

2.0 Our ambition: Children and families receive the right help at the right time from the right professional

Lead: Strategic Lead - Early Help & Front Door - Vicky Hodgkins

Our approach: To harness the strength and expertise across the service and partnership to respond to children and families issues as they emerge

Action Plan		Review of Progress & Priorities	RAG
2.1	Develop and implement "Right help, right time locality model of support" (Early Help Locality based teams)	<p>Implemented our prototype of the model Trafford Team Together (TTT) across 8 schools in two localities (West and North) & achieved partnership buy-in for the TTT approach, and the approach is having a positive impact.</p> <p>We have completed our Family Hubs submission, and are progressing this innovation. We have reviewed and developed an action plan in respect Intensive Family Support and are in the process of redesigning offer to locality teams. We have implemented dedicated Child In Need services that are organised on a locality basis.</p> <p>We need to progress with expanding the remit of Trafford Team Together and co-ordination of Early Help Offer (remodelling Early Help Hubs into Family Hubs) and develop our outcomes framework. It is important that we also embed the role of the voluntary sector broker that will sit within the TTT model, connecting children and families to their communities for the right support at the right time</p>	
2.2	Introduce and embed the use of child impact chronologies (CimC) in Early Help cases.	<p>Intensive Family Support workers have received training and are now using CimCs as a way to understand and record the impact of significant events in a child's life on their health, development and wellbeing - Champions.</p> <p>We need to measure the impact of the increased use of Child Impact Chronologies across the system & the partnership.</p>	
2.3	Stream line systems and processes within FRT to ensure responsive, reach out offer of support to families	<p>Through the redesign we implemented significant changes at the front door, with a shift away from case holding social work practitioners. We have continued to strengthen systems & processes at the front door, embedding and mainstreaming specialist workers: domestic abuse specialist mainstreamed and recruited), Education specialist (mainstreamed) and in addition there is a review of Health Visiting and school nursing services which will see the role specialist Health practitioner embedded with the front door; Co-location with the GMP is in place.</p> <p>We need to embed and maximise the role of Domestic Abuse Specialist and to continue to develop systems and process of information with the Police and other partners, as part of our ongoing monitoring of the effectiveness of our multi-agency front door,</p>	

2.4	Develop and embed conversational audit approach to user feedback	<p>Developed a conversational audit approach, as part of the wider QA framework although whilst conversational audits have started but they are not happening in the volume that we are aiming for.</p> <p>A key priority area in this regard remains the embedding of conversational audit approach to user feedback, and closing the loop in respect of the information coming out of these audits.</p>	
2.5	Revise and refresh step down (exit pathways) across the child's journey	<p>A multi-agency task and finish group sought to understand the barriers and issues to safely "stepping down" and identified a number of barriers. The findings of the Task & Finish group helped to support the drafting of proposals and a new framework.</p> <p>Partial - Task and Finish group included partners.</p> <p>Held case progression clinics looking at all of our children in advance of the restructuring of services to help determine which service was best placed to support each family. in terms of determining whether things that we need to do.</p> <p>We need to progress with the rolling out of the new pathways and then review the impact.</p>	
2.6	Embed quality assurance processes including of re-referrals at the Front Door to understand and act on themes	<p>Developed bespoke quality assurance arrangements to fit the unique nature of the work at the Front Door and continued to routinely dip sample contacts, referrals and re-referrals to understand the quality of our decision making. We have held 2 live audits at the Front Door and this now part of QAF - learning is being taken forward</p> <p>Need to formalise some of our routine audit activity, and the arrangements for the coming together of services to look at themes and learning. A focus also to be on the quality of the information that is provided within contacts and referrals. This will be an action in Ambition 8 moving forward .</p>	
2.7	Strengthen CIN planning and interventions through an agreed service delivery model	<p>Established a dedicated Child In Need Service 'Families First' as part of our drive to raise the status and quality of Child in Need planning and interventions. The remit of these teams is work intensively with children and families to work cases successfully to a conclusion .</p> <p>The teams are in place and established and there is an emerging ownership of the work .</p> <p>Team building sessions have happened and this is developing practice improvement.</p>	
2.8	Evaluate the effectiveness of Families Matter Pod and cascade learning to inform practice model.	<p>Completed evaluation and disestablished our Families Matter pod. Utilised the learning from what was successful and made a difference within our Families Matter Pod and integrated this within our new 'Families First' service area.</p>	
2.9	Embed and co-design strength based child in need reviews as the vehicle to drive outcome focused planning.	<p>Created new teams, using strength based interventions as our model.</p> <p>Need to continue to work with practitioners to drive forward the strengthening with the planning for these families, moving away from being process driven and moving towards being strength based. Our work with Strengthening Practice further supports these improvements.</p>	

2. 10	Establish a fully integrated multi agency Front Door.	As referenced in 2.3, the role of Domestic Abuse Specialist and Health Specialist have now been mainstreamed at the Front Door, and GMP are now colocated with the team within Trafford Town Hall. to continue to develop systems and process of information with the Police and other partners, as part of our ongoing monitoring of the effectiveness of our multi-agency front door.	
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