

Health and Wellbeing Board Report for Resolution

Report to: Manchester Health and Wellbeing Board – 10 June 2015

Subject: Complex Dependency and Troubled Families

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Summary

This report provides the Health and Wellbeing Board with an update on the progress of the Complex Dependency (Confident and Achieving Manchester) and Troubled Families programmes. It provides an overview of how these programmes have a significant role to play in helping to achieve a number of the Health and Wellbeing Strategy priorities and includes recommendations for how the link between Health and Wellbeing services can be strengthened further in the forthcoming months.

Recommendations

The Board is asked to note the content of the report and approve the recommendations.

Board Priority(s) Addressed:

Health and Wellbeing Strategy priority	Summary of contribution to the strategy
Getting the youngest people in our communities off to the best start	The development of a revised Early Help Strategy and implementation of EH Hubs will help ensure earlier intervention & prevention for young people that need help
Educating, informing and involving the community in improving their own health and wellbeing	A key part of the Complex Dependency model is about having a broader range of professionals trained to be able to direct people to the right services in their communities as well as more effective triage functions.
Moving more health provision into the community	
Providing the best treatment we can to people in the right place at the right time	Having Lead workers that can assess effectively and sequence support appropriately is a core principle of the Complex Dependency model
Turning round the lives of troubled families	Successful delivery of Phase 1 and 2 of the national Troubled Families programme will directly impact on families to turn around their lives

Improving people's mental health and wellbeing	Lead Workers will be trained to better understand and assess peoples' Mental Health as well as direct them into the right services to meet their needs
Bringing people into employment and leading productive lives	A focus on employment is a central element of the Complex Dependency model with frontline staff trained and supported to be able to have the right conversation about work and get access to the right provision plus the commissioning of the right type of employment provision through programmes such as Working Well.
Enabling older people to keep well and live independently in their community	

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Background documents (available for public inspection):

The following documents disclose important facts on which the report is based and have been relied upon in preparing the report. Copies of the background documents are available up to 4 years after the date of the meeting. If you would like a copy please contact one of the contact officers above.

1. Public Service Reform in Manchester

1.1 The priorities for the city are creating the conditions for economic growth, connecting more residents to the opportunities of that growth, and attractive places for people to live and work, underpinned by good quality universal services.

The three reform priorities are:

- complex dependency to employment
- health and social care integration
- improving early years and school readiness

Public service reform in Manchester is based on the following principles:

- Integration and coordination of public services
- Whole-family / whole-person approach to changing behaviour
- Using evidence-based interventions to improve outcomes

1.2 Public service reform involves developing new delivery models based on these three principles. It also involves new approaches to investing and aligning resources from a range of partners on joint priorities, and robust evaluation of what works to reduce demand. The groundbreaking GM Devolution Agreement signed with Government in November 2014 provides a significant opportunities for aligning resources and developing new delivery models that can overcome some of the barriers to integration of services in places.

2.0 Complex Dependency – ‘Confident and Achieving Manchester’

2.1 Confident and Achieving Manchester is the programme that will scale up and integrate areas of public service reform relating to complex dependency in the city. The initial focus has been the second phase of the national Troubled Families programme and the new Early Help strategy. The focus is now shifting to the expansion of the Working Well programme as set out in the GM Devolution Agreement, and other reform projects such as Delivering Differently for domestic abuse and violence, Integrated Offender Management and Intensive Community Orders.

2.2 The outcomes to be achieved are significant reductions in complex demand and dependency on public services, supporting more residents to become independent and self-reliant, and better connecting residents to the opportunities of economic growth. This includes reducing levels of worklessness and long-term worklessness, tackling low skills, improving health outcomes, educational attainment and attendance, substance misuse, domestic abuse, and levels of safeguarding demand.

2.3 The approach is whole-system redesign that will tackle the root causes of complex dependency amongst residents and communities. This includes early intervention with groups at risk of having complex problems in future, reducing the flow of future demand by dealing with the early signs of issues before they escalate.

2.4 Complex dependency involves a sharper focus to date on employment and progression at work, as a key driver of longer-term independence and self-reliance

for communities. For some, there will be a difficult journey to work, but an integrated and sequenced approach to tackling the barriers to work, with services provided in the right order and at the right time, will help many to overcome broader issues in their lives, for example, health, offending, drug and alcohol and debt issues. Complex dependency includes single adult and multi-adult households as well as families with children.

3.0 Early Help

3.1 Early Help means identifying needs within families early, and providing preventative support and intervention before problems become complex and entrenched. It involves offering support to very young children early in life, and to children and families early after the emergence of particular need. It includes both universal interventions and targeted interventions to prevent needs from escalating. Early Help allows for support to be put in place at the right time to meet family's needs prior to issues reaching crisis point. It draws upon families' own skills and promotes self-reliance behaviours.

3.2 A new Early Help Strategy has recently been developed in response to concerns raised by Ofsted in their inspection of children's services in June 2014. This has been built on significant engagement with all partners over the last four months on all elements of the strategy and approach to early help. It includes a revised approach to assessment, thresholds and levels of need. The North West ADCS definition of early help has been adopted to provide all partners with a clearer understanding of early help – defined as everything below the need for a statutory Social Work intervention, covering a broad spectrum of needs:

'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. Effective intervention may occur at any point in a child or young person's life '.

3.3 This includes a revised and strengthened approach to Troubled Families as a significant subset of Early Help. The Ofsted report recommended that Manchester:

'seeks to emulate its approach to and success with the troubled families programme, to ensure that help and support for families who struggle is timely and effective'.

4.0 The Troubled Families Programme – Phase 1

4.1 The first phase of the national Troubled Families programme was launched in April 2012 with the ambition of turning around the lives of 120,000 families nationally. Manchester was set the target of working with and achieving improved outcomes for 2,385 families. Prior to the launch of the national programme, Manchester had recognised the importance of having the right services and delivery model to be able to respond to the needs of families with complex needs that put high demand on public services. This was reflected in the development of a new delivery model for working with complex families in the Family Recovery Service approach, and in Greater Manchester being one of four national Whole Place Community Budget pilot areas in 2011.

4.2 Manchester has continually refined its delivery model for Troubled Families over the last few years as it has learned more about what works and the City's population of Troubled Families. This has led to an expanded range of family support services across different organisations which are able to respond to the needs of different types of troubled families as well as much more integrated response from public services leading to greater co-ordination, less duplication and ultimately a better experience for troubled families. Whilst the delivery model has evolved it is underpinned by a commitment to working to a number of core principles:

- Interventions chosen on the basis of available evidence of what works e.g. Family Intervention Project
- Interventions are integrated so that families receive a bespoke package of support that meets the needs of individual families
- The existence of a Family Lead Worker who will assess the need of the family and help them navigate public services more quickly, more effectively and in the right order
- Integration of services around the whole family not just individuals
- A focus on early intervention for 'at risk' families as well as support for those in crisis
- A clear focus on moving towards sustained employment as a core goal/aspiration for Troubled Families

Outcome (of those presenting with issue)	Proportion of families affected by each presenting need	% of families with the need that addressed / improved the issues	% deadweight – results from comparison group
Worklessness			
Families off 'out of work benefits' and confirmed into employment	63%	15%	5%
Offending & Police Incidents			
Families where there has been no repeat proven offences	16%	95%	91%
Families where there has been no repeat proven ASB incidents	23%	85%	69%
Families where there has been no repeat police incidents	72%	83%	26%
Health			
Mental Health improved	63%	44%	38%
Drug Misuse improved	24%	31%	13%
Alcohol Misuse improved	24%	51%	29%
Safeguarding			
Families with Domestic Violence issues resolved	67%	66%	53%
Families with 'Children in Need' status removed	24%	67%	50%
Families with 'Child Protection Plans' removed	14%	50%	40%
Children in Care (LAC) returned	7%	12%	11%
Education			
Reduction in persistent absence	8%	60%	23%
Reduction in fixed term exclusions	9%	75%	27%
Housing & Debt			
Avoided Eviction	30%	69%	26%
Families with open ASB cases with RPs	17%	42%	-
Families with Debt issues reduced or cleared	63%	62%	34%

4.3 A strong focus on these principles has helped Manchester to achieve its target of 2,385 families 'turned around' on the Government definition - a combination of school attendance/exclusions, youth crime and Anti Social Behaviour and unemployment. Manchester City Council was therefore able to successfully claim a payment by results payment for these families which has been reinvested in the next phase of work. Manchester's local evaluation has shown a significant impact on a range of outcomes as shown in the table below. A Cost Benefit Analysis is also being

undertaken which is currently showing that for every pound spent there is a return of £1.46.

5.0 The Troubled Families Programme – Phase 2

5.1 Greater Manchester was the only conurbation-wide 'early adopter' of phase 2 of the national Troubled Families programme from September 2014. Phase 2 nationally involves a further 400,000 families. Those involved in leading and delivering Troubled Families in Manchester have worked closely with Government's Troubled Families Unit to influence the design of the expanded programme and it is different to Phase 1 in a number of ways including:

- Targeting a larger number of families - an additional 400,000 nationally equating to c. 27,200 in Greater Manchester and c. 8019 in Manchester. Based on successful performance in Phase 1 Greater Manchester was of around fifty places that became an early starter in September 2014 which enabled it to start working with and receiving attachment fees for 4.080 of its total allocation of families in 14/15. This equated to 1203 families being engaged in Manchester in 14/15 and Manchester has subsequently committed to working with 1363 of its total families in 15/16.
- A broader criteria which will allow greater flexibility and discretion in the range of families that we work with and target our resources - It is expected that every family will have at least 2 of the six headline problems:
 - Parents or children involved in crime or anti-social behaviour
 - Children who have not been attending school regularly
 - Children who need help
 - Adults out of work or at risk of financial exclusion and young people at risk of worklessness
 - Families affected by domestic violence and abuse
 - Parents and children with a range of health problems
- A new measure of success for the programme based on achieving 'significant and sustained' change for families rather than families being 'turned around' by achieving success for helping families to address specific issues (school attendance, anti-social behaviour, worklessness)
- A different payment by results model which is based £1000 attachment plus £800 results payment based on achieving 'significant and sustained' change for families or moving them into work
- A greater emphasis on the Troubled Families programme as a vehicle for transformation of services rather than a particular emphasis on achieving specific outcomes for individual families
- A greater requirement to demonstrate the savings generated by the programme through the use of Cost Savings Calculator and a national impact study

6.0 The new approach to Troubled Families in Manchester as part of Early Help and Complex Dependency

6.1 As set out above, the focus of the next phase of the Troubled Families programme is more strongly on reducing levels of complex demand across the city, and connecting more residents to the opportunities of economic growth, as a key part of our approach to early help and complex dependency.

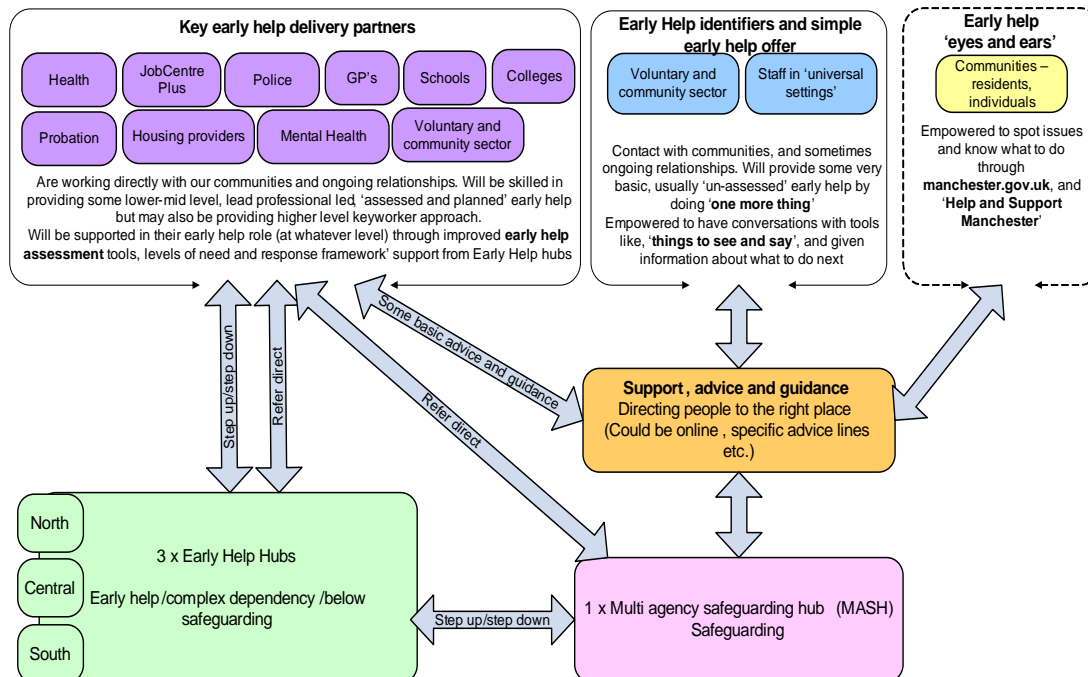
6.2 Early Help Hubs. Three Early Help Hubs are being established in North, Central and South Manchester to go live in September 2015. The purpose of these hubs is to bring together a wide range of frontline professionals to coordinate their response to early help, complex dependency and troubled families. The hubs will deliver an integrated offer of support across the age ranges and will build upon the work of the Sure Start Children's Centres, will link the targeted youth support services, family support interventions and interventions for vulnerable adults. New assessment tools underpinned by coordinated and effective support with key workers delivering intensive support where required will be in place.

6.3 The hubs will include a significantly increased resource of Early Help coordinators and advisers, who will act as a support resource for partners who are supporting a child or family. Troubled Families key workers will also be physically located in the hubs, as will Early Years professionals, Child in Need teams, TF Employment Advisors, Anti Social Behaviour staff. A range of partners are also expected to locate some frontline staff in the hubs where appropriate in a second phase of development. Furthermore other partners will be virtually integrated so they can share information and intelligence on cases even if they are not physically located in the hubs.

6.4 Partners as key workers. A number of partners have committed frontline staff resources to take on additional roles as key workers, from a range of professional backgrounds including school welfare officers, housing support officers, probation offender managers, and Police Community Support Officers. This will enable a broader support offer to be put in place for cases that could be better supported by an alternative professional than Family Intervention or Assertive Outreach key worker. All the partners' staff will work with the whole family and on the broad range of issues they face, but bring specific expertise on particular issues such as offending, debt, and education. Collectively partners have now committed staff to work with 150 Troubled Families 2 cases in 2015/16, out of the total 1,363 cases in the city. Manchester has also been developing a core definition of the skills and behaviours of a key worker across GM, and with the Core Cities nationally.

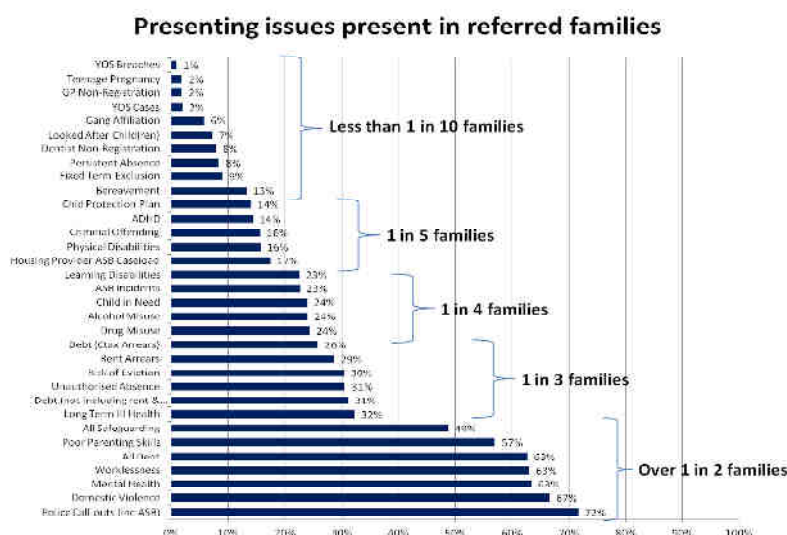
6.5 The diagram below shows the emerging high-level customer journey for early help, and the links with the Multi-Agency Safeguarding Hub which will remain as the city's front door for statutory safeguarding cases. The detail behind this process is now being developed with significant engagement with a wide range of partners. Key areas of design include: the support, advice and guidance function of early help hubs, the 'eyes and ears' function of frontline professionals, the referral processes being clearly understood by all, ensuring clear step up and step down processes with the MASH, and the processes of case allocation, management and supervision, case review and case closure.

Integrated Front Door and Early Help Hubs Referral Process



7.0 Opportunities to strengthen links to Health

7.1 As is demonstrated by the table below showing the presenting needs of families referred into the Troubled Families programme demonstrates the prominence of health related issues (Long term ill health, substance misuse). This is particularly the case in relation to Mental Health, which also correlates with the evidence emerging from the Working Well Pilot.



7.2 Some of the main benefits to health of the way of working evident in the Complex Dependency delivery models include:

- Reduced demand for acute services (A&E and GP attendance) as a result of there being effective support services for vulnerable people,
- Improved assessment of and take up of health services as a result of having dedicated key workers – this is particularly the case for mental health services, substance misuse and public health services. This should also help avoid unnecessary demands on health services by helping to direct people to appropriate alternative provision in communities.
- Health professionals having clearer pathways into the right types of services for people with complex needs.

7.3 The redesign of public health services in the city will focus on the transformation of mental health, drugs and alcohol, and well-being provision for troubled families and other complex individuals and families. Strategic negotiations with key partners including the CCGs and the Manchester Mental Health and Social Care Trust, will ensure that the totality of health spending on these issues is much more closely focused on these groups.

7.4 The proposals to tender for an integrated alcohol and drug early intervention and treatment system will ensure that alcohol and drug interventions will be delivered as part of the bespoke packages of support available to families and individuals with complex needs and their referrals will be fast tracked. In addition the new integrated service will:

- Support people into work: there will be a strong focus on recovery support, which will include working with partners to improve work-readiness, skills and access to employment for individuals who are recovering from alcohol and/or drug dependency
- Be a key component of Early help: the service will have an increased focus on training practitioners in other settings to identify and respond earlier to alcohol and drug misuse problems, and the service delivery model will include in-reach to a wide range of community settings so that services are more available and accessible
- Be aligned with Health and Social Care integration: the alcohol and drug service will be commissioned and delivered within the broader context of the developing approaches to integrated health and social care commissioning, and place-based care for community services

7.5 In relation to mental health, the investment in and redesign of the Recovery and Connect and Supported Accommodation services will focus on enabling people who have experienced mental illness to move towards employment and independent living. The troubled families and complex individuals cohort will again be prioritised for interventions. Furthermore as part of the Living Longer, Living Better programme, it is expected that community mental health services will now be part of the 'One Team' place based approach. This will enhance the integrated offer of services in the community to complex families.

services will ensure that the totality of health spending on these issues is much more closely focused on these groups.

7.6 A recent piece of work commissioned through the Greater Manchester Complex Dependency Executive has looked at good practice and areas where the integration between Complex Dependency and Health services could be improved. In summary some of the key findings demonstrated:

- The need for much greater focus on aligning mainstream mental health and substance misuse provision on these cohorts where there is a joint benefit from an integrated approach to delivery – including Troubled Families and the expanded Working Well programme. This will require more effective joint commissioning arrangements including from public health and CCGs than at present. Current work-arounds such as commissioning additional mental health and drug and alcohol support solely focused on these cohorts are a partial but unsustainable solution given shrinking budgets.
- The need to engage GPs more systematically and more effectively given the channels available and the messages such as the importance of work for health and vice versa – including on referrals in to these services and the ‘eyes and ears’ function
- The opportunities for Health Visitors to take a more substantive role in delivery of support, for example through the physical integration of resources in the Early Help hubs
- The need for more straightforward and clearer pathways between Complex Dependency and health services
- Accessing health data to more effectively identify families with complex needs, not just for those families that are already engaged
- Understand the overlap between the health cohorts within the LLLB programme and early help / complex dependency – for example, working age adults with complex needs, and older people with complex health needs who are part of Troubled Family households.

8.0 Recommendations

8.1 Nationally, a Health Leadership statement for Troubled Families was released in 2014, but it is clear that there is a need for a stronger focus within Manchester and GM to better integrate with health. The Devolution deal on Health & Social Care for Greater Manchester represents a significant opportunity to address some of these issues and it is proposed that there are some immediate activities that can be undertaken that will bring the level of focus needed. These include:

- Ensuring that early help and complex dependency are a core part of the Locality Plans being developed for Devolution Agreement on Health and Social Care and that lead officers involved in the development of the plan
- Prioritise the alignment of mainstream mental health and substance misuse services for those with complex needs through more effective joint commissioning based on the achievement of joint outcomes
- Expand the Health protocol that was produced for the Working Well programme and which will be revised for the expansion of Working Well, to incorporate Complex Dependency and Early Help

- Build on best practice for engaging Health professionals, for example GPs referrals into 'Fit for Work' programme
- Engage with Director of Public Health to explore opportunities to work more closely with Health Visitors and school nurses can play in delivering early help and prevention.
- Identify resource to support work to access key data sets and tackle data sharing challenges, linking into wider piece of work across Greater Manchester.

