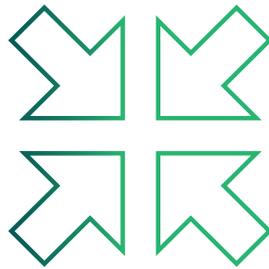


Issue 2
Impact Report



we|support



we|engage



we|connect



we|partner

we|deliver



“We constantly challenge ourselves to do better and to deliver excellence for our service users and for the communities in which we are proud to work.”

We evolve, we improve and we are hungry to do more

At Family Action we have a long and successful history of providing support to families facing difficulties and the need for our services remains just as acute today. We remain resolutely focused on building stronger families.

We understand that we must be able to evidence the impact of our work and that is why we are publishing this second Impact Report, building on our well received 2014 Report. Evidencing our impact is vital not just for the tens of thousands of families that we work with every year but also for those who commission our services with increasingly pressured budgets. We are committed to demonstrating the value and effectiveness of all our work through skilled and objective performance measurement, evaluation and research so that we can continuously improve our services.

Family Action supports families when they are most vulnerable; when they need us most. To do this well we continue to question, develop, adapt and innovate in our service provision. We constantly challenge ourselves to do better and to deliver excellence for our service users and for the communities in which we are proud to work.

I hope you will enjoy reading this report and hearing about our progress. Collectively, I know that we are making a big difference to families across the country but we are all hungry to do more, much more. With your help we can achieve that ambition.

Thank you for your support.

David Holmes CBE
Chief Executive

we | transform

A special word from the Chair of Trustees

Every year I am proud to reflect on the work of Family Action over the previous twelve months. It gives me great pleasure to observe how the organisation continues to go from strength to strength, adapting and responding to the needs of the families and the communities served by us.

The people who work for Family Action – our paid staff and our volunteers – all work tirelessly to ensure our charity is doing the best we possibly can for those who need us. Our service users work hard too to help us design and review our services continually.

We know we must push on and we will continue to seek out opportunities to grow the charity's reach and impact and to ensure that the work we do continues to make a profound difference to families.

The Board of Trustees and I remain committed to supporting everyone within the organisation to do all they can to develop and grow the charity. I hope you enjoy this report which gives some insight into the work we do and that you are as excited as I am about the future of Family Action.

Thank you for your support.

Bryan Portman
Chair of Trustees



“We know we must push on and we will continue to seek out opportunities to grow the charity's reach and impact and to ensure that the work we do continues to make a profound difference to families.”

About Family Action

Family Action is a charity committed to building stronger families. We do this through innovative services that support people who need our help across England.

1869 

We've been reaching out to those in need since 1869, strengthening individuals, families and communities with understanding and practical, effective services. We have a clear vision and mission, underpinned by strong values, and these values are reflected in everything we do.

Our vision

is that everyone who comes to us will receive the help they need to tackle their problems, whatever those problems are.

Our mission

is to provide services and financial support which will strengthen and improve the life chances of those who are poor, disadvantaged or socially isolated. Our approach is to provide support that achieves maximum impact. We seek to empower everyone we work with and ensure they are listened to, helping them look forward to the future and not be defined by their past.



Our values

We aim to achieve our ambitions, and much more, by always demonstrating our values in our work, as well as in our professional relationships with colleagues, partners and those who use our services. We do this by:

- Being people-focused
- Reflecting a 'can do' approach
- Striving for excellence in everything we do
- Having mutual respect for everyone we work with, work for and support



we | innovate

45,000 

We work with over 45,000 families through over 130 community-based services, and support thousands more with financial assistance through our grant programmes.

Our services

Our specialist areas include Early Years, Children and Families, Adult Mental Health and Wellbeing, and Grants programmes.

We have substantial Training and Consultancy expertise in the areas of Family Wellbeing, Family Placement, and Safeguarding and we are continually refining and innovating in our service delivery.

Across all our services, we focus on three main goals:

- Strengthening relationships
- Tackling intergenerational disadvantage
- Promoting health and wellbeing



Early Years
We offer support from pregnancy through to preparing children for school. Included are perinatal services, working with women at risk of postnatal depression, and delivering a range of support services through Children's Centres.



Children and Families
Our services include intensive family support like our Troubled Families programmes, our Young Carers service which supports young carers and their families and our specialist mentoring services for children and young people.



Adult Mental Health and Wellbeing
We support adults by providing a range of practical, emotional and financial help. Our WellFamily and Social Prescribing services offer an alternative for patients who may need practical support but not necessarily a medical intervention.



Grant programmes
We offer emergency cash grants to people in crisis, as well as education grants and a Deputy and Trustee Service. Our Open Doors programme, supported by the Lankelly Chase Foundation, supports individuals who are facing severe and multiple disadvantage through small cash grants.

Theory of Change

A Theory of Change is a tool we use to express how our activities contribute to outcomes which, in turn, help us achieve our final goal.

we | change

Why do we use a Theory of Change

A Theory of Change helps us to articulate our intended impact simply and clearly. It allows us to communicate assumptions we have made and the evidence we have relied on to decide how our services are delivered. This is usually represented via a diagram.

We create a Theory of Change by:

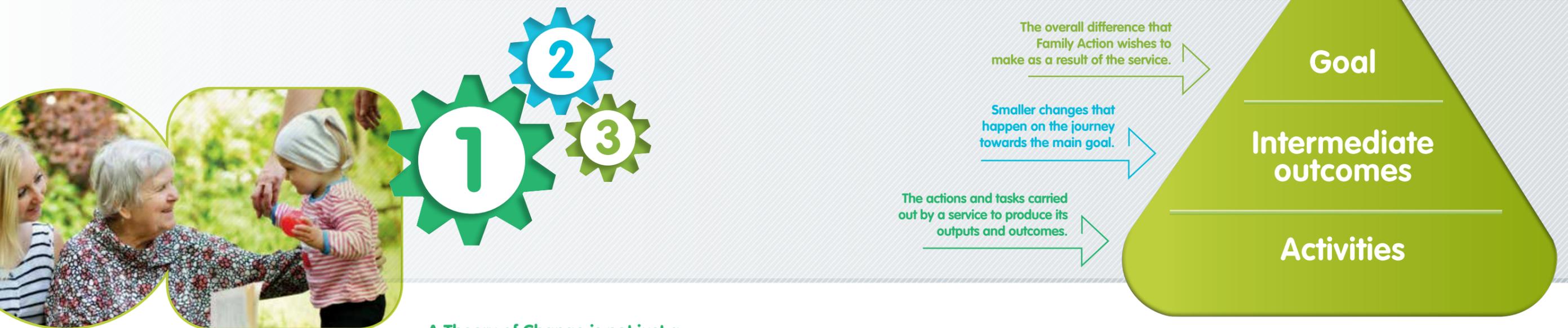
- 1 **Agreeing the final goal** of our service after identifying the problem
- 2 **Defining the short, medium and long term outcomes** that contribute to achieving our goal
- 3 **Researching evidence based activities** we need to undertake in order to achieve the intermediate outcomes and final goal.

How does it inform our work

A Theory of Change ensures that if an activity does not link to an outcome it is not included in our service delivery. It also helps us to identify what we will need to measure in order to show the impact that we have, as well as demonstrating the importance of intermediate outcomes in addition to the final goal.

Theory of Change in this report

There are varying ways to depict a Theory of Change. In this report we have used the Charities Evaluation Services' Planning Triangle© for each of our services. This depicts the three key aspects of a project – activities, intermediate outcomes and final goal(s).



A Theory of Change is not just a diagram; it is also an exercise in considering and describing how a project should work.

A Theory of Change diagram is often accompanied by a written narrative providing further detail, particularly on the assumptions and evidence used to inform which activities to undertake in order to achieve the desired outcomes.



Early Years

DELIVERING SUPPORT THROUGH CHILDREN'S CENTRES



we support



More than just buildings, our Children's Centres provide holistic, integrated services that support the whole family.

The need

It is widely recognised that the early years of a child's life are key formative years for emotional, social and cognitive development¹. Parents play a vital role in their child's development and we know that socio-economic background, parenting capacity and early education are all proven to have a significant impact on a child's future success².

Some parents, for different reasons, may need additional support to build their skills and knowledge to become more effective parents. Children's Centres should offer an inclusive, non-judgemental environment where all families can be supported in their local community.

Recent qualitative research³ commissioned by Family Action illustrates the multiple and complex needs of some of the families receiving support from three of our Children's Centres in very different geographical areas:

- 11 out of 17 families who participated in the research reported behavioural problems in children (in 50% of cases this was explicitly linked to a condition such as autism or ADHD)
- 10 of 18 participants reported mental health needs
- 10 families had experienced some kind of family breakdown.
- 7 families reported domestic abuse
- 7 families reported financial difficulties

Such multiple and complex needs would present significant challenges for any family and require a coordinated response.

Our response

Our Children's Centres provide a range of different support services that families can access including:

- Family support either at the Children's Centre or in their own home, to address issues impacting on parenting capacity and family life.
- Evidence-based parenting programmes such as The Incredible Years® Programs⁴ and Triple P – Positive Parenting Program⁵
- Play and learning activities that promote school readiness and that support bonding between parent and child
- Integrated child and family health services such as breastfeeding support, play and weigh sessions and development checks
- Pre-employment training, job application support and advice on accessing affordable childcare to support parents to access education, training and work
- Targeted activities for fathers, recognising their significant role in their children's development

10 FAMILIES EXPERIENCED FAMILY BREAKDOWN

7 FAMILIES REPORTED DOMESTIC ABUSE

7 FAMILIES REPORTED FINANCIAL DIFFICULTIES

Theory of Change:

Delivering support through Children's Centres

Goal

All children achieve age appropriate milestones regardless of family circumstance or background

Intermediate outcomes

- Improved child development
- Reduced need for intervention by specialist services
- Improved resilience and confidence for parents and children
- Improved parenting
 - Parents and carers act as the primary educators
 - Parents, carers and children learn and develop
 - Families make healthy lifestyle choices
 - Families develop self-esteem and resilience
 - Families are involved in decisions

Activities

- Family support and outreach
- Evidence-based parenting programmes
- Early learning and on-site childcare
- Child and family health services
- Employability support
- Work to engage fathers
- Information and advice, signposting to other services

¹ www.eif.org.uk/wp-content/uploads/2015/03/Final-Overview-Best-Start-at-Home.pdf p 3
² www.gov.uk/government/publications/are-you-ready-good-practice-in-school-readiness
³ Family Action Thematic Report into Children's Centres. Sample size of 17 families (18 participants)
⁴ www.incredibleyears.com/programs/
⁵ www.triplep.net/glo-en/copyright/



Early Years

DELIVERING SUPPORT THROUGH CHILDREN'S CENTRES



“I have seen a big difference mainly in the last few weeks of working with a support worker because I’ve known the best thing to do and routines and stuff.”

Children’s Centre service user

Our impact

Family Action uses a range of research methods to illustrate the impact of our work. Qualitative research⁶ was undertaken with the aim of examining the value of Family Action’s holistic, strengths-based, whole family support in building resilience among families attending Children’s Centres. We chose this approach in order to capture effectively the compelling human experience and subtleties about the families involved and the issues relating to their experiences. Going forward, Family Action is developing a quantitative approach to complement and enhance qualitative findings. A greater emphasis on clinical outcomes tools and the measurement of “hard outcomes” will further evidence the impact of our services.

The qualitative research was carried out at three Children’s Centres in very different geographic locations. Eighteen parents – 16 mothers and two fathers – took part in 17 interviews using visual and reflective methods (one interview was a couple interview with a mother and a father), and four family support workers were interviewed for context. The research found that families that attended our Children’s Centres reported:

“I like to come here, it makes me happy.”

Child at Children’s Centre service

Improved parenting skills and ability to establish family routines

“I have seen a big difference mainly in the last few weeks of working with a support worker because I’ve known the best thing to do and routines and stuff.”

Improved confidence and reduced social isolation

“Without the support I would probably be that same person in the house on my own quite a lot of the time. Not getting out and about, just me and my son constantly. I wouldn’t have been going on courses...or getting out in the community or even seeing my family.”

Improved ability to prevent problems escalating

“I wouldn’t be where I am now if I didn’t have the support...I’d probably have lost my kids and I’d probably [be] an alcoholic, to be fair”

Increased support networks

“I’m meeting new people every time I go to ‘Stay and Plays’...and actually speaking to them and seeing how their child develops and then...sharing experiences and stuff...they help me, I help them.”

Improved resilience and self-esteem

“They’ve kind of really taught me that...[if you] fall over, [I can] pick yourself back up, get on and let someone know that I’ve fallen over, because that was a big thing that I never used to do.”

⁶ Family Action Thematic Report into Children’s Centres. Sample size of 17 families (18 participants)

CASE FILE

Ravensdale and Forest Town Children’s Centre

Family Action runs 23 Children’s Centres across England.

We work hard to ensure that Family Action Children’s Centres are well run and effective. We are proud of our track record of taking on and ‘turning around’ struggling centres so that they can fulfil their responsibilities to their local community.

Background

On the 1st June 2013, Family Action took over the running of Ravensdale and Forest Town Children’s Centre, as part of the Nottinghamshire Children and Families Partnership (NCFP).

Less than two weeks later an Ofsted inspection judged the centre to be Inadequate.

The inspection found that

- The centre was not supporting enough children and families within the reach area, and was unable to clearly identify and give priority to those families who need the services most.
- Information and data available did not provide sufficient detail of the needs of the families they were working with. Staff did not use information well enough to precisely identify needs.
- There were not enough opportunities for those who might benefit the most to take part in activities to improve their personal skills, education and employability.
- Governance arrangements were weak and there was no functioning advisory board.
- The centre failed to set clear priorities to form integrated services that met the needs and requirements of the range of families within the local area, particularly for those in most need.

Action

A highly skilled new management team was put into place, including a new district manager and centre coordinator.

- The team worked closely with key partners such as health and schools to communicate the key priorities of the centre and to ensure that all families and expectant parents have information about the centre.
- An advisory board, including parents, was developed to find out about families’ needs and provide relevant services.
- Careful thought was given to how and where the centre delivered activities. For example, information about young parents was analysed and showed that their support group was not being delivered where it was most needed meaning attendance was poor. The meeting place for the group was changed and the number of young parents using the group increased.

- Structured and nationally recognised parenting courses were offered to families at different venues.
- Changes were made in how information was collected and used to make sure services and activities are highly relevant to the needs of families living in the area.
- Families who are suffering from domestic abuse were identified as a high priority for the centre. Excellent joined up working with other agencies locally and through district representation at the multi-agency risk assessment conference (MARAC) meant that families are given timely support according to their needs.
- Regular supervision, focusing on safeguarding and wellbeing, between workers and managers ensured that expectations were clear.
- A thorough and relevant staff training plan was developed to link staff development closely to the centre’s main priorities.
- A positive partnership with the local college and the county adult education services improved the range of services on offer.

Outcome

Ravensdale and Forest Town Children’s Centre was re-inspected less than a year later, in May 2014.

The inspection found the centre to be GOOD in all areas.

The inspection found that:

- The relationship between Family Action, Nottinghamshire Children and Families Partnership, and the local authority is clear, well understood and managed effectively. It delivers a robust process for checking how well the centre is doing in meeting the targets it has for improving the life chances of families living in the area it serves.
- Significant progress has been made in how information is collected and used to make sure services and activities are highly relevant to the needs of families living in the area. The centre now has sharp targets which are well designed to tackle issues faced by local families.
- Action to make sure that all families, including expectant parents, have information about the centre has significantly increased the number of families registered with, and using the children’s centre in the months leading up to this inspection.
- Families receive effective early help, guidance and support, helping them to make good progress in their lives. Services and activities are good quality, well placed and delivered by highly skilled and knowledgeable centre staff and partner agencies.
- The centre has good partnerships with adult learning providers helping adults to begin entry into learning and development. Some adults take up opportunities to progress into further learning and volunteering.



Children and Families

INTENSIVE FAMILY SUPPORT

Tackling intergenerational disadvantage across families with complex and multiple needs.

The need

The Government's Troubled Families Programme (TFP) launched in 2012 to work intensively with families experiencing issues around school attendance and exclusion, crime and Anti-Social Behaviour, and unemployment. Family Action has been commissioned to provide Troubled Families services in a range of locations across England and we also provide a number of similarly targeted intensive family support services elsewhere. We were delighted when the Government announced that the TFP would continue until 2020. We were equally delighted when the Government announced, following feedback from Family Action and other organisations, that the second phase of the TFP would support a wider range of families. We highlighted the need to work with families experiencing domestic abuse and with physical and mental health needs and we are pleased that "significant and sustained progress" towards identified goals will now be as valued as an outcome measure for the TFP, as well as a move into continuous employment. We think this demonstrates an increased understanding of the wide range of issues faced by these families and the need for a bespoke response.

Troubled Families Programme data¹ highlights that in these families:



80%
had problems related to education

70%
had no one in work

70%
had poor physical health

50%
were involved in crime or anti social behaviour

40%
had poor mental health

30%
reported incidents of domestic abuse

30%
experienced child protection interventions



The consequences of not responding to these issues can be significant:

- As the problems are often intergenerational² - apparent in both parents and children, they replicate across generations, resulting in a perpetual cycle of challenge and disadvantage
- Experience of these issues has clear links to poor long term outcomes for children - particularly in terms of educational attainment³
- Practically, these issues result in different members of the family typically experiencing multiple contacts from a wide range of different agencies, often working in isolation on specific areas of their lives.

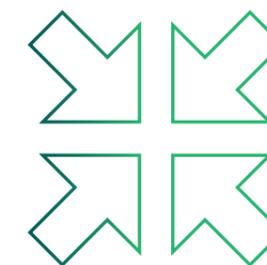
Our response

Our Intensive Family Support Services provide professional, home-based, intensive support, designed to meet the needs of families with multiple, often complex needs.

Our service works by:

- Providing a dedicated support worker who works consistently with each family, plays an active role in assessment and action-planning, and helps coordinate the involvement of other services
- Working with a family intensively (usually three to five visits a week for between 5-9 months⁴)
- Taking a strengths-based view of the family, focusing on relationship building with all family members through persistence, reliability and flexibility
- Prioritising the safety and well-being of children and young people within the family
- Signposting families to lower level support services to maintain progress once they exit the service.

we engage



Theory of Change:

Theory of Change: Intensive Family Support

Goal

Intergenerational cycle of disadvantage is halted. Families' lives are transformed.

Intermediate outcomes

- Improved school attendance, reduced exclusions
- Reduced need for child protection plans
- Reduced number of Children in Need
- Reduced incidence of anti-social behaviour or criminal activity involving family members
- Increased progress towards education, training or employment
- Improved family health and wellbeing

Activities

- Home-based intensive family support 3-5 times a week
- Relationship building, working with the whole family
- Consistent key worker approach, coordinating other services' interventions and involvement
- Advocacy and signposting to step-down services

¹ www.gov.uk/government/uploads/system/uploads/attachment_data/file/336430/Understanding_Troubled_Families_web_format.pdf
² www.gov.uk/government/uploads/system/uploads/attachment_data/file/336430/Understanding_Troubled_Families_web_format.pdf
³ www.gov.uk/government/uploads/system/uploads/attachment_data/file/180772/DFE-00036-2012_improving_attendance_at_school.pdf
⁴ Think Family IFS / Service Specification Phase 2-Year 1



Children and Families

INTENSIVE FAMILY SUPPORT

£44,000

£1,800



The cost benefit of our intensive family support model is significant. Our service typically costs £1,800⁹ per family whereas the cost of just responding to issues linked to these families costs the public purse an average £44,000¹⁰

Family Action Intensive Family Support Services report positive impacts on both whole family and child outcomes:

Child Protection (data from Birmingham Think Families⁵)

- 64% of children no longer on a Child Protection Plan
- 57% of children no longer Child in Need

Offending and anti-social behaviour (data from Newham Families First⁶)

- In 63% of cases (referred for offending) offending was reduced by at least 33%
- In 67% of cases (referred for anti-social behaviour) these behaviours were reduced by 60% over a six month period

Progress into work (data from Newham Families First⁷)

- In 33% of cases, families took steps towards employment including attending interviews, enrolling on courses and volunteering

School attendance (all Intensive Family Support Services⁸)

- On median, school attendance increased by 19% (Where education issues was a reason for referral and school attendance was less than 85% at referral)

“They were my rock. I feel happy, in control and quite content. There is a future.”

Service-user



CASE FILE

Family composition:

Single mother with four children



Reasons for referral

- Children’s educational attainment declining and increased exclusions from school.
- Criminal behaviour and Anti Social Behaviour (ASB). One of the children is at risk of entering the judicial system, due to continued and prolonged criminal behaviour and ASB in the community and in the family home. ASB complaints due to mother’s continued disagreements with her neighbours.
- Intergenerational parenting concerns. The mother is unable to implement consistent or effective behaviour management techniques, routines or boundaries.
- Unemployment (mother).
- Drug and Alcohol dependency (mother).
- One of the children is exposed to Child Sexual Exploitation (CSE) through a friendship with an older male, who allowed the child to sleep over, consume drugs and alcohol and engage in sexual activity.
- Historic domestic abuse.

Support provided intensively over five months:

- Implementing age-appropriate routines, boundaries and consequences.
- Supporting mum to reflect on her parenting and the impact this was having on her children as well as her own wellbeing.
- Active representation at a child protection review, working alongside other professionals.
- Supporting children in improving school attendance and behaviour.
- Exploring the wishes and feelings of all the children, focusing on ASB and domestic abuse.
- Supported and encouraged mother to access a service that would help her to address her drug and alcohol dependency.

Outcomes achieved:

- Two of the four children increased their school attendance to over 90%.
- The referred child’s risk of CSE reduced as contact with the known older male was stopped.
- Mother enrolled in a Maths and English course, to develop her own learning needs, and to support her children with their homework.
- Mother remained abstinent from alcohol and drugs throughout the intervention by Family Action and with the support of a specialist service.
- Mother’s confidence and confidence in parenting and managing her children’s behaviour increased.
- Family time became an important feature, with mother spending more time directly with her children.

“It’s a way of giving families autonomy and empowering them to make a difference in their lives.”

Intensive Family Support Worker

⁵ Analysis of Think Families Troubled Families Outcomes Monitoring data (referrals dated between July 2013 and December 2014). 14 children were on a CPP at referral – this fell to 5 at closure. 14 children were CIN at referral – this fell to 6 at closure.

⁶ Analysis of Newham Families First Outcomes Monitoring data (referrals dated between March 2014 to December 2014). Offending: At referral, 8 children had a proven offence within the last 12 months. At closure, 5 of those children had reduced their offending by at least 33% in the last 6 months. ASB: At referral, 12 families were involved in ASB in the last 12 months. At closure, 8 of those families had reduced their ASB by 60% in the last 6 months.

⁷ Progress to work: 13 out of 40 families took steps towards employment such as volunteering, completing courses attending interviews and gaining part-time work.

⁸ Data taken from referral and closure data for 33 cases as at 12/8/15

⁹ Think Family IFS / Service Specification Phase 2-Year 1 The cost is £1,000 attachment fee and then an additional £800 per family (PBR) for successful outcomes.

¹⁰ www.gov.uk/government/uploads/system/uploads/attachment_data/file/410715/Final_The_Benefits_of_the_Troubled_Families_Programme_to_the_Taxpayer.pdf



Adult Mental Health and Wellbeing

SOCIAL PRESCRIBING

76%
DEVELOPED
Coping strategies

57%
STARTED
Physical exercise

60%
DEVELOPED
A leisure pursuit

we connect



A cost, effective community-based alternative to medical interventions for people with long-term conditions and mild to moderate mental health needs.

The need

It is increasingly recognised that there is a social as well as medical aspect to the management of both social isolation and long-term health conditions¹.

Many people who are socially isolated are repeat, often frequent visitors to their local GP surgery. They may present with a social problem, feel they are not coping or simply require some support, companionship or contact with other people.

There is also evidence that social isolation can also exacerbate, and sometimes even result in, long-term conditions such as depression, coronary heart disease, hypertension or diabetes.

Additionally, those diagnosed with a long-term condition which cannot be cured, only managed, are at higher risk of social isolation, low self-esteem, stigma and discrimination⁴.

These individuals tend to be heavy users of health care resources, accounting for at least 50 per cent of all GP appointments² with research indicating they are the most costly group of service users that the NHS has to look after³. As long ago as 2008/09 the annual cost to the NHS of patients who frequently attend a GP with medically unexplained symptoms was £3.1 billion⁴.

Our response

Family Action's Social Prescribing services are based in GP surgeries and aim to improve individuals' mental health and wellbeing through referral to non-medical sources of support within local communities, in turn reducing reliance upon health services and GP surgeries.

Our service works by:

- Facilitating referrals from GPs to a Family Action Social Prescribing Coordinator, who identifies local opportunities for social and community engagement in response to service user needs, goals and preferences
- Pairing service users with volunteer befrienders who support them to overcome barriers and begin engaging with local activities and support
- Alerting service users to activities such as local social groups, arts and creativity groups, physical activity sessions, smoking cessation, weight management, skills development and local volunteering opportunities
- Signposting and referring individuals to other appropriate services e.g. employment advice, benefits advice, housing, debt, legal support and relationship advice

Theory of Change:

Social Prescribing

Goal

Service users report improved mental health outcomes and reduced social isolation

Intermediate outcomes

- Increased uptake of community activity provision
- Increased awareness of activities and behaviours that improve and promote mental wellbeing
- Reduced levels of frequent GP attendance
- Reduced waiting lists for counsellors and psychological services
- Reduced inappropriate prescribing of antidepressants

Activities

- GPs refer service users to social prescribing service which promotes engagement in community activities
- Reasons and causes of frequent GP attendance and social isolation explored
- Service users paired with volunteer befrienders
- Service users supported to access local community services, resources and facilities as well as volunteering opportunities

¹ www.nesta.org.uk/sites/default/files/more_than_medicine.pdf

² www.kingsfund.org.uk/sites/files/ki/field/field_publication_file/delivering-better-services-for-people-with-long-term-conditions.pdf

³ www.kingsfund.org.uk/sites/files/ki/field/field_document/managing-people-long-term-conditions-gp-inquiry-research-paper-mar11.pdf

⁴ www.nice.org.uk/guidance/cg123/resources/cg123-common-mental-health-disorders-costing-report2



Adult Mental Health and Wellbeing

SOCIAL PRESCRIBING



Our impact

The Family Action Social Prescribing Service accepts referrals for a wide range of reasons such as social isolation, mild to moderate mental health problems, social problems, managing long term health conditions and to access non-clinical activities. The data below shows the percentage of our service users who achieved outcomes in the key areas of mental wellbeing, community participation, physical health and social networks. The wide ranging reasons for referral reflect an equally wide range in the outcomes achieved.

Evidence from the Social Prescribing Service⁵ highlights:

Mental Wellbeing:

In 43% of cases improvements were achieved in the area of mental wellbeing.

- 76% developed/used coping strategies
- 75% reported enhanced confidence
- 64% reported reduced mental distress
- 19% reported decreased reliance on mental health services

Community Participation:

In 39% of cases improvements were achieved in the area of community participation.

- 60% took up or developed a leisure pursuit
- 51% accessed community sports and leisure services
- 19% were supported to access voluntary work and 11% went on to volunteer in community organisations

Physical Health:

In 20% of cases outcomes were achieved in the area of physical health.

- 57% began regular physical exercise
- 63% reported health benefits
- 47% reported reduced physical symptoms

Social Networks:

In 17% of cases outcomes were achieved in the area of social networks.

- 70% reported positive new friendships
- 66% accessed peer support or self-help
- 40% reported stronger relationships with family and/or friends

CASE FILE

Dee* is 44 years old, has depression and a mild learning disability. She lives alone and receives limited support from the local Learning Disability Team. Dee used to live with her parents but when they died, she had to cope and live independently on her own. She was referred to Family Action's Social Prescribing Service as the frequency of her visits to her GP increased and she reported feeling more socially isolated. She says: "I came to this service because I wanted to meet people, do activities and learn more".



We helped Dee to connect and overcome social isolation

Dee gained the confidence to attend the class on her own, which she has continued to attend independently. She has joined in with other activities and feels she has begun to get to know other service users and staff.

Dee was also referred to the local Volunteer Centre and is now being supported by someone on a one to one basis to find opportunities to volunteer in her local community. She is now less socially isolated, more confident and has a sense of control back into her life.

**Name changed to preserve confidentiality*

Dee was paired with a Social Prescribing volunteer who she has met regularly. Her volunteer supported her to attend a computer class at her local community session, attending the first two sessions with her until

Service users are encouraged to map their own progress by completing The Recovery Star⁶.

This data shows that service users perceive that they make significant progress in the areas they were referred for:

Managing Mental Health:

81% of service users achieved improvement on this area of the Recovery Star⁷

Social Networks:

81% of service users achieved improvement on this area of the Recovery Star⁸

Identity and Self Esteem:

75% of service users achieved improvement on this area of the Recovery Star⁹

Relationships:

68% of service users achieved improvement on this area of the Recovery Star¹⁰

Qualitative feedback¹¹ from service users is very positive, with reports of:

- a feeling of re-connecting with the world
- renewed hope for the future
- positive interaction with local people and organisations
- improved structure in their lives
- feeling useful again (for those who entered volunteer work as a result of their involvement)

An external economic evaluation of our Hackney Social Prescribing service is currently underway. The evaluation is led by Dr Marcello Bertotti, Senior Research Fellow at the University of East London, and the findings will be published early in 2016.



A service user said:
 "Before I had nothing to do. Now everyday I wake and think 'yes volunteer work!' or 'meeting friends!'"

⁵ Sample size of 288 cases. Referral and closure data for cases between February 2014 and July 2015.

⁶ © TriangleConsulting Social Enterprise.

⁷ Average change achieved by service users with 2 or more Recovery Stars at Hackney Social Prescribing, Sample size of 53 sets of stars as at July 2015, reported from InForm.

⁸ Ibid.

⁹ Ibid.

¹⁰ Ibid.

¹¹ Ibid.



Open Doors Grants

OPENING DOORS, CHANGING LIVES



Introduction

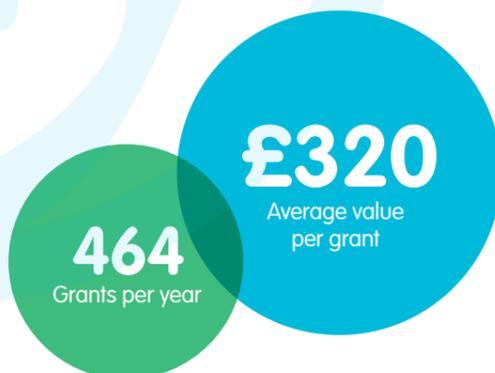
With funding from the Lankelly Chase Foundation, Family Action established the Open Doors Grants Programme in August 2013. Cash grants are offered to individuals who are facing Severe and Multiple Disadvantage as part of a wider package of support provided by selected partners*.

From August 2013 to November 2014 the Programme disbursed 464 grants with an average grant value of £320.

The Open Doors Programme, and the accompanying research on its impact, represents a new approach to understanding the importance of grant provision and how this can be delivered to achieve the most benefit to recipients and society as a whole.

Following the initial Theory of Change report, interim findings from the Programme were published, with support from NEF Consulting, in early 2015, entitled 'Opening Doors, Changing Lives'. A second report will be published early in 2016.

It is hoped that the information provided in the reports will enable decision makers to make informed choices about the future of local welfare funding and how it is delivered.



Opening Doors

Changing Lives Interim Findings

- Over a third of grant recipients are experiencing **three or more areas of Severe and Multiple Disadvantage (SMD)**. The most common areas of SMD are: homelessness or risk of becoming homeless; domestic abuse and serious mental health problems.
- The provision of a cash grant is important for recipients **practically**, as multiple items are required, and **emotionally** as cash gives recipients a greater feeling of control and normality.
- The research indicates that cash grants can enhance the **efficacy of support** provided by partner organisations - through improved relationships between support workers and grant recipients, increased motivation and reduced stress of recipients.
- There is an **increase in the overall wellbeing and optimism** of the grant recipients - the grant enables them to access things which make them feel more secure and able to cope.
- The Open Doors Grant does not alleviate all the issues in recipients' lives and negate the need for further support, but it does enable recipients to **improve their resilience** to future negative events and make it **more likely that progress they have made will be sustained**.
- Recipients and staff at partner organisations identified the likely impact of not receiving a grant to be a decline in mental health, reliance on criminal activity and a general lack of safety, dependent upon the type of other support being received. **Provision of assistance from elsewhere was seen as unlikely**.

*Partner agencies:

- Bethany Christian Trust
- Birmingham and Solihull Women's Aid
- The Cathedral Archer Project
- Cranstoun
- Eaves (to October 2015)
- Various Family Action services
- Hull Lighthouse
- ISIS Women's Centre/Nelson Trust
- Local Solutions
- Richmond Fellowship
- Riverside
- St Mungo's Broadway
- Street Talk
- Together Women Project
- Women@the well
- Women Centre Ltd

Severe and Multiple Disadvantage includes:

- domestic abuse
- frequent contact with the criminal justice system (but not in prison)
- homelessness or at 'imminent' risk of being made homeless
- serious mental health problems
- sexual exploitation
- substance misuse

CASE FILE



Salima, provided by Rebecca, her keyworker

Salima was fleeing domestic abuse and had left her home to come to London. She was living in a hostel but leading a very chaotic life and drinking heavily. She had also been in trouble with the police.

When Salima started engaging with our services I began to work with Social Care and Housing to ensure that Salima was accessing the support she needed. As Salima was fleeing domestic abuse she was entitled to get support and was finally offered a flat.

However, she had no possessions. Her ex-partner had slashed and destroyed most of the furnishings in the home and she would have had to return to her old home to collect what was left. She had nothing. I felt that she needed a completely fresh start.

When Salima heard she was getting a grant, her eyes filled with tears. She planned the shopping day - I felt that there was real benefit in her having a normal experience of shopping. Also, the grant gave Salima choice; she could choose the colours of her curtains, delivery time etc.

Since the grant, I have seen the change in Salima. She is proud about her flat, talks about doing the cleaning and takes real responsibility for and pride in her home. Salima can now have her daughter to stay in her flat which was impossible when she was in the hostel. Salima thinks of the grant as a 'godsend'. She could not understand why someone who had never met her would want to help her."

*Names have been changed to preserve confidentiality

What happens next

Family Action is committed to demonstrating the impact of all our services – this is fundamentally important to our charity.



Measuring true impact can be complex, requiring rigorous methods and analysis, as well as a culture of open-minded learning and innovation. There is an increasing emphasis on accountability for both the public and voluntary sectors, with a drive to demonstrate social benefits and economic value.

Family Action is committed to demonstrating the impact of all our services – this is fundamentally important to our charity.

Wherever it is possible, Family Action services have evaluation and impact measures linked to them. This allows us to monitor how each service is performing – ensuring it is working well and is the right outcomes and impact for our service users. The qualitative and quantitative data we collect allows us to identify trends and adapt our service provision accordingly. **It allows for true innovation.**



We are embracing the Theory of Change model across the organisation.

we | progress



Going forward, our impact and evaluation work remains focused on:

- ensuring we use a variety of validated tools to collect appropriate and high quality data. This allows us to assess whether we are making a difference and meeting our aims. We are embracing the Theory of Change model across the organisation, using it as a planning tool which guides our impact evaluation by identifying the key outcomes we must measure to assess whether the service is achieving its goals.
- meeting the needs of our funders and commissioners by recognising that they too are accountable and need to demonstrate impact. We work in partnership with them to deliver the best possible services for the people who need them whilst remaining focused on achieving demonstrable economic value.
- sharing a clear understanding across the organisation of the difference between outcomes and impact, as well as defining a clear link between these and the intervention we are delivering.
- exploring new and innovative ways of data collection and analysis. Our services now capture outcomes data and record case files via our online case management system. We will continue to extend the use of this tool across the organisation, expanding the functionality it offers so that we are increasingly accurate and sophisticated in our measurement.
- working with the best. We are actively partnering with a range of academic institutions and leading academics who support our work with rigorous evaluation of our services.
- applying a continuous cycle of challenge and learning to our measurement and impact work. This manifests itself in a robust evidence base to assess where our services are working well, and where we might need to adapt or change. It also allows us to refine and innovate our methodology and approach to impact evaluation.



Our organisational ambition is to make a real and long term difference to the lives of all the service users we work with.

In this way we remain effective, relevant and sustainable.

Support us



we | develop

Support Us

Family Action relies on fundraising income to innovate, replicate and sustain new ways of helping vulnerable children and families, directly addressing the root causes of the disadvantages they face.

Many of the services Family Action offers have been made possible through the support of our corporate, trust and individual donors and fundraisers. For example, our Perinatal service model was piloted using fundraised income from a variety of sources including the Big Lottery Fund. Family Action was able to test the concept of peer support of women in the perinatal period and, having established and proven the effectiveness of this new way of supporting families, our perinatal services are now being rolled out in many new areas of the country.

The generosity of supporters and fundraisers also allows us to provide more to those families we are already supporting. In the past year this has included funds for toys, specialist equipment for children with special educational needs, domestic abuse awareness work across all our services, small welfare grants, and refurbishment of a family room at one of our services by volunteers from the local business community.

Creating Happy Memories

Can you imagine a childhood without happy memories? The unfortunate reality is that too many of the families, children and young people we work with do not have capacity to share happy experiences together because of the all encompassing difficulties they face, including family breakdown, domestic abuse, mental ill health and financial struggles.

Family Action is determined to change this to Create Happy Memories for the families we support. We want to enable our families to spend quality family time together as a part of the wider package of support they receive. Activities can be as simple as a trip to the seaside or a picnic in the park but they are invaluable in building self confidence and resilience – both vital to help people deal with day to day challenges. These positive experiences can be life changing and have a long lasting impact.



New experiences

Find out more about Creating Happy Memories on our website www.family-action.org.uk/creating-happy-memories



"I felt like I wasn't alone and [the break] gave me the support and advice and confidence boost I needed as a single parent."



The generosity of supporters and fundraisers also allows us to provide more to those families we are already supporting.

Support us

<p>£5,000 COULD PROVIDE</p>	<p>£50,000 COULD DELIVER</p>	<p>£100,000 COULD PAY FOR</p>
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5 school-based programmes.

1,000 children & families can have a happy experience.

10 workers to support 500 children and families for a year.

Gifts in Wills:



Every legacy gift we receive is extremely important to us.

Family Action has been a key player in improving the welfare of the most vulnerable families in the country since 1869. Throughout our history we have been supported by the generosity of supporters giving donations through their Wills. Every legacy gift we receive is extremely important to us and helps us to innovate and improve our work to build stronger families. For more information on leaving a legacy which can have a lasting impact on vulnerable families please contact fundraising@family-action.org.uk

Corporate partnerships

We are extremely grateful to our corporate supporters who give so generously of their time, expertise and money.

Your company can make a huge difference to the lives of the people we support and we would welcome a discussion about how we can work together.

For more information please visit our website www.family-action.org.uk/corporate or email fundraising@family-action.org.uk

➤ **£5,000** – Could provide **five** school-based programmes to help children at risk of becoming involved in gang violence

➤ **£50,000** – Could give **1,000** of the children we support a happy experience with their family - simple stuff like a day out at the beach or a picnic. Fun that also helps to build trust with their support worker and helps to build stronger families and brighter futures.

➤ **£100,000** – Could pay for **10** Family Action workers to support **500** children and their families for a year. Helping them to overcome a traumatic experience, such as abuse or bereavement, giving them the resilience they need to build a more positive future.

Working in partnership

We work with many partners to maximise impact and provide expertise as broadly as possible. By working closely with local and national government, the NHS, the education sector, the media, other voluntary sector organisations, and the private sector, we can ensure we reach out to as many vulnerable people as we can.

We not only work directly with vulnerable families but also support professionals and organisations coming into contact with these families. Our training and consultancy services draw on our long history and our depth of practical experience to help all organisations working with, supporting or employing vulnerable families and individuals.

We are guided by an ethos of sharing knowledge and best practice so that children and families can look forward to the future and not be defined by their past.

For more information about training and consultancy contact us on T&C@family-action.org.uk



A need to do more:

It is testament to the organisation's grit and resilience that in times of economic difficulty, Family Action has expanded its work in order to help more people. However, there is a clear and present need, in the face of continuing austerity, for Family Action to do more. If you would like to support Family Action through fundraising, donating or by involving your company in what we do, then please do get in touch: fundraising@family-action.org.uk

We'd like to thank

all those who have so kindly supported us, including:

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