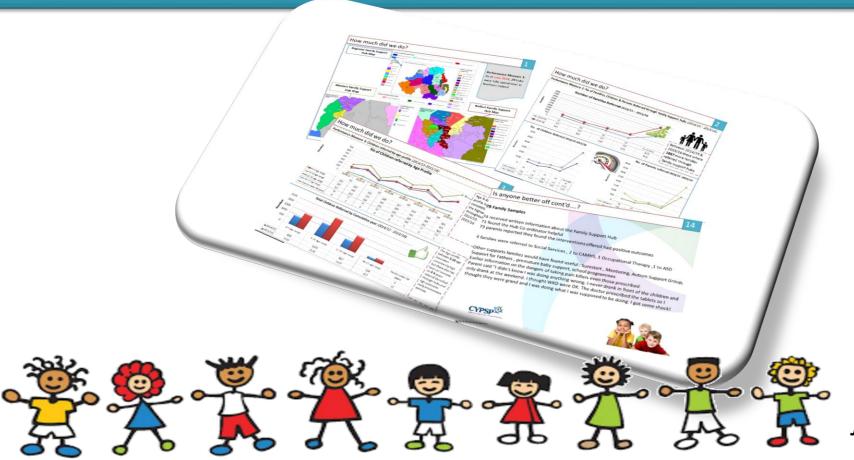


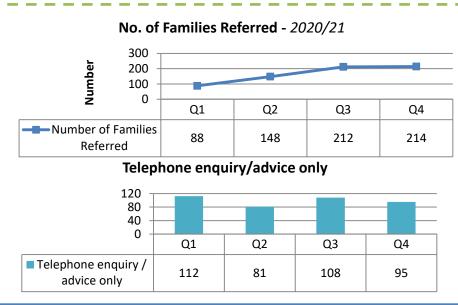
# SHSCT Family Support Hubs Report Card

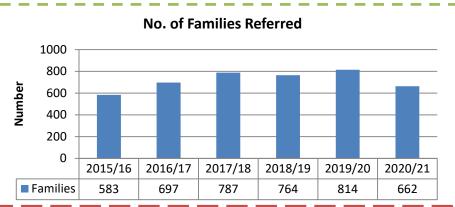
**Annual Report Card 2020/21** 



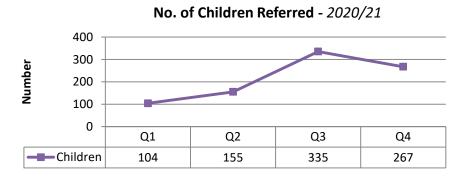
## How much did we do?

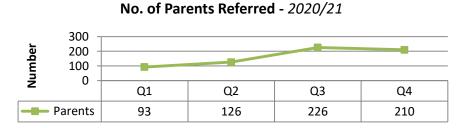
#### Performance Measure 1: No of Families, Children & Parents Referred through Family Support Hubs 2020/21

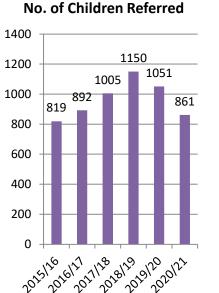


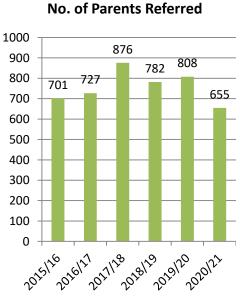


Throughout 2020/21 there were **662** families referred through family support hubs in the SHSCT area. This is a decrease of **152** from 2019/20. In addition there were **396** telephone enquiries/advice only.





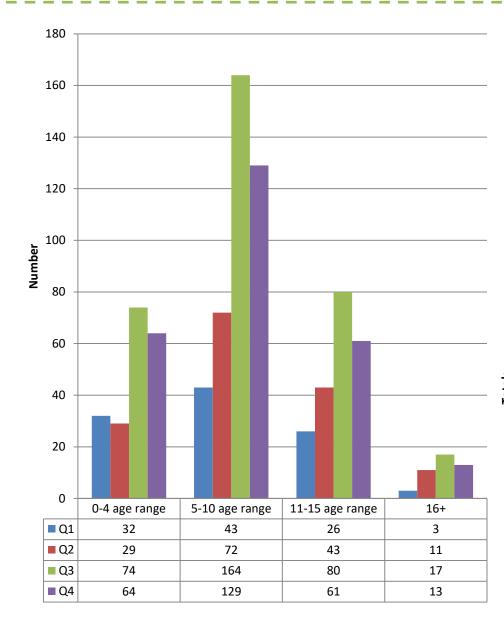


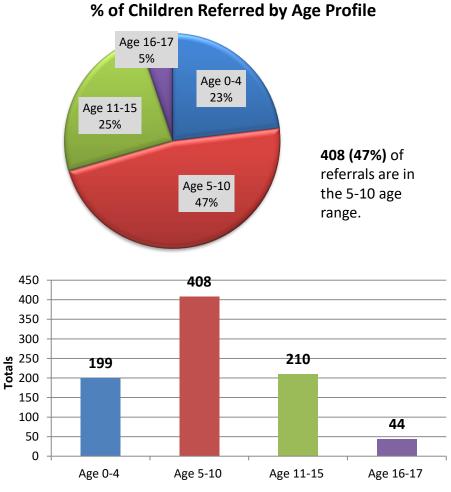


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## How much did we do?

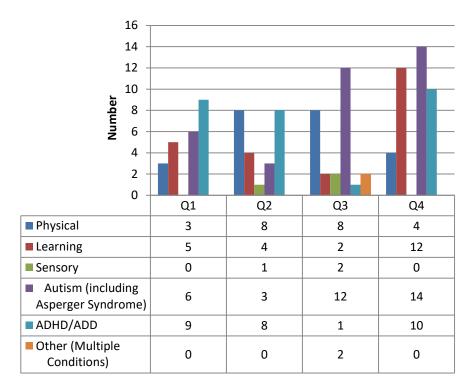
#### Performance Measure 2: Children Referred by Age Profile -2020/21

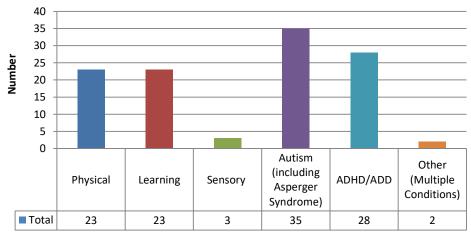




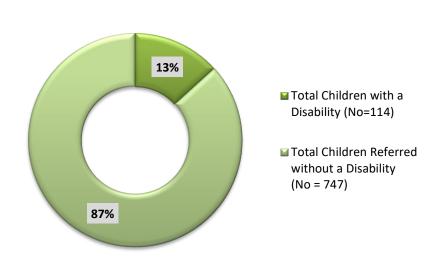
Please Note: As well as 861 children referred an additional **559** children benefitted as they were part of the families referred.

#### Performance Measure 3: Children with a Disability Referred -2020/21









In 2020/21, Children with **Autism** had the highest number of referrals throughout SHSCT area and second was ADHD/ADD.



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

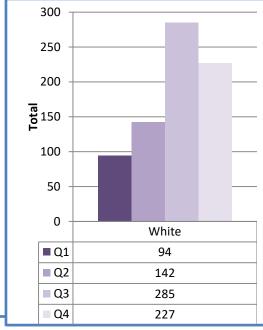
Performance Measure 4: Referrals by Ethnic Background for Children and Parents referred.

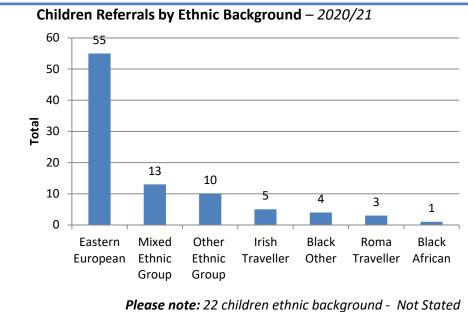
There has been an increase in both children and families referred from different ethnic backgrounds. For example: Referrals from Eastern European children are 55 with 45 parents, Mixed Ethnic 913 children

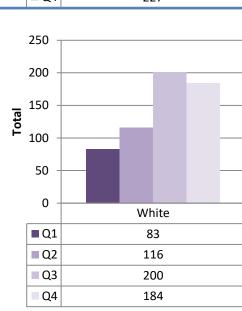
and Other Ethnic Group 10

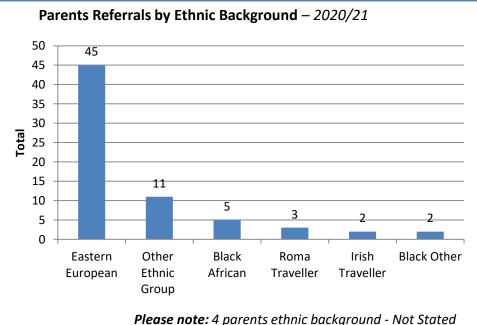
children with 11 parents.

(Note: 'White' has the higher number of referrals for both Children and Parents and are presented on separate scales as shown in these charts.)





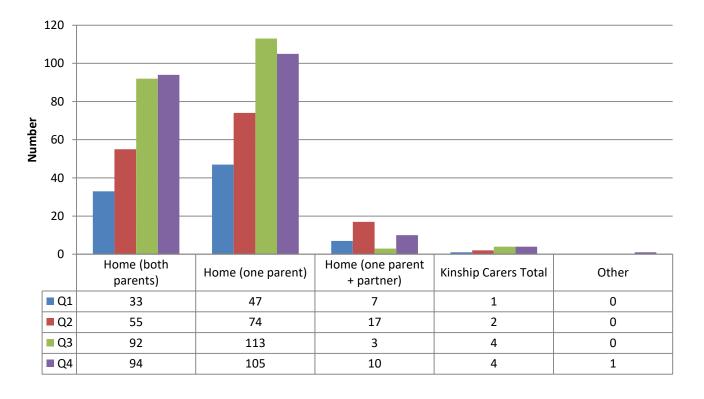


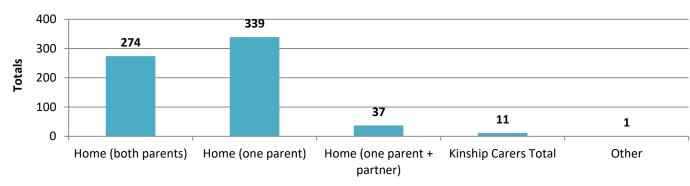


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## How much did we do cont'd....?

#### Performance Measure 4: Household Composition -2020/21



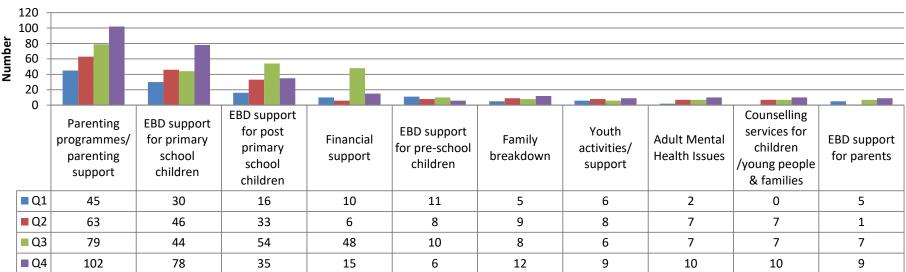


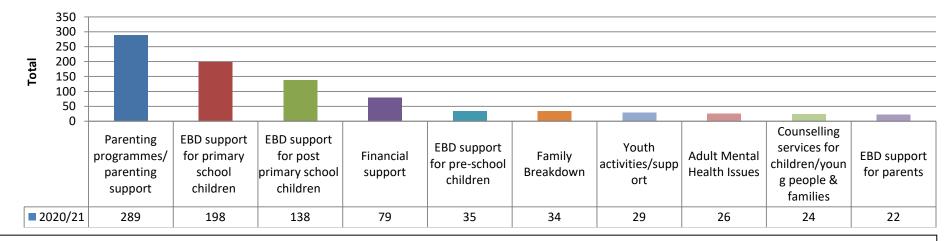


The number of families with Both Parents are less at **274** than Single Parents at **339** in 2020/21. The number of One parent + partner was **37** and Kinship Carers total was **11** and **1** Other.

#### Performance Measure 5: Main Presenting Reasons for Referral - 2020/21

#### **Top Ten Reasons for Referral**

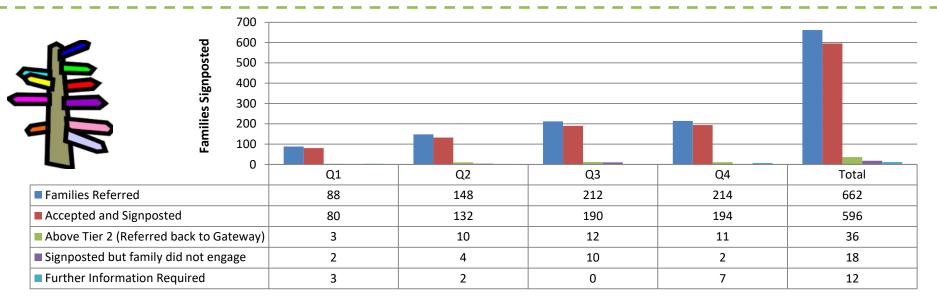




The key reasons for referrals in 2019/20 are Parenting programmes/parenting support at **289** followed by Emotional Behavioural Difficulty (EBD) for primary and post primary school age children at **198** and **138** respectively.

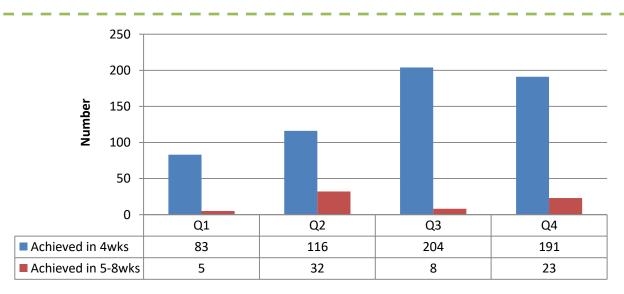
## How well did we do it?

Performance Measure 6: Families Referred that were Accepted & Signposted, Above Tier 2 or Other Reasons for Outcome of Referral-2020/21

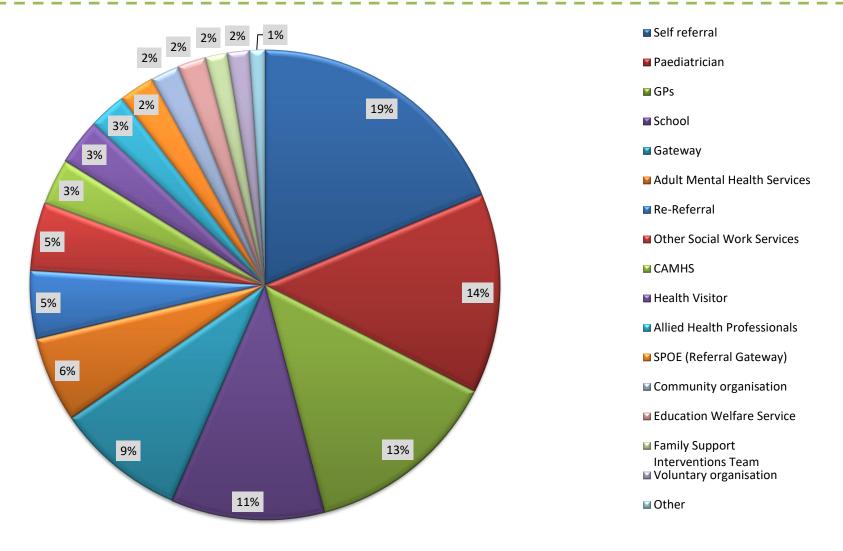


Performance Measure 7: Outcome 4 weeks & 5-8 weeks achieved – 2020/21

100% of referrals were achieved within 4 weeks or 5-8 weeks timescale.

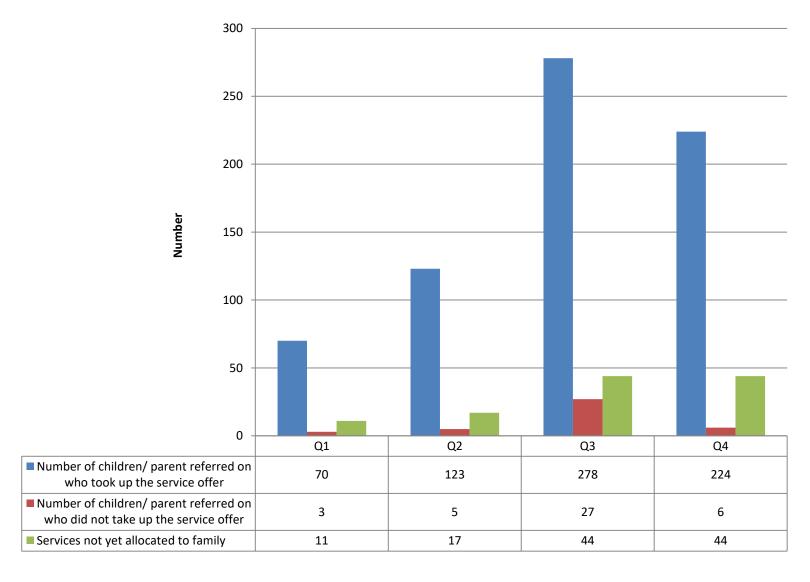


#### Performance Measure 8: Total Percentage of Referrals by Referral Agency - 2020/21



Self-referrals are the highest referring agency at **19%** in 2020/21, compared to 12% in 2019/20. Paediatrician referrals are up to **14%** from 9% and GPs down from 17% to **13%**. Schools are now **11%** and Gateway **9%**.

Performance Measure 9: Number of Children/Parents referred who did and who did not take up the service offer 2020/21



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

Performance Measure 10: 10 Standards Fully Implemented - 2020/21

**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 3 Hubs in the Southern Health and Social Care Trust have implemented the 10 Standards and continue to work collaboratively across the area in developing their relationships with providers across the community, voluntary and statutory sectors.

## **Case Study A**

# **Case Studies**

Family support requested by Community Paediatrics for 11 year old male living with both parents and

two siblings. Child displaying aggressive and oppositional behaviour at home. Child also presenting with poor attention and focus. Under Individual Education Plan (IEP) in school and open to SENCO, school monitoring progress to see if further support and assessment is required. Currently suspended from school for fighting. Query of ADHD currently on going with school/Community Paediatrics. Mum no longer able to manage child's behaviour at home, child becoming physical i.e. pushing/shoving and also damaging property within the home. Disruptive to other sibling in household and family relationships/routine. Mum struggling with home schooling also as schools closed due to COVID and child refusing to complete schoolwork. Family history of Learning Disability/ASD. Schools and nonessential shops/recreational areas closed due to COVID restrictions. Mum engaged in individual support sessions over the telephone. Solihull approach used to contain mum around relationship issues with child and anger present in household. Regular weekly sessions completed around communicating with child, implementing positive parenting and managing child's emotional wellbeing. Through motivational interviewing and Solihull approach supported mum to implement new clear and consistent boundaries at home around challenging behaviours. Mum and child engaged in three face to face sessions in NIACRO office. Sessions using Solihull to reflect on each other's triggers and emotions. Discussions around child's needs/frustrations. Using BSF discussed and worked towards small goals to achieve at home to improve overall wellbeing of household/relationships. Anger management discussed and warnings signs with child and resources provided for family. Supported to have a discussion to come up with an agreement on home schooling. Both worked together to complete new clear and consistent homework routine. Mum signed up for Walking on Eggshells parenting programme (PNI) and child engaged with local youth programme which provided a much needed social outlet for child and respite for family during the pandemic. (Craigavon/Banbridge FSH) Produced by CYPSP Information Team

### **Case Study B**

# **Case Studies**

Referral received from Community Paediatrics to seeking emotional/behavioural support for 8yr old boy and to support mum to understand and support her son who was being assessed for ADHD. Busy household with 3 other children. Mum was keen to learn strategies to cope with her son and be able to provide 1:1 quality time for all of her children.

The Family Support Hub meeting deemed that Bolster Community would be the appropriate service to offer support. After initial family assessment visit by the Bolster Community Family Support Worker a plan was put in place and options discussed. It was apparent at this point that mum needed more than just support with her son's upcoming diagnosis.

The Family Support Worker provided 1:1 support for mum and her son, exploring what ADHD means for the whole family and what changes would need to be implemented to benefit the whole family. One of the issues mum had was finding time to keep on top of household chores, Bolster Community offered all the children places on "Best Club" an afterschool club for children with additional needs and their siblings. This gave mum 4 hours of respite per week.

The Family Support Worker was able to source some much-needed financial support, including foodbank vouchers, Christmas toys, meat packs and ready meals to help ease her financial worries. In addition, mum was signposted to Newry and Mourne Community Advice and NIHE for housing advice; Parenting Support Line, SENAC for support with education and Clanrye Family Foundations. The eldest child was offered a place on My FRIENDS Youth a resilience building programme for young people aged 16+ and the Go Girl programme, which supports young women with self-identity, relationships and body image. The other younger children were offered the Fun FRIENDS Resilience programme.

This family remain open to Bolster Community for long-term emotional support and practical support with rehousing. (Newry & Mourne FSH)