

Early Intervention Support Service

Northern Quarterly Report Card No 5

EISS

**The Early Intervention
Support Service
for families with children
between
0 and 18 years old**



WHAT IS THE EARLY INTERVENTION SUPPORT SERVICE?

The Early Intervention Transformation Programme (EITP) is delivered as part of the Delivering Social Change agenda in partnership with Atlantic Philanthropies. It represents a new joined up working and funding across five Government Departments to drive through initiatives which will have a significant impact on outcomes for families with children 0-18 years old. As part of EITP a new Early Intervention Support Service (EISS) is being established in five areas across Northern Ireland. The aim of the EISS is to support families when difficulties arise before they need involvement with statutory services. The EISS will deliver and coordinate person centred, evidence based, early intervention for families with children 0-18 years old within Tier 2 of the Hardiker Model.

Data presented- 01 April 2017– 30th June 2017



**Northern Ireland
Executive**

www.northernireland.gov.uk

DELIVERING SOCIAL CHANGE

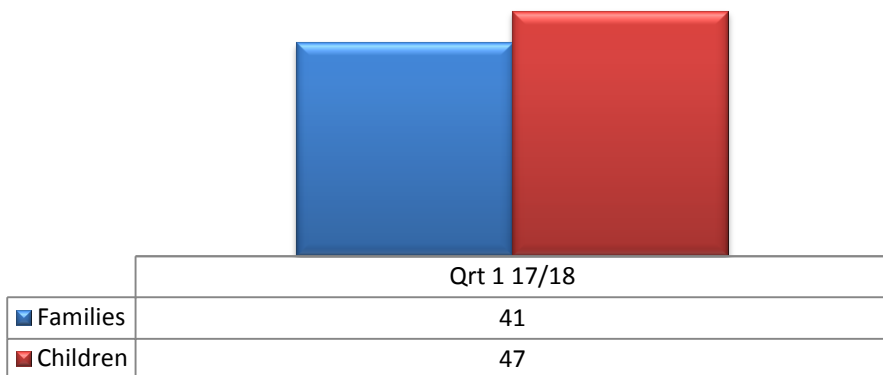


**Early Intervention
Transformation Programme**

The
ATLANTIC
Philanthropies

How much did Northern EISS do?

PM1- No of Families & Children Referred to EISS



There are no targets for referrals to the EISS – targets set relate to the number of families supported. Approximately 19% of families referred to EISS did not progress in QRT 1 as a number of families declined the offer of service or did not meet the referral criteria; on this basis to meet targets for families supported by EISS approximately 47 referrals are required each quarter.

PM2a – No of Referrals by Family Support Hub Area (#41 Families)

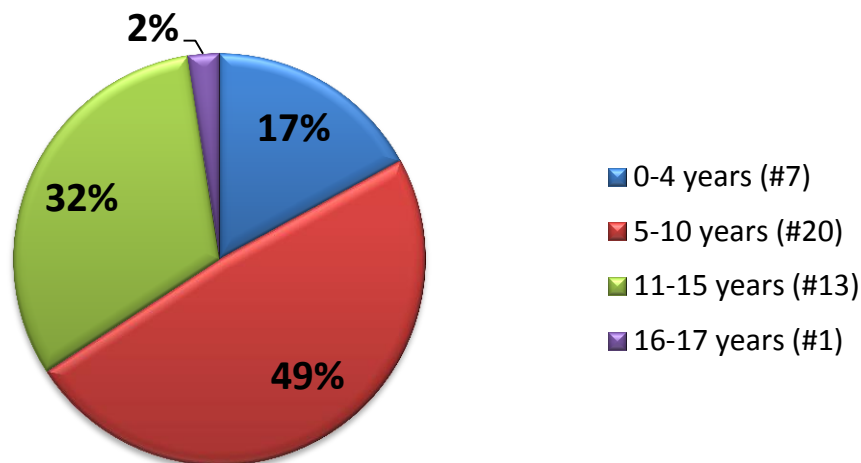
Larne and Carrick

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Ballymena

21

PM2b- Referrals of Children and Young People by Age Range QTR 4 (#65 Children & Young People*)

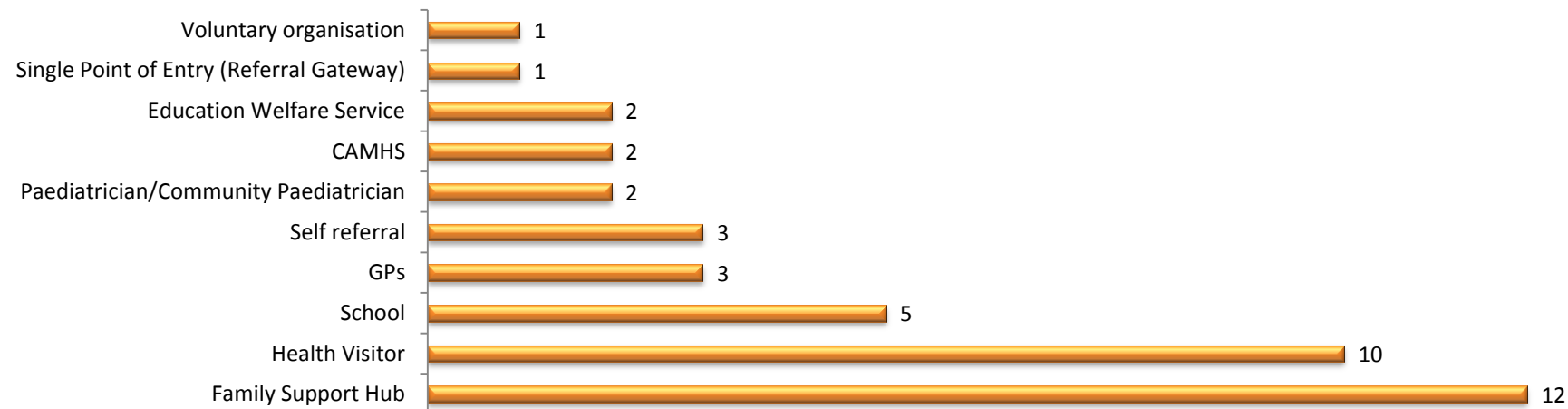


The EISS supports families with Children and Young People 0-18 years of age. Referrals by age range is comparative to the Family Support Hubs with referral rates highest for children between 5-10 years. This may partly be attributed to Sure Start providing support for children 0-4 years in many areas.

*This figure relates to the child/young person that the referral was received for.

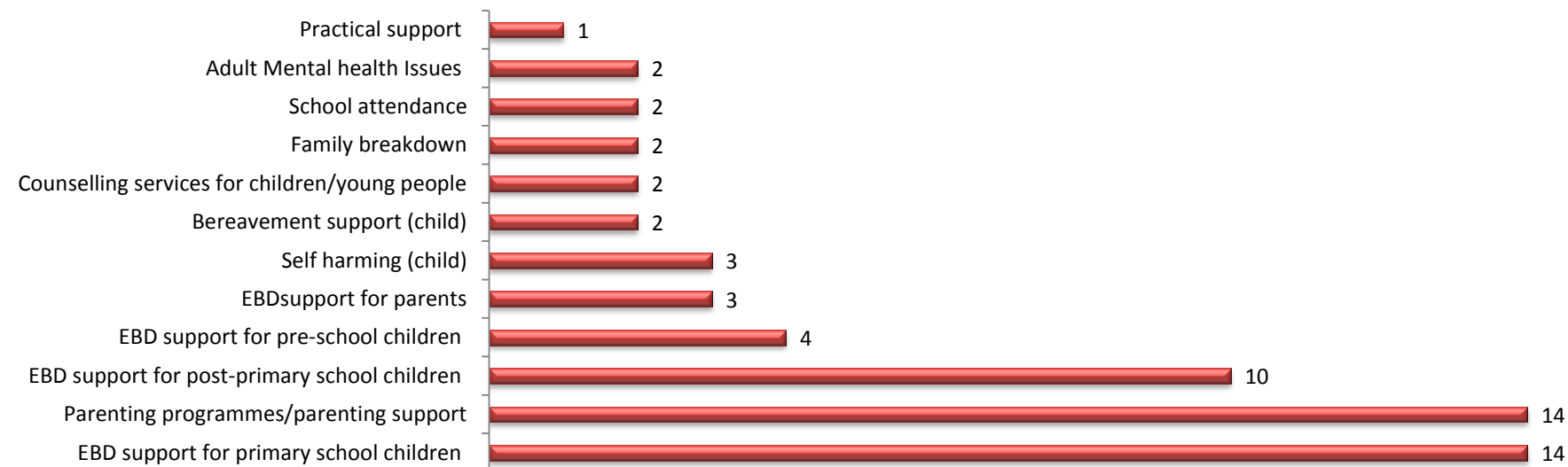
How much did Northern EISS do?

PM2c - No of Referrals through Referring Agencies QRT 1 (#41)



There has been an increase in referrals each quarter directly to the service ; the majority of referrals continue to be from Family Support Hubs.

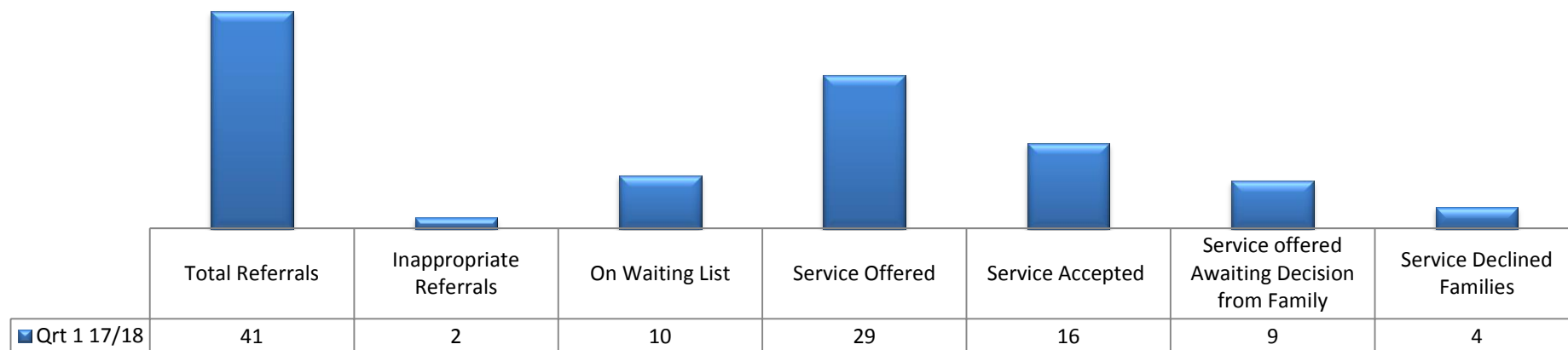
PM2d– Main Reason for Referral Top 12 QRT 1(#59)



Emotional, behavioural difficulty & parenting support are the primary reasons for referral which is comparative to reasons for referral to the Family Support Hubs. Families are generally referred for support in more than one area.

How much did Northern EISS do?

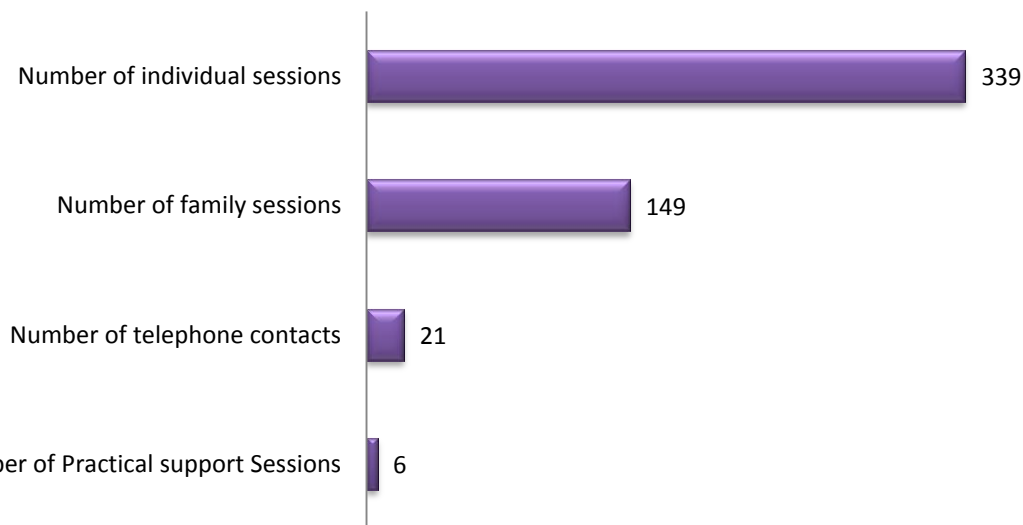
PM3- No of Families Offered, Accepted, Awaiting Outcomes & Declined (QRT 1 #41 referrals received)



It is noted that approximately 19% of families referred to NEISS in QRT 1 did not progress as a number of families declined the offer of service or were inappropriate referrals i.e. families were Tier 3 or outside the NEISS catchment area.

Families on the waiting list will receive a first visit within 4 weeks.

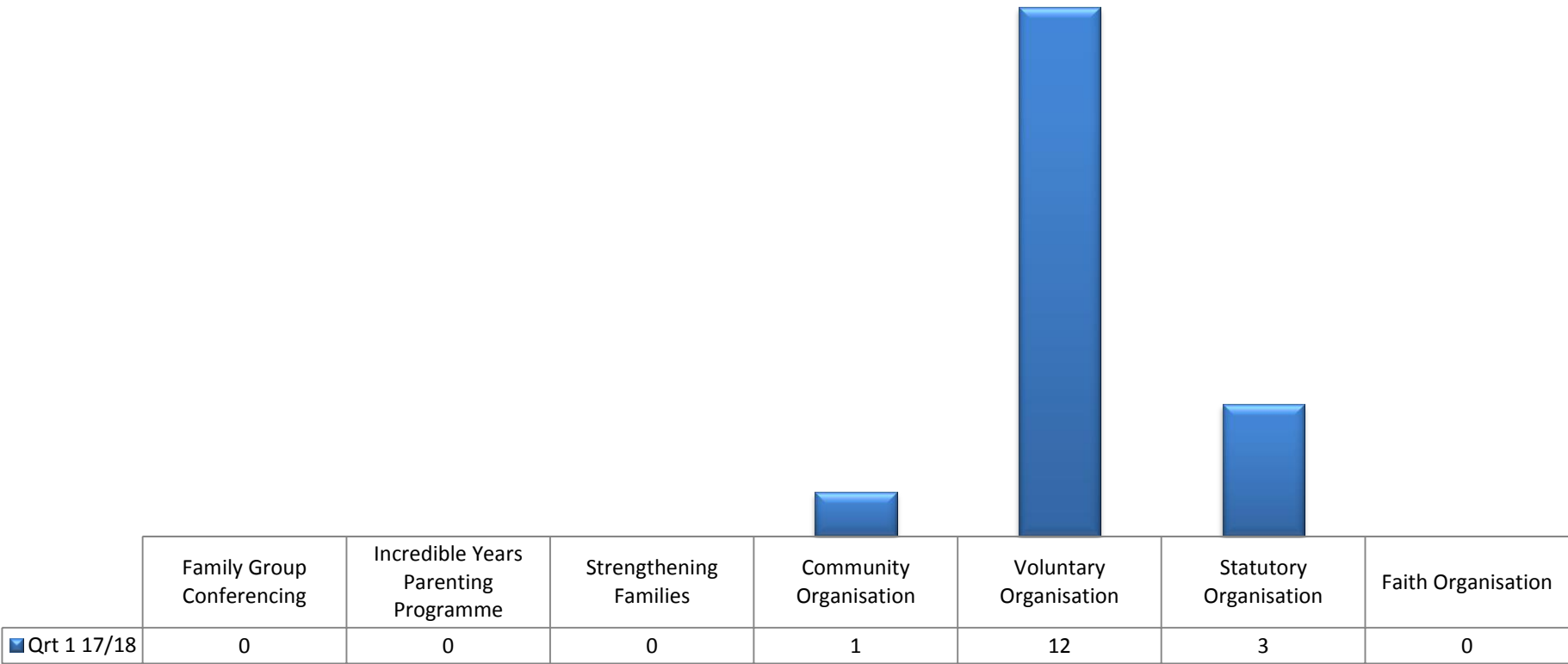
PM4 – Activities – based on 48 closed cases (QRT 1 #515) - *Telephone Contacts, One to One Sessions, Family Sessions & Practical Support Sessions*



Families are assigned a key worker each whole time equivalent worker holds a case load of 12 families the key worker provides support to the family for a period of approximately 12 weeks. Individual & family sessions are provided using a range of therapeutic interventions including motivational interviewing, Solihull Approach and Solution Focused Brief Intervention Therapy. Practical support is also provided when required for a small number of families.

- Individual, family & practical support sessions are recorded as hourly sessions
- Telephone contacts are 30 minute sessions.

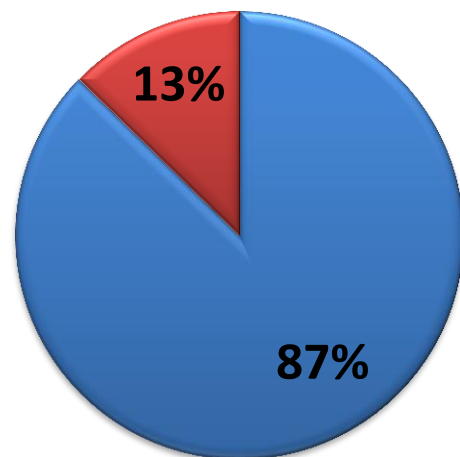
PM5- Number of Families signposted to other services



Family Group Conferencing; Incredible Years and Strengthening Families programmes are available to EISS families as additional support for families who are thought that would benefit from these interventions. In addition to these programmes a number of families require ongoing support following discharge from EISS these families are signposted to a range of community, voluntary, statutory & faith organisations.

How well did Northern EISS do it?

PM6– Length of time between Referral to First Contact QRT 1 17/18 (*Target first contact within 1-10 working days*) based on 55 closed cases



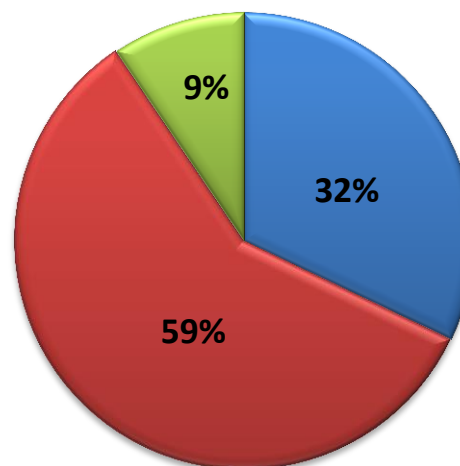
■ Referral to first contact 1-10 Working Days achieved (#48)

■ Referral to first contact 10 days + (#7)

PM7 – Length of Intervention QRT 1 17/18 Based on 55 closed cases

EISS provides support for a 12 week period; an extension up to 4 weeks is agreed with the EISS manager if required and the practitioner at a local level. An extension may be required for a number of reasons e.g. holidays, illness, cancelled or missed appointments. An extension of 17+ weeks is only agreed in exceptional circumstances. The average length of intervention will be calculated from Quarter 4 to inform resource planning for future service delivery.

The average length of intervention in Qrt1 for closed cases was 13.5 weeks.



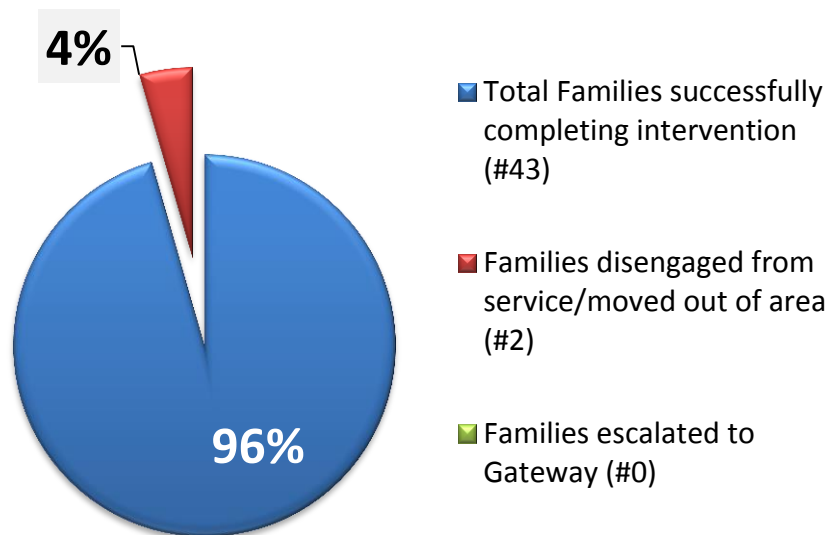
■ Initial visit to case closure 0 - 12 weeks (#17)

■ Initial visit to case closure 13- 16 weeks (#31)

■ Initial visit to case closure 17+ weeks (#5)

How well did Northern EISS do it?

PM8 – Outcome of Intervention QTR1 (based on closed cases #55)

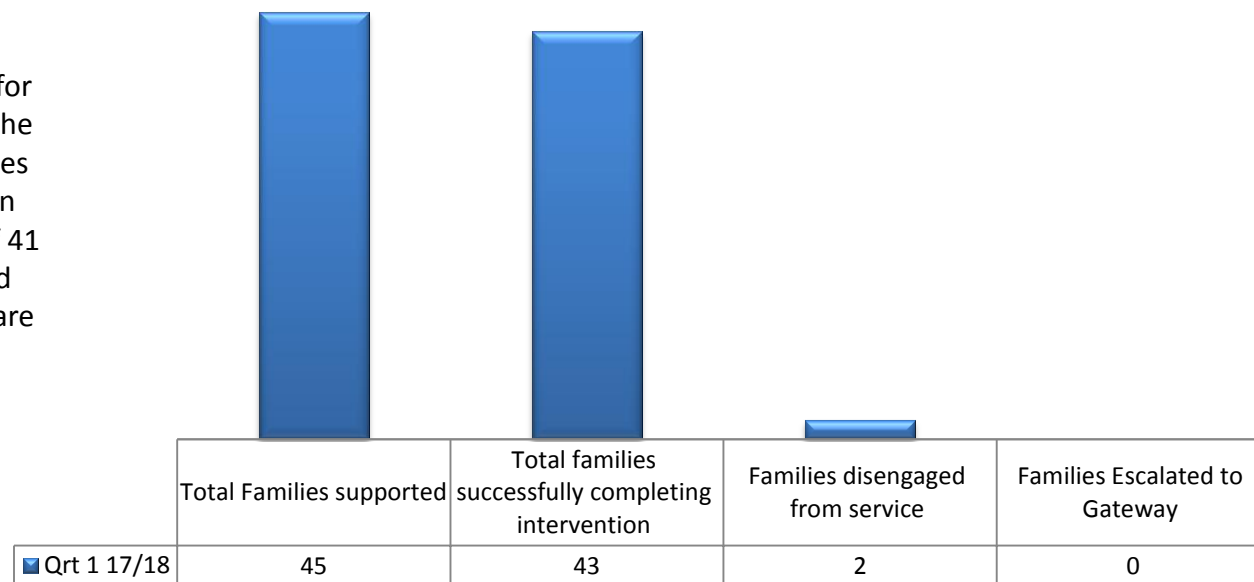


There were 55 closed cases in QTR 1 a number of families (#10 = 18%) did not go on to receive the EISS as when contacted by the EISS they did not wish to receive the service for various reasons

- Family circumstances had changed the service was no longer required.
- Alternative supports had been accessed.
- No response to phone calls and letters sent offering service.

Families Supported QRT 1 17/18

The target number of contacts for the duration of the EISS is 375 the NEISS has supported 202 families between 1/8/15 & 30/6/17. An average of 41 families a total of 41 families need to be supported each quarter to ensure targets are achieved.



PM9 - % of families satisfied / very satisfied with the service QTR 1 17/18

- 45 parent/carer user satisfaction forms were issued 37 (82%) were completed 84% rated the service as excellent & 16% rated the service as very good.
- 29 child/young person user satisfaction forms were issued 100% were completed 59% rated the service as excellent; 34% rated the service as very good & 7% rated the service as good.

"At home things have gotten better with me and my mum."

Quote from Young Person

"I can't praise or recommend the service enough. The difference the worker's advice and practical solutions made to our family unit has been transformational."

Quote from Parent

"I can't thank the worker enough. She helped us address, cope and transition. Her early intervention, techniques and methods really helped."

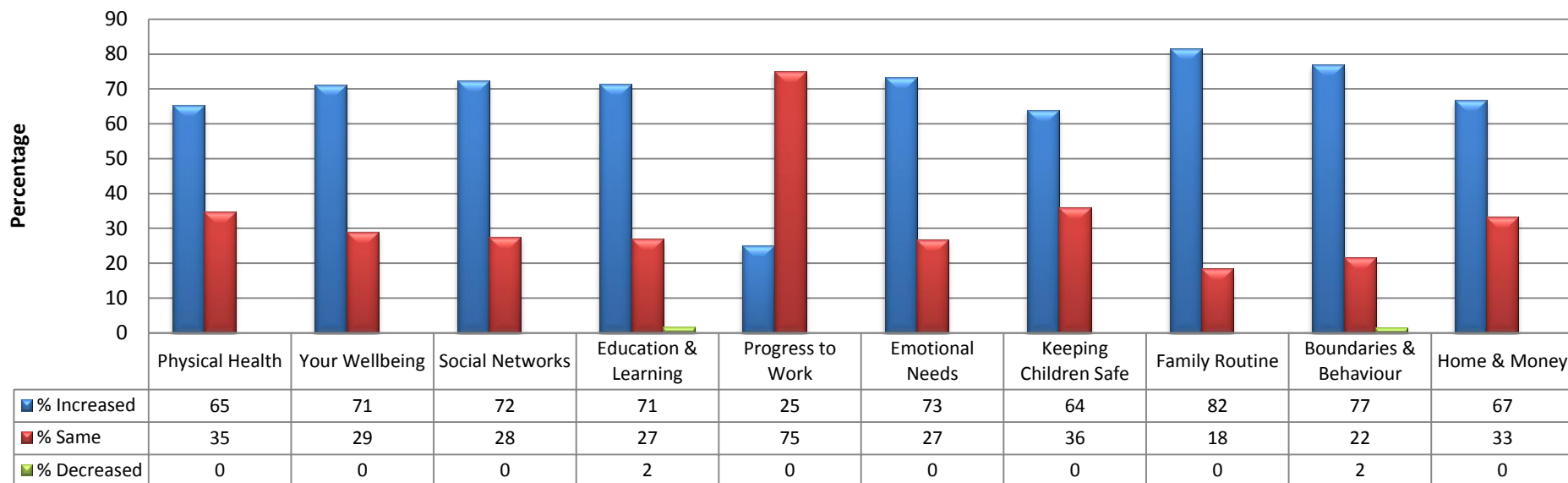
Quote from Parent

"It really helped me calm down, before I was petrified of sleeping, now I can get to sleep far far easier."

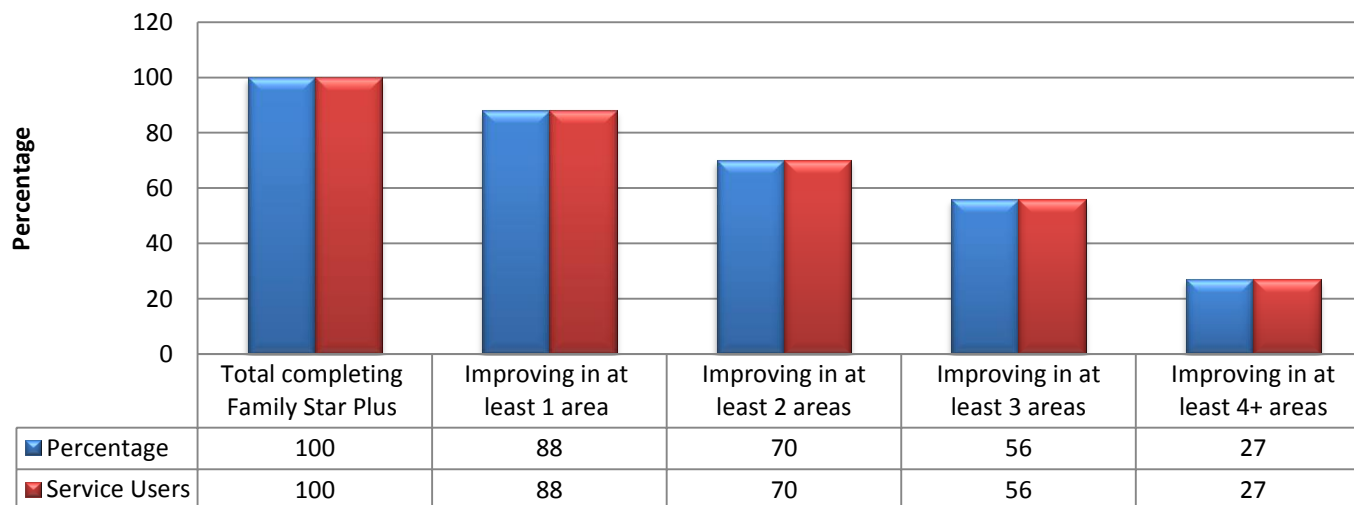
Quote from Young Person

PM 14 Cumulative based on closed cases #100 Outcomes for Families

Overall Family Star Plus (Cumulative from 1 Apr 16 #100 Families)



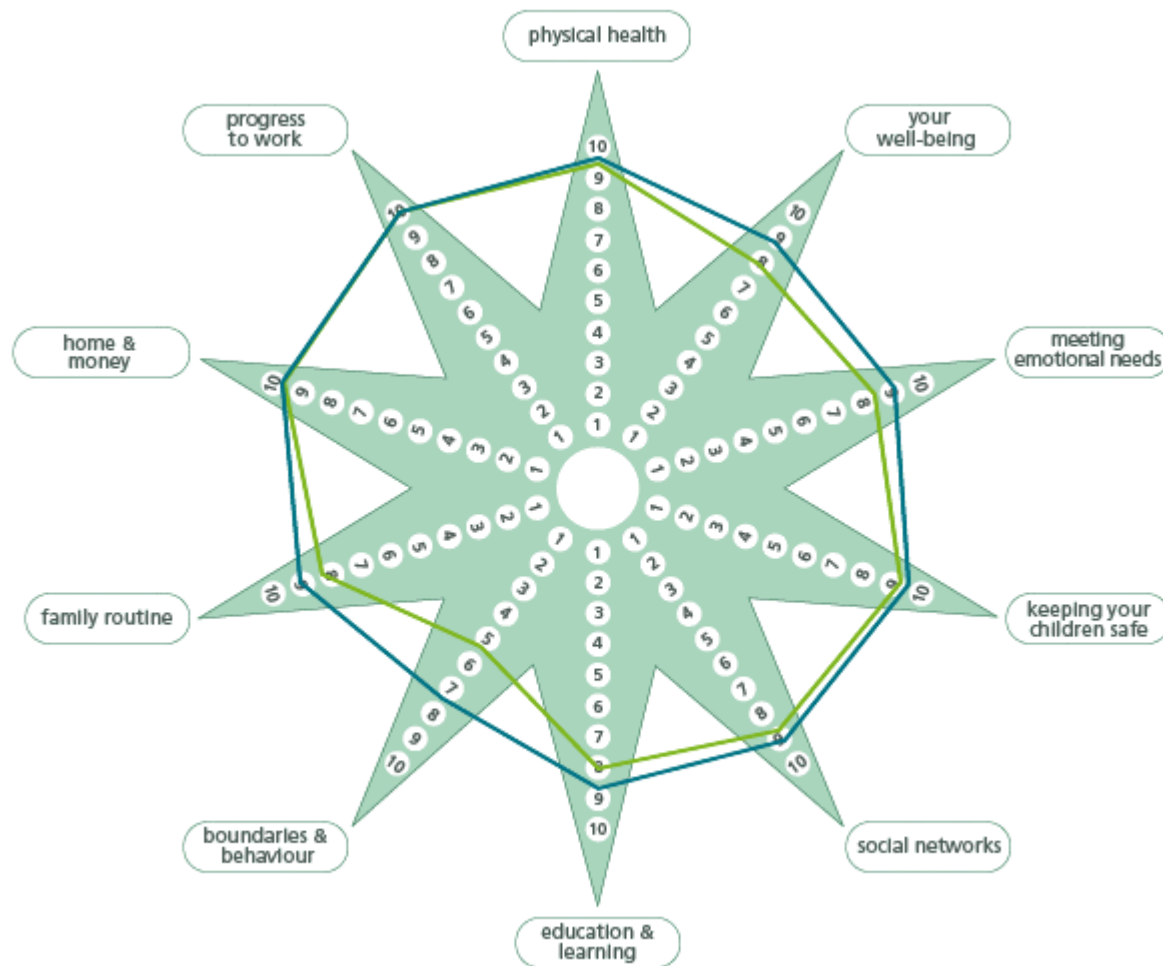
How many Service Users Improved



The Family Star Plus focuses on ten core areas that have been found to be critical in enabling children and young people to thrive. Project workers agree with families which areas they want to focus on. Interventions would generally be focused on a maximum of three areas.

Northern EISS - Is anyone better off?

PM 14 Family Star Plus Cumulative based on Family Star Plus #112 Families



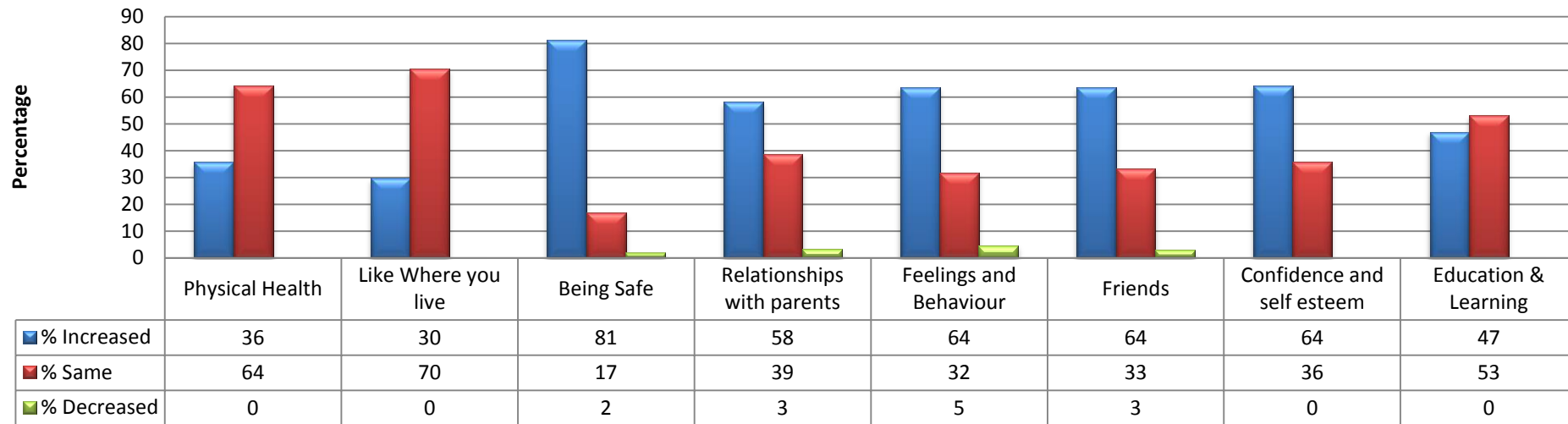
Data on the Star shows an average of the scores across all areas. A “big” increase or decrease is defined as more than one point up or down the area.

First Score

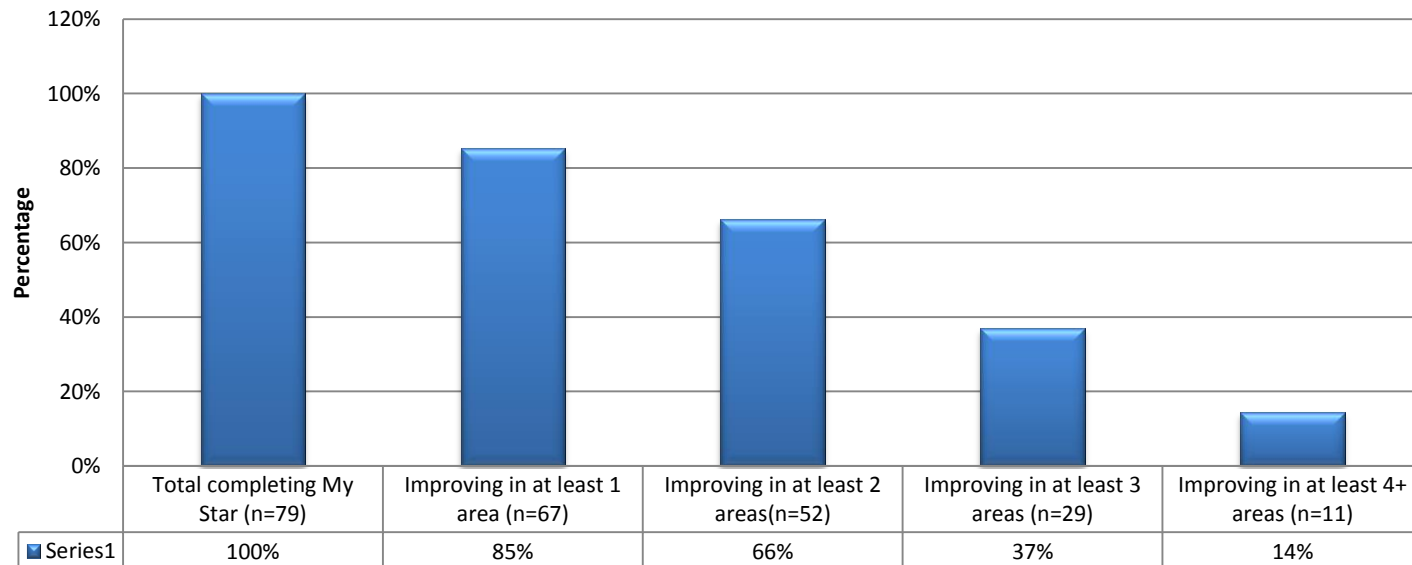
Last Score

PM 15 Cumulative based on closed cases #79 Outcomes for Children and Young People

My Star (Cumulative from 1 April 2016 #79 Children and Young People)



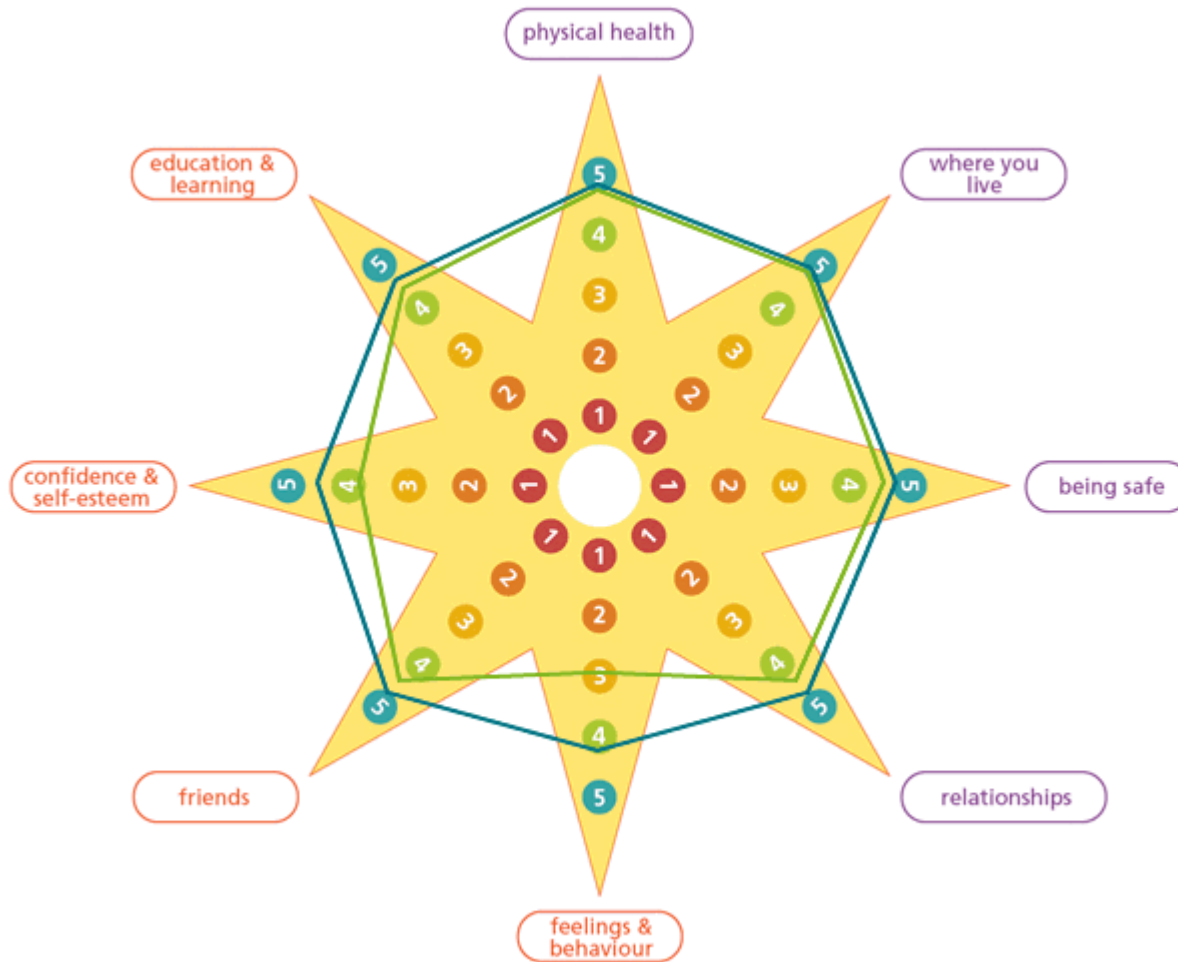
How Many Service Users Improved Percentage # Service Users (Cumulative from 1 April 2016 #79 Children & Young People)



My Star focuses on eight core areas that have been found to be critical in enabling children and young people to thrive. Project workers agree with the child/young person what areas they want to focus on. Interventions would generally be focused on a maximum of three areas.

Northern EISS - Is anyone better off?

PM 14 My Star Cumulative based on My Star #124 Families



Data on the Star shows an average of the scores across all areas. A “big” increase or decrease is defined as more than one point up or down the area.

_____ First Score
_____ Last Score

This Star shows first and last scores for families included in this report; report downloaded 12th September 2017

Case Study: Northern Early Intervention Support Service June 2017

Request for service: To help C with his stress and find better ways of coping, help for mum to deal with his behaviour

Case Profile

C is a 10 year old boy diagnosed with ASD who was referred by Paediatric ASD Service. He has a great deal of worry and anxiety. He thinks his brain tells him to do things and then he is sorry. He thinks he is bad and deserves being punished. He will hit himself in the head to try and stop his thoughts. He has very black and white thinking. He cannot deal with anything that has to do with death. He constantly worries about everything.. C's mum is very stressed and feels hopeless about supporting him, school is also having trouble coping. His teacher reported that he runs out of the class regularly and needs 1:1 to help him cope. He has just had his classroom assistant support go to full time to assist with his needs.

Assessment with Family using Family Star Plus

- **Your Well-being:** Mum is very stressed with C's behaviour and his outbursts around his irrational fears.
- **Meeting Emotional Needs:** Mum was unsure how to help C at times of his distress and negative self-talk.
- **Education & Learning:** Mum is concerned about his transition into secondary school.
- **Boundaries & Behaviour:** Mum did not know what to do about his behaviour and felt very hopeless.

Intervention:

Intervention was completed with both mum and C together. Began with education about anxiety, how it affects the body and brain. Used story book, video and websites to explain the effects of anxiety and calm down strategies. Used CBT approach to explore the effects of thoughts/feelings and behaviour and challenge irrational thinking. Solihull approach used with mum regarding her own stress and the affects this has on her ability to help C. Further support for C around phobia of death and sign posted support for ABA therapy. Finally mum was able to begin to develop a plan for exploring school options for C and who to contact regarding how he would be supported. At closure, mum was much more relaxed and able to see how her stress effected C's stress. C was much more able to contain his worries and quickly calm down if he became upset.

Outcomes

- **Your Well-being:** Mum felt much better and now has resources that she can utilise if she wants continue individual support.
- **Meeting Emotional Needs:** both mum and C have a much better understanding of anxiety and strategies to cope.
- **Education & Learning:** School has reported a positive change in C's behaviour since the intervention started.
- **Boundaries & Behaviour:** C's outbursts and anxiety have lessened.

Family Star Plus

	First Star Score	Final Star Score
Your Well-being	2	8
Meeting emotional need	4	9
Education & learning	3	8
Boundaries & Behaviour	2	9

Service User Feedback

C said "He feels fine just the way he is now
Mum reported that having someone to talk
and be there for support was very helpful.
She said she is more optimistic.

