

Policy Committee

Date: [Wednesday, 18 July 2012](#)
Time: [10:30](#)
Venue: [County Hall](#)
Address: [County Hall, West Bridgford, Nottingham NG2 7QP](#)

AGENDA

1	<u>Minutes of last meeting of the Committee on 20 June 2012</u> Details	3 - 6
2	<u>Apologies for Absence</u> Details	1-2
3	<u>Declarations of Interest by Members and Officers (see note 3 below)</u> Details	1-2
4	<u>Approval of Joint Strategic Needs Assessment and Notts Health & Wellbeing Strategy 2012-13</u> Details	7 - 44
5	<u>Advertising and Sponsorship</u> Details	45 - 48
6	<u>Looked After Children Strategy</u> Details	49 - 98
7	<u>Youth Homelessness Strategy</u> Details	99 - 138
8	<u>Budget Consultation 2013-14</u> Details	139 - 144
9	<u>LINK Annual Report with link to report</u> Details	145 - 148
10	<u>Annual Performance Report 2011-12</u> Details	149 - 168
11	<u>Policy Library</u> Details	169 - 172
12	<u>Work Programme</u> Details	173 - 180

No.	<u>Telecare Charging Urgent Committee Report</u>	181 - 186
	Details	

No.	<u>NOTES:-</u>	1-2
------------	-----------------------	------------

(1) Councillors are advised to contact their Research Officer for details of any Group Meetings which are planned for this meeting. A meeting of the Conservative Group will be held at 9.45 am on the day of the meeting

(2) Members of the public wishing to inspect "Background Papers" referred to in the reports on the agenda or Schedule 12A of the Local Government Act should contact:-

Customer Services Centre 08449 80 80 80

(3) Persons making a declaration of interest should have regard to the Code of Conduct and the Council's Procedure Rules.

(4) Members or Officers requiring clarification on whether to make a declaration of interest are invited to contact Chris Holmes (Tel. 0115 9773714) or a colleague in the Governance Team prior to the meeting.

(5) Members are reminded that Committee and Sub-Committee papers, with the exception of those which contain Exempt or Confidential Information, may be recycled.



Meeting **POLICY COMMITTEE**

Date **Wednesday, 20th June 2012 at 10:30am**

membership

Persons absent are marked with 'A'

COUNCILLORS

Mrs Kay Cutts (Chairman)
Martin Suthers OBE (Vice-Chairman)

Reg Adair	Philip Owen
Joyce Bosnjak	Alan Rhodes
Richard Butler	Kevin Rostance
Steve Carroll	June Stendall
John Clarke	Andy Stewart
John Cottee	Brian Wombwell
Richard Jackson	Martin Wright
Stan Heptinstall MBE	A Jason Zadrozny
Mick Murphy	

ALSO IN ATTENDANCE

Councillor Eric Kerry
Councillor John Knight
Councillor Mel Shepherd MBE

OFFICERS IN ATTENDANCE

Carl Bilbey	(Policy Planning & Corporate Services)
Mick Burrows	(Chief Executive)
Martin Done	(Policy Planning & Corporate Services)
Jayne Francis-Ward	(Policy Planning & Corporate Services)
Matt Garrard	(Policy Planning & Corporate Services)
Chris Holmes	(Democratic Services)
Nicola McCoy-Brown	(Policy Planning & Corporate Services)
Celia Morris	(Policy Planning & Corporate Services)
Paul Simpson	(Environment & Resources)
Michelle Welsh	(Policy Planning & Corporate Services)

MINUTES

The Minutes of the last meeting held on 23rd May 2012 having been previously circulated were confirmed and signed by the Chairman.

APOLOGIES FOR ABSENCE

An apology for absence was received from Councillor Jason Zadrozny (personal)

DECLARATIONS OF INTEREST BY MEMBERS AND OFFICERS

Councillor John Cottee declared a personal interest in agenda item 5 Proposals for Sherwood Forest Regional Park as he was a member of a number of organisations on the Shadow Regional Park Board.

Councillor Martin Suthers OBE declared a personal interest in agenda item 5 Proposals for Sherwood Forest Regional Park as he was the secretary of the Nottinghamshire Wildlife Trust.

FILM FRIENDLY PARTNERSHIP CHARTER

RESOLVED 2012/009

That agreement be given to the Council signing up to the Film Friendly Partnership Charter, and where appropriate, financial contributions be sought.

PROPOSALS FOR SHERWOOD FOREST REGIONAL PARK

Consideration was given to a report updating members on the establishment of the Sherwood Forest Regional Park.

Reference was made to the proposed boundaries of the Park and whether parts of Broxtowe could be included. Comment was also made about having other district council representation and a city council representative on the shadow Board. It was explained that meetings with district council's were being arranged to seek their involvement and attempts had been made to involve the city council. It was suggested that further discussions take place concerning the boundary. Reports back on the development of the regional park would be considered by the Culture Committee.

It was suggested that Councillor Richard Butler the Chairman of the Environment & Sustainability Committee be added to the membership of the Shadow Regional Park Board.

RESOLVED 2012/010

- 1) That the work to date on proposals for establishing a Sherwood Forest Regional Park be noted.
- 2) That support for the process of Regional Park designation be approved.
- 3) That the vision and objectives for the proposed Regional Park be endorsed.
- 4) That the Chairman of the Environment & Sustainability Committee be added to the membership of the Shadow Regional Park Board.

IMPROVEMENT PROGRAMME ANNUAL REPORT AND UPDATE

RESOLVED 2012/011

That the Improvement Programme Annual Report for 2011/12 and the arrangements for developing the Council's Improvement Programme be noted.

DRAFT ANNUAL GOVERNANCE STATEMENT 2011/12

RESOLVED 2012/012

That the Annual Governance Statement 2011/12 be endorsed.

PROPOSAL FOR A NOTTINGHAMSHIRE ANNUAL SATISFACTION SURVEY

Consideration was given to a report on undertaking an annual satisfaction survey to gather information on public perceptions of value for money, communication, quality of life, and health and wellbeing from the Council's public services.

RESOLVED 2012/013

That approval be given to:-

- 1) The undertaking of an annual satisfaction survey
- 2) The selection of the supplier by an approved procurement method.
- 3) The entry into a contract with the selected supplier subject to approval of the contract price by the Leader, Deputy Leader, Chair of Finance & Property and the Corporate Director Policy, Planning and Corporate Services.

STATEMENT ON THE COMMUNITY RIGHT TO CHALLENGE

Consideration was given to a report which set out the proposed procedure for the Community Right to Challenge. It was noted that all expressions of interest would be considered by the Policy Committee.

RESOLVED 2012/014

- 1) That the Community Right to Challenge procedure as set out in the appendix to the report be approved.
- 2) That the procedure be reviewed within 12 months.

UPDATE ON NOTTINGHAMSHIRE LOCAL BROADBAND PLAN

A report was considered which gave an update on progress with the Nottinghamshire Local Broadband Plan.

It was explained that the position regarding the circa £867k European Regional Development Fund (ERDF) funding application remains fluid and has a lengthy history. The current East Midlands Regional Programme does not provide for broadband infrastructure to be paid for in general, which is leading to difficulties in securing ERDF resources to match the BDUK programme, even though the UK Government has said that it wants this to happen. The County Council is experiencing a number of difficulties in securing approval to the broadband project, even though the other Government Department involved has identified ERDF as an appropriate source of match funding. These issues clearly require greater coordination and joint working between different Government Departments.

RESOLVED 2012/015

- 1) That the report be noted.
- 2) That the Leader of the Council write to Ed Vaizey MP to underline the Council's concerns about delays to the broadband programme.

WORK PROGRAMME

A report on the committees proposed work programme for 2012/13 was considered. It was suggested that an update on broadband be included in the programme.

RESOLVED 2012/016

That the Committee's work programme be noted and progress on broadband be included.

The meeting closed at 11.20am.

CHAIRMAN

M_20June2012

REPORT OF THE DIRECTOR OF PUBLIC HEALTH**APPROVAL OF THE JOINT STRATEGIC NEEDS ASSESSMENT AND
NOTTINGHAMSHIRE HEALTH AND WELLBEING STRATEGY 2012-13****Purpose of the Report**

1. This report provides information on the recent refresh of the Joint Strategic Needs Assessment and the development of the first Health and Wellbeing Strategy for Nottinghamshire. It outlines the process followed, including feedback from the public consultation and describes plans for ongoing development of these strategies.

Information and Advice

2. Nottinghamshire County Council established a shadow Health and Wellbeing Board in March 2011, in preparation for the proposed legislative changes set out in the Health and Social Care Bill.
3. The Health and Social Care Act received Royal Assent on 27th March 2012 giving upper tier local authorities the statutory responsibility to establish a Health and Wellbeing Board by April 2013. From 1st April 2013, the Health and Wellbeing Board will have the following core statutory responsibilities:
 - a. to prepare a Joint Strategic Needs Assessment (JSNA)
 - b. to prepare a Health and Wellbeing Strategy to address the needs identified
 - c. to produce a Pharmaceuticals Needs Assessment
 - d. to promote integrated working between the NHS and local government as well as commissioners and providers of services which impact on the wider determinants of health
 - e. to provide advice, assistance or other support to encourage financial partnerships under Section 75 of the National Health Service Act 2006 in connection with the provision of such services.
 - f. to encourage persons who arrange for the provision of any health or social care services in its area to work closely together.
4. Although the Health and Wellbeing Board does not take on its statutory duties until April 2013, the Board agreed to make an early start on agreeing local health and wellbeing priorities. The refresh of the JSNA and development of the first Health and Wellbeing Strategy aim to provide a useful baseline and reference point for organisations, during the shadow period.

Joint Strategic Needs Assessment

5. In July 2011, the Health and Wellbeing Board approved a recommendation made by the JSNA Steering Group to review the current Joint Strategic Needs Assessment (JSNA). The purpose of the refresh was to ensure the JSNA informed the development of the Health and Wellbeing Strategy and Clinical Commissioning Group Plans (and subsequently also support authorisation).
6. The refresh was focussed on the review of the existing Adults and Older People's Chapters, as the review of the Children and Young People's chapter had been completed in 2010.
7. The public consultation for the rapid refresh of the Joint Strategic Needs Assessment was conducted between 14th March and 23rd April 2012. The consultation was primarily a web-based consultation, hosted on a Nottinghamshire County Council webpage. Copies of the draft JSNA key messages were also made available in audio and braille format. In addition, invitations were sent to selected groups across the core organisations/partnerships to participate in the consultation.
8. One hundred and sixty-one (161) responses were received from individuals / groups via the web-based questionnaire and 8 other written responses were received. However, one hundred and forty-five (145) of the responses appear to have been from the same individual and therefore have been included only once.
9. The responses were similar for both the Adults and Older People's Chapters: Most respondents agreed that the key messages were clear, relevant groups and populations had been included, that information was presented at an appropriate level of detail and was easy to use. However, a number of respondents disagreed that it provided a full picture of health and wellbeing needs, that future needs of populations had been addressed, and gaps had been identified.
10. The comments have either been incorporated into a revision of the JSNA or included in the future work programme as described later in the report. The main comments from the consultation are summarised in the consultation response document listed as a background paper. The summary of comments is also available on the Joint Strategic Needs Assessment webpage: www.nottinghamshire.gov.uk/jsna.
11. The final draft of the Joint Strategic Needs Assessment for 2012-13 and key messages is available to access and download from the JSNA webpage: www.nottinghamshire.gov.uk/jsna

Health and Wellbeing Strategy

12. The Health and Wellbeing Board agreed the scope and format of the first Health and Wellbeing Strategy at its meeting on 11th January 2012. It was agreed that the first version would reflect common priority areas included in current organisational strategies. This would provide common goals for partners on which to focus early work under the shadow Health and Wellbeing Board. This also took account of the need for Clinical Commissioning Groups (CCGs) to develop commissioning plans for 2012-13 as part of their authorisation process.
13. The Health and Wellbeing Board agreed that the scope of the strategy would include wider determinants of health, such as age, gender, lifestyle issues, living and working conditions

and social and community networks. General socio-economic, cultural and environmental conditions would not feature heavily in the strategy.

14. It was agreed that the Health and Wellbeing Strategy would not reflect the entirety of what needed to be commissioned to improve health and wellbeing. Instead it would reflect what could be done jointly to make further improvements.
15. On behalf of the Board, the Health and Wellbeing Strategy Editorial Group reviewed existing strategies from the core partners and identified 15 high level priority areas. These were assessed to ensure they reflected current local need and were supported by evidence.

Consultation

16. The public consultation for the Health and Wellbeing Strategy was conducted from 22nd February to 21st March 2012. As for the JSNA, the consultation was limited in this initial phase as plans are in place to develop a longer term work programme as described later in the report.
17. The web-based consultation was hosted on the Health and Wellbeing Board webpage. Copies of the draft strategy were also placed in the major libraries across Nottinghamshire. In addition, presentations were made to selected groups across the core organisations/partnerships connected to the Health and Wellbeing Board.
18. Each stakeholder was contacted with information on how to access the consultation and was also invited to attend a stakeholder network on 14th March 2012, which summarised the strategy and consultation process. In addition, a workshop was held for Health and Wellbeing Board members to support the selection of local priorities.
19. Comments were received from 47 individuals / groups. Comments were diverse but overall, the vast majority of respondents agreed with the priorities listed in the strategy.
20. Feedback highlighted the need to include domestic violence, housing and troubled families. Comments were made that further work was needed to identify specific actions within the broad priority areas and consider the needs of specific groups, for example healthy aging strategies.
21. Further comments are included in the summary of consultation responses available on the Health and Wellbeing Board webpage at:
<http://www3.nottinghamshire.gov.uk/caring/yourhealth/health-and-wellbeing-board/>
22. The Draft Health and Wellbeing Strategy for 2012-13 has been revised to respond to the comments made and address any associated concerns. Comments have also been received from the Plain Language Group. **Appendix One** includes the revised strategy.
23. Once approved, an electronic version of the final strategy will be available for access and download from the Health and Wellbeing Board webpage. In addition, a limited number of papers copies of the Strategy will be produced to raise the profile of the Health and Wellbeing Board and strategy and assist in further engagement with stakeholders.

24. An Equality Impact Assessment is being completed in relation to the content of the proposed Health and Wellbeing Strategy for 2012-13. This assesses the impact of any proposed change to services or policy on people with protected characteristics. This in turn demonstrates that the Health and Wellbeing Board have considered the aims of the Equality Duty.

Future Work Programme

25. As outlined above, consultation was limited in the initial phase as it was recognised that the short timeframe for delivery and the complexity of content would not fully ensure effective engagement. It was also noted that the plans in place to develop a longer term work programme would mean that the JSNA and strategy would continue to develop over time. Therefore, the consultation is aimed to inform the development of this ongoing work programme.
26. All comments received are being considered as part of the development of the work programme for the JSNA and strategy. The work programme will also include wide engagement and consultation, ensuring the views of communities are captured in a meaningful way as part of the longer term work.
27. Key actions identified to deliver the strategy will also be incorporated into the work programme plan and monitored by the Health and Wellbeing Implementation Group. This will also ensure alignment is maintained between the strategy and local commissioning plans.

Endorsement of the JSNA and Health and Wellbeing Strategy

28. The Health and Wellbeing Board endorsed the content of the Health and Wellbeing Strategy at its meeting on 2nd May 2012, although it acknowledged the need for further development, including the agreement of specific actions to support delivery of each priority area.
29. The Health and Wellbeing Board subsequently endorsed the content of the JSNA (for Adults and Older People) on 27th June 2012.
30. The Policy Committee is asked to ratify the JSNA and Health and Wellbeing Strategy on behalf of Nottinghamshire County Council. These strategies will also be ratified by the Primary Care Trust Boards to ensure robust governance across Nottinghamshire County (including Bassetlaw). Clinical Commissioning Group Boards may also formally endorse the JSNA and strategy through presentation to their shadow Boards.
31. As the Health and Social Care Act does not come into force until April 2013, the approval of the Health and Wellbeing Strategy is not being made under the provisions of the Act.

Statutory and Policy Implications

32. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

RECOMMENDATION/S

It is recommended that the Policy Committee:

- 1) Approves the Nottinghamshire Joint Strategic Needs Assessment and Health and Wellbeing Strategy for 2012-13.

DR CHRIS KENNY
Director of Public Health

For any enquiries about this report please contact:
Cathy Quinn, Associate Director of Public Health

Constitutional Comments (SG 27/06/2012)

33. The Committee is responsible for determining policies not reserved to Full Council. The Committee is the appropriate body to consider the proposals set out in this Report.

Financial Comments (RWK 04/07/12)

34. The plans and activities contained in, and developed as a result of, the Nottinghamshire Joint Strategic Needs Assessment and the Health and Wellbeing Strategy for Nottinghamshire for 2012/13 will be delivered within the financial resources available to the County Council and its health service partners.

Background Papers

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

- a. Report to the Health & Wellbeing Board 2 May 2012 - 'Nottinghamshire Health and Wellbeing Strategy 2012-13.'
- b. Our Strategy for Health & Wellbeing in Nottinghamshire: Priorities for 2012-13 Consultation Response available at: <http://www3.nottinghamshire.gov.uk/caring/yourhealth/health-and-wellbeing-board/>
- c. Report to the Health & Wellbeing Board 27 June 2012 – 'Joint Strategic Needs Assessment Rapid Refresh - Approval'
- d. Joint Strategic Needs Assessment full document and key messages available at: www.nottinghamshire.gov.uk/jsna
- e. Joint Strategic Needs Assessment for Nottinghamshire: Rapid Refresh 2012 – Consultation Response.

Electoral Division(s) and Member(s) Affected

All.

P2

Our Strategy for Health & Wellbeing in Nottinghamshire:

Priorities for 2012 - 2013

Contents

1.	Our Ambition.....	5
1.1.	What is Health & Wellbeing	5
2.	The Health & Wellbeing Board and its Partners	5
3.	How we got where we are	6
3.1.	Priority Setting & Consultation	6
3.2.	Our Principles	6
3.3.	Our Approach	6
3.4.	Work Programme.....	7
3.5.	Delivery.....	8
3.6.	Measuring Success: Outcomes Frameworks	8
4.	A Picture of Nottinghamshire	9
4.1.	Health & Wellbeing in Nottinghamshire: A Summary.....	10
4.2.	Health & Wellbeing Inequalities in Nottinghamshire	10
4.3.	Carers.....	12
5.	Prevention: Behaviour Change & Social attitudes	13
5.1.	Smoking and tobacco control	13
5.2.	Healthy Weight, Healthy Life: Obesity	14
5.3.	Substance Misuse: Alcohol & Drugs.....	15
6.	Children, young People & families.....	18
6.1.	Improving the effectiveness of services for disabled children through joint planning and commissioning	18
6.2.	Additional Priority Areas	19
7.	health inequality priorities	21
7.1.	Learning Disability	21
7.2.	Autistic Spectrum Disorders	22
7.3.	Physical Disability, Long Term Conditions and Sensory Impairment.....	22
7.4.	Mental Health & Emotional Wellbeing.....	23
7.5.	Dementia	25
7.6.	Older People.....	26
8.	The Wider Determinants Of Health & Wellbeing.....	27
8.1.	Education, Personal Attainment & Aspirations	28
8.2.	Crime & Community Safety	28
8.3.	Healthy environments in which to live, work and play.....	30
9.	Conclusion.....	31
10.	References	32

Glossary & Definitions

Acute: Symptoms are of quick onset, relatively severe and are usually not permanent

Carer: A person who looks after another who is ill, infirm or disabled over a period of time, this can be paid or unpaid and is usually a family member
Co-dependent: One cannot exist without the other or work well without the other

Commissioning: The process of allocating budgets and buying resources, services or appropriate interventions.

Chronic: Persisting over a long period of time or indefinitely

Death rate: The number per 100,000 (or number specified) of dying of a specific disease or related to a particular behaviour i.e. smoking

Early intervention: The step after prevention; catching a disease, condition, behaviour early and intervening to minimise the effect or improve the outcome.

Health Inequalities: The variation in health that cannot be explained by genetic factors and is usually dependent upon wider determinants of health

Healthy Life Expectancy: A figure representing the number of years, based on known statistics, to which any person of a given age may reasonably expect to live in good health

Incidence: The number of new instances of a specific condition within a specified period of time. Although sometimes loosely expressed simply as the number of new cases during some time period it can be expressed as new cases per 100,000 or other denominator

Indicators: A set of measurable outcomes or targets.

Inequalities gap: The difference in health, education, well being and income of between the most and least deprived in society.

Interventions: Service, products or projects put into place to intervene in a particular problem or issue to help address or overcome that issue.

Life Expectancy: A figure representing the number of years, based on known statistics, to which any person of a given age may reasonably expect to live.

Mortality: is incidence of death in a population. It is measured in various ways, often by the probability that a randomly selected individual in a population at some date and location would die in some period of time

Morbidity: is an incidence of ill health. It is measured in various ways, often by the probability that a randomly selected individual in a population at some date and location would become seriously ill in some period of time.

Obese: An individual with a BMI of 30 or more is considered to be obese, of normal weight is a BMI of 18-25

Outcomes Framework: A set of indicators or measure set by central and local government to establish if progress in specific areas is being made, these are often targets or performance indicators.

Partners: Statutory authorities, charities, organisations and businesses who work together to achieve a goal.

Prevalence: The total number of cases of a disease in a given population at a specific time, often expressed as the number of cases expected per say 100,000 or other appropriate denominator.

Preventable deaths: The number of deaths that occur before full life expectancy is reached due to a particular disease or lifestyle behaviour.

Prevention: To stop something occurring, or to reduce the likelihood of something occurring

Socio economic group: Individuals are grouped by a set of economic, educational, work status, and sociological measures. Individuals are then classified into groups based on the output of these measures.

Substance misuse: Is used to cover drug and alcohol misuse. The term 'drugs' extends beyond illegal drugs such as heroin, cocaine, amphetamines, to the misuse of other drugs, prescription only medicines (POM) such as anabolic steroids and benzodiazepines, over the counter medicines (OTC) such as preparations containing codeine

Tiered Approach: A layered/pyramid approach where by the level of resource and intervention mirrors a reducing need in terms of numbers with a condition put possibly an increase in cost as the interventions become more complex/intensive with increase severity on a scale of health/wellness.

Transitional: Moving from one thing into another making a transition in this case we mean from childhood into adult hood or from children's services into adult services.

Universal: Encompassing all of the members of a class or group. common to, involving, or proceeding from all in a particular group. applicable to or affecting many individuals, conditions, or cases; general

Abbreviations

JSNA	Joint strategic Needs Assessment
BMI	Body Mass Index
COPD	Chronic Obstructive Pulmonary Disease
BBV	Blood Borne Virus(es)

1. OUR AMBITION

Our aim is that the people of Nottinghamshire have longer, healthier and happier lives.

Through better joined up working across health, social care and wider communities, we want to make a real difference in improving health and wellbeing opportunities for all.

1.1. What is Health & Wellbeing

Health is often stated as being an absence of illness or disability. However, health and wellbeing recognises that a person's overall feeling of 'wellness' includes a sense of physical, mental and social wellbeing and therefore, takes a much wider view of what affects a person's life experience.

2. THE HEALTH & WELLBEING BOARD AND ITS PARTNERS

The passing of the Health & Social Care Act in 2012 places a duty upon Nottinghamshire County Council to establish a Health & Wellbeing Board and develop a supporting strategy to meet the health and wellbeing needs of local people from April 2013. The shadow Nottinghamshire Health & Wellbeing Board was set up in May 2011 to lead work across health and local government in advance of the Health & Social Care Act. It is a partnership committee to improve the health and wellbeing of the people of Nottinghamshire.

Our strategy is published by Nottinghamshire County Council, as the lead partner who will take on its statutory responsibility to produce a Health & Wellbeing Strategy from April 2013.

Partner organisations that are members of the Health & Wellbeing Board are:

Local Authorities: Nottinghamshire County Council, Gedling Borough Council and Newark & Sherwood District Council; on behalf of Ashfield District Council, Bassetlaw District Council, Broxtowe Borough Council, Mansfield District Council, and Rushcliffe Borough Council.

The NHS: NHS Nottinghamshire County (clustered with Nottingham City) and NHS Bassetlaw (clustered with South Yorkshire,) Bassetlaw Commissioning Organisation, Mansfield & Ashfield Clinical Commissioning Group (CCG), Newark & Sherwood CCG, Nottingham North and East CCG, Nottingham West CCG and Principia Rushcliffe CCG.

Local Involvement Network (LINKs). HealthWatch will be represented from 2013.

Other Partners: In addition, there is a wide network of important partners which work together to influence health and wellbeing, these include:

Nottinghamshire Police, Nottinghamshire Fire and Rescue, Nottinghamshire Probation Trust, Health Protection Agency, Jobcentre Plus, as well as the education and business sector.

Partnership boards include the Safer Nottinghamshire Board (SNB), Adult and Children's Safeguarding Boards, the Children's Trust Executive and district level partnerships groups such as Local Strategic Partnerships and Community Safety Partnerships.

Providers of services relating to health and wellbeing: The largest health providers within Nottinghamshire include Nottingham University Hospitals NHS Trust, Nottinghamshire Healthcare NHS Foundation Trust, Sherwood Forest Hospitals NHS Foundation Trust, Doncaster & Bassetlaw Hospitals NHS Foundation Trust and East Midlands Ambulance Service NHS Trust. Across health and social care, there are a wide range of providers including private, independent and voluntary sector providers.

3. HOW WE GOT WHERE WE ARE

3.1. Priority Setting & Consultation

We agreed to produce our initial Health & Wellbeing Strategy to bring together identified priorities that are common to the core Health & Wellbeing Board partners.

A public consultation exercise was undertaken to obtain views on the strategy content from members of the public and a range of interested parties, such as service providers, public bodies, user groups and businesses.

The consultation ran between 22 February and 21 March 2012, on the Nottinghamshire County Council website, in local libraries and through the Health & Wellbeing Board network.

The consultation confirmed that the list of priorities was supported by the majority of responders. However people requested that further detail be added to identify definite actions and outcomes. A full consultation feedback document is available on the Nottinghamshire County Council Website.

3.2. Our Principles

Our first Health & Wellbeing Strategy for Nottinghamshire includes common priorities across members of the Health & Wellbeing Board. Review of these priorities against the Joint Strategic Needs Assessment (JSNA) confirms that they represent existing local needs. Through, the Joint Strategic Needs Assessment (JSNA) we classify a wide and diverse range of needs, and also illustrate the variation in these needs across Nottinghamshire.

The Health & Wellbeing Board is committed to improving health and wellbeing for local people, but it must prioritise areas of greater need and greater potential to make improvements, so that it can make the best use of available finances.

Our Health & Wellbeing Strategy has been developed by using a set of agreed criteria to allow different areas of need or services to be compared and prioritised. These criteria include:

- Whether the service addresses unmet local need
- The benefit that can be produced from a change in service. Whether it will extend life, improve quality of life or close the gap in health inequalities
- The level of certainty that the change will deliver real improvements, using evidence from where its been used before.
- Whether improvements can be measured
- If the cost is reasonable compared to the level of benefit produced
- Whether benefits will be seen in a practical timeframe
- Whether there is potential to improve efficiency or quality through joint working
- Whether the community supports the proposed change.

Themes have been prioritised on the basis that one organisation alone cannot address all the causes or offer all the solutions. They require partners to work together to tackle the issue.

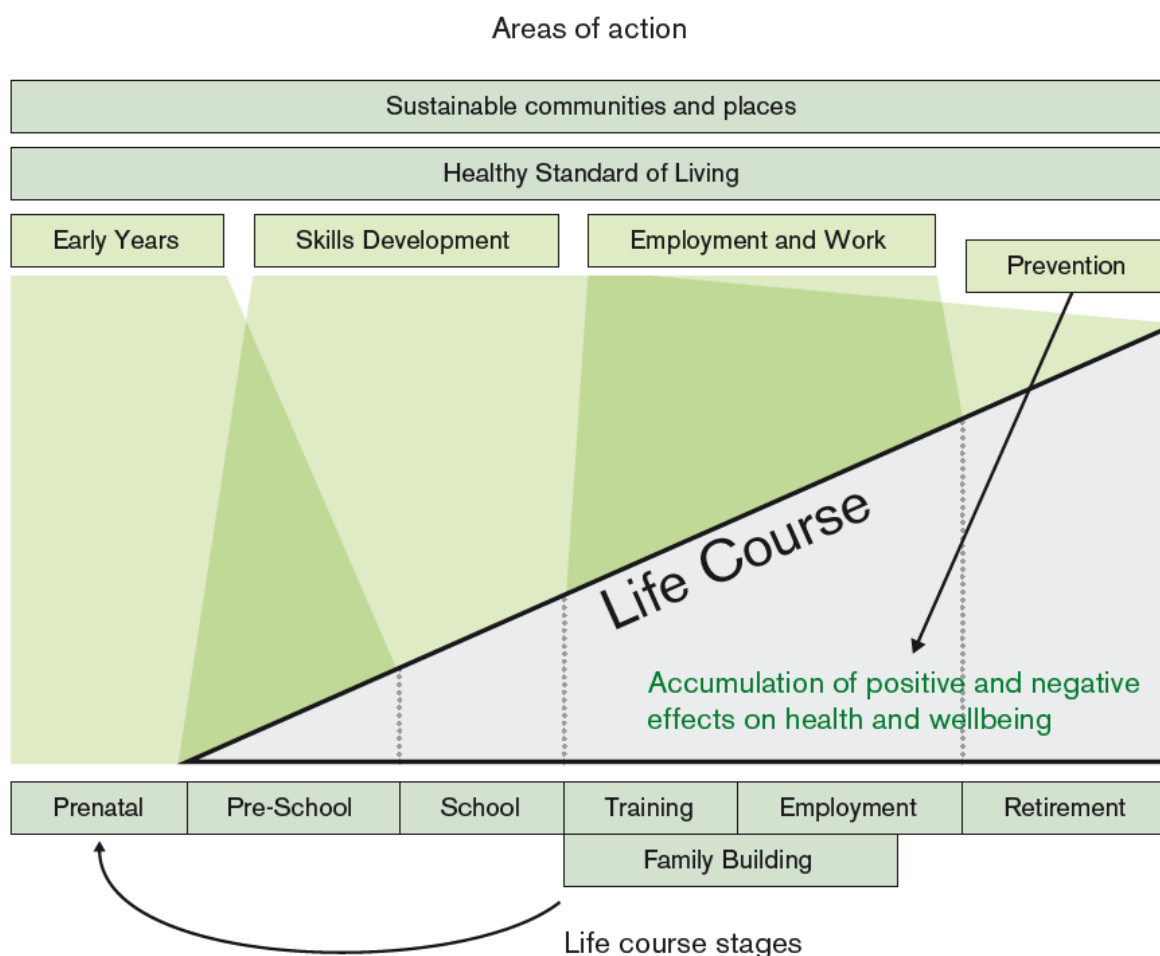
Our strategy illustrates the wide range of individual local needs, such as mental health and emotional wellbeing, smoking or obesity. In practice, we know that people often have multiple needs. Therefore we encourage a person-centred approach to deliver services that tackle the multiple needs of an individual, their families and communities and promote joined up services across our health and wellbeing partners.

3.3. Our Approach

Life Course Model: Health & Wellbeing is important throughout life from cradle to grave. Our strategy uses the Life Course approach to help understand and group the

needs in our communities, as suggested by Marmot [1] see Figure 1. We aim to use these themes, principles and stages more thoroughly in later versions of our strategy.

Figure 1: Life Course Approach and the Effects of Society (Marmot 2010)



Tiered Approach: We have taken a tiered approach to interventions ranging from preventing ill health to end of life care. This allows us to meet a wide variety of need with the appropriate levels of intervention.

Inequalities: We want to tackle inequalities across Nottinghamshire and increase healthy life expectancy for the most unequal in Nottinghamshire.

Equality & Diversity: This strategy is compliant with the Equalities Assessment Act 2010 [2] and works to protect all nine characteristics identified within it and ensure equal access for all.

The 9 characteristics are; Age, Race (includes Nationality and Ethnicity), Pregnancy & Maternity, Gender, Disability, Marriage & Civil Partnership, Sexual Orientation, Religion/Belief and Gender Re-assignment.

Joining up co-dependent strategies and approaches: We recognise that many of the factors described, particularly in the behaviour and wider determinants sections are co-dependent, complement and overlap other strategies such as the Safer Nottinghamshire Board Strategic Assessment and troubled families agenda therefore it is important for the strategic groups to liaise and join wherever appropriate.

3.4. Work Programme

Our Health & Wellbeing Strategy for 2012-13 provides a useful baseline to build further work upon. It forms the start of a longer term work programme that will respond to emerging evidence, and ongoing consultation and engagement to maintain an up-to-date and accurate Health & Wellbeing Strategy for Nottinghamshire.

The needs being highlighted through the JSNA will be considered alongside the strategy and a work programme agreed to develop the strategy and JSNA further. This will identify new and emerging needs and the best action to improve health and wellbeing.

Unless specifically stated, all the sections within the strategy cover the spectrum of the Life Course (all ages) and all 9 protected characteristics for Equality & Diversity (All groups). The work programme & commissioning plans consider identified need from all groups and will specifically aim work at a particular group where inequalities exist.

3.5. Delivery

The Health & Wellbeing Board promotes joint working so that we can identify new ways to bring about added benefits.

There are a range of structures in place to commission local services effectively. By joining these up under the Health & Wellbeing Board structures, we can make sure we avoid duplication, and improve efficiency and collaboration.

Whilst the JSNA and Health & Wellbeing Strategy describe the local needs and high level priorities, strategic commissioning groups bring local partners together to agree specific actions to address each priority area and make sure that they deliver the anticipated benefit.

An overarching action plan will be maintained through our Health & Wellbeing Implementation Group to monitor delivery of the strategy and ensure that the strategy aligns with local commissioning plans.

Joint commissioning is an important delivery mechanism for short term service change within its current scope of work. The associated commissioning priorities will therefore be a subset of the overall objectives included in our Health & Wellbeing Strategy.

3.6. Measuring Success: Outcomes Frameworks

The Overarching Outcome for the Strategy is: To improve health, the length and quality of life for people in Nottinghamshire.

It is important to make sure that real health and wellbeing improvements are delivered through the implementation of this strategy. The best way to achieve this is to use recognised measures to monitor the benefits arising from agreed priority actions.

An 'Outcomes Framework' provides a national template on how measures can be used to monitor different priority areas. There are currently three nationally recognised outcomes frameworks relating to health and wellbeing covering the NHS, adult social care and public health. Further work is planned around Children & Young People and Commissioning of Services.

Each framework includes a variety of individual measures and therefore a small set of core measures or indicators will be agreed that are pertinent to the priority areas included in the Health & Wellbeing Strategy.

The development of this local outcomes framework needs careful attention so that the indicators add value by showing how we are improving services according to local need. Examples of possible indicators are included in sections of this strategy, but further work is being taken forward to agree the local framework for use across health and wellbeing partners.

4. A PICTURE OF NOTTINGHAMSHIRE

Nottinghamshire covers an area of 805 sq miles, with the largest concentration of people found in the Greater Nottingham conurbation (including Nottingham City), the suburbs of which lie mostly outside the city boundary.

The towns of the county are Mansfield (87,500*), Kirkby-in-Ashfield (27,000*) Sutton-in-Ashfield (45,400*), Newark-on-Trent (26,700*), Worksop (43,500*) and Retford (21,700*). About a fifth of the population live in rural areas, mostly in small (under 10,000 population) towns and villages.

Nottinghamshire has an ethnically and culturally diverse population with areas of affluence and deprivation; some of the northern parts of the county are ex-mining communities.

Nottinghamshire has a population of 779,900[†] and a workforce of around 360,000. Overall, slightly more women (50.8%) than men (49.2%) live in Nottinghamshire, with approximately 64% of people aged between 16 and 65 years. People are slightly older, compared to the East Midlands and England averages.

Ashfield, Broxtowe, Mansfield and Rushcliffe have a greater proportion of younger people, whilst Bassetlaw, Gedling and Newark and Sherwood have a high proportion of older people.

The population of the county is projected to grow by almost 24% by 2031, compared to an England growth of just over 19% in the same period. However the number of residents in some areas is growing faster than others. The population of Newark and Sherwood is predicted to grow by 30% by 2031, whilst Gedling shows growth is expected to be less than 17%.

Key Messages

- In 2010 the population of Nottinghamshire was approximately 779,900. Of these approximately 18% were under 16 years and 18.1% over 65 years.
- Population is predicted to grow by 24% by 2031.
- The 25-44 year old population is greater in western part of the county.
- The 45-65 year population is more largely concentrated to the east of the county.
- The average age in Nottinghamshire is above the East Midlands and national averages and is rising as life expectancy continues to increase.
- In the county 19.97% of people identify themselves as having a limiting long term illness.
- 9.8% of people in the county felt that their general health was not good, rising to over 12% in Mansfield.

* Population of the town centres

[†] Mid 2010 estimate.

4.1. Health & Wellbeing in Nottinghamshire: A Summary

The health of people in Nottinghamshire is mixed compared to the England average [3]. Deprivation is lower than average, however 27,080 children live in poverty. There are persistent health inequalities across the county in all areas of health and wellbeing; with some communities disproportionately bearing the burden of ill health and inequity.

Life expectancy: Within Nottinghamshire, overall life expectancy for women is lower than the England average. There is variation across Nottinghamshire, where Life expectancy is 9 years lower for men and 7.7 years lower for women in the most deprived areas of Nottinghamshire than in the least deprived areas[†] See page 9 for further details.

Health & Illness: In the county, 19.97% of people said they had limiting long term illness and in some districts this was as high as 24%. In addition 9.8% of people felt their general health was not good, rising to 12% in Mansfield.

Death Rates: Over the last 10 years, death rates from any cause have fallen. Early death rates from heart disease and stroke have fallen.

Whilst early death rates from cancer have also fallen, levels are still worse than the England average. Road injuries deaths are higher than average.

Unhealthy behaviours/lifestyles: About 17.8% of year 6 children are classified as obese. 55.2% of pupils spend at least 3 hours each week on school sport.

An estimated 20.4% of adults smoke and 20.4% are obese.

Economics, Education & Aspiration: The economic climate also affects the health and wellbeing of the population through, for example, unemployment, homelessness and debt management. Delivery of services is also intrinsically linked to available resources. Therefore, it is important to consider the implications of the financial climate as part of the strategy. Levels of GCSE attainment are worse than the England average.

Carers: Nottinghamshire has a higher proportion of carers in the population than the England average, with highest numbers in the Ashfield area. 83,000 carers identified themselves in the 2011 Census, of which 26,000 provided 20 hours or more regular care. The majority of carers were aged 35 – 59, however there were also 4,700 young carers (aged 5-24yrs average 12yrs) spending 19hours per week caring. A recent BBC survey highlighted that as many as 8% of secondary school children may be carers.

4.2. Health & Wellbeing Inequalities in Nottinghamshire

Health is improving but not at the same rate for everyone. Some health differences are to be expected, for example, older people are more likely to become ill, and so can be expected to consume more health and social care service resources.

However, some groups have a higher presence of disease, worse health outcomes, or worse access to health care that cannot be explained by differences in need. These represent the true meaning of health inequities - unfair and avoidable differences in health that are a consequence of where people are born, grow, live, work and age. Those born into disadvantaged groups are likely to die at a younger age and live more of their lives in ill health than average. The districts of Nottinghamshire have a similar range of general health needs; however the table overleaf outlines the inequalities that exist across the County.

In every area over the last 10 years, all cause mortality rates have fallen. Early death rates from cancer, heart disease and stroke have fallen, however in Bassetlaw, deaths from Cancer are worse than the England average and in Mansfield deaths from stroke are worse than the England average. In Rushcliffe all three are significantly better than the England average.

District & Population size	Life Expectancy (yrs)		% of people living in the fifth most deprived areas in England	Children living in poverty	Yr 6 children classed as Obese	Adults classed as Obese	Smoking		Drug Misuse	Increasing and higher risk drinking	Alcohol related admissions Per 100,000 (Per Year)	GCSE's Achieved (5A*-C inc Eng & Math) at key stage 4
	Male	Female					% age 18+	Deaths per 100,000				
Ashfield 116,000	77.1	80.8	19.8% (22,749)	21.7% (5,510)	18.2%	28.4%	26.1%	235.6	10.8%	23.2%	1,998 (2,778)	49.7%
Bassetlaw 112,000	77.7	81.3	23.7% (26,217)	18.2% (4,300)	20.6%	24.5%	18.7%	230.8	14.1%	18.9%	1,990 (2,721)	45.1%
Broxtowe 112,000	79.1	82.7	2.7% (2,994)	14.1% (2,935)	17.7%	22.3%	16.7%	202.8	6.6%	23.3%	1,352 (1,899)	51.7%
Gedling 113,000	79	82.3	2% (2,286)	15% (3,420)	16.9%	23.9%	19%	210	5.2%	25%	1,557 (2,240)	48.7%
Mansfield 100,000	76.5	80.6	41% (40,839)	22.7% (5,045)	21.5%	25.6%	31.5%	269.8	18.3%	24.3%	2,248 (2,699)	44%
Newark & Sherwood 113,000	77.6	82.1	11.9% (13,110)	16.9% (4,085)	15.7%	24.1%	19.3%	203	7.8%	26.7%	1,772 (2,525)	48.2%
Rushcliffe 112,000	80.5	83.6	0%	7.9% (1,780)	14.3%	19.4%	12.3%	166.5	3.7%	26.7%	1,242 (1,735)	67.5%

Red text = Significantly worse than the National Average

Green text = Significantly better than the national average

Black Text = Not significantly different from the England Average

Data sources in [4-10]

Further Information is available from:

The Nottinghamshire County Joint Strategic Needs assessment available at:

<http://www.nottinghamshire.gov.uk/home/youandyourcommunity/factsaboutnotts.htm>

Public Health Observatory health profiles available at:

http://www.apho.org.uk/default.aspx?QN=P_HEALTH_PROFILES

4.3. Carers

Carers play a vital role in addressing many individual priority areas within the Health & Wellbeing strategy. Nottinghamshire has a higher proportion of carers in the population than the England average, with highest numbers in the Ashfield area. 83,000 carers identified themselves in the 2011 Census, of which approximately 26,000 provided 20 hours or more of regular care. Most carers were aged between 35 and 59, however, there are also over 4,700 young carers in the 5-24 age range with an average age of 12yrs, spending 19 hours a week caring.

Recent research by the University of Nottingham 2010, indicated that 8% of secondary school children could be a young carer. The strategy will ensure that the needs of young and adult carers are properly addressed within the delivery of specific actions.

Throughout the strategy, we aim to improve the quality of life for carers and ensure their needs are met as well as those for whom they care.

John's Story

John's dad Peter had a stroke which left him with a left sided weakness, difficulties with walking and seizures, the family live in Broxtowe.

John is 18 and provides his dad with support when his wife Lucy is at work. John has a small car and takes his Father out when he is not working. He is also supporting his Father with preparing simple meals for himself and to get to football matches.

John was finding it difficult to maintain the cost of running his car as it is used both for work and to take his father out to appointments. He said that he would like to have a moped for getting to and from work to reduce costs and is clear that he still wants to support his dad by taking him out in the car when he wants and also helping with shopping etc.

So Adult Social Care set up a direct payment for John (the young adult carer) to attend a motorbike training course at a cost of £150.

5. PREVENTION: BEHAVIOUR CHANGE & SOCIAL ATTITUDES

The majority of diseases that are common in today's society are preventable, such as Type 2 diabetes, Chronic Obstructive Pulmonary Disease (COPD), Cancer, Stroke and Heart attacks.

Many factors relating to health and wellbeing depend on an individual's beliefs and personal actions. 42.7% of cancers in the UK in 2010 (45.3% in men, 40.1% in women) were attributed to 14 modifiable lifestyle factors [11]. A behavioural approach concentrates on attitudes and how these can positively and negatively affect a person's health. It can be argued that without changes to healthy behaviours then other areas of work will fail to deliver real and sustainable improvements to health and wellbeing.

5.1. Smoking and tobacco control

Why this matters: Nationally, smoking is one of the leading causes of preventable deaths, resulting in 81,400 deaths every year.

The difference in life expectancy across the county is approximately 9 years, half of this difference is due to smoking.

Adults: Smoking is also a major cause of health inequalities.

- Smoking is responsible for 1,300 deaths across Nottinghamshire County every year
- Within Nottinghamshire County, 20.4% of people smoke, compared to a national average of 21.2%. However, this figure masks the locality differences across the county. People from poorer backgrounds are more likely to smoke, with 19.9% of the population of Rushcliffe smoking whilst 26.7% of the population of Mansfield are smokers.

Smoking during pregnancy can cause serious pregnancy-related health problems including complications during labour, an increased risk of miscarriage and premature birth. Smoking prevalence is particularly high among pregnant women under the age of 20.

In 2009/10, 15.7% of women who gave birth in Nottinghamshire reported that they smoked at the time of delivery. This is higher than the national average of 14.1%.

Each year in Nottinghamshire County, smoking costs society approximately £204.4m, including an estimated £60.9 million lost from early deaths, £37.1m from smoking related sick days and £41.3m estimated cost of lost productivity from smoking breaks.

Children & Young People: Reliable local smoking prevalence data for children and young people is not available, however we know that 90% of people start smoking before the age of 19 and children are three times more likely to start smoking if their parents smoke.

The number of children taking up smoking has halved in the last decade, however continued marketing and peer pressure means that the uptake in smoking in young people continues to be an important priority for health and wellbeing.

Nottinghamshire based projects show smoking prevalence increases as children and young people get older, most markedly at around the age of 14 years. Among young people, more girls smoke than boys. More reliable local smoking prevalence data for children and young people is required to ensure effective resources are targeted to this group.

Secondhand smoke: Evidence suggests that Government legislation has contributed to a reduction in Secondhand Smoke and reductions in hospital admissions of unstable angina and heart attacks.

- In the UK, an estimated 23 children and 4,000 adults die each year due to Secondhand Smoke

- Nationally, about two million children currently live in a household where they are exposed to cigarette smoke

To protect people from secondhand smoke it is important to support and empower local people to take action in response to the government's campaign aimed at helping people make their homes and cars smokefree.

A fuller analysis of health need in relation to smoking is included in the JSNA.

The Goals

Although the number of deaths from smoking is declining, rates remain much higher in certain groups and areas. Reducing the prevalence of smoking in disadvantaged groups and areas is one of the fastest ways to increase life expectancy and to reduce smoking-related ill health.

To achieve the goals stipulated in the Healthy Lives, Healthy People: a Tobacco Control Plan for England [12] National ambitions have been set:

- To reduce adult (aged 18 or over) smoking prevalence in England to 18.5 per cent or less by the end of 2015 (from 21.2 per cent), meaning around 210,000 fewer smokers a year.
- To reduce rates of regular smoking among 15 year olds in England to 12 per cent or less (from 15 per cent) by the end of 2015.
- To reduce rates of smoking throughout pregnancy to 11 per cent or less (from 14 per cent) by the end of 2015 (measured at time of giving birth).

Examples of Potential Outcome Measures

- Smoking Status at time of delivery (pregnancy)
- Smoking Prevalence 15 years olds
- Smoking Prevalence over 18's
- Mortality from Respiratory Disease
- Mortality from Cancer

5.2. Healthy Weight, Healthy Life: Obesity

Why this matters: Obesity is a major public health problem. Unhealthy diets combined with physical inactivity have contributed to an increase in obesity in England and almost a quarter of adults and almost a sixth of children under the age of 11 are obese. It is predicted that by 2050, 60% of adult men, 50% of adult women and 25% of children may be obese if current trends continue.

Adults: Obesity is known to lead to both chronic and severe medical problems. The health risks for adults can be severe. Compared with a healthy man, an obese man is:

- Five times more likely to develop type 2 diabetes
- Three times more likely to develop colon cancer
- More than two and a half times more likely to develop high blood pressure - a major risk factor for heart disease and stroke.

Obesity is responsible for an estimated 9,000 premature deaths per year in England (National Audit Office, 2001) and has major consequences for morbidity, disability and quality of life.

Compared with a healthy weight woman, an obese woman is:

- Almost thirteen times more likely to develop type 2 diabetes
- More than four times more likely to develop high blood pressure
- More than three times more likely to have a heart attack.

Added to this, obesity highlights significant health inequalities, with people from more disadvantaged groups being most at risk.

Children & Young People: Childhood obesity is also a growing problem. In Reception year, over one in five children in Nottinghamshire are either overweight or obese. By Year 6, the rate is almost one in three, which is similar to the national figure.

Locally, in year 6 children, the prevalence of obesity is significantly higher in boys than girls (19.6% and 15.5% respectively). Nationally, 20% of boys and 16.5% of girls are obese at this age.

Physical Activity: 21% of Nottinghamshire young people aged 11-18 years say they never play sport or do any physical activity. In Ashfield, this figure is 33%, the highest in the County (source: Tellus 4 Survey).

11.7% of adults in the County are physically active, 55.2% of children in the County are Physically active.

Maintaining a physically active lifestyle into older age has been shown to increase stability (reduce the likelihood of falls), decrease social isolation and increase quality of life.

Diet & Nutrition: Just over 1 in 5, (22%) of local children and young people eat five or more portions of fruit and vegetables a day. This is above similar neighbouring areas (18%) and the national average (19%) (source: Tellus 4 Survey).

28% of adults in the county are considered to be eating healthily, just over 1 in 4.

Diet and nutrition play an important part of a person's wellbeing as they age; helping to maintain a healthy immune system, reduce falls and frailty, maintain healthy bones for longer and reduce the likelihood of admission to hospital for some individuals.

A fuller analysis of health need in relation to obesity is included in the JSNA.

The Goals:

- To achieve a sustained downward trend in the level of excess weight in children by 2020
- To achieve a downward trend in the level of excess weight averaged across all adults by 2020 [13].

Examples of Potential Outcome Measures

- Excess weight in 4-5 and 10-11year olds
- Initiation of Breast feeding & Prevalence at 6-8weeks of age.

5.3. Substance Misuse: Alcohol & Drugs

The term 'Substance Misuse' is used to refer to alcohol and/or drug[†] problems.

Why this matters: People who misuse substances can develop a range of health and social problems. These can be physical health problems, e.g. cancer, liver disease, and for those who inject drugs there is a risk of Blood Borne Viruses (BBV) such as hepatitis B and C. Aside from physical health issues there may be mental health problems too e.g. depression, anxiety, paranoia, suicidal thoughts.

As a direct result of substance misuse, individuals may also struggle to retain employment and suitable accommodation. However, the impact of substance misuse often goes beyond the misuser themselves, and is implicated in relationship breakdown,

[†] The term 'drugs' extends beyond illegal drugs such as heroin, cocaine, amphetamines, to the misuse of other drugs, prescription only medicines (POM) such as anabolic steroids and benzodiazepines, over the counter medicines (OTC) such as preparations containing codeine.

domestic violence and poor parenting, including child neglect and abuse and wider societal problems.

Adults: At a County level the impact of substance misuse on the population is very similar to the national average. However, this masks the differences or inequalities at a district level.

There is an increasing problem associated, in particular, with alcohol use across the county. Individuals drinking alcohol at hazardous levels will have a relatively higher risk of physical health problems and alcohol is implicated in 8,724 deaths per year.

The most deprived fifth of the population suffer three to five times greater mortality due to alcohol specific causes; and two to five times more admissions to hospital because of alcohol than affluent areas.

Children and Young People: National evidence suggests that there are some groups of children or young people that are more likely to be at higher risk of problematic substance misuse. In addition, children of parents with alcohol dependence are four times more likely to develop alcohol dependency. People can also learn from families and peer groups through a process of modelling pattern of drinking and beliefs about the effects of alcohol.

Substance misuse needs in children and young people continue to be mixed. Overall substance misuse has increased, with Nottinghamshire slightly higher (10.3%) than the national average of 9.8% in 2008/09.

Increases have been seen in alcohol referrals but decreases seen in hospital admissions, although trends show that more females under the age of 18 are admitted for an alcohol related condition than males.

It is estimated that up to 4,266 children and young people are affected by parents' illicit drug use and between 13,271 and 21,565 are affected by parental problematic alcohol use.

A fuller analysis of health need in relation to substance misuse is included in the JSNA.

The Goals:

- To change knowledge, skills and attitudes towards substance misuse to prevent problematic use
- To identify and support the needs of the individual, children, young people and parents in relation to substance misuse by intervening earlier
- To meet the treatment and recovery needs of the individual by commissioning evidence based and needs led services
- To create safer communities by utilising the full range of tools and powers

Examples of Potential Outcome Measures

- Alcohol Related Admissions to Hospital
- Mortality from Liver Disease
- Successful completion of drug treatment.

Illustration: Promoting behaviour change in the workplace

People can spend up to a third of their time in work; it is therefore important that work places enable employees to make healthy lifestyle decisions through the provision of accurate information, active engagement and providing opportunities for healthy activity through embedding healthy attitudes in all aspects of the organisation.

NHS Bassetlaw and local partner organisations launched the wellbeing at work: Workplace health award scheme. The scheme has 6 key themes at 3 different attainment levels, Bronze, Silver and Gold.

The key programme themes are: Smoking, Mental Health and Emotional Wellbeing, Healthy Eating, Physical Activity, Alcohol and substance Misuse, Safety at Work; cancer awareness has also been added as a key component of the award.

There are currently 14 organisations/businesses signed up to the scheme and working towards either Bronze, Silver or Gold Award.

As part of the Award Scheme we train individuals to Become Health Champions we have currently trained 45 individuals as part of the scheme to Royal Society of Public Health (RSPH) level 2, and brief intervention/signposting training.

Marie Allot; workplace health co-ordinator at Eaton GmbH International Ltd Said;

"Eaton have been working alongside Bassetlaw NHS to promote the Wellbeing at Work scheme over the last 3 years. Since we started the scheme in 2009 we have noticed increases, not only in attendance figures but also employee participation and engagement.

We have had one employee stop smoking and who is now the champion for smoking cessation and actively encouraging others to do the same. We've had some really fantastic achievements, through smoking cessation, healthy eating and weight loss and stress management which we hope will continue.

Although we've still got a lot of work ahead of us in terms of continuing to promote wellness, we have had some excellent results and strive to achieve even more over the years to come."

6. CHILDREN, YOUNG PEOPLE & FAMILIES

Health and wellbeing is as crucial for children and young people as in adulthood. Early intervention at a young age is understood to have a strong influence on health and wellbeing outcomes in later life, for example around issues such as smoking and obesity. Transitional issues are also important to capture, as young people can become vulnerable when making the transition into adulthood and adult services.

Nottinghamshire Children's Trust, a countywide strategic partnership of key children's services organisations, secures and commissions services to children, young people and families in Nottinghamshire. The Children's Trust drives the planning and delivery of joint working and cooperative arrangements for children's services in Nottinghamshire

Evidence suggests that children, young people and their families are more likely to do well if they are at the centre of our economic, environmental and social ambitions for Nottinghamshire. To promote this, the Children's Trust reports to the Nottinghamshire Health and Wellbeing Board. By reporting to the Board, the Children's Trust ensures that the needs of children, young people and families influence planning for health and wellbeing improvements across all of Nottinghamshire's public services

The Nottinghamshire Children, Young People and Families Plan for 2011-14 sets out the Children's Trust's agreed current priorities, and summarises the main activities being undertaken to improve the lives of children and young people. It is reviewed and updated annually.

The Children's Trust ambition is that; children, young people and their families will receive the most appropriate support to meet their needs at the earliest opportunity in order to ensure better outcomes and the cost effective delivery of services. Our Health & Wellbeing Strategy aims to bring together priorities from partners and decide on early actions where joint work will improve health and wellbeing. The work of the Nottinghamshire Children's Trust, expressed through the Nottinghamshire Children, Young People and Families plan, sets the priorities for health & wellbeing activity for children and young people.

Priorities Include:

- developing early intervention and prevention approaches
- continuing improvement in safeguarding provision
- improving services for disabled children
- addressing and reducing child poverty
- raising achievement and addressing inequalities improving emotional wellbeing.

As one of the core health and wellbeing priorities in the Children, Young People and Families Plan, improving services for disabled children is included as an illustration of local need and joint action.

6.1. Improving the effectiveness of services for disabled children through joint planning and commissioning

Why this matters: The prevalence of severe disability amongst children and young people is increasing because of higher survival rates of children and babies with some complex problems. Even if disability prevalence remains constant, the number of children with disabilities will continue to increase as the population of children and young people is forecast to grow.

A review of disabled children's services, commissioned by Nottinghamshire County Council in 2010, recommended the development of a joint approach to strategic

planning and commissioning. The Children's Trust has taken action in response to this recommendation. A needs assessments is being developed to determine the current level of need associate with disability.

Disabled children and young people have many of the 'universal needs' of their non-disabled peers, including advice on healthy eating, support to remain emotionally healthy and access to contraception and sexual health information and services. In addition to this group, there are many more children and young people who have additional learning needs that can affect how they are able to access universal services such as GPs, health visitors and school nurses.

Substantial inequalities persist between disabled children and young people and their peers. Local data suggests that disabled children and young people are more likely to self exclude and be excluded from school although the reasons for this are contested. Thus it may be challenging for these children and young people to access support through health services that are primarily delivered through schools.

Transition to adult services can also be particularly challenging for these children and young people.

Some of this group of children and young people require daily support as their health is dependent on interventions such as special feeding requirements, breathing support and regular complex treatments. Most of this support is provided on a daily basis by parents/carers and, for many, caring responsibilities place pressure on relationships and wider family life.

A fuller analysis of health need in relation to disability is included in the JSNA.

The Goal: Through partnership, we aim to drive improvements in services for children and young people with disabilities and their families, which are focussed on need, outcome driven and make the best use of resources.

The Joint Commissioning Strategy for children with disabilities and/or Special Educational Needs identifies the following priorities:

- To develop multi-agency approaches to improve outcomes
- To improve education outcomes
- To improve health outcomes
- To improve outcomes for children and their families.

6.2. Additional Priority Areas

Each priority area within our strategy takes a life course view, therefore the needs of children and young people are given equal weight as part of the overarching Health & Wellbeing Strategy.

Improving children and young people's emotional wellbeing is a key priority within the children, young peoples and families plan and is covered alongside adult issues within the Prevention section of the strategy. Likewise, reducing the achievement gap and raising levels of achievement in 16-19 year olds is included as a well established wider determinant of health.

A further key priority is ensuring that at least 95% of children complete their full immunisation schedule to achieve herd immunity in the population. In addition to providing protection to those children who have been immunised, establishing herd immunity also protects those children who for clinical reasons cannot be vaccinated.

The Nottinghamshire Children, Young People and Families Plan for 2011-2014 can be viewed at: <http://www.nottinghamshire.gov.uk/cypfplanv101oct11.pdf>

See also the following sections: Mental Health & Emotional Wellbeing, Obesity, Smoking, Substance Misuse, Education / personal attainment & aspirations, Crime and safety

Melissa's Story

Melissa is eighteen years old and a single mother living in Mansfield. Her son is two. Melissa has had a difficult start in life. She had Social Care involvement and spent periods of time in local authority care for some of her teenage years, she wasn't successful at school and lacked confidence.

When her son, Connor was born, Children's Social Care offered her the support she needed as she had no support from her family. Melissa lacked confidence, and was afraid of people's reactions/judgements when they realised how young she was, as a result she wanted to stay inside and not meet anyone.

"When I gave birth I just didn't feel able to go out," says Melissa. "I had depression and didn't want to see anyone for most of the time. I was under the Social Services and they encouraged me to get out and meet people.

Melissa's Support Worker suggested she visit a local Children's Centre and when she walked into the Children's Centre, she knew it was the right one for her.

"I was scared when I walked through the door," she explains. "I didn't really want to meet people I'd never met before, because it had always been a bit of a disaster. But as soon as I got there, they asked my baby's name and gave me a cup of tea. Rather than feel like an outcast, as I'd done in the past, I felt welcomed and encouraged."

"I spoke to lots of people there and it was great to meet other young mums," she explains.

Melissa and her son attend Parentzone – a drop in group for young parents and parents to be, providing support around training, benefits advice, debt management, housing support, budgeting, employment opportunities and being a place to play with the children and chill out with friends.

Melissa has just completed level 1 in English and Maths which she's very proud of. "My school life was a bit of a waste of time as I'd not got any qualifications and couldn't read or write," she says. "I am hoping to do some more courses. It was quite hard work as you can imagine, but I am trying hard to learn what I missed out on when I was at school."

"I want to do a course in Childcare so I can help other young mums who have children," she continues. "I feel I might be very well placed to help them as I've been through so much myself: My family are scattered all over the place and I don't really see any of them much anymore."

7. ADULT AND HEALTH INEQUALITY PRIORITIES

People may need care and support for many reasons. This can be because of their age, disability, health or the personal situation they find themselves in. The level of need may also vary throughout their life, dependent on their circumstances.

Furthermore, health inequalities across the population result in a wide range of varying needs and work across health, local government and society is needed to address these different health and wellbeing issues.

The increasing burden of ill health on health & social care is a growing concern nationally. Many people, including those with complex needs, are now living longer. This increases the long term need for care and numbers of people needing care. The national picture indicates that more children and young people with profound disabilities and long-term conditions are living longer and surviving into adulthood. Therefore, in addition to an ageing general population, the longer term needs of this group are growing and require attention.

Increased life expectancy also means that that age of carers is increasing. This can limit their ability to maintain the carer role, leading to a greater need for support. There are also challenges around other interconnected needs such as people with a learning disability developing dementia.

A much greater focus of services for adults is to manage health and wellbeing issues, such as managing the long term conditions of respiratory and heart disease. However, early intervention and prevention is also important to reduce risk factors, prevent further ill health and promote independence. More personalised ways of working are now emphasising the importance of people having increased choice and control over their care and support, to maximise their independence and quality of life.

Our Health & Wellbeing Strategy aims to bring together priorities from partners and decide on early actions where joint work will improve health and wellbeing. Bringing together the work on joint commissioning, the following common priorities have been highlighted for joint work through the Health & Wellbeing Strategy.

7.1. Learning Disability

Why this matters: Learning disability is a life-long condition that occurs as a result of genetic or developmental factors or damage to the brain, often at birth. They affect a person's level of intellectual functioning – usually permanently – and sometimes their physical development too. Approximately 2% of the population of England has a Learning Disability which is just under 800,000. The prevalence of severe learning disability is higher in males than females (1.2 males: 1 female) and this gap increases people with mild learning disabilities 1.6 males to 1 female.

National figures show an expected increase in people with Learning Disabilities by approximately 14% between 2011 and 2030. This increase is expected to be concentrated in the older age range with 48% growth in people with learning disabilities aged over 65. Although an estimated 25% of people with learning disability live in their own home (which is above the national average,) 26% live in residential care (below national averages) and only 10% are in supported employment (the same as national averages.)

It is estimated that there were 247 people with profound and multiple learning disabilities (PMLD) within Nottinghamshire in 2011. This figure is expected to increase by approximately 32% by 2026 giving a future estimate of 326 people with PMLD throughout the county in the next 15 years. Whilst there have been improvements in access to housing, health, employment and personal budgets there remains much to be done regarding equal access to services.

Goal: To ensure equal access to services for individuals with learning disabilities; to narrow the inequalities gap and to meet the rising demand as this population lives longer and prevalence grows.

Examples of Potential Outcome Measures

- Proportion of people with mental illness and/or disability in settled accommodation.

7.2. Autistic Spectrum Disorders

Why this matters: Autistic Spectrum Disorders, often referred to as 'autism' is a lifelong developmental disability that affects how a person communicates with and relates to other people, as well how they make sense of the world around them. Although not high in numbers, finding the right types of support for individuals is often expensive and can be difficult to provide locally.

National prevalence estimates indicate 1% of the general population is on the autistic spectrum. This is a means of quantifying the severity of autism people experience; therefore this includes all degrees of severity. Many low and medium level issues may not be identified, although they may potentially affect the ability to live independently. In recognition of this the 2009 Autism Act and 2010 Strategy placed a duty on health and local government to increase awareness, develop diagnosis pathways and improve support in this area.

Goal: All individuals with autism are able to live fulfilling and rewarding lives within a society that accepts and understands them. They can get a diagnosis and access support if they need it, and they can depend on mainstream public services to treat them fairly as individuals, helping them make the most of their talents.

See also: Learning disabilities and Physical disability and Sensory Impairment

7.3. Physical Disability, Long Term Conditions and Sensory Impairment

Why this matters: Physical disability covers a wide range of conditions causing physical disability to the individual, for example, stroke, dementia or long term conditions.

22.7% of the working age population in Nottinghamshire is disabled (East Midlands 21.8% and nationally 20%).

There are over 4,600 people in the county registered as blind or partially sighted and over 1,100 registered as deaf or hearing impaired.

People with physical disability are one of the main service user groups of adult social care and health. Physical disability is also implicated in many referrals of adult safeguarding services.

7.5% (35,000 people) of the population in Nottinghamshire are in receipt of welfare payments in the form of Incapacity Benefit and Severe Disability Allowance. One third of these claims (11,300) are for mental health / behavioural disorders, which equates to 2.6% of the working age population.

There are currently an estimated 10 million people in the UK (around 1 in 6 people) with neurological conditions, with an estimated 24,421 to 32,595 people living in Nottinghamshire.

Goal: To improve the quality of life for individuals with physical or sensory impairment or disability, increasing their opportunity to contribute to and take part in wider society and community.

Long Term Conditions: There are a range of long term conditions. The most common ones include diabetes (including diabetes-related sight loss), cardiovascular disease (hypertension, stroke, heart failure) respiratory disease (asthma, COPD), common mental health disorders, chronic kidney disease and chronic back pain. At any one time in the UK, as many as 17.5 million adults may be living with a long-term condition (LTC) such as these.

Older people are more likely to have a long term condition, with almost three-quarters of people aged over 75 suffering from one or more longstanding illnesses. However, even among 16- to 24-year-olds, one in four will be living with a long-term condition.

Along with cancer, the main causes of death are cardiovascular disease and respiratory disease. Together, these conditions cause 65% of deaths. The occurrence of these conditions explains two thirds of the gap in life expectancy in different areas of Nottinghamshire. Smoking significantly contributes to all three main causes of death and explains 50% of the difference in life expectancy across the county.

Living with a long-term condition, exposes an individual to a range of problems. These range from the physical symptoms of the illness, medicines and their side effects, psychological problems and wider problems, such as financial insecurity through an inability to work. All these factors can contribute to a reduced quality of life and sometimes a sense of social exclusion, which illustrates the important contribution to health and wellbeing. Long-term condition also cannot be seen in isolation as many behavioural aspects have an important role to play in preventing and managing these conditions.

Whilst much attention has been given to preventing and managing long term conditions, this area still represents an ongoing significant need within Nottinghamshire. Without further work, improvements in life expectancy will be unattainable.

In general the prevalence in Nottinghamshire of many long-term conditions is similar to the national average. Most long-term conditions are more prevalent in more deprived communities.

Comparisons of prevalence and those diagnosed/treated show a number of conditions where there is unmet need: These include dementia, hypertension, COPD and diabetes.

Goals:

- To achieve the 11 quality standards in the long-term condition National Service Framework of 2005 by 2015.
- To reduce early mortality and improve quality of life for individuals with Long Term Conditions.

A fuller analysis of health need in relation to long-term conditions is included in the JSNA.

Examples of Potential Outcome Measures

- Preventable Sight loss
- Employment for those with long term health condition including those with learning difficulty/disability or Mental illness
- Proportion of people using social care who receive self-directed support, and those receiving direct payments
- Mortality from all cardiovascular diseases (including heart disease and stroke)
- Mortality from respiratory disease
- Recorded diabetes
- Preventable sight loss
- Take up of the NHS Health Check programme – by those eligible.

7.4. Mental Health & Emotional Wellbeing

Why this matters: Mental ill health is widespread; at least one in four people will experience a mental health problem at some point in their life, and at any one time 1 in 6 of the adult population in England will be experiencing a mental health problem.

Good mental health is central to an individual's quality of life and economic success. In addition, having a mental health problem increases the risk of physical ill health. For example, depression is associated with a four-fold increase in the risk of heart disease, and people with long term physical health conditions, such as diabetes, are 3 to 4 times more likely to experience mental illness than the rest of the population.

Adults: Occurrence of mental ill health varies considerably across Nottinghamshire and reflects much of the variation in socio-economic conditions within the county, with higher rates of mental illness seen in the most deprived areas.

At any one time common mental illnesses, such as depression and anxiety, are experienced by over 86,000 people across Nottinghamshire, equating to over 13% of the adult population. This ranges from 11.5% in Rushcliffe to over 15.5% in Mansfield.

Severe and enduring mental illness has a significant impact on the physical health of those affected as well as high service and societal costs.

Emotional wellbeing is essential to enable people to do well in life, and is important across all stages of life. Emotionally resilient individuals are able to build and maintain better relationships with family and friends providing an essential skill in personal achievement and better health and wellbeing.

Children & Young People: There is evidence that the emotional health and wellbeing of children and young people has deteriorated significantly over the past 25 years. Research shows that risk factors affecting emotional health include physical illness or disability, family circumstances, socio-economic issues (such as poverty) and traumatic life events. Issues related to socio-economic deprivation across the county result in clearly differentiated levels of need and prevalence of emotional and mental health problems, with more deprived areas generally having higher risk factors such as unemployment and substance misuse.

A fuller analysis of health need in relation to mental health and emotional wellbeing is included in the JSNA.

The Goals:

In 2011, the Coalition Government published No Health Without Mental Health [14], a cross government mental health outcomes strategy. The aims of the strategy are to achieve "parity of esteem between mental and physical health services" in England and for mental health to be "everyone's business". The national strategy highlights the interconnections between mental health, housing, employment and the criminal justice system and is built around six objectives.

- More people will have good mental health
- More people with mental health problems will recover
- More people with mental health problems will have good physical health
- More people will have a positive experience of care and support
- Fewer people will suffer avoidable harm
- Fewer people will experience stigma and discrimination.

There are three aspects to reducing mental health inequality:

- Tackling the inequalities that lead to poor mental health
- Tackling the inequalities that results from poor mental health
- Tackling the inequalities in service provision – access, experience and outcomes.

Examples of Potential Outcome Measures

- People with Mental illness and/or learning disability in settled accommodation
- Emotional wellbeing of looked after children
- Hospital admissions as a result of self harm

- Self reported wellbeing
- Suicide rates.

7.5. Dementia

Why this matters: Dementia is one of the main causes of disability in later life and the number of people with dementia is rising yearly as the population ages.

The East Midlands, along with the South West, faces the most significant challenge in England. The prevalence of dementia is set to rise across Nottinghamshire. It is projected that by 2030, there will be up to 16,000 adults over the age of 65 with a diagnosis of dementia in Nottinghamshire and nearly 3,000 in Bassetlaw. This represents a 106% increase between 2010 and 2030.

Direct costs to the NHS and social care will treble by 2030. The number of people with dementia is expected to rise particularly quickly in some (Black and Minority Ethnic) BME groups as first generation migrants from the 1950s and 1970s begin to age.

A fuller analysis of health need in relation to dementia is included in the JSNA.

Goal: Improvement in quality of life and quality of care for people with dementia by raising awareness and understanding, increasing early diagnosis and support and enabling more people to live well with dementia.

Examples of Potential Outcome Measures

- Numbers of people on GP Dementia QOF (Quality & Outcomes Framework) registers compared with expected number

Ethel's story

Ethel is 70 yrs old and lives in Ashfield District; she lives alone and has been suffering with Memory loss and has been having difficulty carrying out activities of daily living e.g. eating & drinking this leading to urine infection, resulting in confusion – a common result of UTI, her daughter lives 14 miles away in Gedling.

As a result Ethel is admitted to hospital, she has a prolonged convalescence in the local community hospital and is finally discharged into residential care.

Alternative version to Ethel's story

Her Alzheimer's disease is diagnosed early. This is done through:

- Raised GPs' awareness by revising & issuing new GP referral guidelines
- GPs and the specialist services meeting to agree a new service model for Memory Assessment Service

This means that Ethel and her family now have access to information and support through

- Information Prescriptions which is on line, local information which her family can access (www.nottsinfoscript.org.)
- Alzheimer's Society Dementia Advice & Support Service which she found out about at the memory clinic.

Ethel is offered and takes medication which will delay the progress of dementia. She is also provided with a medication prompting aid and her family are aware of need to remind her. The urine infection is treated in the community and Ethel remains in her own home for several more years.

7.6. Older People

Why this matters: Improvements in life expectancy mean that more people now live longer. Therefore, enabling people to have a healthy old age and improving support for older people is a priority for all agencies due to the predicted increase in the population aged over 65, and especially that over 75 years.

As the population ages, there is an increase in health and wellbeing needs in this age group. As a result, action is required to address these needs within a sustainable approach to reach growing numbers of older people.

Key actions include prevention, support, crisis management and reablement to offer individuals assistance to manage their own health and wellbeing issues, help them regain independence, for example following a period of ill-health, and help them achieve dignity and choice for care at the end of life.

Key aims for both health and social care are implementing the Ageing Well initiative locally. Ageing Well is designed to:

- promote wellbeing in later life
- help people to maintain their independence in their own homes as long as possible
- help local authorities to use their resources effectively
- engage older people in civic life
- tackle social isolation by recognising older people's potential.

Taking a life course approach, the needs of older people are considered alongside adult needs within commissioning plans and strategies.

Specific goals will be incorporated into these separate areas, although the overarching goal is defined as follows:

Goal: To improve the quality of life and quality of care for older people, ensuring appropriate access to services closer to home to improve health & wellbeing and maintain independence.

A fuller analysis of health need in relation to older people is included in the JSNA.

Examples of Potential Outcome Measures

- Falls and injuries in the over 65's
- Excess winter deaths
- Deaths in usual place of residence.

8. THE WIDER DETERMINANTS OF HEALTH & WELLBEING

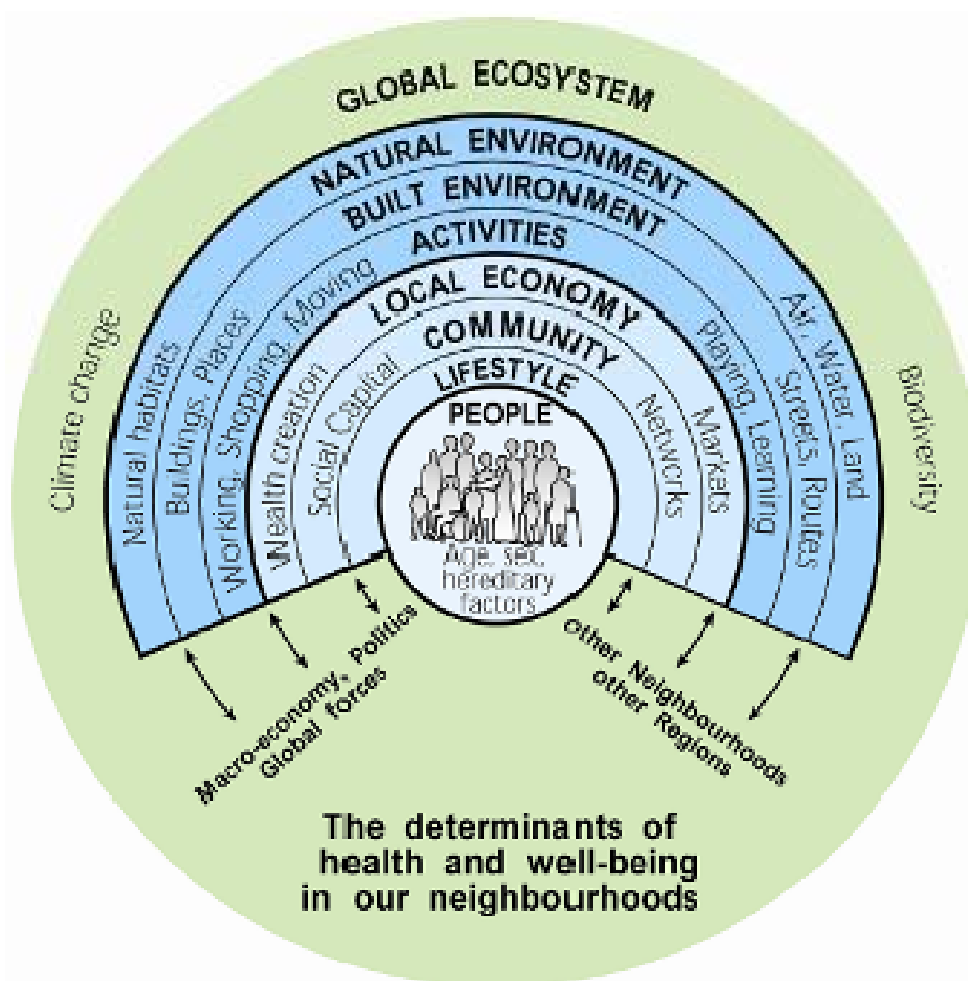
The wider determinants of health have been described as ‘the causes of the causes’. They are the social, economic and environmental conditions that influence the health and wellbeing of individuals and populations.

The World Health Organization (WHO) describes the social determinants of health as:

“the conditions in which people are born, grow, live, work and age”. It goes on to state that these conditions or circumstances are shaped by the distribution of money, power and resources at global, national and local levels. These are themselves influenced by policy choices. It makes clear the link between the social determinants of health and health inequalities, defined as “the unfair and avoidable differences in health status seen within and between countries”.

The wider determinants dictate the extent to which a person has the right physical, social and personal resources to achieve their goals, meet needs and deal with changes to their circumstances.

Figure 2: Diagrammatic illustration of the wider determinants of health



Wider determinants of health can have a major impact on health and wellbeing and therefore this strategy aims to bring together priorities from partners and decide on early actions where joint work will improve health and wellbeing. Bringing together the work across agencies recognises the role of local government and wider stakeholders in improving health and wellbeing outcomes.

8.1. Education, Personal Attainment & Aspirations

Why this matters: Educational attainment gives people better prospects for securing employment or undertaking further education. This in itself improves wellbeing, through achieving personal attainment and personal aspirations. The societal benefits also include contributions to the community and the economy.

In Nottinghamshire, although educational attainment is improving each year, inequalities exist in education and personal attainment, with vulnerable groups and people from more deprived backgrounds performing worse than their peers. There are adults and young people in the county with literacy, language and numeracy needs that prevent them from getting jobs, progressing at work, helping their children learn and being active in their local communities.

A child who is healthy, safe and supported is more likely to learn and thrive. Educational achievement is the key to success in later life, it allows young people to make informed choices about healthy living and is associated with better adult health.

In some Nottinghamshire communities, aspiration levels are very low amongst young people and their families and, as a consequence, too many young people under-achieve, which impacts on their progression after statutory education is complete. Those young people, who have had poor experiences of learning in statutory education and/or come from communities where learning has not been a high priority, are less likely to consider learning as an option when they leave school.

Needs analysis and performance evidence has identified that the attainment of children with special education needs and of those who have problems with behaviour or attendance are priorities.

Adults: When looking at adult skills on average, residents in Nottingham and Nottinghamshire have fewer qualifications than across England as a whole. 28% of Nottingham and Nottinghamshire residents are qualified to at least Level 4 (equivalent to a first degree) compared with 31% nationally [14].

Unemployment is closely related to skills. One in seven of the working age population in Nottinghamshire have no qualifications. This is a larger proportion than either the East Midlands or UK. One in six of the working age population in Mansfield have no qualifications, followed by Bassetlaw, where one in seven has no qualifications [15].

Further work is needed to help reduce the gap in levels of attainment, to help people achieve their full potential.

Goal: To improve participation and attainment in learning up to age 18 and reduce the achievement gap between vulnerable groups and their peers.

See the Nottinghamshire Children, Young People and Families Plan for 2011-2014 for further information.

8.2. Crime & Community Safety

Why this matters: The level of crime and peoples feeling of safety is a concern for many residents within Nottinghamshire. A greater sense of security helps to create confidence that feeds wellbeing and growth. With differential levels of crime and antisocial behaviour across the county, attention must be on the safety of those groups and communities that are more vulnerable.

Crime and safety is also linked to other health and wellbeing priorities, such as substance misuse, where wider societal impacts can include criminal justice problems. According to a Home Office report, offenders who use heroin, cocaine or crack cocaine are estimated to commit between a third and a half of all acquisitive crime.

Crime and fear of crime can lead to social isolation, social exclusion, reduced levels of activity and participation (a fear to leave the home or allow children out to play) these impact upon individual's emotional health and wellbeing and reduce the ability to change unhealthy lifestyle behaviours.

The Safer Nottinghamshire Board is a Partnership providing strategic leadership and direction to tackle crime, disorder and substance misuse in Nottinghamshire. The Board has developed a Nottinghamshire Community Safety Agreement for 2012-15, which includes the Nottinghamshire Community Safety Strategy for 2012-15.

The strategy was developed using evidence from the Nottinghamshire County strategic assessment and contains the shared community safety priorities that will be addressed at a county level, in order to improve outcomes for local citizens and communities.

Four Crime and Disorder/Community Safety Partnerships have been established through the District Councils to cover all districts across Nottinghamshire. Each of the partnerships completed a strategic assessment in November 2011, identifying local priorities to be addressed in 2012/13. Priorities that are common across localities have now been translated into seven priority areas, allowing work to be directed towards fifteen areas having the highest levels of priority crimes.

Priorities Include:

- Serious Acquisitive Crime
- Violent Crime
- Domestic Violence
- Anti-Social Behaviour
- Drugs and Alcohol
- Youth Issues
- Hate Crime.

Our Health & Wellbeing Strategy aims to bring together priorities from partners and decide on early actions where joint work will improve health and wellbeing. The work of the Safer Nottinghamshire Board, expressed through the Nottinghamshire Community Safety Strategy for 2012-15, sets the priorities for health & wellbeing activity related to crime & safety.

Work is delivered through a range of programme groups that tackle specific areas of the strategy under the leadership of the Safer Nottinghamshire Board structure.

Goals:

- To increase the use of early intervention techniques to improve community engagement, reduce domestic violence and prevent children & young people offending through reducing substance misuse.
- To prevent crime and offending, including violent & serious acquisitive crimes and reducing substance misuse by adults.
- To increase the confidence and satisfaction of local communities through reducing antisocial behaviours, victim support and ensuring effective response to community safety issues

Examples of Potential Outcome Measures

- Re-offending
- First time entrants into the youth justice system

Domestic violence/abuse: The Safer Nottinghamshire Board adopted the following definition of domestic violence:

‘physical, sexual, psychological or financial violence that takes place within an intimate or family-type relationship and that forms a pattern of coercive and controlling behaviour. This can include forced marriage and so-called ‘honour crimes’. Domestic violence may include a range of abusive behaviours, not all of which are in themselves inherently ‘violent’ [17].

Why this matters: Domestic violence is a significant problem in our society. Whilst domestic violence occurs across all sections of society, men are far more likely to be the perpetrators and women the victims. Information from the national police statistics and the British Crime Survey results show that 73% of domestic violence is carried out by men against women (and that 80% of domestic violence victims are women) [17].

The violence they experience is also more likely to have a sustained psychological/emotional impact or result in injury or death [17].

Women who have suffered domestic violence have approximately twice the level of usage of general health services and between three and eight times the level of usage of mental health services. The national cost (inclusive of hospital care, ambulance use, GP time and prescribing costs) is estimated to be £1.7bn [18].

There is also a strong link between substance misuse for both victim and perpetrators.

At least one in four women will experience domestic violence during their lifetime and about one in ten women, in any given year¹. This means that across Nottinghamshire at least 31,920 women will experience domestic violence every year [19]. The consequences for victims can be very serious including mental ill-health and homelessness as well as physical injury. Domestic violence usually escalates as a relationship continues, so where there are concerns, it is important to assess risk levels regularly.

In Nottinghamshire in 2011 there were 8,781 reported incidents of domestic violence and 4,101 offences*. The highest proportions were seen in Mansfield, Bassetlaw and Ashfield.

Safeguarding: Safeguarding is a legal responsibility for most partner organisations and is an important element of service provision. Safeguarding involves partnership working to protect and promote the welfare of vulnerable people, through monitoring, reporting and addressing potential abuse, as well as ensuring the promotion of dignity within all support services.

Referrals and resultant action relating to safeguarding in children has increased over the past 4 years. The most common reason children became subjects of Children Protection Plans in 2009/10 was 'neglect' (32%), followed by 'emotional and physical abuse' (20%).

Sexual exploitation, sexual assault, domestic violence and hate crime against children and young people continue to be reported. Information from 2009, shows that Mansfield and Ashfield had the highest levels of crime committed against children during that time.

8.3. Healthy environments in which to live, work and play

Why this matters: Environmental disasters and global changes to the environment are one of the largest growing issues facing society and public health. We have a duty to work towards reducing the negative impacts that natural disasters such as floods, droughts and natural wide spread fires cause, as these have significant impacts upon the individual, communities, economy and to services.

On a day to day basis, the environment we live in also has a large impact upon health and wellbeing. Access to open space, green space, play areas, street lighting, accessibility, air quality, noise pollution, transport and the build environment all impact upon physical and mental wellbeing.

Community satisfaction is a key indicator for the government, which provides a measure linking policy to health and wellbeing. Environmental health is intrinsically

¹ British Crime Survey Crime In England and Wales 2009/10

* Data was extracted on 03/02/12 from CRMS police system

linked to delivery against this indicator through its strategies and policies. Work at county or district level ensure cleaner, greener, safer environments through the management of waste disposal, regeneration, housing, planning, pollution and contamination control and management.

The Sustainable Communities Act provides an opportunity for councils to ask the Government for changes to policy or legislation to improve community wellbeing. Local action includes the development of sustainable community strategies to bring together local aspirations for making improvements for communities and wider environmental changes.

The variation across Nottinghamshire highlights differences in need across the county. Through partnership working the Health and Wellbeing Strategy can take forward priorities for local action, and aims to support and complement other local strategies and plans at both county and district level.

Housing: The homes that people live in have been shown to impact upon health and wellbeing; overcrowding, poorly insulated/heated homes, damp and limited access to green space all impact upon physical and mental health, emotional and economic wellbeing.

There is a need to ensure adequate housing to meet the needs of local communities; therefore housing is an important factor to be considered in this Health & Wellbeing Strategy. Housing needs differ between different communities, such as access to life long homes that are easily adaptable for an aging population or availability of assisted housing and home adaptation schemes for those with greatest need.

Where housing is insufficient to meet local needs identified through the Joint Strategic Needs Assessment, our strategy aims to identify action to minimise the impact upon wellbeing and independence.

Goal: To create sustainable communities and environments that promote and enable healthy living and lifestyles, to reduce our consumption of non-renewable energy and to reduce the impact upon the environment.

Our strategy supports the development of a Nottinghamshire strategy for environmental health and housing, building upon and with the District Councils current strategies to scope current provision, identify gaps and create equality of access and reduce inequalities between and within areas.

Examples of Potential Outcome Measures

- Utilisation of green space for exercise/health reasons
- Public sector organisations with board approved sustainable development management plans.

9. CONCLUSION

There is a wide range of factors that affect an individual's health and wellbeing. Through focusing on the life course of children & young people and adults, we can target the best time to introduce new interventions. Priorities within behaviours and defined health & wellbeing policy areas offers the opportunity to take a cross sectional view focussing on joint strategies to promote health and wellbeing. Likewise, consideration of the wider determinants of health, make sure we take a community-wide view of the problems and identify where all partners can contribute to a common aim.

In the real world, people have multiple needs so services should be able to take account of individual differences and be able to offer support for a wide range of issues to avoid duplication and use resources wisely. Through working jointly to identify new ways to make a difference, the health and wellbeing strategy can achieve great things for the people of Nottinghamshire.

10. REFERENCES

1. Marmot M. 2010. Fair Society, Healthy Lives; executive summary.
<http://www.instituteofhealthequity.org/projects/fair-society-healthy-lives-the-marmot-review>
2. The Equalities Assessment Act 2010. <http://www.homeoffice.gov.uk/equalities/equality-act/>
3. Nottinghamshire Health Profile 2011.
http://www.apho.org.uk/default.aspx?QN=HP_METADATA&AreaID=50254
4. Ashfield Health Profile 2011.
http://www.apho.org.uk/default.aspx?QN=HP_METADATA&AreaID=50547
5. Bassetlaw Health Profile 2011.
http://www.apho.org.uk/default.aspx?QN=HP_METADATA&AreaID=50548
6. Broxtowe Health Profile 2011.
http://www.apho.org.uk/default.aspx?QN=HP_METADATA&AreaID=50549
7. Gedling Health Profile 2011.
http://www.apho.org.uk/default.aspx?QN=HP_METADATA&AreaID=50550
8. Mansfield Health Profile 2011.
http://www.apho.org.uk/default.aspx?QN=HP_METADATA&AreaID=50551
9. Newark and Sherwood Health Profile 2011.
http://www.apho.org.uk/default.aspx?QN=HP_METADATA&AreaID=50552
10. Rushcliffe Health Profile 2011.
http://www.apho.org.uk/default.aspx?QN=HP_METADATA&AreaID=50553
11. D M Parkin,^{*1} L Boyd,² and L C Walker. 2010. **The fraction of cancer attributable to lifestyle and environmental factors in the UK in 2010.** Br J Cancer. 2011 December 6; 105(S2): S77–S81. Published online 2011 December 6. doi: [10.1038/bjc.2011.489](https://doi.org/10.1038/bjc.2011.489).
<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3252065/>
12. Department of Health. 2011. **Healthy Lives, Healthy People: a Tobacco Control Plan for England.**
http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_124917
13. DH. 2011. **Healthy Lives, Healthy People: A call to action on obesity in England.** Gateway reference 16166.
http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_130401
14. HM Government/DH (2011) **No health Without Mental Health: A Cross government mental health outcomes strategy for people of all ages.** DH London.
http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_123766
15. Economic Assessment 2010 <http://www.nottinghaminsight.org.uk/insight/framework/local-economic-assessment/home.aspx>
16. Headline Economic Assessment 2009 Nottinghamshire County Council and Nottingham City Council
17. Women's Aid Federation England <http://www.womensaid.org.uk>
18. Povey D, Coleman K, Kaiza P and Roe S (2009) **Homicides, Firearm Offences and Intimate Violence 2007/08 (Supplementary Volume 2 to Crime In England and Wales 2007/08)** London: Home Office
19. Department of Health (2011) Commissioning services for women and children who experience violence or abuse – a guide for health commissioners
20. British Crime Survey Crime In England and Wales 2009/10.

REPORT OF THE LEADER OF THE COUNCIL**ADVERTISING AND SPONSORSHIP****Purpose of the Report**

1. This report is to consider Nottinghamshire County Council's approach to advertising and sponsorship; and whether a policy on advertising and sponsorship is needed.

Information and Advice

2. Currently there is a range of advertising and sponsorship activity that is taking place across the Council.
3. The Council uses a range of advertising platforms to communicate its own messages and campaigns, including: adverts on bus shelters and bus backs; lamp post banners; plasma screens in venues; adverts in local publications and newspapers (e.g. Primary Times, Nottingham Post, Newark Advertiser). The Council also places advertising in its own channels, including adverts for fostering/adoption and County Enterprise Foods in the What's on Guide. It is also a sponsor of the Nottingham Post's Business Awards and an event partner for the Cycle Live weekend event.
4. External advertisers and sponsors are already using a range of council-owned platforms. For example, sponsorship of some roundabouts; providing offers and competitions prizes in County News; and paying for advertising in Frontline (staff magazine). A Portfolio Holder decision in 2009 also gave approval for the Council to allow advertising on its website, although this has not yet been put into practice. In addition, approaches are made to a variety of services each year for the Council to be a sponsor.
5. There is currently a lack of control and consistency in the Council's approach to advertising and sponsorship. Without coordination and a centralised process, the Council is not securing best value for money or maximising income. A lack of policy on advertising and sponsorship also means the Council is at risk of complaints and legal challenge. This leaves the Council exposed and its reputation and corporate identity are also at risk.
6. The introduction of a policy on advertising and sponsorship would resolve these issues, but would not allow any new advertising to be done beyond what is currently being delivered. A separate paper would be brought back to Policy Committee to consider any existing and new opportunities for Councillors to approve.

7. An advertising and sponsorship policy would have the following benefits for the Council:
- Uphold the Council's reputation and corporate identity
 - Further the Council's strategic vision and support its priorities (by facilitating communication messages)
 - Secure best value for money and maximise income
 - Provide a framework and control measures
 - Establish a corporate approach and standards (including best practice)
 - Ensure compliance with legislation, advertising industry codes and other Council policies (e.g. Corporate Identity Policy)
 - Support development of commercial partnerships with the private sector
 - Safeguard the image and environment of the county
9. If the Council wishes to establish an advertising and sponsorship policy, it is recommended that this covers the Council in two scenarios: the Council as – i) an advertiser or sponsor and, ii) as an owner of an advertising platform or initiator of a sponsorship opportunity which an external individual, group or organisation may wish to take up.
10. A draft advertising and sponsorship policy is included as **Appendix 1** for consideration. This could be supported by the following documents (see background papers):
- An advertising and sponsorship procedure
 - Terms and conditions for advertisers wishing to use Council owned platforms; and
 - Terms and conditions for sponsors of Council products or services.

Other Options Considered

12. The following Council services have been consulted as part of the development of the draft advertising and sponsorship policy: Policy; Legal Services; Corporate Finance; Corporate Procurement; HR; Highways and Planning. All are supportive of the need to establish a framework for advertising and sponsorship.

Reasons for Recommendation

13. To secure control, consistency and coordinating of advertising and sponsorship.
14. To secure best value for money and maximise the potential for income.
15. To mitigate the risk of complaints and provide cover should there be legal challenge.
16. To ultimately safeguard the Council's reputation and corporate identity.

Statutory and Policy Implications

17. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

RECOMMENDATION

- 1) It is recommended that Policy Committee supports the introduction of a policy for advertising and sponsorship.

Martin Done
Service Director Communications & Marketing

For any enquiries about this report please contact: Clare Yau, Group Manager Marketing and Engagement. Telephone: 0115 9773851, email: clare.yau@nottsc.gov.uk

Constitutional Comments [NAB 21.06.12]

1. The recommendations within the report and the associated decisions fall within the terms of reference for Policy Committee.

Financial Comments [MB 25/06/12]

2. There are no specific financial implications arising from the report.

Background Papers

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

Advertising and Sponsorship Procedure
Terms and Conditions for Advertisers
Terms and Conditions for Sponsors

Electoral Division(s) and Member(s) Affected

All

**REPORT OF THE CHAIRMAN OF THE CHILDREN AND YOUNG PEOPLE'S
COMMITTEE****LOOKED AFTER CHILDREN STRATEGY****Purpose of the Report**

1. To recommend that the Committee approves the proposed Looked After Children (LAC) Strategy (**Appendix A** & Executive Summary at **Appendix B**).

Information and Advice

2. It has been identified that our approach to Looked After Children would benefit from the development of an over-arching strategy which outlines the commitment of the Council and our partner agencies to supporting children in care. The strategy has been developed based on what young people have told us is important to them in The Pledge for Looked After Children, published in October 2010.
3. Nottinghamshire's commitments to Looked After Children, as set out in The Pledge, underpin our Looked After Children Strategy. The strategy has been developed with our key partners and was endorsed by the Children's Trust Executive in June 2012. This strategy identifies the Council's ambition for its Looked After Children and young people, ensuring that they receive placements that meet their needs, have access to high quality education and enjoy positive activities that support them to achieve their full potential. For those children who require permanent alternative families, it means ensuring that effective plans are made so that they achieve permanence as quickly as possible.
4. In common with other areas of the country, Children's Social Care services in Nottinghamshire continue to be under pressure from the increase in numbers of Looked After Children. In Nottinghamshire, there were 812 children and young people in public care at the time of writing this report. Independent audit shows that thresholds for entry to the care system are being applied appropriately and the numbers of Looked After Children are in line with those of Nottinghamshire's statistical neighbours. There is evidence, however, to suggest that some children spend longer in the care system than necessary. The challenge is therefore to ensure that those children who will remain in care have a loving, safe, stable and happy childhood whilst also having a clear focus on finding permanent alternative placements through adoption, special guardianship or within the extended birth family through kinship care.
5. The Council's performance in relation to adoption timescales has also improved recently. Our current performance can be seen on the scorecard issued by Government in May

2012. Recent developments aimed at improving our performance include the establishment of a Permanence Team. This team was established in August 2011 to work exclusively to progress adoption plans and (together with significant revision of adult and child adoption processes) already shows signs of improving the quality and timeliness of adoption planning. However, we cannot underestimate the challenge of providing permanent families for vulnerable children. This is especially true at a time when nationally there are more children in care than ever before.

6. The LAC Strategy action plan (**Appendix 1** to the LAC Strategy document) will in part be delivered by the LAC project within the Children's Social Care Transformation Programme. This project has a number of work streams which include piloting new panel arrangements for entry to care, reviewing the support in place for kinship care and care leavers, and the wider range of options for permanency available to children and young people in the care system.

Other Options Considered

7. It is considered that not developing a strategy which encapsulates our commitments to this particularly vulnerable group of children and young people places at risk the outcomes which can be achieved, particularly in gaining the commitment of our partners to support children and young people in care.

Reason/s for Recommendation/s

8. The Looked After Children Strategy has been developed to give a clear and consistent cross-agency approach to improving outcomes for Looked After Children in Nottinghamshire.

Statutory and Policy Implications

9. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Implications for Service Users

10. Looked After Children will benefit from clear commitments from the County Council and partner agencies which support them, based on what young people in care have told us is important to them in The Pledge.

Equalities Implications

11. The Strategy commits Council and partner services to giving Looked After Children the same opportunities as any other group of children and young people.

Safeguarding of Children Implications

12. The Strategy strengthens the commitment of the Council and partners to effectively safeguarding this vulnerable group of children and young people.

RECOMMENDATION/S

- 1) That the Looked After Children Strategy be approved.

Councillor Philip Owen
Chairman of the Children & Young People's Committee

For any enquiries about this report please contact:

Steve Edwards
Service Director, Children's Social Care
T: 0115 977 4782
E: steve.edwards@nottsccl.gov.uk

Constitutional Comments (LM 28/06/12)

13. The Policy Committee has delegated authority under the Constitution to approve the recommendations in the report.

Financial Comments (NDR 27/06/12)

14. There are no financial implications arising directly from this report.

Background Papers

The Pledge for Looked After Children
DfE Adoption scorecard May 2012
Report to Corporate Leadership Team – CSC Transformation Programme May 2012
Report to Children & Young People's Committee on 18 June 2012 'Looked After Children Strategy'

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

Electoral Division(s) and Member(s) Affected

All.

C0037

Looked After Children Strategy 2012-2015

An outcome-focused approach to supporting children in care

Front Cover image

Contents

1.	Introduction	Page 3
2.	Nottinghamshire's Ambition for Looked After Children	Page 4
3.	A Joint Approach: Partnership Agencies	Page 6
4.	Outcomes for Children Looked After	Page 7
5.	Our Action Plan	Page 26
6.	Appendix 1: Action Plan	Page 27
	Appendix 2: The Pledge	Page 31
	Appendix 3: Glossary of Key Agencies	Page 37
	Appendix 4: Terms of Reference for Children in Care Council	Page 40
	Appendix 5: Demand Trends	Page 41

Introduction

Welcome to the Nottinghamshire Looked After Children Strategy.

This strategy is a joint statement of intent between Nottinghamshire County Council and our partner agencies to work together to deliver the best outcomes we can for the children who come into our care.

The strategy is being developed at a time when the Government is focusing its approach to supporting children in care. The children's social care system is being reshaped to include more emphasis on preventative and early intervention techniques following the recommendations of the Munro Review. Legislation is being streamlined to support more effective care planning following the publication of revised care planning regulations. The Children's Rights Director for England's recently published Care Monitor 2011, which provides a comprehensive picture of children's views of the care system. This strategy forms part of Nottinghamshire's response to this changing national context.

Locally in Nottinghamshire this strategy is being developed as we are undertaking a review of all our provider services to ensure they are value for money and continue to meet the needs of vulnerable children and young people. We are committed to providing good value services that consistently meet the needs of a growing looked after children population.

Our Children Looked After and Care Leavers rely on all agencies in Nottinghamshire to work together to meet their needs. A joined up approach is only possible when everyone understands and accepts their responsibilities for this most vulnerable group of children and young people. It is to this end that Nottinghamshire County Council and its partner agencies have created a shared vision:

"To ensure our looked after children have all the opportunities that good parents afford their children"

This vision is underpinned by The Pledge – Our Promise to Children and Young People in Our Care. The Pledge was developed in consultation with over two hundred children and young people who told us how we can improve their experience within the care system. This engagement and feedback has formed the basis of the promises that we, along with our partner agencies, will strive to deliver against.

Children only have one childhood, and so this document also commits us to achieve our vision through an action plan which focuses our attention on what matters most - outcomes for the children and young people in our care.

Anthony May

**Director for Children, Families, and
Cultural Services**

[Signature]

Cllr Philip Owen

**Portfolio Holder for Children and
Young People**

[Signature]

Nottinghamshire's ambition for Looked After Children

Our ambition for looked after children is to ensure that children and young people in our care have everything that good parents afford their children; giving them the support and protection they need to be safe, secure, happy and to achieve their full potential.

We want to keep children at home wherever possible, working with families to promote their resilience in often difficult and complex situations. When children do come into our care we want to ensure that they continue to live close to their friends and family to maintain a sense of stability in their lives. Their experience of care should be nurturing and meaningful, with the expectation that they will quickly return home when it is right and safe to do so.

We want our children and young people to be healthy, both physically and emotionally, and to be safe from harm and exploitation. We want them to enjoy and achieve at school, make a positive contribution to their communities and to make the transition to adulthood with confidence.

These outcomes can only be achieved by working with our looked after children and young people, their parents, carers and birth families. We will ensure that they have the opportunities to participate in decisions which affect their lives, and shape how we manage their care and support.

This strategy commits Nottinghamshire County Council and its partners to work together to achieve the very best outcomes we can for the children in our care, and in the subsequent sections we outline over 40 key actions we will be working to achieve over the next three years. From these actions, our top ten priorities will be to:

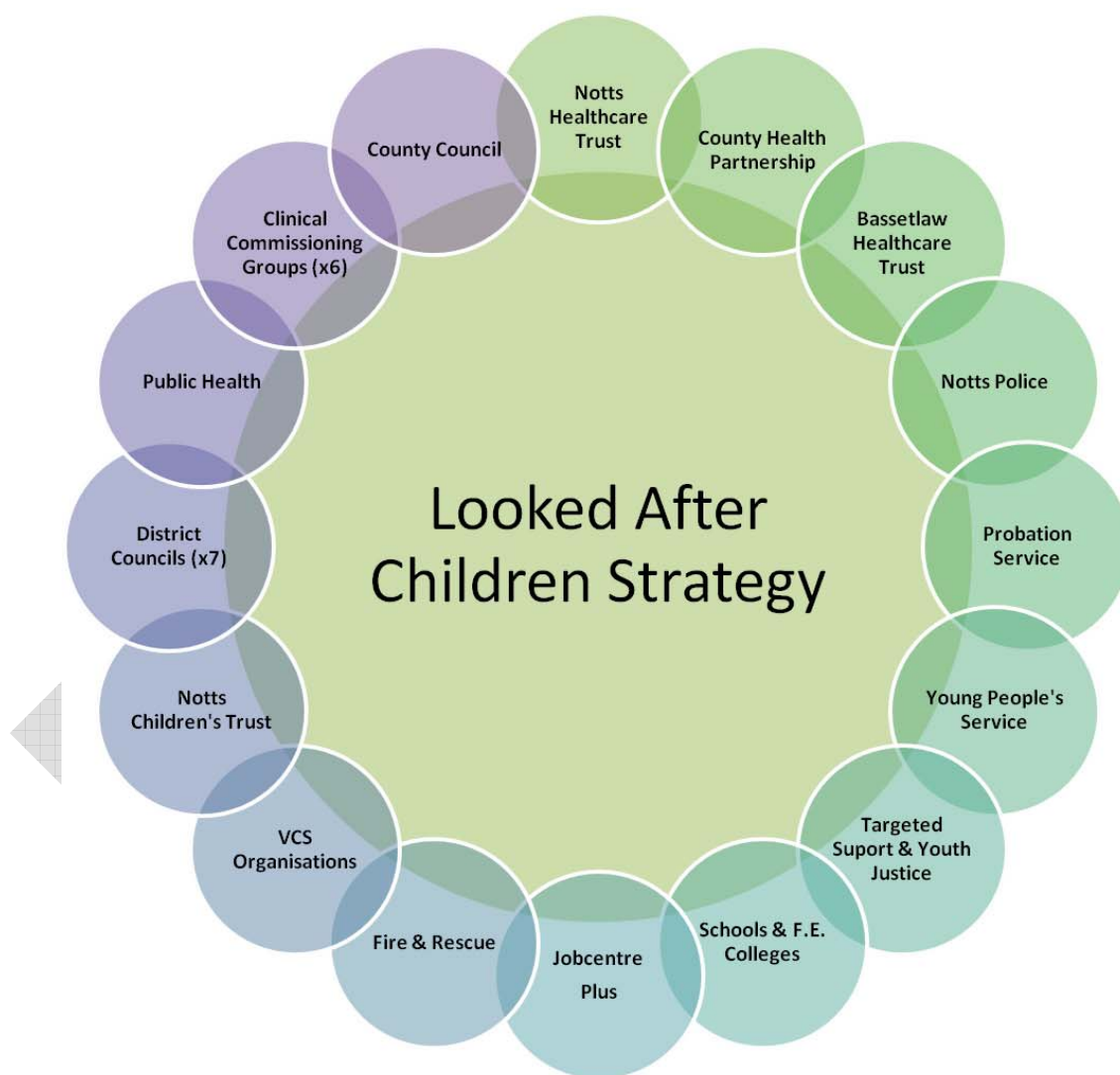
1. Continuously review 'The Pledge' to ensure it continues to reflect the priorities of all age groups in care
2. Develop a comprehensive participation strategy that outlines how agencies will gather and promote the views of children looked after
3. Ensure that we are minimising the number of times children looked after need to move to a different school during their education, by establishing better joint planning between social care and education
4. Improve the Information, Advice and Guidance (IAG) support to Looked After Children at the end of Key Stage 4 to ensure they make a successful transition into learning, in line with the Raising the Participation Age Strategy
5. Ensure that social care and health systems work more closely together to provide accurate and timely information, that will assist in identifying health concerns of looked after children and young people
6. Undertake a review of internal and external provider services within the Children's Social Care Division to ensure that placements are value for money and are providing the best possible experience for young people

7. Work more closely with the Children in Care Council to monitor standards for social workers and develop a system which allows children and young people to contribute to social work appraisals
8. Further develop our support to children and young people in permanent placements to ensure that these remain stable and continue to meet their needs
9. Pilot a Creative Solutions Panel that will be able to commission creative packages of support for children who are either on the edge of care or who are brought in to care for a defined period of time
10. Identify new ways of measuring positive progress in emotional resilience and wellbeing of our looked after children and young people, including the use of self reporting

DRAFT

A Joint Approach: Partnership Agencies

This document has been developed in close consultation with partner agencies across Nottinghamshire to ensure it reflects the joint priorities of all those who are working to support children looked after.



Outcomes for Children Looked After

Our focus is on what matters most to children looked after. In order to focus our attention, we have used the feedback we gathered from children and young people in The Pledge (see appendix one), as well as national research and trends. From this we have developed eight outcomes that that we will work in partnership to make a reality.

1. Participation and Joining In

Children and young people will be treated with respect by all who are involved with them. Their views will be listened to and they will be involved in making decisions about their lives. They know how to get information and support, as well as how to raise a concern if not happy.

2. Education

Children and young people have clear educational plans which mean they receive the right support to achieve their full potential.

3. Health

Children and young people have their health needs assessed and planned for, and are able to access the health services they require. They are healthy and happy and enjoy a good quality of life.

4. Safe and stable placements

Children and young people are in high quality placements where they feel safe and supported, and where they are able to remain for as long as they need to. They receive information about their placement in advance and are listened to if they have concerns at any time. Overall children and young people have a positive experience of family life or residential care.

5. Relationships

Children and young people are supported to maintain, build and sustain positive relationships with others, including their birth families, carers and peers.

6. Identity

Children and young people know who they are and why they are looked after. They feel valued and respected by others, and their individual needs arising from gender, race, culture, disability, sexual orientation, and religion are understood and met.

7. Moving to Adulthood

Children and young people are supported to move into young adulthood successfully. They will have a home to live in, the skills to look after themselves and the ability to earn a living or continue in education. They feel confident about the future.

8. Emotional Wellbeing

Children and young people achieve emotional stability, resilience and self confidence.

Our Strategy for Looked After Children

1. Participation and Joining In

Children and young people will be treated with respect by all who are involved with them. Their views will be listened to and they will be involved in making decisions about their lives. They know how to get information and support, as well as how to raise a concern if not happy.

Nottinghamshire's Pledge to Children and Young People in Care

- We promise to listen to all children and young people and engage their views through a range of mechanisms
- We will listen to children and young people's views about where and when to have reviews, and who should attend. We promise to plan them well in advance so that everyone can prepare thoroughly.
- We promise children and young people can talk to an independent visitor or advocacy worker if they are not happy about their social worker
- We promise help for young people to have their say if they are not happy. No Labels, our Children in Care Council, will speak up for them to improve services
- We promise to help children and young people take part in things like sports and clubs

What we know nationally (*Children's Care Monitor 2011*)

- 57% of children said they are asked their opinion on things that matter to them, but 15% of said their opinions don't make a difference
- The top three things children and young people wanted more say in were deciding on their placement, decisions about their future, and decisions about contact with their family

What we know in Nottinghamshire

- Children and young people want their social worker to be reliable and turn up when they say they will, to explain to them if meeting times change or are cancelled, and ask that social workers take a real interest in them
- Children and young people enjoy joining in with the activities and opportunities provided by the Young People Looked After Youth Work Team¹

¹ A profile of the Young People Looked After Youth Work Team can be found in Appendix 3

What we have done so far

- Established the 'No Labels' Children in Care Council, which acts as an advocate for children and young people in care
- Produced a Nottinghamshire Pledge, or "The Pledge", that was developed in consultation with children and young people. This sets out children and young people's priorities in a user-friendly way
- Updated the 'Listen to Me' booklet for younger children looked after
- Extended the Nottinghamshire Children and Young People's Board to include a young person who is currently looked after. This ensures the priorities of young people in care are adequately represented
- Commissioned an independent organisation to provide an independent visiting and advocacy service, so that young people's views are fairly represented in all aspects of their life
- Ensured that reviewing officers meet with children looked after prior to their reviews, to encourage two-way participation and to make this as meaningful as possibly to young people's lives
- Consistently signpost and assist young people to access Nottinghamshire Youth Service activities
- Set up a system whereby fostered young people now actively take part in the training of prospective foster carers thereby enabling a continuous cycle of learning. They also take part in the review of foster carers, provide regular placement feedback reports about the quality and standard of care, recognising that children and young people know what matters to them most
- Established a process whereby a careleaver is on every recruitment panel for aftercare team staff including the team manager
- Invited careleavers to be part of the Step Up to social work programme by speaking about their experiences to prospective social workers
- Involved careleavers in training and development of social workers through their participation in the NCC training programme "Preparing for Adulthood"
- Established and maintained strong links with What About Me? Substance Misuse Service which further adds a 'voice' to children and young people through their consultation work and advocacy

What are we going to do next

- Work with older young people to produce a new review booklet to ensure their voices are heard
- Ensure reviewing officers use the suite of consultation booklets available to involve looked after children in shaping their own care plans and support them to monitor their care plans

- Set up a Facebook page that will mean we communicate and network with young people in a way that is friendly and accessible to them
- Continuously review 'The Pledge' to ensure it continues to reflect the priorities of all age groups in care
- Find new and innovative ways of ensuring that care planning decisions such as placement changes are not made outside the review process, and that children looked after are always involved in these decisions
- Enable children looked after who live in independent sector placements to access to the same opportunities and services as those who are placed within Nottinghamshire County Council care
- Ensure care planning is inclusive and reflects the views of parents and carers
- Implement a revised placement feedback report, designed by fostered young people for fostered young people
- Produce a new guide to adoption for children looked after to help them understand the opportunities and challenges this presents, and how they can influence the process
- Develop a comprehensive participation strategy that outlines how agencies will gather and promote the views of children looked after
- Ensure that very young children and foster carers can access the early years and family support services they need at the local children's centre

2. Education

Children and young people have clear educational plans which mean they receive the right support to achieve their full potential.

Nottinghamshire's Pledge to Children and Young People in Care

- We will make sure you have a school place
- We will work with schools to ensure you get full time education
- We will try to ensure that you get into a school within 6 days if you are out of school or have moved
- We will ensure access to nursery or early years education for children in care who are 3-4 years old
- We promise a designated teacher for children in care in every school
- We promise you will have a plan which guides your time in school - this is called a PEP (Personal Education Plan)

What we know nationally (*Children's Care Monitor 2011*)

- 87% of children in care rate their education as good or very good, with more children in foster care than residential care saying they have a positive experience of education
- 78% of children in care said they are doing well in education. Most children who are doing well in education, said it was because they were working hard (68%), followed closely by good teaching (56%)

What we know in Nottinghamshire

- Children and young people want their teachers to know enough about them to understand their situation, but don't want to be singled out and made to feel different in front of their peers
- Children and young people want support for extra tuition that is easily accessed at school
- Children and young people are sometimes excluded from classroom activities because of their behaviour, and want more support to stay within the classroom
- Children and young people want to stay in the same school to be close to friends, even if they now live further away than before
- Children and young people ask that meetings in school are not organised for times that will make it obvious they are 'different', as it draws too much attention to them

What we have done so far

- Established a Virtual School, which monitors the educational performance of children in care, and helps schools access additional funding streams. The services of the Virtual School are also available to all adopted children with parental agreement. This is supported by a senior leadership team of head-teachers, and has close ties with the corporate parenting panel.
- Personal Education Plans have been updated to ensure educational planning for children looked after in school and to close educational gaps
- Provided training for all designated teachers for looked after children to enable them to respond to the effects of trauma and attachment difficulties
- Improved attainment figures for children looked after and young people across all Key Stages in Nottinghamshire
- Decreased the number of fixed-term exclusion rates for looked after children and young people, and through a range of intervention and support, ensured that no looked after young person has been permanently excluded
- Commissioned high quality alternative educational provision where needed to meet individual children and young people's needs
- Made available a financial support package for care leavers who wish to access higher education
- Hold regular annual events to celebrate regular educational achievements of looked after children and young people

What are we going to do next?

- Improve the timeliness and quality of Personal Education Plans to ensure they have a greater impact on looked after children's educational attainment
- Enhance opportunities for children looked after in and out of education for music and school trips
- Ensure that teacher assessment data is robust and good quality, so that we can respond quickly and effectively to looked after children who need more support in education
- Monitor children looked after in below floor target and satisfactory schools
- Review funding mechanisms that currently support the education of children looked after to ensure these continue to provide added value
- Ensure that we are minimising the number of times children looked after need to move to a different school during their education, by establishing better joint planning between social care and education

- Embed systems for quick access to school places whether the school be an Own Admitting Authority (OAA), academy, foundation or VA school
- Ensure that all children looked after will have a link educational psychologist
- Demonstrate our commitment to the Virtual School by working together to ensure that the staffing and resources available to the Virtual School are sufficient for the work that it does
- Improve the Information, Advice and Guidance (IAG) support to Looked After Children at the end of Key Stage 4 to ensure they make a successful transition into learning, in line with the Raising the Participation Age Strategy

DRAFT

3. Health

Children and young people have their health needs assessed and planned for, and are able to access the health services they require. They are healthy and happy, and enjoy a good quality of life.

Nottinghamshire's Pledge to Children and Young People in Care

- We will make sure children and young people get regular health and dental check ups
- We will give children and young people contact details of the nurse for Looked After Young People

What we know nationally (*Children's Care Monitor 2011*)

- 69% of children aged 14 or over identified alcohol as a danger to people their age
- The top three dangers listed by children aged 14 or over were drugs, knives and alcohol
- Drugs were much more likely to be seen as a big danger by care leavers living independently, by asylum seekers, and by children living in children's homes
- Children often enter the care system with a worse level of health than their peers, in part due to the impact of poverty, poor parenting, chaotic lifestyles and abuse or neglect. Longer term health outcomes for looked after children remain worse than their peers²
- Many aspects of young people's health have been shown to worsen in the year after leaving care. Young people interviewed a year after leaving care were almost twice as likely to have problems with drugs or alcohol and to report mental health problems. There was also increased reporting of 'other health problems' including asthma, weight loss, allergies, flu and illnesses related to drug or alcohol misuse and pregnancy³
- Research has shown that by the age of 20 a quarter of children who had been in care were young parents, and 40% were mothers⁴. The prevalence of teenage motherhood among looked after girls under-18 is around three times higher than the prevalence among all girls under-18 in England

What we know in Nottinghamshire

- Looked after young people would like their health checks to be done in different places such as leisure centres

² Haywood J. and James C. (2008) Improving the health of children in care and care leavers in London 2008/9. Unpublished paper, Care Services Improvement Partnership

³ Dixon, J. (2008) 'Young people leaving care: health, well-being and outcomes', Child and Family Social Work 13, 207-217

⁴ Barn R, Andrew L, Mantovani N (2005) *Life after care: the experiences of young people from different ethnic groups* Joseph Rowntree Foundation, London

- Looked after young people want to know what their health plan is and be given a copy of it
- The prevalence of teenage pregnancy amongst young women in care is lower than national estimates

What we have done so far

- Put in place a clear system for health assessments to ensure health needs are better identified and addressed
- Established a designated health team, to ensure children looked after and young people receive appropriate and timely health services
- Produced a booklet for young people who self harm which gives advice and information about sources of support available
- Put in place a programme of training events for foster carers which promote healthy living for children and young people
- Commissioned a specialised service for children looked after to both prevent and treat substance misuse
- A substance misuse screening tool is now used in work with care leavers to aid early identification of substance misuse issues and fast-track to treatment services
- Trained Social Care staff to support young people with sex and relationships education and the provision of the C-Card condom scheme
- Established good links and referral pathways to the young people's advocacy group What About Me? (WAM) to further enhance support provision for looked after children where appropriate

What are we going to do next?

- Work with District Councils across Nottinghamshire to improve children looked after and young people's access to council-run sport and leisure facilities
- Ensure that social care and health systems work more closely together to provide accurate and timely information, that will assist in identifying health concerns of looked after children and young people
- Ensure commissioning arrangements for health services for looked after children and care leavers are prioritised and maintained in the light of health reforms

4. Safe and stable placements

“Children and young people are in high quality placements where they feel safe and supported, and where they are able to remain for as long as they need to.

They receive information about their placement in advance and are listened to if they have concerns at any time. Children and young people have a positive experience of family life or residential care.”

Nottinghamshire’s Pledge to Children and Young People in Care

- We will try our best to help you stay in your foster home where you are happy
- We promise a place to live with carers who will meet your needs
- We will make sure that services for young people in care, children’s homes and foster care are checked to make sure they give good services

What we know nationally (*Children’s Care Monitor 2011*)

- Most children feel very safe where they live. 94% of children said they feel safe in the building where they live, and 90% of feel safe when at school or college
- Children and young people feel safer when in the presence of an adult they trust (55%) or when around police or security people (23%).
- 57% of children and young people in foster care said they would go to their foster carer for help if they felt unsafe

What we know in Nottinghamshire

- Children and young people want to be able to visit placements before they move in
- Children and young people want to be able to have a choice in where they are placed
- Children and young people worry about being moved from the placement where they feel happy and settled
- Children and young people want carers to speak up for them because sometimes they feel their voice is not heard by people making the decisions about their lives
- Children and young people want carers not to concentrate only on practical things, but to also think about how to meet their aspirations and support their emotions

What we have done so far

- Produced an award-winning children’s guide about being looked after
- Provided a range of support to young people and their carers to help keep placements stable, which has resulted in less than 5% of young people in care experiencing three or more moves in any one year.

- Increased the number of long term, therapeutic foster homes by an additional 10 households in 2011/12 and increased the number of foster homes overall from 342 to 358. This gives more choice to young people in need of a foster home
- Implemented a Staying Put Policy which makes it possible for young people to remain in their foster placements after the age of 18
- Set up a dedicated multi disciplinary Child and Adolescent Mental Health Services team for looked after and adopted children
- Commissioned an independent agency that provides an advocacy service to ensure that young people are able to share any concerns they have about their placement

What are we going to do next?

- Undertake a consultation exercise to review the experience of children and young people in placements, to understand where we can improve
- Pilot a Creative Solutions Panel that will be able to commission creative packages of support for children who are either on the edge of care or who are brought in to care for a defined period of time
- Ensure that disruption meetings are held in a consistent way in all types of placement, where a placement ends in an unplanned way. This will mean that learning from disruption is embedded to inform future service and care planning
- Implement a recruitment programme for foster carers for children with disabilities
- Continue to expand the number of salaried carers for young people in need of permanent foster care
- Explore ways of better managing the challenges that social media bring to the stability and security of placements for children and young people
- Maintain our commitment to inclusive adoption planning and support in light of changing national legislation
- Further develop our support to children and young people in permanent kinship placements to ensure that these remain stable and continue to meet their needs

5. Relationships

Children and young people are supported to maintain, build and sustain positive relationships with others, including their birth families, carers and peers.

Nottinghamshire's Pledge to Children and Young People in Care

- We promise that, unless there is a good reason not to, you can have contact with your brothers, sisters and other family members.
- We will make sure contact meetings are planned in advance

What we know nationally (*Children's Care Monitor 2011*)

- Bullying is an ongoing concern for children in care. 9% of children and young people in care said they are bullied often. The most common type of bullying identified was name-calling (79%), followed by rumours being spread (42%), and being left out of things (35%)
- In 2011, nearly three quarters (73%) of the children in care who had one or more siblings also in care were separated from brothers or sisters by being placed to live in different placements
- 92% of those who had been placed together with their siblings thought this had been right in their case. 41% of those who had been separated from one or more siblings in a different placement thought that this was right in their case
- Children in foster homes were much more likely than children in residential care to say that being separated in different placements had been right in their case

What we know in Nottinghamshire

- Children and young people said they worry about their family and particularly their siblings
- Children and young people want the adults around them to be honest with them
- Children and young people want to have a relationship with their social worker that they can rely on. They want social workers to keep their promises and if a young person asks them for a small or big thing they need to recognise that they are all important to them
- Children and young people said they don't see their family and friends as much as they would like to. Sometimes meetings are rushed and they have to choose between seeing family or friends.

What we have done so far

- Designed activity days for adopted young people to get together and share their experiences

- Ensured that contact plans are at the heart of a child's care plan
- We have set clear standards for social workers and have redefined them in relation to their role and responsibilities towards the children and young people they work with
- Recruited foster carers from all over Nottinghamshire to try and keep young people close to their family/community of origin where it is safe to do so
- Committed to ensuring that foster carers have the necessary competence to work with birth families and understand the relevance of contact plans
- Maintained a letterbox scheme for children who are adopted which ensures that links are kept with members of their birth family who are important to them

What are we going to do next?

- Establish a new Family Assessment and Contact Service which will provide a consistent approach to contact across the county
- Work more closely with the Children in Care Council to monitor standards for social workers and develop a system which allows children and young people to contribute to social work appraisals
- Develop a training and information pack for social workers within the throughcare team which covers a range of important issues for looked after children including overnight stay guides, and the role of education and health
- Seek to delegate more authority to foster carers to make day to day decisions about contact plans with family and friends

6. Identity

Children and young people know who they are and why they are looked after. They feel valued and respected by others, and their individual needs arising from gender, race, culture, disability, sexual orientation and religion are understood and met.

Nottinghamshire's Pledge to Children and Young People in Care

- We promise services that meet the needs of young people from different backgrounds, cultures and disabilities
- We promise to listen to **all** children and young people

What we know nationally (*Children's Care Monitor 2011*)

- 68% of children in care said that they thought coming into care was the right thing for them at the time. Around one in five were not sure, and just over one in eight (13%) thought that coming into care was the wrong thing for them at the time
- 75% of foster children whose foster parents had their own children told us that they were treated the same as their foster carers' children

What we know in Nottinghamshire

- Children and young people are sometimes unsure why they had to come in to care, and this could have been explained more clearly to them
- Children and young people in care want more information about their family backgrounds to help them understand who they are
- Children and young people who are unaccompanied asylum seekers want placements which meet their cultural and emotional needs
- Rules and regulations don't always make sense to young people, they can make them feel different, and could be explained more clearly

What we have done so far

- Provide specialist counselling for children looked after from a black and minority ethnic background
- Provided specialist consultancy for carers of black and minority ethnic young people
- Run a photography project for looked after children and care leavers to share their experiences of being in care
- Helped children with adoption plans to better understand their life story by producing a "life story work"
- Extended support available for children and young people in permanent placements including dedicated support

What are we going to do next?

- Continue to recruit foster carers from a wide range of diverse backgrounds
- Through specific commissioning arrangements ensure that all internal and external placement providers meet the individual needs of children
- Establish a new recruitment programme for foster carers specifically for children with disabilities
- Further develop our support to children and young people in permanent placements to ensure that these remain stable and continue to meet their needs
- Ensure that all young people with permanent fostering plans have life story work completed with them

7. Moving to Adulthood

Children and young people are supported to move into young adulthood successfully. They will have a home to live in, the skills to look after themselves and the ability to earn a living or continue in education. They feel confident about the future.

Nottinghamshire's Pledge to Children and Young People in Care

- We will work with you to give you all the help and support you need to make a success with moving on from care to adult life
- We promise you will have a pathway plan which we will write with you and you can keep a copy
- We will make sure we will talk to you regularly about your pathway plan
- We will give you all the information you need about leaving care
- We will keep you informed about what money you are entitled to
- We promise to provide a card with information to support you if you get into trouble
- We will give you up to date information about available support
- We will make sure you are not criminalised by any actions in care settings that wouldn't normally result in police involvement in a family home

What we know nationally (*Care Monitor 2011*)

- 13% of children and young people who were about to leave care said they were getting no help to prepare for future
- 29% of children and young people who leave care are classified as not in education, employment, or training (NEETs)
- Overall, 64% of care leavers said they were getting good or very good support

What we know nationally (*After Care 2012*)

- 44% of care leavers said their lives were much better as a result of leaving care
- There is a significant variance in the levels of leaving care grant that children receive across the country. The Government advises that £2,000 is an appropriate amount
- The top four things children and young people want when leaving care are more help with money, more practical help, to be given important documents, and to have someone to talk to

What we know in Nottinghamshire

- 21% of care leavers are classified as not in education, employment or training (NEETs)

- Children and young people said they get worried about what age they have to leave care and who will help them once they reach 18. In particular they would like more support when they leave care
- Young people may need extra support emotionally as their developmental age may not be the same as their chronological age

What we have done so far

- Developed a Staying Put Policy which makes it possible for young people to remain in their foster placements beyond 18
- Provided access to dedicated Employment, Education and Training Advisors to assist care leavers in accessing employment, education and/or training to prevent them reaching NEET status
- Continued to improve the quality of pathway planning to ensure young people have the necessary skills and confidence to move into adulthood
- Enabled more flexible use of home establishment grants to ensure individual young people's needs are met
- Prioritised the accommodation of careleavers by recruiting a dedicated accommodation officer in the Aftercare team to develop housing options and promote good practice
- Ensured all careleavers have access to a named Education, Employment and Training Adviser in the Aftercare team who can provide individual direct help and support to young people

What are we going to do next?

- Scope the viability of an integrated transitions service for children with disabilities to embed person-centred planning and ensure the journey from childhood to adulthood is as comfortable as possible
- Continue to recruit foster carers under the 14+ scheme to support the Staying Put Policy
- Develop supported lodgings and extend accommodation options for care leavers
- Increase availability of apprenticeships within Nottinghamshire County Council for care leavers
- Explore ways of making emotional and mental health support services more accessible to older young people

8. Emotional Wellbeing

Children and young people achieve emotional stability, resilience and self confidence.

Nottinghamshire's Pledge to Children and Young People in Care:

- We will give you up-to-date information about self harming, and advice and support services

What we know nationally (*Children's Care Monitor 2011*)

- There has been a slight decrease in the number of children who said they worry about their safety. In 2011, 34% said they worry a little or a lot about their safety. This was down from 36% last year and 43% the year before
- Looked After Children show significantly higher rates of mental health disorders compared to their peers, including children in the most deprived socio economic groups⁵
- There are high levels of mental health need amongst looked after children, particularly those in residential care. 45% of looked after children were assessed as having a mental health disorder, rising to 72% of those in residential care. Boys in Care experience mental health disorders more than girls^{6, 7}

What we know in Nottinghamshire

- Children and young people said they want to have someone to talk to when they feel happy or sad, and ongoing help to confront the issues from their childhoods
- Children and young people would like carers to try not to make it obvious that they are not the same as their birth children
- Children and young people say that, even though they have unique challenges due to their backgrounds, they want to be treated the same as other children

What we have done so far

- Established an annual achievement event which celebrates achievements of children and young people looked after
- Produced a booklet for young people who self harm which gives advice and information about sources of support
- Identify emerging issues through the consistent use of a Strengths and Difficulties Questionnaire

⁵ Ford T., Vostanis P., Meltzer H. and Goodman R. (2007) 'Psychiatric disorder among British children looked after by local authorities: comparison with children living in private households', British Journal of Psychiatry 190, 319-325

⁶ Dimigen G., Del Priore C., Butler S. et al (1999) 'Psychiatric disorder among children at time of entering local authority care: questionnaire survey', British Medical Journal, 319, 675

⁷ McCann J., James A., Wilson S. and Dunn G. (1996) 'Prevalence of psychiatric disorders in young people in the care system', British Medical Journal 313, 15, 296

- Established a dedicated multi disciplinary CAMHS team for looked after and adopted children
- Developed a policy for Safeguarding Children and Young People from Sexual Exploitation that includes inter-agency guidance

What are we going to do next?

- Identify new ways of measuring positive progress in emotional resilience and wellbeing of our looked after children and young people, including the use of self reporting
- Further assess mental health and emotional needs of Looked After Children through the refresh of the CAMHS needs assessment

Our Action Plan

A detailed annual action plan has been agreed across all agencies to support the delivery of the priorities set out in this strategy. This is outlined in more detail in appendix 1.

The strategy and action plan will be formally signed off by the Children's Trust Executive and Children and Young People Committee. The action plan will be monitored by a multi agency Looked After Children steering group on a bi-monthly basis and highlight reports against each of the eight themes will be taken to both the Corporate Parenting Sub Committee and 'No Labels', our Children in Care Council twice yearly.

The overall strategy will be reviewed in 2015

DRAFT

Appendix 1: Action Plan

Action	Owner/s	Job title	Deadline
Work with older young people to produce a new review booklet to ensure their voices are heard and that they shape their own care plans (LAC Review) (Listen to Me)	Izzy Martin	Service Manager, Conference & Review	Jul-12
Ensure reviewing officers use the consultation booklets with children and young people prior to every review to ensure they can shape their own care plans	Izzy Martin	Service Manager, Conference & Review	Jun-12
Set up a Facebook page that will mean we communicate and network with young people in a way that is friendly and accessible to them	Jo Down	Children's Social Care Locality Manager for Gedling	
Continuously review 'The Pledge' to ensure it continues to reflect the priorities of all age groups in care	Sue Hollingworth-Shaw	Co-ordinator Youth Services, Young People Looked After	Ongoing activity
Find new and innovative ways of ensuring that care planning decisions such as placement changes are not made outside the review process, and that children looked after are always involved in these decisions	Izzy Martin	Service Manager, Conference & Review	Jun-12
Enable children and young people who live in independent sector placements to access to the same opportunities and services as those who are placed within Nottinghamshire County Council care	Norman Chessman	Service Manager, Placements	Nov-12
Ensure care planning is inclusive and reflects the views of parents and carers	Ty Yousaf	Service Improvement Team Manager	Oct-12
Produce a new guide to adoption for older children and young people to help them understand the opportunities and challenges this presents, and how they can influence the process	Shelagh Mitchell	Service Manager, Adoption	Jul-12
Develop a comprehensive participation strategy that outlines how agencies will gather and promote the views of children looked after	Rachel Coombs	Group Manager for Access to Resources	May-13
	Dawn Godfrey	Group Manager for Social Work Services North	
Improve the timeliness and quality of Personal Education Plans to ensure they have a greater impact on looked after children's educational attainment	Rachel Coombs	Group Manager for Access to Resources	Ongoing activity

	Dawn Godfrey	Group Manager for Social Work Services North	
Enhance opportunities for children looked after in and out of education for music and school trips	Sue Denholm	Co-ordinator of the Virtual School	
Ensure that teacher assessment data is robust and good quality, so that we can respond quickly and effectively to looked after children who need more support in education	Sue Denholm	Co-ordinator of the Virtual School	Ongoing activity
Monitor children looked after in below floor target and satisfactory schools	Sue Denholm	Co-ordinator of the Virtual School	Ongoing activity
Review funding mechanisms that currently support the education of children looked after to ensure these continue to provide added value	Rachel Coombs	Group Manager for Access to Resources	Jul-12
Ensure that we are minimising the number of times looked after children need to move to a different school during their education, by establishing better joint planning between social care and education	Rachel Coombs	Group Manager for Access to Resources	Ongoing activity
	Dawn Godfrey	Group Manager for Social Work Services North	
Embed systems for quick access to school places whether the school be an Own Admitting Authority (OAA), academy, foundation or VA school	Sue Denholm	Co-ordinator of the Virtual School	Jun 12
	Scott Hollingsworth	Access and Admissions Strategy Co-ordinator	
Ensure that all children looked after will have a link educational psychologist	Charles Savage	Principal Educational Psychologist	Sep-12
Demonstrate our commitment to the Virtual School by working together to ensure that the staffing and resources available to the Virtual School are sufficient for the work that it does	Marion Clay	Group Manager for Support to Schools Service	Ongoing activity
Improve the Information, Advice and Guidance (IAG) support to Looked After Children at the end of Key Stage 4 to ensure they make a successful transition into learning, in line with the Raising the Participation Age Strategy	Dennis McCarthy	Targeted Support Operations Manager	Apr-13
Work with District Councils across Nottinghamshire to improve children looked after and young people's access to council-run sport and leisure facilities	Rachel Coombs	Group Manager for Access to Resources	Apr-13
	Dawn Godfrey	Group Manager for Social Work Services North	
Ensure that social care and health systems work more closely together to provide accurate and timely information, that will assist in identifying health concerns of looked after children and young people	Rachel Coombs	Group Manager for Access to Resources	Apr-13
	Dawn Godfrey	Group Manager for Social Work Services North	
Ensure commissioning arrangements for health services for looked after children and care leavers are prioritised and maintained in the light of health reforms	Rachel Coombs	Group Manager for Access to Resources	Sep-12
	Dawn Godfrey	Group Manager for Social	

		Work Services North	
Pilot a Creative Solutions Panel that will be able to commission creative packages of support for children who are either on the edge of care or who are brought in to care for a defined period of time	Norman Chessman	Service Manager, Placements	Jan 13
Undertake consultation exercise to review the experience of children and young people in placements, to understand where we can improve	Norman Chessman	Service Manager, Placements	Nov-12
Ensure that disruption meetings are held in a consistent way in all types of placement, where a placement ends in an unplanned way. This will mean that learning from disruption is embedded to inform future service and care planning	Rachel Coombs	Group Manager for Access to Resources	Sep-12
	Dawn Godfrey	Group Manager for Social Work Services North	
Continue to expand the number of salaried carers for young people in need of foster care	Jayne Austin	Service Manager, Fostering	Jul-12
Explore ways of better managing the challenges that social media bring to the stability and security for placements of children and young people	Jayne Austin	Service Manager, Fostering	Jul-12
	Shelagh Mitchell	Service Manager, Adoption	
Maintain our commitment to inclusive adoption planning and support in light of changing national legislation	Shelagh Mitchell	Service Manager, Adoption	Ongoing activity
Further develop our support to children and young people in permanent kinship placements to ensure that these remain stable and continue to meet their needs	Denise Martin	Service Manager, Family Support	Nov 12
Establish a new Family Assessment and Contact Service which will provide a consistent approach to contact across the county	Denise Martin	Service Manager, Family Support	Ongoing activity
Work more closely with the Children in Care Council to monitor standards for social workers and develop a system which allows children and young people to feed in to social work appraisals	Rachel Coombs	Group Manager for Access to Resources	Dec-12
	Dawn Godfrey	Group Manager for Social Work Services North	
Develop a training and information pack for social workers within the throughcare team which covers a range of important issues for looked after children including overnight stay guides, and the role of education and health	Dawn Godfrey	Group Manager for Social Work Services North	Ongoing activity
Seek to delegate more authority to foster carers to make day to day decisions about contact plans with family and friends	Jayne Austin	Service Manager, Fostering	Sep-12
Continue to recruit foster carers from a wide range of diverse backgrounds	Jayne Austin	Service Manager, Fostering	Ongoing activity
Through specific commissioning arrangements ensure that all internal and external placement providers meet the individual needs of children	Norman Chessman	Service Manager, Placements	Jan-13
Further develop our support to children and young people in permanent placements to ensure that these remain stable and continue to meet their needs	Rachel Coombs	Group Manager for Access to Resources	Ongoing activity
	Dawn Godfrey	Group Manager for Social Work Services North	
Ensure that all young people with permanent fostering plans have life story work completed with them	Dawn Godfrey	Group Manager for Social Work Services North	Ongoing activity

Scope the viability of an integrated transitions service for children with disabilities to embed person-centred planning and ensure the journey from childhood to adulthood is as comfortable as possible	Fran Arnold	Group Manager, Children's Disability Service	Sep-12
Continue to recruit foster carers under the 14+ scheme to support the Staying Put Policy	Jayne Austin	Service Manager, Fostering	Mar-13
Develop supported lodgings and extend accommodation options for care leavers (link with youth homelessness strategy)	Laurence Jones		
	Michelle Lee		
Increase availability of apprenticeships within Nottinghamshire County Council for care leavers	Rachel Coombs	Group Manager for Access to Resources	Jun-12
	Dawn Godfrey	Group Manager for Social Work Services North	
Services to looked after young people will all contribute to the emotional wellbeing of our looked after children and young people	Rachel Coombs	Group Manager for Access to Resources	Mar-12
	Dawn Godfrey	Group Manager for Social Work Services North	
Identify new ways of measuring positive progress in emotional resilience and wellbeing of our looked after children and young people, including the use of self reporting	Helen Daft	Interim Children's Service Manager, Residential / CAMHS services	Sep-12
Further assess mental health and emotional needs of Looked After Children through the refresh of the CAMHS needs assessment	Sally Handley	Senior Public Health Manager	Apr-13

Appendix 2: The Pledge – Our Promise to Children and Young People in Care

Nottinghamshire County Council have made this Pledge to Looked After Children and Young People. Young people were involved in the Pledge and were represented by No Labels.

The Pledge is a list of promises to children and young people.

We cannot promise to do everything you ask but when we cannot we will explain why.

No Labels is the name of our Children In Care Council.

It's a place where young people meet up to talk about life in care.

You can find out more about No Labels from Sue Shaw on 07740 845824, or ask your social worker for information.

▼ SOCIAL WORKERS

Young People SAY...

- We would like a qualified social worker and to meet our social worker away from our foster home so that we can talk openly.
- We would like the social worker's telephone number so we can contact them.

We Promise

A qualified social worker for every young person in care. Your social worker will listen to you and make sure you have our contact details.

Your social worker will meet with you away from your foster home if you wish.

Young People SAY...

- Who can we talk to about our social worker if we are not happy?

We Promise

You will not be in trouble if you tell your social worker you are not happy about something they do.

You can talk to an independent visitor or advocacy worker if you are not happy about your social worker.

▼ REVIEWS

Young People SAY...

- Some of us do not see our care plan before our review or we get it too late so we feel we cannot contribute.
- We want to see our care plan at least two weeks before the review so that we are given time to have a say in the services we need and who attends our review.

Young People SAY...

- We want reviews done out of school time.
- We do not like to be taken out of school or out of class.
- We would like our reviews to occur in places that we know, where we feel safe, and that are nice for young people.

We Promise

An up to date care plan for every Looked After Child and Young Person and the opportunity to have your say before your review meeting.

We will listen to your views about where and when to have your reviews, and who comes to them.

▼ CONTACT

Young People SAY...

- We would like contact with our brothers, sisters and families to be arranged with a diary in advance.
- Young people feel under pressure to attend at the last minute that makes us have to make a choice about meeting our family or going out with our friends.

We Promise

Unless there are good reasons not to, you can have contact with your brothers and sisters and other family members.

We will make sure the meetings are planned in advance.

▼ INCLUDING EVERYONE

Young People SAY...

- Please make sure you include unaccompanied asylum seeking children and young people, young people with disabilities and those from different backgrounds when you consult us.

We Promise

To listen to all children and young people.

Services that meet the needs of young people from different backgrounds, cultures and disabilities.

▼ WHERE WE LIVE

Young People SAY...

- Who can young people speak to if the carer does not meet our needs?
- Please tell us who we can talk to about our carers if we are not happy?

We Promise

A place to live with carers who will meet your needs.

We will make sure you can speak to your social worker, youth worker, advocacy worker or an independent visitor if you have concerns.

Help for young people to have their say if they are not happy. No Labels, our Children In Care Council, will speak up for you to improve services.

We will also make sure that services for young people in care, children's homes and foster care are checked to make sure they give good services.

Young People SAY...

- Some of us have to keep moving foster home, which makes us worried.

We Promise

We will try our best to help you stay in your foster home where you are happy.

We will make sure you can tell us your views at your review.

▼ EDUCATION

Young People SAY...

- We have the right to go to school full-time.

We Promise

We will make sure you have a school place.

We will work with schools to ensure that you get full-time education.

We will try to ensure that you get into a school within six days if you are out of school or have moved.

Nursery or early years education for children in care who are three to four-years-old.

Young People SAY...

- Who is the teacher in my school to help me if I have any worries?

We Promise

A teacher whose job is to help young people in care to do as well as other young people. This person is called a Designated Teacher. We will make sure you are given the teacher's name when you start or change school.

You will have a plan which guides your time in school—this is called a PEP (Personal Education Plan).

Young People SAY...

- Please tell us about the Personal Education Allowance (PEA).

We Promise

To tell you about the Personal Education Allowance (PEA). This is a payment which can be used to help you catch up with school work.

Support to help you feel happy in school.

JOINING IN

Young People SAY...

- We sometimes feel worried about taking part with other young people. We would like someone to support us to help us feel confident, like a youth worker or a social worker.

We Promise

Help to take part in things, like sports and clubs. We will tell you about the youth work team for Looked After Young People.

HEALTH AND WELL-BEING

Young People SAY...

- Please can we have the name of the nurse for young people in care who can give us confidential advice and help?

We Promise

We will make sure you get regular health and dental check-ups.

We will give you contact details of the nurse for Looked After Children and Young People.

LEAVING CARE

Young People SAY...

- We get worried about what age we have to leave care and who will help us.

We Promise

To work with you to give all the help and support you need to make a success with moving on from care to adult life.

You will have a Pathway Plan which we will write with you and you can keep a copy.

We will give you all the information you need about leaving care.

Young People Who Have Left Care SAY...

- We cannot always remember completing a Pathway Plan and would like it updated regularly.
- We would like a small card, which tell us our entitlement to money, etc., at ages 16–18 (we get information but forget).
- We would like more support when we first move out from care.

We Promise

We will keep you informed about what money you are entitled to.

We will make sure we talk to you regularly about your Pathway Plan.

OTHER THINGS

Young People SAY...

- We would like to know what our rights are if we get into trouble with the police, for example:
- What is the law about the age we are classed as an adult?
- Are we allowed to phone someone if we are at the police station?

We Promise

To provide a card with information to support you if you get into trouble.

Young People SAY...

- We would like more advice about self-harming and how we can be signposted to help and support.

We Promise

We will give you up to date information about available support.

We Also Promise

To give you a Children's Guide, which contains lots of information about Being Looked After.

That we will check our Pledge to you often, so that when we can, we will improve on the promises that we have made.

We will listen to your views through No Labels– Nottinghamshire's Children In Care Council.

We cannot promise to do everything you ask, but when we cannot we will explain why.

Appendix 3: Glossary of key agencies and services that will deliver the Looked After Children Strategy

Child and Adolescent Mental Health Services (CAMHS)

The Child and Adolescent Mental Health Services (CAMHS) provide a service for children 0-18 years where there are concerns about their emotional well-being or mental health.

The County Children Looked After & Adoption Team is based within the CAMHS service and specifically works with children and young people who are living away from their birth parents in the care of Nottinghamshire Children's Services.

These children and young people may be living with foster carers, in residential group home placements or for whom adoption is being explored / planned. The team also offers specialist consultation and support to children who have been adopted and their families.

CAMHS endeavour to meet the emotional health needs of looked after children by offering consultation to the network around the child. The multi-disciplinary team offers support and intervention based on a consultation model that empowers the professional network around the child and their carers and offers them an opportunity to explore ideas about how best to meet the child's needs.

Kinship Care workers

Kinship Care Workers support extended family members who are caring for children and young people from birth to 18 years whom for various reasons are unable to live with their parents, as an alternative to them being accommodated by the local authority.

Senior Educational Psychologist

Looked after children are supported by an educational psychologist who is trained in understanding how children and young people behave and learn. Their job is to make sure that children and young people who are in care and adopted get an education which they enjoy and where they succeed. They make contact with responsible adults involved in children's' lives, to identify the best learning environment for looked after young people.

Throughcare team

The Through-care Service is made up of 3 teams, made up of Personal Advisers, Education, Employment and Training Advisers and an Accommodation officer. The team is a mix of qualified and non-qualified social workers. They work with young people aged 16 to 21 (up to 25 if you are in education) who have been in care for at least 13 weeks. They support young people to think about what their goals are and to help them make realistic plans to achieve them through the formulation of a Pathway Plan.

Independent Reviewing Officers

Independent Reviewing Officers are qualified social workers whose role it is to quality assure looked after children review meetings. These review meetings take place within 20 days of a young person coming in to care, followed by another 3-monthly and then 6-monthly review.

A young person will always be invited to their review, but if they do not want to attend their review meeting, they will speak to them beforehand to ensure their views are represented at every stage.

Family Resource Team

The Family Resource Team focus on provide a range of preventative support services that for families with children aged 8 to 18 years, to enable them to stay with their birth family wherever possible. They also undertake crisis intervention and time-limited packages of intensive work where there is a serious risk of family breakdown, and provide more general advice, guidance and early support for families of children over 8 years of age who are experiencing difficulties in caring for their children.

Education, Standards and Inclusion Service

This service is made up of different teams of professionals who work with schools and other educational settings, including pre-school and home settings, to make sure that all children, including those looked after, on the edge of care, adopted, and those receiving after care services, can learn well. This includes extending access to extra resources such as one-to-one tuition, the personal education allowance, and the pupil premium, to help you to make good progress.

Some teams within this service work mainly with teachers to ensure that the schools children attend are safe places to learn, where lessons are stimulating, interesting and meet your learning needs.

Some of the professionals in the Education, Standards and Inclusion Service work directly with children, carers and teachers to agree ways of supporting young people to stay in school when you are at risk of being excluded. Sometimes when it is too difficult, professionals within the service help young people and their carers to find education alternatives which are better matched to their needs.

The Virtual School for Looked After Children

Within the Education, Standards and Inclusion Service, there is a 'virtual school' which focuses exclusively on the education needs of children and young people looked after, on the edge of care, adopted children, and those receiving after care services. This virtual school oversees the education of all Nottinghamshire Looked After Children, whether they attend schools and settings within Nottinghamshire or out of county.

The School consists of the Coordinator, a Senior Educational Psychologist, two officers working directly with schools, carers, social workers and, where appropriate, children and young people. Alongside this team a dedicated youth worker, connexions, health and CAMHS representatives all work with the virtual school to ensure that all children looked after access high quality education

The Virtual School supports schools and all partner agencies through training, advice and guidance concerning any issues around education. The school supports the personal educational planning process, looked after reviews and at all times adopts a solution focussed approach to their work with LAC. The school also celebrates achievement and out of school opportunities through personal education allowance and promotion of youth work events dedicated to looked after children.

Young People looked After Youth Work Team

The team consists of one full time co-ordinator, one full time youth worker and a number of youth work staff with a responsibility for the Children in Care Council and one to one youth work. The role of the team is to support Fostered and Adopted young people to participate in a full range of activities which they enjoy and is fun.

The main responsibility of the team is to develop leisure, sports and arts opportunities for children and young people looked after, care leavers, and those who are adopted throughout Nottinghamshire as well as be responsible for the Children in Care Council and the participation of young people.

The Children In Care and Adoption Health Team – County Health Partnerships, Nottinghamshire and Nottingham City

The Children In Care and Adoption Health Team are a team of Doctors and Nurses who work together to look after the health of children and young people who are in care or are going to be adopted.

Children looked after will be invited to have a health assessment every six months or every year depending on their age. They get the opportunity to discuss how they are feeling and if there is anything they can do themselves to make your health a little better.

What About Me (WAM)

WAM gives help and support to young people who are affected by someone elses drug or alcohol use or misuse. WAM is for young people who live anywhere in Nottinghamshire and is a totally confidential service. When a child or young person comes to the service they are given a support worker.

This support worker will provide confidential 1 to 1 support. This is done through weekly or fortnightly sessions where the child or young person can use these sessions to give themselves timeout from their normal day to deal with any problems or concerns they may have.

Appendix 4: Terms of Reference for Children in Care Council

To be added upon final publication

DRAFT

Appendix 5: Demand Trends

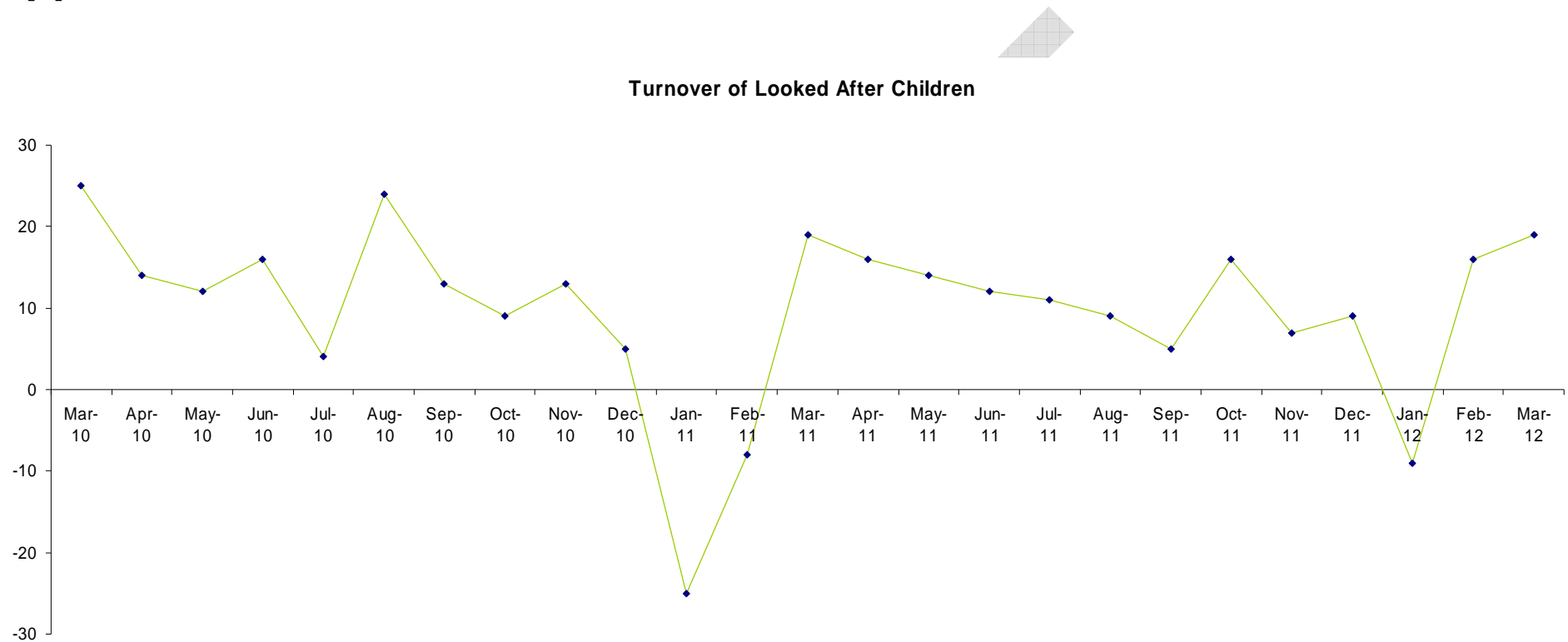


Figure 1: Turnover of children who are classified as looked after (LAC status), Mar 2010 - Mar 2012

Cumulative Number of Looked After Children in Nottinghamshire

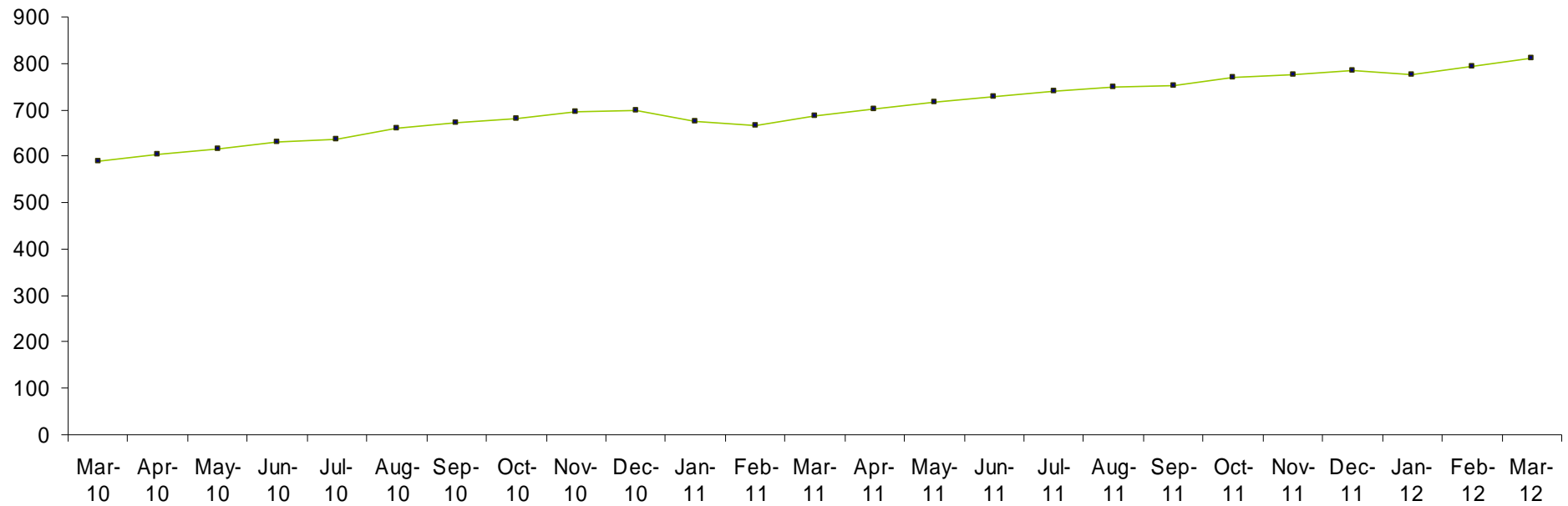


Figure 2: Cumulative number of children who are classified as looked after (LAC status), Mar 2010 - Mar 2012

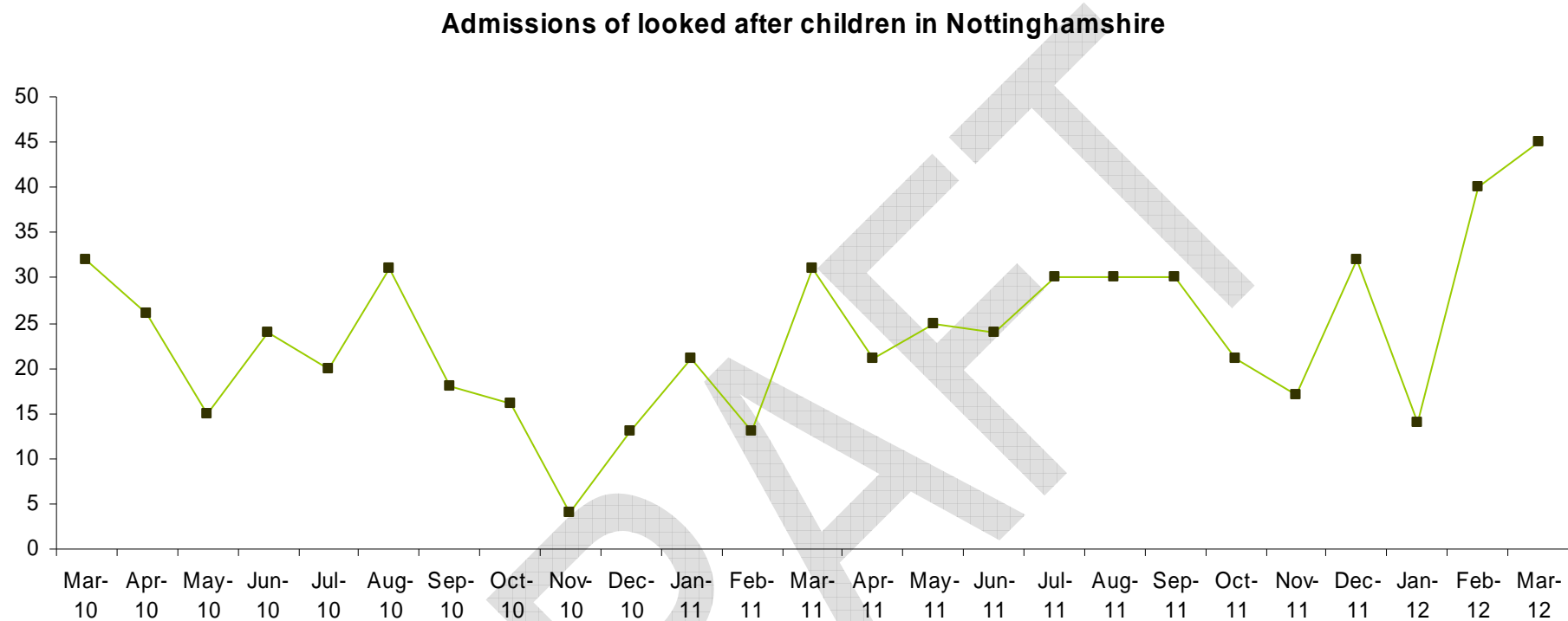


Figure 3: Admissions of looked after children, Mar 2010 - Mar 2012

Discharges of looked after children in Nottinghamshire

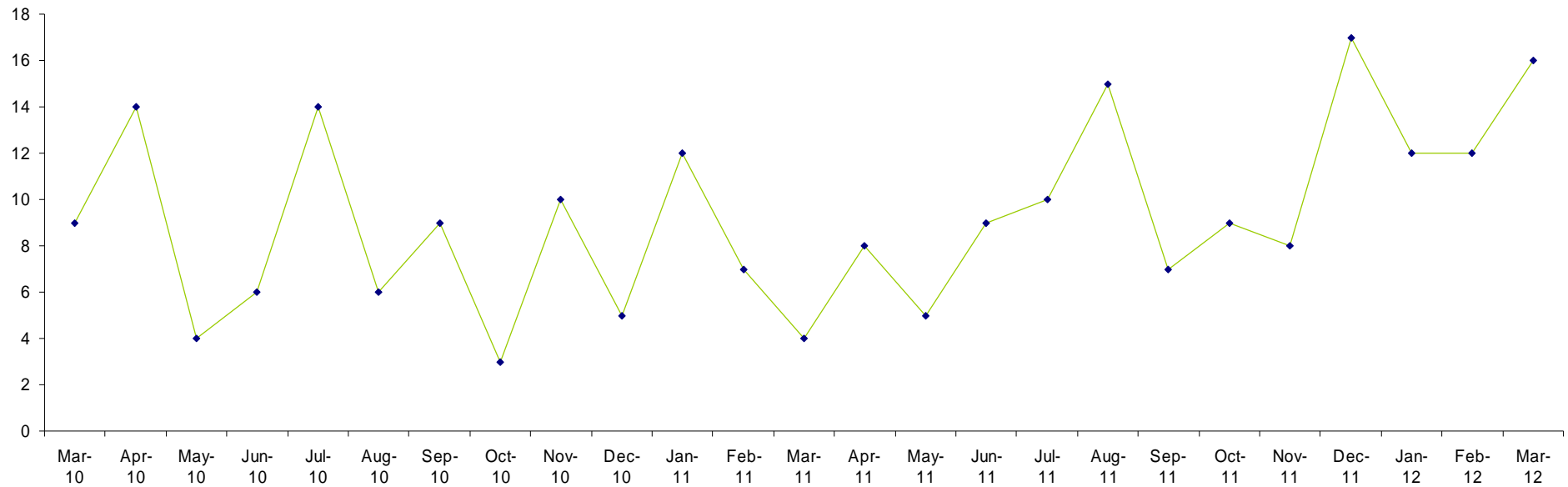


Figure 4: Discharges of looked after children in Nottinghamshire, Mar 2010 - Mar 2012

Number of Looked After Children who are not in education, employment or training (NEET status)

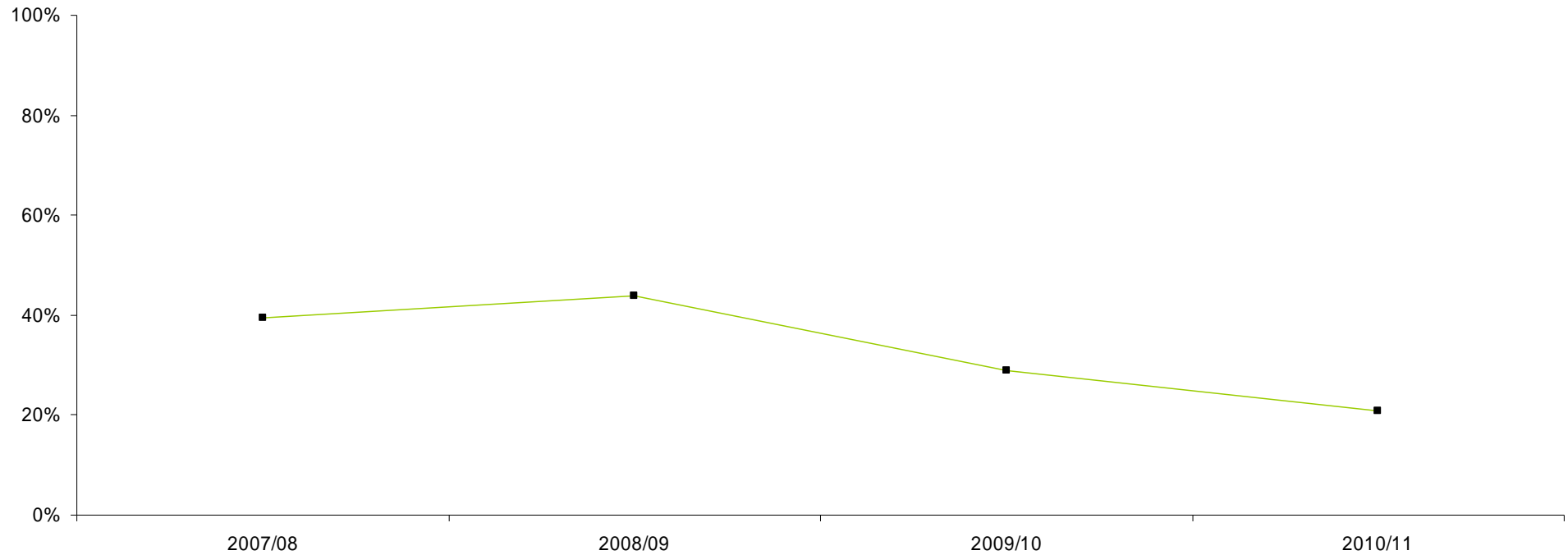


Figure 5: Number (displayed as a percentage) of previously looked after children who went on to be classified as NEETs (not in education, employment or training) Apr 2007 - Apr 2011

Looked After Children Strategy 2012-2015

Executive Summary

An outcome-focused approach to supporting children in care

The Looked After Children Strategy is a joint statement of intent between Nottinghamshire County Council and our partner agencies to work together to deliver the best outcomes we can for the children who come into our care. Our ambition is:

“To ensure our looked after children have all the opportunities that good parents afford their children”

Context

The strategy has been developed at a time when the Government is focusing its approach to supporting children in care. The children’s social care system is being reshaped to include more emphasis on preventative and early intervention techniques following the recommendations of the Munro Review. Legislation is being streamlined to support more effective care planning following the publication of revised care planning regulations.

Locally in Nottinghamshire this strategy is being developed as the County Council are undertaking a review of its provider services to ensure they are value for money and continue to meet the needs of vulnerable children and young people. We are committed to providing good value services that consistently meet the needs of a growing looked after children population.

Approach to the Strategy

We undertook a consultation with over two hundred children and young people in care in 2011 who told us how we can improve their experience within the care system. This engagement and feedback has formed the basis of the promises that we will strive to deliver against.

The Strategy was developed in close consultation with colleagues across Nottinghamshire in Health, Education, district councils, and the voluntary sector. The Strategy is split in to eight themes:

- Participation and Joining In
- Education
- Health
- Safe and stable placements
- Relationships
- Identity
- Moving to Adulthood
- Emotional Wellbeing

The Strategy outlines over 40 key actions that we will be working to achieve over the next three years. From these actions, our top ten priorities will be to:

1. Continuously review 'The Pledge' to ensure it continues to reflect the priorities of all age groups in care
2. Develop a comprehensive participation strategy that outlines how agencies will gather and promote the views of children looked after
3. Ensure that we are minimising the number of times children looked after need to move to a different school during their education, by establishing better joint planning between social care and education
4. Improve the Information, Advice and Guidance (IAG) support to Looked After Children at the end of Key Stage 4 to ensure they make a successful transition into learning, in line with the Raising the Participation Age Strategy
5. Ensure that social care and health systems work more closely together to provide accurate and timely information, that will assist in identifying health concerns of looked after children and young people
6. Undertake a review of internal and external provider services within the Children's Social Care Division to ensure that placements are value for money and are providing the best possible experience for young people
7. Work more closely with the Children in Care Council to monitor standards for social workers and develop a system which allows children and young people to contribute to social work appraisals
8. Further develop our support to children and young people in permanent placements to ensure that these remain stable and continue to meet their needs
9. Pilot a Creative Solutions Panel that will be able to commission creative packages of support for children who are either on the edge of care or who are brought in to care for a defined period of time
10. Identify new ways of measuring positive progress in emotional resilience and wellbeing of our looked after children and young people, including the use of self reporting

How will we know we have made a difference?

Nottinghamshire County Council as the lead organisation for the co-ordination of the Strategy will be responsible for monitoring progress made on an action plan. The Strategy will be monitored on an ongoing basis through a multi-agency Looked After Children Steering Group which reports to the Children's Social Care Transformation Board.

Highlight reports will also be taken to the Corporate Parenting Panel Sub-Committee and to the Children in Care Council to provide adequate scrutiny. The Strategy will be reviewed on an annual basis by the Children and Young People's Committee.

**REPORT OF THE CHAIRMAN OF THE EARLY YEARS AND YOUNG
PEOPLE'S SUB-COMMITTEE****YOUTH HOMELESSNESS STRATEGY****Purpose of the Report**

1. To invite the Committee to approve the proposed revised Youth Homelessness Strategy (**Appendix 1** & Executive Summary at **Appendix 2**) and supporting commissioning proposals (**Appendix 3**) as recommended by the Early Years and Young People's Sub-Committee.

Information and Advice**Background**

2. In June 2011 Council approved reductions to the Supporting People budget, which pays for support services for vulnerable people in housing need, although not the accommodation itself. Included within these vulnerable groups were young people, defined as those between 16 and 25 years of age, and teenage parents. Amongst the proposals was a commitment to produce a Youth Homelessness Strategy following a review of existing priorities and the effectiveness of current provision.
3. In March 2012 a draft Strategy and accompanying commissioning proposals were presented to Cabinet and a ten-week public consultation then commenced. The Strategy was produced under commission by HLG, a local sector specialist in homelessness, in partnership with senior managers from the Council.

Proposed Key Changes in Approaches to Youth Homelessness

4. The draft strategy contained significant detail on the proposed approaches to address youth homelessness. These key approaches are described below.
 - **A change in the definition of young people** – Supporting People defined 'young people' as those between 16 and 25 years of age. The Strategy proposes a new definition of 16 to 21 years of age. This new definition would include those homeless 16 and 17 year olds, for whom the County Council has a statutory responsibility and also recognises the importance of the transition to adulthood. Transition is important in ensuring effective move-on for those reaching their eighteenth birthday, assists young people leaving care and ensures intervention for a vulnerable group who without support would provide a challenge to a number of public services at significant cost.

- **Shared operational responsibility** – homeless 16 and 17 year olds have been historically dealt with by Reception and Assessment Teams within Children's Social Care (CSC), on occasion distracting social workers from pressing child protection matters and risking leaving young people without a service to meet their needs. Following a successful pilot in North Nottinghamshire, CSC will share this responsibility with the recently formed Targeted Support Service, which will contain dedicated accommodation staff. This will help to protect social work time whilst ensuring that the Council's legal obligations for the initial assessment of homeless children are met. Targeted Support will also be working with a large cohort of vulnerable young people and will act early to reduce the risks of homelessness, in particular through a strong commitment to family work and the training of staff in mediation.
- **A reconfigured estate of supported accommodation for homeless young people** – historically young people's housing units have taken young people across the age range of the Supporting People definition. This has created concerns about safeguarding, particularly when those who are legally 'children' are placed with adults who can present significant risks or negative influence. The proposal is to have units dedicated to 16 and 17 year olds, to protect those most vulnerable, with short term assessment beds to support a commitment to eliminate the use of bed and breakfast accommodation for this age group. There will also be units to support 16 to 21 year olds with different levels of support dependent upon need. Within the estate there would also be distinct provision for care leavers (to support exit from higher cost care placements), teenage parents and bail beds (to mitigate against the future impact of the transfer of custodial remand costs from central government to the Council).
- **A new pooled budget arrangement and commissioning accountability** – an agreement has been reached for the transfer of the budget for young people's supported accommodation from Adult Social Care, Health and Public Protection (ASCHPP) to Children, Families and Cultural Services. This funding will continue to be reduced in line with the Supporting People business case until 2014-15 and 10% will be retained by ASCHPP to make provision for the 22 to 25 year age group no longer covered by the young people's agenda. The transferred Supporting People funding will be pooled with £150,000 of Children's Social Care revenue funding to provide a commissioning budget for support services for homeless young people. The responsibility for commissioning supported accommodation for young people will also transfer from ASCHPP to the Targeted Support and Youth Justice Service.
- **A challenge to improve quality and reduce cost** – at present hourly costs for support vary considerably between providers. We plan to provide a challenge to the hourly costs in order to preserve as high a number of units of support as possible. We also plan to look at moving towards a simple 'payment by results' model to drive improvements, particularly in relation to eviction and planned move on to independent living.
- **A range of floating support** – Supporting People, through ASCHP, will continue to fund an all-age floating support service for people in their own tenancies. For young people this will be supplemented through the work of Targeted Support and Children's Social Care, who will have ongoing contact with some young people in their own tenancies.

Responses to the Consultation

5. People were able to respond to the consultation in a number of different ways:
 - via an online survey available through the Nottinghamshire County Council (NCC) website
 - by completing a consultation questionnaire
 - by writing to the Council
 - through face-to-face and telephone interviews, directed towards service users
 - by attending a service provider, landlord and district council event
6. In total 109 responses were received by the County Council. The views expressed in these responses varied significantly and were at times contradictory. Important issues and themes presented included:
 - a lack of clarity around the application of the Mental Capacity Act (2005) to service users in supported housing settings in light of Serious Case Review findings
 - a need for monitoring equality and diversity needs to ensure equality of outcome is being achieved for different service user groups
 - a concern regarding the capacity of services for those aged 21-25, given the proposed change to the definition of 'young people'
 - a call for a greater understanding of how Targeted Support services will link operationally with supported accommodation providers
 - local intelligence on young people's housing needs
 - business and local operational obstacles to implementing some of the proposals
 - a concern about the level of funding available and the geographical spread of accommodation units
 - anxiety about the impact on wider society should street homelessness increase
 - a need for recognition that the agenda connects with duties to reduce child poverty.

Action Taken in Response to Consultation Analysis

7. All of the responses have been assessed and where possible changes have been made to the strategy, action plan (attached as **Appendix 4**) and equality assessment to take the comments into account. Where responses were contradictory a further assessment was undertaken to see whether any particular response had more validity.
8. Specific actions taken following an analysis of responses include:
 - inclusion within the Equality Impact Assessment and Action Plan of measures to ensure that there is monitoring of the response provided and outcomes achieved for groups with protected characteristics
 - actions to audit the use of measures under the Mental Capacity Act (2005)
 - clarification that 10% of the original budget available will be retained for homelessness services for the 22-25 age group who make up less than 13% of those in the current young people's supported accommodation. This is in addition to a range of commissioned supported accommodation services for those aged over 18 and additional grant funding to individual providers of homelessness support

- agreement of transition funding and a support package to enable the Mansfield YMCA, where support is to be decommissioned, to establish a new operating model as an independent provider so as to keep available 26 units of accommodation for 16 to 25 year olds
- actions to promote children's service pathways and the role of different elements of children's services with supported accommodation providers
- changes to the proposed 'estate' of supported accommodation, including an additional investment of £450,000 of re-profiled spending to increase capacity and support hours where needed
- recognition within the Strategy of the links to the child poverty agenda.

Other Options Considered

9. As the process for agreeing the Strategy was agreed by Cabinet on 14 March 2012, it is not necessary to consider other options.

Reason/s for Recommendation/s

10. Having taken into account a wide range of views in the review of the original Strategy and commissioning proposals, the revised Strategy represents the most effective way to respond to the issue of youth homelessness in coming years within the resources available.

Statutory and Policy Implications

11. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Implications for Service Users

12. Service users have been consulted in the development of this Strategy and the resulting commissioning proposals. The proposals change the availability, location and style of delivery of some services. The Strategy has been formulated to maximise the outcomes for service users within available resources.

Financial Implications

13. The budget for commissioning supported accommodation is constituted from former Supporting People funding and finances within Children, Families and Cultural Services. Following the consultation an additional amount of £450,000 has been found from Supporting People reserves to support this agenda over the next three years. The revised budget available is presented below:

	2012-13 £	2013-14 £	2014-15 £
Total budget	1,990,255	1,803,001	1481,384

14. It is proposed to make £32,000 of transition funding available to Nottinghamshire YMCA in 2012-13 to support a new business model for the 26 unit premises in Mansfield. The finance needed for this will be secured from reserves held within the Adult Social Care, Health and Public Protection Department.

Equalities Implications

15. As part of the process of making decisions and changing policy, public authorities are required by law to think about the need to:
- Eliminate unlawful discrimination, harassment and victimisation
 - Advance equality of opportunity between people who share protected characteristics (as defined by equalities legislation) and those who do not
 - Foster good relations between people who share protected characteristics and those who do not
16. Equality Impact Assessments (EIAs) are a means by which a public authority can assess the potential impact that proposed decisions / changes to policy could have on the community and those with protected characteristics. They may also identify potential ways to reduce any impact that a decision / policy change could have. If it is not possible to reduce the impact, the EIA can explain why. Decision makers must understand the potential implications of their decisions on people with protected characteristics.
17. An EIA has been undertaken and is available as a background paper. Decision makers must give due regard to the implications for protected groups when considering this report.

Crime and Disorder Implications

18. The Strategy and commissioning proposals take account of the Council's duties to reduce crime and anti-social behaviour and to prevent youth offending and re-offending under the Crime and Disorder Act (1998). It also includes measures to ensure the Local Authority can respond to measures within the Legal Aid, Sentencing and Punishment of Offenders Act (2012) on the transfer of responsibilities for funding juvenile remands through the creation of specific supported accommodation provision for young people on bail.

Safeguarding of Children Implications

19. This Strategy has been formulated with a specific aim of safeguarding young people through preventing homelessness and the improvement of services to children aged sixteen and seventeen years who find themselves in housing need. Findings from Serious Case Reviews from across England and Wales have been utilised in developing this strategy.

RECOMMENDATION/S

That:

- 1) the proposed revised Youth Homelessness Strategy and supporting commissioning proposals be approved
- 2) a progress report be brought back to Policy Committee in six months.

Councillor Lynn Sykes

Chairman of the Early Years and Young People's Sub-Committee

For any enquiries about this report please contact:

Laurence Jones

Group Manager, Targeted Support and Youth Justice

T: 0115 9773625

E: laurence.jones@nottsc.gov.uk

Constitutional Comments (LM 28/06/12)

20. The Policy Committee has delegated authority within the Constitution to approve the recommendations in the report.

Financial Comments (NDR 27/06/12)

21. The financial implications are set out in paragraphs 13 and 14 of the report.

Background Papers

Equality Impact Assessment

Commissioned Provision Maps for 2012, 2013 and 2014

Report to Early Years and Young People's Sub-Committee on 3 July 2012: 'Youth Homelessness Strategy'

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

Electoral Division(s) and Member(s) Affected

All.

C0040

A strategy to prevent and tackle youth homelessness in Nottinghamshire

2012 - 2015

Executive Summary

In June 2011 Nottinghamshire County Council approved reductions to the Supporting People budget, which pays for support for vulnerable people in housing need. Included within these vulnerable groups were young people, defined as those aged between sixteen and twenty five years of age, and teenage parents. Amongst the proposals was a commitment to produce a Youth Homelessness Strategy following a review of existing priorities and the effectiveness of current provision.

This Strategy contains significant detail on the approach we are proposing to youth homelessness and is supported by a clear commissioning plan and proposals to strengthen joint working between agencies. **Our vision is to improve the life chances, life changes and life choices of young people in Nottinghamshire** who are threatened with or experiencing homelessness, and ensure all young people have the opportunities they need to make a successful transition to adulthood and independence, **by providing a range of support services most appropriate to their needs and circumstances.**

The key aims of this strategy are to:

- **Intervene as early as possible** to prevent housing instability and homelessness from occurring or persisting
- **Ensure service pathways are planned and integrated** to better meet the needs of young people experiencing housing instability and homelessness
- **Safeguard young people who are at risk** because of housing instability or homelessness
- **Improve transitions to adulthood and independence** for young people at risk of becoming entrenched in a cycle of housing instability and homelessness
- **Make better use of available resources** to maintain a sufficient range of accommodation-based services with support for young people experiencing housing instability and homelessness by negotiating better value for money with service providers and remodelling existing service provision

There are a number of key changes to our current approach which run as a theme throughout the strategy and which have a specific rationale. These are described below.

- **A change in the definition of young people** – Supporting People defined “young people” as those between sixteen and twenty-five years of age. The Strategy proposes a new definition of sixteen to twenty-one years of age. This new definition would include those homeless sixteen and seventeen year olds, for whom the County Council has a statutory

- **Shared operational responsibility** – Homeless sixteen and seventeen year olds have been historically dealt with by Reception and Assessment Teams within Children's Social Care (CSC), on occasion distracting social workers from pressing child protection matters and risking leaving young people without a service to meet their needs. Following a successful pilot in North Nottinghamshire, CSC will share this responsibility with the recently formed Targeted Support Service, which will contain dedicated accommodation staff. This will help protect social work time whilst ensuring that the Council's legal obligations for the initial assessment of homeless children are met. Targeted Support will also be working with a large cohort of vulnerable young people and will act early to reduce the risks of homelessness, in particular through a strong commitment to family work and the training of staff in mediation.
- **A reconfigured estate of supported accommodation for homeless young people** – Historically young people's housing units have taken young people across the age range of the Supporting People definition. This has created concerns about safeguarding, particularly when those who are legally "children" are placed with adults who can present significant risks or negative influence. The proposal is to have units dedicated to sixteen and seventeen year olds, to protect those most vulnerable and with short term assessment beds to support a commitment to eliminate the use of bed and breakfast accommodation for this age group. There will also be units to support sixteen to twenty-one year olds with different levels of support dependent upon need. Within the estate there would also be distinct provision for care leavers (to support exit from higher cost care placements), teenage parents and bail beds (to mitigate against the future impact of the transfer of custodial remand costs from central government to the Council).
- **A new pooled budget arrangement and commissioning accountability** – An agreement has been reached for the transfer of the budget for young people's supported accommodation from Adult Social Care, Health and Public Protection (ASCHPP) to Children, Families and Cultural Services. This funding will continue to be reduced in line with the Supporting People business case until 2014-15 and 10% will be retained by ASCHPP to make provision for the twenty-two to twenty-five age group no longer covered by the young people's agenda. The transferred Supporting People funding will be pooled with £150,000 of Children's Social Care revenue funding to provide a commissioning budget. The responsibility for commissioning supported accommodation for young people will also transfer from ASCHPP to the Group Manager for Targeted Support and Youth Justice.
- **A challenge to improve quality and reduce cost** – At present hourly costs for support vary considerably between providers. We plan to provide

- **A range of floating support** – Supporting People, through ASCHP, will continue to fund an all-age floating support service for people in their own tenancies. For young people this will be supplemented through support system in Targeted Support and Children's Social Care, for example in respect of care leavers.

Background to development of the strategy

This is Nottinghamshire County Council's (NCC) first Youth Homelessness Strategy. It has been produced in consultation with a range of stakeholders from the statutory and voluntary sectors to ensure a **consistent** approach to preventing and responding to youth homelessness throughout the county, and ensure that when young people do leave home this is done in a **planned** way.

From April 2012 Children, Families and Cultural Services (CFCS) will assume responsibility for the commissioning of youth homeless services in Nottinghamshire through the Targeted Support Service (TSS). This function was previously undertaken by the Supporting People (SP) Partnership within Adult Social Care and Health (ASCH).

The key aims of this strategy are to:

- **Intervene as early as possible** to prevent housing instability and homelessness from occurring or persisting
- **Ensure service pathways are planned and integrated** to better meet the needs of young people experiencing housing instability and homelessness
- **Safeguard young people who are at risk** because of housing instability or homelessness
- **Improve transitions to adulthood and independence** for young people at risk of becoming entrenched in a cycle of housing instability and homelessness
- **Make better use of available resources** to maintain a sufficient range of accommodation-based services with support for young people experiencing housing instability and homelessness by negotiating better value for money with service providers and remodelling existing service provision

This strategy has been produced at a time of significant economic and social change. Most contributors to this strategy, academics and service providers anticipate a rise in levels of homelessness over the life of this strategy; 2012 to 2015. Faced with the prospect of rising demand and diminishing resources, we need to strengthen our approach to tackling youth homelessness in Nottinghamshire.

Early intervention and the **prevention** of homelessness are central to the success of this strategy which recognises that, in most cases, staying at home is the most suitable option for young people, especially those under 18 years of age, unless the risk of harm would make it unsafe for them to do so.

This strategy provides a framework for all agencies and partners to develop and deliver services which focus on early intervention, prevention and assisting young people to remain at home when it is safe and possible for them to do so, or ensure

planned moves to suitable accommodation with packages of support that meet identified needs.

Vision

Our vision is to improve the life chances, life changes and life choices of young people in Nottinghamshire who are threatened with or experiencing homelessness, and ensure all young people have the opportunities they need to make a successful transition to adulthood and independence, **by providing a range of support services most appropriate to their needs and circumstances.**

Nottinghamshire County Council believes that in the majority of cases, remaining within the family home until ready for independent living offers the best chance for young people to make a successful transition to adulthood.

The average age of a young person leaving the family home in UK is twenty-two, and they return home for short periods an average of three times before permanently leaving the family home¹. There is an established body of evidence that demonstrates the impacts of not being able to cope alone at an early age².

Life chances for young people who experience housing instability and homelessness are poor³. They are less resilient to managing **life changes**⁴, and more likely to make poor **life choices**⁵ than young people who benefit from living in a stable and supportive home environment⁶. Remaining within the family home, where it is safe and possible to do so, for as long as possible is generally in the best interests of most young people⁷.

Legal & Regulatory compliance

This strategy has been produced with due regard to the following legislation and statutory guidance:

- The Children's Act (1989)
- The (England) Children Leaving Care Act (2000)

¹ ONS Social Trends 2010: <http://www.statistics.gov.uk/hub/index.html>

² Shelter, Improving outcomes for children and young people in housing need (2009)

³ Decade of progress?, Joseph Rowntree Foundation/Centrepoint (2008)

⁴ Stein, M. Overcoming the Odds, Joseph Rowntree Foundation (2008):

<http://eprints.whiterose.ac.uk/4159/1/ResearchReview.pdf>

⁵ Arnall, E. Accommodation Needs and Experiences, Youth Justice Board (2007):

<http://www.yjb.gov.uk/publications/Resources/Downloads/Accommodation%20Needs%20and%20Experiences%20-%20Full%20Report.pdf>

⁶ Too much, too young

⁷ CLG, Homelessness Code of Practice for Local Authorities, section 12.7 (2006)

- The Care Planning, Placement and Case Review (England) Regulations and Statutory Guidance (2010)
- DCSF statutory guidance on the Sufficiency of Securing Sufficient Accommodation for Looked After Children (2010)
- The Housing Act (1996)
- The Homelessness Priority Need for Accommodation (England) Order (2002)
- The Homelessness Code of Guidance for Local Authorities (2006)
- The Homelessness Code of Guidance for Local Authorities: supplementary guidance on intentional homelessness (2009)
- DCSF/DCLG Guidance on the provision of accommodation for 16/17 year old young people may be homeless and/or require accommodation (2010)
- Mental Capacity Act (2005)
- Child Poverty Act (2010)

National context

Few will disagree that we face a challenging few years ahead of us. Young people in particular face some huge challenges nationally:

- Rates of youth unemployment (16-24) are at their highest level since comparable records began in 1992; over 1 in 5 (22%)⁸
- There is an acute crisis of affordable housing across the UK and standards in living conditions are polarising⁹
- Over the last 20 years the ratio of UK average house prices to UK average incomes has nearly doubled from 3.0 to 5.5 times income¹⁰
- There are now almost as many over 50s who are second home owners than there are first-time owner occupiers aged 16-24 year old, and a third of the UK's homes are classified as being under-occupied¹¹
- Young people face a number of benefit restrictions, most under-18s cannot claim certain benefits and housing benefit rates are capped at a 'shared room

⁸ ONS, [Labour Market Statistics January 2012](#).

⁹ Shelter, [The Housing Crisis](#)

¹⁰ ONS/Nationwide [ONS UK house price to earnings ratio](#) cited on This Is Money

¹¹ The Intergenerational Foundation, [Hoarding of Housing: the intergenerational crisis in the housing market](#)

rate' for under-25s renting in the private sector¹² leaving many facing significant shortfalls to make up from other sources of income

- Two-thirds of all new households aged 16-24 were created in the private rented sector in 2008/9¹³
- Recent and proposed changes in welfare benefits are likely to have a more adverse impact on young people than some other groups¹⁴
- Levels of homelessness across the UK are increasing¹⁵

Youth homelessness is not a new problem. It is an entrenched and complex social phenomenon. Levels have remained stubbornly persistent over the last decade despite changes in legislation, significant investments, and improvements to service provision¹⁶.

A lot of research has been done to understand the causes of youth homelessness. This often seeks to identify 'risk factors' that lead to and 'triggers' that commonly cause homelessness. Those most commonly highlighted in the research are:

- family disputes and breakdown
- a care history
- sexual or physical abuse in childhood or adolescence
- offending behaviour and/or experience of prison
- lack of social support networks
- debts, especially rent or mortgage arrears
- causing nuisance to neighbours
- drug or alcohol misuse
- school exclusion and lack of qualifications
- mental health problems
- poor physical health

¹² DWP, [Housing Benefit Regulations](#)

¹³ DCLG, [English Housing Survey 2008-9](#)

¹⁴ DWP [Welfare Reforms Impact Assessments](#) – the ESA, IS, HB & UC impact assessments all cite young people as being at particular risk

¹⁵ [CLG Statutory homeless acceptances](#) have risen in 7 of the last 8 quarters, CLG,

¹⁶ Joseph Rowntree Foundation, A decade of Progress?

Statutory youth homelessness – the national picture

In 2010-11, young people aged 16-24 represented 37% of all applicants accepted as statutorily homeless and owed a full duty.¹⁷ Nationally, two-thirds of young people accepted as being homeless and owed a full duty are female. Young people accepted as homeless aged 16-17 year olds are five times more likely not to be in employment, education or training than young people in the general population (57% as compared with 11%), and live on very low incomes (median of £45 per week, excluding Housing Benefit).

For young people accepted as homeless 16-17 year olds, relationship breakdown (almost always with parents or step-parents) is the overwhelming reason for applying as homeless (70 per cent). Two in five of young people (41 per cent) affected by relationship breakdown with their parents or step-parents reported that violence had been involved¹⁸.

Such statistical evidence has led the Department for Communities and Local Government to conclude:

“This is an extremely vulnerable group, in need of extensive support, for whom (supported) temporary accommodation could be viewed as a helpful transitional intervention”¹⁹

National Policy Drivers

Case Law

There have been a number of court cases relating to the legal rights of homeless young people and the interaction between different pieces of legislation. Most relevant is the House of Lords ruling in *G v Southwark* which is referred to below.

Serious case reviews (SCRs)

The consequences of failing to protect and promote the welfare of young people can have devastating and tragic consequences. A review by OfSTED of 482 SCRs²⁰ found two groups at greatest risk – under-1s and over-14s. For this older group, housing instability and homelessness were common factors in the cases.

In particular, the review highlights the consistent failure of various statutory agencies to recognise teenagers as children in need. One case that exemplifies this

¹⁷ DCLG, [Statutory Homeless data Table 771](#)

¹⁸ Statutory Homelessness experiences of homeless families and 16/17 year olds, 2008

¹⁹ *Ibid.*

²⁰ Age of concern: learning lessons from serious case reviews, <http://www.ofsted.gov.uk/resources/ages-of-concern-learning-lessons-serious-case-reviews>

point is from Cornwall involving a young woman aged 17 who had been rough-sleeping who was found alone, dead from an overdose.

The young woman was known to both children's services and the housing authority. She was assessed as not meeting the threshold for accommodation under section 20 of the Children's Act, and to be intentionally homeless under the Housing Act. In particular the CSR highlighted:

- Care plans which fail to identify outcomes
- A reluctance (from statutory agencies) to take account of past events
- A 'gate-keeping' approach to taking referrals
- Indistinct use of language
- Confusion about thresholds – despite the existence of clear guidance
- A lack of common understanding about core assessments
- A failure to conduct risk analysis
- A lack of understanding of the dangers in living in families where alcohol and domestic abuse are problematic – despite easily available research
- A failure to appreciate the dangers of being homeless
- An inadequate reliance on "self-determination" – usually as a justification for a lack of action
- Failure to identify victims of domestic abuse

DCFS/CLG statutory guidance for 16/17 year olds presenting as homeless

Following the House of Lords ruling in *G v LB Southwark* in 2009 all 16-17 year olds presenting as homeless to a local authority were confirmed as being owed a primary duty under the Children's Act 1989. This means that when a young person of this age presents as homeless to a Housing Authority (the District/Borough Council) they should be provided with temporary accommodation under housing legislation and must be referred to Children's Services for assessment under the Children's Act 1989. If they present to Children's Services first they should be provided with accommodation under s20 of the Children's Act whilst their status is determined. To ensure that homeless 16-17 year olds do not fall between these two services, local authorities are advised in this statutory guidance to have a joint protocol which sets out how each department will work together and conduct a joint assessment.

No second night out

The coalition government is committed to reducing rough sleeping to as close to zero as possible by April 2012, ensuring that no-one has to spend a second night sleeping rough.

National Youth Homelessness Scheme (NYHS)

This was established in 2010 by the DCLG 'post-Southwark'. The scheme brings together a coalition of leading youth homeless charities, and seeks to act as a knowledge base for local authorities and their partners in preventing and tackling youth homelessness.

We have used the NYHS models for tackling youth homelessness and developing an accommodation and support pathway to outline NCCs strategic approach and establish future commissioning priorities.

The Local Context

It is not possible to get a complete and accurate number of the total number of individual children and young people who become homeless; either at the national or local level. By our estimates there were at least 289 young people aged 16-24 who were accepted as being homeless, in priority need, and owed a full duty in 2010-11. At least 33 of these were aged 16/17 years old. In addition, there were at least 129 individuals aged 16/17 who entered Supporting People short-term supported accommodation services. The number of 16/17 year olds entering accommodation based services has remained at a similar level for the last 8 years. Over the same period, the number of young people aged 18-24 has continued to rise, with the numbers increasing by 28% between 2007-8 and 2010-11.

The demand for housing support amongst young people aged 16-24 who are homeless in Nottinghamshire presents a significant challenge. NCC is not a Housing Authority and we must prioritise the use of limited resources towards those in greatest need.

Local Policy Drivers

This strategy represents part of NCC's continuing commitment to investing in children and young people who are in greatest need, and seeks to compliment the Nottinghamshire Child and Family Poverty Strategy 2011.

Early Intervention

The development of effective early intervention and prevention services is critical at a time of reducing resources across the public sector and rising demand for specialist services.

More effective early intervention and prevention services will result in fewer inappropriate referrals to specialist services and in children, young people and their families receiving the support required much earlier and at a reduced cost. NCC's definition of early intervention is:

‘Intervening early and as soon as possible to tackle problems emerging for children, young people and their families, or with a population most at risk of developing problems. Early intervention is a process and may occur at any point in a child or young person’s life.’

Our approach to developing this youth homeless strategy will ensure that children, young people and their families will receive the most appropriate support to meet their needs at the earliest opportunity, in order to ensure better outcomes and the cost effective delivery of services. The services delivered through the Accommodation & Support Pathway in this strategy will sit within Tier 3 of NCC’s Pathway to Provision from our Early Intervention Strategy.

Nottinghamshire Joint Working Protocol for Young People Leaving Care and homeless 16/17 year olds

This protocol was jointly developed before the Southwark Ruling and has been reviewed since to ensure compliance with statutory guidance issued. NCC has been piloting a new way of working in Bassetlaw and Newark by ensuring that all 16/17 year olds are referred to TS in the first instance so that their status can be determined and needs met by the most appropriate agency. NCC intends to roll-out this way of working across Nottinghamshire to ensure that TS is the point of First Response within our Accommodation & Support Pathway for young people aged 16/17 who may be homeless. The District/Borough Housing Options services will fulfil this role for those aged 18/21.

Nottinghamshire County Joint Strategic Needs Assessment for Children and Young People (September 2010)

Published by NCC and Health, this document outlines joint commitments to promoting and advancing the health and wellbeing of children and young people in Nottinghamshire in line with requirements described in the Local Government and Public Involvement in Health Act (2007). This strategy acknowledges the problem and level of youth homelessness in the county, highlights the significance of the Southwark ruling for CFCS, and that historically the responsibility for under-18s has been a grey area leading to many ‘falling through a gap between children’s and housing services.’

Children, Families and Cultural Services Business Plan 2011-14

This sets out how CFCS will work to achieve its vision of making Nottinghamshire a place where children are safe and happy, where everyone enjoys a good quality of life, and where everyone can achieve their potential. Developing the role of the Targeted Support service to deliver integrated support pathways is a key objective within this plan, and the remodelling of these services is consistent with this.

Summary of statutory duties of Children's and Housing services to young people who may be homeless

As a two-tier local authority area, the county council has statutory responsibility for providing children's services and the district and borough councils are housing authorities with responsibility for homelessness. Historically this has led to confusion over who is responsible for what and when. The following section provides an overview of statutory responsibilities towards homeless young people from children's services and housing authorities.

Status	Children's services obligations	Housing authority obligations
16/17 homeless, not previously known to children's services	Duty to assess the needs of the child (s17), and to provide accommodation (s20) for a child in need aged 16 or over whose welfare is likely to be seriously prejudiced if they are not accommodated	Duty to assess status (s184) and provide interim accommodation (s188) pending an assessment by Children's Services. Duty to accommodate if offer of s20 accommodation is declined
'Relevant children' aged 16/17	Duty to provide accommodation for an 'eligible child' (care leavers aged 16-17 years unless they are satisfied that his/her welfare does not require it	No duty to secure accommodation
'Former relevant Children' aged 18-21	Duty to provide assistance, including assistance with accommodation, to the extent that his/her welfare requires it	Duty to secure accommodation if they become homeless through no fault of their own and they are vulnerable as a result of having been in care (s193)
'Former relevant Children' aged 22-24	Duty to provide continuing assistance if they remain in education or training	Duty to secure accommodation if they become homeless through no fault of their own and they are vulnerable as a result of having been in care (s193)
18-24, not previously known to children's services	No duty to provide assistance or accommodation	Duty to assess applicants need/status under (s184), and secure interim accommodation (s193) if no other suitable accommodation is available (s197) repealed, new provisions in Localism Bill to discharge duty with offer of private rented)
'Intentionally homeless' aged 16-17, unknown or known	Duty to assess the needs of the child (s17) if unknown, and to provide accommodation (s20) for a child in need aged 16 or over whose welfare is likely to be seriously prejudiced if they are not accommodated	No duty to permanently re-house. Duty to secure interim accommodation for a reasonable period & provide advice/ assistance to find own accommodation (s188) Refer to Children's services (with consent)

NCCs response to preventing and tackling youth homelessness in Nottinghamshire

A range of stakeholders were engaged in developing NCCs response to preventing and tackling youth homelessness in Nottinghamshire. NCCs response has been developed in line with the five steps identified by the National Youth Homelessness Scheme²¹. These are:

1. **Early Prevention** - supporting children, young people and their families in planning transitions to adulthood and independence
2. **First Response** - preventing homelessness when young people present to services in crisis
3. **Accommodation and Support Pathway** - providing effective and supportive pathways to independence for young people accommodated through the strategy
4. **Prevent the next generation of rough sleepers and repeat homelessness** - ensuring 'no second night out' for young people who are 'sleeping rough', and preventing young people from becoming 'cyclical housing instability'
5. **Longer Term Options** - enabling young people who have been homeless but are ready for independence to access sustainable accommodation in the social or private housing sectors

Early prevention

Last year, at least 129 individuals aged 16/17 entered Supporting People accommodation based services. We must do all we can to stop young people from leaving home too early or becoming homeless.

Homelessness is not just a housing problem²² – it is often the end product of various other factors experienced by young people. Most young people who become homeless, or are at risk of homelessness, have needs which could have been addressed before they developed into crises.

A key priority for this strategy is to develop and implement a model for the early identification of young people at risk of becoming homeless in Nottinghamshire so that effective packages of support can be provided, for the individual and/or family, to address risk factors associated with homelessness before it occurs. An effective referral pathway also needs to be established between key stakeholders; possibly through the Common Assessment Framework (CAF) process.

²¹ CLG, Policy briefing 18, Tackling Youth Homelessness (2008):
<http://www.communities.gov.uk/documents/housing/pdf/381492.pdf>

²² Shelter, More than a Roof

Both the national research and our consultation with young people locally support the use of Peer Mentor programmes within schools to communicate the realities of leaving home early or becoming homeless.

A key priority for this strategy is to develop appropriate materials to communicate key messages about leaving home and homelessness amongst 11-15 year olds in schools, youth centres and other appropriate locations.

First response

Nottinghamshire is a non-metropolitan or two-tier authority area. Providing children's services is a duty of the county council. The district and borough councils are the local housing authorities who have responsibility for assessing homeless applicants and providing temporary accommodation in some circumstances. This can cause problems when young people present to one or more agency. When young people do present for services as a result of housing crisis, it is vital that this contact is coordinated. At a time when resources are diminishing, we must do all we can to remove duplication in assessments, ensure service provision is integrated, and that young people are directed towards the agency or service that can best meet their identified needs.

Our consultation with young people confirms that in many cases the reality of leaving home and finding somewhere else to live didn't really sink in until it was too late. A number of the young people we spoke to said they would have liked to have had the option of accessing a family mediation or resolution service before ending up 'stuck' in temporary accommodation. Several spoke of the strain or damage caused to relationships with family and friends by not resolving concerns or disputes earlier.

The availability of mediation services for young people and their family to resolve disputes that may end in housing crisis is variable across the county. A key priority for this strategy is to ensure that there is access to mediation services in all areas. These should be provided by an independent, neutral third party who has no stake in the outcome of the mediation.

Providing an enhanced housing options service for people seeking assistance with housing problems has been a priority of CLG in promoting effective homelessness prevention for the past few years²³. This emphasises the need for housing services to undertake holistic assessments of need and provide personalised housing options advice and support to tackle the roots causes of housing need. Nottinghamshire benefits from having two councils that CLG has recognised as being trailblazers and beacons of excellence in this area; Broxtowe and Mansfield.

²³ CLG, Expanding choice, addressing need, 2008:

<http://www.communities.gov.uk/publications/housing/expandingchoice>

A key priority for this strategy is to promote and share good practice in tackling youth homelessness between the local authority agencies and areas within the county.

We will work closely with each of the district and borough councils to routinely offer mediation and parenting support services for all 16/17 year olds presenting as 'parental exclusions' (except when there is a risk of abuse or violence).

Nottinghamshire also benefits from having an established joint working protocol between the County Council's Children's services and the District/Borough Housing services for managing presentations from young people who may be homeless aged 16/17 year olds or care leavers. There is a need to resolve the ongoing concerns of some partners to ensure the protocol works as intended.

Another key priority for this strategy is to develop and implement the use of a joint Housing and Support Needs Assessment framework for use between Children's and Housing services. This will include a matrix outlining the criteria and threshold for accessing the range of services identified within our Accommodation & Support Pathway.

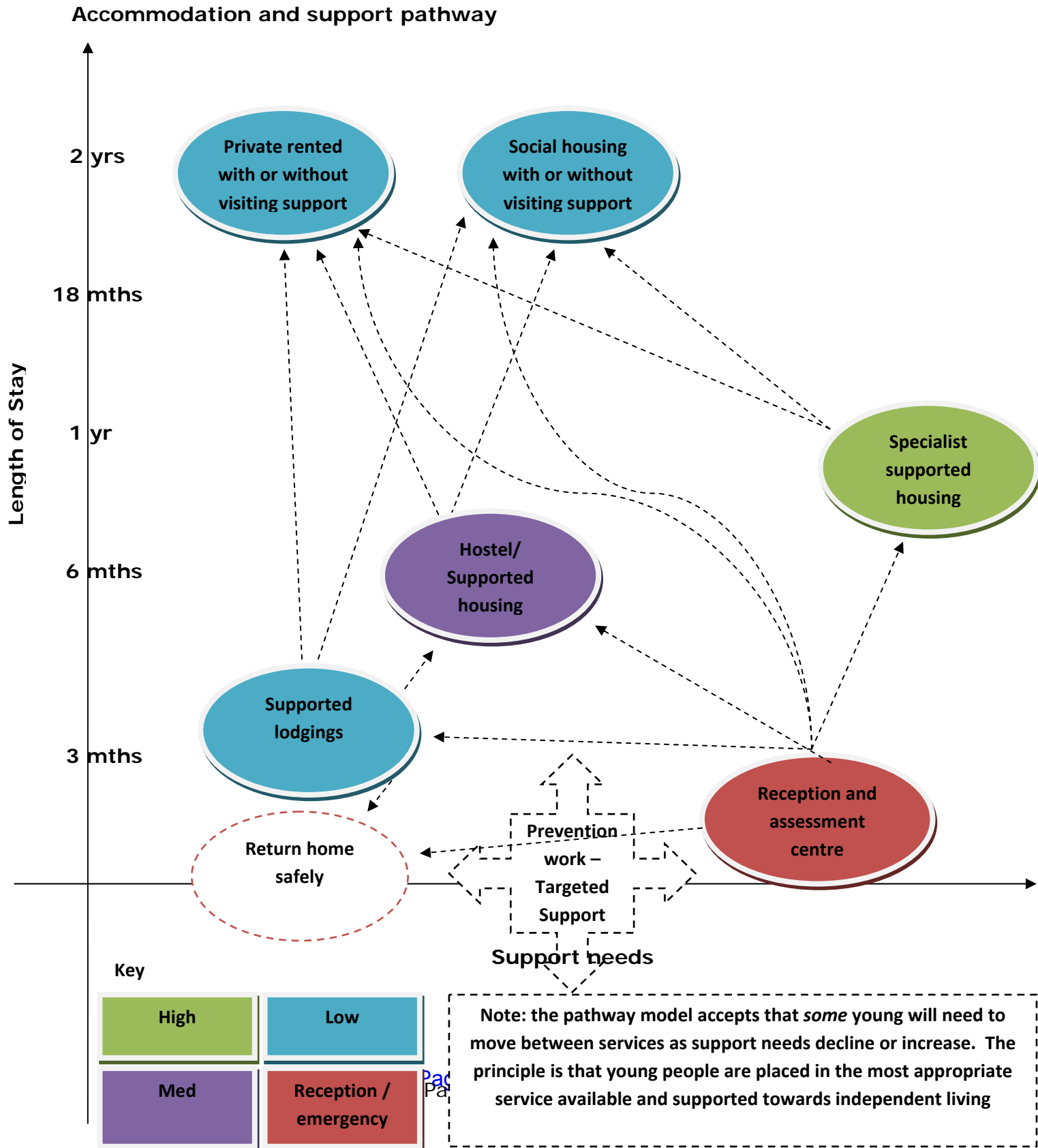
Accommodation and Support Pathways

Where the prevention of homelessness is not possible we will provide a range of supported housing and housing related support services to meet different needs. NCCs Accommodation and Support Pathway outlined below.

Our accommodation and support pathway will include:

- Prevention services: Targeted Support including mediation and support so young people can live with their families whenever it is safe to do so.
- Quick access/short stay accommodation: In settings with appropriate support for those who are vulnerable during assessment periods and whilst longer term plans are agreed.
- Shared accommodation with onsite support for those with a higher level of need.
- Self contained and shared accommodation with visiting support for those who are more able or are ready to move on from settings with higher levels of support
- Self contained accommodation and a range of onsite or visiting services including education and training.
- Supported lodgings, where young people reside with a family.

- Private or social rented housing with visiting support (resettlement & sustainment services) using floating support workers.



These services will focus on meeting the needs of:

- Homeless 16 and 17 year olds
- Care Leavers
- Teen parents identified at risk
- Young people aged 16-21 who have a low level learning disability but do not meet the threshold for CLDT services
- Young offenders in contact with, or known to, the Youth Justice Service (YJS) including those on bail
- Young people aged 18-21 who are vulnerable and whose welfare would be seriously prejudiced if accommodation were not provided

We need to ensure that the more intensive, higher need, supported housing services are reserved for young people in greatest need. Consultation with statutory stakeholders, and analysis of the source of referrals into SP services over the last 8 years, confirms that too many young people are entering high support services without being known to any statutory agency at either the county or district level. Ensuring all referrals go through the Targeted Support or LA Housing Options teams will ensure that young people are being placed in the most appropriate accommodation available to meet their needs.

A key aim of this strategy is to ensure that existing service provision is remodelled to meet current and future needs. In particular, we will expand the amount of short-term temporary accommodation that is available in each locality. This will be done by negotiating with service providers to remodel existing service provision where possible. We will use this accommodation both as 'respite' whilst ongoing prevention work is undertaken and, where prevention is not possible, as the first stage in our Accommodation Pathway.

Preventing rough sleeping and cyclical housing instability

Rough sleeping

Young people sleeping rough have similar complex and multiple needs to their older peers. As with the other causes of youth homelessness, young people who sleep rough require strategies to prevent and tackle their particular needs at a time appropriate to them.

The main causes for young people rough sleeping are:

- Parental eviction
- Eviction from supported housing
- Offending
- New relationship/relationship breakdown
- Substance misuse

One of the largest causes of rough sleeping amongst young people is after being evicted from temporary accommodation with little or no notice²⁴. An eviction protocol was developed by SP²⁵ with service providers operating licence agreements. Such forms of tenure are exempt from the legal process outlined in part 3 of the Housing Act 1996. As a result, there is little oversight to ensure a due process is being followed, and practice varies considerably.

Some providers do an excellent job at managing identified challenging behaviours following referral, whilst others struggle. Prior to issuing a 'notice to quit', usually 28 days, or evicting someone, service providers should convene a multi-agency case conference with the local housing authority to see what can be done to prevent eviction and avoid rough sleeping. This does not always happen and the number of young people being evicted from services is of concern in some areas.

A key priority for this strategy is to review the 'evictions protocol' and conditions contained within licence agreements in supported housing services. We need to ensure that TSS is aware of warnings issued and possible evictions, so that prevention work can be undertaken. We will also consider the use of Payment by Results to achieve improved outcomes in this area where necessary.

Cyclical housing instability

A key challenge for all partner agencies is to prevent repeat incidence of housing instability and homelessness. Preventing a cycle of housing instability and homelessness will improve life changes, changes and choices for young people and help to prevent a new generation of people who experience cyclical housing instability at huge costs to themselves, their families and communities, and the public purse.

Ensuring young people who experience homelessness have an integrated pathway plan, which includes an assessment of both their practical and emotional readiness to live independently; will enable them to get the assistance they need to make a smooth transition to adulthood and independence.

²⁴ CLG, Experiences of homeless families and young people

²⁵ Good practice guidelines for tenancy management

<http://www.nottssupportingpeople.org.uk/documents/list/good-practice>

Young people need to be assisted and provided with housing stability where this have been absent in their lives to prevent a long-term cycle housing instability. Assessing the sustainability of accommodation placements and longer term housing options, and preventing repeat placement breakdown and tenancy failure, will be a key priority for this strategy.

Longer term options

The availability and affordability of longer term housing options for young people on low incomes is limited throughout the county, but it is more acute in some areas than others. Most districts report a shortage of 1 bed properties in their area, and demand for this type of property is likely to increase as the government takes steps to address under-occupation in the social rented sector.

Helping young people to get ready for independent living is a key priority for this strategy. When homelessness cannot be prevented young people are likely to be placed in one of the accommodation types from our pathway. All of the accommodation-based services within our pathway will provide a temporary housing option with the lengths of stay ranging from 12 weeks to 2 years.

There are historic problems associated with the availability and affordability of suitable long-term 'move-on' options for young people residing in Supported Housing. A lot has been done to try and improve the situation in recent years, including:

- the development of a Move-on Protocol & Plan (MOPP) to identify how many people in supported housing are 'ready to move', barriers to move-on and what type of housing are needed where
- the district and borough councils providing discretionary increases in points awarded through Choice-Based Lettings for young people who have completed a programme of support, agreements to write-off previous rent arrears after a defined period of regular repayments, and providing Rent Deposit Schemes to make better use of the private rented sector
- service providers taking a more active role in assisting individuals to make applications for re-housing and ensuring that they can demonstrate a readiness to live independently

We need to build on the good practice and partnership working that has developed in SP over the last 8 years between the district and borough councils, supported housing providers, and local RSLs and work with them to see what else can be done to increase the supply of suitable accommodation, such as bringing long-term voids

back into use, and considering acting as a Guarantor for young people who are first time tenants.

A key priority for this strategy is to ensure every young person placed in second stage accommodation-based services receives a holistic and personalised housing needs assessment and support plan within 4 weeks of moving into a service. This needs to address both the practical and emotional readiness of the young person to manage a tenancy successfully. Move-on plans need to be actively managed and reviewed with appropriate frequency.

Future service provision and funding

The majority of accommodation-based services for homeless young people have been commissioned through the Supporting People team within Adult Social Care & Health since 2003. From **April 2012**, this responsibility will transfer to Children, Families & Cultural Services through Target Support. The majority of these services are of high quality and generally service providers achieve good outcomes in working with young people. A total of **224 units** of accommodation with support will transfer in **October 2012**.

The inherited budget proposal for these services will be supplemented with £150,000 from existing children's services budgets. Following the consultation an additional amount of £450,000 has been re-designated from related areas of council business to support this agenda over the next three years. The revised budget available is presented below:

	2012-13	2013-14	2014-15
Total budget	£1,990,255	£1,803,001	£1,481,384

NCCs commissioning priorities for accommodation-based services from 2012-15 are outlined in Appendix 1.

NCC will seek to achieve its commissioning priorities within the committed budget allocation by price challenging existing service providers and negotiating the remodelling of existing service provision where possible. If this is not possible or new services are required we will invite tenders from existing service providers, but we reserve the discretion to include other providers with successful track records in any future tendering.

NCC intends to tender supported accommodation based services for young people during 2013, with new contracts anticipated to commence in April 2014.

A strategy to prevent and tackle youth homelessness in Nottinghamshire 2012 – 2015: Executive Summary

Our vision is to improve the life chances, life changes and life choices of young people in Nottinghamshire who are threatened with or experiencing homelessness, and ensure all young people have the opportunities they need to make a successful transition to adulthood and independence, **by providing a range of support services most appropriate to their needs and circumstances.**

In June 2011 Nottinghamshire County Council approved reductions to the Supporting People budget, which pays for support for vulnerable people in housing need. Included within these vulnerable groups were young people, defined as those aged between sixteen and twenty five years of age, and teenage parents. Amongst the proposals was a commitment to produce a Youth Homelessness Strategy following a review of existing priorities and the effectiveness of current provision.

This Strategy contains significant detail on the approach we are proposing to youth homelessness and is supported by a clear commissioning plan and proposals to strengthen joint working between agencies. **Our vision is to improve the life chances, life changes and life choices of young people in Nottinghamshire** who are threatened with or experiencing homelessness, and ensure all young people have the opportunities they need to make a successful transition to adulthood and independence, **by providing a range of support services most appropriate to their needs and circumstances.**

The key aims of this strategy are to:

- **Intervene as early as possible** to prevent housing instability and homelessness from occurring or persisting
- **Ensure service pathways are planned and integrated** to better meet the needs of young people experiencing housing instability and homelessness
- **Safeguard young people who are at risk** because of housing instability or homelessness
- **Improve transitions to adulthood and independence** for young people at risk of becoming entrenched in a cycle of housing instability and homelessness
- **Make better use of available resources** to maintain a sufficient range of accommodation-based services with support for young people experiencing housing instability and homelessness by negotiating better value for money with service providers and remodelling existing service provision

There are a number of key changes to our current approach which run as a theme throughout the strategy and which have a specific rationale. These are described below.

- **A change in the definition of young people** – Supporting People defined “young people” as those between sixteen and twenty-five years of age. The Strategy proposes a new definition of sixteen to twenty-one years of age
- **Shared operational responsibility** Following a successful pilot in North Nottinghamshire, Children’s Social Care will share this responsibility with the recently formed Targeted Support Service, which will contain dedicated accommodation staff.
- **A reconfigured estate of supported accommodation for homeless young people** – Historically young people’s housing units have taken young people across the age range of the Supporting People definition. This has created concerns about safeguarding, particularly when those who are legally “children” are placed with adults who can present significant risks or negative influence. The proposal is to have units dedicated to sixteen and seventeen year olds, to protect those most vulnerable and with short term assessment beds to support a commitment to eliminate the use of bed and breakfast accommodation for this age group.
- **A new pooled budget arrangement and commissioning accountability** – An agreement has been reached for the transfer of the budget for young people’s supported accommodation from Adult Social Care, Health and Public Protection (ASCHPP) to Children, Families and Cultural Services
- **A challenge to improve quality and reduce cost** – At present hourly costs for support vary considerably between providers. We plan to provide a challenge to the hourly costs in order to preserve as high a number of units of support as possible. We also plan to look at moving towards a simple “payment by results” model to drive improvements, particularly in relation to eviction and planned move on to independent living.
- **A range of floating support** – Supporting People, through ASCHP, will continue to fund an all-age floating support service for people in their own tenancies. For young people this will be supplemented through support system in Targeted Support and Children’s Social Care, for example in respect of care leavers.

Summary of statutory duties of Children's and Housing services to young people who may be homeless

As a two-tier local authority area, the county council has statutory responsibility for providing children's services and the district and borough councils are housing authorities with responsibility for homelessness. Historically this has led to confusion over who is responsible for what and when. The following section provides an overview of statutory responsibilities towards homeless young people from children's services and housing authorities.

Status	Children's services obligations	Housing authority obligations
16/17 homeless, not previously known to children's services	Duty to assess the needs of the child (s17), and to provide accommodation (s20) for a child in need aged 16 or over whose welfare is likely to be seriously prejudiced if they are not accommodated	Duty to assess status (s184) and provide interim accommodation (s188) pending an assessment by Children's Services. Duty to accommodate if offer of s20 accommodation is declined
'Relevant children' aged 16/17	Duty to provide accommodation for an 'eligible child' (care leavers aged 16-17 years unless they are satisfied that his/her welfare does not require it	No duty to secure accommodation
'Former relevant Children' aged 18-21	Duty to provide assistance, including assistance with accommodation, to the extent that his/her welfare requires it	Duty to secure accommodation if they become homeless through no fault of their own and they are vulnerable as a result of having been in care (s193)
'Former relevant Children' aged 22-24	Duty to provide continuing assistance if they remain in education or training	Duty to secure accommodation if they become homeless through no fault of their own and they are vulnerable as a result of having been in care (s193)
18-24, not previously known to children's services	No duty to provide assistance or accommodation	Duty to assess applicants need/status under (s184), and secure interim accommodation (s193) if no other suitable accommodation is available (s197) repealed, new provisions in Localism Bill to discharge duty with offer of private rented)
'Intentionally homeless' aged 16-17, unknown or known	Duty to assess the needs of the child (s17) if unknown, and to provide accommodation (s20) for a child in need aged 16 or over whose welfare is likely to be seriously prejudiced if they are not accommodated	No duty to permanently re-house. Duty to secure interim accommodation for a reasonable period & provide advice/ assistance to find own accommodation (s188) Refer to Children's services (with consent)

Future service provision and funding

The majority of accommodation-based services for homeless young people have been commissioned through the Supporting People team within Adult Social Care & Health since 2003. From **April 2012**, this responsibility will transfer to Children, Families & Cultural Services through Target Support. The majority of these services are of high quality and generally service providers achieve good outcomes in working with young people. A total of **224 units** of accommodation with support will transfer in **October 2012**.

The inherited budget proposal for these services will be supplemented with £150,000 from existing children's services budgets. Following the consultation an additional amount of £450,000 has been re-designated from related areas of council business to support this agenda over the next three years. The revised budget available is presented below:

	2012-13	2013-14	2014-15
Total budget	£1,990,255	£1,803,001	£1,481,384

NCCs commissioning priorities for accommodation-based services from 2012-15 are outlined in Appendix 1.

NCC will seek to achieve its commissioning priorities within the committed budget allocation by price challenging existing service providers and negotiating the remodelling of existing service provision where possible. If this is not possible or new services are required we will invite tenders from existing service providers, but we reserve the discretion to include other providers with successful track records in any future tendering.

NCC intends to tender supported accommodation based services for young people during 2013, with new contracts anticipated to commence in April 2014.

Supported Accommodation for young people aged 16-21 commissioning plan – Appendix 3

This commissioning plan sets out the Council's intentions for supported accommodation services for young people aged 16-21 for the years 2012 -2015. Services will be tendered during 2013 and new contracts will commence in April 2014, a change in support provider may occur at this point.

Teenage parent services			
Provider	Service	Current service description	Recommendation
NCHA	Bassetlaw Teenage Parent Supported Accommodation	17 units with visiting support in Worksop and Retford for teenage parents (16-19)	Savings to be achieved through a phased reduction in unit numbers and support hours delivered. With effect from October 2012 unit numbers reduce from 17 to 15, and a further reduction takes effect in April 2013 to reduce unit numbers to 10. With effect from October 2012 support hours delivered reduce from 7 hours per service user per week to 6 and a further reduction to 4 hours per service user per week takes effect in April 2013.
Newark Emmaus Trust	NET family	5 units with visiting support in Newark for teenage parents (16-19)	Retain service as is until March 2013. With effect from April 2013 savings to be achieved by reducing support hours delivered from 6.8 hours per service user per week to 5 hours per service user per week
Metropolitan Support Trust	Bond Street	6 newly built flats on single site with visiting support for teenage parents (16-19) in Gedling	Retain service as is until March 2013. With effect from April 2013 savings to be achieved by reducing support hours from 7.7 hours per service user per week to 5 hours per service user per week
Young people services			
Provider	Service	Current service description	Recommendation
NCHA	Outram Street	Newly built single site accommodation, 17 self-contained flats for young people (17-30) in Sutton - 24 hour staff cover.	Retain service and with effect from October 2012 vary existing contract to reduce age range to 16-21 year olds. 12 units to be funded through CFCS and 5 units to be funded through ASCH&PP to support people aged 22-25. 15 hours support per service user per week will be delivered. Two assessment beds will be located here.
The Kirkby Trust	109 Vernon Road	Single site accommodation based service in Kirkby with 24 hour on-site support for 7 young people aged 16-25	CFCS funding to be withdrawn March 2014. Vary existing contract to reduce age range to 16-21 year olds. Continue to deliver Holistic Intensive Project but modify to work with people for longer than 12 weeks where necessary.
Stonham	Sandfield Close	Single site accommodation based service with 24 hour on-site support for 10 young people, with some learning difficulties aged 16-25 in Mansfield	Retain service and with effect from October 2012 vary existing contract to reduce age range to 16-21 year olds and increase the number of support hours delivered to 25 hours per service user per week to improve the independence skills of more vulnerable service users.

Kirkby Trust	Mansfield YMCA	Single site accommodation based service with 24 hour on-site support for 22 young people aged 16- 25 in Mansfield	Funding to be withdrawn June 2012. Transition grant given to Nottinghamshire YMCA to remodel the service.
Newark Emmaus Trust	NET accommodation based	Supported accommodation based service with 24 hours support for 23 young people aged 16-25 in Newark	Retain service and with effect from October 2012 vary existing contract to reduce age range to 16-21 year olds. Savings in April 2013 will be achieved through a reduction in capacity from 23 to 15 units. Increase the number of support hours delivered to 17 hours per service user per week to improve the independence skills of more challenging service users. Two assessment beds will be located here.
Nacro	Stepping Stones	Single site accommodation based service in Eastwood with 24 hour on-site support for 12 young people 16-25	Retain service and with effect from October 2012 vary existing contract to reduce age range to 16-21 year olds. Increase the number of support hours delivered to 15 hours per service user per week to improve the independence skills of more challenging service users. One assessment bed will be located here.
Places for People	Mansfield supported acc Fritchley Court	Single site accommodation based service with 16 units of 24 hour on-site support & 16 units low level support for young people 16-25 in Mansfield	Retain service and with effect from October 2012 vary existing contract to reduce age range to 16-21 year olds. 16 units will be for people requiring a medium to high level of support and 15 hours of support per service user per week will be provided and 16 units will be for people requiring a low level of support and 5 hours of support per service user per week will be provided. One assessment bed will be located here.
NCHA	Bassetlaw supported acc Cobwell Rd and Wright Wilson St	Supported accommodation based service for young people split over 2 sites in Retford - 10 x 24 hour support & 12 low level for young people aged 16-25	Retain service and with effect from October 2012 vary existing contract to reduce age range to 16-21 year olds. 15 hours of support per service user per week will be delivered at Cobwell Road and 5 hours per service user per week at Wright Wilson Street. Reduce capacity of service from 22 to 10 units in April 2014. One assessment bed will be located here.
NCHA	Lombard & Barnby Gate	13 units of medium level support in accommodation over 2 sites in Newark for young people aged 16-25	CFCS funding to be withdrawn March 2014. With effect from October 2012 vary existing contract to reduce age range to 16-21 year olds. 8 hours of support per service user per week will be delivered. Savings from April 2013 will be delivered through a reduction in capacity from 13 to 10 units.
NCHA	Bassetlaw supported accommodation New Roots Daily Support Scheme	15 units of visiting support for young people aged 16-25 in Bassetlaw	Retain service and with effect from October 2012 vary existing contract to reduce age range to 16-21 year olds and reduce support hours delivered to 7.5 hours per service user per week. Savings from April 2013 will be delivered through a reduction in capacity from 15 to 8 units. One assessment bed will be located here.
Framework	Ashfield low level supported accommodation	6 units of low level visiting support in dispersed accommodation for young people aged 16-25 in Ashfield	Funding to be withdrawn September 2012.
Framework	Mansfield low level Rock Court	Single site service, low level support in 11 self contained flats for young people aged 16-25 in Mansfield	Retain service and with effect from October 2012 vary existing contract to reduce age range to 16-21 year olds. Increase support hours delivered to 16 hours per service user per week. Some referrals will be limited to 16 and 17 year olds with Bail conditions and or licence conditions. One assessment bed will be located here.

NCHA	Bassetlaw low level New Roots Bassetlaw move on	10 units of low level visiting support in dispersed accommodation in Worksop & Retford for young people aged 16-25	Retain service and vary existing contract to reduce age range to 16-21 year olds. Savings to be delivered through a reduction in support hours. With effect from October 2012 reduce support hours to 4.5 hours per service user per week, and from April 2013 reduce to 3 hours per service user per week.
NCHA	Newark and Sherwood Dispersed	13 units of low level, visiting support in dispersed accommodation in Newark & Sherwood for young people aged 16-25	Retain service and with effect from October 2012 vary existing contract to reduce age range to 16-21 year olds. 5 hours support per service user per week will be delivered.
Stonham	Supported Lodgings	Co-ordination costs and host payments to provide supported lodgings in private households for 21 service users aged 16-25	Retain service, increase current contract value from October 2012 to introduce a (higher) second rate for hosts who will work with more challenging service users. Vary existing contract to reduce age range to 16-21 year olds.
Framework	Elizabeth House	Quick access short stay self contained flats with on-site 24 hr support for homeless single people 16+. Located in Gedling but for homeless people from Broxtowe, Rushcliffe & Gedling	Retain service with effect from October 2012 5 units to be funded through CFCS for use by 16 and 17 year olds and the remainder of units funded through ASCH&PP for the use of homeless single people 18+. One assessment bed located here.

Action	Lead(s)	Timescale	Resource implications
1: Early prevention			
1a). To establish a new “Multi-Agency Youth Homelessness Forum” including the County, District and Borough Councils and the voluntary sector to establish and plan delivery of a best practice model of preventing young people becoming homeless including. <ul style="list-style-type: none"> Education and key messages in schools and other universal settings Effective use of mentoring Preparing young people for successful tenancy management and independent living 	Group Managers – Targeted Support and Youth Justice and Children’s Social Care Broxtowe BC Homelessness Manager	1/10/2012	Management time
1b). To review and promote the “Pathway to Provision” to make it clear how young people at risk of homelessness are identified and how to quickly access the services available to assist them.	Group Managers – Targeted Support and Early Years/Early Intervention	1/10/2012	Management time, print and design
2: First response			
2a). For County, District and Borough Councils, through the “Multi-Agency Youth Homelessness Forum” “ to review the joint working protocol on managing presentations of homeless 16/17 year olds to ensure it is understood and used effectively.	Group Managers – Targeted Support and Youth Justice and Children’s Social Care Broxtowe BC Homelessness Manager	1/10/2012	Legal, Management time
2b). To increase understanding of Targeted Support services in all areas amongst young people, service providers and referral agencies through communications and district/provider focused events.	Targeted Support and Youth Justice Group Manager	1/10/2012	Design and print, web media, systems design, management time

Action	Lead(s)	Timescale	Resource implications
2c). To establish a robust monitoring framework to provide the "Targeted Support and Youth justice Partnership Board" a complete and accurate number of young people having contact with services as a result of housing instability or homelessness including diversity factors and disproportionality and outcomes.	TS Partnerships & Commissioning Manager	1/3/2013	Information Officer time
2d). To review assessment processes for homeless young people to ensure that they are service user focused and that duplication is minimised .	TS Partnerships & Commissioning Manager	1/10/2012	Management time
2)e). To produce a consent based information sharing protocol for all partners to sign up to.	TS Partnerships & Commissioning Manager	1/10/2012	Management time, legal
3: Accommodation & Support Pathway			
3)a). To agree new commissioning proposals and delivery model for young peoples supported accommodation.	Programme Manager – YP Support	3/7/2012	Management time, finance
3b). To establish a single waiting list and prioritisation model for young peoples supported accommodation.	Programme Manager – YP Support	1/7/2012	Management time
3c). To commence new delivery model of young peoples supported accommodation.	Programme Manager – YP Support	1/7/2012	Management time
3d). To audit and agree improvement plans for safeguarding standards across supported accommodations providers including adult safeguarding and Mental Capacity Act (2005) implementation in relevant settings.	TS Partnerships and Commissioning Manager	1/7/2012	Management time, finance, procurement advice
3e). To consider the use of Payment by Results to improve rates of eviction and planned moves where this is a problem	TSYJ Group Manager	1/11/2013	Management time
3f). To review current contract management arrangements to ensure they meet future Performance Management requirements	Programme Manager – YP Support	1/11/2012	Management time, specialist procurement advice

Action	Lead(s)	Timescale	Resource implications
3g). To establish a competency framework for staff and managers working front-line with homeless young people	TSYJ Group Manager	1/11/2013	Management time
4: Prevent the next generation of rough sleeping and repeat homelessness			
4a). To ensure that sustainability of placements and readiness for independence features in all pathway plans	Children's Social Care Group Managers	1/6/2012	Audit systems design
4b). To review the evictions protocol established by Supporting People	Programme Manager – YP Support	1/11/2013	Management time
4c). To establish an early warning and intervention process with housing providers and Registered Social Landlords for young people receiving warnings or notices about tenancy compliance in mainstream housing	District and Borough Leads	1/10/2011	Management time
4d). To promote Targeted Support and other available support amongst agencies and services working with young rough sleepers and the 'hidden' homeless	TS Outreach Manager	1/10/2011	Management time
5: Longer term options			
5a). To ensure that move-on from supported accommodation is properly planned for and supported at the earliest appropriate opportunity through multi-agency "support and resettlement" plans	TS Team Manager – Specialist Services	1/10/2012	Accommodation Officer Time
5b). To consider the viability of acting as a guarantor for young people who are ready to become first time tenants	TSYJ Group Manager	1/11/2013	Financial
5c). To develop a shared vision for move-on with all stakeholders through the "Multi-Agency Youth Homelessness Forum".	TSYJ Group Manager	1/11/2013	Management time

REPORT OF THE LEADER**BUDGET CONSULTATION 2013/2014****Purpose of the Report**

- 1 To inform Policy Committee of the indicative timetable for the 2013/2014 budget consultation process and seek approval of the methodologies put forward.

Information and Advice

- 2 The Duty to Consult is a statutory requirement which includes all County Councils. It obligates them to consult representatives of council tax payers, those who use or are likely to use services provided by the authority, and those appearing to the authority to have an interest in any area within which the authority carries out functions.
- 3 The Council's budget decisions are fundamental to the services which will or will not be delivered to residents. Budget consultation is a very important process, and it is imperative that the public (as well as council staff and councillors) feel fully engaged with the process. We undertake consultation to engage with and listen to as many local people as possible so that we can provide reliable and robust evidence to help inform decision making.
- 4 The process followed for the 2012/2013 budget consultation was extremely successful. The consultation was accessible to everyone, with all channels open for response. As part of the overall review, the following issues were identified as working well –
 - Awareness raising and opportunity to get involved via the 'Budget Conversation'
 - Engaging with young people through workshops in schools across the county
 - Engaging the business community early on in the process
 - Using the Council's newspaper 'County News' for publishing the budget proposals
 - Having mechanisms in place to respond via online, telephone, face to face, in writing
 - Making a 'freepost address' available
 - Weekly print-outs of response / findings to Leader, Cabinet Members and CLT

Consultation process for 2013/2014

- 5 The previous years' two-pronged approach to budget consultation proved successful and more residents have been involved for less cost. Therefore, it is suggested that this process be replicated for 2013/14 -

Phase 1: Budget Conversation campaign (designed to raise awareness of council services and set out the financial landscape that we are in).

Phase 2: Budget proposals (designed to seek the public's views on the more specific budget related proposals).

6 As well as raising awareness of the difficult decisions that arise from budget reductions, in previous years the budget conversation included questions around volunteering and what ideas do residents have to help us cut costs. It is suggested this year's key questions include -

- i. On a scale of 1:5 how willing would you be to take on more responsibility for what happens in your neighbourhood?
- ii. Do you think the County Council is doing too much/too little/about right to provide services to support you and your community?
- iii. When looking at the following list of County Council services, where would you least like to see savings made?
- iv. When looking at the following list of County Council services, where do you consider are the greatest opportunities to make savings, with least impact?

List of services may include –

- Services to improve road safety
 - Services to manage and reduce levels of traffic congestion
 - Trading standards and consumer protection/advice
 - Services aimed at protecting the environment (e.g. improving air quality)
 - Subsidies for local bus and community transport services
 - Services aimed at creating job opportunities and economic growth
 - Services supporting parents and families with young children (e.g. affordable childcare support and/or free early years provision for 3 & 4 year olds)
 - Management and maintenance of country parks, open spaces, country paths and rights of way
 - Services to tackle drug and alcohol misuse
 - Libraries
 - Working with schools to improve education
 - Recycling
 - Adoption and fostering services
 - Providing activities for children and young people e.g. youth centres
 - Management and maintenance of pavements
 - Management and maintenance of roads
 - Services to tackle crime and anti-social behaviour
 - Street lighting
 - Services to support children with disabilities
 - Services to help and protect vulnerable children
 - Residential care for older people
 - Services to support older, disabled or vulnerable people to stay in their homes
 - Day centres and support for older, disabled or vulnerable people
- v. What services should the County Council stop providing?

- vi. Which of the following ways of providing County Council services would you support?
- Town and parish councils providing some council services
 - Asking individuals to do more for themselves
 - Encouraging residents to contact us by internet (on-line) instead of by phone or in person
 - Volunteers providing some services rather than paid Council employees
 - Charities or voluntary community sector organisations providing some council services
 - Private sector organisations providing some Council services
 - Introducing and/or increasing charges for some council services
- vii. What one change or improvement to County Council services would make a real difference to you or your family?

- 7 The County Council has a statutory duty to consult with the Business Community under the Local Government Finance Act 1992 (section 65) regarding the authority's plans for expenditure in the financial year. In the past this duty has been fulfilled by holding a specific meeting with the representatives of the business community. However, attendance at these meetings has been very low, therefore, this year it is proposed that we change the methodology and instead of a separate meeting, we consult with members of the business community via the Business Engagement Group (which includes the Federation of Small Businesses and the Chamber of Commerce), through Business Clubs, and on-line. This will fulfil our statutory duty. We will inform members of the Business Engagement Group of our proposal.
- 8 The cost of publicity for the 2013/2014 budget consultation will be under £5,000 and will be met from the 2013/2014 budget for Communications and Marketing.
- 9 The 2013/2014 budget consultation process will be managed by the Communications & Marketing team with input from Finance and the Customer Service Centre.

The 'Budget Conversation' Campaign

- 10 The table below suggests a variety of methodologies for consulting with residents as part of the 2013/14 budget consultation process.

Methodology	Output
1. General information/awareness raising on the Council's web site	
Using the Council's web site is the simplest way to raise awareness. Along with web pages, an on-line form will be designed which will include the key questions suggested above.	We want to show residents that the County Council is faced with conflicting challenges - an ongoing reduction in available resources set against increasing demand for our services as well as increasing costs. And give them an opportunity to have their say on budget priorities.
2. Social media	
The advantages of using social media are that we are engaging in a space where people are already talking. There are 30 million Facebook users in the UK (49% of the UK population) and 10 million Twitter users.	Twitter and Facebook can be used to provide links to the Council's budget consultation campaign. The risk of using social media is that not all residents have access or use it. However, the Council will not be using social media in isolation; it will be just one of the methodologies used as part of the consultation process.

3. Workshops in schools across the county	
Last year workshops took place with students at Brunts School : Valley School : Magnus School: Beckett School. These workshops were extremely successful in engaging students in the tough decisions the Council has to make. It is suggested that more workshops take place this year and we invite all schools, via 'Wired', to express an interest in taking part.	As well as raising awareness of the challenges facing the Council, this is an opportunity for Members and Officers to be on hand to answer questions and encourage discussion with students.
4. On-line Budget simulator	
A free version of the budget simulator designed by the London Borough of Redbridge (in partnership with the Local Government Group and YouGov) was used last year to enable respondents to make choices on which services they would allocate funding to. It is suggested that this methodology be used again as part of this year's budget campaign.	This tool is designed to raise awareness and engage citizens in the difficult decisions that arise from budget reductions. The tool gives an understanding of broad budget choices which help the Council identify priorities.
5. Comment cards in libraries	
This method is very successful in engaging residents who don't have/want computer access. Over 60% of responses to last year's ' <i>budget conversation</i> ' campaign came from comment cards.	Quick response comment cards can be distributed at libraries and Council contact points. They can be collected in boxes positioned in libraries. NB: There is a cost associated with the production of the comment cards; this is likely to be in the region of £135.
6. DIY downloadable engagement toolkit	
This option provided popular last year as a way of providing a framework for groups to conduct their own discussions at a time and place that suits them. NB: There was a total of 147 downloads last year.	Developed to gather deeper insight than the quick response comment cards, the toolkit is aimed specifically at community groups to engage and consult with those groups who may otherwise be missed.
7. Engagement with Business Community	
It was useful last year to engage with the business community early in the process through the Business Engagement Group and Business Clubs. This year it is suggested that we build on these links and promote the 2013/14 budget campaign by officer attendance at scheduled meetings throughout November and January 2013.	Attendance at the Business Engagement Group and Business Clubs to promote and cascade information to the business community is a way of raising the profile of the Council's budget consultation campaign. Also by providing links on LinkedIn (social network used by the business community) we are able to reach over 10,000 members.
8. Engagement with Town and Parish Councils	
Although Parish Councils are contacted every year by email/letter informing them of the budget consultation, unfortunately very few actually engage or take part and it is not known how many cascade information to residents. Therefore, this year it is suggested posters be displayed on parish notice boards informing residents how they can get involved and have their say.	By posting notices on parish notice boards it is hoped that we can encourage more residents to get involved. NB: There is a cost associated with the production of the posters; this is likely to be in the region of £300.
9. Engagement with communities via planned Marketing Campaigns	
Various Council campaigns are taking place across the county during November, December and January 2013. It is suggested that officers attending these campaigns take the opportunity to promote the 2013/14 budget campaign.	Having a presence at campaigns such as the Aurora Lights Festival and Rufford Craft Fair may encourage residents who otherwise might not get involved to take part.

10. Engagement with Nottingham citizen's panellists who have provided email addresses	
Just under 2,000 panellists have provided the Council with their email addresses and said they are happy to be contacted this way. It is suggested these panellists be sent an email directing them to the Council's budget consultation web pages.	Emailing panellists and directing them to the Council's website is a way of contacting residents at little cost.
11. Engagement with members of the public who have provided us with an email address and expressed a wish to be informed of Nottinghamshire County Council events and campaigns	
As part of our evaluation process following Council events and festivals, a number of residents have provided their email addresses agreeing to be contacted about future Council events and campaigns. It is suggested these residents be sent an email directing them to the Council's budget consultation web pages.	Emailing residents and directing them to the Council's website is a way of contacting residents at little cost.
12. Engagement with communities via community engagement officers	
Community engagement officers are involved in a variety of community activities on a daily basis and have established dialogue and networks with a number of communities and groups we consider 'hard to reach'. It is suggested these officers use their established links to encourage communities to get involved in the budget setting process	These officers are well placed to engage with the community in a variety of ways, making use of the numerous community resource centres across the county. Using established networks will encourage residents who do not normally engage to get involved.
13. Engagement with community based organisations, voluntary sector and other agencies	
As well as community based organisations and the voluntary sector, there are a number of groups with whom we haven't previously engaged, including the WI, Rotary Club, University of the 3rd Age etc etc. It is suggested, where possible, we email these groups, or meet with them on a face to face basis, to encourage them to get involved.	Emailing community based organisations and voluntary groups in Nottinghamshire directing them to the Council's website is a way of communicating at little cost. Where appropriate meetings will be held with organisations who prefer to engage on a face-to-face basis.

Phase Two : The 'Budget Proposals

11 It is proposed that the methods of engagement used for consulting on the specific budget proposals for 2013/2014 will replicate those used last year i.e. –

- On-line survey with the specific budget proposals
- Paper survey in County News
- Face to face meetings with service users directly affected
- Engagement with the Business Community – *as set out in paragraph 7*

Timescale

12 The following timescale is proposed -

Phase	Timescale
Phase 1 (Budget Conversation)	5 November to 25 January 2013
Phase 2 (Budget Proposals)	14 November to 25 January 2013

- Response to the budget consultation will be fed back to Policy Committee on 13 February 2013.

- The budget proposals will be taken forward to Full Council on 28 February 2013, for decision.

Reason/s for Recommendation/s

1. To set out how the Council will meet its statutory responsibilities for 2013/14.

Statutory and Policy Implications

2. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

RECOMMENDATIONS

It is recommended that Policy Committee:

- i) Note the timetable for the 2013/14 budget consultation.
- ii) Approves consultation methodologies put forward.

Councillor Kay Cutts
Leader

For any enquiries about this report please contact: Angela Smeeton, Sn Consultation Officer
telephone: 0115 9772937 E: angela.smeeton@nottsc.gov.uk

Constitutional Comments [NAB 28.06.12]

3. Policy Committee has authority to approve the recommendation set out in this report.

Financial Comments [MB 29.06.12]

4. The financial implications are set out in paragraph 8 of the report.

Background Papers

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

None

Electoral Division(s) and Member(s) Affected

All

REPORT OF THE CORPORATE DIRECTOR POLICY PLANNING AND CORPORATE SERVICES**NOTTINGHAMSHIRE LOCAL INVOLVEMENT NETWORK ANNUAL REPORT 2011/12****Purpose of the Report**

1. This report provides Members the opportunity to consider the Nottinghamshire Local Involvement Network's Annual Report for 2011/12.

Information and Advice

2. For a number of years successive Governments have encouraged public involvement in health (and latterly social care) matters via statutory engagement vehicles: initially Community Health Councils, then Public and Patient Involvement Forums (PPIF), and currently Local Involvement Networks (LINK).
3. LINKs were established in 2008 in every local authority area with social care responsibilities (in accordance with the 2007 Local Government and Public Involvement in Health Act). They are volunteer-led organisations and provide the following functions that support improved commissioning and quality of local health and social care services:
 - Promoting and supporting the involvement of people in the commissioning, provision and scrutiny of health and social care services
 - Obtaining the views of people about their needs for and experiences of local services.
 - Conveying those views to organisations responsible for commissioning, providing, managing and scrutinising health and social care services and recommending how services can be improved.
4. The work of LINKs is supported by professional administrative staff: the LINK 'host'. Hosts are contracted by the relevant local authority, but must be independent of local authorities and NHS trusts. Currently, host services for the Nottinghamshire LINK are provided by the Carers' Federation.

5. LINKs are required to publish an Annual Report by 30th June each year covering activities undertaken in the previous financial year. The format of the Annual Report is prescribed by guidance from the Department of Health (DH). The Nottinghamshire LINK has previously presented its Annual Report to Overview and Scrutiny Committee, as required under statute. Following the changes to the County Council's constitution, the duty to receive the Annual Report will now fall to Policy Committee.
6. This meeting provides the opportunity for Members to receive the Nottinghamshire LINK Annual Report which is provided as an Appendix to this report. Representatives of the LINK will attend the meeting to inform Members of how the LINK has been effective in meeting its core objectives and priorities for 2011/12.
7. It should be noted that the Health & Social Care Act (2012) introduces another organisational change to statutory public / patient engagement vehicles, replacing LINKs with new bodies called Healthwatch (HW). Healthwatch will exist at the national level as Healthwatch England and at the local level as Local Healthwatch.
8. The Act requires every local authority with social care responsibilities to establish a Local Healthwatch for their area by 1 April 2013 and to subsequently contract manage the Local HW. LINKs will cease on 31 March 2013. Proposals are currently being developed for a Nottinghamshire Local Healthwatch and these will be brought for consideration by Policy Committee in the Autumn 2012.

Other Options Considered

9. No other options have been considered. There is a statutory requirement for the Nottinghamshire LINK to present its Annual Report to the relevant Committee of the County Council which, following constitutional changes, has been deemed to be Policy Committee.

Reason/s for Recommendation/s

10. See paragraph 9.

Statutory and Policy Implications

11. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

RECOMMENDATION/S

- 1) It is recommended that the Policy Committee receive the 2011/12 Annual Report of the Nottinghamshire County LINK.

Jayne Francis-Ward
Corporate Director Policy Planning and Corporate Services

For any enquiries about this report please contact:

Caroline Agnew
Programme Manager
Telephone: 0115 9773760

Constitutional Comments ([SG 27/06/2012])

12. The Committee has the authority to consider the issues set out in this Report.

Financial Comments ([RK 29/6/12])

13. The report contains no financial implications.

Background Papers

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

The Annual Report can be found here:-

<http://www.strongerlocalvoice.com/wp-content/uploads/2009/03/Annual-Report-2011-121.pdf>

Electoral Division(s) and Member(s) Affected

All

REPORT OF THE LEADER OF THE COUNCIL**ANNUAL PERFORMANCE REPORT 2011/12****Purpose of the Report**

1. This report is to seek approval for the Annual Performance Report of achievements towards the Strategic Plan during 2011/12.

Information and Advice

2. The County Council is primarily accountable to the people of Nottinghamshire for the services that it provides and for the improvements that it makes.
3. The Strategic Plan 2010 – 2014 sets out the County Council's promises to the people of Nottinghamshire and the priorities to be achieved over the four year life of the Plan. It lists the activity that the Council will take to deliver on each priority and the outcomes that will be sought.
4. As part of the Council's new governance arrangements, Members will receive regular reporting on progress delivering the Strategic Plan priorities and activities relevant to each committee's terms of reference. This will commence in September/October with reporting of performance during quarter 1 of 2012.
5. The Policy Committee is responsible for considering the overall performance of the Council including progress against the Strategic Plan.
6. The Annual Performance Report provides an opportunity for the County Council to reflect on the achievements of the previous year and to communicate with the people of Nottinghamshire's:
 - the action that the Council took to meet its promises to the people of Nottinghamshire during 2011/12
 - the progress that the Council made delivering its priorities and improvements during 2011/12
 - the areas where the Council plans to seek further progress during 2012/13

7. A copy of the Annual Performance Report 2011/12 is attached as an appendix to the report. It is proposed that the Annual Performance Report be published on the County Council's website and be used to inform other Council publications as relevant.

Other Options Considered

8. None.

Reason/s for Recommendation/s

9. The Policy Framework of the Constitution set out that performance against the Strategic Plan will be reported annually. The publishing of the Annual Performance Report supports the Council's commitments to transparency and openness.

Statutory and Policy Implications

10. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

RECOMMENDATION/S

It is recommended that

1. the policy committee agree the Annual Performance Report 2011/12.

Councillor Kay Cutts
Leader of the Council

For any enquiries about this report please contact: Matthew Garrard, Policy, Performance and Research Team Manager T: (0115) 9772892 E: matthew.garrard@nottsc.gov.uk

Constitutional Comments

11. The Constitutional Comments will be reported to the meeting.

Financial Comments

12. There are no financial implications arising directly from this report.

Background Papers

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

Electoral Division(s) and Member(s) Affected
All

DRAFT

Annual Performance Report

2011/12

Foreword

Welcome to our Annual Report 2011/12 on the progress that we have made against our priorities for the people of Nottinghamshire.

Our vision is for Nottinghamshire to be a place where people enjoy life, are healthy, safe and prosperous; and where business is able to thrive. We want Nottinghamshire to be a county where people have high aspirations; live as independently as possible and are empowered to have greater responsibility.

Our Strategic Plan 2010-2014 sets out our promises to the people of Nottinghamshire and explains what we will do to improve things for our residents over the four years of the plan.

When our Plan was published, we knew that it was ambitious. We knew that we would all face challenging financial times, and we also knew that we had an opportunity to promote and deliver a better future for Nottinghamshire.

Our progress towards that future has required us to take difficult decisions and to change the way that we work. Our efforts are helping us transform into an organisation that is modern and represents value for money.

From our annual report we hope that you will be able to see how our improvements have enabled us to strengthen key services, invest in Nottinghamshire and leave us well placed for delivering on more of our commitments in the future.

Councillor Kay Cutts
Leader of the Council

Mick Burrows
Chief Executive

Our promises to the people of Nottinghamshire

Lead Nottinghamshire

We will play a full part in leading Nottinghamshire to be a place where people want to live and feel safe; businesses want to invest and tourists want to visit and stay. These are our goals and we will work together with our partners to achieve them.

Our priorities are:

- **to foster aspiration, independence and personal responsibility**
- **to promote the economic prosperity of Nottinghamshire and safeguard our environment**
- **to make Nottinghamshire a safer place to live**

Provide good services

We will consult, listen and act on what the public tell us about the services they use. We will work with other organisations to make public sector services in Nottinghamshire as integrated as possible. We will ensure all our services are good quality and provide value for money.

- **to secure good quality, affordable services**

Be an efficient Council

We will be a cost effective and efficient council. Over the coming four years we will reduce our running costs substantially to allow more to be spent on delivery of services.

- **to be financially robust and sustainable**

Introduction

Our annual report tells you about our progress in 2011/12 made against our five priorities for Nottinghamshire as detailed in our [Strategic Plan 2010-2014](#).

It includes examples of the work that we have been doing and of our successes so far, as we work towards our four year goals. We also identify areas we need to continue our efforts to improve on.

Key to achieving our goals is our ability to evaluate our progress. We use over 70 measures or indicators to gauge the impact that we are making and our progress against our priorities and **78%** of these have improved during the last year.

Achieving our priorities and delivering on our promises is a four year challenge. Throughout the annual report we tell you more about our plans for next year, to deliver our commitments and to improve in the areas where we think that we could do better.

If you would like to know more about our priorities, the actions that we are taking or wish to follow our progress, you can find more information on our [website](#).

Key Achievements in 2011/12

- our work to be cost effective enabled us to **freeze council tax for the 3rd year running**
- we **secured funding for major improvements to the A453**
- we saved **£34 million to reinvest in Nottinghamshire** through good housekeeping and better ways of working
- we have **significantly improved our services to protect vulnerable children** in Nottinghamshire by investing savings made elsewhere across the council
- we **spent £20 million building and refurbishing schools** in 2011/12 and have **secured funding to rebuild or refurbish 15 more** of the County's schools from 2012/13
- we introduced a discretionary travel scheme which offers **free travel for pupils in year 7** to go to a preferred school supporting their parents to be able to choose the school best for their child
- we staged the **biggest celebration in the country of Robin Hood** in August with a third more visitors than last year.

Priority A – Fostering aspiration, independence and personal responsibility

Our priority is to raise the aspirations of local people by enabling them to achieve more both as individuals and as neighbours. We will encourage local people to take responsibility for how they live and the area in which they live. We are committed to enabling people to live as independently as possible throughout their lives.

In 2011/12 the majority of the key actions that we needed to take to deliver this priority were on schedule or complete. **71%** of the key indicators that show our progress in this priority improved compared to 2010/11.

We said we would... give more people greater choice and control over how they get the support they require to stay healthy and live independently for as long as possible.

More people managing their own care - people receiving care and support at home have now been given greater freedom and choice by switching to personal budgets. With our support there has been an **increase from 38% to 66%** in the number of adult social care clients and carers receiving community based services via a direct payment or personal budget from last year. We have also helped a number of small local providers to become established in the county to offer new services to people with personal budgets.

In 2012/13 we will build on this success and work to increase the take up of personal budgets further.

Over 2,800 people in Nottinghamshire have signed up to direct payments – a way to have a care package that puts them in control.

Doreen Burrows from Farnsfield receives direct payments for the care of her husband John who has vascular dementia.

Doreen said: “Direct payments give us more choice with how John is cared for. We have a really good carer who has similar interests to John and we were able to meet him before he started to make sure he was right for us.”

“Traditional day service activities such as bingo and card games are not for John so we have been able to use some of our money on short breaks to get us away from the four walls of our living room”.

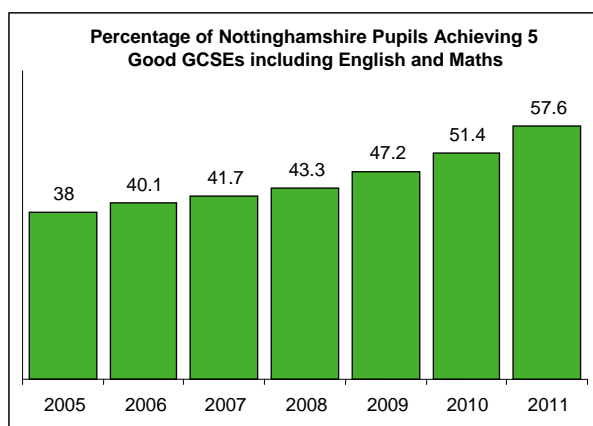
Improving our Day Care Services - Day Care Services have also undergone a substantial modernisation programme to bring together our services for older people, people with learning disabilities and people with physical disabilities. Through a **£4 million investment** we are creating a network of modern, multi-purpose centres that offer a pleasant environment and meet the needs of our service users.

We said we would... improve the life chances and achievements of children and young people.

Continuing GCSE improvement – For the **8th consecutive year there has been an increase in the percentage of all pupils gaining five or more grade A*-C GCSEs.**

This is down to the hard work and

dedication of young people in Nottinghamshire, their teachers and our staff supporting improvements in teaching standards.



The proportion of children who are eligible for free school meals achieving five or more A*-C grades at GCSE or equivalent including English and mathematics has also increased and at a faster rate than those who are not eligible for free school meals.

Next year, we will continue building on this success with increased focus on reducing the gap of educational attainment of our most vulnerable children.

We said we would... improve the quality of our school buildings

Building better schools - we spent £20 million building and refurbishing schools in 2011/12 and have secured funding to rebuild or refurbish 15 more of the County's schools in 2012/13.

This year we provided new state-of-the-art buildings for Ryton Park Primary School (£9 million), Greasley Beauvale Primary School (£6 million) and a new school in Eastwood - Springbank Primary (£5 million).

Springbank Primary provides a new building for the recently amalgamated

Eastwood Infant and Junior schools. The new school features a pond area and a playing field – the former schools which were over 100 years old never had any green space for games and sport.

In 2012/13 we will commence rebuilding or refurbishment of 15 more schools including the Grove School in Newark.

We said we would... embrace the 'localism' and 'big society' agendas by increasing community involvement in the way services are shaped and delivered

Embracing Localism – we are piloting a lengthsman scheme to enable your community to employ a local person to carry out some of the work of the County Council to maintain your local environment such as clearing drains and ditches and cutting grass and vegetation.

We have worked with town and parish councils to explore how we can empower local communities so that they can achieve their ambitions for the place where they live. We have made it easier for you to do things outside your own home such as cutting grass verges and clearing snow without fear of reprisals. We have introduced a new approach that makes it **simpler for you to close your road for community use**. Over 150 applications for jubilee street parties were received using our straightforward application process.

In 2012/13 we will set out a detailed plan to meet our commitment to embrace Localism and to role out new rights for your community.

We said we would... deliver services in ways which promote independence and empower people to make positive choices and decisions about their lives

Free travel to preferred schools - in September 2011, we introduced a Discretionary Travel Scheme which offers **free travel to pupils in year 7 to go to a preferred school** supporting their parents to be able to choose the school best for their child. Pupils who face journeys of more than three miles are eligible for the scheme. In its first year there have been 450 applicants.

By 2015 the scheme will be extended to all secondary school pupils in the county.

Some other key things we plan to do in 2012/13...

- continue our transformation of children's and adult social care through major projects such as the '*Putting People First*' programme – our agenda of personalisation for our adult social care users through changes to our processes, culture and practice
- increase the number of adults with learning disabilities in settled accommodation and/or work. One way this will be achieved is through the work of our **iWork** team. The iWork team offers direct support to help adults with learning difficulties to get the right job by analysing the applicants' skills, interests and qualifications, suggesting jobs that they might like to do, explaining what will happen with benefits, giving them the opportunity to try out jobs first and then providing ongoing support to help them remain in employment.

- increase the number of people either returned home or placed in a residential setting following a stay in hospital. This will be achieved, for example, through the work of START (Short Term Assessment and Reablement Teams) who provide six weeks of intensive support to service users including occupational therapy and social work
- continue our schools refurbishment programme which includes over £8 million at Carlton Digby Special School.

Recognition of our achievements

A number of our services were externally recognised for excellence. These included:

- an innovative web based system that enables people to search for care homes in the county and find how many vacancies are available at any one time won a national award for Innovation in the Public Sector
- Our Meals at Home service celebrated its 40th year and were recognised in two separate categories at the National Association of Care Catering Community Meals Awards
- Our Gedling Older People's Team was a finalist at the Team of the Year category of the Social Worker of the Year awards.

Priority B – Promoting the economic prosperity of Nottinghamshire and safeguarding our environment

Successful local businesses and a prosperous economy are key to our future. Our priority is to do all we can to help our local business community to thrive and to promote Nottinghamshire as a place to invest, do business and to visit and stay. While promoting the economic prosperity of the county we will defend our precious countryside, protect our environment and promote our cultural heritage.

In 2011/12 we had several significant achievements for Nottinghamshire, securing major investments in the infrastructure of our County.

We said we would... continue to develop our infrastructure (roads, public transport and employment sites) to enable long-term growth and improve employment opportunities

Improving the A453 - we have secured funding from the Government for major improvements to the A453. This important road between Nottingham and the M1 is currently considered the weakest link in the regional road network and is limiting the economic recovery and development of the local area. Our bold £20 million investment has unlocked further funding so that this improvement can be made, which could bring a boost to the local economy estimated in excess of £500 million.

Work will begin shortly on the project which is set to be completed in early 2015.

Helping to develop business - we have worked closely with developers and local councils to secure investment and to

bring forward new, quality employment land for business development.

We said we would... regenerate our market towns and rural areas

Regenerating our rural areas - we have successfully bid for £4.25 million from the Government to provide faster broadband speeds in rural areas. We have brought together local councils to ensure that this funding is matched in Nottinghamshire. This will be part of a **£17 million scheme to upgrade broadband** to over 100,000 premises across Nottinghamshire.

In 2012/13 we will start putting [the broadband plan](#) into action to make super-fast broadband available by 2015.

We recognise that people in rural areas can face additional challenges in securing work. We have provided help through **Wheels to Work** - [a project](#) which provides moped loans and advice on public transport. We have also developed Work Clubs offering help and support to those seeking work.

We said we would... promote Nottinghamshire as a place to do business and invest

Investing in Nottinghamshire – through the local enterprise partnership (D2N2), the County Council has worked with its partners in **securing £24.35 million** from the Growing Places Fund for capital projects across Derby City, Nottingham City, Derbyshire County and Nottinghamshire County.

We are currently exploring the feasibility of a number of projects and at this stage; we anticipate securing just under £10 million of this total towards key projects

within the County. This also includes the development of the Beeston 'Enterprise Zone'. In 2012/13, work is due to commence on the Alliance-Boots site ultimately seeing the creation of up to 5,000 jobs.

Supporting employment through our Innovation centres – this year our three Centres at Mansfield, Newark and Worksop **supported 400 jobs within 90 businesses** with a further **92 jobs** created in small, new start businesses.

***We said we would...** seek out opportunities to contribute to enhancing Nottinghamshire as a tourism destination and increased the number of visitors to the county*

It is currently estimated that tourism generates over £1.3 billion per year to the city and county's economy supporting 20,000 jobs.

Experience Nottinghamshire - we have promoted Nottinghamshire as a tourist destination to over 460,000 visitors through our support for the new '[Experience Nottinghamshire](#)' website which was launched in May 2011.

Further developments utilising the latest technology are proving popular such as the launch of an iPhone app and online booking for accommodation, tickets to attractions and events.

In 2012/13, we will work with Experience Nottinghamshire to develop a series of tourism campaigns aimed at attracting more visitors to our county.

Some other key things we plan to do in 2012/13...

- continue to implement our county wide strategy to reduce child poverty. Work will include further embedding the 'Think Family' approach into the delivery of core services across Nottinghamshire provided by ourselves and our partners
- continue to improve our Innovation Centres through more creative marketing and promotion to raise the centres' profile and improving the business support given to new and existing centre customers
- Further improve the condition of the County's road network by investing an additional £1 million in value for money treatment based on robust inspection regimes. Major carriageway resurfacing projects to be carried out include the A60 at Ravenshead and Nottingham Road, Radcliffe-on-Trent.
- Reduce reliance on landfill for waste disposal through campaigns such as 'Love Food, Hate Waste' and 'Are You Bin Smart?' and introducing new recyclable schemes such as for cooking oil.

Did you know?

Three quarters of the food in our schools is supplied locally so helping to support local businesses and to protect the environment.

Priority C – Making Nottinghamshire a safer place to live

It is important that people feel that the county is a safe place to live. Managing safety and having a co-ordinated approach to keeping people and places safe is vital. A greater sense of security helps to create confidence that feeds well-being and growth so it is one of the priorities for improvement that we must address. Our attention must be on the safety of those groups and communities that are more vulnerable and on reducing crime and disorder.

In 2011/12 all of the key actions that we needed to take to deliver this priority were either on schedule or already completed.

***We said we would...** improve our safeguarding arrangements and outcomes in protecting vulnerable children and adults in their communities*

Safeguarding our children – we have significantly improved our services to protect Nottinghamshire’s most vulnerable children by investing savings made elsewhere across the council. The Council and our partners were complimented by the Government minister on our work to improve safeguarding services following a critical Ofsted inspection in 2010. This work has included improvements to the timeliness of assessments and reductions in re-referrals into children’s social care.

In 2012/13 we will establish a ‘Multi-Agency Safeguarding Hub’ in Nottinghamshire along with the Police, Health, Education and other agencies. The Hub will deal with safeguarding concerns, where someone is worried about the safety or well-being of a child or adult, or think they might be being abused. There will be a greater emphasis on early intervention, supporting children

families and adults before the situation deteriorates.

***We said we would...** have an integrated approach to improving community safety working with other organisations and holding each other accountable for improvements*

Working towards a safer county - we have worked closely with the police and probation service through the Safer Nottinghamshire Board to make improvements in community safety. This working relationship enables us to share resources to tackle key issues in Nottinghamshire and contributed to the overall reduction in the county’s crime rate in 2011/12.

In 2012/13 we will continue building on the good working practices to make Nottinghamshire a safer place to live.

***We said we would...** look to increase public confidence in the county as a safe place to live in*

Feeling safer day and night – our community safety work is helping residents to feel safe. Two thirds of residents currently feel safe when outside after dark and **nine out of ten residents feel safe when outside during the day.**

Working to reduce anti-social behaviour (ASB) - we have used new powers to implement a number of gating orders across the county to deal with crime and ASB in areas accessed by public paths or roads.

Our work with Registered Social Landlords has also helped reduce ASB and increase public confidence. ‘[The Four Walls](#)’ - a short film devised by tenants

and partners – has been integrated into a teaching pack used by several schools in the Newark and Sherwood and Bassetlaw districts. It tells the story of a young boy who becomes involved in ASB around his estate.

We also commissioned the “I Pledge Project” to **work with 1,000 pupils across 20 schools**. Pupils are asked to identify a “pledge” to their community not to commit crime or ASB.

In 2012/13 we will continue to improve public perception in promoting services for victims and witnesses of crime, hate crime and Domestic Violence. We will also support the delivery of the Neighbourhood Watch ‘Neighbourhood Alert’ system.

A court injunction has been granted to tackle the problem of car cruisers who have blighted the community around the Victoria Retail Park in Netherfield.

The action has been taken by the South Nottinghamshire Community Safety Partnership, which includes the County Council, Gedling Borough Council and Nottinghamshire Police.

Cllr Mick Murphy, Cabinet Member for Community Safety said: “We need to take a tough stance on car cruisers otherwise there will be a serious accident due to their dangerous driving and the noise they make is a significant disturbance to local residents.

“We set up a similar injunction at Junction 27 near Kirkby-in-Ashfield which was the first of its kind in the UK and stamped out the car cruising problem at this site.”

DCI Andrew Hall, Head of Road Crime Operations at Nottinghamshire Police, said:

“In policing the injunction, officers will stop vehicles taking part in car cruising, or any associated ASB within the specified area. Drivers and passengers will be warned about the consequences of their actions and, if they subsequently breach the warning, could face court action.

“We want young people to enjoy their vehicles safely, but not to the detriment of others.”

Some other key things we plan to do in 2012/13...

- continue to increase the speed by which children in need of protection or support are provided with the right services through our children’s safeguarding improvement programme
- strengthen early intervention work through the ‘I Pledge’ project and domestic violence awareness training
- reduce the re-referral rate for adults subject to safeguarding assessments through the development of improved internal processes to increase the percentage of assessments that lead to robust quality safeguarding plans
- further reduce the number of people killed or seriously injured in road accidents. We will be undertaking a series of awareness and educational campaigns targeted at key groups such as moped riders, young people, cyclists etc. Our work will also include reviewing speed limits in key areas. We will also carry out physical road improvements such as the installation of new pedestrian crossings and

interactive speed signs across the county.

Recognition of our achievements

A number of our services were externally recognised for excellence. These included:

- 'Girls Group'; a local initiative to raise girls self esteem and confidence to keep them out of the youth justice system was

recognised at the national Youth Justice Board's Innovation Awards

- Trading Standards 'Scambusters' team was recognised by a national anti-counterfeiting body for their work on serious and complex cases across the East Midlands
- our 'Fatal 4' campaign was highly commended in the Prince Michael of Kent International Road Safety Awards.

Priority D – Securing good quality, affordable services

Our priority is to ensure that the county council provides good quality, affordable services for the people of Nottinghamshire. This means that we will involve citizens through consulting, listening and acting on what you tell us to ensure that our services meet your needs. We will measure and evaluate ourselves against the best and make improvements to reflect this. We will work collaboratively with our partners to ensure key services are delivered well.

In 2011/12 we consulted widely on our budget for the coming year, seeking your views on the services to prioritise with our limited funding.

We said we would... redirect our resources into our priority areas by releasing funding from other services

Investing in key services - In addition to the £71 million of planned savings already delivered, this year **we have saved a further £34 million from our projected spending** through good housekeeping and better ways of working. This money will be reinvested in a number of 'spend to save' schemes and major capital projects including our contribution towards improving the A453. Other schemes to benefit from this additional funding include:

- £5 million to support the schools capital programme
- £600,000 to refurbish six residential care homes for older people
- £450,000 towards bringing high speed broadband to homes and businesses
- £250,000 towards libraries refurbishment and new books

- £350,000 towards a Carbon reduction scheme in schools to cut emissions and energy costs.

In 2012/13, we need to ensure that our key frontline services such as adult and children safeguarding and social care remain effective and responsive to the increasing demands placed upon them by the public. Therefore we will be re-investing £20 million in these services which includes:

- £2.8 million on safeguarding vulnerable children in the County
- £2.7 million on care for older people
- £1.4 million on adults with physical disabilities
- £5.2 million on care for adults with learning and mental health needs
- £771,000 on the concessionary fare scheme for older people and residents with a disability.

We said we would... invest in new developments which meet emerging customer, community and economic needs

Improving customer care - we have **improved our handling of social care queries** reducing the need for community care assessments by 18% and occupational therapy assessments by a third. A dedicated team at the Council's Customer Service Centre assess calls, prioritise them and know exactly which calls they can handle themselves and which to pass on to a group of highly experienced social care employees who work to ensure the right decision is made and people get the help they need.

Introducing new technologies - we are investing in new technologies in our libraries which enable users to download e-books directly to their e-readers such as a Kindle. Over 1,000 popular titles will initially be available 24/7.

The Victoria Suite in Worksop is the first register office in the County to offer live web broadcasts of wedding ceremonies for people unable to attend the weddings of their friends and relatives.

In 2012/13 we will introduce 'Real Time' travel information at bus stops across north Nottinghamshire in a move that aims to boost the number of people using public transport in the area and help cut traffic congestion. Using satellite technology the Real Time system communicates bus information to a display at the bus stop, mobile phone or website. The times displayed will show when the bus is due to arrive, as well as its number and destination. The introduction of Real Time takes away uncertainty and enables people to make more informed travel decisions.

We said we would... create more and better opportunities for residents and visitors to take part in cultural activities

Continuing improvements in arts and culture – We staged **the biggest celebration in the country of Robin Hood in August with a third more visitors than last year.** 19,000 people attended the 27th Robin Hood Festival of medieval festivities from jugglers to jesters to living history re-enactments, which we provided for half the cost of previous years.

This year saw the opening of the impressively modernised library at Mansfield. We have also produced a

clear [cultural strategy](#) which sets out our continual development of our key cultural services such as libraries, archives and information and country parks.

In 2012/13 we will be looking to create a 'visitor experience for the 21st century' on land adjacent to the existing Sherwood Forest Visitors' Centre and National Nature Reserve and improve the way we manage the National Water Sports Centre. We will also complete a new library and young people's centre in West Bridgford at a cost of nearly £6 million.

Some other key things we plan to do in 2012/13...

- improve how we deal with our customers through a new customer strategy. This includes work such as implementing new customer service standards, re-launching of Customer Service training with more focus on front line employees and making better and wider use of customer feedback to inform our improvement work
- complete the redevelopment of Eastgate Day Services Centre in Worksop by autumn 2012.

Did you know?

- A recent survey of more than 8,000 parents showed 81% considered the service from our catering employees as good or very good. 74% were satisfied with value for money and 76% were satisfied with overall taste
- Mansfield library has seen an increase in members since its £3.4 million refurbishment. Numbers of new members in 2011 had almost trebled compared to 2010.

Priority E – To be financially robust and sustainable

Our priority is to be cost effective, run as one council-one business and provide value for money in all that we do. We need to reduce our running costs to protect spending on front line services.

The Council will need to change the way it operates including business transactions, procurement and organisational design.

In 2011/12 our work to be cost effective enabled us to freeze council tax for the 3rd year running.

***We said we would...** have excellent procurement and commissioning which secures best value for money and will have opened our services to new providers*

Improving value for your money through better buying of goods and services - we have improved the way the council buys goods and services to ensure that we pay the best price, achieving **savings in excess of £5 million.** We have actively encouraged the involvement of local companies to support local jobs and around half of the annual spend on goods and services is with suppliers based in Nottinghamshire.

During 2012/13 we will build on these achievements. Further improvements in how we do business with local suppliers and how they are paid will take place. Major projects to be completed include the identification of investment partners for both Sherwood Forest Visitor Centre and the National Water Sports Centre, improvements to Home Care and various Children's Centres.

***We said we would...** extract maximum value for money from all of our assets including our buildings*

Reducing our surplus land and buildings - we have received over £16 million from the sale of surplus land and property including a number of large office buildings in Rushcliffe and Bassetlaw.

In 2012/13 we will continue to rationalise and make best use of Council property and develop a scheme for giving some areas of surplus land to local communities.

Improving our vehicle management - we have **reduced the annual fuel cost for our vehicles by over £90,000** despite the increased price for petrol and diesel. The saving is part of a wider programme to save £900,000 on transport costs, including fleet and employee travel expenses.

In 2012/13, we will continue to lower our costs through further improvements to our fleet maintenance and usage.

***We said we would...** develop a workforce that is fit for purpose, skilled, able and empowered to make decisions and actively contributes to the improvement of services year on year*

Developing our workforce - we have introduced a *competency framework* – a standard set of skills and behaviours for employees. This helps to align individual employees' activities to the council's priorities, vision and values. The benefits of this framework are having a standardised approach, improving recruitment and career development.

Investing in our people - in May 2012, we will seek re-accreditation from Investors in People. A team of inspectors will spend three days visiting the Council to find out more about how we're investing in our people and what One Council – One Team means.

Investors in People is the UK's leading people management standard. The Council has a track record of maintaining the standard over the last 12 years.

***We said we would...** introduce new business processes and systems that are good and that maximise the use of new technology*

Using new systems to do our business better - we successfully went live with a new IT Business Management System (BMS) during 2011 to change the way that we manage our people and resources and to provide a clearer picture of how and where money is being spent.

BMS provides the Council with a single, integrated IT solution for managing our human resources, payroll, procurement, finance and estates processes.

In 2012/13 further development will enable the Council to include the payroll

for schools based employees and estates management.

Some other key things we plan to do in 2012/13...

- reduce how long we take to process invoices. This will be achieved through actions such as enforcing a 'no purchase order, no pay' policy and processing more invoicing electronically
- agree and implement a new workforce strategy across the Council in order to ensure that we have a flexible, responsive and engaged workforce with the necessary knowledge, skills and experience now and for the future
- Expand the services provided at the Customer Service Centre to cover other public services.

Recognition of our achievements

Our modern new highways depot at Bilsthorpe was commended in the large project category of the Institution of Civil Engineers East Midlands Merit Awards. This new depot replaces four old and out-dated buildings and brings them together on one site. The new depot is more energy efficient and cheaper to run with solar panels installed which expect to generate £14,000 in savings.

REPORT OF THE LEADER OF THE COUNCIL**POLICY LIBRARY****Purpose of the Report**

1. This report is to provide the Policy Committee with a demonstration of the trial version of the County Council's policy library.

Information and Advice

2. The County Council's ambitions, values and priorities are set out in the Strategic Plan for 2010 – 2014.
3. Priority E of the Strategic plan is for the Council 'to be financially robust and sustainable.' The key actions to be taken to deliver this priority includes a requirement to:
 - Establish a council wide policy and strategy database.
4. Reporting of progress delivering these requirements falls within the responsibility of the Policy Committee.

Policy Library

5. The Strategic Plan requires that all of the Council's policies and strategies be accessed from a single policy and strategy database. This requirement has also been enshrined in the constitution as part of the policy framework.
6. The development of a policy library provides a single point for Members, officers, the public and partners to access the key documents governing the County Council and is consistent with the Authority's commitment to transparency.
7. Progress developing the policy library was reported to the Policy Committee in May 2012. Members requested that the committee be provided with a demonstration at this meeting.
8. The policy library has been under development for a number of months. A trial version is currently available on the County Council's

Intranet and further progress has been made since May to populate this with the Council's policies, strategies, procedures and guidance. The Policy Committee will receive a demonstration of this trial version at the meeting.

9. Once complete the Library will be made available on the public website. Further work will be needed to replace duplicates of policies contained on pages on the intranet and website with direct links to the policy library. This should ensure that Members, officers, the public and partners always have access to the most up to date version or reducing the risk of reliance of out of date documentation.

Other Options Considered

10. None.

Reason/s for Recommendation/s

11. The development of the Policy Library supports the delivery of the Strategic Plan and the Council's commitment to transparency and openness.

Statutory and Policy Implications

12. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

RECOMMENDATION/S

It is recommended that

1. the Committee note progress developing the policy library.

Councillor Kay Cutts
Leader of the Council

For any enquiries about this report please contact: Matthew Garrard,
Policy, Performance and Research Team Manager T: (0115) 9772892 E:
matthew.garrard@nottsc.gov.uk

Constitutional Comments

13. Because this report is for noting only no Constitutional Comments are required.

Financial Comments

14. There are no financial implications arising directly from this report.

Background Papers

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

Nottinghamshire County Council Strategic Plan 2010 - 2014
Nottinghamshire County Council Constitution

Electoral Division(s) and Member(s) Affected

All

**REPORT OF CORPORATE DIRECTOR, POLICY, PLANNING AND
CORPORATE SERVICES****WORK PROGRAMME****Purpose of the Report**

1. To review the Committee's work programme for 2012/13.

Information and Advice

2. The County Council requires each committee to maintain a work programme. The work programme will assist the management of the committee's agenda, the scheduling of the committee's business and forward planning. The work programme will be updated and reviewed at each pre-agenda meeting and committee meeting. Any member of the committee is able to suggest items for possible inclusion.
3. The attached work programme was drafted in consultation with the Chairman and Vice-Chairman and reported to the first meeting of the Policy Committee. It includes items which can be anticipated at the present time. Other items will be added to the programme as they are identified.
4. As part of the transparency introduced by the new committee arrangements, committees are expected to review day to day operational decisions made by officers using their delegated powers. Such decisions will be included in the work programme on an annual basis and as specific decisions of interest arise.
5. The Policy Committee will be asked to determine policies, strategies and statutory plans developed or reviewed by other Committees of the Council. A list of proposed policy developments and policy reviews is included as an appendix to the report. This list will be updated regularly following the meetings of each of the Council's Committees and policies referred to the Policy Committee for determination will be included in the work programme.
6. Committee Chairmen are invited to advise the Policy Committee of any additional policy reviews that are being considered.

Other Options Considered

7. None.

Reason/s for Recommendation/s

8. To assist the committee in preparing and managing its work programme.

Statutory and Policy Implications

9. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

RECOMMENDATION/S

- 1) That the committee's work programme be noted, and consideration be given to any changes which the committee wishes to make;

Jayne Francis-Ward
Corporate Director, Policy, Planning and Corporate Services

For any enquiries about this report please contact: Matthew Garrard, Team Manager, Policy, Performance and Research T: (0115) 9772892 E: matthew.garrard@nottsc.gov.uk

Constitutional Comments (SLB 30/04/2012)

10. The Committee has authority to consider the matters set out in this report by virtue of its terms of reference.

Financial Comments (PS 2/5/12)

11. There are no financial implications arising directly from this report.

Background Papers

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

Electoral Division(s) and Member(s) Affected

All

POLICY COMMITTEE - WORK PROGRAMME

<u>Report Title</u>	<u>Brief summary of agenda item</u>	<u>For Decision or Information</u>	<u>Lead Officer</u>	<u>Report Author</u>
September 2012 12th				
Strategic Performance Report – Q1	Report on the overall progress of the County Council towards its strategic priorities over the first quarter of the year.	Information	Celia Morris	Matthew Garrard
Improvement Programme – Performance	Quarterly report on the progress of the Council's Improvement Programme.	Information	Deborah Hinde	Deborah Hinde
Performance Framework	To consider a framework for performance management of the Council.	Decision	Celia Morris	Matthew Garrard
Review of Complaints	Bi-annual overview of complaints received by the County Council.	Information	Celia Morris	Jo Kirkby
Single Access Fund Housing	The Single Access Fund (SAF) Housing scheme is an investment fund being established to help local authorities to develop housing and accommodation for vulnerable groups. This report provides information on the opportunities which may be present from the Single Access Fund Housing initiative, and to determine the County Council's future interest in this scheme.	Information	Jon Wilson	Jon Wilson
Local Health watch	To consider the procurement of a local health watch for Nottinghamshire	Decision	Jayne Francis-Ward	Caroline Agnew
Community Covenant Pledge	To agree an armed forces community covenant pledge for Nottinghamshire	Decision	Tim Gregory	Matthew Garrard
Communications & Marketing Strategy	To consider a communications and marketing strategy for the County Council including a Commercial Policy, Media Relations Policy and Social Media Policy	Decision	Martin Done	Matt Dodd Clare Yau Marie Lewis
Sherwood Forest Visitor Centre	Report on outcome of Work Concession tender process	Decision	Derek Higton	Patrick Candler
October 2012 17th				
Nottinghamshire Growth Plan	To consider proposals from the Economic Development Committee on 3 July for a Nottinghamshire Growth Plan	Decision	Celia Morris	Matt Lockley
Economic Development Strategy	To consider proposals from the Economic Development Committee on 3 July for an economic development strategy for Nottinghamshire	Decision	Celia Morris	Matt Lockley
Framework for devolving	To consider the development of the framework as part of	Decision	Celia Morris	Matthew Garrard

<u>Report Title</u>	<u>Brief summary of agenda item</u>	<u>For Decision or Information</u>	<u>Lead Officer</u>	<u>Report Author</u>
services to parish/town councils	the implementation of the Council's Localism Policy			
Legal Settlements	Bi-annual overview of legal settlements reached in the preceding 6 months	Information	Heather Dickinson	
November 2012 14th				
Initial Committee Budget and Capital Proposals for 2013-14	To consider initial budget proposals for services within the terms of reference of the Policy Committee	Decision	Mick Burrows	
National Water Sports Centre – future management	To agree future management arrangements for the National Water Sports Centre	Decision	Derek Higton	Steve Bradley
December 2012 12th				
Strategic Performance Report – Q2	Report on the overall progress of the County Council towards its strategic priorities over the second quarter of the year.	Information	Celia Morris	Matthew Garrard
Improvement Programme – Performance	Quarterly report on the progress of the Council's Improvement Programme.	Information	Deborah Hinde	
Communications & Marketing Development	Report on the Development of Communications & Marketing Services	Information	Martin Done	
January 2013 16th				
Communications & Marketing Campaigns	Report on the reach of communication and marketing campaigns 2012-13.	Information	Martin Done	Clare Yau
Risk Management Strategy	To review the Risk Management Strategy	Information	Tim Gregory	Rob Fisher
February 2013 13th				
Budget 2013-14 - Proposals	To receive the budget recommendations of the Finance and Property Committee.	Refer to Council	Paul Simpson	
Pay Policy Statement	To receive the recommendations of the Personnel Committee on the Pay Policy Statement.	Refer to Council	Marje Toward	
March 2013 13th				
Strategic Performance Report – Q3	Report on the overall progress of the County Council towards its strategic priorities over the third quarter of the year.	Information	Celia Morris	Matthew Garrard

<u>Report Title</u>	<u>Brief summary of agenda item</u>	<u>For Decision or Information</u>	<u>Lead Officer</u>	<u>Report Author</u>
Improvement Programme – Performance	Quarterly report on the progress of the Council’s Improvement Programme.	Information	Deborah Hinde	
Review of Complaints	Bi-annual overview of complaints received by the County Council.	Information	Celia Morris	Jo Kirkby
Equalities Plan	To consider the annual equalities plan in accordance with statutory duties arising from equalities legislation.	Decision	Celia Morris	Matthew Garrard
April 2013 17th				
Legal Settlements	Bi-annual overview of legal settlements reached in the preceding 6 months	Information	Heather Dickinson	
Freedom of Information and Data Protection	Annual report and review of freedom of information and data protection performance and processes	Information	Celia Morris	Jo Kirkby
May 2013 22nd				
Community Safety Agreement	To consider proposals from the Community Safety Committee on 23 April for the new community safety agreement	Decision	Jayne Francis-Ward	Chris Walker
Strategic Vision for Nottinghamshire	To consider the outline process for the Strategic Plan 2014-18	Decision	Celia Morris	Matthew Garrard
June 2013 13th				
Annual Performance Report 2012/13	Report on the overall progress of the County Council on its strategic priorities over the final quarter of the year and across the whole year.	Information	Celia Morris	Matthew Garrard
Improvement Programme – Annual Report	Annual report of achievements for 2012-13.	Information	Deborah Hinde	

Policies under Development or Scheduled for Review

Policy	Committee/Body	Scheduled Dates for			Draft Plan	Progress Review
		Review / development	Completion	Draft Policy for approval *		
Localism Policy	Council/Policy Committee	Sept 11	Jan 12	26 Jan 12 <i>Council</i>	23 May 12	tbc
Communications and Marketing Strategy	Policy Committee		Jul 12	18 Jul 12		
Looked After Children Strategy	Children and Young People's Committee		18 Jun 12	18 Jul 12		
Youth Homeless Strategy	Early Years and Young People's Sub Committee		3 Jul 12	18 Jul 12		
Nottinghamshire Health and Wellbeing Strategy 2012-13	Health and Wellbeing Board	Jul 11	2 May 12	18 Jul 12		
Economic Development Strategy	Economic Development Committee	3 Jul 12	4 Sept 12	17 Oct 12		
Nottinghamshire Growth Plan	Economic Development Committee	3 Jul 12	4 Sept 12	17 Oct 12 <i>Council Nov 12</i>		
Volunteering Strategy	Policy Committee	Council 26 Jan 12	Oct 12			
Early Intervention and Prevention Strategy Refresh	Early Years and Young People's Sub Committee	Autumn 2012	17 Oct 12	14 Nov 12 tbc		
Customer Strategy	Policy Committee					
Pay Policy Statement	Personnel Committee	23 Jan 13	23 Jan 13	13 Feb 13 <i>Council</i> 28 Feb 13		
Cultural Strategy (monitoring)	Culture Committee	2 Oct 12	2 Oct 12			6 months
Libraries Strategy(monitring)	Culture Committee	2 Oct 12	2 Oct 12			6 months
Archive Acquisition Policy	Culture Committee	30 Oct 12				
Review of Child Poverty Strategy	Children and Young People's Committee	8 Oct 12				
School Strategy	Children and Young People's Committee		5 Nov 12			
Review of Closing Gap Strategy	Children and Young People's Committee	5 Nov 12				
Review of Grant Aid Strategy	Grant Aid Sub Committee	12 Nov 12				
Home to School / SEND Transport Policy	Children and Young People's Committee		May 2013			
Post 16 Transport Policy	Children and Young People's Committee		May 2013			

**REPORT OF THE SERVICE DIRECTOR FOR PROMOTING INDEPENDENCE
AND PUBLIC PROTECTION****COLLECTION OF SERVICE CHARGES FOR TELECARE****Purpose of the Report**

1. The purpose of this report is to recommend a change to the policy for collecting telecare service charges. The change will enable the council to extend its provision of telecare to a wider group of service users, supporting their independence and reducing the need for social care.

Information and Advice

2. Telecare is a more advanced version of the community alarm or 'Lifeline' service which has existed primarily in sheltered housing for a number of decades. Telecare links a range of home safety and personal hazard sensors in a vulnerable person's home to a 24 hour monitoring centre. The monitoring centre can receive alerts from the sensors and arrange an appropriate response, such as contacting the person through the main telecare unit in their home to provide advice and reassurance, or calling an ambulance if there is a medical emergency.
3. Telecare sensors are available to monitor a range of risks in the home, including:
 - Falls
 - 'Wandering' by people with dementia
 - Night time incontinence
 - Poor medication compliance
 - Night Time epileptic seizures
 - Flood, fire and carbon monoxide gas.
4. A number of studies of telecare have demonstrated that it can help to provide more cost effective care for vulnerable older and disabled people, including people with dementia and learning disabilities. For example, a 2011 report, *Telecare and Telehealth: Progress and Opportunities in the East Midlands*, commissioned by the East Midlands Joint Improvement Partnership examined the impact of telecare provided to 642 people across the region. The report found that annual savings for social care were between £449,512 and £499,458.
5. Following a tender process, Nottinghamshire County Council entered into a contract with Tunstall Healthcare Limited to provide a countywide telecare service

from October 2011. The service supports a number of Adult Social Care, Health and Public Protection (ASCH&PP) savings business cases, including:

- Alternatives To Residential Care
 - Reduced spend on Learning Disability & Mental Health Community Care
 - Reduced spend on Older Persons Community Care.
6. When the new telecare service commenced in October 2011 it was targeted at service users who met the Fair Access to Care (FACS)¹ eligibility criteria for the provision of social care support. Under the Department Of Health rules, no charge can be made to the service user for the provision of telecare equipment, but a charge for ongoing service costs, such as the provision of the 24 hour telecare monitoring service, is permitted. Since October 2011, a charge of £2 per week has been made for the ongoing service provision and this has been included in the personal budget amount which has been identified to fund the service user's social care support.
 7. The inclusion of the £2 per week service charge in the personal budget, means that any service user contribution to this charge is collected using the process which already exists under the Fairer Contribution policy for home care and other non residential services.
 8. In order to enable people to remain independent and to reduce the number of people needing ongoing social care support the Council agreed to provide greater access to telecare and other assistive technology services. This included providing telecare to service users who do not currently meet the FACS eligibility criteria for the provision of social care support, but who nevertheless are at risk of meeting these criteria in the near future, if there is any further decline in their health or well being. Telecare can help to reduce the risk of such a decline and it is therefore important that it is provided as a preventative service to maintain independence at home. Key target groups, would include people receiving reablement services, people returning home from a hospital stay, people receiving short-term intermediate care services and people in the earlier stages of dementia.
 9. In order to provide telecare to people who do not meet the FACS eligibility criteria and who are not in receipt of a personal budget, the Council needs to consider the issue of how ongoing service charges for telecare will be collected. The existing Fairer Contribution procedures cannot be used as they only apply to FACS eligible service users. Given this, it is proposed that charges are collected directly by Nottinghamshire County Council's contracted service provider, Tunstall Healthcare Limited. The service charge made by Tunstall would be set at the current rate of £2 per week to ensure equity of charging to all service users irrespective of whether they meet, or do not meet, the FACS eligibility criteria.
 10. Adopting this change in collection policy will mean that a flat rate charge for telecare will be applied irrespective of FACS eligibility, in the same way as other

¹ [Prioritising need in the context of Putting People First: a whole system approach to eligibility for social care - guidance on eligibility criteria for adult social care, England 2010](#)

FACS neutral services, such as meals at home. This change will have a financial implication for some current FACS eligible service users where their personal budget for social care services includes the £2 per week fee. The precise number of service users who would be affected by this change would not be known until the day of implementation, but is estimated to be around 60 people. To ensure that these service users are not disadvantaged in any way, it is proposed that they are transitionally protected, with the £2 charge remaining as part of their personal budget allocation. This will ensure that their assessed contribution to the telecare element of their personal budget will continue to be subject to the Fairer Contribution policy, in the same way as if the change outlined in this report had not taken place. The cost to the authority of this transitional protection is estimated to be a maximum of £6,240 per annum, but this will decrease in future years as the number of protected people, who still require the telecare service, reduce. Furthermore, the net cost will be somewhat less than this, as some service users will be paying the full contribution to their personal budget.

Other Options Considered

11. The option of completely waiving the ongoing weekly service charge has been considered. However, this would increase costs to Nottinghamshire County Council by an estimated £30,000 for 2013/14, and this cost would increase by approx £15,000 per annum as the service expanded. Given the ongoing and increasing impact on the authority's finances this option is not recommended.

Reason/s for Recommendation/s

12. Enabling Tunstall Healthcare Limited to collect charges for telecare directly from service users will have the following benefits:
 - It will enable telecare services to be provided to more vulnerable older and disabled people, enabling them to maintain independence in their own home for longer.
 - It will reduce demand for statutory health and social care provision, providing efficiency savings for Nottinghamshire County Council and value for money for local council tax payers.
 - It will avoid the need to establish a new collection process within the authority, and the associated costs.

Statutory and Policy Implications

13. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Implications for Service Users

14. The proposed change will enable an increase in the number of vulnerable older and disabled people, who can benefit from telecare to maintain their independence at home. Telecare will also provide piece of mind and reassurance to carers. Approximately 60 current telecare service users would be financially affected by up to £2 per week by the proposed change. However, this report recommends that these service users are transitionally protected, with the £2 per week telecare service charge remaining as part of their personal budget allocation, and continuing to be subject to the Fairer Contribution policy for home care and other non residential services.

Financial Implications

15. The proposed collection of telecare service charges by Tunstall Healthcare Limited will reduce the ongoing financial pressures on the authority of providing an expanded telecare service, as outlined in paragraph 11 of this report. The cost of transitionally protecting the estimated 60 service users who currently receive telecare as part of their personal budget allocation will be a maximum of £6,240 per annum, with this figure reducing over time as people's circumstances change, and they no longer require the service.

Crime and Disorder Implications

16. Telecare bogus caller buttons can help to reduce doorstep crime by enabling service users to call for assistance from the 24 hour telecare monitoring centre. Conversations with doorstep callers can also be recorded if the service user presses a discreet button and these recordings can be used as evidence in criminal prosecutions for doorstep crime.

RECOMMENDATION/S

It is recommended that:

- 1) approval is given for the collection of telecare service charges from service users who do not meet the Fair Access to Care eligibility criteria at the current rate of £2 per week, to be undertaken by Nottinghamshire County Council's contracted service provider, Tunstall Healthcare Limited.
- 2) Transitional protection is provided to any service users who, at the time of implementation of recommendation (1), have the telecare service cost included in their personal budget allocation.

PAUL MCKAY

Service Director for Promoting Independence and Public Protection

For any enquiries about this report please contact:

Jane North

Tel: 0115 9773668

Email: jane.north@nottscc.gov.uk

Constitutional Comments (LMc 11/07/2012)

17. The Policy Committee has delegated authority within the Constitution to approve the recommendations in the report.

Financial Comments (RWK 11/07/2012)

18. There are no direct financial implications, in terms of either additional expenditure or income, to the County Council as a result of the proposals set out in the report. The wider use of telecare is expected to reduce overall future spending on social care by providing more cost effective support to older people and younger adults with disabilities.

Background Papers

None.

Electoral Division(s) and Member(s) Affected

All.

P3