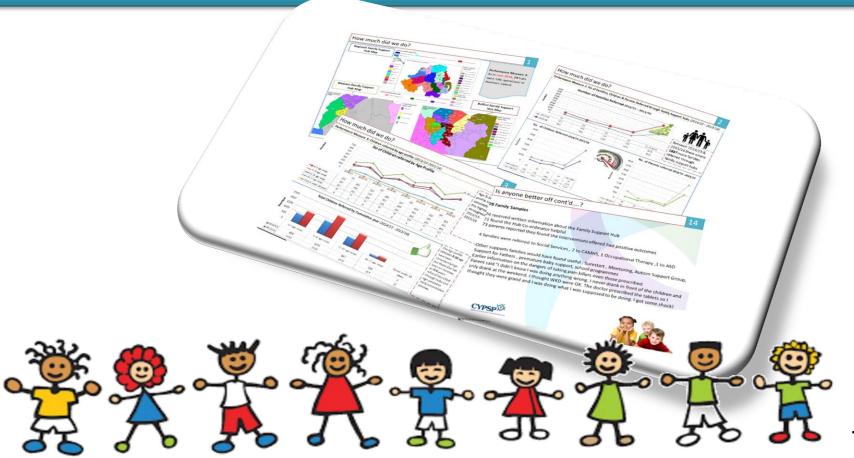


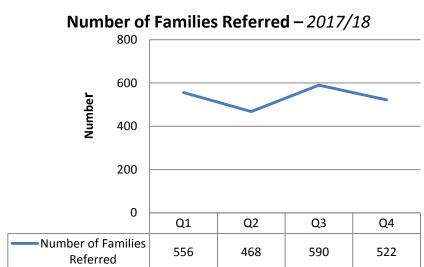
BHSCT Family Support Hubs Report Card

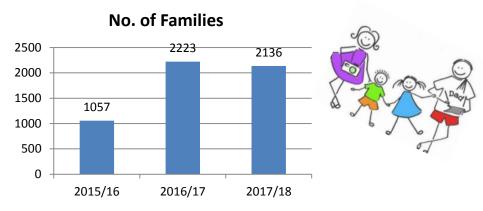
Annual Report Card 2017/18



How much did we do?

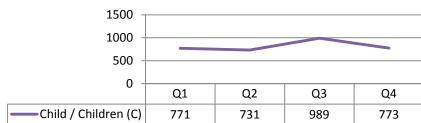
Performance Measure 1: No of Families, Children & Parents Referred through Family Support Hubs -2017/18



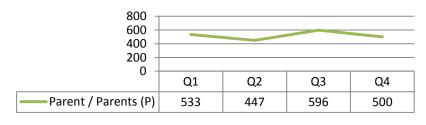


In 2017/18 there was a slight drop in families referred through Family Support Hubs in Belfast than in 2016/17.

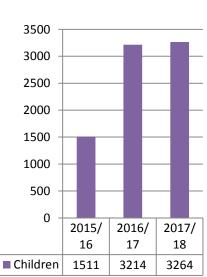
Number of Children Referred - 2017/18



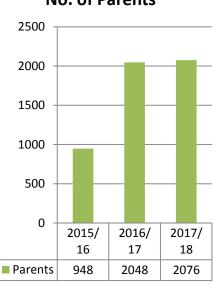
Number of Parents Referred - 2017/18



No. of Children

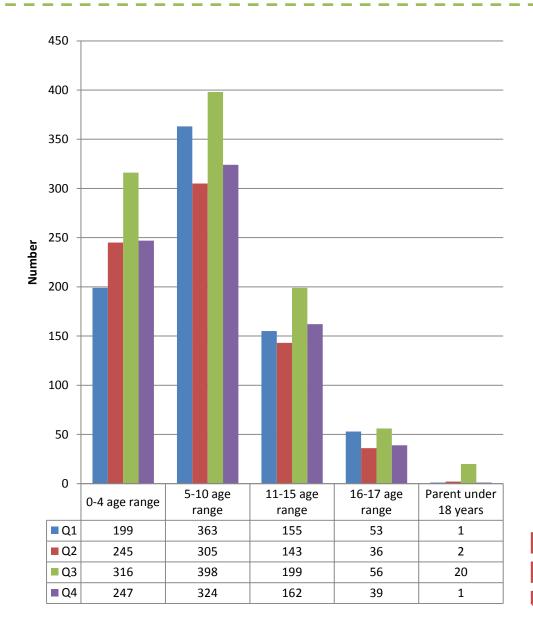


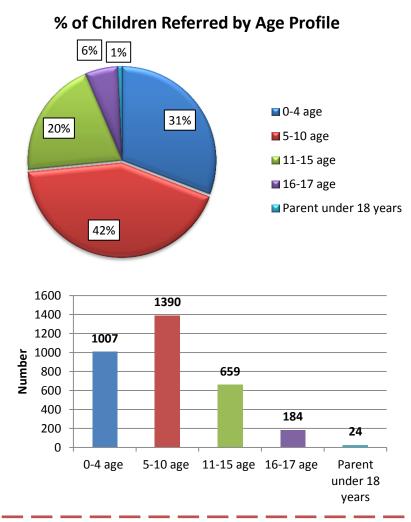
No. of Parents



How much did we do?

Performance Measure 2: Children Referred by Age Profile - 2017/18





Age **5-10** profile has consistently been the highest in 2017/18 within Belfast, with 1390 (42%) children referred.

ired

Brain

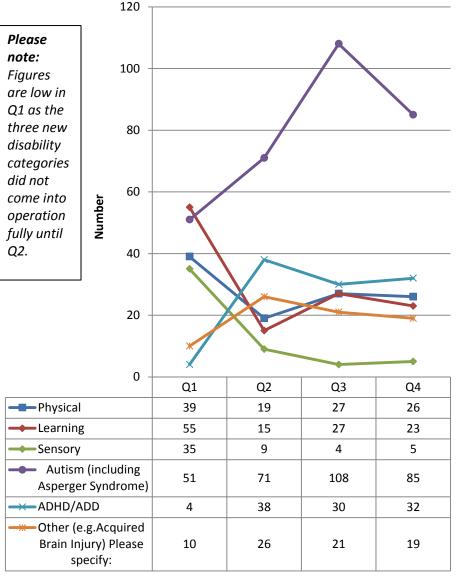
Injury)...

76

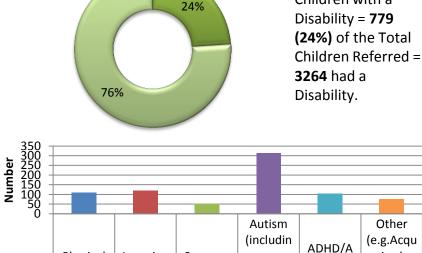
Children with a

How much did we do cont'd....?

Performance Measure 3: Children with a Disability Referred - 2017/18



Children Referred with a Disability 2017/18



Sensory

53

g

Asperger

Syndro...

315

DD

104

Physical

111

■ Total

Learning

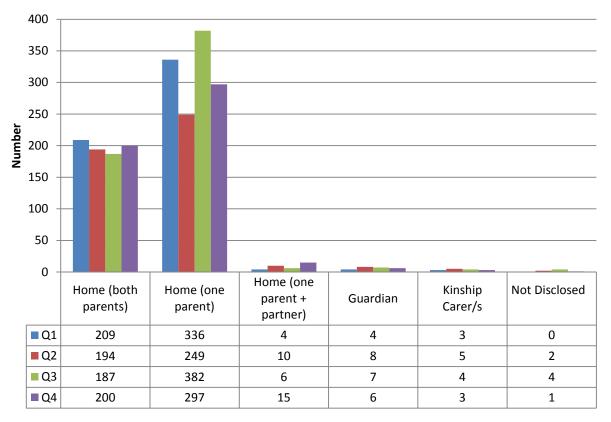
120

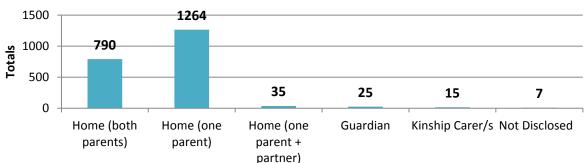
Throughout 2017/18, Children with **Autism (including Asperger Syndrome)** had the highest number of disability referrals in Belfast.



How much did we do cont'd....?

Performance Measure 4: Household Composition -2017/18



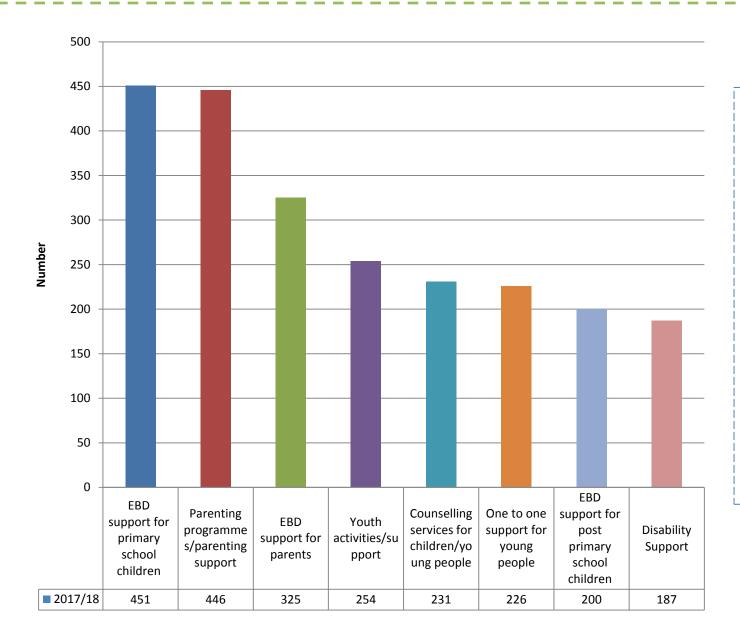




The highest group of families referred were Lone parent families 1264 followed by Families with both parents 790.
There was a small decrease from the previous year in One parent + partner (35) and a slight increase in Guardians (25) and Kinship Carers to (15).

How much did we do cont'd....?

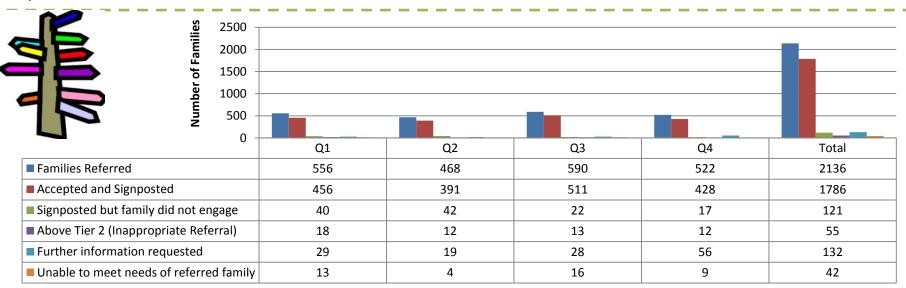
Performance Measure 5: Main Presenting Reasons for Referral - 2017/18



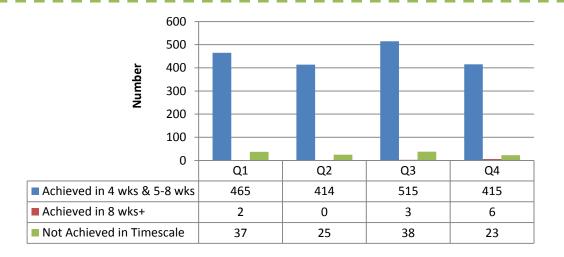
The main reasons for referral in 2017/18 were **Emotional** and **Behavioural Difficulty** (EBD) Support for primary school children and Parenting **Programmes/Parenting** Support. This is the same as the top two reasons in the regional report. EBD support for parents, Youth Activities/Support and Counselling Services for children/young people are also in the top eight reasons.

How well did we do it?

Performance Measure 6: Families Referred that were Accepted & Signposted, Above Tier 2 or Other Reasons for Outcome of Referral-



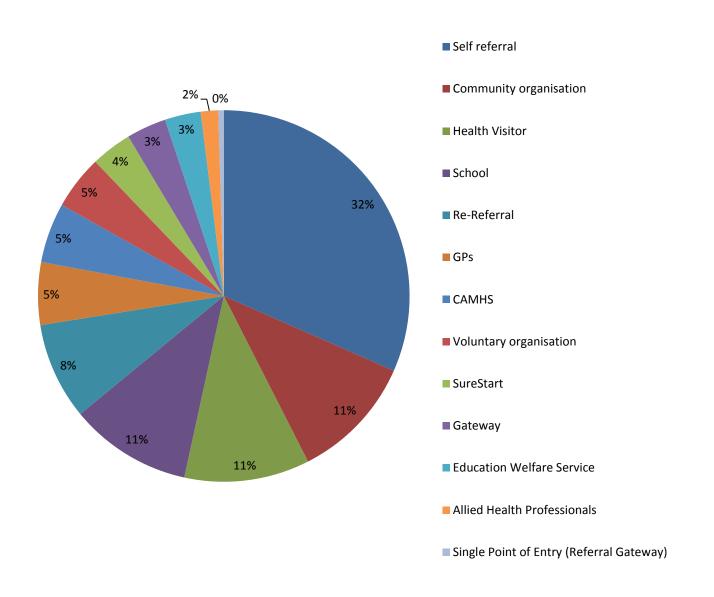
Performance Measure 7: Achieved in 4 weeks & 5-8 weeks or Not Achieved – 2017/18



The vast majority of referrals to Hubs were processed within 4 weeks and the remainder within 5- 8 weeks. Only **11** exceeded the maximum 8 weeks timescale within Belfast Area. This ensures families receive a timely response to their immediate needs from the Hub Co-ordinator.

How well did we do it cont'd.....?

Performance Measure 8: Total Percentage of Referrals by Referral Agency - 2017/18



In the Belfast Area Self referrals are nearly a third of the key referrers.

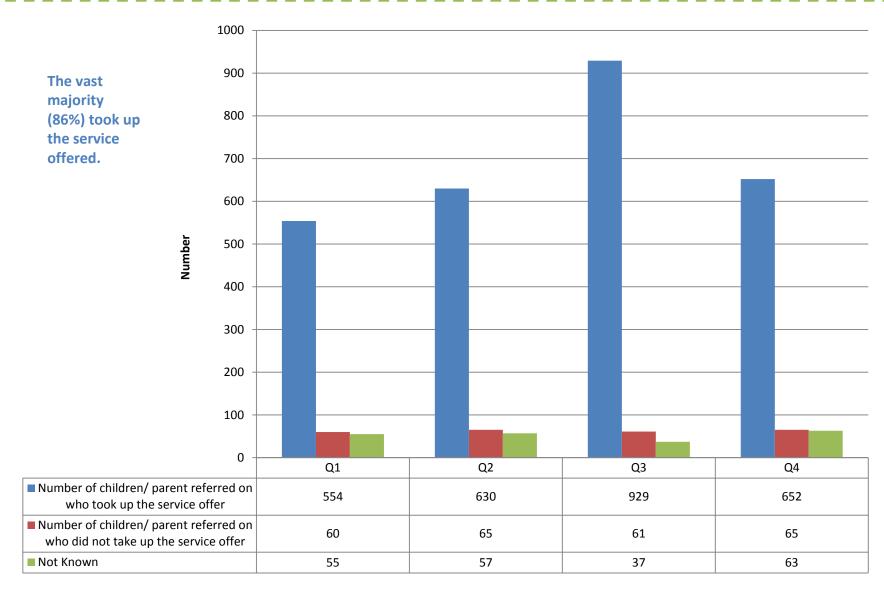
Regionally this was the same as self referrals were the key referrers at 18%.

Community organisations, Health Visitors and Schools are all equal at 11%.

In Belfast Rereferrals make up 8% of the total referrals.

How well did we do it cont'd.....?

Performance Measure 9: Number of Parents / Children referred who did and who did not take up the service offer 2017/18



How well did we do it cont'd.....?

Performance Measure 10: 10 Standards 97% Fully Implemented 3% Partially Implemented - 2017/18

Standard 1. Working in PARTNERSHIP is an integral part of Family Support.

Partnership includes children, families, professionals and communities

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

All of the Hubs in Belfast have either implemented or are in process of implementing the 10 standards. Each one has an action plan in place identifying areas for development such as promotion of the Hub in the locality, working with schools to ensure access to early intervention services for families and ensuring there is equality of access across each of the geographic

areas.

Is anyone better off?

Family Samples

Case Study A

A lone father with 2 children under 5 was referred to the Hub initially for help with Benefits and Family Support. He was only willing to take up the benefits support but came back to the Hub a year later as he was feeling overwhelmed and isolated and was suffering from stress. This time he agreed to accept support for himself and the children. He is now in receipt of counselling and is planning to join a support group in the autumn.

Case Study B

A grandmother, with 3 children under 12 was referred to the Hub. These children were in her care as their mother had passed away. The children were clearly distressed by this situation but were reluctant to engage in counselling services. However one of the boys has now joined a local community organisation and is attending weekly 1-1 mentoring. The other children are also now engaged in local programmes. The grandmother received help with parenting in relation to boundaries and managing emotions.

Case Study C

A mother with a degenerative condition requested help from the Family Support Hub for her young son as he was upset and angry about her situation. He received Play Therapy and also the family engaged in Family Therapy. This helped the family's ability to cope considerably and while support is ongoing they are glad to finally have help in place.

Case Study D

A family with 3 young children, one of whom had special needs, were referred to the Hub. The mother subsequently attended a parenting programme and the children were able to access a summer scheme. Specific help in parenting the child with special needs also provided.