



# Early Intervention

A citywide approach in Nottingham

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With thanks to Karen Day (research and writing).

All images in this publication are for illustrative purposes only and do not reflect any of the individuals or families mentioned.

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# Foreword

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## Councillor David Mellen

Portfolio Holder for Children's Services,  
Nottingham City Council

The Early Intervention Programme is helping to drive Nottingham City Council's vision. By 2030 we want it to be one of Europe's top ten cities for science, technology, innovation and creativity. We want to give all children and young people the best start in life, make sure every neighbourhood is a great place to live and make poverty history.

We have a vision for Nottingham as a safe, proud, ambitious city and we are including every single citizen in this potential.

The Early Intervention Programme is really driving this vision, pushing services to think more and more in a family-focused way and leading the way in collecting evidence of the impact that services have for families. This will allow us to see which services support our families the best to enable them to achieve the outcomes that they want.

I am pleased to see that the new approaches that we are trialling in the city have started to show some exciting early successes for our citizens. We are developing processes to collect evidence of impact across our services and are hoping to start to compare the costs and benefits of the different approaches in the city.

In these times of financial cuts we need to look even more closely at what approaches achieve the biggest impact for our citizens, at the lowest cost.

We are taking a city-level approach to this using the principles of Total Place. This, along with the drive on impact evaluation, will give us the information that we need to be able to see the city's services as one whole system. This will allow us to invest in approaches that provide families with support at the earliest stages so that they have provision in place to tackle any arising problems before they become unmanageable. This will enable us to provide the services that meet our citizens' needs best, at the lowest cost.

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# Introduction

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## Ian Curryer

Corporate Director for Children and Families,  
Nottingham City Council

Whilst Early Intervention started as a high level change programme in Nottingham, we have made strides to ensure that it becomes a way of working that helps us better understand the needs of our children and families and allows us to appropriately intervene in their lives to ensure that they can realise their potential, achieve and thrive.

Through using a project and programme approach to better meet the needs of children and families we are developing evidence of what works and how we can shift more resource to 'earlier' in their lives. Many outcomes that we want for our citizens, like resilience, strong parenting and confidence to make positive decisions are not easily measured, but it is important over the next few years that we develop ways to evidence them.

Pregnancy and the first few years of a child's life are incredibly important for all future aspects of their life. However, it is important to note that the Early Intervention Programme is not aimed solely at the very young; there is a lot of work dealing with teenage issues, older people, adults and families. Difficulties can happen at any age and Early Intervention is a sophisticated process rather than a one-off event.

Nottingham is ambitious for the city and its citizens. The big challenge over the next few years is supporting citizens to achieve the best outcomes at less cost, at a time when we will have reduced budgets in many services. But despite the tightening budgets, this is an exciting time for the city. By 2030 we hope to have the most efficient and effective services in place for our families and will have changed some of the intergenerational cycles such as unemployment, smoking and teenage pregnancy.

To achieve this we must maintain our partnership methodology in order for the whole city to move forward together as we embed this approach into ways of working. This will include co-designing services with the families and young people that use them and shifting more focus to Early Intervention. We must hold our nerve and see this work as an exciting but long-term approach.

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# Why Early Intervention?

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Nottingham is a vibrant city with a thriving economy. It is home to international businesses and is a seat of science and learning with a growing student population. The city is among the most prosperous in England, yet, like other cities, there is long-standing deprivation which means that many families do need support.

Over 62 per cent of the city's under 18s live in families where no adult works or where the total household income is less than £16,500 a year. Parts of Nottingham have high teenage pregnancy rates and despite the two universities, just eight per cent of the city's children reach higher education<sup>1</sup>. The links between deprivation, social exclusion and educational underachievement are well documented.

Some families have a disproportionate amount of services focused on them which puts pressure on police, health and their local communities. For many, this reliance is a pattern that has been repeated for several generations. These problems are not unique to Nottingham; this is a pattern being seen in many cities across the country. To tackle the causes of these problems requires a new and more radical approach.

In 2007 the council began talking to public and voluntary sector partners across the city about how to provide more specialist help for these families. Graham Allen, MP for Nottingham North and former Chair of the Local Strategic Partnership, had worked with the Centre for Social Justice on how disadvantage in early life can translate into patterns of social exclusion, crime and poverty in adulthood. In a study with Iain Duncan Smith MP, now Secretary of State for Work and Pensions, both urged a national system of Early Intervention; a package of policies providing support and guidance at key points in children, young people and families' lives<sup>2</sup>.

Nottingham looked carefully at evidence from around the world that showed such interventions could help tackle the roots of social dysfunction for children in their early years and provide parents with the skills and support to help their families. The council's partners committed to a long-term aim for Early Intervention: a 22-year vision to help break the cycle of intergenerational poverty and social exclusion and help families benefit equally from the city's wealth and employment opportunities. This is a commitment that is putting the foundations in place to support a shift in resources from reactive services to proactive, preventive and pre-emptive policies, but as with any new policies, it takes some time to put together the programme. Nottingham was launched as an Early Intervention city in 2008.

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<sup>1</sup> Early Intervention: Good Parents, Great Kids, Better Citizens, Graham Allen MP and Iain Duncan Smith MP

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<sup>2</sup> *ibid*

The aim is to break the intergenerational nature of underachievement and deprivation in Nottingham by identifying at the earliest possible opportunity those children, young people, adults and families who are likely to experience difficulty and to intervene and empower people to transform their lives and their future children's lives.

This is changing the way the council and their partners work. It is changing views held about services and interaction with families in the city. There are no quick fixes to these intergenerational problems, and the council need to ensure that the services delivered have the best outcomes possible for families, and that best practice is shared across the city. Part of the approach is to try new things and take calculated risks, and only then will the council have enough evidence on what works.

Many of the trials are embryonic; others are already showing strong signs of early success. All this will help to build an effective Early Intervention package across the city.

The test of success will be if by 2030 more of Nottingham's children have grown up with greater aspirations and achievements than their parents.

## Nottingham's Early Intervention aims:

### **Provide effective early support**

- establish a small number of critical Early Interventions for Nottingham and make them sustainable
- shift greater resource into prevention and Early Intervention
- equip the workforce to think family and intervene early
- identify children and young people at risk early.

### **Support families and empower them to be strong and healthy**

- reduce the number of children whose parents or siblings have offended
- decrease the number of repeat incidences of domestic violence
- improve mental health

- provide the best start in life for children born to teenage parents.

### **Be emotionally resilient and demonstrate maturity**

- reduce alcohol/drug related anti-social behaviour among children and young people
- reduce alcohol consumption levels among young people under 18
- improve aspirations, resilience and life skills
- reduce teenage pregnancy, multiple teenage pregnancies, anti-social behaviour and violence.

### **Access lifelong learning and economic activity**

- accelerate the improvement in attainment of children in care and increase social aspiration
- accelerate the reduction of persistent absence across all secondary schools.



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# How an Early Intervention city works

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Early Intervention in Nottingham is not just about creating a new team or services; it is about embedding a philosophy of working that runs across every aspect of the city. Crucial to this partnership is the commitment and ownership of the city's partners across which underpins Early Intervention in Nottingham. In just over two years early successes are visible, from improved smoking cessation rates in teenage mothers to a drop in social care interventions for families living with adult offenders. None of this would be possible without coherent partnership working.

The Local Strategic Partnership, One Nottingham, is responsible for the Early Intervention Programme and ensures partners share ownership. On the ground it is delivered by the Nottingham Children's Partnership, which pulls together all the agencies in the city working with children, young people and families.

## Nottingham Children's Partnership

Nottingham City Council

NHS Nottingham City

Nottingham City Safeguarding Children's Board

Probation Service

Youth Offending Team

Learning & Skills Councils

Job Centre Plus

Nottingham City schools

Further education

Voluntary sector

Nottingham and Nottinghamshire Future

Nottinghamshire Police

CitiHealth Nottingham

Nottingham Governors' Association

Strategic Health Authority

Nottingham Academies

There are five other themed partnerships across the city including Crime and Drugs, Health and Wellbeing, and Neighbourhood Partnerships. These have a key role in shaping Early Intervention and delivering the 16 trial projects and workforce development.

These partnerships are working to ensure that duplication is avoided and that there is a single line of contact. They work together to form a care plan for families, with their needs being central to decision-making.

To help partners work more closely the council has been looking at making governance clearer through partnerships. For schools, an online tool is being set up to allow teachers to share best Early Intervention practice and provide peer support.

## Partnerships case study

Nottingham are trialling a single referral pathway in the Homelessness Prevention Gateway project. There are 18 major providers involved in the project across the city, all of which are signed up to shared targets and funding.

Staff at the Gateway make holistic assessments on needs and make referrals to partner organisations. This process is reviewed annually.

A recent review led to Nottingham City Council's Children and Families Department and Housing Aid agreeing that a children's social worker would be available every day to undertake shared assessments of 16 to 17 year olds. The mediation service also works with the Gateway and takes a proactive role. It works to tackle the causes of problems rather than the symptoms, rebuilding the relationships between families rather than simply providing temporary accommodation. During 2008/9 this service reduced the numbers of young people needing temporary accommodation from 684 to 221.

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# Delivery projects

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Nottingham is trialling 16 delivery projects, which match the city's overall aims and will help determine what works. The projects will run for three years and provide the opportunity to try new approaches and work more closely with partners. They are funded by £4m of area based grant and are already in year three.

These projects range from providing help for teenage mums, to supporting survivors of domestic violence. Each project has a set of outputs to monitor its progress and early indicators of success are being seen. The Adult Offending Team Family Intervention Project has already seen an 88 per cent reduction in social care interventions since the team has started working with them.

The monitoring and evaluation of the projects is crucial as the council starts shifting resources to Early Intervention. The council is already partnered with PhD students from the University of Nottingham who have worked across projects to strengthen the research and support the impact measurement methods, while an economics researcher, working with the Universities of Nottingham and Sheffield, has helped to set up a consultation questionnaire to measure aspiration in Nottingham's schools.

## Delivery projects:

### Adult Offending Team Family Intervention Project

Family Welfare, Reducing Persistent Absence

### Family Nurse Partnership

Homelessness Prevention Gateway

### The Sanctuary Initiative

Putting Families @ The Centre

DrugAware

Mentoring Scheme

### Stronger Families

Young Citizens

Developing Natural Learning

Active Families

Raising Aspirations

### 11-16 Life Skills

iRISE

Using Customer Insight to Enable Effective Engagement with Children and their Parents

Shifting resources from reactive services to pre-emptive, identifying those families that are most likely to be in need of support, is a fundamentally different way of funding services across the city. We know that families experiencing social breakdown are resource intensive but services can sometimes have little impact because the support is often not soon enough. Investing more in services that intervene at an earlier point will, over time, significantly reduce the demand for specialist services in Nottingham and as resources become even more squeezed, getting stronger evidence on what works best is crucial. As well as assessing and evaluating the delivery projects for value for money, the council are exploring how to use the Total Place principles in the approach to funding. With the agreement from partners this is at the early stages of being established.

The council are also conducting a rolling evaluation of some of the projects within the Children's Partnership and are looking towards ending what doesn't work or isn't providing value for money.

They have also established a partnership with Experian and have been mapping resources to the places of highest need in the city to better understand the characteristics of different groups and how to meet their needs. This will work alongside a series of case studies and interviews with high-need families in the area.

Movement to a single workforce model or One Children's Workforce would also see the agreement of a shared set of assessment tools and approaches in the city. There is a lot of work to do, but by 2011 the aim is to have a clearer picture and a wider evidence base for Early Intervention in the city.



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# Projects in practice

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## Family Nurse Partnership

Nottingham has relatively high levels of teenage pregnancy, which reflect the make-up of its communities. The city has, however, seen recent success in its efforts to reduce teenage conceptions and rates have been reducing steadily. There are a number of vulnerable youngsters that are in danger of falling into intergenerational patterns of poverty and social exclusion. The Family Nurse Partnership was launched in 2008 to help break these patterns and provide guidance and support to the city's most vulnerable teenagers and their families, from early pregnancy right through to their child's second birthday.

The partnership is based on a programme in Colorado, pioneered by Professor David Olds. It has been running for over 25 years and been proven to increase levels of neonatal health, improve children's behaviour and reduce adolescent crime. Through Professor Olds' monitoring and evaluation, he's proven that for every dollar spent on the programme five dollars are saved.

Nottingham's Family Nurse Partnership, one of 50 UK pilot sites, goes to the heart of Early Intervention by helping and supporting children before they are even born. Evidence from Colorado and around the world shows that less healthy mothers tend to have poorer pregnancies, leading to ill health in later life for their children. They may also lack a mother figure to teach them essential life

skills. The partnership aims to tackle these difficulties and is an intensive home visiting programme that links vulnerable teens in early pregnancy with a family nurse. The aim is not only to increase the health of mother and baby but also improve the family's aspirations. The nurse helps with a wide range of issues from healthy relationships to diet and stays with the teen from pregnancy until the baby is two years old, providing a stable and mentoring influence. The nurse makes regular visits and can also refer mums to other services for help, such as housing, health or substance abuse services.

The partnership is funded for an initial five years while it is being tested and currently supports 175 teenagers in the city. Mums-to-be are referred via community midwives and health professionals at the early stages of pregnancy and it targets the most vulnerable.

By April 2010 there were 170 teenage mums on the programme, with 150 babies already born. Early indicators have already shown some measure of improvement including better parenting skills and mental health. Smoking rates have also dropped; five per cent of the 45 per cent who smoked have given up completely and of the remaining smokers, 95 per cent have drastically reduced their intake. Breast feeding rates are also higher than other teens in the city, with 55 per cent compared to 49 per cent. Immunisation rates are at 100 percent in the partnership compared to 90 percent across the same age group in Nottingham.

The partnership has also been expanded with an additional £50,000 to explore the involvement of fathers in their children's lives. We can already see that more are involved pre-birth then post and the results will help us find ways of engaging more fathers.

Nottingham is also one of only two UK sites trialling a group based Family Nurse Partnership model. The project is in collaboration with authorities in the US and was launched in November 2009. This model is delivered to 10 young women, facilitated by two family nurses and it follows the same structure as the original Family Nurse Partnership programme. One of the nurses is a midwife and also provides the maternity care for the group pre and post birth. All the group have now recently had their babies and have returned to the sessions as soon as they were able, on average one to two weeks after the birth. So far we have had positive feedback from the mums with an 80 per cent attendance record. This is being evaluated by Birbeck University.



## Nottingham Family Nurse Partnership case study one

The young girl was a 19-year-old living in the Radford area, pregnant with her first child. She was in a stable relationship with her partner, aged 23, but living in temporary accommodation. She had a chaotic family life with historical involvement from social services. At least four other family members still had active child protection plans.

She was referred to the Family Nurse Partnership at 14 weeks pregnant and was assigned her own nurse. But within the first few weeks, her community midwife referred her and her unborn baby to social care due to the history of her family. She was devastated. The young girl was trying so hard to distance herself from the negative influence of her family.

Her instinct regarding social care was not to engage with them due to her negative association from her own childhood, however she was able to turn to her family nurse. She talked openly about her childhood, the neglect she had suffered and the allegations of sexual abuse from her father and grandfather.

By working together and involving her partner she could identify how she wanted life to be different for her child and she was able to work through the required assessment.

Both parents completed their assessment with social care and through working with the Family Nurse Partnership were able to demonstrate that they could look after

their child. The result was that no child protection plan was required, a relief for the mother and a considerable cost saving for social care.

The girl improved both her diet and exercise during pregnancy, engaged well with her 'bump' and reduced her smoking from 20 per day to four. She gave birth to her son, at 36 weeks and they both spent less than 24 hours in hospital.

The child is now 13 months old, a happy and thriving little boy with a healthy attachment to both parents. Both are available for the ongoing fortnightly appointments. The father is now in employment and the mother is considering college.

The young woman's attitude has changed from one that was wary of outside intervention to one that is prepared to 'go with the flow' and is more accepting of alternative viewpoints. This is due to the therapeutic relationship between nurse and client, the appropriate use of motivational interviewing to help her explore her feelings and triggers for change, and the quality of Family Nurse Partnership facilitator topics to consider her changing life circumstances. Her self-esteem has increased and both she and the partner can see their hopes and dreams becoming reality for themselves and their son.



## Family Nurse Partnership case study two

A young girl was referred by a community midwife to the programme when she was approximately 12 weeks pregnant. She was 16-years old and living in a children's home. Her partner was in police custody awaiting sentencing for a stabbing incident.

She had been in the care system for the past two years. Her mother had been unable to cope with her and her brother due to severe mental health problems.

On meeting the young person, it was apparent that she had many issues including drugs, anger and violence against others in the home, including the staff. However, she also possessed many strengths, including an overwhelming love for her unborn baby, a desire to be a good mother and learn as much as possible about parenting. She took very little persuading to be part of the Family Nurse Partnership.

The nurse worked with the girl during her pregnancy on a weekly basis. She always attended visits, engaged very well and was eager to learn. There were times when she became angry with her mother, workers and the system. She was encouraged to explore her feelings around these issues and consider what she wanted for herself and her baby. This was to have her own house - not to have to share "dirty kitchens and bathrooms" with others, to return to education in order to get a good job and provide for her baby. During her pregnancy she was moved to a mother and baby hostel and eventually

when her baby was about four months old she moved to her own council residence.

To date key changes that have been seen are drastically reduced smoking from 30 to 40 per day to three to four per day during pregnancy, an improved diet that has continued and after breast feeding for five months she is now successfully weaning her baby on home made foods. She has also given up her drug use completely.

Her relationship with her mother has also improved and she has started college. She has begun to see that her relationship with the baby's father is controlling and abusive and it's not what she wants in the future.

Her parenting is wonderful - she is an excellent mother who not only meets all her baby's physical needs but emotional needs too. Her baby is a healthy, sociable and happy child.

This programme costs approximately £3,000 a year to deliver over two and a half years.

The cost of her new baby in care would have been £2,500 per week.

Added costs would have been for the young person still in the care system, youth offending, drug rehabilitation and more costs to the benefits system.

These savings are significant but are nothing compared with the social benefits of this young girl parenting her child and having aspirations for their future together.

## Domestic violence: the Sanctuary Initiative and Stronger Families

Domestic violence can blight the lives of victims and their children for decades. Studies from the government's Social Exclusion Unit have found that children who experience parental conflict are more likely to go on to commit violent offences in later life.

Nottingham are trialling two approaches to tackling domestic violence; the Sanctuary Initiative, which provides protection for families to stay in their own homes and Stronger Families, which helps families overcome the trauma of domestic violence after the perpetrator has been removed. Both projects show a significant amount of prevented cost.

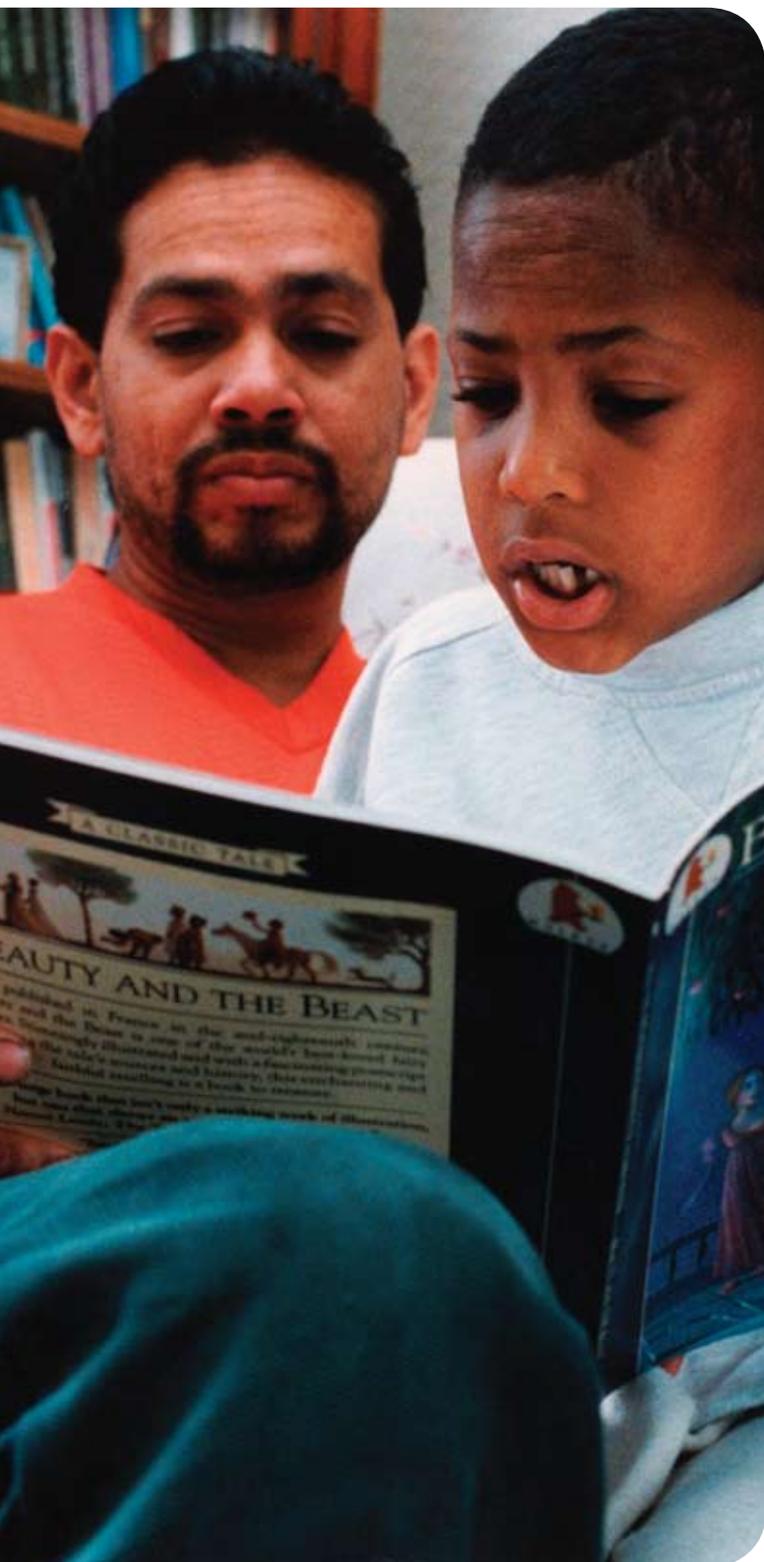
### **The Sanctuary Initiative**

This provides survivors of domestic abuse with additional security to their homes, minimising the disruption to family life, allowing children to stay at the same school and the family to remain in their community. The initiative also provides support, including home visits.

Since its launch in April 2007, the initiative has secured 95 safe houses. These families have experienced a 12 per cent rate of repeat incidences of domestic violence, just two per cent of these involved breaches of the safe house, which is much lower than the rate of 22 per cent across the city.

Sanctuary has a 100 per cent satisfaction rate amongst the families and has been chosen as a best practice example by the Department for Communities and Local Government.





### **Stronger Families**

Children that have suffered domestic violence often have difficulties coming to terms with their experiences. They may feel that it's their fault or that they should have intervened. Stronger Families is an empowerment programme that provides help for children, young people and their non-abusing parent. By helping families deal with their emotions and the trauma of domestic violence, the project aims to reduce levels of domestic violence long-term and the numbers of children needing a care plan.

So far 160 group sessions have been held with 12 trained staff. Already over 30 per cent of children have shown improved school attendance. Many of the children believed the same myths as their mothers about domestic violence, that women deserve to be hit and that alcohol and drugs cause abuse. After completing the programme there was a major shift in perceptions. None of the children believe their mothers should be hit. And none of the children now believe that substances cause domestic abuse, compared to a third before the programme. A third of the mothers have shown that they are better able to understand their child's feelings. The rate of repeat incidences has dramatically reduced.

## Stronger Families case study

A mum had been with her violent partner for over 10 years, and she had a five-year old daughter. She had been separated from him for eight months when a support worker referred the family to Stronger Families.

“My husband was very controlling, stopping me going out and doing normal things like meeting with friends. He often hit me and raped me. I was treated like a slave and he also took all the money I earned, leaving me and my daughter with nothing. He was cruel to our daughter and also hit her. It made me really depressed and I often thought about killing myself. I found the strength to leave my partner and I’m now rebuilding our lives.” Her daughter was soon asking questions about why they had left their home and family. She had also started to show signs of difficult behaviour and demonstrated a lack of confidence.

The Stronger Families co-ordinator met the mother for an initial assessment where they talked about her experiences and discussed the family’s needs.

Mum and daughter attended the 12-week Stronger Families project in 2009, which is divided into a mothers’ and a children’s group. The group lasts for an hour and a half and childcare and transport is offered where needed.

The children’s group is designed to help build a child’s self-esteem by focusing on helping them deal with their emotions

relating to the violence and to understand that what has happened was not their fault. Skills such as positive problem solving, conflict resolution and feelings awareness are developed by the programme.

Mum attended the parent sessions, which provide a safe and supportive environment and prepare them for issues raised in the children’s group.

“I found the Stronger Families Programme really useful to think about my daughter’s feelings. I understand now that children are even affected by things they haven’t seen; their understanding is deeper than you think. I am now able to talk to my daughter in an open way. I am going to continue involving my daughter more, especially if my daughter is particularly quiet or naughty.”

At the end of a programme, further support can be offered by linking into other services, or with one of the partner agencies. Since the completion of the programme, the Stronger Families team has contacted the child’s school to assess any changes in the child’s behaviour from a third party. The teacher said: “The child’s confidence is improving massively which is having a great effect on her social, emotional and intellectual abilities in all aspects of school life. I am absolutely full of praise for the support [daughter] and [mother] have received.”



## 11-16 Life Skills

Nottingham's 11-16 Life Skills project is designed to tackle cycles of low aspiration, teenage pregnancy or unemployment in the city by developing a curriculum to teach young people the skills to make positive choices in their lives, such as maintaining relationships or managing finances. We developed the programme in partnership with six schools; consulting 218 staff and asking 250 pupils what they would like to learn more about. The students were clear that the most important skills for them were managing relationships, social skills and economic capability. They also wanted more information and help on mental health issues, sexual relationships, parenting and democracy. The six schools have already completed staff training and the project will be rolled out to schools across the city in the new academic year.

## 11-16 Life Skills: Nottingham University Samworth Academy case study

Opened in September 2009, the academy had no established Life Skills programme and has therefore developed a brand new one from scratch.

The programme was developed following consultation with students before the school opened. This consultation revealed that they had previously covered aspects of health but little on relationships. The areas that students considered the most important to learn about were sexual health, sexual relationships, earning, saving, borrowing and debt. The skills that they felt were most important to develop were social skills and economic capability. Their preferred teaching and learning styles were DVDs, ICT, quizzes, role-play and discussion.

This information was used to inform the development of an entirely new curriculum to be delivered by a specialist team.

The Life Skills programme is concept led and based on the following themes:

- my health
- my relationships  
my future
- my money
- our society.

The school bought new resources including DVDs and the Christopher Winter Project (lessons on sex and relationships for all year groups) and built these into the curriculum. Theatre groups have also worked with years seven and nine to enhance the curriculum and Year 11 has benefited from additional work on money management.

The school is also developing a system of assessing pupil progress in Life Skills as well as undertaking a departmental review involving the collation of student and staff evaluations from throughout the year to inform next year's planning.

Evaluation is planned involving interviews with students and staff. This will provide an opportunity to assess the impact of the programme on students' understanding, their attitudes to risk-taking behaviour and their perceptions of the value of the programme.

Staff have reported that they feel more confident to tackle these issues and that their level of knowledge had increased. They also requested more similar training events.



## Family Intervention Project

Nottingham City was among the first local authorities in the country to trial Family Intervention in 2007. It is now an integral part of the Early Intervention strategy working across anti-social behaviour, child poverty, youth crime, adult offending and domestic violence. It provides a single point of referral for families and helps to inform the way partners deliver services.

The Family Intervention team works with the most challenging families in the city; those experiencing severe social breakdown and those that have a history of being hard to engage. The team may be triggered by a referral about an individual but it works across the whole family unit to address the root causes of problems. These families are not easy to reach; they have a history of social exclusion and a deep mistrust of service authorities. The team uses an assertive model of engagement to get these families to work with them. Most don't need an expert to tell them what's wrong, the team says, but they do need persuasion before they'll co-operate. The team, often through enforcement such as Family Intervention Tenancies, will show the families that there are consequences to their actions. They say they tread a fine line between enforcement and support and as one team member put it, they are the "pain in the arm" to prompt families to sort out their issues.

They will visit the families at different hours, from seven am to 11pm, to observe them at their most critical times. They also want the families to understand that their home is no longer a place to hide or to evade help and that the team will drop in at anytime.

The Family Intervention Project team takes a 'whole family approach' looking at every aspect of the family, even talking to neighbours and other services, before it provides an assessment. The team says it takes a journey with each of the 50 families it works with every year, from parenting them to ultimately empowering them. It also works closely with service partners across the city, co-ordinating and managing referrals for the families. Through its intervention the team aims to support families and resolve their intergenerational problems such as domestic violence or substance abuse. The team is also a more effective use of resources. The cost of working with a family, depending on size and need, is between £8,000 to £15,000, while evicting them or putting their children into care could cost up to £250,000 a year. Nationally, the average cost saving has been calculated to be £82,000 per family.



## Family Intervention Project case study

Police, social care and education referred the family to the Family Intervention Project (FIP) following reports of anti-social behaviour, non-school attendance and concerns of child neglect. The four eldest children had not been in school for the past 18 months and the two youngest children were at risk of permanent exclusion due to their very challenging and aggressive behaviour.

Parenting in the family was extremely problematic with little evidence of boundary setting or consistent discipline methods. The father had acute mental health difficulties and the mother was alcohol dependent and suffered from depression.

A multi-agency conference was convened during which the FIP identified and prioritised the work that was required and provided co-ordination for the services involved.

The family was in danger of homelessness and this was considered to be a key priority. The private landlord agreed to suspend plans to evict the family whilst the FIP began work with all family members. The FIP worked with the whole family, visiting late and early to help ensure children went to bed at night and got up in the morning at appropriate times.

The parents were subject to parenting contracts with acceptable behaviour contracts (ABCs) served on the children. The mother was supported to access specialist alcohol counselling services. Education and training provision was put in place for all the children, including statements of special educational needs. Tenancy support and debt management were also provided. A multi-agency team around the family met every six weeks to review progress in dealing with their many complex needs.

In the last nine months there have been no further complaints of anti-social behaviour. All the school-age children are now in full-time education with over 90 per cent attendance. One of the children has just achieved five A-C grades in her GCSE examinations. The mother has benefited from the specialist counselling support, her confidence has risen and she has attended employment training.

This family has now exited the FIP and the positive changes have been sustained.



## Adult Offending Team Family Intervention Project

Following the FIP model Nottingham have also established a specialist team to work with adult offenders and their families. The aim is to break the cycle of intergenerational offending, with clear evidence that children of offenders are at three times the risk of following their parents into crime and anti-social behaviour.<sup>3</sup>

The team is currently working with five families across the city and is also referring a number of women and children to its Stronger Families project. It assesses the needs of families and manages referrals and support across a range of services. Our early indicators show that 86 per cent of offenders are complying with their community sentences. We've also seen an 88 per cent reduction in social care interventions.

<sup>3</sup> Children of Offenders Review – Ministry of Justice, June 2007



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# Where are we now?

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Nottingham are very pleased with the early results from the pilot projects, which include a significant reduction in social care interventions within families of persistent offenders, an increase in smoking cessation and breast feeding rates in teenage mothers and fundamental changes in the attitudes and behaviour of children who have experienced domestic violence.

The focus for the future is to mainstream some of this work and start to establish the broader package of Early Intervention projects and ways of working across the city, continuing with the partnership approach.

Nottingham are developing an approach using the Total Place principles where all partners are jointly funding support for citizens. This is a big part of plans for the future and work will continue collaboratively with the very people who use the services to co-produce them in a way that best meet their needs.

The big challenge for the next few years is how to support better outcomes for citizens at less cost with reduced budgets, therefore it is essential to gradually shift more resources to Early Intervention and prevention.



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# What Nottingham's Early Intervention partners say:

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“Nottingham has been at the forefront of this groundbreaking work and its success depends very much on the close working relationships we have built with our partner agencies in the city.”

**Jane Todd**  
**Nottingham City Council's Chief Executive.**

“An Early Intervention programme will ensure that the city begins to address the intergenerational problems that Nottingham along with many other cities have historically suffered. For decades we have dealt with the symptoms of crime, poverty and poor educational attainment, but we are now committed to a course that will help us to deal with major issues before they become a problem and before they blight the lives of so many of our citizens.”

**Alan Given**  
**Former Chief Executive, Nottingham's Crime and Drugs Partnership.**

“What really inspired me as I started to think about Early Intervention was when I pictured universal services being able to operate more flexibly to support people before things got too bad. Unless we invest in these services that reach everyone I don't think we are ever going to change things. The voluntary sector works with vulnerable people and may identify help that is needed but it often needs someone to take a lead to join up services for an individual to help them reach their potential. We can achieve this if we all work together and are more flexible about our referral criteria and professional boundaries.”

**Helen Voce**  
**Chief Executive, Nottingham Community and Voluntary Service.**

“I am fully supportive of the Early Intervention Programme. To me it is about providing real direction and help to the families, children and young people who need it most in our city, so that they have increased opportunities to feel included and be successful. It offers the chance to help reduce many of the causes of crime rather than just the symptoms.”

**Shaun Beebe**  
**Chief Superintendent, Nottinghamshire Police.**

“We are very excited and proud to be one of the partners working on Early Intervention projects in Nottingham. Through the Family Nurse Partnership we will be able to provide focused health services to young parents and their children where it is needed most. Family nurses will provide tailored support and advice and links to accessing other services such as our contraceptive and sexual health outreach team. Together, it is hoped that we can enable young parents to lead healthier lives, improve their parenting skills and become self-sufficient.”

**Janet Sheard**  
**Chief Operating Officer and Executive Nurse, NHS Nottingham City**

“The priority established by the Early Intervention agenda will realign budgets and sharpen service delivery priorities. Decent affordable housing in neighbourhoods of choice is a right for everyone and by intervening at the earliest possible moment, that right can be accessed by people who today may feel excluded socially, economically and educationally.”

**Geoffrey Hibbert**  
**Director, Workplace Strategy and Property, Nottingham City Council**

“For many people life ‘just happens’ in a way that it just seems to happen ‘to’ them and not ‘by’ them. To change this, it is important to identify and intervene in those early critical moments which go on to disable people from making the sort of life decisions they might choose if they only had the opportunity.”

**Dr Peter Gates**  
**Professor of Social Justice and Education, University of Nottingham.**



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# Conclusion

**Graham Allen MP, Chair, Independent Review of Early Intervention and Councillor Jon Collins, Leader, Nottingham City Council**

Early Intervention is designed to give every baby, child and young person the social and emotional bedrock to make the best of themselves. Many middle class children imbibe this with their mother's milk but all too many, often from lower income households, do not. Early Intervention achieves better outcomes at less cost than late intervention, and is a key priority for the Coalition Government as witnessed by the creation of the Independent Allen Review into Early Intervention.

Nottingham is one of the leading places for Early Intervention. As One Nottingham's innovative short term grant-funded pilot programme is reaching a close, we and our partners are concentrating on the next steps to create a mainstreamed approach.

Early Intervention is now in our DNA. It is embedded within our city's plan and is a priority across all partnerships. 'Early Intervention City' drives our city's developing work on 'Aspiring Nottingham' and 'Family Nottingham' themes. Nottingham is a vibrant city with a thriving economy, and we want all of our citizens to be able to participate in its potential. Nottingham is an ambitious city, with a vision for 2030 of being one of Europe's top ten cities for science, technology, innovation and creativity, giving all children and young people the best start

in life, making sure every neighbourhood is a great place to live and making poverty history. Our pioneering Early Intervention approach underpins these ambitions, breaking the cycle of intergenerational poverty and social exclusion in the city and helping families benefit equally from the city's wealth and educational and employment opportunities.

One of the key considerations within an Early Intervention approach is of course the proof, the evidence that the interventions work. There is an embryonic and emerging evidence base for Early Intervention nationally, and Nottingham is working hard to establish what works best at a local level, providing effective return on investment, as this is critical for long-term success. Early Intervention is not a one-off fix, but a sophisticated process and a long-term way of thinking that can be applied and tested across most services and systems.

There are also critical windows where interventions can be more effective. Scientific research supports the importance of what happens in pregnancy and during the early years in a child's life in laying the foundations for virtually every aspect of a child's future development. Supporting parental skills, behaviours and health is one of the most important social policy issues today.

Alongside a solid and nurturing whole family context and home environment, high quality early years provision is key to supporting good outcomes at age five, which is a critical benchmark for future achievement. It is much less expensive to invest in support during this early phase than a teenager or adult who has become entrenched in negative and destructive cycles of behaviour, social exclusion, crime or drugs. Parents are often more receptive to support, for themselves or their children, during this stage.

It is this action to help develop social and emotional capacity **before** problems arise which distinguishes Early Intervention from treating or preventing the appearance of individual symptoms. Though even this is preferable to the culture of late interventions which dominates public services. Of course we must continue to swat mosquitoes but we have a duty to drain the swamp too.

Clear cost / benefit models in the UK are needed. The benefits from Early Intervention may take many years to be fully realised and costs may increase initially. The key focus therefore remains on outcomes.

The reduction of public expenditure in these areas means we need to be inventive in initiating and sustaining Early Interventions. This could be done by recycling for use now, just a small part of the massive future saving from reduced bills for educational under attainment, teen pregnancy, drink and drug abuse, low work aspiration and lifetimes on benefits. Piloting changes in restrictive

financial rules could allow local authorities and their public and private partners to invest against these saving and we are hopeful the Allen Review will show just how this can be done.

We are learning a lot as a city from this work and would like to continue sharing our ideas with local councils, national partners, alongside deepening the understanding of local citizens.

The next steps for Nottingham will include embedding Early Intervention principles into our commissioning processes for children and families. Working with rounded, capable babies and children will make it so much easier for example to raise aspirations and make place-based budgets work. We will be exploring collaborative funding solutions and ways to shift more resource into Early Intervention in the long-term.

We are looking forward to the time when we know that we have been successful; when we have accelerated the outcomes for the citizens of Nottingham and when we have evidence of prevented costs, so that we can invest more in Early Intervention over the long-term and less in expensive and not always effective crisis end services.

We must all focus on achieving the maximum that we can for our citizens, to add value on every pound spent by using it when it has the most prolonged impact - the earlier the better.

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