**Children and Communities Programme**

            **Denbighshire’s Integrated Families First and Flying Start Services – Case Study 2021-22**

Joint working between Denbighshire’s Integrated Families First and Flying Start Services - IFFFS (together with statutory services and other agencies) has continued to extend, improving coordination, enhancing our holistic whole-family approach across the Programme – supporting individual services to deliver improved outcomes for families.

**Case Study:**  In Term 3, the Flying Start Speech and Language Therapy (FS SaLT) Service supported 46 children with speech, language and communication needs.  The Service increasingly links with the wider IFFFS Programme and other services as required.

L was referred for FS SaLT through our Flying Start Outreach provision.  He was 2 years old, the youngest of 4 siblings and living with his mother. L’s older sibling was previously referred to SaLT, but the family did not engage.  L had been referred to Physiotherapy as he was not walking.

There was a history of domestic violence, mental health issues, wider family conflict and significant previous involvement with Children’s Services.  Mum’s initial concerns were around safety from her ex-partner, as well as housing, debt and childcare needs.

IFFFS were able to offer wider support with these before addressing L’s learning needs.  FS SaLT linked with Childcare, referred to Families First (Barnardo’s Family Life Skills commissioned project), who signposted to housing/debt advice, and encouraged Mum to access support from her GP with mental health.  The Team (with the Health Visitor), discussed a voluntary referral for child at risk support. Following a professionals’ meeting, this was escalated and led to a CASP meeting and a joint plan/approach.

FS SALT visited the family at home to help prepare Mum to engage with the NHS SaLT Service through the Children’s Development Centre.  The family was offered a package of re-engagement support, including indirect contacts, referrals, direct parent-child interaction therapy sessions and interim strategies for L’s progression.

To address challenges around engagement, FS SaLT adopted a flexible approach to contact, with phone/ text reminders before visits and opportunities to re-try sessions which had been missed.  Mum was able to build up trust with the Service and began attending health appointments regularly.

Over the course of L’s FS SaLT support, he progressed from being significantly delayed across all milestones to now meeting eye contact, effectively seeking closeness/hugs from Mum, starting to make noises & babble, and anticipating familiar play routines. He can also now walk.  His NHS care has been re-opened following the family’s engagement and he is awaiting his next therapy offer.

Joint working and information sharing was vital to link with other teams, to determine what was important to the family and to prioritise and escalate support in a timely manner.  This facilitated improved outcomes around speech language and communication for L.