

| Report to CYP select committee | | | |
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| Report Title | Lewisham's Early Help Review | | |
| Key Decision | No | Item No. | 8 |
| Ward | All | | |
| Contributors | CYP Joint Commissioning | | |
| Class | Part 1 | Date | 17 September 2019 |

Reason for lateness and urgency:

This report is received less than 5 clear working days before the meeting and the Chair is asked to accept it as an urgent item. The report was not available for dispatch on Tuesday 10 September to allow finalisation of a Mayor and Cabinet report into the future of youth services, which is provided as an appendix (part 2). The future of the youth services is inseparable from the development of Lewisham's early help approach and it is important that the committee has this information at this stage in its cycle so that it can be fully considered and inform the wider early help discussion.

1 Purpose

- 1.1 This report provides CYP Select Committee with findings and recommendations following a review of Lewisham's Early Help provision and approach.
- 1.2 It sets out the drivers to the review, together with the scope of activity and the deliverables expected from the review.
- 1.3 It summarises the findings from the review activities, including those from the Ofsted Inspection of Local Authority Children's Services (ILACS) in July 2019 relating to Early Help; the options available to the Council to address these findings; and recommendations for activity in 19/20 and 20/21 to improve our offer to children, young people and families.

2 Structure of the Report

- 2.1 The report is structured as follows:
 - Section 3** sets out the recommendations.
 - Section 4** sets out the policy context
 - Section 5** sets out the scope of the Early Help review
 - Section 6** summarises the findings of the review
 - Section 7** sets out recommendations following the review
 - Section 8** sets out the financial implications
 - Section 9** sets out the legal implications
 - Section 10** sets out the crime and disorder implications
 - Section 11** sets out the equalities implications
 - Section 12** sets out the environmental implications
 - Appendix A** Mayor and Cabinet Future of youth services report
 - Appendix B** Early Help EAA: working copy

3 Recommendations

- 3.1 It is recommended that CYP Select Committee note the work undertaken as part of the early help review, and discuss and inform the recommendations set out below.

4 Policy Context

National Policy Context

- 4.1 The Early Help review and our developing approach takes place in a context of political and financial uncertainty, with the withdrawal of the UK's membership of the European Union still not finalised and changing dynamics in Parliament, a lack of confirmation on the continuation of the Government's Troubled Families programme, and the lasting impact of a decade of austerity, with future funding to local authorities – such as the public health grant- uncertain.
- 4.2 Early help is largely discretionary - there's no specific legislation - but there are several pieces of legislation which contain relevant elements:
- Children Act 1989
 - Education Act 1996
 - Children Act 2004
 - Childcare Act 2006
 - Working Together to Safeguard Children 2018 (statutory guidance)
- 4.3 As part of the regulatory framework, Ofsted evaluates the experiences of children “who are at risk of harm (but who have not yet reached the ‘significant harm’ threshold) and for whom a preventative service would provide the help that they and their family need to reduce the likelihood of that risk of harm escalating and to reduce the need for statutory intervention”. Ofsted therefore expects that children and families should be in receipt of early help where there is need ‘below the threshold’ and Ofsted have published articles about the negative consequences of cuts to early help services (across agencies) in many local authorities.

Local Policy Context

- 4.4 An effective Early Help approach supports the Council’s Corporate Strategy 2018-2022, specifically the following priorities:
- Giving children and young people the best start in life
 - Delivering and defending: health, social care and support
 - Building Safer Communities
- 4.5 Our Early Help approach is the way we will work to deliver the vision as set out in our Children and Young People’s Strategic Partnership Children and Young People’s Plan (CYPP): *Together with families we will improve the lives and life chances of the children and young people in Lewisham*, and the outcomes and aims in the supporting strategies to the CYPP.

5 Purpose, Deliverables and Structure to the Early Help Review

A number of key drivers have shaped the Early Help Review, informing the scope and activities undertaken. These are set out below.

5.1 The Council’s Budget Setting Process

- 5.1.1 In view of the council’s wider budget challenges, 2018/19 savings proposals for the CYP directorate included £800,000 related to commissioned services providing support to children, young people and families in Lewisham (primarily on Children and Family Centres and Youth Services).

5.1.2 Following activity in the review, this cut is not in the current proposals for 2020/21, but early help services with CYP general fund budgets will always be at high risk because there is no specific statutory basis for the provision of the services and the immense pressures on council budgets.

5.2 Contract cycles for existing services

5.2.1 A number of services that contribute to our existing Early Help offer have contracts that end in March 2020.

5.2.2 As part of the ‘commissioning cycle,’ planning for future service delivery includes an analysis of need and efficacy and performance of current service provision. The Early Help review incorporated this activity for these services to ensure they were considered collectively rather than in isolation.

5.3 Lewisham’s Children’s Social Care Improvement Programme and Ofsted recommendations.

5.3.1 In 2018, following independent review, additional resource was commissioned by the Council to Children’s Social Care to progress an improvement plan.

5.3.2 The plan includes improvements to Early Help, specifically focused on the provision of and pathways for targeted family support, ensuring prevention of escalation of need to the point where statutory children’s services are needed, and adequacy of step down provision.

5.3.3 The improvement plan additional reflects recommendations from our Ofsted inspection in 2015 and the focused visit in 2018— namely:

- ensure that a revised early help strategy is implemented so that early help is effectively targeted, coordinated and evaluated (2015)
- enable families to receive appropriate support when need is first identified (2015)
- monitor and evaluate the effectiveness of step-up and step-down arrangements between early help and children’s social care to ensure that appropriate actions are taken to improve services (2015)
- adequacy of step up and step down arrangements and commissioned provision to support this (2018)

5.3.4 This review was combined with the planned review of commissioned services above and broadened the scope of the early help review to include the internal Early Help function, and our co-ordination of early help, together with the commissioned Targeted Family Support Offer, currently provided by Core Assets Ltd and funded by the Troubled Families Grant.

5.3.5 In July 2019, towards the end of the Early Help review activity, Ofsted completed an Inspection of Local Authority Children’s Services (ILACS). Key findings and areas requiring improvement noted by Ofsted and relating to Early Help reflect findings within our own review, and include:

- Early help services remain underdeveloped. When children do receive a service, the assessments are weak and do not include basic information, such as the reason for the assessment.
- The lack of capacity in the service [Lewisham Safer, Stronger Families Service, provided by Core Assets], which is externally commissioned, means that children and families may have to wait for up to two months to receive help.
- Management oversight of the waiting list at the time of the inspection was not sufficiently rigorous. [Recent] changes increase opportunities to ensure that thresholds are accurately applied [and] a variation to the contract has increased

- the capacity of the commissioned service, allowing a gradual reduction to the waiting list.
- Appropriate and timely action is taken for referrals...however, for some children who managers deem to be at lower risk, decision making takes too long.
- Timely screening of police notifications leads to prompt recognition of domestic abuse. However, the response to children and families in these circumstances is not sufficiently robust and the options for support are not clear.
- Some cases have been...stepped down to early help, despite the capacity issues in early help services.
- Managers are aware of the extent of work needed to develop and embed an effective early help offer and this is part of the improvement plan.
- Senior managers are aware that commissioned services such as early help and placements for children in care are not consistently delivering effective services for children and their families. Further work is being undertaken to ensure that the right services are in place to meet the needs of children in Lewisham

5.4 Lewisham's existing Early Help Strategy expires this year.

- 5.4.1 There has been lots of learning and change since the launch of Lewisham's Early Help Strategy in 2017, including a better understanding of what we mean by Early Help, and recognition of the value in adopting a wider Early Help approach and longer term vision. We know more about the nature and volume of demand for services below the threshold for statutory interventions.
- 5.4.2 The Early Help review informs the development of a new Early Help Strategy and approach for Lewisham.

5.5 Alignment with other work of the Council and its partners.

- 5.5.1 Alongside the Early Help review, additional strategic developments are being pursued by the local authority and CCG, including the 2018/19 NHSE and Member led CAMHS reviews, Lewisham's public health approach to reducing violence, redesigning local health provision to deliver the NHS long term plan (specifically around prevention and community based care), our improvement programme for Children's Social Care and implementation of Signs of Safety, our concern hub and contextual safeguarding approaches, and our plans to increase participation and reduce exclusions in school.
- 5.5.2 An Early Help Approach for children, young people and families therefore needs to clearly align with and respond to these strategic developments so that we improve outcomes across our strategic priorities for children and young people, and so there is a shared understanding and a joint direction of travel in our culture and ways of working together.

Deliverables

- 5.6 In response to the drivers noted above, the deliverables from our review include:
 - 5.6.1 Establishing council early help budgets on a sustainable footing.
 - 5.6.2 Commissioning intentions for a number of services whose contracts end in March 2020 to ensure continuity.
 - 5.6.3 Recommendations to ensure we have sufficient, high quality Early Help provision to ensure that families receive appropriate and timely support when need is first identified. This means having the right capacity in our system, and the right interventions to meet presenting needs now – and projected for the future.

- 5.6.4 Recommendations on how to develop mechanisms so that we can better evidence our work, its quality, and the impact this is having.
- 5.6.5 The publication of a new Early Help Strategy in autumn 2019, setting out how we will ensure that early help is effectively targeted, coordinated, and evaluated.

Structure of the Early Help review

- 5.7 The purpose of Lewisham's Early Help offer is to maximise positive outcomes for all our children and young people by preventing needs from arising and where needs are identified, intervening early and preventing those needs from escalating.
- 5.8 Early Help is an approach rather than a service or set of services, and as such any service redesign has to be done in the context of the whole system and strategy for early help, rather than in isolation. In order to achieve this, contracts for a number of services have been extended in 18/19 such that service design is informed by a strategic and holistic view of support for children and families and not individually.
- 5.9 The Early Help review forms part of a longer term approach to embed a new Early Help approach and way of working in Lewisham.
- 5.10 The structure of the review focused on two key areas: understanding our needs and an assessment of current provision and the extent to which our offer has a positive impact for children and young people. The review then sets out recommendations for change.

6 Activity and Findings in the Early Help Review

What does our needs analysis tell us?

- 6.1 An effective Early Help offer improves outcomes for children and young people through reducing the risk factors and increasing the protective factors in a child's life¹. It looks different for all children and young people: the diversity and complexity of their lives and life experiences means that all children and young people are different from one another..
- 6.2 In order to provide the support that each child and young person needs, particularly in times of crisis, our needs assessment therefore seeks to understand what our population needs are. This assessment includes collation and analysis of readily available data and information to inform where we need to improve outcomes for our children and young people. It aims to identify the risk factors we need to address, and the protective factors we need to strengthen. Understanding this allows us to better predict where we should focus our resources and efforts to identify and respond to needs as they emerge.
- 6.3 Activity undertaken as part our needs analysis included:
 - an assessment of available data
 - consultation events with partners and young people
 - analysis of current service delivery and demand
- 6.4 The Early Help Needs Assessment will continue to be developed as our data and intelligence grows.

¹ Protective factors are the characteristics or conditions of individuals, families, communities and society that can mitigate risks and increase the health and wellbeing of children and families. In many cases, risk and protective factors are two sides of the same coin: for example, poor parental mental health may pose a risk to a child's healthy development, while good parental mental health may provide a protective factor against other negative outcomes, such as behavioural problems or poor academic attainment.

These risk factors are not deterministic or predictive at an individual level: they cannot tell us exactly which child or young person will need help. But they can help us to identify children who are vulnerable and who may need extra support. Studies show that early intervention works best when it is made available to children on the basis of pre-identified risks.

- 6.5 Child Poverty: in Lewisham, about a third of the borough's children live in poverty. Poverty can have a direct impact on their development and health. Lewisham has an above average employment rate (compared to London and nationally), but household income is below the London average. This suggests that Lewisham has high numbers of people who are working and yet poor. Usage of food banks has gone up by 20% between April 2018 and March 2019. The cost of monthly rent in the borough has also increased faster than incomes. This is particularly significant as more than one in four Lewisham households currently live in private rented accommodation. Housing is consistently raised by families and services working with families as a key issue and concern.
- 6.6 Parenting: the impact of parenting on children's life chances is well known. Parental risk factors that can contribute to poor outcomes for children include high levels of substance misuse, domestic violence and poor physical or mental health. There were over 4,500 reported instances of domestic abuse in 18/19, an increase of 8% against the previous year, and domestic abuse is a factor in our approximately half our early help referrals. Nearly half of all women are overweight or obese at their first midwifery appointment and we know that maternal mental health is an issue for pregnant and new mothers in Lewisham.
- 6.7 Emotional wellbeing: the number of children and young people who experience poor mental health in Lewisham continues to increase, and is not always identified early enough. Significant intervention may be required as children become young adults. The number of Child Adolescent Mental Health Service (CAMHS) referrals in Lewisham numbers about 400 each quarter, with increasing levels of need and complexity. Each quarter, an average of 30 young people present at Accident and Emergency because of a mental health crisis. If children do not receive support early, there is a greater risk that they could develop behavioural problems that could affect their development.
- 6.8 Physical Health: preventing ill health in childhood can make a big difference in achieving a healthy adulthood. Whilst breastfeeding indicators are positive in Lewisham (linked to healthier weights amongst other positive outcomes) and we have reduced the number of children who have excess weight at reception, the number of children carrying excess weight at year 6 (37.9% in 17/18, significantly above the national average). Potentially linked, almost one in five of five-year-olds have one or more decayed, filled or missing tooth (2016/17) and hospital admissions resulting from tooth decay are notably higher in Lewisham than the average for England. We have 40-50 hospital admissions a month due to asthma and respiratory illness, and we estimate that three children in every classroom in Lewisham have asthma.
- 6.9 Keeping children safe from harm: most children and young people do best when living with their families. We want to identify issues early, so that we respond swiftly and families can be supported and children and young people can be kept safe and nurtured. The number of contacts received by MASH every month is on average 1,300, with approximately 10% leading to referrals to Early Help. We also want our children to grow up in an environment where they feel able to ask important questions and consider their own safety on issues such as bullying, relationships, knife crime, drugs, alcohol and online dangers. In the 12 months to December 2018, Lewisham has seen reductions in the number of first-time entrants, re-offending, custodial sentences and remand as well as incidents of the most serious youth violence. A particular concern, however, is the over-representation of young black and minority ethnic men as both victims and offenders in many crime categories. Smoking at 15 years is 6.1%, above the London average and in 2017/18 the rate of hospital admissions (15-24 years) due to alcohol in Lewisham was 537 per 100,000, above London average. Further, between 2015-17, Lewisham had the highest rate of hospital

admissions due to substance misuse (15-24 years), compared to London, England and all similar boroughs at 88.6 per 100, 000.

6.10 Education: from early years through to primary school, the majority of Lewisham children do well, with Key Stage 1 attainment/school readiness in Lewisham consistently above the national and regional average (77.9% of children in 2017/18). But, we need to ensure that we continue to make progress for our young people in secondary school, where attainment is improving but not yet meeting national averages. We also need to make sure that we close the gaps between groups performing less well than their peers.

6.11 From our analysis of referrals to Early Help we know that:

- The top 4 presenting issues for targeted early help in 18/19 were: challenging behaviour; domestic abuse; difficulty meeting basic needs of children; and emotional wellbeing.
- There has been over a 35% increase in demand for targeted family support, with a slight concentration in the north and south of the borough. Feedback from our provider of targeted family support suggests that the 22 week programme is best suited to only approximately 50% of families referred to the Early Help team.
- Our targeted family support offer (provided by Core Assets and Children and Family Centres) has capacity for approximately 40 families a month. The increase in demand over the last three years suggests support for at least another 20 families a month is needed. In 2019, this has meant that some families have faced delay in receiving support.
- Overall, our demand for Early Help outstrips supply, and our offer isn't broad enough to meet the presenting needs of young people and families.
- The role and purpose of the lead professional is not comprehensively understood or undertaken across the partnership, reducing the number of organisations, services or individuals who can fulfil this role.

6.12 The review demonstrated that work is needed to improve our data intelligence, particularly around our systems managing referrals to early help, and better understanding of access to, and provision of support for children and young people who may be more at risk of poorer outcomes (for example young carers, unaccompanied asylum seeking children, CYP with SEND or complex health needs, and our BAME children and young people).

6.13 It also highlighted the need for a clear partnership definition of Early Help together with a shared understanding and commitment to our approach, with knowledge of the breadth of provision available and the pathways to support. This should be delivered alongside the development of a new Early Help Strategy, recognising that developing that approach to working with children and families is a longer term piece of work, requiring effective governance and leadership, and meaningful engagement and co-production with children, families, communities and the workforce across Lewisham.

How is our current Early Help provision performing?

- 6.14 Since its inception in 2016, the Early Help offer in Lewisham continues to develop and evolve. This review provides the opportunity to take a stock take at the end of the current strategy to ensure that our offer and delivery makes a difference for children and young people, improving outcomes and is able to respond to the needs of the local community making best use of our available Partnership resources.
- 6.15 Lewisham's Early Help approach recognises the fact that children and young people may experience problems and difficulties at any point throughout their childhood and adolescence and seeks to prevent needs from arising or escalating, and to respond to needs at the earliest opportunity, based on the view that help provided early on is critical to prevent escalation to the point where statutory interventions may be required.
- 6.16 Lewisham's vision for a strong and effective Early Help approach is that children and young people in Lewisham, and their families, are resilient - knowing when and where to go for help and support when faced with challenges and adversities as they arise. Parents, carers and families will be empowered to make the decisions that make the difference for their children. They will be part of active, participative and skilled communities that clearly understand the role they play in helping children to lead healthy and happy lives.
- 6.17 More confident parents, more capable communities and appropriate support from peers as well as from statutory agencies, will mean that a greater number of children and families will have their needs identified and met earlier and more effectively, with fewer children escalating to the point where statutorily services are required, and with a lasting positive impact for children and their families.
- 6.18 Our Early Help offer begins with the universal services available to all Lewisham children and young people and families, with several providers able to offer interventions, including evidence based interventions, where signs of needs first emerge.
- 6.19 Universal provision is central to Early Help through the role in identifying those children and families who may benefit from additional support. Targeted support is embedded within universal services and settings meaning many of our universal services are able to work with children and families across thresholds, providing consistency of support. For example, the MESCH and FNP offer within our Health Visiting Service, and our Family Support offer delivered through Children and Family Centres.
- 6.20 For our younger children and families, Lewisham's Children and Family Centre Services (CFCs) are provided from a number of dedicated centres across the borough, with additional locations used to deliver support. The core purpose of children and family centres is to improve outcomes for young children and their families, specifically the current offer focuses on:
- Improved parenting and attachment
 - Improved school readiness
 - Improved child and family health and life chances
 - Prevention of escalation
 - Housing, Employment & Finance Support
- 6.21 The 0-5 integrated, developed by Health Visiting and Children and Family Centres, provides child and family health services through co-location and co-delivery of a range of programmes and evidence based interventions. The offer is able to support families with varying levels of needs through direct access and referrals from partners for more targeted and specialist support (provided by family support and outreach workers and specialist programmes) to meet locally and individually identified needs.
- 6.22 Lewisham CFCs supported over 40,000 children and their families in 18/19 through their open door universal provision, family support and (evidence based) programmes.

- 6.23 Whilst the breadth of this offer is strong, and it is positive that our CFCs can work with children and young people up to 18 (25 with additional needs) and their families, not enough strategic workforce development and capacity building has taken place to support this model of delivery and level of need, which is higher than CFCs have previously worked with. CFCs would benefit from a more defined service scope and clearer priorities in order to make the best use of available resources. We also need to consider if this is the most appropriate provision of targeted family support for older children and adolescents.
- 6.24 A number of other organisations provide additional parenting support. This includes 'Working With Men', a dedicated support service for fathers (primarily under 25s); Parent Support Group; Lewisham Autism Support; and Lewisham Parent and Carer forum.
- 6.25 This provides much needed support for fathers and parents of children with SEND, but isn't sufficiently developed or promoted within our current Early Help offer.
- 6.26 Early Help in the early years also includes the local Maternity Service. Booking early for maternity care has many benefits, including identification of support need in families at the earliest possible point, during and after pregnancy. Vulnerable women receive enhanced midwifery support antenatally and postnatally from specialist teams, including via outreach and home visiting, and greater continuity of carer. Lewisham run the 'POPPIE' team to provide full continuity of care for women with higher risk of pre-term births. Lewisham also deliver mindful mums, supporting 161 women in 17/18, 93% of whom had improved resilience scores. Midwives are co-located in Bellingham children and family centre, and have access to all sites for delivery of programmes and engagement.
- 6.27 Support continues through the universal Health Visiting service, which leads on the delivery of the National Healthy Child Programme (HCP) for 0-5 year olds. Health Visitors provide a universal home visiting service to all families from pregnancy up until the child is 5 years old. They also offer targeted interventions with additional support available to the most vulnerable families including Maternal Early Child Sustained Home Visiting (MECSH) and Family Nurse Partnership (FNP)
- In 18/19 87% of babies received a new birth visit within 14 days and 93% received a 12 month review
 - 79% of babies are still being breastfed at 6-8 weeks and the service was re-awarded UNICEF level 3 breastfeeding accreditation.
 - MECSH currently has a case load of 400 individuals and approximately 90 vulnerable first time mothers are accessing FNP at any one time.
- 6.28 There are a number of additional programmes within the core Health Visiting offer, including the Freedom Programme supporting victims of domestic abuse and their children; the 'Understanding Your Baby' groups; and one-to-one 'Listening Visits' for women with perinatal mental health needs.
- 6.29 A number of local authorities have combined Health Visiting and School Health Services into a single 0-19 provision covering the Healthy Child Programme. As our approach for Early Help develops, this should be considered alongside integration with early years services.
- 6.30 As children get older, for many, the early help they need is best accessed in their school - the place they know best. Schools have a range of internal and local resources they can call on to respond quickly and appropriately to needs as they arise, making the most of opportunities for working in partnership with parents and families. These include: targeted learning support (e.g. reading/maths accelerated learning groups), homework and activity clubs, home learning initiatives, learning mentors,

pastoral support, SEN support, behaviour support planning including early and ongoing help to support positive behaviour, social interactions and attitudes to learning, nurture groups, our school health service and educational psychology.

- 6.31 And for our older children and teenagers, our youth services provide a universal offer of safe places to go and fun things to do and learn for our 8-19 year olds (25 for young people with additional needs). Help and support is offered in the trusted relationships built through consistent contact with professional and well trained youth workers
- 6.32 Youth Services are currently delivered by Youth First, and employee and young people led organisation. Youth First delivers a broad offer through direct provision and through commissioning and subcontracting a range of local community groups, including youth clubs in other areas of the borough, holiday programmes, activities for specific groups, and a range of workshops.
- 6.33 In addition to their main contract and funded by Community Safety, Youth First also deliver an offer for Year 7 pupils at Lewisham secondary schools called USSP (Universal Schools Safety Programmes) aimed at tackling knife crime, drugs, healthy relationships, grooming and online safety. This is delivered in partnership with Lewisham Young People's Health and Wellbeing Service (provided by Compass) and in partnership with Chartwells, Youth First have delivered hot meals to children and young people across the borough during the summer in 2018 and 2019.
- 6.34 In the three years since the contract began, Youth First have increased young people engaging with youth provision and the number of sites of delivery/access year on year.

| Total Footfall | | | Unique Participants | | | Regular Participants | | |
|---|-------|--------|---------------------|-------|--------|----------------------|-------|--------|
| 16/17 | 17/18 | 18/19* | 16/17 | 17/18 | 18/19* | 16/17 | 17/18 | 18/19* |
| 39145 | 63406 | 72023 | 1663 | 3938 | 4065 | 614 | 1226 | 1306 |
| *additional 18/19 data still being collated | | | | | | | | |

- 6.35 There is increasing recognition of the need to develop outreach and case holding elements to the youth services offer to allow more targeted support interventions.
- 6.36 Lewisham's Young People's Health and Wellbeing Service (YPHWS) is a risky behaviour service focussed on young people aged 10-19, (up to 25 with additional needs). It developed on the premise that YP who engage in one type of harmful risky behaviour may be more likely to engage in other types and an emotional wellbeing need is likely to underlay risky behaviours. The service specialises in substance misuse, sexual health, and linked emotional wellbeing needs.
- 6.37 This purpose of this service is to:
 - raise awareness of risks (and solutions) and promote healthy lifestyle choices
 - provide signposting, brief advice and guidance
 - identify, engage, and track outcomes for young people demonstrating a risky behaviour
 - offer targeted interventions, support and handholding to appropriate services where needed
 - Kooth - a confidential online counselling (delivered by British Association for Counselling & Psychotherapy accredited counsellors) provision is also part of this service.
- 6.38 In 18/19 665 young people accessed the service: 497 received substance misuse treatment; 51 young people started counselling and 508 received an emotional

wellbeing intervention; and 328 young people accessed a risky sexual behaviour intervention with 407 attending a booked clinical sexual health appointment.

- 6.39 Referrals are predominantly for emotional health and well-being. There is a high level of need in Lewisham, particularly below CAMHS thresholds, which means the service has been dealing with a high numbers of young people with complex mental health needs. This high caseload impacts on capacity to deliver more intensive substance misuse interventions.
- 6.40 The emotional wellbeing of our children and young people is a high priority, and in addition to the Young People's Health and Wellbeing Service, there are a range of early help services available to support children and young people's mental health and wellbeing, including:
- **The Children's Wellbeing Practitioner Programme** allowing trainee mental health practitioners, with robust clinical supervision, to deliver evidence based interventions to children and families with mild to moderate needs. Delivered by Lewisham CAMHS, this is a successful approach, preventing children from reaching specialist thresholds.
 - **The Community Adolescent Eating Disorder Service** includes a school's training programme and a 'clinician-led' self-referral help line for young people, parents and professionals
 - **CAMHS Virtual School for Looked After Children** provides embedded clinical support in the Virtual School for LAC, offering training and consultation to social workers, foster carers and teachers to improve the educational outcomes of children in care.
 - **A Trauma Informed Approach to Training and Supervision** has been embedded in the Youth Offending Service and offered to all staff, alongside outreach speech and language support in the YOS and liaison and diversion support in Police Custody Suites.
 - **Alchemy** is an award winning, children and young people-led training and participation approach, which is being extended to pilot a framework for peer-on-peer support in a minimum of one secondary school and two primary schools during 2019/20.
 - **Youth Mental Health First Aid Training** is available to all schools in Lewisham. The course is designed to help professionals identify and respond appropriately to the signs and symptoms of mental ill health in CYP.
 - **Mental Health in Schools Support** comprises of two CAMHS clinicians working with schools to prevent school exclusions and improve academic attainment
 - **CAMHS Psychiatry input into the SEN Panel** allows for clinical input into SEN Panel and the EHCP and Continuing Care process.
 - **Parent ENGage – Resilience Sessions for Parents / Carers** are resilience courses designed by parents and carers, for parents and carers. The sessions are delivered in schools and the topics covered include: dealing with stress; emotional regulation techniques; and signposting to other services.
- 6.41 Additional mental health and emotional wellbeing services are commissioned directly by schools. These services are wide ranging and includes:
- **School counsellors** operate in a number of schools and are accessed via internal referrals.
 - **Place2Be** - in-school mental health support and expert training to improve the emotional wellbeing of pupils, families, teachers and school staff to enhance the wellbeing and prospects of children and their families by providing access to therapeutic and emotional support in schools.
 - **Nurture** - an attachment based approach for children and young people with Social, Emotional and Mental Health needs.
 - **Roots of Empathy** - an evidence-based programme that has shown significant effect in reducing levels of aggression and bullying among school children.

- 6.42 For children or families where needs have risen to a level where a higher level, multi-agency response is required, our Early Help team and referral process coordinate the pathway to intervention and support.
- 6.43 The Early Help Team receives referrals for targeted support through the Lewisham MASH. Where the referral indicates a targeted family support offer is needed, they team ensure that a coordinated support package, including a TAF and lead professional, is put in place.
- 6.44 For most families, this is currently provided by our dedicated Family Support Service: Lewisham Safer, Stronger Families, though some families are also supported by the Children and Family Centres Family Support Offer, which takes referrals from the Early Help panel, and is also able to take self-referrals and referrals from other partners, therefore improving access to support and reducing pressure on referrals through our MASH. Data in 18/19 shows that over 350 families were referred to the Safer, Stronger Families Service from the Early Help team, with 138 families receiving support from CFCs.
- 6.45 **Lewisham Safer Stronger Families Service is provided by** Core Assets Group Ltd who work in partnership with families and professionals to provide tailored, intensive, and focused family support that achieves positive outcomes which are significant and sustained. The focus of the support is on supporting families to resolve their own issues and equipping children, young people and their families with the skills and coping mechanisms to reduce unwanted behaviour, increase positive family functioning, and build their resilience.
- 6.46 The service uses a strength based intensive multi modal intervention, over a 22 week period (12 week programme and 10 week step down period), which incorporates delivering practical support to the heart of the family in their own home, using a combination of evidence based principles involving Level 4 Standard Teen Triple P™, Solution Focused Brief Therapy and Team Parenting™.
- 6.47 In response to needs identified through the life of the contract, and to respond quickly to the challenges of demand noted above, we have already made changes to the service:
- the model has been enhanced through additional therapeutic provision and staff training in Stepping Stones to respond to the additional support requirements that workers identified when engaging Lewisham families;
 - the service has been remodelled to allow for greater flexibility, so that the service can continue to provide support and interventions to families through the Triple P intervention, but will also be able to provide family support at different levels of needs for different amounts of time, dependent on families' individual needs. This means more families can be supported and we have been able to improve our step down pathway from Children's Social Care;
 - in response to our concerns relating to the delay some families are experiencing in receiving targeted family support, the service will additionally take all referrals directly from the Early Help hub in the MASH, and complete a refreshed Early Help Assessment providing immediate and appropriate level support and facilitating access to existing universal and specialist provision in the borough as required.

Sector led peer review

- 6.48 A sector-led peer review of Early Help in Lewisham was undertaken in June 2019 by Royal Borough of Greenwich. The review considered some focused questions, including the extent to which Lewisham's current offer takes a 'whole family approach'

and is able to respond to identified needs and risks that impact on children's outcomes.

- 6.49 The review looked at our existing policies, procedures and data; met with senior and middle management and staff, including the Troubled Families coordinator; held focus groups with early help delivery partners; and met with parents and families.
- 6.50 In lieu of a final report from Royal Borough Greenwich, some keys findings presented at the end of the on-site review were:
- there is a clear understanding of some of the issues we have in our current offer;
 - a strong commitment from our providers to being part of a professional network;
 - a wide range of services available for families;
 - recognition of the importance of engaging fathers;
 - attempts to reduce the CAMHS waiting list; and
 - positive feedback from families regarding our targeted family support service but
 - a lack of identity of early help, with little strategic vision and direction;
 - a lack of clarity and understanding of the family journey;
 - weakness in our availability and use of data;
 - some evidence of multiple service involvement and a referral culture;
 - programmes aren't flexible enough to meet the needs of the range of families;
 - evidence of QA of early help work needs to be strengthened;
 - use of waiting lists risks delay and escalation; and
 - an over emphasis on parenting programmes.

Financial Context

- 6.51 The Early Help review included an assessment of the value for money of our existing offer, any options for implementing reductions and the impact this might have.
- 6.52 The development of our Early Help approach takes places in a challenging financial context. As well as the proposal to deliver savings of £800,000 from services provided to our children and young people below the threshold for statutory intervention (namely children and family centres, youth services and family support), additional financial pressures are presented by issues relating to the budget for youth services following mutualisation in 2016/17 amounting to a projected budget pressure £431,500 in 19/20.
- 6.53 Further risk is presented by the uncertainty over the future of the Troubled Families grant. The Troubled Families Grant wholly funds our targeted family support services (£1m). The local authority received confirmation that the Troubled Families Grant would continue in 20/21 as part of the one-year spending round on 5th September 2019. At the time of the review, however, this was not clear and final allocations are still to be confirmed.
- 6.54 The sum of the financial pressures to early help is therefore: **£1,231,500**.
- 6.55 The table below provides the 19/20 budget and contract costs for the services within scope of this budgetary envelope:

| Universal and Targeted Services for Children, Young People and Families | | | | |
|---|------------------|-------------------|-------------|---------------------|
| Service line | Budget available | | | 19/20 contract cost |
| | CYP budgets | Other LBL budgets | CCG budgets | |
| | | | | |

| | | | | |
|--|------------|------------|---------|------------|
| Children & Family Centres | £2,576,000 | | | |
| Children & Family Centres (inc facilities & ICT costs) | | | | £2,128,000 |
| Young Father's Service | | | | £83,000 |
| Lewisham Autism Service | | | £25,000 | £90,000 |
| Parent Support Group | | | | £12,500 |
| Lewisham Parent & Carer Forum | | | | £25,000 |
| Young Carers | | £49,000 | | £49,000 |
| | | | | |
| Youth Service – equivalent full year costs without rental costs, but including facilities costs | £1,943,000 | | | £2,369,298 |
| | | | | |
| Safer Stronger Families Service (Core Assets) | | £1,070,000 | | £1,070,000 |
| | £4,519,000 | £1,119,000 | £25,000 | |
| | | | | |
| | | £5,663,000 | | £5,801,798 |

- 6.56 The total CYP budget available for universal and targeted level support, which covers our children and family centres, parenting support, and youth services, is £4.519m. Provision of targeted family support also needs to be delivered within the funding envelope, which increases to £5.589m if the Troubled Families Grant is allocated at the same levels.
- 6.57 If the funding from other LBL budget lines and the CCG continues, the total budget available for these services would be £5,663,000.
- 6.58 The statutory duties relating to Early Help are minimal, and as a result, this area has seen significant budget reductions since 2010/11. Given these significant budget reductions, value for money – notwithstanding the improvements already noted as being needed – provided by these services is high.
- 6.59 It is recommended that youth services are delivered within a budget of £1.943m but that no further reductions are implemented at this time. Any further reductions would significantly impact on the offer available at a time when our own review, and Ofsted have highlighted the need for improvements in our early provision and infrastructure.
- 6.60 As a programme of improvement is delivered across the Early Help agenda, value for money and efficiency continue to be key drivers and this does not exclude these services from being considered in the future as having potential for cuts should the council's budget position not significantly ameliorate.
- 6.61 Finally, our assessment of our current delivery looked to other areas and models of Early Help to inform options for Lewisham

Summary of findings

- 6.62 Through our assessment of our current Early Help offer, we found that whilst our current services can demonstrate many strengths and positive impacts for children and families, we weren't meeting the vision as set out in our current Early Help strategy. We also know that the weakness in our current offer are more about infrastructure and

communication, and demand and gaps in provision than the quality of services currently provided.

- 6.63 We also know we need to strengthen our early help approach to better demonstrate the context in which our children and young people live – the offer and response for younger children is not the same as for older children, and our current framework does not sufficiently recognise this, or provide enough capacity to respond.
- 6.64 A number of immediate improvements were made, including by introducing more flexibility into the current commissioned targeted family support service, but further changes are needed.
- 6.65 More focus is required to improve the understanding and application of thresholds, the quality of early help assessments, and the partnership's ability to work with family in a consistent, high quality approach. We have already refreshed our Threshold's for Intervention document to ensure Lewisham aligns with London, but further work across the partnership is needed.
- 6.66 Whilst changes have been made to introduce more flexibility into the family support service, our needs analysis demonstrates that a wider breadth of intervention is needed to support our children and young people at risk of poor outcomes: family support is not always the most appropriate response to the needs seen in our referrals for Early Help or that providers identify in their work with children and young people. This means that we need to address some of the gaps in our support offer – for some areas, this means strengthening the information available to families and professionals, and improving the way we work together. In other areas, we need to provide clearer pathways to support. And for other needs, we need to secure additional or different interventions to meet individual needs.
- 6.67 Additionally, the current capacity is not sufficient to meet demand, which has led to some delay for some families in receiving a coordinated targeted family support service. This points to a need to redesign our system and model of Early Help, with some immediate capacity provided to the current services, but a longer term redesign is required to ensure that capacity is provided at the right level and is responsive to meet changing needs.
- 6.68 There is a significant programme of change needed, both for our service offer – specifically our targeted family support – and our strategic partnership vision and system level approach for early help, which is a longer piece of work.
- 6.69 For Lewisham's Early Help approach to make the most effective use of our available resources, the collective resources of communities and the CYP strategic partnership need to be part of the planning and design, and our system needs to address the risks and protective factors our children and young people face.
- 6.70 Some of the options for redesign are provided below.
- 6.71 **Universal or targeted:** children and families in Lewisham should receive seamless access to support across universal and targeted provision. As well as looking at the balance of provision at different levels, this means ensuring that we have a continuum of support to meet the needs of families. For example – a single family may benefit from lower level parenting support to strengthen healthy eating and lifestyle choices, whilst also needing more targeted support for a child who is displaying some challenging behaviour. Or, a family may be experiencing some complex issues requiring a high level of support, whilst also having a young person who needs access to some positive activities.
- 6.72 Early intervention works best when it targets particular families or individuals, on a selective or indicated basis. As early intervention moves up the scale from universal to

targeted selective to targeted indicated, interventions become more intensive, and are offered to a smaller group of families.

- **Targeted selective** interventions are offered to families on the basis of broad demographic risks, such as low family income, adolescent parenthood or ethnic minority status. Although children growing up in these circumstances may not be suffering any specific problems, interventions that select families on the basis of these kinds of risks have the potential to keep more serious problems from occurring.
- **Targeted indicated** interventions are offered to families who have been identified as having a specific or diagnosed problem requiring more intensive support. In these cases, early intervention can no longer prevent problems from occurring, but has the potential to help in treating the problems and minimising or reversing long-term impacts on a child's development.

Based on the data we have available, we need to ensure that where we target reflects the families and needs in Lewisham.

- 6.73 **Integration or specialism:** a more radical design option would be integration of all current early help services, to form a central, all age, multi-disciplinary team. This option may provide some financial efficiencies – with fewer organisational overheads and management costs though can place at risk service identity, a sense of professionalism, and specialist services.
- 6.74 Alternatively, given that types of early intervention that are effective during the first years of life (typically parenting support) will be different to the types of intervention that are effective during adolescence (support that focuses on building the resilience of the young person directly), support might be integrated to focus on early years and on adolescence, similar to boroughs who are creating “Best Start Lewisham” or “Young Lewisham” offers. Services can be wholly integrated, or aligned across a single vision and approach.
- 6.75 Our 0-5 integrated pathway, developed between maternity services, health visiting and children and family centres, is an example of this. A range of child and family health services are coordinated across each children and family centre area. These include: anti-natal and post-natal advice and support; nutrition and healthy lifestyle sessions; Baby Hubs (delivered with Health Visitors), Mindful Mums, speech and language therapy; and integrated development checks.
- 6.76 **Directly delivered or externally provided:** with all services, an assessment is taking place to understand the potential benefits of insourcing against other potential delivery models. As well as outsourcing, this can include delivering in partnership with other boroughs, or arm's length organisations.

7 Recommendations

- 7.1 Recommendations in response to the drivers and deliverables to the review are:
- 7.2 Services in Lewisham are reshaped and developed to support and deliver improved pathways and evidence based interventions, including by providing more capacity within the system, and by providing more flexibility and responsiveness to children, young people and families.
- 7.3 A programme of further engagement and coproduction is delivered over the next six months, including some focused participatory research in communities so that the implementation of our Early Help strategy and service design is informed by and collectively owned with children and young people, families and communities in Lewisham.

- 7.4 Internal and external resources are reshaped to develop Lewisham's infrastructure supporting our Early Help approach in order that future changes to services and delivery are done from a position of strength and the partnership is effectively supported in work with families, understanding thresholds, with confidence and capacity to fulfil the lead professional role
- 7.5 Work is undertaken to support the voluntary and community sector to be more active participants in our early help approach.
- 7.6 A partnership workforce development action plan is developed to support the Early Help strategy, strengthening the Partnership's prevention and early identification of risks and needs and embedding our culture and ways of working and ensuring there is a common 'language' of early help.
- 7.7 Clearer roles and responsibilities, referral pathways and thresholds for support are defined, especially for high incidence presenting issues such as domestic abuse and behaviour problems, making access to support quicker and easier
- 7.8 Ensure that access to reliable information to aid self-help and independence is a fundamental part of our offer, making best use of our Family Information Service
- 7.9 Develop a Lewisham cost/benefit model for Early Help, which provides a clearer expectation for the impact of Early Help on improved outcomes for children and young people, and provides a financial case for investment in Early Help to avoid cost pressures later on
- 7.10 Improvements are made in our ability to evidence the impact of our interventions, including improving our collection and use of - relevant and proportionate - data to ensure that we are able to track families and measure the success and impact of both individual interventions and our Early Help approach as a whole

Service recommendations

- 7.11 Recommendations relating to individual services post March 2020 will be presented to Mayor and Cabinet for decision making in September and October 2019.
- 7.12 The Future of Youth Services report is provided in Appendix A
- 7.13 Draft recommendations for additional services are:
- In order to address findings in our Early Help review and our Ofsted inspection, our provision of family support is strengthened by working with our current provider of targeted family support to adjust current provision to better meet need at least for the remaining life of the contract (to 31st March 2020) whilst developing and strengthening our in house provision.
 - As the current contracts for both Health Visiting Services and the School Health Service expire on 31/03/20, it is proposed that the contracts & budgets for these services be combined and extended for 2 years. The combined value of this contract would be £6,909,827 which includes the reduction of £196,000 to the value of the HV Service budget pre 2019/20. Combining and extending the contract with LGT, for a period of 12 months, will provide both stability and flexibility to enable the provider and commissioners to work together to respond to emerging local and national policy developments whilst developing a new service model capable of identifying, prioritising and addressing the needs of children and young people in Lewisham across the age spectrum.

- Children and Families centres contracts are also due to end on 31st March 2020, with an option to extend for a further two years. It is recommended that this extension option is taken, whilst varying the contract to allow CFCs to focus on a core offer providing lower level targeted support within universal settings.
- The Young Person's Health and Wellbeing Service contract additionally allows for an extension of two years, it is recommended that this option is taken in order to deliver focused adjustments to the service which we are confident that the current provider can make.

8 Financial implications

- 8.1 The table below provides the 19/20 budget and contract costs for the services within scope of the Early Help review:

| Universal and Targeted Services for Children, Young People and Families | | | | |
|--|-------------------|-------------------|-----------------|---------------------|
| Service line | Budget available | | | 19/20 contract cost |
| | CYP budgets | Other LBL budgets | CCG budgets | |
| Children & Family Centres | £2,576,000 | | | |
| Children & Family Centres (inc facilities & ICT costs) | | | | £2,128,000 |
| Young Father's Service | | | | £83,000 |
| Lewisham Autism Service | | | £25,000 | £90,000 |
| Parent Support Group | | | | £12,500 |
| Lewisham Parent & Carer Forum | | | | £25,000 |
| Young Carers | | £49,000 | | £49,000 |
| Youth Service – equivalent full year costs without rental costs, but including facilities costs | £1,943,000 | £270,500 | | £2,369,298 |
| Safer Stronger Families Service (Core Assets) | | £1,070,000 | | £1,070,000 |
| Young People's Health and Wellbeing Service (Compass) | | £600,000 | £150,000 | £750,000 |
| Health Visiting & FNP | | £5,889,000 | | £5,889,000 |
| School Health Service | | £1,021,000 | | £1,021,000 |
| Perinatal Mental Health Midwife | | | £27,500 | £27,500 |
| Mindful Mums | | | £22,000 | £22,000 |
| | £4,519,000 | £8,899,500 | £224,500 | |

| | | | | |
|--|--|--|--|-------------|
| | | | | £13,643,000 |
|--|--|--|--|-------------|

- 8.2 As a programme of improvement is delivered across the Early Help agenda, value for money and efficiency continue to be key drivers and this does not exclude these services from being considered in the future as having potential for cuts should the council's budget position not significantly ameliorate.

9. **Legal implications**

- 9.1 The legal implications arising are set out in the body of the report.

10. **Crime and disorder implications**

- 10.1 Early help contributes significantly to Lewisham's public health approach to reducing violence, and crime and disorder outcomes more broadly.

11. **Equalities implications**

- 11.1 An EAA is being completed and updated alongside the Early Help Review. From this initial EAA it appears unlikely that the early help review will have a negative impact on the protected characteristics and may lead to improved positive outcomes. However more detailed analysis of and specific service changes following the review will be required and the overarching Early Help EAA will be updated accordingly.

- 11.2 The Early Help EAA will accompany our new Early Help strategy to ensure that equalities issues continue to be positively reflected in the delivery of Lewisham's Early Help approach for children and young people in Lewisham.

- 11.3 The working copy of the EAA is provided in Appendix B

12. **Environmental implications**

- 12.1 There are no environmental implications arising from this report.

APPENDIX B – EQUALITIES ANALYSIS ASSESSMENT FOR REVIEW OF LEWISHAM’S EARLY HELP APPROACH : WORKING DOCUMENT

| EQUALITY ANALYSIS ASSESSMENT (EAA) | |
|---|--|
| Name of Proposal | <ul style="list-style-type: none"> ▪ Review and development of Lewisham’s Early Help Approach |
| Lead Officer | <ul style="list-style-type: none"> ▪ David McCollum (CYP Joint Commissioner – Early Intervention) ▪ Catherine Bunten (CYP Joint Commissioning Service Manager) |
| Other Stakeholders | <ul style="list-style-type: none"> ▪ Lewisham Early Help Board |
| Start Date Of EAA | <ul style="list-style-type: none"> ▪ July 2019 |
| End Date Of EAA | <ul style="list-style-type: none"> ▪ Jan 2021 |
| Step 1: Identify Why You Are Undertaking An Equality Analysis Assessment | |
| <p>The Lewisham Early Help review is part of a longer term vision to ensure that an improved early help strategy and approach is embedded across Lewisham. There were a number of key drivers to the review, informing the scope and activities undertaken, these are set out below:</p> <p>Ensuring value for money</p> <p>Contract cycles for existing services : A number of services that contribute to our existing Early Help offer have contracts that end in March 2020. Planning for future service delivery includes an analysis of need and efficacy and performance of current service provision.</p> <p>Lewisham’s Children’s Social Care Improvement Programme and Ofsted recommendations.</p> <p>Lewisham’s existing Early Help Strategy expires this year.</p> <p>Alignment with other work of the Council and its partners including the 2018/19 NHSE and Member led CAMHS reviews, Lewisham’s public health approach to reducing violence, redesigning local health provision to deliver the NHS long term plan (specifically around prevention and community based care), our improvement programme for Children’s Social Care and implementation of Signs of Safety, our concern hub and contextual safeguarding approaches, and our plans to increase participation and reduce exclusions in school.</p> <p>In response to the drivers noted above, the deliverables from our review include:</p> <ul style="list-style-type: none"> • Establishing council early help budgets on a sustainable footing. • Commissioning intentions for a number of services whose contracts end in March 2020 to ensure continuity. • Recommendations to ensure we have sufficient, high quality Early Help provision to ensure that families receive appropriate and timely support when need is first identified. This means having the right capacity in our system, and the right interventions to meet presenting needs now – and projected for the future. • Recommendations on how to develop mechanisms so that we can better evidence our work, its quality, and the impact this is having. • The publication of a new Early Help Strategy in autumn 2019, setting out how we will ensure that early help is effectively targeted, coordinated, and evaluated. <p>Lewisham’s emerging vision and model for the delivery of our Early Help approach is shown below:</p> | |

Lewisham's Early Help approach sets out how we will work together - children, families, communities, and all services across our Partnership - to achieve the vision of our CYPP. The key purpose of the approach is to maximise positive outcomes for all our children and young people by preventing needs from arising, and where needs are identified, by intervening early and preventing those needs from escalating.

Our aim for Early Help in Lewisham is for children and young people to be resilient, knowing when and where to go for help and support when faced with challenges and adversities as they arise. We will achieve this by working together to build that resilience – not only of children and young people, but crucially of their families, and of the communities and neighbourhoods in which they live.

Predict and Prevent (universal/primary prevention)

CYP, their parents and carers, communities and the workforce are equipped to:

- Identify risks to wellbeing and development and mitigate them
- Identify protective factors in Lewisham and strengthen them

Target & Respond (targeted /secondary prevention/early intervention)

CYP, their parents and carers, communities and the workforce are equipped to:

- Identify and respond to needs that aren't being met
- Target the children, young people and families who need us the most
- Provide timely access and clearer pathways to evidence based support

So that children, young people and their families receive:

- The right support
- At the right time
- In the right place

This EAA considers the effect of potential changes to early help in Lewisham, arising from these four programmes of work (potential changes are detailed in the section below). Analysing whether they are likely to have a positive, neutral or negative impact on different protected characteristics within the local community and identifying mitigating actions to address any disproportionately negative impacts where possible.

Step 2: Identify The Changes To Your Service

Key findings and recommendations relating to service change from the early help review are set out below.

- Families are facing unnecessary delay in accessing support due to rising demand, insufficient capacity and a limited diversity of available service provision. Equally the provision we currently have delivers specific and at times rigid interventions. We have already changed this to increase flexibility, but we need to realign our resources to address our waiting list and provide more responsive support to our children and families – moving away from a high focus on parenting support to more varied provision to meet the individual and contextual needs of our children and families.
- We also need to reconfigure relevant council teams to provide strategic ownership and oversight of the early help offer to improve co-ordination, signposting of pathways and our ability to meet new and emerging needs.
- Knowledge about the services available is not widely understood across the workforce, and needs to be strengthened
- Pathways /step up and step down from and to social care is not clear, and there is confusion about terminology and thresholds. This should be addressed with the publication of a new Early Help strategy in the Autumn.
- There is a tendency to refer/ a referral culture in the partnership and we need to provide more support to the partnership to understand thresholds, and build confidence and capacity in being a lead professional
- We need to improve how we engage and co-design our early help approach with young people by establishing governance and operational mechanisms to ensure embedded and ongoing co-production, co-design and co-ownership.

Designing our Offer and implementing Change

An Early Help service offer includes the provision of information, advice and support. Whilst recognising that an effective Early Help offer is a ‘whole system’ approach involving services across the Children’s Partnership – and beyond, there are a number of services that are commissioned by the CYP directorate and are directly involved in delivering improved outcomes for our children and young people and that form a core part of any Early Help delivery model. These services need further development to improve impact and better respond to changing need and demand and include:

- Youth Services
- Targeted Family Support Services
- Children and Family Centres
- Health Visiting
- School Health Service
- Young People’s Health and Wellbeing Service

Step 3: Assessment Of Data And Research

As part of the EAA process, a scoping exercise has been undertaken to assess the impact that the anticipated changes described above may have on the eight protected characteristics. Proposals are categorised by the potential ‘positive, negative or neutral’ impact they may have on users and the outcome is summarised in the grid below. Where a separate EAA has been (or is being) produced to provide a more detailed assessment of the impact of a change this is highlighted in the comments section of the grid.

| Proposed change | Age | Disability | Ethnicity | Gender | Sexual Orientation | Religion or Belief | Gender Reassignment | Pregnancy & Maternity | Comments |
|--|------------|-------------------|------------------|---------------|---------------------------|---------------------------|----------------------------|----------------------------------|---|
| Developing a clearer understanding of need | Positive | Positive | Positive | Positive | Positive | Positive | Positive | Positive | Improving understanding of the needs our young people and families face, and identifying gaps in provision should have a positive outcome for all protected characteristics, as this will shape service development. Its important that the needs analysis fully reflects and considers protected characteristics , and that this is an iterative process. The early help needs assessment is currently being shaped and revised. |
| Develop a ‘whole system’ approach to early help including developing wider partnerships. | Unknown | Unknown | Unknown | Unknown | Unknown | Unknown | Unknown | Unknown | The better the information sharing, pathways, and partner understanding of early help, the greater the opportunity to provide an improved offer for all protected characteristics, this process will take time and forms part of the longer vision of the early help approach |

| | | | | | | | | | |
|---|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|--|
| | | | | | | | | | |
| Potential changes to Youth Service specification and delivery model | Neutral | Proposals for future development of the youth service are currently being prepared. A separate EAA is being produced to consider the full change and options for youth services. However we don't currently anticipate any negative equalities impacts from a service redesign, and a focus on high quality provision and support for all young people aged 8-19 (25 with additional needs) will remain the priority. Its likely that through development of a more targeted offer we can also have a positive impact for some of the protected characteristics. Any reduction in funding is likely to reduce or change provision overall, though this should not impact on any one protected characteristic more than others. |

| | | | | | | | | | |
|--|---------|---------|---------|---------|---------|---------|---------|---------|---|
| | | | | | | | | | |
| Potential changes to targeted family support offer | Neutral | Through review and analysis we have recognised the need to develop a more flexible targeted family support offer. Moving away from a high focus on parenting support to more varied provision that can meet the individual and contextual needs of our children and families. Changes to our model and delivery will include a full insourcing assessment and final decisions on service specification. It is possible that any amendments to the current offer may have a positive and/or negative impact on some of the protected characteristics and a separate EAA will be developed for our revised family support offer. However it is currently considered unlikely that the changes will have a negative impact on the protected characteristics, and by adding flexibility to our offer we will likely have a positive impact for some of the protected characteristics by enhancing reach and accessibility where possible. |

| | | | | | | | | | | |
|--|--|---------|---------|---------|---------|---------|---------|---------|---|--|
| | Potential changes to Lewsham Children and Family Centre Offer. | Neutral | It is possible that any amendments to the CFC offer may have a positive and/or negative impact on some of the protected characteristics and a separate EAA will be developed for our CFC offer. However it is currently considered unlikely that the changes will have a negative impact on the protected characteristics, and by reviewing our offer based on our needs assessment and service analysis we will likely have a positive impact for some of the protected characteristics by enhancing reach and accessibility where possible. | |
| | Potential changes to health visiting and school health service | Neutral | It is possible that any amendments to the current offer may have a positive and/or negative impact on some of the protected characteristics and a separate EAA will be developed for our School Health and Health Visiting Service. However it is currently considered unlikely that the changes will have a negative impact on the protected characteristics, and by reviewing our offer based on our needs assessment and service analysis we will likely have a positive impact for some of the protected characteristics by enhancing reach, accessibility and pathways where possible. | |

| | | | | | | | | | |
|---|---------|---------|---------|---------|---------|---------|---------|---------|---|
| Young People's Health and Wellbeing Service | Neutral | It is possible that amendments to the service offer may have a positive and/or negative impact on some of the protected characteristics. A separate EAA will be developed for our Young People's Health and Wellbeing Service. |
| Evidencing our Impact | Unknown | Being better able to evidence our impact is vital if we are to continue to improve understanding of the needs our young people and families face, and better identify gaps in provision. Evidencing our impact well should have a positive outcome for all protected characteristics, as this will shape service development. Its important that our evidence based and impact measures fully reflect and consider protected characteristics , and that this is an iterative process. Work is currently being undertaken to track, assess and improve all relevant impact measures and forms part of a long term vision to improve and standardise our evidence base. |

From this initial scoping exercise, it appears unlikely that the early help review will have a negative impact on the protected characteristics and may lead to improved positive outcomes. However more detailed analysis of the specific service changes is required and these will be developed for each service as appropriate, and this overarching early help EAA will be updated accordingly. To support this EAA local and national data for the protected characteristics has been analysed below, its important to note that early help can impact across a wide range of areas and individuals (young people, parents and the wider community), and our services and partners don't currently all record data in the same way which can make data analysis against the protected characteristic challenging:

Population

Lewisham is the 13th largest borough in London by population size and the 5th largest in Inner London - census (2011) when the borough's population was 277,500 people. In 2018 the borough's population was 307,000 which is nearly a 10% increase and the projection is for the population to continue to grow, by the time of the 2021 Census it is expected to reach 323,000 and climb to 357,000 by the time of the 2031 Census. Source: Greater London Authority, 2017

Population Growth is through a combination of the number of births exceeding the number of deaths and international migration, people moving to the borough from overseas. Lewisham has a young population bias, the proportion aged 0-4 population is notably higher than the national average.

Growth is not evenly distributed around the borough with much more expected in the north and east of the borough due to planned development with a younger population growth expected in the north of the borough.

Lewisham is home to residents of more than 75 nationalities, there are 23,000 EU nationals with nearly half from Ireland, Italy, Poland and France. The population is predicted to continue to diversify as it grows over the coming decades, between 2015 and 2017 the fastest growing nationality on Lewisham's Electoral Roll (by volume) was Italian (up 750 over the period), followed by Romanian (up 640), Irish (up 458) and Portuguese (up 378). Over the same period, Italian replaced Jamaican as the third most numerous non-British nationality, Polish is the fourth most numerous and Jamaican is now the fifth most numerous. Romanian has replaced Portuguese as the eighth most numerous non-British nationality and Portuguese has replaced German as the ninth most numerous non-British nationality in the borough.

Pregnancy and Maternity

In 2018/19 there were:

- 3647 births (women)
- 3712 births (babies)

This is live births at Lewisham hospital. 80% will be Lewisham residents, but some Lewisham women give birth elsewhere.

Low birthweight births have decreased significantly and Lewisham is now lower than the London average, at 7.3% of all births.

Language

Residents whose first language is not English are concentrated in the north of the borough as well as Lewisham Central ward, where most of the new housing developments are taking place. The School Language Census taken in Summer 2017, showed over 160 languages are spoken by Lewisham pupils.

Disability

10% of school age children in Lewisham suffer from a diagnosable mental health illness, which is in line with the national average. The most common problems are conduct disorders, attention deficit hyperactivity disorder (ADHD), emotional disorders (anxiety and depression) and autism spectrum disorders (ASD)²
8,000 households with dependent children where at least one person has a long term health condition or disability

Age

There are approximately 68,000 (22.7%) children and young people aged 0 to 17 years, of which 22,000 (32%) are aged 0 to 4. There are significantly more children under 18 than there are adults over the age of 60. In total there 100,800 children and young people aged 0-25, (33%) a third of the borough population.

There has been an overall increase in the population of children in the borough since 2011 (7.3%). The number of 5 to 9 year olds has increased by 20.5% in this time period. The number of 5 to 9 year olds is set to fall slightly with a 1% reduction by 2023.

The number of 10 to 14 year olds is expected to grow by 9.3% from 17,600 to 19,200 in 2023. The number of 15 to 19 year olds is also expected to grow from 14,800 to 17,100 by 2023.

Over half of all mental health problems (excluding dementia) are established by the age of fourteen and 75% by the age of 18-20. The life chances of these individuals are significantly reduced in terms of their physical health, their educational and work prospects and their chances of committing a crime³. However, 70% of children and adolescents who experience mental ill health have not had appropriate interventions at a sufficiently early age⁴

Gender

The gender split in the borough is consistent across all age groups.

In England as a whole, women are more likely than men to have a common mental health problem and are almost twice as likely to be diagnosed with anxiety disorders⁵

We know women are disproportionately affected by domestic abuse and sexual abuse

Boys and young men are more likely to be in criminal justice

Ethnicity

² Lewisham Child & Teenage Health Profile 2015

³ 'Future In Mind', NHS England (2015)

⁴ The Children's Society (2008)

⁵ Mental Health Foundation (www.mentalhealth.org.uk)

The ethnic profile of Lewisham residents is forecast to change up to 2050. By 2028 it is forecast that the White and BAME population will be 50/50 and subsequently the BAME population is predicted to exceed the White population.

However for young people the ethnic proportions are and will continue to be quite different. The percentage of 0-19s of BAME heritage has remained at or marginally above 65% since 2011. By 2031 the proportion of BAME residents aged 0-19 is projected to reach 67%.

In general, people from black and minority ethnic groups living in the UK are more likely to be diagnosed with mental health problems, more likely to experience a poor outcome from treatment and more likely to disengage from mainstream mental health services, leading to social exclusion and deterioration in their mental health⁶

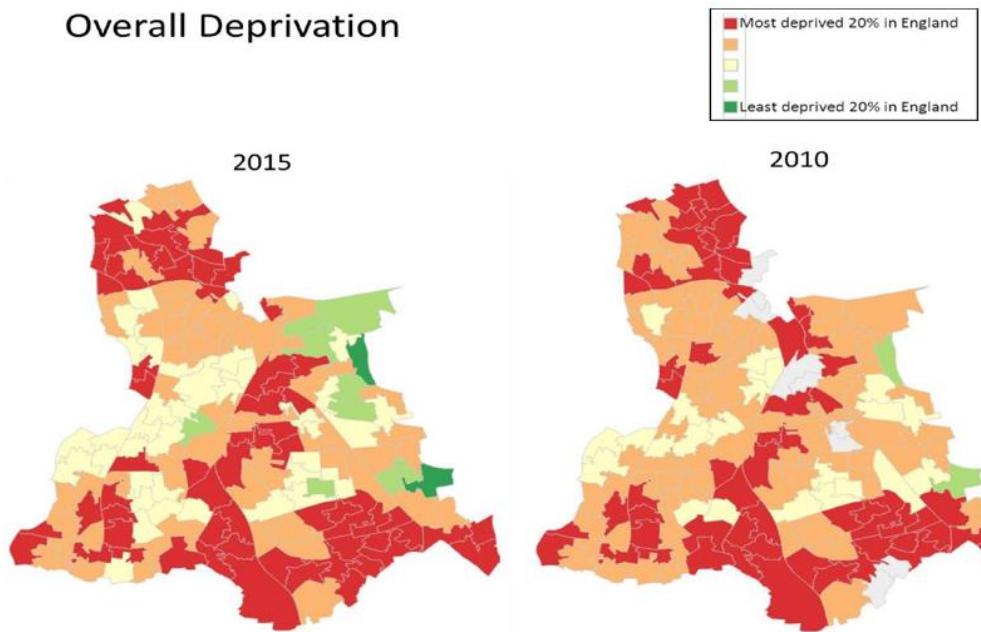
Socio-Economic Factors

Deprivation

The 2015 Index of Multiple Deprivation ranked Lewisham 38th out of 354 local authorities (LAs) in England compared to a rank of 31 in 2010. Large numbers of children and young people are affected by deprivation in the borough but the variation per ward is quite different. On the specific indicator of income deprivation affecting children, 32 out of 169 of Lewisham's super output areas are in the 10% most deprived in the country. This equates to approximately 19% of children.

⁶ Mental Health Foundation (www.mentalhealth.org.uk)

Overall Deprivation



Source: Indices for Multiple Deprivation, 2015

Concentrations of deprivation in the north and south of the borough remain comparatively high with more income deprived children living in Evelyn ward than Crofton Park, Blackheath and Lee Green wards combined.

Key factors from data assessment

Population growth will have an impact on demand for services and capacity, which may reduce the ability of the early help approach to respond effectively to the needs of protected characteristics.

If growth is higher, as expected in the North and East of the borough, this could equally impact on capacity, and/or lead to reduced focus on other areas of the borough.

A younger population will impact on the protected age characteristic – but it can't be determined at this stage if this will have a positive or negative impact. An increasingly younger population will mean an increased pressure on our current provision, but also increases opportunity for engagement and aspirational peer support.

Increasing diversity and changes in the currently most numerous nationalities in the borough, may impact on the ethnicity and religion or belief characteristic and services will need to be able to respond to and communicate with changing demographics. This has potential impact on engagement styles and interventions, particularly with regards to language. Delivering interventions in other languages can be costly and will need to be better embedded and considered in any future service changes.

More work would need to be done to explore if its possible to track and engage with Lewisham residents who give birth outside of the borough to ensure they are fully aware of support opportunities available in the borough.

We have limited data on disability amongst children, young people and parents and its clearly important that we do more to explore this gap. Without a full understanding of need it is difficult to ensure that services are responding effectively for those impacted by this protected characteristic. We do however have more information on mental health needs amongst young people and the potential negative outcomes these can cause. Increased awareness and understanding should allow us to improve pathways and increase support for young people and families.

There is clear disproportionality in gender and ethnicity, both in terms of risk/needs and negative bias. We are increasingly aware of the role of unconscious bias and its vital that all partners involved in the early help approach are supported to understand and respond to this to help address this disproportionality and build confidence within these protected characteristics and communities more widely.

Poverty and deprivation can play an enormous and negative role in children and families lives. A core part of the new early help approach and vision is to consider the wider determinants such as debt, housing and employment that can reduce the efficacy of early help interventions and explore how we can reduce the negative impact that poverty can cause for families – this is however an enormous task and not one that can be achieved by CYP in isolation. Its equally important that we are aware of hidden inequalities within more ‘affluent’ wards and that provision is accessible to those who most need it.

Step 4: Consultation

What did we do?

In March 2019 two early help partnership engagement events were held at TNG youth club and a further abridged workshop was held at the VAL CYP Forum at Sommerville Youth Centre. The two events at TNG were independently facilitated to encourage maximum participation and unbiased reflection.

The purpose of the events was to:

- To start the process of reviewing Lewisham’s early help offer, in order to further identify need and understand gaps in provision
- To listen to the partners and experts that work with Lewisham children and families every day
- To inform and shape next steps in the review.

The workshops explored the following questions:

- What should early help mean in Lewisham?
- What are the greatest areas of need for children in Lewisham?
- What are the key elements of an effective Early Help offer?
 - What are the potential gaps and pitfalls to avoid?
 - What would you do to address them?

Over 60 partners attended the two events at TNG and 35 at the VAL Forum.

In addition, a regular monthly meeting with the Young Mayor's team is in place, alongside ongoing quarterly visits to the young mayors advisors sessions.

An independant co-production specialist was also recently engaged in consultaion with community representatives, and service users of the Evelyn childrens centre to consider and understand barriers to access in the area.

A recent Peer Review co-ordintaed by the borough of Greenwich met parents and young people who have engaged in our early help services.

The Joint Commissioner for Early Intervention regularly attends visits and events with CYP and families delivered by our our early help partners to capture views of service users and shape service development, this has included Youth First sessions, Health Visit home visits, FNP home visits, Compass engagement assemblies and events, breastfeeding support group and Baby Hubs, Roots of Empathy session in schools, survivor of domestic abuse aspirational event, SEND specific focus groups, consistent attendance at early help panel and concern hub.

The greatest priority areas identified by our partners are shown in the image below, with those in bold considered the highest priorities.

- **Poverty**
- Financial exclusion
- Emotional resilience
- Chaotic lifestyles/lack of stability
- Contextual safeguarding
- Its takes a village
- Civic pride
- **Housing (poor housing/ temporary housing/ homelessness/ security)**
- Parenting (parental mental health and parenting skills)
- Substance misuse (parents and YP)
- **Domestic abuse**
- **Mental health**
- Young carers
- Exploitation (CSE, SEND, Grooming, violence)
- Social media (safe use/ positive use/ professionals understanding)
- Cycle of low aspiration/ opportunity
- Access to childcare
- Self-harm
- Exclusion from school
- SEND
- Adequate pathways
- Encouraging health lifestyles
- Community cohesion
- Organised crime
- **Building clear pathways**
- **Feeling safe**
- Food poverty (including obesity)
- Language of professionals
- Positive peer groups
- Perception of being unsafe

We recognise that we need to do more to capture the voice of children, young people and families and a core element of the early help review is improving this. A key aim is to implement a youth engagement guarantee and a clear programme of ongoing engagement and consultation tools and processes.

A wide variety of co-production work was undertaken as part of Lewisham's Head Start Campaign in 2016, which remains relevant to this EAA

Step 5: Impact Assessment

This Equality Analysis Assessment has been undertaken to ensure that in delivering and developing an early help approach in Lewisham the Council has met its responsibilities under the Equality Act 2010, specifically:

- To eliminate unlawful discrimination, harassment and victimisation.
- To advance equality of opportunity between people from different groups.
- To foster good relations between people from different groups.

The assessment of the likely impact of the review on the nine protected characteristics identified in the Equality Act 2010 has been based on an analysis of available data (both direct and indirect), research and findings from consultation activity.

Step 6: Decision/Result

From this initial EAA it appears unlikely that the early help review will have a negative impact on the protected characteristics and may lead to improved positive outcomes. However more detailed analysis of the specific service changes is required and these will be developed for each service as appropriate, and this overarching early help EAA will be updated accordingly.

However, this decision will be reviewed regularly over the next two years to ensure that equalities issues continue to be positively reflected in the delivery of Lewisham's Early Help approach for children and young people in Lewisham.

Step 7: Equality Analysis Action Plan

This plan (see below) has been developed to provide a clear framework for any mitigating actions identified in the above assessment. It will be reviewed every quarter to track progress, with an evaluation of the changes being undertaken annually to measure whether they have had their intended effect/outcomes.

Step 8: Sign Off

As part of the report process for Mayor & Cabinet, this EAA will be reviewed and signed-off by the Executive Director for Children & Young People.

| Equalities Analysis Action Plan | | | | |
|--|---|----------------|------------------------------|--------------------------|
| Issue | Actions To Be Taken | Lead Officer | Timescale For Implementation | Timescale For Completion |
| Early Help Needs Analysis will remain ongoing | <ul style="list-style-type: none"> ▪ Ensure that equalities data for all relevant protected characteristics is collected and regularly updated | David McCollum | 1 April 2020 | Ongoing |
| Individual EAA's must be produced for each individual service | <ul style="list-style-type: none"> ▪ Update EAA as individual assessments completed | David McCollum | 1 April 2020 | Ongoing |
| Ensure new specification records and collects full data on protected characteristics to inform EAA and service development | <ul style="list-style-type: none"> ▪ Embed EAA requirements within all new specifications | David McCollum | 1 April 2020 | Ongoing |