

17 July 2015

Agenda Item: 9

**Children's Trust Board Sponsor: Derek Higton, Acting Corporate Director,
Nottinghamshire County Council Children, Families and Cultural Services**

CHILDREN, YOUNG PEOPLE AND FAMILIES PLAN 2014-16: ANNUAL PERFORMANCE REPORT FOR 2014-15

Purpose of the Report

1. To provide the Children's Trust Board with an overview of performance during 2014-15, against the Children, Young People and Families (CYPF) Plan 2014-16.

Information and Advice

2. The Children's Trust identified five priority areas for 2014-2016, which were:
 - To work together to keep children and young people safe
 - To improve children and young people's health outcomes through the integrated commissioning of services
 - To close the gap in educational attainment between disadvantaged children and young people and their peers.
 - To provide children and young people with the early help support that they need
 - To deliver integrated services for children and young people with complex needs or disabilities.
3. For each of the four priority areas identified in the CYPF Plan, there was agreed key actions, as well as, performance indicators selected to track progress.
4. This annual performance report summarises progress between April 2014 and March 2015. The performance reports include contextual information, enabling Nottinghamshire's performance to be compared with that of other areas.
 - **Appendix A** provides a summary of progress towards agreed key actions in the 2014-2015 delivery plan for the CYPF Plan
 - **Appendix B** provides an overview of performance, including the most recent data available on Nottinghamshire's performance and on national and statistical neighbour¹ performance (where available)

¹ Nottinghamshire's statistical neighbours until the end of September 2014 were Cumbria, Derbyshire, Dudley, Kent, Lancashire, Lincolnshire, Northamptonshire, Staffordshire, Swindon, and Wigan. From October 2014, Nottinghamshire's statistical neighbours will be changing to: Cumbria, Derbyshire, Cheshire West & Chester, Essex, Kent, Lancashire, Northamptonshire, Staffordshire, Warwickshire and Worcestershire.

- **Appendix C** provides district-level performance information, where this is available. This is presented in a graphical format, with district performance compared with average performance across Nottinghamshire.

Key messages

5. **17** of the **23** key actions in the delivery plan for 2014-2015 which are listed in **Appendix A** were RAG rated as being completed or green. Information was returned for all the key actions with none of them being RAG rated as red.
6. **Table 1** summarises the RAG ratings of the key actions for each of the five priority areas in the delivery plan for 2014-2015.

Table 1 summary of the RAG rating of the key actions in the delivery plan for 2014-2015

Priority	Completed	Green	Amber
To work together to keep children and young people safe	0	4	4
To improve children and young people's health outcomes through the integrated commissioning of services	0	4	1
To close the gap in educational attainment between disadvantaged children and young people and their peers	1	2	0
To provide children and young people with the early help support that they need	1	4	1
To deliver integrated services for children and young people with complex needs or disabilities	0	1	0
Total	2	15	6

7. Overall **25** of the **31** performance indicators listed in **Appendix B** showed an improvement during 2014-15. Nottinghamshire's performance met or exceeded the national performance in the following areas:
 - Initial assessments for Children's Social Care carried out within timescales
 - Core assessments for Children's Social Care carried out within timescales
 - Children who are subject to a child protection plan for 2 years or more
 - Looked after children with 3 or more placements in any one year
 - Hospital admissions caused by unintentional and deliberate injuries in children aged 0-4 (rate per 10,000)
 - Excess weight in primary school age children in Reception Year
 - Excess weight in primary school age children in Year 6
 - Under 18 conception rate (per thousand females aged 15-17)
 - Achievement of 5 or more A*-C grades at GCSE or equivalent (including English & maths)
 - Participation in education, employment and training (EET) in academic years 12-14

- The percentage of young people in academic years 12-14 not in education, employment or training (NEET)
8. **Appendix C** provides information on performance at a district level, where this is available. There remains a considerable difference in performance across the County especially between the best and worst performing districts.
9. **6** of the **31** performance indicators did not show an improvement. These were:
- Re-referrals to Children's Social Care
 - Children becoming the subject of a child protection plan on more than one occasion
 - Breastfeeding prevalence at 6-8 weeks, incl. mixed feeding methods (Nottinghamshire NHS)
 - Achievement gap for those with a good level of development in the Early Years Foundation Stage Profile between pupils eligible for free school meals and the rest
 - Achievement of 5 or more A*-C grades at GCSE or equivalent (including English & maths)
 - Percentage of enquiries to the MASH that are pass ported to Children's Social Care or Early Help Services

Paragraphs 10 to 17 provide commentary on these performance indicators.

Re-referrals to Children's Social Care

10. In the final quarter of the year, progress has been made towards the target for re-referrals (the percentage of referrals made within 12 months of a previous referral). The provisional end of year figure shows an initial decline in performance compared with last year. However, it is expected that data cleansing activity to remove inappropriate referrals on cases that are already open to Children's Social Care will reduce the final figure. Further analysis will be carried out on performance against this measure following completion of the data cleansing activity, including targeted work to help ensure that the in-year data is more accurate.

Children becoming the subject of a child protection plan on more than one occasion

11. During January to March 2015, a total number of 246 children became subject to a child protection plan; of these 63 had been subject to a plan for a second or subsequent time - a percentage of 25.6%. The provisional end of year figure is 27% and a significant increase on the previous year. Further work has been done to investigate into this increase by carrying out a social care Quality Management Framework audit at the end of quarter 3. Findings show that in approximately half of the cases, the second or subsequent plan was initiated in relation to the same concerns as before; however, the decision to close plans had been felt to be appropriate.

Breastfeeding in Nottinghamshire

12. This remains a challenging area of work for Nottinghamshire. A paper on breastfeeding was discussed at the Health and Wellbeing Board in June 2015 to raise its profile and to seek wider partnership involvement.
13. Actions to improve the performance of this indicator includes: three district councils are developing breast feeding awards, health providers are working towards the UNICEF

Breast Feeding Initiative (BFI) accreditation at Stage 3 and peer support programmes are being evaluated for their impact.

Achievement gap for those with a good level of development in the Early Years Foundation Stage Profile between pupils eligible for free school meals and the rest

14. 16.2% of the pupils in the cohort were eligible for free school meals (FSM). The gap between FSM pupils achieving a good level of development (GLD) against those not eligible has widened slightly in Nottinghamshire for 2014. 39.0% of FSM pupils achieved a GLD in 2014 compared to 66.1% who were not FSM representing a gap of 27.1 percentage points. This is a slight increase from 23 percentage point gap reported in 2013.

Achievement of 5 or more A*-C grades at GCSE or equivalent (including English & maths)

15. There have been significant and multiple changes to how the performance at Key Stage 4 is assessed in 2014. Changes include the grade for the first entry in English, mathematics, science, history, geography and language subjects being counted in performance measures as opposed to best grade which was used historically.

16. There have also been changes to vocational qualifications in both the number of courses included in performance measures and their qualification weighting / value. Qualifications are now capped at a maximum size of one GCSE and only two vocational qualifications can be counted in performance measures where previously this was not restricted.

17. At the same time, there have also been syllabus and assessment changes with exams now at the end of the course rather than a modular based assessment. Also subjects such as GCSE English / English Language have seen changes to the weighting of coursework with written exams now counting for 60% (previously this was 40%).

Percentage of enquiries to the MASH that are pass ported to Children's Social Care or Early Help Services

18. The three per cent reduction is a result of greater consistency in the application of thresholds for Children's Social Care and Early Help Services. Additional training and closer working between the services has helped, with further pilots and actions underway to ensure enquiries are pass ported to the most appropriate service and families receive the support they need

RECOMMENDATION/S

- 1) It is recommended that the Children's Trust Board:
 - a) Reviews the information presented on performance and activities, and identifies any action in response
 - b) Approves the publication of Appendices B and C on the Children's Trust pages of the Nottinghamshire County Council website.

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Appendices to the report


- **Appendix A** - Summary of progress towards agreed key actions in the 2014-2015 delivery plan for the CYPF Plan
- **Appendix B** - An overview of performance, including the most recent data available on Nottinghamshire's performance and on national and statistical neighbour performance (where available)
- **Appendix C** - provides district-level performance information, where this is available






Appendix A – The end of Year Review of the delivery plan (2014-2015) for Children Young People and Families (CYPF) Plan


Priority One: To work together to keep children and young people safe

	Children, Young People and Families (CYPF) Plan	Actions to be completed during 2014-15	Progress to date including the impact made and / or any blocks or barriers identified	RAG status
1.1	We will review and further develop partnership arrangements for safeguarding children, as set out in the national guidance 'Working Together 2013'	We will update our assessment processes for children to reflect the single assessment process defined by Working Together 2013, and informed by learning from the Safeguarding Assessment and Analysis Framework (SAAF) pilot through the Department for Education by December 2014 (NCC Delivery Plan 1.1)	The SAAF project is ongoing. Work is underway to develop a single assessment process for children's social care which is compliant with the revised Working Together 2015. The target implementation date for this is November 2015. This is aligned with the date for the establishment of the Family Service, which is closely linked to children's social care.	
1.2	We will simplify and improve access to children's services by implementing a new operating model for services	We will simplify and improve access to children's services by implementing a new operating model for services by March 2015	Significant progress has been made in a number of areas: <ul style="list-style-type: none"> Multi Agency Safeguarding Hub (MASH) / Early Help Unit – co-location has been agreed but a suitable site has not yet been identified Integrated Family Support Service to be implemented in November 2015 Consistent assessment, planning and recording methods and systems are being introduced in Autumn 2015 	
1.3	We will deliver the next stage of a comprehensive improvement programme for Children's Social Care that will focus on: <ul style="list-style-type: none"> Looked After Children 	We will grow our internal fostering provision so that children in care can be moved from more expensive external placements by March 2015	We have increased our internal carers by 40 carers (16% increase) We have re scoped the project to include increasing our local residential offer by securing a block contract for an additional 24 local placements at a significant reduction in costs	


Children, Young People and Families (CYPF) Plan	Actions to be completed during 2014-15	Progress to date including the impact made and / or any blocks or barriers identified	RAG status
<ul style="list-style-type: none"> • Disabled Children's Services • Family and Placement Support • Workforce Development 	<p>We will increase personalisation and parental choice for children with a disability by March 2015</p>	<p>The Disability review identified a range of improvement areas that included Personalisation. To date this has involved:</p> <ul style="list-style-type: none"> • The creation of a Personalisation Team responsible for creating Personal Support Plans that can be delivered via Personal Budgets • Creation and use of a Recourse Allocation System (RAS) to ensure equity and transparency in the assessment and review process • The creation of an annual Children's Disability Service Family Information and Consultation Event • 17% reduction in the number of children and young people accessing short breaks through one of the local authority's residential short break units. • 192% increase in the number of children and young people accessing a community based PVI provider • 84% increase in the take up of Direct Payments • 23% reduction in the number of children and young people open to a social worker <p>Integration was identified as a significant opportunity for improvement and efficiency; A new project has been developed to include SEND, Disabled Children's Services and Health with a work programme set over 2015 – 2017.</p>	
	<p>We will remodel family support services by March 2015</p>	<p>A full review of the service has taken place The scope was widened to include all Early Help Services A locality based model has been developed and consulted on, and implementation scheduled for November 2015</p>	
	<p>We will implement a recruitment and retention policy in Children's Social Care by March 2015</p>	<p>The recruitment and retention plan has been agreed, together with an accompanying implementation plan.</p>	







Children, Young People and Families (CYPF) Plan	Actions to be completed during 2014-15	Progress to date including the impact made and / or any blocks or barriers identified	RAG status
<p>1.4 We will work together to support the effective operation of the County Council's Multi-Agency Safeguarding Hub (MASH) by:</p> <ul style="list-style-type: none"> • bringing together the MASH and the Early Help Unit • developing more effective information-sharing between partners • promoting a shared understanding of thresholds for access to services 	<p>We will review the arrangements for the assessment of safeguarding concerns in the (MASH) with partners, including Adult Social Care, to ensure that they support the appropriate referral and information sharing for the most vulnerable children and adults and that plans for inclusion of early help are integral by October 2014. (NCC Delivery Plan 1.1)</p>	<p>The MASH continues to perform well overall with partner agencies maintaining high performance and positive feedback from customers. There has been a significant improvement in the number of cases being signposted to the Early Help Unit, meaning children and families receive appropriate support at the earliest opportunity. New procedures have been developed and staff training provided to reflect the Care Act, which came into effect on 1st April, and referrals are being monitored closely. Further work is being carried out following an analysis of call waiting times which, whilst greatly improved, show an average waiting time of 3 minutes 56 seconds over the past 12 months. Call abandonment rates have been reduced providing a better service for those reporting safeguarding concerns to the MASH. This is supported by the views and satisfaction levels of MASH customers reported in February 2015. 82% of referrers rated their overall satisfaction as good or excellent (including 27% rating it as excellent), 64% of referrers found it easy to refer to the MASH and 40% of referrers used the MASH for advice before making a referral. Activity to review information sharing processes has been deferred until September 2015 to allow the new IT information sharing solution (Mosaic) to be implemented fully. Encompass Nottinghamshire (which involves informing schools or children's centres the morning after a domestic abuse incident has taken place at a child's home or in their family) is now established and running successfully in five districts, with two more following in May, enabling teachers and other professionals to provide additional support to children and families affected by domestic abuse. HMIC carried out a child protection inspection of Nottinghamshire Police in September 2014, which was reported in February 2015. There were a number of recommendations arising from the inspection report and Children's Social Care is actively working with Nottinghamshire Police to contribute to a joint action plan.</p>	<p style="text-align: center;"></p>






Children, Young People and Families (CYPF) Plan		Actions to be completed during 2014-15	Progress to date including the impact made and / or any blocks or barriers identified	RAG status
1.5	We will further improve our partnership arrangements to identify and support children and young people who are affected by parental mental health issues, substance misuse or domestic violence	The Nottinghamshire Safeguarding Children's Board (NSCB) multi-agency audit sub-group will undertake an audit in the autumn to evidence the effectiveness of information sharing between Children's & Adult's Services, where there are mental health or substance misuse issues in the family by March 2015	The fieldwork for the audit has been completed with the analysis of the findings underway. The draft report will be considered by the NSCB's Thank Family task and finish group on 2 June 2015, followed by the consideration of the NSCB at its meeting on 22 June 2015	
1.6	We will develop improved partnership arrangements to identify and support young carers	We will report on Young Carers to the NSCB Board in September 2014.	Report taken to the NSCB Board in December 2015. Report to be presented to the Children and Young People's Committee on 18 May 2015	
		We will include young carers in families where there is mental health or substance misuse issues as a line of enquiry in the NSCB audit being undertaken in 1.5 above by March 2015	See 1.5 above. The audit looked at the impact of the child or young person being a carer in families where there are parental mental health issues, substance misuse or domestic violence.	
		The Care Act Carers Work-stream Group led by Adult Social Care & Health to review and implement changes to the support for young carers as a result of changes in legislation by March 2015.	Work has started on refreshing the Young Carers guidance. A new Commissioning Officer for carers in Adult Social Care has been appointed who will be leading on young carers and liaising with the Children, Families and Cultural Services Department.	
1.7	We will deliver the next stage of a partnership strategy to ensure that children and young people are protected from sexual exploitation	We will implement the delivery plan of the cross County / City Task and Finish Group on Child Sexual Exploitation (CSE) by April 2015	The annual report for the cross County / City Task and Finish Group on Child Sexual Exploitation (CSE) was approved by the Nottinghamshire Safeguarding Children Board (NSCB) at its June meeting. The key points from the annual report will be included in the NSCB's Annual Report.	







Children, Young People and Families (CYPF) Plan		Actions to be completed during 2014-15	Progress to date including the impact made and / or any blocks or barriers identified	RAG status
1.8	We will continue to improve our arrangements for engaging children and young people in decision-making about their lives, including in child protection planning	We will carry out 1:1 reviews to gain feedback from children and their parents/carers where their child protection plan has ended, with children placed for adoption, and with children placed a distance from home. We will use and disseminate the learning from these reviews to improve social work practice by September 2014.	All planned activities completed. Face to face feedback sessions undertaken by Practice Consultants with over 120 children and young people. Learning shared at Service Days, with teams and service areas. Reported to DLT and OMT together with QMF findings.	


Priority Two: To improve health outcomes through the integrated commissioning of children's health services

Children, Young People and Families (CYPF) Plan		Delivery Plan Actions 2014-2015	Progress to date including the impact made and / or any blocks or barriers identified	RAG status
2.1	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	We will commission, evaluate and disseminate findings from a mystery shopper programme to assess how young people friendly key health services are as identified by 'you're welcome' quality standards by March 2015.	Slight delay to final reports as a result of staff changes. Mystery Shopper findings reported to CTB in April 2015 and due to go to HWB in June 2015. Individual service reports under development, to be disseminated Summer 2015.	


Children, Young People and Families (CYPF) Plan		Delivery Plan Actions 2014-2015	Progress to date including the impact made and / or any blocks or barriers identified	RAG status
		We will engage children and young people in service reviews to inform commissioning processes by March 2015.	Clear engagement approach developed by the Integrated Commissioning Hub (ICH) to ensure children, young people and families are involved in service reviews and inform commissioning	
		Engage with parents/carers and children and young people with disabilities through the Nottinghamshire Participation Hub (NPH) by March 2015.	Good progress, members of Nottinghamshire Participation Hub involved in a range of development work including the Integrated Community Children and Young People's Healthcare (ICCYPH) outcomes development	
		We will involve children, young people and families in the review of Child and Adolescent Mental Health Services (CAMHS) and also the implementation of the changes resulting from the pathway review by March 2015.	A range of groups and children, young people and families were consulted and informed the findings and recommendations of the review of Child and Adolescent Mental Health Services (CAMHS). Implementation of the changes resulting from the pathway review is underway, with further work in hand to ensure involvement of children, young people and families.	
		We will involve families in the review of Maternity Services provided by Nottingham University Hospitals and Sherwood Forest Hospitals by November 2014.	Completed – report to the Children's Trust Board on July 2015.	
		We will undertake a pilot online health and wellbeing survey of school aged children in a selection of school families across the county, prior to wider roll out. This will further improve our understanding of the needs and concerns of children and young people by March 2015.	Low levels of uptake and engagement to date. Plan to extend and re-launch survey during 2015-16. Linked to Young People's Health Strategy, on-line survey, not linked to schools, for 11-18 year olds now underway, ends 30 June 2015	
2.2	We will review unplanned admissions and avoidable emergency department attendances by children and	We will work with Clinical Commissioning Groups (CCGs) to review unplanned admissions and emergency department attendances by March 2015.	A literature review has been completed on unplanned care and an action plan developed with CCGs and providers to reduce hospital admissions and GP attendances. The action plan will be implemented in 15-16.	

Children, Young People and Families (CYPF) Plan		Delivery Plan Actions 2014-2015	Progress to date including the impact made and / or any blocks or barriers identified	RAG status
	young people by completing a needs assessment to be included in the Joint Strategic Needs assessment (JSNA) and to inform future commissioning, linking to the Integrated Community Children and Young People's Healthcare (ICCYPH) priority on reducing hospital admissions	We will undertake a needs assessment for inclusion in the refreshed JSNA section on urgent care and we will use this information to inform future commissioning of services by March 2015.	This has been superseded by the above	
		We will link this work the Integrated Community Children and Young People's Healthcare priority on reducing hospital admissions by March 2015.	This is linked and detailed in the action plan	
2.3	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 (SFHFT), and the Nottingham University Hospitals (NUH) NHS Trust, and implementing recommendations from the reviews.	We will undertake a multi-agency review and report findings, recommendations and implementation requirements to Clinical Commissioning Group's commissioners by January 2015	<p>Following the multi-agency review of maternity services at SFHFT and NUH, Maternity Review Implementation Groups have been established to oversee the implementation of the Maternity Pathway Implementation Action Plan for both providers.</p> <p>Review findings and Implementation Plans presented at Mansfield & Ashfield, Newark & Sherwood CCGs Clinical Executive and the North Risk Quality Committee (SFHFT) and to Rushcliffe and Nottingham North East Clinical Cabinets and the South Nottinghamshire Risk Quality Committee in January 2015 (NUH).</p> <p>Both Maternity Reviews are due to be presented to the Children's Trust Board in July 2015.</p>	
2.4	We will champion Children and Young People issues through public health life course areas	We will champion children and young people issues through public health life course areas and support commissioning of services and interventions that focus on public health priorities by March 2015.	Leads for children and young people's public health link into/are members of all Public Health life course strategic groups, championing children and young people issues in these forums.	
		We will achieve outcomes and targets relevant to children through delivery of Nottinghamshire's Obesity Strategy, to be measured annually until April 2016.	Full update report on relevant outcomes and targets for children to Children's Trust Board due in July 2015,	



Children, Young People and Families (CYPF) Plan	Delivery Plan Actions 2014-2015	Progress to date including the impact made and / or any blocks or barriers identified	RAG status
	We will achieve the sexual health outcomes for children and young people detailed within Nottinghamshire's Sexual Health Strategy, to be measured annually until April 2016.	Work ongoing, re-procurement process for sexual health services underway	
	We will ensure that priorities and outcomes relating to children and young people are achieved through delivery of Nottinghamshire's Strategic Tobacco Alliance Plans, to be measured annually until April 2016.	PHC approved commissioning of ASSIST programme in target schools, to reduce numbers of young people who start smoking. Work ongoing in relation to Nottinghamshire's Strategic Tobacco Alliance Plans	
	We will ensure priorities relating to children and young people are achieved through Nottinghamshire's Substance Misuse Strategy, to be measured annually.	Review of achievement and priorities relating to children and young people within Nottinghamshire's Substance Misuse Strategy commenced. Update to children and young people's health needs assessment for substance misuse in 2015-16	
	We will review and commission the oral health promotion service by March 2015.	Delay in commissioning processes for oral health promotion, re-procurement underway for new service in place April 2016.	
	We will achieve the targets and improved outcomes through delivery of <i>Reducing Avoidable Injuries in Children and Young People: A Strategy for Nottingham and Nottinghamshire 2014-2020</i> .	Work ongoing, partnership agenda	
	We will work with stakeholders to explore how education regarding healthy relationships and domestic violence can be provided to school aged children by March 2015	TBC	

Children, Young People and Families (CYPF) Plan		Delivery Plan Actions 2014-2015	Progress to date including the impact made and / or any blocks or barriers identified	RAG status
2.5	We will review the Child and Adolescent Mental Health (CAMHS) pathway, establish whether there is a need for a new operating plan and service model and if required, implement the agreed new operating plan and service model.	<p>We will undertake a multi-agency review and report findings, recommendations and implementation requirements to Clinical Commissioning Groups (CCGs) and the Health and Wellbeing Board in Autumn 2014</p> <p>We will develop an implementation plan and have the new operating plan and service model in place by March 2016</p>	<p>Multiagency review is complete, and recommendations and proposals for a new CAMHS model supported by all Clinical Commissioning Groups (CCGs) and the Health and Wellbeing Board.</p> <p>Implementation of new model and investment plan for three years from 2015-16 agreed by CCGs (commissioners of CAMHS Tier 2 and 3), still on target for new model in place by March 2016</p>	



Priority Three: To close the gap in educational attainment









Children, Young People and Families (CYPF) Plan		Delivery Plan Actions 2014-2015	Progress to date including the impact made and / or any blocks or barriers identified	RAG status
3.1	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	We have devolved resources to local School Behaviour and Attendance Partnerships. Exclusions have reduced by approximately 50%, and we are taking steps to quality assure the provision made by partnerships of schools by December 2014	<p>As a result of the devolution of funds to Behaviour Partnerships exclusions have reduced by 50% during the current academic year (2014/15).</p> <p>The Social Emotional and Mental Health Team have developed a strategy to quality assure the use of these</p>	







Children, Young People and Families (CYPF) Plan	Delivery Plan Actions 2014-2015	Progress to date including the impact made and / or any blocks or barriers identified	RAG status
		resources and have completed reports showing the impact of the strategy for the autumn term 2014/15.	
<p>3.2 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 Strategy for closing the educational gaps</p>	<p>We will implement, monitor and review the Closing the Gap (CtG) Strategy through the effective delivery of the yearly action plan by July 2015 (NCC Delivery Plan 5.2)</p>	<p>The strategy has continued to be implemented, monitored and reviewed. Enabling factors contributing to the success of the strategy include:- Improved data analysis, shared with all Head Teachers through the Local Authority Performance Handbooks- High profile continued professional development available to all, signposted on a regular basis to those schools requiring additional support and challenge- The facilitation and generation of Closing the Gap collaborations to develop effective strategies which are research based and have proven impact. Sharing outcomes of this locality based work with all schools to inform their own improvement planning- Active promotion of well-researched, proven interventions to close gaps for disadvantaged learners.</p>	▶
	<p>We will deliver the Newark town pilot and evaluate its impact with a view to sharing good practice and building collaborative capital in relation to effective early intervention, increased progression and improved behaviour and attendance for vulnerable learners by March 2015 (NCC Delivery Plan 5.2)</p>	<p>The Newark pilot has been delivered and evaluated by The Centre of Equity at Manchester University. The effective practice has been shared with Worksop schools during their launch and set up meetings in order to inform the 'Together for Worksop Closing the Gap Pilot 2015/16'.</p>	▶
	<p>We will implement the School Improvement Strategy to ensure that all schools become good and outstanding by March 2015 (NCC Delivery Plan 5.1)</p>	<p>The Nottinghamshire School Improvement Strategy (launched March 2014) for schools and academies in all phases has been successfully implemented in 2014/15. As a result the Education Improvement Service (EIS) has provided support and challenge to secure improvement in:- 23 High Risk schools (up to 12 days Education Improvement Advisor (EIA) support/annum)- 60 Medium Risk schools (of which 36 have higher concern and received up to 9 days EIA support/annum and 24 light touch receiving up to 3 days support/annum)- 7</p>	▶


Children, Young People and Families (CYPF) Plan	Delivery Plan Actions 2014-2015	Progress to date including the impact made and / or any blocks or barriers identified	RAG status
		academies who choose to buy back Local Authority support (5 Secondary, 2 Primary)	
	We will commission and facilitate effective school to school support through partnership with Teaching Schools, National Leaders of Education, partnership leaders and other external support agencies by March 2015 (NCC Delivery Plan 5.1)	School to school partnerships have contributed to improve standards through universal, targeted and bespoke continued professional development (CPD) in partnership with local, national and international providers. The engagement of a wide range of external providers to provide training including the Teaching Schools.	
3.3	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	<p>We will report on a regular basis to the Children's Trust Board on progress towards 'Closing the Gap' and will identify how partner organisations can support this work. In addition, partner organisations work together in local partnerships, including to deliver the Newark town pilot by March 2015</p> <p>The Closing the Gap strategy, including 'Together for Newark' have continued to be implemented in partnership with key stakeholders throughout 2014-2015.</p> <p>Partnerships with health, and in particular with Speech and Language therapists, educational psychologists and CAMHS has resulted in the development of new approaches that support vulnerable learners to develop academic resilience. This is an area of focus in the 'Together For Worksop' project which will be implemented in 2015-2016. Primary schools are keen to participate in these developments in order to ensure that vulnerable children are prepared to access the secondary curriculum.</p> <p>In Newark, in partnership with FE colleges, the District Council is developing projects with health that support vulnerable learners into training and employment.</p>	

Priority Four: To provide children and young people with the early help support that they need



Children, Young People and Families (CYPF) Plan		Delivery Plan Actions 2014-2015	Progress to date including the impact made and / or any blocks or barriers identified	RAG status
4.1	We will align early help and social care services in localities so that families receive a joined up service	We will design and establish an integrated family support service aligned to children's social care by March 2015 (NCC Delivery Plan 5.4)	The new Family Service will be established from November 2015. Committee approval has been obtained for the structure and operating guidance is now complete. Required contractual changes are underway.	
		We will explore integrated senior management arrangements for early help and social care by March 2015	Operational progress towards integration continues with the establishment of the Family Support Service from November 2015, and the integration of the Early Help Unit and the MASH from the end of 2015. Similarly, good progress is being made in respect of the establishment of integrated arrangements for services for children and young people with disabilities. Revised senior management arrangements are likely to be proposed in Autumn 2015 as a result of work to date.	





Children, Young People and Families (CYPF) Plan		Delivery Plan Actions 2014-2015	Progress to date including the impact made and / or any blocks or barriers identified	RAG status
		We will pilot co-located service delivery in Bassetlaw to identify the benefits of this approach prior to wider roll out across the county by March 2015	Roll out across integrated setting will be rolled out in November 2015 as the new Family Service is established – see above.	
4.2	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	We will publish our Early Help Offer by August 2014	Early Help Offer published	
		We will publish a revised Pathway to Provision incorporating the Education, Health and Care Pathway by March 2015	Revised Pathway to Provision published	
4.3	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	We will review services for children and young people affected by parent/carer substance misuse by August 2014	Review completed, revised service specification in place.	
		We will establish a robust multi-agency approach to supporting high risk adolescents by December 2014	Multi-agency meeting held early 2015 and agreement reached regarding multi-agency approach at a Senior level by key partner agencies.	
		We will review the efficacy of our approach to ensuring that children are in receipt of their full educational entitlement by March 2015	A position statement has been produced highlighting the impact of the Children Missing Education (CME) strategy.	
4.4	We will review and refresh our family support offer, to establish a consistent approach across the children's workforce	We will design an integrated family support service aligned to children's social care by March 2015	The service has been designed and the structures and operating model approved.	
		We will adopt a consistent evidence based methodology for working with children and families by March 2015	This will be delivered from the start of the Family Service in November 2015 – see 4.1 above.	
		We will adopt a strategic approach to commissioning evidence based parenting	The programmes to be delivered in future have been selected, we have agreed a planning mechanism for	

Children, Young People and Families (CYPF) Plan	Delivery Plan Actions 2014-2015	Progress to date including the impact made and / or any blocks or barriers identified	RAG status	
		programmes across the county by March 2015	provision and targeting tools and consistent outcomes measures will be implemented over the summer.	
4.5	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	We will refresh the workforce development offer so that it provides the required range of core, targeted and specialist opportunities that are evidence-based.	A refreshed workforce development offer is available on line via the Council's Learning Portal. In addition a bespoke workforce development directory has been developed for social work staff, together with a version for the wider children's workforce.	
		We will implement training in the identified methodology for working with children and families.	Training and other workforce development activity around the methodology for working with children and families will follow the work outlined in 4.6 below to implement a structured model for assessment and planning. It will be implemented across early help services prior to the launch of the new Family Service in November 2015.	
4.6	We will review and refresh our common assessment approach for individual children, young people or families who need integrated early help support	Will embed the use of the Early Help Assessment across the Children's Trust by providing targeted training and advice through the Early Help Unit by December 2014	A training course on assessment and planning has been developed for commissioning. A complimentary e-learning package for education has also been completed and this will be developed further for early years, including practitioners from the Private, Voluntary and Independent (PVI) sector	
		We will decide whether to adopt a specific approach to structured early help assessments, learning from the Safeguarding Analysis and Assessment Framework (SAAF) pilot in children's social care by December 2014	Following the lessons learned from the SAAF pilot, together with research into the other 'off-the shelf' assessment methodologies, it was agreed that we would establish a common approach to assessment and planning - across both early help and social care services - by establishing our own <i>Nottinghamshire approach</i> that will be built up from existing good practice, and which will have a 'Nottinghamshire brand' attached to it.	
		We will validate and promote a range of tools for practitioners to use when undertaking holistic assessments by December 2014	An initial set of core assessment tools has been identified and validated as part of the work described above. It is intended that we will add to these - especially for the more specialist assessments - post launch. In the meantime, the core set will form part of the	






Children, Young People and Families (CYPF) Plan		Delivery Plan Actions 2014-2015	Progress to date including the impact made and / or any blocks or barriers identified	RAG status
			implementation of the chosen model for assessment and planning; indeed they may be implemented in advance of the Single Assessment and the Family Service in November 2015.	
		We will develop a plan to migrate early help assessments onto Framework-I so that there is an integrated approach to case recording by December 2014	Early Help assessments will not now migrate onto Framework-I system, to the extent that the current system will be upgraded later this year and cannot in the meantime fulfil all of the requirements for early help case recording. The new Family Service will use the upgraded system (Mosaic) from that point on for early help case recording, and thus we will achieve the desired integrated approach to case recording by this route.	

Priority Five: To deliver integrated services for children and young people with complex needs or disabilities

Children, Young People and Families (CYPF) Plan		Actions to be completed during 2014-15	Progress to date including the impact made and / or any blocks or barriers identified	RAG status
5.1	We will establish the 'Education Health and Care (EHC) 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.	We will establish the Nottinghamshire Participation Hub (NPH) and work with children and young people and their families to ensure the EHC Plan is person centred and outcome focused and offers opportunities for families to take up a personal budget where appropriate by April 2015	The NPH has been established and is currently facilitated by the voluntary sector organisation <i>A Place to Call Our Own</i> (APTCCO) to progress participation of children, young people and their families in the EHC Plan process. A draft personal budget policy is in place and is currently being tested with a small number of families	
		We will be commissioning the provision described in EHC plans on behalf of education, health and social care. (in respect of health commissioning, this will be undertaken by the Integrated Commissioning Hub on behalf of Clinical	Commissioning of services for children with Special Educational Needs and Disabilities (SEND) is managed through the children's Integrated Commissioning Hub. Health provision identified in a child or young person's plan that is 'over and above' core commissioned NHS services is assessed and agreed with the Chief	

Children, Young People and Families (CYPF) Plan	Actions to be completed during 2014-15	Progress to date including the impact made and / or any blocks or barriers identified	RAG status
	Commissioning Groups (CCGs)) by April 2015	Nurse/Quality Team in the Clinical Commissioning Group.	
	We will lead on the implementation of the Special Educational Needs and Disabilities (SEND) reforms on behalf of the County Council and CCGs ensuring they meet their statutory duties. This will include establishing a Local offer of services and provision available to children and young people and their families and developing dispute resolution and mediation services for families who are in disagreement with aspects of the EHC Plan process by April 2015	<p>The Local Offer has been established and we are currently working with children, young people and their families to evaluate the user experience and identify any gaps provision. Work has taken place (and on-going) to ensure the health provision is detailed on the Local Offer.</p> <p>A new regional dispute resolution and mediation service has been developed (through a procurement exercise) and will be operational from 1st May 2015</p>	
	We will develop a clear pathway for agreement of non-commissioned NHS services in a child or young person's EHC Plan by April 2015	Pathway is in place (see above)	
	We will work with the public sector (County Council and NHS providers), the voluntary community and private sectors to embed the EHC Plan pathway within their respective organisations by April 2015	The EHCP pathway is fully operational and agencies across education, health, social care and the third sector have received training and briefings on the process and their responsibilities.	
	We will 'test' and evaluate the roles Designated Clinical and Medical Officers by April 2015	The Designated Clinical Officer is in place, located in NCC working on behalf of the NHS and the Local Authority. Plans in place to develop the role of Designated Doctor for SEN to the Designated Medical Officer. Evaluation to take place in September 2015	

Key to RAG status

	Completed – work has been successfully completed to deadline
	On schedule – work has started and is meeting milestones
	Happening but behind schedule – work has started, activity is not meeting milestones, but is expected to by the deadline if adjustments are made
	Behind or not happening – work has not started when scheduled or has started but activity is not meeting or unlikely to meet its milestones
	No information received

Appendix B - End of Year Summary of Key Performance Indicators for the Children, Young People and Families Plan (2014-2015)

For Nottinghamshire, the performance data available at the end of 2014-2015 is reported. The most recent data for national average and children's services statistical neighbours is reported, where available. Please note, comparisons may be indicative only, as the reporting periods are not necessarily aligned. Where Nottinghamshire performance meets or exceeds the latest national performance information, this is highlighted by the emboldened boxes. In addition, for each KPI, the table indicates whether performance has improved (+), declined (-), or remained the same (=) compared to the previous twelve months. NB n/a = not available

Outcome	Key Performance Indicator	Nottinghamshire			National Average	Statistical Neighbours
		Previous Year's Performance	Current Year's Performance			
1. To work together to keep children and young people safe	1.1 Initial assessments for Children's Social Care carried out within timescales	75.8% (2013-14)	82.5% (Provisional) (2014-15 Q4)	(+)	69.6% (2013-14)	67.2% (2013-14)
	1.2 Core assessments for Children's Social Care carried out within timescales	85.5% (2013-14)	89.6% (Provisional) (2014-15 Q4)	(+)	72.8% (2013-14)	70.7% (2012-13)
	1.3 Re-referrals to Children's Social Care	20.1% (2013-14)	24.7% (Provisional) (2014-15 Q4)	(-)	23.4% (2013-14)	24.8% (2013-14)
	1.4 Children who are subject to a child protection plan for 2 years or more	3.3% (2013-14)	3.2% (Provisional) (2014-15 Q4)	(+)	4.5% (2013-14)	4.4% (2013-14)
	1.5 Children becoming the subject of a child protection plan on more than one occasion	18.3% (2013-14)	25.6% (Provisional) (2014-15 Q4)	(-)	15.8% (2013-14)	14.7% (2013-14)
	1.6 Percentage of children adopted who were placed with their adopters within 16 months (487 days) of becoming looked after ²	48% (2011-14)	50.0% (Provisional) (2014-15 Q4)	(+)	51% (2013-14)	51% (2013-14)

² This indicator definition changes every year with a new threshold set by the Department for Education. The threshold for 2012-2013 was 20 months, 2013-2014 was 18 months and 2014-2015 is now 16 months

Outcome	Key Performance Indicator	Nottinghamshire			National Average	Statistical Neighbours
		Previous Year's Performance	Current Year's Performance			
	1.7 Looked after children with 3 or more placements in any one year	12.0% (2013-14)	9.8% (Provisional) (2014-15 Q4)	(+)	11.0% (2013-14)	10.0% (2013-14)
2. Improve children and young people's health outcomes through the integrated commissioning of services	2.1 Percentage of women smoking at the time of delivery	17.3% (2012-13)	16.7% (2013-14)	(+)	12.0% (2013-14)	15.1% (2013-14 East Midlands)
	2.2 Breastfeeding at the time of delivery	69.7% (2012-13)	70.6.7% (2013-14)	(+)	73.9% (2013-14)	71.9% (2012-13 East Midlands)
	2.3 Breastfeeding prevalence at 6-8 weeks, incl. mixed feeding methods (Nottinghamshire NHS)	40.2%	39.1% (2014-15 Q3)	(-)	47.2% (2012-13)	42.3% (2012-13 East Midlands)
	2.4 Breastfeeding prevalence at 6-8 weeks, incl. mixed feeding methods (Bassetlaw NHS)	34.4%	35.0% (2014-15 Q3)	(+)	47.2% (2012-13)	42.3% (2012-13 East Midlands)
	2.5 Hospital admissions caused by unintentional and deliberate injuries in children aged 0-4 (rate per 10,000)	107.2 (2012-13)	106.2 (2013-14)	(+)	140.8 (2013-14)	116.3 (2013-14 East Midlands)
	2.6 Excess weight in primary school age children in Reception Year	21.5% (2012-13)	20.4% (2013-14)	(+)	22.5% (2013-14)	21.7% (2012/13 East Midlands)
	2.7 Excess weight in primary school age children in Year 6	31.1% (2012-13)	31.0% (2013-14)	(+)	33.5% (2013-14)	32.2% (2013-14 East Midlands)
	2.8 Under 18 conception rate (per thousand females aged 15-17)	29.4 (2012 annual)	24.2 (2013 annual)	(+)	24.3 (2013)	24.6 (2013 East Midlands)

Outcome	Key Performance Indicator	Nottinghamshire			National Average	Statistical Neighbours
		Previous Year's Performance	Current Year's Performance			
3. Close the gap in educational attainment	3.1 Achievement gap for those with a good level of development in the Early Years Foundation Stage Profile between pupils eligible for free school meals and the rest.	23.0% (2012-13 academic)	27.1% (2013-14 academic)	(-)	19.0% (2012-13)	n/a
3. Close the gap in educational attainment	3.2 Achievement of 5 or more A*-C grades at GCSE or equivalent (including English & maths)	63.4% (2012-13 academic)	58.0% (2013-14 academic)	(-)	53.4% (2013-14)	56.6% (2013-14)
	3.3 Percentage of young people who have attained a full Level 3 qualification by 19	48.0% (2012-13 academic)	50.5% ³ (2013-14 academic)	(+)	59.9% ⁴ (2013-14)	57.5% (2013-14)
	3.4 Attainment gap at age 11 between pupils taking free school meals and the rest (<i>FSM during past six years</i>)	19.9% (2012-13 academic)	17.4% (2013-14 academic)	(+)	16.0% (2013-14) (Provisional)	n/a
	3.5 Attainment gap at age 16 between pupils taking free school meals and the rest (<i>FSM during past six years</i>)	31.5% (2012-13 academic)	28.9% (2013-14 academic)	(+)	26.0% (2013-14)	n/a
	3.6 Participation in education, employment and training (EET) in academic years 12-14	85.7% (2013-14 Q4)	89.1% (2014-15 Q4)	(+)	88.7% (2014-15 Q4)	89.9% (2014-15 Q4)
	3.7 Percentage not in education, employment or training (NEET) in academic years 12-14	3.4% (2013-14 Q4)	1.9% (2014-15 Q4)	(+)	4.8% (2014-15 Q4)	4.5% (2014-15 Q4)
	3.8 Percentage whose destination is not known in academic years 12-14	10.3% (2013-14 Q4)	9.0% (2014-15 Q4)	(+)	6.5% (2014-15 Q4)	6.3% (2014-15 Q4)

³ Maintained sector only

⁴ Includes independent sector

Outcome	Key Performance Indicator	Nottinghamshire			National Average	Statistical Neighbours
		Previous Year's Performance	Current Year's Performance			
4. Provide children and young people with the early help support that they need	4.1 Percentage of children who have had their needs fully resolved at closure to an early help service intervention instead	<u>New performance indicator</u> for 2014-2015	55% (2014-2015)	n/a	n/a	n/a
	4.2 Child protection plan rate per 10,000	44.6% (2013-14 Q4)	42.9 (Provisional) (2014-15 Q4)	(+)	37.9 (2012-13)	31.5 (2012-13)
	4.3 Percentage of children aged 0-4 living in low income areas seen at children's centres (cumulative)	57% (2013-14 Q4)	71.0% ⁵ (2014-15 Q4)	(+)	n/a	n/a
	4.4 First time entrants to the Youth Justice System aged 10-17 (per 100,000) (cumulative)	207 (2013-14 Q3)	201 ⁶ (2014-15 Q3)	(+)	n/a	n/a
	4.5 Percentage of overall absence in primary, secondary and special schools	5.4% (2012-13 academic)	4.5% (2013-14 academic)	(+)	4.5% (2013-14)	4.5% (East Midlands 2013-14)
	4.6 Dependent children in households whose income is below 60% of the national median income	17.0% (2011 annual)	16.9% (2012 annual)	(+)	19.2% (2012)	n/a
	4.7 Percentage of enquiries to the MASH that are pass ported to Children's Social Care or Early Help Services	56.0% (2013-14 Q4)	53% (2014-15 Q4)	(-)	n/a	n/a
5. Deliver integrated services for children and young people with complex needs or disabilities	5.1 The number of individual children and young people who have an Education, Health and Care Plan in place (a statutory requirement from 1 September 2014)	New indicator for 2014-15	71 (2014-15 Q4)	n/a	n/a	n/a

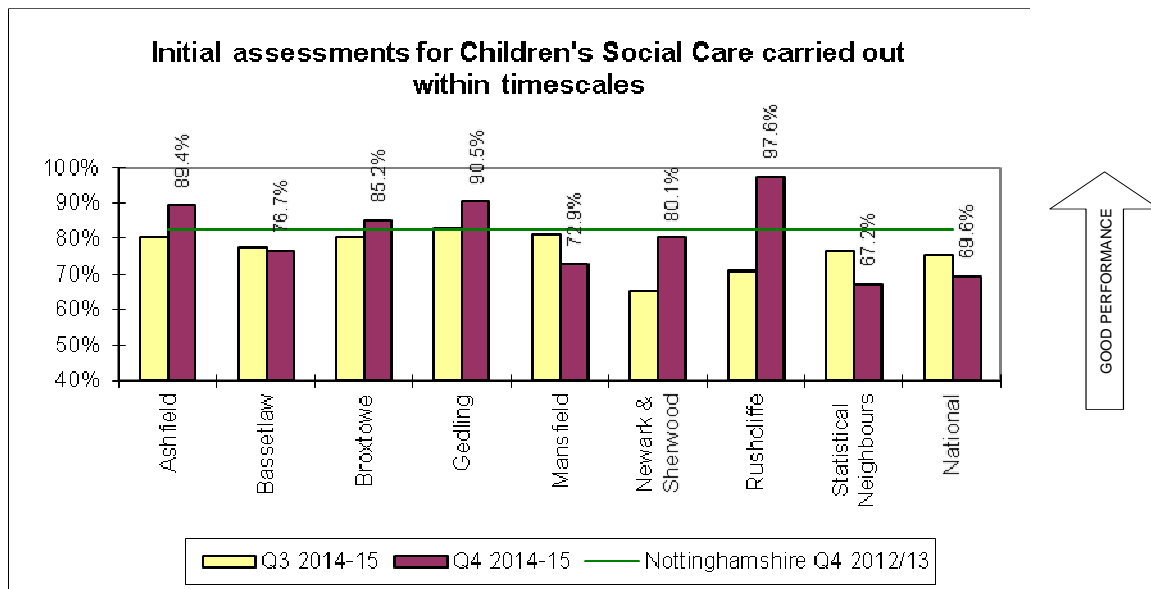
⁵ Data for this indicator is cumulative and therefore performance is compared with performance for the equivalent quarter in 2013-2014

⁶ Data for this indicator is cumulative and therefore performance is compared with performance for the equivalent quarter in 2013-2014

Appendix C - Children, Young People & Families Plan (2014-16) Performance by district (where available)

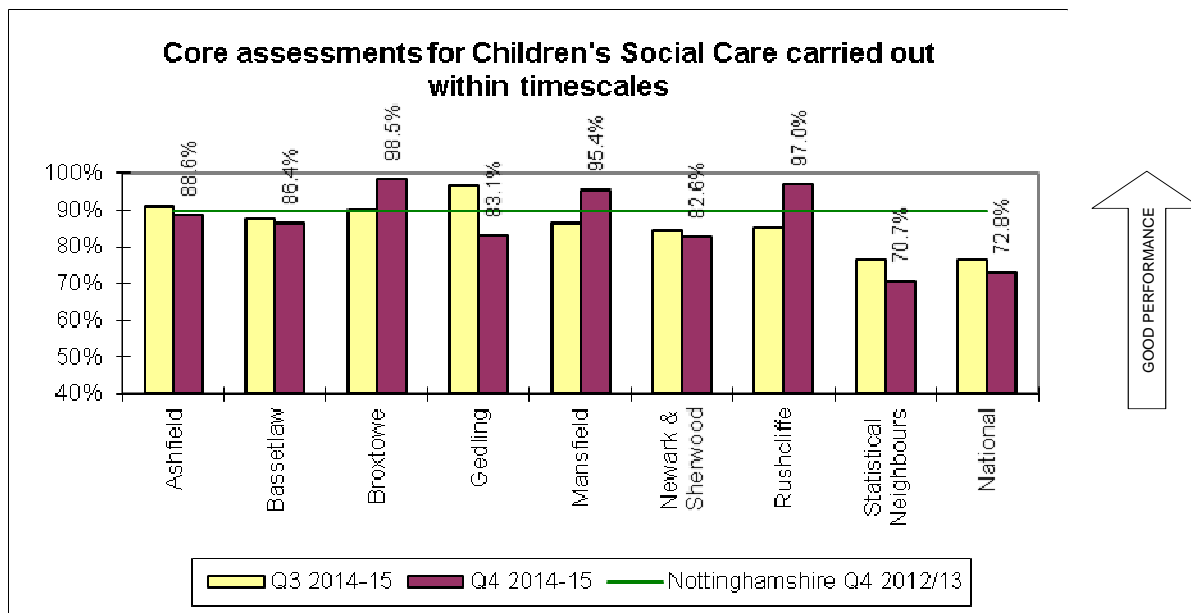
1. To work together to keep children and young people safe

Table 1.1 the percentage of initial assessments for Children’s Social Care carried out within timescales



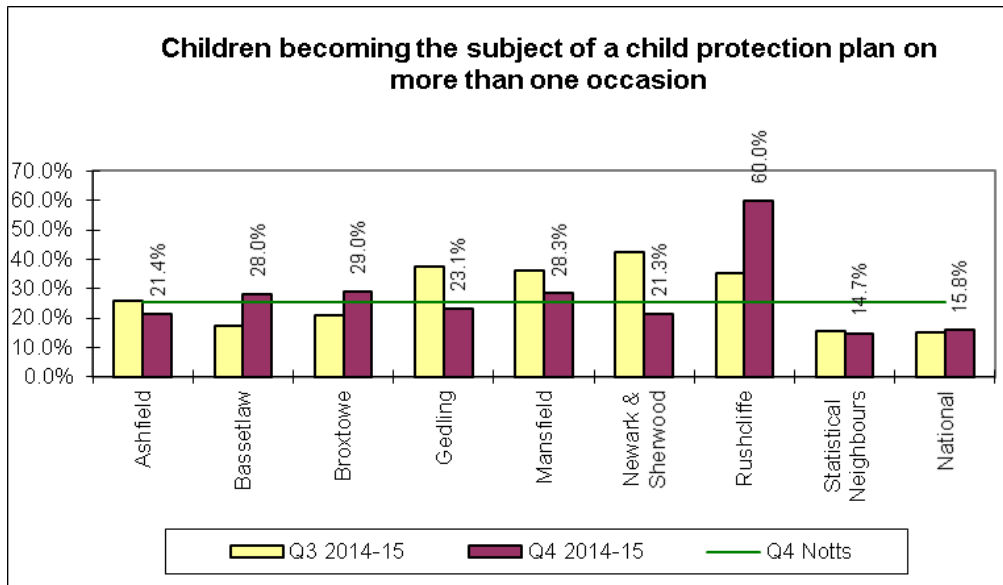
[Statistical neighbour and England data compares 2012/13 (yellow) with 2013/14 (purple)]

Table 1.2 the percentage of core assessments for Children’s Social Care carried out within timescales



[Statistical neighbour and England data compares 2012/13 (yellow) with 2013/14 (purple)]

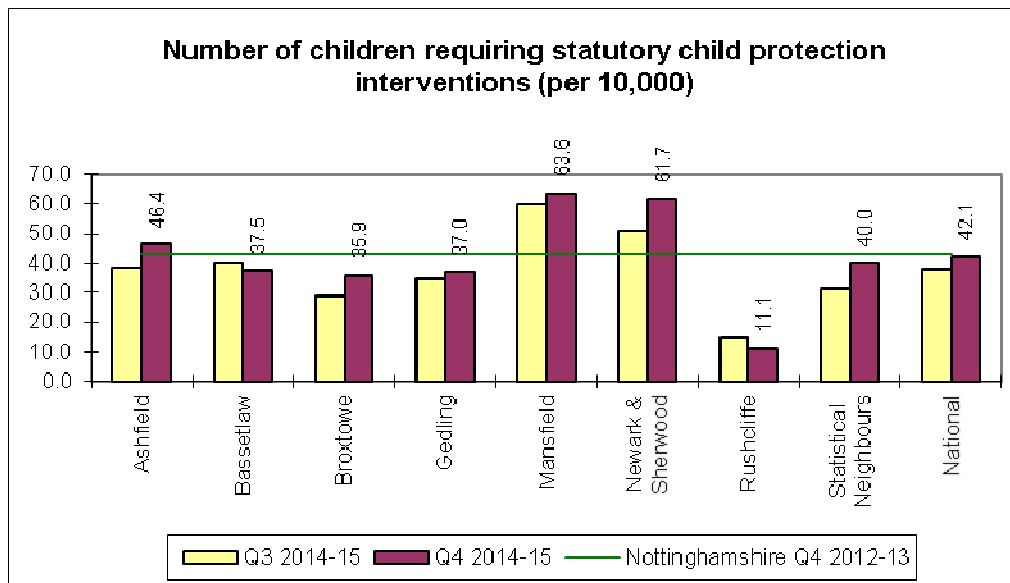
Table 1.3 the percentage of children becoming the subject of a child protection plan on more than one occasion



GOOD PERFORMANCE

[This indicator relates to a small number of children. Nottinghamshire total is 25.5%. National average in 2013/14 was 15.8%; statistical neighbour average in 2012/13 was 14.7%. The percentage is calculated by using the total number of children with a second or subsequent plan for each district shown as a percentage of the district's total number of children becoming subject of a child protection plan.]
 [Statistical neighbour and England data compares 2012/13 (yellow) with 2013/14 (purple)]

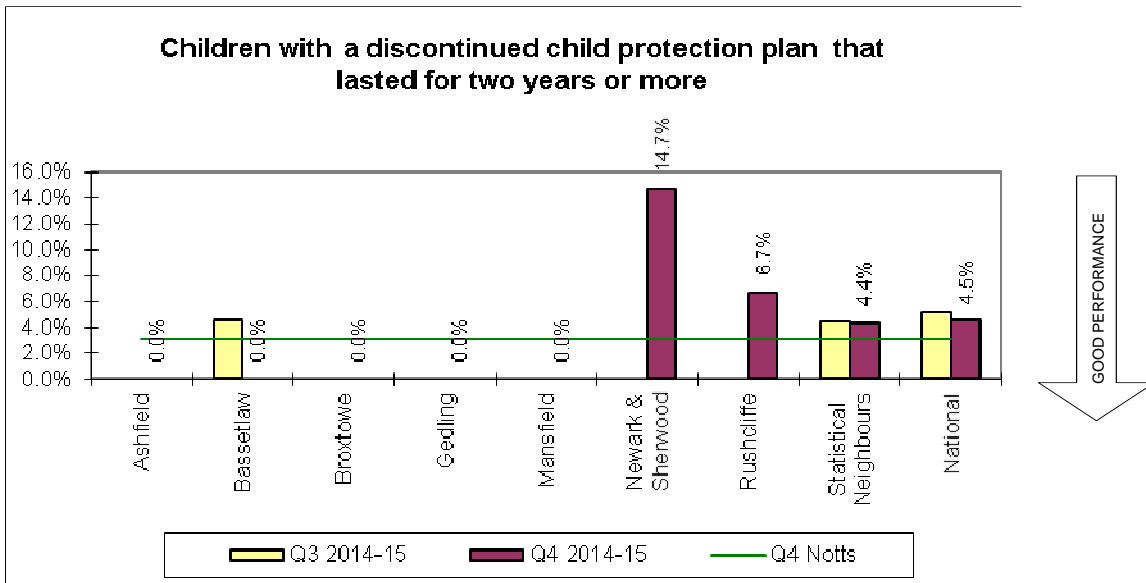
Table 1.4 the number of children requiring statutory child protection interventions (per 10,000)



GOOD PERFORMANCE

[Statistical neighbour and England data compares 2012/13 (yellow) with 2013/14 (purple)]

Table 1.5 the percentage of children with a discontinued child protection plan that lasted for two years or more

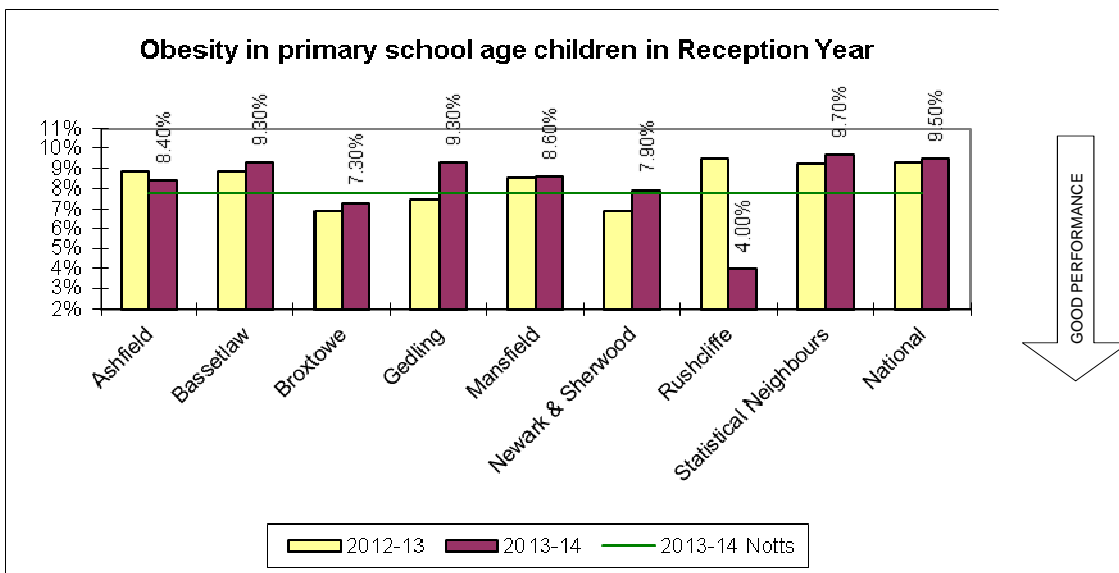


[This indicator relates to a small number of children. Nottinghamshire Q4 total is 3.2%. National average in 2013/14 was 4.5%; statistical neighbour average in 2013/14 was 4.4%. The percentage is calculated by using the total number of children with a discontinued child protection plan that lasted for two years or more for each district shown as a percentage of the district's total number of children with a discontinued plan.]

[Statistical neighbour and England data compares 2012/13 (yellow) with 2013/14 (purple)]

2. To improve children and young people's health outcomes through the integrated commissioning of services

Table 2.1 obesity in primary school age children in Reception Year



3. To close the gap in educational attainment between disadvantaged children and young people and their peers

Table 3.1 early years foundation stage attainment

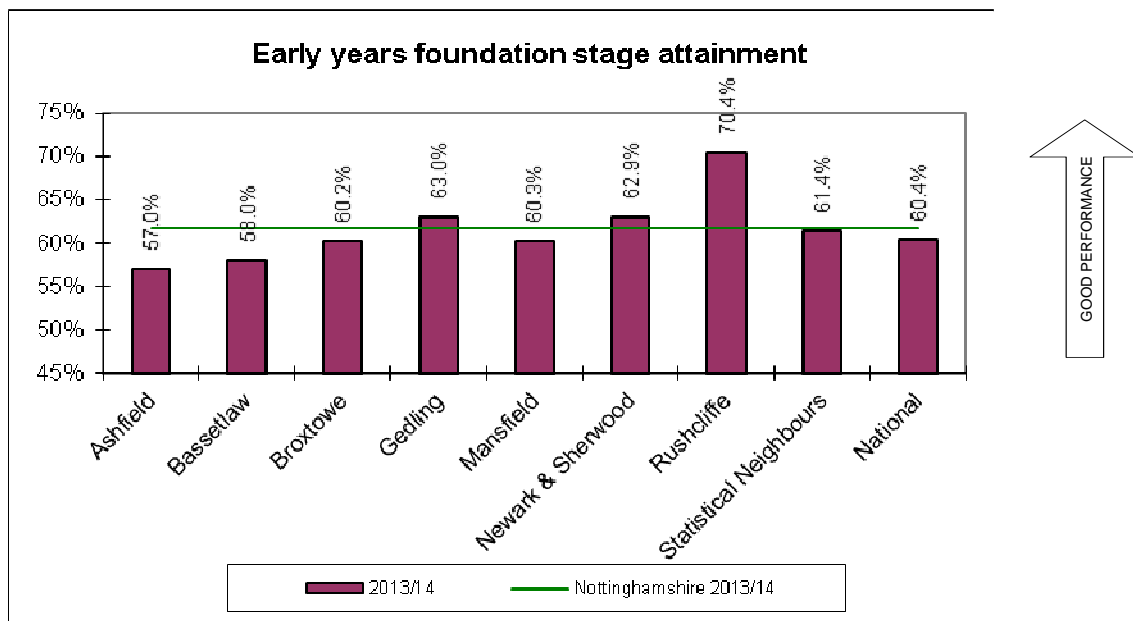


Table 3.2 achievement gap between pupils eligible for free school meals and their peers at Key Stage 4

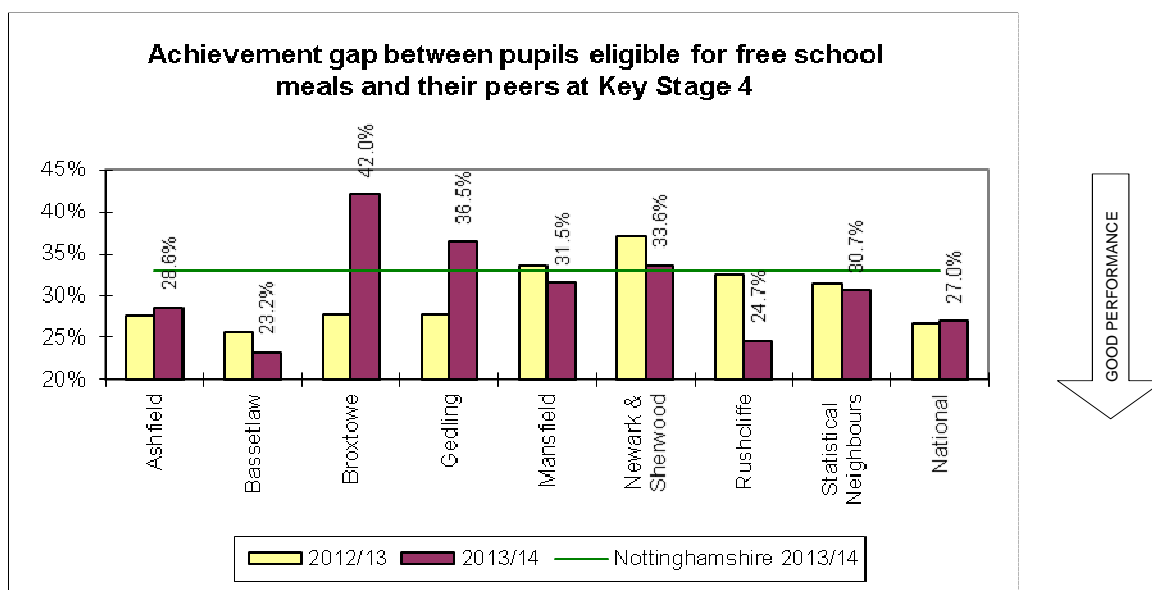


Table 3.3 achievement of 5+ A-C grades or equivalent, including English and Mathematics

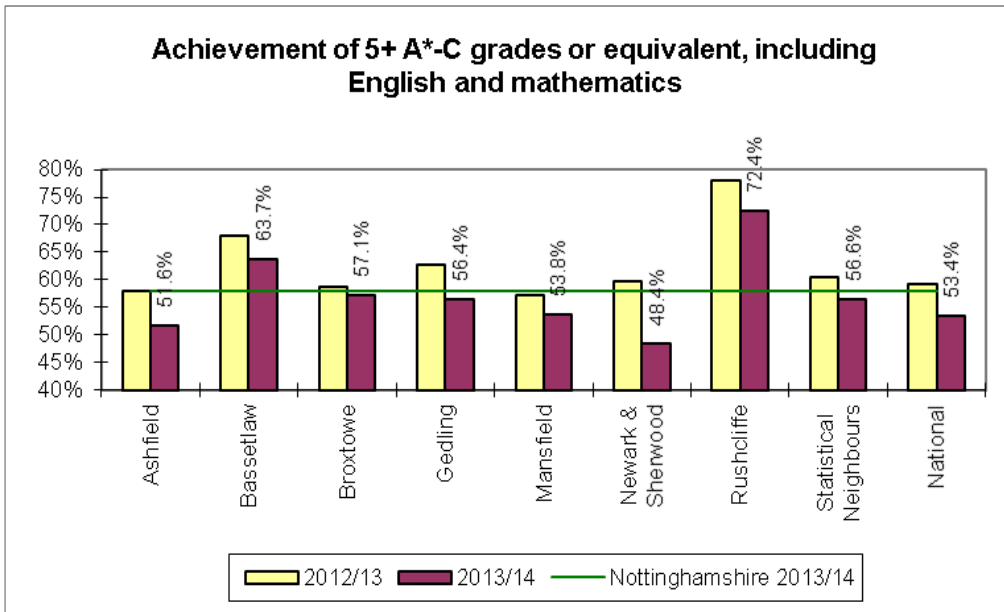


Table 3.4 the percentage of young people who have attained a full Level 3 qualification by age 19

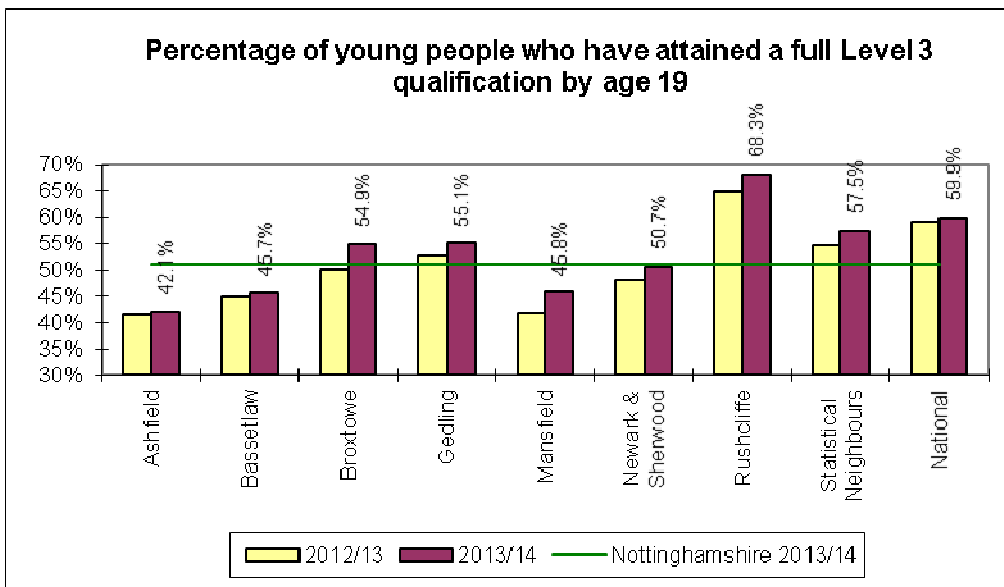
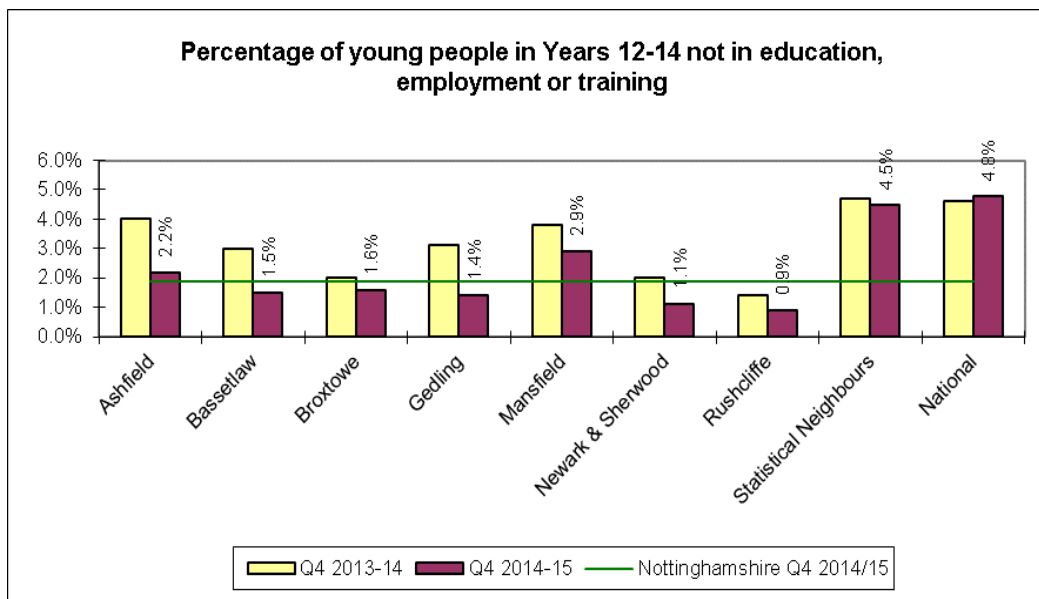
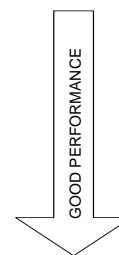


Table 3.5 the percentage of young people in Years 12-14 not in education, employment or training (NEET)

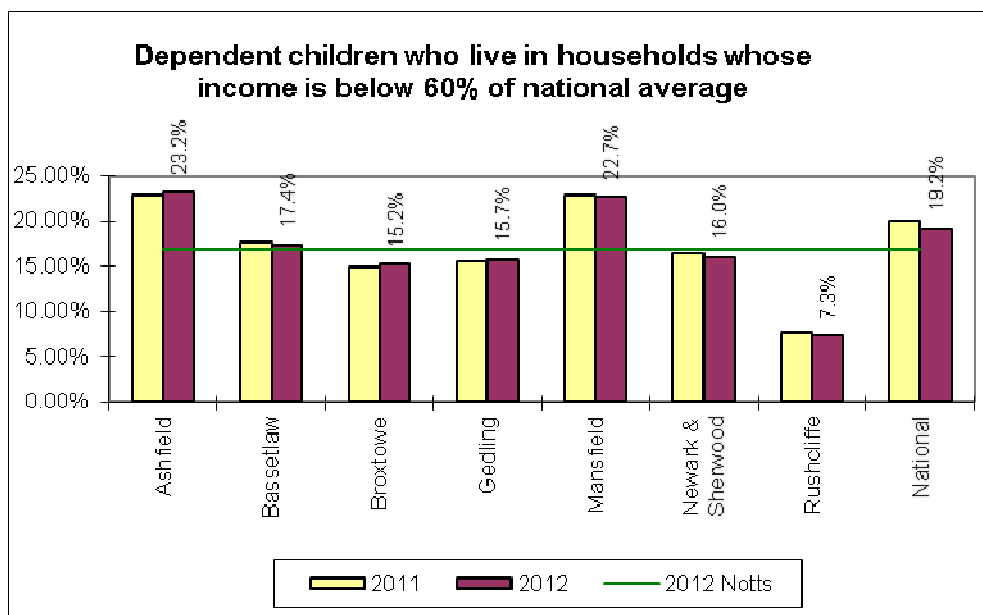


[Statistical neighbour and England data compares 2011/12 (yellow) with 2012/13 (purple)]



4. To provide children and young people with the early help support that they need

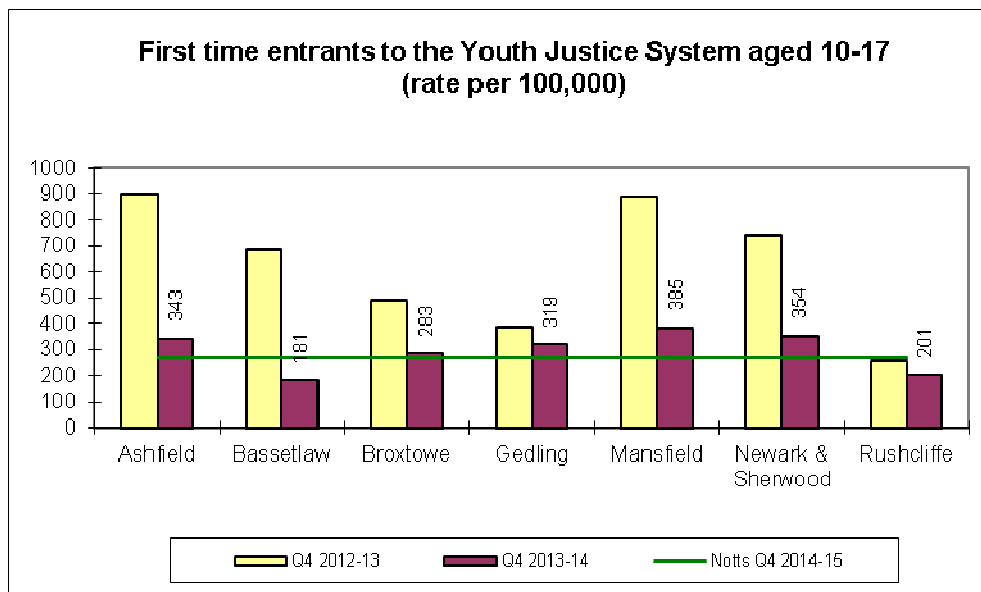
Table 4.1 the percentage of children who live in households whose income is below 60% of national average



[Statistical neighbour data not currently available]

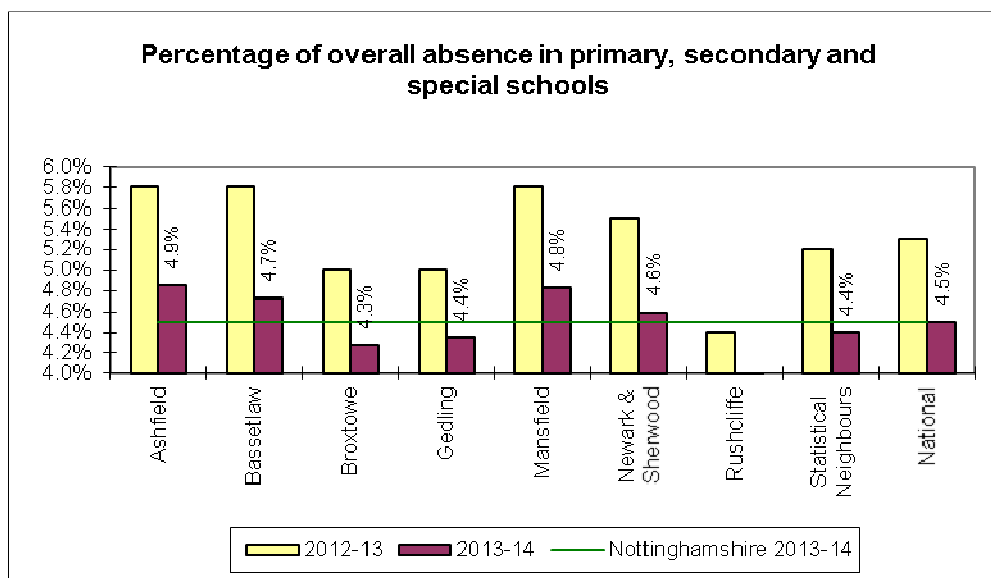


Table 4.2 first time entrants to the Youth Justice System aged 10-17 (rate per 100,000)



[Statistical neighbour and England data not available]

Table 4.3 the percentage of overall absence in primary, secondary and special schools



Other sources of local information:

- Nottinghamshire Joint Strategic Needs Assessment www.nottinghamshire.gov.uk/thecouncil/plans/strategydevelopment/joint-strategic-needs-assessment/
- Child and Maternal Health Observatory www.chimat.org.uk
- East Midlands Public Health Observatory www.empho.org.uk
- NHS Local Health Profiles www.localhealth.org.uk
- Nottinghamshire Child Poverty Needs Assessment www.nottinghamshire.gov.uk/caring/childrenstrust/developmentwork/childpoverty/childpovertynneedsassessment/

- Nottinghamshire Special Educational Needs and/or Disability Needs Assessment <http://cms.nottinghamshire.gov.uk/disabilitysenneedsassessmentfeb2012.pdf>