

Wiltshire Children & Young People's Trust

## CHILDREN AND YOUNG PEOPLE'S PLAN

2012-2015

### CONSULTATION DOCUMENT

This consultation document contains a retrospective look at progress in partnership working from the Children and Young People's Trust and a forward look to our priorities for the next three years.

Your views are really important in shaping the content of this new plan - please send us your thoughts.

Consultation closes 15 November 2011.

#### Our Vision

**'To improve outcomes for children & young people in Wiltshire, promote safeguarding, reduce the effects of child poverty and enable resilient individuals, families and communities'.**

In realising our vision we will listen and respond to the voice of children, young people, parents and carers.

The Children and Young People's Commissioning Executive together with the Children and Young Peoples Stakeholder Partnership will achieve this vision by continuing to work together. An overview of the structure of Wiltshire's Children and Young People's Trust is included in Appendix 1 of this document.

Integrated working will underpin success. Appropriate information sharing aids timely and early intervention. A key part of agencies working together is the use of the Children's Trust/Local Safeguarding Children's Board Multi-Agency Threshold Document which provides a consistent way of working across all partner organisations. The Threshold Document can be found on the Pathways website.

[http://www.wiltshirepathways.org/UploadedFiles/Multi-AgencyThresholds\\_v2\\_final.doc](http://www.wiltshirepathways.org/UploadedFiles/Multi-AgencyThresholds_v2_final.doc)

A guide to the level of support a child/family is likely to need, ie, universal, targeted or specialist services, is included in Appendix 2 of this document.



## **Introduction**

Within Wiltshire's Children and Young People's Trust, we recognise that each of us comes to work every day to make a difference to the lives of our children and young people. We all want the very best for them – to be healthy, safe, enjoy and achieve, make a positive contribution and achieve economic wellbeing.

Although Children's Trust arrangements are no longer mandatory, we have made a collective decision in Wiltshire to continue to work together to make a difference. We firmly believe that it is through joint work that we can ensure that our children and young people achieve the best possible outcomes. This high level three year plan will give us the focus we need to keep us moving together in the right direction, and will help us to show that we are listening and responding to what children, young people and parents are telling us. The detail of actions we will take to improve outcomes for children and young people are included in a range of commissioning strategies and strategic plans. These documents can be found on the Children and Young People's Trust website – [www.WiltshirePathways.org](http://www.WiltshirePathways.org).

The next three years will be very challenging for all partners as we change the way we deliver support and services and our collective purse tightens. Continuing our close partnership working will help us all through the challenges ahead, and more importantly, will ensure that we achieve the best results for children and young people with the available resources.

**Cllr Lionel Grundy**  
**Chair of Wiltshire Children's Trust Commissioning Executive**

## What we have achieved so far

Good progress has been made in the delivery of the 2008-2011 Children and Young People's Plan and a number of important things have been achieved in the last three years (we are continuing to complete actions from this Plan during 2011/12). We had ten priority areas and a section on Working Together. Outlined below is an overview of some of the changes and improvements we've made; partnership work has often been a key contributor to success!

**Promoting resilience** – Many schools have taken this agenda on board and have implemented universal programmes to promote resilience such as SEAL and the FRIENDS programme. At the higher level of need, safeguarding and child protection have continued to be a priority - we have reorganised social care services to strengthen responses, improved placement choice for children in care and ensured that child protection cases are reviewed on time.

**Supporting mental wellbeing** – Healthy Minds is in place to provide a primary mental health service. We have re-commissioned the specialist Child and Adolescent Mental Health Service, reducing waiting times with 90% of young people seen within 4 weeks of a referral being accepted and putting in place a county-wide out of hours response. The Family and Parenting Support Commissioning Strategy is in place and key actions are now being implemented, including tendering for a new family support service working with families with significant needs but who do not meet the social care threshold.

**Improving achievement** - Key stage 2 results for primary school children have improved, this is partly due to the use of the "Every Child" one-to-one programmes providing targeted support. Many school buildings projects have been successful including the replacement build of the Melksham secondary school through Building Schools for the Future which opened in September 2010 and Wellington Academy new build which was finished in April 2011. A virtual school head teacher has been established for children in care to help focus on their progress.

**Things to do...** - Community Area Young People's Issues Groups are in place in each community area contributing to Area Boards and bidding for resources for youth projects. Wiltshire Young People's Opportunities Fund has awarded £402,900 which has funded 58 projects. Visits and contributions to Sparksite and listeners to SPARK radio (a website and radio station for young people to find out what is going on in and around their area, as well as a base for information and advice) have increased, and the links on the website have been improved to include access to more opportunities. New play spaces have been developed covering a range of areas from urban to rural locations both Council owned and within Parish and Town Councils. Schemes like "Freetime" have run to give improved access to leisure activities to children and young people from deprived areas.

**Disabled children & young people** - Wiltshire Parent Carers Council has been established and now has approximately 400 members. We co-produced Wiltshire's Local Offer on Short Breaks to improve and extend short break opportunities – this work has been nationally recognised. We have increased the number of "Bridging Projects" to allow disabled young people to take part in youth activities. We now have a multi-agency protocol and transition handbook for parents to help the move from children's to adult's services.

## **Reducing NEET**

We have organised a number of positive engagement programmes targeted on vulnerable groups, for example, 'Project Inspire': a programme focused upon young people with learning difficulties and disabilities or at risk of offending and 'And Baby Came Too': specific support for young mothers. Young people from vulnerable groups now have dedicated personal advisor time, e.g., children in care and young offenders.

## **Tackling domestic abuse**

Positive relationships programmes for young men and young women (13-16yr olds) have been delivered. The Paloma project, delivered by Splitz, supports victims and their families. A "preferred provider" for school-based interventions was identified and a Theatre in Education programme was delivered in ten secondary schools. A number of multi-agency training events have taken place to raise awareness about domestic violence and referral routes. A Pan-Wiltshire Stakeholder day was held in July 2010 which was very well attended and received.

## **Obesity, healthy eating & exercise**

Breastfeeding peer support training has run in areas where it is known that there is a low prevalence of breastfeeding. The 'Healthy Schools' and 'Healthy Schools plus' programmes are focusing on specific issues such as obesity and sexual health. The "Happy Little Teeth" project has encouraged good oral health in early years settings and schools. Care Pathways are in place for weight management of children and young people. "Cook4Life", a Community Cookbook was produced to support the Let's Get Cooking/Change4Life pilot in Wiltshire Children's Centres where training was given to staff to enable them to run cooking activities with families. "Let's get Cooking Clubs" (National Lottery funding) for children, their families and the wider community are now running in 40 Wiltshire schools.

## **Reducing substance misuse**

An Alcohol Strategy and implementation plan is now in place. A 'proof of age scheme' is being rolled out and there is a programme of Substance Use Screening Tool (SUST) training for front-line professionals (there have been 985 attendees at drug and alcohol training courses co-ordinated by public health). In relation to young people, the main focus has been alcohol and cannabis use and links are made to related risky behaviours such as having unprotected sex. A Hidden Harm course has been developed and successfully run for 90 Health Visitors to support working with parents who drink or use drugs in order to reduce the impact on children.

## **Improving sexual health**

The "No Worries" service has been enhanced and extended. A Long Acting Reversible Contraception pathway and Chlamydia screening are in place. Multi-agency drop-in centres have been established in 13 secondary schools and each college site has a full sexual health and contraceptive service. A continual programme of Sexual Health and Delay Training is available to front line professionals.

## **Working together**

30 children's centres have been established and will continue to operate in the most deprived areas with close working between Health Visitors and children's centre staff.

The Speech & Language Therapy service has been jointly re-commissioned by the PCT and the local authority and there is now a single point of access and waiting times have been reduced.

Multi-agency commissioning strategies have been developed for Family and Parenting Support, Emotional Wellbeing and Mental Health and services for 13 – 19 year olds. The Children in Care Commissioning Strategy is being updated.

A Children & Young People in Care Council is now in place.

The Multi-Agency Thresholds Document has been reviewed and updated, and there is a rolling programme of CAF/Lead Professional training.

Working arrangements between the Children and Young People's Trust and the Local Safeguarding Children Board have been rationalised to avoid duplication, promote communications and add clarity to accountability.

Draft for Consultation

## Characteristics of children and young people in Wiltshire

The Wiltshire Joint Strategic Assessment (JSNA) provides information on the current and future health and wellbeing needs of people in Wiltshire. The current JSNA can be found at [www.wiltshirejsna.org](http://www.wiltshirejsna.org).

A specific needs analysis relating to children and young people is produced annually. The latest needs analysis can be found at:

[http://www.wiltshirepathways.org/UploadedFiles/Needs\\_Assessment.doc](http://www.wiltshirepathways.org/UploadedFiles/Needs_Assessment.doc)

A summary of the characteristics of our population of children and young people is provided below.

### Population

Wiltshire's 0-19 population is estimated to be 112,000 (25% of the total population) and is expected to increase slightly over the next few years.

Wiltshire as a whole is characterised by its 'rurality' and is notable for the scale of its military presence, which is one of the largest in any county in the UK. In January 2011, 4,893 children and young people in our schools (7.6%) have a parent in the armed services.

Although Wiltshire is generally not a deprived area, the county has pockets of deprivation including five local areas that lie amongst the 20% most deprived in England. In addition, aspects of rural deprivation are difficult to quantify yet are of particular relevance in this county, in which proportionally more of the population live in a rural setting.

Children are said to be living in relative income poverty if their household's income is less than 60 per cent of the median national income. Essentially, this looks at whether the incomes of the poorest families are keeping pace with the growth of incomes in the economy as a whole. Using this measure, there are currently 2.8 million<sup>1</sup> children living in poverty in this country and 11,120<sup>1</sup>, 11% of the 0 – 19 population, in Wiltshire. Wiltshire compares favourably against the South West average of 15.8% and against the average of comparable local authority areas (12.9%).

### Health

In comparison with national averages, the health of our children and young people is generally good. Infant mortality rates have declined in Wiltshire in recent years to 3.2 per 1,000 in 2005-2007 and are lower than those of the South West and England. In 2008 the total number of deaths in the under 19 age group was 44, of which 11 were pre-28 days. Unintentional injury was the leading cause of death in children aged one to 14 years in Wiltshire in 2008 and this accounts for more hospital admissions than any other cause. Children from deprived backgrounds are 15 times more likely to be

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<sup>1</sup> These figures are as at 2008

injured than those from less deprived backgrounds<sup>2</sup>. Wiltshire's rates in 2009/10 of childhood obesity are below the national and regional averages. Wiltshire has an under 18 conception rate of 29.7 per 1,000 females aged 15 to 17 (2009). This was lower than rates in England and the South West.

## Education

Educational achievement is generally in line or better than similar areas though the gap between the attainment of children in vulnerable groups and their peers is too large and should be narrowed.

Data from our schools (January 2011) tells us that:

There are 64,500 children in maintained schools

4,887 children and young people (7.6%) describe themselves as having an ethnicity of other than White British.

12,936 children and young people (19.2%) of the school population have been identified as having special educational needs, of which 1,610 have statements of special educational needs.

5,304 children and young people (8.2%) are eligible for free school meals.

## Social Care

In 2010/11 there were 3,383 referrals to children's social care.

Recent figures show that at any one time there are approximately:

- 1,200 children and young people in need involved with social care services
- 160 children and young people with a child protection plan  
(As a rate per 10,000 of the under 18 population, this is 15.5, compared to average of similar areas 25.0 and national average of 35.5)
- 400 children and young people in the care of the Council  
(As a rate per 10,000 of the under 18 population, this is 38.8, compared to average of similar areas 39.7 and national average of 58)

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<sup>2</sup> Joint Strategic Assessment 2010

## What young people say...

The leaflet “Making life better for you – Where’s it got to? Where’s it heading?” was sent out to all pupils in years 7-11 in May 2010. It was produced as a means of getting young people to think about the issues facing children and young people in Wiltshire (taking a wider perspective than simply their own) and to contribute their ideas. It was based on ‘Making life better for you – What’s in it for me?’, the young people’s version of the 2008-11 Children and Young People’s Plan, which was distributed to schools in November 2008.

The main leaflet formed an update of where we (The Trust Board) were in terms of the priorities identified in “Making life better for you”. The centre pages of the leaflet were a pullout response sheet, for pupils to send in their feedback on what they thought was available in Wiltshire in times of need (using a range of scenarios/case studies), and what they would do if they had 1 million pounds to improve the lives of young people in Wiltshire.

### **If you had 1 million pounds to improve the lives of young people in Wiltshire what would you do with it?**

Top 10 answers:

- More places to go - to relax, chill out, have a good time, do activities, community centres, youth clubs.
- People to talk to - counselling, one to one, talk rooms, school counsellors, someone to talk to about drug problems, alcohol, bullying etc, somewhere to open up.
- Better sports facilities - free/cheaper activities, more variety, more after school clubs.
- Reduce bullying - campaigns in schools.
- Money for poorer/less well off families - so they look tidy, have a nice home, have up to date equipment.
- Make schools safer, happier, modern environments - update them, so people like coming to them, improve school councils.
- More work/job experience.
- Get rubbish off the streets, get rid of graffiti - have specific graffiti walls.
- Provide homeless people with shelter and food.
- Healthy eating cafes.

The **Community Area Young People’s Issues Groups** (CAYPIGs) were established to bring young people using services at a local level together with elected members from all tiers. They function to improve young people’s access to decision-making, inclusion and inter-generational dialogue and cohesion. This has also promoted rural targeting. During 2011, a number of themes have emerged:

- Lighting - both street lighting and lighting for parks and skate parks. Young people referred to safety fears and the fact that they are unable to use certain facilities when the evenings get darker (parks, courts, skate parks etc...). This came up a lot.
- Transport - prices, timetabling etc...
- Weekend opening of places to go - particularly Friday nights
- Space for skate parks/bmx tracks



The **Wiltshire Assembly of Youth** (WAY) is a group of young people who meet regularly with the aim to work together to make changes, improve services and get the voice of young people heard where it matters most. They launched their most recent Agenda for Action in 2010.

### **Agenda for Action**

**The Environment** – Environmental issues are really important for young people and WAY believes that together we can make a difference.

**Health** – WAY believes that good health is being in a state of complete mental, physical and social wellbeing and that it is important for all young people to achieve the best state of health they can.

**Life Opportunities** – Young people should feel empowered to achieve economic and social wellbeing by having access to a range of positive opportunities to help develop an understanding of what this means.

**Transport** – Wiltshire is a rural area and so transport is a key issue for all young people. Good transport gives them their independence.

More information about the Wiltshire Assembly of Youth and their Agenda for Action can be found on Sparksite.

[http://www.sparksite.co.uk/entries/wiltshire\\_assembly\\_of\\_youth\\_way\\_agenda\\_for\\_action](http://www.sparksite.co.uk/entries/wiltshire_assembly_of_youth_way_agenda_for_action)

Wiltshire's Children and Young People's Trust can directly influence some of these issues and will also support young people at other forums where they can have an influence on the broader agenda for action.

As methods of **communication** change, young people will expect media that they are familiar with and can interact with. Use of social networking and texting has become part of every day life and is particularly important to young people - services will need to increasingly shift their view of the best way of communicating with young people.

**Sian.** "...We should implement social networking sites which has the largest number of people, within their target audience. We should be going to the young people!"

**Emma.** "In terms of being connected with young people, it would be very useful to promote things".

**Claire.** "I think that using Facebook is a good idea because most young people have it and it is something that we use more frequently than emails. I feel it's better to use it because you can easily see what is happening and when and the times."

Sometimes advances in technology bring unintended consequences which result in emotional distress, eg, cyber-bullying. Service providers need to be mindful of this when they are developing their communication networks.

## **What we will do over the next three years**

### **Proposals for the Plan 2012 - 2015**

#### **What we want to achieve – high level outcomes:**

- All children and young people make the best possible start in life
- All children and young people are safeguarded from harm
- More children and young people are able to remain with their families when safe to do so
- More vulnerable children and young people are able to achieve outcomes and progress in line with their peers
- More children and young people live above the poverty line
- More children and young people benefit from a healthy lifestyle
- All children and young people are equipped with skills, knowledge, opportunities and attitudes to make a successful transition to adulthood

A set of high level outcome indicators will be developed to measure success – a first draft is included in Appendix 3. These will be discussed at the Children's Trust Commissioning Executive. Some of these indicators are also in the community level Joint Strategic Assessments to allow local discussion and action. These indicators are: hospital admissions, numbers of obese children, levels of child poverty, attainment at Key Stages 2 and 4, and the number of young people not in education, training and employment.

More detailed outcome indicators will be monitored through the sub groups of the Children's Trust Commissioning Executive. Each sub group will report back to the Executive on a regular basis in line with its work plan. This work plan will be informed by the overall strategy for the area of work, for example, the Emotional Wellbeing and Mental Health Commissioning Strategy will guide the work of this sub group.

#### **Key themes**

Based on our needs assessment and what children and young people tell us, it is suggested that improvement in the life chances and outcomes for children and young people can be achieved by multi-agency working across these three themes:

- Prevention and early intervention
- Raising aspirations and narrowing the gaps
- Promoting healthy lifestyles

# Prevention and early intervention

## What is the issue?

Whatever the age of the child or young person, it is important to identify additional needs at the earliest possible stage in order to provide support before difficulties become more entrenched.

There are two aspects here - both need elements of prevention and early intervention.

The first is linked specifically to the early years of a child's life. The early years have a profound importance for later outcomes. The development of a baby's brain is affected by the attachment to their parents and analysis of neglected children's brains has shown their brain growth is significantly reduced. Achieving greater equality of outcomes at ages three and five would enable more children to secure a good start in life and to take full advantage of their schooling.

The second aspect is around prevention and early intervention for older age groups of children who, even if they have had a good start in life, find themselves needing additional support. Ideally it is better if the need for this support is prevented entirely, however if a need emerges there should be early intervention to catch it at its earliest stage and stop it becoming worse.

Frank Field's "The Foundation Years: preventing poor children becoming poor adults"<sup>3</sup> found that "... children's life chances are most heavily predicated on their development in the first five years of life. It is family background, parental education, good parenting and the opportunities for learning and development in those crucial years that together matter more to children than money, in determining whether their potential is realised in adult life. The things that matter most are a healthy pregnancy; good maternal mental health; secure bonding with the child; love and responsiveness of parents along with clear boundaries, as well as opportunities for a child's cognitive, language and social and emotional development. Good services matter too: health services, Children's Centres and high quality childcare." The report notes that differences in skill levels are impacted by 22 months of age. It acknowledges that later interventions can be effective but stresses that the most effective and cost effective way to help is in the earliest years of a child's life. It also stresses the importance of breaking intergenerational cycles of poverty and raising parental aspiration.

Graham Allen's report "Early Intervention the Next Steps" (2011)<sup>4</sup> suggests:

"...Early Intervention to provide a social and emotional bedrock for the current and future generations of babies, children and young people by helping them and their parents (or other main caregivers) before problems arise.

"...the best and most rigorously proven Early Intervention programmes should be pulled together using the best methodology and science available, to promote their wider use.

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<sup>3</sup> "The Foundation Years: preventing poor children becoming poor adults". Frank Field December 2010. The report of the Independent Review on Poverty and Life Chances.

<sup>4</sup> Early Intervention: The Next Steps, Graham Allen 2010

“The Government should take further the existing policies in this field to make sure that all children have the social and emotional capability to be ‘school ready’ at five.”

### **Where are we now?**

The Family and Parenting Support Commissioning Strategy recognises the importance of minimising overlaps and duplication between services offering support to families. It is also important to get the right mix of services including making sure that enough resource is invested at level 2 to avoid the need for social care intervention. Work is being undertaken to ensure that at universal level there is a solid information base about support and services for families with excellent signposting. It is recognised that the core business of Children’s Centres will be early intervention with a focus on vulnerable families, and a new family support service will be operational from April 2012 focusing on providing support to parents and families who have complex needs requiring longer term support.

Protecting children and young people affected by parental substance misuse is a priority for the Children’s Trust, the Community Safety Partnership and the Local Safeguarding Children’s Board. The Hidden Harm Strategy sets out a clear commitment to improve the outcomes for all children and young people living in households where there is alcohol and drug misuse.

### **What we propose to do...**

1. Maximise the potential of our Children’s Centres and Health Visiting Service to provide support to vulnerable families, including antenatal support, to ensure all children in Wiltshire receive the best possible start in life.
2. Intervene at an earlier stage to support parents and enable families to manage their problems before they become too big and complex and require social care intervention.
3. Continue to focus on domestic abuse and ‘hidden harm’ as two of the key issues that need to be addressed in order to keep children safe within their families, and ensuring there are effective links between children’s and adults’ services.
4. Ensure that everyone who works with children and young people has access to information about available family and parenting support services.

# Raising aspirations and narrowing the gap

## What is the issue?

This theme acknowledges that raising standards and narrowing the gaps between vulnerable groups and their peers are the central goals of the government's education policy. However, it must be acknowledged that achievement can mean different things to children and young people. There are close links between aspirations and achievement and both are linked with issues such as poverty and parental attitudes and engaging disaffected young people.

Partners need to continue to work together with schools and other agencies to support children's learning. When children and young people are confident and happy they are more resilient and more able to achieve.

Central Government is reforming education. The Schools White Paper 2010 'The Importance of Teaching' sets out the steps the Government believes will create a system in which schools are better able to raise standards, narrow the gap in attainment for vulnerable groups and enable young people to stay in education or training until at least the age of 17.

Nationally a number of key changes are being consulted on and implemented. These include the creation of Academies and Free Schools, additional funding for disadvantaged two year olds, additional funding for school aged pupils who are eligible for free school meals, looked after children or from service families, and a recently published Green Paper on improving support for children with special educational needs and disabilities ('Support and Aspiration: A New Approach to Special Educational Needs and Disability').

## Where are we now?

Funding for childcare for disadvantaged 2 year olds currently provides support for approximately 120 children and childcare take-up for 3 and 4 year olds is generally good. Results for the Foundation Stage Profile are strong and the gap between the lowest achieving 20% of the cohort and the rest continues to be amongst the best in the country. Results for Key Stage 2 and Key Stage 4 are above the national average. However, results for those children and young people eligible for free schools meals, with special educational needs or in the care of the Council need to improve.

Family Learning was recently judged 'good' by Ofsted with good partnership working with external agencies such as schools, children's centres, libraries and the Army. The promotion of equality, diversity and social inclusion was recognised as good with a clear commitment to meeting the needs of disadvantaged and under-represented groups.

Reducing NEET numbers (not in education, employment or training) is proving a challenge and the latest figures give a figure of 6.8% NEET and an increased number of young people whose status is not known.

The 13 – 19 Commissioning Strategy includes a focus on improving access to careers information, advice and guidance and supporting young people to move into employment and training. It also includes ideas for the future delivery of positive

activities for young people by the Council's Youth Development Service and the voluntary and community sector. The aim is to develop a service delivery model which reflects both what young people want and is sustainable in the long term.

### **What we propose to do ...**

1. To continue with the improvement in Early Years to ensure that achievement for all increases and that children vulnerable to underachievement continue to make good progress.
2. Accelerate the improvements at KS2 and KS4 to meet the goal of attaining in the top quartile of national figures.
3. Continue the work on narrowing the gap between those vulnerable to underachievement and the rest. This is especially so for pupils with free school meals, Looked After Children, some Black and Minority Ethnic groups some service children and those with SEN.
4. Raising of the participation age and reduce the numbers of young people not in education, employment and training.
5. Raise aspirations through improving the places to go, things to do and access to transport to enable participation.
6. Extend the use of positive role models/mentoring.
7. Address the key elements of the Green Paper on Special Educational Needs and Disability on integrating assessments and care plans across education, health and social care in line with feedback from Wiltshire Parent Carers Council.
8. Provide early support to vulnerable young people, including young people with disabilities, to support a successful transition to adult life.

# Promoting access to healthy life styles

## What is the issue?

The goal of promoting health is informed by the WHO (World Health Organisation) who define Health as 'a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity'. The intention is to focus on behaviours that result in ill health, affect quality of life and cause premature mortality. The Children's Trust will focus on the following areas:

- Prevention of unintentional injuries
- Creating smoke free homes and helping young people to stop smoking (or prevent them starting in the first place)
- Promoting a balanced diet and an active lifestyle to prevent and reduce obesity
- Promote positive mental health and build emotional resilience – including bullying and its impact on children and young people
- Ensure that young people have good sexual health – including reducing teenage conceptions
- Reduce alcohol and substance misuse amongst young people

## Where are we now?

There is a multi-agency accident prevention strategy for children and young people and this has a detailed action plan. Significant success has been achieved around reduction in road traffic collision fatalities, probably arising from schemes such as 'Bikeability' and the 'Stay Alive' campaign for young people about to start driving.

In the recent vulnerable family survey, about 12% of families of children under 5 had a parent who smoked. The NHS funds the smoke free homes programme in Wiltshire to aim to reduce the exposure of children and young people to second hand smoke. Many staff across agencies have been trained in both the brief intervention training (to identify smokers who wish to stop) and then the triple A programme that increases the change of a young person quitting smoking.

The Strategy focusing on ensuring the whole population has a healthy weight will be updated following the publication of further national guidance. Work is underway to ensure that the child obesity pathway is fully commissioned.

A commissioning strategy is being developed to improve outcomes for children and young people with emotional and mental health difficulties. The priorities within the draft strategy include promoting positive mental health, improving the availability of information on the support available for children and young people, and building the skills and capacity within the children's workforce so that people can recognise and respond to children's early emotional and mental health difficulties.

There are a number of projects/services that aim to promote good sexual health and reduce teenage pregnancies. The focus on implementation of the 'No Worries' service and 'Delay' training will continue.

The existing Alcohol Strategy for Wiltshire has a comprehensive action plan which addresses issues around young people drinking alcohol. Specifically, work is continuing to try and reduce alcohol related harm and provide a range of high quality

interventions for children and young people, largely through the Motiv8 service, based within the Council's Integrated Youth Service. Recognising the link between alcohol and youth offending, Wiltshire has launched the junior alcohol arrest referral scheme (ARPOV).

**What we propose to do....**

1. Ensure there is greater multi-agency working at a strategic level on child accident prevention.
2. Deliver an evidence based model of services, both universal and progressive for children 0-19 years through Health Visitors and School Nurses working in partnership with other professionals (the national Healthy Child Programme).
3. Continue to promote healthier lifestyles through parenting and community based settings such as schools, young people support services and Children's Centres.
4. Support anti-bullying initiatives and counselling services to ensure children and young people have appropriate adults to talk to if they are experiencing difficulties.
5. Provide clearer information on both local and national support available for children and young people with emotional and mental health difficulties.
6. Invest in early support for vulnerable young people including those engaging in risky behaviours – particularly through high alcohol consumption, and those at risk of teenage pregnancy.



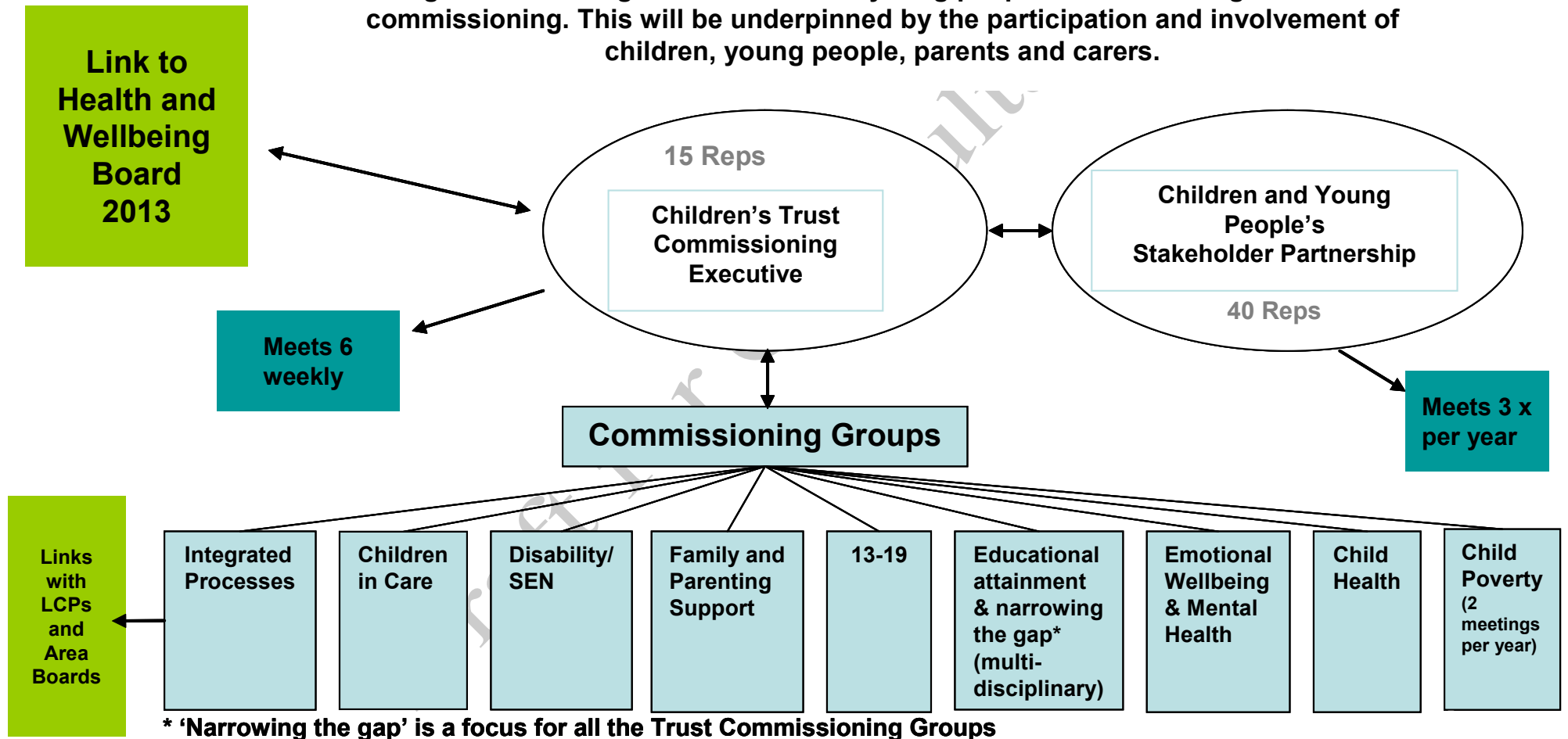
## **Wiltshire Children and Young People's Trust Governance Arrangements**

Within Wiltshire the key strength of the Children's Trust has been to bring together a wide range of stakeholders including young people and partner agencies. Although there is no longer a requirement to have a Children's Trust Board under the coalition government, the core principle of a shared commitment to improve the lives of children and young people and families remains as important as it ever was. All evidence and experience suggests stronger partnerships, greater integration of services and a shared purpose for all those working with and for children and families lead to better services for children, young people and families - especially the most vulnerable. The current arrangements are:

- **The Children's Trust Commissioning Executive** - the key decision making group for commissioning and planning children's services. The Executive meets approximately every 6 weeks.
- **The Children and Young People's Stakeholder Partnership** - This has been formed with a broad multi-agency membership. It meets 3 times a year. The decisions of the Commissioning Executive are informed by the views of the Children and Young People's Stakeholder Partnership.
- **8 Commissioning sub groups** of the Executive have been formed to ensure good outcomes for children and young people through improved partnership working. All these groups seek to maximise the involvement of children, young people, parents and carers and ensure that service delivery/re-shaping of services takes account of their needs and views.

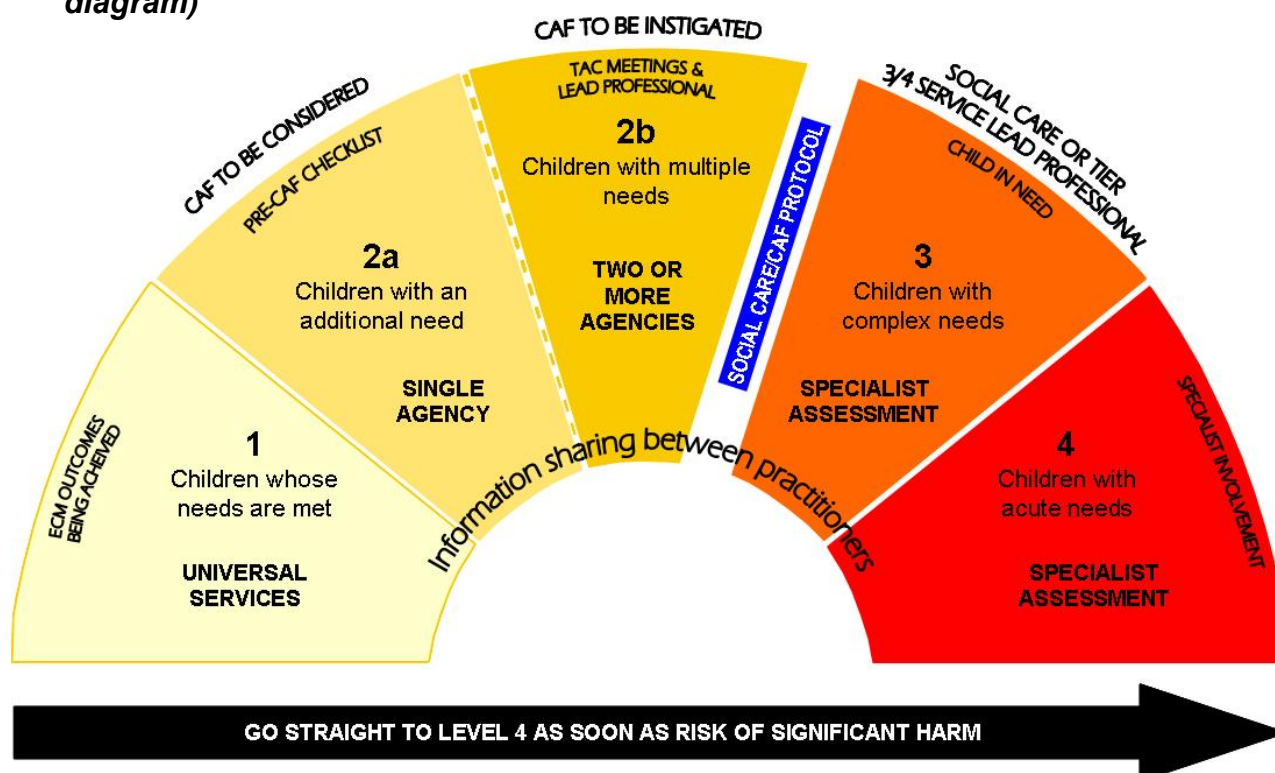
# Wiltshire Children & Young People's Trust Arrangements

The revised Children's Trust governance arrangements will lead to more involvement of agencies working with children and young people and to a stronger focus on commissioning. This will be underpinned by the participation and involvement of children, young people, parents and carers.



All groups to maximise involvement of children, young people, parents and carers  
Some Commissioning Groups have sub-groups (which may be time-limited to oversee specific projects)

## Overview of levels of need<sup>5</sup> - *Thresholds of Need (the “Windscreen” diagram)*



**Level 1** These are children and young people who make overall good progress in all areas of their development. These children are likely to have a protective environment where their needs are recognised and well met. These children require **no additional support beyond that which is universally available**. A common assessment is not needed for these children.

**Level 2a** A child or young person would fall within this band if they can be defined as **needing some additional support from a single service without which they would be at risk of not meeting their full potential**. The support they need may relate to their health, educational, or social development. If ignored these issues may develop into more worrying concerns for the child or young person under level 2 or 3.

**Level 2b** Children and young people who fall into this band would be defined as **having needs that are complex in range, depth, and significance**. It is likely that if these needs are not met their health, social development, or educational attainment may be significantly impaired and they may have poor long term outcomes. Children in this band may be very vulnerable or living in considerable adversity. A child in this band will need the support of more than one professional. A CAF will be completed and the **lead professional** will ensure that support and services for a particular child are coordinated and provided in an integrated, effective way.

**Level 3** A child or young person who falls into this band is defined as **requiring specialist help**. It is likely that for these children their needs and care are at present very significantly compromised. Only a small proportion of children will fall within this band. These children will be those who are highly vulnerable or living in the greatest level of adversity. Children at this level will require specialist assessment and support from statutory services, for example social care, CAMHS, YOS, SEN.

**Level 4** represents children and young people with acute needs – this will require a specialist or statutory integrated response. This is also the level at which child protection intervention is necessary and in many cases a joint social worker and police investigation is required (Section 47 Children Act 1989) followed by multi-agency protection planning.

<sup>5</sup> *Wiltshire Children and Young People's Trust Multi-Agency Thresholds document*

## DRAFT Outcomes Scorecard

Outcome	Indicator*
All children and young people make the best possible start in life	Achievement of at least 78 points across the Early Years Foundation Stage with at least 6 in each of the scales in Personal Social and Emotional Development and Communication, Language and Literacy (NI 72)
All children and young people are safeguarded	Hospital Admissions (NI 70) Number of children on a child protection plan and rate per 10,000 children
More children & young people are able to remain with their families when safe to do so.	Number of children in care and as a rate per 10,000 population under 18 yrs old
More vulnerable children & young people are able to achieve outcomes and progress in line with their peers.	Narrowing the gap between the lowest achieving 20% in the Early Years Foundation Stage Profile and the rest (NI 92) Key Stage 2 and Key Stage 4 gaps between children on Free school meals and their peers (NI 102) Key Stage 2 and Key Stage 4 gaps between children with special educational needs and their peers (NI 104, 105) Key Stage 2 and Key Stage 4 Children in care results (NI 99, 100, 101)
More children & young people live above the poverty line.	Number of children and young people living in poverty (NI 116)
More children & young people benefit from a healthy lifestyle	Obesity in Reception and Year 6 in primary schools (NI 55,56)
All children & young people are equipped with skills, knowledge, opportunities and attitudes to make a successful transition to adult hood.	Key Stage 2 and Key Stage 4 attainment – English baccaulaureate % Young People Not in Education, Employment or training

- where possible these indicators are based on nationally recognised indicators to enable benchmarking.

## Glossary

It is helpful to be clear as to what is meant by various words/terms that are used in this document.

**Parents'** – describes mothers, fathers, carers and other adults with responsibility for caring for a child, including families and friends, carers and those caring for looked after children.

**'Parenting and family support'** – To provide services, interventions, education and support which improve parenting capacity, parent child relationships, safeguard and promote positive outcomes for children, young people and families, and improve family functioning.

**Families with multiple and complex needs** - describe a situation where the family situation is complex and where parents have complex difficulties and/or who are living chaotic lifestyle which might be due to:

- Ongoing and problematic substance and alcohol misuse of parents
- Mental health needs of parents
- Domestic violence
- Learning difficulties of parents and children
- Offending or risk of offending or anti-social behaviour

**Vulnerable** - within the [Wiltshire Children and Young People's Plan](#), the term "vulnerable" is used to indicate that the children in the categories described are not inevitably disadvantaged compared with other children but that they are at significantly greater risk of being so.

The Plan identifies the following categories as children & young people who may be vulnerable in this sense:

- those in low income households
- those in single-parent households
- those in Service households
- disabled children & young people
- those from black & other ethnic groups

**NEET** - stands for not in education, employment or training. It is a measure of the non-participation of young people in structured provision post-16.

**Hidden Harm**<sup>6</sup> - describes children and young people born to and/or living in households where there is alcohol and drug misuse, including the misuse of over-the-counter and prescribed medication in Wiltshire

END OF CONSULTATION DOCUMENT

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<sup>6</sup> Hidden harm Strategy document

Consultation

Wiltshire Children and Young People's Plan 2012-2015

Key Consultation Questions



Key Consultation Question 1

The consultation document outlines three key themes – do you agree with these themes? Is anything missing?

Key Consultation Question 2

Under each theme, we have outlined the things that we propose to do over the next three years. Are these the right things? Is anything missing?

Any other comments?

Completed by: Name:

.....

on behalf of .....

Please return by email to [Pathways@wiltshire.gov.uk](mailto:Pathways@wiltshire.gov.uk) or by post to Room 270, Pathways Team, Wiltshire Council, Bythesea Road, Trowbridge BA14 8JB **by 15 November 2011**

Draft for Consultation