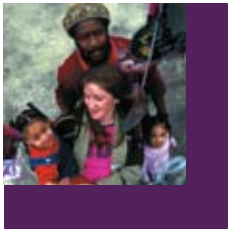




# Think Family: Improving the life chances of families at risk





## Ministerial Foreword

For over ten years now, the Social Exclusion Task Force and its predecessor, the Social Exclusion Unit, have been working with other government departments, local authorities and the third sector to help support those facing multiple disadvantages in our society. Nowhere is this work more important than in relation to families at risk.

It is a moral imperative because, in a rich society like ours, every child and parent facing difficulties should receive the best support and help that can be provided. It is an economic imperative because we have learnt that unless we ensure that children get the right support early in life, their chances are blighted for the future and our society suffers as a result, paying the price in wasted talent and expenditure on unemployment and other social consequences. And it is a shared imperative for us all, because our society cannot be just and cannot be cohesive unless we help those families in our communities who face the biggest challenges.

The primary responsibility for a family's success or failure will always lie with parents. But government can make a difference to the chances of success through the support it provides to parents and children and the way it provides it. Sure Start Children's Centres, nursery education, expansion of parenting support, and longer and better paid parental leave have all helped improve the life chances of children in the last decade. The recently published *Children's Plan* shows how we can build on this in the future.

The focus in this document is less on the level of support for families at risk and more on the way that support is provided. Experience has taught us that while excellent help can be provided to adults through particular services – housing, health, drug rehabilitation – the component parts are much less effective if they are provided in isolation without awareness of the wider circumstances or difficulties faced by the individual.

Particularly important for this document is a focus on the need to 'think family' in the delivery of adults' services. Considering the wider needs of an adult, including their family circumstances, can make all the difference to their life chances and those of their family, particularly their children. The insights we have gained from talking to practitioners, professionals and clients suggest a number of implications for the way adults' services are delivered.

Adults' services should always consider whether the individual concerned is a parent and what implications this has for the service that is required. Children's services must also focus on the adults – parents and carers – who are crucial to a child's wellbeing. There should be 'no wrong door' for services: any engagement with a particular service should lead to opportunities for help with the range of issues a parent and their family faces. The strengths of a family must, if at all possible, be deployed to help them to address their own difficulties and challenges so they do not always have to rely on the state for support. And services must be tailored specifically with an understanding of the particular needs of the family.

To ask these questions routinely and design services in this way may sound simple, but what those with frontline expertise tell us is that it often takes a shift in planning, accountability and professional roles. Consequently, we can only bring about this change in approach with the closest attention to testing out and learning from new approaches as they work on the ground.

That is why the Government is launching a series of Family Pathfinder projects to explore the best way to make these changes happen and working across the key government departments to chart the way forward. Crucially, the pathfinders will help find the best ways to work together: from family members shaping and contributing to the services they receive, to frontline professionals forming partnerships and



cutting across boundaries, to local authorities, third sector bodies and central government learning from each other.

If you have an interest in these issues or work in this area, your engagement is essential to this process as we continue to learn how we can best design services that 'think family'. We look forward to your co-operation and support as we seek to help all families, whatever their background, to fulfil their potential.

**Ed Miliband**  
Minister for the Cabinet Office

**Beverley Hughes**  
Minister of State for Children, Young People and Families



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# 1. Introduction

- 1.1 The primary responsibility for a family's welfare will always rest with parents. The task of public services is to provide the best possible support to enable parents to fulfil that responsibility.
- 1.2 From local policy-makers, practitioners, professionals and families, the Families At Risk Review has heard a clear message: excellent children's services and excellent adults' services are not enough in isolation. To transform life chances and break the cycle of disadvantage, services must go further. They must 'think family'.<sup>1</sup>
- 1.3 A system that 'thinks family' has no 'wrong door': contact with any one service gives access to a wider system of support. Individual needs are looked at in the context of the whole family, so clients are seen not just as individuals but as parents or other family members. Services build on the strengths of families, increasing their resilience and aspirations. Support is tailored to meet need so that families with the most complex needs receive the most intensive support.
- 1.4 The first report of the Families At Risk Review, *Reaching Out: Think Family*,<sup>2</sup> showed why this is important. It provided a rigorous analysis of who we mean by families at risk,\* highlighted innovative practice and assessed the effectiveness of existing services and systems. It showed that, often, families are not getting the most effective support and that when parental problems are not addressed the impact for both themselves and for their children can be severe and enduring. That report produced responses and feedback which have helped set a path to the next stage.
- 1.5 This, the second report, sets out the next steps in improving services for families at risk. These include a £16 million pathfinder programme, led by the Department for Children, Schools and Families, to find solutions on the ground. The report also sets out ways for all local authorities, the third sector and interested professionals to engage and learn from each other, as well as policy changes and commitments from nine government departments. With these steps the report aims to start a shared journey towards a system that 'thinks family' at every level.
- 1.6 The Government is committed to working in partnership with local areas to test new ways of working and build capacity on the ground. This document therefore invites local authorities, with their partners, to apply to become one of 12–15 Family Pathfinders which will run for three years from April 2008. The Family Pathfinders will improve outcomes for families at risk through change at all levels of the system; from local strategy and governance through to the delivery of more effective frontline services. They will build on the lessons from innovative family-based services such as the Family Intervention Projects.

## The context of this review

- 1.7 The *Children's Plan*<sup>3</sup> has set out the Government's vision for supporting families to get the basics right for all children and young people so that their lives are free from poverty and they enjoy good physical health and mental wellbeing. The Families At Risk Review is part of this vision and builds on sustained improvements in services for families at risk over the last ten years. The review also recognises and builds on

\* Families at risk is a shorthand term for families with multiple and complex problems such as worklessness, poor mental health or substance misuse. Our focus includes those who already have complex and ongoing problems as well as those who are at risk of developing them.



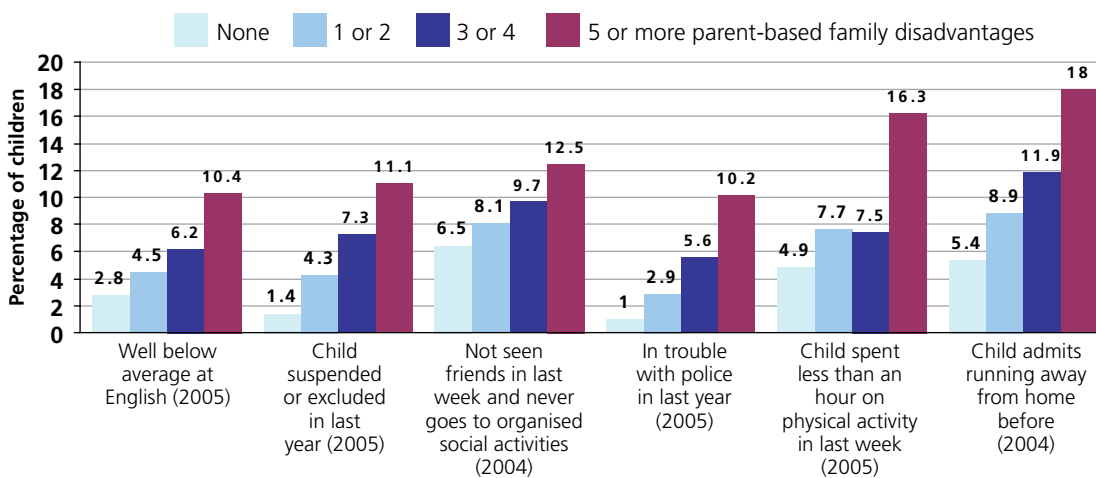
significant investments in children's services, increased support for parents and improved co-ordination between children's services.

- 1.8 Investments in public services for children have seen education funding per pupil double since 1997, contributing to year-on-year improvements in educational attainment. The overall proportion of pupils gaining five A\*-C GCSE grades rose from 46.3% in 1997/98 to 60.3% in 2006/07. A further £21 billion invested in early years and childcare has funded the creation of over 1,700 Sure Start Children's Centres\* across the country. £680 million has been committed to Extended Schools\* over 2006-08 to provide activities, study aids and parenting and family support.
- 1.9 Meanwhile, support for parents has aimed to increase their income, balance work and family life, and improve parenting skills. Through tax credits the Government now provides families with up to 80% of the cost of childcare,<sup>4</sup> paid maternity leave has been extended to 39 weeks and paid paternity leave has been introduced for the first time.
- 1.10 Funding for parenting services has been expanded: nearly £80 million has been committed to help local authorities develop parent support services over 2006-08. *Aiming high for children: supporting families*<sup>5</sup> announced the development of a Parents' Charter that will describe the minimum level of support that all parents can expect to receive from their local authority. Sure Start Children's Centres are to be given funding to provide 30,000 parenting class places specifically for fathers and the Family Intervention Projects are providing intensive parenting support to families engaged in anti-social behaviour in 53 areas. Steps have also been taken to support
- the growth of the parenting sector through the establishment of the National Academy for Parenting Practitioners.\*
- 1.11 Systems reform at the local level is joining up children's services around the needs of the child. The Every Child Matters agenda is driving system-wide integration across services for 0-19 year olds to improve outcomes for all children and young people. It has brought together accountability for children's outcomes, supporting joined-up working with joint commissioning arrangements, and has made significant progress in implementing wide-ranging reform in local areas:
- Nearly all local authorities have Directors of Children's Services and Lead Members for Children's Services.
  - The national outcomes framework for children has been embedded across children's services.
  - 140 local areas are using both the Common Assessment Framework\* and lead professionals\* – on course for all areas by the end of 2008.
  - Over 8,000 Extended Schools are already in place.
- 1.12 Tackling poverty in families is central to addressing the inter-generational cycle of disadvantage. Investment and reform have helped drive progress towards the Government's historic commitment to halve child poverty by 2010 and eradicate it by 2020. Around 600,000 children have been lifted out of poverty since 1998/99. As a result of reforms to the tax and benefit system since 1997, the poorest fifth of families were on average £3,500 better off as of October 2007.<sup>6</sup>

\* See Glossary at Annex B.



**Chart 1: Child outcomes by number of parent-based family disadvantages\***



### The crucial contribution of adults' services

1.13 Good children's services are critical, but adults' services also have a crucial role to play in determining children's achievements and future life chances. Even the best children's services can only ever mitigate the impacts of parental problems such as domestic violence, learning disability or substance misuse. The next phase of our efforts to improve outcomes for children must therefore include adults' services and recognise the importance of addressing the problems that parents face. Chart 1 shows how children can suffer when their parents face multiple problems.

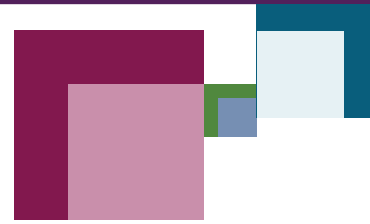
1.14 This review focuses on improving outcomes for the whole family, both adults and children. It sets out the components of a system that improves the life chances of families at risk through more effective services. The review

highlights the need for an increased emphasis on the role of adults' services. In particular:

- adults' services need to work with one another more closely so that they are able to understand and address interrelated needs;
- adults' services need to join up better with children's services in order to provide support around the needs of the whole family;
- adults' services need to consider the parental roles and responsibilities of their clients.

1.15 Section two looks at key characteristics of the 'think family' approach from the perspective of families. Section three looks at the mechanisms which, through increased coherence and collaboration at all levels of the system, underpin this approach. The final section describes the Family Pathfinders, the initial policy changes to support families at risk, and how central government intends to continue learning from professionals and service users to make a difference on the ground.

\* Source: Families and Children Study (2005). Basket of indicators includes: no parent in the family is in work; family lives in poor quality or overcrowded housing; no parent has any qualifications; mother has mental health problems; at least one parent has a longstanding limiting illness, disability or infirmity; family has low income (below 60% of the median); or family cannot afford a number of food and clothing items.



## 2. Think family: the key characteristics

- 2.1 In a system that 'thinks family', both adults' and children's services join up around the needs of the family. The following section sets out what this system would look like to families on the ground.
- 2.2 Services would:
- Have no 'wrong door'
  - Look at the whole family
  - Build on family strengths
  - Provide support tailored to need

### No 'wrong door'

- 2.3 In a system that 'thinks family', contact with any service offers an open door into a broader system of joined-up support. This does not mean that every problem is solved by every service, but that staff see any moment of engagement as an opportunity to identify need and direct support to the individual and their wider family. Frontline staff are alert to wider individual and family risk factors, and practitioners consider the causes and wider impacts of presenting problems.

For example, a housing officer might identify a parent's language difficulties and refer them to English for Speakers of Other Languages (ESOL) training; or a probation officer might identify signs that an ex-offender has gone back to an abusive relationship and offer the family domestic violence support services.

- 2.4 Making better use of existing contact with services means that there are more chances to identify risk early and target timely support. This helps to prevent problems escalating and limits harm to the individual and family.

### Look at the whole family

- 2.5 Both adults' and children's services take into account family circumstances and responsibilities. In particular, adults' services consider their clients as parents and ensure that they are supported to fulfil their parental responsibilities. Services working with different family members are aligned, giving a consistent message and working towards the same outcomes. Practitioners consider the ways in which different family members and their problems interrelate and might offer family services which work with both parents and children.

For example, an alcohol treatment service might combine treatment with parenting classes, while supervised play is provided for the children. Or a family learning programme\* builds the parent's literacy skills and encourages involvement in their children's learning.

- 2.6 Addressing parental problems is key to achieving positive outcomes for the wider family and adults' services are more likely to engage parents if they are sensitive to their family circumstances. Services that adapt to fit the family can often offer more appropriate and effective support.

\* See Glossary at Annex B.





### Sure Start Children's Centres

Sure Start Children's Centres provide an ideal context to identify and address the needs of the wider family. Some Children's Centres use their contact with parents to engage them in a range of co-located adults' services, including Jobcentre Plus and housing advice. For example, Jobcentre Plus workers are using Children's Centres to engage parents in single-earner families who might otherwise have no contact with employment services.

The training programme Step into Learning has trained some Children's Centre staff to identify where parents may have poor basic skills and to direct them into adult education. Outreach workers visit families in their homes and encourage them to engage with available support.

## Build on family strengths

- 2.7 Services start with a family's strengths. Practitioners work in partnership with families, recognising and promoting resilience and supporting them to build up aspirations and capabilities. Support that is provided needs to empower families to make their own decisions and to be involved in designing the help they need to achieve positive outcomes. Services build the capacity of family members to support each other.

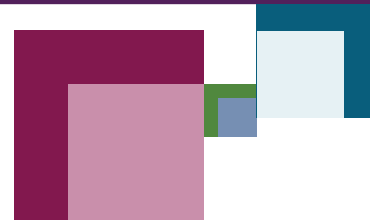
For example, family members caring for a problematic drug user might be offered support to fulfil this caring role; or Extended Schools might provide an activities programme for a child with mental health problems to build on their interests and social networks.

- 2.8 Strong families improve the life chances of individual family members. A strengths-based approach builds families' capacity to deal with present and future problems and supports them to take responsibility for their own lives. Small successes can start to turn things around.

## Provide support tailored to need

- 2.9 Tailored and family-centred packages of support are offered to all families at risk. This would include those families who are already experiencing complex and ongoing problems, but also those who might benefit from a co-ordinated intervention to prevent the escalation of risks.
- 2.10 Evidence from local good practice and pilot programmes suggests that a tailored, family-centred approach can achieve impressive results with specific groups. The Family Intervention Projects<sup>†</sup> have developed effective ways of delivering intensive support to challenging families engaged in anti-social behaviour. The Family Nurse Partnership programme<sup>†</sup> provides an effective model of support for first-time mothers with complex needs. In a system that 'thinks family', the key components and principles of these whole family interventions would underpin support for a wider range of families at risk. The intensity and complexity of the support package would vary depending on the level of need.

<sup>†</sup> See box on following pages.



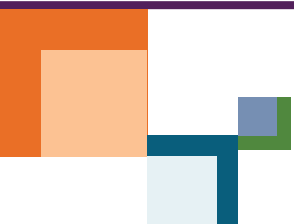
### Family Intervention Projects

Family Intervention Projects work with families who cause problems in their community. Employing a twin-track approach, they combine intensive support with focused challenge. Persistence and assertiveness with families are often critical to keeping them engaged and ensuring that they follow agreed steps. The Family Intervention Projects have successfully made use of the possibility of sanctions as a means to engage the most challenging families in order to turn their behaviour around.

The core components include:

- **a dedicated key worker** with a low caseload and persistent and assertive working style who takes the lead in engaging families and co-ordinating agencies and services;
- **whole family assessment** which ensures the needs of the whole family are met and regularly reviewed;
- a **contract** which sets out the changes in behaviour that are expected and the support that will be provided to facilitate that change;
- **intensive and structured support** which enables key workers to engage, assess and focus intensively on their families for as long as is needed. In very serious cases of anti-social behaviour, 24-hour support and supervision may be required; and
- **a co-ordinated and integrated response** where agencies commit to working together, sharing appropriate and relevant information, agreeing objectives and dedicating resources to resolve a client's difficulties.

The Government has announced that, over the next Comprehensive Spending Review period, it will invest a further £18 million in Family Intervention Projects to build on their success.



### Family Nurse Partnership

The Family Nurse Partnership programme recognises the importance of pregnancy and the first years of life in influencing children's life chances. The programme focuses on the child in the context of the whole family. It also recognises that first time mothers will often be open to support and advice during pregnancy and capitalises on this 'moment of opportunity' for positive engagement, when parents want to protect and do the best for their child.

The programme uses the nurse–client relationship and strengths-based motivational interviewing to support positive health choices, set goals and aspirations, and teach parenting and care giving. It focuses on nurturing better parent-infant attachment and building the self-efficacy of parents with low psychological resources. It is a preventative programme, offered to the most at risk families and has achieved impressive results over the course of almost 30 years of rigorous impact research in the US.

The core components include:

- a **dedicated family nurse** from early pregnancy until the child is two years old, who builds up a strong therapeutic relationship with the mother and family through sustained and frequent contact;
- **taking responsibility for family outcomes.** Family nurses hold the family in the 'palm of their hand', rather than passing them off to different agencies;
- a **preventative, strengths-based approach** which helps people to set goals and make changes in their lives;
- the **tools and confidence for practitioners** to open up and work through sensitive and difficult family issues such as love and trust, relationships and damaging life experiences; and
- materials and methods that **enable parents themselves to provide positive care** for their children.

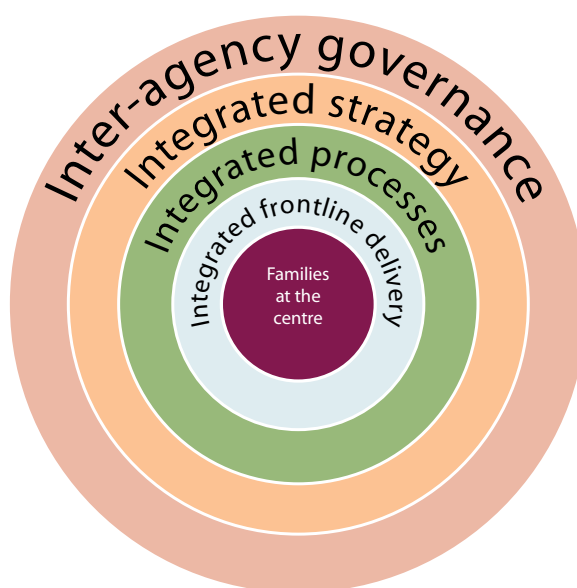
The Government has announced that, over the next Comprehensive Spending Review period, it will invest a further £30 million in the expansion of the Family Nurse Partnership programme and embedding learning from this programme in universal child health services.



### 3. Think family: at every level of the system

- 3.1 The previous section set out what a system that ‘thinks family’ looks like on the ground. It described services that have no ‘wrong door’, look at the whole family, build on family strengths and tailor support to match complex needs.
- 3.2 This section set outs how this change can be achieved. Every Child Matters is already

transforming the way services are delivered for 0–19 year olds. ‘Think Family’ extends this model to include adults’ services, and puts families firmly at the centre of a system that ensures all agencies work together from the front line through to local leaders. The diagram below is adapted from the Every Child Matters model to illustrate what ‘thinking family’ looks like at every level:



<b>Families at the centre</b>	Families are involved in the design of their support wherever possible and empowered through devolved budgets and family-led decision making.
<b>Integrated frontline delivery</b>	Empowered and assertive practitioners provide tailored and joined-up support around the whole family. They identify needs early and proactively engage families.
<b>Integrated processes</b>	Shared assessments and information across agencies give a full picture of a family's needs and help ensure support is fully co-ordinated.
<b>Integrated strategy</b>	Joined-up planning and commissioning drive a focus on families at risk across all agencies.
<b>Inter-agency governance</b>	Accountability for family outcomes is clear, with strong leadership at the top and protocols setting out agreed responsibilities between agencies.



- 3.3 The Family Pathfinders will aim to improve outcomes for families at risk by driving every level of the system to 'think family'. They will test and develop the key components of the 'think family' model as set out below.

### ***Empowered families at the centre***

- 3.4 Families know most about their own situation. They should be **empowered to shape the package of support** that they feel will help them achieve the best outcomes. Wherever possible families, including extended family members, should make decisions about their own lives and agree their own responses to challenging circumstances.
- 3.5 Indications from initial evaluations of individual budget pilots\* for disabled people<sup>7</sup> are promising. This sets a direction of travel towards devolved budgets which enable families working through a lead professional to commission their own services.
- 3.6 Families should be empowered to make decisions about their own lives. For example, Family Group Conferencing\* and other innovative approaches are being used to drive **family-led decision making**, building families' capacity to work through problems by themselves. Wider community networks and peer-led support should also be recognised as a crucial resource.
- 3.7 Each family needs tailored support that fits their size and structure, their culture and patterns of behaviour. Most family members will benefit from a supportive approach, but at certain times they may also need to be challenged to raise their aspirations or to change harmful behaviour. Each individual

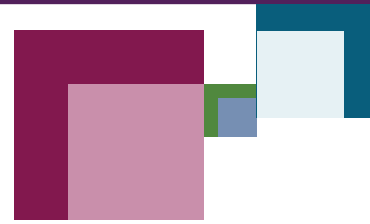
needs the balance of challenge and support that best responds to their particular circumstances.

### ***Integrated frontline delivery: empowered practitioners providing tailored and joined-up support***

#### **Empowered practitioners**

- 3.8 Most families at risk have regular contact with universal services.\* They may also be in touch with targeted and specialist services\* including those run by third sector organisations. Frontline professionals across all these agencies should be empowered to capitalise on these opportunities. They need the **tools and incentives to identify wider needs** and to proactively engage families in support.
- 3.9 The best professionals have always considered the family situation. This way of working should be embedded across all adults' and children's services. For example, adults' services should explore the support needs of their clients' children, just as children's services need to look out for the problems parents may face. Frontline practitioners in universal, targeted and specialist services should keep a constant look-out for wider support needs.
- 3.10 Encouraging all practitioners to 'think family' will allow risk to be identified earlier. Local commissioners will therefore need to decide how services will support the likely increase in numbers of referrals for preventative support. This might translate into a gradual shift in funding from crisis-led to preventative programmes, such as Targeted Youth Support.\*

\* See Glossary at Annex B.



3.11 This will also support those who already take a family-based approach, such as social workers, district nurses and health visitors. The Government has recently emphasised the importance of health visitors<sup>8</sup> and announced an extra £30 million to expand the Family Nurse Partnerships and to embed the learning from this programme in universal child health services. The *Children's Plan* highlights the crucial role of children's social services and commits to establishing a framework for professional development for the children's social care workforce.

3.12 **Easily accessible and high-quality training** will help staff in both universal and specialist services to feel confident in identifying and addressing a wide range of family risk factors. Much can be learned from existing approaches. For example:

- The training on motivational interviewing techniques provided to family nurses working in the Family Nurse Partnership programme.
- The method of building staff capacity to identify and manage multiple family risk factors developed through the Family Intervention Projects.

3.13 There are also some strong training models on single issues. For example:

- The Brief Interventions model trains frontline practitioners to identify and address problematic drinking behaviour through swift, targeted advice. Alcohol Concern has trained housing officers and teachers to use this intervention.<sup>9</sup>
- One Plus One<sup>10</sup> trains practitioners, including those in health, education, social care and legal services, to deal with

relationship conflict and to help build strong family relationships.

3.14 For those working in children's services, the Children's Workforce Action Plan will be published in early 2008.<sup>11</sup> The Government has also committed funding to transform the adult health and social care system,<sup>12</sup> including leadership from Skills for Care and the General Social Care Council (GSCC) to ensure entry level training and continued professional development for the adult health and social care workforce. This work will reflect the new skills required in a personalised system.

### Tailored and joined-up support

3.15 Frontline staff across both children's and adults' services should be empowered to provide tailored and joined-up support. They should be given the flexibility to look beyond their normal remit and use their professional judgement to decide how to work in the most effective way for families. This might involve taking on a lead professional role, adapting an intervention to take account of family circumstances, or engaging clients with a specialist or targeted service. The role of practitioners in supporting the wider family should be acknowledged and applauded.

3.16 Practitioners should be given the **confidence and skills to work assertively and creatively** to engage families who are reluctant to accept support. Families with entrenched problems may be wary of services and it can be hard for them to motivate themselves and engage with support. Therefore, failing to meet appointments or declining help should not mean that the family is forgotten. Practitioners who are proactive and persistent have had considerable success in engaging some of the most excluded families.



- 3.17 A **lead professional** (or team around the family) can play a crucial role in engaging both the family and relevant service providers. The lead professional should co-ordinate a multi-agency support plan, bringing together agencies that provide support and, where appropriate, those that deal with enforcement. Working as part of **multi-agency teams** will allow staff to plan and co-ordinate effective support around the specific circumstances of each family.
- 3.18 The lead professional role provides an opportunity for practitioners to develop a full understanding of the challenges a family faces. He or she should work with the family to agree goals and aspirations and the steps needed to achieve change. All agencies involved with the family should discuss the family's needs and agree a shared set of objectives. Setting out support and expectations in a contract can help ensure that commitments made by families and practitioners are clear to both parties.
- 3.19 Partnership working with other agencies, including across adults' and children's services, will help staff gain a fuller picture of the family and sharpen the focus on what is needed to improve outcomes. Whatever their role in delivering services, all frontline practitioners should be able to understand how their engagement with an individual fits in with other support that the family may be receiving.

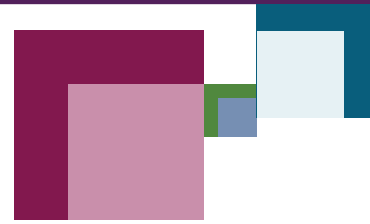
### ***Integrated processes: shared assessments and information***

- 3.20 Providing seamless support for families requires assessments that capture a full picture of the individual's and families' needs and that services work together in an appropriate and safe manner.

### **Co-ordinated assessment processes**

- 3.21 **Assessment processes** across all services, from antenatal screening through to intensive assessments in adult mental health, should take into account interrelated needs and the wider family situation. All assessments should consider caring responsibilities and family relationships in order to pick up the potential support needs of other members of the client's family.
- 3.22 For individuals with multiple needs, an overarching assessment should bring together pieces of information that would otherwise be scattered across the system. Frontline practitioners should build on this knowledge base when reviewing progress or designing support. This assessment process should build on progress made through the Common Assessment Framework (CAF) for children and young people,\* implemented as part of the Every Child Matters agenda. The CAF provides a shared and holistic assessment for children and young people with additional needs. It takes account of family risk factors and can therefore also help to identify and direct support towards the unmet needs of other family members – a parent's learning disability, or an older sibling's substance misuse, for example.
- 3.23 Any trained practitioner working with the child or their family can undertake the CAF. With training and support, adults' services such as housing and the police could become more confident in identifying when a child may have additional needs, and in approaching others to undertake a CAF where appropriate.
- 3.24 The greater diversity of agencies and providers across adults' services makes joining up harder than for children's services. However, there are moves towards integrating assessment processes for vulnerable adults. For example,

\* See Glossary at Annex B.



the Department of Health is currently developing a Common Assessment Framework for adults\* with longer-term health and social care needs that require a multi-disciplinary response. There are plans to expand this assessment to include housing, third sector providers and wider services in the future.

- 3.25 For families with complex problems, a whole family assessment should be considered. This can provide the framework for planning and monitoring an intensive, multi-agency package of support. A whole family assessment brings together individual assessments to provide an overview of family strengths, risks, relationships and needs. Family Intervention Projects and the Multi-Agency Risk Assessment Conference (MARAC)\* approach towards domestic violence are already successfully using family assessments.

### Joining up children's and adults' services

- 3.26 Staff in adults' services will often know that problems faced by clients who are parents are likely to be affecting children and other family members. But this information is not always shared, missing opportunities to put in place preventative support for the children and family. The best adults' services already consider sharing information with their colleagues in children's services, to help them identify problems and intervene early.
- 3.27 Frontline staff must be equipped with the right tools to decide when and where to share information. In normal circumstances, they should seek explicit consent from their clients to pass on personal information and explain how this will help to improve family outcomes.

However, where there is a child protection issue, practitioners must act in accordance with local safeguarding procedures, in order to ensure that children are protected.

- 3.28 Sharing information could help families in a number of situations:
- A change in the parent's circumstances occurs that may signify a period of increased risk for the child, *for example, when a parent is sent to prison*.<sup>13</sup>
  - A family is experiencing a range of ongoing and compounding difficulties that may be having negative impacts on the child, *for example, repeated periods of homelessness and alcohol misuse*.
  - Crisis-led contact with services allows staff to identify problems that are likely to be affecting the wider family, *for example, identifying domestic violence through admissions to Accident and Emergency departments*.
- 3.29 High-quality training and guidance will help to build practitioners' confidence and inform their judgement on when it is beneficial, appropriate and legal to share information. Guidance on information sharing for practitioners working with children and young people is available through the Every Child Matters website.<sup>14</sup> Communities and Local Government are currently developing guidance for adults' services. This is part of a cross-government programme of work on information sharing, led by the Ministry of Justice.<sup>15</sup>
- 3.30 The Victoria Climbié inquiry has led to a range of improvements in systems and processes to support different professionals working with families. From 2008, ContactPoint\* will provide an electronic database giving contact

\* See Glossary at Annex B.





details of practitioners working with every child in England. This will provide a valuable tool to support communication between services. Authorised ContactPoint users working with children and their families will be able to access the database in order to find contact details for the child's GP, lead professional or other relevant practitioner. Access to the information will be strictly controlled and restricted to authorised users who need it as part of their work. Where appropriate, they will be able to contact these practitioners to share information, in order to deliver more co-ordinated support and protect children from risk.<sup>16</sup>

### ***Integrated strategy: joined-up planning and commissioning***

3.31 To be more than the sum of their parts, services need joint strategic planning and joint commissioning processes. There are already a number of structures in place which local authorities can develop to target and support families at risk.

### **Strategic planning for family outcomes**

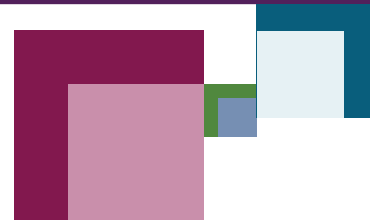
3.32 Local Strategic Partnerships can play a key role in strategic planning for families at risk. They provide natural incentives for partners from both adults' and children's services to collaborate: each partner can support positive outcomes for the clients of the other agencies.

3.33 Improved strategic collaboration can lead to a more efficient use of limited resources and can help manage the shift across systems from crisis to prevention.

3.34 Local authorities have a statutory obligation to promote the welfare of all children<sup>17</sup> and *Strong and Prosperous Communities*<sup>18</sup> sets out a new role for local authorities as strategic leaders to ensure co-ordination across agencies. All this means that joined-up planning can be driven by local areas themselves rather than by structural or legislative change directed from the national level.

3.35 Setting the vision and priorities for each area through a Local Area Agreement presents a key opportunity to put the needs of families at risk at the heart of systems and services. Where families at risk are identified as a priority in an area, these families can be reflected as relevant priorities in the Local Area Agreement.

3.36 Joint planning for families at risk does not necessarily mean setting up new partnerships or new strategies: where appropriate, local areas can draw partners together through existing bodies such as Local Safeguarding Children Boards,\* or through adult safeguarding arrangements, which will already include many of the key agencies. Joint strategies for families at risk can also be embedded in other local plans such as Children and Young People Plans, Local Parenting Strategies, Local Delivery Plans and Community Safety Plans. Areas will need to develop clear protocols for how boards and partnerships work together to ensure that strategies add value and that each agency meets its statutory objectives.



### Joint commissioning for common goals

- 3.37 As part of strategic planning, joint commissioning can help make better use of existing resources and target them more effectively at families at risk. Commissioning arrangements vary across agencies and they need to ensure that their commissioning processes align to support families at risk. Local partners should work together to build the most complete picture of need in the local population and use this as the basis for agreeing shared priorities and for joint commissioning of services.
- 3.38 This will require the involvement of all agencies who work with families across both adults' and children's services and from the public, third and private sectors. Including the third sector as a key partner in commissioning arrangements can enhance the identification of needs and generate innovative solutions to service delivery.
- 3.39 Areas may build on progress in developing joint commissioning through children's trust arrangements by linking with key adults' services. These services could include housing, Jobcentre Plus, adult skills, mental health, learning disability, the third sector, and health and criminal justice services.

### *Integrated governance: clear accountability*

- 3.40 Because families at risk can present a range of challenges, responsibility for providing support can fall between agencies. It is important that accountability is clear, with strong leadership at the top and protocols setting out responsibility between agencies.

- 3.41 The exact arrangements for **leadership** at the top are best determined locally. A local family champion – similar to the Lead Member for Children – could help drive co-operation. For example, a lead councillor or official might be nominated with responsibility for the outcomes of families at risk and be tasked with driving inter-agency working through the Local Strategic Partnership.
- 3.42 Agreed **protocols** between agencies should help ensure that partners share accountability for improving the outcomes of families at risk. These can clarify professional roles and responsibilities when working with multiple agencies and give professionals the confidence to work together around the needs of families at risk.



## 4. The shared journey ahead

- 4.1 The Government's ambition is for all families to be better supported, including those at risk. Our goal is that, in every local area, improved collaboration and co-ordination between adults' and children's services builds the capacity to 'think family' and delivers seamless support to families at risk. Achieving this goal means embarking on a shared journey with central government and local areas – as well as families themselves – all having an important role to play.
- 4.2 This document has set out how systems and services that 'think family' can transform the life chances of families at risk. Based on what we have already learnt from some of the most innovative areas of the country, it has also described the mechanisms that the Government believes all local areas could draw upon to transform systems and services.
- 4.3 To support local areas, the Government has committed £16 million to enable some areas to test out and develop the model through a series of Family Pathfinders. The pathfinder programme offers a key opportunity for local areas to innovate and learn from one another. The Government will also link in to wider communities of interest such as the Narrowing the Gap in Outcomes\* network of local authorities to tap into the ideas, enthusiasm and expertise of practitioners in local areas and provide a focal point for wider work across the country.
- 4.4 At the national level, the Government pledges to listen to local areas and to strip away barriers to collaboration and co-operation wherever possible. Furthermore, the Government will take steps to embed 'thinking family' across Whitehall, and this document brings together a number of policy changes and reviews that are either already under way

or being announced shortly that lead in this direction. The following sections set out these steps in more detail.

### Family Pathfinders

- 4.5 The local Family Pathfinders present an exciting opportunity to develop the model set out in this document and to improve outcomes for families at risk. Through the pathfinders, local authorities and their partners will be developing the systems and services described in the previous sections. They will be testing out the key components and taking them forward in new directions. The pathfinders will be developing new ways of working with families that draw on the collective strengths of children's and adults' services and will be at the heart of a wider learning process. Families themselves will play a key part in the development of the pathfinders and all pathfinder areas will be asked to show how they have involved families at risk in the design of their systems and services.
- 4.6 The Family Pathfinders will aim to improve outcomes for families at risk, including those who are not being effectively engaged and supported by existing services. They will:
- build on Every Child Matters to encourage greater co-operation between children's services and key adults' services, including, for example, social care, employment, housing, adult mental health and adult skills;
  - develop locally-led learning on how system change across adults' and children's services can improve support for vulnerable families; and
  - embed early intervention and prevention of inter-generational transmission of disadvantage within the system of support.

\* See Glossary at Annex B.



- 4.7 The Family Pathfinders will tell us what works – and what needs to change. A dynamic model of learning is envisaged, in which the Family Pathfinders are used to identify changes that need to happen locally and nationally in order to deliver improved services and outcomes. They will build on the existing good practice being developed in local areas and initiate a process to push forward more ambitious reforms to the system.
- 4.8 The Family Pathfinder programme will be an evolving process. The sites will engage in an ongoing dialogue with policy-makers and commissioners at national, regional and local levels. The work will be linked into the Department for Children, Schools and Families and the Local Government Association network of local authorities who are involved in the Narrowing the Gap in Outcomes project.
- 4.9 Representatives from the Family Pathfinders will create a forum, which will feed into the development of national government policy. This will also provide a way for the Family Pathfinders to review and compare experiences. It will begin to build up consensus on what works, but also highlight local variation and diversity of approach. The forum will allow local areas to challenge each other and will encourage deliberation and creative input into how to make systems work better.
- 4.10 The Family Pathfinders will be independently evaluated and lessons will be shared with all local areas. Local and central government will develop communication plans to ensure that early learning is shared and new ideas tested. Understanding what does not work under certain circumstances is as important as sharing lessons on what is effective.

### Invitation to bid

- 4.11 The invitation is open to all local authorities to bid in conjunction with their partners.  
**For further details visit:**  
[www.everychildmatters.gov.uk/parents/pathfinders/](http://www.everychildmatters.gov.uk/parents/pathfinders/)

### Development in other local areas: the wider learning process

- 4.12 'Think Family' is relevant for every local area, not just for those selected to be Family Pathfinder sites, and all local authorities and their partners will be invited to contribute to the development of the 'think family' approach. The components are intentionally flexible, and can be used and adapted to different services and local circumstances.
- 4.13 This document marks the Government's pledge to ensure that all local areas can share in the learning and contribute their own experiences. The next steps are to open up the dialogue and provide a focus for local policy-makers and service providers, including those from the third sector, to work together to shape this exciting new approach.

### Embedding 'think family' across Whitehall

- 4.14 The Government is committed to supporting local areas to 'think family' by removing the barriers that inhibit innovation and co-operation at the front line and helping to provide the resources, tools and support needed to make a difference.
- 4.15 The Department for Children, Schools and Families was created by the Prime Minister on 28 June 2007. For the first time, this brings together work taking place across government to support families and underlines

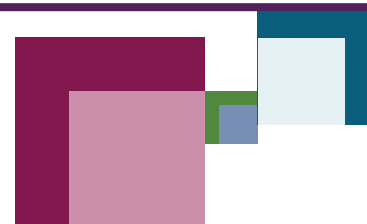


the importance of the family unit in improving life chances. The Government has also recently announced new joint departmental responsibility arrangements for tackling child poverty shared between HM Treasury, the Department for Children, Schools and Families and Department for Work and Pensions.

4.16 Furthermore, the Government is taking steps to embed 'thinking family' across Whitehall. As a first step, this document sets out a number of policy changes and reviews, either already under way or being launched shortly that lead towards a system that 'thinks family' and improves support for families at risk. These aim to:

- improve identification and engagement of children and families at risk;
- build on family strengths by helping family members to support one another in times of difficulty;
- encourage services to take a whole family approach by building their capacity to work with clients as part of a family and not simply as individuals; and
- improve the level of support available for families at risk by funding intensive, tailored and effective family services and better targeting of existing services.

Further detail on these steps is set out in the tables on the following pages.



<b>No wrong door: improving identification and engagement of children and families at risk</b>	
<b><i>The Government will:</i></b>	<b><i>Lead Department(s)</i></b>
Ensure that the Child Maintenance and Enforcement Commission focuses on actively engaging with vulnerable families to ensure that they receive child maintenance and can get help to secure payment [autumn 2008, subject to Parliamentary approval]	Department for Work and Pensions
Explore ways to go further to identify young people who are at risk of offending in the new Youth Crime Action Plan. Recognise the importance of family risk factors and parenting in relation to offending behaviour [forthcoming in 2008]	Home Office Ministry of Justice Department for Children, Schools and Families
Through the Financial Capability Action Plan, consider using Sure Start Children's Centres or Parent Support Advisers as a route through which parents can be signposted towards information on financial capability [spring 2008]	HM Treasury Department for Children, Schools and Families Department for Innovation, Universities and Skills
Explore ways for the National Offender Management Service (NOMS) and children's services to systematically assess and meet a child's needs when their parent goes to prison [forthcoming in 2008]	Ministry of Justice Department for Children, Schools and Families
Publish a Child Wellbeing Index, which will provide localised and detailed information on levels of child wellbeing to enable commissioners to target area-based support for families more accurately [spring 2008]	Communities and Local Government
<b><i>The Government has announced in the Children's Plan that it will:</i></b>	<b><i>Lead Department(s)</i></b>
Provide Sure Start Children's Centres in the most disadvantaged areas with three outreach workers who visit families in their homes, with the aim of increasing engagement among families with the most complex needs	Department for Children, Schools and Families



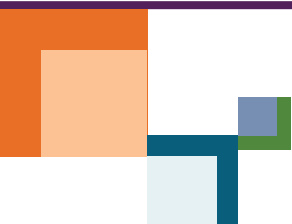
<b>Build on strengths: support families to support each other</b>	
<b><i>The Government will:</i></b>	<b><i>Lead Department(s)</i></b>
Work to ensure children living in families affected by substance misuse and taking on a caring role are able to access the support offered to other young carers. This will be considered in the context of the Prime Minister's Carers Strategy Review [spring 2008]	Department for Children, Schools and Families Department of Health
Work to ensure, where young people take on caring roles, they receive adequate support and services that safeguard their childhood and aspirations as children and young people. This will be considered in the context of the Prime Minister's Carers Strategy Review [spring 2008]	Department for Children, Schools and Families Department of Health
Through the Drugs Strategy, ensure that drug misusing parents are given appropriate access to drugs treatment support to prevent and reduce the harm caused to their children [spring 2008]	Department for Children, Schools and Families Department of Health
Publish revised guidance on the 1989 Children Act, as set out in <i>Care Matters: Time for Change</i> , to set out local authorities' responsibilities to support family members who are carers and include a new framework for assessing related carers [by December 2009]	Department for Children, Schools and Families



Looking at the whole family: encouraging services to take a whole families approach	
<i>The Government will:</i>	<i>Lead Department(s)</i>
Set clear and achievable expectations of offender managers* and local partners to ensure better access to mainstream services for families of offenders facing social exclusion [spring 2008]	Ministry of Justice Department for Children, Schools and Families
Encourage better information sharing between adult mental health services and children's services to support parental responsibilities. Encourage assessment and planning in secondary mental health care, such as the Care Programme Approach,* to include family situation and parental responsibilities [January 2008]	Department of Health
Launch the Social Care Institute for Excellence/National Institute for Health and Clinical Excellence <i>Mental Health and Child Welfare Guidelines</i> in summer 2008 along with five pilot sites to test the implementation of the guidelines [summer 2008]	Department of Health
Embed, through the forthcoming National Drug Strategy, a strong focus on the harm that substance misuse (drugs and alcohol) causes to children and families. Set out steps to ensure that families affected by substance misuse are identified earlier and offered improved support, and promote a greater involvement of families in drug treatment [spring 2008]	Home Office Department for Children, Schools and Families Department of Health
Through the Financial Capability Action Plan, work to ensure that the financial capability of families at risk is improved by integrating financial capability material and curricula into a wider range of learning programmes such as basic skills courses [spring 2008]	HM Treasury Department for Children, Schools and Families Department for Innovation, Universities and Skills
Encourage housing providers to play a greater role in improving family outcomes through the exercise of new powers which will enable Registered Social Landlords and local authorities to apply for Parenting Orders* and enter into Parenting Contracts* [already announced]	Communities and Local Government

\* See Glossary at Annex B.





<b>Intensive, tailored support: funding better services for families at risk</b>	
<b><i>The Government has announced that, over the next Comprehensive Spending Review period, it will:</i></b>	<b><i>Lead Department(s)</i></b>
Invest a further £18 million in Family Intervention Projects to build on their success	Department for Children, Schools and Families
Invest £17.5 million in ten Multi-Systemic Therapy pilot sites* that will test out a family and community-based treatment for young people with complex clinical, social and educational problems, including violence, anti-social behaviour, drugs misuse and school expulsion	Department of Health Department for Children, Schools and Families
Invest an additional £170 million in Psychological Therapies and, building on existing pilot sites in Doncaster and Newham, implement the Improving Access to Psychological Therapies programme in 2008	Department of Health
Invest £30 million in the expansion of the Family Nurse Partnership programme and embedding learning from this programme in universal child health services	Department of Health Department for Children, Schools and Families
Explore how to prioritise families at risk in the funding and delivery of English for Speakers of Other Languages training	Department for Innovation, Universities and Skills
<b><i>The Government has announced in the Children's Plan that it will:</i></b>	<b><i>Lead Department(s)</i></b>
Invest £30 million to expand family literacy, language and numeracy provision to a further 70,000 families over the next three years. For example, the Government will work with the Learning and Skills Council and local authorities to ensure that parents and carers from families at risk are included in the priorities within the funding and delivery arrangements of family learning programmes	Department for Innovation, Universities and Skills Department for Children, Schools and Families

\* See Glossary at Annex B.



## Annex A: Public Service Agreements 2008/09–2010/11

Working with families at risk will be at the heart of delivering many of the new suite of Public Service Agreements (PSAs). The following PSAs are those which could support or be supported by a 'think family' approach. Further details of all the PSAs can be found at: [www.hm-treasury.gov.uk/pbr\\_csr/psa/pbr\\_csr07\\_psaindex.cfm](http://www.hm-treasury.gov.uk/pbr_csr/psa/pbr_csr07_psaindex.cfm) and the National Indicator Set can be found at: [www.communities.gov.uk/localgovernment/performanceframeworkpartnerships/nationalindicators/](http://www.communities.gov.uk/localgovernment/performanceframeworkpartnerships/nationalindicators/)

<b>PSA 2</b>	Improve the skills of the population, on the way to ensuring a world-class skills base by 2020
<b>PSA 8</b>	Maximise employment opportunity for all
<b>PSA 9</b>	Halve the number of children in poverty by 2010/11, on the way to eradicating child poverty by 2020
<b>PSA 10</b>	Raise the educational achievement of all children and young people
<b>PSA 11</b>	Narrow the gap in educational achievement between children from low income and disadvantaged backgrounds and their peers
<b>PSA 12</b>	Improve the health and wellbeing of children and young people
<b>PSA 13</b>	Improve children and young people's safety
<b>PSA 14</b>	Increase the number of children and young people on the path to success
<b>PSA 15</b>	Address the disadvantage that individuals experience because of their gender, race, disability, age, sexual orientation, religion or belief
<b>PSA 16</b>	Increase the proportion of socially excluded adults in settled accommodation and employment, education or training
<b>PSA 18</b>	Promote better health and wellbeing for all
<b>PSA 19</b>	Ensure better care for all
<b>PSA 21</b>	Build more cohesive, empowered and active communities
<b>PSA 23</b>	Make communities safer
<b>PSA 25</b>	Reduce the harm caused by alcohol and drugs



## Annex B: Glossary

**Care Programme Approach** – a framework for effective care for people with severe mental health problems. It involves systematic arrangements for assessing, planning and reviewing the health and social care required by a service user from a variety of providers, supported by a Care Co-ordinator.

**Common Assessment Framework for adults** – an assessment being developed by the Department of Health, for adults with longer-term health and social care needs requiring a multi-disciplinary response. This assessment will be online, and initially shared between health and social care services.

**Common Assessment Framework for children and young people (CAF)** – a standardised approach to assessing all of a child's additional needs and for securing an appropriate range of support for the child. It has been developed for use by all those working with children and young people so that they can communicate better, assess needs at an early stage and work more effectively together.

**ContactPoint** – an electronic database providing basic information on practitioners working with all children in England. It will identify the child's parent or carer and give contact details for services involved with the child.

**Extended Schools** – a school which works with the local authority and other partners to offer access to a range of services and activities including: a varied menu of activities, combined with childcare in primary schools; community access to school facilities; swift and easy access to targeted and specialist services; and parenting support.

**Family Group Conferencing** – a system of family-led decision making. It draws on the resources of the extended family and empowers those involved to negotiate their own solutions to a problem, rather than imposing external remedies. The approach of **contingency planning** involves the preparation of plans to minimise the disruption caused to families

if the family situation deteriorates, for example if a parent is temporarily unable to continue with their parental responsibilities owing to a mental health problem.

**Family learning** – shorthand for programmes which enable adults and children to learn together and involve explicit learning outcomes for both.

**Individual budget pilots for older people and disabled adults** – a pilot scheme to enable people needing social care and associated services to design their own support.

**Lead professional** – leads on co-ordinating provision and acts as a single point of contact for a child and their family when a range of services are involved and an integrated response is required.

**Local Safeguarding Children Boards** – established in every local authority from April 2006. They work to ensure that local organisations co-operate to safeguard and promote the welfare of children.

**Multi-Agency Risk Assessment Conference (MARAC)** – a tailored assessment procedure for cases involving domestic violence which takes into account broader risk factors (such as substance misuse and mental illness) associated with each victim and addresses the complex needs of each victim's family.

**Multi-Systemic Therapy** – an intensive intervention that combines family and cognitive-behavioural therapy strategies with a range of other support services. Central to the model is an acceptance that school, work, peers and the wider community are inter-connected systems that can influence the behaviour of young people and their families.

**Narrowing the Gap in Outcomes project** – a two-year project funded by the Department for Children, Schools and Families, which began in June 2007. Hosted by the Local Government Association and supported by the Improvement and Development Agency, it aims to make a significant difference to



the performance of children's trust arrangements in 'narrowing the gap' in outcomes between vulnerable children and their peers, against a context of improving outcomes for all children.

**National Academy for Parenting Practitioners**

– a centre of training, research and knowledge exchange, promoting best practice for parenting practitioners. The Academy aims to build on knowledge of what works, equip practitioners with skills and expertise, and inform parenting policy.

**Offender manager** – a named person (usually a probation officer) responsible for managing and co-ordinating all aspects of a court sentence.

**Parenting Contract** – a voluntary written agreement that is used by a range of agencies to gain the co-operation of parents in relation to the supervision of their child.

**Parenting Order** – a court-based order, introduced through the Crime and Disorder Act 1998, that can be applied for by a range of different agencies in different circumstances. Parenting Orders set out specific requirements for the parent/carer, who can be prosecuted following failure to comply.

**Specialist services** – have the highest entry threshold, often requiring a referral from another service. They deal with a specific issue or section of the population. Examples include: Multi-Systemic Therapy; higher tier mental health and drugs treatment services; domestic violence refuges; or Family Intervention Projects.

**Sure Start Children's Centres** – provide children under five and their families with a range of services including good-quality integrated early education and care, health and family support services, help in finding employment, and advice and information for parents. These are delivered in partnership through statutory, private, voluntary and independent sector agencies.

**Targeted services** – include preventative programmes for those identified as at increased risk, and services to address a specific need. These might include: Targeted Youth Support; learning mentors; Supporting People services; parenting programmes, including those delivered through Sure Start Children's Centres; adult literacy classes; or a support group for adults recovering from drug addiction.

**Targeted Youth Support** – aims to ensure that the needs of vulnerable teenagers are identified early and met by agencies working together effectively, in ways that are shaped by the views and experiences of young people themselves.

**Universal services** – include, for example: GPs; health visitors; teachers; Jobcentre Plus; housing services; Sure Start Children's Centres; and some voluntary agencies. These are services that have open access and are accessed routinely by a large section of the population.



## Endnotes

- 1 The Families At Risk Review has been informed by extensive research and consultation including: stakeholder events; focus groups with excluded families; a call for evidence; and a literature review looking at whole-family approaches to delivery. *Think Family: A literature review of whole family approaches* has been published as a standalone document and is available on our website: [www.cabinetoffice.gov.uk/social\\_exclusion\\_task\\_force/families\\_at\\_risk.aspx](http://www.cabinetoffice.gov.uk/social_exclusion_task_force/families_at_risk.aspx)
- 2 Cabinet Office (2006) *Reaching Out: Think Family, analysis and themes from the Families At Risk Review*. [www.cabinetoffice.gov.uk/social\\_exclusion\\_task\\_force/families\\_at\\_risk.aspx](http://www.cabinetoffice.gov.uk/social_exclusion_task_force/families_at_risk.aspx)
- 3 Department for Children, Schools and Families (2007) *The Children's Plan*. [www.dfes.gov.uk/publications/childrensplan/](http://www.dfes.gov.uk/publications/childrensplan/)
- 4 Subject to a maximum total cost of £175 per week for parents with one child and £300 for parents with two or more children.
- 5 HM Treasury and Department for Education and Skills (2007) *Aiming high for children: supporting families*. [www.hm-treasury.gov.uk/spend\\_csr07/reviews/cyp\\_review/cypreview\\_index.cfm](http://www.hm-treasury.gov.uk/spend_csr07/reviews/cyp_review/cypreview_index.cfm)
- 6 HM Treasury tax-benefit simulation model (2007).
- 7 Challis, D, Glendinning, C and Wilberforce, M (2007) *Individual Budgets Evaluation: A Summary of Early Findings*. Social Policy Research Unit, University of York, York. [www.york.ac.uk/inst/spru/pubs/rworks/lbsenSummary.pdf](http://www.york.ac.uk/inst/spru/pubs/rworks/lbsenSummary.pdf)
- 8 Department of Health (2007) *The government response to Facing the Future: a review of the role of health visitors*. [www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyandGuidance/DH\\_080007](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyandGuidance/DH_080007)
- 9 Research suggests that one in eight participants significantly decrease their alcohol intake following this straightforward intervention. Heather, N (2006) *Health interventions for problem drinkers*.
- 10 The charity One Plus One delivers training which provides clear guidelines for supporting relationships within families and between families and those they turn to for help. See [www.oneplusone.org.uk/MAIN/AboutUs.php](http://www.oneplusone.org.uk/MAIN/AboutUs.php) for further information.
- 11 The Children's Workforce Action Plan will set out actions to engage staff in universal services in identifying and assessing needs early and in targeting services more effectively. It aims to drive workforce reform at all levels of the system and to embed a culture of integrated working.
- 12 HM Government (2007) *Putting People First: A shared vision and commitment to the transformation of Adult Social Care* confirms that the Department of Health will provide funding over the next three years to support system-wide transformation towards a personalised system in every local authority. Local authorities and their partners will agree together how this funding will be spent. [www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_081118](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_081118)



- 13 The Ministry of Justice and Department for Children, Schools and Families conducted the Children of Offenders Review to consider how to support children of prisoners to achieve better outcomes. For a copy of the recently published analytical findings see: [www.cabinetoffice.gov.uk/social\\_exclusion\\_task\\_force/families\\_at\\_risk.aspx](http://www.cabinetoffice.gov.uk/social_exclusion_task_force/families_at_risk.aspx)
- 14 [www.everychildmatters.gov.uk/deliveringservices/informationsharing/](http://www.everychildmatters.gov.uk/deliveringservices/informationsharing/)
- 15 HM Government (2007) Service Transformation Agreement. The Ministry of Justice is leading a cross-government programme to 'develop frameworks and mechanisms that enable public sector organisations to share information to improve personalised public services, increase public safety and tackle social exclusion in an environment of openness and respect for citizens' privacy and access rights'.
- 16 ContactPoint will be reviewed by independent security experts during system build and audited during operation. Security of data is paramount: access to ContactPoint will be restricted to professionals who need it as part of their work and subject to stringent security controls. Before being able to access ContactPoint, all users must have security clearance (including enhanced Criminal Records Bureau clearance), a user name, password, PIN and security token. All ContactPoint users will complete mandatory training which includes components on the safe and secure use of ContactPoint and which will make explicit the importance of compliance with the Data Protection Act 1998 and Human Rights Act 1998. A training programme on information sharing has already been rolled out across local authorities for use across relevant children's workforces.
- 17 The Children Act (1989, 2004). For more details see: [www.dfes.gov.uk/publications/childrenactreport/](http://www.dfes.gov.uk/publications/childrenactreport/)
- 18 Department for Communities and Local Government (2006) *Strong and Prosperous Communities: The Local Government White Paper*.

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