



Family Support Hub Guide



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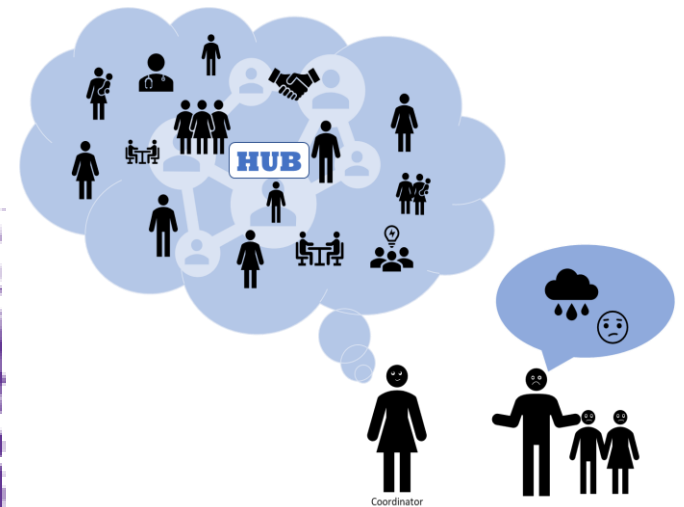
1.1 What is a Family Support Hub?

Family Support Hubs (Hubs) are virtual partnerships hosted by different organisations depending on where they are. There are currently 29 Hubs. The Hubs are hosted by a range of organisations from the community, voluntary and statutory sectors and these host organisations may also be Hub members.

Each Hub will have a Family Support Hub Coordinator who will receive referrals, gather any further information required and then after consultation with Hub members, link the family to the best service or services to meet their needs in their area.

The services available through the Hubs will vary depending on what is available in that area and the needs of the families and young people they are there to support. Hub members vary greatly, they may be from lesser-known small local community groups or larger voluntary sector organisations that are extremely well known, the common feature will be that they provide early intervention services to families and young people in that area and are willing and able to accept appropriate referrals from the Hub Coordinator and are on the Family Support NI website (<https://www.familysupportni.gov.uk>). There are currently over 650 different Hub members making up the 29 Hubs.

When we talk about a **Family Support Hub** we are not talking about a single organisation or a building. A Family Support Hub is the network of organisations from across the community, voluntary and statutory services who provide early intervention services.



1.2 What is the Purpose of the Family Support Hubs?

To improve access to early intervention family support services by matching the needs of referred families to family support providers.


To improve coordination of early intervention family support services through a collaborative network of community, voluntary and statutory providers.




To improve awareness of early intervention family support services.

To report the unmet need for early intervention family support services in their locality and bring this to the attention of the Locality Planning groups and Outcomes Groups.

1.3 Who Can Refer to a Family Support Hub?



Families can self-refer to the Hubs for support and are encouraged to do so.



Hubs can accept referrals from a range of professionals and are making the referral on behalf of the family. Parents and families **MUST** have given consent for a referral and taking up services offered through the Hub is entirely voluntary.

A family can change their mind about accepting a referral or service at any time. Referrals without consent will not be accepted.

1.4 Who Can Get Help From a Family Support Hub?

A family can be referred to a Hub if they

Live in Northern Ireland

Have a child or Young person under the age of 18

THE FAMILY HAVE GIVEN INFORMED CONSENT

Are not open to Child and Adolescent Mental Health Services (CAMHS) at Tier 3 or Children’s Social Services (with the exception of children known to Children with Disabilities Teams)

Have been opened to social services but are now closing as they have been assessed as no longer requiring statutory social work support. Closure cannot be on the grounds of the family engaging with support through Hubs.

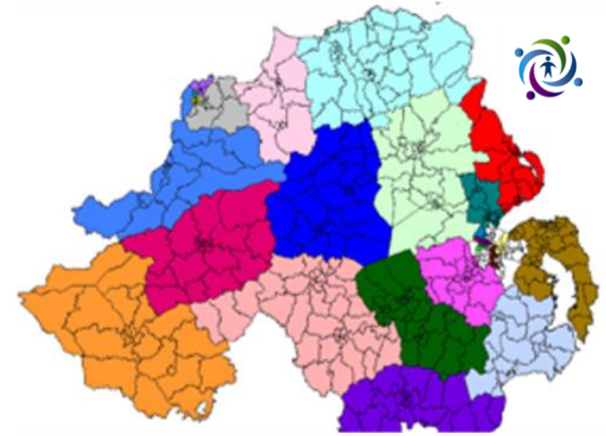


1.5 How Do I Find the Right Family Support Hub?

Maps of Hubs and a contact list for the Hub Coordinators are included in the appendices however, for the most up to date information check on the CYPSP website (<https://cypsp.hscni.net/family-support-hubs/>).

The website also includes a useful guide to identifying the appropriate Belfast Hub by Ward area.

If in doubt about what Hub to refer to, please contact the Hub Coordinator before making a referral.



1.6 How Do I Make a Referral?

The Hubs are developing a single referral form across all 29 Hubs. In the interim the current Family Support Hub referral forms can be found on the CYPSP website or by contacting your Family Support Hub Coordinator.

Families can self-refer by completing the referral form or they can contact the Hub Coordinator for their area who will be able to help them with the referral.

Professionals should fully complete the referral form and ensure they have explained what the Hubs are and what will happen following a referral with the family. Professionals must gain the consent of the family and record this appropriately on the referral form.

Incomplete referral forms from professionals will not be accepted and will be returned.

1.7 What Can Family Support Hubs Help With?

Due to the wide range of Hub members, Hubs can connect families with help for a wide range of challenges. The support available will vary depending on what services operate in your area and what their capacity is. Not all services are always available however hubs will try their best to find a service to meet the needs.

Issues Hubs can provide support with include, but are not limited to:

Parenting support / advice

Practical support

Changes at home

Mentoring

Benefit advice

Helping to manage behaviour

Bereavement / loss

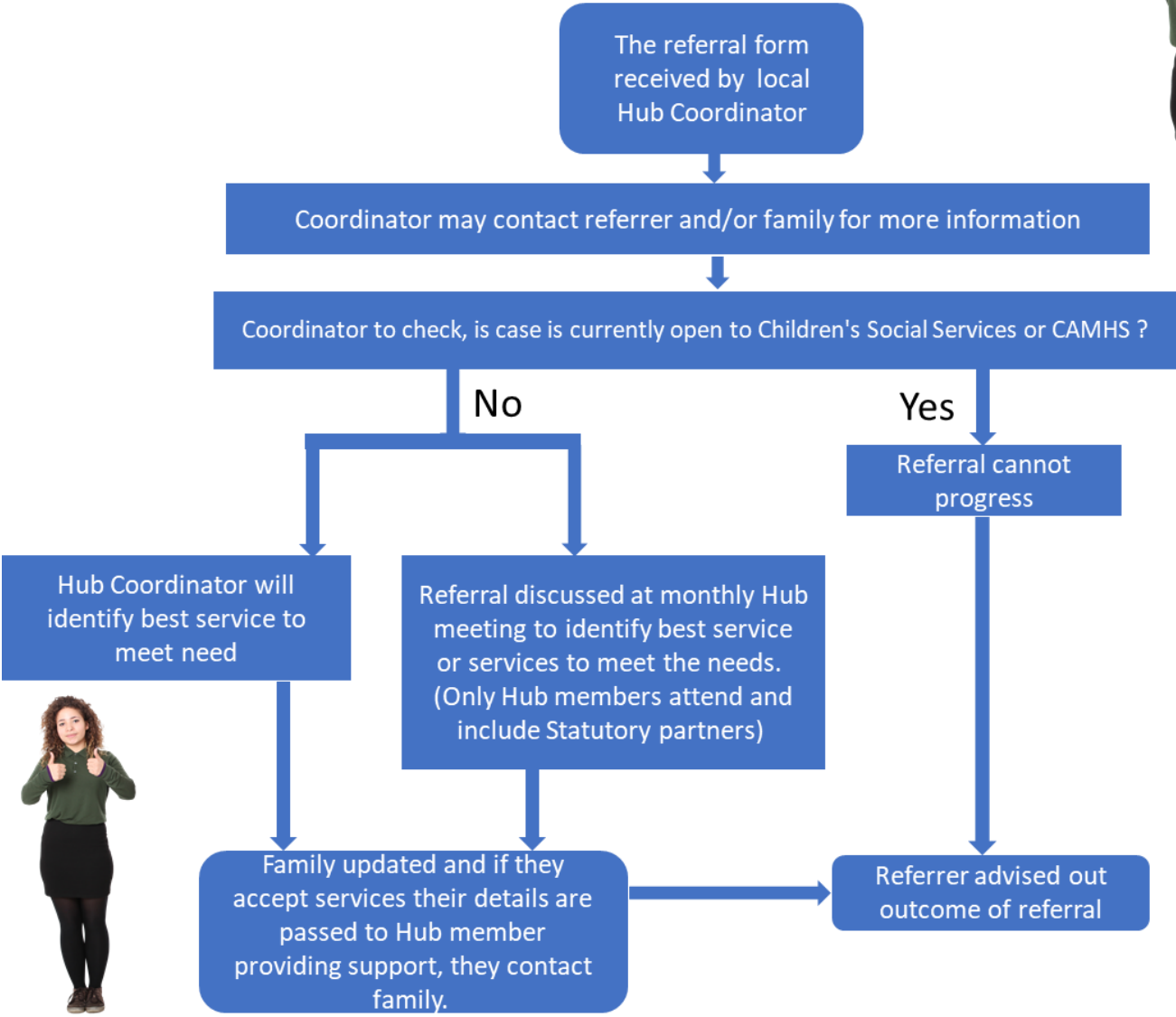
Disability support

Social isolation

Family relationships



1.8 I've Made a Referral, What Next?



2.1 Why Family Support Hubs?

The Family Support Hubs were developed as an effective way of ensuring that families are able to access early intervention supports when they need them.

When we talk about early intervention we use the Grasping the Nettle definition:

“intervening early and as soon as possible to tackle problems emerging for children, young people and their families or with a population most at risk of developing problems. Early intervention may occur at any point in a child or young person’s life”

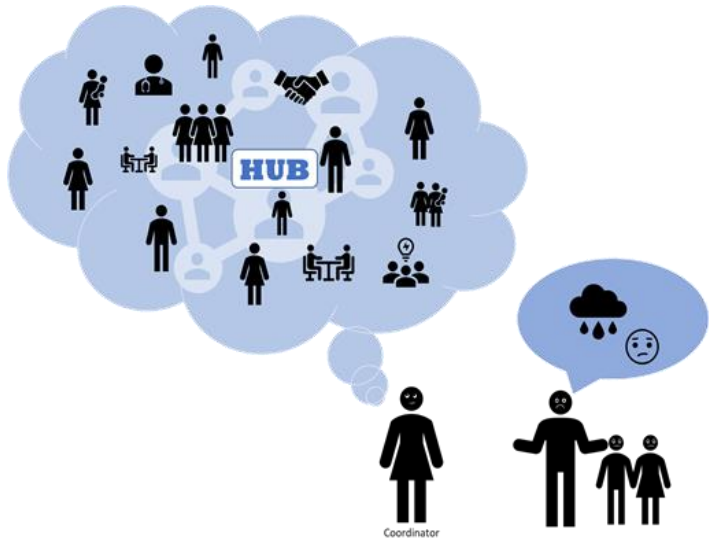
Pg4, ‘Grasping the nettle: early intervention for children, families and communities’



In the past, despite best efforts, everyone who worked with children and young people provided services separately and often families struggled to find the right help to support them, some having to contact lots of different services to get to the right help.



The Family Support Hub network is based on the idea that early intervention services can be delivered more effectively if existing providers are encouraged to work more closely together.



Hubs are a single and local point of contact for families and professionals to link a family with the right services without having to go through numerous referral pathways. This should not only ensure the best match but reduce the length of time it takes families to access the right help and simplify the process. It should also avoid duplication of service provision.

The Family Support Hub Network is underpinned by principles of choice, participation and respect. They are child-centred, flexible, needs-led and focused on outcomes for families.

This approach to early intervention relies on good working relationships.

“families highlighted that the hubs offer accessible and timely support that are community-based, trauma-responsive and non-stigmatizing.”

Northern Ireland Family Support Hubs, Interim Review Report, SCIE 2021

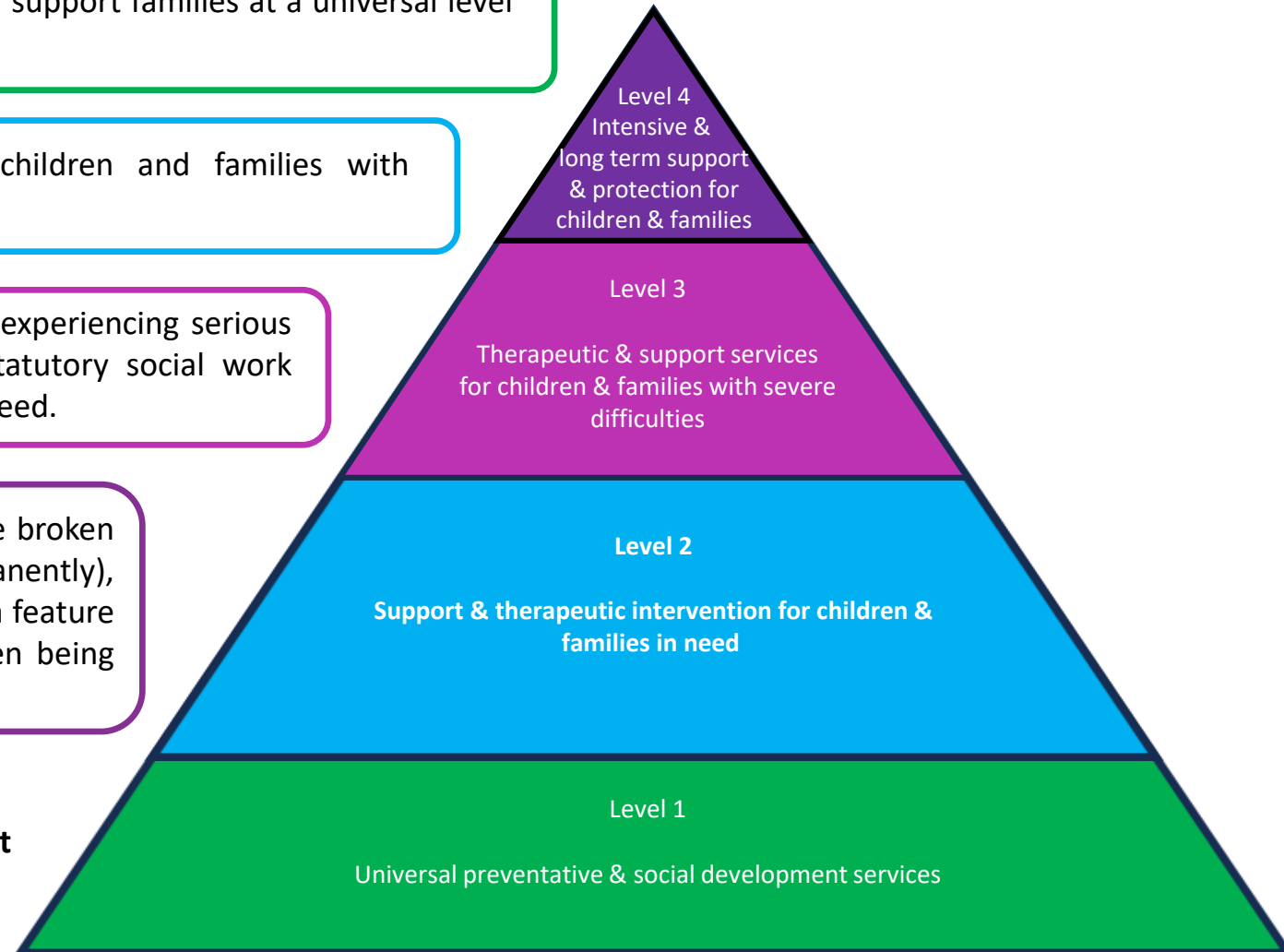
The planning framework for children's services in Northern Ireland is based upon the Hardiker Model (1991) which identifies four levels of need.

Level 1 is mainstream services which support families at a universal level and those with occasional needs.

Level 2 focusses on vulnerable children and families with additional needs.

Level 3 is characterised by families experiencing serious and chronic problems, requiring statutory social work intervention to support children in need.

Level 4 represents families that have broken down (either temporarily or permanently), with critical problems and high risk a feature of these families, often with children being placed in care.



The purpose of Hubs is to target children and young people at Level 2.

*Hardiker Model
(Source: Hardiker et al. 1991)*



2.2 Who is in the Family Support Hub?

Hub members are a collective of organisations that work in partnership with the Hub Coordinators and with each other, to deliver services at the community level.

Who are the Core Members?

Each Hub will have its own unique range of community and voluntary sector organisations that offer services in that area and accept referrals from the Hub.

They will have expert knowledge of their services and local provision.

There will also be representation from statutory services including Education/Youth Services, CAMHS, Health Visiting and Social Services.

They bring knowledge of their areas of work and contribute to identifying services.

Education and Youth Services will accept appropriate referrals from the Hubs.

CAMHS and Social Services are able to identify cases where the level of need is above what can be provided through the Family Support Hubs.

Surestart are also represented.

Who are the Associate Members?

Associate members are:

- smaller community and voluntary providers that deliver services in local areas;
- community or voluntary organisations that provide services across the whole Outcomes Group area but do not need or want to attend all of the Hubs; or
- community / voluntary organisations that do not have the capacity to be a Core Member of the Hub.

They may be regional organisations who provide early intervention services across the region and are therefore unable to attend every Hub meeting.

The Hub is not accountable for the work of Associate or Core Members.

The accountability for service delivery to families in the respect of an Associate or Core Member remains with the organisation itself.

Any complaints about service delivery will be referred back to the service provider.



2.3 What is the Role of Core Family Support Hub Members?

Community and Voluntary Sector

- Bring specialist knowledge to the decision making process in their area of practice expertise.
- Have an awareness of other organisations in the local area that also address need in their area of expertise.
- Contribute to the decision making process in respect of matching a family's needs to available services.
- Accept appropriate referrals from Hub.

Gateway/Social Services

- Have an overview of referrals in order to help identify potential child protection concerns.
- Identify referrals that require a statutory social work intervention.
- Contribute to the decision making process in respect of matching family's needs to available services.

Education

- Bring specialist knowledge of education family support services.
- Contribute to the decision making process in respect of matching family's needs to available services.
- Accept appropriate referrals from the Hub.

Health Visiting

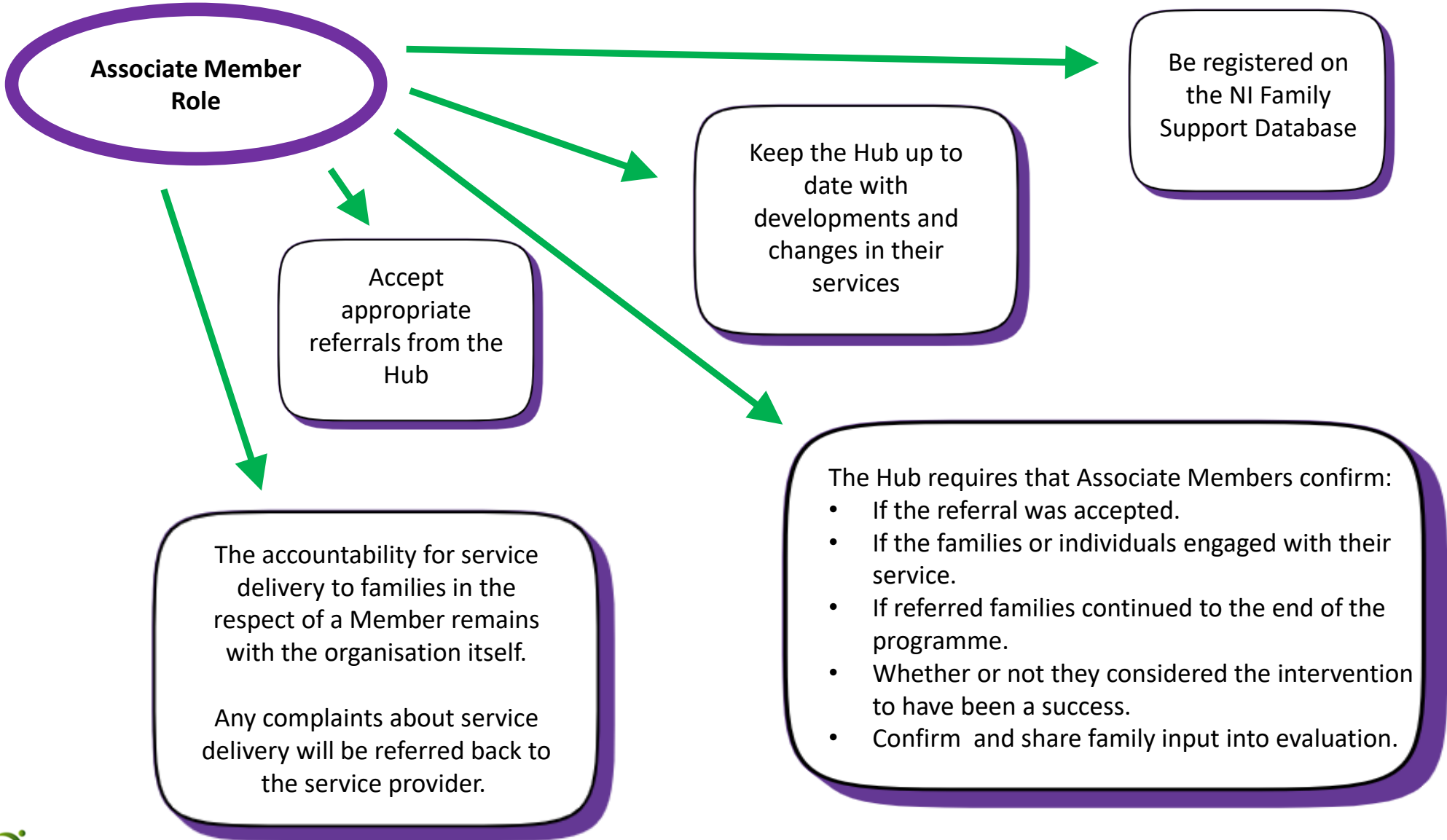
- Bring specialist knowledge of family health services.
- Contribute to the decision making process in respect of matching families needs to available services.

CAMHS

- Bring specialist emotional and mental health experience to the decision making.
- Bring a knowledge of emotional and mental health services at Tier 2 in both statutory and voluntary and community sector.
- Identify referrals that require a Tier 2 response.



2.4 What is the Role of Associate Family Support Hub Members?



2.5 What Does the Family Support Hub Coordinator Do?



The Hub Coordinator is a crucial part of the Hub. They will be the main point of contact for a family, especially in the case of a self-referral.

The following gives an overview of the role of the Hub Coordinator but they also have other roles and responsibilities.

* Some of the roles are not carried out by all Hub Coordinators, this will depend on the structure of that individual Hub.

Referrals and Hub Meetings

- Review all referrals received to ensure they are appropriate, have been properly completed and that informed consent has been given and documented.
- Contact with families – Coordinators will make contact with the families at different points in the process. They will explain how the Hubs operate and what happens next. They will ensure the family are aware that engagement is voluntary and that the family have given informed consent. This is particularly important for self-referrals.
- Contact referrers for clarification or further information where needed to progress the referral.
- Work with social services and CAMHS to identify cases that are above the threshold for Hubs (see 2:1) and may require higher level support.
- Provide telephone advice to agencies wanting to directly access a family support service in the area. This may or may not result in a referral being made to the Hub.
- Arrange the monthly Hub meetings including planning the agenda, preparing papers, collating minutes of previous meetings and ensuring members have the information they need prior to the meeting.



Referrals and Hub Meetings cont'd

- Chair the Hub meeting or present at the meeting to assist the members identify the best service to meet the needs of the individual families. *
- After the meeting, contact the family to let them know the outcome of the meeting and what services have been identified and are on offer to the family. Link with the service provider regarding allocation.
- Maintain records of referrals and meetings while respecting confidentiality and in line with relevant policies and legislation.
- Complete monthly Hub activity monitoring returns. This information is anonymous and used to provide performance information and in the Family Support Hub Report Cards, which can be found on the CYPSP website. This information is also used to identify areas of unmet need and emerging trends.
- Some Coordinators may have a role managing family support worker.
- Contribute to Locality Planning groups.

Hub Development Activity

- Provide leadership to the Hub and be a key point of contact.
- Recruitment, maintenance and review of Hub membership which requires knowledge of service provision evolving locally.
- Establishment, maintenance and review of Hub operations and protocols and strategic direction.
- Networking to promote the Hub to within existing provision and the locality.

Governance Activity and Regional Work

- Adhere to accountability and monitoring requirements internally and externally.
- Monitor, evaluate and report Hub activity to the Steering Group, Health and Social Care (HSC) Trust and Children and Young People's Strategic Partnership (CYPSP.)
- Attend or report to Outcomes Groups and Locality Planning Groups.
- Represent the Hub by attending other forums and partnerships.*



2.6 What is the Role of the Regional Lead?



The Regional Lead post was created in 2014 with a remit to ensure the sustainable and continuous development of the Hub Network across Northern Ireland.

The Regional Lead post sits within the Department of Health's (DoH) Strategic Planning and Performance Group (SPPG) with a regional remit.

The Regional Lead is required to provide expert advice, disseminate learning and best practice to all Hubs and Outcomes Groups in order to improve standards in Hub provision and to drive innovation and change.

2.7 How are Family Support Hubs Funded?

- Funding is provided by the DoH to each of the five HSC Trusts for provision of Hubs across their Trust area.
- Hubs models vary between Trust areas.
- Trusts may contribute additional funding to support their Hub model.
- An overview of Hub models in each of the Trust areas can be found in Appendix 10.

FUNDING

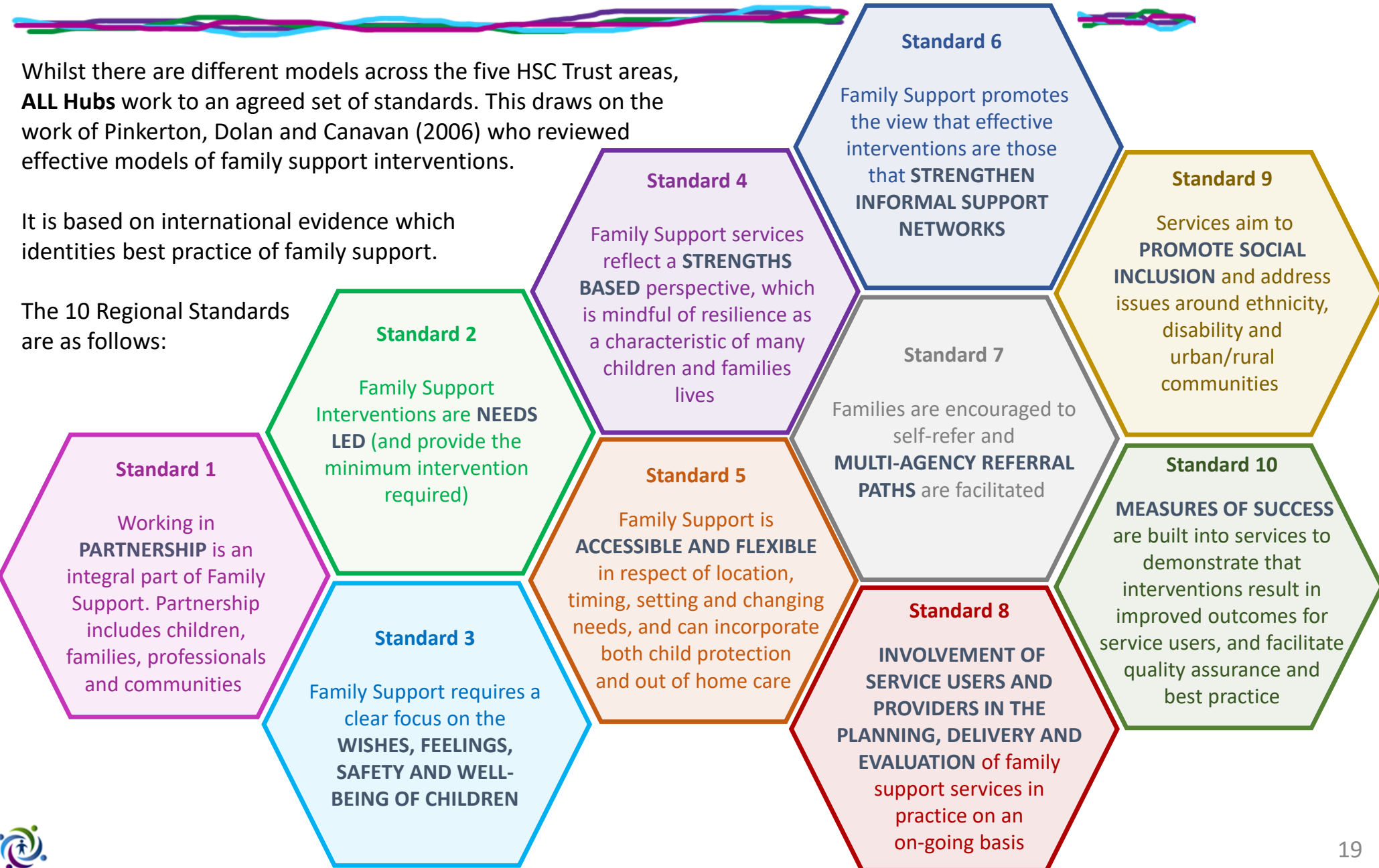
- Some but not all services provided through the Hubs may be funded by DoH.
- Many of the Hub members are funded through other departments or organisations e.g. Department of Education (DE), Public Health Agency (PHA) or Voluntary Community Sector (VCS) organisations of Communities, HSC Trusts, Local Councils.
- They may also seek funding through a range of grants and other funding streams.

2.8 What are the Regional Family Support Hub Standards?

Whilst there are different models across the five HSC Trust areas, **ALL Hubs** work to an agreed set of standards. This draws on the work of Pinkerton, Dolan and Canavan (2006) who reviewed effective models of family support interventions.

It is based on international evidence which identifies best practice of family support.

The 10 Regional Standards are as follows:



2.9 How Do We Know It Works?

A Hub evaluation system is in place across the region and Hub Coordinators are required to submit monitoring reports to the CYPSP Information Team, on a quarterly basis. The monitoring reports provide details on Hub activity, including: number of referrals; reasons for referral; referral sources; and unmet need. Individuals cannot be identified from monitoring data.

This information is collated by the CYPSP Information Team, who produce quarterly Regional Family Support Hub Reports as well as Annual Reports for each of the five Outcomes Group areas.



These reports can be found on the CYPSP website at: <https://cypsp.hscni.net/family-support-hubs>.

In consolidating and progressing the ways in which the Hubs operate, a Quality Assurance and Action Planning Tool was devised drawing on the work of Pinkerton, Dolan and Canavan (2006) who reviewed effective models of family support interventions.

It is based on international evidence which identifies best practice of family support.

The authors identified ten core characteristics that family support providers should aspire to. These adapt to support the development of Family Support Hubs in their infancy.

This work was reviewed with Hub Coordinators in 2023, to consider how these 10 Standards apply to the now established Hubs. The 10 Standards are included in the appendices of this document.

The other measure of success is the increasing number of families coming to the Hubs seeking support.

When monitoring first began in 2014/15, 2635 families were referred, in 2022/23 the Hubs received referrals for 9147 families.

The other increase is in the percentage of self referrals. In 2014/15 they accounted for 10% of all referrals, in 2022/23 21% were self referrals.

3.1 What is the CYPSP?

The **Children & Young People's Strategic Partnership (CYPSP)** is a Multi-agency strategic partnership consisting of senior leaders of all key agencies across statutory, community and voluntary sectors.

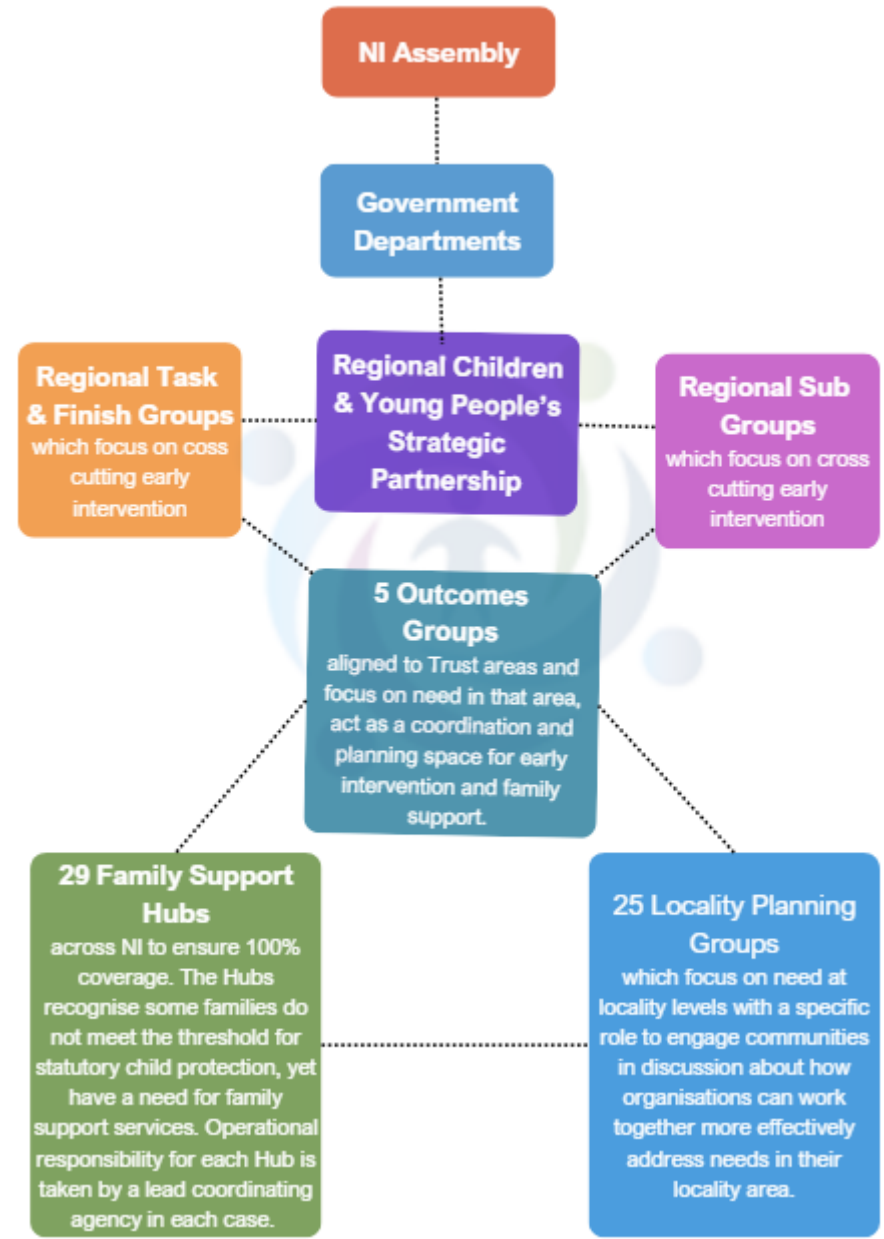


CYPSP is supported by staff from the Department of Health's Strategic Planning and Performance Group (DoH/SPPG) to support the Children's Services Planning (CSP) process.

Early intervention is a key strategic aim of the CYPSP.

The Children's Services Co-Operation Act (Northern Ireland) 2015 states in 2 (1) that:
 "Every Children's Authority must, so far as is consistent with the proper exercise of its children functions, co-operate with other children's authorities and with other children's services providers in the exercise of those functions"

CYPSP Structure





The Children and Young People's Plan is developed every 3 years on behalf of the CYPSP.

The purpose of this Plan is to:

- set out a shared vision and strategic direction to guide the work of the NI CYPSP for the period 2025-2028;
- Provide a planning framework agreed by all partners agencies that will be used to develop, monitor, review and improve how early intervention services are delivered;
- describe the outcomes we aim to achieve together and the improvements we need to deliver; and
- set out an integrated approach to implementing our strategy and delivering those improvements.

The Plan also includes associated Plans for each of the five CYPSP multi-agency **Outcomes Groups**, and includes links to the detailed action plans developed at locality level.

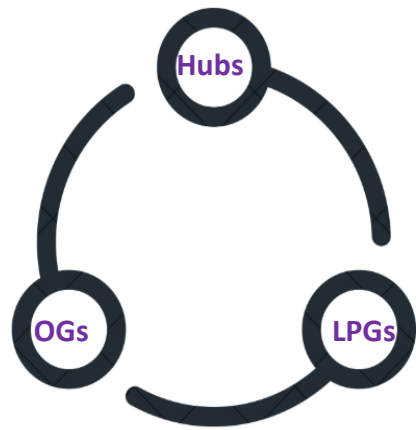
There are 6 key priority areas in the current Children and Young People's Plan 2025-28



The full Children and Young People's Plan and Easy Read version can be accessed on the CYPSP website at <https://cypsp.hscni.net/children-and-young-peoples-strategic-partnership/our-plan/>

Relationships are central to the CYPSP model, professional relationships and partnerships between agencies and sectors working together across professional boundaries towards shared goals.

3.2 What is the Relationship Between Family Support Hubs and CYPSP Outcomes Groups and Locality Planning?



Outcomes Groups

Outcomes Groups (OGs) are a partnership of senior leaders across all sectors within each of the five HSC Trust areas of Northern Ireland. They are chaired by the Director of Children Services in each Trust and focus on Early intervention.

Each OG reports to the CYPSP and receives regular reports from Locality Planning Groups (LPGs).

The Regional Lead for Family Support Hubs is a member of all five OGs and reports on regional Hub activity, emerging issues and unmet need.

Locality Planning Groups

LPGs are partnerships between children, young people, families, communities and representatives of agencies at local level.

The strategic expectation is that these multi-agency groups of front-line leaders contribute to strategic planning through working closely with OGs and the Hub network to:

- identify and address unmet and emerging needs at grass roots locality level, i.e. local solutions to local needs;
- provide an effective and accessible way for children and young people and families, as well as communities, to be involved in the planning of services to meet their needs;
- develop bespoke and multi-agency locality-based action plans, which take account local population indicators of need.

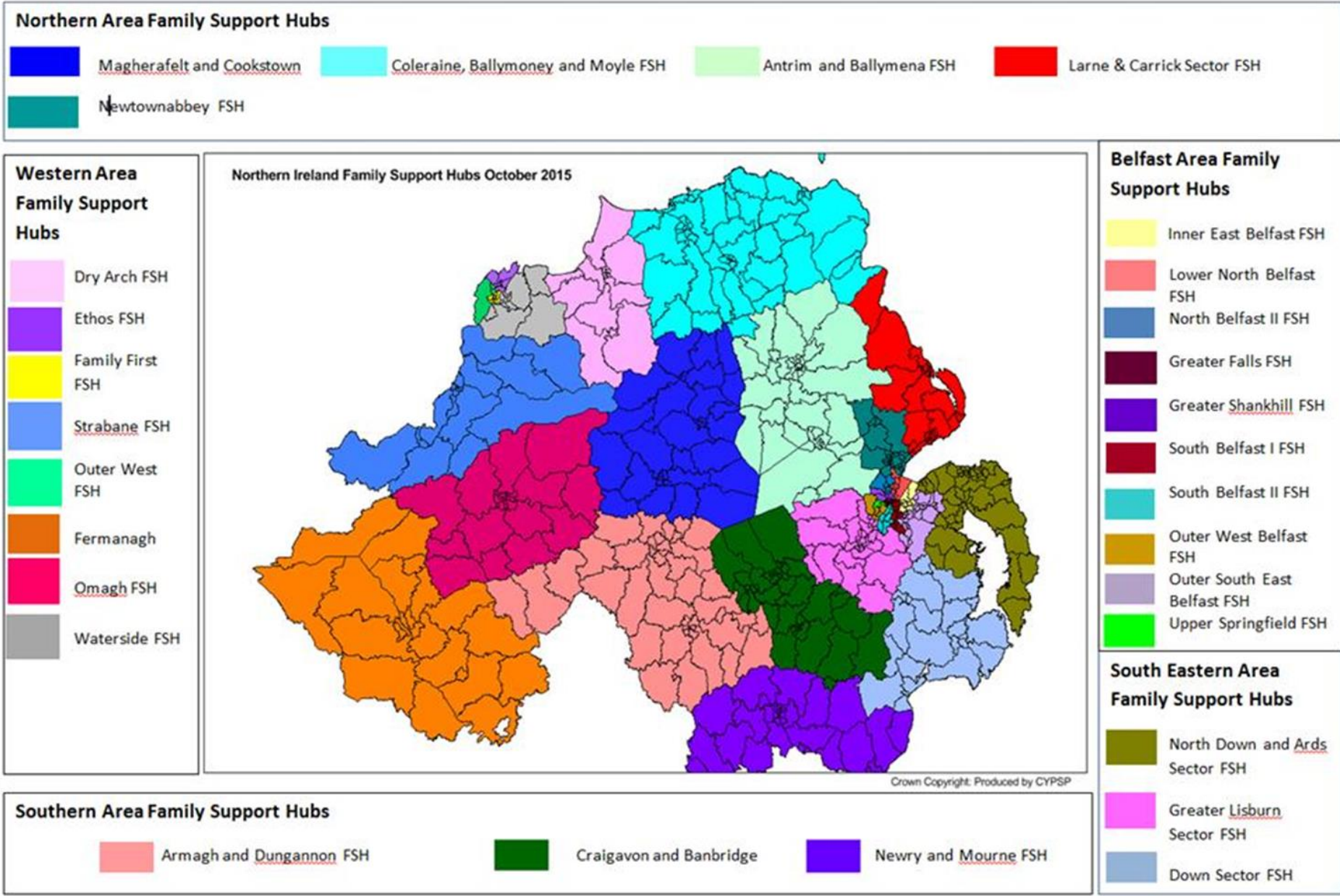
Hubs contribute to strategic needs assessment and locality planning and are well placed to provide intelligence about the availability and gaps in services.

Each LPG meeting has a standing agenda item to allow time for Hubs to share this information and to explore how to work together to address these.

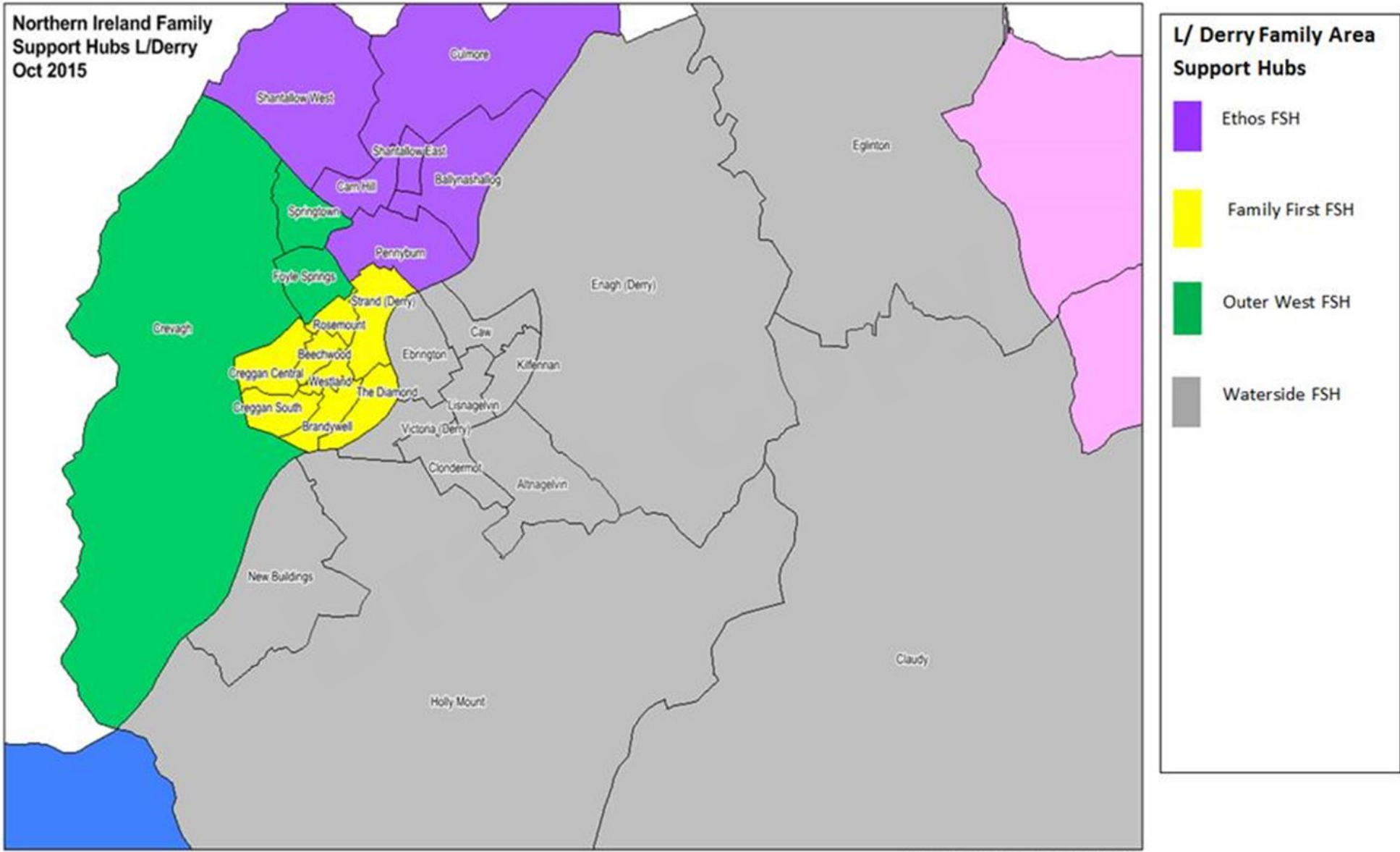
APPENDICES



APPENDIX 1 – Regional Family Support Hub Map



APPENDIX 3 – L/Derry Family Support Hub Map



Crown Copyright. Produced by CYPSP



APPENDIX 4 – Family Support Hub Coordinators Contacts

Trust Area	Family Support Hub	Phone Number
Belfast	Inner East Belfast	(028) 9045 6766
	Lower North Belfast	(028) 9074 9986
	Upper North Belfast	(028) 9035 1020
	Greater Falls	(028) 9031 9634
	Greater Shankill	(028) 9031 1455
	South Belfast 1 (LORAG)	(028) 9031 2377
	South Belfast 2 (CASA)	(028) 9023 5451
	Outer West Belfast	(028) 9521 2131
	Outer South East Belfast	(028) 9041 9069
	Upper Springfield & Whiterock	(028) 9043 8438
Northern	Antrim & Ballymena	(028) 9446 7345
	Coleraine, Ballymoney & Moyle	
	Magherafelt & Cookstown	
	Larne & Carrick	
	Newtownabbey	
South Eastern	Down Sector	(028) 9250 1357
	Greater Lisburn	
	North Down & Ards	
Southern	Armagh & Dungannon	(028) 3752 2380
	Craigavon, Portadown & Banbridge	(028) 3833 1168
	Newry & Mourne	(028) 3083 5764
Western	Dry Arch	(028) 7774 2904
	Ethos	(028) 7135 2522
	Family First	(028) 7137 3870
	Strabane	(028) 7138 2658
	Outer West	(028) 7126 9833
	Fermanagh	(028) 6632 4181
	Omagh	(028) 8225 9495
	Waterside	(028) 7132 9444



APPENDIX 5 – Agreement to Accept Referrals (To be completed for each Associate Member)

Family Support Hub Associate Member Agreement to Accept Referrals from the Family Support Hub

Name of Organisation	<input style="width: 95%;" type="text"/>	Lead Contact Person	<input style="width: 95%;" type="text"/>
Organisation Address	<input style="width: 95%;" type="text"/>	Contact Details	<input style="width: 95%;" type="text"/>
Catchment Area	<input style="width: 95%;" type="text"/>	Do you require a referral form to be completed? Yes <input type="checkbox"/> No <input type="checkbox"/>	

Details of service provided that Family Support Hub can refer to:

Services Provided	Referral Criteria

We agree to let the Hub know if any referred family:

- Starts the programme referred to
- Completes the programme referred to
- Weather or not the organisation considered their work to have had a good outcome

Name:	<input style="width: 80%;" type="text"/>
Signature:	<input style="width: 80%;" type="text"/>
Date:	<input style="width: 80%;" type="text"/>



Data Protection Principles

The data protection principles are contained in the UK GDPR and require that personal information must be:

- a) **Processed lawfully, fairly and in a transparent manner** in relation to the data subject - (Lawfulness, Fairness and transparency). There must be valid grounds under the UK GDPR (known as a 'lawful basis') for collecting and using personal data and you must not do anything with the data in breach of any other laws. Personal data must be processed in a way that is fair and not unduly detrimental, unexpected or misleading to the individuals concerned. You must be clear, open and honest with people from the start about how you will use their personal data.
- b) **Collected for specified, explicit and legitimate purposes** and not further processed in a manner that is incompatible with those purposes. (Purpose limitation)
- c) **Adequate, relevant and limited to what is necessary** in relation to the purposes for which they are processed. (Data minimisation)
- d) **Accurate and, where necessary, kept up to date**; every reasonable step must be taken to ensure that personal data that are inaccurate, having regard to the purposes for which they are processed, are erased or rectified without delay. (Accuracy)
- e) **Kept in a form which permits identification of data subjects for no longer than is necessary for the purposes for which the personal data are processed.** (Storage limitation)
- f) **Processed in a manner that ensures appropriate security of the personal data**, including protection against unauthorised or unlawful processing and against accidental loss, destruction or damage, using appropriate technical or organisational measures. (Integrity and Confidentiality)

In accordance with Article 5(2) of the UK GDPR the data controller shall be responsible for, and through its policies, procedures and protocols will demonstrate compliance with the Data Protection Principles listed above (**overarching principle of Accountability**).

General Data Protection Regulations (GDPR) Family Support Hub Information and Privacy Notice

Compliance with GDPR requires organisations to review their approach to governance and how they manage data as a corporate issue. This includes a review of contracts and other arrangements for sharing data with other organisations.

Each organisation needs to document what personal data they hold, where it came from and who they share it with. An information audit may assist in this regard.

GDPR Applies to ‘Controllers’ and ‘Processors’

- A controller determines the purposes and means of processing personal data.
- A processor is responsible for processing personal data on behalf of a controller.
- Processors have specific legal obligations; for example, they are required to maintain records of personal data and processing activities. They also have legal liability if they are responsible for a breach.
- However controllers are not relieved of their obligations where a processor is involved – the GDPR places further obligations on them to ensure contracts with processors comply with the GDPR.

Consent

- GDPR sets a high standard for consent. Consent means offering individuals real choice and control. Genuine consent should put individuals in charge, build trust and engagement, and enhance your reputation.
- Agencies need to check consent practices, existing consents and refresh consents if they don't meet the GDPR standard.
- Consent requires a positive opt-in. Don't use pre-ticked boxes or any other method of default consent.
- Explicit consent requires a very clear and specific statement of consent.
- Consent requests should be kept separate from other terms and conditions.
- Vague or blanket consent is not enough.
- Be clear and concise.
- Name any third party controllers who will rely on the consent.
- Make it easy for people to withdraw consent and tell them how.

Consent cont'd

- Keep evidence of consent – who, when, how, and what you told people.
- Keep consent under review, and refresh it if anything changes.
- Avoid making consent to processing a precondition of a service.
- Public authorities and employers will need to take extra care to show that consent is freely given, and should avoid over-reliance on consent.

Data Breaches

The GDPR introduces a duty on all organisations to report certain types of personal data breach to the relevant supervisory authority. This must be done within 72 hours of becoming aware of the breach, where feasible.

If the breach is likely to result in a high risk of adversely affecting individuals' rights and freedoms, those individuals must be informed without undue delay.

Ensure there are robust breach detection, investigation and internal reporting procedures in place. This will facilitate decision-making about whether or there is a need to notify the relevant supervisory authority and the affected individuals.

A record must be kept of any personal data breaches, regardless of whether there is a requirement to notify.

What is a personal data breach?

A personal data breach means a breach of security leading to the accidental or unlawful destruction, loss, alteration, unauthorised disclosure of, or access to, personal data. This includes breaches that are the result of both accidental and deliberate causes. It also means that a breach is more than just about losing personal data.

Please note: Data protection legislation and guidance is subject to change. This information reflects current requirements at the time of publication.



Privacy Notice Template (To be completed by each Hub Host Organisation)

Under GDPR privacy notices need to be reviewed and a plan put in place.

This should include both notices for staff and service users.

Why are you processing my personal information?

State the purpose of processing i.e. for the provision of services.

Outline the lawful basis for processing i.e. legislation, contract, public task, vital interests (refer to guidance).

ONLY if you are relying on consent to process personal data.

Describe how you obtain and record consent.

State that they may withdraw consent for this processing, by contacting/by deleting etc...

If you do any direct marketing, you need to refer to this in the privacy notice. See ICO guidance - <https://ico.org.uk/for-organisations/advice-for-small-organisations/direct-marketing-and-data-protection/>

What categories of personal data are you processing?

List any special categories of personal data you are processing i.e. Health Data, Race/Ethnicity, Trade Union Membership, Genetic Data, Biometric Data.

Where do you get my personal data from?

State the source of the personal data originates from, and whether it came from public accessible sources.

Do you share my personal data with anyone else?

List the types/names of organisations (internal and external) that you share with and state the reasons for sharing *e.g. We may share your data with enforcement agencies for the prevention or detection of crime, We share with NIHE and DfC for the purpose of processing housing benefit.*

How long do you keep my personal data?

We will only retain your data for as long as necessary to process (i.e. your rates) and in line with our Retention and Disposal Schedule (*Provide a hyperlink*).

(If you use automated decision making or profiling) How do you use my personal data to make decisions about me?

State any automated decision making or profiling you do

Outline how decisions are made

List any consequences

What rights do I have?

You have the right to obtain confirmation that your data is being processed, and access to your personal data.

You are entitled to have personal data rectified if it is inaccurate or incomplete.

You have a right to have personal data erased and to prevent processing, in specific circumstances.

You have the right to 'block' or suppress processing of personal data, in specific circumstances.

You have the right to data portability, in specific circumstances.

You have the right to object to the processing, in specific circumstances.

You have rights in relation to automated decision making and profiling.

How do I complain if I am not happy?

If you are unhappy with how any aspect of this privacy notice, or how your personal information is being processed, please contact *The Data Protection Officer* at

If you are still not happy, you have the right to lodge a complaint with the Information Commissioner's Office (ICO):

Information Commissioner's Office

Wycliffe House

Tel: 0303 123 1113

Water Lane

Email: casework@ico.org.uk

Wilmslow

<https://ico.org.uk/global/contact-us/>

Cheshire

SK9 5AF



Information Sharing Framework for Family Support Hubs

This Information Sharing Framework (Framework) sets out the principles and standards relating to information sharing for organisations which are members of Family Support Hubs (Hubs) and the wider Family Support Network of provider organisations. All organisations involved in the Hubs and wider Family Support Network are required to sign and comply with the arrangements set out in this Framework.

Purpose of the Information Sharing Initiative

The sharing of information covered by this Framework is designed to improve outcomes for children, young people and their families.

What Information Sharing is Meant to Achieve

The information sharing will enable the family support needs of vulnerable families at risk of poor outcomes to be matched to appropriate providers of family support services through a Hub.

Could the Objective be Achieved Without Sharing the Data or Anonymising it?

It would not be possible to provide services for families without having some personal details available. This is because the range of support needs that families have, and the specific referral criteria for support services require careful matching although some Hubs, including all Belfast area Hubs anonymise all information.

The Organisations that will be Involved in the Information Sharing?

Core members of each FSH. They will see all relevant data relating to all referrals. This will comprise of a referral form.

Name of Organisation	Address of Organisation	Core Contact	Telephone/Email Details

Associate network members, if a referral on is considered appropriate, will only see data on referrals made directly to them.

Name of Organisation	Address of Organisation	Core Contact	Telephone/Email Details

Items to be Shared

Information that Needs to be Shared

A referral form/request for help will be completed in respect of all families referred to the Hub.

The information requested will be:

- Details of the family support needs of the family;
- Personal details of all family members (names, dates of birth and occupation/school);
- Details of ethnicity and disability; and
- Services requested by the referrer for the family.



Access to the Shared Personal Data

Access to shared personal data will be restricted to those organisations that are full members of the Hub. If the family are referred on to an organisation which is a member of the wider Family Support Network, then their details will be passed on to that organisation, provided that organisation/service is in a position to offer help to the family and the family have consented to that onward referral.

When Information is Shared

Written referral information will be shared with full members of the Hub at its formal meetings. Information will only be passed to other providers outside of the Hub if they are a member of the Family Support Network and in a position to deliver a service the family needs, with family's consent.

How Information is Shared

Written referral information will be shared with full members of the Hub for the purposes of decision making. Written referral information will only be retained by the organisation which accepts the formal referral. All other referral forms will be returned to the chair of the Hub for destruction.

Basis for Sharing

The nature of the information sharing arrangements covered by this protocol is as follows:

- Several organisations pooling information and making it available to each other or to a third party or parties.

The type of data sharing covered by this protocol is as follows:

- Systematic, routine data sharing where the same data sets are shared between the same organisations for an established purpose.

Information Governance

Ensuring that Information Sharing is Achieving its Objectives

- The Hub will retain information for the purposes of evaluation and will adhere to the guidance under GDPR.
- The purpose of the information sharing is to match families with support needs to family support providers.
- Information comprising of name of the family, postcode, numbers of adults and children in household and ages, reason for referral and support issues identified and services requested and services allocated.
- Following allocation to a specific provider the Hub will require the provider to confirm that the family/child started the programme and that they had finished.
- This information will be used to ensure the Hub is meeting its purpose and operating effectively.
- It will also be used to identify gaps in service provision and plan for services to fill these gaps.

What Risk Does the Data Sharing Pose?

Risk	Control
Members of Hub use data for a purpose other than what it is intended	All referral forms are returned to the chair after a meeting and destroyed. Data is only held by organisation that accepts a referral. All members have to sign this Framework.
Members of Hub/Family Support Network do not follow agreed standards of data protection	All members have to sign this Framework. Organisations accepting referrals have to agree to be bound by the information sharing protocol and sign a document to agree to this. Organisations accepting referrals have to have data protection policies.
Data gets lost	Data distribution, allocation and destruction will be handled by one organisation.
More information is collected than needed to ensure the purposes of the Hub	Data requirements will be kept under review and formally assessed annually.



APPENDIX 10 – Overview of Family Support Hub Structures

Western Trust/Outcomes Group Area

The Western Trust (WHSCT) first established Hub provision in 2009, these early Hubs were linked to family centres. This did not provide 100% geographical cover across the WHSCT. These Hubs whilst associated with family centres have evolved in to entities in their own right. By 2013 a further Hubs had been developed and there are now eight Hubs across the WHSCT area. The Hubs are hosted by a range of Community and Voluntary Sector organisations.

South Eastern Trust/Outcomes Group Area

There are three Hubs in the South Eastern Trust (SEHSCT) area aligned on the three old legacy Trust areas. The Hubs evolved from the SEHSCT's Family Support Panels which were established in 2009. They became known as Hubs in 2012. The Hubs are hosted by the SEHSCT. The three Hubs are covered by one Family Support Hub Coordinator.

Northern Trust/Outcomes Group Area

The five Hubs were set up between September 2011 and March 2013. The Hub areas have been defined using areas that made sense locally. All Hubs are hosted by Action for Children and one Hub Coordinator who is supported by four Family Support Workers in contacting families and gathering additional information.

Southern Trust/Outcomes Group Area

There are three Hubs in the Southern Trust (SHSCT) area. These are based on the old legacy SHSCT areas. They were developed in 2012 and each area is hosted by a different voluntary sector organisation.

Belfast Trust/Outcomes Group Area

Belfast Trust (BHSCT) was the last of the areas to develop Hubs, and these were developed during 2014-15. There are 10 Hubs across the area and these are linked to Neighbourhood Renewal Areas and with a community driven approach. Nine of the 10 hosts are community sector and one Hub is hosted by a voluntary organisation.



APPENDIX 11 – 10 Standards Guidance

Short video guidance on applying the 10 Standards: <https://youtu.be/4BDRd68C6hM>

Overview of Previous Scores and Actions

	Current score	Previous Scores			Previous actions agreed
Standard	Date _/_/___	Date _/_/___	Date _/_/___	Date _/_/___	
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					



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

Points to consider:

- How many core and associate members have we? Who is missing? How do we share information?
- What have we done to promote our Hub? (events/networking)
- Flow of referrals in and out to partners/members
- Relationships with families, members & referrers. How healthy is this network?
- Quality of relationships – are we using our feedback and evaluation, are our relationships personal relationships, have we re-referrals from families, self-referrals?
- How much time am I spending processing referrals vs time spent developing Hub and relationships? What is the ideal balance for me?
- What is the relationship with statutory agencies i.e. Gateway, CAMHS.

DISCUSSION	ACTIONS	SCORE



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

Points to consider:

- Where are our areas of unmet need? Are these changing?
- Families are receiving services, but are they the right fit or next best thing? (include work to plug gaps)
- Minimum intervention – what does this look like? Is the conversation with the family in itself an intervention and is that enough?
- Resource issues
- Relationship with Locality Planning. How is unmet need reported?

DISCUSSION	ACTIONS	SCORE



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

Points to consider:

- What are we doing to ensure we are listening to Children and Young people’s voices?
- Are all needs being met? Are Gaps in service impacting on this?
- Are referrals meeting the correct threshold?
- What can we do to maintain or improve communication between Hubs and referral partners?
- Are we confident of how we deal with Child Protection processes and our relationships with Gateway?

DISCUSSION	ACTIONS	SCORE



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

Points to consider:

- Are we considering the language we use?
- Are we using a Strengths based approach (e.g Signs of Safety)?
- Are we considering what issues but also considering what is working well?
- Are we reflecting the parent’s strengths – to professionals and to the family?
- Is everyone adopting the same strengths based perspective?

DISCUSSION	ACTIONS	SCORE



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

Points to consider:

- Do we have an Open Door to organisations who could be members/ Hub leads?
- Are we using technology to it’s potential? i.e. Social media, Family Support NI, WhatsApp
- What are we doing to promote Hubs? Are we excluding others in this?
- Are we making it easy for referrals to be received? i.e. digital, by phone (families only), post, face to face (families only)
- Are we working well with LPGs re changing needs etc?
- What are we doing to be accessible for our Ethnic minority families?
- What changes are we seeing in needs?
- Are we taking time with families to listen? What are we doing with that information?

DISCUSSION	ACTIONS	SCORE



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

Points to consider:

- Are we at Networking events? How do we assess the success of these?
- Are we supporting each other? WhatsApp groups, buddy system, supervision, regional Collective
- Are we linking the supports available for family interventions?
- Are Statutory Services attending Hub meetings/ engaging with Hubs?
- What are we doing to build relationships?
- Are we encouraging informal relationships and supports for families? i.e. Family, friends. Neighbours, community

DISCUSSION	ACTIONS	SCORE



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

Points to consider:

- What are our statistics telling us about self-referrals?
- Which professionals are signposting to Hubs?
- Raising awareness of role and remit of Hubs, are professional referrals being properly completed?
- Are we considering impact of some professionals placing responsibility for self-referral on families, how can we ensure this translates to referrals being made?

DISCUSSION	ACTIONS	SCORE



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

Points to consider:

- How are we gathering feedback? (Outcomes Star, Case Studies, first and final review forms, online survey etc)
- Are we agreeing service with family before onward referral and identifying barriers/limitations for each family?
- Are we able to offer face to face or home visits where requested?
- What is the impact of requesting feedback on Hub members.
- How are we reporting our unmet need and changing needs so as to inform planning?
- Are we gathering the right balance of qualitative and quantitative data?
- Do we feel connected to LPGs and Outcomes Groups?

DISCUSSION	ACTIONS	SCORE



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

Points to consider:

- Are services being delivered in a way that meets the needs of families in our Hubs area?
- Have we 2 way relationships with Hub partners?
- Do we have good relationships within our communities?
- What Outreach and networking are we doing?
- What barriers are there to accessing supports in our area and how can we challenge these?
- Do we have access to services who can support ethnic minority families?
- Are there other areas experiencing similar barriers? Can we learn from their experiences?
- Are there cultural barriers to accessing supports?

DISCUSSION	ACTIONS	SCORE




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

Points to consider:

- How are we measuring success? Monitoring, engagement levels, self referrals, Case studies, Listening to families, growing relationships and networks, measurement tools e.g. Outcomes Star
- Are we well connected to Locality Planning? Are we feeding up issues and receiving feedback?
- Are we looking at the bigger picture? Where are we now? Where do we want to be? What do we need to do to get there? Who do we need to help us achieve this?
- What have we learnt from reviewing our 10 Standards?

DISCUSSION	ACTIONS	SCORE





For further information please email:

cypsp@hscni.net