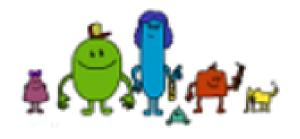
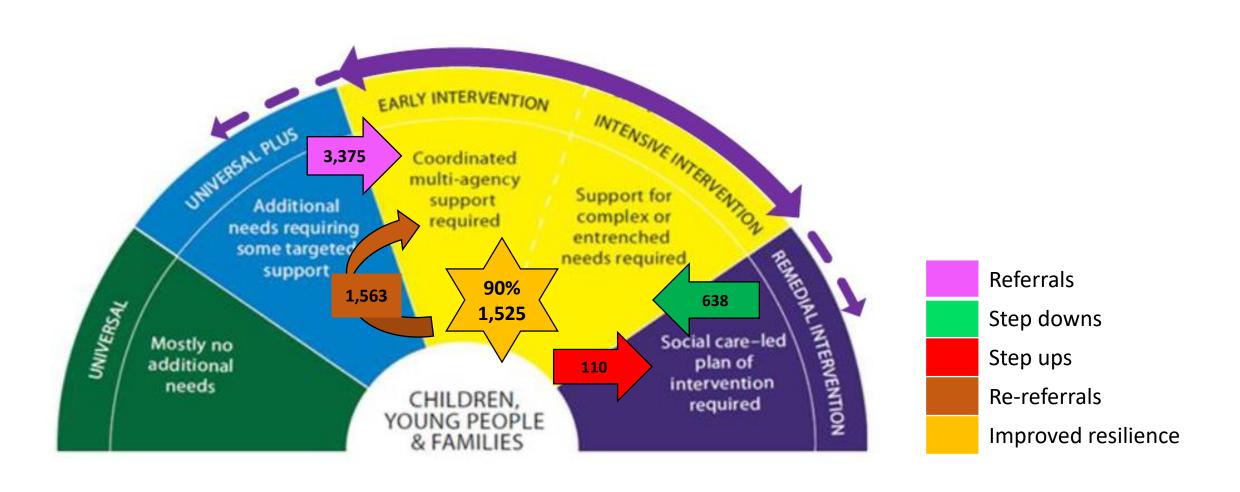


# Resilient Families Service Performance Data for

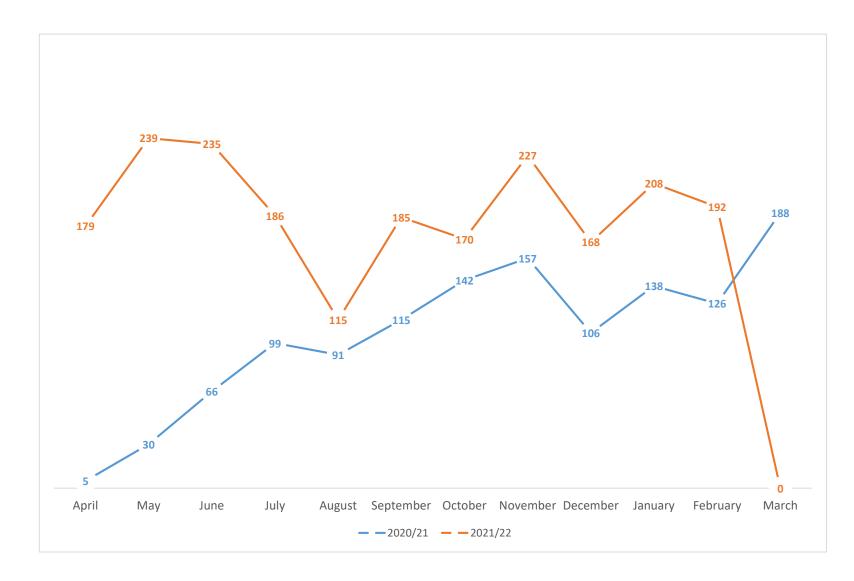
2020/21 (1st April 2020 – 31st March 2021) and 2021/22 (1st April 2021 – 28th February 2022)

## Performance for 2020/21 and 2021/22





## Referrals into RFS



Between 2020/21 and 2021/22, the total number of referrals received by RFS has increased by over 800, from 1,269 in 2020/21 to 2,104 with a month still remaining of this financial year

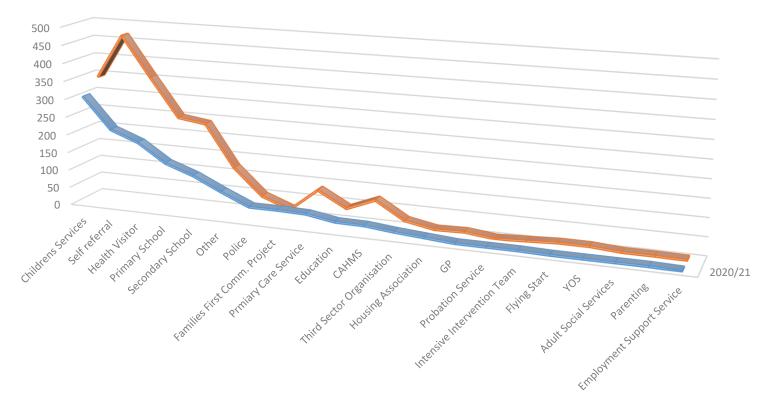
As the chart demonstrates the number of referrals received each month fluctuates significantly but comparing this data with previous years we are starting to see a trend with increased numbers received during November and January.

The average number of referrals received per month has almost doubled this year

2021/22 - 191 2020/21 - 106

N.B March 2022 data not available yet

### Referral sources



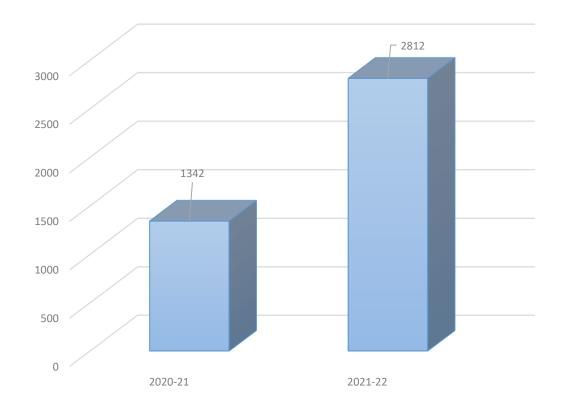
**2**020/21 **2**021/22

During this 2 year period although referral rates from sources has changed the highest areas remain:

	2020-21	2021-22
Children's Services	24%	16.4%
Self referrals	17%	22.2%
Health Visitors	15%	16.9%
Primary Schools	11%	11.8%
Secondary Schools	9%	11.3%

2021-22 saw an increase in referrals from Health Visitors, schools and self referrals and a decrease in referrals from Children's Services – most likely as a result of increased capacity in RFS to hold cases as a result of the easement of covid restrictions

## **Appraisals**



The chart above shows the significant increase in the number of appraisals completed in 2021-22 when compared to the previous year, an increase of 110%.

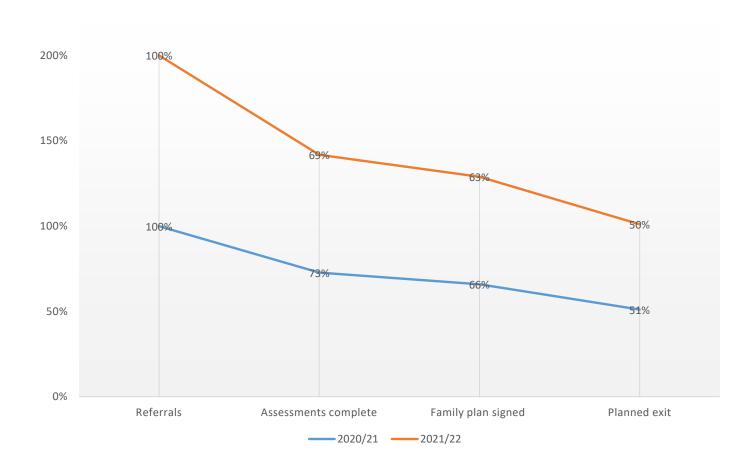
<u>Appraisals</u>	2020/21	2021/22	Difference
Parenting	421	655	+ 234
Education	261	609	+ 348
Health	210	384	+ 174
Finance	155	220	+ 65
YEPS	142	223	+ 81
Childcare	65	79	+ 14
Housing	50	92	+ 42
YOS	26	71	+ 45
Midwifery Appraisal	12	55	+ 33

The table above provides a breakdown of the different appraisals undertaken over the 2 years. It highlights that there has been a significant increase most appraisals.

In addition there have been 3 new appraisals added this year – Early Years, Family Therapy and Early Language and Communication

### Retention

250%



The chart illustrates the retention rate of families at each of the key stages of the RFS model.

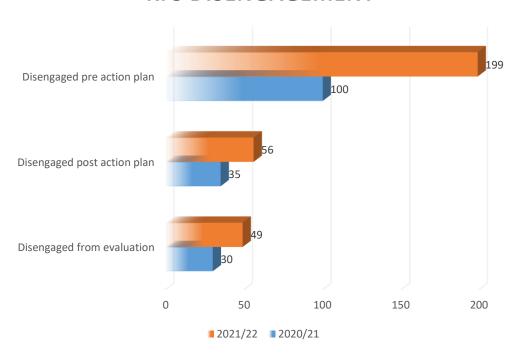
Up to the point lockdown started in March 2020 RFS were on course to follow the trend of previous years and record a continuous improvement in the retention rate.

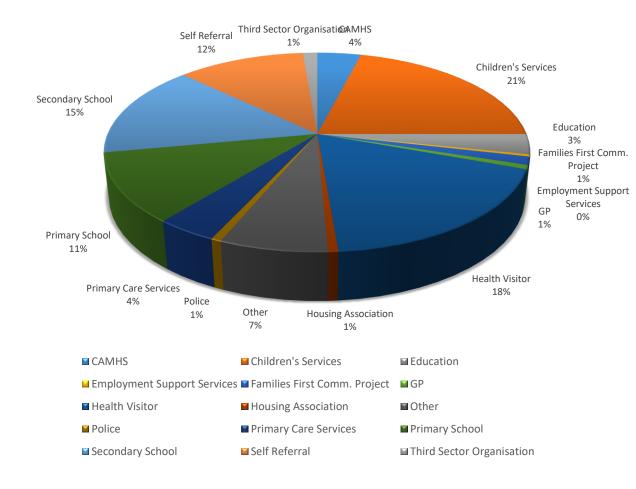
The significant restrictions placed on the service as a result of the pandemic had a major impact on our ability to provide the face to face services families required.

Families have struggled to maintain engagement via virtual delivery methods which has contributed to the fall in retention rates.

## Disengagement

#### RFS DISENGAGEMENT





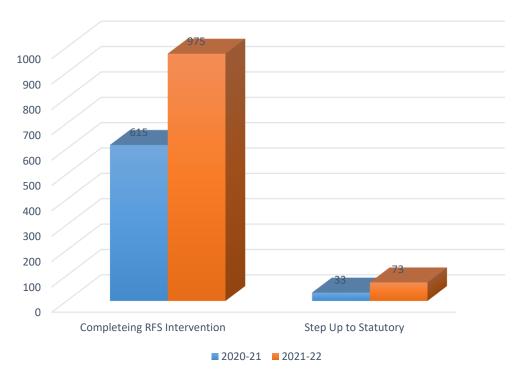
The number of families disengaging has slightly increased this year with this cohort representing 13% of all referrals in 2020/21 and 14.4% in 2021/22. Further analysis of the referral source for families who disengaged from RFS at the pre action plan stage during 2021/22, shows that 21% were step down cases from Children's Services (64 families). This is a proportional improvement from the 34% (58 families) in 2020-21. This is attributable to the voluntary nature of engagement with RFS.

### **Outcomes**

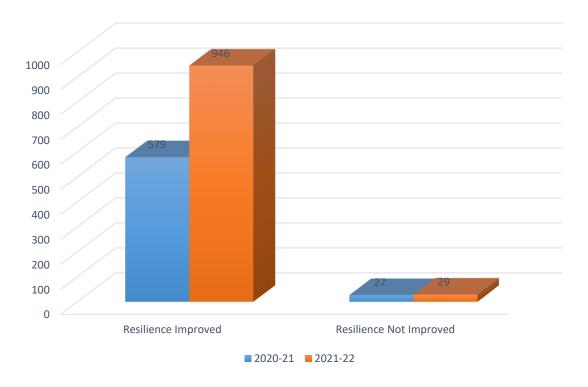
Of planned exits so far in 2021/22, 93% in of families completed full RFS package of intervention with the remainder requiring a supported step up to statutory services due to increased levels of need/risk. This compares to a full year figure of 94% in 2020/21

Of those families completing a full RFS package of intervention, 97% have recorded improved resilience this year compared to 95.5% in 2020/21

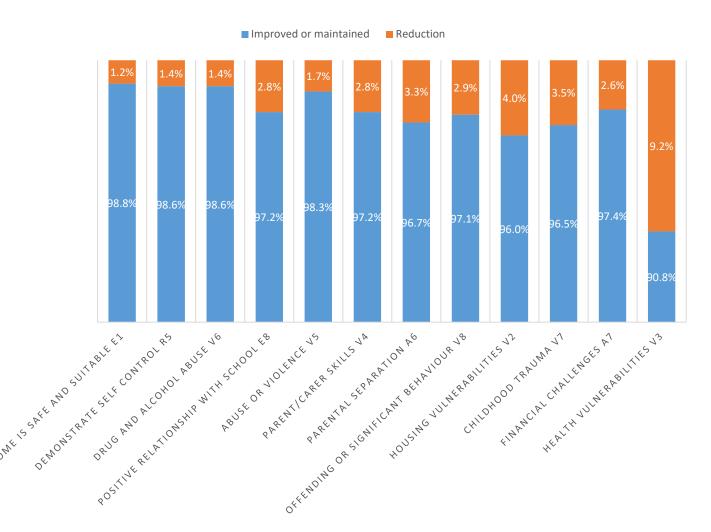
#### **Outcomes Planned exit from RFS**



#### **Outcome of RFS Intervention**



# Enhancing protective factors to mitigate against Adverse Childhood Experiences – 2021/22



The measures in this chart have been identified as areas where improvements can have a significant impact on mitigating against ACE's or reducing the impact of ACES for family members.

The areas where the greatest impact is realised are:

- Home is safe and suitable (98.8% improved or maintained)
- Demonstrate self control (98.6% improved or maintained)
- Drug and alcohol use (98.6% improved or maintained)
- Abuse or Violence (98.3% improved or maintained)

RFS is able to demonstrate intervention is disrupting the cycle of impact of ACE's

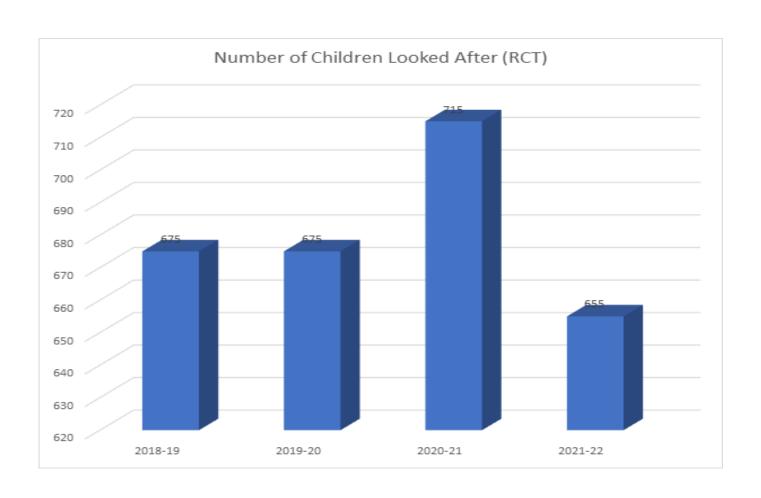
## Levels and type of support identified

Analysis of the responses given by families at the assessment stage provide an overview of the type of support needed by families accessing RFS support. The table below presents a comparison of the top 5 areas of need (areas with the highest percentage of families scoring high or very high support requirements during the resilience assessment) for each year and the prevalence of this need

2020-21		2021-22		
Current levels of stress	56.3%	Current levels of stress	69.9%	
Requires intense support to address challenges	45.7%	Requires intense support to address challenges	52.6%	
Health Issues	41.1%	Mental Health	45.1%	
Ability to demonstrate self-control	39.5%	Engagement in leisure/sport/community activities	40.9%	
Engagement in leisure/sport/community activities	35.6%	Health Issues	40.8%	

This analysis shows a significant increase in stress levels and the need for intense support to address challenges alongside a steep rise in mental health related needs. Of concern is the increase in disengagement in leisure, sport and community activities, which are recognised protective factors to building and maintaining resilience.

# Contributing towards reducing the number of Children Looked After



Since the introduction of the RFS in 2018 as a new model for providing early intervention support, the Local Authority has recorded a reduction in the number of Children Looked After.

Whilst the number of Children Looked After in 2020-21 saw an increase from the previous two years, this was proportional to increases across Wales (0.09% increase as a percentage of the Wales total) and impacted by the pandemic. Despite the 2021-22 data not representing the full 12 month period, CLA rates have significantly reduced RFS.

# Case study – Family P

- The family unit consists of A (mother), Child B (age 8) & Child C (age 10)
- Referred by Social Worker from Children's Services Enquiry
   Assessment Team
- A separated from her husband 5 years ago and the children have had no contact since July 2021. A has requested support around how to start divorce proceedings. A & the children have had previous support from Woman's Aid.
- Family currently without cooker A had previously been supported by Support Worker from Steps who secured a DAF grant for a cooker, but no further progress made.
- Family are not currently registered with a dentist and want support with this.
- A reports her stress levels are currently high due to her dyslexia and outstanding debts she will often ignore letters.
- A has experienced a lot of past trauma which has been unresolved / not addressed which impacts on her emotional wellbeing and coping mechanisms A has been known to self harm during times of emotional stress.



#### **FAMILY PLAN GOALS**

#### To support A to seek financial & legal advice

- A referral to CAB for advice & guidance.
- To offer emotional support to A & strategies to promote wellbeing, confidence & resilience as she begins to explore divorce proceedings

## To ensure the children are accessing dental hygiene

 I.W. to support A to register the family at a Dentist and explore the possibility of securing an appointment for the family

## Support to liaise with Trivallis (steps) and source additional funding for items required

• IW to locate A's cooker (via Steps) and to source additional funding.



# Case study – Family P

#### **Observations and situation pre involvement**

- During first meeting with IW A was observed to be anxious and worried
- A stated that she did not go out, didn't meet or talk to people
- The family had not had cooker since August 2021 (3 months)
- Due to A's dyslexia she was not reading letters being sent rather throwing them out resulting in further debt
- Benefits stopped due to A not accessing her journal due to her dyslexia.

#### **Examples of work undertaken during intervention**

- Supporting A to ring other agencies so that they understand her needs

   this resulted in benefits being reinstated and note on system that

   phone calls required rather than written contact.
- Meeting and breaking down education psychology report into easy to understand language so A understands child's needs.
- Applying for DAF grants to secure cooker and sourcing saucepans, baking trays etc
- Meeting A and children at dentists to improve A' confidence
- Establishing links with local church and sourcing fortnightly food delivery from church for family



#### **Biggest wins**

- A went food shopping alone in preparation for Christmas
- A attended school meeting and has built a better working relationship with them.
- A has been able with support to have telephone discussions with other agencies which has resulted in PIP application being made.
- Children have had much needed dental treatment and optician appointments.
- Cooker has been delivered and installed which enables A to cook meals for the family
- A now keeps all letters and files them which enables issues to be dealt with appropriately and timely to minimise debt
- Children's school attendance improved

