

What is the problem? What needs to change?	What are we doing to effect change?	What will look or feel different if we do these things?	What longer term outcomes will result if we succeed?
<ol style="list-style-type: none"> 1. Increasing numbers of children are entering care, including a significant number with emotional and behavioural difficulties (EBD) entering care in a crisis with complex needs met largely through out of area residential placements. 2. There are extremely limited options for emergency accommodation to assess a child's needs before being placed more permanently or returning home. 3. We need to attract and support more foster carers to support more children, with greater needs 4. Unaddressed Adverse Childhood Experiences (ACEs) and child EBD both contribute significantly to the need for care and support. 5. Family support can be provided in a fragmented way by different agencies who are not yet working sufficiently closely together to meet these needs effectively, including where families are in crisis. 6. Children and young people, including those with care and support needs, even those in crisis / on the edge of care, find it very difficult to get help with their emotional health and wellbeing / mental health needs. 	<ol style="list-style-type: none"> 1. Flintshire's Early Help Hub provides coordinated support. 630 families supported April – Sept 19. 2. Family Group Conferencing supports families to develop their own solutions. 182 families referred for support between April –September 2019. 3. The Mockingbird Model of fostering will extend our fostering provision. Our ambition is to develop up to 5 Hubs over 3 years supporting 80 children. 4. A FAST (Family Assessment Support Team) Team will provide 'rapid response' assessment and support for children on the edge of care The Team will include a clinical psychologist and family therapist. 5. 2 additional long term placements at Arosfa for children with complex needs. 6. In 2020/21 we will launch a short term residential service to i) promote effective return home for children on the edge of care and ii) enable a comprehensive multi-disciplinary assessment for children who cannot return home, to inform the most appropriate move-on placement and support package 	<ol style="list-style-type: none"> 1. More children and families receive effective, targeted help to address their ACES and promote their individual and family resilience at an early stage (before a crisis) 2. Improved including more timely, accessible and effective responses to the emotional health and wellbeing needs of children and young people, including those on the edge of care 3. Community children's workforce feeling more confident about responding to children's complex (EBD) needs and about managing risk effectively together to avoid the need for care (and support) 4. Children and families in crisis experience responses that are more timely, therapeutic and appropriate to their needs 5. Reunification is considered carefully and more routinely as an option for children on the edge of care / who have entered care in a crisis 6. There are more options for supporting the safe reunification of children with parent(s) 	<ol style="list-style-type: none"> 1. Children and young people receiving therapeutic supports have improved emotional health and wellbeing 2. Fewer Children require registration on the Child Protection Register 3. Fewer care proceedings are required 4. Fewer children need to become looked after for a significant period of time 5. More children are reunified successfully with their parent(s) after a short period of being looked after 6. More children requiring a placement are supported through in house Fostering 7. Fewer placements for looked after children break down 8. Fewer children require an independent residential placement for their long-term care 9. Fewer children are placed in residential care out of area 10. Fewer children are admitted to hospital in a mental health crisis 11. Fewer children are permanently excluded from school