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Guidance

# Chapter 3: The National Supporting Families Outcome Framework

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**Applies to England**

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## Supporting Families programme guidance 2022 to 2025

### What does this document cover?

Guidance relating to the delivery of Supporting Families in 2022-25

### Who is it for?

Intended for use by local authority Supporting Families teams and their partners, auditors and analysts.

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# The National Supporting Families Outcome Framework

Since April 2015 all local authorities delivering the Supporting Families programme have been required to have in place a local Supporting Families Outcome Plan. In the simplest terms, a Supporting Families Outcome Plan was required to set out what each local authority and its partners considered to be the right indicators of eligibility and successful outcomes - measured at a family-by-family level - against the Supporting Families headline objectives.

Following The Department for Levelling Up Housing and Communities (DLUHC) commitment in [Supporting Families 2021-22 and beyond](#), the national team have been working with all local authorities and stakeholders inside and outside of government, to co-design a national Supporting Families Outcome Framework.

Policy teams in six different government departments inputted into a draft framework of ten headline problems. The draft framework then went through extensive engagement and re-drafting with local authorities as well as the Early Intervention Foundation to ensure the outcomes and evidence measures were practical, deliverable and ambitious for families.

The new national framework has been developed to achieve a number of aims.

- 1. Increased focus on the current needs of families:** The updated framework seeks to address the current needs of families, especially in the context of levelling up and recovering from the impact of Covid-19. Increasing the headline outcomes from six to ten reflects the complexity of families' lives and the wide-ranging support provided by local authorities and their partners.
- 2. Support the programme aims of helping to rebalance the demand levels in children's services and levelling up support for families:** The framework tackles the multiple and complex problems families face, such as unemployment, financial insecurity, risk of homelessness and educational inequality, as well as children and risk from abuse and exploitation and families who are experiencing domestic abuse.
- 3. Improved consistency across all local authorities:** The framework sets the standard for what outcomes families should be achieving and what problems local areas should be focusing on, for example the new framework puts a renewed focus on early years, housing, child exploitation, and substance use.
- 4. Increased use of good evidence and data measures:** Suggested data measures for both programme eligibility and successful outcomes are set out in the new national outcomes framework. This allows for greater national comparison and wider sharing of good data practices across local authorities and across government.
- 5. Reduced bureaucracy:** Data checks at the point of outcome submission have been reduced and instead focus on the priority areas of school attendance and accepted rereferrals into early help or children's social care.

This national framework will come into effect from 3 October 2022.

## Framework changes and eligibility

The new Supporting Families Outcomes Framework sets out ten headline outcomes. Below these outcomes sit descriptors of the family needs that make up the eligibility criteria for the Supporting Families programme, as well as suggested data sources for identifying families with these needs.

Each family must demonstrate a minimum of three eligibility criteria or family needs as set out in the national Supporting Families Outcomes Framework.

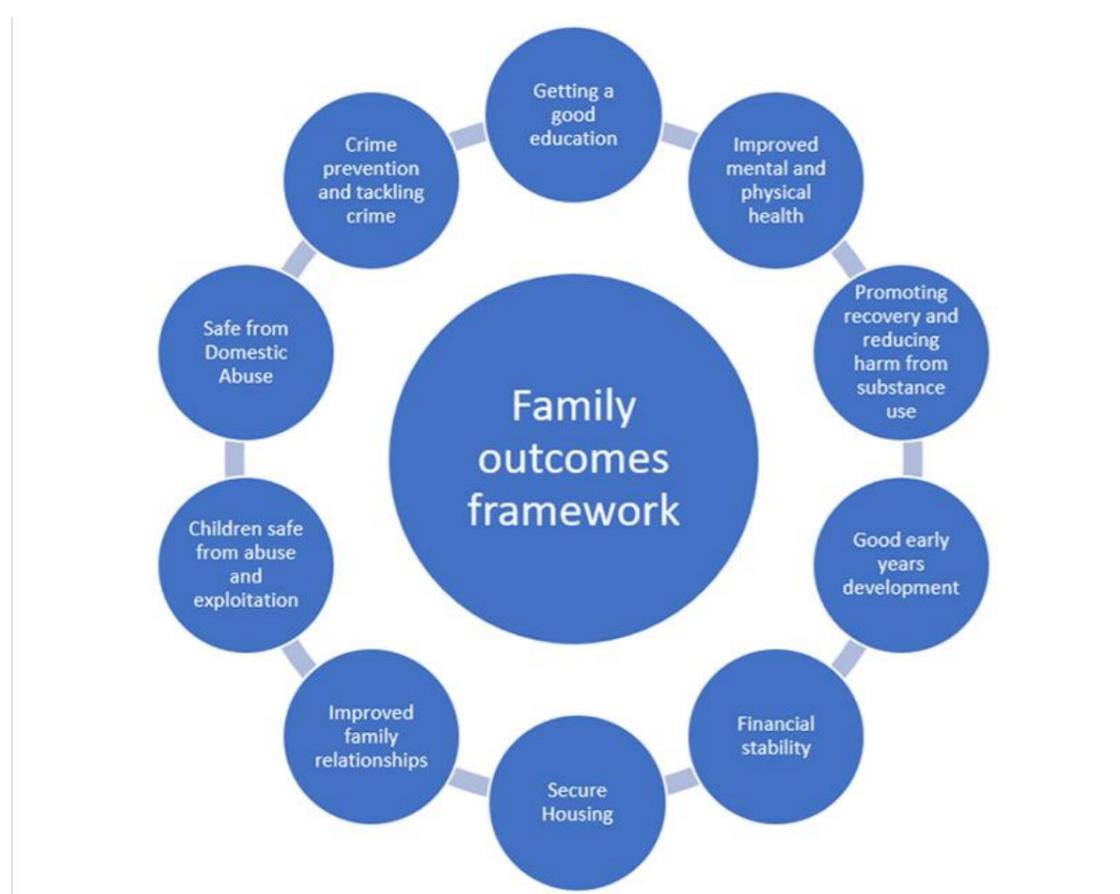
The framework also includes predetermined outcomes that must be achieved with all families before a successful family outcome is submitted.

Further chapters of this guidance provide detailed information about how to identify and work with families under the new national outcomes framework, and the requirements for submitting successful family outcomes.

Some outcomes are harder to measure than others and whilst some data is easily accessible for all local authorities this is not the case for all outcomes and all areas. The National Supporting Families Outcome Framework therefore offers local authorities flexibility to use locally available and measurable evidence sources. DLUHC will regularly review the framework to ensure it continues to recommend the most up-to-date and robust data, outcomes and evidence.

The 10 headline outcomes are:

- Getting a good education
- Good early years development
- Improved mental and physical health
- Promoting recovery and reducing harm from substance use
- Improved family relationships
- Children safe from abuse and exploitation
- Crime prevention and tackling crime
- Safe from domestic abuse
- Secure housing
- Financial stability



The national Supporting Families Outcome Framework is attached in full at Annex A of this guidance.

## Getting a good education

Children in families on the programme are nearly three times more likely to be

persistently absent (i.e. they missed 10% or more education sessions) compared to school children nationally. Supporting Families sets out to tackle school absence and improve the life outcomes of children by requiring sustained good attendance for all children in the family, across two consecutive school terms.

Family Need	Data Source	Outcome	Evidence
Average of less than 90% attendance (authorised absence optional) for 2 consecutive terms	Census, Live Data	Sustained good attendance	Average attendance 90% or above for every child in the family over 2 consecutive terms
Average of less than 50% attendance unauthorised and authorised for 2 consecutive terms	Census, Live Data	Sustained improvement from very poor attendance	At least a 30% improvement in attendance, with a minimum of 50% average attendance, over 2 consecutive terms
Not able to participate and engage with education – motivation, emotional regulation and behaviour difficulties, risk of, or subject to, exclusions, concerns around suitability of Elective Home Education, child is off-roll and not receiving an education otherwise, risk of NEET	Census, Live data, Strengths and Difficulties Questionnaire (SDQ) scores) Information from practitioner assessments, contacts and referrals.	Improved engagement with education (e.g., pupils no longer on report, reduction/no detentions)	Validated outcome measure: Improved SDQ scores Fewer days lost to suspension and exclusion over 2 two consecutive terms (immediately preceding the claim), reduction threshold can be locally defined.  Professional judgement - No further concerns about suitability of Elective Home Education  Child who was off roll receiving a suitable education  Practitioner assessed outcomes
Child's special educational needs not being met	SEND data, Education	Family happy that	Child's needs have been

Health and Care (EHC) plan	special educational needs being met, and	appropriately assessed and suitable package of support is in place as per the SEND Code of Practice.
Information from practitioner assessments, contacts and referrals, including self-referral.	school/ early years settings are providing adequate support.	Family engaging with package of support and has a trusted relationship with the team around the family (Supplementary)

## Good Early Years Development

Good early years development improves children's life chances. The framework recognises the importance of these earliest years, including the first 1001 days, for achieving the best possible start in life.

Support for families may begin before a child is born and expectant or new parents who require additional support may be eligible for the programme. Providing guidance for parents and developmental support for babies and young children is essential for delivering strong health and educational outcomes for children, ensuring they have a positive start in their early years.

Family need	Data source	Outcome	Evidence
Expectant or new parent/carers who require additional or specialist support (e.g., young parents, parents who have been in care, parents with learning needs)	GP, Dentist, Health Visitor, Midwife, Family Nurse Partnership, Health records  Information from practitioner assessments, contacts and referrals, including self-referral.	Families are engaged with appropriate support that can be seen to be making a difference; capacity for positive, effective parenting increased and they are accessing and engaging with services	Completed evidence-based parenting course with evidence of parents/carers implementing those strategies and improved outcomes  Practitioner and/or self-assessment - improved outcomes
Child's (0-5 yrs) physical health needs not met (e.g., immunisations not up to date, concerning accidental injuries, dental hygiene)	A&E records, GP, Dental, Midwife, Family Nurse Partnership, Health Visitor.  Information from practitioner	Child's physical health needs met, better awareness of home safety and accident prevention	A&E records, GP, Dental, Midwife, Family Nurse Partnership, Health Visitor  Practitioner and/or self-

	assessments, contacts and referrals, including self-referral		assessment – improved outcomes
Child's (0-5 yrs) developmental needs not being met (e.g. communication skills/speech and language, problem-solving, school readiness, personal social and emotional development)	<p>Early Language Identification Measure (ELIM) data, Ages and Stages Questionnaire (ASQ) SE, Ages and Stages Questionnaire (ASQ) 3. SDQ scores for 3+</p> <p>Early Years Foundation Stage Profile – not meeting development goals</p> <p>Not taking up 2-year-old entitlement or 3–4-year-old universal early years entitlement</p> <p>Not attending 2-year Universal Health Visitor Review</p> <p>Information from practitioner assessments, contacts and referrals, including self-referral</p>	<p>Child's developmental needs are being met, allowing them to make progress at a pace that is suitable for them</p> <p>Child has the right support in place to make progress</p> <p>Children and young people with probable/confirmed prenatal alcohol exposure and significant physical, developmental or behavioural difficulties are referred for foetal alcohol spectrum disorder (FASD) assessment</p>	<p>Improvement in ELIM or ASQ scores if relevant</p> <p>SDQ scores (for 3+)</p> <p>Take up of 2-year-old or 3–4-year-old entitlement, attending development check</p> <p>Practitioner assessment - improved outcomes, self-assessment (parent/carer) - improved outcomes</p>

## Improved mental and physical health

The national evaluation shows that complex families have disproportionately high levels of health problems compared with the general population. Poor mental health is particularly pertinent, with over two fifths of families on the programme having a family member with a mental health problem. Health needs have a significant impact on the whole family and may require specialist support.

The programme seeks to reach families with a range of physical and mental health needs. These can affect the whole family who may, in turn, require additional support and service coordination. The outcomes below also refer to improvements to wellbeing, as well as mental health. We recognise that not all problems can be

solved or improved in all circumstances, but in those instances lead practitioners should be aiming to see some level of improved wellbeing before recording a successful outcome.

If practitioners would like guidance, the best place for general well-being and mental health advice is the [NHS Every Mind Matters website](#). The Department for Education also has a [longer resources pack](#) aimed at teachers, but which may be helpful to any practitioner supporting people with their mental health.

Family need	Data source	Outcome	Evidence
Child needs support with their mental health	Mental health service provider records	The child's mental health and/or wellbeing has improved	Validated outcome measure*
	GP/ other health data source	Family/parents/carers feel better equipped to manage the child's mental health and well-being	Diagnosis received, if relevant, and appropriate support in place
	Information from practitioner assessments, contacts and referrals, including self-referral		Child (and/or parent/carer) is engaging with, and benefitting from, appropriate support (e.g., from mental health teams) (Supplementary)
Adult needs support with their mental health	Mental health service provider records	The adult's mental health and/or wellbeing has improved	Validated outcome measure*
	GP/ other health data source	Family/parents/carers feel better equipped to manage the adult's mental health and well-being	Diagnosis received, if relevant, and appropriate support in place
	Information from practitioner assessments, contacts and referrals, including self-referral		Adult is engaging with, and benefitting from, appropriate support (e.g., from mental health teams) and adhering to medication regime (if

			relevant) (Supplementary)
			Professional assessment or self- assessment - improved outcomes
Child and/or parent/carer require support with physical health needs that affect the family (e.g., long-standing health conditions requiring management, physical disabilities requiring adaptations)	Health vulnerabilities data  GP/ other health data source  Information from practitioner assessments, contacts and referrals, including self- referral	Physical health needs are being well- managed, and family have sufficient / the right support in place	Necessary adaptations have been made/in place  Family is engaging with, and benefitting from, appropriate support, plan in place to manage on- going health needs (Supplementary)
			Professional or self- assessment - improved outcomes

\*e.g., Improved SDQ scores, improvement on Short Warwick – Edinburgh Mental Wellbeing scale (SWEMWS) (11+), Generalised Anxiety, Assessment (GAD-7), The Revised Child Anxiety and Depression Scale (RCADS) (for children aged 8-18), Kessler psychological distress scale (K10) and Depression Anxiety Stress Scale (DASS)

## Promoting recovery and reducing harm from substance misuse

Substance misuse is a long term and complex problem that may have a significant impact on vulnerable families. Around one in six families on Supporting Families has an individual dependent on non-prescription drugs or alcohol in the year before joining the programme.

The framework recognises that recovering from addiction and substance misuse is complex and, in many cases, recovery is not a linear process. This is reflected in the predetermined national outcomes which require a reduction in substance use alongside a better understanding of the associated risks.

There is clear evidence that growing up in a family affected by parental (or significant other adult's) substance misuse can cause significant harm to a child's wellbeing and to their long-term outcomes. The framework recognises the importance of supporting the children who are affected by parental substance misuse, by ensuring that

assessment and support for an 'affected by' child is included on the predetermined national outcomes.

Family need	Data source	Outcome	Evidence
An adult has a drug and/or alcohol problem	Alcohol risk screening tools: AUDIT alcohol screening tool, AUDIT-C alcohol screening tool, ASSIST-Lite screening tool	Adult reducing / abstaining from substance use (as measured by rescreening)  And  Adult better equipped to manage the substance use. Adult understands the risk / impact of the substance use on the family and children and is able to promote safety and implement actions to reduce harm.	Treatment Outcomes Profile (TOP)  Improved scores on AUDIT, AUDIT-C, Severity of Alcohol Dependence Questionnaire (SDAQ), ASSIST-Lite.  Adult engaging with appropriate level of support and completing specialist treatment
	Clinical diagnostic tool for alcohol dependence: Severity of Alcohol Dependence Questionnaire (SADQ)	And  Assessment undertaken with child/family to determine impact of substance misuse upon child and child is benefitting from appropriate support (e.g., whole-family substance misuse work, affected-by service, young carers service, appropriate therapeutic support.	Practitioner or self-assessed improved outcomes  Adult engaged in evidence-based whole-family interventions with evidence of adult implementing those strategies and improved outcomes for children and the family (Supplementary)
	Mental Health Data Set / Health provider records		
	Information from practitioner assessments, contacts and referrals, including self-referral		Improved score on child's Strengths and Difficulties Questionnaire, if in receipt of specialist 'affected-by' support (Supplementary)
	Police report		
A child or young person has a drug and/or alcohol problem	ASSIST-lite (18+), AUDIT and DAST-A (Drug Abuse Screening Test for Adolescents)	Child reducing / abstaining from substance use  And  Family / Child better equipped to manage the substance use and find alternative coping strategies, and understands risk / impact of substance use	CRAFFT, ASSIST-lite, AUDIT and DAST-A (Drug Abuse Screening Test for Adolescents)-improvements in scores  Validated outcome measure e.g., SDQ scores
	CRAFFT, Mental Health Data Set / Health		Child engaging with,

provider records

Information from practitioner assessments, contacts and referrals, including self-referral

and benefitting from, appropriate level of support and completing specialist treatment, if necessary (Supplementary)

Practitioner or self-assessed improved outcomes

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## Improved family relationships

Families who face multiple and complex needs may require support to develop positive and supportive relationships within the family. The National Outcomes Framework recognises the long-term benefit of positive parenting and attachment, and the impact that family conflict can have on children in the family. Forty percent of keyworkers working on the programme said they provide inter-parental relationship support at least once a week.

Conflict in relationships is expressed through many different behaviours which can have an impact on families' lives. When conflict is between parents, it can have negative effects on their children's mental health and wider development.

Some level of arguing and conflict between parents is often a normal part of everyday life. However, there is strong evidence to show how inter-parental conflict that is frequent, intense and poorly resolved can have a significant negative impact on children's mental health and long-term life chances.

Where parental conflict is being addressed by DWP's Reducing Parental Conflict<sup>[footnote 1]</sup> programme, it is that which is below the threshold of domestic abuse. Where domestic abuse is present there will be an imbalance of power and/or control and one parent may feel fearful of the other.

The framework also recognises the impact of violence or abuse inflicted by children towards other members of the family<sup>[footnote 2]</sup>, and the impact of unmet needs for young carers.

Family need	Data source	Outcome	Evidence	
Parent / carers require parenting support	Information from practitioner assessments, contacts and referrals, including self-referrals.	Parent / carer demonstrates improved, positive parenting (e.g., improved parent / child interactions; positive attachment etc)	Completed evidence-based parenting course with evidence of parents implementing those strategies and improved outcomes	Practitioner / self - assessed improved outcomes
Harmful levels of parental conflict i.e.,	Police report Information	No harmful parental conflict and	Validated outcome measure e.g.,	

when it is frequent, intense or poorly resolved	from practitioner assessments, contacts and referrals, including self-referrals	improved family relationship  Parents /carers understand the impact of the conflict on the children	Family relationship quality tool  Completed relationships support (evidence-based where possible), evidence of parents/carers implementing those strategies and improved outcomes.  Practitioner / self-assessed improved outcomes	
Child / young person violent or abusive in the home (to parents/carers or siblings)	Police report	Information from practitioner assessments, contacts and referrals, including self-referrals.	No harmful child to adult or sibling abuse.  Child is better equipped to understand behaviours, develop coping mechanisms and self-manage.  Parent/carers better equipped to manage child's behaviour and relationship improved	Child has received, and benefitted from, appropriate therapeutic support.  Family successfully complete specialist child to parent abuse parenting course (or specialist course for children with SEND), and / or received therapeutic support, evidence of improved outcomes.  Practitioner / self-assessed improved outcomes, Improved self-assessment.
Unsupported young carer or caring circumstances changed	Information from practitioner assessments, contacts and	Unsupported young carer now supported, including with	Young Carers Assessment and relevant support in place	

requiring additional support	referrals, including self-referrals.	change in caring circumstances	Accessing targeted young carers support / regular respite support provided  Practitioner/self-assessed improved outcomes.
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## Children safe from abuse and exploitation

Children who experience, or who are risk of, abuse and exploitation are amongst the most vulnerable in society. The national Supporting Families Outcome Framework includes five indicators of eligibility under this headline outcome reflecting the complex nature of the needs that a family might be experiencing.

In the indicators below children could be at risk from harms within or outside the home or both. They also identify factors that put children at additional risk from harm, such as going missing and radicalisation.

Effective multi-agency working that operates across geographical boundaries can prevent the needs of these children and their families from escalating to more intensive statutory services.

For practitioners who would like further guidance, [Working Together to Safeguard Children](#) provides the framework for child safeguarding.

Family need	Data source	Outcome	Evidence
Emotional, physical, sexual abuse or neglect, historic or current, within the household	Open Early Help, CIN or CP plan	No longer abuse or neglect in the household	Early help, CIN or CP plan closed and/or stepped down, Practitioner assessed - improved outcomes
	Information from practitioner assessments, contacts and referrals	Child / family has been supported following abuse/neglect and has strategies to manage going forward  Children are in an emotionally and physically safe environment	
Child going missing from home	Police report	Child no longer going missing	No missing reports in month prior to closure and no re-referral into services 6 months following closure
	Information from practitioner assessments, contacts and referrals.	Child/family has been supported following missing episodes	

			Practitioner assessed - improved outcomes
Child identified as at risk of, or experiencing, sexual exploitation	Police report  Information from practitioner assessments, contacts and referrals.	Child not experiencing sexual exploitation  <b>And</b>  Child has been supported following sexual exploitation  Partners worked alongside child/family to manage risk of sexual exploitation	Practitioner and self-assessed – improved outcomes  <b>And</b>  No more police reports
Child identified as at risk of, or experiencing, criminal, or pre-criminal, exploitation (e.g., county lines)	Police report  Information from practitioner assessments, contacts and referrals.	Child not experiencing criminal or pre-criminal exploitation  <b>And</b>  Child has been supported following criminal exploitation  Partners worked alongside child/family to manage/reduce risk of criminal exploitation	Practitioner and self-assessed - improved outcomes  <b>And</b>  No more police reports
Child identified as at risk of, or being affected by, radicalisation	Information from practitioner assessments, contacts and referrals.	Child not affected by radicalisation  <b>And</b>  Child has engaged with, and benefitted from, relevant support  Partners worked alongside child/family to manage or reduce risk	Practitioner and self-assessed - improved outcomes
Child experiencing harm outside of the family (e.g., peer to peer abuse, bullying, online harassment, sexual harassment/offences)	Police report, School report  Information from practitioner assessments, contacts and referrals.	Child no longer experiencing harm  <b>And</b>  Child confident in reporting and being taken seriously  Partners worked alongside child/family to develop strategies and	Practitioner or self-assessed improved outcomes, closure of plan, no police or school reports

support them to cope with, and respond to, abuse / harm outside of the home and to keep themselves safe.

## Crime prevention and tackling crime

Crime and anti-social behaviour have a significant negative impact on individuals and communities - including the victims, the relatives of offenders, and the offenders themselves - as well as a significant financial cost to society. For example, reoffending costs society approximately £18 billion per year<sup>[footnote 3]</sup>.

This framework covers young people who are involved in crime and anti-social behaviour as well as young people who are at risk of becoming involved in crime. This allows local authorities to support families at the earliest opportunity and may be particularly helpful when identifying families where there is strong intelligence about a family's involvement in activities such as gangs, youth violence or serious organised crime, but no proven offence.

The outcomes framework also covers adults who are involved in crime and anti-social behaviour. This reflects the evidence that parental anti-social or criminal behaviour is a significant factor in youth offending. The children of offenders are also more likely to be excluded from school and twice as likely to suffer from behavioural and mental health problems. The framework also reflects the importance of tackling the causes of reoffending - unemployment, insecure accommodation and substance.

These outcomes relate only to number of incidents. However, lead practitioners will also be considering severity of crime in deciding where a case is appropriate for a successful outcome. If someone commits a very serious crime it may warrant a discussion with the team about where that should be recorded and the appropriate outcome.

Family need	Data source	Outcome	Evidence
Adult (18+) involved in crime and/or ASB (at least one offence/arrest/named suspect report/ASB incident) in the last 12 months	Police report, Probation data, multi-agency safeguarding panels	(7 or fewer incidents in 12 months) Adult no longer involved in crime Or (8 or more incidents in 12 months) Adult demonstrates at least a 50% reduction in incidents of crime	Where number of incidents* is 7 or fewer, the person must not have any offences, arrests, named suspect reports, or ASB for 6 months.
	Information from practitioner assessments, contacts and referrals, including self-referral		Where number of incidents* is 8 or more, the person must demonstrate a reduction in the number of incidents (offence/arrest/named suspect report/ASB) of <b>at least 50%</b> which is sustained for a period of at least 6 months.
Young person (u18) at risk of crime –	Multi-agency safeguarding	Young person not involved in crime	Young person must not have any offences,

including gangs, serious violence and weapons carrying, or involved in harmful risk-taking behaviour	panels, Asset Plus, Police data  Self-report delinquency scale  Information from practitioner assessments, contacts and referrals, including self-referral	or anti-social behaviour.  Young person supported to better manage risks of becoming involved with crime, through accessing relevant services and fully engaging in this process.	arrests, named suspect reports, or ASB for 6 months  Engaging with, and benefitting from, relevant and appropriate services (e.g., VRUs, CAMHS, Education, AP, youth offending services) regularly and maintains positive behaviour (Supplementary)
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Young person (u18) involved in crime and/or ASB (at least one offence/arrest/named suspect report/ASB incident) in the last 12 months	Multi-agency safeguarding panels, Asset Plus, Police data, Probation data  Information from practitioner assessments, contacts and referrals, including self-referral	(4 or fewer incidents in 12 months) Young person no longer involved in crime Or (5 or more incidents in 12 months) Young person demonstrates at least a 50% reduction in incidents of crime provided none of these are a severe offence as defined by the list of severe offences.	Where number of incidents* is 4 or fewer, the young person must not have any offences, arrests, named suspect reports, or ASB for 6 months  Engaging with, and benefitting from, relevant / appropriate services (e.g., VRUs, CAMHS, education, AP, probation, youth offending services) until problems have resolved/ solutions progressed (Supplementary)
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**And**

Young person supported to better manage risks of becoming further involved with crime, through accessing relevant services and fully engaging in this process.

\*Consistent measure required i.e., if identifying on arrests, arrests must be measured for outcome

## Safe from domestic abuse

At least a quarter of families previously supported by the programme had at least one

family member affected by domestic abuse in the year before intervention. Domestic abuse remains an important problem for the programme to tackle, and positive outcomes may rely on changes in perpetrator behaviour. This is why we have included an indicator and outcomes specifically focused on perpetrators of domestic abuse, as part of a whole family approach.

Supporting Families applies the following definition of domestic abuse in accordance with the Domestic Abuse Act 2021:

‘any incident or pattern of incidents of controlling or coercive; violent or threatening behaviour or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. Abuse can encompass, but is not limited to psychological, physical, sexual, economic and emotional abuse. Sexual abuse is defined as any sexual act or attempted act committed against someone without their consent, regardless of the relationship to the victim. Economic abuse means any behaviour that has a substantial adverse effect on a person’s ability to acquire, use or maintain money or other property or obtain goods or services’.

Further information on the types of domestic abuse and the impact it can have can be found in the Domestic Abuse statutory guidance document which will be published in 2022<sup>[footnote 4]</sup>.

All forms of domestic abuse can have a significant impact on children and young people, including coercive and controlling behaviour. Children and young people may experience domestic abuse directly, including in their own intimate relationships, or indirectly due to the impact the abuse has on others such as the non-abusive parent. If a child is demonstrating abusive behaviours towards family members, this should be considered under the headline outcome ‘Improved Family Relationships’.

Family need	Data source	Outcome	Evidence
Family affected by domestic abuse or inter-personal violence and abuse - historic, recent, current or at risk (victim)	Police data	Domestic abuse has stopped	No incidents of domestic abuse in the month prior to closure, and no referral into services for 6 months following closure  <b>And (at least one of the below)</b>  Victim engaged with local multi-agency partnership arrangements  Practitioner or self-assessment (e.g., DASH / reduction in risk tool)
	Notification via Operation Encompass (for affected children)	Victim has a clear safety plan in place and knows how to seek help, victim feels safe at home  <b>And</b> Victim has received (or is receiving) appropriate support	
Adult in the family is a perpetrator of domestic abuse	Police data	Domestic abuse has stopped	No incidents of domestic abuse in the month prior to closure, and no referral into services for 6 months following closure  <b>And (at least one of</b>
	Notification via Operation Encompass (for affected children)	<b>And</b> Perpetrator understands crime, and impact on the	

	Information from practitioner assessments, contacts and referrals, including self-referral	victim(s) (including children), and is engaging with perpetrator support	<b>the below)</b>  <b>Where available, perpetrator engaged with specialist programmes</b>  Perpetrator engaged with local multi-agency partnership arrangements  Practitioner or self-assessment (e.g., DASH / reduction in risk tool)
Child currently or historically affected by domestic abuse	Police data  Notification via Operation Encompass (for affected children)  Information from practitioner assessments, contacts and referrals, including self-referral	Domestic abuse has stopped  Child feels safe at home  <b>And</b>  Child has received appropriate support	No incidents of domestic abuse in the month prior to closure, and no referral into services for 6 months following closure  <b>And (at least one of the below)</b>  Child engaged with specialist/ therapeutic support  Practitioner or self-assessment - (dash form, reduction of risk)

## Secure housing

Secure and suitable housing provides stability for families. It is linked to positive health and wellbeing outcomes, provides a base for children to attend school, for parents to sustain employment and for the family to contribute to their communities. This is why secure housing for families and young people is recognised in the outcomes framework. The programme's multi-agency and early intervention approach will help to identify vulnerable families and young people with housing issues or at risk of homelessness. It will also support them to resolve these issues by maintaining existing housing or, if necessary, helping them to secure suitable settled accommodation.

Family need	Data source	Outcome	Evidence
Families who are in local authority temporary accommodation and are at risk of losing this	Homelessness data  Information from practitioner assessments,	Family no longer at risk of losing temporary accommodation and have sustained temporary accommodation for 6 months or have moved	Confirmation from Homelessness Services of the outcomes.  Tenancy agreement for long term suitable

	contacts and referrals, including self-referral	into settled housing.	temporary accommodation or settled accommodation  Practitioner assessment - improved outcomes
Families not in suitable, sustainable housing and/or threatened with eviction /at risk of homelessness	Homelessness data  Information from practitioner assessments, contacts and referrals, including self-referral	Family no longer at risk of eviction* and/or in suitable and sustainable housing for 6 months	Confirmation from Homelessness Services that no homelessness duty is owed; or from landlord (PRS/RP/LA) that notice withdrawn.  Evidence of suitable alternative accommodation sourced: confirmation from Landlord (PRS/RP/LA)  Practitioner assessment - improved outcomes
Young people aged 16/17 at risk of, or who have been, excluded from the family home	Homelessness data  Identified via the CS front door e.g., MASH or Early Help  Information from practitioner assessments, contacts and referrals, including self-referral	Young person no longer at risk of homelessness – remains with or is returned to family or wider family network with support available for 6 months	Practitioner assessment - improved outcomes

\*Notice not served or withdrawn; or (for social housing tenants) have a suspended possession order and have sustained the accommodation for 6+ months

## Financial stability

Supporting Families continues to prioritise employment and financial stability as these are key factors in building families' resilience. Adults on the programme were five times more likely to be claiming benefits, and over ten times more likely to be claiming Jobseeker's Allowance compared to the general population. Feedback from local authorities and their partners delivering the programme suggest it has a transformative impact not only on family outcomes, but also on the approach and

design of local family services.

Supporting Families eligibility indicators also reach those who are workless, those who require support with their finances and families where a young person in the household is not in employment or education (NEET).

Family need	Data source	Outcome	Evidence
Adult in the family is workless	Universal Credit or legacy benefit, ADMS  Information from practitioner assessments, contacts and referrals, including self-referral	Adult is in work Or Adult has made progress to work (e.g., gained a qualification, completed training, volunteering, is attending job interviews)	Universal Credit or legacy benefit data, ADMS  Practitioner or self-assessed - adult has gained employment / made progress to work measured by Employment Advisor or keyworker (including use of DWP milestone plan)
Family require support with their finances and / or have unmanageable debt (e.g., rent arrears)	Housing benefit, registered social landlord data  Crisis payments, benefit caps  Information from practitioner assessments, contacts and referrals, including self-referral	Family feels able to manage their finances  Debt is being managed or has been resolved	Debt repayment plan in place  Reduction in debt  Practitioner or self-assessment - improved outcome
Young person is NEET	NEET data, CCIS statutory dataset  Information from practitioner assessments, contacts and referrals, including self-referral	Young person is in education, employment or training	Census / NEET data, CCIS statutory dataset  Secure progression pathway in place  Practitioner or self-assessment - confirms young person is in education, employment or training

# Implementing the new National Supporting Families Outcomes Framework

The new national Supporting Families Outcome Framework will come into effect on 3 October 2022. Set out below is the timeline that local authorities should work to when implementing the new outcomes framework.

The programme guidance for 2021-22 sets out the requirements for making a successful outcome claim under local outcomes plans. All local authorities should continue to follow this guidance until the new framework comes into effect on 3 October 2022.

All local authorities should continue to claim and identify families under their agreed, local Supporting Families outcome plan from April 2022. This includes families who have already been identified and those who are already being supported through the programme.

From 3 October 2022 all local authorities should cease to identify families under their local outcome plans and begin to identify families under the new framework.

Successful outcomes for families who have been identified and worked with under local outcomes plans and whose cases have been closed on or before October 2nd can be claimed using agreed local outcome plans. These claims must be in line with the programme guidance relating to local outcome plans as set out in the programme guidance 2021-22.

To make sure that there is enough time for the requirement for all outcome measures to be sustained for six months local authorities may continue to submit successful outcome claims for these families until July 2023.

This will also allow local authorities to demonstrate the required improved school attendance. To ease the administrative burden on local authorities, only two regression checks will be required to evidence these successful family outcomes.

Before an outcome is submitted:

1. All outcomes must be achieved and evidenced at case closure. Where a particular outcome specifies a period of sustainment (e.g., 'families diverted from crime' and 'safe from domestic abuse'), that must also be evidenced and can be done at any point after work has begun with the family.
2. There must be no accepted referral into children's services (early help or children's social care) between closure and claim (which must be a minimum of six months).
3. 90% average attendance for all children in the family for two consecutive terms prior to claim. Or, where a child was identified as attending for less than 50% of the time, at least a 30% improvement in attendance must be shown with a minimum of 50% average attendance, over 2 consecutive terms.

If families were identified using the criteria set out in local outcome plans but their cases remain open on 3 October 2022, these families will need to be confirmed as remaining eligible for the programme under the new National Supporting Families Outcomes Framework.

Any successful outcomes must be submitted in line with the new outcomes framework and the rules set out in this programme guidance. The deadline for submitting successful outcomes for these families is July 2023.

# Data and evidence sources

The Supporting Families Outcome Framework provides a number of suggested data and evidence sources. Local authorities are required to decide with their partnership which data and evidence sources will/can be used and return this to the national Supporting Families team by 3 October 2022.

Agreement from the national Supporting Families team will be required where data and evidence sources other than those suggested in the National Supporting Families Outcome Framework are used.

Data sharing agreements and sources are constantly evolving therefore any future changes to data and evidence sources used will require an updated submission to the national Supporting Families team.

Whilst data and evidence sources are suggested the national Supporting Families team may provide future guidance which requires the use of set data and evidence sources that are available nationally to all local authorities.

## Timetable for implementation

### 1 April 2022 - 2 October 2022

**Case progress:** All cases

**Identification:** 2021/22 outcome plan: Identify eligibility under agreed local outcomes plans

**Evidencing successful outcomes:** 2021/22 outcome plan: submit successful outcomes under agreed local outcomes plans including regression checks. This includes continuous employment.

### From 3 October 2022

**Case progress:** Families with open cases (for these purposes 'open' means most recent case work is currently open to a lead practitioner)

**Identification:** Originally identified on local outcome plans will now need to be reassessed for eligibility under the new Supporting Families framework.

**Evidencing successful outcomes:** New framework: All Supporting Families framework outcomes will need to be achieved AND cases must achieve the reduced regression checks (outlined above). Families who have been assessed under the new framework can be claimed six months following case closure, assuming regression checks are met, at the earliest this would be April 2023.

**Case progress:** Families with closed cases that have not yet been submitted as a successful outcome (for these purposes 'closed' means closed to case work/intervention has stopped and case has been closed).

**Identification:** No need for reassessment for eligibility

**Evidencing successful outcomes:** Can be claimed under local outcome plan until **July 2023** (this is to allow all relevant regression checks to be made

6 months post closure). Outcomes as per local outcome plans will need to be achieved AND cases must achieve the reduced regression checks (outlined above). This includes continuous employment.

**Case progress:** Families presenting for support (no case work yet conducted)

**Identification:** Eligibility assessed under the new supporting families framework

**Evidencing successful outcomes:** New framework: All Supporting Families framework outcomes will need to be achieved AND cases must achieve the reduced regression checks (outlined above). Families who have been assessed under the new framework can be claimed six months following case closure, assuming regression checks are met, at the earliest this would be April 2023.

## From August 2023

**Case progress:** All cases

**Identification:** Eligibility assessed under the new supporting families framework

**Evidencing successful outcomes:** New framework: All supporting families framework outcomes will need to be achieved AND cases must achieve the two regression checks outlined above.

For the purposes of the above 'closed' means closed to case work/intervention has stopped and case has been closed. Open means most recent case work is currently open to a lead practitioner.

## Summary of changes

The table below sets out the key changes to the national Supporting Families Outcomes Framework when compared to local defined family outcome plans.

National Supporting Families Outcome Framework	Local Outcomes Plans (Programme guidance 2021-22)
Families need to have three of the ten headline outcomes to be eligible	Families need to have two of the six headline problems to be eligible
Family needs included in headlines are prescribed by national team	Local authorities decide what they include in each headline
Pre-determined outcomes for each indicator	Limited guidance on outcomes – local authorities choose their own measures
Suggested good evidence and data measures	Local authorities choose their own data measures, with some guidance on what other areas are doing, this is hard to compare on a large scale
This will provide the national team with the ability to compare what data	

and evidence measures local authorities use

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Simplified data checks at the point of claim. Reducing bureaucracy and focusing on priority areas (children's social care referral rates and school attendance)	Local authorities must evidence there has been no regression against any headline problem– even practitioner assessed measures 6 months post closure, this is very bureaucratic
Removal of continuous employment claim	Local authorities are able to submit outcomes for families who have found employment but not made progress on any other outcome

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## Good practice when using the framework: Delivering positive, sustainable outcomes

The National Supporting Families Outcome Framework is a guide and lead practitioners will still need to exercise their own judgement when working with families to make sure they are working towards sustainable, positive outcomes for families.

Generally, successful family outcomes should be claimed in accordance with the spirit of the programme and the aim of achieving positive, sustained change for each family. Supporting Families Co-ordinators are able to contact the national team for advice regarding any aspect of this programme guidance including the validity of claims under the Supporting Families Outcome Framework.

## Good practice when using the framework: Data Sources

The new framework gives local authorities significant guidance regarding which data sources and evidence measures should be used to identify families and measure success. There is, however, still flexibility for local authorities to choose their own data sources or evidence measures not listed in the framework, if they wish. Where local authorities do choose to use their own measures, they must agree this with the national team in advance.

Where **'And'** is included in the outcome or evidence, this means that more than one outcome must be achieved at the same time; often, this is where quantitative data should be supported by qualitative data, or 'hard' outcomes should be accompanied by continued support or engagement with services.

Where a suggested evidence measure is 'supplementary', this means it cannot be used in isolation but only to support another evidence measure. For example, when evidencing involvement in crime local authorities cannot just evidence that a family member is engaging with services, there must also be evidence that there have been no further incidents.

Where examples are provided they are only suggestions of groups local authorities may want to include or prioritise, not an exhaustive list. Local authorities can include other problems or groups of people where relevant and are advised to use professional judgement as to what constitutes a real need under that sub-heading.

For example: Expectant or new parent/carers who require additional or specialist support (e.g., young parents, parents who have been in care, parents with learning needs).

## Measuring outcomes: What are measurement tools?

For the purposes of this guidance, measurement tools refer to instruments used to collect data on individuals. They are different to service and system level tools which do not collect information on individuals but on systems and processes such as management tools or quality assessment tools.

Individual measurement tools can be used for a variety of purposes which, for the purpose of the Supporting Families programme, can broadly be defined into categories set out below:

- Screening and diagnostic tools. These tools are used to detect (screening) and/or establish (diagnose) the presence or absence of a need or issue. Many Multi Agency Safeguarding Hubs (MASHs)/Single Front Door or Early Help assessments fall into the category of a screening tool. Often a broad assessment is undertaken (screening) to assess need, which is then followed up with a more detailed assessment if an issue is detected, so that it can be diagnosed. These tools can sometimes be used for eligibility purposes, such as to determine whether an individual may benefit from certain support and if so, what type of support would best suit them.
- Support and therapeutic tools. These tools are used as part of the support or therapy itself to aid practitioners. They are often used to facilitate conversations and reflection between practitioners and service users by assessing or understanding or seeing change in needs, behaviours, attitudes, or actions.
- Monitoring and evaluation tools. These are tools used to monitor or evaluate change. An outcome [\[footnote 5\]](#) measure assesses change on an individual from one point to another on a specific outcome.

It is important to note that some tools may be suitable for one, some or all of these purposes.

## What is a validated measure?

Throughout the framework reference is made to validated outcome measures. A validated measure is one that has been carefully tested to make sure that they produce reliable and accurate results and reduce the likelihood of any bias. Measures are viewed as valid if they have been subjected to a series of tests to check that it measures what it was developed to measure - for example, a measure assessing symptoms of anxiety needs to measure anxiety and not another concept, such as stress or depression. Measures are viewed as reliable if they yield the same results if repeated in the exact same way.

Using a validated measure (one that is valid and reliable) helps local authorities to be confident that the results are a true representation of what they are trying to measure.

## Why it is important to use validated

# measures to assess outcomes?

Whilst local authorities may be confident that the services that they provide support families, without measuring outcomes robustly they cannot be sure that these services have impacted the outcomes they are focused on improving for the people they are designed to help. Measuring the impact of services on areas such as family relationships, parenting quality, mental health or well-being is not easy, and it is important, where possible, to use tools that have been validated through testing to ensure they capture what is intended.

Administering validated outcome measures can be done by frontline practitioners delivering services or by external, commissioned, evaluators. These can be used alongside other tools and methods to assess and understand progress when working with individuals, however it is strongly recommended that, where they exist, validated outcome measures be used to report on outcomes.

## How to select the right measure?

A number of validated assessment measures to assess need and outcome measures to evidence outcomes are suggested within the National Supporting Families Outcome Framework. But there are a number of factors that should be considered when deciding what measures are best given the purpose, specific context, and resources available.

When selecting outcome measures, the Early Intervention Foundation (EIF) recommends selecting those which are:

1. Validated, to ensure you can be confident in their results
2. measuring outcomes you expect to see, and therefore consistent with your 'theory of change'
3. appropriate, for the target population, paying special attention to participant age, level of need, capability (such as literacy levels and disabilities) and preferred language which would impair them from completing the measures
4. practical, considering the time, cost, ease of scoring and training requirements so as not to overburden participants and those administering the measures who need to be confident in using them within their practice.

The Early Intervention Foundation (EIF) have produced a [short guide to selecting appropriate outcome measures](#) (in the context of reducing parental conflict) which provides more information.

EIF have also produced a guidebook which includes information about early intervention programmes that have been evaluated and shown to improve outcomes for children and young people. The link to the guidebook, and further information can be found in **Annex B** of this guidance.

## Key terms

### Family need

What the family requires support with, as identified by practitioner or self-referral by person/family.

These are pre-determined and will be the same for every area. These are the eligibility criteria for Supporting Families.

## Data source

The mechanism used to identify and evidence this need in a family.

Included here are suggested data sources, but areas will have flexibility to input their own.

## Outcome

The high – level outcome practitioners are aiming to achieve with families with the associated need.

These are pre-determined and will be the same for every area. These outcomes must be achieved and sustained with families before areas can report to us on the outcome, and (for the majority) receive PbR funding. Some of the indicators suggest multiple outcomes should be achieved before success can be reported. These are indicated using 'And'.

## Evidence

How practitioners measure progress and evidence that the outcome has been achieved Included here are suggested evidence sources, but areas will have flexibility to input their own. Where a measure has (Supplementary) this means this will only be accepted alongside another evidence measure.

- 
1. Many local authorities have their own resources and support for parental conflict, which are often supported by the RPC Programme. For further information on the Reducing Parental Conflict Programme, visit: [Reducing Parental Conflict programme and resources - GOV.UK](#) ↵
  2. A working definition of Child to Parent Violence and Abuse (CPVA) that has been adopted by Northumbria Police in 2021 is: “Any harmful act and/or behaviour by a child (aged 10-18) whether physical, psychological, emotional or financial towards a parent, guardian or carer” ↵
  3. [Statistic provided by the Ministry of Justice](#) ↵
  4. See the [Draft Domestic Abuse Act statutory guidance](#). ↵
  5. An outcome is a measure of something that an intervention, programme or activity is expected to change. ↵

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