# Nottinghamshire Children, Young People and Families Plan 2014 -16

Final version
January 2013

This is the joint strategic plan of Nottinghamshire Children's Trust. It is published by Nottinghamshire County Council, as the lead partner with statutory responsibility to make arrangements to promote co-operation to improve children's well-being (Children Act 2004).

#### Organisations that are relevant partners listed in the Children Act 2004 are:

- Nottinghamshire County Council, including children and families services and public health
- Ashfield District Council
- Bassetlaw District Council
- Broxtowe Borough Council
- Gedling Borough Council
- Mansfield District Council
- Newark & Sherwood District Council
- Rushcliffe Borough Council
- NHS England
  - Derbyshire and Nottinghamshire Area Team
  - South Yorkshire & Bassetlaw Area Team
- Clinical Commissioning Groups operating within Nottinghamshire County Council's administrative boundaries
  - NHS Bassetlaw CCG
  - NHS Mansfield and Ashfield CCG
  - NHS Newark and Sherwood CCG
  - NHS Nottingham West CCG
  - NHS Nottingham North & East CCG
  - NHS Rushcliffe CCG
- Nottinghamshire Police
- Nottinghamshire Probation Trust
- Nottinghamshire Youth Offending Service
- Schools and colleges.

In addition, NAVO (Networking Action with Voluntary Organisations) represents voluntary and community organisations in Nottinghamshire.

The Children's Trust has an active working relationship with the Nottinghamshire Safeguarding Children Board (NSCB). The Independent Chair of the NSCB is a member of the Children's Trust Board.

In some cases, one representative attends the Children's Trust Board on behalf of a number of organisations.

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## 1. Working together for children and young people

#### About the Children's Trust

Nottinghamshire Children's Trust is a partnership of organisations that commission or provide services to children, young people or families. Children's Trust arrangements enable us to plan and deliver joint working and cooperative arrangements, making best use of resources.

We know that children, young people and their families are more likely to do well if they are at the centre of our economic ambitions for Nottinghamshire. To promote this, the Children's Trust Board is the children's commissioning sub-group of the Health and Wellbeing Board for Nottinghamshire.

The Health and Wellbeing Board has a key role in the strategic planning and coordination of health, social care and related services for all age groups. By reporting to the Health and Wellbeing Board, the Children's Trust ensures that the needs of children, young people and families influence planning for health and wellbeing improvements across all public services.

The Children's Trust has an active working relationship with the Nottinghamshire Safeguarding Children Board (NSCB) to ensure that safeguarding children is central to our work. The NSCB coordinates some safeguarding activities, including training, and scrutinises and challenges the work of the Children's Trust.

## About our Children, Young People and Families Plan 2014-16

This is the joint strategic plan of the Children's Trust and identifies how we will work together to promote the health and wellbeing of children and young people in Nottinghamshire.

#### It summarises:

- what we will do over the next two years, to plan, commission or provide services
- the impact we expect to have on the lives of children, young people and families.

We will also publish annual delivery plans which will provide more information about what we plan to do and there are detailed strategies and plans for specific areas of work.

# How this Plan is aligned with the Health and Wellbeing Strategy for Nottinghamshire (2014-16)

The Health and Wellbeing Strategy for Nottinghamshire is a plan to ensure that services in Nottinghamshire meet the health and wellbeing needs of the people of Nottinghamshire. It identifies three ambitions:

- To support people to live healthier lives & make healthier choices – PREVENTION
- To encourage & enable people to live independently for as long as possible – INDEPENDENCE
- To provide care and support through services which work together - INTEGRATION

This Plan identifies the Children's Trust priorities for work with children, young people and their families, and the actions we will take to achieve these priorities. In Section 3, we define our priorities and describe how each of our planned actions contributes to the priorities of the Health and Wellbeing Strategy.

#### The context for this Plan

We have developed this Plan at a time when all public sector organisations are facing financial challenges and making difficult decisions about where to reduce spending. We have needed to be realistic about what we can achieve and to prioritise where we invest.

We are committed to supporting the most vulnerable and will target services to those who need them most. Working together in an integrated way will enable us to make best use of our available resources and continue to provide quality services.

#### How this Plan promotes equality

We will promote equality and diversity through the work of the Children's Trust, as described in this Plan.

We will do this by identifying need and working together to address this, within our available resources. All of our priorities identify how we will work with children or young people who face disadvantages, to improve their health and wellbeing.

More information is provided in our <u>Equality</u> <u>Impact Assessment.</u>

## 2. Children's Trust achievements between 2011 and 2014

Our new Children, Young People and Families Plan builds on the partnership working that was set out in our Plan for 2011-14. During the three years of this Plan, our achievements have included:

- the delivery of a transformation programme for Children's Social Care, which established a new delivery model for the service
- the establishment of the Multi-agency Safeguarding Hub (MASH), as a single point of contact for all professionals to report safeguarding concerns about children or vulnerable adults
- the development and implementation of the Nottinghamshire Looked After Children Strategy for 2012-15 and The Pledge for Looked After Children. These identify how the County Council, supported by partner agencies, will provide support to children and young people who are in care. This work included input from looked after children and young people
- revising and simplifying the Nottinghamshire Pathway to Provision, to be used by practitioners in partner organisations. This outlines Nottinghamshire's offer of early help services, and describes how integrated early help services relate to more specialist services
- the publication of an Early Help Development Plan, identifying activities to further improve the early help offer
- the establishment of the Early Help Unit as a central contact point for requests for early help services
- reviewing Nottinghamshire's approach to common assessment, including consultation with partners
- the establishment of an Integrated Commissioning Hub, hosted by Nottinghamshire County Council to commission children's health services on behalf of a range of health commissioners
- a pathfinder project to develop and implement a combined Education Health and Care Plan for children with complex needs, ahead of this becoming a statutory requirement

- the development of integrated care pathways, including a Multi-Agency Autistic Spectrum Pathway, which has now been broadened to include support for children/young people with Attention Deficit and Hyperactivity Disorder (ADHD)
- the publication of an Integrated Commissioning Strategy for Teenage Pregnancy
- support for the Family Nurse Partnership programme in Nottinghamshire
- support for the delivery of Nottinghamshire's Strategy for Closing the Educational Gaps
- support for the development of a Child and Family Poverty Strategy for Nottinghamshire
- support for work led by public health, including work to increase the numbers of children and young people who are of a healthy weight and work to promote breastfeeding.

During 2011-14, there has been continuing improvement in outcomes for children and young people in Nottinghamshire.

This includes improvement in educational attainment for all age groups, with attainment now exceeding the national average at Foundation stage, age 11 and age 16.

The numbers of young people entering the youth justice system for the first time continues to decrease.

Over the last three years, we have worked hard to improve the timeliness and quality of Children's Social Care assessments of the needs of children who are referred to them for support.

## 3. Children's Trust Priorities for 2014 to 16

#### **About our priorities**

Our priorities identify how we will make best use of our collective resources to enable all children and young people to be safe, healthy and achieving their full potential.

Three of our priorities identify how we will:

- Work together to keep children and young people safe
- Improve children and young people's health outcomes through the integrated commissioning of services
- Close the gap in educational attainment between disadvantaged children and young people and their peers, and so enable all to achieve their potential.

A further two priorities are about how we will work in an integrated way across all of these work areas. We will:

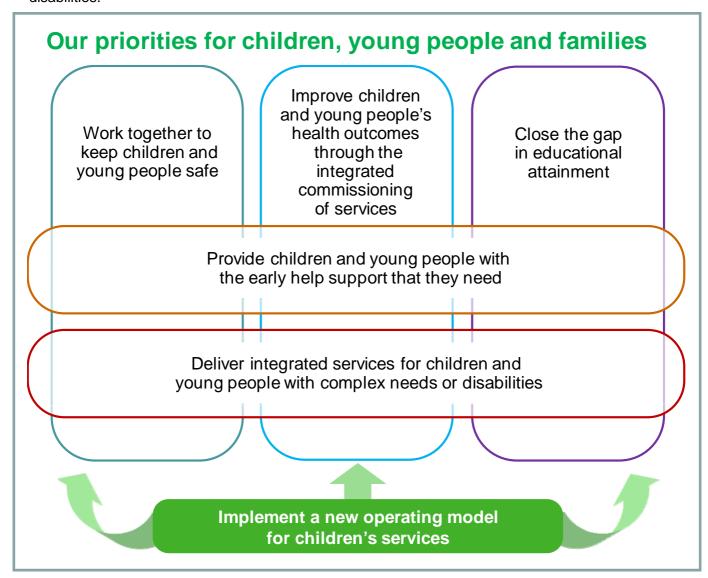
- Provide children and young people with the early help support that they need
- Deliver integrated services for children and young people with complex needs or disabilities.

## A new operating model for children's services

All of our work is underpinned by a new approach to the integrated delivery of County Council children's services, with an emphasis on locality working.

The new operating model incorporates a number of key components:

- moving to a single point of public and professional access for children's services, through the Council's customer service centre where appropriate
- developing integrated access hubs to triage and allocate service referrals
- establishing integrated, multi-disciplinary, co-located teams based in three geographical localities
- establishing centralised specialist services and support services.



#### Why we chose our priorities

To identify our priorities, we reviewed evidence about the needs of children and young people from our <u>Joint Strategic Needs Assessment</u> (JSNA) for Nottinghamshire.

We know that, on average, children and young people in Nottinghamshire often do as well as those in similar places elsewhere. However, there are large inequalities across the County, and some children and young people face greater disadvantages. National and local data shows that children and young people living in poverty are disadvantaged in many ways.

In Nottinghamshire, the localities where there are higher numbers of families on low incomes are often those localities where children and young people are less healthy, do less well at school and are more likely to need the support of Children's Social Care.

Across the County, children and young people who are eligible for free school meals have lower educational attainment, on average, than their peers. Some other children and young people may face particular disadvantages and so need more support. This includes disabled children and children in local authority care.

Our priorities are aimed at reducing inequalities in health and wellbeing across the County. This will include targeting activities in particular localities, or targeting groups of children and young people who are known to be more likely to be disadvantaged.

Our priorities are in work areas where:

- there are identifiable improvements we can make
- coordinated action by partner organisations can deliver these improvements.

In deciding on these priorities, we were aware of the financial challenges faced by all public sector organisations and aimed to prioritise services for those who need them most.

#### How we will achieve our priorities

The following pages include an overview for each priority, indicating:

- why this is important
- what we know about children and young people in Nottinghamshire
- how we will improve the lives of children, young people and families by 2016
- what we will do to achieve this.

More information will be provided in annual delivery plans and in strategies and plans for specific areas of work.

## How we include the views of children, young people and families

The views of children, young people and families have been included in the JSNA, where possible, and they have contributed to the needs assessments and strategies for specific work areas.

Our participation strategy describes how we will continue to involve children and young people in planning, reviewing and commissioning services. This will include:

- children, young people or families working with us to develop strategies or plans and to shape our service provision
- listening to the views of children, young people and families locally in a variety of ways such as focus groups, surveys and 'mystery shopper' exercises.

# How the Children's Trust promotes the health and wellbeing of children and young people in other ways

Our five priorities identify areas of work where the Children's Trust will coordinate partnership working and integrated commissioning. We will also work to promote the health and wellbeing of children and young people by contributing to initiatives that focus on health and wellbeing across all age groups.

The Integrated Commissioning Hub will champion issues for children and young people through public health life course areas. The NSCB will take a lead in ensuring that vulnerable children are identified and protected.

#### Work will include:

- successful achievement of outcomes and targets affecting children through the delivery of Nottinghamshire's obesity strategy (measured annually until April 2016)
- successful achievement of sexual health outcomes for children and young people within Nottinghamshire's sexual health strategy (measured annually until April 2016)
- development of a commissioning plan for children and young people's emotional wellbeing to be included within Nottinghamshire and Nottingham's broader mental health strategy (by June 2014)
- ensuring priorities for children and young people are achieved through Nottinghamshire's strategic tobacco alliance plans (to be measured annually)
- Ensuring children and young people priorities are achieved through Nottinghamshire's substance misuse strategy

## 3.1 Work together to keep children and young people safe

#### Why is this important?

All children and young people need to be safe and feel safe so that they can achieve their full potential. Some live in circumstances that can make them particularly likely to be unsafe. These are known as vulnerable children and younger children are likely to be especially vulnerable. Most children and young people are supported and cared for by their parents or carers but some parents or carers are unable to do this for a number of reasons. In these situations, the involvement of everyone who could help to keep children and young people safe is vitally important.

All partner organisations have a role in safeguarding children, with Children's Social Care leading on the protection of the most vulnerable. Over the last few years we have seen significant improvements in safeguarding performance. To sustain and build on this success, partner organisations will continue to work together through the Children's Trust and the Nottinghamshire Safeguarding Children Board (NSCB).

Recently, there has been a substantial increase in the numbers of children who are referred to Children's Social Care, and in the numbers who are looked after by the local authority. This is a national trend which is reflected in Nottinghamshire. It creates increasing demand for services, while financial resources are decreasing.

We are responding to this by developing innovative ways to work together, including the County Council's new operating model for children's services and the next stage of a transformation programme for Children's Social Care. We will continue to invest in early help services, so that families receive the help they need to avoid problems escalating. We will work together to develop clearer and more integrated pathways from early help to specialist support.

## What do we know about children and young people in Nottinghamshire?

#### What the data tells us

Across England, the numbers of children who are referred to Children's Social Care are increasing, as are the numbers of children who are looked after by the local authority. This trend is reflected in Nottinghamshire.

However, there is significant variation in the numbers across districts. For example, Nottinghamshire's Multi-Agency Safeguarding Hub (MASH) handled approximately 13800 enquiries between April and December 2013. The district with the highest number of enquiries was Ashfield, with over 2500 enquiries. In contrast, the district with the lowest number was Rushcliffe, with just under 900 enquiries.

## What children, young people and families tell us

The views of children, young people and their families have informed service planning and delivery in Children's Social Care. They have contributed to:

- The Pledge for Looked After Children and Looked After Children Strategy
- professional guidance on e-safety, self-harm and safeguarding disabled children.

The views of children, young people and their carers are included in individual assessments and plans. In addition, Children's Social Care managers seek the views of young people and carers when they audit samples of work as part of their quality improvement.

# How will we improve the lives of children, young people and families by 2016?

We will work together to ensure that the most vulnerable children continue to be effectively protected and supported and that children stay with their families wherever this is possible and safe for them. Children in our care will experience high quality and stable support.

To monitor our progress, we will use key outcomes measures. We aim to achieve:

- reduced re-referrals to Children's Social Care
- increased numbers of assessments for individual children carried out within acceptable timescales (initial and core assessments)
- fewer children who have child protection plans that last for two years or more or who need to have a child protection plan more than once
- more children being placed for adoption within 21 months of becoming looked after
- fewer looked after children who have 3 or more placements in any one year
- continuing improvements in the quality of assessments undertaken by Children's Social Care.

	We will	Health an	Health and Wellbeing Ambition		
What we will do	do this by	Prevention	Independence	Integration	
We will review and further develop partnership arrangements for safeguarding children, as set out in the national guidance 'Working Together 2013',	April 2016	✓	<b>✓</b>	<b>✓</b>	
We will simplify and improve access to children's services by implementing a new operating model for services	April 2015	✓	✓	✓	
We will deliver the next stage of a comprehensive improvement programme for Children's Social Care that will focus on:	April 2015				
<ul> <li>Looked After Children</li> <li>Disabled Children's Services,</li> <li>Family and Placement Support</li> <li>Workforce Development.</li> </ul>			<b>✓</b>	✓	
We will work together to support the effective operation of the County Council's Multi-Agency Safeguarding Hub (MASH), by  • bringing together the MASH and the Early Help Unit  • developing more effective information-sharing between partners	Oct 2014	<b>√</b>	<b>√</b>	<b>✓</b>	
<ul> <li>promoting a shared understanding of thresholds for access to services</li> <li>We will further improve our partnership arrangements to</li> </ul>	April				
identify and support children and young people who are affected by parental mental health issues, substance misuse or domestic violence	April 2015	✓		✓	
We will develop improved partnership arrangements to identify and support young carers	April 2015	✓		✓	
We will deliver the next stage of a partnership strategy to ensure that children and young people are protected from sexual exploitation	April 2015	✓	<b>✓</b>	<b>✓</b>	
We will continue to improve our arrangements for engaging children and young people in decision-making about their lives, including in child protection planning	Sept 2014		<b>✓</b>		
We will promote children and young people's awareness of safeguarding by developing a programme of engagement and participation in schools or other universal setting	April 2016	✓			
We will identify ways to promote safeguarding in the wider community, including through businesses and workplaces	April 2016	✓			

## Lead responsibility for this work

Nottinghamshire Safeguarding Children Board

- Nottinghamshire County Council Children Families and Cultural Services
- Nottinghamshire Early Help Executive

## Related strategies and plans for Nottinghamshire

- NSCB Annual Reports and Business Plans
- Looked After Children Strategy
- Early Help Development Plan
- Pathway to Provision

## 3.2 Improve health outcomes through the integrated commissioning of children's health services

## Why is this important?

Investing in children's health is an investment in the future. Healthy children and young people are able to enjoy life and achieve their full potential. They are more likely to go on to become healthy adults and parents who in turn promote better health in future generations. Early intervention and prevention to improve children's health and wellbeing can produce longer-term financial savings in higher-cost medical services.

Medical science and technology is advancing but major health inequalities still exist. Poorer health is associated with economic deprivation, both nationally and locally. Integrated working across health, social care and education services is more likely to provide disadvantaged children and young people with the right support. However, the Health and Social Care Act 2012 created an increased number of organisations responsible for commissioning, risking fragmented health service provision.

We addressed this in Nottinghamshire by setting up the Integrated Commissioning Hub, in 2013. This is hosted by the County Council and accountable to the Children's Trust Board. It acts as a single point of coordination for children's health and wellbeing integrated commissioning, on behalf of Clinical Commissioning Groups, the County Council, including Public Health and (from October 2015) NHS England Area Teams.

## What do we know about children and young people in Nottinghamshire?

#### What the data tells us

In many ways, the health of children and young people in Nottinghamshire is similar to the national average, or better. For example:

- a higher proportion of primary school children are of a healthy weight
- a lower proportion of under-18s are admitted to hospital due to alcohol use
- the number of deaths of infants under one year of age is similar to national levels.

However, in some ways their health and wellbeing is worse than the national average. For example, a higher proportion of women smoke during pregnancy and a lower proportion begin breastfeeding.

Across all measures of health and wellbeing, there are significant inequalities across localities, and children from lower income families are less likely to have good health. For example, average life expectancy is much less in the most deprived areas than in the least deprived (a difference of about 9 years for men and 7½ years for women). The rate of teenage pregnancies has reduced, but is still higher than the national average in Ashfield and Mansfield.

## What children, young people and families tell us

Children and young people living in England have said that there are five key areas which are important to them. These are:

- being informed and having a say in decisions about their care
- · child-friendly, personalised care
- access to age-appropriate services as they grow, and support through the transition to adult services
- understanding their rights and responsibilities
- the role of school.

(in The Annual report of the Chief Medical Officer, 2012).

# How will we improve the lives of children, young people and families by 2016?

We will improve the provision of health services to children, young people and families through integrated commissioning to improve outcomes.

We expect this to result in better health and wellbeing for children and young people and will use a range of outcomes indicators to measure this. For all of these indicators, we will monitor inequalities across localities and for disadvantaged groups. We aim to achieve:

- a reduction in low birth weights
- increased numbers of mothers who choose to breastfeed
- a reduction in smoking amongst pregnant women at the time of delivery
- more children who are of a healthy weight
- reduced teenage conception rates
- fewer hospital admissions caused by unintentional and deliberate injuries in children aged 0-14 years

We will develop an outcomes indicator for the emotional health and wellbeing of children as part of our review of the Child and Adolescent Mental Health (CAMHS) pathway.

What we will do	We will	Health and Wellbeing Ambition		
What we will do	do this by	Prevention	Independence	Integration
We will embed integrated commissioning arrangements for children's health services and interventions across the local NHS and local authority organisations.	Dec 2014			✓
We will further improve ways to actively engage children, young people and families in developing and reviewing services and use feedback to inform future commissioning	Dec 2014	<b>√</b>	<b>✓</b>	✓
We will review the Child and Adolescent Mental Health (CAMHS) pathway, establish if there is a need for a new operating plan and then, if needed, implement any new operating plan	June 2014	<b>√</b>	✓	
<ul> <li>We will work with NHS England to commission the Healthy Child Programme. This will include:         <ul> <li>A new contract and service specification for the School Nursing service in place from April 2015.</li> <li>Completion of the Healthy Schools review and implementation of key recommendations by July 2014</li> <li>Successful transfer of commissioning responsibility for Health Visiting from NHS England to the Local Authority (ICH) from October 2015.</li> <li>Successful transfer of commissioning responsibility for Family Nurse Partnership from NHS England to the Local Authority (ICH) from October 2015.</li> </ul> </li> </ul>	Oct 2015	✓	<b>√</b>	✓
We will review unplanned admissions and avoidable emergency department attendances by children and young people by completing a needs assessment to be included in the JSNA and to inform future commissioning, linking to the Integrated Community Children and Young People's Healthcare priority on reducing hospital admissions	March 2015	✓		
We will work with key stakeholders to improve the quality of and access to Maternity Services by undertaking reviews in the Sherwood Forest Hospitals NHS Foundation Trust and the Nottingham University Hospitals NHS Trust, and implementing recommendations from the reviews.	May 2014	✓	✓	
We will review elements of the Community Paediatric Services provided by the Sherwood Forest Hospitals NHS Foundation Trust and the Nottingham University Hospitals NHS Trust, and ensure that outcome based service specifications and robust quality and performance monitoring processes are in place for:  Medical Advisors to Adoption Service  Medical Services for Looked after Children  Child Death Review Process (including rapid response to an unexpected death of a child)	Dec 2014	✓	✓	
We will champion Children and Young People issues through public health life course areas.	April 2015	✓	✓	✓

## **Lead Responsibility**

- Nottinghamshire Integrated Commissioning Hub
- Children's Commissioners Forum
- Integrated Commissioning Group: CAMHS,
- Integrated Commissioning Group: Teenage Pregnancy
- Integrated Commissioning Group: Disabled children and SEN
- Nottinghamshire Early Help Executive

## Related Strategies and Plans for Nottinghamshire

- Integrated commissioning strategy: disabled children and SEN
- <u>Integrated Commissioning Strategy for Teenage Pregnancy</u>
- Integrated Commissioning Strategy for CAMHS
- Early Help Development Plan
- Pathway to Provision

## 3.3 Close the gap in educational attainment

#### Why is this important?

Educational attainment gives young people greater opportunities for employment or further or higher education. It enables them to participate in society, achieving their full potential and contributing to their community and to the economy.

Some children and young people may need more support to enable them to achieve. Both nationally and in Nottinghamshire, there is a gap between the achievements of disadvantaged children and young people and their peers.

For all age groups, those pupils who are eligible for free school meals have lower attainment than their peers, on average. Others who may be disadvantaged include children and young people who:

- have special educational needs (SEN) or disabilities
- have social or behaviour issues, including low attendance at school
- have physical or mental health issues
- are looked after by the local authority.

These issues can be inter-linked, with many children and young people facing difficulties in several areas of their lives.

Nottinghamshire County Council works in partnership with schools and other providers and agencies to close the gap in attainment and to raise the standard of achievement for all children and young people.

Our "Together for Newark" project is a multiagency project in Newark town which focuses on earlier intervention to close gaps for vulnerable students and families in Newark schools and learning settings. It is developing and evaluating ways in which a wide range of partners can support schools in raising the attainment of disadvantaged learners.

## What do we know about children and young people in Nottinghamshire?

#### What the data tells us

In Nottinghamshire, overall educational attainment continues to improve each year at a higher rate than nationally. Attainment by those from disadvantaged groups is also increasing, but there is still a significant gap between these learners' attainment and that of their peers.

We need to work to reduce this gap, while continuing to promote achievement for all.

Although the "Together for Newark" project is at an early stage, the data on attainment for the 2012/13 academic year suggests that it is improving outcomes for learners who are eligible for free school meals.

## What children, young people and families tell us

Our work to close the attainment gap recognises that all children are unique individuals, and schools are focusing on individualised learning, reaching out to parents and the community.

Our "Together for Newark" project emphasises collaborative working between children, young people, their parents or carers and local partners. This will shape actions within schools and localities, based on a real understanding of how local people see their lives.

# How will we improve the lives of children, young people and families by 2016?

We will reduce the attainment gap between children who are eligible for free school meals and their peers at all ages. This will include:

- attainment at Early Years Foundation stage
- the attainment gap at age 11
- the attainment gap at age 16.

We will aim for continued improvement in the total number of Nottinghamshire learners who achieve 5 or more A\*-C grades at GCSE or equivalent (including English & maths)

We will maintain and improve on the relatively high levels of participation in education, employment and training of young people aged 16-18.

We will increase the proportion of our young people who achieve a full level 3 qualification by the age of 19. We will increase the numbers of young people who achieve A level passes, including at the highest A\*-B grades.

We will also monitor the progress and attainment of looked after children and will aim to reduce the gap between their average attainment and that of their peers.

What we will do	We will	Health and Wellbeing Ambition			
	do this by	Prevention	Independence	Integration	
We will deliver on the commitment to devolve funding for the support of pupils with emotional and behavioural difficulties to local School Behaviour and Attendance Partnerships	April 2016	<b>√</b>		<b>✓</b>	
We will work in partnership with schools and other organisations to close the gap in educational attainment between disadvantaged children and young people and their peers, delivering actions within our Closing the Gap Strategy	April 2016	1	<b>✓</b>		
We will identify how partner organisations can contribute to closing the gap in educational attainment, by improving the health and wellbeing of children and young people so that they are able to fulfil their educational potential	April 2016	<b>√</b>		<b>✓</b>	
We will raise the educational achievements and aspirations of looked after children and young people, by providing support and monitoring to the schools that they attend	April 2016		<b>✓</b>	<b>✓</b>	
We will raise the educational achievements of children and young people with disabilities and special educational needs, by developing more coordinated support and early help services	April 2016	<b>✓</b>	<b>✓</b>	<b>✓</b>	

## Lead responsibility for this work

- Individual schools and colleges
- Local School Behaviour and Attendance Partnerships
- Nottinghamshire County Council Children, Families and Cultural Services
- Nottinghamshire Early Help Executive

## Related Strategies and Plans for Nottinghamshire

- A Strategy for Closing the Educational Gaps
- Looked After Children Strategy
- Integrated Commissioning Strategy: Disabled Children and SEN

## 3.4 Provide children and young people with the early help support that they need

#### Why is this important?

Providing early help when families need it is key to improving outcomes for children and young people. It also reduces the likelihood that families will need more costly specialist or statutory services, such as support from Children's Social Care. Early help may involve providing help early in a child's life. It may also be help that is provided early on when an issue emerges, whatever the age of a child or young person.

Early Help Services are provided to children and young people across Nottinghamshire by a range of partner agencies including:

- children's centres
- targeted support services
- health visitors
- school nurses
- Child and Adolescent Mental Health Services
- voluntary sector providers.
- schools, who play a key role in identifying and working with families who may need more support.

To provide effective early help, these organisations need to work together and provide clear pathways of support. This includes early help services working in an integrated way with more specialist services.

## What do we know about children and young people in Nottinghamshire?

#### What the data tells us

In Nottinghamshire, outcomes for children and young people vary across localities and there is an association between poorer health and wellbeing and higher levels of social or economic deprivation. The localities where there are higher numbers of families on low incomes are often those where children have more health and wellbeing issues. These can be inter-linked, with many children and young people facing difficulties in several areas of their lives.

To respond to this, our partner organisations will work together to provide integrated early help services to those who need them most. This may mean providing services in particular localities, or for children and young people who are known to be more likely to be disadvantaged.

## What children, young people and families tell us

Children, young people or their families have told us that:

- they want to be treated with respect
- they want us to keep their information confidential
- they want staff working with them to be appropriately skilled and experienced

# How will we improve the lives of children, young people and families by 2016?

We want children and young people to receive the early help support they need to be safe, healthy and thriving.

We will monitor our progress across a range of key outcomes measures that indicate whether children and young people are safe, healthy and achieving their potential.

We aim to achieve:

- fewer children in need of protection
- fewer first time entrants to the Youth Justice system aged 10-17
- reduced absence in primary, secondary and special schools
- more children aged 0-4 living in low income areas who are supported by children's centres.

Outcomes measures for educational attainment and health also indicate how effective we are in providing early help. These include:

- the educational attainment gap between those learners who are eligible for free school meals and their peers, at all ages
- breastfeeding rates
- the number of children who are of a healthy weight
- the rate of teenage pregnancies.

We will monitor enquiries to the MASH to ensure that they result in appropriate action by Children's Social Care or Early Help Services In addition, we will introduce a quality measure

to show how our early help services are meeting the needs of children, young people and families.

	We will	Health and Wellbeing Ambition			
	do this by	Prevention	Independence	Integration	
We will align early help and social care services in localities so that families receive a joined up service	April 2014	✓	✓	✓	
We will improve the multi-agency early help offer to children, young people and families simplifying and improving access to services and developing clear pathways into support	March 2014	<b>✓</b>	<b>✓</b>	✓	
We will work together to align the services that are commissioned by the Integrated Commissioning Hub with the County Council's early help offer	Oct 2015	<b>✓</b>		✓	
We will undertake a rolling programme of needs assessments of key groups of vulnerable children and young people and use this information to inform commissioning priorities	April 2016	<b>✓</b>			
We will review and refresh our family support offer, to establish a consistent approach across the children's workforce	April 2015	<b>✓</b>	<b>✓</b>	✓	
We will implement a multi-agency workforce development plan to ensure that we recruit and retain staff who have the necessary skills, knowledge and capacity to meet the needs of vulnerable children or young people and their families	Sept 2014	<b>✓</b>		<b>✓</b>	
We will review and refresh our common assessment approach for individual children, young people or families who need integrated early help support	Dec 2014	✓		✓	

In addition to the actions described here, we will work together to ensure that the County Council's Multi-Agency Safeguarding Hub (MASH) and early help services are part of an integrated pathway through all our services. This will include bringing together the MASH and the County Council's Early Help Unit. This action is included in our priority to *Work together to keep children safe*.

## Lead Responsibility for this work

- Nottinghamshire Early Help Executive
- Nottinghamshire County Council Children, Families and Cultural Services
- Nottinghamshire Integrated Commissioning Hub
- Teenage Pregnancy Integrated Commissioning Group
- Child Poverty Reference Group

## Related Strategies and Plans for Nottinghamshire

- Early Help Development Plan
- Pathway to Provision
- A Strategy for Closing the Educational Gaps
- Integrated Commissioning Strategy for Teenage Pregnancy
- Child and Family Poverty Strategy

## 3.5 Deliver integrated services for children and young people with complex needs or disabilities

## Why is this important?

Advances in medicine mean that many children with quite significant disability are now surviving much longer than previously, across the spectrum of physical and learning disabilities. This means there is a need to support them and their families to deal with a wide range of complex needs, placing a strain on families and also on services such as health, education and social care.

As a county, Nottinghamshire has tried wherever possible to maintain children and young people in mainstream schools, but this brings its own challenges. Feedback from schools, including special schools, is that the overall number of children with disability is increasing and the number at the higher level of need and complexity is increasing too.

Children and young people with high levels of disability and their families need support to deal with their challenges throughout their childhood and youth, but also as they make the transition to adult services. We need to work together to make sure that there are services that respond to and meet these changing needs. This will mean further changes to how services for children and young people work together and how they work with adult services.

This links to changes in national legislation, which will require agencies such as health, social care and education to work much more closely to support this group of children and young people until they are 25.

Our Integrated Commissioning Hub will take a lead role in delivering an integrated approach to commissioning for health and wellbeing, including the actions identified for this priority.

## What do we know about children and young people in Nottinghamshire?

#### What the data tells us

There is no definitive data that identifies the number of children or young people with disabilities, but there is some data on likely numbers. We know that:

- 1% of Nottinghamshire pupils have a Statement of Special Educational Needs
- in the 2011 Census, there were 5,769 children and young people (aged 0-15 years) with long-term health or disability problems (up from 5,473 in 2001)
- there has been a 70% increase in the number of 0-17 year old Disability Living Allowance claimants between 2002 and 2012 (3,350 in 2002; 5,680 in 2012).

## What children, young people and families tell us

Feedback from families consistently identifies the challenge of dealing with a range of professionals, assessments and organisations, adding to the difficulties they already face.

# How will we improve the lives of children, young people and families by 2016?

Disabled children and young people and their families will experience services that work more closely together. Assessments and plans will be more coordinated, and will be developed together with families.

We will increase the number of families who have an Education, Health and Care Plan in place, ahead of this becoming a statutory requirement.

	We will	Health an	mbition	
	do this by	Intervention	Independence	Integration
We will establish the 'Education Health and Care Plan' pathway, bringing together the families and agencies for children and young people aged 0-25 with Special Educational Needs and disabilities, so that they have coordinated individual support plans.	Sept 2014		✓	<b>✓</b>
<ul> <li>We will implement the recommendations from the Integrated Children and Young People's Community Healthcare Programme report, including:</li> <li>A multi-agency single point of access for information, advice and services</li> <li>The Integration and networking of services. For example, we will integrate Children's Community Nursing and Special School Nursing Services.</li> </ul>	April 2015	<b>√</b>	<b>√</b>	<b>✓</b>
As we develop a new operating model for County Council children's services, we will review the support services to children with disabilities and identify where we can deliver more integrated service provision across children's social care, education support and health commissioning.	April 2015		✓	<b>✓</b>

## **Lead Responsibility**

- Integrated Commissioning Group: Disabled Children and SEN
- Nottinghamshire Integrated Commissioning Hub
- Nottinghamshire County Council Children, Families and Cultural Services

## Related Strategies and Plans for Nottinghamshire

• Integrated Commissioning Strategy: Disabled Children and SEN

## 4 How we will measure impact for children, young people and families

We will use these outcomes indicators to measure the impact on the lives of children, young people and families. We monitor our progress through our quarterly performance reports.

Priority	Outcome Indicator	Also in Health and Wellbeing Board Local Outcomes Framework	Also in Early Help Impact Reports
	Initial assessments for Children's Social Care carried out within timescales		
	Core assessments for Children's Social Care carried out within timescales		
	Re-referrals to Children's Social Care		
Work together to	Children who are subject to a child protection plan for 2 years or more		
keep children	Children becoming the subject of a child protection plan on more than one occasion		
safe	Percentage of Children's Social Care quality audits assessed as adequate or better		
	Percentage of children adopted placed with their adopters within 21 months of becoming looked after		
	Looked after children with 3 or more placements in any one year		
	The number of contacts made to Children's Social Care		
	Child protection plan rate per 10,000		✓
Provide children	Percentage of children aged 0-4 living in low income areas seen at children's centres		✓
and young people	First time entrants to the Youth Justice System aged 10-17 (per 100,000)	✓	✓
with the early	Unauthorised absence in primary, secondary and special schools		✓
help support that they need	Dependent children in households whose income is below 60% of the national average	✓	✓
liley fleed	Percentage of children having their needs met by early help services		✓
	Percentage of enquiries to the MASH that result in appropriate action by Children's Social Care or Early Help Services		✓
	Early years foundation stage attainment		
	Attainment gap at age 11 between pupils taking free school meals and the rest (during past six years)	✓	✓
	Achievement of 5 or more A*-C grades at GCSE or equivalent (including. English & maths)		
Close the gap in educational	Attainment gap at age 16 between pupils taking free school meals and the rest (during past six years)		✓
attainment	Participation in education, employment and training of young people aged 16-18		
	Percentage of young people aged 16-18 not in education, employment or training (NEET)		✓
	Percentage of young people aged 16-18 whose education, employment or training destination is not known		
	Percentage of young people who have attained a full Level 3 qualification by 19		
Deliver integrated services for children and young people with complex needs or disabilities	The number of families who have an Education, Health and Care Plan in place (prior to it becoming a statutory requirement)		
	Percentage of women smoking at the time of delivery		
Improve children	Breastfeeding initiation at the time of delivery		
and young	Breastfeeding prevalence at 6-8 weeks, including mixed feeding methods	✓	✓
people's health outcomes	Hospital admissions caused by unintentional and deliberate injuries in children aged 0 -14 years		
through the	Excess weight in primary school age children in Reception Year	✓	
integrated	Excess weight in primary school age children in Year 6	✓	
commissioning of services	Under 18 conception rate (per thousand females aged 15-17)	✓	✓
33.1.000	We will develop a performance indicator for emotional wellbeing as part of the review of the CAMHs pathway		

## 5 Related documents for Nottinghamshire

These are the key information sources referred to in this Plan.

Health and Wellbeing Strategy for Nottinghamshire www.nottinghamshire.gov.uk/caring/yourhealth/developing-health-services/health-and-wellbeing-board/strategy

Nottinghamshire Safeguarding Children Board (NSCB) annual reports and business plans www.nottinghamshire.gov.uk/caring/protecting-and-safeguarding/nscb

Joint Strategic Needs Assessment (JSNA) for Nottinghamshire www.nottinghamshire.gov.uk/thecouncil/plans/strategydevelopment/joint-strategic-needs-assessment

Nottinghamshire Children's Trust Participation Strategy www.nottinghamshire.gov.uk/caring/childrenstrust

Equality Impact Assessment for the Nottinghamshire Children, Young People and Families Plan 2014-16 <a href="https://www.nottinghamshire.gov.uk/thecouncil/democracy/equalities/eqia/">www.nottinghamshire.gov.uk/thecouncil/democracy/equalities/eqia/</a>

Nottinghamshire Pathway to Provision

www.nottinghamshire.gov.uk/caring/childrenstrust/pathway-to-provision/pathway-to-provision-documents

Nottinghamshire Early Help Development Plan

www.nottinghamshire.gov.uk/caring/childrenstrust/pathway-to-provision/earlyinterventionpreventionstrategy

Nottinghamshire County Council: Looked After Children Strategy <a href="https://www.nottinghamshire.gov.uk/caring/childrenstrust/developmentwork/lookedafterchildren">www.nottinghamshire.gov.uk/caring/childrenstrust/developmentwork/lookedafterchildren</a>

Integrated Commissioning Strategy for CAMHS

www.nottinghamshire.gov.uk/caring/childrenstrust/developmentwork/camhsintegratedcommissioning

Integrated Commissioning Strategy for Teenage Pregnancy <a href="https://www.nottinghamshire.gov.uk/caring/childrenstrust/developmentwork/teenage-pregnancy">www.nottinghamshire.gov.uk/caring/childrenstrust/developmentwork/teenage-pregnancy</a>

Integrated Commissioning Strategy: Disabled Children and SEN www.nottinghamshire.gov.uk/caring/childrenstrust/developmentwork/disabilitysenintegratedcommissioning

Nottinghamshire County Council: A Strategy for Closing the Educational Gaps www.nottinghamshire.gov.uk/caring/childrenstrust/developmentwork/closinggaps

Child and Family Poverty Strategy

www.nottinghamshire.gov.uk/caring/childrenstrust/developmentwork/childpoverty

## 6 Partnerships in Nottinghamshire

The most up-to-date information about the work of Nottinghamshire Children's Trust and other partnerships is available from Nottinghamshire County Council's web-site.

Nottinghamshire Children's Trust

www.nottinghamshire.gov.uk/caring/childrenstrust

Health and Wellbeing Board for Nottinghamshire

www.nottinghamshire.gov.uk/caring/yourhealth/developing-health-services/health-and-wellbeing-board

Nottinghamshire Safeguarding Children Board (NSCB)

www.nottinghamshire.gov.uk/caring/protecting-and-safeguarding/nscb