

Report to: Staffordshire Health & Wellbeing Board

To be held on: 06/09/18 06/09/18

Report Title:	Place Based Approach – Links to Prevention through Wellness - Update on Progress				
Report presented by:	Mick Harrison, Janene Cox, Karen Bryson				
Report prepared by:	Mick Harrison, Janene Cox, Karen Bryson				
Board Sponsor:	Helen Riley				
Report Type:	System Issues	<input type="checkbox"/>	Prevention	<input checked="" type="checkbox"/>	Statutory Duties <input type="checkbox"/>
Recommendations / action required:					
<ol style="list-style-type: none"> Note the contents of the report Endorse the aspiration of a seamless partnership offer within a locality. 					

Brief Report Summary

At the March Board meeting a paper was presented detailing the Place Based Approach (PBA) activities within Localities, and to provide confidence that the PBA was progressing. This paper provides a further update and demonstrates the widening of the vision and approach which has been focussed upon Children, Young People and Families. We are consolidating our approach with Public Health's Prevention Through Wellness (PTW) programme to build a coordinated approach that supports and promotes local community wellbeing across children's, families and adults

Main Body of the Report

Background/Introduction

- The Place Based Approach is "A collaborative approach using the right resources (multi-skilled teams, universal services, voluntary sector, communities etc.) at the right time to improve outcomes for children, young people, families, vulnerable people and communities in an identified area".
- The PBA emerged from the County Council Children's and Families' System transformation programme following engagement with partners in districts on a new operating model and the development and outcomes from 8 pilot projects.
- The approach was endorsed by the Families Strategic Partnership (FSPB), who agreed the focus of addressing shared demand and the need to be intelligence led and to tackle at the earliest stage the root causes of the issues which families and children were dealing with. It was recognised that this would improve outcomes and reduce the requirement for intervention by statutory services. There was a stated partnership ambition to extend the PBA to vulnerable adults once progress was being evidenced with children and families.

4. A phased approach was taken to develop and roll out the new ways of working, with Tamworth Borough Council and Newcastle District Council being early implementers. By March 2018 the PBA had been rolled out to eight districts and boroughs, with local and central partnership governance established.

Current Activity

5. Due to the phased implementation, districts and boroughs are at different stages of “maturity” with implementing PBA for children and families. There has been an emphasis on addressing local existing need through establishing partnership vulnerability hubs; holding early/earliest help events to raise awareness of community capacity activity and developing an Early Help Performance Framework. This framework, initiated through the Early Help Steering Group is identifying local needs and priorities. This work is aligned to the District and Borough investment plans, funded through the Building Resilient Families and Communities Earned Autonomy monies and is providing a resource to tackle the identified priorities. The performance Framework enables District / Borough ownership of the priorities and aims to provide a mechanism to manage and monitor performance and outcomes.

Evidence of Success as an Early Implementer

6. Pilots have been completed in all eight districts and boroughs. Tamworth Borough, an early implementer, has begun to evidence a reduction in demand for formal Early Help provided by the County Council’s Local Support Teams (LST’s). Further pieces of work targeting demand reduction for children’s services, such as a single front door, have been running alongside the PBA and the combined success is described below:

Place Based Approach:

7. Tamworth Children’s Pilot: The Children’s pilot, a tier 2 commissioned provider (Malachi) working with specific schools in Tamworth, evidenced 40% fewer referrals from those schools into local LSTs. This equates to 31 fewer cases. Additionally, from the capacity on the contract, working in a whole family way, and using outcome star based assessments, assumptions have been made that an additional 41 cases would have escalated to LSTs (tier 3) if the contract were not in place. Based on this assumption there would be 72 fewer cases within the two Tamworth LST teams. This pilot has now been main-streamed as part of the PBA and expanded through the DSG money allocated locally, to cover all schools in Tamworth. The expectation is that 240 cases will not be referred to LSTs due to this contract.
8. Tamworth Vulnerability Partnership (TVP): The Police-led TVP aims for partners “to work together to explore and discover the underlying problem for Vulnerable Cases and create an action focussed solution that addresses their needs in a timely manner with support of their community”. The aim is for this work to reduce shared demand into partners’ services.
9. Early Help/Earliest help event: Tamworth has held an Early Help/earliest help show case event, which connected professionals in the locality, shared best practice, knowledge, and awareness of existing community provision and support, with an emphasis on utilising communities first and services last. This has enabled professionals and others to connect families and children, and members of the community, with community-based

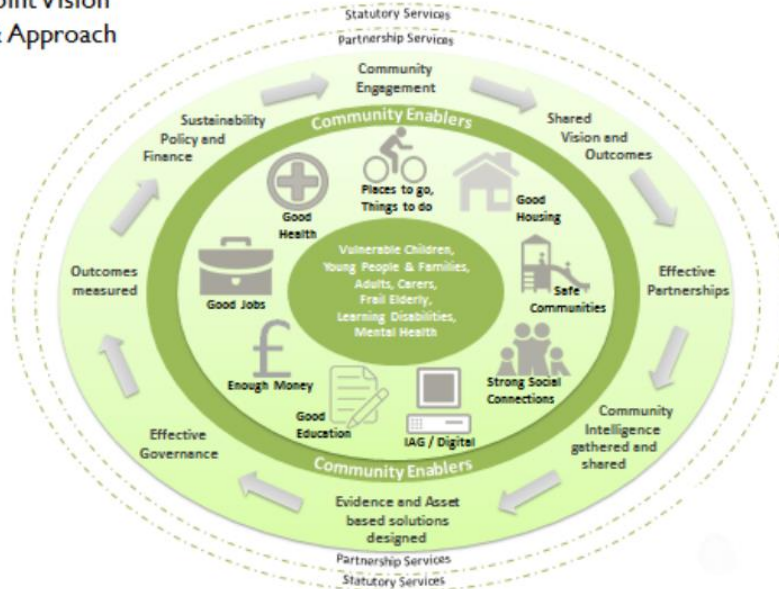
support and networks, aiming to address needs as soon as they arise, reducing the need to escalate to statutory services.

10. SCC internal system changes: A single Front Door to SCC Children's Services has been piloted in Tamworth aiming to ensure a consistent approach to agreed Safeguarding Board thresholds. More effective Early Help practices - embedding the principles of BRFC, using outcome stars and working with the whole family – have been introduced, and there has been an alignment of strategic leadership across Early Help/Children In Need/Child Protection, and the introduction of a continuous improvement approach around formal Early Help.
11. The combination of the Place Based Approach and the SCC internal system changes has resulted in the number of cases in Tamworth LSTs falling from 330 (Jan 2017) to 137 (April 2018), 193 fewer (a 58% reduction).

A joint vision and approach to working in a place

12. The Prevention Through Wellness (PTW) programme focuses on promoting wellbeing in the wider population, with a particular focus on promoting positive lifestyles through supportive communities, healthy environments, digital and data and integrated prevention focused pathways. Our ambition is *“Enabling you and your family to take control of, and manage, your own health and wellbeing - so that we can be there when you really need us”*
13. The key target agendas are obesity, diabetes, cardio-vascular disease, isolation and mental wellbeing. These are influenced by a wide range of physical and societal determinants – such as where people live, housing, community networks, jobs security, income and education. PTW also works with and through local public sector, voluntary, commercial, employer and leisure partners.
14. People live in families and communities and the same influences that affect wellbeing affect children and young people.
15. In recognition that both teams share the same vision, principles and partners and focused on the same communities, we are aligning our work centrally and in localities, to make best use of our partner's time, expertise and support and to bring a holistic approach to families and communities.
16. The diagram below provides an overview of the breadth of local place-based community assets and networks for children's, families and adults to which both PBA and PTW are aligned

**Joint Vision
& Approach**



Prevention Through Wellness – with a focus on Supportive Communities Programme

17. The focus of PTW is to:

- a. Position Health and Wellbeing (wellness) as everyone’s business
- b. Encourage a focus on personal ownership, community networks & support and sustained behavioural change
- c. Change the mind set of professionals towards prevention, wellness and non-clinical approaches
- d. Tapping digital and smart technologies and a new communications style

18. PTW programme mirrors the HWBB strategic priorities and is its delivery vehicle through four main areas of focus - Supportive Communities, Healthy Environments, Digital, Voice / conversations with the public and Communities, and Integrated Pathways

19. The Supportive Communities programme closely aligns with PBA, with the ambition for: “People able to live independently and manage their care needs with support from friends and family”. To do this we want to increase the level of local opportunities and services (free & paid for), build on the capabilities of digital and smart tech to make these accessible, and encourage and enable to access to these

20. The focus of this approach can be broken down as follows:

- a. All: Universal, do a better job of helping people to find the community solutions they need, with a long-term aim of increasing community resilience
- b. Some: Cusp of care, to find alternatives for people who come to the “front door” but do not meet eligibility criteria
- c. Few: In Care, seek and develop community options

21. The initial focus is on supporting vulnerable adults. We want to create communities that are self-reliant and wellbeing-focused, reducing reliance upon and need for statutory provision.

22. This programme is developing momentum and the key programme areas are:
- a. Understanding where our demand for care comes from
 - i. Data
 - ii. Front Door
 - iii. Staff insights.
 - iv. Broader community insights around potential future demand
 - b. Understanding what already exists in communities that people can be made aware of.
 - i. Existing groups and organisations
 - ii. Very local activities that people could access
 - c. Developing solutions where gaps exist.
 - i. Staff training
 - ii. Developing Libraries pilot at Wombourne.
 - iii. Health Literacy project
 - iv. Digital solutions
23. Team members have been identified to focus upon districts to develop our understanding of available community support and services, and to review how we match this with the information we have about care need
24. Much of this mapping is already available, through the work of the Children and Families PBA. We will align and learn from the existing PBA in Districts rather than create a new infrastructure.

Opportunities

25. There is therefore a clear opportunity to:
- a. build on the experience and established way of working that has been developed as part of the Place Based Approach.
 - b. take a joined up approach on the ground to develop resilient and healthy individuals, families and communities
 - c. utilise our collective resources to reduce duplication of effort and ensure sustainable outcomes for our populations

Next Steps

26. We will work together to identify, as partners, where we can develop and deliver a seamless offer within a locality.

Appendices:	N/A
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