Team Around the School

School Attendance Impact Story

Enable, Share, & Collaborate

North West Children's Safeguarding Partnership

CONTEXT

The Team Around the School (TAS) model was piloted in Sefton from September 2023 as part of the borough's improvement journey. It was developed in response to families engaging with multiple services without a coordinated plan, causing stress and poor outcomes, and to better utilise schools as key anchors of support. TAS provides a school-led, multi-agency early-intervention approach to ensure the right support is offered at the right time.

Partners include Sefton Council, NHS (Mersey Care, Alder Hey), Family Wellbeing Hubs, and the voluntary sector.

OBJECTIVES

- **Enable** targeted early help to reduce escalation.
- **Share** responsibility for managing risk.
- **Collaborate** to strengthen local partnerships and networks.

INTERVENTION

The Team Around the School model provides support through a flexible, multi-layered approach. Cluster meetings sit at the core, bringing schools and multi-agency partners together to identify emerging needs and agree helpful interventions, enabling timely responses and preventing escalation. Families are supported through the strengths-based Pathway to Change, which helps co-produce clear goals and track progress.

Alongside individual support, TAS builds school-wide capacity through training such as trauma-informed practice, peer learning, and shared resources across clusters. Community engagement is key, with coffee mornings, drop-ins, and marketplace events creating informal spaces for early conversations. Interventions range from brief signposting to focused work over several weeks, ensuring families receive the right support, at the right time, from the right person.

OUTCOMES

EVIDENCE OF IMPACT

Staff: 88% reported TAS had a positive impact; all understood the model and supported expansion.

Parents: 82% were aware of TAS; 66% saw improvements for their family; 76% would recommend it.

Overall: Improved collaboration, reduced duplication, timely support, and strong informal peer networks.

Current reach: 183 children (114 families), around 19% of the EH caseload.

Rising demand:

- 2024–25: 220 children (6.6% of Early Help cases)
- 2025–26 to date: 486 children (22%), more than double the previous year.

CHALLENGES & LESSONS LEARNED

Communication gaps — particularly in separated families — have emerged, highlighting the need for clearer communication and defined roles.

Case management and information-sharing systems remain challenging, and identifying a workable solution is still outstanding.

Fully engaging Early Years providers has been difficult due to capacity issues, meaning they are not yet embedded in the model.

The lead practitioner role has not been implemented as intended and will be revisited as part of planning for Families First Partnership delivery.

OPPORTUNITIES & FUTURE PLANNING

We are exploring how to integrate TAS into Family Help and Neighbourhood Health approaches, as TAS predates the multidisciplinary team model.

A neighbourhood-level data dashboard is being developed for real-time monitoring of attendance, exclusions, referrals, and health priorities.

Social workers are now holding child-in-need cases across clusters, with a focus on neglect, to build on existing trusted relationships.

IMPLEMENTATION GUIDELINES

Secure leadership buy-in from schools and partner agencies.

Clarify roles and responsibilities using the guidance to define core and supporting team functions.

Strengthen communication and relationships by clearly explaining TAS to families and allowing time to build trust across the cluster.

Establish effective governance; operational and strategic groups were key to shaping the pilot and capturing learning.

Continually review and adapt the model using qualitative feedback and data.

> *I just wanted to praise Jenni for all her support and guidance. ***** has settled into high school life, and the transition has been very smooth thanks to the support he and I have received.*



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