EARLY INTERVENTION SUPPORT SERVICE

OPERATIONAL GUIDANCE

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Version 13

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1. Background

The Early Intervention Transformation Programme (EITP) is a Northern Ireland Executive/Atlantic Philanthropies Delivering Social Change Signature Programme, funded jointly by the Delivering Social Change fund, DoH, DE, DoJ, DfC, DfE and The Atlantic Philanthropies. EITP aims to improve outcomes for children and young people across Northern Ireland through embedding early intervention approaches.

The **Early Intervention Support Service (EISS)** is being developed under Workstream 2, which aims to support families when problems arise; before they need statutory involvement. Workstream 2 will deliver five new Early Intervention Support Services across Northern Ireland[1] which will deliver a range of practical and therapeutic supports to families. Each EISS will be closely aligned to Family Support Hubs (FSH) and existing local services. Their aim is to support families when problems first emerge, before they become intractable or before statutory services are required. The EISS can also provide support for families "stepping down" from Gateway; the Step Up/Step Down Protocol should be adhered to [See section 7 & Appendix 10]. The EISS will seek to achieve this aim by delivering and coordinating personalised, evidence based early interventions for families with children between the ages of 0 – 18 years old, within Tier 2 of the Hardiker Model as defined in the Northern Ireland Family Support Model.

[1] See Appendix 2 – Pilot Areas for Early Intervention Support Services

2. Early Intervention

2.1 Why Early Intervention?

Early intervention can offer a powerful way of breaking the inter-generational cycle of disadvantage and lack of opportunity. It can also provide pathways to improvement through self-help and support. Early intervention can significantly improve the chances of positive outcomes for children, young people and families. The vision is to develop a consistent, coherent model for the provision of early intervention so that services may intervene early and as soon as possible to prevent or tackle problems emerging for children, young people and their families. Evidence highlights the economic benefits of early intervention which can reduce or prevent the need for a range of costly and complex remedial interventions.

2.2 Principles of Early Intervention

- Early support is aimed at equipping families with the skills they need to deal with their problems effectively and build resilience to manage issues which arise in the future.
- Support is provided at the earliest opportunity and targeted to prevent the need for escalation through tier 3 and 4 interventions.
- Families in need of additional support are identified in a timely manner.
- Families are actively involved in the assessment, planning and provision of support and review of its effectiveness.
- Early support for families is a multi-agency responsibility: all agencies work in partnership to provide high quality support.
- Support is provided in the localities where the families reside.

3. Early Intervention Support Service Model

<table>
<tr><th>Child's Development Needs</th><th>Parents & Carers</th></tr>
<tr><td>

Health
- Slow in reaching developmental milestones
- Missing immunisations or checks
- Susceptible to minor health problems
- Minor concerns re: diet, hygiene, clothing, alcohol

Education & Learning
- Occasional truanting or non-attendance
- At risk of exclusion
- Not in education employment or training
- Language & communication difficulties
- Not reaching educational potential

Emotional & Behavioural Development
- Low mental health or emotional difficulties
- Substance misuse that is not immediately hazardous
- Involvement in antisocial behaviour
- Attachment issues

Identity
- Some insecurities around identity
- May experience bullying

Family & Social Relationships
- Has difficulty sustaining relationships
- Occasional caring responsibilities
- Child of a teenage parent
- Low parental aspirations

Social Presentation
- Can be over friendly or withdrawn with strangers
- Personal hygiene is a problem

Self-Care Skills
- Poor self-care/hygiene
- Slow to develop age appropriate self-care
- Overprotected/unable to develop independence

</td><td>

Basic Care, Safety & Protection
- Parental engagement with services is poor
- Parent requires advice on parenting
- Concerns about child's physical needs not being met
- Concerns about substance misuse including alcohol in the home
- Some exposure to dangerous situations in home/community
- Teenage parent(s)

Emotional Warmth & Stability
- Inconsistent parenting
- Post-natal depression
- Perceived to be a problem by parent

Guidance, Boundaries & Stimulation
- May have different carers
- Inconsistent boundaries offered
- Can behave in an anti-social way
- Spends much time alone
- Child not exposed to new experiences

</td></tr>
<tr><th>Family & Environmental Factors</th></tr>
<tr><td>

Family History & Functioning
- Parents have relationship difficulties which may affect child
- Experienced loss of significant adult
- May look after younger siblings
- Parent has health difficulties

Housing, Employment & Finance
- Family affected by low income or unemployment
- Parents have limited formal education
- Poor housing
- Family seeking asylum or refugees

Family's Social Integration
- Family new to area
- Some social exclusion problems
- Victimisation by others

Community Resources
- Adequate universal resources but family may have access difficulties

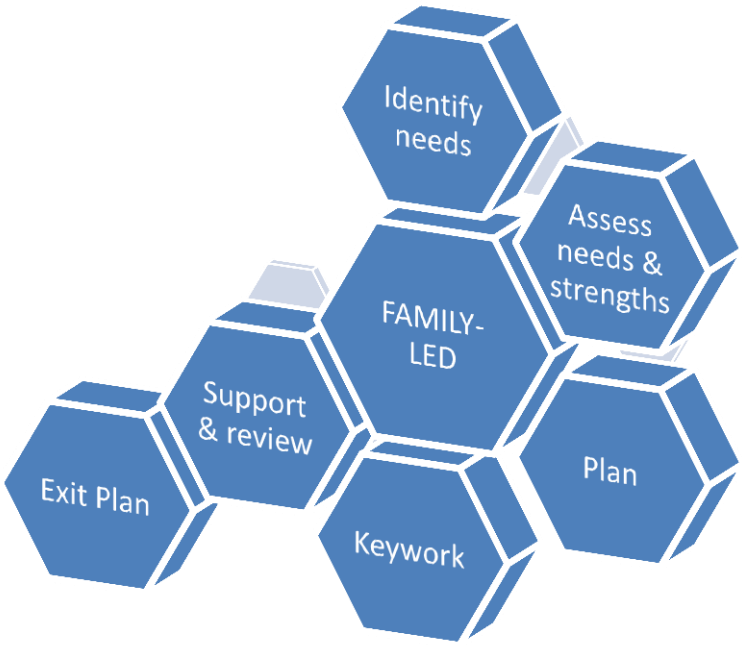
</td></tr>
</table>

The EISS will be provided for children and young people aged 0-18, in their family context, who are experiencing difficulties within Tier 2 of the Hardiker Model. A request for support will be deemed appropriate for the EISS when the needs of the child/family can no longer be fully met within universal provision. These children and their families may have low level additional needs that are likely to be short term, examples of issues that may trigger a request for support are detailed above.

This is a level which will not meet the threshold for statutory social services, but which is more than would ordinarily be available from a straightforward universal service.

3.1 Early Intervention Support Service Framework

The underpinning ethos of the EISS model is mutual partnership with the family. This is central to assessment, planning, working arrangements, reviewing and deciding next steps. Families identify their needs and strengths; they have a strong voice in deciding what they want to change; they co-produce plans and are viewed as being capable of making meaningful changes. The service is flexible according to their needs and focuses on enhancing their competencies.



The collaborative approach of the EISS allows practitioners to build strong and trusting relationships with families. Within the Brief Solution-Focused interventions offered by EISS, practitioners are encouraged to adopt a respectful and cooperative stance towards families and to see them as having the solutions and potential for change. Key elements that are common to these interventions include focusing on the family's goals, exploring exceptions to the problem and identifying their strengths and resources to change it. This practice also applies to individual young people who are referred to EISS.

Given the time limited nature of the interventions, there is a need to prioritise the changes which will have the biggest impact on the child/young person's future outcomes and focus on ensuring these key goals are achieved before families exit the service. Adapted from Systematic review of Solution Focused Brief Therapy (SFBT) with children and families, Department of Education, 2011.

3.2 Request for Support

Request for support from the EISS will come from a number of sources including the Family Support Hubs, voluntary, community and statutory organisations and self-requests. Request for support should be made on the EISS Request for Support Form. In the case of self-requests, these should be made by telephone; EISS staff will complete the referral form with the parent/young person. If referrals are being made from Family Support Hubs these should be made by forwarding the original Family Support Hub referral form. The EISS referral form will then be completed by EISS staff with the parent/young person. Requests will be accepted provided the criteria for requesting support is met as outlined in section 3.3.

A waiting list, of up to a maximum of 4 weeks, will operate when EISS is not able to work with the family immediately after referral. EISS will work with families in order of referral date, however self-referring families will be prioritised. If EISS estimates it will not be able to allocate a project worker within four weeks, the referrer will be advised to refer to the Family Support Hub for an alternative service. Families who self-refer will be supported to access the Family Support Hub.

EISS Providers should record the number of referrals that cannot be accepted because of capacity so that unmet need can be measured.

3.3 Criteria for Requesting Support for Early Intervention Support Service

The criteria for requesting support outlined below will apply to all the EISS pilot areas.

- Child/young person resides within the EISS catchment area.
- Child/young person is under 18 years of age.
- Child/young person has additional needs within Tier Two of the Hardiker Model.
- No other services within the area meet the identified need of the child/young person.
- Family should not be currently working with a statutory social work service.
- Child should not currently be involved with a children's disability social work service*
- Informed consent to referral has been secured from the person with parental responsibility or the young person, if 12 years of age or over and has the ability to give consent.

To ensure a targeted approach which is complementary to existing local services and avoids duplication of existing services specific inclusion and exclusion criteria will be agreed by the Regional Coordinator, FSH coordinator and the Service Provider in each of the pilot areas.

*In the case of a child with a disability an assessment will be made on a case by case basis – the EISS may offer support for a time limited period in certain circumstances such as transition points.

3.4 Early Intervention Support Service - Service Provision

- The EISS will respond to requests for support[2] and make contact with the family, by telephone or in person, within ten working days of receipt of a request.
- The EISS will deliver locally based support within families' homes or other suitable, accessible setting.
- The EISS will provide a flexible service to meet the needs of each family. Although the core provision will be during office hours, some service provision may be required at weekends and evenings.
- The EISS will engage children, young people and families, who sometimes find it difficult to access services, through the use of practical and collaborative approaches.
- The EISS will allocate a key worker to each family referred. Each key worker will hold a minimum case load of 10 families with support provided for a period of 12 weeks, although this will be flexible dependent on need. In this regard, 16 weeks should be the maximum period a key worker will support a family. Extensions over 12 weeks must be approved by the Service Manager.
- In partnership with the family, EISS will complete a holistic family assessment using the Outcomes Star framework that explores and identifies both the nature and level of the family's strengths and needs. The assessment tool will be used to establish an initial base line and to measure progress in terms of distance travelled by families during and at the end of each engagement.
- EISS and the family will co-produce a plan that all parties agree on, that will have the greatest impact on future outcomes within a twelve week period. EISS will have available a toolkit of interventions including the Solihull Approach, Motivational Interviewing and Solution Focused Brief Intervention Therapy; a range of parenting programmes and Family Group Conferencing and will offer practical assistance to families, tailored to their unique needs.
- The EISS will be delivered as a service that is closely aligned to the Family Support Hub (FSH) network and will work in conjunction with the FSH and statutory and non-statutory organisations to ensure other local services are not displaced or duplicated.

3.5 Family Group Conferencing within the Early Intervention Support Service

A Family Group Conference (FGC) is a process to engage the wider family in decision making. The process leads to a meeting in which the child or young person and the wider family and friends and network come together within a supportive environment to make decisions which will ensure that the child or young person is safe and his/her wellbeing is being promoted. The FGC process is in 3 parts:

1. Information sharing by professionals
2. Private Family Time – voices of child and family members, discussion and agreements made.
3. Family Plan – actions and contingency plan agreed.

[2] See Appendix 3 – EISS Process for Service Delivery

The objective of the Family Group Conferencing Service (FGC Service) is to empower families, to acknowledge and respect their strengths and to support families to find their own solutions to problems: the family members are the decision-makers rather than the professionals; the 'family' is the primary planning group.

Family group conferencing should be seriously considered as a response any time a decision needs to be made to resolve a difficulty in relation to a child/young person. This may relate to support needs, protection for risk or needs for care. In Northern Ireland the majority of FGC's are currently arranged for children and young people who have reached the threshold for statutory social service involvement. The EISS aims to provide Family Group Conferencing for approximately 5% of the Tier 2 families engaging with the EISS. The staff within the EISS will have responsibility for identifying families and referring to the relevant FGC service. The referral pathway is outlined in Appendix 8.

3.6 Review and Exit Planning

At the end of the twelve week intervention the EISS and the family will review the work together. If it is agreed that the child/young person/family needs a more specialist or longer term intervention, the EISS will work closely with the Family Support Hub co-ordinator to identify appropriate services or agencies that can provide on-going support.

The EISS teams will be expected to develop a wide knowledge of appropriate step-down resources in their area. To achieve this they will establish a close relationship with other universal, preventive and early intervention services. This may include:

- Other agencies who are undertaking universal, preventive or early intervention work on a 'single agency' basis e.g. Health Visiting, School Nursing, Community Children's Nursing, Community Disability Nurses, Early Years Settings etc.
- Sure Start services.
- Third Sector organisations which may provide opportunities for positive activity for children, young people and their families. Some organisations may provide specialist support for particular needs.
- Schools.
- Community and neighbourhood and faith based initiatives.

4. Consent to Information Sharing[3]

The Data Protection Act states that organisations can only use people's personal information when they have given explicit consent to do so. Principles 3 and 4 of the Act state that personal data about an individual must be proportionate to the purpose for which it is held. The information should be accurate and up to date.

Consent to referral: It is the responsibility of the referrer to establish consent for sharing of referral information with EISS. As part of the Outcomes Star process, EISS will make contact with the referrer for information towards the initial assessment. In consultation with the service co-ordinator, project workers must ensure that they collect only information that is relevant to the service being provided, proportionate and up to date. Any request to access the most recent UNOCINI should be made with explicit consent from the parent(s).

Consent to store information: Each service provider has in place data protection processes which will be used to gain consent for the storage of personal information and will include a procedure for parents/young people to access that information.

Consent to share information: Explicit consent will be gained when information is shared with external agencies. This consent will be captured via the initial referral form which remains a live document throughout the 12-16 weeks for the purpose of sharing information.

Consent for information to be used for evaluation: Service user feedback forms are anonymised. It is the responsibility of project staff to explain to service users how their feedback will be used for monitoring and evaluation. If they do not consent, they should not complete the form.

Explicit consent will be sought in respect of any involvement of service users in further EITP evaluation.

[3] Consent to share information resource developed for FSH will be utilised within the EISS

5. Early Intervention Support Service - Performance Management

Each EISS will maintain a record of the families supported, detailing the nature of their issues leading to the referral, the assessment and resulting package of intervention and an exit interview to give their views about the effectiveness of the intervention. The effectiveness of the EISS will be measured through a results-based outcomes and performance management framework utilising a range of assessment tools and Outcomes Based Accountability (OBA) Models.

These models will be used by the EISS as a planning and performance management methodology as they are both outcome and action focused. They will be used to agree common goals that will be quickly and easily cascaded down to action and delivery and measure the distance travelled or progress in relation to specific family support plans.

OBA will be used to demonstrate the current status of implementation; current status of performance data; how much the service did; how well the service did it and whether or not it is making a difference.

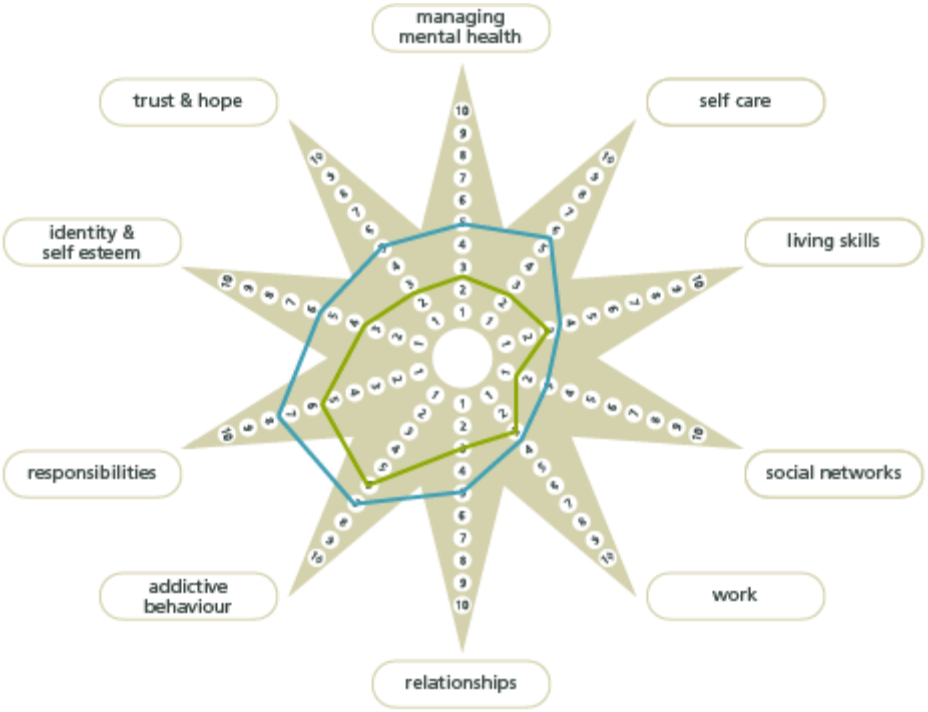
The Service Provider must produce collated performance data quarterly for analysis and populating of OBA scorecards. To fulfil the monitoring requirements the Service Provider is required to submit a Progress Monitoring Report on a quarterly basis and a year-end report.

There will be regular contract reviews with the PHA. The Service Provider must make key personnel available for attendance, including their nominated Contract Manager. Particular focus will be on the monitoring and reporting of the Key Performance Indicators, both the qualitative and quantitative elements. The Service Provider must achieve Key Performance Indicators as agreed with the PHA. These will be continuous and may change according to the service needs and performance focus.

The service provider must collect equality screening information on an annual basis for the adult with parental responsibilities, as set out in Appendix 11.

Early Intervention Support Service evaluation tool: The Outcomes Star™

The Outcomes Star will be used as the assessment tool to evaluate the effectiveness of the EISS. The Outcomes Star™ both measures and supports progress for service users towards self-reliance or other goals. The Stars are designed to be completed collaboratively as an integral part of keywork. Several versions of the Star will be used including Family Star Plus, My Star & Teen Star. All versions consists of a number of scales based on an explicit model of change which creates coherence across the whole tool and a Star Chart (pictured below) onto which the service user and worker plot where the service user is on their journey. The attitudes and behaviour expected at each of the points on each scale are clearly defined, usually in detailed scale descriptions, summary ladders or a quiz format.



An Outcomes Star™ reading is taken by the worker and service user at or near the beginning of their time with the project. Using the ladders or other scale descriptions, they identify together where on their ladder of change the service user is for each outcome area. Each step on the ladder is associated with a numerical score so at the end of the process the scores can be plotted onto the service user's Star. The process is then repeated at regular intervals to track progress. The data can be used to track the progress of an individual service user, to measure the outcomes achieved by the whole project and to benchmark with a national average for similar projects and client groups.

Further information on the implementation of the Outcomes Star by EISS is available at Appendix 10.

6. Early Intervention Support Service Teams

Professional Requirements

Each Early Intervention Support Service Team will have a multi professional team consisting of a skill mix of 2.5 whole time equivalents (WTE's) working at Band 6 or equivalent; 1.0 WTE working at Band 4 or equivalent and 0.4 WTE working at Band 3 or equivalent.

Band 6 (or equivalent) staff must have:

- A professionally recognised third level qualification appropriate to this service.
- A minimum of 2 years of post-qualification experience, delivering early intervention services to families with children between 0 and 18 years old.
- A range of competencies as outlined in the service specification.

Or

- A minimum of five years' relevant experience.
- A range of competencies as outlined in the service specification.

At least one of the Band 6 (or equivalent) staff must have achieved a professionally recognised third level qualification appropriate to this service, (e.g. a qualification in education, youth and community work, social work, or health and social care), and have the minimum 2 years of post-qualification experience as outline above.

Band 4 (or equivalent) staff must have:

- QCF or NVQ Level 3 or an advanced diploma (or equivalent or higher) qualification in child care, social care, community development, education, youth and community work, social work, or health and social care,
- A minimum of two year's post qualification experience working in a multi-disciplinary team providing services to families.
- A range of competencies as outlined in the service specification.

Or

- A minimum of five year's professional experience working in a multi-disciplinary team providing services to families with children between 0 and 18 in a community setting.
- A range of competencies as outlined in the service specification.

Band 3 administrative support staff must have:

- Skills in data and information management to comply with the performance management arrangements for the project.

Service Providers must ensure that all staff employed or engaged in any capacity are satisfactorily Access NI checked and that any professionally qualified individuals are registered with the appropriate registering body before commencement of Services.

Training

Service Providers will arrange for EISS team staff to undertake all relevant mandatory training within their organisation, e.g. health and safety, safeguarding, and equal opportunities.

EISS staff will undertake additional training, including the following:

- The Solihull Approach
  EISS staff will undertake the two day Solihull Foundation Programme followed by a minimum of four follow up practice sessions to consolidate learning. The Solihull Approach is an integrated psychodynamic and behavioural approach for professionals working with children and families. The approach is rooted in research about the impact of very early experiences on the development of the infant brain.

- Solution Focused Practice
  Each EISS provider will ensure staff participate in training in Brief Solution Focused Practice. Solution focused practice is future-focused, goal-directed, and focuses on solutions, rather than on the problems that brought the family to EISS. The approach assumes that everyone has some knowledge of what would make their life better (even though they may need help describing the details of their better life) and that everyone who seeks help already possesses at least the minimal skills necessary to create solutions[4].

- Outcomes Star
  EISS staff will undertake one day training on using the Outcomes Star, an approach which both measures and supports progress for service users towards self-reliance or other goals. The Star consists of a number of scales based on an explicit model of change and is designed to be completed collaboratively as an integral part of key work: the service user and worker plot where the service user is on their journey. The Outcomes Star will be used to evaluate the effectiveness of EISS in supporting service users to achieve their outcomes. See Section 5 & Appendix 10.

- Motivational Interviewing
  EISS staff will undertake two days' Motivational Interviewing Training, followed by a further day of consolidation training. Motivational interviewing is a directive, service user centred approach to achieving behaviour change by helping service users to explore and resolve ambivalence. Importantly, motivation to change is elicited from the service user and not imposed by the worker; the worker is directive only in helping the client to examine and resolve ambivalence about making changes and does not 'persuade' the service user. The work is undertaken in partnership rather than in expert/recipient roles[5].

[4] http://www.solutionfocused.net/

[5] Rollnick S., & Miller, W.R. (1995). *What is motivational interviewing?* Behavioural and Cognitive Psychotherapy, 23, 325-334

7. Step Up/ Step Down Protocol

The purpose of this protocol is to promote and strengthen the safeguarding of vulnerable children and young people along the continuum of need that reflects the Northern Ireland Family Support Model (Hardiker). Families do not always fit neatly within the Hardiker Levels and some are on the periphery of Level 3. The Protocol provides an interface between Family Support Hubs (Level 2) and Gateway/Family Intervention Services (Level 3) to ensure effective partnership working and risk management. The operation of the Protocol needs to be underpinned by good working relationships between all agencies involved.

The Family Support Hub Step Up, Step Down Protocol is relevant for the activity of EISS. Referrals can come via the Family Support Hubs or directly. The following points indicates how the protocol needs to be applied in relation to EISS. The Protocol is available at Appendix 9.

Guidance relating to Part 1: Step Down from Gateway to the Family Support Hub

Part 1 applies to families 'stepping down' from Gateway to EISS, whether via FSH or not.

- Step 2: any Tier Three provider making a referral directly to EISS must ensure that the family's consent to referral is recorded.
- Step 7: If safeguarding concerns escalate within 12 weeks, EISS should refer the family directly back to FSIT.

Guidance relating to Part 2: Step Up from Family Support Hub to Gateway

Part 2 applies to families 'stepping up' from EISS to Gateway.

- Step 1&2: Where the family is working with EISS, it is the EISS service provider who should make initial contact and provide referral information to Gateway.
- Step 4: Where a family is 'stepping up' to Gateway, EISS can remain in place, completing their intervention, if appropriate. This decision will be made by the service manager.

Guidance relating to Part 3: Step Down from Family Intervention Services to Family Support Hub

Part 3 applies to families 'stepping down from FIS to EISS, whether via FSH or not

- Step 1: In circumstances where a family is being referred to the Family Support Hub/EISS, the Family Service Intervention Team must close the case before referring to the Family Support Hub for onward support.
- Step 3: Additional information collected during meeting/call with referrer should be included in the referral form.

Appendix 1

Hardiker Model

The full EITP has been developed using the Pauline Hardiker model of categorising early intervention; with four tiers based on the characteristics of the target population:

- **Tier 1 Services** refers to "universal" early interventions i.e. supports that are available to, and accessible by, the whole population. It also includes services designed to improve the situation of disadvantaged people through community development.
- **Tier 2 Services** refers to the provision of targeted specific interventions to a cohort of the population that are considered to be vulnerable and/or on the threshold of requiring statutory involvement, through an assessment of need. Services are targeted to individual children, with parental support, and are provided in statutory and voluntary settings. Typically the services are delivered following a non-statutory referral mechanism e.g. by school teacher, GP, health visitor, etc.
- **Tier 3 Services** refers to the provision of a complex mix of services / early interventions to children, young people and families experiencing chronic problems and who are the most in-need of support to achieve better outcomes; typically they already have statutory involvement through the likes of the criminal justice system or social services.
- **Tier 4 Services** refers to children who are suffering or likely to suffer significant harm without the provision of services. This includes children who are looked after; those at risk of being looked after and those who are in need of rehabilitation from a care or custodial setting; children with critical and/or high risk needs; children in need of safeguarding and children with complex and enduring needs.

The Early Intervention Support Service is focused on the provision of Tier Two supports to families with low to vulnerable needs, which may be defined as follows:

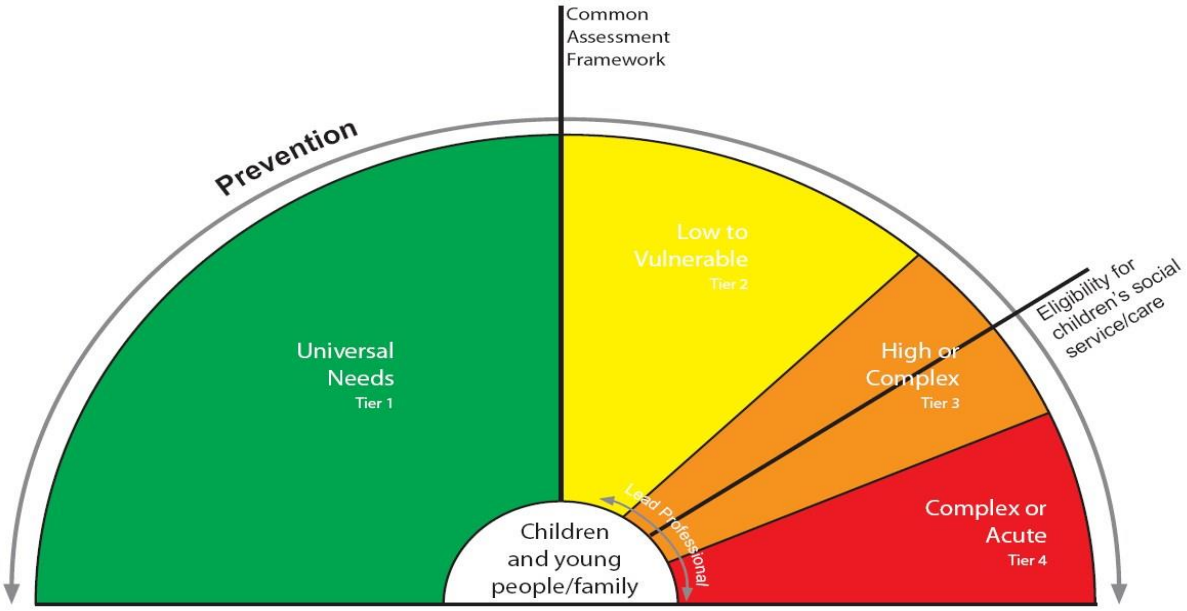
"Those children needing some additional support without which they would be at risk of not meeting their full potential. Their identified needs may relate to their health, educational, or social development and are likely to be short term needs. If ignored these issues may develop into more worrying concerns for the child or young person. These children will be living in greater adversity than most other children or have a greater degree of vulnerability than most if their needs are not clear, not known or not being met".

Tier Two, by its nature, is a difficult tier to define in terms of when it starts, with many families coming into its remit at varying times and for varying durations in their lifetime. For example, a family may technically move from being classified as in need of Tier One universal support to needing Tier Two additional support when a child displays behavioural issues, e.g. school truancy, underage drinking, self-harming, at a time when the parents are going through an acrimonious divorce.

The Hardiker Model emphasises the interdependence between the tiers. Strong and effective services for all children at Tier One will alleviate the need for Tier Two services for many children. A good and comprehensive range of preventative services at Tier Two will address difficulties early enough to affect the numbers of children and young people who require services at Tier Three. The

EITP through the three workstreams will develop an integrated system to improve outcomes for children, young people and families across all four tiers of the Hardiker Model.

The four Hardiker tiers of need in the NI Family Support Model are shown in the following windscreen diagram; illustrating the fluidity and transition between and within the tiers.



The key point is that the assessment of which tier the referred family sits - both in terms of need and risk, and even where within that tier they are deemed to be – is best informed by looking at a combination of factors as opposed to a single piece of evidence. Furthermore, any such informed assessment requires a professional judgement.

Appendix 2

Pilot Areas for Early Intervention Support Services

Belfast Outcomes Group Area

- Upper Springfield & Whiterock Family Support Hubs
    - Electoral wards of Crumlin (part) Upper Springfield & Whiterock
- Greater Shankill Family Support Hub
    - Electoral wards of Glencairn; Highfield; Shankill & Woodvale;
- Inner East Belfast Family Support Hub
    - Electoral wards of Island; Ballymacarret; Woodstock; The Mount; Sydenham; Bloomfield; Orangefield; Ballyhackamore & Ravenhill
- South Belfast 1 Family Support Hub
    - Electoral wards of Botanic; Shaftesbury; Ballynafeigh; Rosetta; Minnowburn; Beechill (Belvoir Estate)
- Lower North Belfast Family Support Hub
    - Electoral wards of Newlodge; Duncairn; Fortwilliam & Castleview wards, and part of Chichester Park; Bellevue &WaterWorks wards (i.e. on right hand side of the Antrim road)
- Outer North Belfast Family Support Hub some areas only
    - Electoral Wards of Ballysillan, Ligoneill & Upper Part of Ardoyne

Northern Outcomes Group Area

- To include areas covered by the Ballymena, Larne and Carrickfergus Family Support Hubs
    - Electoral Wards of Academy; Ahoghill; Antiville; Ardeevin; Ballee; Ballykeel; Ballyloughan; Broughshane; Ballycarry; Ballyloran; Blackcave; Blackhead; Bluefield; Boneybefore; Burleigh Hill; Carnlough; Carncastle; Castle Demesne; Central; Clipperstown; Craigyhill; Craigywarren; Cullybackey; Dunclug; Dunminning; Eden; Fairgreen; Galgorm; Gardenmore; Glenarm; Glenravel; Glenwhirry; Glynn; Gortalee; Grange; Greenisland; Harbour; Harryville; Islandmagee; Kells; Killycrot; Kilwaughter; Knockagh; Love Lane; Milebush; Moat; Northland; Park; Portglenone; Slemish; Summerfield; Sunnylands; Townparks; Victoria; Whitehead & Woodburn.

South Eastern Outcomes Group Area

- To include areas covered by the Ards Family Support Hub
    - Electoral Wards of Ballycrochan; Ballygowan; Ballyholme; Ballymaconnell; Ballymagee; Bangor Castle; Bloomfield; Broadway; Bryansburn; Ballyrainey; Ballywalter; Bradshaws Brae; Carrowdore; Central; Churchill;Clandeboye; Comber East; Comber North; Comber South; Comber West; Conlig; Craigavad; Crawfordsburn; Cultra; Donaghadee North; Donaghadee South; Dufferin; Glen; Gregstown; Groomsport Harbour; Holywood Demesne; Holywood Priory;Killinchy; Kircubbin; Lisbane; Loughries; Loughview; Millisle; Movilla; Portaferry; Portavogie; Princetown; Rathgael; Scrabo; Silverstream; Springhill; Westwinds; Whitespots & Whitehill.

Southern Outcomes Group Area

- To include the area covered by Craigavon & Banbridge Family Support Hub
  - Electoral Wards of Ballydown; Ballyward; Banbridge West; Bannside; Dromore North; Dromore South; Edenderry Banbridge; Fort; Gilford; Gransha; Katesbridge; Lawrencetown; Loughbrickland; Quilly; Rathfriland; Seapatrick; The Cut; Aghagallon; Annagh; Ballybay; Ballyoran; Bleary; Brownstown; Church; Corcrain; Court; Derrytrasna; Donaghcloney; Drumgask; Drumgor; Drumnamoe; Edenderry (Craigavon); Kernan; Killycomain; Knocknashane; Magheralin; Mourneview; Parklake; Taghnevan; Tavanagh; The Birches; Waringstown & Woodville.

Western Outcomes Group Area

- To include the area covered by Strabane Family Support Hub and some of the areas covered by Ethos, Family First, Outer West and Waterside Family Support Hubs
  - Electoral Wards of Artigarvan; Ballycolman; Brandywell; Castlederg; Clare; Creggan Central; Creggan South; Crevagh; Culmore; Dunnamanagh; East Strabane; Finn; Glenderg; Plumbridge; Newtownstewart; North Strabane; Rosemount; Shantallow East; Shantallow West; Sion Mills; Slievekirk; South Strabane; Springtown; Strand Derry; The Diamond Victoria Bridge; Victoria Derry & West Strabane.

Early Intervention Support Service Pilot Areas

Northern Area EISS Pilot

Antrim and Ballymena FSH

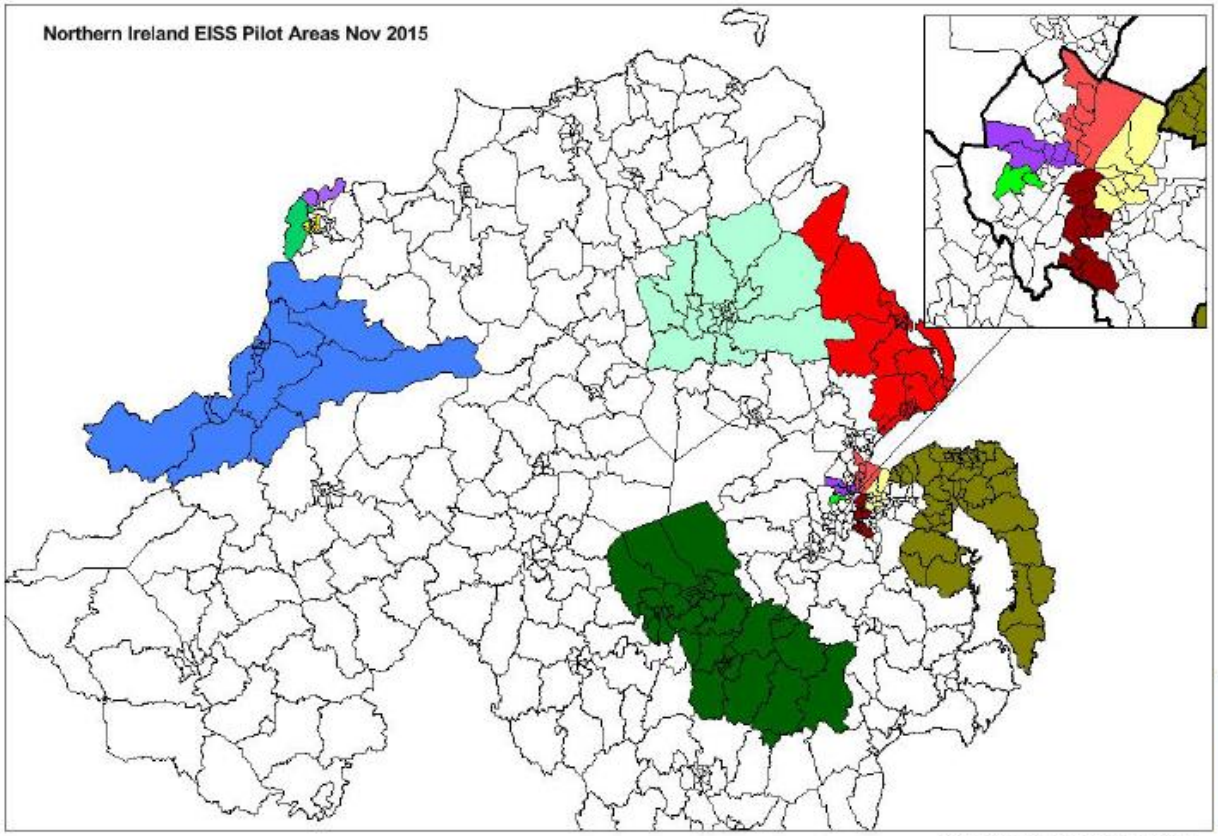
Larne & Carrickfergus

Please Note: Antrim wards are not covered by the EISS

Western EISS Pilot

- Strabane FSH
- Ethos FSH
- Family First FSH
- Outer West FSH
- Waterside FSH

Please Note: Only some Wards are covered in Ethos, Family First, Outer West & Waterside FSHS



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Belfast EISS Pilot

- Inner East Belfast FSH
- Lower North Belfast FSH
- Greater Shankhill FSH
- South Belfast I FSH
- Upper Springfield & Whiterock FSH
- Outer North Belfast FSH

Please Note: Upper North Belfast FSH only includes Electoral Wards of Ballysillan, Ligoneill & Upper Ardoyne.

South Eastern EISS Pilot

North Down & Ards FSH

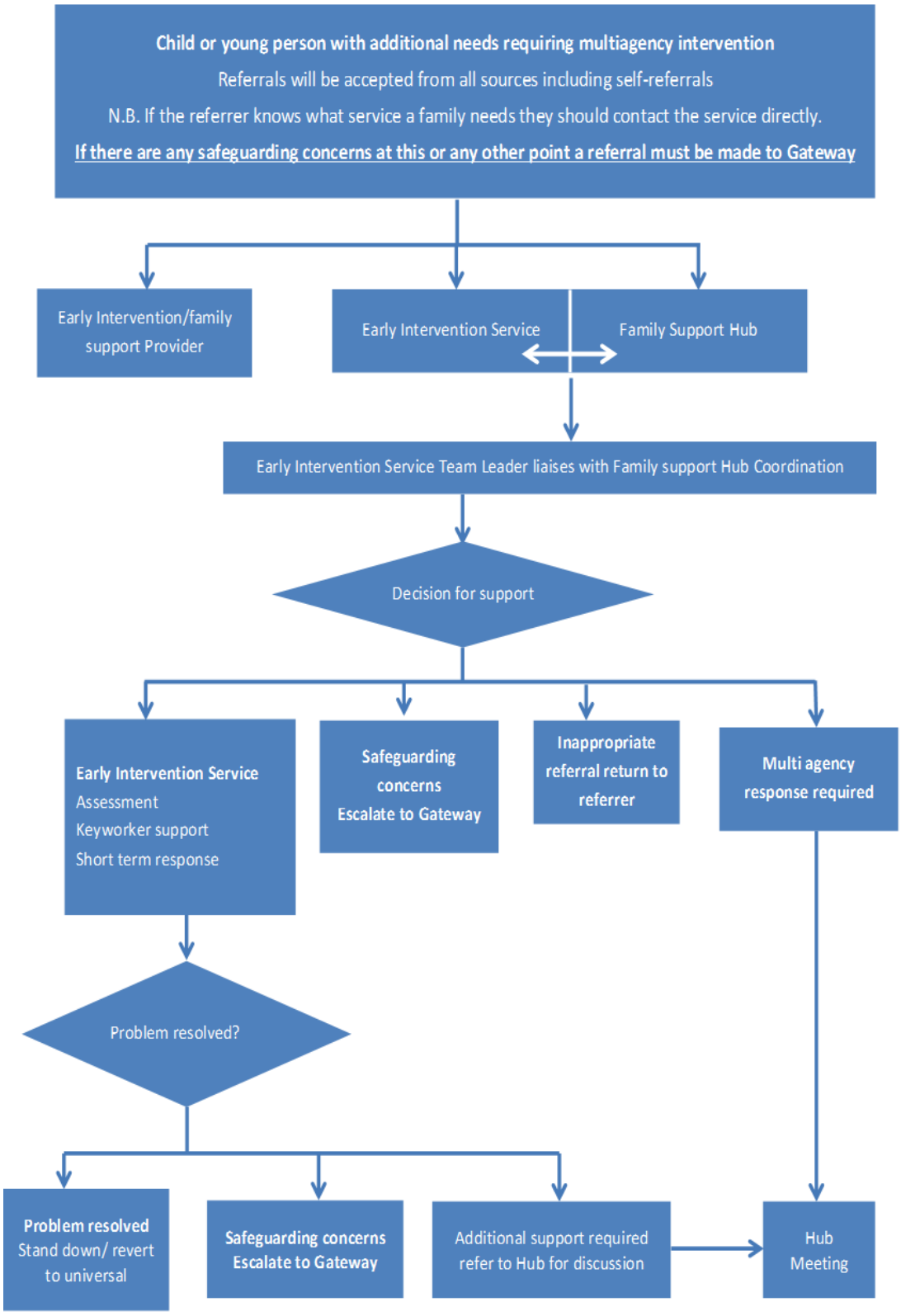
Southern EISS

Craigavon and Banbridge FSH

Note: Shading depicts areas covered within Family Support Hubs

Appendix 3

Early Intervention Support Service Process for Service Delivery



Appendix 4

Early Intervention Support Service Request for Support Form

The Early Intervention Support Service works with families to enable them to make changes through a combination of practical support, parenting programmes, and brief, solution-focused approaches. The service also offers Family Group Conferencing, which is a process led by family members. The aim is to support families to find their own solutions to problems, particularly where there are concerns about children's welfare.

Request for support cannot be considered unless signed consent from family is provided

About the Parent(s)/Carer(s)

Name of Person(s) with Parental Responsibility:
Date of birth:

Relationship to Child/ren:

Address: Postcode: Telephone number:	GP name: Address: Telephone number:

About the child/ren

First Name	Surname	DOB	Gender	School	Ethnicity

Current address (if different from above):
Address:

Postcode:

Family composition (please tick as appropriate)

One parent family		Two parent family							
Home both parents		Home one parent + partner			Home one parent		Unknown		
Kinship/carer(s)		Guardian			Other Please specify below				

Additional Information

Is an interpreter required for child(ren)? Y / N	Which language?
Is an interpreter required for parent/carer(s)? Y / N	Which language?
Does either carer or child/ren have a disability or other additional support needs? Please give details	

Additional Referrals

Has a referral been made to any other service or agency including the Family Support Hub for any member(s) of this family? If **yes** please provide details of additional referrals made in box below	Yes		No	
Has the child/young person previously worked with the social work service? If **yes** please provide details below	Yes		No	

Services currently supporting the family e.g. HV/CAMHS/Surestart/Homestart

Service	Contact name	Agency Address	Number	email

Reason for request for support (please tick as appropriate)

Adult mental health issues		Bereavement support (child)	
Bereavement support (adult)		Child care support	
Counselling services for children/young people		Counselling services for carer(s)/parent(s)	
Counselling families		Disability support	
Domestic violence		Drug/alcohol related harm child/young person	
Drug/alcohol related harm/abuse parent(s)/carer(s)		Education & employment support	
Emotional & behavioural support pre-school		Emotional & behavioural support primary school	
Emotional & behavioural support post primary school		Emotional & behavioural support carer(s)	
Family breakdown		Financial support	
Housing		Homelessness	
Offending (at risk) behaviour		Parenting programme/support	
Practical support		School attendance	
Self- harming child/young person		Self-care support	
Young carer		Youth activities/support	

Other reason please state:

Brief description of current concerns/issues prompting request for support

Outline of any work that has been undertaken with the family/individual including any successes

Family/individual views: What is the family/individual hoping to achieve from the request for support?

Strengths already existing in the family to help them make the changes?

Concerns and or Risks: Are you aware of any concerns and or risks that the EISS should be aware of before contacting or visiting the family/individual e.g communication difficulties, history of aggression to professionals, domestic abuse etc

About the person completing this form	
Name:	Telephone number:
Agency (if applicable):	Email:
Address:	
Signature:	Date:

Consent				
Parent(s)/Carer(s)				
Are the parent(s)/carer(s) of all the children/young people aware the request for support is being made?	Yes		No	
Do they consent to the request for support being made?	Yes		No	
If **NO** please explain				
Child(ren)/Young Person(s)				
Are all the children/young people in the family aware the request for support is being made?	Yes		No	
Do they consent to the request for support being made?	Yes		No	
If **NO** Please explain				

Consent to request for support		
Family **MUST** consent to request for support, the request cannot be considered unless signed consent is provided. Sign below to confirm agreement with this request.		
Name	Signature	Date
Name of young person (if 12years or over):		
Name of young person (if 12years or over):		
Name of young person (if 12years or over):		
Name of person with parental responsibility:		
Name of referrer:		

Implied consent to request for support	
For requests for support made by telephone, the worker who spoke with the family and completed the referral may sign it on behalf of the family. This person must be clear with the family that they have agreed to give consent for support and for the above information to be retained. Families must sign the consent form at their earliest convenience and before the support service begins. Sign below to confirm agreement with this request.	
Signature of person completing form:	
Date:	

Consent to share information	
I, (INSERT NAME)_____, agree for the information within this form to be shared with (INSERT ORGANISATION/BODY/INDIVIDUAL)_____	
Signature of person with parental responsibility:	
Date:	

By signing this request for support form, families give us consent to talk to the person who completed the form and the family support hub coordinator. We will make contact with the family within ten working days of receiving the request and will seek consent to talk to other professionals who are involved with the child / young person as appropriate.

Please return this form to: Contact details of individual organisation

Additional information recorded from contact with referrer

Early Intervention Support Service Parent/Carer Questionnaire

In completing this questionnaire, I give consent for the information to be used for monitoring and evaluating the Early Intervention Support Service. I understand that this information will be anonymous and I will not be identified in any evaluation.

ID Number	

1. When you started, did the worker tell you enough about the service?	Yes	
	No	
2. Did you find the staff helpful?	Yes	
	No	
3. Did you find the staff reliable?	Yes	
	No	
4. Which parts of the service were helpful or unhelpful:		
• Individual sessions with you	Helpful	
	Unhelpful	
	N/A	
• Having a named worker	Helpful	
	Unhelpful	
	N/A	
• Individual sessions with your child	Helpful	
	Unhelpful	
	N/A	
• Family Sessions	Helpful	
	Unhelpful	
	N/A	
• Practical Support	Helpful	
	Unhelpful	
	N/A	
5. What did you think about the time available for the sessions?	Just right	
	Too long	
	Too Short	
6. Overall how satisfied were you with the service?	Very Satisfied	
	Satisfied	
	Not Satisfied	

7. What score would you give the service out of 5?

Not Good	Fair	Good	Very Good	Excellent
1	2	3	4	5

8. Have you any comments about the service? (Please write these below)

THANK YOU!

For Completing this Form!

Early Intervention Support Service Young Person's Questionnaire

In completing this questionnaire, I give consent for the information to be used for monitoring and evaluating the Early Intervention Support Service. I understand that this information will be anonymous and I will not be identified in any evaluation.

ID Number	

1. Was your worker helpful?	Yes	
	No	
2. Did the service make things better for you?	Yes	
	No	
3. How happy were you with the service?	Very Happy	
	Happy	
	Not Happy	

4. What score would you give the service out of 5?

Not Good	Fair	Good	Very Good	Excellent
1	2	3	4	5

5. Have you any comments about the service? (Please write these below)

THANK YOU!

For Completing this Form!

The ATLANTIC Philanthropies

Early Intervention Transformation Programme

Appendix 7

Northern Ireland Executive
www.northernireland.gov.uk
DELIVERING SOCIAL CHANGE

EISS

The Early Intervention Support Service

for families with children between 0 and 18 years old

WHAT IS THE EARLY INTERVENTION SUPPORT SERVICE?

The EISS is a service that offers short term support to families with children 0 -18 years who have additional needs or are facing challenges that are difficult to overcome such as:

- Issues at school
- Behavioural difficulties
- Coping with illness or bereavement
- Family difficulties
- Domestic violence
- Difficulties with developmental or health related issues

The ATLANTIC Philanthropies

Early Intervention Transformation Programme

This project is funded by the Northern Ireland Executive's Delivering Social Change fund

WHAT DOES THE EISS OFFER?

- A range of supports tailored to meet the needs of individual families. EISS works with families for a time limited period of around 12 weeks
- A project worker from EISS will meet with you and your child/children to help identify both your needs and strengths
- EISS works with parents and children to develop a plan which is individually tailored to meet the identified needs
- You and your child/children participate in putting the plan in place, reviewing the plan and deciding when needs have been met
- EISS can provide information and help you to access other services in your area

CONTACT US:

For further information, or to make an enquiry, please contact:

Belfast Area

EISS Belfast
Senior Practitioner - NIACRO
Amelia House
4 Amelia Street
Belfast
BT2 7GS
Tel: 028 9032 0157
eissbelfast@niacro.co.uk

Northern Area

EISS Northern
Action for Children
St Anthony's Primary School
43 Fairway
Larne
BT40 2BG
Tel: 028 2827 6044
neiss@actionforchildren.org.uk

South-Eastern Area

EISS South-Eastern
Barnardo's
Simpson Family Resource Centre
40 Manse Road
Bangor
BT20 3DE
Tel: 028 9127 1538
simpsonEISS@barnardos.org.uk

Southern Area

EISS Southern
Senior Practitioner
NIACRO/SPACE
26 Carlton Street
Portadown
BT62 3EP
Tel: 028 3833 1168
eisssouthern@niacro.co.uk

Western Area

EISS Western
Action for Children
3rd Floor Ebrington
Business Centre
Glendermott Road
L'Derry. BT47 6BG
Tel: 028 7134 2286
weiss@actionforchildren.org.uk

HSC Public Health Agency
Project supported by the PHA

General information on family support hubs and services in your area can be obtained from:
Family Support NI
http://www.familysupportni.gov.uk

Early Intervention Transformation Programme

Believe in children
Barnardo's Northern Ireland

niacro

space

action for children
Northern Ireland

GENERAL INFORMATION ON FAMILY SUPPORT HUBS AND SERVICES IN YOUR AREA CAN BE OBTAINED FROM:

Family Support NI
http://www.familysupportni.gov.uk

EISS

The Early Intervention Support Service

for families with children between 0 and 18 years old

HOW TO REQUEST SUPPORT FROM THE EISS

To make a request for support please contact:

Belfast Area – NIACRO
email: eissbelfast@niacro.co.uk
tel: 028 9032 0157

Northern Area – Action for Children
email: neiss@actionforchildren.org.uk
tel: 028 2827 6044

Southern Area – NIACRO/SPACE
email: eisssouthern@niacro.co.uk
tel: 028 3833 1168

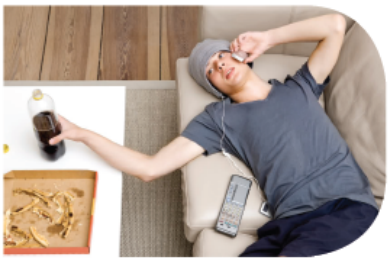
South-Eastern Area – Barnardo's
email: simpsonEISS@barnardos.org.uk
tel: 028 9127 1538

Western Area – Action for Children
email: weiss@actionforchildren.org.uk
tel: 028 7134 2286

Public Health Agency
This project is funded by the Northern Ireland Executive's Delivering Social Change fund
Early Intervention Transformation Programme
Northern Ireland Executive
DELIVERING SOCIAL CHANGE
The ATLANTIC Philanthropies

0 - 18 YEARS

EARLY INTERVENTION SUPPORT SERVICE



WHAT IS THE EARLY INTERVENTION SUPPORT SERVICE?

The Early Intervention Transformation Programme (EITP) is delivered as part of the Delivering Social Change agenda in partnership with Atlantic Philanthropies. It represents a new joined up working and funding across five Government Departments to drive through initiatives which will have a significant impact on outcomes for families with children 0-18 years old. As part of EITP a new Early Intervention Support Service (EISS) is being established in five areas across Northern Ireland. The aim of the EISS is to support families when difficulties arise before they need involvement with statutory services. The EISS will deliver and coordinate person centred, evidence based, early intervention for families with children 0-18 years old within Tier 2 of the Hardiker Model.

WHY WOULD FAMILIES NEED THE EISS?

Some families with children 0-18 years old require additional support without which they may be at risk of not reaching their full potential. The EISS offers support to families with children 0-18 years that have additional needs that cannot be met through the range of existing universal services. The additional support may relate to health, social or educational issues. Examples of the challenges families may experience include:

- Difficulties with developmental or health related issues
- Issues at school
- Difficult behaviour
- Emotional wellbeing
- Family difficulties
- Coping with illness or bereavement
- Lack of life skills
- Domestic violence

Preventing issues getting worse is better than dealing with them later.

WHAT DOES THE EISS OFFER?

The EISS provides a range of supports tailored to the needs of each individual family's specific circumstances. This is achieved through a key worker who works with the whole family usually in their own home using a strengths based approach which is individually tailored to the needs and priorities identified from the whole family assessment.

The EISS works with families for a time limited period – approximately 12 weeks. A range of both hands on practical and therapeutic interventions including motivational interviewing and solution focused brief therapy will be used.

The EISS also has access to a range of parenting and support programmes such as Strengthening Families and Incredible Years and also Family Group Conferencing (FGC).

WHAT ARE THE CRITERIA FOR REQUESTING SUPPORT FROM THE EISS?

Requests for support for the EISS are welcome from any organisation or individuals, including self requests, provided they meet the criteria for support as detailed below:

- Child or young person 0-18 years
- Child or young person resides within the EISS catchment area
- Child or young person has additional needs that cannot be met through the range of existing universal services
- Family should not currently have involvement with a statutory social work service
- Informed consent to request for support from the person with parental responsibility
- Informed consent to request for support from the child or young person if 12 years of age or over and has the ability to give consent

PLEASE NOTE:
If there are any safeguarding concerns a referral must be made to the relevant Gateway Service: (028) 9050 7000

Appendix 8

Early Intervention Support Service Family Group Conference Referral Pathway

Referral for Family Group Conferencing

- Family Identified by Early Intervention Support Service (EISS) for Family Group Conferencing (FGC).
- Referral form completed by the EISS with informed consent of parent(s)/carer(s) and forwarded to the relevant FGC service
- FGC Team leader liaises with EISS to confirm family engagement/motivation and issue(s) to be addressed.
- Referral allocated to FGC Coordinator within 3 working days.
- Referrer informed by email of FGC Coordinators contact details.

↓

Preparation

- FGC Coordinator makes contact with family within 10 working days of referral.
- Preparation for family meeting completed usually in 6-8 weeks however depends on individual family circumstances.
- FGC Coordinator engages directly with child, family, extended family, friends and professionals.
- Information givers agreed

↓

Family Group Conference

- Information sharing.
- Private family time – voices of child and family members, discussion and agreements made
- Family Plan – actions and contingency plan agreed

↓

Implementation of the Plan

- Plan produced and circulated to family network and other professionals with the consent of the family within 7 days of the FGC
- Family appoint a monitor to oversee the plan and ensure all agreed actions are fulfilled

↓

Review

- Plan is reviewed with family's agreement at any time (usually 12 weeks)
- Support and solutions are sought for any actions not fulfilled and if necessary to address a change in circumstances.

Contact Details of Family Group Conferencing Teams

Belfast & South Eastern Areas

Name: Lesley Mackie FGC Service

Address: Hilden Resource Centre, 1B Glenmore Park, Lisburn, BT27 4RT

Telephone: 028 92667990 or 07739879530

Email: lesley.mackie@setrust.hscni.net

Northern Area

Name: Nuala Power, FGC Service Manager

Address: Ferguson House, Manse Road, Newtownabbey, Co Antrim, BT36 6RW

Telephone: 028 90341573

Email: nuala.power@northerntrust.hscni.net

Southern Area

Name: Davina Clements, Senior Practitioner, FGC Service Barnardos

Address: 15 St Colmans Park, Newry, BT34 2BX

Telephone: 07962567246

Email: davina.clements@barnardos.org.uk

Western Area

Name: Berna Harley Manager/Practitioner FGC Service

Address: Rossneal, 86 Rossdowney Road, Derry, BT47 5SU

Telephone: 028 71 314080 Ext: 224474

Email: Bernadette.Harley@westerntrust.hscni.net

Appendix 9

Final Draft Step Up / Step Down Protocol July 2015

Gateway Service and Family Support and Intervention Services and the Family Support Hubs

Rationale for Protocol

The purpose of this protocol is to promote and strengthen the safeguarding of vulnerable children and young people along the continuum of need that reflects the Northern Ireland Family Support Model (Hardiker).

Definition of Family Support Hub

A Family Support Hub is a multi-agency network of statutory, voluntary and community organisations which either provide early intervention services or work with families who need early intervention services by signposting to the most appropriate service that can meet their present needs in the most effective and timely manner.

Key Principles Underpinning Protocol

- **Safeguarding** vulnerable children is of paramount concern.
- **Communication and connectedness** are central to safeguarding children. In this respect the Health and Social Care Trust will ensure that each Family Support Hub will have access to an identified Band 6 Social Worker from Gateway and/or Family Intervention Services.
- **Consent** –parental consent is required in respect of the referral process. At all times the paramouncy of the child's well-being is the primary focus.
- **Child's Rights Approach** – promoting safety, well-being and the voice of the child is central to this protocol and application.
- **Confidentiality-** information should only be shared with the consent of the individual concerned unless in your judgement lack of consent can be over-ridden as this is deemed necessary to ensure the safety of a child or young person.

Safeguarding Children – Key Parts

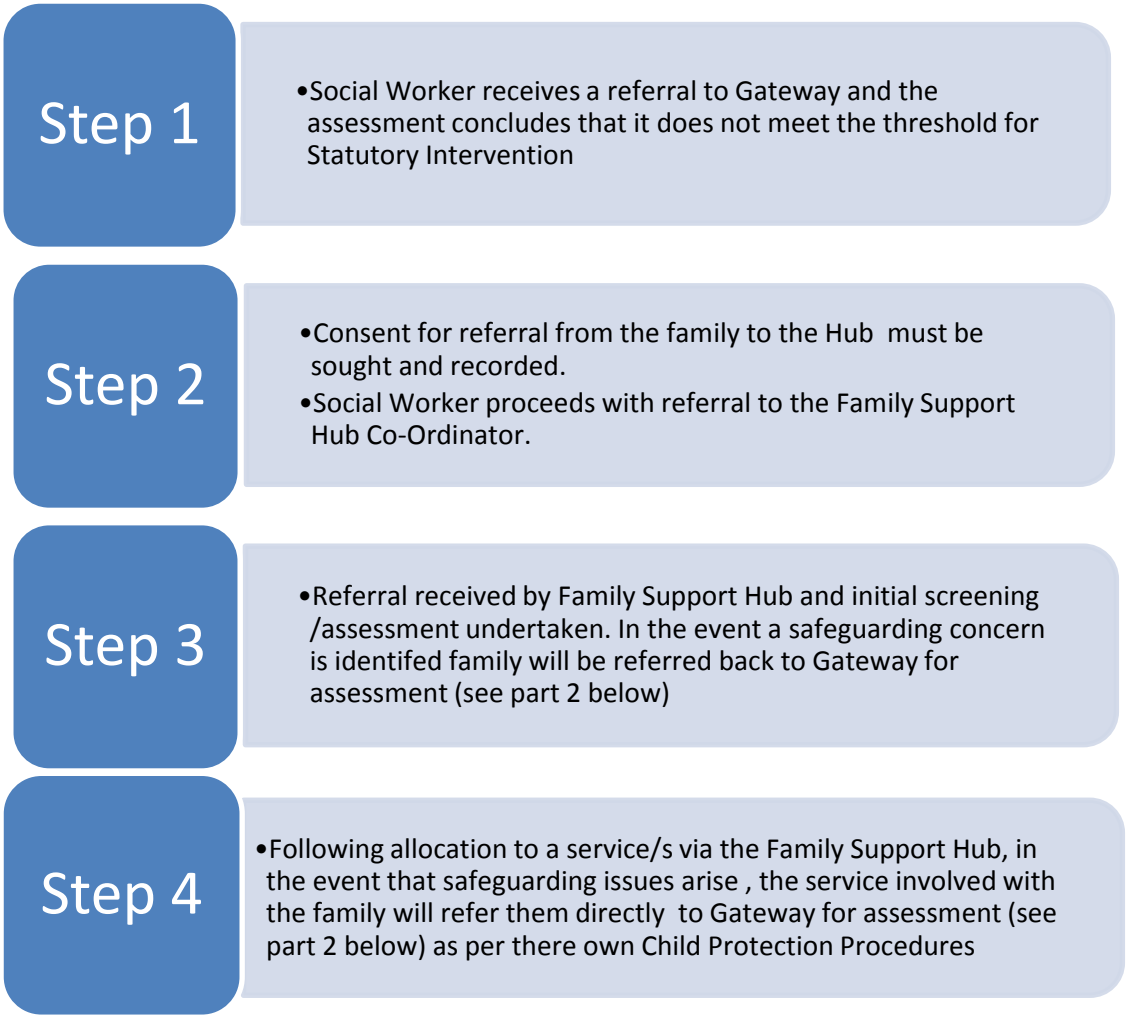
This process has 3 key parts in terms of the relationship between and across the Family Support Hubs, Gateway Services and Family Support and Intervention
Teams.

Part 1: Step Down from Gateway to the Family Support Hub

Part 2: Step Up from Family Support Hub to Gateway

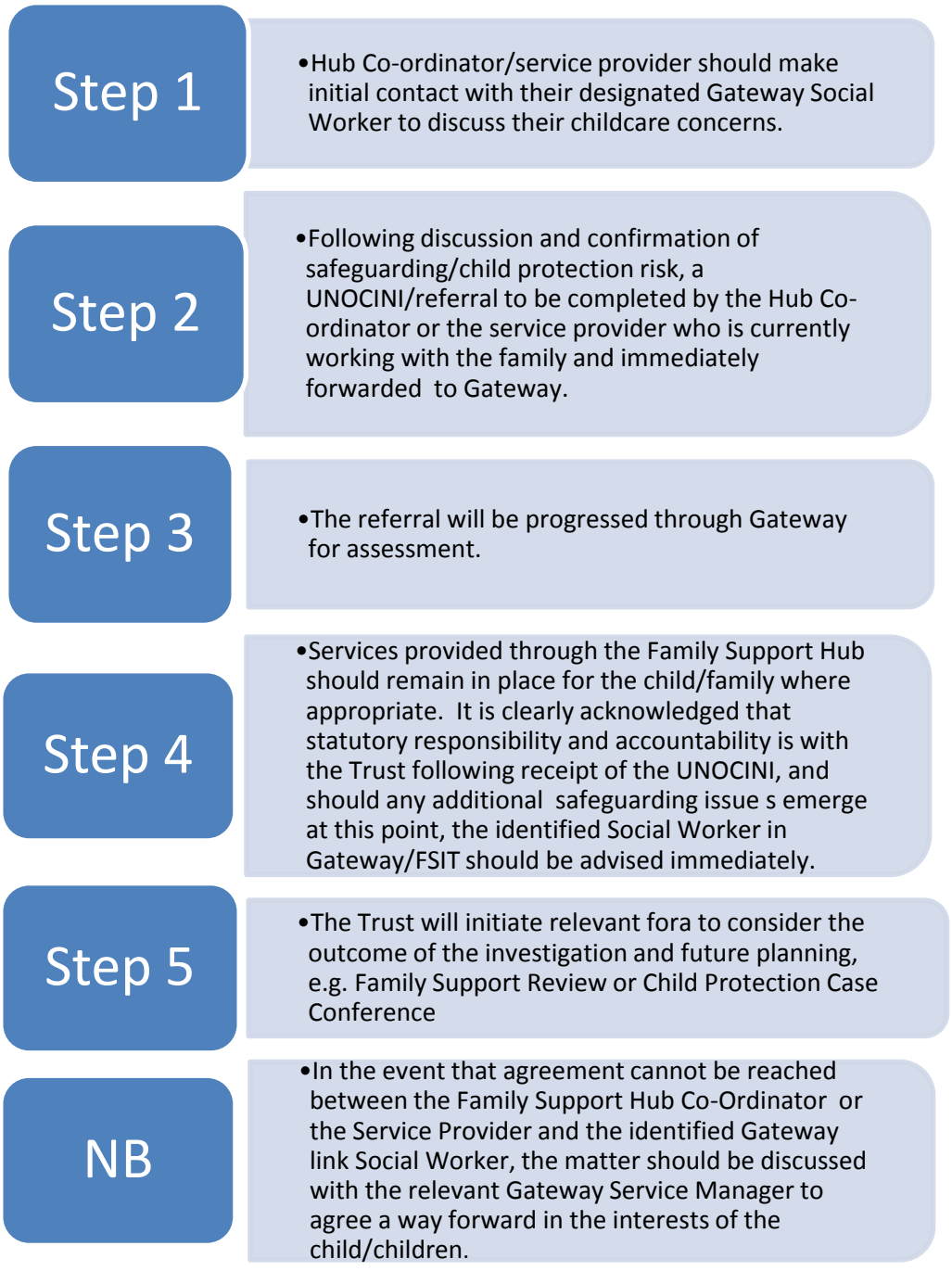
Part 3: Step Down from Family Intervention Services to Family Support Hub

Part 1 Step Down from Gateway to the Family Support Hub



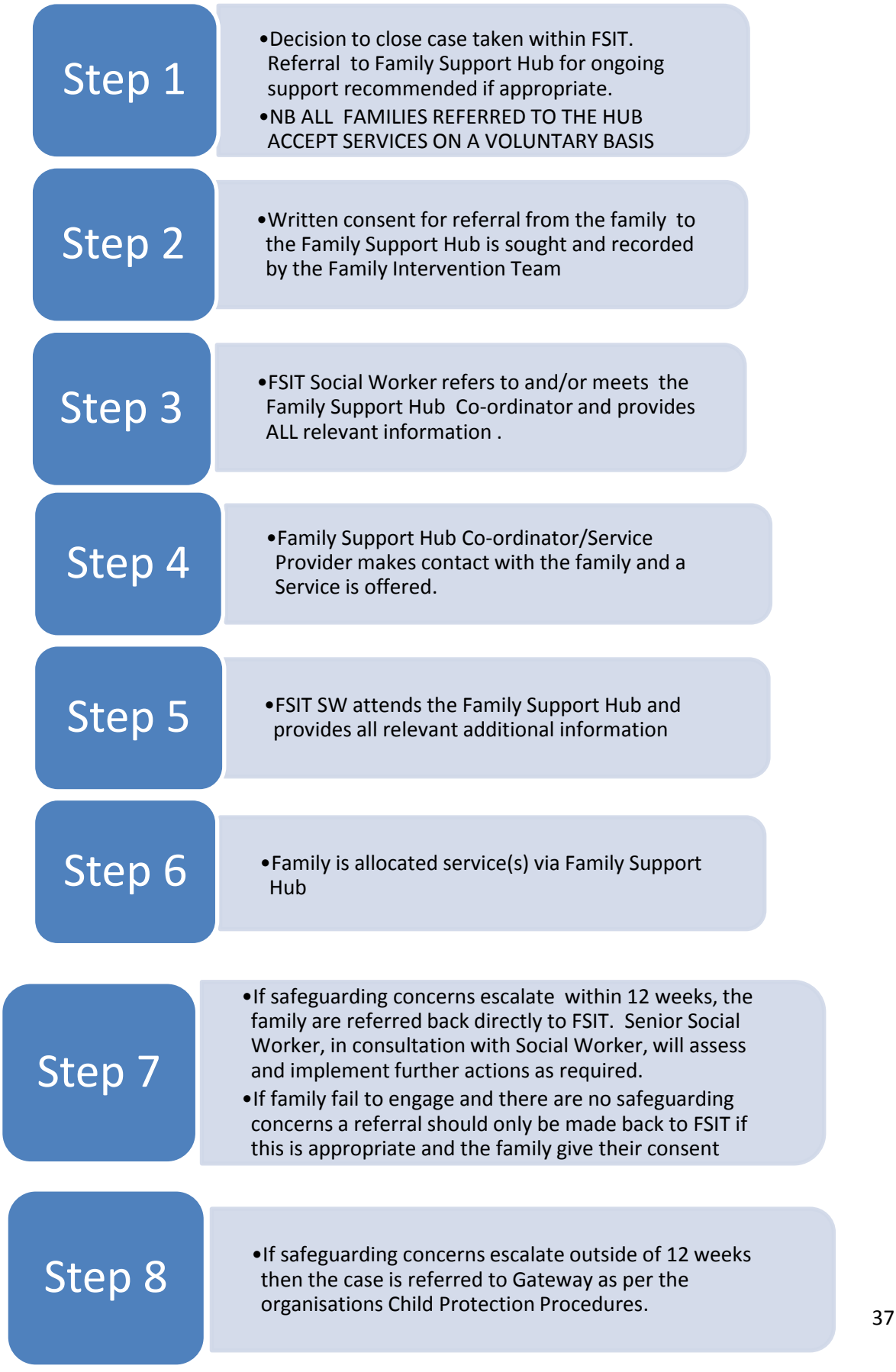
Part 2 Step Up from Family Support Hub to Gateway

In the event of a child protection/safeguarding concern in respect of child/children at Tier 2 being identified by the Hub Co-ordinator or service provider organisation.



Part 3 Step Down from Family Intervention Services to Family Support Hub

When a case within Family Intervention Services is being considered for closure and is deemed to no longer meet the threshold for statutory intervention but on-going Family Support is recommended to maintain progress the following steps apply:



Appendix 10

Outcomes Star

Implementing the Outcomes Star™ within EISS

Training

Before using the Outcomes Stars all staff must attend as a minimum, the one day introduction to the Star course. This helps to provide the essential knowledge and skills that is needed to use the Outcomes Stars™ and includes developing an understanding of the Steps to Effective Parenting underpinning the Family Star Plus™. These are summarised in five main stages: stuck, accepting help, trying, finding what works and effective parenting.

Outcomes Stars™

There are several versions of the Outcomes Star™ the following Stars will be available for use within the EISS - Family Star Plus™, My Star™ and Teen Star™

- **Family Star Plus™**
  The Family Star Plus™ focuses on eight core areas that have been found to be critical in enabling children to thrive and two additional scales that have a greater emphasis on the parents themselves. The Family Star Plus™ focuses clearly on the steps parents can take so their children grow up healthy and resilient. It assumes parents can do a lot to enable their children to thrive, even whilst tackling difficult issues themselves, such as alcohol or mental health problems. Other versions of the Star include My Star™ for children and young people and Teen Star™ for Teenagers that can be used alongside Family Star Plus ™.

- **My Star™**
  My Star™ is for use directly with children, either as a standalone tool or where the Family Star™ is already being used. It is holistic and can be used with children aged 4 to 18, it can however only be meaningfully completed as a collaborative tool with children aged 7 and above. Depending on the issues faced for those aged 14 and over the Teen Star™ may be more appropriate.

- **Teen Star™**
  Teen Star™ is used directly with teenagers it has been developed for use with young people in substance misuse services. It can be used in a range of other young people's services and should be considered for use with teenagers within the EISS depending on the presenting issues.

All families will have a minimum of one of the above Stars completed the Star to be completed will be at the discretion of the keyworker and will depend on the primary reason for referral to the EISS. In some instances it may be beneficial to complete more than one Star with individual family members - the Family Star Plus ™ with the parent and My Star ™ or Teen Star ™ with the child or young person.

Completing the Star

The process of completing the Star is intended to be helpful for families as well as providing useful outcomes data for the EISS. In order to participate meaningfully, it is critical that the parents understand the Star and the Steps to Effective Parenting. It may be useful to introduce the Star to parents before the session that they are asked to complete the Star.

The Star should be completed at the point of developing an action plan, ideally within four weeks. It is not usually appropriate to complete the Star at the first meeting with new families; it has been shown to work better once there is a relationship between the worker and the family and the worker has some knowledge of the family. If a parent is not willing or unable to engage in meaningful discussion of the Star areas in the first weeks, this can be recorded as a "worker-only" initial reading to provide a baseline.

The Star should be completed at two points during the twelve week intervention at the start ideally within the first four weeks and at the end of the service. Comparing the two Stars will give a clear picture of the outcomes for that family.

Using the Star scales

The Star is a flexible tool and there are options for drawing on the materials primarily

- Where a parent is on the Steps to Effective Parenting and therefore their level of engagement and perspective
- How comfortable someone feels talking about themselves and whether they are forthcoming or not
- The extent to which they are comfortable with written information in English

It is vital that the discussion and the score selected is based on the defined Steps to Effective Parenting, this will help ensure that scores are consistent throughout the EISS; the Family Star Plus™ User Guide should be adhered to.

Choosing a score

Arriving at a mutually agreed score on each of the scales can provide a rich basis for discussion and for learning about each family and how parents view themselves and their role as parents. There are a number of options available for agreeing a score including:

- Invite the parent to say where they consider themselves to be on the steps first, including the reasons for their choice.
- Suggest where you think someone is, based on your experience and discussion with them.
- Use both of these approaches and draw on any difference of opinion as a basis for further discussion.

Whatever process is used it is essential to be clear that the underlying Steps to Effective Parenting primarily measure a parent's attitude and behaviour in relation to each area of the star. The Star Notes section within the Star Chart may be used to record points from the discussion these notes are optional but can be useful when reviewing the Star and especially if the worker has changed.

All areas of the Star must be completed if some areas are not relevant as parent does not have an issue in that area or it is not relevant to them. If the worker feels the area poses no problems a score of 10 should be given.

Using the completed Star Chart as the basis for an action plan

When all areas have been completed each score should be marked on the Star Chart and completed online. The visual of the completed Star provides a basis for developing an action plan, including opportunities for asking Motivational Interviewing or Solution Focused questions to help parents build on their strengths and progress and apply these to other areas of their family life. The process of completing the Outcomes Star is an integral part of working with the service user and it is intended to support as well as measure change; as a result the assessment is part of the intervention. Discussion of where a service user is on the Outcomes Star scales and journey of change leads to discussions about next steps and action planning. An action plan with SMART actions should be completed for each family.

Quality and consistency in the use of the Star

Star data will provide an accurate picture of the progress of families if the scales are applied consistently according to the Steps to Effective Parenting. This can be achieved in a number of ways including

- **Staff supervision**
  Discussing a workers caseload based on their families' completed stars. This will help managers to ensure the Star is being used as planned and completed accurately, with an understanding of the Steps to Effective Parenting.
- **File Auditing**
  Regularly check that Star Charts are completed, accurate and stored confidentially. Check goals are SMART and actions are compatible with Journey of Change stage. Report back to the team.
- **Team Meetings**
  Draw service or caseload reports from Star Online, look at the Stars and discuss where they are on the Steps to Effective Parenting. This enables the team to develop a shared understanding of how to use the scales and become familiar with the Framework.

Data

Star data can be used in the following ways:

- Individual Star data is used to identify need and develop an action plan
- Star data can be collated to review caseloads
- Star data can be collated across all families within each EISS to provide service level outcomes
- PHA can compare the start points and progress made by families across all of the EISS

Appendix 11

HSC Public Health Agency

Early Intervention Transformation Programme

Early Intervention Support Service

Primary Carer Profile – Equality Questionnaire

Primary Carer Equality Information		
Date of Birth		
	Prefer not to say	
Gender	Male	
	Female	
	Other Gender please specify	
	Prefer not to say	
Ethnic Group	White	
	Chinese	
	Indian	
	Irish Traveller	
	Pakistani	
	Bangladeshi	
	Black Caribbean	
	Black African	
	Black Other	
	Roma Traveller	
	Mixed Ethnic Group	
	Other Ethnic Group please specify	
	Prefer not to say	
Country of Birth	Northern Ireland	
	England	
	Scotland	
	Wales	
	Republic of Ireland	
	Other please specify	
	Prefer not to say	
Religion	Protestant	
	Catholic	
	Jewish	
	Hindu	
	Muslim	
	Sikh	
	Buddhist	
	Other Religion please specify	
	Prefer not to say	
Disability	Yes	
	No	
	Prefer not to say	
Type of Disability	Physical	
	Learning	
	Sensory	
	Other Disability please specify	
	Prefer not to say	

HSC
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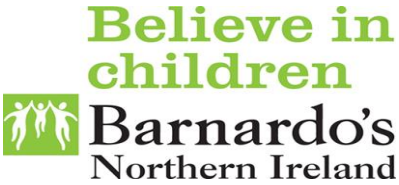
Agency

action for
children
Northern Ireland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