### **Examples of early help work**

### Area based solutions - Holiday food poverty

The development of a response to "holiday food poverty" in Clifton. The Community and Facilities Officer brought together partners including St Luke's Church, Clifton Residents Association, Women's Institute Volunteers, Yorcafe, Real Junk food project/Share house project, Local volunteers, Co-op, Clifton Green Primary School and Marks and Spencer's. This has established community run access to positive activities alongside food in the Clifton area.

## Area based solutions – Youth provision

Concerns were raised about lack of youth provision and increasing anti-social behaviour in the East of the city. The Community and Partnership Officer brought together partners including Tang Hall Big Local (THBL), Hull Road Ward Team, Derwenthorpe Residents Association, Osbaldwick Ward & Parish Council, Local PCSO, Community Involvement Officer and Joseph Rowntree Housing (JRH). Pooled funding was agreed between Hull Road Ward budget, Tang Hall Big Local and Joseph Rowntree Foundation. This is funding North Yorkshire Youth to deliver targeted youth provision over the next three years.

The Chaplefields area in the city had been identified as a anti-social behaviour hotspot. Working with the Community Safety Hub, PCSOs and the local ward team the Community Partnership Officer facilitated a solution. Ward funding was secured resulting in youth provision being put in place through York City FC Foundation and Q-York. This provision has been well attended and the Chaplefields area has been recently stepped down as an anti-social behaviour hotspot.

## Area based solutions - Anti-social behaviour problem solving

As a result of some low level anti-social behaviour (ASB) the North Local Area Team have held Anti-Social Behaviour Problem Solving meetings monthly since April 2018. Professionals from the Local Area Team, North Safer Neighbourhood Police Team, Housing, Youth Offending Team and Education come together to problem solve around specific ASB cases, which are beginning to come onto the radar of services. The group does not case hold, but with consent examine nominated cases in detail, share information and take a solution based and sometimes innovative approach to addressing the issues being presented on an individual, family or group basis.

Over the past 10 months the group has discussed, planned and made recommendations in relation to 29 young people, in a few cases there has

been ongoing review and monitoring. This case study highlights the journey for one of those young people, known as Jay for the purpose of anonymity

The police brought a group issue for discussion, something which they were seeing and trying to deal with from a neighbourhood policing perspective. They were encountering 10-12 young people, mostly males, who were presenting with anti-social behaviour in the community on a regular basis. It was felt there had been poor parenting and supervision over time. PCSOs were concerned the behaviours were becoming more frequent and were escalating. The youths were hanging around on the local cycle path, the local shops and a car parking area adjacent to some flats. Some were also known to be involved in other gangs visiting other locations in the North locality and causing concern there.

The main concern was re a group of four young males who were seen to be the 'ring leaders'. Their anti-social activity on the cycle path included;

- Pushing sticks through the spokes of cyclists, causing them to come off their bike.
- Setting fire to wheelie bins
- One member pulling out a knife in front of a member of the public The Firearms Team were deployed on this occasion.

The behaviour was escalating each time and there are concerns re the risk of future ASB, escalating to serious criminality.

Fourteen year old Jay was one of the four who had come to the attention of the PCSOs. It was known that Jay was living with his Gran and 16 year old sister. His mum was living in a nearby larger city with a younger half-sibling. There were no concerns for Jay's sister, it was known through the Learning & Work Advisor that she was doing well at York College. Jay's Gran suffered a physical disability, frailty and sensory impairment. It was believed he had also suffered a bereavement.

Jay had been in care between the ages of 4 and 6 years, with a couple of Police referrals to CSC in the past two years, relating to his behaviour. Jay had attended 3 mainstream secondary schools, with managed moves due to disruptive behaviour prior to being discussed at the BAP following a permanent exclusion. He was now attending Danesgate, where he had been for the past 6 months. He was unsurprisingly identified as having SEN: Social, Emotional and Mental Health. Danesgate reported jay as punctual with reasonable attendance, but has recently observed more volatile behaviour and anger management issues.

#### THE GOAL/GOALS WE WERE AIMING FOR

- To reduce Jay's ASB activity in the community and Police involvement
- Understand the story behind his current angry outbursts
- To offer Gran some support

#### WHAT WAS DONE?

- Danesgate staff worked with Jay to gain his voice to help understand the triggers for his angry outbursts.
- A joint meeting between Police, Danesgate, Housing and Gran was held to ensure Gran felt supported and that she and Jay's sister were receiving the support they needed.
- The group considered recommendations for a joint Anti-social behaviour contract (ABC), but after reviewing the feedback from the meetings with Jay and Gran decided against this.
- With consent, and agreement from the Manager of the Community safety Hub, Jay was instead referred for anger management support via a Police Crime Commissioners Programme delivered by Arch Resolution.
- The Local Area Team sourced and funded a venue at York City Football ground over the summer holidays. The anger management group intervention was delivered from there.

#### THE OUTCOMES

- Jay attended 5 weekly anger management sessions over the summer of 2018 where he was supported to reflect on his behaviour, deal with bereavement, historic DV issues and his feelings of abandonment in relation to his mum not living with him.
- To date there have been no further reports of involvement in ASB and he is managing his anger well.
- Gran has reported that she has observed Jay guiding other younger boys in the community away from trouble.

# Casework examples

# Example 1

A young family with a new baby that was not gaining weight and that were homeless.

Local Area Support Practitioners, Health Visitor and housing officers worked together with family. Family has now secured accommodation and been supported with managing finances. Through working in Local Area Teams the Health Visitor secured funding for carpets for the property.

Due to concerns regarding baby's weight gain the Health Visitor made referrals to dietician and provided advice and support. This concern has now been addressed.

The father is working and the mother has started a vocational apprenticeship which she is enjoying. The family have been supported to secure the baby a place at nursery whilst mum is undertaking her apprenticeship.

Support remains in place to address other identified health needs and parenting.

### **Example 2**

Child A is 8 years old. She has suffered from the bereavement of her Mum. There were concerns about her emotional well being as well as her father's, who was now a lone parent. Dad voiced that he was at breaking point with her behaviour and required support. He struggled with his own health and also they had very limited finances.

A Family Early Help Assessment was completed by the LAT worker who maintained the Lead Practitioner role for a 3 month period.

An intensive intervention was delivered in the home environment with Dad and Nana around parenting, focussing on identifying triggers of behaviour, appropriate consequences and strategies to use to de escalate situations.

A number of direct sessions were also undertaken with Child A which focussed on understanding feelings and emotions, how to calm down, NSPCC pants resources, safety planning around what to do in an emergency.

Referrals were made for Cruise bereavement support, a mentor through the Island, Brownies and a charity grant was obtained for Child A to attend Gymnastics for a year.

Support was given to Dad around claiming the right benefits. He is now in receipt of all the benefits he is entitled to and is £300 a month better off, which is making a huge difference to their lives.

The Family Early Help Assessment was closed with on going support being provided by school.

# **Example 3**

Child B is 13 years old. A referral was received after the Police were called when she had picked up a knife during an argument with her Dad. There were

concerns for Child B's mental health and there had already been a brief CAHMS intervention.

The LAT attended a meeting at school with Mum and it was agreed to complete a Family Early Help Assessment. This identified the needs of the whole family and put a plan in place.

The interventions have included school putting a reduced timetable in place as Child B was refusing to attend school, 1;1 sessions with the School Well being worker, 1:1 sessions with LAT worker focussing on Managing her Anger, bereavement support and Friendship issues. She has also got a Young Person's mentor who she is seeing every week to participate in positive activities.

Mum has been supported to make a re-referral back into CAHMS for further assessment and a safety plan has been put in place for when Child B is experiencing suicidal thoughts.

The Family Early Help Assessment is now being led by the school to coordinate this support and the LAT will maintain an overview from the School Link Worker.

### **Example 4**

C is a lone parent with 3 children affected by domestic violence within a relationship and poor self esteem. C had no history of employment since leaving school. C recently successfully secured part-time work in the NHS after some joint work between the LAT and the National Careers Service (NCS).

A Family Early Help Assessment was completed by one our practitioners. Practical and emotional support was provided to secure pre-school childcare and a school place for two of the children. Help to decorate the house was also secured.

Through the Family Early Help Assessment the National Careers Service put in place:

- York Financial Assistance Scheme application for new beds for the children / white goods for the home
- National Careers Service appointments for interview confidence
- Set up an email account
- Applied for birth cert / ID
- Extensive support with applying online
- Provided a reference
- · Applied for interview clothes
- Support with council tax debt

- Support with updating benefits / sorting out budget now working
- Emotional support not to quit / let stress take over

The case is now closed and the children are doing well with support in their provision.

### Example 5

This family have had significant children's social care involvement over the last ten years. Multiple plans have been put in place due to emotional abuse as a result of parental acrimony, drug use and poor mental health.

Behaviour has recently deteriorated showing increased verbal and physical aggression in the home. Dad is known to the police for having strong right wing views. The young person, who also has a learning disability, is now expressing strong right wing views including making threats to cause physical harm to Muslims and people of colour as well a sharing strong right wing videos online. Mum's mental health is deteriorating and she is struggling to cope with young person's behaviour and frequent arguments.

The Local Area Support Practitioner made contact with the family who were initially very reluctant to engage. It has required the LASP to be persistent and work hard to build trust and the relationship to support the family and draw in other agencies.

The young person has been referred to Channel. Channel is part of the Prevent strategy and is a multi-agency approach to identify and provide support to individuals who are at risk of being drawn into terrorism. The LASP is working with NYP to support the Channel process and attends regular review meetings.

Positive feedback from other agencies

'The exceptional work the LASP has carried out and the relationship they have built has been critical to us gaining a better understanding of the issues surrounding the family circumstances and enabled us to make better decisions in order to manage the case through Channel.'

# **Example 6**

The young person, aged 18 at the time, had been Not in Employment Education or Training for two years. The young person was living in the family home which was chaotic and was not claiming any benefits. Client A previously had an EHCP which had ceased, had attended Toolbox which didn't work out, and had sporadic periods of employment over the two years. The young person had left school without qualifications.

The Learning and Work Advisor set up regular sessions to work with the young person and to support with employability and job searching. They encouraged

the young person to re-consider learning to gain qualifications in English and Maths, to strengthen their chances of employment.

The Learning and Work Advisor supported the young person to have an assessment at York College for enrolment on a vocational course. The young person enrolled and is enjoying their studies. On completion of their studies they are looking to start work as a painter and decorator.

### Example 7

Single parent family with two children aged 10 and 12. Presenting Issue were low attendance and mental health of the eldest child. The eldest child had transitioned to secondary school after which his mental health and attendance had significantly deteriorated necessitating the use of the CAMHS crisis line. E reported feeling that he was unable to keep up in lessons which affected his mood and willingness to attend lessons. Mum's mental health was affected and, with working full time, her resilience was low and she had tendencies to make a catastrophe of every situation. Daughter (A) was being impacted by E's behaviour at home including threats to self harm and aggression to belongings and Mum. It became clear that the lack of consistent, robust and age appropriate boundaries were also a factor in E's behaviour and poor attendance.

#### **Abbreviations**

ASB- Anti Social behaviour

ABC- Anti Social Behaviour Contract

BAP- Broad Autism Phenotype

CAHMS- Child and adolescent mental health services

Co op- Cooperative

CSC- Children's Social Care

**DV- Domestic Violence** 

EHCP- Educational Health and Care Plan

LASP- Local Area Support Practitioner

NCS- National Careers Service

NSPCC - National Society for the Prevention of Cruelty to Children

THBL - Tang hall big Local

PCSO - Police Community Support Officers

JRH- Joseph Rowntree Foundation

SEN- Special Educational Needs