

### **Date of Meeting 11 September 2014**

ITEM 8

## **Health & Well-Being Board**

# Title of Report: Children and Young People Partnership Plan: Progress report 2013-2014 and Delivery Plan 2014-2015

**Report of:** Alan Cotgrove, Business Manager, Children and Young Person Partnership Board

Wards and communities affected: Key Decision:

ALL N/A

Accountable Director: Carmel Littleton Director of Childrens Services

This report is Public

#### **Purpose of Report:**

- To provide an end of year report on the 2013/14 CYPP plan
- To provide details of the 2014/15 CYPP delivery plan

#### **Executive Summary**

The Health and Wellbeing Board strategy sets out those services for children that will be managed through the Children and Young People Partnership (CYPP). The CYPP has developed and agreed its three year plan 2013-2016 which is being implemented through one year delivery plans in support of the Health and Wellbeing vision that "every child has the best possible start in life"

The four overarching priorities agreed to achieve our ambitions for Children and Young People in Thurrock 2013-2016 are:-

- Outstanding universal services and outcomes
- Parental, Family and Community Resilience
- Everyone Succeeding
- Protection When Needed

This report provides details of the progress achieved against those priorities for the first year delivery plan 2013/14 and highlights some of the early work of our longer term aims undertaken as part of that programme.

Each of the four priorities has below it three objectives, which set out where we are now and where we want to be in 2016. This report provides details of the initial progress achieved in year one against those objectives.

The report also includes the details of the delivery plan for year two of the Children's Partnership Plan which covers the period April 2014- March 2015 and some early indicators of progress that has been made to date.

#### 1. RECOMMENDATIONS:

- **1.1** The Board note progress made and outcomes achieved through the Children and Young People's Plan for 2013/14.
- **1.2** That the Board note the Delivery Plan for 2014/15

#### 2. INTRODUCTION AND BACKGROUND

- 2.1 The Children and Young People Partnership Delivery Plan spans the three year strategy of the Health and Wellbeing Board for 2013-2016.
- 2.2 The Children's Plan includes a number of objectives scheduled for completion within the first year, some which are part of continuing service improvement plans and other more complex objectives that span the full period of the current three year strategy.
- 2.3 This report covers the first year Delivery Plan and the objectives and delivery plan for the second year 2014/15.
- 2.4 Governance and monitoring of the plans is achieved through the CYPP Partnership Delivery Groups and those groups affiliated with the Health and Wellbeing Board infrastructure which report to the CYPP Executive and Full Board on progress.

#### 3. 2013-2014 Delivery Plan

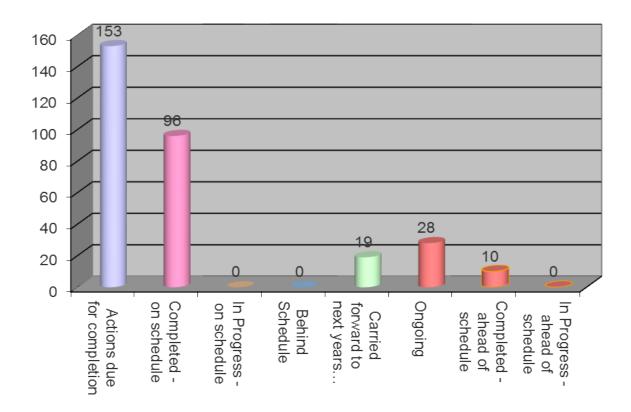
- 3.1 Over the last year there have been a number of significant influences that have impacted the Children's Partnership world.
- 3.2 National and local guidance as well as some high profile cases of child sexual exploitation have raised the awareness and expectations on the safeguarding elements in the public domain around agencies that support safeguarding children.

- 3.3 Ofsted's approach to future inspections of children's services has shifted direction with further change expected again in September 2014 for schools following changes in the national curriculum. The aim to attain higher achievement in education will pose its own challenges within the changing landscape of education establishments.
- 3.4 The new service provision and structure of the health service changes during 2013/14 are still being embedded as agencies adjust to the new working environment.
- 3.5 Alongside these challenges is the need for greater efficiency and making sure that all agencies make best use of all their resources in the multi-agency partnership environment. The pace of change affecting children's services in delivering better outcomes for children and young people in Thurrock requires constant review and reflection.
- 3.6 There have been a number of new strategies, policies and procedures implemented during this reporting period across children's services.
- 3.7 New meeting forums have emerged for example the Child Sexual Exploitation group and some of the existing meetings needed to adjust or shift in direction to meet new demands, to make sure that the Children's Partnership is fit for purpose to meet the needs of Thurrock children.
- 3.8 The way the CYPP Partnership Plan has been implemented allows the flexibility for these changes, resulting in some of the tasks being reviewed and refreshed, with new realistic timeframes identified to reflect the changing dynamics of children's needs and the services provided.

#### 4 PERFORMANCE SUMMARY 2013 – 2014 Plan

- 4.1 The 2013/14 plan incorporated 12 priorities with 153 objectives.
- 4.2 The administration of the programme has been conducted by the Children's Partnership Business Team. A detailed breakdown of each objective has been maintained to enable a clear audit process linking them with the impact and outcomes achieved for children and young people.

4.3 The chart below shows the overall position of progress of the plan at the end of March 2014. 124 of the 153 actions have been completed, 19 carried forward into the 2014/5 plan with 10 having been completed ahead of schedule.



- 5. Impact and outcomes
- 5.1 Priority 1: Outstanding universal services and outcomes

"Raise attainment at the end of all key stages with a particular focus on Early years Foundation stage, key stage One and key stage Two"

#### **Foundation Stage**

This reporting period covers the academic year 2012/2013 and results reported in summer 2013. Thurrock is performing above the national and comparator average on the good level of development (GLD) measure (Thurrock 53, National 52) and percentage achievement of at least the expected standard in all early learning goals (ELG) measure (Thurrock 51, National 49).

On the measure of average points score, Thurrock is consistent with both national and comparator averages (Thurrock 32.5, national 32.8).

#### Key Stage 1

Thurrock's outcomes for reading at level 2B+ are in line with national (79% in Thurrock and nationally) and on a three year upward trajectory. In writing at

level 2B+, they are 1% below national (66% compared to 67%) but also on a three year upward trajectory. In maths at level 2B+, they exceed the national figure for the second year running (80% compared to 78%).

#### Key Stage 2

Performance on the key measure of reading, writing and maths at level 4+ is 72% compared to 76% nationally. There is significant variation among boys and girls achievement across Key Stage 2, although this is in line with the national trend.

#### **Key Stage 4**

Performance on the key measure of 5+ GCSEs A\*-C including English and Maths improved to 59.5% ranking Thurrock 95th out of 151 authorities. However, Thurrock dropped just below national (60.8%) and Statistical Neighbour (60.5%) averages in 2012/13.

97.4% of pupils achieved 5+ GCSEs graded A\*-G which is the highest ever for Thurrock with the gap to the national average increasing to 1.4%. This places Thurrock in the top quartile nationally (ranked 16/151 authorities) and above all statistical neighbours.

#### Looking forward:

Our plans for 2014/15 are to build upon our success and focus on developing further the take up of early year's education provision, raising attainment and implementing the findings of the Education Commission Report.

#### 5.2 Priority 1: Outstanding universal services and outcomes

"Promote and improve the health & wellbeing of children and young people"

Overall, the health and well-being of children in Thurrock remains mixed compared with the England average across key indicators.

#### **Obesity and Excess Weight**

Children in Thurrock have average levels of obesity. The most recent National Childhood Measurement Programme data 2012/13 shows Thurrock to have an obesity prevalence in Reception-aged children of 9.6%, which is significantly higher than the East of England average (8.1%), and is above the England average of 9.3%. In Year 6 children the prevalence is 19.8%, which is more than double the prevalence in Reception.

For excess weight in 4-5 year olds (measured through the National Child Measurement Programme (NCMP)), Thurrock has dropped by 1.4% in 2012/13 compared to 2011/12. This is broadly in line with the England average (Thurrock, 22.1%, England average, 22.2%).

For excess weight in 10-11 year olds (measured through the National Child Measurement Programme (NCMP)), Thurrock has dropped by 0.8% in 2012/13 compared to 2011/12. This is 3.2% higher than the England average (Thurrock, 36.5%, England average, 33.3%).

#### **Breastfeeding**

A lower percentage of mothers initiate breastfeeding in Thurrock compared to the England average for 2012/13, with 69.5% breastfeeding (73.9% national). By six to eight weeks after birth, the percentage of mothers who breastfeed their babies is lower than the England average, with 36.1% of mothers continuing to breastfeed (47.2% national). This shows slight improvement on the 2011-12 position of 35.7%.

#### **Immunisations**

A lower percentage of children in Thurrock receive their first immunisation for MMR by the age of two than nationally – 91.9% compared to 92.3% in 2012/13. Thurrock has improved from 90.1% in 2011-12

#### **Smoking**

Performance for women stopping smoking at time of the time of delivery is better than average – 11.4% remaining smoking compared to 12.7% nationally for 2012/13. The provisional outturn for 2013/14 shows further improvement to 10.7%.

#### **Under 18 conceptions**

Data released by the Office for National Statistics shows that the under 18 conception rate decreased by 10.3%, from 34.0 per 1000 women aged 15-17 in 2011 to 30.5 per 1000 women aged 15-17 in 2012.

#### Looking forward:

Our plans for 2014/15 continue to build on improving health outcomes and include a healthy weight strategy and delivery plan for the period 2014-2017. Further work is planned on what is commonly termed "Risky behaviours" looking at tobacco control, drugs and alcohol support and revised sexual health services. Also greater cross authority commissioning is beginning to take place with a refreshed CAMHS (Child and Adolescent Mental Health Service) provision.

#### 5.3 Priority 1: Outstanding universal services and outcomes

"ensure progression routes to higher level qualification and employment

#### Qualifications at level 2 and 3 at age 19

Data released in early April by the DfE indicates that Thurrock has improved the rate of young people achieving at least a level 2 qualification by age 19 in 2012/13 by 5% to 87.2% exceeding the national average of 84.9% for the first time.

Thurrock has also seen an improvement in the rate of young people achieving at least a level 3 qualification by age 19 to 52.8% - an increase of 3.6% reducing the gap to the national average of 56.2% to 3.4%

#### Looking forward:

Our 2014/15 plans aim to build on the processes in place that have supported the improvement in attainment.

#### 5.4 Priority 2: Parental, family and community resilience

#### "Early offer of help"

The main focus in the plan for 2013/4 was the recommissioning process of early help services, realignment of service structure and the development of the Multi Agency Safeguarding Hub (MASH).

The r-commissioning of services has taken place, taking account of the benefits and efficiency benefits and potential of working across authorities to streamline services.

The Multi Agency Safeguarding Hub (MASH) was scheduled to go live in April 2014. The significant shift in multi-agency ways of working and the infrastructure required to achieve this change brought a number of challenges to this process which resulted in the launch date being deferred until September 2014.

The MASH is now in place and early findings have shown many benefits in risk analysis and sharing of information.

The larger family of early help provision and locality teams are still embedding across the borough and will be a focus during the next year.

#### Looking forward:

Work is planned during 2014/15 with the Police Commissioner's Office which takes on responsibility from October 2014 for a number of victim support and multi-agency early help services across Essex. A refreshed early offer of help strategy replacing the 2012 version and a new MASH strategy will be implemented with a post implementation review of MASH and performance processes embedding localities services will take place later in the year.

#### 5.5 Priority 2: Parental, family and community resilience

#### "Mitigate the impact of child poverty"

The level of child poverty (as measured by the % of children under 16 living in families in receipt of out of work benefits or tax credits) in Thurrock is higher than the national average with 22% of children under 16 living in poverty (some 7,510 children) compared to 20.6% nationally.

Clear links with the Welfare Benefit Reforms Group have been put in place with joint provision of the Emergency Living Fund vouchers through Children's Centres and joint promotion of Money Advice Service sessions.

REED referrals for improving employability have increased and there are currently 41 cases with a further 90 referrals being considered. Co-location with the team is being implemented alongside co location with Job Centre Plus staff at the Central locality office.

Peer support is underway through the Community Hub and events to further develop support for adult skills and training development are in place.

#### Looking forward

Further development of Community Hubs is planned across the borough and the impact of welfare benefit reform is to be further reviewed.

5.6 Priority 3: Everyone succeeding
Promote the attainment and achievement of under-achieving children

#### **NEET (Young People Not in Employment, Education or Training)**

NEET levels for 16-18 year olds (based on age at the start of the academic year) again shows strong performance in 2013/14, decreasing to 5.5% at the end of March 2014 from 6.2 % at the end of March in 2013.

Tuition has been provided for all Year 11s that required it. All schools and the council's Care and Targeted Outcomes Team have been made aware in June and July 2013 of responsibilities around the funding of additional tuition and other needs.

A review was undertaken of the impact of the Pupil Premium funding across all Thurrock schools in July 2013. There was a correlation with the summer results for Sep 2013. A meeting with Fleet Tutors in July 2013 was held to move commissioning of additional tuition directly to schools that have the Pupil Premium funding for Looked After Children.

#### **Looking forward**

Our 2014/15 plans aim to build on the processes in place that have supported the improvement in attainment.

# 5.7 Priority 3: Everyone succeeding Promote and support inclusion

New arrangements have been developed with the organisation Special Needs and Parents (SNAP) to develop the directory of services to cover part of the Local Offer. This work has been commissioned with a completion date of March 2014. The outline directory of Special Educational Provision has been completed as part of the Local Offer.

A new Service Level Agreement has been agreed with Gable Hall Academy and Corringham Primary School which has ensured the ongoing service from the mainstream resource base for pupils with speech and language needs. A new Service Level Agreement has been agreed with Stanford Le Hope School and the St Clere's Co-operative Trust for the resource base for pupils with visual impairment.

# 5.8 Priority 3: Everyone succeeding Narrow health inequalities for children and young people

Linking with Clinical Commissioning Groups – Public health now working with CCGs on service redesign.

Two of the High Impact pathways have been launched across South West Essex . High Impact Pathways (HIP) have been endorsed by clinical lead for Paediatrics for CCG. Next phase of HIP to include Asthma and Febrile illness. Briefing papers were sent out to schools

The Annual Public Health report is now used as a yearly benchmark of Children and Young People's health. The maternity capacity plan has been currently being updated to reflect the current demands on units in Essex. Public health are now working with Public Health England to improve immunisation uptakes

## 5.9 Priority 4: Protection when needed "Provide outstanding services for children who have been or maybe abused"

#### **Child protection**

The rate of children subject to child protection plans continues to rise. The provisional rate per 10,000 children in 2013/14 is 75 (288 children). This compares to a rate of 53 in 2012/13 – an increase of 41%. The rate also places Thurrock well above both 2012/13 national (38) and SNN (34) averages. Internal and independent audits and have shown that decision making appears to be sound.

#### Looking forward

Peer audits have been implemented and although at an early stage it is anticipated that the MASH process will impact positively on future safeguarding performance.

#### 5.10 Priority 4: Protection when needed "Provide outstanding services for children in care and leaving care"

The rate of children looked after continues to rise. The provisional rate for 2013/14 is 75 per 10,000 children (291 children). This reflects a rise of some 6.6% from 2012/13. The rate is higher than both national (60) and SNN (67) average rates.

Placement stability is a critical factor, anchoring most other outcomes for children looked after. The 2013/14 data shows that 8% of looked after children had 3+ moves during the year. This shows improvement on the 2012/13 position of 11% and is better than both national (11%) and SNN (11%) in 2012/13.

Educational outcomes for children looked after by Thurrock Council remain mixed which is common for education datasets containing low numbers of pupils. Thurrock is in the top quartile on two indicators and the bottom quartile for four indicators. At Key Stage 2, 57.1% achieved the benchmark measure of level 4+ for reading, writing and maths combined in 2012/13 which is a big improvement from 201/12 of 30%. Outcomes continue to be scrutinised at both officer level and at the corporate parenting committee.

#### **Outcomes for care leavers**

81.8% of Looked After Children are provisionally recorded as in suitable accommodation in 2013/14. This shows an indicative improvement of 9.4% from 2012/13 position of 72.4%. Thurrock remains below both national (88%) and SN (83%) from 2012/13.

31.8% of Looked After Children are provisionally recorded as in suitable employment (employment, education, training) in 2013/14. This is significantly below both national (58%) and SNN (53%) averages from 2012/13.

#### Looking forward:

Our plans for 2014/15 include additional "gatekeeping" procedures that ensure that we do all that we can to exhaust the possibility of children staying in the family environment. Children's Social Care have implemented a new process of reviewing placements and closer scrutiny on enhancing fostering arrangements to reduce movement in placements Additional work is planned to support looked after children to get into suitable employment, education and training and suitable accommodation.

#### 6. ISSUES AND/OR OPTIONS: N/A

- 7. CONSULTATION (including Overview and Scrutiny, if applicable)
- 7.1 The Children's Partnership Board and its subgroups scrutinise the detailed work of the partner agencies in implementing the Children and Young People's Plan.
- 8. IMPACT ON CORPORATE POLICIES, PRIORITIES, PERFORMANCE AND COMMUNITY IMPACT
- **8.1** The progress made within the plan supports of the Health and Wellbeing vision that "every child has the best possible start in life"
- **8.2** This report highlights some of the key activities and outcomes achieved within the first year of the plan.

#### 9. IMPLICATIONS

#### 9.1 FINANCIAL

Verified by Michael Jones 01375 652772

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Funding of the work of the Children's Partnership and its activities is conducted through partner's contributions.

#### 9.2 LEGAL

Implications verified by Lyndsey Marks

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There are no direct Legal implications.

#### 9.3 DIVERSITY AND EQUALITY



Implications verified by Rebecca Price 01375 652472

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There are no direct diversity or equality implications. The Children's Partnership plan aims to improve services for all children and young people in Thurrock.

#### BACKGROUND PAPERS USE IN PREPARING THIS REPORT

2013/16 Children and Young People Partnership Plan

#### **APPENDICES TO THIS REPORT**

- Appendix 1 CYPP Plan 2013-2014
- Appendix 2 CYPP Plan for 2014-15

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