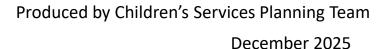
FAMILY SUPPORT HUBS REPORT CARD

Annual Report Card 2024/25



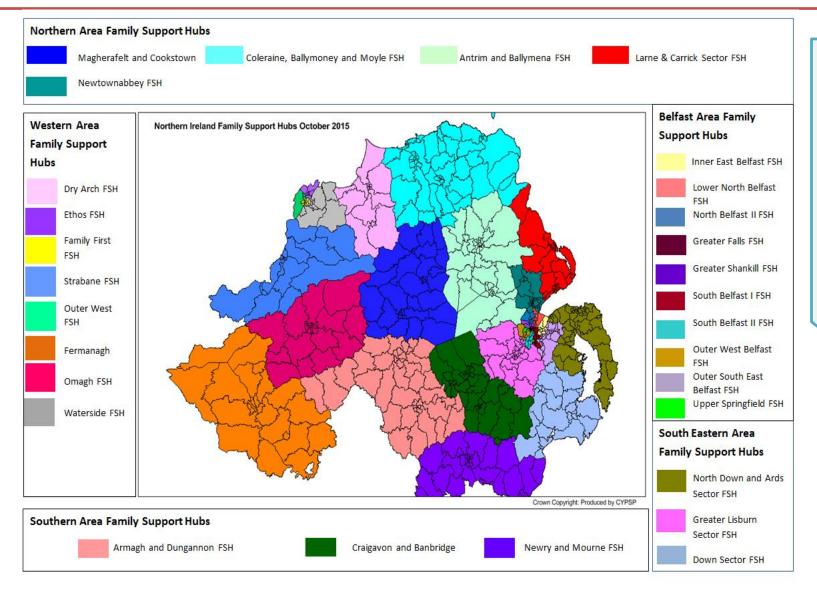








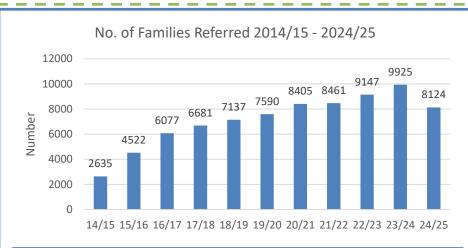
How much did we do?



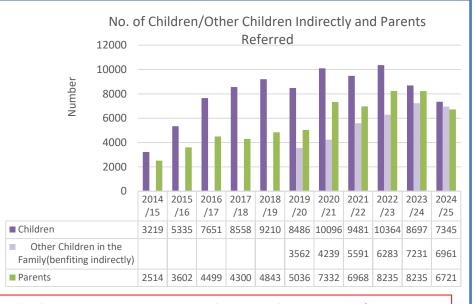
Performance Measure 1: As at April 2024, 29 hubs were fully operational in Northern Ireland

How much did we do?

Performance Measure 1: No of Families, Children & Parents Referred through Family Support Hubs – 2024/25

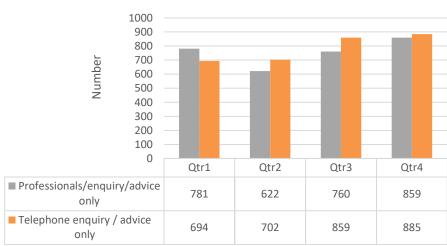


In 2024/25, **8124** families were referred through family support hubs, a decrease of **1801** families than in 2023/24.



This year has been the first year where we have seen a drop in the number of referrals. There were 1801 less families referred in 2024/25 with Belfast (-646) and Northern (-687) reporting the biggest drops.

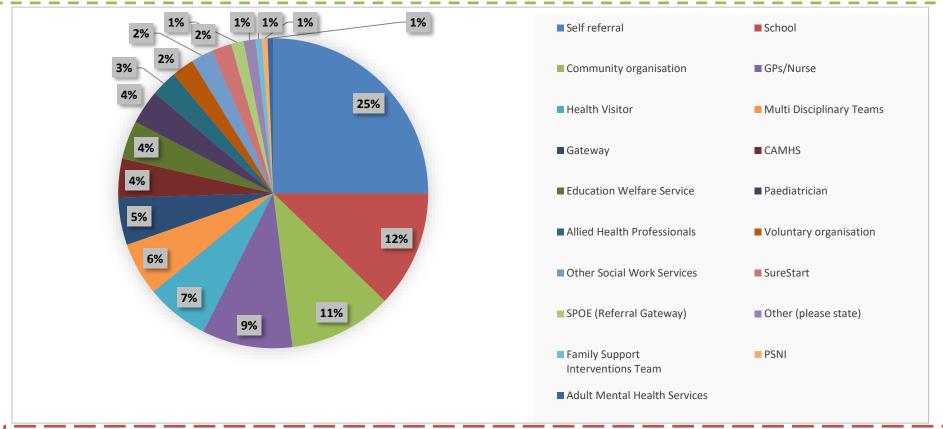
Professionals/Telephone Enquiries



Hubs dealt with **3022** Professional enquiries and **3140** Telephone enquiries in 2024/25, directly from families and professionals seeking advice regarding services in the area or as a listening ear. This is a vital part of their role and can take up a significant amount of their time but does not result in a full referral. This in itself can be sufficient to support the family or may result in a full referral at a future date.

How well did we do it?

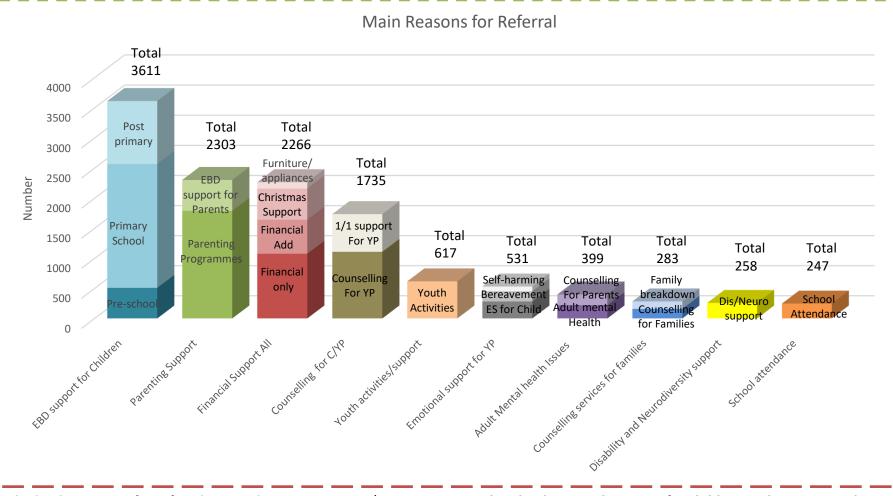
Performance Measure 2: Total Percentage of Referrals by Referring Agency – 2024/25



In 2024/25 **Self-referrals** were still the key referrer at **25%**, a slight rise from 24% in 2023/24. **School** referrals in 2024/25 were **12%**, the same as in 2023/24. **Community Organisations** referrals were **11%**, a slight rise from 9% in 2023/24. **GP's** referrals are **9%**, a slight drop (10%) and **Health Visitor** referrals has had a slight drop from 8% to **7%**. **Multi Disciplinary Teams 6%**, **Gateway 5% and CAMHS**, **Education Welfare Service** and **Paediatricians** and are all **4%**.

In 2024/25, **self-referrals** were consistently among the most common sources of referrals to Family Support Hubs across all five areas, ranking either first or second in each. They were the top source in three of the five areas. In the two areas where self-referrals were not the leading source, most referrals came from **GPs/Nurses** (Northern and South Eastern). The remaining three areas did not rank GPs/Nurses within their top three sources. Schools were a significant referral source, ranking within the top three in four of the five areas, with South Eastern being the exception. Schools were the top referral source for Southern Hubs.

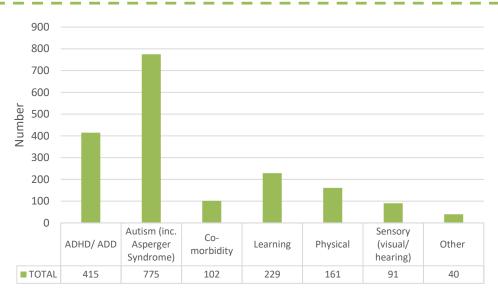
Performance Measure 3: Main Presenting Reasons for Referral - 2024/25

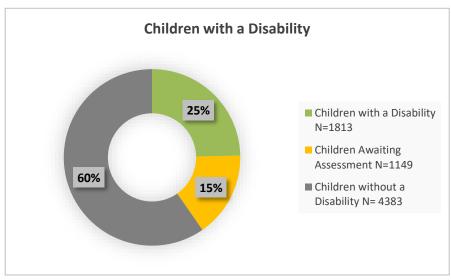


The leading reason for referral across the region in 2024/25 was **Emotional and Behavioural Support for children and young people**. However, this varied by area. Northern and South Eastern Hubs ranked Emotional and Behavioural Support as the top reason, while Southern Hubs reported Parenting Support/Programmes as the most common reason. In Belfast and Western Hubs, Financial Support was the primary reason for referral. Financial support may form part of a broader request or be the sole reason for referral. In 2024/25, there were 1,076 referrals solely for financial support, with 56% directed to Belfast Hubs and 36% to Western Hubs. While these referrals do not typically involve wider family support services, they remain an important function of the Hubs and often serve as the first point of contact for families who may later seek additional support.

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Performance Measure 4: Children with a disability referred (Age 0-17) -2024/25

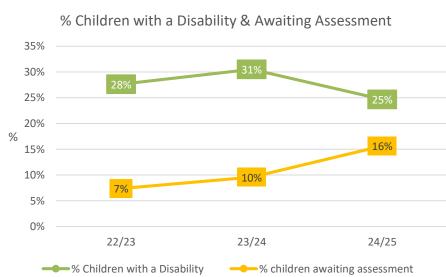




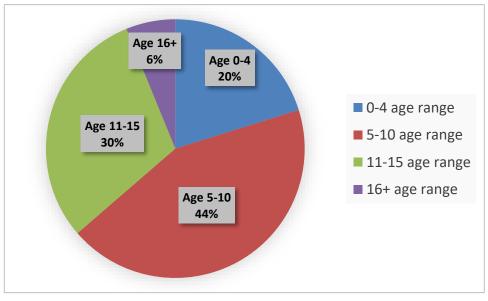
There is considerable variation in the proportion of children and young people referred to Family Support Hubs who have a disability during 2024/25, ranging from 15% in the Western Hubs to 60% in the South Eastern Hubs. Across all areas, Autism is reported as the most prevalent disability, with the exception of the South Eastern Hubs, where ADHD is most common (154 children), closely followed by Autism (150 children). When comparing Autism prevalence among children referred to the Hubs with rates in the general school-age population, it is evident that prevalence within the Hubs is significantly higher across all areas.

Prevalence of Autism									
	Reg	S	W						
Children referred to Hubs (0-18)	10.6%	10.0%	13.6%	15.7%	9.0%	5.6%			
School age population	5.9%	8.2%	7.6%	5.1%	3.8%	4.7%			

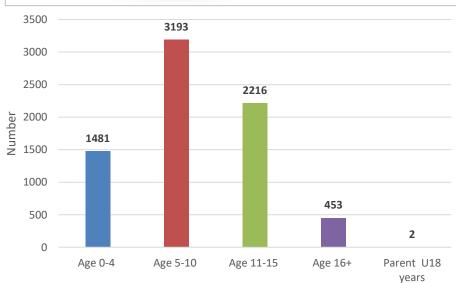




Performance Measure 5: Children referred by Age Profile - 2024/25



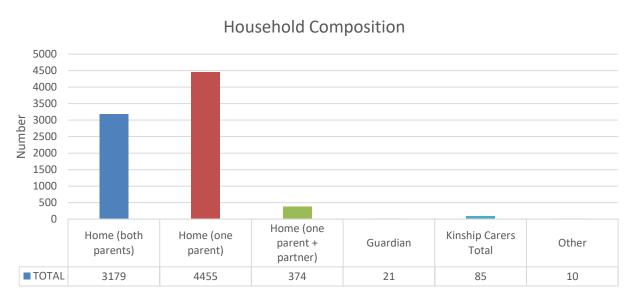
Children aged 5–10 years have consistently been the highest age group referred. In 2024/25 this continued with 3,193 referrals (44%). This trend is seen across most areas, with one exception: in the Northern Hubs, referrals for 5–10 and 11–15-year-olds have been similar, with each group accounting for around 40% last year. Northern Hubs also report a lower percentage of referrals for children aged 0–4 years compared to other areas. These patterns highlight the importance of age-specific support and services, particularly for primary school-aged children.

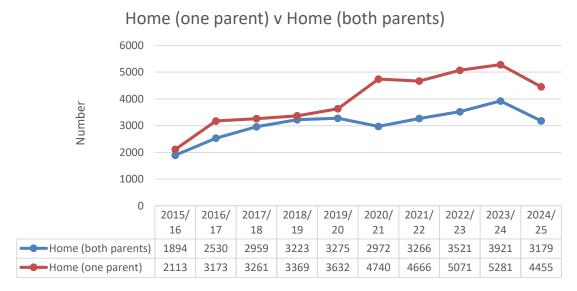






Performance Measure 6: Household Composition -2024/25







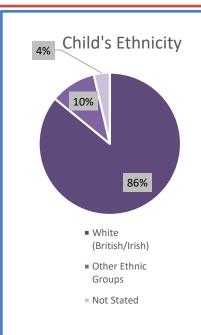
This year, One Parent Families remain the largest group referred to Family Support Hubs, with 4,455 referrals in 2024/25, continuing a consistent trend. In comparison, referrals for families where children live with **both parents** have decreased from 3,921 to 3,179. Looking at area reports, we see interesting patterns: in Belfast and Western Hubs, where there is a higher proportion of referrals seeking financial support, there is also a greater number of referrals for single parent families. Meanwhile, in the Northern, Southern, and South Eastern areas, referrals for single parent and two-parent families are more evenly balanced.

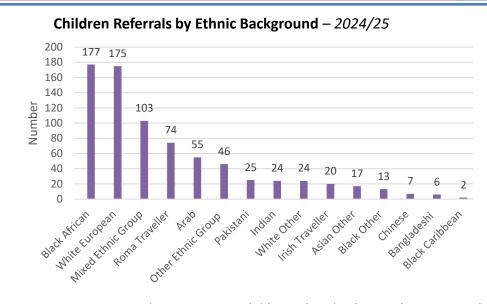
Performance Measure 7: Referrals by Ethnic Background for Children and Parents referred.

There has been a noticeable increase in referrals for both children and parents from a range of ethnic backgrounds, including groups such as Black African and White European families.

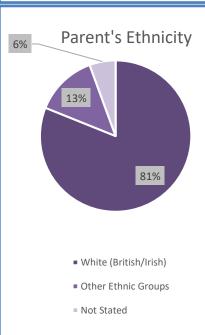
A detailed view, the breakdown of these groups for children and parents are presented in the bar charts. The percentage of children and parents identifying as from Ethnic Groups other than White British/Irish varies, with Belfast reporting the highest proportion. The breakdown of this by area is shown in the table below.

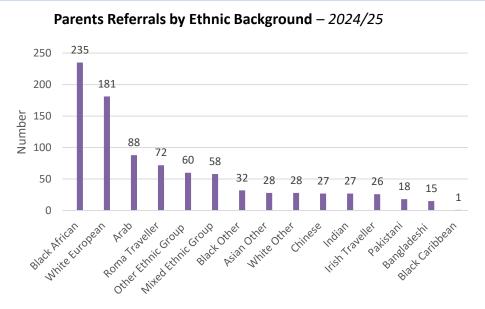
	Children	Parents
Regional	10%	13%
Belfast Hubs	22%	24%
Northern Hubs	4%	6%
South Eastern		
Hubs	5%	7%
Southern Hubs	12%	12%
Western Hubs	7%	9%





Please note: **266** children ethnic background - Not Stated





Please note: 375 parents ethnic background - Not Stated

Produced by CSP Information Team



Performance Measure 8: Interpreters Required and Booked by Language

In 2024/25, there was a wide range of languages requested for interpreting, with Romanian being the most requested language—though none of these requests were fulfilled. All Romanian requests came from Belfast Hubs. Across the year, interpreters were unavailable for 18 different languages. Belfast Hubs identified 48 interpreting needs but were only able to book interpreters for 3 cases. In contrast, the South Eastern area was the only region able to meet all identified interpreting needs.

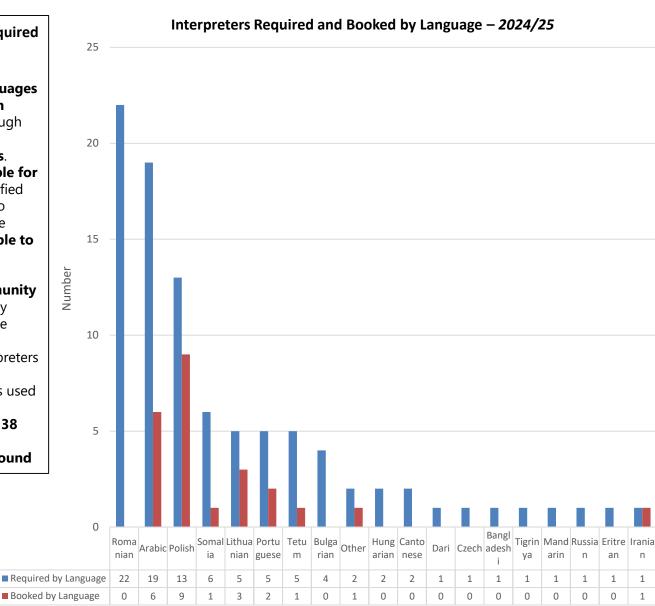
This highlights a significant gap in access to interpreting solutions, particularly for **community and voluntary organisations**, and especially smaller groups, who need support to provide services to families on a **needs-led basis**. Alternative solutions were used where interpreters could not be booked:

•Google Translate or Vasco Translator was used 84 times

*Family or friends facilitated interpreting 38 times

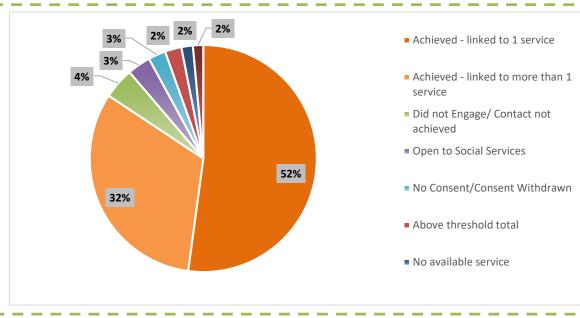
*In 2 cases, no interpreting solution was found

	No of interpreters required	Number of interpreters booked
Belfast Hubs	48	3
Northern Hubs	7	2
South Eastern Hubs	8	8
Southern Hubs	23	8
Western Hubs	7	3



How well did we do it cont'd....?

Performance Measure 9: Families Referred that were Accepted & Signposted or Not Accepted for Other Reasons – 2024/25

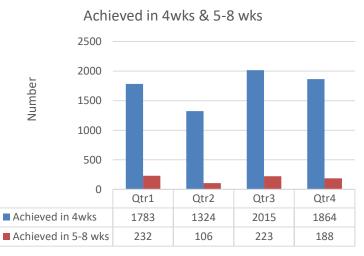


In 2024/25, **52%** of families referred to the Hubs were signposted to a single service, while **32%** were linked to multiple services. This demonstrates that the Hubs are effectively tailoring support to meet individual family needs. For those requiring more than one service, the Hubs have successfully acted as a single point of access, streamlining referrals and ensuring coordinated support across a range of services. There are vast differences with 65% of families in Northern Hubs and just 1 family in South Eastern being connected to more than one service.



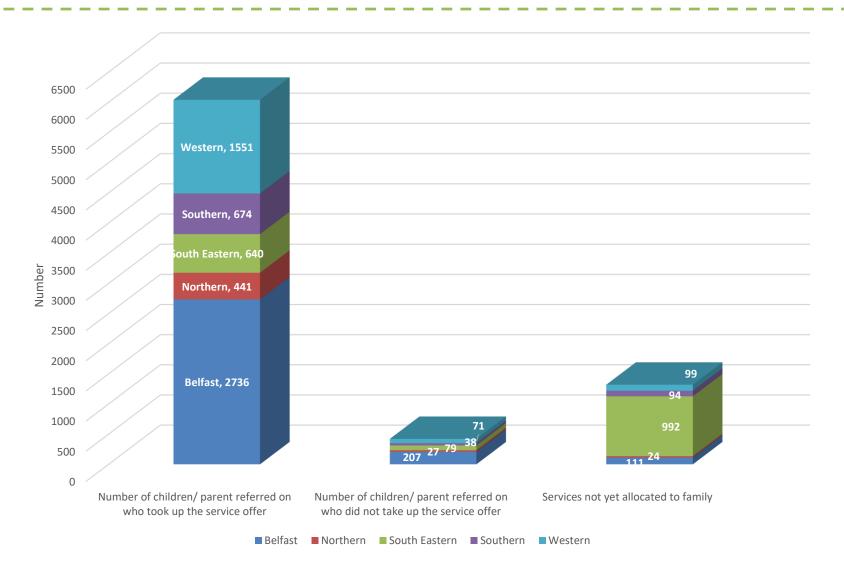
Performance Measure 10: Referral Process: Achieved in 4 weeks & 5-8 weeks – 2024/25





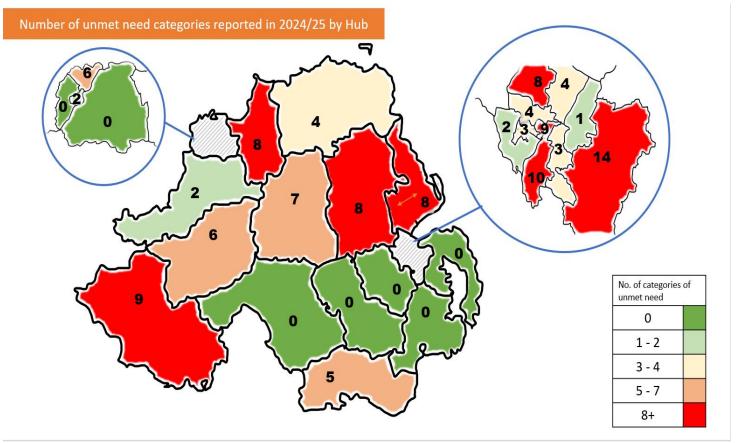
The vast majority of referrals to Family Support Hubs in 2024/25 were processed within the four-week standard, ensuring families received a timely response to their immediate needs. A further significant proportion were completed within five to eight weeks. Of the remaining referrals, 244 were processed but exceeded the eight-week timescale, while 145 were not achieved within the regional timescale.

Performance Measure 11: Number of Parents / Children referred who did and did not take up the service offer – 2024/25



Performance Measure 12: Number of Unmet Need Categories – 2024/25

Due to ongoing challenges in identifying appropriate members to meet the needs of families, this year saw a strategic focus on capturing and analysing unmet need. A new standalone Unmet Need Report has been developed to inform locality planning priorities and contribute to Outcomes Group plans. Work has been undertaken to ensure a consistent approach to recording unmet need across the region, and it is anticipated that the quality and reliability of this information will improve in the coming year. Further development work may be required to enhance the value and impact of this reporting.



Youth activities/Afterschool Services/Support

Performance Measure 12: Main Pr	rese	nting — —	g Rea	son	s for	Unn	net N	Veed	- 20	024/	25										'
Unmet need category	Outer South East	Greater Falls	Inner East	Upper North	South Belfast One	South 2	Shankill	Lower North	Upper Springfield	Outer West Belfast	Antrim/ Ballymena	Coleraine/Ballymoney	Magherafelt/ Cookstown	N'abbey/Larne/Carrick	Fermanagh	Omagh	Family First	Ethos	Strabane	Dry Arch	Newry & Mourne
Adult Mental health																					\Box
Befriending/Mentoring																					\Box
Bereavement support (adult)																					\Box
Bereavement support (child)																					\Box
Child care support																					\Box
Counselling services for children/young people																					
Counselling services for families																					\Box
Counselling services for parent/s																					\Box
Disability support																					
Drug/alcohol related harm/abuse by adults (including parents)																					
Drug/alcohol related harm/abuse by child or young person (0-18)																					
Emotional and behavioural difficulty (EBD) support for parents																					
EBD support for post primary school children			<u> </u>													$ldsymbol{ldsymbol{ldsymbol{eta}}}$					└ ──'
EBD support for pre-school children																					'
EBD support for primary school children																					'
Emotional support for child (bullying, separation etc.)																					
Family breakdown																					
Financial support																					
Housing																					
Neurodiversity Support																					
Offending (at risk behaviour) for children and young people																					
On waiting list for ASD/ADHD assessment																					
One to one support for young people																					
Other(Language Support, Dentist Registration, Family Conflict)																					
Parenting programmes/parenting support																					
Practical support e.g. furniture/appliances																					
Respite Care																					
School attendance																					
Self harming (child)																					
Self-care support for children																					
Summer Activities																					<u> </u>

How well did we do it cont'd....?

Performance Measure 12: Main Presenting Reasons for Unmet Need – 2024/25

Unmet Need Category	Total of Unmet Need	No. of Hubs (N = 29)
Parenting programmes/parenting support	157	9
Counselling services for children/young people	100	15
Financial support	66	9
Emotional and behavioural difficulty support for primary school children	36	9
Disability support	35	7
Counselling services for parent/s	27	8
School attendance	17	4
Child care support	16	8
One to one support for young people	16	6
Emotional and behavioural difficulty support for pre-school children	13	8
Practical support e.g. furniture/appliances	11	4
Self harming (child)	9	1
Neurodiversity Support	9	3
Other(Language Support, Dentist Registration, Family Conflict)	8	3
Drug/alcohol related harm/abuse by child or young person (0-18)	6	1
Summer Activities	6	1
Emotional and behavioural difficulty support for post primary school children	5	3
Emotional and behavioural difficulty support for parents	4	4
Emotional support for child (bullying, separation etc.)	4	3
Youth activities/Afterschool Services/Support	4	3
Adult Mental health issues	3	2
Counselling services for families	2	2
Respite Care	2	1
Bereavement support (adult)	1	1
Bereavement support (child)	1	1
Drug/alcohol related harm/abuse by adults (including parents)	1	1
Family breakdown	1	1
Housing	1	1
Offending (at risk behaviour) for children and young people	1	1
On waiting list for ASD/ADHD assessment	1	1
Self-care support for children	1	11

Unmet Need: In 2024/25 the highest unmet need was for Parenting programmes/parenting support which was also the top unmet need in 2023/24. This was followed by Counselling services for children/young people, Financial Support, EBD support for primary school children and Disability Support.

Produced by CSP Information Team

How well did we do it cont'd.....?

Performance Measure 13: 10 Standards Fully Implemented – 2024/25

Standard 1. Working in PARTNERSHIP is an integral part of Family Support. Partnership includes children, families, professionals and communities

Standard 2. Family Support Interventions are NEEDS LED (and provide the minimum intervention required)

Standard 3. Family Support requires a clear focus on the WISHES, FEELINGS, SAFETY AND WELL-BEING OF CHILDREN

Standard 4. Family Support services reflect a STRENGTHS BASED perspective, which is mindful of resilience as a characteristic of many children and families lives

Standard 5. Family Support is ACCESSIBLE AND FLEXIBLE in respect of location, timing, setting and changing needs, and can incorporate both child protection and out of home care

Standard 6. Family Support promotes the view that effective interventions are those that STRENGTHEN INFORMAL SUPPORT NETWORKS

Standard 7. Families are encouraged to self-refer and MULTI-AGENCY REFERRAL PATHS are facilitated

Standard 8. INVOLVEMENT OF SERVICE USERS AND PROVIDERS IN THE PLANNING, DELIVERY AND EVALUATION of family support services in practised on an on-going basis

Standard 9. Services aim to PROMOTE SOCIAL INCLUSION and address issues around ethnicity, disability and urban/rural communities

Standard 10. MEASURES OF SUCCESS are built into services to demonstrate that interventions result in improved outcomes for service users, and facilitate quality assurance and best practice

Hubs are required to review their performance and operational effectiveness against the ten Hub Standards on an annual basis. This review should identify areas of strength and opportunities for improvement, leading to the development of a comprehensive action plan for the following year. The process must be undertaken collaboratively with core Hub members to ensure shared responsibility, transparency, and alignment with the principles of partnership and continuous improvement.

Please note: All reports cards are available at https://CYPSP.hscni.net/family-support-hubs/ under Family Support Hub Monitoring

For further information on Family Support Hubs in your area: Contact the Children's Services Planning Team,
Email: cypsp@hscni.net

