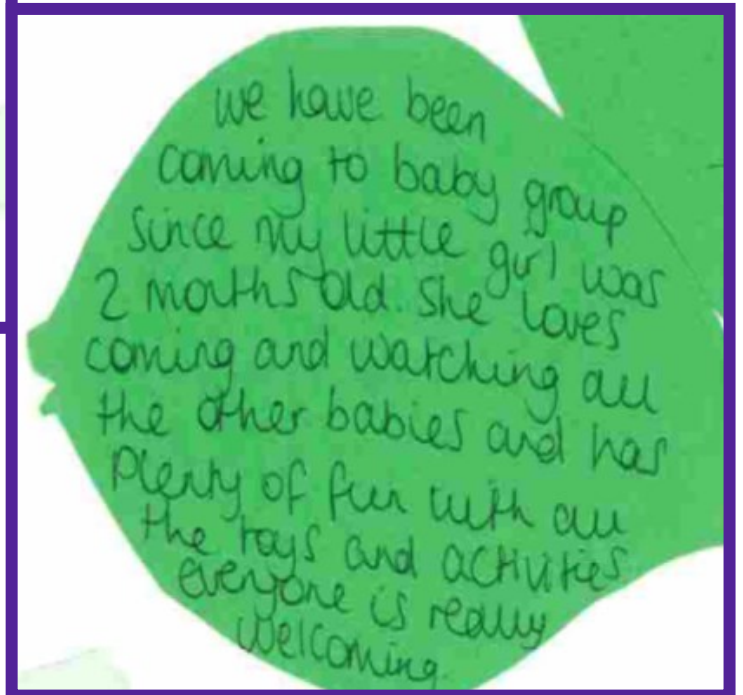
A Mum attending the New Parents' Group commented:-

'Attending the new parent group has helped build my confidence meeting new mums and sharing experiences and advice with them. I've learned how to interact and play with my baby to maximise her development with a range of different activities. I've had people to talk to, just to vent or share my worries to make me feel less alone. At the end of lockdown, it also helped me get out of the house rather than being stuck inside which has helped W interact with other babies and meet different people. Overall attending the group has been a key part in the first year of motherhood and has been great for W who enjoys going every week. Thank you! '

Here are some example's of our parents



comments:



3.2 Little Explorers' Group and Wake up & Shake Up

During the spring and summer, and with COVID restrictions still in place, we decided to hold our Little Explorers outside to allow us to provide a face-to-face activity for our families to attend. The objective of this session was to provide active play opportunities for families using our outdoor space as a learning environment. Young children need physical activity to help them develop and grow and be healthy. Physical activity is vital as children learn to master control of their own bodies. Running these sessions also supported our priority to help the reduction of childhood obesity and increase physically activity in families. We advertised this as Outdoor Little Explorers.

We aimed to offer:

- A safe space with lots of opportunities for play
- A wide range of learning opportunities for children to use their fine and gross motor skills; developing children's coordination, control and movement.
- Physical play opportunities for children and their families to improve their health and fitness

The practitioners record a summary of each of the sessions to show how we are meeting the objectives:

Children enjoyed the session playing in all areas of the outdoor garden. They played alongside each other, and we heard them copying off each other saying *wheeee* as they rolled the balls down the guttering. This was good for the children where they have an identified Speech and Language delay. Parents played with the obstacle course with their child, encouraging them to use the different areas for throwing the frisbees, using the hula hoops and large ball. The children enjoyed using the wheelbarrow to move the balls and bricks. Children enjoyed playing in the water, pouring the balls down the chute.





Our little explorers' group allows children to free play with their parents/carers and other children, supporting with emotional and social skills, communication and language, and physical development, with an overall focus on movement and activity.

The session also gives parents the opportunities to chat to workers and each other about other issues which could be having an impact on the child at home. Themes recorded as being discussed within the group included bedtimes, child's behaviour and how to manage this, screen time and for how long.

Another activity which started through the pandemic also taking place outside, was 'Wake Up Shake Up', again with an emphasis on movement and activity, encouraging the use of action rhymes and singing with both children and their parents.

Since we started these groups in our outside areas in June 2021 after the third lockdown, we have had 61 individual families attending our groups across the borough.

Comments from an Early Years Practitioner and parents that attend the Groups:

"K was talking before lockdown but has really regressed over the time we have spent at home; he has a referral for speech and language, and this has been really good for him. He's really enjoyed it, it was nice to see him playing with other children."

Mum gave fantastic feedback about Barry's group, stating her son loves the songs each week. Mum said he "lights up" when he sees Barry and said they look forward to the group every week.

"Thank you for letting us come and play it's been so nice to get out and see people and she has really enjoyed herself."

3.3 HENRY—Starting Solids

We deliver a session for all parents to attend when they are getting ready to introduce their baby to solid food. The session is part of a suite of evidence-based HENRY programmes (see 4.2 for more) and starts with sharing key messages to help parents build healthy eating and feeding habits at this critical stage. This goes some way to supporting our priority around reducing childhood obesity in our borough to ensure as many new parents as possible have access to this information so they can make healthy choices. It shares complementary feeding and guidance. It familiarises babies with a wide range of tastes and textures to develop long-term healthy food preferences. We look at responsive feeding, building on parents' strengths and supporting them to introduce solid food successfully, through what can be a stressful time. The programme provides colourful resources for each family to help them continue with their journey.



*Stock photo

Since January 2021, we have delivered the programme to 123 parents. We started it virtually but moved back to face-to-face groups from September 2021. Our health visiting colleagues provide information within their letters to parents when their child is 3-4 months old, which gives parents information to contact the family hubs and book onto a session. In the new year of 2022, we are looking to trial a hybrid offer of virtual and face-to-face groups to maximise attendance for all parents who need it. As well as our own Family Hub evaluations of this programme, which are extremely positive, we are looking forward to receiving a comprehensive evaluative report from HENRY later this year, which will enable us to demonstrate its effectiveness at a national level.



3.4 Breast Friends

Our 'Breast Friends' group has been running for many years. This group provides parents with peer support from others who are breastfeeding, who can give advice and tips, discuss their breastfeeding journey and talk about the lows and difficulties they have had and how they've overcome them. Parents have benefitted from having this type of support and other mums to talk to. We also provide specialist support in the shape of our level 3 UNICEF Breastfeeding Friendly trained staff members who run these groups and are trained to a level to be able to answer most general queries from parents around this topic.

We also have access to a Specialist Infant Feeding Coordinator within the health visiting team who provides the Family Hub staff with relevant training and support to run these groups. As well as offering one-to-one support to mums via a referral process, the Specialist Infant Feeding Coordinator also attends the 'Breast Friends' groups on an ad-hoc basis to provide any specific support there and then, as needed.

The priorities of this group are:

- To promote breastfeeding
- To provide confidential, non-judgemental, evidence-based information and support to mothers and mums to be
- To promote responsive feeding
- To support maternal emotional wellbeing and positive mental health
- To offer a safe space with lots of opportunities for socialisation and baby play
- To promote a secure attachment bond between parents and their baby and enhance the social and emotional development of babies

We have supported 55 individual mums at the group since we've been back up and running face-to-face. The topics discussed in the groups include growth spurts, expressing breast milk and freezing / defrosting, discussions around returning to work, childminders and nurseries, struggling with a baby's reflux, night feeds, safe sleeping and baby brain development.

Our Breast Friends' groups support a key public health message and council priority to improve breastfeeding rates across the borough. There has been a steady upward trend in rates since 2016/17, and the latest published data (Sep 2021) shows that the rate for babies breastfeeding at 6-8 weeks old has nearly doubled from 20.9% to 37.8%, which is an increase from 71 babies to 140.



Comments from Mums attending the Group:

- “I don’t know what I’d do if this group stops, I love coming here”
- “We love coming to the Breastfeeding group. I’ve found it really beneficial for my mental health to get out of the house and meet other mums and share experiences and advice. We’ve now made a What’s App group to meet up outside the group.”
- “If it wasn’t for this group, I don’t think I would have met these ladies, so I am very grateful for this service.”
- “Thank you also to the staff, being do friendly, approachable, and non-judgmental, you are the support we need on difficult days especially.”
- “Coming to this group has helped me again a lot more confidence in breast feeding. Also, to talk about problems along the journey such as mastitis, which really helped me.”
- “I have met some good friends and look forward to coming to this group. It’s good to see how the babies are progressing.”
- “The breast-feeding group has been so amazing for me. The mums and Dawn have been so supportive. Breastfeeding wasn’t an easy journey, having this group has helped improve my confidence.”
- “The Breast-feeding group has been beneficial to me for many reasons. Support, reassurance, making new friends, socialisation, and interaction. Myself and L have made many friends and we hope to continue providing support to other breastfeeding mums attending the group. Being Vegan, I was also a bit anxious and discussing my views on raising L Vegan, but I was so happy to meet another mum who was also doing this. We hope that our children may even go to the same school.”



*Stock photo



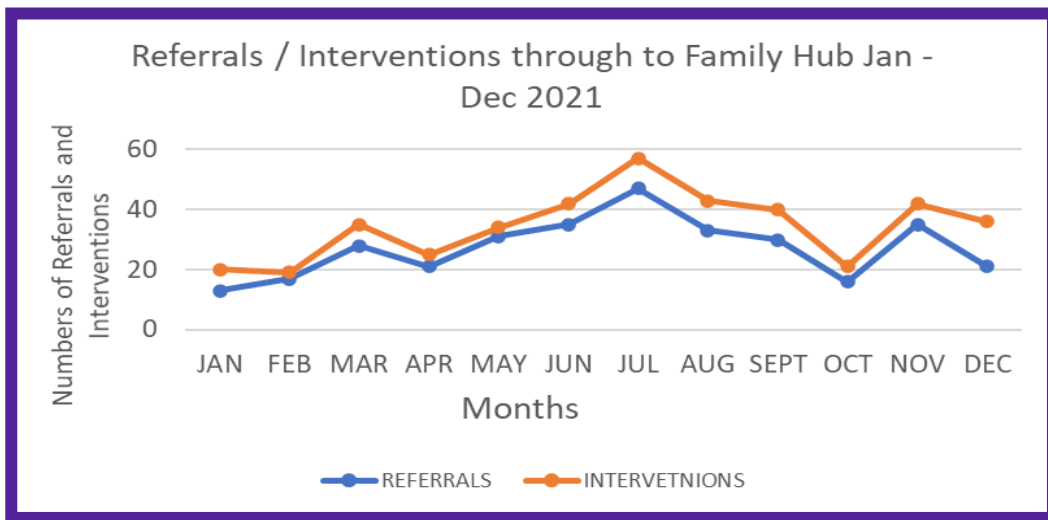
3.5 New Birth Data

Since February 2021, we have been receiving information on all new babies born each month from our health visiting colleagues. This allows us to contact each individual family and talk to them about the family hubs, register them with us and provide a contact number for any worries they may have. We currently get between 90-130 contacts passed to us every month. This is proving to be a great way to ensure as many families as possible know about the services available to them through the Family Hubs. A few decline the opportunity to register with us at this initial point of contact, but by sharing our contact details with them, they know where we are and what we can offer if they need our support at any time in the future.

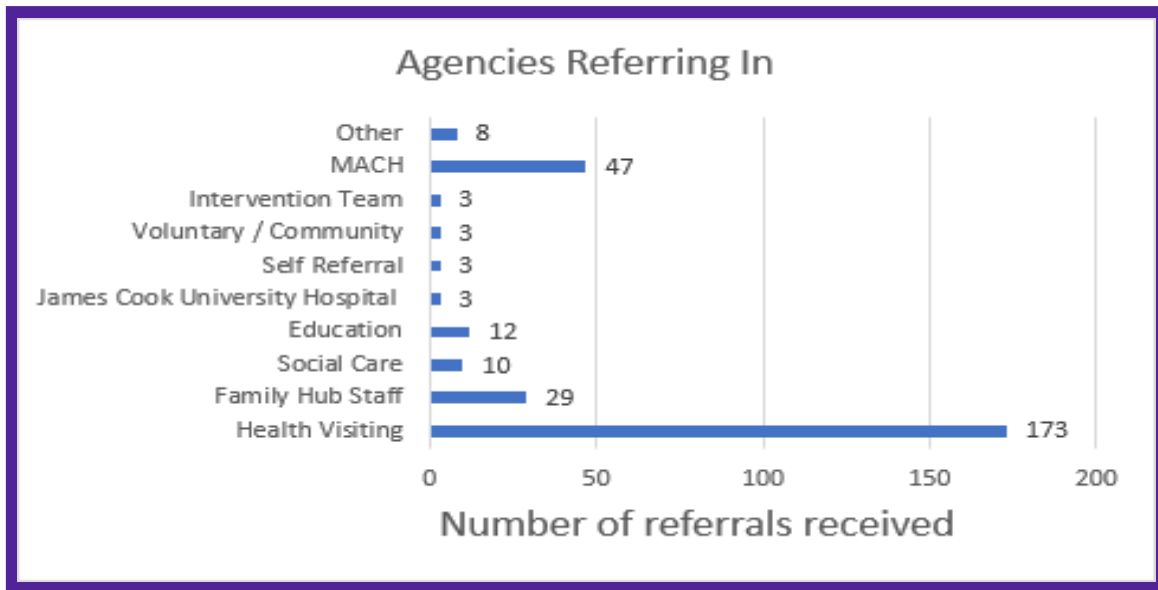
4. Targeted Offer—How did we do?

Referrals

As well as our universal provision, we also received 327 referrals for targeted support between January and December 2021. These referrals led to the delivery of 414 different interventions. This is a slight increase in the referrals received, when compared to 2020.



The referrals came from a number of different teams and partner agencies, including the health visiting service, as shown in the graph below:



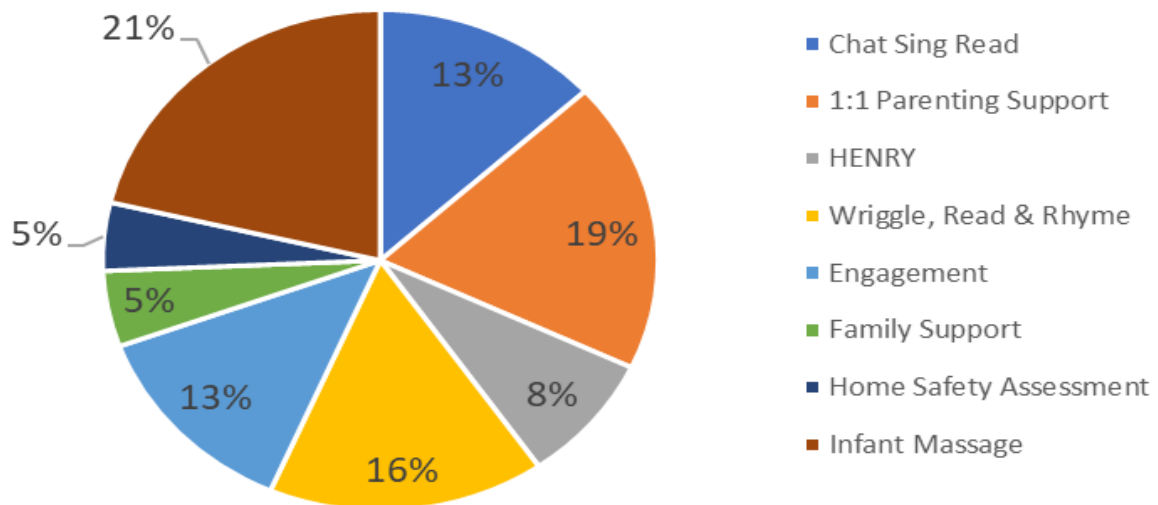
The health visiting referrals have significantly increased this year. This is due to a change in process we initiated for the universal groups under the tightest restrictions at the start of the year. We asked Health Visitors to identify the parents that needed the groups the most, due to the limited spaces we were able to offer to allow for social distancing. This included our new parents' groups, infant massage and breast friends. As the restrictions lifted, and there was more space available, we no longer required the referrals for what we usually class as our universal, open access provision.

Interestingly, the referrals coming into the Family Hubs directly from the MACH have increased by 42% over the past year. These are referrals which have come in on either a SAFER referral form, or an early help referral form looking for support for a child and family. When the social worker determines that needs can be met at an early help level, referrals are then passed to the Early Help Coordinators who decide which cases can be led by Family Hub staff to provide the appropriate intervention.

The interventions requested for families have included support for children to help meet their developmental milestones, parenting support, guidance around healthy eating and general family support. Once the worker initiates the support to address the primary need, they may uncover some additional unmet needs. They may then undertake an early help assessment to help them. identify an holistic plan of support for the child and family.



Interventions requested on referrals



Of the referrals we received into the service this year, we have provided targeted support to 296 individual children through our home visiting programmes and family support service. Whilst the majority engaged really well with the interventions (c.75%), some families did disengage due to the lack of availability of face-to-face interventions and group interaction for the children. We actively engaged a further 497 children through our universal groups programme offered this year.



4.1 Chat, Sing and Read at Home



Chat, Sing and Read at Home is an adaptation of the 'Early Words Together at Two' initiative. It aims to improve the home learning environment with an emphasis on communication and language. Parents are their child's first educators and extensive research has demonstrated how a positive home learning environment can impact on a child's educational success from a very young age.

Playing with children from birth is important for their overall development, learning and wellbeing. Through play, new-borns learn about the world around them and how they can interact with it.

New play experiences also help a baby's brain connect and grow. Indicators of a strong home

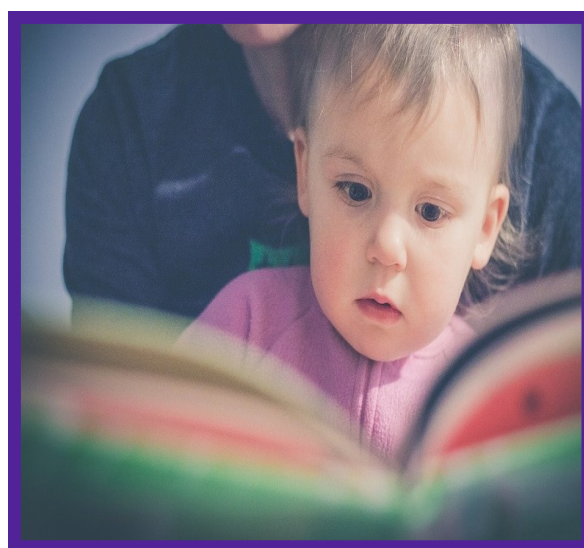
learning environment include parents engaging in play activities with their babies/children, sharing books and stories, singing nursery rhymes etc.

New play experiences also help a baby's brain connect and grow. Chat, Sing and Read at Home provides parents with the tools they need to play and engage with their children and helps them to understand the importance for their child's overall learning and development.

This early literacy programme contributes to a key council priority to improve the school readiness of pre-school aged children, so that they have the best preparation for nursery. All local authorities are measured on children's progress at the end of Reception to see if they have achieved a 'Good Level of Development' (GLD). In Redcar and Cleveland in 2019, 71.1% of our children achieved the GLD, which was in line with the National England average of 71.8%.

We have completed the programme with 23

families over the year,
with 25 families still receiving this ongoing support.



For every family participating in the Chat, Sing and Read at Home programme, a critical worry statement and wellbeing goal was developed and a pre- and post-evaluation questionnaire was completed. From both evaluations of parents who completed this programme, 87% of families reported an increase in confidence when playing and reading with their children. In addition, 97% of the families reported an increase in undertaking the following activities with their children:

- Sharing books and stories with their child
- Singing songs and rhymes
- Talking with their child including things they are interested in
- Spending time outdoors

Some comments from parents after completing the course:

"L and I have really enjoyed coming to the sessions, it has given us time together and it's been beneficial for L to be around other people. L is not very sociable and struggles around new people especially since lockdown, but she has enjoyed seeing Claire every week and is happy to play and interact. The sessions have helped me to build confidence singing rhymes with L and with my son. They both really enjoyed playing with the playdough and the musical shakers we made in the session."

"Mum stated she feels the sessions they have taken part in have been beneficial and they have both enjoyed attending, mum reports she feels Poppy has flourished and has become more sociable & the sessions have been positive."

"I feel more confident sharing books and singing with J, I know the importance of this. I also don't feel as shy taking him out to the park as I did previously. I have learned a great deal attending this session so thank you"



4.1 Early Years Parenting Support

Many parents are still struggling with children's behaviour which has been negatively impacted by the current pandemic. The parenting support home visiting programme we offer looks at the individual family's needs by spending time with the family in their home and tailoring a package of support. Our programme is aligned with the evidence-based Family Links Parenting Puzzle Programme to ensure it delivers an individualised package of support for parents.

There have been 77 referrals received this year for parenting support, which is the same as last year (78). We continue to receive referrals for parenting support for families where the children are awaiting a referral or currently going through the process for attention deficit hyperactivity disorder or autism. We completed the parenting support programme with 33 families altogether over the year, with 46 families still open to Family Hubs and receiving ongoing parenting support.

With each family, a critical worry and wellbeing goal was developed to include a scaling question to measure impact. Of the 33 families that completed the programme, 94% reported an improvement and a positive impact on their child's behaviour after completing the course.

This year we have experienced a number of cases where we have been unable to complete the programme of support for the family within the usual 6-12 weeks. This is due to the increased complexity of some of the needs identified as we start to work closely with the family.



Comments from Practitioners on post evaluations:

Mum has been more confident taking L out and uses strategies discussed during our sessions to get L to go out. L is a lot calmer now and his behaviour has improved with his sister and he is not nasty towards her. Mum said she uses the reward chart with L and this has helped with behaviour. Mum has found all the sessions and support given really useful and has information around behaviour and strategies to use in the future and will continue with what she has learnt.

Mum said the initial introduction to parenting support with me gave her the kick start she needed. She has implemented bedtime and morning routines, which are working well. Mum has put some boundaries in place and uses strategies shared with her, such as rewards charts, choices and consequences, which have positive outcomes most of the time.

*Stock photo



Comments from parents:

"I now have the confidence to put in place boundaries and know I need to be consistent when dealing with challenging behaviour. The suggestions Claire has given me has helped with both of my children. I now know when and how to give praise and not to buy or give things to L just to make him be good. I stick to what I say and mean it. I have also realised I need to look after myself to be a good Mam to the children. Thank you, Claire, for all your help it's been amazing and has really helped"

"I just want to thank you really, you came in and made some suggestions and guided us through being consistent, and even those early small changes we made has had a massive impact, not only on the children's behaviour it has helped with mine and M's relationship. This has impacted on how we are as a family and thanks for not judging us or telling us what to do."

"I have found working with Sarah very beneficial and really helpful. She has helped me to understand that I am doing everything I can to support K and this has helped with my confidence. Looking back, I feel that I was using appropriate parenting strategies with K, I just did not have the confidence in myself."

"It has been good to speak to someone who understands"

"At the start I was definitely at a 2, I was so lost and didn't know what to do, but now I feel like I can calm C very quickly or distract him from when he has angry episodes so I would score myself at a 8 Thank you".



4.2 HENRY—Healthy Families



The most up to date childhood obesity statistics in 2019/2020 for Redcar and Cleveland are concerning: 13.1% of children in reception were classed as obese or severely obese, compared to 12.1% in 2018/2019. For children in school Year 6, this increases to 24% in 2019/2020 compared to 22.1% of children the previous year. This trend is a significant worry and is an ongoing health priority for the borough.

The Family Hub Service has been delivering the HENRY group programme since 2017. HENRY is a unique intervention to support parents and carers to give their child a healthy, happy start in life and tackle child obesity. HENRY's Healthy Families group programme is an 8-week intervention that offers parents a chance to share ideas and gain new skills and tools to address lifestyle issues in a supportive and fun environment. The programme adopts a holistic approach and focuses on five research-identified risk factors for child obesity: parenting efficacy, family lifestyle habits, emotional wellbeing, nutrition and physical activity. The families receive some fabulous resources that can be used at home with their children.

We would normally deliver HENRY in a classroom with the children accessing a creche alongside, mirroring the messages where possible. Due to the pandemic, we had to deliver this programme in a variety of different ways, including a virtual group over Microsoft Teams and also one-to-one with families in their homes, alongside the health visiting team who routinely offer this as part of their role. This required our staff to complete some extra training for the one-to-one delivery, to ensure we continued to meet the HENRY standards.



During the year, we received 34 new referrals for HENRY and in total 38 families completed the programme, as some had been on a waiting list due to the pandemic. In the latter part of the year, we managed to move back to face-to-face groups in the hubs. For any families still preferring to avoid group activities, we completed any training via the previous one-to-one method in the home.

Over the next year, we need to reflect on how we deliver the HENRY-programme and how we receive referrals into the programme. To this end, we have decided to complete some consultation with families to understand how they would like this information to be delivered to them, as some feedback has included that the time commitment to an 8-week programme is too long.

All evaluations for these programmes are sent directly to HENRY to be analysed and a report is sent on an annual basis every 12-months. The next report will be due in April 2022, which also reflects the national picture.

We had positive outcomes for families who completed the programme in the previous year (2020/2021) and these included:

- 100% of children under 18 months and 71% of children between 2-5 years having less screen time.
- There was an increase of 16% to 67% of children being active for 3+ hours per day after the programme and also an increase of 11% to 83% of family's active for 30min+ per day.
- 58% of the families drank sugary drinks fewer times per day.
- 50% children and 33% of parents had an increase in eating 5-a-day.
- 75% of the families rated their family's lifestyle as healthy.



Some parents' feedback after completing HENRY:

"Got advice that really helped. Have managed to get my nearly 3-year-old off bottles, a nice bedtime routine in place, we're getting out more as a family, I'm using the guide choices and reducing portions sizes".

"I really liked that everyone was in a similar situation to me, nobody judged. The facilitators were really friendly – they never told us when we did stuff wrong, they just explained a better way around things that might help. My daughter's in a bedtime routine, she's eating proper meals now and we're more active, whether its inside or out".

"I liked the helpful recipe sharing and healthy eating. We eat less sugar now and get more exercise"

"It was so good to learn new things and helpful when I struggle with certain things. We spend so much more time as a family now".

4.3 Wriggle, Read & Rhyme

Children are referred onto our Wriggle, Read & Rhyme programme when it has been identified that they have a slight delay in their communication and language development. Unfortunately, during the pandemic, it has been highlighted that there has been an increase in communication and language delay prevalent in pre-school aged children, likely due to their lack of socialisation with others during lock-downs.

This is a small group, 5-week programme, for parents and carers and their children. Each week has a different focus around communication and language development and how parents/carers can support this by improving the home learning environment. Families receive some wonderful resources to support the sharing of books, stories and rhymes in the home.

The aim of the sessions is to:

- Introduce and encourage a love of books.
- Raise awareness with parents and carers about the importance of sharing books stories and rhymes regularly with their child.
- Promote communication and positive interaction between parent and child to support development of early language.
- Increase children's school-readiness

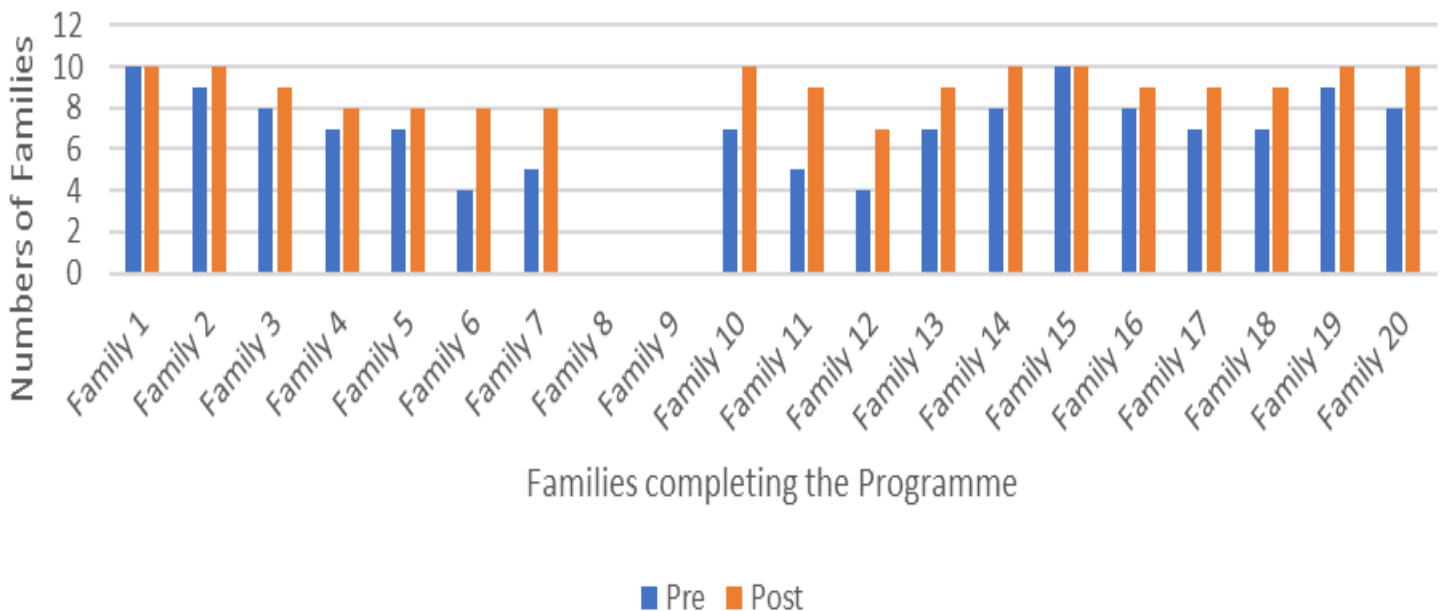
Again, we had a reduced number of families through the programme this year due to COVID and the associated lockdowns.

Recently there has been a speech and language pathway developed with the health visiting team to encourage more referrals into this programme. Now, if children are assessed by the Health Visitor at their mandatory 24/27-month development check as being below average in the development of their speech and language, they will be automatically referred into Wriggle, Read & Rhyme.

As you can see below, 20 families completed the programme in 2021. It is really positive that 80% of the families reported an increase in confidence in knowing what to do to help with their child's communication and language development. Two families stated they did not feel their confidence had increased, but did share that they had changed some of their habits and started to read stories by using just the pictures, were talking more around the home and reading household items like the cereal packets to their children.

Two evaluations were not completed.

Evaluations of the Wriggle, Read & Rhyme Programme



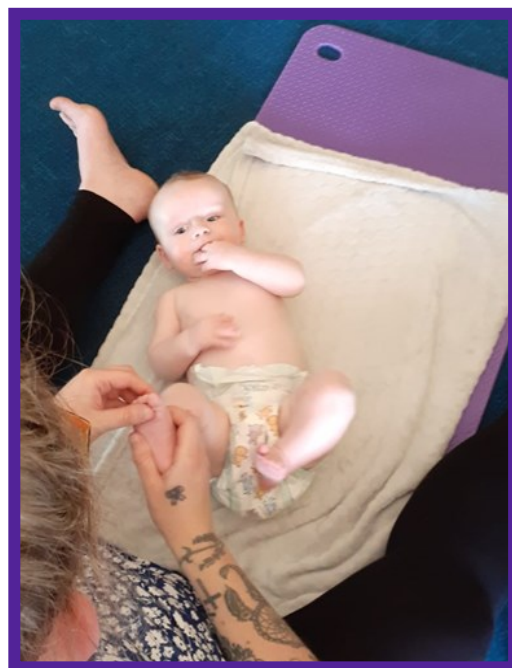
Parents' comments after completing the Wriggle, Read & Rhyme Programme:

- "S has enjoyed his time at his big school and his speech as improved massively. These classes have helped give me confidence to engage him at home more, Thank you."
- "J's behaviour at home is a lot better when I have brought him out to this group and he has got out of the house, had new activities, and played with other children. I have seen a big difference in him."
- "J really loves the Dear Zoo book that you gave him. When we read the book, he has started to try and say some of the animals' names. He can nearly say crocodile now. He never said any words like that before."
- "E loved it. I now regularly read the words out loud in everyday objects. It also helps my 9-year-old with her reading. I now have other types of pens for them to draw with, not just crayons."
- "P struggles to recognise letters and numbers but this class has showed me the areas I can work on with her."
- "Definitely noticed a difference in I's interest in singing. We sing every day in the car now, the songs from the class."

4.4 Infant Massage

In 2021, it was acknowledged that there were a lot of new mums who were feeling isolated and were experiencing low mood due to the restrictions imposed on society because of COVID and the ever-changing government measures . A lot of mums had been missing out on the socialisation of meeting other new parents.

For this reason, we decided to reintroduce Infant Massage into our timetable, as this could be done socially distanced due to the age of the child. This programme offers vital support to promote bonding and attachment with new babies. It provides parents with information on using relaxing strokes which have a positive effect on both the parent and baby's wellbeing, including their emotions and mood. As well as enhancing the bonding experience, it can also help with digestive issues such as colic, and can promote better sleep patterns in babies.



Through 2021, we received 87 referrals to infant massage and 128 families completed the 4 week programme. The families were provided with a mat and oil and asked to bring their own towel. The space is made relaxing and peaceful with gentle music, and parents are taken through the whole body moves which promote relaxation.

Some parents gave us feedback:

"The tummy strokes really helped with the trapped wind"

"Enjoying time with other mums and having 1:1 time with F"

"M is much more settled which has made me much less anxious"

5. What our families and colleagues say about us.

Over the past year, we have received compliments from both practitioners and families about our range of services and the support we offer. Here is a selection of some of the positive feedback received:

- *"As I get ready to return to work, I wanted to say a big thank you. At six weeks old, F had only just started to latch on, but it was still very new for us both. Coming to the group has helped not only our breastfeeding journey, but allowed me to meet and make new friends and it's had a positive impact on my emotional health. Thank you for your advice, support, and guidance and for making us so welcome"*—**Breast Friends Parent.**
- Referral was for digestive issues, *"Jenny was very welcoming and made everyone comfortable, really enjoyed the course thank you very much"* — **Infant Massage Parents**
- *Absolutely loved it thank you so much, always getting the kids singing and dancing no matter how hard they try to stay in moods lol—thank you so much"*
— **Wake Up & Shake Up Parents**



- *“During the time of Tina working with our family, I have found myself managing better having someone to listen and understand our difficulties that wasn't directly involved. Helped me understand that after going through difficult times there were brighter times ahead. Tina was always kind and compassionate and sometimes the voice of reason when I couldn't understand how we had ended up where we were. Me and my young children are in a much better place now and I am grateful to Tina for all her time and help” - Family Support Parent*
- *“Hi, just wanted to say a big thank you for the wriggle, read and rhyme sessions, it has brought H's speech on so much and he has loved each session x” - Wriggle, Read & Rhyme Parent*
- *“I've learnt a lot, about rewards and stuff. I don't shout at him now, I used to talk over him and stuff. Now I listen to him and try and understand what he wants. He listens to me now and I listen to him” - Parenting Support Parent*
- Mum gave fantastic feedback about Barry's group, stating her son O loves the songs each week. Mum said O *“lights up”* when he sees Barry and said they look forward to the group every week.—**Wake Up & Shake Up—Early Years Practitioner**
- I was speaking to B's mum N last week who gave you some lovely feedback, she said you were really helpful and very knowledgeable with weaning advice, you came across as very friendly and passionate. Thank you for your support with B—**Starting Solids—Health Visitor**
- Emma is currently meeting mum at school to deliver 1-1 parenting support. Mum has just started this and is being really positive about it all. Emma is working closely with school and health and put a multi-agency meeting together as initially Mum always had an excuse not to access the support for parenting, but really does need this. A plan is in place to support this to take place via accessing the school to deliver this when Mum drops off at school. This is working well and is nice to know those links are supporting J who's 4 - **Parenting Support—Nursery Teacher—X Primary School.**



6. Case Studies

Names have been changed to anonymise these case studies.

Case Study 1

A referral was received via the MACH, after a mum was concerned about her son's angry outbursts and meltdowns. Mum was really worried about this behaviour as it could last for hours.

Sarah is not originally from the UK and her husband brought her over to live in England when Oliver was 1 year old. Her husband was very abusive towards Sarah and would often physically abuse her in front of Oliver. After one incident the police were called and Sarah and Oliver were taken to the local refuge. It was only then Sarah started to realise that her relationship with her husband was abusive. She was rehoused with Oliver but was still in a family court case due to Oliver's dad wanting contact with him.

Sarah's English was good but sometimes we struggled with language so would use an app on her phone to find the right words to use. Information was gathered for an early help assessment where mum was very open and honest about her family when trying to find support networks for her. She told me her mum used to beat her and would often leave her with her younger sister and disappear for days, then one day when her mum was fleeing some "bad men" she witnessed her mother's murder.

Sarah's confidence grew week after week, and I could tell this from her body language and how she presented each week. Sarah took on parenting strategies and would try them each week; and we could see a positive impact this was having with Oliver's angry outbursts. Sarah was using the time to calm down and empathy. It was clear that he was reliving his adverse childhood trauma from watching his mother being abused and was playing this out in his play, this was picked up in observations from myself and CAFCASS.

There were discussions with CAFCASS and when the court day came it was recommended that Oliver was not to see his father unsupervised and that father needed to attend a perpetrator's course. Sarah was so thankful, and Oliver was very happy that he didn't have to see his dad.

School report that Oliver is a very clever little boy and they have seen him grow over the last year into a very confident little boy. Sarah is accessing counselling and she is currently volunteering in a local charity shop and working on securing paid employment.



Case Study 2

A referral came from the MACH after a SAFER referral was submitted by the childminder after child attended with a bruise and concerns were raised.

It was initially very hard to engage the family or arrange visits with both parents at the same time, due to their work commitments. Advice was sought from the MACH and previous information shared about an incident of abuse from Dad to Mam, and Dad's poor mental health.

An initial visit eventually took place after having the referral open for a few weeks. Both parents were open and honest, and it was clear they were both struggling with their communication and had no time to talk to one another. Dad suffers from anxiety and depression and felt everything was left to him whilst mum worked 12-hour shifts. There were no routines or boundaries in place for Erin, and limited routines for Joshua due to his ADHD. Their expectations of Erin being *"a normal child"* were confusing, and a referral to young carers was submitted to give Erin some understanding of living with a sibling with ADHD.

From the initial visit, the family quickly took on board the strategies discussed and implemented a bedtime routine. This had a massive impact on their time together and communication grew from this. Each week the family grew in confidence and remained consistent in their approach to parenting the children.

They even booked a camping holiday away, something they thought they would never do, and it was successful. Both Mum and Dad said the parenting work has had a positive impact on them all.

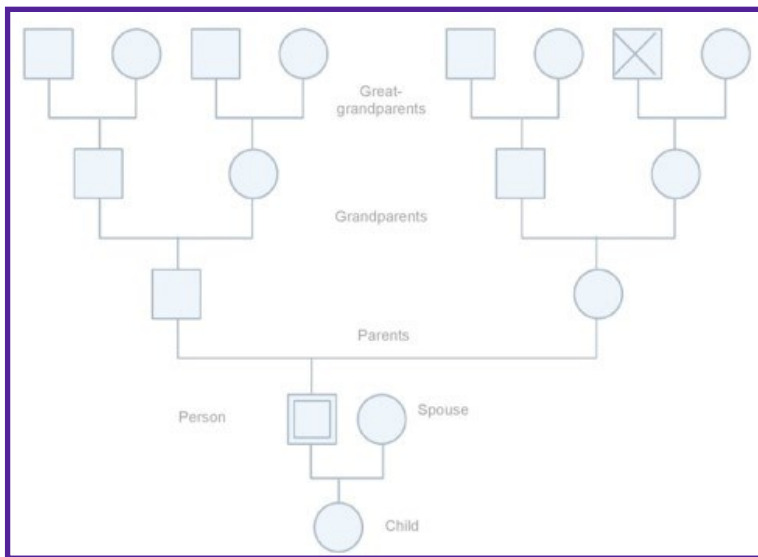
Feedback –

"I just want to thank you really, you came in and made some suggestions and guided us through being consistent, and even those early small changes we made has had a massive impact, not only on the children's behaviour, it has helped with mine and Claire's relationship. This has impacted on how we are as a family, and thanks for not judging us or telling us what to do.

We talk, actually have conversations where we are making decisions together and not battling with what we think is best for the kids. This has had a massive impact on Joshua especially, for example, he asked me if he could watch something on T.V. I researched it and its not suitable, but I didn't make the decision on my own, me and Claire discussed it and we feel like we are more like a team. Before Claire would overrule and say he can, she is more laid back than me but actually it is unsuitable."

7. Signs of Wellbeing

The team has continued to embed the 'Signs of Safety Framework' within our practice. Over the past year we have introduced the development of a critical worry and wellbeing goal into our home visiting targeted programmes, as well as our family support cases, including whole family working. This also includes creating a scaling question to measure impact, alongside the pre- and post-evaluations. We have provided further training to staff on what makes a good case note, to ensure that the Signs of Wellbeing framework is used when recording interventions with the families.



Bitesize training sessions have been delivered on genograms and eco-mapping to ensure each family has a support network before the case is closed. We currently complete monthly group supervisions across the borough to provide support on stuck cases and access the early help clinic for those more complex cases.

We have continued to embed the use of Early Help Assessments. As a service we completed 30 throughout the year, which is an increase of 18 compared to last year.

8. Next Steps for 2022

A report was published in March 2021 – 'The Best Start in Life, A Vision for the 1001 days'. This outlined the vision for Family Hubs in the future to provide a hub of services that parents and their children can access for support for the first 1001 days of a child's life (from birth to 2 years). This would include the breadth of information, advice and support already available from our Family Hubs, but further enhanced, including midwifery services and other direct health and parenting support. The vision is to ensure that families or parents-to-be can access the information and help they need, when they need it.



The Department for Education (DfE) also published their Vision for Family Hubs, including launching a framework for Local Authorities outlining a model in which family hubs will provide a central access point to a wide range of early help services and support. The aim is that families with children and young people aged 0-19 years (and up to 25 for those with Special Educational Needs and Disabilities) can receive help from a range of professionals in their local community, to overcome difficulties and build stronger relationships.

The vision for Family Hubs has three main delivery areas:

- **Access – There is a clear, simple way for families to access help and support through a Family Hub building and approach.** This includes clear Family Hub branding and information about services available; a physical access point (centres) as well as virtual means to get information and advice; outreach; a family-friendly culture; services that go beyond the early years (up to 19 or 25 with SEND); Universal and universal plus (targeted) services. A strong best start in life offer, clearly communicated.
- **Connection - There are services working together for families with a universal ‘front door’, shared outcomes and effective governance.** This includes co-located services; multi-agency governance and leadership; a strong commitment to develop an outcome-based, joint-commissioning framework between different agencies; Services share an initial theory-of-change and outcomes framework and there is commitment to develop this further; Evidence-led practice, evaluation and quality improvement; Professionals work together, through co-location, data sharing and a common whole family approach to assessment and practice model. There is community ownership and co-production.
- **Relationships - Family hubs prioritise strengthening the relationships that carry us all through life, and building on family strengths, recognising that this is the way to lasting change. This idea is at the heart of everything that is done.** This includes an expectation, understood by all family hub staff, to work in a whole-family way that prioritises strengthening relationships and building on families’ strengths. There is a commitment to, and an initial version of, a multi-agency workforce development plan which helps all partners in the family hub network understand and identify need early, and work in a whole family way; and a plan to develop this further.



Next year will be an exciting and challenging time for us to work with our partners to develop our local vision for Family Hubs in Redcar and Cleveland and deliver on this new Government agenda. We have already started working closely with local midwifery services to recommence their delivery of antenatal and postnatal clinics from our hubs in 2022. We were also successful in September 2021, in our regional bid to receive funding from the Department of Education to develop clinic rooms in 3 of our Family Hubs, to include a sink and wipeable floors to support with this work.



*Stock photo

Improving our digital offer is also included within this regional funding to support us in meeting the 'Access' standard of the framework. With this resource, we will develop new 'Family Hub 0-19' branding, and ensure our new website pages are user-friendly and fit for purpose to provide clear information and advice to families in our borough. We are currently working in partnership with Northumberland County Council to develop an improved digital offer using their previous expertise, so that more families can receive information via a range of methods to suit their lifestyle, their preferences and changing needs.



Family Hubs Annual Report Jan – Dec 2021

Nicola Hall - Early Help Prevention and Partnerships Service
Manager

and

Ellie McFadyen – Family Hubs and Partnerships
Manager



**Family Hubs' Service
Annual Report 2021**

Children & Families Directorate



Thriving children, fulfilling their dreams.

Family Hubs Context

Family Hubs – Hub and spoke model

- 12 centres including 3 main office bases at Greater Eston, Redcar and Saltburn for our integrated teams
- 9 other 'satellite' centres across the borough from which services are also delivered.
- Family Hubs core team mainly consists of early years trained practitioners, family support practitioners and business administration staff.
- Universal open access and targeted referral only group sessions had restricted numbers due to COVID-19.
- Targeted family support via home-visiting programmes continued with protective equipment and precautions in place.
- Since February 2021, we have been receiving information on all new babies born each month from our health visiting colleagues.

Universal Offer – open to all



- **New Parent's Group** – social group with staff on hand for advice and information.
- **Little Explorers Group** - Allows children to free play with their parents/carers and other children
- **Wake Up & Shake Up** - provides exercise through action rhymes and singing to encourage language development
- **HENRY Starting Solids** - Parents invited when babies are 3-4 months old and they are getting ready to introduce their baby to solid food.
- **Breast Friends** - Our level 3 UNICEF Breastfeeding Friendly trained staff run these groups for breast-feeding mums and their babies.

Targeted Offer – referral only



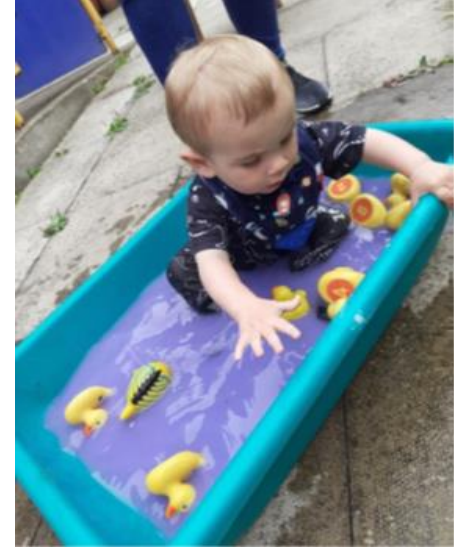
- **Chat, Sing & Read at Home** – This programme aims to improve the home learning environment with an emphasis on communication and language.
- **Early Years Parenting Support** – Staff deliver an individualised package of support for parents within their own home.
- **HENRY Healthy Families** – 8-week group programme covering healthy eating and nutrition for 0-7 year olds.
- **Wriggle, Read and Rhyme** – This is a 5-week programme; each week there's a different focus around communication and language development and how parents/carers can support this by improving the home learning environment.
- **Infant Massage** – This group programme promotes bonding and attachment between new parents and their babies.

Key Performance data Jan – Dec 2021

- The Family Hub service registered 1,705 children and their families during 2021.
- 1,227 individual families were provided with a group intervention within our family hubs.
- 327 referrals for targeted support were received in 2021. These referrals led to the delivery of 414 different interventions.
- Targeted support provided to 296 individual children through our home visiting programmes and family support service (c. 75% engagement).
- HENRY Starting Solids - Programme delivered to 123 parents.
- Breast-Friends groups - 55 individual mums have been supported at the groups since we've been back up and running face-to-face.

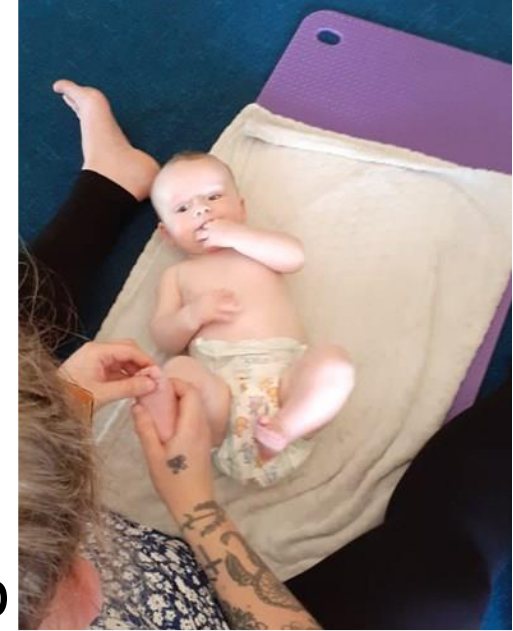
Key Performance data cont...

- Chat, Sing & Read at Home - 23 families completed this programme in 2021, with 25 families still receiving ongoing support.
- Chat, Sing and Read at Home - 87% of families reported an increase in confidence when playing and reading with their children and 97% of the families reported an increase in undertaking early learning activities with their children such as sharing books, singing stories etc.
- Parenting Support - 77 referrals received in 2021, which is the same as last year (78).
- Parenting Support - 33 families completed programmes over the year, with 46 families still open and receiving ongoing parenting support by end of Dec 2021.
- Of the 33 families that completed the parenting programme, 94% reported an improvement and a positive impact on their child's behaviour after completing the course.



Key Performance data cont...

- HENRY Healthy Families - 34 referrals received 21 and 38 families completed the programme
- Wriggle, Read & Rhyme - 20 families completed the small group programme in 2021.
- 80% of the families that completed, reported an increase in confidence in knowing what to do to help with their child's communication and language development.
- Infant Massage - 87 referrals received and 128 families completed programme (inc those on waiting list from pandemic).



Feedback from parents

Attending the new parent group has helped build my confidence.....I've learned how to interact and play with my baby to maximise her development with a range of different activities. I've had people to talk to, just to vent or share my worries to make me feel less alone....Thank you! – New Parent's group member

The breast-feeding group has been so amazing for me. The mums and Dawn have been so supportive. Breastfeeding wasn't an easy journey, having this group has helped improve my confidence.
– 'Breast-friends' member

We love coming to the Breastfeeding group. I've found it really beneficial for my mental health to get out of the house and meet other mums and share experiences and advice. – 'Breast-friends' member

I now have the confidence to put in place boundaries and know I need to be consistent when dealing with challenging behaviour. The suggestions Claire has given me has helped with both of my children. – Mum, Parenting Programme

I liked the helpful recipe sharing and healthy eating. We eat less sugar now and get more exercise.
– Mum, HENRY Programme

S has enjoyed his time at his 'big school' and his speech as improved massively. These classes have helped give me confidence to engage him at home more, thank you. – Mum, Wriggle, Read & Rhyme

M is much more settled which has made me much less anxious.
- Mum, Infant Massage

Feedback from professionals

O “ lights up “when he sees Barry and we look forward to the group every week. - Wake Up & Shake Up, Early Years Practitioner.

Mum has just started 1:1 parenting support and is being really positive about it all. Emma is working closely with school and health and put a multi-agency meeting together as initially Mum always had an excuse not to access the support for parenting, but really does need this. A plan is in place to support this to take place via accessing the school to deliver this when Mum drops off at school. This is working well and is nice to know those links are supporting J who is 4 - Parenting Support, Nursery Teacher.

I was speaking to B's mum N last week who gave you some lovely feedback, she said you were really helpful and very knowledgeable with weaning advice, you came across as very friendly and passionate. Thank you for your support with B - Starting Solid, Health Visitor.

Next steps for 2022 and beyond

- In the Autumn budget, the Government committed £301.75m for 75 local authorities to deliver start for life and family help services through Family Hubs over the next 3 financial years. Redcar and Cleveland are one of the 75 LAs selected to receive this national funding which includes:
 - £81.75m* to create a network of Family Hubs
 - £10m to publish Start for Life offer
 - £100m for infant-parent mental health support
 - £50m for parenting programmes
 - £50m for breastfeeding support

What do we know so far?

- A programme guide will be issued which will outline LA delivery expectations including a set of 'minimum expectations' we will need to meet.
- For breastfeeding, parent-infant mental health and parenting programmes, we will be able to select interventions from a menu of options to suit our local circumstances.

Next steps for 2022 and beyond

What is the Government's vision for Family Hubs?

- Family Hubs are centres which will provide integrated family services to ensure families with children and young people aged 0-19 yrs (25 SEND) receive early help to overcome a range of difficulties and build stronger relationships.
- The Family Hubs model framework is being developed by the DfE with input from the Department for Levelling Up, Housing and Communities (DLUHC) and the Department for Health and Social Care.
- The Framework will also incorporate recommendations from Dame Andrea Leadsom's report the 'Best Start in Life, a vision for the first 1001 days'.
- We are expecting more information about the framework, our funding allocation and grant sign-up conditions over the summer.

Thank You

Any questions?



Children & Families Scrutiny and Improvement Committee – Action List

Actions from 22 March 2022		
Action:	Responsible Officer:	Comment:
<p>YOUTH SERVICE PROVISION</p> <p>1. The Corporate Director for Children and Families confirmed that they would explore if similar events to those at Tuned In! could be rolled out at other centres and she gave an undertaking to circulate information to Members once this was done</p>	Nicola Hall	Our Youth Music, Media and Arts Coordinator has submitted a funding bid to try to gain some additional funding to allow us to deliver more programmes across the rest of the youth clubs in the borough.

Actions from 5 May 2022		
Action:	Responsible Officer:	Comment:
Equalities Objectives.	Kathryn Boulton	Redcar & Cleveland's equalities data to be shared with Members.
Suicide prevention in children and young people development sessions.	Kathryn Boulton	The calendar of training available through learning & development has been circulated to Members.
The Corporate Director for Children and Families to share with Members of the committee the number of qualified SENCo's	Clare Mahoney	Data will be shared at the July children & families Scrutiny and Improvement Committee.

Children and Families Directorate Dictionary

This document sets out a list of terms and acronyms relevant to Children’s Social Care, Early Help and Education, which could be used within reports to Scrutiny, Cabinet and Full Council.

If you are unclear regarding any of the language used in our reports, please email PSPA@redcar-cleveland.gov.uk.

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Glossary of Terms

Term	Definition
Alternative Provision	Provides education to pupils who are unable to attend mainstream schools. Schools may access some or all of a pupil's education from a different provider.
Annex A	The list of required documentation for Ofsted.
Assessed and Supported Year of Employment (ASYE)	The first year as a newly qualified social worker (NQSW)
Attainment 8	Measures the achievement of a pupil across 8 qualifications at the end of secondary school
Audit to Excellence (A to E)	A commissioned service to assist our audit journey.
Care Leaver	A child that has previously been in care aged between 16 – 25.
Care Order (CO)	An order that places a child under the care of the local authority.
Child Arrangement Order (CAO)	A legal status to determine who a child lives with and any contact arrangements.
Child in Need (CIN)	Children that are identified by Section 17 of the Children Act. A Child in Need is eligible for support from a social worker with the consent of the family, unlike children subject to Section 47 Enquiries or a Child Protection Plan where involvement of a social worker is required due to the risk of significant harm.
Child in Our Care (CiOC)	Children that are looked after by Redcar & Cleveland Council to whom we are Corporate Parents (replaces the term Looked After Child).
Child Protection Plan (CPP)	A detailed inter-agency plan setting out what must be done and who is involved to protect a child from further harm, to promote the child's health and development and if it is in the best interests of the child, to support the family to promote the child's welfare.
Childcare Homecare Practitioner (CHP)	Professional Childminder
Children & Families Assessment	An assessment completed by social workers to determine if the child is eligible for support from a social worker.
Children and Adolescent Mental Health Service (CAMHS)	NHS services that assess and treat young people with emotional behavioural or mental health difficulties.
Children and Family Court Advisory Service (CAFCASS)	The organisation employing Family Court Advisors or Children's Guardian appointed to act in the best interests of children when the courts are involved.
Children and Young People's Partnership Board (CYPPB)	A local multi agency meeting of statutory partners, including the police, education and health with responsibility for delivery of the council's early help strategy to support children and young people.
Children Missing Education	Officers follow guidance for local authorities to identify children not receiving education.
Common Transfer File (CTF)	Schools and local authorities use the Common Transfer File to send pupil data when a pupil transfers from one school to another
Core Group	A 'Team Around the Child', that is brought together when a child has a child protection plan. Members of the core group are parents/carers and practitioners who are working with the child and/or family. Core Groups meet regularly and are responsible for taking forward actions agreed at Child Protection Conferences.



Term	Definition
Corporate Parent	All local authorities have a Corporate Parenting responsibility to act in the best interests and support Children in Our Care and Care Leavers this forms part of the every elected member, employee and volunteer's role.
Data Subject Access Request/ (DSAR)	By law, individuals are allowed to request a copy of the information that organisations hold about them. In Children's Services we receive DSARs from people who have previously been in care.
Delegated Authority (DA)	To delegate specific caring responsibilities to the child's carer when they are in care e.g. to give foster carers the ability to make decisions regarding aspects of day to day care as agreed with the social worker.
Deprivation of Liberty Safeguard (DoLs)	Ensures people who cannot consent to their care arrangements in a care home or hospital are protected if those arrangements deprive them of their liberty.
Designated Safeguarding Lead (DSL)	A person who has the duty to ensure an organisation's safeguarding children policy is followed by all members of staff in the setting.
Designated Teacher	Each school has a designated teacher, they have responsibility for helping develop strategies and protocols, and understanding the issues which can affect how children in care and former child in care learn and achieve.
Direct Payment (DP)	Within Children's Services this is typically used for children with a disability where a parent has chosen to receive a monetary amount, to purchase their own help and support, rather than using a commissioned service brokered by the local authority.
Disability Access Fund (DAF)	The Disability Access Fund was introduced in April 2017 to 'enable Early Year's Providers to anticipate and make reasonable adjustments to their provision and increase the capacity to support disabled children and children with special educational needs.
Early Help Assessment (EHA)	An assessment offered to families requiring help and support that do not meet the threshold for an assessment by a social worker. Early Help Assessments are undertaken by our Intervention Teams, Family Hubs and sometimes our partner agencies.
Early Help Module (EHM)	The Liquid Logic Computer System used to record information for Children and Families receiving support from the Early Help Intervention Teams and Family Hubs.
Early Years Foundation Stage	The standards for learning, development and care for children from birth to age five.
Early Years Foundation Stage Profile	A statutory assessment of children's development at the end of the early years foundation stage.
Early Years Pupil Premium	Additional funding for Early Years providers to help them improve the education they provide for disadvantaged 3 and 4 year-olds.
Education Health and Care Plan (EHCP)	A statutory plan setting out the support available for children with a Special Education Need to help them to access education and succeed at school and in further education.
Education Improvement Partnership	Meeting of secondary and college Head Teachers.
Education Inspection Framework (EIF)	Sets out how Ofsted will inspect schools.
Elected Home Education (EHE)	Parents can take on legal and financial responsibility to provide a suitable education for their child.



Term	Definition
Fair Access Protocol	Every local authority must have a Fair Access Protocol regarding school Admissions in which all schools (including Academies) must participate. Schools (including Academies) should work together collaboratively, taking into account the needs of the child and those of the school.
Families' Information Service (FIS)	Team within Children's Services supporting families to access information and administering the People's Information Network.
Family Group Conference (FGC)	A family led meeting where people come together to agree a plan for a child, supported by a Family Group Conference coordinator.
Family Hubs	Previously called Children's Centres.
Family Time	When children need supervision by a local authority worker to check they are safe whilst spending time with family members, it is referred to as Family Time (previously we have described this as Supervised Contact).
Independent Reviewing Officer (IRO)	Independent Reviewing Officer for a Child in Our Care. IROs in Redcar and Cleveland are also Child Protection Conference Chairs.
Initial Child Protection Conference (ICPC)	This is a statutory multi agency meeting that must take place within 15 days of a Strategy being convened where there are Child Protection concerns. The purpose of the meeting is to decide if a Child Protection plan is required.
Inspection of Local Authority Children's Services (ILACS)	Inspection of Local Authority Children's Services (the full Ofsted inspection which assesses the local authority's effectiveness at keeping children safe and supporting children in care and care leavers).
Inspire 2 Learn	A local authority owned building in Eston, providing venues and training spaces for schools.
Interim Care Order (ICO)	An interim order that temporarily places a child under the care of the local authority.
Liberty Protection Safeguards (LPS)	The legislative framework for authorising a deprivation of liberty (within the meaning of Article 5 of the European Convention of Human Rights). They will replace the current process which is called the Deprivation of Liberty Safeguards (DoLS) through the Mental Capacity (Amendment) Act 2019.
Line of Sight	Children who are identified as vulnerable and high risk and requiring senior management oversight.
Local Offer	A document setting out the services, opportunities, help and support available to Care Leavers in the borough. It is a statutory requirement for Local Authorities to produce a Local Offer.
Local Offer (SEND)	A document setting out the services, opportunities, help and support available to children and young people with a Special Educational Need and/or Disability. It is a statutory requirement for Local Authorities to produce a Local Offer (SEND).
MACH/ Multi Agency Children's Hub	Redcar & Cleveland Multi Agency Children's Hub – the central point where all contacts are received when someone is worried about a child. The MACH is made up of a team of social workers that screen all contacts, supported by the police, health and education colleagues.
Mid-Year Preference Form	Completed when requesting a school place mid year stating preferred schools.



Term	Definition
Multi Academy Trust	An organisation which has been set up to operate more than one academy.
Multi Agency Education Health Care Plan (MAEHCP)	Multi Agency Education Health Care Plan (the meeting that takes place to consider EHCPs)
No Wrong Door (NWD)	A way of providing support to children and young people that are on the edge of care or at risk of placement breakdown, this service is delivered from our short term residential home at Church View.
Own Admission Authority	Academies, foundation, studio, trust and voluntary aided schools are own admission authorities and are responsible for ensuring that the requirements of the School Admissions Code are met.
Passenger Assistant	Supporting children accessing home to school transport.
Pathway Plan	A plan setting out support for Care Leavers based on an assessment of their needs.
People's Information Network (PIN)	A service directory website setting out services for children, families and vulnerable adults within Redcar and Cleveland including the Local Offer (SEND) People's Information Network Welcome to Redcar & Cleveland People's Information Network! (peoplesinfonyet.org.uk)
Personal Advisor	The allocated worker for a care leaver, providing advice, support and help to access services.
Personal Education Plan (PEP)	Every child in care has a Personal Education Plan which is developed by the Virtual School to support them in their education).
Practice Educator (PE)	A Practice Educator is a social worker qualified to support social work students.
Practice Leader	A manager or supervision identified as a Signs of Safety Practice Lead, their role is to embed and role model practice and support and mentor their Team.
Pre-Proceedings	Work carried out by the local authority to consider if an application to the Court needs to be made.
Progress 8	A Progress 8 score is a performance measure for schools showing the average attainment based on pupils' Attainment 8 scores.
Protocol	The name of the Liquid Logic Computer System used to record information for children receiving help and support from a social worker including children in our care.
Public Law Outline (PLO)	Public law cases are brought to the family court by local authorities where they are worried that a child or young person is not being looked after safely. The family court may make an order to safeguard and promote welfare.
Pupil Inclusion Panel	Meeting of Head Teachers or representatives to discuss children who are vulnerable to exclusion from school.
Pupil Premium	Pupil premium is additional school funding for disadvantaged children. It is paid directly to a school to improve the quality of their education.
Pupil Premium Plus	Additional Pupil Premium funding for Children in Our Care
Raising of the Participation Age (RPA)	The duty for young people to remain in education until at least their 18 th birthday, usually they will remain until the end of term after they turn 18.



Term	Definition
Referral	When concerns are raised about a child they are considered by a social worker in the MACH, if this is considered serious enough to require a social work assessment, the next stage is to complete a referral initiating an assessment.
Review Child Protection Conference (RCPC)	Review Child Protection Conference, any subsequent conferences following an Initial Child Protection Conference where the decision of the ICPC is that a child protection plan is required.
Safer Referral	The document that partner agencies and members of the public complete and send to the MACH when they are worried about a child.
Section 47 (S47)	Refers to Section 47 of the Children Act, Section 47 Enquiries are initiated to decide whether and what type of action is required to safeguard and promote the welfare of a child who is suspected of, or likely to be, suffering significant harm.
Self-Evaluation Framework (SEF)	All Children's Services Local authorities must produce a Self Evaluation Framework annually, setting out their progress and priorities in respect of meeting the needs of children and young people receiving social work and early help services – this is a requirement for Ofsted.
Signs of Safety (SofS)	A model of practice for working with children and young people in a child protection, early help (Signs of Wellbeing) and Children in Our Care (Signs of Success) context. This is Redcar & Cleveland's adopted practice model.
Social Emotional and Mental Health Needs (SEMH)	Social Emotional and Mental Health Needs (a type of Special Educational Need or Disability)
South Tees Safeguarding Children's Partnership (STSCP)	South Tees Safeguarding Children's Partnership is a multi-agency partnership between Middlesbrough Council, Redcar & Cleveland Council, Tees Valley Clinical Commissioning Group (CCG), and Cleveland Police. It aims to support and enable local organisations and agencies to work together in a system which places the child at the heart of the process, with a key focus on both improving practice, and enhancing outcomes for children and their families. Each local authority is required to form a Safeguarding Children's Partnership.
Special Educational Need and/or Disability (SEND)	A child or young person has special educational needs and disabilities if they have a learning difficulty and/or a disability that means they need special health and education support
Special Guardianship Order (SGO)	Special Guardianship Order a legal status used when children do not live with their parent(s), granting parental responsibility to the friend, relative or carer they live with to the exclusion of any others with parental responsibility.
Strategic Education Board (SEB)	Meeting of Head Teachers or representatives from all schools and colleges.
Strategy	A multi agency meeting which takes place to share information and decide whether a referral meets the threshold for Child Protection (requiring a Section 47) or to consider if a Child in Need case should be escalated to Child Protection where further concerns are identified.
Supervising Social Worker (SSW)	Supervising Social Workers assess and support our in house foster carers.
Supervision Order (SO)	A supervision order is applied for by the local authority and gives them the legal power to evaluate and supervise the wellbeing and



Term	Definition
	development of a named child. The order enables this power while the child lives at home or at another place.
Supplementary Information Form	Additional Information requested by schools to inform the Admissions process.
Team Around the Family (TAF)	The group of family members, network members and professionals supporting children and families with an early help assessment or plan.
Unaccompanied Child (UC)	Unaccompanied Asylum Seeking Child - Section 17 of the Children Act 1989 imposes a general duty on local authorities to safeguard and promote the welfare of children within their area who are in need. Children seeking asylum (UASC) who have no responsible adult to care for them are separated or 'unaccompanied,' and are therefore 'in need'.
Viewpoint	An app to help children and young people share their views, wishes and feelings prior to their Child in Care Review.
Virtual School (VS)	The Virtual School are responsible for the educational outcomes of all Redcar & Cleveland Children in our Care.
Virtual School Head (VSH)	The role of the Virtual School Head is to make sure young people in care have the best chance possible to achieve at school and when they leave to go onto further education, employment or training.
Vulnerable Exploited Missing and Trafficked (VEMT)	Children identified as at risk of exploitation, or who have been missing or trafficked are subject to a multi-agency assessment to help keep them safe.
We Are With You	Drug and Alcohol Support Service



Glossary of Acronyms

Term	Definition
AD	Assistant Director
AP	Alternative Provision
ASD/ASC	Autistic Spectrum Disorder/Condition
ASYE	Assessed and Supported Year of Employment
AWO	Attendance and Welfare Officer
C&F	Children and Families
CAFCASS	Children and Family Court Advisory Service
CAMHS	Children and Adolescent Mental Health Service
CAO	Child Arrangement Order
CCE	Child Criminal Exploitation
CCG	Clinical Commissioning Group
CHP	Childcare Homecare Practitioner (Childminder)
CIN	Child in Need (Children that are identified by Section 17 of the Children Act)
CiOC	Child in Our Care
CME	Child Missing Education
CO	Care Order
CP	Child Protection
CPB	Corporate Parenting Board
CPP	Child Protection Plan
CSE	Child Sexual Exploitation
CWD	Children with Disabilities
CYPPB	Children and Young People's Partnership Board
DAP	Domestic Abuse Partnership
DBS	Disclosure & Barring Service
DCS	Director of Children's Services
DfE	Department for Education
DoLS	Deprivation of Liberty Safeguards
DP	Direct Payment
DSA	Data Sharing Agreement
DSAR	Data Subject Access Request
DSL	Designated Safeguarding Lead
DV	Domestic Violence (now the term DA for Domestic Abuse is more commonly accepted)
EET	Education Employment and Training
EHA	Early Help Assessment
EHCP	Education Health and Care Plan
EHE	Elected Home Education
EHM	Early Help Module
EIF	Education Inspection Framework
EIP	Education Improvement Partnership
ESFA	Education and Skills Funding Agency
EYFS	Early Years Foundation Stage
EYFSP	Early Years Foundation Stage Profile
EYPP	Early Years Pupil Premium
FAP	Fair Access Protocol
FGC	Family Group Conference
FIS	Families' Information Service



Term	Definition
FOI	Freedom of Information Request
FTEX	Fixed Term Exclusion (Suspension from School)
HMI	Her Majesty's Inspectorate
HVSN	Health Visiting and School Nursing Service
HWBB	Health and Wellbeing Board
I2L	Inspire 2 Learn
ICO	Interim Care Order
ICPC	Initial Child Protection Conference
IFCS	Infant Class Size
ILACS	Inspection of Local Authorities Children's Services
IRO	Independent Reviewing Officer
KHS	Kirkleatham Hall School
KS	Key Stage
KTS	Kilton Thorpe Specialist Academy
LA	Local Authority
LAC	Looked After Child (As a Council we avoid the acronym LAC and use CIOC)
LPS	Liberty Protection Safeguards
MACH	Redcar & Cleveland Multi Agency Children's Hub
MAEHCP	Multi Agency Education Health Care Plan
MAT	Multi Academy Trust
MOU	Memorandum of Understanding
MYPF	Mid-Year Preference Form
Nasen	National Association of Special Educational Needs
NCY	National Curriculum year
NEET	Not in Education, Employment or Training
NELT	North East Learning Trust
NET	Northern Education Trust
NMAT	Nunthorpe Multi Academy Trust
NPCAT	Nicholas Postgate Catholic Academy Trust
NWD	No Wrong Door
OAA	Own Admission Authority
PA	Personal Advisor
PA	Passenger Assistant
PAN	Published Admission Number
PE	Practice Educator
PEP	Personal Education Plan
PEX	Permanent Exclusion (from School)
PFI	Private Finance Initiative
PIN	Peoples Information Network (service directory website)
PIP	Pupil Inclusion Panel
PLAC	Previously Looked after Child
PLO	Public Law Outline
PP	Pupil Premium
PP+	Pupil Premium Plus
PSPA	People Services Personal Assistants
PSW	Principal Social Worker
PVI	Private Voluntary & Independent (Nursery, childcare setting)
QA	Quality Assurance



Term	Definition
QTS	Qualified Teacher Status
RBA	Reception Baseline Assessment
RCPC	Review Child Protection Conference, any subsequent conferences following an Initial Child Protection Conference where the decision of the ICPC is that a child protection plan is required.
RONI	Risk of becoming NEET Indicator
RPA	Raising Participation Age
RTMAT	River Tees Multi Academy Trust
S47	Section 47
SALT	Speech and Language Therapy
SAR	Subject Access Requests
SCAP	School Capacity Survey
SCP	School Crossing Patrol
SEB	Strategic Education Board
SEF	Self Evaluation Framework
SEMH	Social Emotional and Mental Health Needs
SEND	Special Educational Needs and/or Disabilities
SGO	Special Guardianship Order
SIF	Supplementary Information Form
SLA	Service Level Agreement
SMT	Senior Management Team (Children's Services – Redcar and Cleveland Council)
SO	Supervision Order
SofS	Signs of Safety
SSFA	School Standards and Frameworks Act
SSW	Supervising Social Worker (supervising a foster carer)
STEM	Science, Technology, Engineering and Mathematics
STSCP	South Tees Safeguarding Children's Partnership
SW	Social Worker
TA	Teaching Assistant
TAF	Team Around the Family
TRA	Teacher Registration Agency
TVFSS	Tees Valley Free Special School
UASC	Unaccompanied Asylum-Seeking Child
UID	Unique Identifier Number
UPN	Unique Pupil Number
VEMT	Vulnerable Exploited Missing and Trafficked
VS	Virtual School
VSH	Virtual School Head
VCS	Voluntary & Community Sector
WAWY	We are with you (drug and alcohol support service)
WFD	Workforce Development
YOS	Youth Offending Service

