

Children and Young People's Plan

OVERVIEW

2011 - 2012



West Cheshire
Children's Trust



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FOREWORD



Moira Swann

Chair of West Cheshire Children's Trust Board

As Chair of West Cheshire Children's Trust I am delighted to mark the progress of the partnership in the borough by the publication of the first Children's Plan for the area.

This is presented as a one year plan to publicly declare what the partners have agreed to work on cohesively, and to change during this year.

Clearly this is only the beginning for the Partnership Trust; during this first year the Trust will also lead on work establishing a longer term strategic plan that will provide the framework for our future activity until 2014.

I would like to thank all who have contributed to this work and wish all partners success in delivery.



Gerald Meehan

Strategic Director of Children and Young People's Services for Cheshire West and Chester Council

The inaugural Children and Young People's Plan for Cheshire West and Chester is an important document. It should be read alongside our new Strategic Commissioning Framework for services; and the Local Safeguarding Children Board's Business Plan. Together, they set out what our children and young people's needs are, our priorities, and how we will take this forward in 2011/2012. This is the first real step in bringing our collective powers together to improve outcomes of children and young people in our borough. The journey begins here, in making Cheshire West and Chester one of the best and safest places for a young person to grow up.



WHAT IS WEST CHESHIRE CHILDREN'S TRUST?



West Cheshire Children's Trust is a partnership which is made up of organisations from the public, voluntary, community and faith sectors that commission or provide services for children and young people and their families in Cheshire West and Chester.

This includes Cheshire West and Chester Council, schools and colleges, voluntary sector services, health services, Police, Probation Service, Youth Offending Service, Job Centre Plus, the Local Safeguarding

Children's Board, Fire Service and many more. The Children's Trust also has involvement from children and young people and families through its Participation Group.

The purpose of the Children's Trust is to improve the lives and futures of all children, young people and their families. We believe that this is best achieved through agencies and organisations working together to achieve our common aim of improving outcomes for children, young people and their families.

WHAT IS A CHILDREN AND YOUNG PEOPLE'S PLAN?



West Cheshire Children's Trust Plan explains what partners aim to do to improve outcomes for children and young people and their families. It sets out what we think are the most important things to do together in this financial year from April 2011 to March 2012. The best way that services can do this is by jointly planning what to achieve and how they are going to it.

West Cheshire Children's Trust is committed to ensuring that the safeguarding of children and young people lies at the heart of everything that we do. Safeguarding and promoting the welfare of children and protecting them from significant

harm is everyone's business and therefore is dependent on effective joint working between agencies and professionals to ensure that this happens at all times. The Local Safeguarding Children Board and Children Trust work together to ensure that children and young people in Cheshire West and Chester are protected.

The Children and Young People's Plan covers all services for all children and young people aged 0-19, and for young people aged 20 and over who have left care and young people up to the age of 25 with disabilities or learning difficulties.

WEST CHESHIRE CHILDREN'S TRUST VISION FOR CHILDREN AND YOUNG PEOPLE



We want Cheshire West and Chester to be the best place in England for children and young people to grow up.

To achieve this we will add value through partnership:

- To keep children safe
- To ensure that children and families access help early
- To have the right services in the right place at the right time

WHAT IS CHESHIRE WEST AND CHESTER LIKE?



The area known as Cheshire West and Chester is defined by its position as a Unitary authority in the North West of England.

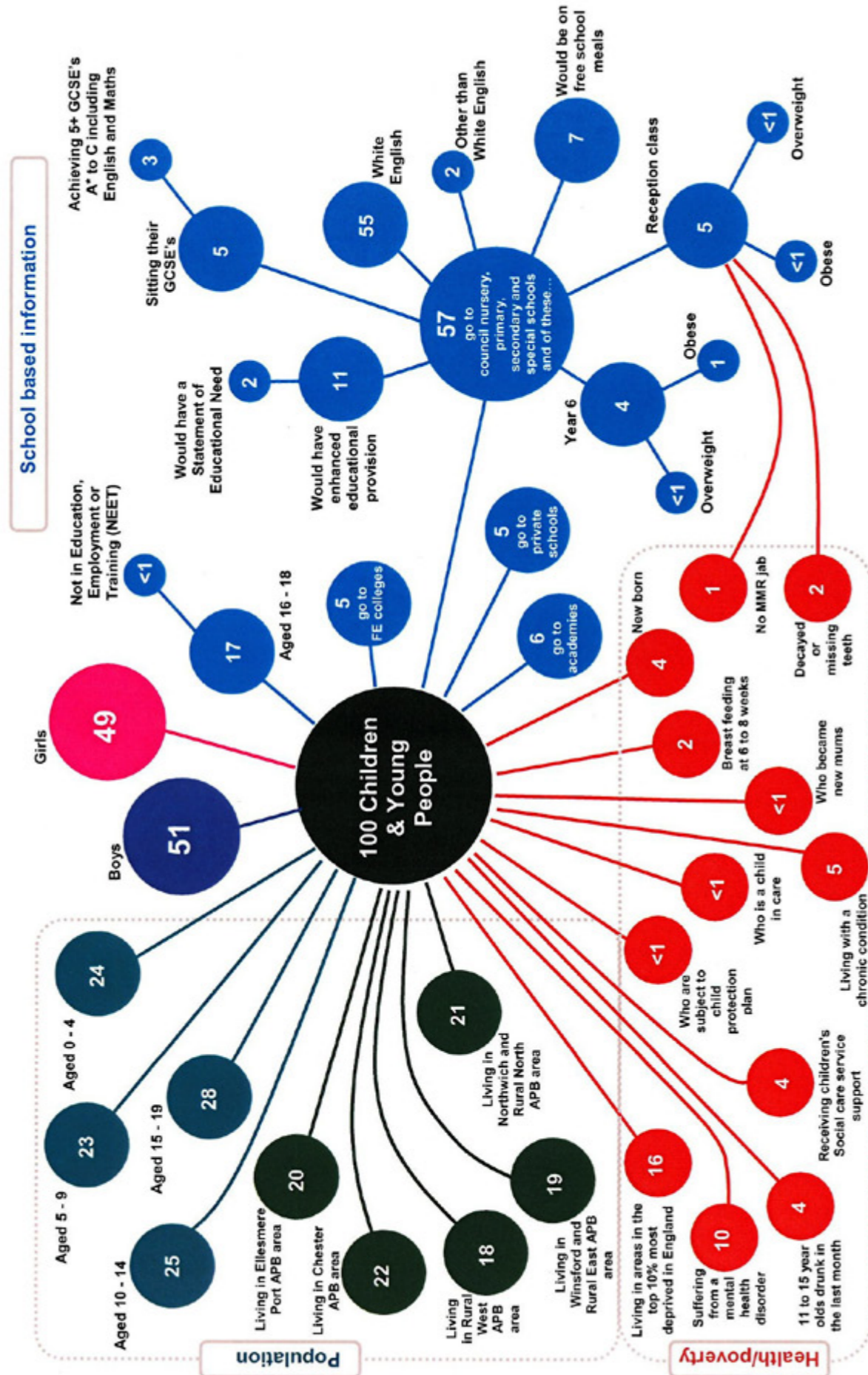
It has a population of 331,500 people, making it the fourth largest Council in the North West of England. The area includes the historic city of Chester, the industrial and market towns of Ellesmere Port, Northwich and Winsford together with Neston, Frodsham, Helsby and Malpas. In total 32% of the local population live in rural wards.

There are approximately 76,400 young people aged 0-19 in the borough which is 23% of overall population. The largest concentration of children and young people are in the areas of Chester, Northwich and Ellesmere Port.

In order to gain a more holistic view the graphic overleaf illustrates what the composition of Cheshire West and Chester would be like if it was a village of 100 children based on the information we have gathered through data sets.



IF CHESHIRE WEST AND CHESTER WAS A VILLAGE OF 100 CHILDREN AND YOUNG PEOPLE



WHAT DO WE KNOW ABOUT WHETHER YOUNG PEOPLE ARE ABLE TO MAKE A POSITIVE CONTRIBUTION TO THEIR LOCAL AREA?



Many young people are able to succeed and contribute to their communities in Cheshire West and Chester. During the last two years a significant number of 13-19 year olds have accessed and participated in positive activities provided through the Connexions organisation and funded voluntary sector youth clubs and these have achieved accredited outcomes.

The range of provision included youth work sessions which were open to all as well as targeted support. Young people also participated in outdoor education and the Duke of Edinburgh Award delivered by a number of providers across the borough.

There are also many young people who have contact with uniformed organisations such as the Scout and Guide organisations, Air Training Corps, Sea Cadets and

Army Cadets. For those children and young people who require a more targeted approach, Cheshire Fire and Rescue Service provide two bespoke programmes.

The RESPECT (Reducing Exclusion, Starting Positive Engagement with Children Together) programme is supported by a partnership with the Cheshire Police, Local Authorities and the Connexion Service, and offers 50 hours of positive engagement with 13-16 year olds who are at risk of anti-social behaviour and school exclusion. 280 young people undertook the programme in 2010-11.

The Princes Trust Programme for 16-25 year olds is a 12-week personal development opportunity for those who are employed and unemployed targeted in areas of disadvantage. 135 young people completed the programme in 2010-11.

HOW THE CHILDREN'S TRUST BOARD WILL WORK TOGETHER



West Cheshire Children Trust and the Local Safeguarding Children Board have agreed a framework to support the identification of need and the delivery of help and support. The continuum of need framework provides a framework for professionals in the borough to meet the needs of our children and young people, from those with no additional needs through to our most vulnerable with the most significant needs.

The priorities for the Children's Trust outlined in this plan are set within the continuum of need framework. This is to ensure that we improve outcomes for all young people and families in CWaC but with particular focus on those in the most need

and who need the most help. The Trust priorities are informed by and aligned to the Joint Strategic Needs Assessment (JSNA) for CWaC.

This analysis underpins the health-related elements of our needs analysis and will inform Children's Trust commissioning decision making. The Children's Trust Board will inform joint decision making on the priorities for the commissioning of services to meet local needs and priorities wherever possible. By focussing on joint commissioning decision making the Children's Trust will enable partner commitment to focus on what needs to be done to improve the life chances of children and young people.

WEST CHESHIRE CHILDREN'S TRUST PRIORITIES FOR 2011-2012



In order to understand what life is like for children and young people in Cheshire West and Chester a number of sets of data have been brought together looking at such areas as education, health, safety and well-being.

This information together with the views of children, young people and their families has helped inform our understanding what it is like to grow up in the borough and what the partners in the Children's Trust can do to help parents to help every child to achieve their potential.

From this the Trust has developed three key outcome priorities for the financial year 2011-12:

- Prevention, early help and family support and ensuring better health
- Children in care and care leavers
- Children and young people with disabilities and SEN

In addition the Board has agreed to prioritise two key areas for improvement that will enable outcomes to improve:

- Commissioning and supporting level 4 (children with acute needs including those in need of protection) work jointly
- Workforce development



Prevention, early help and family support including 'Better Start, Better Health'



By 2012 we aim to:

1. Reduce the number, frequency and duration of short episodes of care (excluding children with disability).
2. Continue the downward trend of young people entering the criminal justice system through diversionary activities whilst safeguarding them.
3. Devise and publish clear pathways through which families can access early help.
4. Reduce the number of unwanted pregnancies, especially in teenage women.
5. Improve the oral health of children, linked to healthy eating.
6. Increase initiation and duration of breastfeeding
7. Promote healthy weight
8. Focus Chlamydia testing on the right people, in the right places at the right time
9. Improve emotional resilience in children and young people



To achieve this we will have by 2012:

1. Developed and agreed a clear strategy for early intervention and help across our partnership
2. Agreed information sharing protocol and tools to support early intervention and help
3. Followed all the recommendations in the Atkins Report looking at improving the development of early help and support for families.
4. Introduced the multi-agency "Team around the Family" approach in Ellesmere Port
5. Planned for the implementation of the Multi Systemic Therapy Model (aimed at intervening with children at the edge of care) by April 2012
6. Developed and implemented tools to support assessment of needs including assessment of risk
7. Remodelled Children Centres so that they are able to provide a local platform for service provision including advice and guidance (no wrong door)
8. Improved access to evidence based parenting programmes so parents will receive the right course in the right place at the right time
9. Developed and delivered a range of evidence based parenting programmes and evaluated the impact on outcomes
10. Implemented the Emotional Health and Well-being Strategy
11. Developed an integrated model that ensures all partners identify and intervene early with children showing signs of mental stress
12. Developed a Family Nurse Partnership project working with up to 50 families offering support to first time parents under the age of 19 in areas of deprivation
13. Ensured that high quality Sex and Relationship education was delivered across all schools
14. Developed effective communication techniques with young people to inform them about their local sexual health services
15. Ensured that nutrition and physical activity interventions were delivered within the integrated model of children's centres
16. Developed a breast feeding social marketing campaign in one locality
17. Rolled out the Health, Exercise and Nutrition in the Really Young (HENRY) Programme
18. Maximised the uptake of the MIND, Exercise Nutrition, Do it... (MEND) Programme

19. Established a new 0-19 service specification for seamless community health services by June 2011
20. Implemented the revised Teenage Pregnancy Strategy alongside partners
21. Tackled poor educational outcomes and low aspiration which are contributory factors to teenage pregnancy in poorer areas
22. Provided seedbed funding to St John Ambulance for them to deliver an avoidable injuries programme to new parents in areas of deprivation in partnership with children's centres
23. Developed and delivered oral health programmes "Smiling Teeth" and "Spit Don't Rinse" targeted at areas of deprivation to encourage healthy eating
24. Continued to support schools to take part in the National Child Measurement Programme and used the results to offer targeted support
25. Developed the Chlamydia screening programme targeting at risk young men and women

Children in care and care leavers



By 2012 we aim to:

1. Honour the pledge we have made as corporate parents to children in our care
2. Have better placement choice from both internal and external supply
3. Have better prevention at the edge of care
4. Have an integrated strategy and service delivery particularly with health (Child and Adolescent Mental Health Service) and with education.
5. Children in Care will have improved attainment based on narrowing the gap with the whole school population and with similar children not in care
6. Have a defined number of apprenticeships and jobs for children in care



To achieve this we will have by 2012:

1. Implemented the multi-agency children in care strategy
2. Completed a placement sufficiency review
3. Developed an Access to Resources Service to manage requests for care and the commissioning of care placements
4. Implemented the integrated children in care CAMHs service
5. Agreed a number of apprenticeships/jobs per organisation across the Children's Trust
6. Redesigned Virtual Head Teacher role and team to focus on direct delivery to improve attainment

Children and young people with disabilities and special educational needs (SEND)



By 2012 we aim to:

1. Have an integrated health, personal and social care and education service which results in better outcomes for children, young people and their families
2. Ensure that families are at the heart of policies and services for disabled children and young people and are engaged and involved in the design and delivery of services



To achieve this we will have by 2012:

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| <ol style="list-style-type: none"> 1. Developed a Joint Strategic Needs Assessment section focusing on children with disabilities 2. Ensured that relevant lessons are learnt from the CQC Audit of Support for families of children with disabilities 3. Developed a multi-agency single pathway of delivery with clarity of what services can and will be delivered and by whom 4. Developed a multi-agency autism pathway to support children, young people and their families 5. Ensured that the current short break residential provision is more responsive to need and is able to offer a more flexible package of support including outreach and day care rather than traditional overnight stays | <ol style="list-style-type: none"> 6. Produced a clear short breaks services statement by October 2011 outlining all short break provision 7. Reduced the number of young people with LDD who are or might become NEET (Not in Employment, Education or Training) by 2% 8. Built on the work of the SEN Green Paper Working Groups to ensure Cheshire West and Chester is an early adopter of the new approach 9. Linked with Adult Health and Social Care Learning Disability Strategy 10. Ensured a clear focus on the transition of children with learning difficulties to Adult Services |
|---|---|

Commissioning and supporting Level 4 work jointly



By 2012 we aim to:

1. Ensure that all partners recognise children at risk of or suffering significant harm
2. Ensure that there are effective plans to protect them and meet their needs
3. Address parental factors that impact on the safety and protection of children
4. Improve community-based healthcare for children with chronic or acute conditions to allow them to stay out of hospital
5. Have a better range of 'edge of care and custody' services



To achieve this we will have by 2012:

1. Developed an unplanned care pathway for the 0-5 age group to reduce admissions
2. Developed and implemented a care pathway for some of the most common conditions that lead to hospital admissions in order to reduce them



Workforce development



By 2012 we aim to:

1. Have a better understanding of the profile of the 'One Children's workforce' in Cheshire West and Chester
2. Have workers who see themselves as part of this workforce and understand where they fit
3. Have a shared value base amongst the workforce
4. Have leaders and managers committed to and skilled in integrated working
5. Have integrated local services
6. Have clear processes understood and used for working together
7. Have shared learning and development where we have common learning needs



To achieve this we will have by 2012:

1. Re skilled the family support workforce through the delivery of common induction, core skills and specific programme development
2. Undertaken a data collection exercise which minimises effort by using sources of data already available
3. Prepared an action plan to address any areas for development highlighted by the workforce profile
4. Developed and promoted a 'Workforce Pledge' to embed out shared value base
5. Developed our leaders and managers in integrated leadership through joint programmes
6. Rolled out shared induction programme focusing on the Children and Young People's Plan and the work of the Children's Trust
7. Developed the integrated locality team in Ellesmere Port
8. Embedded integrated working processes – CAF (Common Assessment Framework) and the Team around the Child through improved learning and development
9. Developed a multi agency learning and development programme with specific emphasis on learning needs in relation to the strategic objectives of the Trust
10. Developed an in depth workforce profile of the learning and development of staff across the Trust in relation to Safeguarding

HOW ARE WE GOING TO KNOW IF WE HAVE ACHIEVED OUR PRIORITIES?



The Board recognises that it will need to prioritise these areas for improvement and has therefore established three key multi-agency Outcome Change Groups to lead the improvement work over the next 6 months.

These groups will advise the Board on what has been improved and what still needs to be done beyond

March 2012 to help the Board realise its vision for children young people and their families.

The final section of this report sets out actions the Board intends to take and by when before March 2012. Key Priorities will be tested by monitoring the outputs and outcomes as described in the following charts.



Priority: Prevention, early help, family support and better health



Performance Activity	Lead Agency	Lead Officer	Key Success Indicators	Target Date	Additional Evidence
Establish a family nurse partnership	NHS Western Cheshire	Julie Webster	Establish a Family Nurse Partnership Begin to see families Establish viability of a programme for Vale Royal	31 March 2012	
Establish Teenage Pregnancy (TP) Programme	NHS Western Cheshire/ CW&C	Julie Webster	Supervisor recruited TP Strategy 2011-13 Delivery and the on-going monitoring of its output and outcome measures		
Injury Minimisation Programme (IMP)	NHS Western Cheshire	Julie Webster	Number of parents supported through the St. John Ambulance programme IMP Strategy and targets for the 2012-15 Plan		
Oral Health Programme	NHS Western Cheshire	Julie Webster	Number of participants in Oral Health programmes delivered		
Breastfeeding Campaign Delivered	NHS Western Cheshire	Julie Webster	Develop social marketing campaign in Ellesmere Port		
Number of children and young people accessing MEND and number of parents accessing HENRY (healthy eating programmes)	NHS Western Cheshire	Julie Webster	Links to Children's Centre Business Plans targeting parental behaviour and particularly young children Targets to be developed for Vale Royal area		
New Chlamydia screening programme	NHS Western Cheshire	Julie Webster	Nominal diagnostic target of 2.4% (to include GUM positives)	31 March 2012	For the target population of 31,100 15-24 year olds in Western Cheshire, 2.4% equates to 744 positives in 2011/12
Number of evidence based parenting programmes delivered	CW&C	Paul Boyce	Evaluate existing programme		
Evaluate outcomes of the 'Atkins' Report	CW&C	Paul Boyce	Deliver pilot in Ellesmere Port and establish basis, common understanding		

Priority: Children in care and care leavers



Performance Activity	Lead Agency	Lead Officer	Key Success Indicators	Target Date	Additional Evidence
Emotional well-being screening for children in care	CW&C	Head of Children & Families	Each child reviewed/screened within appropriate timescales		
Number of apprenticeships/jobs by place, type and partner	Connexions	Jane Middleton	To be determined		
Key Stage 2 and 4 targets for children in care to be agreed by the Children's Trust Board	CW&C	Head of the Virtual School/ Ann Moore	Baseline results for 2010/11 Academic Year	30 Sept 2011	
Long-term Placement Stability	CW&C	Head of Children & Families	Former NI 62 – Stability of placements (children placed 3 or more time within 12 months)	30 Sept 2011	SSDA903 statutory return to Government provides the 2009/10 and 2010/11 baseline
Number of adoptions	CW&C	Head of Children & Families	Number of children placed for adoption Timeliness of adoptions	31 October (mid-year review)	

Priority: Children with disabilities & SEN



Performance Activity	Lead Agency	Lead Officer	Key Success Indicators	Target Date	Additional Evidence
Establish 'true' baseline of out of authority placements (OOA)	CW&C	Head of Children & Families	A strategy for on-going review of OOA placements Clear picture of the legitimacy of current OOA placements Clear targets for the reduction of OOA placements as part of the 2012-15 Children's Plan	31 March 2012	
Children subject to school action, school action plus, and with statements	CW&C	Head of Achievement & Well-being	Establish baseline and seek to reduce the numbers of children: <ul style="list-style-type: none"> On school action On school action plus With (SEN) statements 	31 March 2012	
Percentage of young people with Learning Difficulties/Disabilities (LDD) who are Not in Education, Employment or Training (NEET) reduced to 6% of the total NEET cohort	CW&C	Head of Strategic Commissioning	Reduce to 6% of the total NEET cohort the percentage of young people with LDD who are NEET	31 March 2012	
Joint Strategic Needs Assessment (JSNA) for children with disabilities	NHS Western Cheshire	Sarah Clein	Publication of JSNA for children with disabilities	31 March 2012	

Priority: Safeguarding commissioning plan



Performance Activity	Lead Agency	Lead Officer	Key Success Indicators	Target Date	Additional Evidence
Commissioning of child protection (Level 4) priorities including: <ul style="list-style-type: none"> Child protection planning – Number of core groups carried out within 10 working days of child protection case conference; number of core groups taking place no less than 10 days prior to all review conferences Impact of Parenting, particularly around drug and alcohol misuse Children missing from home 	CW&C	Head of Strategic Commissioning	Effectiveness of core groups Children report feeling safer (through outcome evaluation) Numbers of parents accessing drugs and alcohol programmes and parents report the impact of services was positive for them and their children Establish children missing from home baseline and targets for inclusion within the 2012-15 Plan	31 March 2012	

Priority: Workforce development



Performance Activity	Lead Agency	Lead Officer	Key Success Indicators	Target Date	Additional Evidence
Improvements in the skills base/competency of the workforce	CW&C	Head of Strategic Commissioning	Workforce information action plan and in-depth learning profile on Safeguarding completed Key areas from these identified for action, with the impact on services to children and young people clearly identified for future evaluation. Impact assessment of the workforce pledge using views of staff, managers and the children and young people who use the services. Cross agency staff survey on the implementation and functioning of the locality teams and their use of integrated working including views of local families.	31 March 2012	Recognition of improvement in capability/competency of all employees through 'mock', unannounced and announced inspection process Recognition of improvement in supervision for all employees through 'mock', unannounced and announced inspection process

CONSULTATION AND PARTICIPATION OF CHILDREN AND YOUNG PEOPLE



The Children's Trust will work with the Council and other organisations to obtain the views of children and their parents in a structured way to provide an opportunity for their voices to be heard at the heart of the Children's Trust.

Some of the forums that already exist for consultation and participation of children, young people and their families are:

- Youth Parliament
- Children in Care Council
- School Councils
- Children's Centres
- Parent Forums, including parent expectation and evaluation appraisals of service delivery
- Patients forums
- People working with children and young people
- Staff conferences
- Formal consultation events

In October 2011 the Children's Trust will support a Hear By Rights workshop for young people to be jointly hosted by the Youth Parliament to seek their views and ideas on how the Trust can take forward this agenda.

We will work with young people to draft a Participation Strategy for the Trust and its partners to set out some principles for service user involvement in decision making and service development.



MORE INFORMATION



Further information and data is available on our website and in the more comprehensive Children and Young People's Plan 2011-12 including:

- National Policy Context
- What we know about children and young people in the Cheshire West and Chester area (Data)
- Glossary of Terms

www.cheshirewestandchester.gov.uk

