



	Health and Well-Being Board 18 September 2014
Title	Early Intervention and Prevention Strategy
Report of	Strategic Director for Communities
Wards	All
Status	Public
Enclosures	Appendix 1 – Early Intervention and Prevention Strategy
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## Summary

Early Intervention and Prevention is about tackling problems experienced by children and families as early as possible to improve outcomes, and to lower costs.

The purpose of this strategy (which sits alongside a number of other strategies) is to provide a framework to organise our early help services, to monitor their success, and to drive improvement. The strategy was commissioned by the Children's Trust Board and has been formulated through consultation with staff and partners.

# Recommendations

1. That the Health and Well-Being Board comments on the Early Intervention and Prevention Strategy, prior to approval by the Barnet Children's Safeguarding Board.

## 1. WHY THIS REPORT IS NEEDED

1.1 Early Intervention and Prevention is about:

- identifying the needs of children, young people and their families at an early stage;
- providing timely and targeted support to prevent the difficulties that they can experience from arising or escalating.
- 1.2 In addition Working Together to Safeguard Children (March 2013) sets out requirements for local authorities to ensure a framework is in place to:
  - identify children and families who would benefit from early help
  - provide targeted early help services to improve the outcomes of a child
- 1.3 The Ofsted Single Inspection Framework assesses the overall effectiveness of services and arrangements for children, including early help.

## 2. REASONS FOR RECOMMENDATIONS

- 2.1 We know that effective Early Intervention and Prevention can:
  - improve outcomes for children and families; and
  - significantly reduce costly support at a later stage
- 2.2 This strategy provides a framework for the Council and partners to ensure that early help services are:
  - effectively co-ordinated and targeted across the Partnership;
  - success monitored;
  - Subject to the process of continuous improvement

## 3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

3.1 N/A

## 4. POST DECISION IMPLEMENTATION

4.1 In line with the changes to the Children's Trust Board being agreed in July 2014, the HWBB is also asked to oversee this strategy.

#### 5. IMPLICATIONS OF DECISION

#### 5.1 Corporate Priorities and Performance

- 5.1.1 Early intervention is a key theme of the Children and Young People's Plan and the Health and Well-being Strategy.
- 5.2 Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)
- 5.2.1 The adoption of the strategy has no direct resource implications but should guide the future use of resources of partners.

#### 5.3 Legal and Constitutional References

5.3.1 The Council has statutory duties in respect of safeguarding children and providing support for children in need, wherever possible in placement with their families through the Children Act 1989 and the Children Act 2004.

5.3.2 The Council's Constitution sets out the Terms of Reference for the Health and Well-Being Board. The responsibilities include agree a Health and Well-Being Strategy for Barnet taking into account the findings of the JSNA, and performance managing its implementation to ensure that improved outcomes are being delivered. The Terms of Reference also sets out responsibilities of the Board to work with partners across health and social care agencies to ensure that resources are directed to meet the needs of Barnet's population.

### 5.4 **Risk Management**

5.4.1 Risks are actively managed through the current service and partnership boards.

#### 5.5 Equalities and Diversity

- 5.5.1 Equality and Diversity issues are a mandatory consideration in decisionmaking in the Council pursuant to the Equality Act 2010. This means the Council and all other organisations acting on its behalf must have due regard to the equality duties when exercising a public function. The broad purpose of this duty is to integrate considerations of equality and good relations into day to day business, requiring equality considerations to be reflected into the design of policies and the delivery of services and for these to be kept under review.
- 5.5.2 The specific duty set out in s149 of the Equality Act is to have due regard to need to:

*Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;* 

Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;

Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

5.5.3 The relevant protected characteristics are – age; disability; gender reassignment; pregnancy and maternity; race; religion or belief; sex; sexual orientation. Health partners as relevant public bodies must similarly discharge their duties under the Equality Act 2010 and consideration of equalities issues should therefore form part of their reports.

#### 5.6 **Consultation and Engagement**

5.6.1 The strategy has been produced following engagement with staff, providers, schools, and children and families.

#### 6. BACKGROUND PAPERS

6.1 None