



**Northamptonshire County Council**  
**Prevention and Demand Management**  
**Phase 4; March / April 2013**  
**Summary**



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## 1. Summary of findings

This engagement took place in March 2013 with 5 open events being held around the county plus approximately 16 events run by children's centre's, Inter Personal Violence service providers and youth groups. In addition to these workshops the targeted prevention teams supported families using their service to complete a short questionnaire.

This engagement was designed to describe to stakeholders the progress that had been made in developing the model. Additionally it was to give stakeholders the opportunity to give feedback on the principles that will feature in the specification required for the tender process and the outcomes that will be included in this.

Below is a brief summary of the findings for this consultation. More detailed analysis can be found in section 5. Feedback (page 10) and Appendix ii (page 22).

### Principles

- 1. One person to help with a number of different problems that a family has so that you don't have to see lots of different people**
- 2. Able to get help from someone who is a specialist when it is needed**
- 3. Help is available locally**
- 4. Services are checked and information about them is available to staff and parents when they need it**

A significant majority of respondents agreed with all of the principles, with agreement levels ranging from 89.8% to 98.2%.

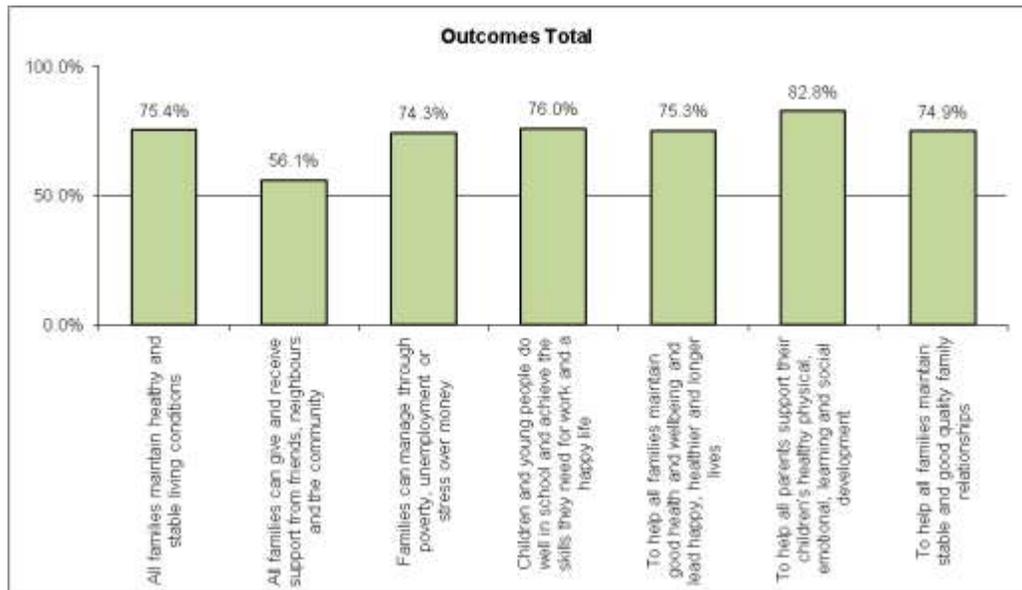
A significant majority agreed with the principle "getting help from someone who is a specialist when needed". It was felt a skilled generalist could avoid long waiting lists but people are to be referred to a specialist service if required. Although some concerns were raised over who would decide if specialist help was required and the timescales involved.

Many participants liked the idea of dealing with just one skilled generalist in one location and it was felt that by dealing with one individual it would build a level of trust and confidence and stop story repetition. Although concerns were raised about the practicality of one person being sufficiently knowledgeable on so many subjects and subsequently the quality of service provided, and the reliance of dealing with just one individual.

The principle of providing help locally generated some discussion over the definition of what is considered local, with opinions ranging between walking distance to a few miles. Access to support in rural areas was also a concern.

The idea of the helping families to help themselves framework was supported by the majority of those consulted, although this was the least supported principle. It was felt the information should be clear and current. Having one place to get information was felt to be a positive thing though some still felt GPs and community centre's needed to display information.

## Outcomes



**All families maintain healthy and stable living conditions** was considered important to prevent a number of other problems occurring but assistance may be required helping families achieve this, although some respondents felt this was an individuals responsibility.

**All families are strong enough to manage stress over money, poverty and unemployment** was considered important as participants felt many people lack the skills to manage finances and avoid debt and that schools should support young people more to understand and deal with budgets. The current financial climate and changes to welfare benefits should also be taken into consideration.

**All families can give and receive support from friends, neighbours and the wider community** was the least supported outcome. Some participants felt informal support has a significant role in providing support; with some thinking services has a role to play in ensuring this is accessible to all. However a significant proportion felt this outcome was unrealistic as the “the community” does not exist. Others felt it is an individual responsibility, or that people are not empowered as get bullied by strong families or friends.

**All children and young people do well in education and this gives them the skills they need to find work** outcome was supported by participants but many felt schools need to play a greater role in achieving it, and that schools are more focused on overall targets than individual children. Some felt parents can feel unsupported and not involved if there are problems with education. Others felt there should be more emphasis on positive activities for young people who are not engaged at school.

**All families maintain good health and wellbeing for happy, healthier, longer lives** was seen to be only achievable by some if services work closely with health provision. Education regarding health, both physical and mental, was considered important, with some thinking health and wellbeing being dependant on other factors such as stable housing, and seeing the need to monitor county trends.

**All parent(s) support their children's healthy physical, emotional, learning and social development** was considered the most significant outcome. Some thought children's centres offer a high level of support but more could be done to improve accessibility and coordination between centres could be better. Support for parents looking after a child with special needs was considered not readily available.

**All families maintain a stable and good quality family relationship was** deemed important to society and particular support should be available where there is abuse or violence. Support of relationships of parents with young children was considered key, as many new parents may not realise the responsibility of parenthood. Although, some said it is not always possible to maintain a good relationship within a family and that many kinds of diverse relationships and families should be recognised and supported.