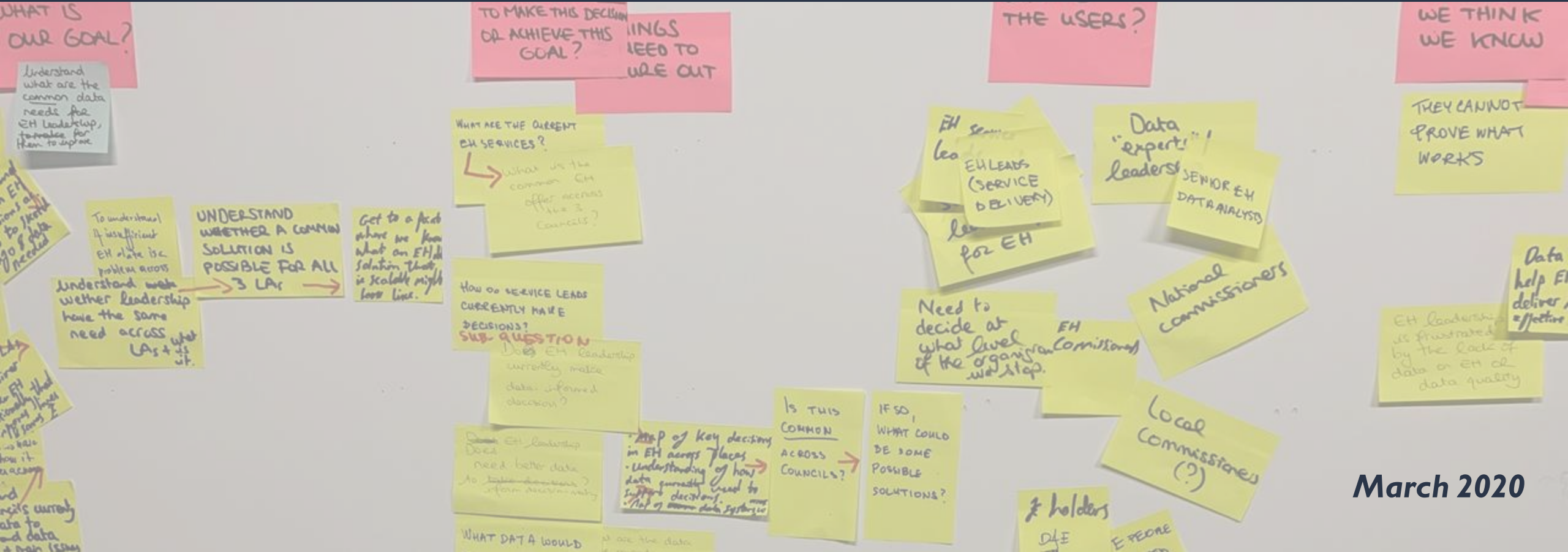


# MHCLG EARLY HELP DISCOVERY FINAL REPORT



# CONTENTS

1 | **Project overview**

2 | **What is Early Help?**

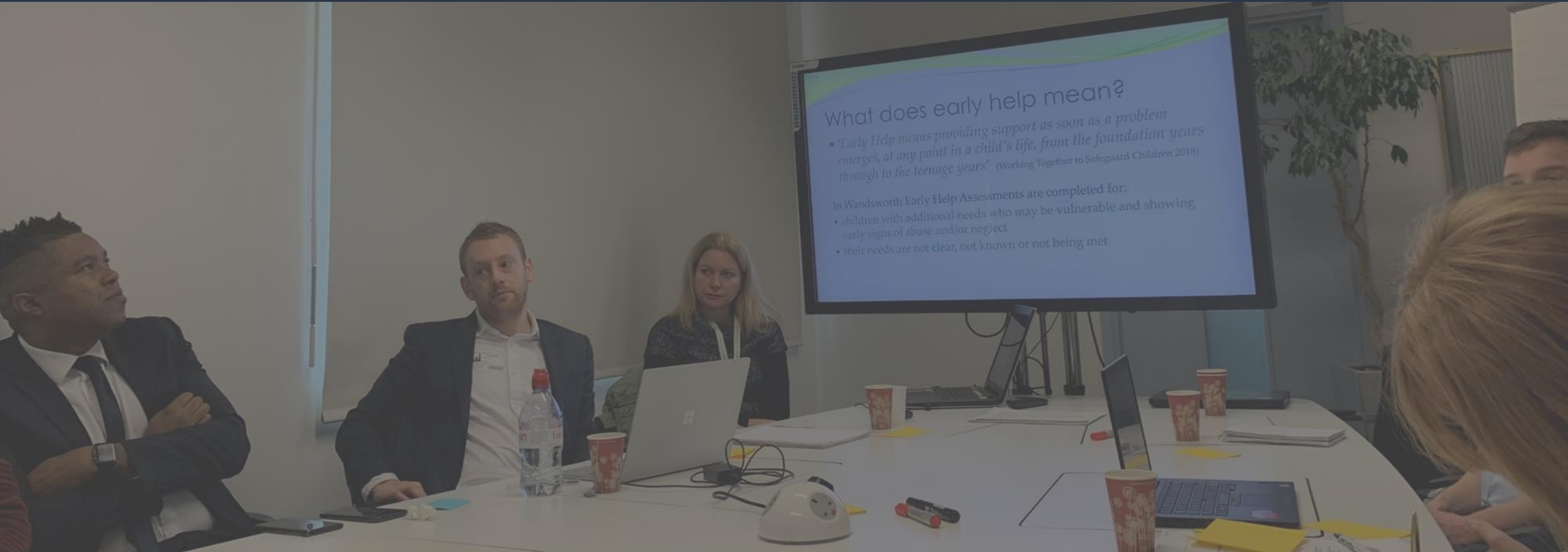
3 | **User Research Report**

4 | **Solution ideation**

5 | **Business case**



# I. PROJECT OVERVIEW



## What does early help mean?

- *Early Help means providing support as soon as a problem emerges, at any point in a child's life, from the foundation years through to the teenage years' (Working Together to Safeguard Children 2018)*

In Wandsworth Early Help Assessments are completed for:

- children with additional needs who may be vulnerable and showing early signs of abuse and/or neglect
- their needs are not clear, not known or not being met

# This discovery is a cross-council collaboration

**Objective:** Understand Early Help leadership data needs to help them improve their services and learn what works

Learn if there are significant commonalities in these needs across councils

**Partners:** Wandsworth (Lead local authority), Croydon, West Berkshire, Social Finance and MHCLG's Local Digital Collaboration Unit

**Funding:** MHCLG's Local Digital Fund



Ministry of Housing,  
Communities &  
Local Government



**CROYDON**



# Why this work matters

There is a strong need for preventative work with children and families...



***Children in need***

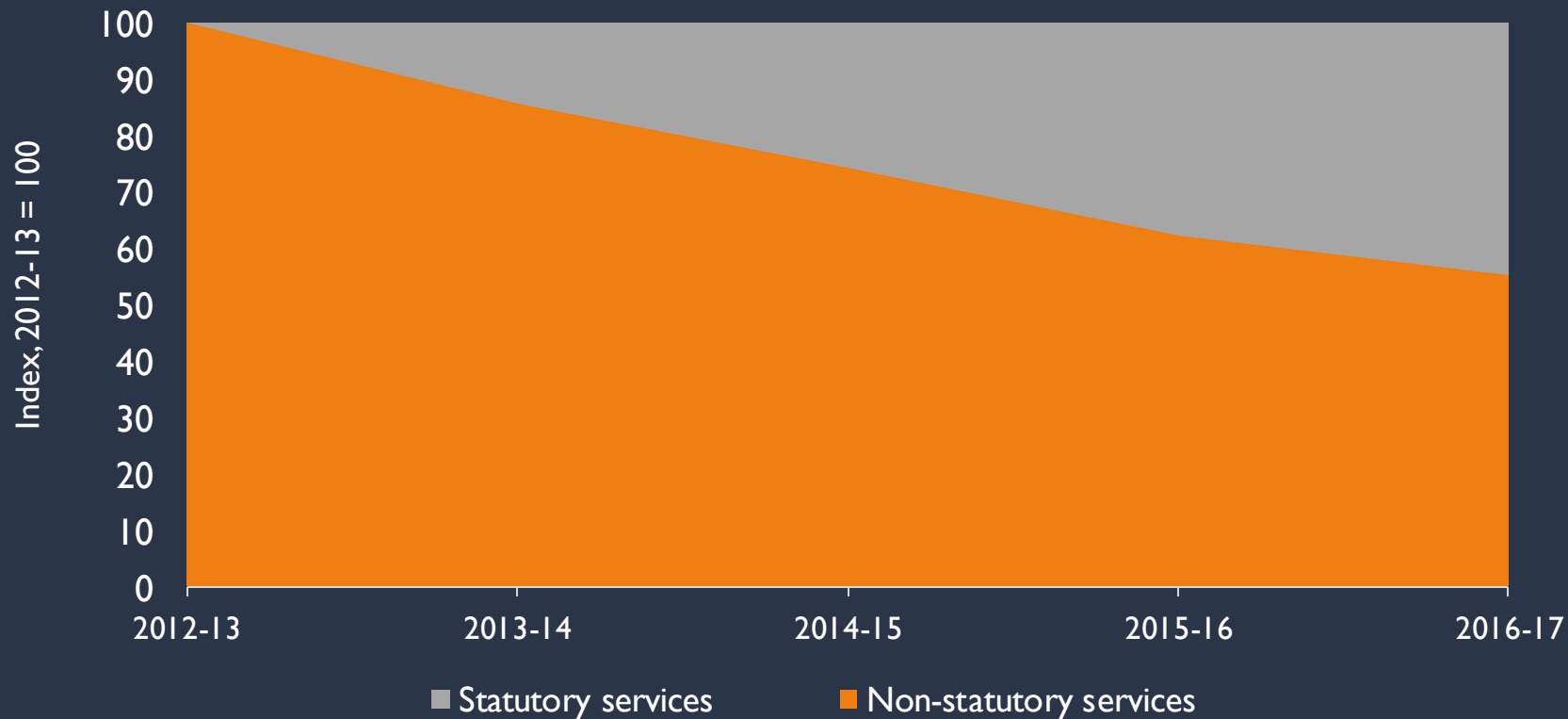
“Acting early to support children at risk of poor outcomes can build healthier, happier and more productive communities, and produce a range of economic benefits to wider society that significantly outweigh the costs of intervening”<sup>1</sup>

“At least 1.6 million children needed a social worker at some point between 2012 to 2013 and 2017 to 2018 – equivalent to 1 in 10 of all children”<sup>2</sup>

# Why this work matters

...however budgets have been reduced dramatically in the last decade

### Net expenditure on children's services



**40%**

Budget cuts on early and preventative services

# Hypothesis

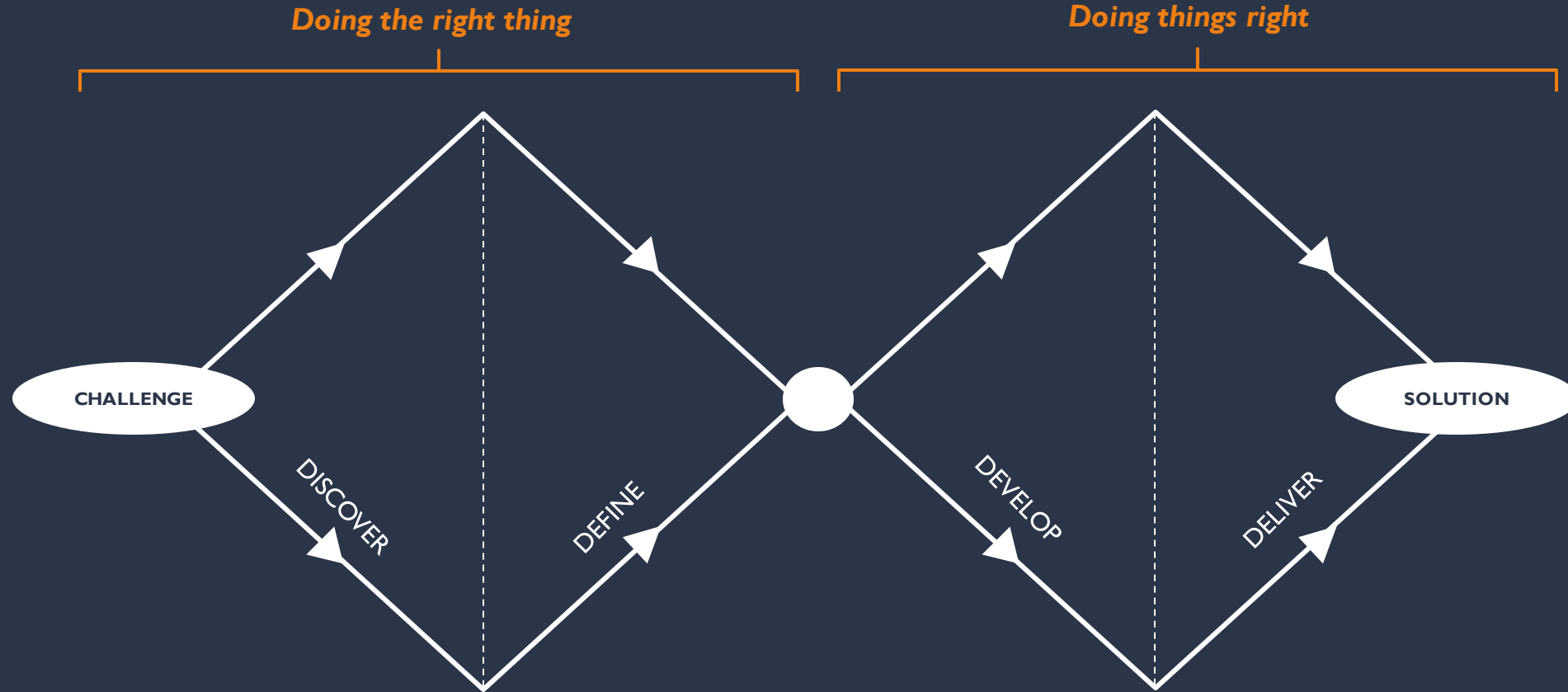
**Early Help heads lack access to the data insights they need to optimise services, see what works and protect budgets**

# **Our goal**

**We aim to uncover the scale of this challenge and whether a common solution is feasible**



# WE USED THE DOUBLE DIAMOND APPROACH TO ENSURE WE SOLVE THE RIGHT PROBLEM IN THE RIGHT WAY



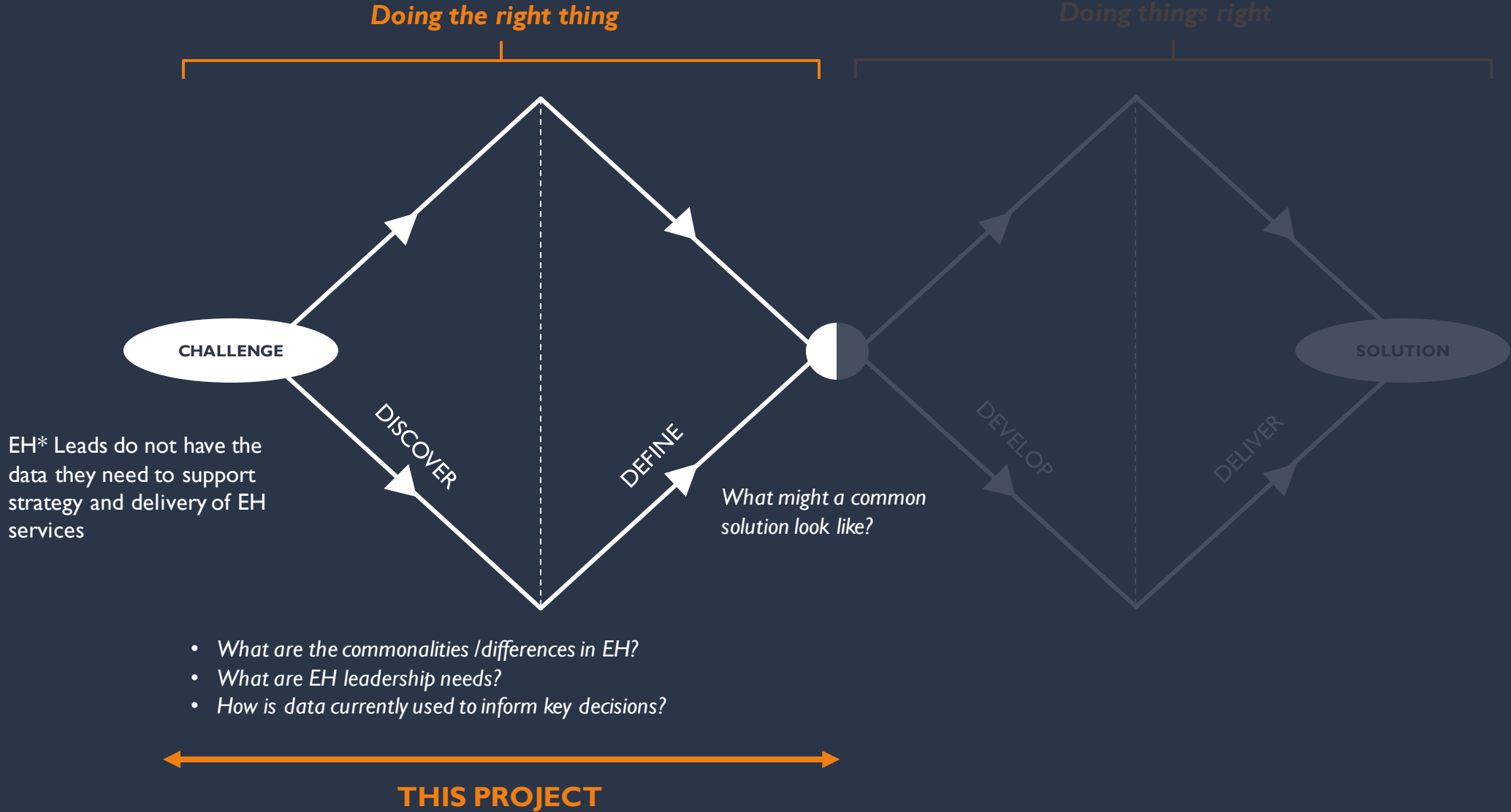
**1. Discover**  
Identify unknowns and collect information

**2. Define**  
Understand research to define the problem

**3. Develop**  
Evaluate ways to solve the problem

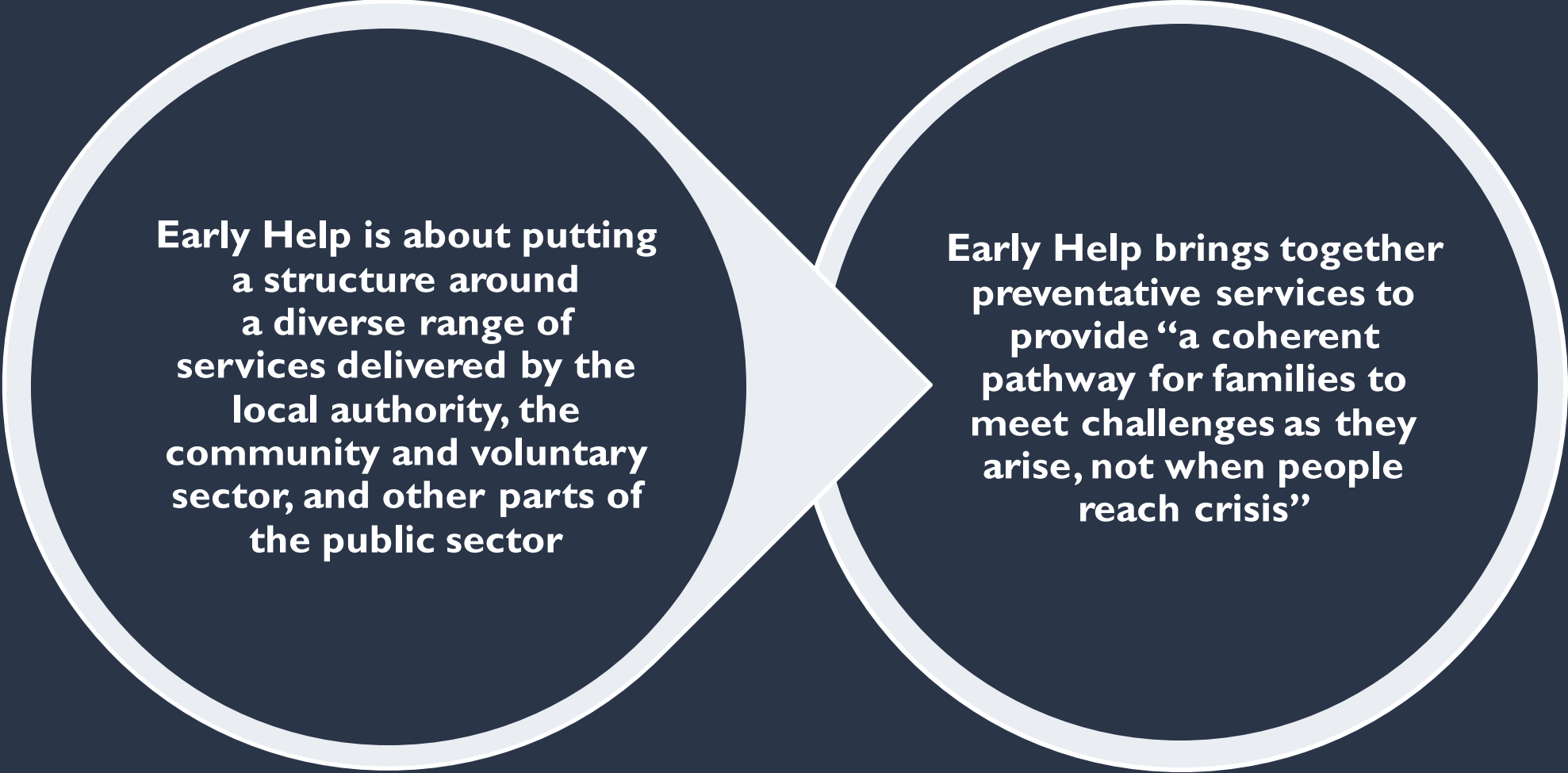
**4. Deliver**  
Build and test solutions – repeatedly fail and learn

# THIS DISCOVERY FOCUSED ON THE FIRST DIAMOND TO ENSURE THE UNDERSTANDING OF THE COMMON LEADERSHIP DATA NEEDS



\*EH: Early Help





**Early Help is about putting a structure around a diverse range of services delivered by the local authority, the community and voluntary sector, and other parts of the public sector**

**Early Help brings together preventative services to provide “a coherent pathway for families to meet challenges as they arise, not when people reach crisis”**

## FIVE REFLECTIONS ON WHAT EARLY HELP IS FROM OUR USER RESEARCH

Early Help is difficult to define given variations in approach and structure across local authorities. We provide more on these variations in the following slides.

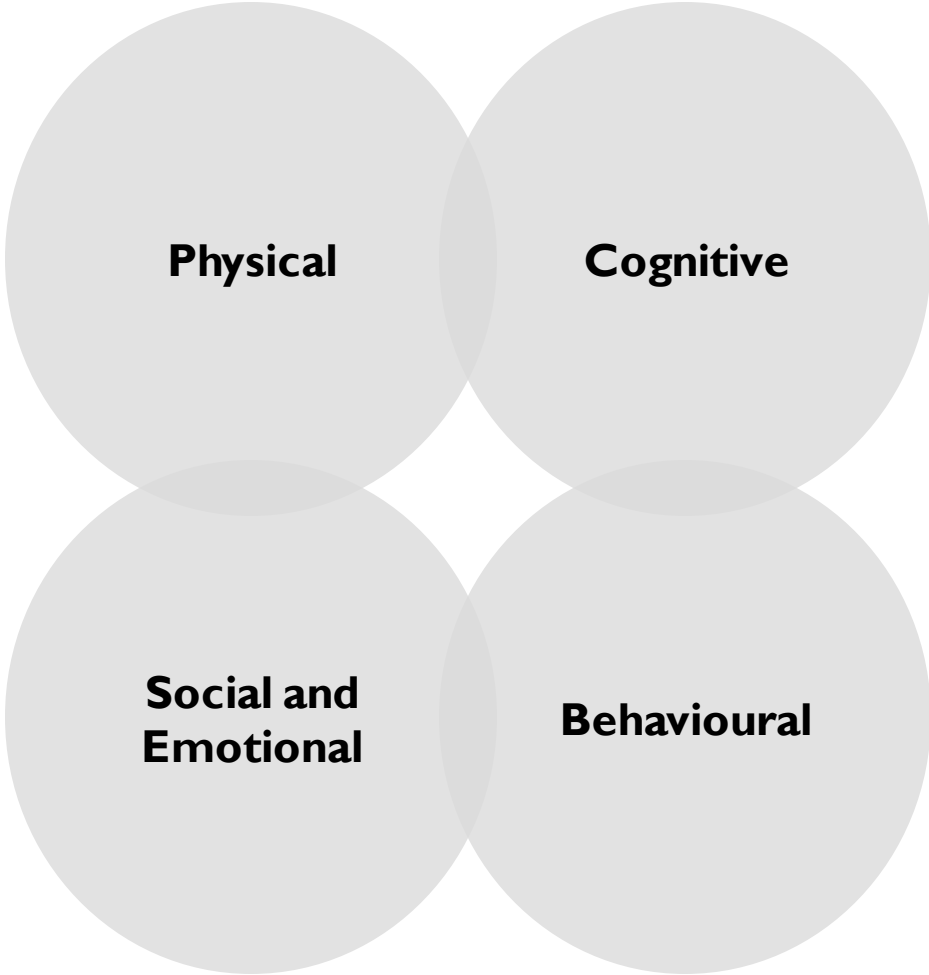
From interviews across 10 local authorities, we have found that Early Help typically:

- 1. ...is not one service, but a coordination mechanism for commissioned, signposted, and directly delivered services**
- 2. ...sits across a wide range of issues, including children's physical, cognitive, social and emotional, and behavioural development**
- 3. ...has a close relationship with children's services and tries to reduce the need for statutory intervention**
- 4. ...includes services focused at different levels, including the individual, the family, and the community**
- 5. ...varies in number of staff or size of budget but not aims**

EARLY HELP TYPICALLY CONSISTS OF SERVICES AND ACTIVITIES AROUND A WIDE RANGE OF 14 ISSUES...

**Obesity and physical health**

e.g. SEND services (both traded and council-funded) fit under Early Help



**School achievement**

e.g. West Berkshire have delivered a STOP programme for parents to support their children's cognitive development

**Mental health and wellbeing**

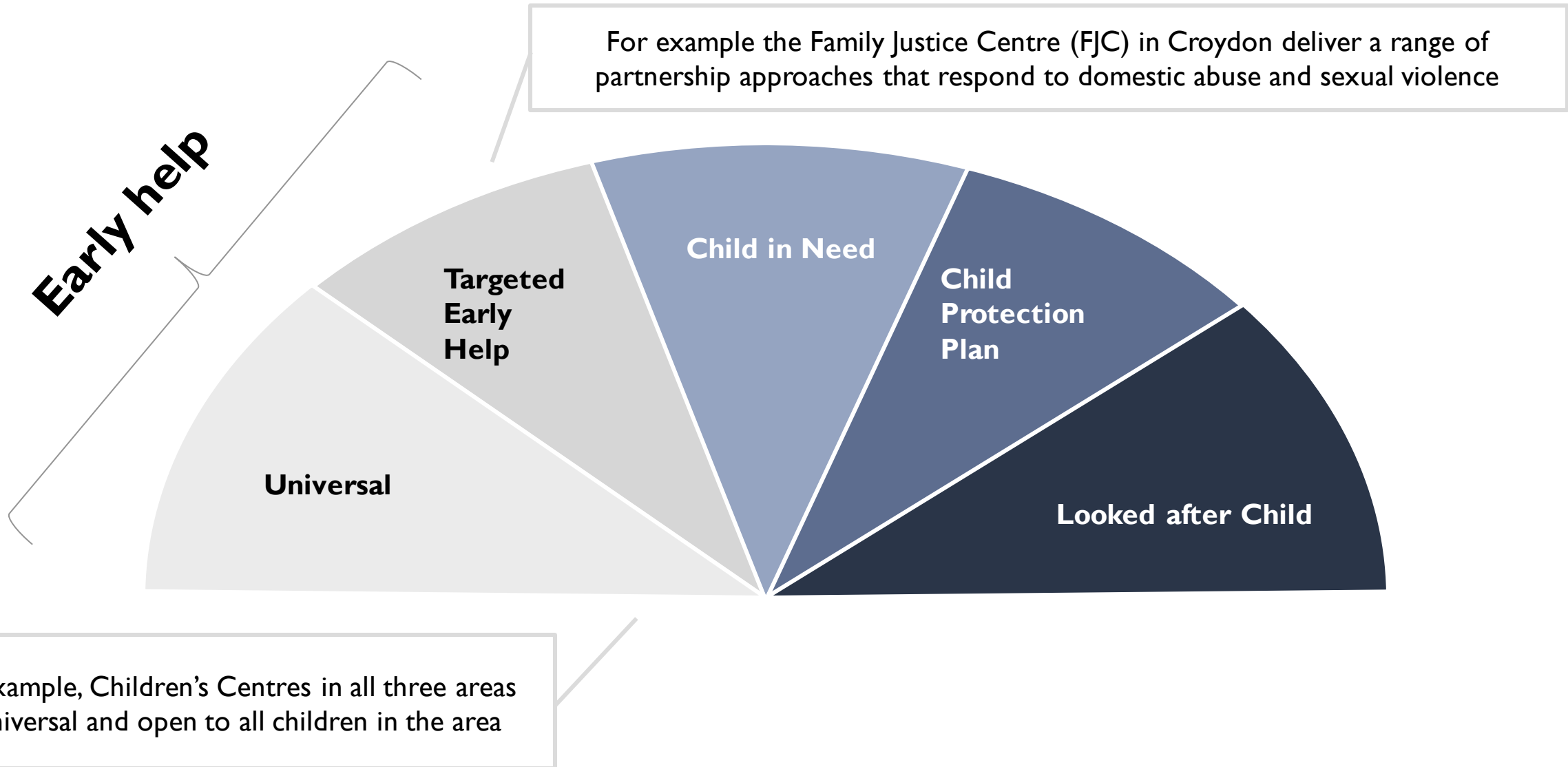
e.g. Croydon deliver a Triple P programme for Parents to support social and emotional health



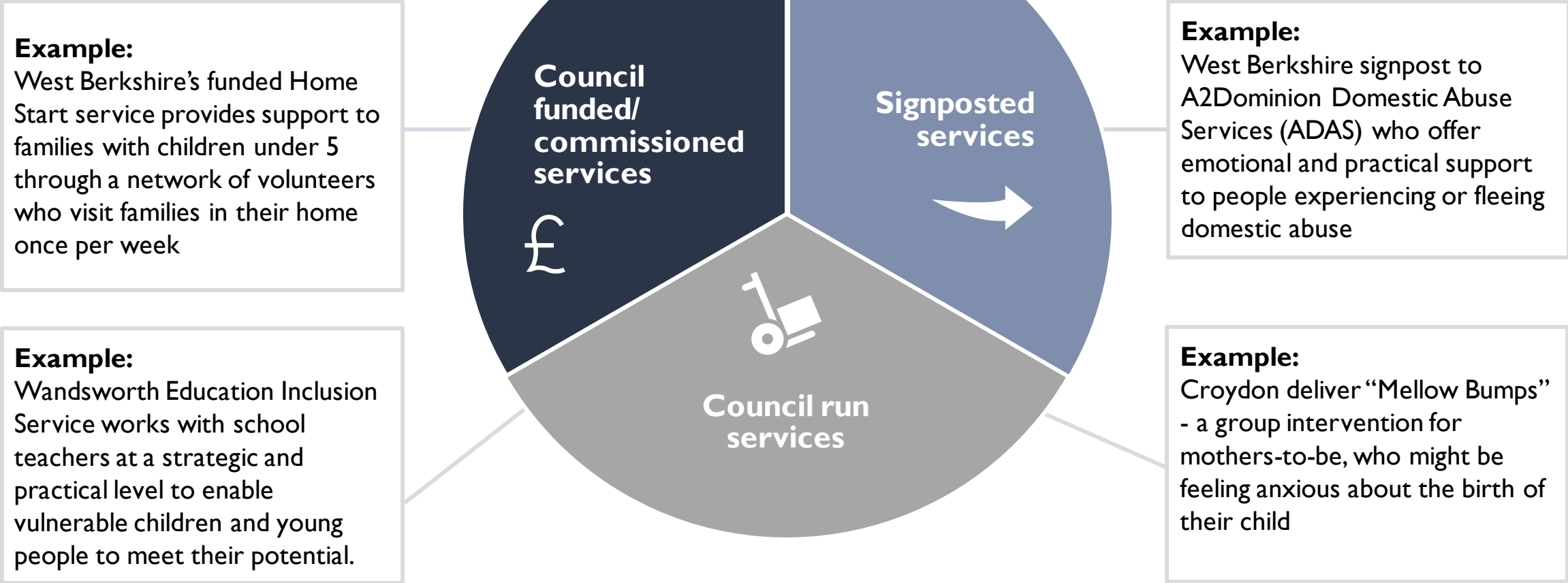
**Crime violence and anti-social behaviour**

e.g. Family Justice Centre in Croydon deliver partnership approaches responding to domestic abuse

...ALL OF WHICH TRY TO SUPPORT FAMILIES EARLY ON SO THAT THEY DON'T REACH CRISIS AND NEED STATUTORY SERVICES



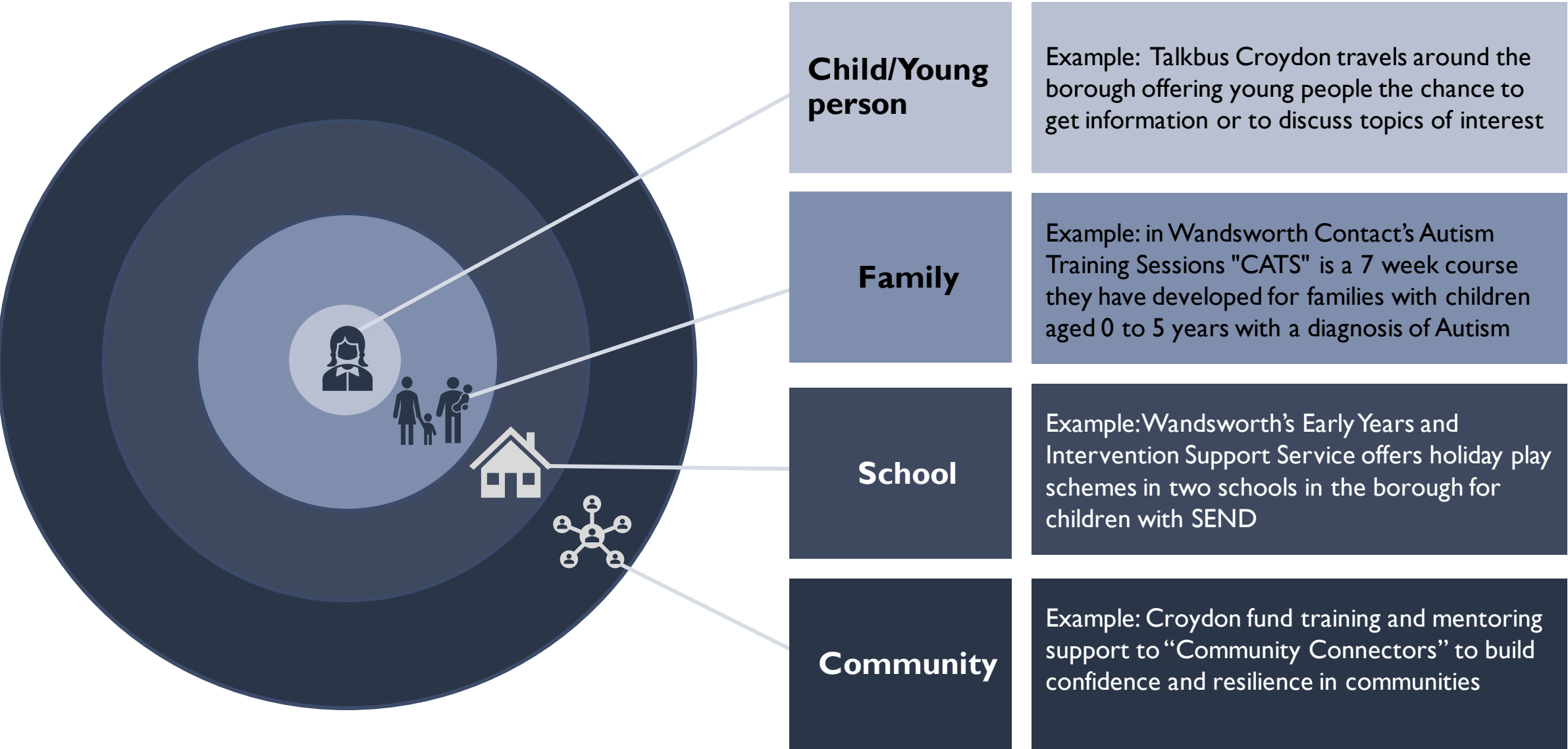
# EARLY HELP TEAMS DO ONE OR MORE OF SIGNPOSTING, COMMISSIONING, OR DELIVERING 16 SERVICES



**▶ HOWEVER, THERE IS SIGNIFICANT VARIATION ACROSS LOCAL AUTHORITIES IN TERMS OF WHICH OF THESE APPROACHES ARE ADOPTED OR IN WHAT COMBINAION**



EARLY HELP SERVICES ARE TYPICALLY DELIVERED AT DIFFERENT LEVELS RANGING FROM AN INDIVIDUAL TO A COMMUNITY 17



**As outlined on the previous slides, early help differs significantly across councils on multiple dimensions. Here we provide two examples that demonstrate what these approaches might look like at a council level.**

### Isle of Wight

IoW's early help approach involves significantly more commissioning than many other places. For example, Barnardos are contracted to deliver a significant amount of what is defined as early help in the area through their Family Support Service, working with families and children on a wide range of issues aiming to support child development, parenting, and family functioning. Barnardos run the whole network of Family Centres in the area where these services are hosted.

More details [here](#).

### Croydon

Croydon's early help approach is much more focused on in-house delivery, although it also commissions many services through early help. Croydon has a large team (~150 staff) that provides early help support through a case-worker type model, which is delivered directly by the early help team at the council under a locality-based approach. Case workers are then able to refer to other services in the early help community or services delivered by the council.

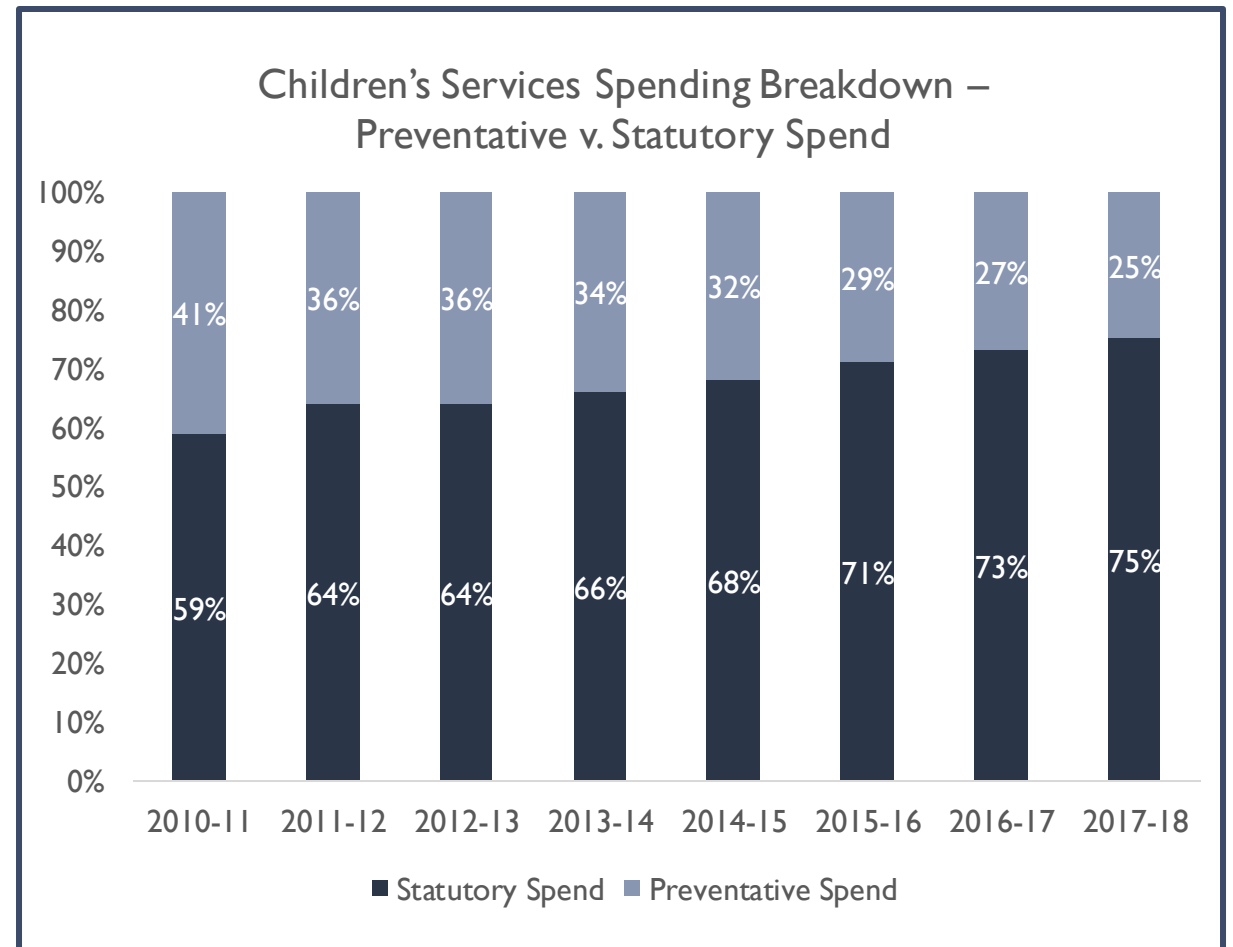
More details [here](#).

# EARLY HELP IS AN IMPORTANT PREVENTATIVE SERVICE, BUT HAS STRUGGLED TO MAINTAIN FUNDING 19

**Dilemma:** Early Help offers a diverse range of services to children and families. It also varies substantively across local authorities. Despite the local variation, it is seen as an important preventative service enabling young people and families to access key services and achieve better outcomes. But, it has struggled to maintain funding which has reduced over the last eight years.

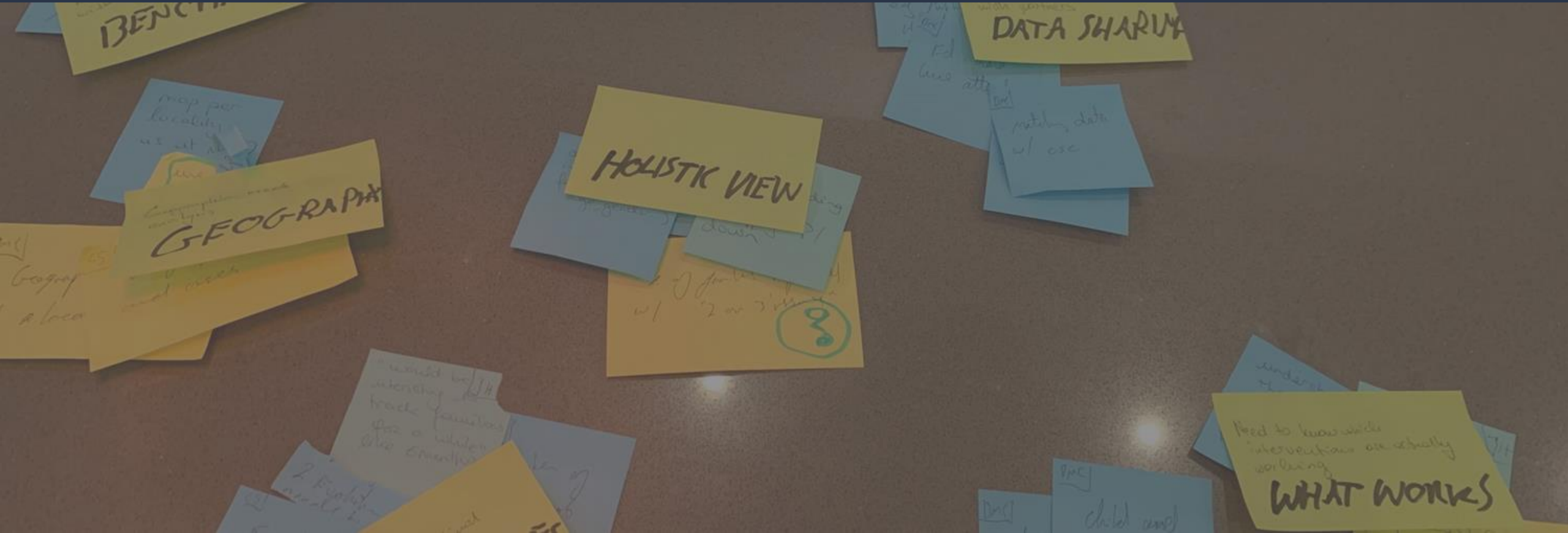
*“Early Intervention turns this conventional wisdom on its head by reaping massive savings in public expenditure for the smallest of investments in better outcomes, and by avoiding expensive provision when things go wrong. By building out the immense costs of failure, it is in fact the best sustainable structural deficit reduction programme available”*

Early Intervention: Smart Investment, Massive Savings, July 2011



Source: <https://www.nao.org.uk/report/pressures-on-childrens-social-care/>

# 3. USER RESEARCH REPORT



## 3. USER RESEARCH REPORT

### 3.1 | **User research approach**

### 3.2 | Findings – Early Help Leads

### 3.3 | Findings – National stakeholders

**To ensure we solved a common problem and developed an inclusive user research plan, we had to:**

**Identify local  
authorities**

**Identify users**

**Identify our **UR**  
approach**

# IDENTIFY THE RIGHT LOCAL AUTHORITIES – WE IDENTIFIED A GROUP OF TEN LOCAL AUTHORITIES THAT HAD DIFFERENT EARLY HELP MODELS, VARIED IN GEOGRAPHY, SIZE AND DEMOGRAPHICS, AND SHOWED INTEREST IN COLLABORATION

## Core Local Authorities

We conducted in-depth user research in each core authority to understand their early help offer and user needs. The core local authorities had different models for early help, children's services experiences and levels of deprivation



**CROYDON**



## Reference Local Authorities

We tested and validated user needs (through targeted selected semi-structured interviews and workshops) with seven additional local authorities from around the country to ensure we surfaced common user needs



# IDENTIFY THE RIGHT LOCAL AUTHORITIES – THESE COUNCILS VARY BY GEOGRAPHY, SIZE, AND DEMOGRAPHICS TO ENSURE DIVERSITY

## Locations






## Types of local authority

- Unitary authority x4
- London borough x2
- Metropolitan district council x2
- County council x1






# IDENTIFY THE RIGHT LOCAL AUTHORITIES – OUR CORE LOCAL AUTHORITIES ALSO VARIED ON KEY METRICS RELATED TO CHILDREN SOCIAL CARE AND DEPRIVATION

	# of Looked After Children	# of Child Protection Plans	Children's Services Ofsted	Index of Multiple Deprivation*
	819 (86 per 10k)	695 (73 per 10k)	Inadequate	102/317
	307 (48 per 10k)	183 (29 per 10k)	Requires improvement	183/317
	172 (48 per 10k)	118 (33 per 10k)	Good	289/317

\*1 is the most deprived

Source: Children looked after in England including adoption: 2018 to 2019, Characteristics of children in need: 2018 to 2019, Children looked after /on Child Protection Plan at 31 March, by local authority

## IDENTIFY THE RIGHT LOCAL AUTHORITIES - THE COUNCILS ALSO DIFFERED SIGNIFICANTLY IN THEIR SIZE AND APPROACH TO EARLY HELP

	Service size	Geographic model	Delivery approach
	150 Full-time employees	<b>Locality model</b> (three localities) – geographic hubs where support is delivered	<ul style="list-style-type: none"> <li>• Signposting to external services</li> <li>• Commissioning services,</li> <li>• Delivering services</li> </ul>
	120.5 Full-time employees	<b>Cluster model</b> (previously thematic) – Moving to geographic hubs for early help	<ul style="list-style-type: none"> <li>• Signposting to external services</li> <li>• Commissioning services,</li> <li>• Delivering services</li> </ul>
	7 Full-time employees	<b>Thematic model</b> – Focused on issue areas rather than geography	<ul style="list-style-type: none"> <li>• Mostly signposting to external services, with one commissioned service</li> </ul>

▶ DIFFERENCES IN SERVICES SIZE, GEOGRAPHIC MODEL, AND DELIVERY MODEL DEMONSTRATE THE BREADTH OF APPROACHES TO EARLY HELP AND THE VARIATION ACROSS PLACES

# IDENTIFY THE RIGHT USERS - WE IDENTIFIED THREE POTENTIAL USERS WHO NEED AND USE EARLY HELP DATA

Although the discovery focuses primarily on EH leadership's needs, we have also interviewed senior data analysts and national stakeholders



## EARLY HELP LEADSHIP

Person(s) responsible for Early Help services in local authority. They're responsible for high level decision-making on the EH offer and funding.

They are the core user for our work. We want to understand to what extent they use data to inform decision-making, and what are their needs.

11



## SENIOR DATA ANALYSTS

Managers of Data and Performance teams in Children Services, or analysts working on EH data.

They are in charge of data collation, analysis, interpretation and performance data to meet internal, external and statutory requirements.

10



## NATIONAL STAKEHOLDERS

Stakeholders from Central government involved in decision-making on funding EH at a national level (Troubled Families, MHCLG, Department for Education).

This project partially aims to support Councils to protect budgets for EH services. Hence, we need to understand what data is used centrally to inform decision-making on funding.

6

**WHO**  
is part of this user group?

**WHY**  
have we identified them as a user group?

**HOW MANY?**  
# interviews

# IDENTIFY THE RIGHT APPROACH - WE CARRIED OUT SEMI-STRUCTURED INTERVIEWS AND DOCUMENTS' ANALYSIS



## 27 semi-structured interviews



## Documents' analysis

- 45min - 1 hour semi-structured interviews
- 3 user groups (10 EH Leads, 11 senior analysts, 6 national stakeholders)
- A mixture of in person, zoom and phone interviews depending on constraints
- One interviewee at a time with two interviewers (one facilitating, one taking notes)
- The interview discussion guides can be accessed [here](#).

We collected information on services offered, strategy documents, data collected, reports produced, and data systems used in order to understand the variation in early help and early help data collection.

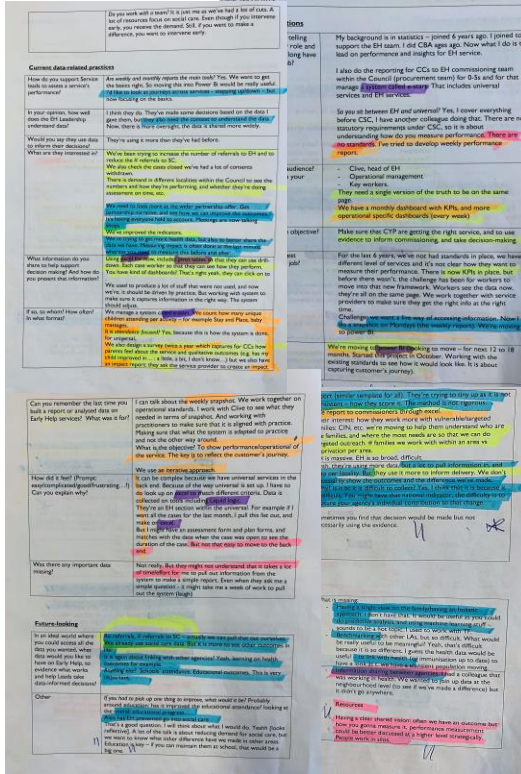
**Gender** breakdown:  
Male: 15  
Female: 12



**Data and technology literacy** was varied among Early Help Leads interviewed and high for senior analysts



# IDENTIFY THE RIGHT APPROACH - WE PERFORMED THEMATIC ANALYSIS OF THE INTERVIEW DATA TO DISCOVER THE USER NEEDS



1

**Interviews and coding** - We performed semi-structured interviews and coded all the notes

2

**Individual Council Synthesis** - We grouped the themes for each interview in each Council to identify key themes

3

**Across Council Synthesis** - We then did a synthesis of themes emerging across all interviews per council and then across councils

## 3. USER RESEARCH REPORT

3.1 | User research approach


**3.2 | Findings – Early Help Leads**

3.3 | Findings – National stakeholders

**We summarised our findings into: (1) a persona of early helps leadership insight needs; and (2) a deep dive that examines per insight need the data required and barriers that prevent local authorities from address them**

## Persona of Early Help Leadership Insight Needs

EARLY HELP LEADERSHIP HAVE A SERIES OF COMMON NEEDS... 30



**ROLE**  
Early Help leadership strive to deliver the right services to the right people at the right time

**MOTIVATIONS**

- Achieve a long-lasting positive impact in families' lives
- Reduce escalation to statutory services, while contributing to the identification of families already in need of these services
- Increase families' confidence to come and request Early Help services

These findings are based on interviews with EH leads and senior data analysts


---

STRATEGIC QUESTIONS		RELATED DECISIONS/ACTIONS
1. <b>Whom should we target?</b>	So that we can:	Prioritise spend on those most at-risk of entering social care or at risk of poor outcomes, adapt the offer to needs in each community, refine our outreach strategy
2. <b>What is the whole family picture?</b>	→	Design holistic interventions considering family as a whole, understand our overall impact on the family
3. <b>What interventions are best value for money?</b>	→	Invest in services that provide the best value for money and impact
4. <b>Have we made a real difference for the families we engaged with?</b>	→	Evidence that EH works, assess family outcomes
5. <b>How are we delivering services?</b>	→	Optimise service delivery through daily operational decisions



## Deep-Dive Per Insight Need

COMMON DATA NEED 1: **WHOM SHOULD WE TARGET?** 31



**I need to know:** **Whom should we target?**

**So that I can:** Prioritise spend on those most at-risk of entering social care or at risk of poor outcomes, adapt the offer to needs in each community, refine our outreach strategy

---

<p><b>To know this, I need data about</b></p> <ul style="list-style-type: none"> <li>• <b>who are the children at risk of going to social care where they live</b> and what are the risk factors</li> <li>• <b>who are the children/families we work with now</b> (characteristics and needs), <b>where</b> they live</li> <li>• <b>who will be the children/families in need tomorrow</b> (characteristics and needs), <b>where</b> do they live</li> <li>• <b>trends/hotspots</b> in each geographic area</li> </ul>	<p><b>Quotes</b></p> <ul style="list-style-type: none"> <li>• "[Early Help leads] want to understand where the most needs are so that we can do targeted outreach"</li> <li>• "Councilors are very committed to improving the lives of disadvantaged families so it's about services that really match those needs"</li> <li>• "Are we experiencing more presenting mental health issues across our population?"</li> </ul> <p><b>Barriers to getting the data I need</b></p> <ul style="list-style-type: none"> <li>• Information sharing</li> <li>• Quality of needs data</li> <li>• Lack of analytical capacity</li> </ul>
--	---



## ROLE

Early Help leadership strive to deliver the right services to the right people at the right time

## MOTIVATIONS

- Achieve a long-lasting positive impact in families' lives
- Reduce escalation to statutory services, while contributing to the identification of families already in need of these services
- Increase families' confidence to come and request Early Help services

These findings are based on interviews with EH leads and senior data analysts

## STRATEGIC QUESTIONS

1 **Whom should we target?**

*So that we can:*

2 **What is the whole family picture?**

3 **What interventions are best value for money?**

4 **Have we made a real difference for the families we engaged with?**

5 **How are we delivering services?**

## RELATED DECISIONS/ACTIONS

Prioritise spend on those most at-risk of entering social care or at risk of poor outcomes, adapt the offer to needs in each community, refine our outreach strategy

Design holistic interventions considering family as a whole, understand our overall impact on the family

Invest in services that provide the best value for money and impact

Evidence that EH works, assess family outcomes

Optimise service delivery through daily operational decisions





***I need to know:***

**Whom should we target?**

***So that I can:***

Prioritise spend on those most at-risk of entering social care or at risk of poor outcomes, adapt the offer to needs in each community, refine our outreach strategy

## ***To know this, I need data about***

---

- **who are the children at risk** of going to social care **where** they live and what are the risk factors
- **who are the children/families we work with now** (characteristics and needs), **where** they live
- **who will be the children/families in need tomorrow** (characteristics and needs), **where** do they live
- **trends/hotspots** in each geographic area

## ***Quotes***

---

- “[Early Help leads] want to understand where the most needs are so that we can do targeted outreach”
- “Councilors are very committed to improving the lives of disadvantaged families so it’s about services that really match those needs”
- “Are we experiencing more presenting mental health issues across our population?”

## ***Barriers to getting the data I need***

---

- Information sharing
- Quality of needs data
- Lack of analytical capacity



***I need to know:***

**What is the whole family picture?**

***So that I can:***

Design holistic interventions considering family as a whole, and understand our overall impact on the family

### ***To know this, I need data about***

---

- **family make-up** and context around the child
- family members' **previous and current engagement** with Early Help and Social Care services
- **needs** of the family members (e.g. mental health, substance abuse, etc.)
- **their interaction with specialist support services** - both internal services within the Council and services delivered by external partners

### ***Quotes***

---

- *“We’re all one council, don’t see why so many barriers”*
- *“We’ve got hard data on education and social care but there isn’t any hard data on health... That’s our biggest thing, so we’re not able to work holistically”*

### ***Barriers to getting the data I need***

---

- Information sharing
- Inability to track children across time (system design, data recording process)
- Joining data from different teams



***I need to know:***

**What interventions are best value for money?**

***So that I can:***

Invest in services that provide the best value for money and impact

## ***To know this, I need data about***

---

- **type of intervention** received by children/families (including overlap between different services and other potentially confounding factors)
- **meaningful data on outcomes** for each type of intervention: e.g. school attendance, mental health issues, and domestic violence, among others (See Need 4)
- **costs** of interventions
- **service performance** and families' engagement
- child & family views on the impact of the intervention(s)
- external evidence on "what works"

## ***Quotes***

---

- *"There's a missing piece on understanding whether the intervention is working"*
- *"We don't know which interventions are successful and which are not"*
- *"At the moment, the commissioning decisions are based on incomplete information"*
- *"Really, at the moment, it's a lot about funding"*

## ***Barriers to getting the data I need***

---

- Information sharing
- Methodological challenges about attributing impact
- Wide range of outcomes of interest
- Lack of information about alternatives

# COMMON DATA NEED 4: HAVE WE MADE A REAL DIFFERENCE FOR THE FAMILIES WE ENGAGED WITH?



*I need to know:*

Have we made a real difference for the families we engaged with?

*So that I can:*

Evidence that Early Help works, assess family outcomes

## To know this, I need data about

- **re-referrals** to Early Help, differentiating self-referrals from others
- children **stepping up to Children Social Care** post-intervention
- how many families **avoid escalation** to social care “thanks to Early Help”
- **wider outcomes** e.g. long-term impact on health, education or employment
- **reduction in level of needs** during intervention
- **child & family view** on the impact of the intervention(s)
- child & family journeys compared

## Quotes

- *“It would be interesting to track families for a while, like 6 months”*
- *“We need to understand their journey through the whole system”*
- *“We need more rigorous impact measurement processes like randomised control evaluation”*

## Barriers to getting the data I need

- Inability to track children across time (system design, data recording process)
- Methodological challenges (attribution of impact to EH, difficulty to interpret KPIs such as escalation as EH’s role is also to identify families in need)
- Lack of information sharing
- Data on outcomes



***I need to know:***

**How well are we delivering services?**

***So that I can:***

Optimise service delivery through operational decisions

## ***To know this, I need data about***

---

- **if we have the appropriate services** to match the needs in each community
- **workload** for case workers
- **timeliness of processes**
- **referral sources** and **quality of referrals** (e.g. number no further action)
- engagement from families (e.g. if self-referred, disengaged)
- staff resources and skills

To meet leads' needs, this data should be:

- ✓ "live"
- ✓ split by service/area/team/worker, etc.

## ***Quotes***

---

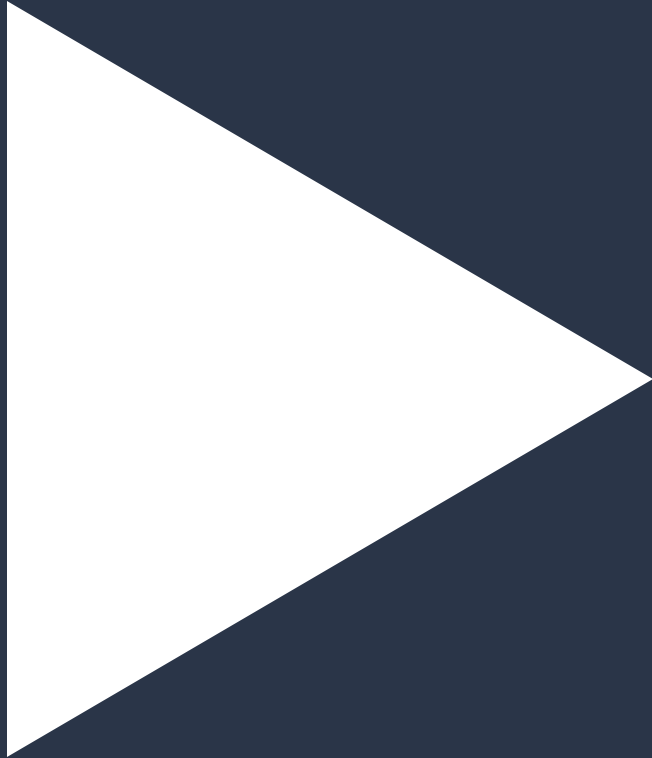
- *"There is demand in different localities within the Council to see the numbers and how they're performing, and whether they're doing assessment on time, etc."*

## ***Barriers to getting the data I need***

---

- Information centralisation from external delivery partners
- Benchmarking (partially common need across councils)
- Data quality (partially common need across councils)

# DEEP DIVE: EXISTING DATA ON EARLY HELP



# TODAY, EARLY HELP LEADS OFTEN HAVE LIMITED INSIGHT ON A CHILD'S JOURNEY THROUGH EARLY HELP...

*"We need to understand their journey through the whole system"*

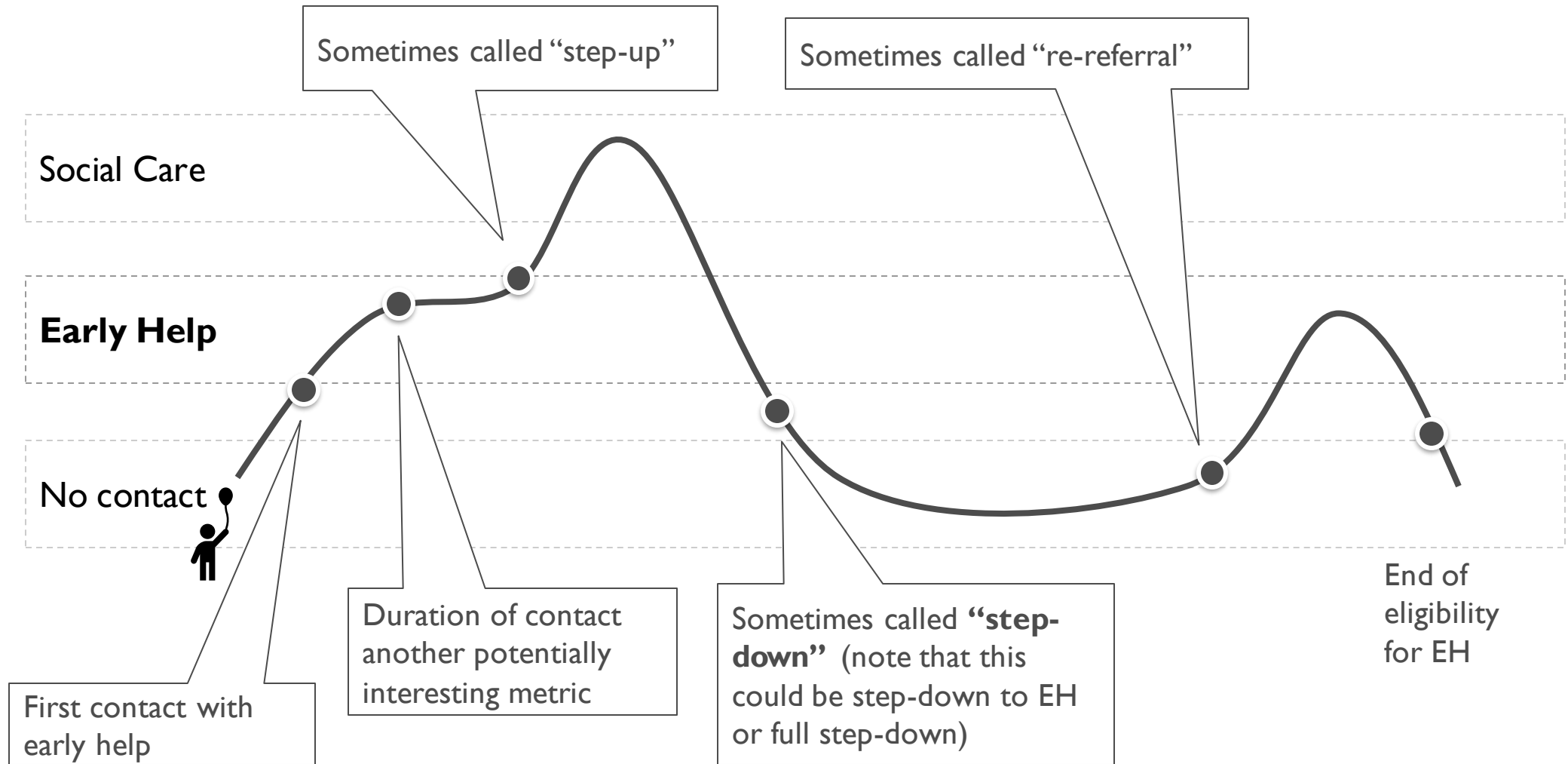
*"Families should be tracked for awhile (say 6 months) to see if there were any re-referrals"*

*"[Would like to evidence EH by] tracking families' journey and levels of interventions, how many go from universal to EH and then back to universal again. Also, interactions between different level of interventions."*

*"It would be useful to see if the families come back later on (as one of the first questions she asks when starting with the case: 'has the family been with us before') also 'has the family self-referred' as self-referral is positive"*

*"What would be your first go to evidence on EH? I would look at their journey through the system. For all people coming to EH, what are the outcomes: do they close/escalate up/down, and look again 6 months after."*

...BECAUSE THEY CURRENTLY COLLECT DATA ON ONLY CERTAIN PARTS OF AN EARLY HELP JOURNEY OR FIND IT DIFFICULT TO LINK THEM

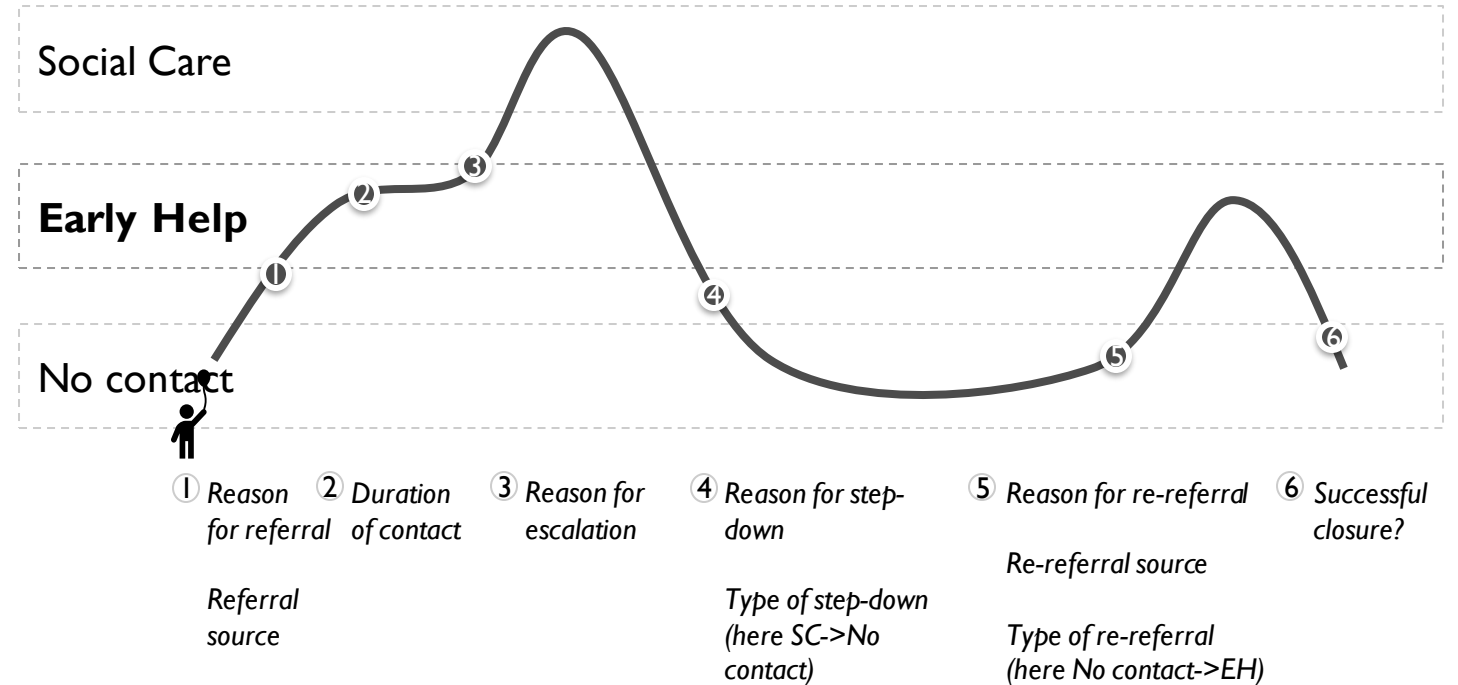




# WHAT WE LEARNED...

- **Councils capture data along the journey through Early Help.** However, there are limited common definitions or metrics. This makes it hard to interpret what happens to children and families against KPIs and benchmarks and makes it impossible to share learnings
- **Standardising and collecting common data and metrics would provide EH leadership with a more consistent view** of a child's and family's journey and enable benchmarking between councils
- **Focusing on the child's and family's journey** to test the potential solutions in the next stage could **quickly add value to councils** in terms of learning the drivers behind various journeys

## What if we could understand what is shaping this journey?



## 3. USER RESEARCH REPORT

3.1 | User research approach

3.2 | Findings – Early Help Leads

**3.3 | Findings – National stakeholders**

We conducted user research with the Department of Education's Children Social Care Directorate and the Ministry of Housing, Communities and Local Government's Troubled Families Programme in order to understand their decision-making needs as the major funders of early help services

4

*Interviews*



Ministry of Housing,  
Communities &  
Local Government

*Troubled Families Programme*

2

*Interviews*



Department  
for Education

*Children Social Care directorate*



## Ministry of Housing, Communities & Local Government

*Troubled Families Programme*

### **Role in the Early Help landscape**

The Troubled Families Programme (TF) is working to achieve sustained progress with up to 400,000 families with multiple, high-cost problems by 2020. This is backed by £920m of government investment. It is delivered by local authority teams and is branded differently across the country; programmes must meet a set of criteria to get TF's funding.

*“We would see ourselves as being interested in the whole Early Help system. When the programme started, it built on specific intensive interventions with families. Since then, we’ve expended the programme from early intervention to edge of care support intervention”.*

### **Objectives**

- Improve life for families and tackle worklessness
- Transform services to reduce demand for reactive services and improve value for money
- Demonstrate that this way of working results in savings for the taxpayer



# Ministry of Housing, Communities & Local Government

Troubled Families Programme

## UNANSWERED QUESTIONS ABOUT:

---

- How and why does the programme have an impact?
- Which interventions work/do not work? Which ones have the best value for money?

## QUOTES

---

*"We see that the Troubled Families programme has a positive impact, but we do not see how"*

*"We don't have very much data on the actual interventions happening with families...we don't really know what support they receive. There's a gap in understanding what works. Is it parenting that is the key thing? Is a certain solution more efficient with certain families?"*

*"Monitoring outcomes over time and having a longitudinal view is a good start."*

*"Underneath our own framework, Councils come up with different approaches to measure outcomes. For example, one area had a problem with people going to the dentist and set this up as a local KPI."*

## BARRIERS

---

- Getting good quality data from local authorities
- Local authorities have a variable access to data from other services (e.g. data on domestic abuse, drug & alcohol misuse, housing, police call outs and health are missing at individual level)

## Role in the Early Help landscape

Through their work to support Children Social Care as a whole, they indirectly impact Early Help services, although it is not their core focus. This includes:

- Securing from Treasury sustainable level of funding to local authorities for Children Social Care. They may build a business case for a specific type of intervention to defend investment.
- Set a favorable context for local authorities to develop the best Children Services adapted to local needs. Examples:
  - Programme to empower the workforce
  - National Learning System, supporting local authorities to learn from failures
  - Financial contribution to the *Early Intervention Foundation*, evaluating “what works” and sharing evidence



Department  
for Education

*Children Social Care directorate*



# Department for Education

Children Social Care directorate

## THEY NEED DATA ABOUT...

---

- Costs
- Current level of demand and needs
- To forecast evolution in needs: trends on anything strongly correlated with EH/CSC, e.g. child poverty, level of deprivation, mental health, drug and alcohol misuse
- Outcomes, with a strong focus on decreasing the number of children going into social care
- The nature of the Early Help offer in each local authority

## QUOTES

---

*“It is a very challenging financial environment, and lots of local authorities have said they had to cut back services that are valuable”*

*“All local authorities should have some form of evidence that problems are addressed as early as possible.”*

*“The main data we use to inform our decisions is the financial return sent from the section 251, which breaks down spending on Children Services from the higher end to core safeguarding costs.”*

*“At national level, the sector’s lobby focuses on one outcome: decreasing the number of children into social care. At a local level, they are more interested in the complex picture of what was the broader impact[...]. You can’t measure the impact with a single KPI.”*

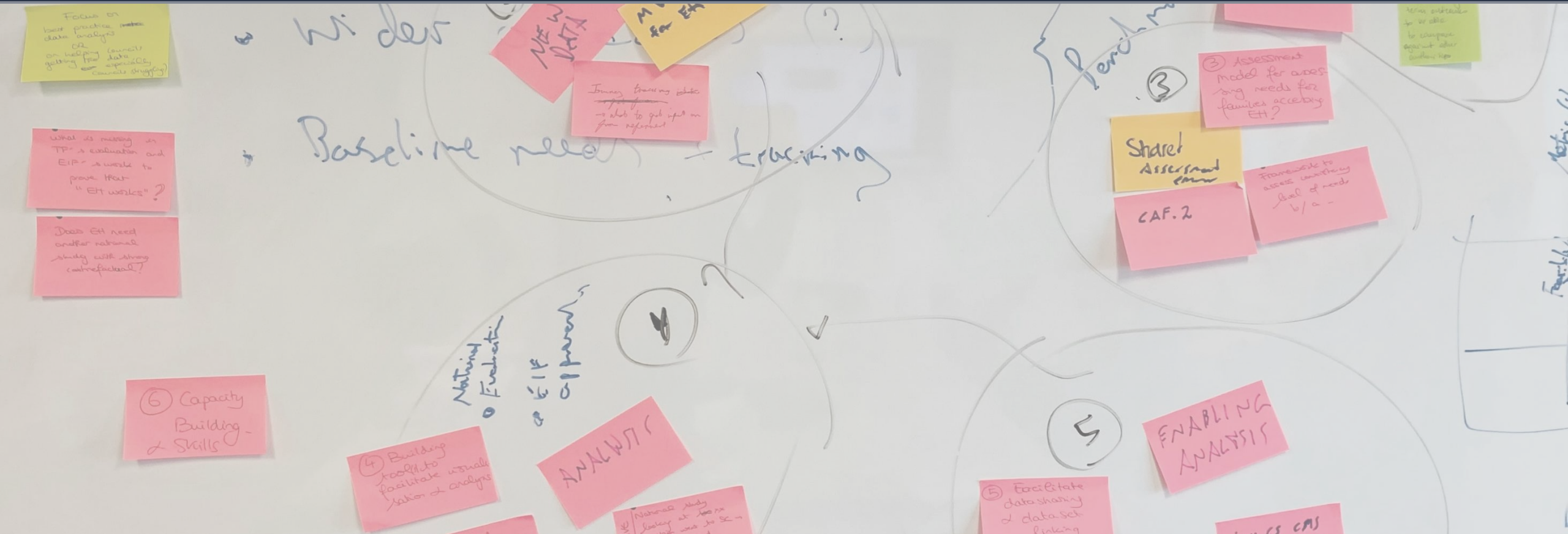
*“To understand evolution in needs, we look at figures like child poverty, level of deprivation, any measure in the population that we know are strongly correlated with CSC such as mental health and drug and alcohol and we feed them into the model.”*

## BARRIERS

---

- Information sharing: there is no link with Health and Police datasets, so DfE doesn’t know the overall public investment into Early Help services.
- The diversity of EH offer across Councils makes the comparison difficult

# 4. OPTIONS FOR ADDRESSING USER NEED





## 4. OPTIONS FOR ADDRESSING USER NEED

### 4.1 | **Our approach to ideation**

### 4.2 | High Level Alpha Plan and Next Steps

# WE TOOK A FIVE-STAGE APPROACH TO IDEATION AND PRIORITISATION OF POTENTIAL OPTIONS

1

**Prioritise user needs**

2

**Identifying gaps in existing solutions**

3

**Refining the specific data needs to be addressed**

4

**Exploring potential options**

5

**Prioritising potential options**



WE WILL DO A DOT VOTING EXERCISE TO PRIORITISE THE HIGH LEVEL USER NEEDS

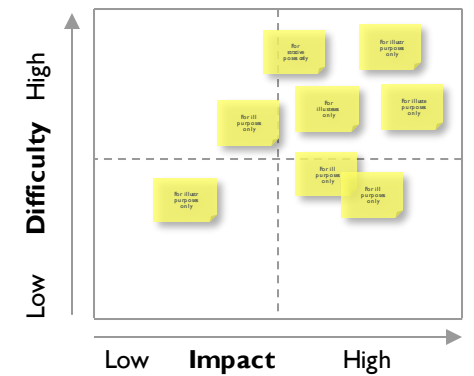
- 1 Whom should we target?
- 2 What is the whole family picture?
- 3 What user needs are best value for money?
- 4 How we made our difference for the families we engaged?
- 5 How are we delivering services?

WE WILL NOW EXPLORE THE PRIORITISED NEEDS A LITTLE DEEPER

1. What would it take to meet the prioritized user need?
2. What impact would it have on the decision making of early help leadership?
3. How far are we from meeting this need?

Ministry of Housing, Communities & Local Government

Indicator Number	Indicator Title	Priority	Apr-19	May-19
<b>Early Help - Strategic Indicators</b>				
EH1	Number of requests for Early Help			
EH2	Percentage of re-referrals within 12 months	00		
EH3	Number of cases (children) open to Early Help at the end of the month			
EH4	Number of cases (family) open to Early Help at the end of the month			
EH5	Number of Early Help assessments completed			
EH6	Number of Early Help cases closed			
EH7	Percentage of successful family referrals	00		
EH8	Percentage of cases closed with service user feedback	00		
EH9	Percentage of Early Help cases closed that were successful	00		
EH10	Number of EH19s that were stopped down from the list of Early Help			
EH11	Number of EH20 cases where Early Help was delivered in partnership			
EH12	Number of partner who have achieved a 'Good' or 'Very Good' rating	00		
<b>Early Help - Operational Indicators</b>				
EH13	Number of shared care referrals			
EH14	Percentage of cases allocated a worker within 2 working days	00		
EH15	Number of cases (children) that had contact from the provider after discharge			
EH16	Percentage of cases that had no contact from the provider after discharge	00		

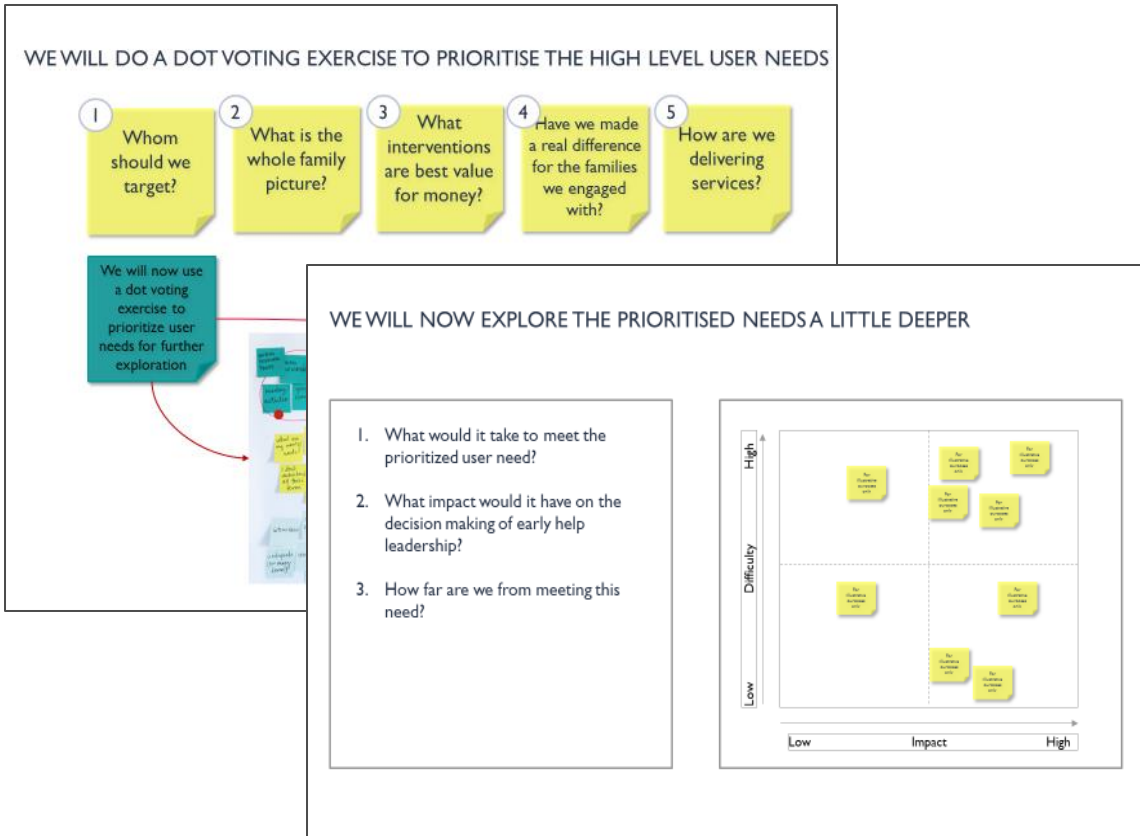


# I **PRIORITISE USER NEEDS:** TOGETHER WE PRIORITISED USER NEEDS AND WHICH OF THE STRATEGIC QUESTIONS WOULD ADD THE MOST VALUE TO EARLY HELP LEADS

**Prioritising one of the strategic questions coming out of the user research would enable us to focus our ideation process for how best to address the user need.**

We have completed prioritisation exercises using surveys and workshops to ensure that all participating councils can collaborate:

- **In-person workshop:** We ran a workshop and used dot voting to prioritise questions
- **Digital Survey and workshop:** We used a digital survey and workshop to capture the voice of a wider range of councils to ensure that we are prioritising a truly common strategic question



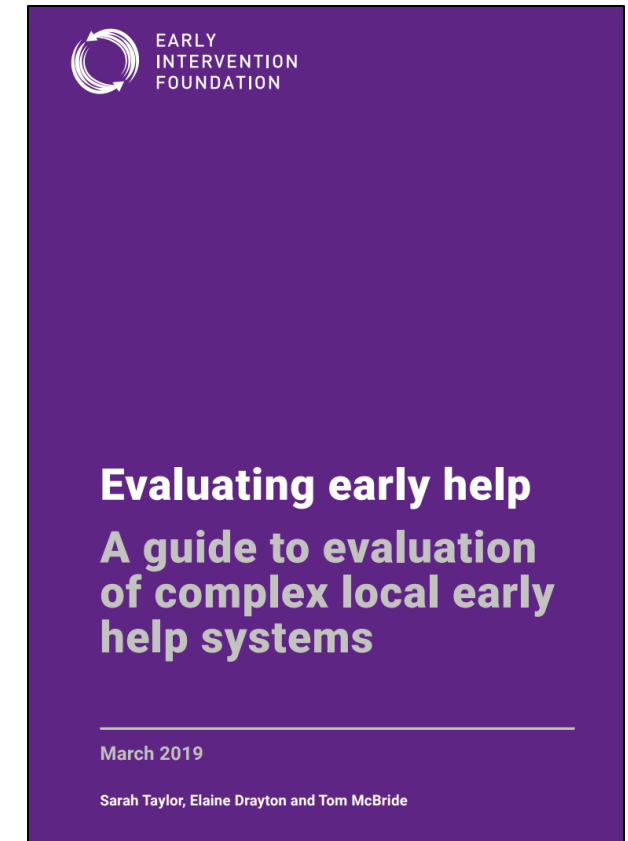
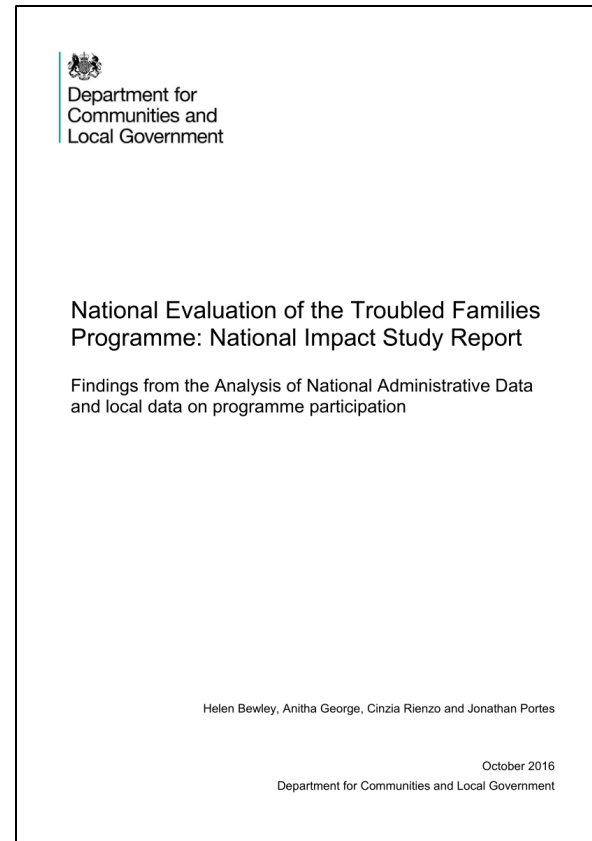
**IN TOTAL, 67% OF USERS IDENTIFIED QUESTION 4: "HAVE WE MADE A REAL DIFFERENCE FOR THE FAMILIES WE ENGAGED WITH?" AS FIRST OR SECOND MOST IMPORTANT PRIORITY**

## 2 IDENTIFYING GAPS IN EXISTING SOLUTIONS

### WHAT NATIONAL SOLUTIONS EXIST?

#### National Solutions - do not provide local authorities with the tools needed to evaluate their early help programme

- **Early Intervention Foundation** provides evidence on what interventions may work. This can inform commissioning decisions on what interventions to implement but does not help local authorities evaluate their service.
- **The Troubled Families' national evaluation** is designed to inform MHCLG and HMT on the impact of early help provision. However, it is not sufficiently granular to provide local authorities insight into their early help service or focused on the range of outcomes local authority early help services think are meaningful.



THERE IS CURRENTLY NO COMMON DATA FRAMEWORK THAT COUNCILS CAN USE TO SUPPORT THEM TO UNDERSTAND WHETHER THEY'VE MADE A DIFFERENCE

## 2 IDENTIFYING GAPS IN EXISTING SOLUTIONS

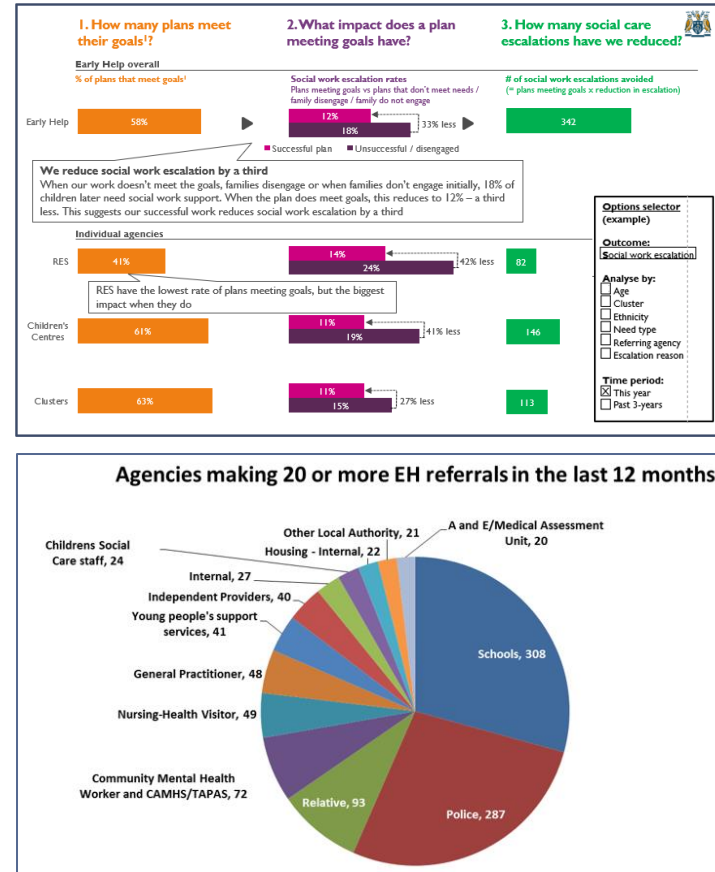
### WHAT LOCAL AUTHORITY SOLUTIONS EXIST?

**Local authorities solutions – are focused on evaluating their specific way of delivering early help which does not lend itself to comparative analysis or benchmarking externally with other LA's.**

While some councils are able to produce rather comprehensive data and analysis, many consider the way they currently capture impact as not satisfactory.

Furthermore, all councils lack the ability to benchmark against others to understand what their targets should be and to learn from other practices.

2.2 HOW WELL DOES EARLY HELP WORK? WHAT WORKS BEST?



Indicator Number	Indicator Title
<b>Early Help - Strategic indicators</b>	
EH 1	Number of referrals into Early Help
EH 2	Percentage of re-referrals within 12 months
EH 3	Number of cases (children) open to Early Help at the end of the month
EH 4	Number of cases (family) open to Early Help at the end of the month
EH 5	Number of Early Help assessments completed
EH 6	Number of Early Help cases closed
EH 7	Percentage of cases closed due to family disengaging with support
EH 8	Percentage of cases closed with service user feedback
EH 9	Percentage of Early Help cases closed that were stepped up to CSC
EH 10	Number of referrals that were stepped down from CSC into Early Help
EH 11	Number of CSC cases where Early Help are delivering an intervention
EH 12	Number of families who have achieved a Troubled Families Outcome
<b>Early Help - Operational indicators</b>	
EH 13	Number of allocated cases (children)
EH 14	Percentage of cases allocated to a worker within 2 working days
EH 15	Number of cases (children) that had contact from the service after allocation
EH 16	Percentage of cases that had first contact from the service within 2 working days of allocation



THERE IS CURRENTLY NO COMMON DATA FRAMEWORK THAT COUNCILS CAN USE TO SUPPORT THEM TO UNDERSTAND WHETHER THEY'VE MADE A DIFFERENCE

## 2 IDENTIFYING GAPS IN EXISTING SOLUTIONS: THERE ARE STRONG VARIATIONS IN DATA COLLECTION AND REPORTING PROCESSES (1/2) 54

Across four councils, we have analysed at least 17 reporting tools and strategy documents alongside the 27 user research interviews and have uncovered the following variations in the existing data collection and reporting solutions:

Why are there gaps in existing solutions?	Examples from report analysis and synthesis
<p><b>Early Help definition:</b> Councils use different definitions of Early Help when capturing data</p>	<p>Some Councils consider Early Help as targeted interventions only, others include some universal services such as Early Years</p>
<p><b>Data Collection:</b> Councils don't collect the same type of data</p>	<p><i>Data fields</i> – Some Councils collect outcomes data (e.g. whether outcomes have been achieved), others don't and only focus on outputs (e.g. the speed of response to a referral)</p> <p><i>Data capture processes/systems</i> – In some Councils, all Early Help data is recorded consistently in a single case management system. In others, the data is captured in service specific case management systems which cannot be integrated to create a shared view of the child and families experience with Early Help.</p>

## 2 IDENTIFYING GAPS IN EXISTING SOLUTIONS: THERE ARE STRONG VARIATIONS IN DATA COLLECTION AND REPORTING PROCESSES (2/2) 55

Across the four core councils, we have analysed at least 17 reporting tools and strategy documents alongside the 27 user research interviews and have uncovered the following variations in the existing data collection and reporting solutions:

<b>Why are there gaps in existing solutions?</b>	<b>Examples from report analysis and synthesis</b>
<p><b>Metrics:</b> Councils use different metrics to measure performance against similar objectives</p>	<p>To measure progress made by a child or family, one Council measures the “number of completed interventions where there was a positive direction of change”, whereas another tracks the “number of families who have achieved a Troubled Families Outcome“. Also, the inconsistencies in metrics result in inconsistencies in the data fields collected.</p>
<p><b>Metrics' definition:</b> There is no shared definition of terms commonly used in metrics</p>	<p>There is ambiguity behind commonly used terms such as "referral", "open case", "closed case", "intervention", due to a lack of agreed definitions. As a consequence, reports may be interpreted in differently.</p>
<p><b>Tools/Visualisations:</b> Councils use different analysis and visualisations tools</p>	<p><i>Analysis Tools</i> – Councils use excel and PowerBi to create reports and dashboards</p> <p><i>Visualisations</i> – No common themes on how metrics and data is presented in terms of demographics, time scales, chart types, etc.</p>

### 3 REFINING THE SPECIFIC DATA NEEDS TO BE ADDRESSED -

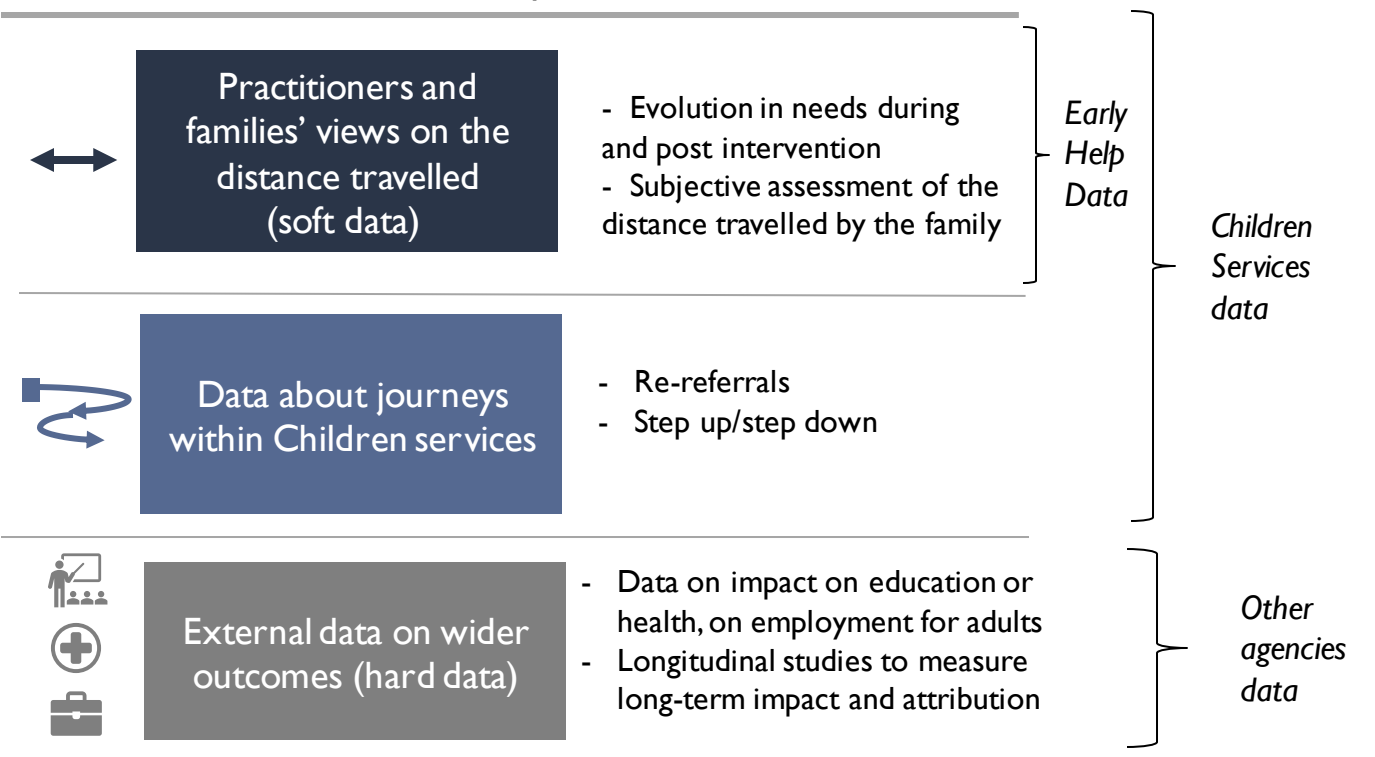
GETTING A FULL ANSWER TO THIS QUESTION REQUIRES ACCESSING A WIDE RANGE OF DATA, BOTH FROM CHILDREN SERVICES AND FROM EXTERNAL AGENCIES

**Strategic question:** *Have we made a real difference for the families we engaged with?*

#### Sub-questions

- *Have children and families' needs been met or decreased by the end of the Early Help intervention?*
  - *Do members of the families think we've made a difference?*
  - *Is it sustainable?*
- 
- *Do they come back to Early Help post-intervention?*
  - *Are we preventing them from escalation to statutory services?*
- 
- *Are we having an impact on wider outcomes (e.g. health, education or employment) on the short and long-term?*

#### Data needs: to answer these questions, we need data about...





## 4 EXPLORING POTENTIAL OPTIONS

We brainstormed several different options that could address the user need and provide Early Help leadership with the right insight

A METRICS LIBRARY	B SHARED ANALYSIS TOOLS	C EVALUATION OF EARLY HELP NATIONALLY	D COMMON ASSESSMENT FRAMEWORK	E DATA MODEL
Develop a library of metrics to help measure progress against key questions for early help leads	Develop a shared analysis tools that enable cross council comparisons	Run an evaluation to help evidence whether early help works across councils	Build a new common assessment framework to measure needs as children and families come into contact with early help taking into account the different EH service delivery models	Define a comprehensive data model for early help that outlines best practice on what data to collect and when, while considering the varied service delivery models

## 5 PRIORITISING AND ORDERING POTENTIAL OPTIONS

In our prioritisation and analysis of potential options, three emerged as being technically feasible and high impact.

In alpha, we want to test whether they address user need and are technically feasible either on their own or in some combination of all three options.

*Low Difficulty /  
Low Impact*

*Low Difficulty /  
High Impact*

**E** DATA MODEL

**B** SHARED ANALYSIS TOOLS

**A** METRICS LIBRARY

**C** EVALUATION OF  
EARLY HELP  
NATIONALLY

**D** COMMON ASSESSMENT  
FRAMEWORK

*High Difficulty /  
Low Impact*

*High Difficulty /  
High Impact*

# 5 THREE POTENTIAL OPTIONS EMERGED AS BOTH IMPACTFUL AND TECHNICALLY FEASIBLE



Data model

List of metrics and definitions built through a cross-council project

Data analysis tools (including dashboards)



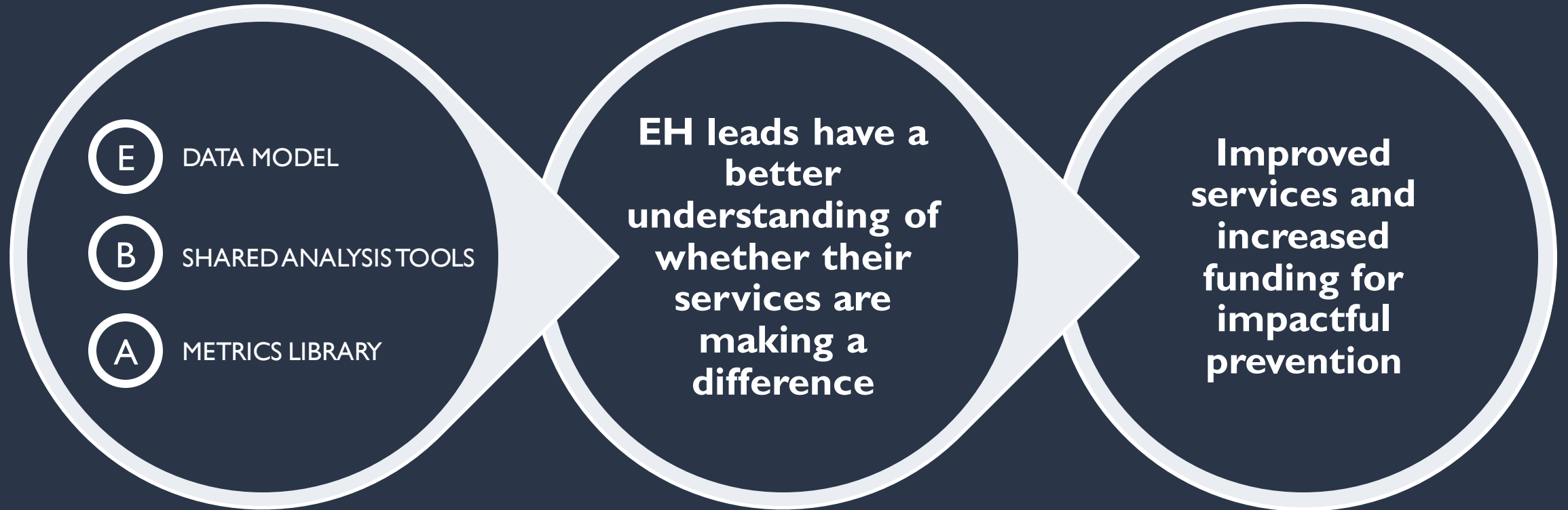
**Objective:** Establish what data is needed to be captured to understand the experiences of children and families accessing Early Help

**Objective:** Shared vision across Councils on understanding whether they've made a difference, allowing Councils to benchmark against key metrics

**Objective:** Empower and enable Councils to analyse this data and learn

- ▶ WE WILL PROTOTYPE AND TEST WHETHER THESE POTENTIAL OPTIONS ADDRESS THE USER NEED AND ENABLE EARLY HELP LEADERSHIP TO ANSWER THE STRATEGIC QUESTION: HAVE WE MADE A REAL DIFFERENCE FOR THE FAMILIES WE ENGAGED WITH?
- ▶ THE EH SERVICE DELIVERY MODELS VARY ACROSS COUNCILS AND THE OPTIONS WOULD BE SHAPED TO ACKNOWLEDGE THESE DIFFERENCES

# THE OPTIONS SHARE A COMMON HIGH-LEVEL THEORY OF CHANGE



## 4. OPTIONS FOR ADDRESSING USER NEED

4.1 | Our approach to ideation

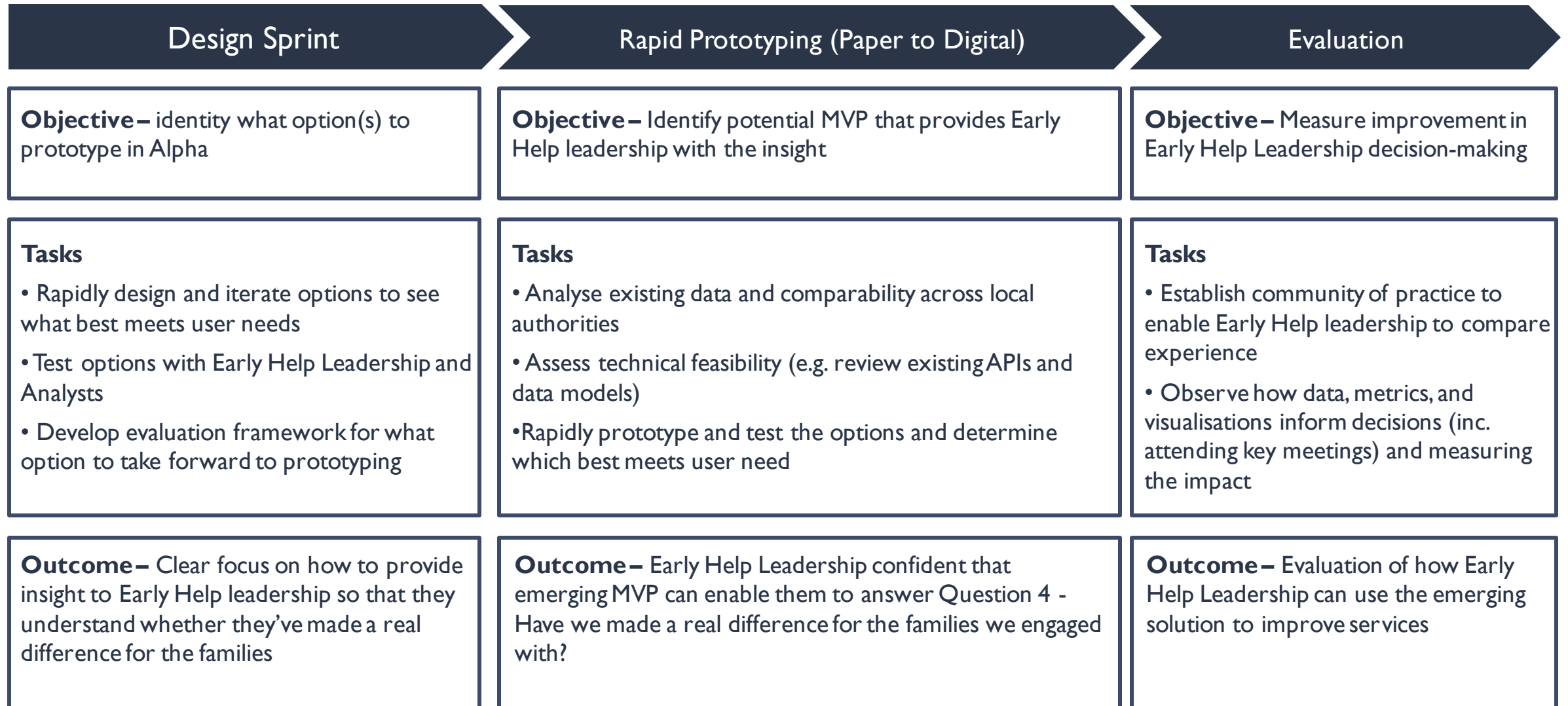
**4.2 | High-Level Alpha Plan and Next Steps**

### **At the end of discovery, we have:**

- ✓ Identified the key user needs of early help leadership, what they're trying to achieve
- ✓ Highlighted the key constraints that prevent Early Help leadership access the insight they need and believe they can be overcome.
- ✓ A clear problem to solve
- ✓ A list of ideas to test at alpha (Journey in children services, Distance travelled, and Wider outcomes) and an idea of which we'll test first (Journey in children services)
- ✓ Clear theory of change for how our options will improve services for children and families and inform wider government policies (inc. DfE and troubled families)

- 1 | Test riskiest assumptions** – The alpha team will identify, prioritise and test our riskiest assumptions (e.g. which idea will most likely solve the user need, what data already exists) and test them
- 2 | Prototype and iterate** – The alpha team will design, test, and iterate a prototype that provides Early Help Leadership access to the right information
- 3 | Scalable and cost effective** – our key constraints are scalability so that any emerging MVP can be used by 152 children's services departments and be affordable to build and maintain
- 4 | Inform national policy** – we work closely with DfE and MHCLG troubled families team to ensure that any emerging solution also feeds into wider policy and spend decisions

# HIGH LEVEL ALPHA PLAN – OBJECTIVES, TASKS, AND OUTCOME





## TEAM

**Team skills:** user research, project management, data science, business analysis, experience using and understanding of Early Help

## DEPENDENCIES

- Access to consistent Early Help data across participating councils
- Active involvement from Early Help leadership and analysts to test and iterate prototype and openness to embed any emerging solution(s) into day-to-day practice
- Access to existing systems to test integration of options with 'as is' and access technical feasibility.

## Outcomes and KPIs

- Leadership more confident in their ability to evaluate early help
- Fewer children unnecessarily escalating to care

## PROCESS AND DELIVERABLES

### 2-week design “sprint”

- Design potential data, metrics and visualisations

### Early Help Evaluation MVP

- Test the three different options (and combinations of these options) to see whether they can improve decisions, services and outcomes across at least 5 councils

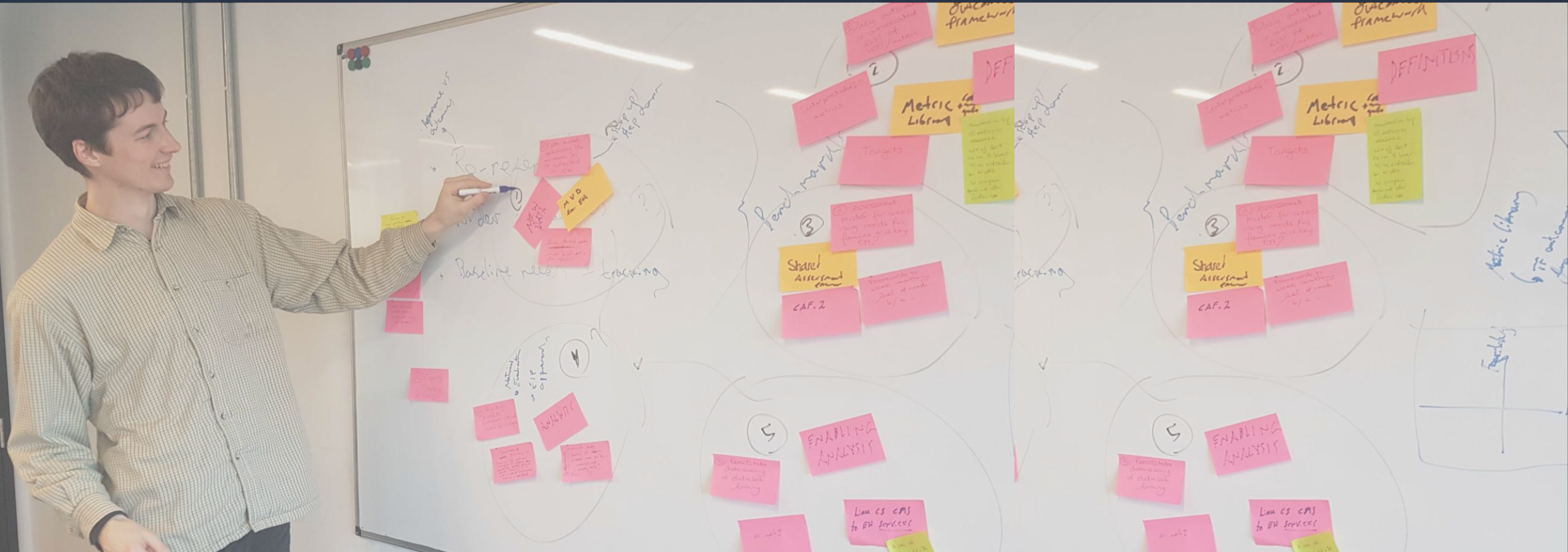
### Develop “community of practice”

- Create a forum for early help leadership to test and iterate the options and share best practice

### Evaluation

- Test how the options and emerging MVP improves decisions

# 5. BUSINESS CASE



## 5. BUSINESS CASE

### 5.1 | **Our approach to the business case**

### 5.2 | Costs and benefits case

## ALTHOUGH CHALLENGING TO EVIDENCE, THERE IS SOME CONSENSUS AROUND THE LONG TERM BENEFITS OF EARLY INTERVENTIONS IN GENERAL

68

Public Health  
England

*“Evidence shows that prevention and early intervention represent good value for money. Well-chosen interventions implemented at scale, help avoid poor health, reduce the growth in demand on public services, and support economic growth”*Business Plan 2018-19

Action for  
Children & The  
Children's Society

*“The wider, long-term benefits [of Early Intervention] that accrue to the whole of society have the potential to provide the biggest pay-offs. They are critical to understanding the value of early intervention and why it should be prioritised”*Losing in the Long Run

Graham Allen MP,  
on behalf of HMG

*“Early Intervention turns this conventional wisdom on its head by reaping massive savings in public expenditure for the smallest of investments in better outcomes, and by avoiding expensive provision when things go wrong. By building out the immense costs of failure, it is in fact the best sustainable structural deficit reduction programme available”* - Early Intervention: Smart Investment, Massive Savings, July 2011

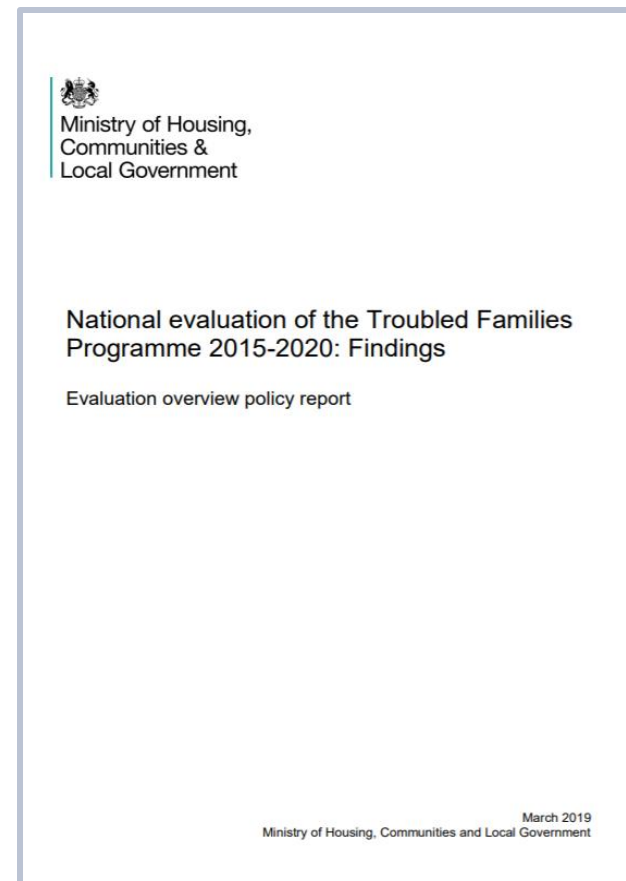
# THIS BUSINESS CASE DRAWS ON EVIDENCE FROM THE EVALUATION OF THE TROUBLED FAMILIES PROGRAMME

## Why?

- Troubled Families (TF) funds a variety of early help services (not intervention-specific) all over the country (not geography-specific).
- TF evaluation provides a **rigorous and conservative evidence basis** of the impact of an early help programme by using a Propensity Score Matching approach and following HM Treasury's Green Book<sup>1</sup>. It is the most robust evidence-based evaluation of an Early Help programme nationally, in a field where reliable data is scarce.
- We acknowledge, however, that the TF's cohort is not fully representative of the overall Early Help's cohort: families receiving TF support are mostly either in the higher end of early help or already supported by statutory services (*40% of them had a child that was under a Child in Need Plan, on a Child Protection Plan or Looked After, or a combination of these, in the year before starting the programme*).<sup>2</sup>

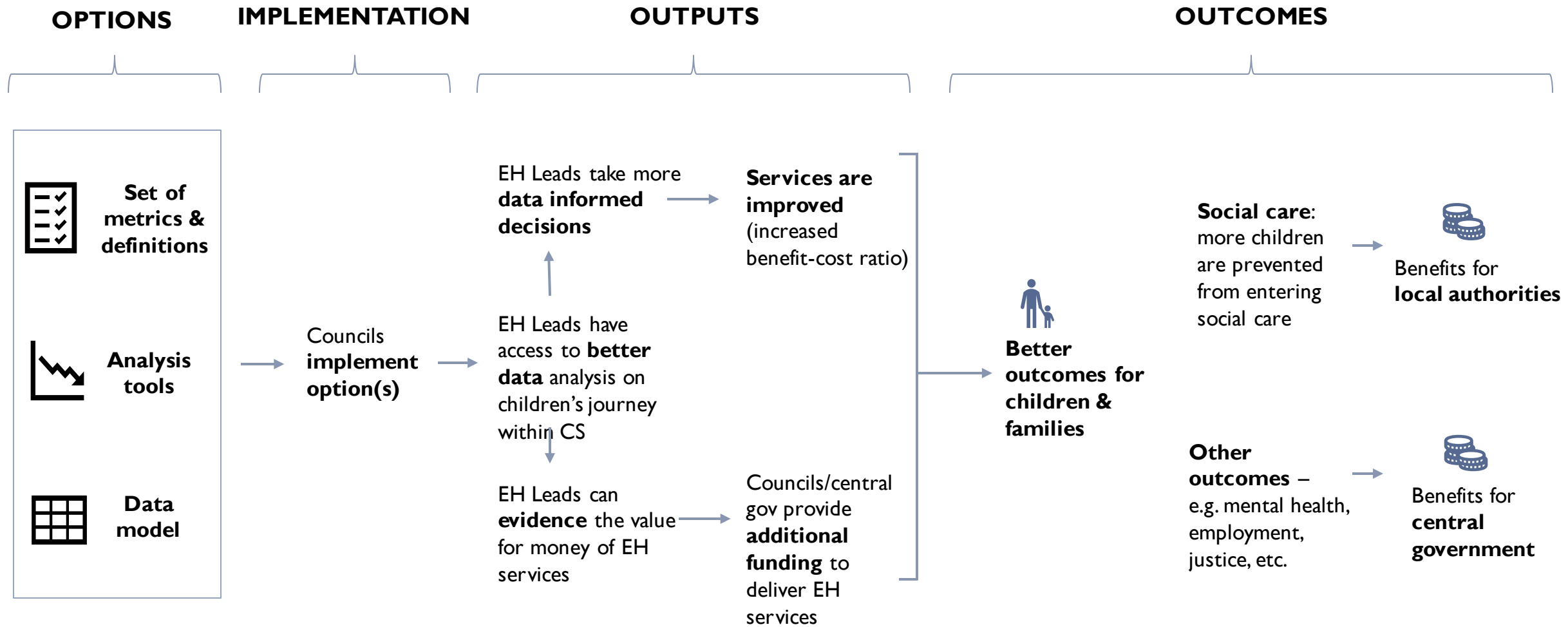
## How?

- We make the **assumption that the Troubled Families benefit-cost ratio is the same as the benefit-cost ratio for early help** more generally
- We model our solution as having an impact through a % increase on the TF benefit-cost ratio



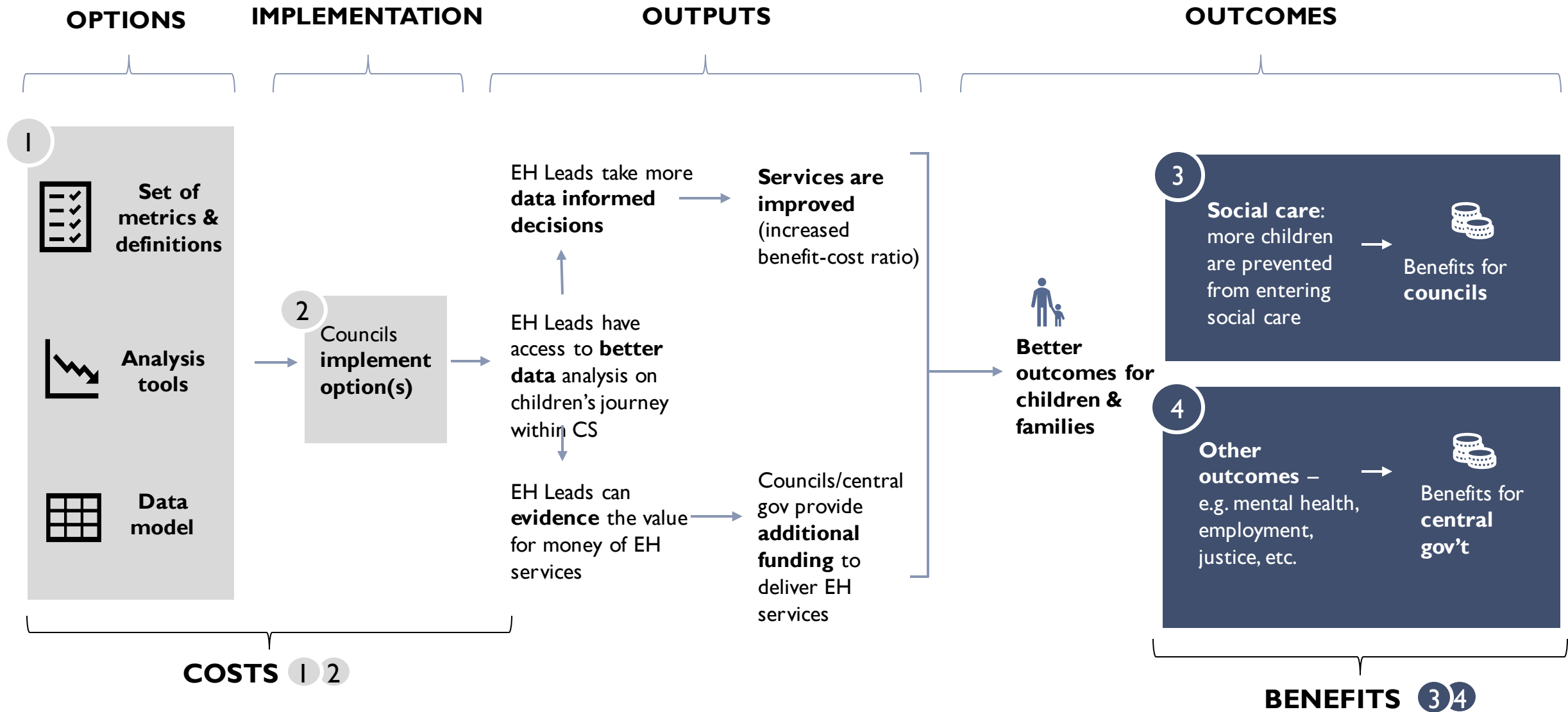
1. More details in the **TF March 2019 evaluation**

2. Families on the TF Programme have multiple needs and, to be eligible for the programme, must meet two or more of the national criteria: 1. Adults out of work or at risk of financial exclusion, or young people at risk of worklessness; 2. Children not attending school regularly; 3. Children of all ages, who need help, identified as Children in Need or subject to a Child Protection Plan or Looked After Children; 4. Parents or children with a range of health problems (including drug or alcohol misuse); 5. Parents or children involved in crime or anti-social behaviour; 6. Families affected by domestic violence and abuse.

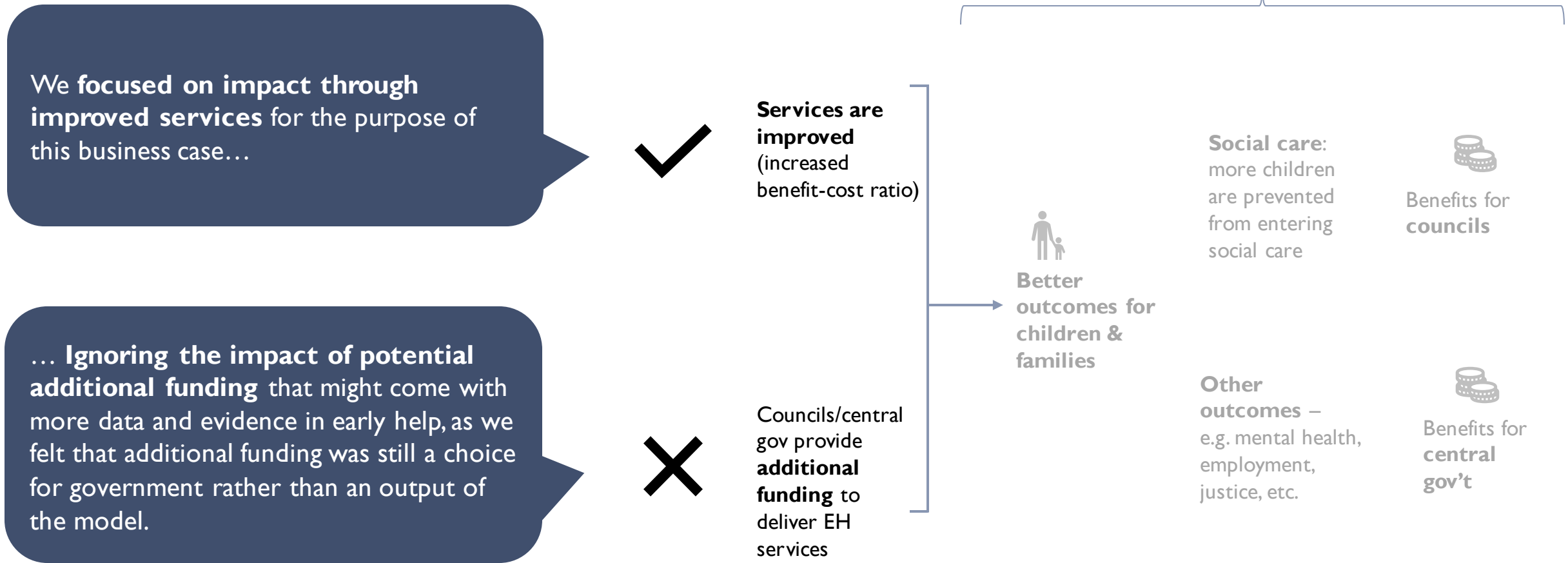


\*As an additional benefit, this solution would potentially lead to the right children being referred to social care

# WE REMOVED THE IMPACT OF ADDITIONAL FUNDING FROM OUR MODEL...FOCUSING ON IMPROVED SERVICES




# WE REMOVED THE IMPACT OF ADDITIONAL FUNDING FROM OUR MODEL...FOCUSING ON IMPROVED SERVICES



▶ MANY STAKEHOLDERS BELIEVE HOWEVER THAT THIS SOLUTION WOULD LEAD TO FURTHER INVESTMENT.  
"Greater engagement in the building of the evidence-base around early help and preventative services, at a time when such spend is coming under pressure, is likely to be important if funding for them is to be maintained" - *Making Sense. Understanding the drivers of variation in spend on Children's Services, 2018*



**We've included six outcomes in our benefit model to capture the impact of early help on children and families. We believe our solution will make Early Help even more impactful.**




**Social care:** more children are prevented from entering social care

- Impact:** Children accessing TF were:
- **Children Looked After** - 32% less likely to escalate to care at 19-24 months after joining the programme.
  - **Children Protection Plan** - 11% more likely to be on a child protection plan probably due to earlier identification of need. This is an added cost.

**Key assumption:** We make the assumption here that the impact of Early Help is the same as the impact evidenced in Troubled Families' evaluation.

**Limit of this approach:** Due to the variation in cohort between TF and EH, TF's impact in preventing escalation is not fully representative of EH's one. We can expect Early Help to lead to a decrease of children under a Child in Need Plan or a Child Protection Plan – areas in which TF didn't have an impact (actually TF led to an increase of Child Protection Plans).



**Other outcomes for children/families in mental health, employment, justice, etc.**

- Impact:** Children and families accessing TF were:
- **Juvenile Offending:** 15% less likely to receive a custodial sentence in the 24 months after joining the programme.
  - **Juvenile Custody:** 38% less likely to be convicted in the 24 months after joining the programme.
  - **Adult Offending:** 25% less likely to receive a custodial conviction in the 24 months after joining the programme.
  - **Jobseeker's allowance:** 11% less likely to be in receipt of jobseekers allowance care at 19-24 months after joining the programme.

We included in our model only the outcomes that have been integrated in TF's evaluation (excluding, for example, mental health) and for which the evaluation showed a significant difference between the target and the control group (excluding, for example, any impact on employment)

**Better data alone will not result in these outcomes, but it plays an important role in ensuring the right children and families access the right services at the right time.**

### Potential benefits of using data in Early Help

- Testing ‘what works’
- Outcomes-based performance management
- Early identification of adverse events and future service pressures
- Understand and responding to citizen’s needs
- Informing public service transformation

**“ Data does not always meet [leaderships’] needs and...local authorities can lack the tools, and capacity to fully utilise data to improve practice and outcomes for children.**

DfE – Putting Children First

”

**Referral Routes:** Access to data on escalation rates into social care from early help in comparison to other agencies will provide Early Help leadership a better understand of whether Early Help is targeting the right people and improve referral routes onto early help with relevant partner agencies such as schools, police, GPs

**Safeguarding and risk management:** Access to data the number of re-referrals that result in either no further action or escalation immediately into care will help leadership understand whether early help services are supporting the right people and ensuring latent safeguarding risk is identified as soon as possible

**Service Effectiveness:** Access to data on which children escalated to social care from early help support would enable leadership to assess whether their services effectively addressed need. E.g. if there are a high number of cases who escalated to early help with abuse and neglect as the primary need for which the Early Help service was unable to address

## FOR EACH POTENTIAL OUTCOME, WE DEFINED THE EXPECTED IMPACT OF BETTER ACCESS TO DATA

Type	Outcome	Expected impact (examples)
Social Care	<b>Children Looked After</b>	Access to data and insight will enable better and earlier targeting of early help services results in fewer escalation into care
	<b>Children Protection Plan</b>	Access to data and insight will enable early help services to better identify risk and ensure children and families escalate faster to CPP faster
Other Outcomes	<b>Juvenile Offending</b>	Access to data and insight will enable early help to provide more targeted and holistic support to young people which should result in less juvenile offending, measured through % young people receiving custodial sentence or being convicted.
	<b>Juvenile Custody</b>	
	<b>Adult Offending</b>	Access to data and insight will ensure parents access the support they need which will result in them being less likely to offend
	<b>Jobseeker's allowance</b>	Access to data and insight will help early help services better support adults to access their benefits allowance, measured here by the % of adults claiming jobseekers' allowance

**Access to better data is a key enabler of all these outcomes. In workshops with partner local authorities, we discussed a potential 1-10% increase in savings as a result of providing early help leadership with better data and insight.**

**Based on this conversation, we assume at this stage that the solution would result in a 6% increase in public sector savings once fully implemented – rising from 2% after the narrower initial implementation which focuses on just child journeys.**

**We validated these numbers through testing with partner authorities and reviewing variation in outcomes across local authorities. The most significant benefit or outcome in the TF programme is reduction in the number of children Looked After (LAC) – and there is a significant variation in LAC across local authorities\* suggesting that small improvements in the 2-6% region may be feasible.**

**However, this assumption needs further validation and testing in Alpha where we can better examine how better data improves Early Help Leadership's decision-making. As a result, we apply a 60% confidence factor to the estimate.**

\*Source: "Children Looked After in England, 2019", Children looked after at 31 March, by local authority,

## 5. BUSINESS CASE

5.1 | Our approach to the business case

**5.2 | Costs and benefits case**

# KEY ASSUMPTIONS FOR THE BUSINESS CASE

## Time horizon

The business case is modelled over a **seven year time horizon**. This is to capture the full 5 year benefit on improved outcomes and savings and to account for a 1 year delay before outcomes are realised.

## Improved services

The model assumes that the solution will **improve the effectiveness of services by 2% rising to 6% over time (an average of 5.2% across seven years)**. This assumption is currently based on project team estimates and will need to be tested and refined in alpha and beta. For this stage we think it is conservative but with significant uncertainty. Given the uncertainty we also apply a 60% confidence factor to the benefits.

## Number of LAs involved

We assume that **7 local authorities are involved in the project at the start**. We also think that new authorities will join each year but we limit this model to the initial authorities for the purpose of the benefits case (which is a conservative assumption).

## Benefits of Early Help equivalent to benefits of Troubled Families

The Troubled Families evaluation calculated benefits to the public sector as a result of spend on the Troubled Families programme. In this benefits case we **assume that the benefits per £ spent detailed in the Troubled Families evaluation are the same as the benefits per £ spend in Early Help** more generally.

\*The model ignores benefits linked to a potential reduction of CIN/ CPP, and other benefits e.g. mental health or domestic abuse

**DETAILED COSTS BREAKDOWN**



# COSTS: PRODUCT DEVELOPMENT COSTS

The anticipated total product development cost for 7 local authorities is £475k. This includes the cost of on-going development of new features. The equivalent to £68k per participating local authority.

<b>£80K</b> Discovery	<b>Discovery costs are made up of staff time</b> (product manager, user researcher, business analyst)
<b>£90K</b> Alpha	<b>Alpha costs are mostly made up of staff time</b> (early help leadership, product manager, user researcher, data analyst)
<b>£145K</b> Beta	<b>Beta costs are less certain but will likely include</b> early help leadership, product manager, user researcher, data analyst, solutions architect, and developer time
<b>£160K</b> Ongoing development	<b>There may be ongoing development costs to build in additional features, including</b> early help leadership, product manager, user researcher, data analyst, solutions architect, and developer time

Note: all values are over a seven year period. For full details see benefits case model.

# COSTS: IMPLEMENTATION COSTS

The anticipated total implementation cost for 7 local authorities is £1.41m over 7 years. The equivalent to £202k per participating local authority (equivalent to £29k p.a. per local authority).

**£495K**

Staff Costs

**Staff costs for implementation include** early help analyst time, information governance, IT, and early help leadership time

**£919K**

Tech Costs

**Technology costs include** data systems (for example investment in adapting case management systems) and investment in analytical software to produce outputs

## DETAILED BENEFITS BREAKDOWN

# ***BENEFITS:*** THE BENEFITS OF EARLY HELP SERVICES

We leveraged MHCLG's Troubled Families Evaluation to identify the potential benefits of Early Help. In conversations with the team, they suggested that these figures are the best estimate of the impact of early help.

It also enables us to use established cost benefit numbers that are recognised by HMT and use green book principles.

From the MHCLG's Troubled Families Evaluation, we derived the potential benefits of Early Help over a 5 year period. Based on our theory of change, we then apply a percentage uplift to these benefits based on access to better data and insights

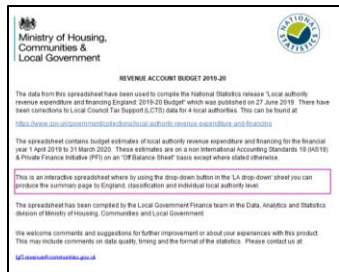
<b>Potential Savings from Early Help</b>	<i>Split of fiscal benefits</i>	<i>Fiscal benefit per £1 spent over five years</i>
<b>Social Care</b>		
Reduction in the proportion of Looked After Children	78%	£1.18
Increase in the proportion of children on Child Protection Plans	-17%	-£0.25
<b>Net Total</b>	<b>61%</b>	<b>£0.93</b>
<b>Justice and Employment</b>		
Juvenile Offending	18%	£0.28
Juvenile Custody	6%	£0.09
Adult Offending	3%	£0.04
Jobseeker's Allowance	12%	£0.18
<b>Net Total</b>	<b>39%</b>	<b>£0.59</b>

*Source: MHCLG's Troubled Families Evaluation and analysis undertaken by the project team*

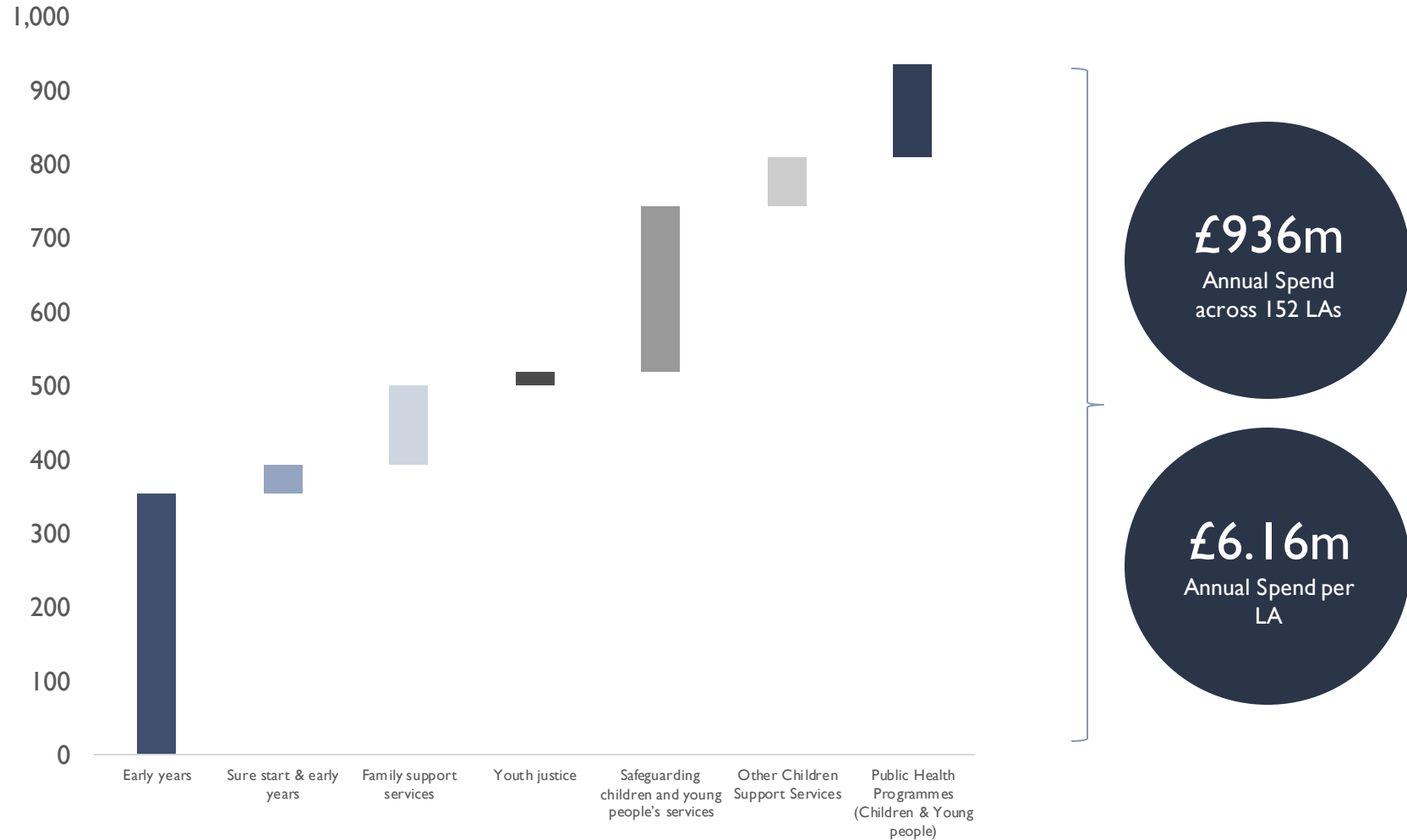
# BENEFITS: QUANTIFYING EARLY HELP SPEND

Quantifying the benefit of early help is difficult because of how central government is used locally and that different local authorities provide different types of Early Help/Intervention support.

We examined and cross referenced our analysis with relevant literature.



## Early Help Spend Analysis – Local Government Budget Returns



### 3 **BENEFITS:** BY TRIGGERING SERVICE IMPROVEMENT, THE SOLUTION WOULD AMPLIFY THE BENEFITS OF EARLY HELP SERVICES

#### Savings on social care

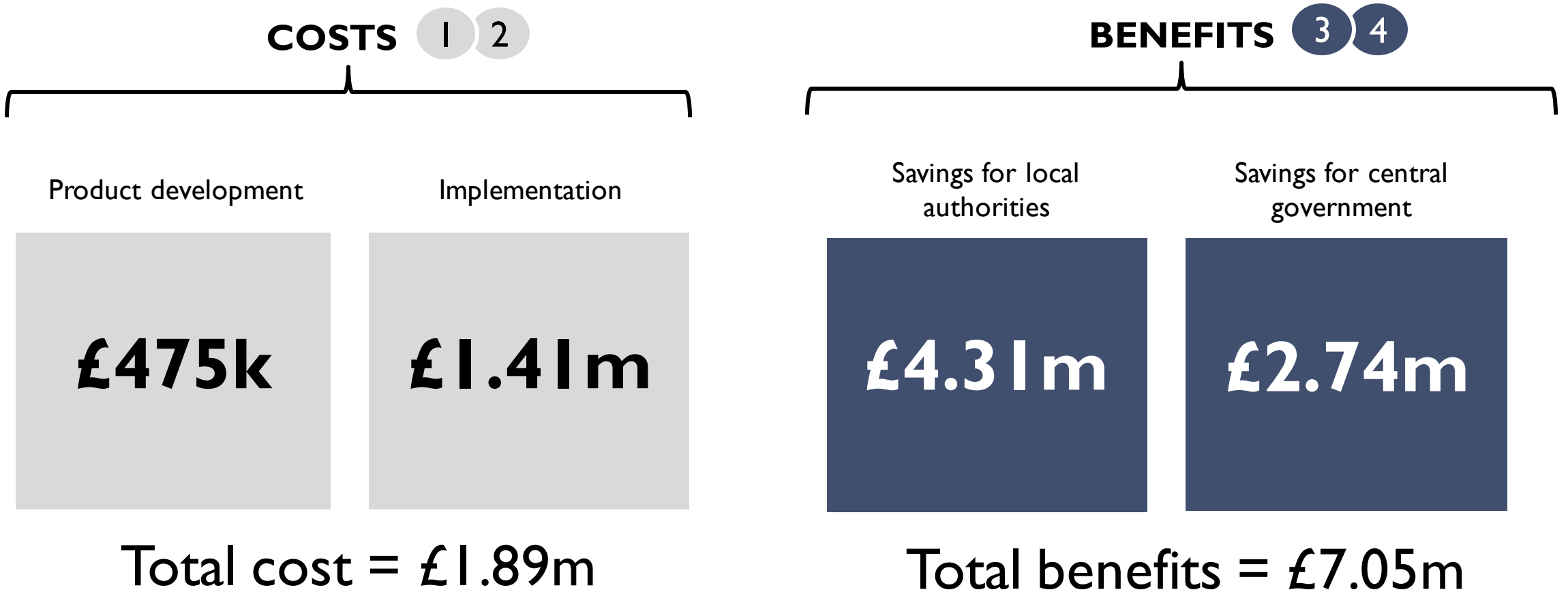


### 3 **BENEFITS:** BY TRIGGERING SERVICE IMPROVEMENT, THE SOLUTION WOULD AMPLIFY THE BENEFITS OF EARLY HELP SERVICES

#### Savings on social care



# OVERALL BUSINESS CASE OVER SEVEN YEARS



**Net Present Value benefits (over seven years with confidence factor) = £4.10m**

Note: all values are over a seven year period. For full details see benefits case model.