

Department of Health
Together for Families
**Enhanced Family Support Service (EFSS) Grant
Programme**

Supported by The National Lottery Community Fund

Grant Programme Guidance for VCSE and Statutory Partners
September 2026



1. Introduction

This guidance has been prepared to help voluntary, community and social enterprise (VCSE) organisations, and their statutory partners, understand the Enhanced Family Support Service (EFSS) Grant Programme — a central element of the Together for Families (TfF) programme, supported by a £30 million strategic investment from The National Lottery Community Fund (TNLCF).

The document brings together the strategic rationale, vision, objectives, service expectations, eligibility requirements, criteria, funding parameters, and application process for the programme into a single reference point. It is intended for two audiences: VCSE organisations considering an application, and statutory partners, including Health and Social Care Trusts (HSCTs), who will work in partnership with funded services once established. The EFSS will become involved as a step down from HSCT Gateway services after threshold assessment has indicated that statutory involvement is not required at that time.

This guidance should be read alongside the application form which has also been published on the Together for Families webpage ([Together for Families Webpage](#)).

2. Strategic Context and Purpose of the Programme

2.1 The case for change

Northern Ireland's children's social care system is at a pivotal point. Rising demand, growing complexity of family need, sustained pressure on statutory services, and the continued escalation of children entering care have reinforced the need for earlier, more relational and more effective support for children and families. The independent Review of Children's Social Care Services (the Ray Jones Report) identified the need for a fundamental rebalancing of the system — away from a predominantly reactive model and towards one that prioritises prevention, early intervention and timely family support.

Together for Families (TfF) is one of the Department of Health's (DoH) strategic responses to this challenge. It is a regionally coordinated programme designed to transform how services are provided by investing earlier, strengthening the continuum of support available to children, young people and families, intervening more effectively, and building stronger VCSE neighbourhood-based support pathways where a family's entry point into the system is consistent and all of those providing their care are working jointly and more seamlessly.

Its ultimate ambition is to shift statutory resources away from intensive intervention and towards earlier, preventative and relationship based support delivered within local communities in line with the findings of the Ray Jones Report and the evaluation of the TNLCF Reaching Out Supporting Families programme (2014-2021). The TfF model has been developed with input from DoH, TNLCF and the VCSE sector.

2.2 Together for Families Programme vision

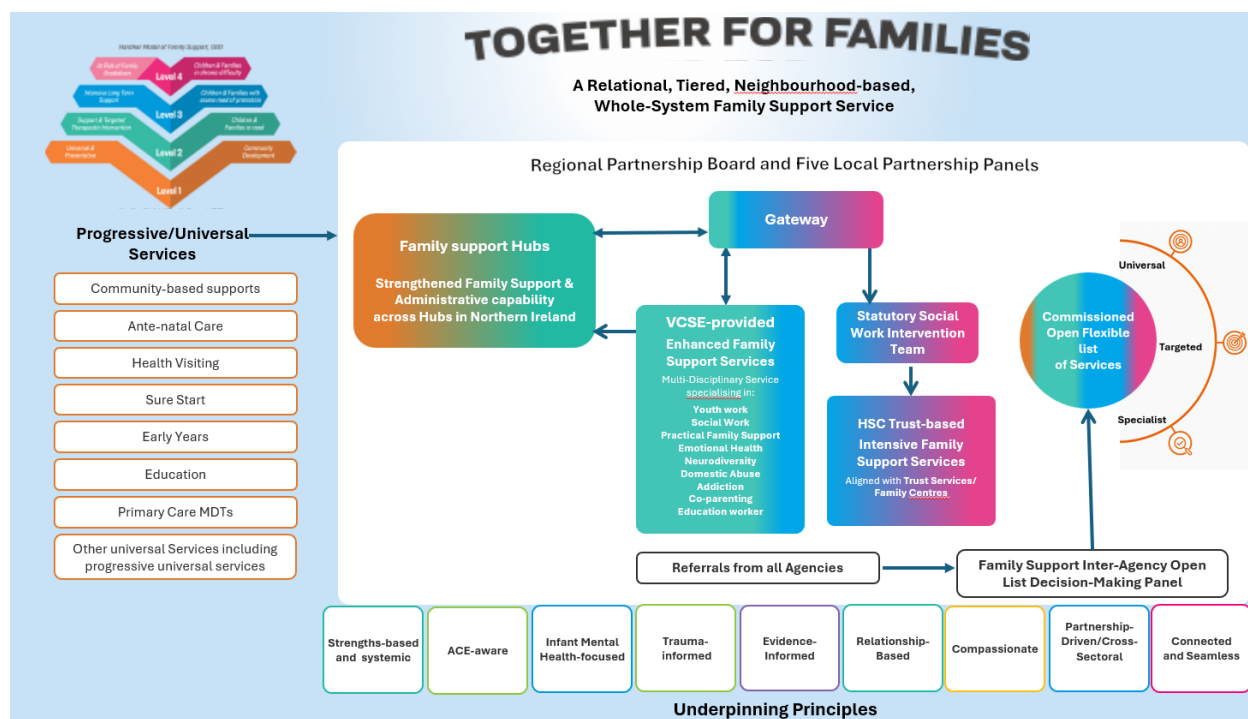
To create a regionally consistent, locally responsive system of enhanced family support that enables children, young people and families to access the right help, at the right time, in the right place — preventing escalation, strengthening resilience, and improving long-term outcomes.

2.3 Together for Families Key Elements

The model below provides an overview of the key elements of Together for Families, within the wider family support context.

- The top left diagram shows the 4 levels of the Hardiker Model of Need
- The boxes on the left hand side show existing universal family support services
- The large white box shows the key elements of the TfF model as outlined below:
 - Strengthening the existing 29 Family Support Hubs across NI
 - **Establishing 15 new Enhanced Family Support Services aligned with HSCT Gateway teams across NI (funded through the £30m from TNLCF)**
 - Strengthening the current Intensive Family Support Service in NI

- Providing bespoke support, as needed, to families through a Family Support Services Open List (regional services menu)
- The boxes along the bottom show the underpinning principles of TfF



More information can be found here ([Together for Families Webpage](#))

Together for Families will be supported through regional multi-agency panels involving representation from the statutory, voluntary and community sectors and The National Lottery Community Fund.

An external evaluation will be commissioned to bring together monitoring information collected by the Department of Health; cross-government data on programme impacts, gathered by a data analyst working with the Department; and qualitative evidence from key stakeholders, collected by the external evaluator.

A key element of the programme is to identify, capture and embed the collaborative approaches, partnership cultures and behaviours that contribute to successful outcomes. This work will be supported by an external Support Contract supplier.

Both the external evaluation and the Support contract will run alongside Together for Families. All those involved in TfF will be expected to engage in these elements.

2.4 The Enhanced Family Support Service (EFSS)

The Enhanced Family Support Service is central to TfF and its transformational vision. Supported by The National Lottery Community Fund's £30 million investment, 15 locality-based Enhanced Family Support Services will be established across Northern Ireland. Each service will align with one of the 15 HSCT Gateway teams. (There are 3 Gateway teams in each of the 5 HSCTs in NI),

Each of the 15 EFSS will be rooted in its local Gateway area and connected to key statutory and VCSE stakeholders. Each will be managed by a qualified and registered Social Worker and will address a critical gap in local family support provision by providing children and families with complex needs who do not meet the threshold for statutory intervention with timely, skilled and relationship-based support in their own communities. This will help prevent needs from escalating and reduce the likelihood that more intensive statutory support will be required.

Families will be referred to the EFSS by a HSCT social worker specifically aligned to the service within the relevant Gateway team. Following referral, the social worker will work with the EFSS Manager (a qualified and registered Social Worker) to agree the support needed to meet the family's needs. The Gateway Social Worker will remain the principal link between the EFSS and Social Services should concerns arise that may require further HSCT involvement, helping to ensure a smooth and coordinated pathway between the VCSE-led EFSS and statutory services.

2.5 The target family cohort for EFSS - the “Missing Middle”

Enhanced Family Support Services will provide targeted support for families experiencing a level of need beyond that typically addressed through universal and Family Support Hub services, but who do not meet the threshold for statutory social care involvement. This broadly aligns with the higher end of Level 2 within the Hardiker Model of Need. Families may require support in relation to a range of interconnected complex challenges, including adverse childhood experiences, parenting capacity and family functioning/challenges, school engagement, emotional wellbeing, domestic abuse, parental mental health issues, substance use or addiction, neurodiversity, and co-parenting relationships.

Each HSCT has provided an overview of their Gateway Team structures and the needs of the target family cohort within its area. This information is available on the TfF webpage and should be used to inform applications. ([Together for Families Webpage](#)).

2.6 The Enhanced Family Support Service aims

The aims of the EFSS are to:

- Strengthen early intervention capacity and neighbourhood capability through sustainable, partnership-led delivery models
- Address the “Missing Middle” — support for families whose needs sit between universal family support and statutory intervention
- Reduce escalation and prevent avoidable progression to crisis
- Reduce unnecessary entry and re-entry into statutory services
- Build a locality-based family support infrastructure across the region

- Improve outcomes in child wellbeing, parenting capacity, family resilience and system-wide effectiveness
- Generate regional learning to inform future commissioning decisions
- Transform the way services are delivered to the target families through collaboration and seamless delivery of holistic services

3. Grant-Making Rationale and Service Expectations

3.1 Grant-making rationale

This programme is not intended to duplicate existing provision or establish parallel delivery structures. Instead, it seeks to enhance and strengthen the wider family support system by investing in collaborative, relationship-based and locality focused approaches that complement existing statutory and VCSE provision.

This investment represents more than the establishment of new services. It is an opportunity to transform how support is provided to children and families across NI. It aims to promote a shift from reactive, crisis-led intervention to earlier and more preventative support; from fragmented service delivery to coordinated, place-based approaches; and from responding to challenges as they arise to building long-term resilience within families and communities. Achieving this ambition will depend on strong local partnerships, high-quality relational practice, and a collective commitment to working in new and innovative ways.

The programme is underpinned by four commissioning principles: early intervention and prevention; relationship-based practice; collaborative locality partnership working within and across sectors; and the use of evidence and learning to improve service delivery, outcomes and the experience of children, young people and families.

3.2 Service Expectations

The following points set out the minimum service expectations for the delivery of EFSS. They are intended to ensure consistency in quality, equity of access for the target cohort, and alignment with the TFF vision, and the EFSS aims and principles.

- **Relational practice must sit at the heart of delivery.** Children, young people and families should experience support that is compassionate, respectful, meaningful, consistent, strengths-based, systemic, and relationship-focused. Delivery should ensure continuity of practitioner relationships, manageable caseloads, trust-building and restorative practice. A whole family approach should be adopted. Services relying primarily on transactional or time-limited engagement will not align with programme expectations.
- **Family voice must influence and shape services.** Children, young people and families must be at the centre of delivery, their voice should be heard and respected and they must be active partners in decisions that affect them and in the design and development of support. This should be evidenced through co-produced support planning, responsive feedback mechanisms and clear demonstration of how lived experience informs service design, practice and decision making, and not just limited to consultation. Delivery should be underpinned by the principles outlined in 'Our Pact'.

There should be an ambition to create meaningful opportunities for families to influence organisational governance and service development.

- **Multidisciplinary Capability Is Essential.** Services must have the capacity to respond effectively to a range of interconnected family needs, such as parenting support, domestic abuse, parental mental health, addiction, neurodiversity, emotional wellbeing, behaviour management, school engagement, youth/peer mentoring and wider family functioning including co-parenting challenges. This capability may be provided through a mix of core staff expertise, sessional provision or agreed specialist access. Services should be trauma-informed, and ACE-aware.
- **Services should be strongly integrated with the TfF framework and wider family support pathways.** Services must operate as part of an integrated regional continuum of support, with clear referral pathways to and from HSCT Gateway Services, effective coordination with Family Support Hubs, robust step-up/step-down arrangements, appropriate information sharing, and appropriate safeguarding processes. Services should strengthen and complement existing provision rather than duplicate or fragment support. EFSS providers will be expected to work collaboratively with:
 - Family Support Hubs — including referral pathways, step-down arrangements and collaborative locality planning
 - Gateway and wider statutory services — including referral acceptance, escalation pathways and safeguarding coordination
 - Wider community and specialist support services — including local support pathways and specialist access routes
 - Families, communities and relevant local networks
- **Collaborative partnership working is key.** Effective family support is best achieved through strong partnerships that bring together complementary skills, expertise and resources with key agencies working in meaningful partnership to ensure that families experience co-ordinated, seamless and timely support at an early stage in the issues they face.
- **Delivery must be locally rooted and responsive to community need.** Services must be embedded within the communities they serve and delivered in settings that are accessible, familiar, and trusted by the target family cohort. Services should complement existing provision and reflect a strong understanding of local needs, existing provision, referral pathways, and community assets.
- **Services must be outcomes-focused and committed to continuous learning and improvement.** Service providers will be expected to fully participate in programme monitoring, evaluation and learning activities to demonstrate measurable impact against TfF aims, EFSS objectives and evidence of effective practice. This will include engagement with DoH, the external evaluator in the gathering of relevant quantitative and qualitative information, and the Support Contract.

- **Services must be under-pinned by evidence-Informed and reflective practice.** Services should draw on recognised evidence, established practice frameworks and continuous reflective learning to ensure the delivery of high-quality, effective support.
- **Services should balance regional consistency with local flexibility.** While the programme aims to ensure equitable access, provision and quality across NI for the target family cohort, it recognises that local need and existing provision varies across NI. Services should therefore address identified local needs and gaps while operating within the overall regional Tff and EFSS objectives.
- **The Service Manager must be a qualified and registered Social Worker,** given the complexity of the needs of the target cohort of families.

4. Eligibility and Partnership Expectations

4.1 Partnership and collaboration

Together for Families is founded on a collaborative approach to service delivery. The target family cohort will experience multiple, interconnected challenges and require co-ordinated holistic support that reflects their individual circumstances. To achieve the Tff vision and the aims of the EFSS and to ensure family centred, holistic support, each EFSS must bring together a broad range of skills, expertise and experience capable of responding to the diverse needs of the target family cohort within each Gateway area. Partnership working is therefore a fundamental requirement.

Applications for each EFSS must be submitted by a partnership of VCSE organisations, led by an agreed VCSE Lead Partner. It is anticipated that partnerships will comprise a range of organisations whose expertise and experience aligns with the identified needs of the target family cohort within the relevant Gateway area. Partners should work collectively to design and deliver a service model that provides comprehensive, family-centred support that addresses the prioritised identified need of the target family cohort in line with the service expectations outlined above.

Partnership applications must demonstrate a clear shared vision and strategic purpose, with partners contributing complementary skills, knowledge and resources to achieve positive outcomes for families, building on strengths and relationships, with effective governance, joint decision making and shared accountability arrangements. Partnerships that appear to lack meaningful collaboration are unlikely to meet expectations.

Applicants will be required to submit a draft partnership agreement which clearly outlines the role and responsibilities of each partner, governance and management arrangements, delivery and reporting structures, financial arrangements including any payments between the Lead Partner and support partners, mechanisms for dispute resolution, decision making processes and accountability for outcomes. Each partnership agreement will be different depending on the nature of each partnership. A template partnership agreement is included in the appendices. This is for guidance purposes only. It is not intended to constitute professional advice. Successful applicants will be expected to finalise their partnership

agreements before funding is paid and may wish to seek independent professional advice regarding the partnership agreement at this point.

Partnership and collaboration are fundamental not only to the delivery of EFSS, but also to ensuring that services are effectively connected to the wider family support infrastructure within each Gateway area. Delivery partnerships will be expected to work closely with other relevant voluntary, community and statutory stakeholders, contributing to a co-ordinated local system of support that improves outcomes from children, young people and families.

4.2 Lead Partner eligibility

The Lead Partner for each EFSS will have overall responsibility for the delivery and management of the service and the funding. This includes responsibility for ensuring that all partners have appropriate management, governance and policies in place and meet the Terms and Conditions of the award. Funds will be paid directly to the Lead Partner who will be responsible for distributing funds to support partners in a timely manner, where applicable.

Lead Partners should:

- Be an incorporated not-for-profit organisation (not-for-profit company limited by guarantee)
- Demonstrate experience and capacity to manage significant funding programmes and grants of comparable scale, complexity and risk.
- Have a proven track record of delivering locally rooted family support services at scale for those families with complex and multi-dimensional needs (higher end of level 2 in the Hardiker Model of Need).
- Demonstrate strong organisational governance and financial management arrangements appropriate to the scale and complexity of the proposed service including:
 - Effective Board oversight and clear governance structures
 - Defined decision making and accountability arrangements
 - Robust financial control, systems and oversight (Lead Partners will be asked to submit 3 years of audited accounts. (If the most recently signed accounts are more than 10 months old, Lead Partners will be asked to submit a copy of their most up to date management accounts for that period. Accounts should be in the format appropriate to the organisations income as outlined in their governing document).
 - Effective staff and volunteer management, supervision and support arrangements
 - Comprehensive risk management processes
 - Appropriate information governance and information-sharing procedures
 - Quality oversight and continuous development processes
 - Evidence of effective policy review, approval and updating arrangements. Lead Partners will be asked to submit a list of policies with the application.
- Demonstrate robust safeguarding practice, supported by appropriate safeguarding policies, procedures and compliance arrangements.

- Have the capacity to meet all programme monitoring, reporting, audit and assurance requirements.
- Provide assurance that the service can be mobilised and operational within three months of funding confirmation.
- Demonstrate how the voices of children, young people and families are, or will be, embedded within decision making and service development arrangements.

As part of the due diligence process, the above requirements will be further explored during assessment of the application.

Organisations may apply to act as the Lead Partner in more than one Gateway area. However, in assessing applications, consideration will be given to the organisation's capacity to effectively fulfil the Lead Partner role across multiple Gateway areas, as well as its suitability to lead within each area, taking account of the service expectations outlined in the Programme Guidance and the identified needs of the local area.

To promote fairness of opportunity and support shared learning across organisations within and between each HSCT area, the preference is for there to be more than one organisation appointed as Lead Partner within each HSCT area¹.

Organisations may participate as a Support Partner in more than one Gateway area, or act as a Lead Partner in one Gateway area² while also serving as a Support Partner in other Gateway areas in the HSCT area, provided that their proposed contribution aligns with the identified needs of each area.

As outlined in section 7.1, applications will be assessed against a range of criteria, including the development and composition of the partnership, the clarity of roles and responsibilities, each partner's contribution to addressing locally identified needs, and the overall capacity of the partnership to deliver the service effectively.

¹ This is a reference to the Trust area as a whole.

² Each HSCT has 3 Gateway areas.

4.3 Partnership requirements

The target family cohort will experience multiple and interconnected challenges and will require support from partner organisations with a diverse range of skills, knowledge and expertise. Effective partnerships will bring together the capabilities needed to respond holistically to identified family needs, with clearly defined roles, responsibilities and contributions from each partner. Applicants will be required to provide an overview of each partner's relevant experience and demonstrate how their expertise will contribute to the proposed model of delivery. All partners should be actively involved in the development of the application and demonstrate their capacity to deliver services in line with the aims, principles and service expectations above. In reviewing applications, consideration will be given to the following:

¹ This is a reference to the Trust area as a whole.

² Each HSCT has 3 Gateway areas.

- **Relevant experience of family support delivery.** Partnerships must demonstrate experience in supporting children and families with complex and multiple needs – the target family cohort as outlined above (aligned to the higher end of level 2 in the Hardiker Model of Need). Partnerships must also demonstrate an understanding of assessment, thresholding and support pathways within the family support context.
- **Strong local presence and family support connections.** Partnerships must demonstrate a strong understanding of, and connection to, the family support landscape within the Gateway area for which they are applying. Proposed services should complement and enhance existing provision, address identified gaps in support, promote co-ordinated and seamless pathways for families and avoid duplication of services. Applicants should evidence meaningful local presence (at least three years) including established relationships with communities, families, voluntary and community organisations, statutory services and other key stakeholders. Partnerships should demonstrate a proven ability to work collaboratively across the local family support system and secure the trust and engagement of local families. **Applications that cannot evidence sufficient locality knowledge are unlikely to be successful.**
- **Clear understanding of the needs and priorities for the target family cohort in the area.** Partnerships must demonstrate a clear understanding of the needs, circumstances, challenges and priorities of the target family cohort within the Gateway area for which they are applying. This should be evidenced through reference to the information provided by the relevant HSCT, as well as relevant referenced data and research, local intelligence, stakeholder engagement and service delivery experience. Applicants should outline how families, stakeholders and key partners, including HSCTs, Family Support Hubs, other key VCSE organisations have informed the identification of local needs, service gaps and priorities in the area. There must be a clear and coherent rationale linking the identified needs and priorities to the proposed service approach, activities and intended outcomes.
- **Clear delivery plans.** Partnerships must present a clear and credible delivery model that responds to identified local priorities for the target family cohort, meets the service expectations outlined above, and fits with the regional TfF expectations. The plans should outline how services will achieve the intended outcomes for families and meet EFSS objectives and principles. Whilst maintaining consistency with the agreed regional framework, there should be flexibility to tailor aspects of delivery to local circumstances and react to emerging needs, including staffing, delivery settings, specialist expertise and partnership arrangements.
- **Commitment to measuring outcomes and impacts, learning and system improvement.** Partnerships must be clear about the outcomes and impacts they aim to achieve for children, young people and families, demonstrating alignment with the TfF vision, EFSS objectives and principles and the specific needs of the target family cohort within the area they are proposing to apply. There should also be clear plans for monitoring and measuring and evidencing outcomes and impacts. [Note: the

Department for Health will be providing guidance on outcome measurement, e.g. use of relevant Outcomes Star measures and service providers will be expected to follow this guidance]. Partnerships will also be expected to actively contribute to the wider Tff learning and improvement framework, including participation in regional learning events, shared improvement processes, practice training and development opportunities and engagement in the external evaluation and support contract reference above.

The programme seeks delivery partners who see themselves not solely as grant recipients, but as active contributors to system transformation.

5. Grant Structure, Funding Parameters and Eligible Activity

5.1 Overview

The EFSS Grant Programme will invest up to £30 million funding from The National Lottery Community Fund to establish and support fifteen locality-based Enhanced Family Support Services, creating a regionally coherent network of enhanced family support provision (high Level 2, Hardiker Model) aligned to each of the fifteen Gateway localities, ensuring equitable access for families who fall within the target group to ensure high-quality family support across Northern Ireland.

5.2 Funding period

The Funding will cover service provision between January 2027 and March 2029. Final funding periods remain subject to programme approval and wider Together for Families implementation timelines. The Tff ambition is that services and support delivered through Together for Families will continue beyond the funding period, supported by investment from other sources.

5.3 Indicative grant value

Details on the allocation for each Gateway area are available on the Together for Families webpage. The allocations are based on a range of statistics with HSCT input relating to needs. Partnership applicants are advised to ensure that the amount they are applying for addresses local priorities and takes account of the relevant local context.

5.4 Eligible delivery and costs

Grant funding should support activity directly related to the delivery of Enhanced Family Support Services for families with complex and multi-dimensional needs at the higher end of level 2 of the Hardiker model). There should be a clear rationale for the costs and resources required to deliver EFSS. Service costs could include:

- Recruitment and set up costs
- Staff costs. Funding will support workforce costs proportionate to programme need including family support practitioners, as well as input from specialist practitioners and staff with a range of skills and experience that will meet the needs identified for the target

families. **Given the complex nature of the needs of the target families, the service must be managed by a qualified and registered social worker.**

- Whole-family assessment and support planning;
- Direct family support interventions delivered in homes and community settings relating to the needs identified, e.g.;
 - Parenting and family functioning support;
 - Child and young person support (emotional wellbeing, resilience, engagement);
 - Domestic abuse safe practice, including risk-informed support and safety planning;
 - Addiction and recovery-oriented family support, including understanding hidden harm;
 - Neurodiversity-informed family support;
 - Family mediation and relationship support, including co-parenting and protective parenting;
 - School engagement
 - Youth engagement and positive development support;
 - Family and community network strengthening; and
 - Step-down, transition, follow-up and sustainability support
- General running costs including administrative support
- Contribution to management overhead costs and governance in line with Full Cost Recovery (direct project costs and a proportionate share of overheads).
- Staff training, supervision, support, professional development
- Engagement in monitoring and evaluation of the service and in the external evaluation of TFF
- Partnership co-ordination and governance
- Collaboration with the partnership and between the partnership and other key stakeholders in the relevant Gateway area, including engagement in the TFF Support Contract and wider TFF collaboration and networking initiatives
- Engaging families and ensuring family voice is heard and valued

5.5 Ineligible costs

Grant funding may not be used for: capital expenditure unrelated to service readiness; retrospective expenditure; activity outside the agreed locality footprint; duplicate funding of existing commissioned provision; organisational deficits or unrelated core costs; activities that are a statutory responsibility, or activity inconsistent with programme principles.

5.6 Value for investment

All applications must demonstrate value for money through proportionate staffing and caseloads, efficient use of resources, a strong direct-delivery focus, realistic mobilisation

plans, and credible, achievable outcomes. Both quality and cost effectiveness will be assessed. Consideration will be given to area specific factors such as rurality which will impact on costs per family supported, etc.

6. Application Process and Timeline

6.1 Application Process

The application process has been designed as a developmental grant making process, not simply a competitive assessment exercise, balancing appropriate rigour in the stewardship of significant public investment with an accessible, supportive environment that allows strong locality partnerships to form and mature.

6.2 Timeline

Phase	Indicative Period	Purpose
1. Market Engagement and Application Development & Launch	August – September 2026	Webinars, engagement sessions with key stakeholders. TFF launch 10/09/2026
2. Open for application	11 September 2026	
3. Application closing date	30 October 2026	
4. Application Assessment and Due Diligence	November 2026	Application review, assessment moderation, due diligence checks, Full assessment, recommendations.
5. Award Decision and Contracting	18 December 2026	Final approvals, award notifications, grant offer letters.
6. Service Delivery	January 2027 – March 2029	Full operational delivery, and contribution to programme-wide evaluation and learning.

7. Assessment Methodology and Criteria

7.1 Assessment criteria and proposed weightings

The assessment criteria and weightings are noted below.

Assessment Area	Proposed Weighting
Strategic Alignment and Programme Fit. Strong alignment with the Together for Families vision, EFSS aims and service expectations	20%
Experience of family support provision for families with complex needs	15%
Demonstrated understanding of Gateway locality needs, the family support landscape and have established strong local community connections	15%
Partnership Strength and Collaboration. Robust partnership arrangements with clearly defined roles and responsibilities	15%
Delivery Model and Practice Quality - clear delivery plans to include proposed evidence based practice and approach, clear plans for mobilisation within the TFF timeframes, and clear rationale for proposed costs.	15%
Outcomes monitoring and learning. Clear plans for monitoring outcomes, and engaging in the evaluation, support contract and other relevant TFF initiatives	5%
Appropriate Governance and Safeguarding arrangements, including evidence/ambition to ensure family voice is include in delivery and planning	15%
Total	100%

7.2 Assessment methodology

Assessment will follow a structured process. This will include consideration of information in the application form and associated attachments in line with the criteria above, further discussions with partnerships on any issues that require clarification, scoring in line with the criteria above, internal moderation meetings to discuss applications and ensure consistency of assessment and scoring, prior to decisions being made by a decision panel.

8. Assessment Panel, decision making and award

8.1 Assessment panel and decision-making

Decision making panels will include representation from the Department of Health, HSCTs, The National Lottery Community Fund, Together for Families programme leadership, and independent expertise as appropriate. Panel arrangements will ensure appropriate expertise, independence of judgement, transparent moderation and management of conflicts of interest. Final award decisions will be made by the Panel through agreed programme governance arrangements.

8.2 Feedback to applicants

All applicants will receive proportionate feedback, supporting transparency, sector confidence, organisational learning and future partnership development reflecting the programme's commitment to ensuring the process contributes positively to wider system learning.

8.3 Award notification and contract obligations

Offer letters will set out award value, payment profile, commencement schedule, reporting expectations, monitoring format, mobilisation requirements, performance expectations and grant conditions.

8.4 Mobilisation readiness review

Prior to commencement of full delivery, successful applicants may be required to participate in a mobilisation readiness review confirming workforce readiness, operational preparedness, referral pathway activation, robust governance arrangements and delivery readiness intended to support safe and effective implementation.

9. Monitoring, Evaluation and Learning

9.1 Purpose of monitoring

In monitoring grants, the Department aims to keep well informed about each organisation's activities and progress towards programme objectives, ensure grants are managed effectively for the purpose specified, identify key learning, and encourage organisations to monitor and evaluate their own performance.

9.2 Service Monitoring arrangements

Monitoring arrangements will be agreed at the point of award and are expected to include quarterly monitoring reports and details of spend.

9.3 Evaluation and regional learning

Funded services must engage in regional monitoring and evaluation and contribute to shared learning and improvement activity across the Together for Families programme. This includes engagement in the external evaluation and the Support Contract referenced above. Evaluation findings will inform future commissioning decisions in relation to sustainable family support provision across Northern Ireland, including current unmet need.

10. Commitment to Fairness and Transparency

This programme represents a significant opportunity to reshape how NI responds to higher levels of family need. Through strategic investment in trusted locality partnerships, TfF seeks to move the system from escalation management toward earlier intervention, relational support and sustained family resilience. The success of this grant programme will be

measured not solely by activity delivered, but by its contribution to a stronger, more preventative and more compassionate family support system for children across NI.

The programme is committed to ensuring that grant decision-making is fair, evidence-led, transparent, proportionate, and consistent with the collaborative ethos of Together for Families. The assessment process is intended not only to identify strong delivery partnerships, but to strengthen confidence and further develop trusted partners across the wider family support sector.

11. Key Contacts and Further Information

Together for Families team: togetherforfamilies@health-ni.gov.uk

Further information can be found [here](#)

APPENDIX 1 – PARTNERSHIP AGREEMENT TEMPLATE

This is for guidance purposes only.

It is not intended to constitute professional advice.

Successful applicants will be expected to finalise their partnership agreements before funding is paid and may wish to seek independent professional advice regarding the partnership agreement at this point.

[Partnership Name]

Partnership Agreement

Between

[Lead Partner]

And

[List all Support Partners]

By signing this Partnership Agreement, each Party acknowledges that it has read the attached pages, and all agree to be bound.

The Partner(s) must be aware of the terms and conditions that are associated with the Together for Families funding and must ensure that they do not act in a way that will affect the Lead Partner's ability to adhere to these terms and conditions (see Schedule 2).

Partnership Agreement Particulars

The Parties (add rows for each partner)

Party	Party details
Lead Partner:	<i>[insert organisation name, address, company number]</i>
Partner Organisation One (a “Partner”):	<i>[insert name and address details (and company number or other relevant registration number (e.g. charity), if appropriate)]</i>
Partner Organisation Two (a “Partner”):	<i>[insert name and address details (and company number or other relevant registration number (e.g. charity), if appropriate)]</i>

Service Details

Service Name (“the Service”):	<i>[insert the Enhanced Family Support Service Name as shown on the Grant Agreement]</i>
Service Purpose (“the Purpose”):	<i>[insert the Service Purpose - this should be the same description of the Project Purpose as set out in the Grant Agreement]</i>
The Together for Families Grant (“the Grant”)	<i>[insert the approved Grant funding and the duration of the Grant Agreement as shown on the Grant Agreement]</i>

Service Plan Summary: *[insert a summary of the Service Plan and Deliverables of each Partner]*

Lead/Partner	Deliverables	Due date
<i>[Lead Partner]</i>	<i>[insert details]</i>	<i>[insert date]</i>
<i>[Partner name]</i>	<i>[insert details]</i>	<i>[insert date]</i>
<i>[Partner name]</i>	<i>[insert details]</i>	<i>[insert date]</i>

Payment of Grant funding to Partners (“the Payments”)	<i>[insert the Payments to be made to the Partners, when Payments will be made to the Partners and what Deliverables will be completed for each Payment as shown in the Service Plan]</i>
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Partnership Agreement Duration

Commencement Date:	<i>[insert date which the last Party signed this Partnership Agreement]</i>
Date of Expiry:	The later of <i>[insert date]</i> or the date on which all obligations imposed on the Lead under the Grant Agreement have been fulfilled.

Communications

Communication Lead:	<i>[name], [role], [organisation], [telephone], [email address]</i>
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Key Contacts [add rows for each partner]

Lead Partner	<i>[name], [role], [organisation], [telephone], [email address]</i>
Partner Organisation One:	<i>[name], [role], [organisation], [telephone], [email address]</i>
Partner Organisation Two:	<i>[name], [role], [organisation], [telephone], [email address]</i>

Background

The Lead Partner has obtained funding from the National Lottery Community Fund, administered by the Department of Health NI (DoH) for the above Service.

The Lead Partner will be solely responsible to DoH to deliver the Project in accordance with the terms and conditions of the agreement that the Lead has entered into with DoH (“**Grant Agreement**”). The amount of funding and the duration of the Grant Agreement is stated in the Project Details. The Partner(s) must also comply with the terms and conditions of the Grant Agreement.

The Partners have agreed to enter into this Partnership Agreement to set out how they will work together to complete the Project.

Partnership Agreement structure

The following schedules form part of this Partnership Agreement:

Schedule 1	General Terms and Conditions
Schedule 2	Grant Agreement
Schedule 3	Service Plan

Upon signing, the Parties agree to be legally bound by this Partnership Agreement from the Commencement Date set out above.

Signed by the authorised representative of *[Insert Lead Partner name]*

Name:		Signature:	
Position:			

Signed by the authorised representative of *[Insert Partner Organisation name]*

Name:		Signature	
Position:			

Signed by the authorised representative of *[Insert Partner Organisation name]*

Name:		Signature	
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Position:			
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[Add the signatory boxes for each partner]

General Terms and Conditions

Commencement and Duration

- 1.1 This Partnership Agreement shall commence on the Commencement Date and shall expire on the Date of Expiry as marked on the Partnership Agreement Particulars unless terminated earlier in accordance with these General Terms and Conditions.

Parties Obligations

The Partners agree to act lawfully in carrying out its obligations under this Partnership Agreement and ensure that it complies with:

- the General Terms and Conditions of this Partnership Agreement;
- the terms and conditions of the Grant Agreement;
- all applicable legislation; and
- any policies and guidelines issued by the Department of Health NI and The National Lottery Community Fund including but not limited to equal opportunities and safeguarding and protecting children and adults at risk.

The Parties acknowledge that the Lead Partner is acting as the lead organisation on the Project and is responsible to the Department of Health NI for the completion of the Grant Agreement. Each Partner agrees not to act in any way which would or could cause the Lead Partner to be in breach of the Grant Agreement.

To the extent that there is any inconsistency between this Partnership Agreement and the Grant Agreement, the terms and conditions of the Grant Agreement shall prevail.

[section relating to staff employed through the partnership and staff management arrangements, referencing compliance with employment policies and procedures including those required by law].

Lead Partner Obligations

The Lead Partner shall be responsible for the overall leadership and management of the Project and shall ensure full compliance by the Partner(s), with the terms and conditions of the Grant Agreement.

The Lead Partner shall not be obliged to make any Payment(s) to a Partner unless it has received the Grant funding from the Department of Health NI.

The Partner(s) acknowledge that the Lead Partner shall be under no obligation to indemnify any Partner for any expenditure incurred which is in excess of the relevant Partner's agreed Payment(s) stated in the Service Plan.

If the Lead Partner, acting reasonably, is of the view that any Partner in this Partnership Agreement is not sufficiently delivering its Deliverable(s), the Lead will use all reasonable endeavours to maintain compliance with the terms and conditions of the Grant Agreement.

Payments and Contributions

Where relevant the Lead shall distribute the Payment(s) to the Partner(s) on the dates set out in the Service Plan. Payment(s) made by the Lead to a Partner shall be paid to such Partner on the same terms and conditions as the Grant Agreement.

Each Partner shall keep, in relation to the Service and the receipt and expenditure of all Payment(s) received:

- accurate records and accounts showing income and expenditure;
- receipts and invoices in relation to expenditure; and

- details of how the Deliverable(s), as state out Service Plan, were completed.

Each Partner shall keep the information relating to the service for a period of seven (7) years after the Expiry Date (“**Retention Period**”) so as to enable compliance with the reporting requirements of the Lead Partner and/or the Department of Health NI and the National Lottery Community Fund. If requested, the Partners shall permit the Department of Health NI, The National Lottery Community Fund, the Lead Partner and the Comptroller and Auditor General to inspect such information during normal working hours upon reasonable notice throughout the term of this Partnership Agreement and during the Retention Period.

A Partner shall not incur any financial liabilities in respect to the Service that are not agreed to as part of the Service Plan. In the event any Partner does so, it shall not be entitled to any indemnity or reimbursement of such financial liability from any other Partner.

Each Partner acknowledges that any Payment(s) to them by the Lead Partner under this Partnership Agreement are paid from the Grant Agreement and do not represent consideration for any taxable supply for VAT purposes. Any such Payment(s) are distributed are inclusive of VAT (if any).

Partner Obligations

Each Partner represents to the Lead that:

- it has the right, power and authority to enter into and fully perform its obligations under this Partnership Agreement;
- it will perform its obligations under this Partnership Agreement with reasonable skill and care;
- it shall comply with the Terms and Conditions of the Grant Agreement to the full extent that it is relevant to the Partner;
- there are no material agreements existing to which the Partner is a party which prevent the Partner from entering into or complying with this Partnership Agreement; and
- it has satisfied itself as to the nature and extent of the risks assumed by it under this Partnership Agreement and has gathered all information necessary to perform its obligations under the Partnership Agreement.

Without prejudice to any other remedies of the Lead Partner under this Partnership Agreement, if a Partner fails to fulfil all or any of its Deliverable(s) as stated in the Service Plan, the Lead Partner shall be entitled to withhold from such Partner all or any part of such Payment(s) which are associated with the relevant Deliverable(s). The Lead Partner shall have sole discretion as to whether it subsequently releases all or part of the withheld Payment(s) if the affected Partner takes steps to comply with its unfulfilled Deliverable(s) under this Partnership Agreement.

Intellectual Property

For the purpose of this Service, “**Intellectual Property Rights**” shall mean patents, rights to inventions, copyright and related rights, trade marks and service marks, business names and domain names, goodwill, rights in designs, rights in computer software, database rights, confidential information (including know-how) and all other intellectual property rights, in each case whether registered or unregistered and including all applications and rights to apply for and be granted, renewals or extensions of, such rights and all similar or equivalent rights or forms of protection which subsist or will subsist now or in the future in any part of the world.

The Partners intend that any Intellectual Property Rights created in the course of the Project shall vest in the Partner whose employee created them (or in the case of any Intellectual Property Rights created jointly by employees of two or more Partners, in the Party who is noted in the Project Plan as having responsibility for the activity pursuant to which the Intellectual Property Rights were created).

Where any Intellectual Property Right is created and vests in the relevant Partner, such Partner shall:

- not commercially exploit the Intellectual Property Right without the Department of Health NI or The National Lottery Community Fund's prior written consent; and
- grant an irrevocable, non-exclusive licence to the other Partners and the Department of Health NI and The National Lottery Community Fund, as necessary, to use such Intellectual Property for the purposes of publicising the success of the Project or on the terms as otherwise agreed by the Partners in writing.

Publicity and Branding

The Partners shall comply with Together for Families publicity guidelines as set out in the Grant Agreement.

The Partners shall acknowledge Together for Families, using branding in accordance with the brand guidelines.

The Communication Lead shall be responsible for promoting the Service and all responses to media enquiries must be approved by the Communication Lead prior to issue.

Termination

The Lead Partner may terminate this Partnership Agreement with immediate effect by written notice to the Partners if the Department of Health NI suspends or terminates the Grant Agreement for any reason.

The Lead Partner may, in its sole discretion, terminate this Partnership Agreement with immediate effect by written notice to a Partner in breach ("**Breaching Party**") on or at any time after the Breaching Party:

- is in material or persistent breach of any of its obligations under this Partnership Agreement (including the terms and conditions of the Grant Agreement) which (if the breach is capable of remedy) the Breaching Party has failed to remedy within twenty (20) working days after receipt of notice in writing from the Lead requiring the Breaching Party to remedy such breach;
- suffers an insolvency event;
- grossly neglects the Purpose and general objectives of this Partnership Agreement;
- acts in any respect contrary to the provisions of this Partnership Agreement or to the requirement of good faith between the Parties.

If any Partner is unable for whatever reason to continue its participation in the Project, it shall notify the other Partners immediately on becoming aware of such circumstances and enter into good faith discussions with the other Partners as to how the departure of the affected Partners from the Project can be managed so as to cause the least possible disruption to the Service and whether it is possible for this Partnership Agreement to continue in force in respect of the remaining Partners.

On termination of this Partnership Agreement for any reason:

- termination shall not affect the rights of any Partner accruing or accrued prior to the termination of this Partnership Agreement; and
- this Partnership Agreement shall continue in force to the extent necessary to give effect to those of its provisions which expressly or impliedly have effect after termination; and
- the Partners shall promptly repay to the Lead Partner any unused Payment(s) to them under Clause 4.

On termination of this Partnership Agreement for whatever reason the Partners shall use all reasonable endeavours to work together in good faith to enable an orderly transition and to satisfy the terms and conditions of the Grant Agreement taking into account the termination of this Partnership Agreement.

The Partners shall in the case of a minor or non-material breach utilise the dispute resolution procedure set out below prior to termination. Termination in respect of a Partner shall not terminate the Partnership Agreement in respect of the other Partners.

Confidentiality

Each Partner shall take all necessary precautions, and apply the same confidentiality measures and degree of care to any confidential information disclosed to it by another Partner as the receiving Partner applies to its own confidential information to ensure that the information is treated as confidential and undertakes that it shall not at any time disclose any other Partner's confidential information.

Each Partner may disclose another Partner's confidential information to its employees, officers, representatives or advisers who need to know such information for the purposes of exercising the Partner's rights or carrying out its Deliverable(s) stated in the Service Plan. If a Partner discloses confidential information, it shall ensure that its employees, officers, representatives or advisers to whom it discloses such confidential information are made aware of and comply with these provisions.

The provisions shall not apply to any confidential information which:

- is or becomes public knowledge (otherwise than by breach of Clause 9.1);
- was in the possession of the receiving Partner, without restriction as to its disclosure, before receiving it from another Partner; or
- is required to be disclosed by any applicable law or regulation, or any court, or governmental or administrative or regulatory authority competent to require such disclosure.

Data Protection

The Partners shall comply with:

- their obligations under the Data Protection Act 2018 in relation to any personal data processed in relation to this Partnership Agreement; and
- the provisions, if any, set out in the Service Plan.

Dispute Resolution

Any dispute or difference between the Partners arising out of or in connection with this Partnership Agreement (a “Dispute”) shall be treated in accordance with the provisions of this Clause.

If a Dispute arises, the Partners in dispute shall first seek to resolve the Dispute by escalation to the Key Contacts in the Partnership Agreement Particulars. The Key Contacts shall have ten (10) working days during which they will use their reasonable endeavours to resolve the Dispute.

In the event that the matter is still in dispute after completion of the process set out in Clause 11.2, the Parties shall refer the Dispute to mediation or some other form of alternative dispute resolution, until agreement can be made on how to address the Dispute.

Each Partner will pay its own costs of mediation or alternative dispute resolution under this Clause.

If there is a Dispute, each Partner will continue to perform its obligations under this Partnership Agreement as far as practical given the nature of the Dispute.

Each Partner agrees not to start any court action in relation to a Dispute until it has complied with the process described, unless court action is necessary to preserve a Partner's rights.

Variation of the Partnership Agreement

Any change to this Partnership Agreement is called a Variation. A Variation must be agreed by all Partners and recorded:

- in writing and signed by all Partners, or

- through an exchange of emails where the authors have delegated authority to approve the Variation

General

Nothing in this Partnership Agreement, and no action taken by the Partners pursuant to this Partnership Agreement, shall constitute, or be deemed to constitute, the Partners as a partnership within the meaning of the Partnership Act 1890 or the Limited Liability Partnership Acts nor shall it constitute a joint venture or denote the relationship of agent/principal between the Partners and no Partner shall be entitled to bind or hold itself out as being capable of binding any other Partner.

Any notices to be given under this Partnership Agreement shall be in writing and shall be:

- delivered by hand or by pre-paid first class post or other next working day delivery service at its registered office (if a company) or its principal place of business (in any other case); or
- sent by email,
- addressed to the Key Contact indicated for each Partner in the Partnership Agreement Particulars. Such notices shall be deemed to be served if delivered personally, at the time of delivery, if sent by post 48 hours after posting and if sent by email at 9.00 am on the next working day after transmission.

No Partner shall assign its rights or transfer its obligations under this Partnership Agreement without the prior written consent of the Department of Health NI and the National Lottery Community Fund.

A waiver of any right under this Partnership Agreement is only effective if it is in writing and it applies only to the Partner to whom the waiver is addressed and the circumstances for which it is given.

This Partnership Agreement contains all the terms and conditions agreed between the Partners regarding its subject matter and supersedes any prior agreement, understanding or arrangement between the Partners, whether oral or in writing. However, nothing in this Clause shall operate to limit or exclude any Partner's liability for fraudulent misrepresentation.

If any provision (or any part of a provision) of this Partnership Agreement is found by any court or administrative body of competent jurisdiction to be invalid, unenforceable or illegal, the other provisions shall remain in force. If any invalid, unenforceable or illegal provision would be valid, enforceable or legal if some part of it were deleted, the provision shall apply with whatever modification is necessary to give effect to the intention of the Partners.

Governing Law and Jurisdiction

This Partnership Agreement and any dispute or claim (including any non-contractual dispute or claim) arising out of or in connection with it or its subject matter (a “**Claim**”), shall be governed by, and construed in accordance with, the laws of England and Wales and the Parties agree irrevocably that the courts of England and Wales shall have exclusive jurisdiction to settle any claim.

Grant Agreement

[applicants to insert an exact copy of the Grant Agreement between Lead Partner and the Department of Health NI including the Terms and Conditions of Grant.]

Service Plan

[applicants to insert Service Plan from the Application or as further amended by the Partners as agreed with the Department of Health and the National Lottery Community Fund]