

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

**DRAFT 7**

**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's 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
- Clinical Commissioning Groups operating within Nottinghamshire County Council's administrative boundaries
- 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.

## CONTENTS

- **Working together for children and young people**
  - About the Children's Trust
  - About our Children, Young People and Families Plan 2014-16
  - The context for this plan
  - How this Plan promotes equality
- **Children's Trust achievements in 2011 - 2014**
- **Children's Trust planned activities for 2014 – 16**
  - Why we chose these priorities
  - How we will achieve our priorities
  - How our children, young people and families plan is aligned with the Health and Wellbeing strategy for Nottinghamshire
  - A new operating model for children's services
- **Work together to keep children and young people safe**
- **Provide children and young people with the early help support that they need**
- **Close the gap in educational attainment**
- **Deliver integrated services for children and young people with complex needs or disabilities**
- **Improve health outcomes for children and young people through the integrated commissioning of services**
- **How we will measure impact for children, young people and families**

# 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 this 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 is aligned with Nottinghamshire's Health and Wellbeing Strategy. 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 publish annual delivery plans which will provide more information about what we plan to do. There are also detailed strategies and plans for specific areas of work.

## 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 is aligned with the Health and Wellbeing Strategy for Nottinghamshire

The Health and Wellbeing Strategy (2014-16) for Nottinghamshire has three themes. These are:

- Early intervention and prevention
- Promoting independence/empowering people (#wording tbc)
- Integration

This Plan identifies our priorities for work with children, young people and families, and our planned actions to achieve these. All of our priorities are aligned with the Health and Wellbeing themes.

In Section # of this Plan, we identify our priorities and describe how each of our planned actions contributes to the Health and Wellbeing themes.

## How this Plan promotes equality

We are committed to the promotion of equality and diversity through the work of the Children's Trust, as described in this plan.

We will promote equality 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 promote their health and wellbeing.

More information is provided in our Equality Impact Assessment. (#link to be included)

## 2. Children's Trust achievements in 2011 - 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 operating model
- the establishment of the Multi-agency Safeguarding Hub, as the first point of contact for new safeguarding concerns about children and vulnerable adults
- the development and implementation of the Nottinghamshire Looked After Children Strategy for 2012-15, identifying 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 team 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 Activity Disorder (ADHD)
- the publication of a Teenage Pregnancy Strategy
- support for the Family Nurse Partnership programme in Nottinghamshire
- support for the delivery of Nottinghamshire's Strategy for Closing the Educational Gap
- 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, there have been significant improvements in the timeliness and quality of Children's Social Care assessments of the needs of children who are referred for support.

# note – review this paragraph in Jan, when performance data for Quarter 3 is available

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

Our priorities identify how we will make best use of our collective resource 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:

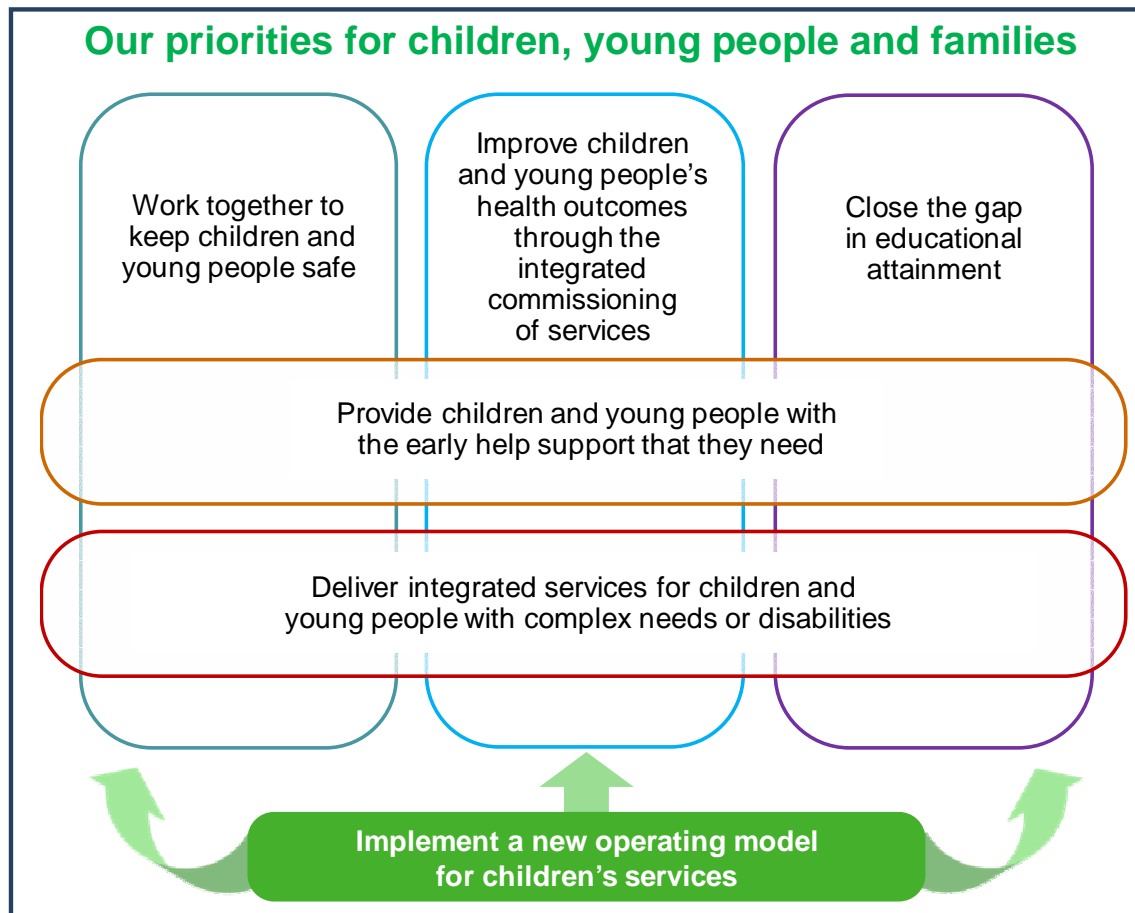
- Provide children and young people with the early help support that they need
- Deliver integrated services for children and young people with complex needs or disabilities.

#### 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 service**



## Why we chose our priorities

To identify our priorities, we reviewed evidence about the needs of children and young people from our Joint Strategic Needs Assessment (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 social services.

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 have considered the views of children, young people and families

The views of children, young people and families are 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 involve children and young people in planning, reviewing and commissioning services. This includes listening to the views of children, young people and families locally through a variety of channels, such as focus groups, surveys and 'mystery shopper' exercises.

Deleted: .

## 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 in other areas. This includes work initiatives that focus on health and wellbeing across all age groups.

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

Work will include:

- Successful achievement of outcomes and targets affecting children through delivery of Nottinghamshire's obesity strategy to be measured annually until April 2016.
- Successful achievement of sexual health outcomes for children and young people within Nottinghamshire's sexual health strategy, to be measured annually until April 2016.
- Development of children and young people's emotional well-being commissioning plan to be included within Nottinghamshire and Nottingham's broader mental health strategy by June 2014
- Ensuring children and young people priorities 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

## 4. 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 we know that 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 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

# include most-up-to-date at publication date (January) for:

CSC - Contacts/referrals/initial assessments

Child protection rate

- Numbers of LAC

#### What children, young people and families tell us

*Include feedback from consultation/participation work or research – local or national?*

tbc

### 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 will continue to be effectively protected and supported and children will 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



## What will we do to achieve this?

Work together to keep children safe				
What we will do	When we will do this	Health and Wellbeing Principle		
		Prevention and early intervention	Promoting independence empowering people	Integration
We will review and further develop partnership arrangements for safeguarding children, as set out in the national guidance 'Working Together 2013',	April 2016	✓	✓	✓
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: <ul style="list-style-type: none"> <li>Looked After Children</li> <li>Disabled Children's services,</li> <li>Family and Placement Support</li> <li>Workforce Development.</li> </ul>	April 2015		✓	✓
We will work together to support the effective operation of the County Council's Multi-agency Safeguarding Hub (MASH), by <ul style="list-style-type: none"> <li>bringing together the MASH and the Early Help Team</li> <li>developing more effective information-sharing between partners</li> <li>promoting a shared understanding of thresholds for access to services</li> </ul>	tbc	✓	✓	✓
We will 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	tbc	✓		✓
We will develop improved partnership arrangements to identify and support young carers	tbc	✓		✓
We will deliver a partnership strategy to ensure that children and young people are protected from sexual exploitation,	tbc	✓		✓
We will improve our arrangements for engaging children and young people in decision-making about their lives, including in child protection planning,	tbc		✓	
We will promote children and young people's awareness of safeguarding by delivering a programme of engagement and participation in schools or other universal setting	tbc	✓		
We will identify ways to promote safeguarding in the wider community, including through businesses and workplaces	tbc	✓		

### Lead responsibility for this work

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

### Related strategies and plans

- NSCB Business Plan
- Nottinghamshire Looked After Children Strategy
- Early Help Development Plan
- Nottinghamshire Pathway to Provision

# 5. 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 and 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 a problem 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

? – locality variation

Range of hwb measures – how Notts and localities vary from national average.

What children, young people and families tell us

# Lucy Peel to provide information

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

Children and young people will receive the early help support they require to be safe, healthy and thriving.

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

- Fewer enquiries to the MASH that result in no further action to Children's Social Care
- fewer children in need of protection
- fewer first time entrants to the Youth Justice system aged 10-17
- Reduced absence in in primary, secondary and special schools
- More young people exiting substance misuse treatment in a planned manner.

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

Relevant educational attainment outcomes include the gap between disadvantaged children and young people and their peers at all ages. The main measure of this is the gap between those learners who are eligible for free school meals and their peers.

Relevant health outcomes measures include breastfeeding prevalence, number of children who are of a healthy weight and the under 18 conception rate.

In addition, we will introduce a quality measure to identify the percentage of children having their needs met through a common assessment process.

Our monitoring will include information about outcomes for children and young people across the County. We know that outcomes for children and young people vary across localities and there is an association between poorer outcomes and higher levels of social or economic deprivation. A key measure of this is child poverty, defined nationally as the proportion of dependent children in households whose income is below 60% of the national median income.

## What will we do to achieve this?

What we will do	When we will do this	Health and Wellbeing Principle		
		Prevention and early intervention	Promoting independence empowering people	Integration
We will align early help and social care services in localities so that families receive a joined up service	tbc	✓	✓	✓
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	tbc	✓	✓	✓
We will work together to align the services that are commissioned by the Integrated Commissioning Hub with the County Council's early help offer	tbc	✓		✓
We will undertake needs assessments of key groups of vulnerable children and young people and use this information to inform commissioning priorities	tbc	✓		
We will review and refresh our family support offer, to establish a consistent approach across the children's workforce	tbc	✓	✓	✓
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	tbc	✓		✓
We will review and refresh our common assessment approach for individual children, young people or families who need integrated early help support	tbc	✓		✓

In addition to the actions described for this priority, 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 services. This will include bringing together the MASH and the County Council's Early Help team. This action is described in more detail under our priority to *Work together to keep children safe*.

### Lead Responsibility for this work

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

### Linked Strategies and Plans

- Early Help Development Plan
- Nottinghamshire Pathway to Provision
- Closing the Gaps Strategy
- Child Poverty Strategy
- Teenage Pregnancy Strategy

## 6. 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 raise the standard of achievement for all children and young people.

### 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.

# update with new data for 2012/13

- overall attainment

- attainment gap (FSM and LAC)

A multi-agency project is underway in Newark town to develop and evaluate ways in which multi-agency work by a wide range of partners can support schools in raising the attainment for disadvantaged learners. Although this 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

# Feedback from consultation/participation work or research – local or national – Janeen Parker to provide

### 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:

- Early years foundation stage attainment
- 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 in all these areas, and will aim to reduce the gap between their average attainment and that of their peers

## What will we do to achieve this?

What we will do	When we will do this	Health and Wellbeing Principle		
		Prevention and early intervention	Promoting independence empowering people	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	tbc	✓		✓
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	✓	✓	
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	✓		✓
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	tbc		✓	✓
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	tbc	✓	✓	✓

### Lead responsibility for this work

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

### Related Strategies and Plans

- Nottinghamshire's A Strategy for Closing the Educational Gaps
- Looked after children strategy
- #can we include anything specific to the Newark project?

## **7. 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 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 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.

## What will we do to achieve this?

Deliver integrated services for children and young people with complex needs or disabilities				
What we will do	When we will do this	Health and Wellbeing Principle		
		Prevention and early intervention	Promoting independence empowering people	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		✓	✓
We will implement the recommendations from the Integrated Children and Young People's Community Healthcare Programme report, including: <ul style="list-style-type: none"> <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	✓	✓	✓
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		✓	✓

### Lead Responsibility

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

### Related Strategies and Plans

- Joint commissioning strategy for disabled children and SEN

## 8. 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 services and NHS England Area Teams (from April 2015).

### 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.

(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 measures to monitor this. For all of these measures, we will be monitoring 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
- Improved quality of and access to maternity services
- Improved emotional health and wellbeing of children.

Deleted: .

Deleted: .

Deleted: .



## What will we do to achieve this?

What we will do	When we will do this	Health and Wellbeing Principle		
		Prevention and early intervention	Promoting independence empowering people	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	✓	✓	✓
We will review the CAMHS pathway, establish if there is a need for a new operating plan and then if needed implement any new operating plan	June 2014	✓	✓	
We will work with NHS England to commission the Healthy Child Programme. This will include: <ul style="list-style-type: none"> <li>A procurement exercise for the School Nursing service with a new contract and service specification 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>	Oct 2015	✓	✓	✓
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 implement reviews of Maternity Services in the Sherwood Forest Hospitals NHS Foundation Trust and the Nottingham University Hospitals NHS Trust, and implement 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: <ul style="list-style-type: none"> <li>Medical Advisors to Adoption Service</li> <li>Medical Services for Looked after Children</li> <li>Child Death Review Process (including rapid response to an unexpected death of a child)</li> </ul>	Dec 2014	✓	✓	
We will champion Children and Young People issues through public health life course areas.	April 2015	✓	✓	✓

Deleted: A

Deleted:

Deleted: End date?

Deleted: End date?

### Lead Responsibility

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

- Integrated commissioning strategy: disabled children and SEN
- Mental Health and Emotional Wellbeing Strategy
- Integrated Commissioning Strategy for Teenage Pregnancy
- Integrated Commissioning Strategy for CAMHS
- Early Help Development Plan

### Related Strategies and Plans

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

Priority	Outcome Indicator	HWB Local Outcomes Framework	Early Help Impact Measure
Work together to keep children safe	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		
	Children who are subject to a child protection plan for 2 years or more		
	Children becoming the subject of a child protection plan on more than one occasion		
	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		
Provide children and young people with the early help support that they need	<i>The number of contacts made to Children's Social Care (cumulative)?</i>		
	Child protection plan rate per 10,000		✓
	First time entrants to the Youth Justice System aged 10-17 (per 100,000) (cumulative)	✓	✓
	Percentage of overall absence in primary, secondary and special schools		✓
	Dependent children in households whose income is below 60% of the national average	✓	✓
	Percentage of children having their needs met through the CAF process		✓
	Percentage of enquiries to the MASH that result in no further action to Children's Social Care		✓
Close the gap in educational attainment	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)		
	Attainment gap at age 16 between pupils taking free school meals and the rest (during past six years)		✓
	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 EET 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	<i>Indicator relating to attainment of Looked After Children (tbc)</i>		
	The number of families who have an Education, Health and Care Plan in place (prior to it becoming a statutory requirement)		
Improve children and young people's health outcomes through the integrated commissioning of services	<i>Percentage of women smoking at the time of delivery (Notts/Bassetlaw)</i>		
	<i>Breastfeeding initiation at the time of delivery (Notts/Bassetlaw)</i>		
	Breastfeeding prevalence at 6-8 weeks, incl. mixed feeding methods (Notts, NHS)	✓	✓
	Breastfeeding prevalence at 6-8 weeks, incl. mixed feeding methods (Bassetlaw NHS)	✓	✓
	<i>Hospital admissions caused by unintentional and deliberate injuries in children aged 0-14 years (Notts/Bassetlaw?)</i>		
	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)	✓	✓
	Numbers exiting substance misuse treatment in a planned manner		✓
	<i>Emotional wellbeing – Performance Indicator under development as part of CAMHS review</i>		

**Comment:** This does need to be separated for Notts and Bassetlaw

**Comment:** This does need to be separated for Notts and Bassetlaw

**Comment:** This does need to be separated for Notts and Bassetlaw

**Deleted:** B

**Comment:** Geoff checking locality with PH