

The background is a solid red color. It features several overlapping circles of varying shades of red, creating a layered effect. On the right side, there is a series of white lines that are slightly curved and parallel to each other, extending from the top to the bottom of the page.

# Flintshire Public Service Board Early Help Hub: The Story So Far

What we did, why we did it and  
what we have learned

April 2018

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## Introduction

The Flintshire Public Service Board (PSB) commissioned the establishment of an Early Help Hub (EH Hub) in September 2016. The aim of the EH Hub was to deliver more timely and appropriate early intervention and support for families with evidence of greater levels of need, in line with statutory requirements set out in the Social Services and Wellbeing Act 2014.

From mid July 2017 when the very first EH Hub information-sharing and decision-making processes started, all families with two or more adverse childhood experiences (ACEs) and whose needs would not be otherwise be met through statutory Children's Services have been offered bespoke information, guidance and support. **In the period July- December 2017, that is 429 families that would previously have had their cases closed with no further action, being offered bespoke advice, guidance and support.** This includes five families for whom EH Hub information-sharing processes have improved understanding of cumulative risk and so a safeguarding response has taken place; and a further 11 families also accessing support through other statutory Children's Services teams.

And yet the EH Hub did not exist in any form until July 2017. This report is about the story of the EH Hub so far; where it came from, key events and lessons from the experience to date and where to next. What is evident is that success has been driven by:

- Senior leaders with a strong commitment;
- A strongly committed group of people across the multiagency partnership- where the voluntary and community sector sits as an equal partner with statutory colleagues- who persevered, while managing existing workloads, because of a shared drive and belief in wanting to help improve the life chances and wellbeing of Flintshire children, young people and families more vulnerable to escalating problems and to help reduce demand in the medium to longer term on public services;
- Excellent multiagency governance arrangements chaired by senior officers from within the North Wales Police that, together with strategic advisory and project support capacity made available through the Flintshire Public Service Board, helped support excellent partnership working and ensured there was a focus on delivery;
- Co-location and high-quality information sharing processes, with effective enabling infrastructure such as a common information management system and bespoke WASPI;
- The foresight of relevant senior officers that lead and govern the local Families First programme to help nurture EH Hub development and progressively embed the Families First programme within the EH Hub which benefits families with evidence of two or more ACEs (and the EH Hub and the Families First programme); and
- Wider workforce communications and awareness raising activities.

Any story of service and cultural transformation is not one without its own challenges- the EH Hub was developed from within existing agency resources which creates difficulties at

different times in different ways for agencies, co-location has been more incremental than planned, there is more work to do with engaging the wider workforce and leveraging the wider resources of agencies, as well as schools and local community organisations and in making processes more dynamic and streamlined (which are set out in this report)- and key learning for the sustainability and impact of the EH Hub into the future is that for statutory agencies particularly, appropriate budgeting for staff to be co-located within the EH Hub is essential.

So, yes there is more to do but there is also a strong sense of an even brighter next chapter for the EH Hub; especially from April 2018 as even more integration with Flintshire Families First takes place. The report details the effects which include:

- A 5-day per week EH Hub will be operational which creates the room for the EH Hub to accept direct referrals from families; and
- A far wider pool of voluntary and statutory services can be actioned to offer support (and significantly more quickly) to families, including a far wider pool of services to offer key worker support (i.e. the type of coordination which has formally been undertaken by the TAF team) in addition to the provision of bespoke interventions.

This will bring more change, more dynamism, more voluntary sector involvement, and enhance knowledge about available services more. It will make for an interesting next chapter in the evolution of the Flintshire EH Hub.

# 1. Why an Early Help Hub?

## 1.1 The strategic drivers for the Flintshire Early Help Hub

The EH Hub was commissioned with the aims of addressing key legislative and regulatory requirements and the Flintshire Public Service Board (PSB) ambition for better quality, cost effective services that secure good outcomes for all in Flintshire. Primarily, these concern:

- Requirements of the Social Services and Wellbeing Act (2014) to ensure families have access to relevant information, advice and support as much as possible within their communities to build wellbeing and resilience.
- Flintshire County Council (FCC)'s ongoing response to four of 12 recommendations of the Care and Social Services Inspectorate Wales (CSSIW) Inspection of Children's Services (2015). These relate to making available more integrated, early intervention for children and families through closer partnership work and better information-sharing<sup>1</sup>.
- From 2014/15 onwards, *Police and Crime Plans* have set clear objectives about reducing repeat offences, including specifically for domestic violence. Moreover, Police and Crime Plans recognise that to reduce domestic violence and child sexual exploitation for example, these *'touch and concern the responsibilities of other agencies involved with public safety and health, and an effective response can only be delivered in partnership with the other agencies. As the focus on these crimes continues to sharpen, the importance of partnership working will also continue to grow'*<sup>2</sup>.
- The impacts of austerity challenging public services to better manage and reduce demand, especially on high cost services. Traditionally many cases for instance were referred and re-referred to the Children's Services front door, but where household and environmental risks do not require statutory intervention, notwithstanding families having persistent needs.
  - For example, Police account for most referrals to Children's Services front doors in North Wales, but about 80% were not appropriate for statutory intervention and so front-door decision makers would close cases with no further action (until the next incident, and then again and so on.) Even though resulting in no action, and where families have needs that gave rise to the police call out, each of these contacts costs Social Service approximately £44 and the Police at least £33<sup>3</sup>.
- A fresh spotlight on how the cycle of childhood adversity can lock successive generations of families into poor health, poor life chance outcomes and anti-social

<sup>1</sup> CSSIW Inspection of Children's Services, Flintshire County Council, (Sept 2015): Recommendation 1: The Council should progress its commitment to develop an early intervention framework that will deliver integrated services and provide early support for children, young people and families; Recommendation 2: The Council should establish effective systems to ensure that thresholds for assessments are consistent across the service and understood by staff and partners; Recommendation 3: Multi-agency arrangements should be established to review repeat referrals and quality assure decision-making; and Recommendation 5: Children's services approach to risk assessment and risk management to be more effectively shared and understood by partner agencies.

<sup>2</sup> Office of the Police and Crime Commissioner, North Wales, *Annual Report 2015/16* page 10

<sup>3</sup> Based on New Economy Foundation costs of a one-off Social Services contact (no referral, assessment etc) and the hourly cost of one PSO (all updated to 2017).

behaviour (all at high cost- to public services) through the growing recognition of the Adverse Childhood Experiences (ACEs) study conducted by Public Health Wales (2015). The focus on preventing and mitigating the impacts of ACEs in future generations was also given extra impetus by new statutory duties arising from the Well-being of Future Generations Act.2015

To support the business case for the EH Hub, local deep dive research about 29 families was conducted by George Selvanera, a strategic adviser (later engaged by the PSB across October 2016- March 2018 to provide expertise and capacity for the design and the development of the EH Hub). Working with key partners from FCC, Betsi Cadwaladr University Health Board (BCUHB) and North Wales Police, this research found that:

- In the 29 case studies and with many caveats<sup>4</sup>, on average most families interacted with the Police and Children's Services. There was much evidence of domestic abuse, mental health needs and poor parenting/dysfunctional family dynamics e.g. 21 of 29 families had experienced or were experiencing domestic abuse and more than 24 families had incidents recorded with the Police (with at least 10 households having family members that had been arrested).
- Most families had evidence of complex needs, with 7 of 29 families having evidence of domestic abuse, substance and/or alcohol misuse, mental health needs, crime and antisocial behaviour, family dysfunction/child safety and children not attending school consistently. A further 18 of 29 evidenced at least four of these six indicators.
- This knowledge helps evidence the high cost of not getting the help offered right. Using limited and narrow cost data; the aggregate suggests at least £3.18million of costs to date borne by FCC, North Wales Police, BCUHB and Flintshire schools in relation to these 29 families. **The average cost is £107.5k per family which underestimated the costs borne by FCC, North Wales Police, BCUHB and Flintshire schools<sup>5</sup>.**
- The case studies also made clear that multiple needs generally mean multiple interactions with multiple services; but not typically in ways that address underlying problems or sequence support for families in ways owned by the family and support sustainable improvements in coping skills and family dynamics. After all, families almost always present different levels of risk according to each services' eligibility thresholds. Families may be just below several services' thresholds for intervention but across their different problems cumulatively present significant overall risks.

## 1.2 Early Help Hub key aims and objectives

In initial work undertaken with multiagency representatives to scope the EH Hub, there was an appreciation that concepts such as 'early help' relate to a wide spectrum of support from preventative advice and guidance (e.g. healthy relationships education in schools and youth clubs) to supporting families with complex needs (e.g. helping a family where a child is at the

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<sup>4</sup> Similarly, the case study analysis is conservative in its estimation so that unless it is clearly discernible that there have been a specific number of domestic abuse incidents or s.47 referrals for example, the estimate will be that there was one only. However, the data is very limited.

<sup>5</sup> For example, key benefits paid by the State e.g. ESA, JSA benefits and Housing Benefit are excluded. Domestic abuse incidents were solely those that were recorded on systems so tended to underestimate the extent of domestic abuse (and associated mental health needs) and its costs especially for BCUHB.



edge of care, step back from that edge and better manage risk and build coping skills and wellbeing).

In this way, early help is not solely about providing support as potential problems emerge/are recognised in the life of a child, young person or family, but in providing whatever the right support for the family is, as early as possible, before problems escalate or escalate further.

For most families in Flintshire, the availability of universal (such as schools, youth clubs, community activities, GPs, midwifery and health visiting services) and targeted services (such as educational psychologists, speech and language therapists, family support commissioned by Families First and otherwise available in the local community through the voluntary sector) provides sufficient information and assistance to keep families safe, in good health, enjoy economic and social wellbeing and cope with difficulties that arise.

Given this, the PSB was clear that the EH Hub focus on the cohort of families where there is evidence of greater need and where, without support, the risks of entrenched disadvantage and poor life chances are greater. It was agreed that these should be families where there are two or more ACEs given the strong link between ACEs and poor life chance outcomes. This may include families 'stepped down' from statutory services as part of helping them sustain positive child safety outcomes and to build resilience and wellbeing.

As much as possible, the EH Hub would look to use universal and targeted services to ensure families have support from within local communities; but also given that greater levels of need too often mean multiple interventions with multiple agencies, transforming information-sharing processes so families are supported to access coordinated, properly sequenced interventions was also '*mission critical*' to EH Hub design.

A series of workshops involving diverse statutory and voluntary sector partners and representatives of the EH Hub Strategic and Operational Groups comprising representatives from North Wales Police, FCC, BCUHB and Flintshire Local Voluntary Council (FLVC) was undertaken. Together with research and visits undertaken to other similar initiatives particularly in England, the Strategic and Operational Groups agreed the aim, key objectives and functions for the EH Hub in November 2016.

*Table One: Key aim, objectives and functions of the EH Hub*

Factor	Key elements
<b>Key aim</b>	<p>Provide the greatest level of knowledge and analysis of all known intelligence and information across the multiagency partnership to ensure:</p> <ul style="list-style-type: none"> <li>• All children, young people and families have access to advice and information about relevant early support to build coping skills, improve wellbeing and address any problems before these become entrenched.</li> <li>• For families that are at greater risk of escalating problems, access to appropriate multidisciplinary interventions as a matter of priority.</li> </ul>
<b>Key objectives</b>	<p>An improved 'journey' for the child and family with greater emphasis on information, advice and assistance provided at the right time in line with statutory requirements set out in the Social Services and Wellbeing Act 2014.</p>

	<ul style="list-style-type: none"> <li>• Greater ability to identify potential vulnerability, enabling more preventative action to be taken, dealing with problems before these become entrenched and building family wellbeing and resilience.</li> <li>• Closer partnership working, clearer accountability and less duplication of effort.</li> <li>• Better quality referrals to Children's Services as measured by reduced CP referrals and fewer NFAs (no further action) by Children's Services and NW Police</li> <li>• Reducing crime and antisocial behaviour, improving educational attainment and financial literacy and more secure tenancies</li> <li>• Where better information-sharing within the EH Hub identifies potential safeguarding concerns, these are actioned in line with relevant procedures.</li> </ul>
<b>What will the Early Help hub do</b>	<ul style="list-style-type: none"> <li>• Manage referrals received</li> <li>• In addition to the referrals received, multiagency colleagues will research information held on professional databases/through engaging colleagues in respective agencies to enable the EH Hub to make informed decisions about the appropriate response to family needs</li> <li>• Provide a secure and confidential environment for multiagency professionals to share information</li> <li>• Identifies repeat referrals which taken in isolation may not appear concerning</li> <li>• Prioritise referrals and responses using a RAG rating system</li> <li>• Where better information-sharing within the EH Hub identifies safeguarding concerns, these concerns activate 'first response' social work services to provide immediate protection for a child</li> <li>• Activate TAF or other targeted intervention services to provide support to the child, young person or family e.g. priority for extra support provided by Parenting, Flying Start health visitor, a Families First commissioned service</li> <li>• Activate information and advice provision by appropriate agencies e.g. FIS</li> </ul>



## 2. From an idea to an evolving reality

### 2.1 From the Public Service Board decision to July 2017

At the outset, three key actions took place. These are:

1. Establishing multiagency governance arrangements both strategically and operationally, chaired by representatives of North Wales Police. These multiagency steering groups have met on a 4-6 weeks basis ever since.
  - *A Strategic Group* chaired by Superintendent Sian Beck which includes FCC (Social Services, Education and Youth, Parenting), North Wales Police, FLVC and BCUHB representatives, and has had support from the strategic adviser. This is a sub-committee of the Flintshire PSB.
  - *An Operational Group* chaired by A/g Superintendent Sharon McCairn (who through 2016 and 2017) was Chief Inspector, Flintshire. This meeting routinely has 10-18 people attend including representatives from FCC (Social Services, Education and Youth, Parenting), Flying Start, North Wales Police, FLVC, BCUHB and the EHH Coordinator, Natalie Woodworth, with support from the strategic adviser and the project support officer, Natalie Moore (January 2017- January 2018).
2. The PSB invested in strategic advisory support and project support, with the strategic adviser engaged approximately 4-5/days per month for the period to March 2018 and the project support officer for 2 days/week for one year to January 2018. The aim of this support was to support strategic and operational leads, permit ongoing review and process improvement and to provide capacity to develop EH Hub infrastructure, processes, information-sharing arrangements including the WASPI and the common information management (IM) system and workforce communications.
3. High level project plans were developed to guide EH Hub development relating to: governance; workforce development, communication and engagement; evaluation; and the directory of services.

In interviews for this report, the first two aspects were described by members of the Strategic Group and Operational Group as especially important to the successful development of the EH Hub (see section 3)

In the period to March 2017, other significant actions included:

4. Agreement across the multiagency arrangements about the scope and processes of the EH Hub, including how the EH Hub interacted with statutory Children's Services to limit the risk of any families not having access to the right support quickly and to give confidence that the focus of the EH Hub is about making available bespoke support to families with two or more ACEs that would otherwise risk not having any support.
5. Developing the bespoke WASPI that enables the sharing of relevant information, both within the EH Hub and with partners. The WASPI was later approved by the relevant

North Wales quality assurance group that brings together information governance leads from statutory agencies in North Wales.

- The WASPI and subsequent bespoke referral form<sup>6</sup> also comply with the General Data Protection Regulation requirements that takes effect from 25 May 2018.
6. The foresight of the Flintshire Families First programme (with the specific drive of the Senior Manager, Integrated Youth Provision, Ann Roberts, and the unequivocal support of the Flintshire Families First Management Board) to look to integrate as much as possible the future Families First programme with the EH Hub. In practical terms, this would permit families identified through EH Hub processes as likely to benefit from extra support having much speedier access to bespoke support and interventions and better coordinated support for those requiring multidisciplinary interventions.

It would also benefit Flintshire Families First by making more transparent that services are working with families envisaged by the Families First Programme Guidance May 2017 (which shifts Families First towards a more targeted service) and would provide commissioned services with more comprehensive information to guide their approaches to engaging and supporting the children, young people and families they work with.

Through tough decisions already taken by the Flintshire Families First Management Board there was fiscal room to reorganise the Team Around the Family (TAF) team. The TAF coordinator had previously been a 3-day per week role, but a new role of EH Hub coordinator with responsibilities for the TAF Team and the EH Hub coordination and decision-making was made full time (for a pilot period of one year).

7. Agreement across the multiagency arrangements about having a 'soft launch' to test processes and begin a progressive move towards co-location of staff from across multiagency services. Within this, key features included:
- Identifying and making available office space (generously made possible by Community and Enterprise Senior Manager, Katie Clubb), having this fitted out and relocating staff (was finalised by June 2017);
  - Using a single IM for sharing information and recording key elements of the family journey (coordinated by the project support officer and involving IT departments from different partners, the PARIS lead within the Council and other colleagues from within Children's Services) (was finalised by June 2017, with tweaking of processes since that time);
  - Agreement about a single integrated referral form that would encourage referrers to consider ACEs, what matters to the family and would mean all referrals would be initially actioned through the Children's Services Front Door (unless specifically identified as an EH Hub referral) so any safeguarding/care and support needs would be immediately addressed.

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<sup>6</sup> This has also been integrated into the standard referral form for access to support the Early Help Hub in Flintshire or other types of support available through Children's Services directorates in North Wales.

This would also mean that families with needs not likely to be best met by statutory Children's Services and with evidence of two or more ACEs could safely transfer to the EH Hub decision maker to initiate EH Hub processes i.e. families that would otherwise have been NFA would have an offer of bespoke information or other relevant support.

- Agreement for a series of events to enable clear and consistent communication to the wider workforce that interacts with children, young people and families in Flintshire about the purpose of the EH Hub, its benefits for families and professionals and how referrals can be made (these were scheduled for September and November 2017).

## 2.2 From July 2017- March 2018

From mid July 2017 when the soft launch began, there are **NO** instances where families with 2+ ACEs and where their needs would not be otherwise be met through statutory Children's Services have not been offered bespoke information, guidance and support.

**In the period July- December 2017, that is 429 families that would previously have had no further action being offered bespoke advice, guidance and support.**

**This includes 5 families for whom EH Hub information-sharing processes have enabled a better understanding of risk and so a safeguarding response has taken place; and a further 11 families also accessing support through other statutory Children's Services teams.**

### 2.2.1 What happens at the EH Hub and what does demand look like

The EH Hub currently comprises a full-time coordinator/decision maker managed by FCC Children's Services (who manages the TAF team with key workers that are part of the wider service response for families with multiple needs<sup>7</sup>) and multidisciplinary staff with sufficient seniority to make resourcing decisions on behalf of their service/agency.

In the initial period July 2017- March 2018, there is a mix of staff that are either co-located for some of the week or work remotely (checking the central IM system for new referrals, gathering and sharing intelligence and making recommendations about potential support that could be offered to the family through the IM system and 1:1 with the EH Hub coordinator), then attending a twice weekly professionals meeting to discuss cases where the decision maker would find value in a wider multiagency discussion to inform decision-making.

Currently, approximately 94% of cases considered by the EH Hub come as referrals to the Children's Services Front Door (rather than as a direct referral to the EH Hub). In the period July 2017- January 2018, the EH Hub has considered 535 referrals (an average of 76 per month) and currently has a 11% re-referral rate (i.e. 59 of 535 had been considered

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<sup>7</sup> As noted earlier, this is a one-year pilot post as part of the initial implementation of the EH Hub.

previously). Of these 535 families:

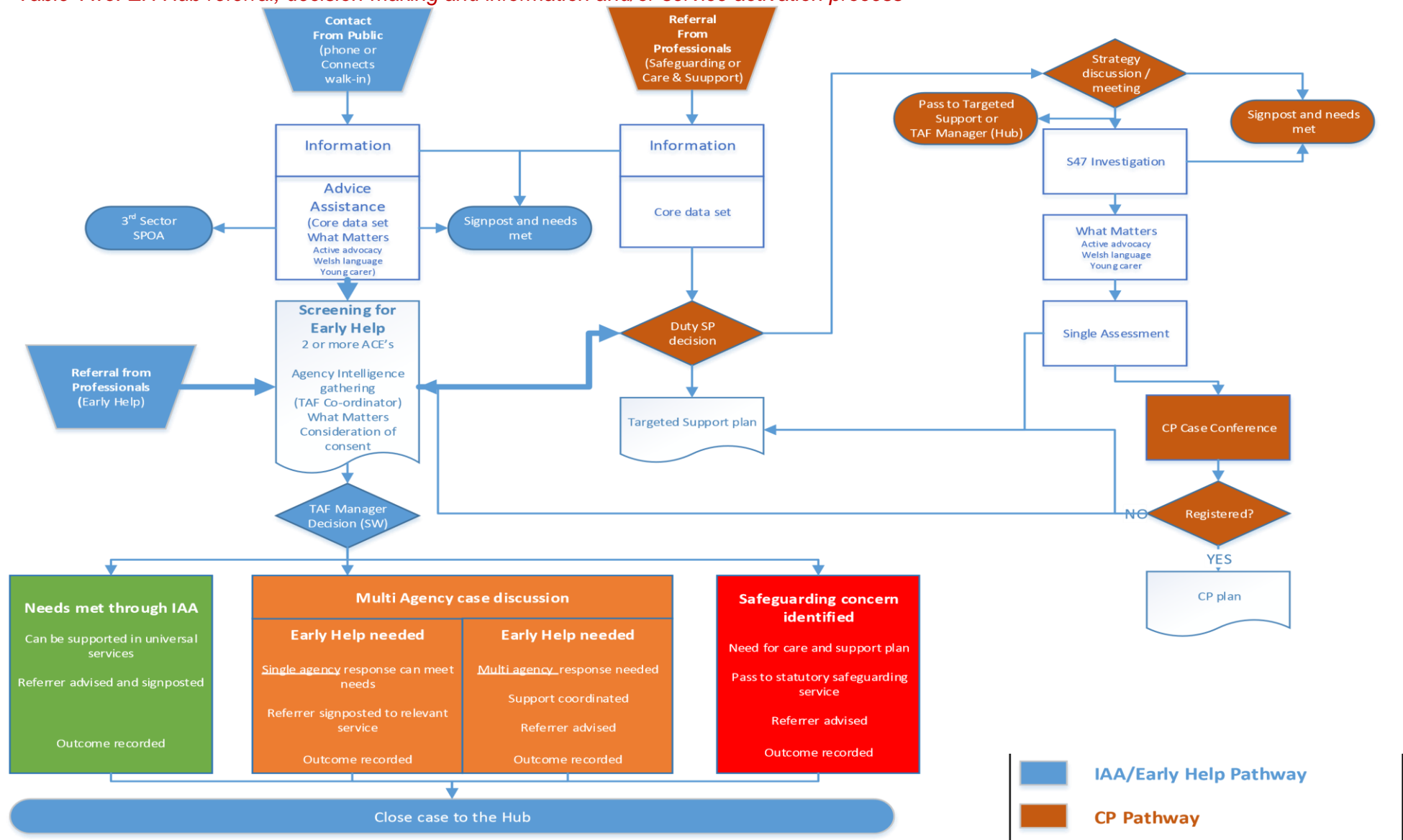
- 80 families have been offered information (on Table Two, this is needs met via IAA)
- 274 families have been offered advice and support from a single agency (on Table Two this is needs met through multiagency discussion)
- 100 families have been offered key worker support to intervene and coordinate multiagency inputs (on Table Two this is needs met through multiagency discussion)
- 5 families are having a safeguarding response, with the remaining 76 families in process (i.e. information-gathering and decision-making processes are in progress)

The profile of services allocated to offer support to the family to date, reflects largely the aim of introducing potential support to the family (given a consequence of referrals mainly coming to the Children's Service Front Door, is that initial consent has generally not been secured by the family). This is changing and by the time of EH Hub professionals' meetings in March 2018, most cases have families who have confirmed consent. Across July 2017-January 2018, the main services allocated to offer support are:

- BCUHB (98 or 14 per month). This is largely health visiting, school nursing and CAMHS, but has included other health services too.
- Education (60 or 8.6 per month). This is mainly support that might be offered through relevant staff at a secondary or primary school.
- Police (59 or 8.5 per month). This relates to following up with families, on cases where the Police had raised an initial CID16 (and no consent to share was provided) and making an offer of support to the family. This is genuinely innovative practice and has included close collaboration with the FLVC information officer so that the North Wales Police offers the family the option of talking through with an independent voluntary sector officer relevant community resources to meet their needs (22 families were followed up by the FLVC information officer from the North Wales Police introduction in the period September 2017- January 2018).
- Teulu Cyfan (46 or 6.6 per month) which offer bespoke parenting support and interventions.
- Housing (36 or 5.1 per month) which has tended to relate to housing officers making the offer of wider support for the family.
- TAF (27 or 3.8 per month) which provides key worker support to coordinate access to support for families with multiple needs.
- Family Information Service (23 or 3.3 per month) which offers wide-ranging information and advice relevant to children, young people and families.

Other services include Women's Aid (13), Parenting/Flying Start (13), Children's First Contact (11), Youth Justice Service (6), Family Support Service (5), Family Group Meetings (5), Action for Children (3) and Active 4-16 (1). There are also 22 'other' allocations made.

Table Two: EH Hub referral, decision-making and information and/or service activation process



### 2.2.2 Who is at the EH Hub and how support is brokered

There has been a progressive increase through this period of staff co-location. This is a fundamental design principle consistent with the evidence base about what works best<sup>8</sup>. as it helps make processes of information-sharing more dynamic and so permits faster decisions outside of the twice weekly professionals meeting (which given intelligence gathering processes can be more than one week after a referral has been received by the EH Hub coordinator).

Since inception in July 2017, North Wales Police (2-3 days per week), FCC Children's Services First Contact and TAF have been co-located. Since October 2017, staff from BCUHB (part funded by Flintshire Families First in this initial period), Community and Enterprise (covering Supporting People and wider Housing/Revenue and Benefits), Family Group Meetings and the FLVC information officer (funded through Flintshire Families First) who can help broker wider voluntary and community sector support for families have progressively been co-located, for at least some of the week too.

Education, Youth Justice, Flying Start, Teulu Cyfan (funded through Flintshire Families First) and the Family Information Service (FIS) tend to work remotely and attend professionals' meetings, albeit from April 2018 there will be co-location of Education and Parenting (as part of more integration of Flintshire Families First within the EH Hub). From October 2017, review work found it was not necessary for the FIS to participate in professionals' meetings. As a result, the FIS picks up allocations to offer information and advice to families and continue to participate in the Operational Group.

The team expands from April 2018, when the newly commissioned Families First programme is implemented. This will co-locate a minimum of 3 x 0.6 FTE team leaders (delivered over 5 days)- one from each of Parenting, Young People (which includes Education) and Disability workstreams. These team leaders act as focal points for services within each workstream. Their role includes prioritising and activating a service response from across the consortia (and within two working days of decision-making within the EH Hub), as well as making sure that information-sharing, feedback and reporting processes are adhered to (including updating systems in relation to whether engagement with families is successful and the extent to which outcomes are achieved through work with families).

This mirrors the approach taken by existing partners within the EH Hub. For example, a decision may be for a single agency service response where a Supporting People provider that supports victims of domestic abuse is the priority, in which case the EH Hub Communities and Enterprise representative takes that forward with the Supporting People provider to offer the service to the family. Alternatively, a child's school may be better placed to offer support (at least initially) to the family. The EH Hub Education representative shares relevant information and takes that forward with the school. And so on with other agencies linking to other services within their main networks/spheres of influence. The EH Hub members similarly have duties in respect of information-sharing, relevant feedback to referrers and parties sharing information and to update systems.

<sup>8</sup> See for example Home Office, *Multi-Agency Working and Information-sharing Project Early Findings*, July 2013 and Local Government Association and ADCS, *Integrated Working: Development Demonstrators Briefing Paper 7*, 2013



In this way, the EH Hub is not solely about the agencies that are co-located or attend professionals' meetings; it's about their connections to other services. For example, the BCUHB representative has unlocked support from mental health services and substance and alcohol misuse services.

To support this, a significant workforce development initiative took place in September and November 2017 in which 308 multidisciplinary managers and practitioners participated. This is in addition to bespoke workforce development initiatives that have taken place within agencies (such as briefings for neighbourhood teams conducted by North Wales Police, presentations to the Flintshire headteachers forum by FCC senior managers and the project support officer, presentations by the FLVC CEO to community sector events, team meetings of health visitors and school nurses etc.)

The results of the workforce briefings were largely very positive about understanding EHH purpose, benefits and processes. This is reflected in feedback provided by 74 attendees<sup>9</sup>. In summary:

- Close to 19 in 20 attendees 'definitely' understand how ACEs contribute to poor life chance outcomes;
- Most attendees 'definitely' understand the purpose of the EH Hub, how every family will have a service response, how they can make referrals using the referral form and how to signpost families to the Family Information Service, with 18-19 in every 20 attendees 'definitely' or 'mainly' clear about all these aspects;
- Close to half of all attendees 'definitely' understand how the EH Hub will improve information-sharing and will result in improved access to support for families with 2 ACEs but who do not meet thresholds for a social services intervention. 17 in every 20 attendees are 'definitely' or 'mainly' clear about all these aspects; and
- 2 in 5 attendees 'definitely' feel they can explain the EH Hub to families that might benefit with 4 in 5 attendees 'definitely' or 'mainly' confident.

## 2.3 And from April 2018

From April 2018: there will be significantly more co-location to inform speedier information-sharing/ decision-making and offers of support to families. As noted above, even more integration with Flintshire Families First will take place. In relation to Families First, the agencies forming part of the consortia are:

### **Parenting: Y Teulu Cyfan (lead contractor and will co-locate 5 FTE days at the EHH)**

- Direct interventions/key working with parents and families, including evidence-based parenting programmes, using whole-family working model by **Y Teulu Cyfan**. The service has partnerships with Action for Children, CAMHS, Active 4-16, Community Parents, CAIS, drug and alcohol team, DASU etc. in relation to support needs a family

<sup>9</sup> See Appendix Two for more details

may have with domestic violence, mental health, alcohol and substance misuse etc.

- **Y Teulu Cyfan** will also have a specialist post working with parents of adolescents
  - They coordinate the delivery of Challenging Years/Take 3 and will be a direct link for the consortia to provision such as schools, Youth Justice, SORTED and projects funded through the Young People contract.
- **Action for Children** will provide key working, information, advice and assistance and therapeutic interventions to families where emerging difficulties are related to 2 or more ACEs. Action for Children will also provide 1:1 counselling for adults.
- **Family Group Meetings** service
- **Homestart** volunteer staff (**working with Community Parents and Adult Services**) will offer an intensive exit support for parents from key-working done by Y Teulu Cyfan and Action for Children.
- **Parenting Strategy** supports services in their work with parents, to embed the delivery of evidence based and evidence informed practice and interventions.

**Young People: Action for Children (lead contractor with a representative who represents 'Education' that will co-locate 3 FTE days across 5 days at the EHH)**

- An **Education** worker to be present in the hub for 0.6 FTE for 5 days/ week. This worker will link to Education Welfare Officers and 80 schools within Flintshire and to the rest of the Young People's consortia in relation to the EHH.
- **Action for Children-** targeted 1:1 key working and other group work for young carers and those at risk of/have survived CSE; and targeted 1:1 key working and other group work, including family interventions for young people who live in homes where 2+ ACEs.

Action for Children will also in partnership with NSPCC, train staff in Flintshire in an early intervention model working with young people who are presenting behaviours that could indicate abuse, but where no disclosure has been made. They will fund an additional part-time post in Flintshire for two years to work on this programme to be evaluated by Bristol University.

- **Resilience Project-** 1:1 work with young people (aged to 25) to re-engage with education, volunteering, work experience and employment opportunities via emotional/practical support, C.V. preparation, job applications, interview techniques, plus transport to/from interviews (and clothes for interviews). This includes access to accredited training to re-engage young people with education from Agored Cymru.
- **Aura-** volunteering pathway for young volunteers e.g. coaching and mentoring for other young people, Kidz Fit sessions, 5x60 programme, Dragon Sports, community camps, leisure centres, working as part of holiday programmes, sports events and local clubs.

- **FLVC-** volunteer coordination and volunteer initiation classes/taster sessions, connection to wider voluntary and community sector opportunities/resources.

### **Disability: Action for Children (lead contractor and will co-locate 3 FTE days across 5 days at the EHH)**

- **Action for Children-** 1:1 and group provision for families with disabled children/young people to navigate services, build confidence, understand/take up relevant financial assistance/benefits. This includes targeted key working.
- **Daffodils-** working in a whole family approach, Daffodils offer 1:1, group/peer support and social opportunities for parents, disabled children and young people and families.
- **AURA-** disabled people aged 4-16 accessing sport and leisure opportunities in mainstream settings; and supported volunteering opportunities (as above).
- **FCC Play-** buddy support to disabled children/young people aged 12 -25 years to access summer play scheme and leisure services (and support independence).
- **Groundwork-** disabled young people and their families having opportunities to engage with green spaces and wider peer support and a 1:1 employability mentor.
- **Brokerage Service,** with an officer to help facilitate effective transitions on 1:1 basis for young disabled people moving into adulthood; as well as offer wider support for parents with disabled children to access social opportunities.

### 3. Key learning

#### 3.1 The Early Help Hub is not just a good strategic fit, it is becoming more so

In interviews, representatives of the Strategic Group and the Operational Group reported that the original conception of the EH Hub as offering an opportunity to drive a more innovative, cost effective approach to early intervention and reduce demand for high cost statutory services remains as relevant as ever; if anything, more so. This is reinforced by:

- The new inspection framework for Local Government Education Services (since September 2017) which explicitly identifies as one of three domains within Section 2, Quality of Education Services, Support for Vulnerable Learners.
- The centrality of strong multi-sectoral partnerships within the Social Services and Wellbeing Act 2014 and in FCC's strategic priorities about 'community resilience' with a specific focus on expectations to increasingly support families build resilience and wellbeing through accessing opportunities within local communities.
- Care Inspectorate Wales (formerly CSSIW) recommendations about establishing more integrated, early intervention support for children, young people and families through greater partnership work and information-sharing in 2015; and how at that time there was limited connectivity between the Children's Services Front Door, statutory provision and the wider early help provision. There is a strong and consistent view amongst interviewees working within statutory Children's Services that the EH Hub is significantly contributing towards addressing that challenge presented by inspectors (and developed further through the Social Services and Wellbeing Act 2014).
- The *Police and Crime Plan 2017-2022* sets priorities in respect of domestic violence, child sexual exploitation, modern day slavery, organised crime groups and safer neighbourhoods. As Superintendent Sian Beck notes *'focusing on early intervention fits in all those priorities and in the longer term, will help demand reduction.'*
- This has been reinforced by the joint agreement in February 2018, by the Association of Directors of Public Health, Association of Police and Crime Commissioners, Clinks, College of Policing, Faculty of Public Health, Local Government Association, Nacro, National Association for Voluntary and Community Action, National Police Chiefs' Council, NHS England, Public Health England, and the Royal Society for Public Health to work together and to intervene early to address the common factors that bring people into contact with the police and criminal justice system and which lead to poor health and improve public safety and reduce crime<sup>10</sup>

#### 3.2 Key events in the journey so far

Amongst members of the Strategic Group particularly, the extent to which there has been **the support and buy in of senior leaders from across the multiagency partnership.**

<sup>10</sup> See New Policing, Health and Social Care Consensus (Feb 2018)

This was reflected, for example, in:

- The positive support by FCC Cabinet Members;
- The willingness of the PSB to commit to a new approach further to the deep-dive research/ business case involving 29 families;
- The decision of the PSB to invest in strategic advisory support and project support. The support provided by George Selvanera and Natalie Moore was rated in many interviews as essential to *'helping drive the Hub forward'*, *'keeping us on track'* and *'we needed support to make this happen even if the will was there'* given the challenges *'of the day job'* for all partner agencies which could well have risked the project being delivered; and
- Supportive visits to the EH Hub by senior leaders including the Chief Constable, North Wales Police, the Chief Officer-Social Services, the Chief Officer-Education and shortly the Public Health Wales/All Wales Police leads responsible for implementing the £6.87m Police Transformation Fund initiative about transforming the way in which police and partner agencies deal with the most vulnerable people in society<sup>11</sup>. The Children's Commissioner will also officially launch the EH Hub (as it opens more widely to self-referrals by families) in June 2018.

Across interviews with Strategic and Operational Group members, consistently **the EH Hub becoming operational in July 2017 with an EHH coordinator and the twice weekly professionals' meeting** were identified as 'key events'. The twice weekly meetings were reported as a tangible hook with which to encourage greater co-location and resource alignment to the EH Hub.

Aligned to operationalising the EH Hub, several interviewees highlighted as significant events, **key infrastructure that was implemented to support partnership working**, described by Senior Manager, Children and Workforce, Craig McLeod, as *'quiet enablers that can be massive blockers'*. These include:

- The common IM system for recording elements of the families' journey.
- The WASPI
- Performance monitoring reports that help establish the demand profile and activity of the EH Hub
- Making available administrative support

As noted earlier, **the foresight of the Flintshire Families First programme** (with the specific drive of the Senior Manager, Integrated Youth Provision, Ann Roberts, and the unequivocal support of the Flintshire Families First Management Board) to look to connect the Families First programme with the EH Hub as much as possible.

Several interviewees also reported that **the wider workforce communication and engagement programme**, were key events in helping raise the profile of the EH Hub and

<sup>11</sup> <http://www.wales.nhs.uk/sitesplus/888/news/46584>

*'taking a project that people were increasingly hearing about but weren't entirely sure what it meant'* with the wider workforce that interact with children, young people and families. This included the events held in September and November 2017 (see Appendix One for findings) as well as briefings to multidisciplinary managers within FCC, the Flintshire headteachers forum and presentations by the FLVC CEO at community sector events

### 3.3 What has worked well?

The most recurring reflections about what has worked well are:

- As Service Manager, Children's Services, Ray Dickson said **'the personalities'**. Interviewees consistently observe that a strongly committed group of people stayed working at this, notwithstanding the pressures of existing workloads. They did this because of a shared drive and belief in wanting to deliver on a common goal for the benefit of children, young people and families of Flintshire and to help reduce demand in the medium to longer term on public services.

One result of this has been a very clear 'multiagency' focus to the development of the EH Hub. Several interviewees made comments such as *'no one agency took over'*, *'no one was territorial'* and there exists *'a willingness for people to do their bit but feel okay to let it go and let it evolve'*.

- **The multiagency governance arrangements led by North Wales Police**, with consistency of meetings on a 4-6 weeks basis ever since. This evidenced the extent to which the North Wales Police was committed to this initiative and to partnership working more generally; which, in turn, was identified as helping encourage more participation by partners and spurred innovative partnerships such as closer work between Housing and the North Wales Police and the joint work involving North Wales Police and the FLVC information officer (funded through Families First) to offer families', where the Police had previously attended 'an incident', bespoke, community-based support.
- **Information-sharing and co-location**, albeit that the latter is not fully there yet and has been happening on a more incremental basis. All interviewees recognise that more co-location (such as happens during professionals' meetings and often on these meeting days) remains the ambition as it delivers significantly more dynamic informal information-sharing and decision-making which helps with supporting families faster. Three results of the much better information-sharing that interviewees identified are:
  - Significantly better knowledge amongst multiagency, multidisciplinary practitioners about the wide-ranging support available across the statutory and voluntary and community sector within Flintshire.
  - More comprehensive understanding of the needs and experiences of families that helps EH Hub members frame more appropriate offers of support to families, including whether a child/ren is likely unsafe and so a safeguarding or another statutory intervention might be more relevant; and



- Through better understanding of the needs and circumstances of families, this is helping practitioners that work directly with children, young people and families better understand any specific risks or concerns relevant to children and young people for instance. This, in turn, is helping with safety planning for staff (e.g. health visitors that are lone workers attending family homes).
- **Partnership working**, with a consistent view of EH Hub members of significant improvement in the operation of the EH Hub since an earlier review conducted in September 2017. In interviews, many described the positives in relation to '*trust*', '*not afraid to challenge*', '*the Hub discussion*' '*people work well together*', '*it's fantastic the partnership working*' and '*we feel like a team now*'. This was leading to service innovation (e.g. the joint work of North Wales Police and FLVC). better and more consistent understanding of the impact of ACEs and service transformation (e.g. proactive relationship building with families at greater risk to support their accessing relevant support rather than more traditional models of waiting for families to seek support for themselves).

In several interviews, the **increased co-location and engagement of BCUHB** representatives in the EH Hub was also reported as enhancing the quality of information-sharing and decision-making, with health practitioners recognised as playing an especially useful conduit to introducing support to families with greater levels of need. Moreover, the greater involvement of BCUHB is helping unlock access to wider health services, although this remains work very much in progress too. It was also acknowledged that the **increased co-location and engagement of Community and Enterprise** and **Education** is also helping improve the quality of information-sharing and decision-making and scope for more appropriate actions too.

In several interviews, there was a recognition that there is a **growing confidence in contacting families to offer support** and that doing this quickly, yields positive results in building relationships and engaging families in support.

### 3.4 What has been more challenging? And how have these been overcome?

The most recurring reflections about what has been more challenging are:

- **Challenges of capacity**- all Strategic and Operational Group agency representatives have contributed their own management time, staffing and other resources from within existing (and reducing) resources to the development and implementation of the EH Hub. This could mean sometimes personnel changing and so there would be revisiting of previous discussions and decisions, some partners would take longer to deliver on commitments than originally conceived etc.

However, these challenges were also recognised in interviews as largely overcome (see next point), although it was noted in several interviews that work to have a **dedicated budget for staff to be co-located at the EH Hub on an ongoing basis (which includes some administrative support)** must be a priority moving forward for statutory

partners and will contribute to the EH Hub sustainability into the long term.

- **Senior commitment not always translating into middle management operationalisation** Like the challenges of limited capacity, interviewees recognised that these challenges were mainly overcome. The primary reasons provided for this were:
  - The quality of the multiagency governance arrangements with regular, effectively chaired meetings that helped build trust and honesty, encouraged accountability, reinforced commitments and agreed processes and a focus for the Strategic Group particularly in seeing the role as one of trouble-shooting and unblocking rather than overseeing.
  - The high degree of support and commitment that exists.
  - Persistence and a willingness to keep moving forward where it was possible to, so for example not waiting until all services could co-locate to start the EH Hub, not deprioritising and cancelling EH Hub professionals' discussion meetings because some services had not completed their research task etc.
  - The way in which Families First was able to lever greater partner involvement and ensure that there was capacity for services to be offered and to encourage innovation. From April 2018, this will be enhanced even further.
  - The involvement of a strategic adviser and project support officer to enhance capacity.
- **Different understanding about the contributions of different roles/services within and aligned to the EH Hub.** While there has been significant improvement in mutual understanding by EH Hub members about different services and what they offer, this is a work in progress. For example, there was less engagement with services outside the EH Hub than had been envisaged, there is scope to improve EH Hub members understanding about decision-making processes at the Children's Front Door and the role of different teams within Children's Services and there was less utilisation by agencies of the FLVC information officer (North Wales Police an exception) than had been envisaged.

In discussing how these challenges have been or are being overcome, there is a strong view that this will increasingly be dealt with as significantly more co-location starts from April 2018. This will help informal information-sharing and communication, as will involving more Front Door decision makers within professionals' discussion meetings.

Within this context, there is also more to do in equipping the workforce with knowledge about how the Social Services and Wellbeing Act 2014 transforms social services within Wales. Plans for strengthening 'step-down' processes from statutory Children's Services so that families that will benefit from extra support to sustain positive outcomes and build resilience and wellbeing have access to targeted support (which will include from agencies/services that work as part of the EH Hub), once risk to child safety is better

managed, will help with this. As this takes shape, workforce development initiatives will focus on helping equip the wider workforce with outcomes-focused approaches to working alongside families that have multiple and complex needs.

- **Takes time to gather information for some EH Hub members.** This was an issue for different EH Hub members in different ways, while for some members such as North Wales Police, TAF, Youth Justice, Children's Services and for some elements (but not all) of Community and Enterprise, this is not a challenge.

However, Flying Start and BCUHB EH Hub members have not been able to gain access to the IM other than when present at the EH Hub office. That said, the Flying Start and BCUHB EH Hub members have devised a manual process for doing so which largely works very well. Often the experience shared through the interviews, is that the phone call with the school nurse or health visitor will generally provide insight because often if the family does have greater needs, primary health care professionals will be involved and know the child or the family. This is even more so with Flying Start health visitors.

It was noted that Education has a related challenge associated with research involving schools (and with 80 schools where children and young people may be attending in Flintshire (to say nothing of out of county schools), so with some similarities to BCUHB challenges too). Nonetheless, several interviewees noted this should improve substantially by having an Education representative co-located in the EH Hub as part of the Flintshire Families First Young People's provision for 5 days per week (0.6 FTE days) from April.

- **While all families have had an offer of support, sometimes this has taken longer than expected.** For parents/carers interviewed as part of preparing this report, they were clear that in terms of service design they strongly value a phone call within a couple days of referral to simply indicate that the referral is being considered and that it may be another fortnight before they are contacted to introduce the assistance. The Strategic Group has accepted and is taking forward this recommendation as part of the next stage of developing the EH Hub.
- **Delays with marketing collateral** to help practitioners introduce the EH Hub to families (and other services) was noted in several interviews and survey feedback as challenging; and has limited some practitioners and Police Community Support Officers (PCSOs) willingness to reach out to families. The Strategic Group has accepted and is taking forward this recommendation as part of the next stage of developing the EH Hub.

### 3.5. What have been impacts of the Early Help Hub so far?

#### 3.5.1 In relation to core objectives

There was a consistent view that objectives for reduced demand on high cost public services and improved outcomes such as reduced crime and antisocial behaviour, better health, educational attainment, financial literacy and more secure tenancies would not be expected to have occurred within just over nine months from the first operationalisation of the EH Hub. Nonetheless, there is also a strong view that these objectives are met to varying degrees:

- Greater ability to identify potential vulnerability, enabling more preventative action to be taken, dealing with problems before these become entrenched and building family wellbeing and resilience.
- Closer partnership working, clearer accountability and less duplication of effort (fully met in relation to closer partnership working, but too early yet to indicate with respect to clearer accountability and reduced duplication of effort).
- Where better information-sharing within the EH Hub identifies potential safeguarding concerns, these are actioned in line with relevant procedures. (fully met)
- Better quality referrals to Children's Services as measured by reduced CP referrals and fewer NFAs (no further action) by Children's Services and NW Police (partly met with some excellent work being spearheaded by the Community and Enterprise EH Hub member to help her Housing Solutions colleagues consider whether a referral is for the EH Hub or statutory Children's Services and the start of direct EH Hub referrals from police officers and PCSOs as a result of the excellent work of the North Wales Police EH Hub member, see also next paragraph).

There are signs the EH Hub is contributing to reduced NFAs (down to 34% for October-December 2017) and early and tentative signs that the EHH is contributing to reduced re-referrals of cases to the Children's Services Front Door.

It is only tentative but indicated as possible in several interviews with Strategic and Operational Group members because there are short waiting lists and more manageable caseloads within statutory Children's Services which have arisen because of: (a) referral routes to the EH Hub are clear; and (b) social work teams are increasingly developing a more holistic understanding of family needs and making more use of community-based provision as they become more knowledgeable and confident about this provision, because of experience engaging with the EH Hub.

## 3.5.2 Creating new ways of working

Throughout interviews, multiple examples were shared about how the experience of the EH Hub is stimulating new ways of working, changes to practice.

- The report has drawn attention to the **innovative practices of North Wales Police following up with families to offer support including connecting them with the FLVC information officer**;
- **Community and Enterprise senior officers describe how they intend progressing work for an EH Hub related to homelessness prevention** with partners such as RSLs and Supporting People providers, given the gains they have identified from their engagement with the EH Hub. The senior officers identify that having a Community and Enterprise EH Hub member also enhances knowledge about relevant needs/risks when a family is at risk of homelessness and so ensure a wider pool of resources may be

available (both to help sustain the family's tenancy and address other family needs).

- **Services are changing as they need to focus on engaging and building a relationship with a family more likely to need support, rather than wait for the family to be ready to be supported and then work with them.** This is challenging for services and in one EH Hub member interview, for example, the interviewee described how working as part of the EH Hub is driving that change for her service and it is not entirely comfortable. It does mean that there can be higher rates of non-engagement than the service is used to but at the same time, the engagement and relationship building time (e.g. with phone calls, sending out a leaflet etc.) is hugely valuable, as it means that families are already being supported and feel supported (even if it isn't '*with an intervention*') and so will engage and engage well, once they are ready.

This theme was echoed in two other interviews. As one EH Hub members notes '*there is a growing confidence about ringing people up and offering support*' as staff have become more knowledgeable and understood that engagement and relationship building with families is key.

## 3.6. Where to next

### 3.6.1 The near future

Throughout the interviews, there is a strong sense of an even brighter next chapter for the EH Hub; especially from April 2018 as even more integration with Flintshire Families First takes place. This will have several effects:

- A 5-day per week EH Hub will be operational which creates the room for the EH Hub to accept direct referrals from families.
- A far wider pool of voluntary and statutory services can be actioned to offer support (and significantly more quickly) to families (which will also address a worry expressed by several EH Hub members about too much reliance on at least one service which has had the effect of slowing down access to support- see section 3).
- A far wider pool of services will be able to offer key worker support (i.e. the type of coordination which has formally been undertaken by the TAF team) in addition to the provision of bespoke interventions.
- Greater understanding about a wider range of services to meet the needs of children, young people and families in Flintshire for all those agencies/services actively engaged with the EH Hub.
- Greater capacity for Education/schools involvement.
- As noted earlier, this also helps Flintshire Families First focus support on those families with greater levels of need, as expected by the Welsh Government.

This will bring more change, more dynamism, more voluntary sector involvement, and enhance knowledge about available services more.

### 3.6.2 The future beyond

The Police Transformation Fund initiative within its successful submission to the Home Office, sets out a commitment to evaluate the EH Hub. North Wales Police identify this as an important lever for learning and to help influence similar practice outside Flintshire.

It was also noted in several Strategic Group and Operational Group interviews that examining more how EH Hub could integrate further with other initiatives such the SPOA and multiagency panels related to young people should be considered; especially given the EH Hub provides the one multiagency panel that takes a whole family perspective, involves the most diverse group of multiagency partners and resources are tight and tightening.

Several interviewees also posited that in the medium term it may be useful for the EH Hub to be located as part of the wider community sector- or somewhere different to its current home with line management of the EH Hub coordinator through Children's Services- as part of helping demonstrate the EH Hub is about the Social Services and Wellbeing Act 2014 in action.

From May 2018, the FLVC CEO will take the lead of the EH Hub Strategic Group which starts developing that agenda and make for especially interesting future chapters in the Flintshire EH Hub story and are a natural extension to the innovative partnership working involving the voluntary and community sector in Flintshire.



## Appendix One: Methodology

Interviews were conducted with 8 parents/carers and 23 people from across the multiagency partnership.

- Ann Roberts, Senior Manager, Integrated Youth Provision, FCC
- Ann Woods, CEO, FLVC
- Claire Green, Children's Services Assistant, Community & Enterprise, FCC
- Claire Homard, Chief Officer, Education & Youth, FCC
- Craig McLeod, Senior Manager, Children & Workforce, FCC
- Diane Jackson, Manager, Flying Start Health, & EH Hub member, BCUHB
- Gail Bennett, Manager, Early Years & Family Support, FCC
- Helen Williams, Manager, Supporting People, Community & Enterprise, FCC
- Janet Owen, Information Officer, FLVC & EH Hub member (until Feb 2018)
- Kate Howard, SPOA coordinator, FLVC & EH Hub member 1 day/week (from Feb 2018)
- Karen Edwards, Team Manager, Children's First Contact, FCC
- Kerry Smith-Williams, Sergeant & EH Hub Member, North Wales Police
- Lesley Bayley, EH Hub Member, BCUHB
- Natalie Moore, Senior Practitioner, Children's Services & EH Hub Project Support Officer
- Natalie Woodworth, EH Hub/ TAF coordinator
- Ray Dickson, Service Manager, Children's Services, FCC
- Rebecca Cunningham, Senior Practitioner, Youth Justice Service, FCC & EH Hub member
- Ruth Harris, Business Support Officer, EH Hub
- Samantha Greatbanks, Manager, Teulu Cyfan & EH Hub member
- Sharon McCairn, A/g Superintendent, North Wales Police (Operational Group Chair)
- Sian Beck, Superintendent, North Wales Police (Strategic Group Chair)
- Suzanne Mazzone, Manager, Housing Solutions & Support Services, Community & Enterprise, FCC

In addition, review work was conducted of:

- A survey completed by 7 co-located staff members;
- Consideration of performance data from July 2017- January 2018
- Attendance at a Hub professionals' meeting in March 2018

There is also included here the feedback that was provided during the initial six multiagency workforce briefings conducted across September 2017 and a further three workforce briefings conducted in November 2017; and a survey completed by 74 attendees from the workforce briefings held in September and November 2017;