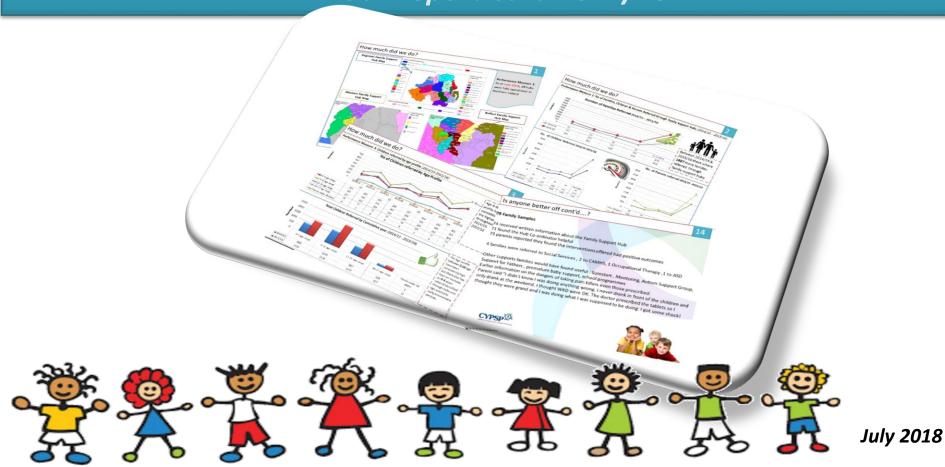
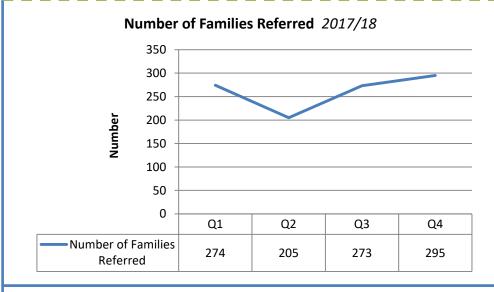


SEHSCT Family Support Hubs Report Card Annual Report Card 2017/18



How much did we do?

Performance Measure 1: No of Families, Children & Parents Referred through Family Support Hubs - 2017/18



No. of Families Referred

2017/

18

1047

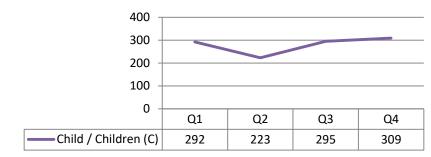
2016/

17

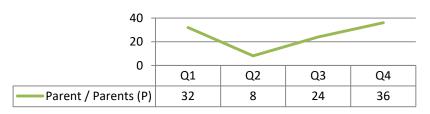
1006

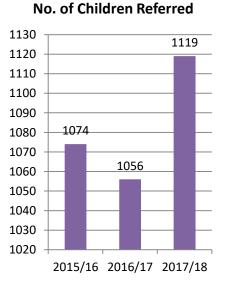
Since 2015/16 the number of families referred through family support hubs has increased year by year and now stands at **1047** in 2017/18.

No. of Children Referred 2017/18



No. of Parents Referred 2017/18





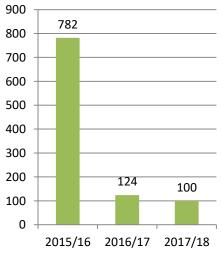
2015/

16

965

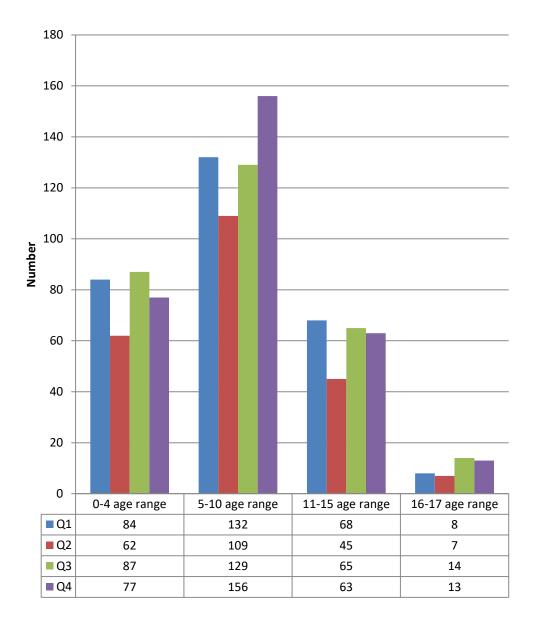
Families

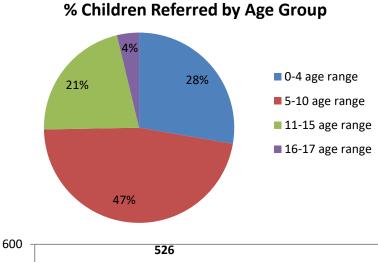
No. of Parents Referred

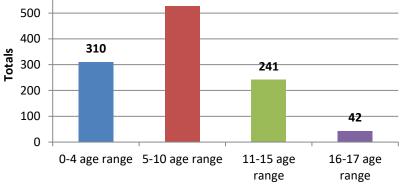


How much did we do cont'd...?

Performance Measure 2: Children Referred by Age Profile 2017/18



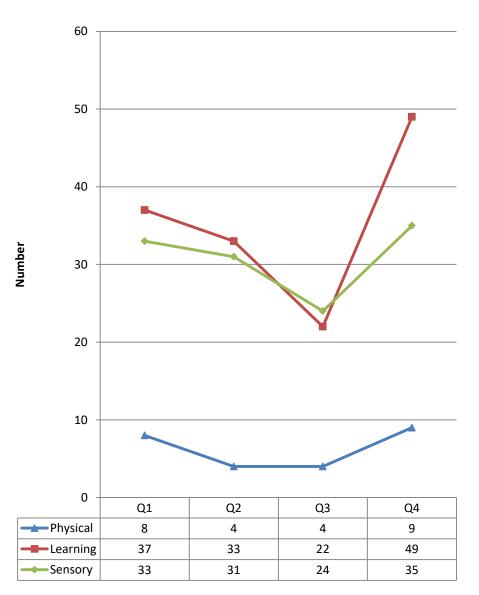




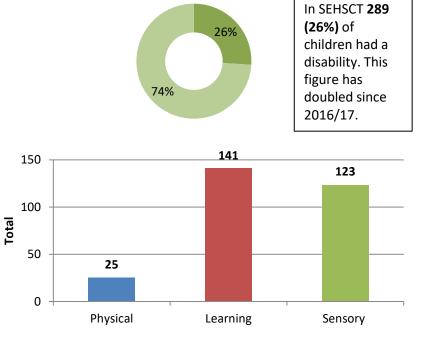
Age **5-10** profile has consistently been the highest throughout 2017/18 within SEHSCT, however referrals for the **0-4** age group has increased and the older age range **11-15** age group decreased in referrals from 2016/17.

How much did we do cont'd....?

Performance Measure 3: Children with a Disability Referred -2017/18





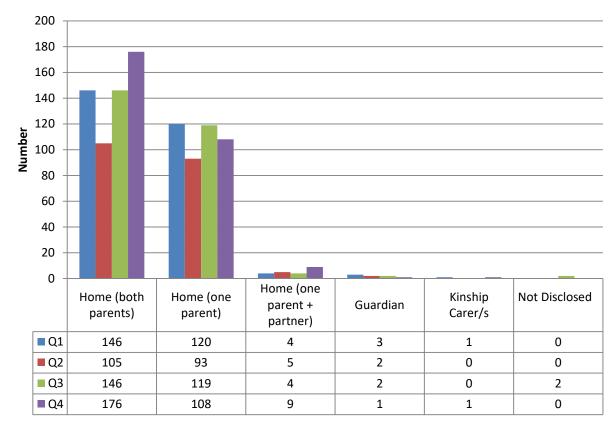


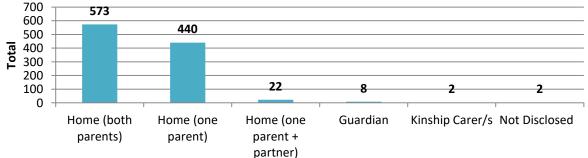
In 2017/18, Children with a **Learning Disability** had the highest number of referrals in the disability category throughout the South Eastern area, closely followed by **Sensory Disability**.



How much did we do? cont'd

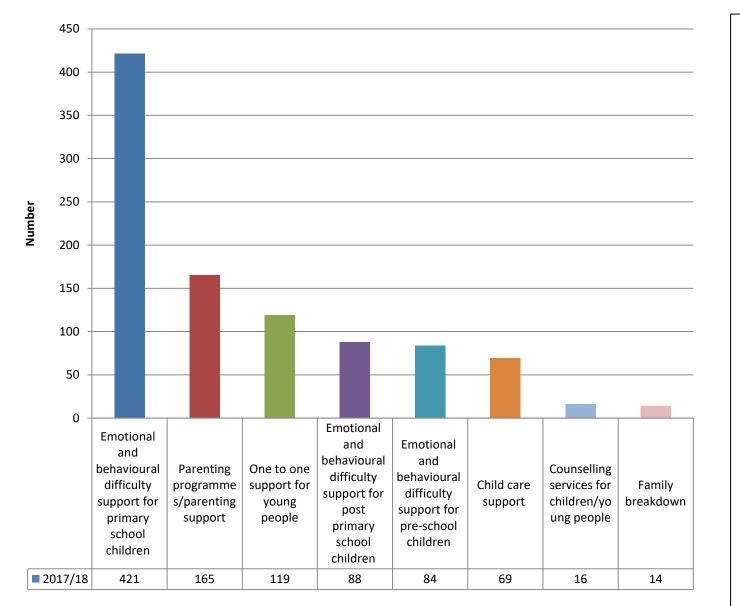
Performance Measure 4: Household Composition - 2017/18







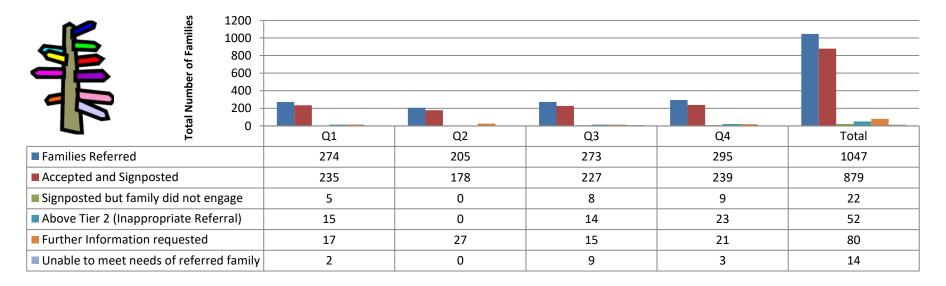
Home (both parents) is the largest household composition (**573**) as it was in 2016/17, with Home (one parent) the second household composition with **440**. There has been a small increase in the number of Guardians from 6 in 2016/17 to **8** in 2017/18 and Kinship Carers have decreased from 7 to **2** in 2017/18. Performance Measure 5: Main Presenting Reasons for Referral - 2017/18



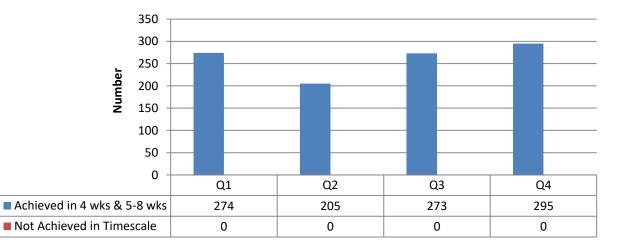
In 2017/18 Emotional **Behaviour Difficulty** (EBD) for primary school children was the main reason for referrals at 421, the same as in the regional report. This was followed by Parenting Programmes/ Parenting Support at 165 which has increased slightly since 2016/17 . One to One Support for Young People has increased to 119. EBD support for postprimary school children and EBD support for preschool children are 88 and 84 respectively.

How well did we do it?

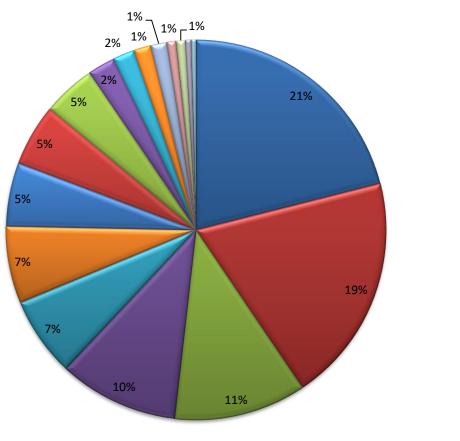
Performance Measure 6: Families Referred that were Accepted & Signposted, Above Tier 2 or Other Reasons for Outcome of Referral -2017/18



Performance Measure 7: Achieved in 4 weeks & 5-8 weeks or Not Achieved - 2017/18



The vast majority of referrals to Hubs were achieved within 4 weeks with only **4** achieved within the 5-8 wks timescale and none not achieved. This ensures families receive a timely response to their immediate needs from the Hub Coordinator. Performance Measure 8: Total Percentage of Referrals by Referral Agency -2017/18



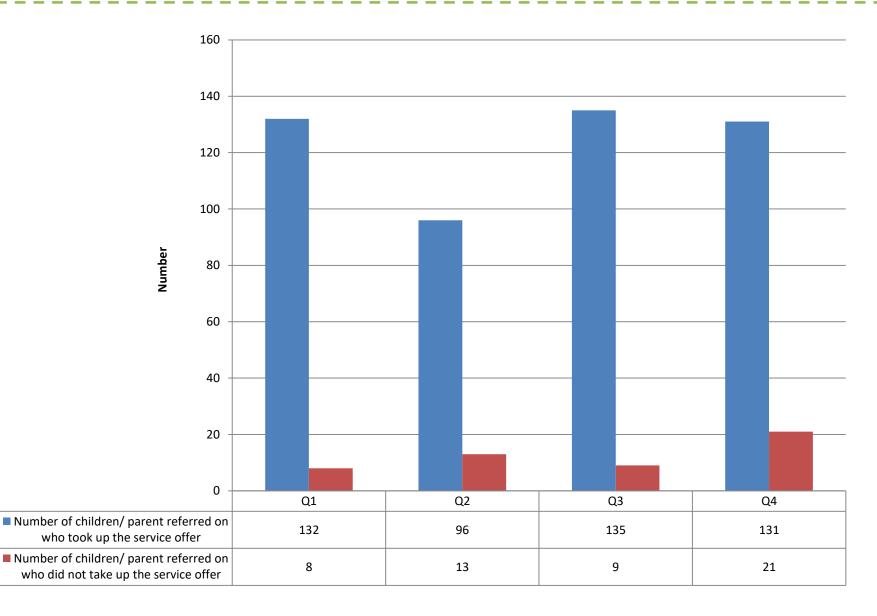


Paediatrician

The largest referrer in 2017/18 was from Paediatricians at 21% which has increased from 16%. GPs have decreased from 23% to 19%. Self-referrals has increased from 9% to 11% and Health Visitor also from 9% to 10% in 2017/18.

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

Performance Measure 9: Number of Parents / Children referred who did and who did not take up the service offer 2017/18



How well did we do it? cont'd

Performance Measure 10: 10 Standards Fully Implemented - 2017/18

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

All Hubs within the SE Trust have implemented the 10 standards and are working on action plans to improve the delivery of Hubs in each of the areas.



Family Samples

Family A:

A mother of a 5 year old with behavioural difficulties was referred by the Health Visitor. The family were referred to a local family support service.

The mother reports "I was happy with the service and information and support provided and how friendly the people are. I feel that I have had a positive outcome and feel that changes have been made, there is still some things to work on but I feel confident to do it on my own now. I feel positive changes have been made and there is real help for families, it is good to know there is support for people."

Family B:

A family with a 12 year old with a diagnosis of ADHD was referred to a service that could offer 12 weeks support. Parents found that they would have liked to continue longer especially as the young person is returning to school in September where a lot of issues occur and parents feels that they would like ongoing support at this time.

Family Samples

Family C:

A 15 year old girl was referred by her mother as the young person was suffering from anxiety and panic attacks. The family were referred to a local youth organisation. Mother later reported "It was great that my daughter could be seen at home, at a time that suited us. My daughter is now talking more and has gotten better from participating in the programme. She doesn't cry going to school anymore which is great."

Family D:

Parents of a 6 year boy self-referred to the Family Support Hub as there were concerns he may have ADHD as he was showing signs of slightly erratic behaviour and difficulty concentrating at home and in school. They were referred to a local project. As a result Mum felt that she gained confidence in managing her child's behaviour more effectively and was given the tools and information to help her child. Mum feels she understands her child more now. Contact with the school has been positive and they have also now offered more help and referred him to services within the school.