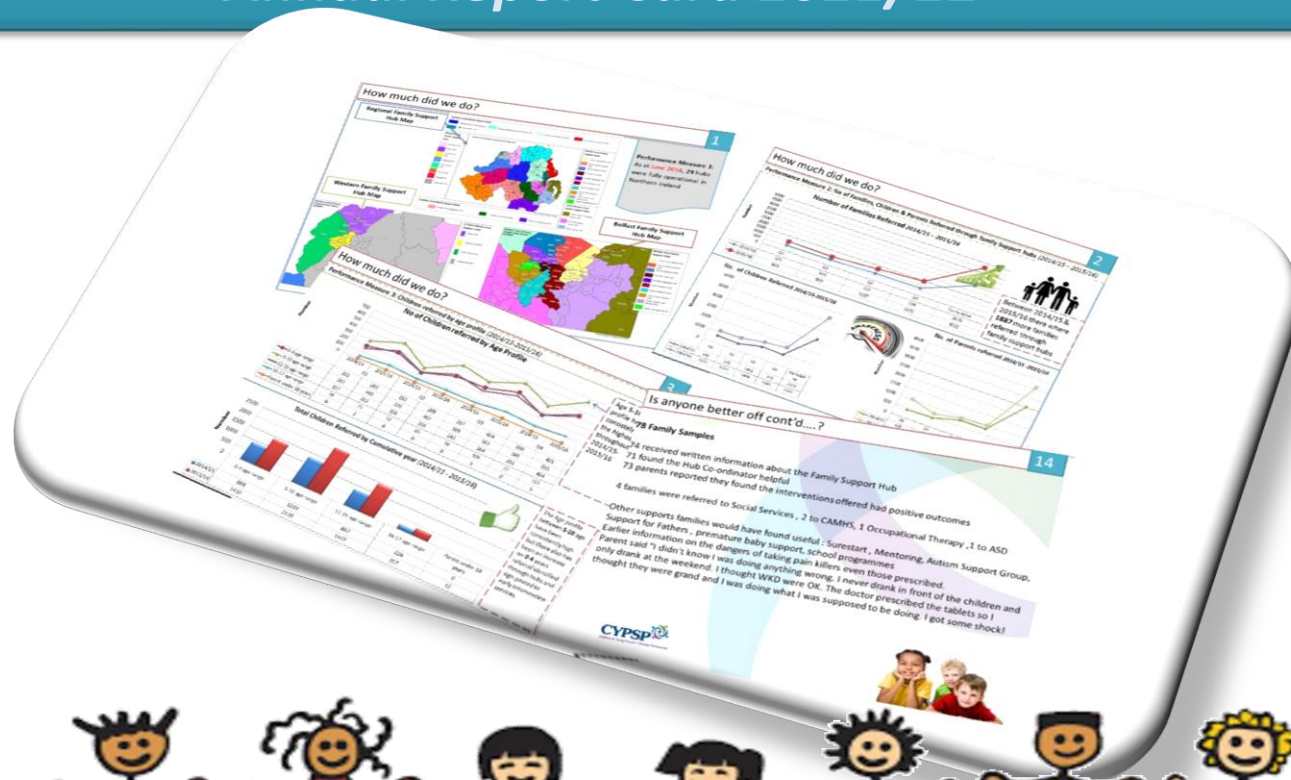


WHSCT Family Support Hubs Report Card

Annual Report Card 2021/22



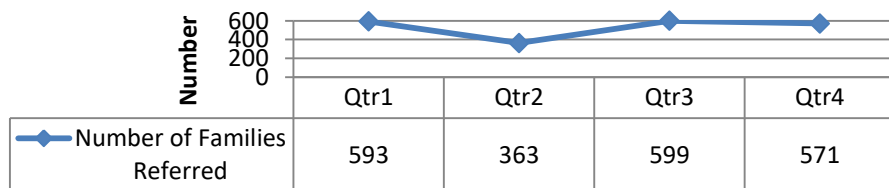
July 2022

How much did we do?

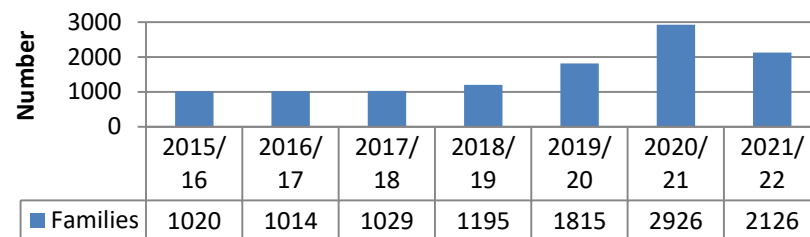
1

Performance Measure 1: No of Families, Children & Parents Referred through Family Support Hubs -2021/22

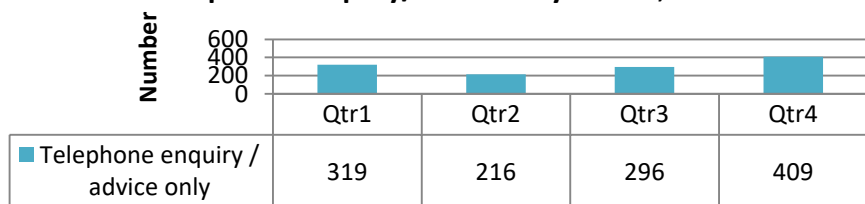
Number of Families Referred – 2021/22



No. of Families Referred

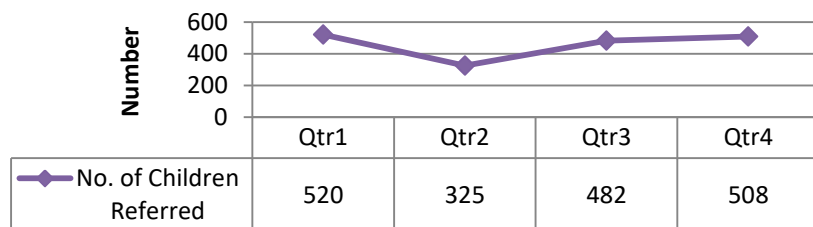


Telephone enquiry/advice only – 2021/22

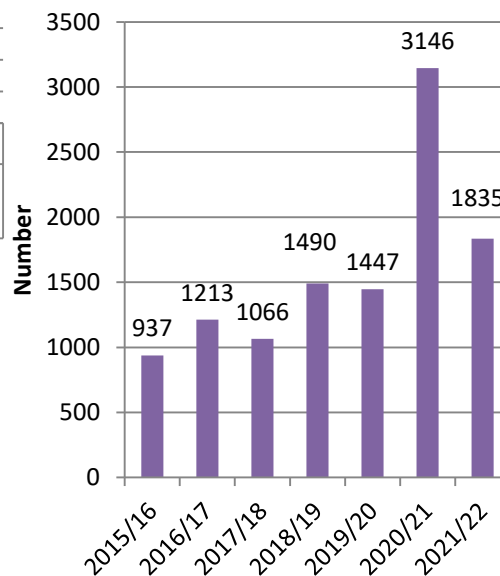


Throughout 2021/22 there were **2126** families referred through the Western area family support hubs, a decrease from 2020/21. In addition there were **564** families referred for Covid-19 issues only and **1240** telephone enquiries/advice only given throughout the year.

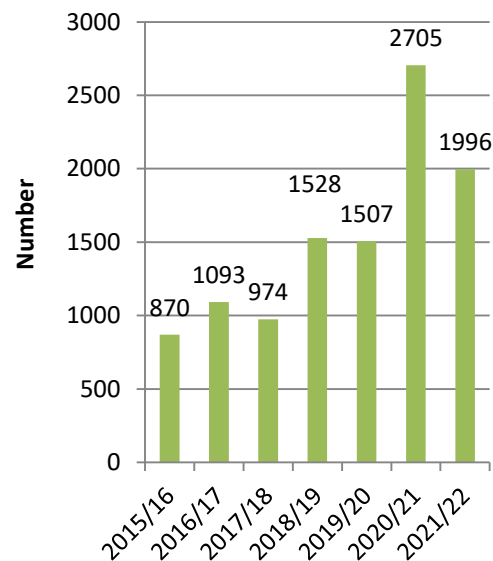
No. of Children Referred – 2021/22



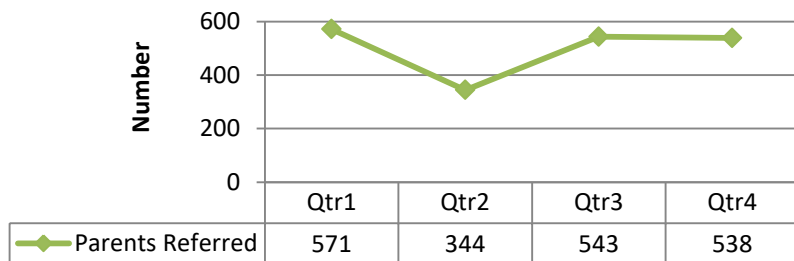
No. of Children Referred



No. of Parents Referred

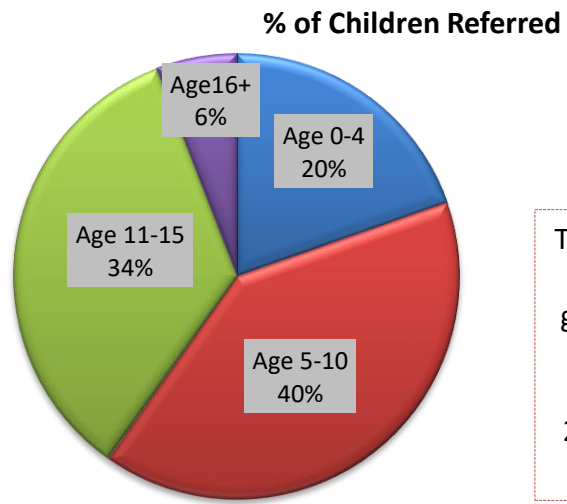
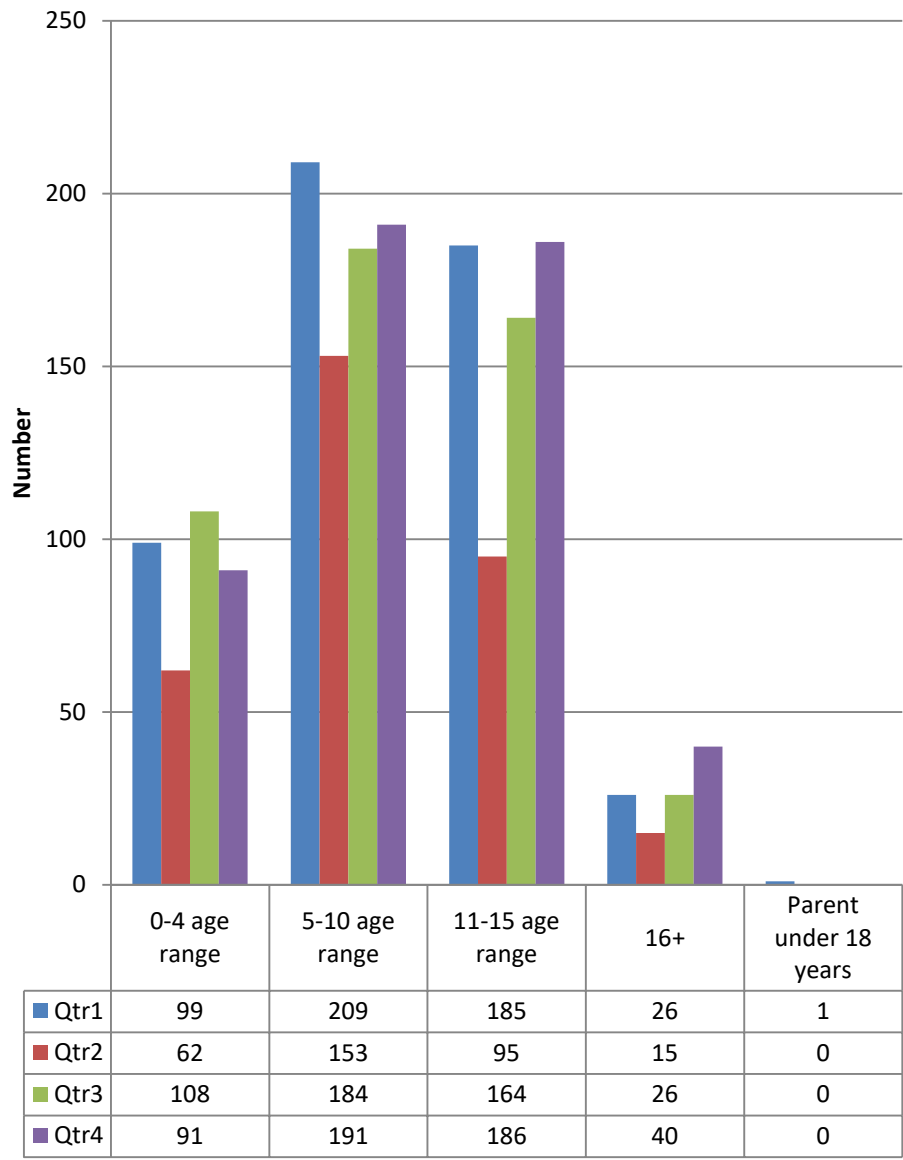


No. of Parents Referred – 2021/22

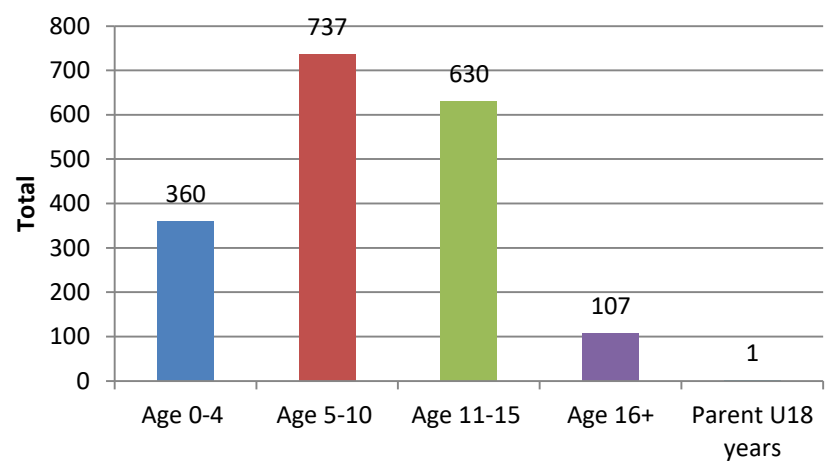


How much did we do?

Performance Measure 2: Children Referred by Age Profile - 2021/22



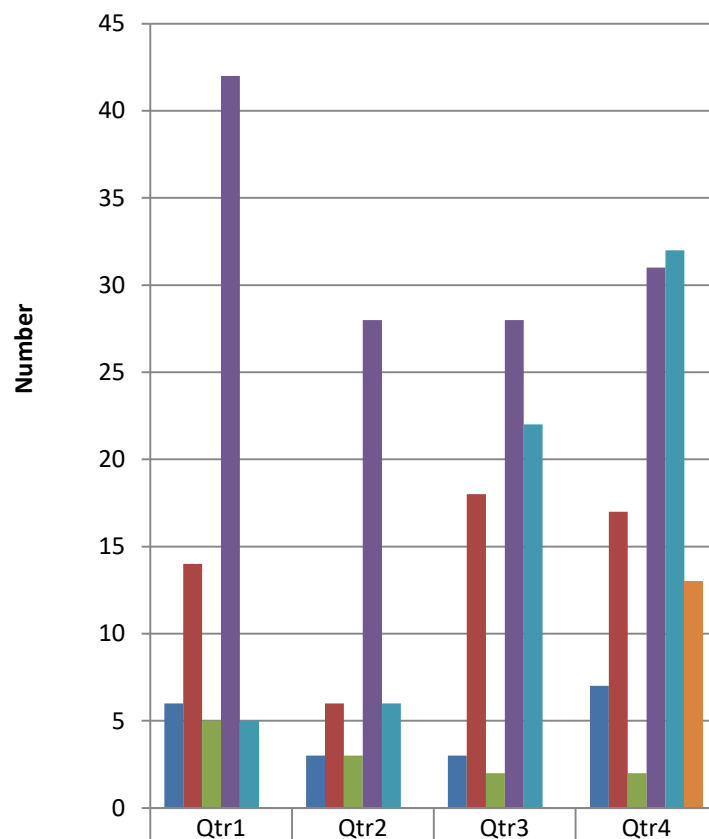
The 5-10 age range is the highest age group for referrals in the Western area throughout 2021/22 with **737 (40%)** referred.



*Please Note: As well as 1835 children referred an additional **1396** children benefitted as they were part of the families referred .*

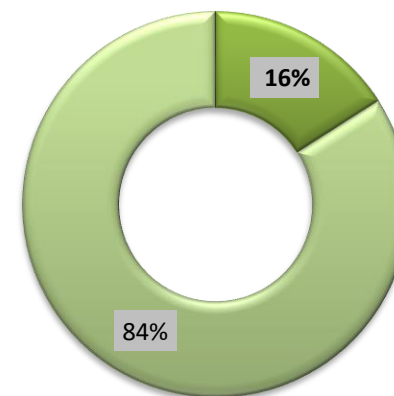
How much did we do cont'd....?

Performance Measure 3: Children with a Disability Referred -2021/22

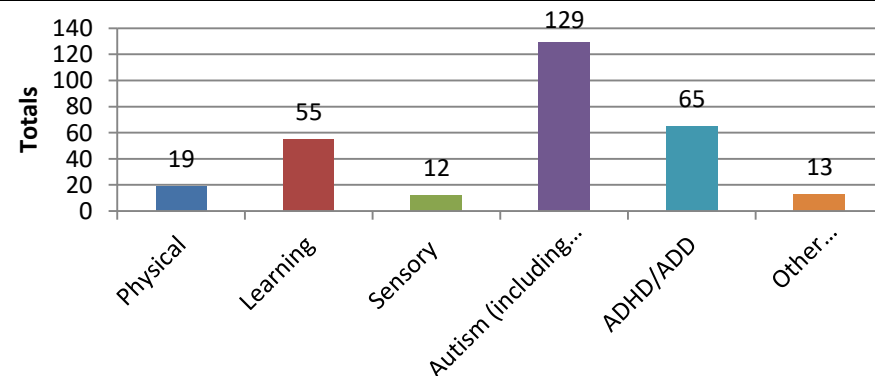


Physical	6	3	3	7
Learning	14	6	18	17
Sensory	5	3	2	2
Autism (including Asperger Syndrome)	42	28	28	31
ADHD/ADD	5	6	22	32
Other (SLT/SEBD/GDD/Tic Disorder)	0	0	0	13

Children Referred with a Disability



- Total Children Referred with a Disability (No. 293)
- Total Children without a Disability (No. 1542)



Autism (including Asperger Syndrome) had the highest number of referrals in 2021/22.



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

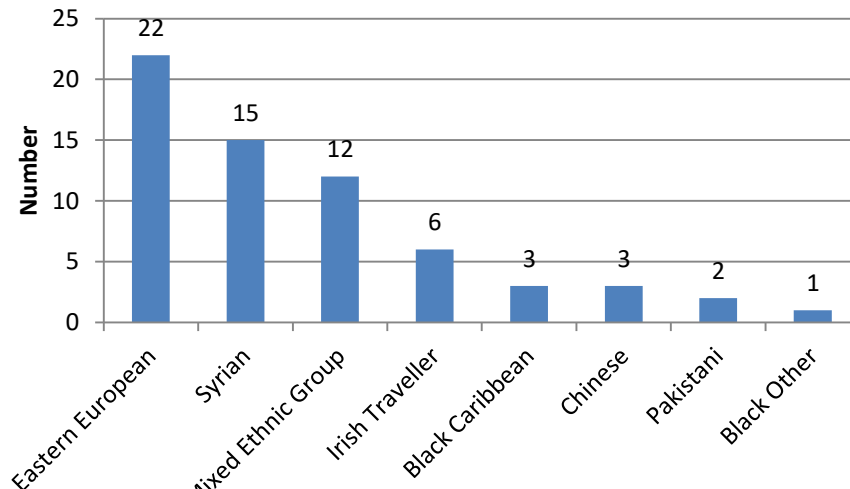
Performance Measure 4: Referrals by Ethnic Background for Children and Parents referred.

There has been an increase in both children and families referred from different ethnic backgrounds. For example: Referrals from Irish Traveller children are 124 with 53 parents, Eastern European 28 with 31 parents and Mixed Ethnic 14 with 13 parents.

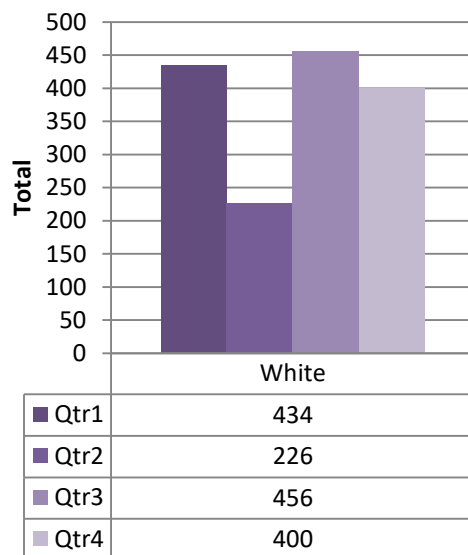
(Note: 'White' has the higher number of referrals for both Children and Parents and are presented on separate scales as shown in these charts.)



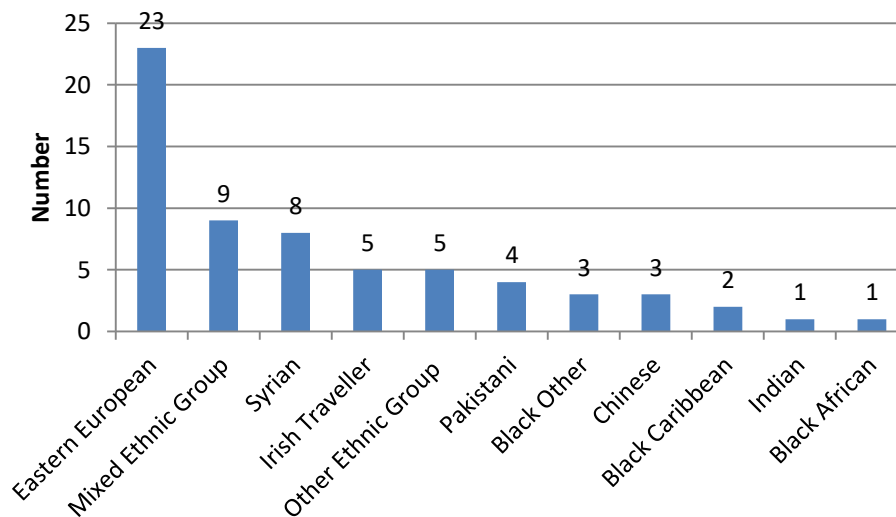
Children Referrals by Ethnic Background – 2021/22



Please note: 370 children ethnic background - Not Stated



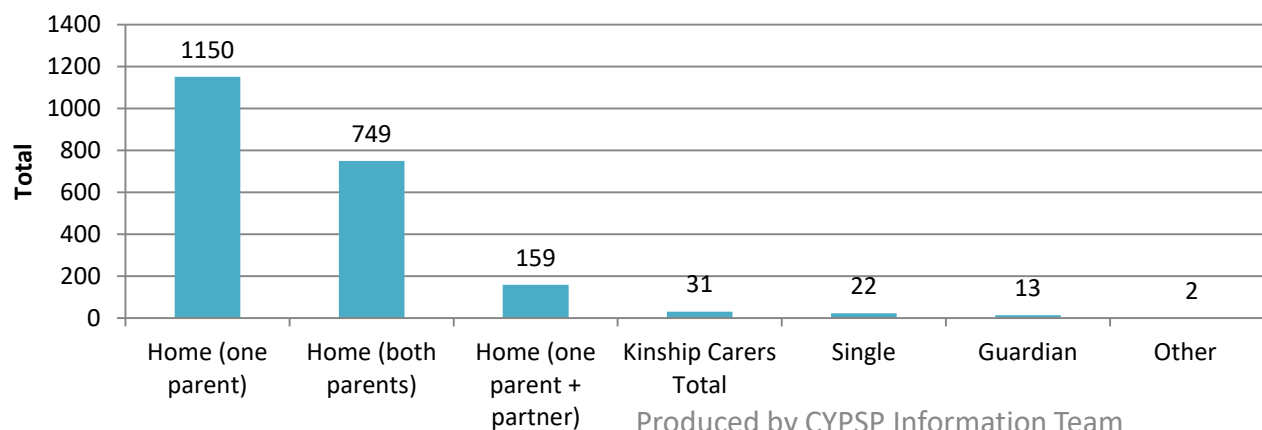
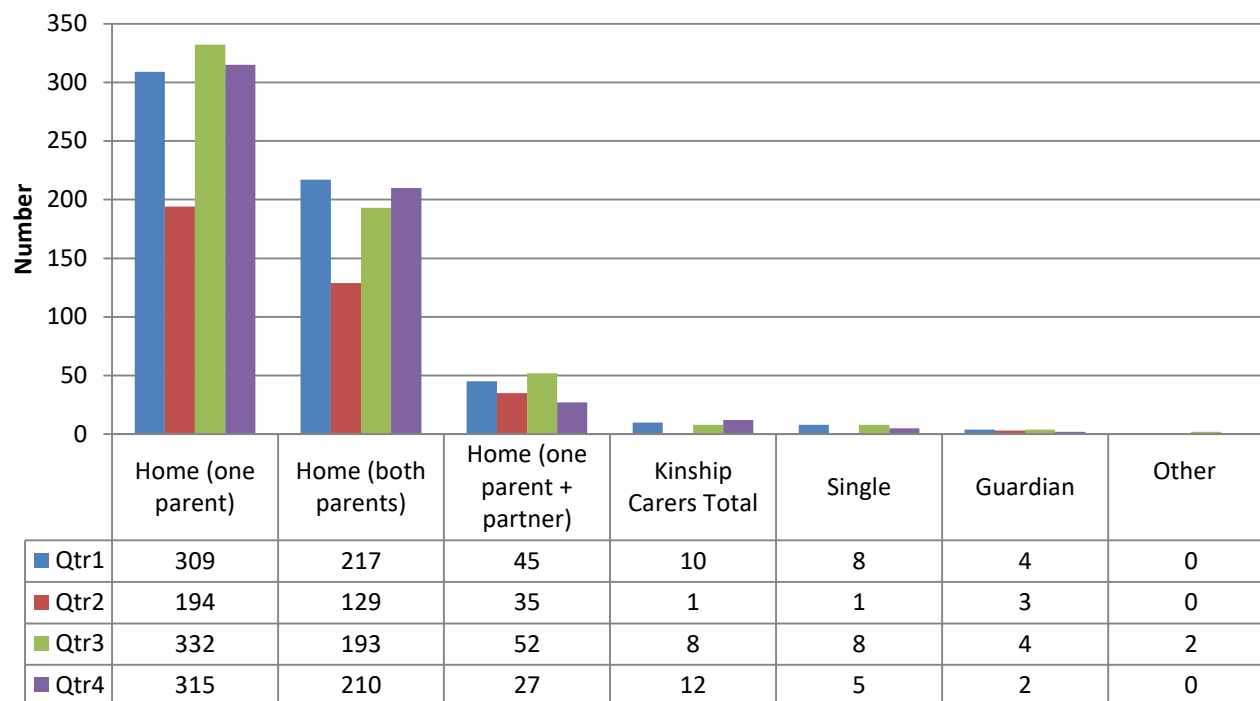
Parents Referrals by Ethnic Background – 2021/22



Please note: 416 parents ethnic background - Not Stated

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

Performance Measure 4: Household Composition - 2021/22

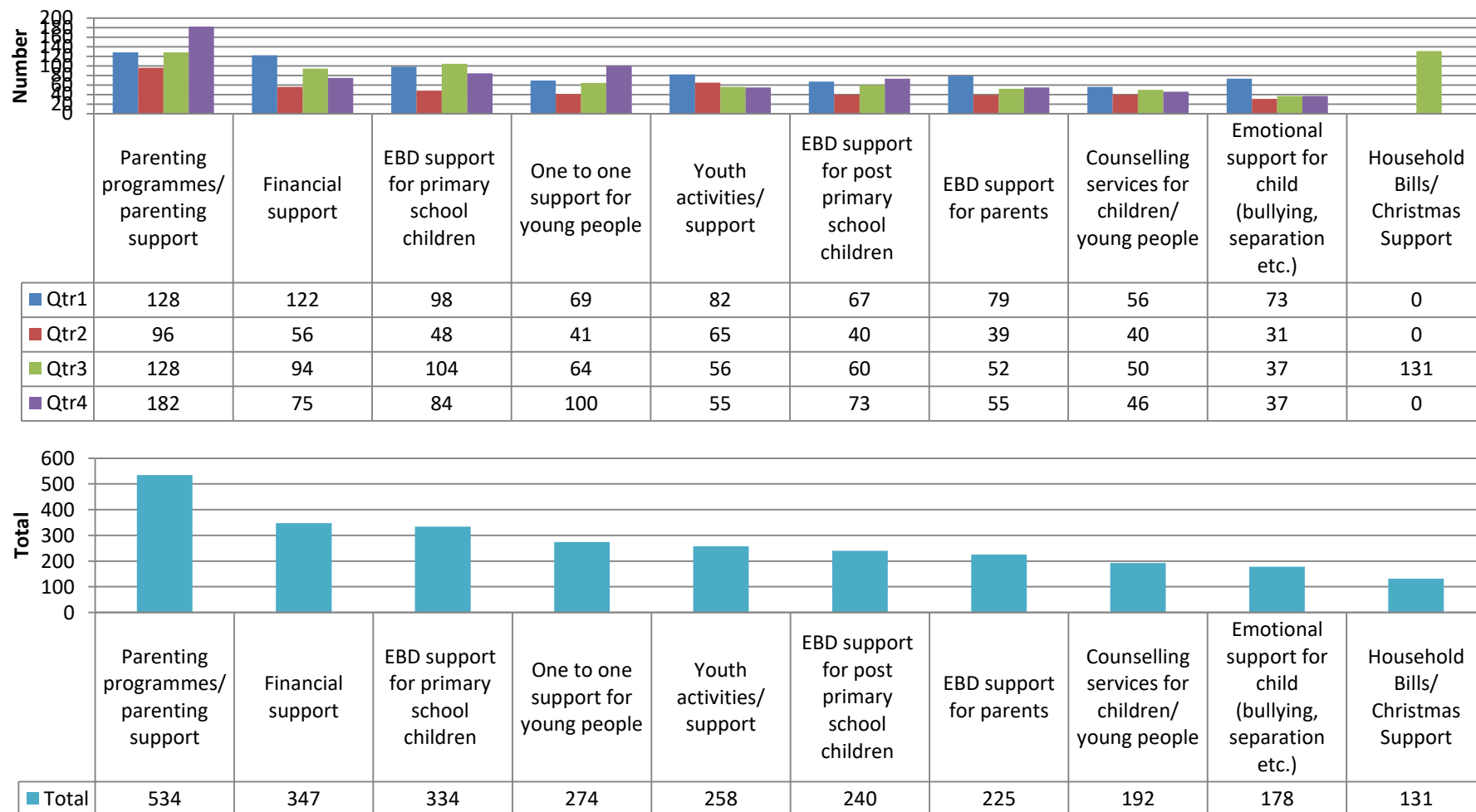


The largest group referred are **One Parent Families** at **1150** in 2021/22, followed by **Home(both parents)** at **749**. One parent and partner families is **159**. Kinship Carers **31**, Singles **22** Guardians **13** and Other **2**.

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

Performance Measure 5: Main Presenting Reasons for Referral - 2021/22

Top Ten Reasons for Referral

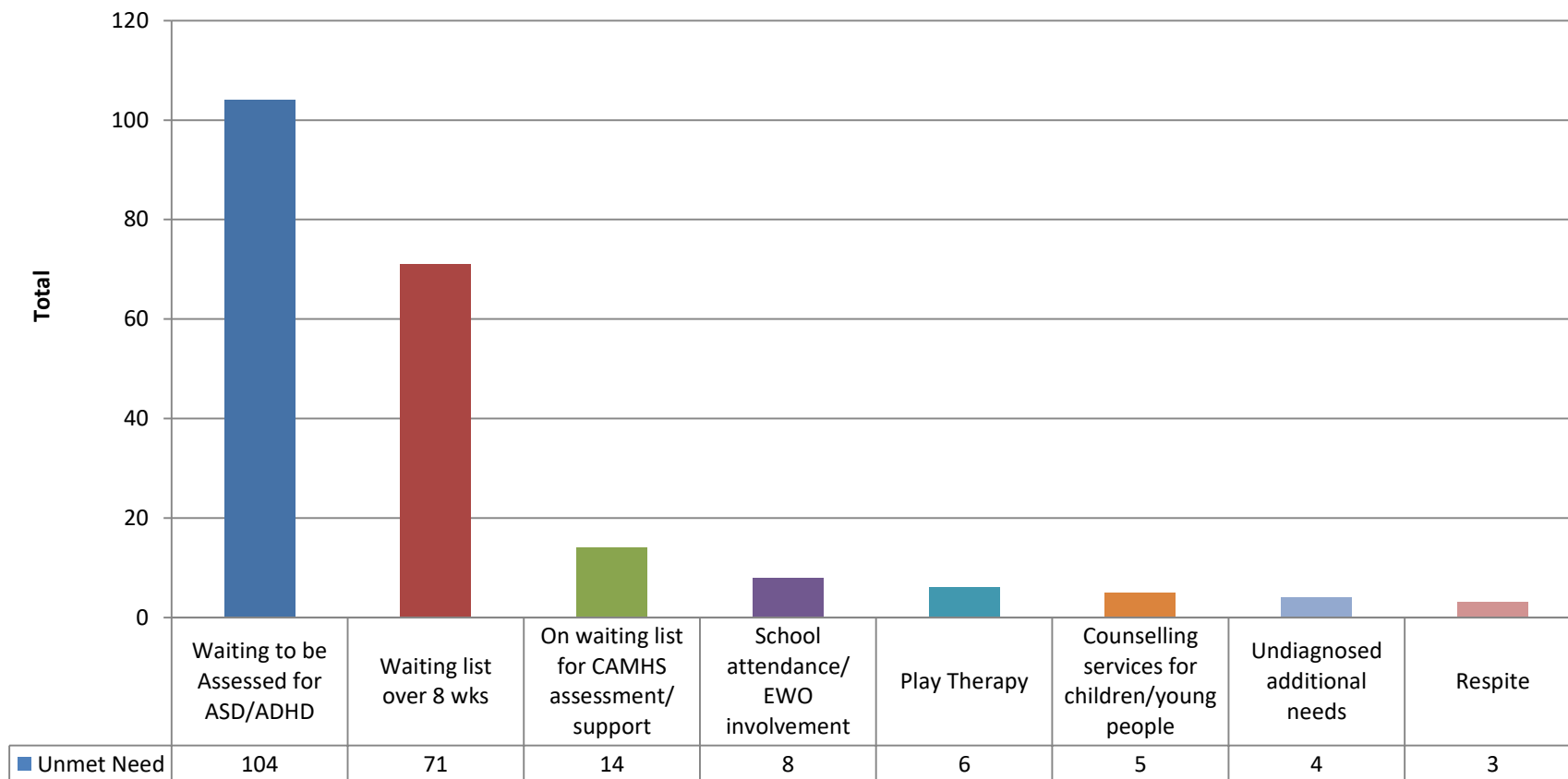


The main presenting reason in 2021/22 for referral was **Parenting programmes/parent support** at **534**, followed by **Financial Support** at **347**. The third key reason for referral was **EBD support for primary school children** at **334**. This was followed by One to one support for young people, **Youth activities**, **EBD support for post primary school children and parents**.

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

Performance Measure 5: Main Presenting Reasons Unmet - 2021/22

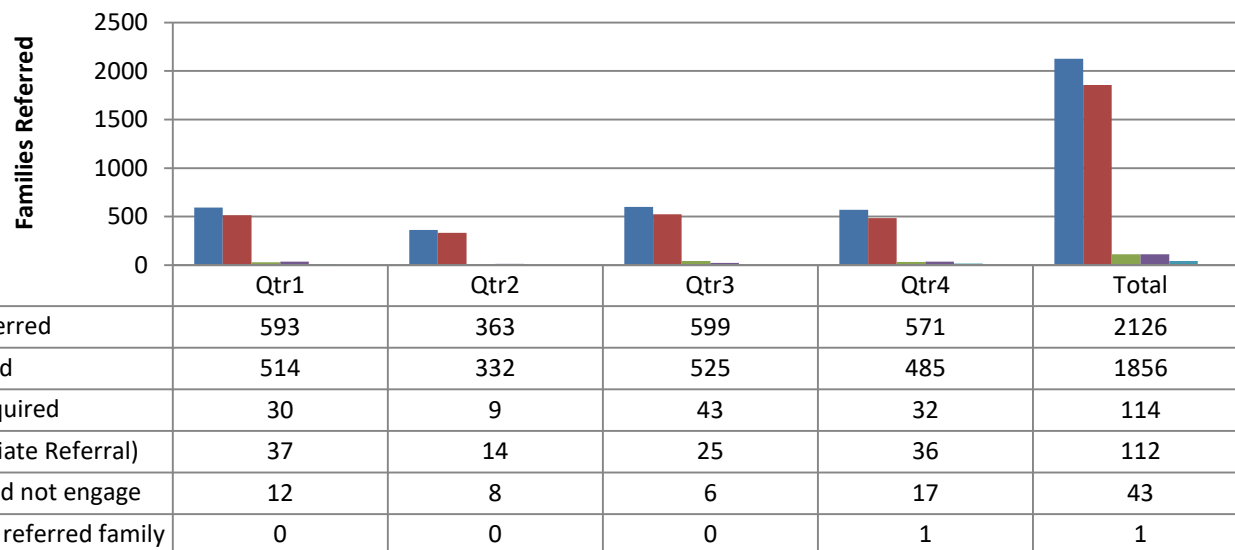
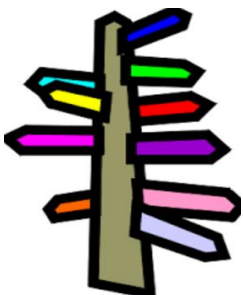
Unmet Need



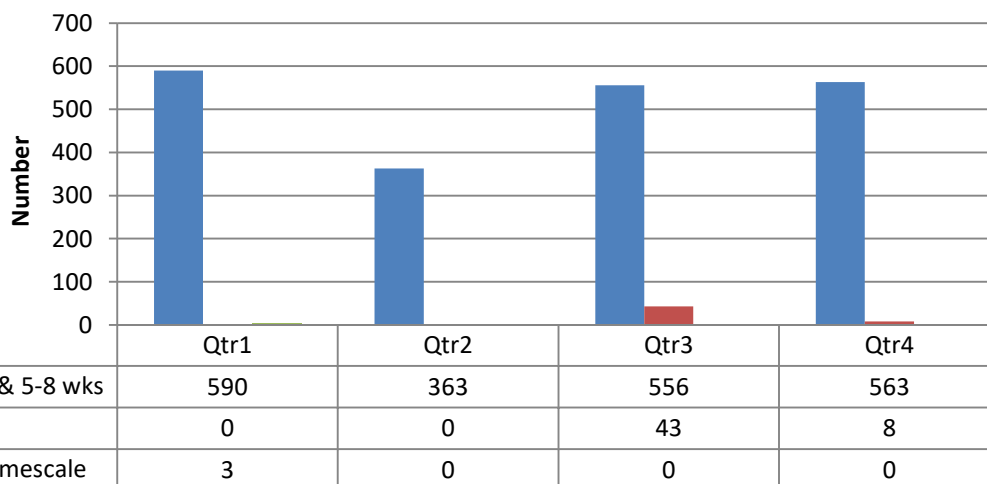
Waiting to be assessed for ASD/ADHD and **Waiting over 8 wks** were the highest unmet needs in the Western area. This was followed by On waiting list for CAMHS assessment, School attendance, Play Therapy, Counselling services for children/young people, Undiagnosed additional needs and Respite.

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- 2021/22



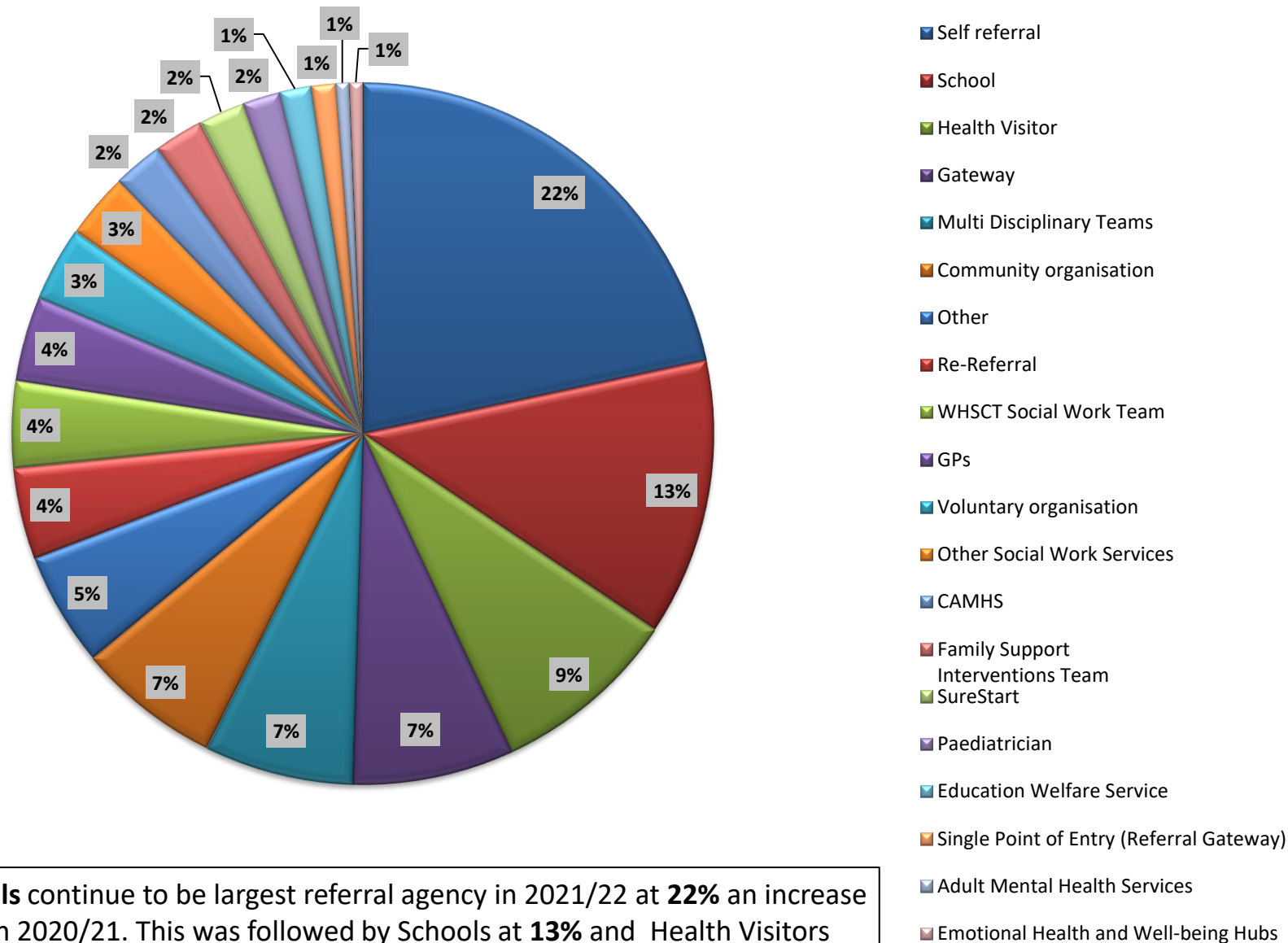
Performance Measure 7: Outcome 4 weeks & 5-8 weeks achieved / Not Achieved – 2021/22



The vast majority of referrals to Hubs were processed within 4 weeks and the remainder within 5- 8 weeks. **51** exceeded the maximum 8 weeks timescale within Western Area.

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

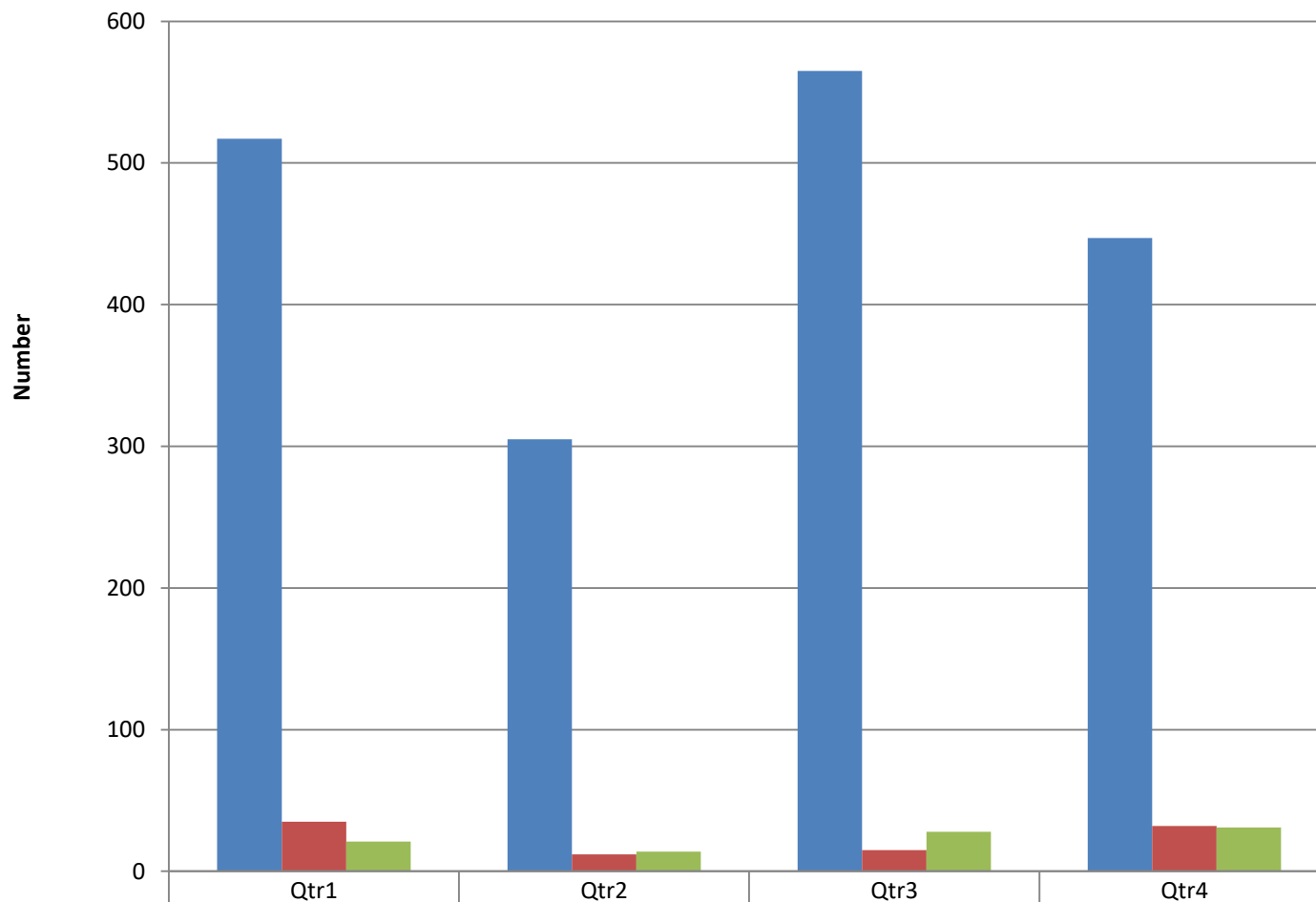
Performance Measure 8: Total Percentage of Referrals by Referral Agency - 2021/22



Self referrals continue to be largest referral agency in 2021/22 at **22%** an increase from 20% in 2020/21. This was followed by Schools at **13%** and Health Visitors at **9%**. Gateway, Multi Disciplinary Teams and Community Organisation referrals are all **7%**.

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 - 2021/22



■ Number of children/ parent referred on who took up the service offer	517	305	565	447
■ Number of children/ parent referred on who did not take up the service offer	35	12	15	32
■ Services not yet allocated to family	21	14	28	31

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

Performance Measure 10: 10 Standards Fully Implemented – 2021/22

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 of the Hubs in the
Western Outcomes
Group area have
implemented the 10
standards and continue
to work on action plans
within their Hubs to
develop access to the
range of early
intervention supports
available to families.

Family Samples

Case Study A

A single mum of 3 children moved into the area at the beginning of lock down – she moved away from her family support network in a hurry with her children to flee from a domestic incident. She was finding it hard to settle into the area and no way to make new connections due to lock down.

She had been finding all the changes difficult and sought out the support of the hub. She also struggled with the children's disruptive behaviour and outbursts because they couldn't get to after school activities or fully participate in school work due to lack of means to get access to online learning.

Various one to one sessions were facilitated with the client over the phone and we were able to take small steps towards implementing support and meeting her needs. Staff worked on budgeting, routines, mindfulness, arranged food parcels and borrowing a Laptop to get online access for her children. They joined in some fun online activities for free which took great pressure off mum.

Impact/Outcome

The client grew in self-esteem and confidence due the advice and listening ear on twice-weekly basis, she implemented everything suggested and despite a few struggles she has been maintaining boundaries and children have all gained from the support of the additional services the Hub put in place. They have now commenced sessions with EISS and are thriving back at school and mum feels there relationship has grown through lockdown and she was overwhelmed how well her growing boy responded to games and positive attention. In time she will be ready to engage in the community and attend programmes etc.

Family Samples

Case Study B

Client was referred to us by the G.P for support. The G.P has referred the client's 8yr old to the A.S.D team for assessment.

Mum was contacted and was quite distressed at the first meeting due to her daughters diagnosis of SEBD – Social, Emotional & Behavioural Difficulties and she also has sensory needs. Upon exploring this, mum reports that her 8yr old cannot identify with schoolwork or with her peers and has disturbed sleep and poor appetite.

These were all quite overwhelming for mum and she was provided with the space to explore all of this with staff and develop a case plan for her and her daughters support needs to be met. Mum struggled to get her daughter's sensory needs across to the school. I spoke to the school on Mum's behalf and encouraged Mum to speak to the teacher about her concerns and ensure that they have been keeping her involved in and additional updates to her IEP plan.

Both Mum and school worked together in regards to the child's needs. A referral was completed to E.I.S.S who worked really well with Mum and the child. The 8yr old attended art therapy and enjoyed the classes, this also gave Mum a break. An additional referral was completed to both Aurora and the S.O.O.C's programme witch mum is to commence soon.

Outcomes

Mum now feels supported and has a better understanding in expressing herself effectively in both school meetings and in other areas of her life. Her daughter has benefited from the work E.I.S.S have done with her. This has resulted in a happier home for everyone and mum still remains open and engaging well with the Hub.

Family Samples

Case Study C

A young mother was referred into hub by the school principal. The client was contacted and an assessment was done over the phone. Client informed me that her son was with the LAC(Looked after Children) team for four years and has now been transitioned back into her care full time. After having her child in care for so long mum was anxious about having her son back and needed some support with parenting, routine and there were some issues with attachment.

After a few sessions and once the rapport was built with the family, mum decided going forward that she would benefit from engaging in a parenting programme. Client was referred to the Creggan Day Centre, for the Solihull training, where she gained invaluable skills.

The client was also referred to the rainbow centre for the questing programme to help with her overall engagement with the family and received packs and regular home/garden visits to help her get back in to the swing of parenting with helpful hints & advice weekly. She benefited from the Christmas toy appeal & the Save the Children emergency response grant of £340 for essential household items.

Outcomes

Mum reports that she is more confident with her parenting now and has established a good routine and has gained some great new skills/coping tools. She is using the reward and pec's cards and felt it has helped with promoting positive behaviour and following routine.

Child is now really thriving and is now reaching his full potential; he is settled well at home and in school. Support from hub continues with weekly phone calls.

Family Samples

Case Study D

A young mum contacted the hub herself to seek out support as she felt that she was relying on her mum too much & felt there was so much going on in her life and she did not know where to turn.

She is Mum to an 8yr old and a grown up girl 20yr old girl, she has come through a serious domestic relationship and although separated 2 years; she is struggling with contact issues through courts. She had just lost her job and was struggling financially and noticed her mental health dip again. Whilst accessing the client it was very apparent that she was overwhelmed and had so many areas of her life she needed support with she didn't know where to start. Staff calmed and reassured client at the initial point of contact meeting, she was given a range of support over the last 6 months such as:

Lots of listening ear & advice /guidance, budgeting & food planning availed of, food parcels via churches trust, gas& electricity via Ballyarnett Food Access scheme, British Red Cross £120 cash card referral – due to job loss & awaiting claim for Universal credit, Save the Children Grant for £340 towards bed & household essential items, laptop to access online learning via 4'rs, Halloween/Easter home resource packs, Creative mindfulness/Art Therapy online via zoom (home packs delivered 6 weeks), engaged in Holistic therapies on a 1-1 weekly and Circus Skills family doorstep session.

Referral made to GPMHP – for assessment & a re-referral to Women's Aid made.

All in all mum was very open and engaged fully in all services offered throughout the difficult pandemic, court cases for contact and on-going police interviews due to a serious physical attack.

Impact/Outcome: Mum reported that within a number of weeks things had begun to change within herself and how she had been reacting and responding to things; she acknowledged that she couldn't have changed what life had been throwing at her but felt the support ensured she changed how she responded to everything. She said the financial support after she lost her job was just a life line and she felt always having someone else to talk to outside the family network was invaluable. They have both come so far and are currently still engaging in programmes; Mum & daughter will continue to grow and be supported throughout the next few months' hurdles.

Family Samples

Case Study E

Parental self referral received for a 5 year old boy, family recently moved back home during the pandemic to be closer to extended family & support network. Mum's background is as a SEN Teacher, has a postgraduate in SEN and with this knowledge has observed many signs in her child's behaviour since infancy that indicate to her that he requires assessment – she suspects he has ADHD but with emotional difficulties or delays also. The assessment process had begun in Germany however the family weighed up the benefits of being closer to extended family and schooling without natural language barriers to be more important for the family and moved back. Mum has an incredibly good approach to parenting and managing child's challenging behaviours presenting and is already using strategies and information. She is also prioritising her son's need for support ahead of any diagnosis or label but has found the systems here very difficult to access & additional support is needed particularly in school. Child's school have been invaluable support to Mum but are using temporary additional funding received during the covid pandemic in order to provide this support – classroom assistant & afterschool support. GP had referred for ADHD assessment & referral was also made to CAMHS for mental health support as child is self-harming picking/scratching and telling Mum he will harm or kill himself/her frequently – both referrals were declined by due to age & being 'behavioural' in nature.

What the Hub has done: Referred to Action for Children Early Intervention Family Support Service for 1-1 parenting support centring around managing challenging behaviour and parental self care. Liaised with CAMHS, Social Worker, Parentkind, Education Authority and ASD Service on parent's behalf re assessment pathways for child. Hub provided signposting information for Children's Law Centre, SENAC Special Education Needs Advice Centre, Relax Kids, Art Therapy, Mencap Family Advice Service, National Autistic Society, Cauldwell Children's Autism Service (based in England), Empower Project & Eden Consultancy & Autism NI, Middletown Centre of Excellence. Sent parent ASD resources provided to the Hub by Omagh Children's ASD Service Manager.

Parent Feedback: From the moment I had my first call back from Karen in FSH I could feel my tension ease. Finally, someone who is listening and understanding how all these added burdens are affecting me, my family and most importantly my little boy. They helped on many levels. They acted as our advocate in seeking out more reason and response as to why we were being rejected supports from CAHMS. They had a realistic wait of 12 weeks for some intervention, this being for myself with Action for Children Early Intervention Service. I cannot express enough how this intervention has brought such a positive influence to our family. It has been a game changer and I look forward each week to my sessions. They are uplifting, positive, achievable and easily implemented in everyday life.