

Family | 2020

DRAFT for professionals and partners, March 2016.
Our partner strategy to improve the outcomes of all children, young people and families in Suffolk.

Please email your thoughts and ideas to family2020@suffolk.gov.uk



Giving every child the best start in life

Outcome One, Suffolk Health and Wellbeing Board



Vision

All children and families in Suffolk have the right to:

Be **safe**

The best **education**

Physical and emotional **health**

Successful preparation for
adulthood and employment

Too many children and families do not have these opportunities and we are committed to changing that. We must be brave and change the way we work to deliver this.

Challenges

However, local partners are facing large cuts to funding which threaten our ability to deliver outcomes for families.

And at the same time pressure is growing on local services. By 2020 we anticipate significant population growth where houses will be built in Ipswich, Forest Heath, Lowestoft and along the A14. And there will be increasing need as national and local services reduce.

Family 2020

This strategy is for professionals and partners. It is our sustainability and transformation plan and sets the principles, actions and enablers that will deliver efficiency and better outcomes for families in Suffolk.

What does the future look like?

Joint delivery

There are signs from devolution, NHS five year plan and local practice that the Suffolk public sector will be increasingly integrated: multi-agency locality teams, delivery from the same buildings and IT, integrated points of access and assessment, frontline staff with multi-agency knowledge, one Suffolk commissioning team, and joint budgets and governance. Local joint delivery will be bespoke and varied across the Connect teams, while county level services will become simpler and streamlined.

Online services

Face-to-face delivery will always be important but services will also be online in a blended model. Many services will have a digital front-door as the first point of contact with portals and guidance tailored to young people, parents and carers, and professionals.

Service design

Families and friends will be supported by guidance to help each other earlier, with assistance from universal professionals. We will be better at predicting future need and targeting our resources to reduce demand. Services will be designed in partnership to deliver sustainable outcomes with more early help to reduce demand to high cost services. Our services will be co-designed with families.

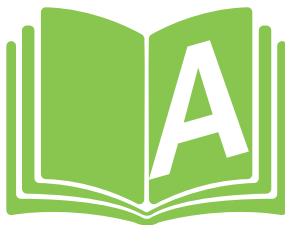
Suffolk families and communities

Families will be better informed to support their own needs. Services will be co-produced using Signs of Safety, and families take control of their own lives. Communities will support themselves and each other more, being more responsive and socially integrated, improving health and wellbeing and reducing social isolation.

Contents



PRINCIPLES



ACTIONS



ENABLERS

Principles

This section describes the principles for how we will design services and other support in Suffolk. The four design principles are to guide professionals, service managers and commissioners to get the best possible outcomes for children, young people and families.



Four design principles



- 1 **Quality** – we want to get our interventions right first time, commission based on clinical evidence and Suffolk JSNA, monitor rigorously for impact on sustainable outcomes, co-produce services, and stop doing things that do not work
- 2 **Efficiency** – we will increase productivity, be more rigorous in applying commercial thinking to commissioning and markets, co-design services, performance manage against outcomes, and develop early help that is more cost effective across the system
- 3 **Integration** – we will integrate services around our users where this makes sense for them, joining up processes, adopting the same thresholds, removing duplication between partners, and co-producing with families and the community. And we will connect transformation programmes across Suffolk.
- 4 **Early help** – we will predictively target Suffolk resources to families that will need help in the future, and we will reduce demand to expensive statutory services by drawing on community, universal and digital resources:
 - **Community** – Signs of Safety practice will encourage community support in all interventions, we will promote volunteering to increase community resilience, and help families to help themselves
 - **Universal** – we will support universal staff in GPs, children's centres, early years settings, schools, post-16 education, pharmacies, the voluntary sector and businesses to give more early help at the point of access, before referring to specialists
 - **Digital** – we will significantly increase the digital help that is accessed online, including guidance for young people, parents and carers and professionals, and new digital service delivery

1 Quality

How

Suffolk family services need to have the greatest possible sustainable impact on outcomes for children, young people, parents and carers. Services will:

- Be consistently designed to prioritise better outcomes rather than more activity
- Get interventions right the first time as much as possible, which means stopping if it's not working
- Use clinical evidence, our own data and the Joint Strategic Needs Assessment to design services (and test and prototype where there is limited evidence)
- Use Signs of Safety practice to deliver every intervention in co-production with families
- Focus on workforce planning, development and better staff engagement
- Be performance managed through the outcomes they deliver for each individual

Why



Better staff engagement and development will lead to higher quality, safe and effective care and support



Signs of Safety is the way services interact with families – developing relationships and co-producing the outcomes we want together with families



If we define the outcomes we want and always measure performance against outcomes, we will increase our impact and incentives to work together

2 Efficiency

How

We also need to drive the efficiency of how we improve families' lives. That means our focus on outcomes but also improving the return on investment and considering the best delivery models for services.

- Co-designing services with children and young people to drive innovation and early help
- Improving the productivity of services through better IT, integration and shared property, processes and management information
- Being clear about the cashable return on investment so we have the greatest and most sustainable impact on families' outcomes
- Open to a range of delivery models including generating revenue
- Commercial thinking so all professionals consider the financial impact of decisions and are responsible for using the most cost effective interventions

Why



All partners' services are delivered within a fixed envelope of resources – if we improve the efficiency of each service and the system. then we can help more vulnerable families



To encourage innovation and design more efficient services we will work more closely with families and frontline staff in both commissioning and co-design

3 Integration

How

We are committed to integrating services so they make sense to families, and make the most of reducing resource in Suffolk.

- Where it makes sense for families and services we will deliver through Connect localities in multi-agency teams – linked closely to local schools, education and early years settings and aligned to Adult health and care structures
- Family service with 0-25 age range for complex needs and including services for vulnerable parents. Integrating community health services, mental health and Suffolk County Council children and young people services, but excluding Emergency services.
- Re-think public estate and community buildings across Suffolk, and integrate children's centres with partners' estate

Why



Services that are integrated will be more efficient and able to respond better to the complex needs of vulnerable families



Services such as children's centres are delivered where they make sense in the community, especially in rural areas



If a child needs help then parents or carers can also receive integrated support for parenting, domestic abuse, drug and alcohol abuse, and their mental health



Greater efficiency at a County level to make best use of Suffolk resource

Suffolk Model



As a child or young person in Suffolk the support I need is mostly from my family, friends and community.

There is online guidance to help me or my parent or carer to give the best support.



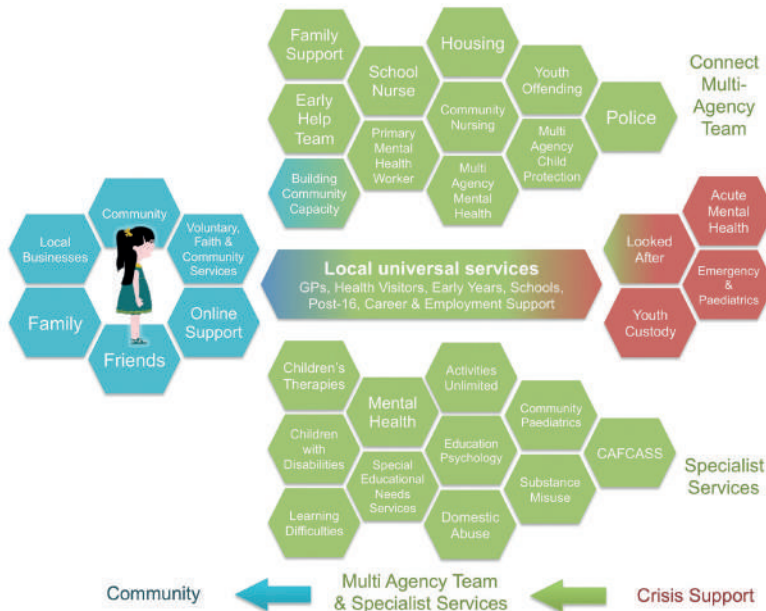
And I can access universal services from the GP surgery and my children's centre, early years setting, school or post-16 establishment.

When I or my family need more support there is a Connect multi-agency team in my area and specialist services in the County such as respite support. When I'm receiving specialist or crisis support my school or GP continues to help me so I can more easily step down to universal and locality support.



If I need help in a crisis I will be supported by emergency health and care services.

At all points my education setting and GP continue to support me along with community and family resources to get the outcomes I need.



Scope of integration

How

The following services will be redesigned and integrated by 2020, following the four design principles:

- Community services including speech and language therapy, specialist communication aids, audiology, incontinence, occupational therapy, physiotherapy, community paediatrics, health visiting and school nursing
- Transforming care for children with learning disabilities or autism, integrated education health and care including special educational needs, children with disabilities, and community equipment
- Emotional wellbeing, crisis and in-patient services
- Adult mental health, domestic violence, substance misuse and parenting support
- Aspects of Children in Care services including health outcomes
- Single point of access and assessment for family services alongside the MASH

Why



It is everyone's business to support the 40,000 children and young people with diagnosed or less severe mental health needs – we cannot rely on specialist services to meet demand



Children have a better experience of community services such as speech and language therapy – teams are integrated and can support more families



Improving children's outcomes through effective early years settings



Improving placement choice and bringing young people in care or in an education placement back into Suffolk



Reducing inequality

4 Early help

How

It is our collective responsibility to ensure there is early help for vulnerable families, reducing the spend on late interventions and improving outcomes.

- There is hidden need in Suffolk's most vulnerable families that leads to poor outcomes and drives the costs of statutory services
- When we redesign a service it will be based on our four design principles including an increase in the volume of early help support
- But early help will have to be much more cost-effective, drawing on digital delivery, teachers and other universal professionals, volunteers, family and community support
- Intelligence and IT strategies will show the impact of our early help work and drive improvements

Why



Reducing the number of children and families whose needs escalate and lead to suffering – early help or prevention of need



For every child we support there are many others that potentially need help, such as mental health where we support only 1 in 8



If we measure children's outcomes then we will be able to tell which early interventions work best, and where to put our resource

Early help



The Intelligence Hub shows our real impact on families' outcomes. And who needs help in the future.



For Early Help to really work we have to support more vulnerable families and reduce inequality. So interventions to improve outcomes will have to be much more cost-effective.



Predictive modelling shows that a child could be at risk in 3 years, so the family might be supported by a good neighbour.



In the nursery they have a list of children we want to help early. Building relationships with parents and carers and breaking down traditional boundaries.



A single point of access and assessment alongside the MASH for all referrals controlling demand and risk.



All staff use Signs of Safety to co-produce shared outcomes with children, parents and carers. For every family with complex needs there is one plan and one lead worker.

If a young person is worried about their emotional health they first speak with their friends or parents and go online to self-help. Then get support from teachers, the 24/7 chat service and professionals.



Multi-agency teams are based in Connect localities and work together – sharing information and resources.



Actions

This section describes the actions we will take to get the best outcomes for families in Suffolk, and how we will measure impact. Whilst actions are presented under separate outcomes many are connected. There is a fifth set of actions to deliver enabling projects with partners such as community resilience.



Be safe



Priorities	1 Children in care	2 Suffolk Family Focus	3 Social care	4 Community Safety
Actions	<ol style="list-style-type: none"> 1. Integrate services supporting health outcomes for children in care including redesigned mental health support 2. Increase the sufficiency of placements and edge of care services for children in care 	<ol style="list-style-type: none"> 1. Build on Suffolk Family Focus to expand family mentoring using volunteers to provide targeted early help 2. Integrate parenting support services including mental health, domestic abuse, alcohol and drug abuse and parenting skills 3. Implement the poverty strategy to enable every child to have the best start in life 	<ol style="list-style-type: none"> 1. Develop a single point of access for children's services alongside the Multi-Agency Safeguarding Hub 2. Draw together the 'voice of the child' and data around child exploitation and children missing from home, school & care to protect more children at risk of suffering harm, abuse and neglect 3. Develop a multi-agency neglect strategy that more sustainably addresses the underlying causes including parental mental health, domestic violence and substance misuse 	<p>Deliver the Police Children and Young People strategy with partners to improve safety at home, in public and online including:</p> <ol style="list-style-type: none"> 1. Work with the Youth Offending Service to support young people 2. Reduce the risk of children going missing 3. Tackle domestic abuse 4. Mental health concordat 5. Best use of stop and search principles 6. eSafety – raising awareness to prevent crime and reduce harm

The best education

1	Effective and timely school improvement	2	Strong school to school support	3	Excellence in leadership and governance	4	Developing aspirations with families, communities and businesses	5	Clear strategy and communication	Priorities
	<ol style="list-style-type: none">1. Further embed the system for monitoring achievement in all schools, to identify schools at risk of declining and intervene more rapidly where necessary2. Strengthen target setting to ensure that targets set by schools, especially for disadvantaged children, are aspirational and link to County targets3. Increase access for education leaders to high quality support and challenge from County Council services4. Further develop the role of County Council officers to monitor, support and challenge schools	<ol style="list-style-type: none">1. Establish the School to School Support Partnership, to give education leaders access to high quality school to school support2. Develop with school leaders a cohesive strategy to support leadership, teaching and learning3. Foster innovation in teaching and learning, by investing in and sharing good practice4. Promote excellence in teaching STEM (Science, Technology, Engineering and Maths) subjects to support our economic growth sectors	<ol style="list-style-type: none">1. Embed a new workforce strategy:<ol style="list-style-type: none">a) Develop 'Teach Suffolk' brand to attract high quality teachers into Suffolk;b) Build schools' capacity to recruit and manage new talent pipelines;c) Invest in developing school leaders at all levels, from newly qualified teachers to headteachers2. Provide effective support to enable governors in schools and committees in early years providers to challenge performance and attainment	<ol style="list-style-type: none">1. Build aspirations among young people and their families2. Extend the opportunities for family learning in the community3. Further increase involvement of businesses to support young people4. Work in partnership with the voluntary and community sector to strengthen their role in supporting educational attainment, including through the Raising the Bar Community Fund5. Encourage all parents to be actively involved in their children's education	<ol style="list-style-type: none">1. Develop a clear strategy and plan for Raising the Bar 2015-172. Improve the effectiveness of communications and consultation with education providers3. Review and strengthen the Raising the Bar communications strategy with internal and wider stakeholders4. Build the national profile of Suffolk education5. Promote local and national awards to celebrate the excellence of education in Suffolk	Actions				

Physical and emotional health



Priorities	1 Emotional wellbeing	2 Community services	3 Transforming Care and SEND	4 Healthy living
Actions	<ol style="list-style-type: none">1. Single point of access and assessment for emotional wellbeing2. 24/7 chat service3. Digital help and training – portals for professionals, parents and carers, and young people4. Eating disorder service improvements5. Acute services delivered in Connect localities based on IAPT model	<ol style="list-style-type: none">1. Integration of speech, language and communication services between NHS and SCC, and new schools choice market for SALT2. Redesign community services including OT, physiotherapy, continence, community paediatrics, health visiting and school nursing with Connect localities3. Implement the national maternity review	<ol style="list-style-type: none">1. Integrated community services for learning disabilities or autism2. Integrated community services for learning disabilities and autism3. Connect through Tech to improve access to internet for children with SEN or disabilities	<ol style="list-style-type: none">1. Deliver weight management and physical activity strategies, significantly increasing the number of families supported2. Work with schools and further education to promote positive health, developing resilience and reducing risky behaviour such as smoking and alcohol abuse

Successful preparation for adulthood and employment



1 Transition	2 Work inspiration	3 Aiming high 16-18	4 Learning and work	5 Skills for growth	Priorities
<ul style="list-style-type: none"> 1. Independence and adulthood supported by all professionals using signs of safety, education, health and care plans and health passports 2. Flexibility in the age of transition between children and adult services up to 25 years for young people with complex needs 	<ul style="list-style-type: none"> 1. Raising the Bar - Careers Enterprise Company education / employer brokerage 2. Icanbea – showcasing our economy to young people 3. The Suffolk Skills Show and supporting events bringing young people and employers together 4. Inspiring young people to study and build careers in science and technology 	<ul style="list-style-type: none"> 1. Post-16 opportunities to meet the needs of every young person 2. Growing Apprenticeships as a prestigious career path 3. Supporting school leavers to make successful transitions 4. High quality impartial careers guidance for all 	<ul style="list-style-type: none"> 1. Supporting adult learning, in-work progression and full employment 2. Building a new youth offer, MyGo and Youth Pledge 3. Joining up welfare to work locally 	<ul style="list-style-type: none"> 1. Developing skills in our growth sectors 2. Supporting Suffolk businesses to invest in growing the skills of their workforce 3. Helping businesses attract and develop young talent 	Actions

Enablers



Priorities	1 Community resilience	2 Intelligence, insight and digital	3 Commissioning and design	4 Workforce
Actions	<ol style="list-style-type: none"> 1. Increase community resilience to reduce service demand 2. Establish a volunteering resource to support the needs of vulnerable residents 3. Establish community development teams across Suffolk 4. Making Every Contact Count to identify vulnerable families without community support 	<ol style="list-style-type: none"> 1. Develop IT infrastructure, data sharing and three portals for young people, parents and carers, and professionals 2. Long-term plan for integrated systems across health and care 3. Measure universal outcomes of most children in Suffolk using school surveys 4. Model demand to services to support the single point of access 5. Predictive modelling of need in partnership with Essex University 6. One family, one lead worker and one plan 	<ol style="list-style-type: none"> 1. Establish a Suffolk wide Design team including commissioners and providers 2. Establish engagement model including human centred design 3. New single point of access and assessment building from emotional wellbeing model 4. Alignment of strategic asset plans across NHS, Police and local government 5. Maximise impact on One Public Estate on Family Services 	<ol style="list-style-type: none"> 1. Giving staff the tools to do the job 2. Joint workforce planning and organisational development 3. Develop Connect locality teams across Suffolk with links to local partners, voluntary sector and communities 4. Ensure quality and supply of critical roles for Suffolk Family services 5. Fully embed Signs of Safety practice in all internal and external services

Measuring impact



The following outcome measures really matter to children, and families.
All Suffolk partners will measure success through these outcomes.

Be safe

- Children on a child protection plan for a second or subsequent time
- Children in care who are in stable placements
- Entrants to the youth justice system
- Incidents of anti-social behaviour by families with children
- Families where there is a report of domestic abuse
- Young people feel safe outside and know how to get help
- Young people who are a victim of crime
- Evictions for families with children
- Bullying of children and young people
- Care leavers are confident and able to look after their own health and wellbeing
- Children, young people and parents / carers who feel that they co-produced the support they received

The best education

- Vulnerable children accessing funded childcare
- Children are ready for school (healthy with social and learning skills)
- Key Stage 2 children achieve national standard
- Key Stage 4 children achieve national threshold
- Children in poverty achieving the same or higher at Key Stage 4 as peers
- Children in care achieving same or higher at Key Stage 4 as peers
- Children with special educational needs achieving same or higher at Key Stage 4 as peers
- Young carers achieving same or higher at Key Stage 4 as peers
- Availability of places in education and early years
- Permanent school exclusions each year
- Attendance at education settings

Measuring impact



Physical and emotional health

- Healthy birth
- Mothers breast-feeding at 6 to 8 weeks
- Children in care with good health
- Young people with good mental health
- Professionals know about mental health
- Children obese in reception and year 6
- Young people smoking or taking drugs
- Children and young people in A&E seen within 4 hours
- Young people admitted to hospital due to alcohol consumption
- Admissions to hospital for children and young people with long-term conditions
- Young people who know how to get help with mental health, physical health and safety
- Children and young people reporting that they are happy

Successful preparation for adulthood and employment

- Good job prospects, advice about careers and preparation for young people
- Care leavers and young adults with disabilities who are in employment, education or training
- 16 to 18 year olds who are in employment, education or training
- Care leavers who are in suitable accommodation
- Children in care and children and young people with Education, Health and Care plans who have a co-produced, planned transition to adulthood
- Young people who are learning to manage long-term health conditions
- Families who have friends, extended family or community groups they can ask for help

Enablers

This section describes what else needs to be in place with partners to deliver the actions and get the best outcomes. For example, enablers will help us to increase community resilience, make better use of IT and data, and improve our workforce and commissioning of services.



Community resilience

How

Children and families will be helped to help themselves and each other, in strong and inclusive communities. This strand of the TCA programme is to encourage community resilience and volunteering, and link into services to improve outcomes and reduce demand.

- Integrated community teams of development staff from Districts, Police and Suffolk County Council to increase community resilience
- Volunteering – promoting formal and informal volunteering, including creating a new volunteer resource to give early help to vulnerable families
- Programme to encourage community resilience so that residents: make connections to each other, know where to go for help, are emotionally resilient, and more likely to help each other
- Making Every Contact Count includes a new theme of Connect. Ensuring vulnerable families have a community that helps them to be more resilient. For example: Friends and family, community of interest, faith or work, local community resources, or online connections

Why



Vulnerable families are supported by local volunteers before their needs escalate, extending the Good Neighbour scheme



Everyone is more resilient because of their connections and knowing where to get help



Young people want to make a contribution to their community but they don't know how to volunteer

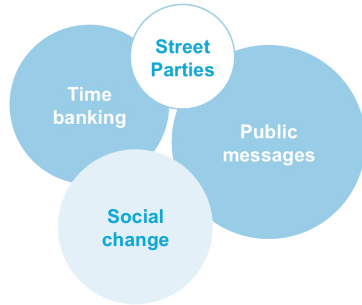


Making best use of local assets and business: 2300 taxi drivers, 1300 hair dressers, 530 pubs, 430 early years settings, 400 faith groups, 137 pharmacies, 130 coffee shops, 120 dentists, 80 GP surgeries, 25 leisure centres and 7 job centres

Connections



Culture



Know where to get help



Emotional Resilience

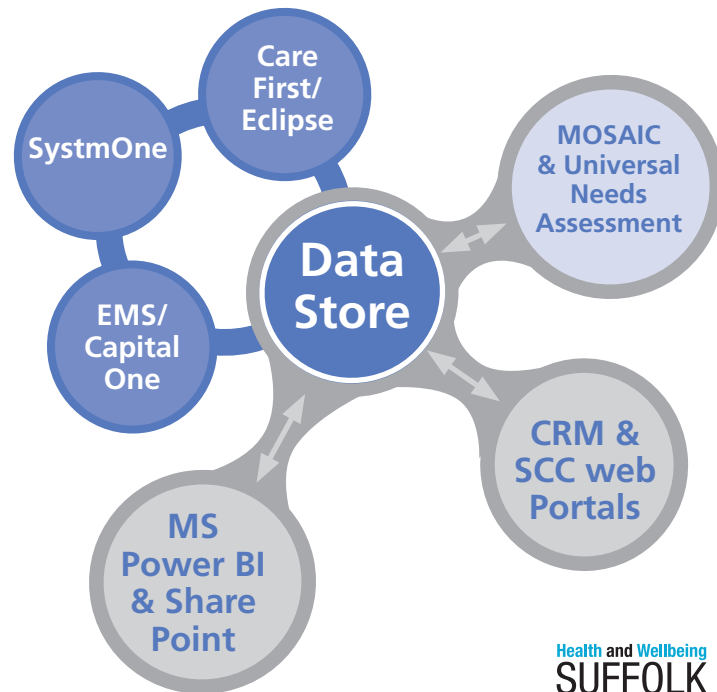
There are lots of things we can do to help build **community resilience**. For example encouraging **connections** between residents, **knowing where to get help** in the community and online, building **emotional resilience** of individuals, and shifting the **culture** so people are more likely to help each other.

Intelligence, insight & digital

How

Over time IT and other back-office functions will integrate across partners including case management and shared data.

- An effective IT infrastructure will underpin improvements in productivity, experience for users and our intelligence to target early help.
- Giving staff the tools to do the job including connectivity and mobile working
- Improving case management systems
- Rationalising infrastructure and integrating with partners
- Digital services – all transactions online, digital approaches to reduce demand such as ChatHealth and Skype, Connect through Tech assistive technology strategy, and one family, one lead, worker one plan
- Integrated intelligence in Suffolk County Council: case management, universal needs assessment and website with predictive modelling of future needs



Outcomes

How

We need good shared intelligence about all families in Suffolk, so we can tailor our services, target those most in need and understand the effectiveness of our services.

- Quantitative measurement of the outcomes achieved from every Signs of Safety intervention by analysing the end statements – for all internal and external services
- Easy digital service for young people and parents to feed back their experience of services and outcomes
- Central collation of user feedback attributed to specific interventions and providers
- And we want to improve our overall understanding of children's outcomes through universal needs assessment:
- Measuring individual needs of Suffolk children annually so we can offer help more effectively
- Evaluating the impact of our interventions and service design

Why



One family, one plan, one lead worker – to give a better experience for children and parents / carers, and to join up services



Feedback from children, young people, parents and carers shows the experience of services and impact – informing our commissioning decisions



Data will measure the difference we are making to families lives, and how to improve our commissioning

Predicting need

How

Government and businesses are improving their use of big data and artificial intelligence to understand demand and predictors of risk. We can tap into these established technologies:

- Developing new algorithms to identify which families will need more support in the future, in a joint project with Essex CC and Essex University
- Using pseudonimised data and data agreements to legally share data with partners so that our predictions become more accurate and we can spot risks to families
- Modelling demand into all children's services including the MASH, and the costs associated with changing demand
- Supporting the business case for early help and setting targets to reduce referrals

Why



Understanding the health and wellbeing of all children in Suffolk so we can measure the impact of early help and other services, and understand how well we are doing



Predicting which vulnerable families need help rather than waiting until their needs escalate. Making services cheaper and improving outcomes at the same time.



Modelling demand will show the impact of interventions and optimise our resources across Suffolk

Digital help

How

Young people want to engage with services online and to have information so they can help their friends.

- The Source offers guidance, forums and apps to help all Suffolk young people, e.g. with mental health and relationship issues
- A second portal will be developed for parents and carers offering guidance and InfoLink showing all services and community resources in Suffolk
- A third portal will support professionals alongside the MASH helpline to give guidance and confidence to help their children
- ChatHealth and other text or chat services to connect professionals and young people

Why



Increase in early help and reduced demand, because peers, parents, carers and universal professionals know how to support children, young people and families better



Chat, Skype, forums and apps will give more immediate interaction between families and staff at the moment of need, alongside face to face services

How

The quality and passion of the Suffolk workforce is our biggest asset. Support and development to the workforce will help us to sustainably improve outcomes, as well as contributing to growth in the economy. Increasingly professionals' careers will move across traditional service boundaries, developing a more rounded expertise and integrated service for families.

- Joint workforce planning and organisational development across health, local authorities, police and education, and encouraging career paths between sectors
- Develop Connect locality teams with a wide range of public sector services
- Identify critical roles across public services and secure the volume and quality of staff required
- Work with schools, further education and MYGO centres to raise the profile of public sector careers, including a new cohort of integrated roles and skills
- Encourage businesses to release staff to volunteer for two days a year

Why



Making Suffolk public sector an attractive place to work, to assure the supply of highly skilled staff for key roles such as nursing, social care, home care, teaching



Better local skills will support financial growth in Suffolk and the health and social benefits that come with a more affluent population



Connect localities across Suffolk to integrate services and draw on local community resources



To move away from current delivery models and cultures we will need to be brave

Commissioning and design

How

Our joint commissioning will be more focused on outcomes and strategic, and we need to design the whole Suffolk system in partnership with providers:

- Integrated and co-located commissioning and design function across the NHS and Suffolk Country Council including aligned resources where services are being integrated
- Children, young people, families and professionals involved in service design and co-production of outcomes, using human-centred design principles.
- Commissioning based on statute, clinical evidence, Suffolk JSNA and our four design principles
- Improved service specifications to focus on outcomes and productivity. Performance manage providers against the impact they are having on families' lives and outcomes.
- Clear joint principles and process for commissioning

Why



Being clear about outcomes will improve efficiency and innovation



Using the total resource in Suffolk to get the outcomes for families in the most efficient, effective and sustainable way

Inputs

- Finance
- Capital
- Workforce
- Markets
- Families
- Community

Commissioning is the most efficient, effective and sustainable route

Outcomes

Community and place outcomes
Children and family outcomes and experience



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