## WIRRAL CHILDREN'S TRUST BOARD - Tuesday 15th July 2014

#### **IFIP Interim Evaluation**

#### 1.0 Background

IFIP (Intensive Family Intervention Programme) is Wirral's local response to the national Troubled Families initiative. Delivery commenced in November 2012 and by March 2015 910 families identified against the government criteria will have been worked with to improve school attendance, reduce crime and anti-social behaviour, and support parents into employment.

#### 2.0 Interim Evaluation

Following 18 months of project delivery an interim evaluation of IFIP has been completed. The evaluation considers 4 case studies, reflections from practitioners and families, and identifies the aspects of the programme which are having the greatest impact. Within the evaluation is data relating to outcomes and performance information. Learning from the evaluation will continue to be embedded into services across the Children and Young People's Department.

#### 3.0 Recommendations

The Children's Trust Board notes the learning emerging from the evaluation and considers how it will be disseminated across the partnership to inform practice and improve joint working.

Report Author: Elizabeth Hartley, IFIP Programme Leader

Contact: elizabethhartley@wirral.gov.uk

Appendices: IFIP Interim Evaluation pdf

# INTENSIVE FAMILY INTERVENTION PROGRAMME



## Interim Evaluation of the Intensive Family Intervention Programme (IFIP)

IFIP is Wirral's local response to the national Troubled Families initiative. Launched in October 2012, the programme works with families from across the borough to improve school attendance, reduce anti-social behaviour and youth crime, and increase the number of adults entering employment. It is a payment by results programme which seeks to turn around the lives of some of our most vulnerable families. Delivered in collaboration with Catch 22, Home-Start Wirral, and the Local Authority's Children's Services (CYPD), the model promotes a partnership approach with colleagues from a range of key services seconded onto the programme team.

Key drivers of the national initiative are to tackle intergenerational worklessness, reliance on public services and the high cost to the public purse these families generate. Research into the cost of supporting Troubled Families shows that they cost approximately £75k each per year.

Beyond the costs which can be measured in financial terms are the human costs: the cost to family life, children's futures and to local communities. The value in helping a family turn their lives around, and giving them the skills to sustain those changes, will have further reaching benefits than balanced budget sheets.

In Wirral we have identified the families eligible for the programme against the government criteria, and report our results in the same manner, however, we recognise that the criteria often relate only to symptoms of more complex issues. Using a holistic approach with the whole family, and with the commitment of our multi—agency partners, we aim to promote independence and raise the aspirations of our most vulnerable families.

Family breakdown Small networks

Domestic Abuse Low expectation

Teenage pregnancy Self-medication

Anti-social behaviour Fear

Mental Health Apathy

Isolation Debt

Substance Misuse Lack of education

Illness Learning Difficulties

Fig 1: Issues faced by IFIP Families

## Believe in the possibility that things can be different

Any change process is difficult, and turning around the lives of families may be one of the most difficult to achieve.

Meaningful change requires psychological, physical and emotional commitment as well as a long, testing journey. For some of our families, where there are intergenerational issues, family members may never have known anything different and some even struggle to comprehend that there are issues to be faced. Others want their lives to be different but can't imagine how that could be possible and don't know where to begin. IFIP aims to give these families the opportunity to experience a different family life.

Uneducated Poor

Excluded Resigned

Isolated Unworthy

Disliked Lacking

Stuck Marked

Desperate Labelled

Fig 2: Families' Self-perceptions

"I think of my role as trying to move families forward so that they can turn around their own lives. Turning their lives around takes a long time. What I do is plant a seed, show them what they are capable of doing." IFIP Key Worker

Using family case studies (names have been changed), practitioners' reflections and key data sets, this report seeks to demonstrate that meaningful change can occur for Wirral families when we believe in the possibility that things can be different.

## Will's Story...see me differently

Will is 15 years old and with his mother. His father, who is diagnosed with schizophrenia, has moved out of the family home but keeps in regular contact. Will was missing from education and concerns were growing about his involvement in anti-social behaviour through associations with an older group of friends.

Agencies Involved:

IFIP Team
Social Housing Provider
Pupil Referral Unit
Tranmere Community Project
Rocket Training/ Basetech
Youth Service Art Centre
GP
IFIP Police Secondee

#### THE ISSUES:

School attendance- Will's school attendance had been below 85% for 3 years. At the beginning of the academic term he had been moved to a Pupil Referral Unit, which after 2 months he hadn't attended.

Family health problems- Will is medicated for ADHD. His mother has mobility problems and finds it difficult to walk short distances. In addition to schizophrenia, Will's father suffers with Gulf War Syndrome. Their different conditions contributed to their sense of isolation.

Anti-social behaviour- Missing school left Will with a lack of structure to his week and concerns grew about his behaviour in the community.

Will's family were worried about the influence the group were having on him but felt powerless to tackle it. Will had become known to the Anti-Social Behaviour Team.

At home- The family are tenants with a social housing provider. Their property was in need of refurbishment and despite numerous attempts by the provider to inspect the property and make arrangements for repairs mother would not engage or give them access to the house. Mother's inability to meet or work with services was contributing to the barriers and isolation the family faced.

## The hook...not giving up on Will was the key to helping him turn his life around. Dad wasn't ready to give up on him and neither was his Key Worker.

#### WHAT WAS DONE:

Engagement- The Key Worker's first priority was to establish engagement with Will and his family. Knowing that Will's mother had avoided contact with services over several years, the Key Worker took a persistent and consistent approach.

Education- The Key Worker acted on behalf of the Attendance Officer.

Working in close contact he negotiated a placement with an alternative education provider on Will's behalf. Initially the Key Worker met with Will everyday at his placement to ensure he participated. Over time they began planning how Will's education would continue.

Anti-social behaviour- Breaking links with the group involved in antisocial behaviour was vital to Will's progress therefore the Family Plan involved participation in local youth groups.

Relationships- Understanding the importance of the relationship between Will and his father, the Key Worker ensured that dad was an integral part of the plan and meetings.

Housing improvements- With mother's permission the Key Worker coordinated the inspection and supported mother to manage the arrangements for refurbishment.

#### THE OUTCOME:

Education: Will's attendance at the alternative education provider was consistently over 85%. Will has now commenced a 2 year apprenticeship as a Motor Vehicle Technician.

Positive Engagement: Will regularly attends a local arts centre run by the Youth Service and there have been no further concerns about his associations or involvement in anti-social behaviour.

Improved home conditions: Improvements have been made to the family home, including new doors and windows, and mother is more confident in engaging with the housing provider. Will's mother has gained a lot from this experience and is more able to deal with problems when they arise.

Relationships: Will's father continues to play an active and positive role in his life. The Family Meetings gave dad the opportunity to positively reinforce the progress Will has made in taking control of his future.

"Mum has said I always look at the positives with Will, no matter what the situation." Will's Key Worker

## Reflections on the role of the Key Worker

One of the key learning point from Will's Story, and a feature of most IFIP cases, is a history of non-engagement with services. Will's mother would not engage with her housing provider and after 3 years of pursuit by the Attendance Officer, there had only been one face-to-face contact. Gaining and maintaining meaningful engagement is vital to helping families turn their lives around. IFIP Key Workers have reflected on how this is best achieved:

"Make yourself useful."

"Be persistent...let them know you're not going to abandon them."

"Sometimes you need to be ready to interrupt their cycle of crises."

"Listen to them. Families feel everything is against them, even within their own family. They feel like there's nothing out there for them."

"Explain things to families without jargon. Sometimes the most useful thing I can do is help families navigate their way through services, so that they understand in plain language."

"Keep the momentum going."

"Help them have a voice. Let them experience something different."

"Families need to believe in the services they are offered. A lot of the time they think they have tried it already. Sometimes it's easier for families to stick to what they know and the minute you let them down you lose them."

- •Intensive and flexible support is provided. Some families need to have contact with their Key Worker several times per week and often outside of normal office hours. To achieve this it is essential that caseloads are small (5-7 families)
- Interventions are co-ordinated by a single Key Worker. Families often disengage from support when they are overwhelmed with the number of professionals, assessments and plans they face. A lead Key Worker can coordinate multi-agency work in a manner which is more accessible for families.
- Trust is established through open and honest conversations.
  For families to change their lives they need to understand the consequences, both positive and negative, of their behaviour. This requires honesty and openness, using language that families understand and being consistent.

## The Barrett Family's Story...see families differently

At 21 years old, Kerry found herself at crisis point. A single mother to two boys aged 4 and 5, she became special guardian to her brother (15) and sister (13) following the deaths of both their parents from alcohol-related illness within a year of each other. A recommendation for care proceedings had been made.

#### Agencies Involved:

IFIP Team
Children's Social Care
Youth Inclusion Project
Children's Centre
National Citizen Service Co-ordinator
Housing Provider
Youth Offending Service
Education
Child Sexual Exploitation Service
Property Pool Plus

#### THE ISSUES:

Family History- the household Kerry grew up in was neglectful. Both parents were alcoholics and Children's Services had had a lot of involvement with the family. Unfortunately Kerry remembers this as a negative experience and had become reluctant to engage with services.

School attendance- all children had an average school attendance of approximately 60%.

Kerry had not been a regular school attender and had left without any qualifications. When the children did attend school there were numerous difficulties in managing their behaviour.

Anti-social behaviour and crime- reports of anti-social behaviour at the property were common. This included inappropriate callers, parties, disrepair, and noise nuisance at night, leading the landlord to serve notice to quit. Kerry's sister had received a conviction for arson and her relationships with older men raised concerns that she was at risk of sexual exploitation.

At home- housing conditions were poor, with limited furniture and unsightly rubbish at the front and back. With no routines or boundaries the household was often chaotic.

Kerry had no support network and her peers were a negative influence.

Parenting capacity- Kerry's own childhood experience was poor. Pregnant at 15 she found herself in a violent relationship which eventually she managed to escape. Now she found herself struggling to manage the dynamics between being a sister, a mum and her own self.

## The hook...understanding what this family had been through, what everyday life was like for them and helping them to overcome their fears was the key to turning their family life around

#### WHAT WAS DONE:

Understanding the family: The Key Worker recognised that the circumstances of this family were different and that their experiences and fears were overwhelming them. Time was spent by the Key Worker everyday at the home, experiencing early mornings and bedtime visits, talking and listening with all members of the family.

Parenting- Kerry was supported to complete a parenting course in her local Children's

Centre. This was complemented by 1:1 parenting in the home from her Key

Worker. Hands on support to put theory into practice enabled Kerry to

manage routines and create 'home rules' with the family.

Housing- An Acceptable Behaviour Contract was implemented by the landlord rather than evict. The ABC contract was reviewed by Kerry and her Key Worker everyday as part of their Family Plan. Various charities were accessed to improve the home conditions and communal areas.

Joint Working- The Key Worker supported Kerry to understand and comply with YOS and Children's Social Care, helping her to fulfil the Contract of Expectations and Risk and Vulnerability plans.

Self-esteem- Kerry undertook adult learning classes in basic literacy, numeracy and IT.

Practical cooking sessions and budget planning in the home helped increase her confidence as a parent. A referral was made to the ESF Work Programme to support Kerry in considering her own future path.

#### THE OUTCOME:

School attendance: Attendance for all children has increased to over 85% and the concerns re their behaviour in school have significantly reduced.

Crime and anti-social behaviour: The housing ABC was complied with and has since expired. No further reports of anti-social behaviour have been made and Kerry now feels she is on 'friendly' terms with the neighbours. Kerry's sister has successfully completed her referral order and has found new interests in creative arts.

Parenting capacity: The improvements Kerry has made in parenting have had a far reaching effect on all aspects of family life. Children's Social Care are no longer involved with the family. Kerry is linked with a volunteer and will receive further low level support to help maintain positive changes.

The future: Kerry's brother has enrolled on the National Citizen Service and is making plans for college life. Kerry gained work-ready skills through the ESF Work Programme and is now employed with Allied Health Care.

"Previously people had focussed on the children, not on the family or Kerry as their carer. Now Kerry is proving to be a positive role model for them all." Kerry's Key Worker

## Reflections on the approach

The Barrett Family's case study highlights the importance of understanding dynamics in any family home. The concept of 'family' has evolved over past decades and while we all recognise that traditional concepts are no longer prevalent, there is a marked difference between mapping out a family tree and understanding how the family functions. IFIP Key Workers reflect on the importance of listening skills, empathy and understanding the motivations and conflicting forces within families.

"Get in the boat with them."

"They don't want to be told what their lives should look like, it's our job to find out what they want their life to be like."

"Spend time with them. Families get battered down by their own issues."

"I often think, 'how would I feel in their shoes?"

"Sometimes their lives are so chaotic they can't see a way out. How does that feel?"

"Often the ones facing sanctions have buried their heads in the sand furthest."

"Be there at the right times of the day, the times when things are hardest. When you can experience that then you're in a better position to help them."

"Your issues and their issues may not be the same, but we have to treat them equally."

- •Practical, 'hands on' support is provided to help parents make positive changes. Sometimes the task is just too big for one person to face, or a new skill is easier to understand when it has been demonstrated. Working side-by-side with parents can achieve powerful results and foster better relationships.
- Plan for lots of small steps and celebrate the small wins as well as the big ones. Families make better progress where big tasks are divided into smaller, more achievable ones. Small positives open the door for further work and help foster more genuine engagement.
- Good quality reflective supervision is vital. Working flexibly, creatively and safely is achieved through regular supervision where the supervisor, like the practitioner, has a small caseload. It's not just the families who need to recognise the small steps, supervision helps Key Workers recognise where progress is being made and how to build on it.

## Vicki's Story...see parents differently

Vicki is 42, lives in Seacombe and is a single parent to 10 children aged between 2 and 20 years. Vicki was facing eviction, investigation for benefit fraud and about to face one of the highest benefit cap amounts in the borough. One of her children had voluntarily moved into foster care and the seven others still living at home were being referred to Children's Social Care for neglect. Vicki and her family had been known to Children's Services for 18 years.

Agencies Involved:

IFIP Team
IFIP Job Centre+ Seconder
Housing Providers
Tomorrow's Women
NACRO
Children's Centre
Health Visitor
Schools
GP

#### THE ISSUES:

Eviction- Vicki had fallen into rent arrears. Her limited capacity to maintain the decoration of her large house, to repair 'wear and tear' damage to the interior, to clear out the rubbish from the exterior and maintain the front garden meant that the home living conditions were poor. Her landlord had initiated eviction procedures.

Financial crisis- Vicki had not been employed during her adult life. She was being investigated for benefit fraud and the implementation of benefit cap would reduce her income by £650 per X. Vicki was avoiding all contact with DWP and could not see any means by which to keep providing for her children.

Family Health- Several of Vicki's children are diagnosed with conditions such as ADHD and epilepsy. Professionals were concerned about her youngest child being obese and that her development was impeded through lack of social interaction. Vicki too had poor general health and reported low moods and anxiety.

Isolation- Vicki and her children lived a confined life at home. The children reported that they often faced bullying, and 3 of the children had recently moved school because of this. Vicki too spoke about the taunting they faced in their own community and neighbourhood.

Childcare concerns- At various stages over the last 18 years, Vicki's children have been involved in Child in Need, Child Protection and legal proceedings. At the point of referral one child was subject a Team Around the Child intervention which was proving ineffective. Professionals doubted Vicki's capacity to meet the wide needs of her children and so referred the children to Social Care.

## The hook...recognising that this woman, who was bringing up ten children, was actually very resourceful and skilled... then getting her to see that in herself.

#### WHAT WAS DONE:

Housing- The locally agreed Strategy for Sanctions was implemented placing a 3 month hold on eviction procedures. An immediate action plan was implemented to address the tenancy issues.

Intensive Support- An IFIP Key Worker was assigned to the family with the flexibility and capacity to provide daily support to Vicki and her children. Practical activities were completed in the home and community based services accessed to assist.

Financial position- The IFIP Job Centre+ Secondee worked closely with Vicki to enable her to address her financial position. Meetings were held with Job Centre+ and plans out in place. As part of that plan Vicki's employment and training opportunities were considered as a priority.

Health and development needs- Support was provided to help Vicki manage and attend health appointments for the children. Vicki registered with her local Children's Centre and was able to access a funded nursery place for her 2 year old.

Time- A considerable amount of time was spent supporting Vicki at home and engaging with all children in the family. Understanding their needs and ensuring that their voice could be heard was resource intensive. The older children were supported to consider their employment and training opportunities.

#### THE OUTCOME:

Care- The child who had voluntarily entered foster care has returned home and is attending college. She hopes to become a dance teacher for children with SEN. Children's Social Care have had no further contact with the family.

Education- All children have school attendance above 90%. The youngest child is in nursery and has made significant developmental progress.

Housing- The family have moved to a smaller, more affordable property and there have been no issues regarding their tenancy.

Finances- The rent arrears and investigation for benefit fraud have been resolved and Vicki is managing her weekly budget. Vicki is now self-employed. Supported through NEA, Vicki has harnessed her talents for knitting, crocheting and dressmaking to set up her own small business. The family have a higher income than when they were benefit reliant.

Health- Vicki is managing the health of all her children and reports that her own mental health has improved.

"I want a better life for my children." Vicki

## Reflections on partnership working

Vicki's Story demonstrates how taking an asset-based approach, seeing the potential for change and putting support from the right people at the right time can enable enormous transformation to take place. After 18 years of involvement with services Vicki was known to a vast number of professionals, and it is understandable that the majority of them would not have predicted that she would be self-employed and managing her family life within a year. Likewise, Vicki herself would not have predicted it either. Practitioners have reflected on the importance of perceptions, labels and taking a non-judgemental approach.

"Find the hook. There's always something a family does well which can be built on."

"Sometimes there's apathy from agencies who feel like they've tried everything and bent over backwards and we need to cajole them as well, to get them to work with us on a fresh approach."

"Challenge their perceptions of themselves. Show them what they do well. They're not used to thinking that they've achieved."

"Challenge other professionals to think, 'this time something we do has to be different'."

"Make sure all the other agencies involved know about the positive steps that a family make. I've not gone as far as starting a family newsletter, yet, but sometimes we're the only defender of the family and I need to constantly tell other people what they've achieved."

"Be ready to challenge perceptions, from everyone."

- •Multi agency services work flexibly together. Bringing partnership agencies together to deliver the model is key. This brings agency expertise to the family in a meaningful way and enables targeted interventions to be delivered to the most vulnerable cohorts.
- Employment, training and learning are on the agenda from day 1. Seeing parents as more than care givers in the home is a cultural change within the service which is beginning to be fruitful. We are now recognising the positive impact on parenting through the soft-outcomes of employment such as improved mental health, self-esteem, and financial status.
- Taking a joint approach to the implementation of sanctions. At times families will face the prospect of a sanction. Agencies need to work together to ensure that Family Intervention is considered as early as possible in order to avoid the sanction. The timing of this is key to its success.

## Tracy's Story...see life differently

At 26 years old Tracy's life had been marked with trauma which had a detrimental effect on her mental health and ability to be a mum to her two girls aged 8 and 3. Tracy was unemployed, struggling to establish any kind of routine and feeling very withdrawn. At the point of referral the children were subject to a Child Protection Plan.

#### Agencies Involved

IFIP Team GP Primary School Family Safety Unity-IDVA Service Housing Providers Children's Centre Health Visiting Service Children's Social Care

#### THE ISSUES:

Domestic violence- Tracy had suffered domestic violence from the fathers of both children. This cycle of violence continued with a third partner until the relationship broke down. Tracy's eldest child had witnessed violence in the home which impacted on their mother-daughter relationship.

Trauma- Only months before the intervention commenced, the father of Tracy's second child committed suicide. This had a detrimental effect on Tracy and she became more withdrawn.

Mental Health- The impact of trauma and domestic violence on Tracy was clear and she was unable to undertake daily tasks such as using public transport because of her anxiety. Her oldest daughter was also becoming more withdrawn. School staff reported that she lacked confidence and wasn't engaging well with her peers.

Parenting Capacity-Tracy was developing reliance on alcohol as a means to cope with her poor mental health. Her lack of motivation meant that routines in the home had deteriorated and that living conditions were poor with the house being cold, damp and bare.

School attendance- At the point of referral the eldest child's school attendance was only 51%.

### The hook...helping mum to see that her future could be so different from her past

#### WHAT WAS DONE:

Risk management- Tracy was supported to access the services of an IDVA. This allowed practical activities such as safety planning and risk management to be completed. It also gave Tracy the opportunity to talk about her experiences openly and to recognise the need to re-engage with her family.

Engaging with Services- The Key Worker co-ordinated support from a number of agencies including Children's Social Care, substance misuse services, housing providers, and health professionals. Acting in an advocacy role, the Key Worker was able to help Tracy make sense of her situation and what responsibility she had to make improvements.

Increasing Tracy's Support Network- Tracy was introduced to a local support group for women where she could access practical courses and gain emotional and wellbeing support. Links were re-established with her family and the Key Worker supported Tracy to attend family activities in their local community.

Parenting- Routines and boundaries in the home were addressed through 1:1 parenting support from the Key Worker. Together they developed a Family Plan which was based around what worked for mum, and what worked for the girls. A crucial aspect of the support plan was the ability of the Key Worker to offer challenge to Tracy when it was required.

Housing- A housing conditions assessment was undertaken and essential household and cleaning items provided in order to be able to meet the outcomes of the Family Plan. Support to explore opportunities to move to a smaller, more suitable property were provided in partnership with housing providers.

#### THE OUTCOME:

Parenting- Involvement with Children's Social Care has ended and the case continues to be supported at a lower level of intervention.

Domestic violence- Tracy has established a good relationship with the Family Safety Unit and understands the cycle of violence she was involved in and how to undertake safety planning. There have been no further instances of domestic violence.

School attendance- Tracy's daughter's school attendance has increased from 51% to 90% and staff report that her engagement has also improved.

Support Networks- Tracy continues to attend the local Women's Group and take the children to family activities in the community. Tracy is now confident enough to use the train and bus services and thus the family are far less isolated. As her confidence has increased so too has that of her children who are now having regular contact with their family network.

A fresh start- The family have moved to a smaller, more suitable property and are looking forward to a new life.

"It's great to see how affectionate the family are now and the progress Tracy's daughter has made in school building relationships." Tracy's Key Worker

## Reflections on the impact of the past

Whilst IFIP practitioners state that 'no two families are the same', there are a number of issues which they share. The most prevalent of these is their historical involvement with services. Families within the target group have often been in receipt of statutory services for a number of years, indeed parents were often known to these services during their own childhoods. This intergenerational involvement with services can have 2 very distinct outcomes: those who do not wish to engage and those who wish to rely on services. Neither of these outcomes are beneficial to enabling families to turn their lives around or to sustain long term independence. Families need practical support to establish an independent life as part of a supportive community.

IFIP Key Workers reflect on families feeling 'stuck':

"Families need something to turn around for."

"Sometimes they're so used to the situations they're in that they can't see how unhealthy or damaging they are. Even more difficult is when they don't want to see it as they're too afraid."

"Families respond well to visual and physical prompts. Sometimes we need to take them outphysically and metaphorically to get them to think differently."

"Making changes means leaving things behind. That's scary."

"A lot of our parents feel they don't fit in with their communities, that they have nothing to offer. It's very rare that they even consider themselves belonging to a community. We need to help them change that and see that they can change their community from the inside."

- •They can establish a strong network of support from the wider family, friends and their local community. So many of the Troubled Families cohort find themselves socially isolated. It is imperative, for their
- Parents are able to take responsibility for their family, their actions and their outcomes. Too often families report feeling 'done to', that expectations of them and plans for their families are prescribed by professionals. Parents and children must drive their support plans.
- Evidence-based approaches, such as solution-focused therapy, are used to achieve positive changes. Work with families needs to have direction. Families should have a clear understanding of what they are working towards. Evidencing outcomes is important not just for reporting but for families to see the reality of what they can achieve.

### **Delivering Outcomes for IFIP Families**

At 31<sup>st</sup> May 2014 the programme had achieved the following outcomes:

Working with/worked with: 674 families

Achieved positive outcomes for school attendance, anti-social behaviour and/or youth

crime: 376

Adults progressing into sustained employment or work programmes: 32

The reach of IFIP in relation to the families identified is as follows:

Percentage of families living in top 3% most deprived areas nationally: 35.1% Percentage of families living in the top 5% most deprived areas nationally: 43.0% Percentage of families living in the top 20% most deprived areas nationally: 75.1%

Cost Benefit Analysis

Using the DfE Cost Calculator tool the average saving per family is estimated at £76,557  $\,$  , with the lowest saving at £2,400.91 and the highest at £147,420.10

At 31<sup>st</sup> May 2014 the families receiving intensive support from an IFIP Key Worker had achieved the following outcomes: 88% of children's school attendance had increased to over 85% **76%** of families with a history of crime and/or anti-social behaviour had stopped offending 94% of families self-assessed that their parenting capacity had improved 51% of families with a history of domestic violence had issues resolved 68% of families with substance misuse issues received support to address their problem 82% of families reported improved mental health

60% of families were supported to register with a GP and/or

## Final thoughts...

- Multi-agency collaboration works
- Sharing information across agencies works
- A multi-disciplinary approach to delivering the model works
- Providing flexible services works
- Pooling resources works
- Putting families at the centre of their support plans works
- Open, honest, simple communication with families works
- Utilising skills and resources within the voluntary, community and faith sector works
- Believing in families works

"If I've learned
anything at all it's that
things don't go in a
straight line."

"Just don't give up on them. Making
a difference to just one member of
the family can eventually make a
difference to them all."

The first phase of the Troubled Families initiative will end on 31<sup>st</sup> March 2015. An opportunity to extend the programme for a further 5 years has been confirmed by government. Learning from IFIP will shape the delivery of the second phase and should significantly contribute to reducing the numbers of Children in Need, children subject to a Child Protection Plan and those at the 'edge of care'. With the continued commitment of partnership agencies we will be able to help more families and together build stronger communities.