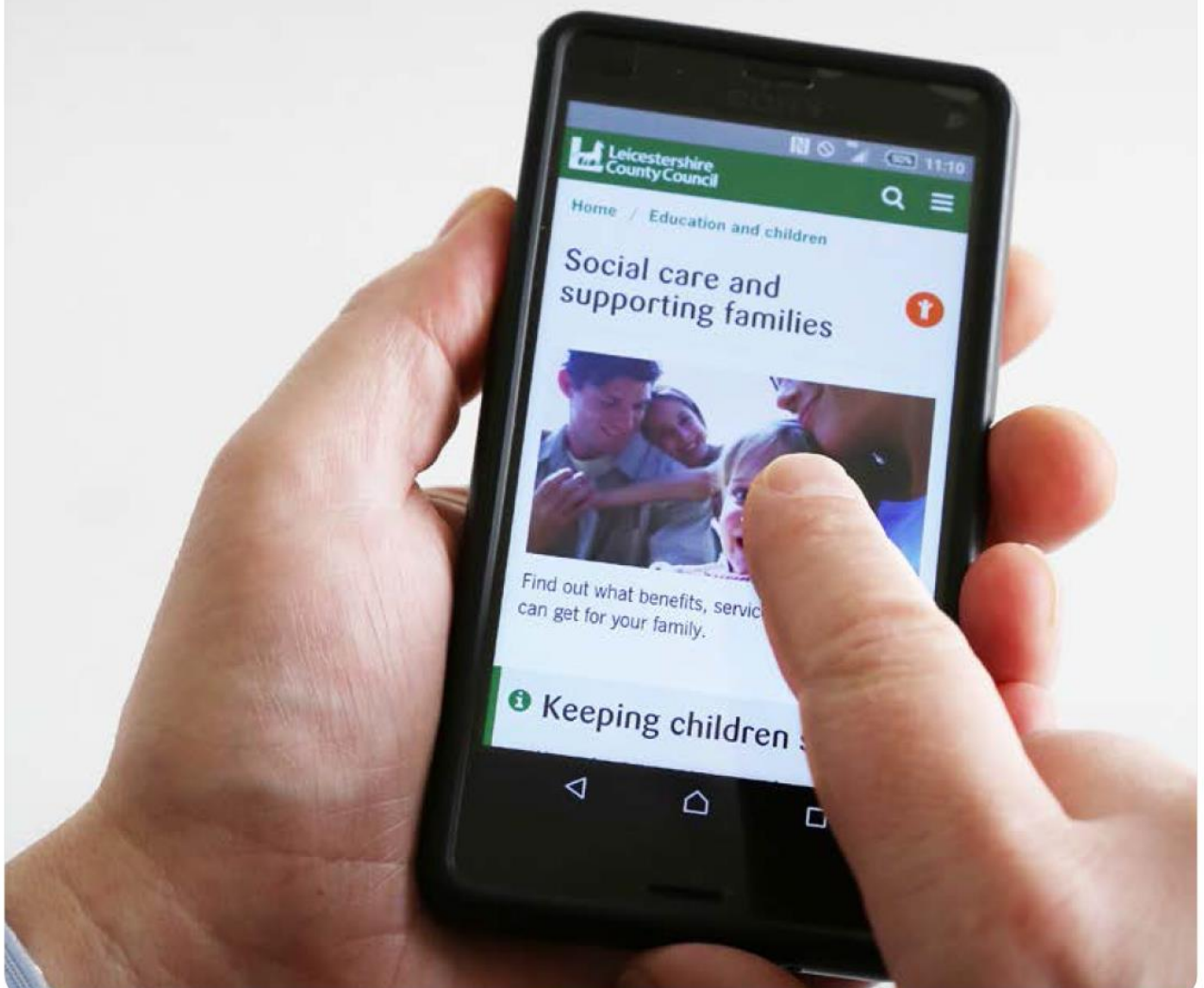




## SUMMARY

# Early help and prevention strategy

Helping people early to make a difference to their future



## Introduction

“We want people in Leicestershire to live long, healthy and fulfilled lives.

Along the way, we know that people will access health services.

Some may need help in their family, or seek support in their local community. Others may need help from services within the county council.

One thing is clear: getting help earlier can prevent problems from getting much worse in the long run.

Along with our partners across health, district and voluntary services, we are committed to helping people early – so that we can prevent people from needing to access much more specialist, complex and costly support later down the line.

In this work, we are responding to local and national changes to health and care services.

This strategy is a refresh of our approach to early help and prevention. It brings together our plans across children and adult services, as well as public health.

This strategy builds on strong foundations: there is much to be commended about the services delivered for people in Leicestershire. But there is also scope to join up, reduce duplication and make services more efficient.”

*- Ernie White, Cabinet Lead Member for Health*

## Purpose

In Leicestershire, early help is fundamental in tackling the root causes of problems as soon as they arise. This is critical to improving people's quality of life.

We want to break down the cycles which can negatively affect generations of families – preventing problems from escalating and reducing the need for services.

By helping people and communities early, we can also reduce the money we have to spend in acute services – such as specialist help, hospital stays or support in a crisis.

Investing in early help to prevent problems from getting worse will be better value for money in the long run.

This strategy has been developed as part of an externally commissioned review of early help and prevention in March / April 2016. The scope of this review included services either directly delivered by Leicestershire County Council or externally commissioned, and was undertaken to ensure that an integrated approach to commissioning and delivery of services which:

- Is efficient
- Focuses scarce resources on services that make the biggest impact
- Operates within available resources
- At a minimum, maintains existing safeguarding practices for children and young people

### Legal drivers

Recent changes in legislation have highlighted how important it is to consider the needs of children, young people and vulnerable adults in the context of their whole family.

The Children & Family Act 2014 emphasises joining up across education, health and social care to improve the lives of children, young people and their families.

The Care Act 2014 highlights support at the earliest possible stage to actively promote wellbeing and independence - not just waiting to respond when people reach a crisis point.

**“don't wait for a crisis – support  
people now, so that they're  
independent in the future...”**

## What do we mean by early help and prevention?

Partners across Leicestershire recognise that **prevention and early help** is more successful and cost effective than later, more formal interventions.

We want to act early to prevent problems from getting worse. Sometimes this will mean targeted interventions with an individual or their family. Sometimes – this help comes at an even earlier stage – for example within the community.

For Leicestershire, ‘early help and prevention’ can be described across services for children, adults and public health:

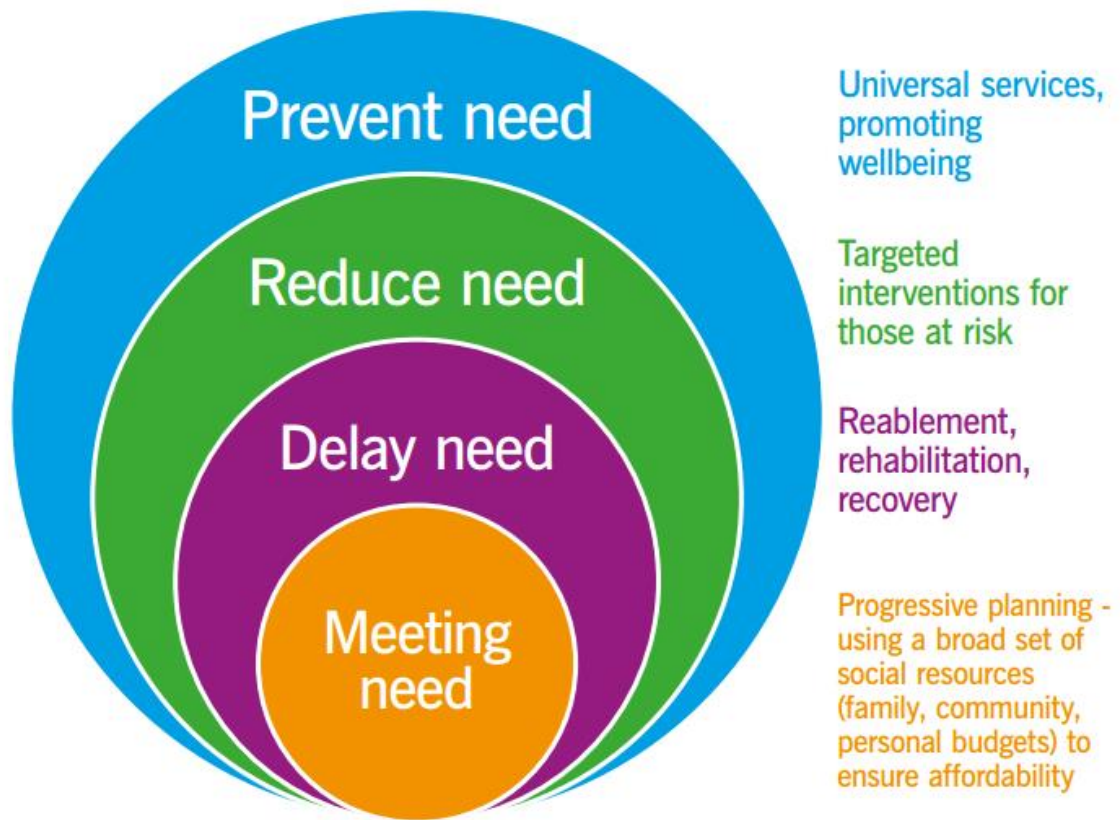
***“We will support communities at the earliest stage, to prevent and reduce the need for help. At the same time, we will target help as soon as possible to tackle problems emerging.”***

By **early intervention** we mean **the targeted action** that we take to prevent the development or escalation of problems.

This includes help provided early in life as well as the help delivered early in the development of a problem - with any person, regardless of age.

For children’s services we might talk about three levels of prevention: primary, secondary and tertiary.

When talking about adults, we’re more likely to use the terms ‘prevent, reduce and delay’. This is described in the diagram below.



<b>Primary prevention:</b>  <b>Prevent</b>	<b>Secondary prevention:</b>  <b>Reduce</b>	<b>Tertiary prevention:</b>  <b>Delay</b>
<b>Preventing the occurrence of problems</b>	<b>Preventing the problem from getting worse</b>	<b>Reducing the severity of problems</b>
<p>Early intervention activity is aimed at the whole population – to prevent ‘risk factors’ such as deprivation or poor health.</p> <p>Individuals and communities build up resilience and become stronger.</p> <p>Education and awareness raising, helps to strengthen the support communities provide for local people.</p>	<p>Agencies will intervene early with families who have existing risk factors, are vulnerable or who have additional needs to ensure that problems are stopped and do not get worse.</p>	<p>Agencies work with families to tackle more complex problems to reduce the severity of problems that have already emerged and reduce or delay the need for specialist services involvement.</p> <p>This includes children, young people and families in crisis and on the edge of family breakdown.</p>

## Vision

**By 2018 we will have a comprehensive offer for community-based prevention, funded by bringing together all the resources available to local councils and partners.**

This will include a core menu of preventative services will wrap around individuals and communities, as an essential component of the model of integrated care.

As part of this, every opportunity will be taken to improve health and wellbeing, support vulnerable people, maintain people's independence, manage demand, and address the wider factors which can impact on health and wellbeing.

## Principles

There are some clear principles to successfully delivering more targeted prevention.

- **Identifying people at risk**  
Being proactive and intervening at the right time is crucial. The offer may be targeted and in some instances it may be necessary to make a repeat offer of support or to 'follow up' with some individuals. To make identification successful, there will need to be a range of information and service access points provided by a range of providers, including Clinical Commissioning Groups where established methods of identifying people at risk are used. The community should also be playing a key role in early identification;
- **Supporting independence**  
Working with people to identify what their needs are and assisting them to get timely, effective and relevant information and to access community resources. This should be a largely short-term intervention which enhances control, increases resilience, facilitates participation and promotes inclusion. It should be outcomes-focussed and evidence-based and include an element of contingency planning for the future.
- **Making the most of what's in the community**  
There should be a wide range of community resources available and these should be able to respond to need associated with social isolation, health concerns, living environments, and carers. This community resource includes families, friends, neighbours, communities of interest, community groups and providers.
- **Community development**  
Supporting existing community infrastructures and community development. Key to this are the Local Area Co-Ordinators who can harness what's available to people.

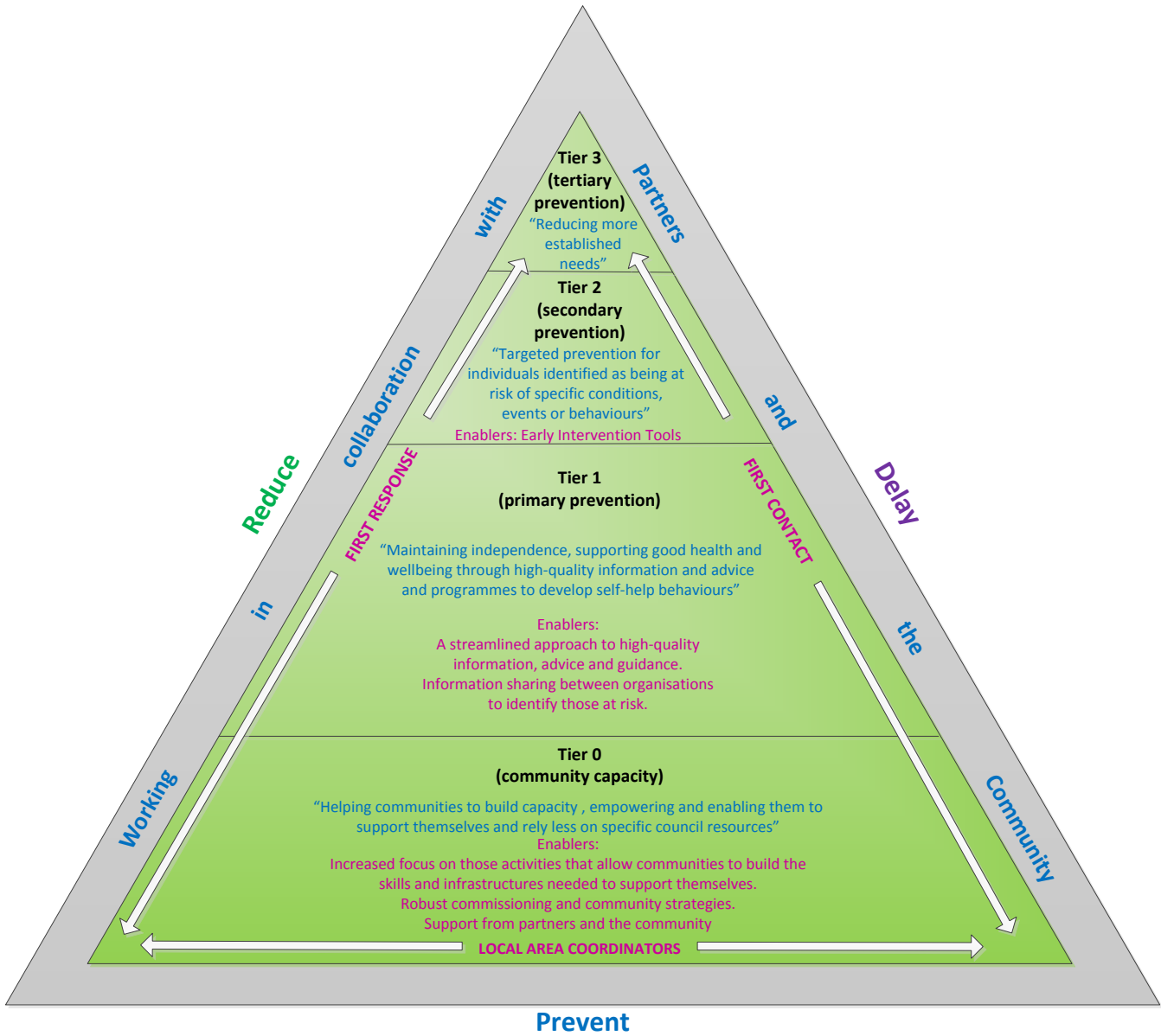
## The Leicestershire early help and prevention framework

To help understand how existing services in Leicestershire contribute to early help and prevention, a target operating model has been developed alongside the council's commitment to the principles of 'prevent, reduce and delay':

Tier 0 (Community Capacity)	Helping communities to build capacity , empowering and enabling them to support themselves and rely less on specific council resources
Tier 1 (Primary Prevention)	Maintaining independence, supporting good health and wellbeing through high-quality information and advice programmes to develop self-help behaviours
Tier 2 (Secondary Prevention)	Targeted prevention for individuals identified as being at risk of specific conditions, events or behaviours
Tier 3 (Tertiary Prevention)	Reducing more established needs



Target Operating Model for Early Help and Prevention



## Our current services – examples of our work

The next section summarises some of the specific services delivered through public health, adults' services and children's services.

### Public health

Examples of early help work includes:

#### First Contact

First Contact provides a central point of contact for professionals, coordinating access to a range of organisations providing advice, information and other services.

At present all referrals into the service come from professionals. From summer 2016 the new First Contact Plus service will allow self-referrals from the public into the service. First Contact also provides a link with Local Area Coordinators.

Whilst managed by Leicestershire County Council, there is a strong emphasis on working with partners. This is done through the First Contact checklist which enables partners to identify factors which might put people at risk.

#### Local Area Coordinators

Local Area Coordinators work in partnership with individuals, families and local communities to support them to access community resources and build capacity within communities. There are three key functions:

- Working with individuals who are frequent users of formal service to support them in accessing more preventative support within the community
- Working with communities to develop resilience and capacity
- Using knowledge and capacity held within Leicestershire County Council to enable communities and other agencies to support people in their local areas.

Access into the service for individuals can be through direct introductions from GPs and other health professionals, parishes, members of the community. Local Area Coordinators also work alongside other services within the council – such as Supporting Leicestershire Families.

**Case Study 1: Local Area Coordinators – Gwen’s Story**

Gwen is in her 90s and is living independently with a diagnosis of dementia. She requested a place at a day centre. The Local Area Coordinator visited her at home to find out her interests and the Coordinator then accompanied her to several of these groups to give her confidence. These included a coffee morning and a social group in a local church. Referrals were also made to the Alzheimer’s society and RVS Good Neighbours Scheme for befriending service, therefore avoiding any need for social services input at this time.

**Case Study 2: Local Area Coordinators – Luke’s Story**

Luke is 18 and was introduced to the Local Area Coordinator by the Job Centre. He was not in education, employment or training and lacked the confidence to deal with people face-to-face. He felt isolated and wished he had more friends. The Coordinator took time to explore what Luke’s strengths and interests were and supported him to join a training course 4 days a week. The programme includes life skills and confidence-building alongside B-tech qualifications. The course refunds Luke’s bus ticket and also gives him a lunch voucher, so he isn’t out of pocket. So far Luke has maintained a 100% attendance record and says that he has made new friends and feels more confident talking to people.

**Social prescribing**

Put simply, social prescribing is about patients with social, emotional or practical needs being referred to a range of local, non-clinical services, often provided by the voluntary and community sector.

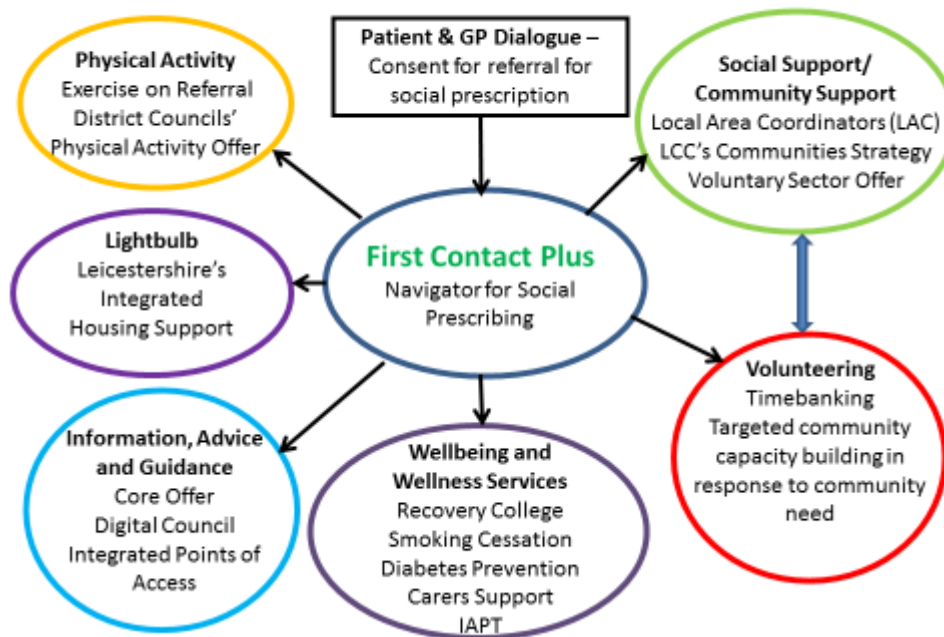
Social prescribing is often targeted towards older people with depression or who are socially isolated. However, many younger adults would also benefit from addressing isolation or emotional issues.

**Case Study 3: Social Prescribing – Arthur’s Story**

Arthur was referred by his GP because of his depression. He was upset that he was in hospital and was not with his wife when she died. He received considerable support from his children but they were all still grieving. Age UK referred all the family members to CRUSE and provided emotional and social support to Arthur over several weeks. Arthur was referred to a local community group and is attending a weekly men’s group and lunch group. Age UK introduced Arthur to another social prescribing client who also attends the community centre. They were old family friends who had lost touch, but now meet regularly.

The model below demonstrates how social prescribing may work in Leicestershire:

### Emerging Model for Social Prescribing



#### Case Study 4: Social Prescribing – Mary’s Story

Mary’s husband committed suicide three years ago. Mary returned to work after a very short period of compassionate leave. Recently, she was made redundant from her job and at the same time, her two children were diagnosed with mental health problems. Age UK provided emotional support during three home visits. Practical support was offered to assist Mary to sort out a number of financial issues. An appointment was made for advice on will-writing with a solicitor who visits Age UK monthly. Mary decided to look for new employment in a different sector and Age UK provided information on appropriate courses and training. In the meantime, Mary is volunteering as an Age UK befriender while looking for paid work. She has also attended a number of Age UK theatre outings.

## Adults' services

Examples of early help work include:

### **First contact points for information and advice**

- The council's Customer Service Centre (Adults)
- Leicestershire Advice Service (Adults)
- First Contact Plus (Adults – self-referral from Summer 2016)
- Local Area Coordinators (Adults and Families)
- Family Information Directory (Children and Families)

### **Assisted Living Technology**

This technology can help people to live more independent lives. It provides both stand-alone equipment, including easy-to-use mobile phones, memory aides and equipment for those who are deaf or hard of hearing, and a linked telecare service.

There is some overlap between early help and prevention services within Adults' Services and Public Health, including the role of First Contact and the Local Area Co-Ordinators.

## Children's services

Early Help in Children's Services covers the service areas of Youth Offending Service (YOS), Community Safety, Children's Centres, Supporting Leicestershire Families and Strengthening Families. There are also a range of externally commissioned contracts to support early help and prevention.

### Commissioned Contracts

Children's Services commissions a range of services. Actions to support a more consistent approach to the commissioning and contract management of external contracts are contained in the action plan.

### Children's Centres

There are 36 Children's Centres across Leicestershire that are grouped in line with district/borough boundaries. A team of people deliver targeted work with parents who are identified through midwifery services and referred to an intensive programme of weekly sessions for the first year, moving to other services in the second year.

There is also targeted work with families of children aged 3-5 who are referred via the Early Help Hubs.

Children's Centres still offer a universal offer predominantly delivered by other agencies, with examples being breastfeeding support, weaning support, baby clinics and parent led groups.

### Supporting Leicestershire Families

Supporting Leicestershire Families focuses on families whose needs fall just short of the Child in Need criteria.

The service delivers brief intervention work and will work with a family for up to a year. A pooled budget with police, CCG and districts is in place to support staffing costs.

#### Case Study 5: Supporting Leicestershire Families

The Grant family were at risk of eviction and were isolated from their family and community. The housing department had received complaints about anti-social behaviour and there were concerns raised about Mum's capacity to keep her children safe.

A Supporting Leicestershire Families worker carried out an initial assessment and drew up a plan to provide the right support. They helped Mum to get the right benefits, clear rent arrears and avoid eviction. They also parenting advice to help Mum to create better routines and a safer environment and they help to ensure that she had support from family members and local community groups.

The Grant family are still living in their home and have avoided eviction. Mum now feels more confident about asking for help and has rebuilt relationships with her family. There have been no further complaints about anti-social behaviour from the children.

**Youth Offending Service**

The Youth Offending Service (YOS) works with children and young people between the ages of 8 and 17 in order to prevent offending and re-offending. The YOS offers a range of interventions to support young people across Leicestershire and Rutland; one to one work, group work, substance misuse, mental health, reparation, health based interventions and street based work in anti-social behaviour hotspot areas.

**Families Information Service**

A Family Information Service holds information on many useful local organisations providing information and advice for families who have children or young people aged 0-25 years with special educational needs or disability.

## Early Help Hubs

Early Help Hubs are task groups which meet monthly to discuss the needs and identify support.

### **Case Study 6: Early Help Hubs – Family ‘M’**

Family ‘M’ live in a small village with very little public transport. Dad has physical disabilities and Mum helps to care for him. They are finding the behaviour of their child to be challenging and are feeling isolated. Mum wanted some help with benefits, getting back into work and support with behaviour strategies to use at home.

Mum was referred to the local Children’s Centre who invited her to attend the parenting group. They offered to arrange transport for her if she couldn’t get there using public transport. She was also referred to “Me and My Learning” through Melton District Council who supported her with checking the benefits that she was entitled to and devising a plan to help her get back into work.

### **Case Study 7: Early Help Hubs – Family ‘S’**

Family ‘S’ are struggling with multiple issues. Their youngest child has autism and anxiety and their eldest child has mental health difficulties; both are in receipt of services via CAMHS. Mum is struggling with depression and anxiety and is also having to manage her diabetes and chronic fatigue. The family are unable to pay their mortgage and are worried they may be evicted. Mum feels that she can no longer cope and doesn’t know where to start or how to get support.

The Adult Social Care Inclusion Service contact Mum to offer a 12 week programme of support. They will help her to make and attend a range of appointment to seek advice with her health needs, housing difficulties and debt support. The team will also liaise with Supporting Leicestershire Families who can provide help to Mum if she feels she needs further advice and support after the programme.



## Communications

Communicating the Leicestershire approach to early help and prevention is key.

Central to this will be building a strong dialogue with the community about how the council's role is changing, in the face of continued budget pressures.

The corporate communications function supports the following:

- Communicating to residents what they can do themselves to stay healthy and well
- Promoting what's available locally and where people can find information and advice
- Encouraging people to go online and self-serve
- Prompting changes in behaviour – so that people make the most of resources
- Promoting how people, communities and businesses can solve problems

## Our workforce

We must ensure everyone who works for us knows what early help and prevention means as part of their role. We want them to be innovative and think differently to make a difference to people's lives.

We will also continue to work in partnership with other organisations as part of the Leicestershire-wide commissioning academy.

## Building the strengths of communities

We have always worked hard to help communities to "help themselves". This has included supporting people to understand their needs and develop their own solutions.

Communities already help to deliver some services, including snow, flood and heritage wardens, Youth Offending Service volunteers, and supporting the delivery of libraries.

The council's approach is captured within its Community Strategy which commits to

**“leading Leicestershire by working with our communities and partners for the benefit of everyone.”**

The Communities Strategy is a vital in our delivery of early help. It sets out how we will:

- Unlock the capacity of communities to support themselves and vulnerable individuals and families – reducing the demand on public services
- Support communities to work in partnership with the council to design and deliver services
- Develop voluntary and community sector (VCS) organisations in Leicestershire as effective providers in a diverse market which supports delivery of the council's priorities.

There are a number of national examples of how a community based approach to early help and prevention can work well.

**Case Study 8: Community Capacity Building – Men in Sheds**

Men in Sheds is a programme set up by Age UK in Exeter focused on reducing isolation of older men, particularly those that may be unlikely to engage in traditional schemes such as coffee mornings. It encourages men over 50 to meet for a few hours a week to socialise over renovating and refurbishing tools and gardening equipment. There are now around 100 Sheds in the UK and many more at the planning stage, helped by the formation of a UK Men's Shed Association, offering help and support in setting up prospective new sheds.

Age UK Cheshire is currently looking at how the idea can be adapted to meet the needs of the veterans community offering a range of activities and services with other forces charities, in a friendly all inclusive environment.

**Case Study 9: Community Capacity Building – Timebanking**

Taff Housing Association in Cardiff piloted its Timebanking project with young women from supported housing projects. The women were encouraged to earn time credits by contributing to the running of the hostel and participating in projects. For each hour contributed, the women earned one-time credit that could be spent attending house events, such as parties, BBQs and picnics. Following the success of the pilot, Taff Housing Association rolled out the Timebank to the rest of its tenants and, with the support of Spice, engaged partners in the city to contribute to the project. Now tenants are able to spend their time credits at local arts centres, theatres and sports and leisure clubs.

## Tools to help assess problems

To identify those in need of support, we will develop an assessment checklist – which can help anyone working with people to spot the signs early.

Current examples of early help tools include the First Contact Checklist and the Early Help Assessments.

### Summary action plan

All workstreams will develop action plans with appropriate leads and timescales.

Workstream	Scope of Workstream	Outcomes
Commissioning	<ol style="list-style-type: none"> <li>1. Consider a joint approach to the commissioning of Early Help across Public Health, Adults' and Children's Services:               <ol style="list-style-type: none"> <li>a) Centralising the process of commissioning of contracts across the Council to reduce the risk of inconsistent commissioning</li> <li>b) Considering how the corporate commissioning strategy, departmental strategies and commissioning intentions can align to support this process.</li> </ol> </li> <li>2. Undertake a further review of current contracts and internal services across Public Health, Adults and Children's Services departments to identify where there may still be duplication or the opportunity to cluster contracts.</li> <li>3. Develop a consistent quality assurance and performance management framework to be applied across all externally commissioned contracts.</li> <li>4. Alongside the Communities Strategy, develop work with the VCS to develop consortia behaviour, whereby when new contracts are tendered or where they come up for review, the VCS may undertake a consortia approach to tendering to contract under a single agency agreement.</li> <li>5. Develop a consistent approach to contract renewal, reviewing all contracts 6 months prior to expiry against set criteria based upon:               <ol style="list-style-type: none"> <li>a) The new performance management framework.</li> <li>b) Relevance to Council priorities and latest analysis of need.</li> <li>c) Contribution to the TOM framework and the principles of Prevent, Reduce, Delay.</li> <li>d) Options appraisal of all ways of delivering the aims, objectives and intended outcomes of the service.</li> </ol> </li> </ol>	<p>Centrally held record of contracts across Public Health, Adults' Services and Children's Services.</p> <p>Performance Management Framework consistently applied.</p> <p>Commissioning intentions and activity within one department are consistent with and complement those in other departments.</p>

Workstream	Scope of Workstream	Outcomes
Review of Children’s Services: - Children’s Centres - Supporting Leicestershire Families / Youth Offending Team Linkages	<ol style="list-style-type: none"> <li>1. Implement Children’s Centre reconfiguration as per the recommendations in the Early Help and Prevention review.</li> <li>2. Review linkages between the Supporting Leicestershire Families and Youth Offending Teams in respect of young people at risk of anti - social behaviour.</li> <li>3. Explore potential efficiency savings through reviewing advice services in line with current plans by Leicestershire County Council.</li> <li>4. Explore increasing the level of support to address needs relating to autism within the Early Help Hubs, and to the Supporting Leicestershire Families Service in particular, as a number of cases appear to come to the hub with complex needs relating to autism that the Hubs appear to find challenging to address.</li> </ol>	<p>An opportunity to further align with other Local Authorities that are reviewing Children’s Centre provision without significantly reducing the offer to service users.</p> <p>An opportunity to ensure that the Supporting Leicestershire Families and Youth Offending Teams work efficiently together to reduce anti – social behaviour.</p>

Workstream	Scope of Workstream	Outcomes
Communities Strategy	<ol style="list-style-type: none"> <li>1. In line with Council plans, review, update and redevelop the Communities Strategy to include:               <ol style="list-style-type: none"> <li>a) How it supports the development of Tier 0 of the Target Operating Model across Public Health, Adults’ Services and Children’s Services.</li> <li>b) How the corporate Communications Strategy can support key messages to the community around asset based, self- help approach to early help and prevention.</li> <li>c) The development of consortia behaviour within the VCS.</li> <li>d) How the Workforce Development Team can support Council staff, elected members, partners and the VCS in promoting the culture of an asset based, self- help approach to early help and prevention.</li> </ol> </li> <li>2. In line with Council plans, review the voluntary sector infrastructure arrangements. Any savings should be re-invested Tier 0 work.</li> <li>3. In order to justify further investment in Tier 0 activity in the future, ensure that more rigorous KPIs are put in place for current Tier 0 contracts to evidence their impact on demand within other tiers and that the Council considers developing a model to evidence social return on investment.</li> </ol>	An updated, reviewed and most importantly integrated Communities Strategy that supports the development of Tier 0 of the Target Operating Model across Public Health, Adults’ Services and Children’s Services.
Workforce Development	<ol style="list-style-type: none"> <li>1. Consider further investment in the Commissioning Academy, including how a focus on Early Help can be built in.</li> <li>2. Develop further the concept of the Behavioural Insights training and develop a programme targeted at practitioners, elected members and wider partners.</li> <li>3. Develop a bespoke Workforce Development Strategy for Early Help and Prevention, integrated across all departments, to operate as a subset to the Council’s Corporate Workforce Development Strategy.</li> </ol>	The Leicestershire County Council approach to an asset based, self help approach to early help and prevention is understood by all key stakeholders and the culture of a “Leicestershire Way” is developed.

Workstream	Scope of Workstream	Outcomes
First Contact Points / Information and Advice	<ol style="list-style-type: none"> <li>1. Review Information and Advice services across Public Health, Adults' Services and Children's Services, identify / address where there may be duplication and explore where they may complement each other further and consider the role of the digital agenda.</li> <li>2. Consolidate services to make it simpler for the public to have one point of contact, whilst still remaining Care Act compliant.</li> <li>3. Consider the establishment of a low-level advice and information 'temperature-check' service for families, possibly through bringing this into the First Contact service alongside information for Adults.</li> <li>4. Consider directing more individuals away from the Customer Service Centre and towards First Contact as a central point of advice and information (via the new online self-referral too when developed) through information provided on the Council website and a diversion option on the CSC phone line akin to that currently set up for the Leicestershire Advice Service.</li> <li>5. Develop a policy for information sharing between First Contact, Early Help Hubs (including Supporting Leicestershire Families), and the Local Area Coordinators to proactively identify those who may require additional support from partner services.</li> </ol>	The approach to Information and Advice is clear and complementary, reducing duplication where this may exist.



Workstream	Scope of Workstream	Outcomes
Partnership	<ol style="list-style-type: none"> <li>1. Review the approach to Partnership to ensure that key stakeholders are involved at appropriate levels and stages. In particular:</li> <li>2. Review and develop the role of the Police and Fire Service as key partners in early help and prevention.</li> <li>3. Further develop partnerships between the eight Districts and the Council to support the provision of preventative activity throughout all areas of the county, reduce costs to the Council and districts by assessing areas of duplicated provision and working together to rationalise these.</li> <li>4. The emerging group focussing on identifying frequent users of public sector services needs to include all relevant services. There appears to be a reluctance of health agencies to share information at this stage, but other areas have overcome this as part of a “social prescribing model”. Learning from how these barriers have been overcome would benefit this group.</li> <li>5. Review the range of partnership groups which exist and develop a clear governance structure that ensures that these groups are accountable and add value.</li> <li>6. Collaborate on the development and introduction of a single Early Help Assessment checklist to support a whole workforce approach to identifying early indicators of vulnerability across Children and Adults.</li> </ol>	<p>Partners are involved at an appropriate stage and an integrated approach is taken to early help and prevention.</p> <p>Information is shared appropriately which helps identify those in need of early help and prevention.</p>

Workstream	Scope of Workstream	Outcomes
Assisted Living Technology	<p>1. Further review arrangements for the provision of Assisted Living Technology to explore:</p> <ul style="list-style-type: none"> <li>a) Opportunities for joint commissioning with districts to provide better economies of scale and a simpler and more consistent service for residents across the county.</li> <li>b) A review of the provision of stand-alone equipment as a free to use service through the introduction of means testing</li> <li>c) Further investigation of the benefits of developing self-assessment for basic pieces of Assistive Living Technology equipment via an online form akin to 'AskSARA', which would reduce the number of self-referrals to the customer service centre</li> <li>d) Consider how Assistive Living could be developed as part of the Lightbulb Project in the future.</li> <li>e) Further develop partnerships between the eight Districts and the Council to support the provision of preventative activity throughout all areas of the county, reduce costs to the Council and districts by assessing areas of duplicated provision and working together to rationalise these.</li> </ul>	<p>The provision of Assisted Living Technology is clear to professionals and service users. Financial efficiencies are gained through a more integrated approach between the Council and districts.</p>
Local Area Co-Ordination	<p>1. Consider how the Local Area Co-Ordination pilot may be extended, both in terms of the duration of the current programme but also extension across the County.</p>	<p>An approach to Local Co-Ordination is taken which supports the Prevent, Reduce, Delay model by meeting need at a community based level at the earliest opportunity.</p>