How much did we do?

Performance Measure 1: As at Sept 2017, 29 hubs were fully operational in Northern Ireland.
How much did we do?

Performance Measure 2: No of Families, Children & Parents Referred through Family Support Hubs – 2017/18

Number of Families Referred

<table>
<thead>
<tr>
<th></th>
<th>Q1</th>
<th>Q2</th>
<th>Q3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Families</td>
<td>1748</td>
<td>1454</td>
<td>1729</td>
</tr>
</tbody>
</table>

Number of Children Referred

<table>
<thead>
<tr>
<th></th>
<th>Q1</th>
<th>Q2</th>
<th>Q3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children</td>
<td>2070</td>
<td>1895</td>
<td>2326</td>
</tr>
</tbody>
</table>

Number of Parents Referred

<table>
<thead>
<tr>
<th></th>
<th>Q1</th>
<th>Q2</th>
<th>Q3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parents</td>
<td>1122</td>
<td>923</td>
<td>1129</td>
</tr>
</tbody>
</table>
How much did we do?

Performance Measure 3: Children referred by age profile - 2017/18

5-10 years has consistently been the highest age group for referral.
Performance Measure 4
Referrals by Ethnic Background for Children and Parents referred through Family Support Hubs.

(Note: ‘White’ has the higher number of referrals for both Children and Parents and are presented on separate scales as shown in these charts.)
How much did we do cont’d….?

Performance Measure 4: Children with a disability referred -2017/18

Children with a **learning disability** had the highest number of disability referrals.

<table>
<thead>
<tr>
<th>Condition</th>
<th>Q1</th>
<th>Q2</th>
<th>Q3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical</td>
<td>54</td>
<td>48</td>
<td>69</td>
</tr>
<tr>
<td>Learning</td>
<td>123</td>
<td>120</td>
<td>132</td>
</tr>
<tr>
<td>Sensory</td>
<td>106</td>
<td>70</td>
<td>57</td>
</tr>
<tr>
<td>Autism (including Asperger Syndrome)</td>
<td>58</td>
<td>88</td>
<td>120</td>
</tr>
<tr>
<td>ADHD/ADD</td>
<td>9</td>
<td>52</td>
<td>40</td>
</tr>
<tr>
<td>Other (e.g. Acquired Brain Injury)</td>
<td>12</td>
<td>26</td>
<td>28</td>
</tr>
</tbody>
</table>
At present from 1st April to 31st December 2017 the highest group of families referred are One Parent Families with 2441 in Q1, Q2 and Q3. Home with both parents is 2142 and One Parent + Partner totals at 250. The household composition for Kinship Carers is 29 and Guardians 38, with 95 not disclosed.
Performance Measure 6: Main Presenting Reasons for Referral - 2017/18

**Reasons for Referral:**
Consistently Emotional behavioural support for primary school age children has been the main presenting reason for referral. At present there has been 1336 children referred for EBD support for primary school age children from April to December 2017.

Requests for parenting programmes/support at present for Q1 to Q3 totals at 848.

In Q1 to Q3 there has also been a growth in the number of post primary children referred for emotional behavioural support, with 670 referred.

As hubs become established in local communities greater numbers of referrals are being presented for EBD support for parents and Counselling services for children/young people.
The vast majority of referrals to Hubs were processed within 4 weeks. A further significant number within 5-8 weeks and of the remaining referrals only 6 exceeded the maximum 8 weeks timescale. This ensures families receive a timely response to their immediate needs from the Hub Co-ordinator.
In Q3 Self-referrals were the key referrer at 20%, which was also the top referring agency in Q2 at 16% for 2017/18.

Referrals to GP's are 11%, a slight drop from Q2 at 14%.

Paediatricians referrals are the same as GP’s at 11% with Health Visitors referrals are 10%, the same as Q2.
Performance Measure 9: Number of Parents / Children referred who did and who did not take up the service offer

<table>
<thead>
<tr>
<th></th>
<th>Q1</th>
<th>Q2</th>
<th>Q3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of children/parent referred who took up the service offer</td>
<td>1439</td>
<td>1355</td>
<td>1350</td>
</tr>
<tr>
<td>Number of children/parent referred who did not take up the service offer</td>
<td>88</td>
<td>117</td>
<td>96</td>
</tr>
<tr>
<td>Not Known</td>
<td>101</td>
<td>171</td>
<td>155</td>
</tr>
</tbody>
</table>
How well did we do it cont’d……

Performance Measure 10: 10 Standards 93% Fully Implemented 7% Partially Implemented - Q1, Q2 & Q3 2017/18


Standard 2. Family Support Interventions are NEEDS LED (and provide the minimum intervention required).

Standard 3. Family Support requires a clear focus on the WISHES, FEELINGS, SAFETY AND WELL-BEING OF CHILDREN.

Standard 4. Family Support services reflect a STRENGTHS BASED perspective, which is mindful of resilience as a characteristic of many children and families lives.

Standard 5. Family Support is ACCESSIBLE AND FLEXIBLE in respect of location, timing, setting and changing needs, and can incorporate both child protection and out of home care.

Standard 6. Family Support promotes the view that effective interventions are those that STRENGTHEN INFORMAL SUPPORT NETWORKS.

Standard 7. Families are encouraged to self-refer and MULTI-AGENCY REFERRAL PATHS are facilitated.

Standard 8. INVOLVEMENT OF SERVICE USERS AND PROVIDERS IN THE PLANNING, DELIVERY AND EVALUATION of family support services in practised on an on-going basis.

Standard 9. Services aim to PROMOTE SOCIAL INCLUSION and address issues around ethnicity, disability and urban/rural communities.

Standard 10. MEASURES OF SUCCESS are built into services to demonstrate that interventions result in improved outcomes for service users, and facilitate quality assurance and best practice.

Hub Standards

- Fully Implemented: 93%
- Partially Implemented: 7%

All Hubs are expected to administer the self assessment tool based on the 10 Standards and to develop an Action Plan which is reviewed on a 6 monthly basis.
Case Study 1
“I was introduced to the Family Support Hub by my son’s paediatric consultant. My son was born with a rare genetic disorder. I am a single parent and was struggling to find services in the community to help.
I work full time so knowing what I was entitled to was very difficult as the online information is not always helpful and as my son’s disability has many conditions I found myself not aligned to one charity for support or help.
The Family Support Hub staff gave me confidence to know I was not the only one in the community struggling. Had the family hub not found me a service which really supported my child I was going to have to go part time in work, which would have caused a real financial strain on the home. I also received 36 free hours of childcare, which is just amazing. I have also been assigned a person to help me fill out my DLA forms which I was struggling with. More than anything it has given me comfort to know I am not alone when trying to access services. I have a great network of consultants for my son’s physical problems but this is only part of him and I have always been isolated when it comes to help on the social side – but not anymore now I have help and confidence in the family hub.”
A lone parent
Case Study 2
“I would like to thank you from the Family Support Hubs and your support workers for all you have done for my daughter and my family.

When I was searching for much needed help, I had people recommending your services and when I did some research I was very happy about what I was reading and hearing for myself I felt like this is just what I had been looking for. After going through the process and then being allocated a support worker to help with my daughter's needs I felt that it was working well and my daughter who doesn't always engage well with people because of social anxiety was making a connection.

The support we received was excellent and was really in line with my daughter's struggles in life and helped her a lot over the period of time the support worker was with us.

I feel we need more services like this to help people like myself and my family in the same situations.”

(Parent)
Case Study 3
A mother was referred to the Family Support Hub by the Gateway Team. She requested parenting support and it subsequently transpired she was concerned that her child had been adversely affected by domestic abuse and was showing signs of anxiety. The child attended Women’s Aid Helping Hands Course and the mother reported a “marked improvement” in her child’s mental health. She knows she can contact Women’s Aid if she needs further help and advice.

Hub Co-ordinator