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NOTTINGHAM CITY COUNCIL CHILDREN'S PARTNERSHIP BOARD

Date: Wednesday, 2 July 2014

Time: 4.00 pm

Place: Ground Floor Committee Room - Loxley House, Station Street, Nottingham, NG2

3NG

Councillors and Board Members are requested to attend the above meeting to transact the following business

Deputy Chief Executive/Corporate Director and Chief Finance Officer

Constitutional Services Officer: Catherine Ziane-Pryor Direct Dial: 0115 8764298 Email:catherine.pryor@nottinghamcity.gov.uk

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IF YOU NEED ANY ADVICE ON DECLARING AN INTEREST IN ANY ITEM ON THE AGENDA, PLEASE CONTACT THE CONSTITUTIONAL SERVICES OFFICER SHOWN ABOVE, IF POSSIBLE BEFORE THE DAY OF THE MEETING

further topics for consideration.

CITIZENS ATTENDING MEETINGS ARE ASKED TO ARRIVE AT LEAST 15 MINUTES BEFORE THE START OF THE MEETING TO BE ISSUED WITH VISITOR BADGES





NOTTINGHAM CITY COUNCIL CHILDREN'S PARTNERSHIP BOARD

MINUTES of the meeting held on 19 March 2014 from to 4.02pm to 5.40pm at Loxley House

Councillor David Mellen	for Children's Services)
Ian Curryer	- Chief Executive)
Chris Wallbanks	Programme Manager Early Intervention and Partnerships)
Councillor Sam Webster	Executive Assistant for Schools	Nottingham City Council
Jon Rea	Engagement and Participation Lead Officer)
Alison Michalska	Corporate Director Children and Families))
Lucy Davidson (on behalf of Dawn Smith)	- Chief Operating Officer	NHS Nottingham City - Clinical Commissioning Group
Angela Horsley	- Clinical Lead,	Nottingham Children's Hospital
Michelle Battlemuch	- Small Steps Big Changes Co-ordinator	Nottingham CityCare Partnership
Paula Webber	- Senior Advisor	Young People's Learning Agency
Steve Cooper	- Superintendent	- Nottinghamshire Police
Wendy Smith	CONGA (City of Nottingham Governors' Association) Representative))
Andy Sloan	Head Teacher, Rosehill School (Special School representation)))
Jill Robey	Head Teacher, Nottingham Nursery School and Training Centre	Nottingham Schools
Karen Slack	Head Teacher, Rise Park Primary School)
Gareth Owen	Head Teacher, Hadden Park High School)
Paul Burnett	- Independent Chair of	Local Safeguarding Children Board
Anne Danvers	- District Operations Manager	- JobCentre Plus On behalf of the
Stephen McLaren	- Literacy Volunteers	- Community and Voluntary Sector
Malcolm Cowgill	- Principal, Central Nottingham College	- Further Education
John Yarman	-	Nottingham and Nottinghamshire Futures
Nigel Hill	- Director	Nottinghamshire - Probation Trust

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Rachel To))
Uzair Hashmi) Youth Cabinet) Youth Council
Natalie Robinson))
Robert Ghahremani)	
Darrell Redmond	- Nottingham Equal	

Indicates present at meeting

Also in attendance

Kamala Atwal - Strategy and Commissioning Officer)
Tim O'Neill - Director of Family Community Teams)
Dot Veitch - Partnership Support)
Simon Down - Leading Commissioning Manager)
Cath Ziane-Pryor - Constitutional Services Officer)
Alison Weaver - SEN Adviser and Service Manager)
Mark Andrews - Head of Family Community Teams (North),

39 APOLOGIES FOR ABSENCE

Katy Ball
Paul Burnett
Phyllis Brackenbury
Candida Brudenell
Malcolm Cowgill
Teresa Cope
Anne Danvers
Chris Wallbanks
Peter Moyes
Jill Robey
Dawn Smith
Councillor Wendy Smith
Jackie Vanderwalt

40 <u>DECLARATIONS OF INTERESTS</u>

None

41 MINUTES

Subject to the inclusion of John Yarman's apologies, the Board confirmed the minutes of the meeting held on 9 March 2014 as a correct record and they were signed by the Chair.

42 <u>CHILDREN AND YOUNG PEOPLE PLAN PRIORITY : ATTENDANCE IMPROVEMENT PRIORITY</u>

Tim O'Neill, Director of Family Community Teams, and Mark Andrews, Head of Family Community Teams (North), presented the report and delivered a presentation highlighting the successful work to date in improving school attendance and outlines further planned work. Improving school attendance is a key priority of the Children and Young People Plan.

In addition to the information provided, the following points are made;

- (a) since 2010/11 attendance has been significantly improving with overall absence for secondary schools improving by 14%, and primary schools improving by 13%;
- (b) there is still work to be done as Nottingham City Schools continue to compare poorly against those of other Local Authorities;
- (c) with regard to the 'Check and Challenge' policy, partners, including the Police, tend to find that when children are accompanied by their parents during times when they should be at school, justifiable reasons for the child's absence are given. Lone children are always challenged;
- (d) absences in primary school are generally higher for children in Reception and Year 1;
- (e) there still needs to be better understanding of why young people do not attend school;
- (f) of the 386 persistent absentees, 168 families are currently being worked with, 97 are considered priority families and 121 families do not meet priority family criteria;
- (g) the latest figures are approximately one year old as some of the academies have only recently provided the data due to capacity.

The chair suggested that Dawn Smith of the Clinical Commissioning Group be approached and asked to request that GP surgeries try not to give appointments to school age children during school hours.

RESOLVED that the improvement in attendance be noted.

43 PROGRESS IN IMPLEMENTING THE NEW 0-25 SPECIAL EDUCATIONAL NEEDS (SEN) SYSTEM (CHILDREN AND FAMILIES BILL 2013)

Alison Weaver, SEN Adviser and Service Manager, and Tim O'Neill, Director of Family Community Teams, presented the report and delivered the presentation, updating the Board on the progress on implementing the new 02 -25 Special Educational Needs system, as required by the Children and Families Bill 2013.

The following points were made;

- (a) partners have been working together and it is expected that the new system will be legally compliant by September 2014;
- (b) some work is ongoing and a code of practice is currently being produced;
- (c) all partner organisations including Health Education and Social Care, need to work together to provide the best outcome for children with SEN and their families;
- (d) each workgroup has representatives from a range of partners, including parent representatives and young people;
- (e) the information technology has now been selected which can link with the City and County Council information technology to ensure easy sharing of information;
- (f) families and children will be able to access the information once the system is operational to view by the public in September 2014;
- (g) a Joint Commissioning Group has been working at a strategic level to identify what is provided, what is needed and where gaps in provision or information occur;
- (h) a new education and health and care plan will be launched an all-new requests for statements will be looked at by this plan:
- (i) all partners need to understand how the new system will impact on them.

RESOLVED

(1) to note the following:

- (i) the implications of the bill and the new legal requirements placed on local authorities clinical commissioning groups and partners from September 2014;
- (ii) the progress to date, the proposed implementation plan and approach;

- (iii) the intention to present a further report once the overall financial implications of implementing these requirements are clear;
- (2) to champion a partnership approach to implementing these changes in particular through joint commissioning, delivery and funding of services.

44 <u>CHILDREN AND YOUNG PEOPLE'S PLAN AND THE FAMILY SUPPORT</u> PATHWAY REWRITING/REFRESHING

Simon Down, Leading Commissioning Manager, presented the report informing the committee of the interim refresh of the family support pathway to ensure that it is compliant to recent legislative and policy updates.

The drafting of the Children and Young People's Plan for 2015-2020 will allow a co-productive approach by all partners. It will continue to drive improvements for the City's children and young people and respond to all new policy drivers including reflecting the new 'operating model'.

Members of the Board suggested that some phrasing be reconsidered.

RESOLVED

- (1) to approve the high-level plan for the writing of the Children and Young People's Plan 2015-2020, as outlined in appendix 1 to the report;
- (2) to approve the plan for the interim refresh of the family support pathway, as identified in appendix 2 to the report;
- (3) to approve the broad areas of change in the family support pathway and the approval route for the final draft;
- (4) for the Board to consider the plan once consultation on the draft is completed.

45 NORTH OF ENGLAND EDUCATION CONFERENCE (NEEC) 2014

The Chair and Alison Michalska, Corporate Director for Children and Families, briefly updated the board on the event which have been held at Nottingham Trent University Conference Centre and was considered a success, being well attended and receiving good feedback. It had proved interesting and challenging and had taken a huge amount of work but is considered worthwhile, providing a lot of useful ideas.

46 YOUTH CABINET REPORT ON THE 2014 NORTH ENGLAND EDUCATION CONFERENCE (NEEC) YOUTH CONFERENCE

Robert Ghahremani, Uzair Hashmi and Rachel To of Nottingham Youth Cabinet, presented a detailed report informing the Board of the Cabinet Members' attendance at, and assistance with delivering the North of England Education Conference 2014 Youth Conference.

The focus of the conference was to discuss ways in which opportunities can be increased for children and young people to develop careers in science, technology, engineering and maths (STEM).

Approximately 40 of the young people attending the NEEC Youth Conference were involved in the workshops which produced the following recommendations:

(a) Community Engagement

- (i) a City Science Festival every year
- (ii) key people who work with young people be established as STEM champions;
- (iii) publicity and advertising to raise presence of STEM in the City, (particularly in secondary schools);
- (b) Industry in the Classroom;
 - (i) more partnerships between STEM companies, schools and colleges;
 - (ii) STEM careers advice at an earlier age (pre-options) and increased teaching knowledge of STEM careers;
 - (iii) increased apprenticeship opportunities in STEM careers;
- (c) Removing Barriers and Raising Aspirations
 - (i) policymakers school heads and school governors must demonstrate strong clear commitment towards STEM;
 - (ii) more ambassadors and role models for STEM from underprivileged backgrounds;
 - (iii) open doors into work at the end of vocational training, with equal value given to vocational and academic qualifications.

The Board's discussion included the following:

- (d) it is frustrating that there have been so few changes in education and that there is not a longer term view of vocational pathways without the emphasis being placed on academic achievement;
- (e) the recommendations of the youth conference workshops are valid and need to be taken on board by partners;
- (f) some recommendations are more tangible than others and it needs to be clear who will take them forward:
- (g) it would be valuable to extend STEM agenda up to young people of 25 years of age;
- (h) the STEM involvement in primary schools needs to continue into and through secondary schools, possibly by maintaining the practical work focus;
- (i) consideration should be given to engaging external expertise and not just relying on skills within each school;
- (j) industry can only benefit from involvement in and participation with STEM;
- (k) the priorities and structures of the council need to be aligned with STEM as this is a big growth region and will need to ensure they teach topics that will be need;
- (I) the big employers in Nottingham should be asked what they look for when recruiting young people;
- (m) engagement must take place in good time before a young person chooses their options;
- (n) it would be beneficial to gather Nottingham's large and growing employers at a science fair to discuss how best to proceed and ensure their staffing needs can be met.

RESOLVED

- (1) to acknowledge the appreciation of the Board for the contribution made by members of Nottingham Youth Cabinet, both at the Board meeting but also for the North of England Education Conference 2014 Youth Conference;
- (2) to note the following offers by members of the Board to endeavour to progress the recommendations of the Youth Conference workshops:
 - (a) John Yarman, representing Nottingham and Nottinghamshire Futures, offered to work on progressing the 'industry in the classroom' section;

- (b) Gareth Owen, Head Teacher of Hadden Park High School, offered to raise the recommendations relating to schools, to the Head Teacher's Partnership, and canvas ideas of how these recommendations could be addressed:
- (c) Alison Michalska, Corporate Director for Children and Families, proposed that within the refreshed education structure, a reference to STEM be included;
- (3) to receive an update report on the progress of implementing the recommendations of the North of England Education Conference 2014 Youth Conference recommendations in 6 months' time.

47 BIG LOTTERY FOR NOTTINGHAM, FULFILLING LIVES: SMALL STEPS BIG CHANGES

The report updated the Board on the progress to secure Big Lottery funding of between £30 million and £50 million to support the use of preventative approaches to improve the life changes of children aged 0-3 years, over a 10 year period.

RESOLVED to note the report.

48 PARTNER'S UPDATE - VOLUNTARY AND COMMUNITY SECTOR

Stephen McLaren, Voluntary and Community Sector representative, delivered a presentation informing with the Board of the current state sector and the challenges faced in the current financial climate.

The following points were highlighted:

- (a) 250 voluntary and community groups considered their work to be primarily children and young people and their families;
- (b) there has been a period of instability for many groups, but comparing this year's survey results to those of last year's, stability is returning;
- (c) the change to area-based grants has heard one of the biggest impacts on the sector, forcing many groups to change the way they operate;
- (d) it is important that voluntary sector roles continue to link with other sectors in the partnership;
- (e) voluntary and community sector advocates provide valuable roles in connecting their day job that is linked to the voluntary sector, other parts of the partnership;
- (f) voluntary and community sector provides an understanding of communities and through such projects as Chat'bout (no decision about me without me), has provided a valuable consultation point for the youth participation network 17 to 24-year-olds, building social capacity of next-generation, and involvement in the review of services not to 19-year-olds;
- (g) future challenges and opportunities for the Voluntary and Community Sector include continuing change, a shrinking public purse, welfare reforms, and increasing demand for higher end services and the gaps in provision that may that this may leave behind, prevention and early intervention.

RESOLVED

- (1) to recognise the breadth and debt of the work to which the Voluntary and Community Sector contributes;
- (2) to strengthen the involvement of the Voluntary and Community Sector in planning from the earliest possible stages;

Children's Partnership Board - 19.03.14

- (3) to reaffirm the relationship with the Children and Young People Partnership Network as a major point of communication with the Voluntary and Community Sector;
- (4) to recognise the value that the Children and Young People Partnership Network provides as a vehicle to help members improve outcomes.

49 KEY MESSAGES AND ITEMS FOR INFORMATION

An annual report will be produced regarding the work of the Children's Partnership Board so can be shared with other services.

50 FORWARD PLAN

The update reports on Intel attendance improvement and stem are to be added to the forward plan along with feedback from the OFSTED inspection. It is noted that any requests for the board to consider further topics, should be forwarded to Dot Veitch, Partnership Support Officer at dot.veitch@nottinghamcity.gov.uk

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Title of paper:	Ofsted Safeguarding Inspection Feedback		
Report to:	Children's Partnership Board		
Date:	2 nd July 2014		
Relevant Director:	Alison Michalska	Wards affected: All	
	Corporate Director, Children and		
	Adults		
Contact Officer(s)	Michelle Roe (Children and Adults Business Implementation Officer)		
and contact details:	michelle.roe@nottinghamcity.gov.uk (0115) 87 63422		
Other officers who			
have provided input:			
Relevant Children and	l Young People's Plan (CYPP) obje	ectives(s):	
Stronger safeguarding – With a key focus on ensuring that there are high standards of ✓			
safeguarding across all agencies and that the Partnership takes a pro-active approach to			
the elimination of domestic violence.			
Healthy living – With a key focus on increasing the proportion of children and young people			
who have a healthy weight.			
Reducing substance misuse – Partnership work to lessen the impact on children of			
parental drug and alcohol misuse and to reduce drug and alcohol misuse amongst children			
and young people.			
Raising attainment – Raising the attainment levels and increasing engagement in employment, education and training.			
Improving attendance – Improving rates of attendance at both Primary and Secondary as			
a key foundation of improving outcomes.			

Summary of issues (including benefits to customers/service users):

Following our unannounced three-week inspection of 'services for children in need of help and protection, children looked after and care leavers' in March 2014, Ofsted Inspectors have concluded that Nottingham children remain safe.

The Council and Safeguarding Children Board received a judgement of 'Requires Improvement' in our first inspection under the new Ofsted framework.

This report outlines our response to the areas of improvement identified by Inspectors and details our continued commitment to driving standards within the services that we provide for children in need of help and protection; children looked after and care leavers.

Recommendations:		
1	The Partnership notes the outcomes of the Safeguarding Inspection and the follow up action to address the areas for improvement.	
2	The Partnership receives updates on the Improvement Action Plan every six months.	

1. BACKGROUND AND PROPOSALS

(Explanatory detail and background to the recommendations)

Following our unannounced three-week inspection of 'services for children in need of help and protection, children looked after and care leavers' in March 2014, Ofsted Inspectors have concluded that Nottingham children remain safe.

The Council and Safeguarding Children Board received a judgement of 'Requires Improvement' in our first inspection under the new Ofsted framework. Their judgement confirms that the City Council and Nottingham City Safeguarding Children Board have effective measures in place to safeguard and protect the most vulnerable.

This report outlines our response to the areas of improvement identified by Inspectors and our continued commitment to driving standards within the services that we provide for children in need of help and protection, children looked after and care leavers. The full Ofsted report is available here http://www.ofsted.gov.uk/local-authorities/nottingham.

The new inspection framework is a tougher test under which authorities have to work even harder to achieve the top ratings of 'Good' and 'Outstanding'. We wholeheartedly support Ofsted's drive to raise the bar for safeguarding inspections - it's tougher for councils, but better for children. Ofsted's tougher test matches our desire to focus on the child's journey with much greater emphasis placed on observing and assessing practice.

Nottingham City Council and the Nottingham City Safeguarding Children Board have produced a joint response document to the inspection to celebrate what we are doing well, acknowledge the improvements we need to make and explain the actions which we will undertake. Please find this document attached as Appendix A.

It is particularly pleasing that the inspection did not find any areas for priority and immediate action; however key areas for improvement were identified. In response to these key findings we will produce an Improvement Action Plan identifying each action and detailing what will be done to address it and by whom. This Improvement Action Plan will be submitted to Ofsted by 18th August 2014 and will be rigorously monitored.

Ofsted have invited senior managers and key partners to attend 'Getting to Good' seminars on Care Leavers, Adoption/Permanence, Early Help and Child Protection Thresholds.

Ofsted now have a role in social care improvement and Kath O'Dwyer, a former DCS is leading on this work on Ofsted's behalf. Ofsted are piloting 'Challenge Seminars' with authorities which involves the Lead Inspector, Regional Lead and Kath O'Dwyer revisiting the inspected authority. During the visit the team outline what they really mean by their recommendations, to help us to ensure that the improvement plan we produce is tackling the real issues and to aid our improvement journey out of 'Requires Improvement'.

2. RISKS

(Risk to the CYPP, risk involved in undertaking the activity and risk involved in not undertaking the activity)

The inspection did not find any areas for priority and immediate action. The Improvement Action Plan will ensure that all areas for improvement are addressed.

3. FINANCIAL IMPLICATIONS

To be scoped through the Improvement Action Plan.

4. LEGAL IMPLICATIONS

To be scoped through the Improvement Action Plan.

5. CLIENT GROUP

(Groups of children, young people or carers who are being discussed in the report)

All children, young people and their families.

6. IMPACT ON EQUALITIES ISSUES

(A brief description on how many minority groups are being engaged in the proposal and how their needs are being met: This section includes traveller and refugee families. The themes of the Shadow Boards – children and young people; parents and carers; equalities issues and the voluntary and community sector should be considered here.

The remit of the Ofsted Safeguarding Inspection is to ensure effective safeguarding of all children and young people in the City and to ensure that the specific needs of individual groups of children are addressed particularly where evidence of safeguarding risk has been identified.

7. OUTCOMES AND PRIORITIES AFFECTED

(Briefly state which of the CYPP objectives and priorities will be affected)

Stronger Safeguarding - With a key focus on ensuring that there are high standards of safeguarding across the entire department and Partnership.

8. CONTACT DETAILS

Alison Michalska Corporate Director – Children and Adults □ alison.michalska@nottinghamcity.gov.uk

2 0115 8763422

The response of Nottingham City Council and the Nottingham City Safeguarding Children Board to





Foreword

Nottingham children are safe. Those four words matter.

Ofsted arrived for their unannounced inspection on the 11th March 2014 and, after three weeks of rigorous investigation they left with the conclusion that children in our City are safe.

Their judgement confirms that, as a local authority and Safeguarding Children Board we put in place effective measures to safeguard and protect the most vulnerable children.

Nottingham City is committed to providing 'Good' eservices; we recognise there is more we must do to improve our work. This was our first inspection under the new Ofsted framework, a framework which has been designed to meet the recommendations of Professor Eileen Munro that inspections should focus on outcomes and children's experiences, rather than strategy or processes.

Ofsted have been clear that the new inspection framework is a 'tougher test' and that authorities have to work harder to achieve the top ratings of 'Good' and 'Outstanding'. The new framework is designed to raise standards and improve practice. The overall judgement received from Ofsted was 'Requires Improvement'.

We found that this inspection was far more focused on the child's journey with much greater emphasis placed on observing and assessing practice. A strong theme of the weaknesses identified by Ofsted concern our 'back office' functions, specifically our I.T. and case recording systems, which we recognise need significant improvement.

We wholeheartedly support Ofsted's drive to raise the bar for safeguarding inspections; it's tougher for councils but better for children. Our challenge now is to make the improvements necessary to secure a 'Good' rating. At a time when Government budgets are reducing and case referrals are increasing we are facing a substantial challenge, but it is one we will rise to.

This document is not intended to replicate Ofsted's official report, which can be found here www.ofsted.gov.uk/local-authorities/nottingham it is designed to celebrate what we are doing well, acknowledge the improvements we need to make and explain the action we will take.

We must conclude by thanking the Children and Adults workforce. Time and time again the passion, commitment and professionalism of our teams has been recognised by Ofsted as something to be celebrated as truly special here in Nottingham. We are proud of the people who work tirelessly on behalf of the children and young people of our City. Our teams do the most important job in the world, they keep Nottingham children safe.

Thank you

Cllr David Mellen
Portfolio Holder for Children's Services

Nottingham City Council

Alison Michalska
Corporate Director for Children and Adults
Nottingham City Council

Paul Burnett Independent Chair

Nottingham City Safeguarding Children Board



1 Children who need help and protection

What are Ofsted looking for?

In this judgement Ofsted are seeking to ensure that children and voung people who are, or who are likely to be at risk of harm or who are the subject of concern, are identified and protected. Help is provided early in the emergence of a problem and is well co-ordinated through multi-agency arrangements. Thresholds between early help and statutory child protection work are appropriate, understood and operate effectively. Records of action and decisions are clear and up to date. Children and voung people are listened to and heard. Social workers build effective relationships with them and their families in order to assess the likelihood of and capacity for change. Children and young people experience timely, multi-agency help and protection through risk-based assessment, authoritative practice, planning and review that secures change.

Ofsted have judged that the experiences and progress of children who need help and protection requires improvement

Verbal feedback from Ofsted identified the following strengths and areas for improvement:

Celebrating our strengths:

- Children benefit from being able to access a wide range of effective early help services.
- There is good use of the Family Support Strategy and Pathway and the Common Assessment Framework (CAF); Lead Practitioner role is well embedded in agencies in the City.
- The effective use of Step Up/Step Down processes supports escalation and de-escalation of cases between the Council's Family Community Teams and Children's Social Care Directorates.
- Children are visited regularly and they are seen alone where necessary.
- Young people receive help which is proportionate to the risk, avoiding unnecessary statutory interventions.
- The introduction of Children & Families Direct, a new service that ensures that professionals and members of the public have easy access to advice and expertise.
- There are effective systems to ensure that children who have been referred to the Children's Social Care Screening & Duty Team a number of times, but have not met the threshold, do not fall through the net.

- Assessments at the 'front door' are good at taking into account the Signs of Safety tool.
- The Local Authority Designated Officer (LADO) role is managing allegations well, taking them seriously and dealing with them correctly.
- Families are well supported by the Disabled Children's Team; there is a variety of support services available and smooth transition of services.
- The Domestic Abuse Referral Team (DART) provides a thorough multi agency response to incidents of domestic violence.
- The Multi Agency Risk Assessment Conference (MARAC) and the Multi Agency Pregnant Liaison Group (MAPLG) provide effective multi agency support.
- Arrangements to protect children who are at risk of, or subject to, Child Sexual Exploitation (CSE) and/ or going missing are co-ordinated and satisfactory, they are subject to ongoing robust monitoring.
- Monitoring of Private Fostering arrangements is good and the statutory requirements are met.

1 Children who need help and protection continued

Identifying areas for improvement:

- The quality of assessments (including the CAF) can be variable; some lack basic information, the voice of the child is not always evident and some are not regularly updated.
- There are a number of Child in Need cases awaiting allocation to a social worker.
- Children's plans are not always SMART and outcome or child focussed.
- Escalation processes are not always used effectively by partners, particularly when parents do not engage with support. This can lead to drift.
- Issues with capacity in the Council's Independent Reviewing Team means that Independent Reviewing Officers (IROs) are not always able to follow up and challenge progress on recommendations made in conferences between meetings.
- Supervision needs to be more reflective.

Taking action to improve:

We had already planned to introduce our Continuous Assessment (to replace the Initial and Core Assessments) in April 2014. The re-design of this assessment form means that many of the issues identified by Inspectors have already been addressed.

Over the next few months we will look to review the templates for key plans to ensure that they support workers to be SMART and outcome focussed.

We will also set out clear standards with regards to how often plans and assessments should be updated.

We had already commissioned a review of our IT systems in late 2013 and we are now looking to develop a more detailed options appraisal and delivery plan to ensure we have a recording system that is fit for purpose.

We are also working to ensure that capacity in key teams meets the increasing demands in the children's social care system. We are recruiting additional Independent Reviewing Officers and Social Workers.



2 Children looked after and achieving permanence

What are Ofsted looking for?

In this judgement Ofsted are seeking to ensure decisions about children and young people becoming looked after are made using high-quality assessments about the risk of harm or actual harm to them and the likelihood of change in their family. Thresholds are clear and applied appropriately. Children and young people are listened to by social workers who know them well. Adults working with children and young people help them to understand and manage their early childhood experiences, to progress well and achieve educationally, and to influence decisions about their future. They return home with the support they need and when it is safe for them. If this is not possible, they live in stable placements where they are helped to build positive relationships and maintain contact with their family and friends where this remains in their best interests. Care plans are regularly reviewed to ensure that the child or young person's current and developing needs continue to be met. Permanent homes and families are found for children and young people without unnecessary delay. Their needs are met and they live with their brothers and sisters if that is assessed as being in their best interests. They do not experience placement disruption. They develop safe and secure relationships with adults that persist over time. When support is needed, children, young people and families are able to access it for as long as it is needed, throughout their childhood and beyond.

Ofsted have judged that the experiences and progress of children looked after and achieving permanence requires improvement

Verbal feedback from Ofsted identified the following strengths and areas for improvement:

Celebrating our strengths:

- Decisions to accommodate young people are made in their best interests.
- Children and young people at risk of coming into care are offered support.
 Our Edge of Care interventions and Panel enable children to remain at home if it is appropriate and safe for them to do so.
- Good use is made of legal proceedings including pre-proceeding work. This means that parents understand what needs to change and the consequences if changes are not made.
- Agreement about the best plan for a child in care is reached in a timely manner. There are good relationships with the courts and there is always consideration of all options to secure permanence for the child.
- Looked after Children are visited regularly and they are seen alone when necessary.

- Social Workers and other staff with whom Inspectors spoke expressed good understanding of the need to build positive relationships with children and young people; workers know their children well.
- Children know how to access support and how to complain, they have access to independent advocacy.
- Brothers and sisters are placed together wherever possible.
- There is a strong plan in place to recruit more Foster Carers which will provide better choice of carers for our children in care.
- Foster Carers' views are consistently sought; carers are passionate about the young people who lived with them and they had appropriate levels of delegated authority to make day to day decisions for children in their care.
- Stability of placements is generally good and many children live in Good or Outstanding provision which is wellmatched to meet their individual needs.

2 Children looked after and achieving permanence continued

Identifying areas for improvement:

- Educational attainment for looked after children is a mixed picture. The quality of Personal Education Plans is variable and the Virtual School could be strengthened.
- Health assessments and Health Care Plans for looked after children are not always up to date or available on file.

Improvements are required to ensure that we recruit more, local Foster Carers and that they are well supported and trained.

 Placement matching for some children is not as strong as we would like due to capacity issues in the market. Information is not always immediately available to carers to ensure that they are able to meet the needs of the child.

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Taking action to improve:

We had already been working closely with health partners to address issues with medicals and plans for Looked after Children and over the next few months we will continue to drive performance across the partnership.

We will also be looking at how we can strengthen our Virtual School to ensure it is proactive in addressing barriers to learning and attainment for our children in care.

We have been working to improve our fostering and adoption processes to ensure that they are fit for purpose, meet all National Minimum Standards and offer good support to our carers.

We continue to seek caring families with the skills to offer a home to our vulnerable children.

2.1 Adoption performance

What are Ofsted looking for?

In this judgement Ofsted are seeking to ensure suitable adoptive families are identified without delay for all children for whom adoption is in their best interests. The recruitment and assessment arrangements are aligned with national systems and enable potential adopters to consider and to be considered for a wide range of children for whom they may provide a home. Children are able to develop safe and secure relationships with their adoptive family that persist over time. When support is needed, children, young people, families and carers are able to access it for as long as it is needed. throughout their childhood and beyond.

Ofsted have judged that the graded judgment for adoption performance is requires improvement

Verbal feedback from Ofsted identified the following strengths and areas for improvement:

Celebrating our strengths:

- There is a year on year increase in the number of children being adopted.
- Potential adopters spoke of a positive experience.
- The new team of Adoption Placement Advisors are having a very positive impact on family finding. They are ambitious, creative and well thought of by Social Workers and families. There is good use of life story work.
- The new Marketing Strategy is attracting more people to adopt.
- Panel recommendations are robustly considered by the agency decision maker to ensure that every permanent placement is in the child's best interests.
- There are good examples of adoption packages, which are individualised and creative using a range of support services with good support from the Child and Adolescent Mental Health Services (CAMHS).

Identifying areas for improvement:

- In most cases there was evidence of some delay in progressing plans for adoption and family finding wasn't always commenced quickly enough. Delays are not always challenged by the child's Independent Reviewing Officer.
- Permanency is considered at the second review although adoption wasn't always considered.
- When families request post-adoption support they do not always receive a package as quickly as we would like.
- There is no clear evidence of parallel/concurrent planning to ensure that children can be progressed as quickly as possible through the system.

Taking action to improve:

We are planning to review policies and procedures to ensure that our social care workforce understands and puts into practice concurrent planning where appropriate. Inspectors commented positively on our Adoption Placements Advisors which are new posts designed to improve the timeliness of family finding. We are already seeing some improvements here and we will continue to monitor this over the coming months.

We will be looking more closely at post-adoption support to ensure that families receive a good package of support and receive a timely response to specific requests for help.

2.2 Experiences and progress of care leavers

What are Ofsted looking for?

In this judgement Ofsted are seeking to ensure that young people leaving care and preparing to leave care receive support and help to assist them in making a successful transition to adulthood. Plans for them to leave care are effective and address their individual needs. They are safe and feel safe, particularly where they live. Young people acquire the necessary level of skill and emotional resilience to successfully move towards independence. They are able to successfully access education, employment, training and safe housing. They enjoy stable and enduring relationships with staff and carers who meet their needs.

Ofsted have judged that the experiences and progress of care leavers requires improvement Verbal feedback from Ofsted identified the following strengths and areas for improvement:

Celebrating our strengths:

- Young people benefit from warm, nurturing relationships with key staff and managers.
- Staff have a positive impact on the children they are working with.
- Pathways Plans are up to date and young people are involved in developing their own plans.
- There are high numbers of Care Leavers in suitable accommodation. The authority is performing very well compared with statistical neighbours and the close working relationship with Nottingham City Homes is a strength.
- Young people say that they feel safe where they live.
- Young unaccompanied asylum seekers receive appropriate and timely support to access accommodation.
- There is good support with the transition to independence and around basic skills (cooking, budgeting etc).
- The standard of statutory visits is met and in some cases exceeded.

- Young people are given good advice about their rights.
- Health needs are addressed and young people understand how to access primary health care. Care Leavers readily have access to therapeutic services.
- Participation is a key strength. At the Children in Care Council individual opinions are valued and young people feel it is a safe environment. Care Leavers have good opportunities to contribute to service design and their contribution is valued.
- The Apprenticeship Programme for Care Leavers is a positive initiative.

Identifying areas for improvement:

- Pathway Plans were too lengthy and lacked rigorous analysis. Some young people reported that they felt their Pathway Plan had no impact on their life.
- Young people are not routinely provided with, nor know how to access their full health history.
- Too many Care Leavers are not in Education, Employment or Training.

Taking action to improve:

We are already working with Care Leavers to re-design the Pathway Plan template to ensure that it is concise and fit for purpose.

We will work closely with health partners to ensure that every child leaving care receives a 'health passport' with details of their full health history. The current economic climate means all young people are finding it hard to gain employment, or perhaps feel that they cannot afford to go to University. The partnership are working hard to ensure that Care Leavers have opportunities to access further education or find work.

We will keep a sharp focus on this issue through our Corporate Parenting Board.



3 Leadership, management and governance

What are Ofsted looking for?

In this judgement Ofsted are seeking to ensure that leadership, management and governance arrangements comply with statutory guidance and together establish an effective strategy and good-quality services for children, young people and their families.

There is a clear and up-to-date strategy for commissioning and developing services delivered by a suitably qualified and experienced workforce that meets the needs of local children and young people and families.

The Director of Children's Services (DCS), the lead elected member and the senior management team have a comprehensive knowledge about what is happening at the 'front line' to enable them to discharge their responsibilities effectively. They know and understand the difference that help, care and protection are making. They oversee systematic performance management and monitoring that demonstrate rigorous and timely action in response to service deficiencies or new demands.

The local authority works with partners to deliver early help, protect children and young people, improve educational attainment and narrow the gap for the children looked after and care leavers.

It acts as a strong and effective corporate parent for children looked after and those leaving or who have left care

Leaders, both professional and political, drive continuous improvement so that the local authority is consistently effective as the lead agency for the protection and care of children and young people and as a corporate parent. Partnerships are supported by transparent and rigorous governance between the local authority and key statutory, private and voluntary organisations. Shared priorities are clear and resourced.

There is effective engagement with the relevant local partnerships including the Health and Wellbeing Board.

The DCS works closely with the LSCB chair and the chief executive holds the LSCB chair to account for the effectiveness of the LSCB.

Ofsted have judged that leadership, management and governance requires improvement

3 Leadership, management and governance continued

Verbal feedback from Ofsted identified the following strengths and areas for improvement:

Celebrating our strengths:

- Managers have lots of energy, commitment and ambition but there is not always clear prioritisation.
- Senior managers have a good understanding of the need for future development.
- The local authority has continued to invest in early intervention and prevention and there is evidence of the positive impact that this is having due to the rising attendance levels in primary schools.
- There is a well developed strategic framework; the architecture of governance is in evidence and there are good links between groups.
- Strategic priorities are clear and linked to Performance Indicators; there is a named manager for each of these.
- The Lead Member is highly visible and actively involved with services, he also has regular interaction with young people.
- There are good and effective partnerships especially with Health, Housing, the Police and local business. This is evident in the work around domestic violence and CAMHS.
- The local authority knows its communities well.

- The Corporate Parenting Board has helped with a variety of projects and schemes.
- The Chief Executive has good oversight of the Local Safeguarding Children Board and meets regularly with the Chair and Director of Children's Services (DCS); there is two-way challenge.
- There is an extensive dataset which is used to hold managers to account and to inform the work of the commissioning team.
- There is a committed workforce despite the challenges and difficulties they face.
- Staff noted that they feel well supported.

Identifying areas for improvement:

- Senior managers need to prioritise more effectively, for example ensuring Service Plans are SMART.
- There is a lack of clear strategy for Looked after Children's education.
- Delivery and performance monitoring needs to focus on evidencing outcomes for children, young people and families.
- Capacity is an issue for managers and caseloads are too high in some services. This means that the quality of supervision is variable with little time for reflection.
- The IT system causes a variety of issues for frontline workers.

Taking action to improve:

In order to respond to this feedback we will be looking at developing a clear, prioritised improvement plan that will take us to Good over the next three years.

This will feed into Service and Business Plans as well as team objectives. We will be looking to develop a clear vision for our Looked after Children's education and will be reviewing the role and remit of our Virtual School to help us deliver on this agenda.

We are already looking at where investment in additional workers is needed to manage increasing demands.



Lage 75

4 Review of the effectiveness of the Local Safeguarding Children Board



What are Ofsted looking for?

In this judgement Ofsted are seeking to ensure that the Local Safeguarding Children Board (LSCB) complies with its statutory responsibilities in accordance with the Children Act 2004 and the Local Safeguarding Children Board Regulations 2006. The LSCB is able to provide evidence that it coordinates the work of statutory partners in helping, protecting and caring for children in its local area and there are mechanisms in place to monitor the effectiveness of those local arrangements. Multi-agency training in the protection and care of children is effective and evaluated regularly for impact on management and practice. The LSCB checks that policies and procedures in respect of thresholds for intervention are understood and operate effectively and identifies where there are areas for improvement. Challenge of practice between partners and casework auditing are rigorous and used to identify where improvements can be made in frontline performance and management oversight. Serious case reviews, management reviews and reviews of child deaths are used by the local authority and partners as opportunities for learning and feedback that drive improvement. The LSCB provides robust and rigorous evaluation and analysis of local performance that influence and inform the planning and delivery of high-quality services.

Ofsted have judged that the effectiveness of the Local Safeguarding Children Board (LSCB) requires improvement Verbal feedback from Ofsted identified the following strengths and areas for improvement:

Celebrating our strengths:

- There is good compliance against the key statutory guidance 'Working Together'.
- Attendance of the Board is good with the majority of members attending all meetings.
- The quarterly Safeguarding Assurance
 Forum effectively ensures strategic priorities
 are aligned. The Forum is effective
 in unblocking barriers and it ensures
 duplication of activity is avoided.
- The Independent Chair is held in high regard by partners. His roles with other local and national activity benefits the Board in Nottingham and it benefits children in Nottingham through shared experiences.
- There is good challenge to the Health and Wellbeing Board and Children's Partnership Board.
- The LSCB gives high priority to early help in planning.
- Sub groups have a good focus; there is increasing importance placed on Looked after Children and Missing Education.

- Sub groups are chaired by partners, which demonstrates their importance. The Chair provides good challenge and seeks accountability in terms of action plans.
- The LSCB has recently developed a strong local learning and improvement framework to gather and disseminate learning from Serious Case Reviews (SCRs) and Serious Incident Learning Processes (SILPs).
- Learning also informs core training and specific briefings around neglect and other key issues in the City.
- Multi agency audits are themed and specifically targeted; each audit is scoped in its own right to give effective monitoring.
- Section 11 audits are done every other year; year on year the LSCB has seen greater compliance across all agencies.
- Policies and procedures are in place and additional practice guidance is cascaded to staff. The move to the Tri-X system will bring a more rigorous approach to the updating and dissemination of policies.
- There is an increasing level of engagement between the LSCB and Youth Council.

4 Review of the effectiveness of the Local Safeguarding Children Board continued

Identifying areas for improvement:

- An ongoing refresh of the Threshold document is taking place across the partnership, but Children in Need still are not clearly identified as a cohort in the Family Support Pathway.
- Evaluation of the impact of training on individual practice is underdeveloped. Partners need to deliver frameworks in their own agencies that build learning and impact from training into their practice. This will assist in monitoring effectiveness.

The 2012/13 LSCB Annual Report is not sufficiently analytical and is too descriptive. It does not look at service weakness, causes of weakness or action to address weakness.

- There is an escalation policy but this does not appear to be used by partners.
- The Performance Framework is developing but the views of children need to be better incorporated.
- Reporting between the Independent Chair and the Council's Overview and Scrutiny function could be further strengthened to ensure they are clear as to what the issues are.

Taking action to improve:

The Nottingham City Safeguarding Children Board (NCSCB) has already worked hard to ensure its Annual Report for 2013/14 is more analytical.

The Board have requested that the refresh of the Family Support Strategy and Pathway more clearly identify Children in Need as a key cohort that requires safeguarding, so this has been incorporated into recent versions.

Discussions will take place at the Board and Operational Management Group in the coming months to ensure that recommendations made about the evaluation of training, the use of the escalation policy and required developments to the Performance Framework are incorporated into the Board's plans for 2014/15.



¹ The Children Act 2004; www.legislation.gov.uk/ukpga/2004/31/contents

² The Local Safeguarding Children Boards Regulations 2006; www.legislation.gov.uk/uksi/2006/90/regulation/5/made



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Title of paper:	CYPP Performance Review (2013/14)			
Report to:	Children's Partnership Board			
Date:	2 nd July 2014			
Relevant Director:	Alison Michalska Wards affected: All			
Contact Officer(s)	Colin Monckton (Head of Service – Commissioning & Insight)		
and contact details:	t. 0115 (87) 64832			
Other officers who	Andy Shone (Performance Review Officer – Commissioning	& Insight)		
have provided input:	t. 0115 (87) 64843			
Relevant Children and	d Young People's Plan (CYPP) objectives(s):			
	 With a key focus on ensuring that there are high standards of 	Yes		
	gencies and that the Partnership takes a pro-active approach to			
the elimination of domest				
	ey focus on increasing the proportion of children and young people	Yes		
who have a healthy weigh				
Reducing substance misuse – Partnership work to lessen the impact on children of parental drug and alcohol misuse and to reduce drug and alcohol misuse amongst children				
and young people.	misuse and to reduce drug and alcohol misuse amongst children			
	Raising attainment – Raising the attainment levels and increasing engagement in Yes			
employment, education a		163		
Improving attendance – Improving rates of attendance at both Primary and Secondary as Yes				
a key foundation of improving outcomes.				
Summary of issues (in	ncluding benefits to customers/service users):			
The review identifies key headlines, challenges and an overview of all performance measures				
linked to the CYPP strategic and operational objectives for the 2013/14 reporting year				
		_		
Recommendations:				
1 Children's Partne	ership Board to note performance			
	•			

1. BACKGROUND AND PROPOSALS

(Explanatory detail and background to the recommendations)

The review provides an update of the CYPP performance framework.

2. RISKS

(Risk to the CYPP, risk involved in undertaking the activity and risk involved in not undertaking the activity)

None

3. FINANCIAL IMPLICATIONS

None

4. LEGAL IMPLICATIONS

None

5. CLIENT GROUP

(Groups of children, young people or carers who are being discussed in the report)

All relevant CYP within the City

6. IMPACT ON EQUALITIES ISSUES

N/A

7. OUTCOMES AND PRIORITIES AFFECTED

ΑII

8. CONTACT DETAILS

Andy Shone Performance Review Officer Quality & Commissioning Commissioning & Insight Loxley House

Andy.shone@nottinghamcity.gov.uk 0115 87 64843

Children's Partnership Board 2013/14 Review

2 July 2014



2013/14

- 1. Demand for Social Care services remains high
- 2. Family Support Strategy and Pathway continues to be implemented
- 3. Teenage Pregnancy rates continue to fall and ahead of 2020 target
- 4. Notable reductions in youth related crime
- Educational attainment continues to rise across key stages
- 6. NEET levels slightly higher than previous year

2013/14 Challenges

- High demand for Social Care and Safeguarding services / High numbers of Children in Care / Timeliness of CiC being placed for adoption / New inspection framework
- 2. Above average proportion of CYP with unhealthy weight
- 3. Partnership buy-in to CAF
- 4. School absence figures for primary and secondary ranked amongst the worst in the country
- 5. The Local Authority's ability to influence schools under the current educational system much diminished





Report Reference: CPB0314

Children's Partnership Board 2013/14 Performance Report

Report Produced for: CPB

Period Reported to: 31st March 2014

Report Produced by: Commissioning & Insight

Author: Andy Shone (ext. 64843)



Guide to the report

The report is ordered by each CYPP Strategic Objective (1 to 5) then each Operational Objective (1 to 15). We continue to identify new and meaningful indicators to report

Within each Objective, performance indicators are ordered by reference number and identifies who the responsible officer/agency is.

Where applicable, the report shows data against performance indicators starting with the 2011/12 outturn figure through to Q4 2013/14.

The latest available data are shown together with the previous two year's outturn figures.

	No. PIs	No. Better Than / Equal to Previous Available Year	Percentage Better/Equal to Previous Available Year	No. With Targets	No. Target Met	Percentage Target Met
Safeguarding and Early Intervention Young people and families will benefit from early and effective support and protection to empower them to overcome difficulties	24	4	16.7%	12	5	41.7%
Stronger Safeguarding Improving safeguarding across all agencies, to keep children and young people safe from physical, emotional and sexual abuse, neglect, and accidental injury	18	2	11.1%	9	3	33.3%
Shifting resources to early intervention and prevention Achieving a growing shift of mainstream resources towards early intervention and prevention to ensure that families in challenging circumstances are identified early	1	1	100%	1	1	100%
Reducing infant mortality	5	1	20.0%	2	1	50.0%
Strong families Young people and families will benefit from early and effective support and protection to empower them to overcome difficulties	25	16	64.0%	15	7	46.7%
Improving parenting support Improving support for parents and carers, particularly younger ones	0	0	N/A	0	0	N/A
 Supporting children with learning difficulties and disabilities Providing better co-ordinated care for children and young people with learning difficulties and disabilities, emotional and behavioural difficulties 	9	9	100%	6	5	83.3%
Improving corporate parenting Improving the quality of life and outcomes for children living in care and preparing for independent living	16	7	43.8%	9	2	22.2%
3. Healthy and positive children and young people Children and young people will be healthier, fitter, more emotionally resilient and better able to make mature decisions	30	24	80.0%	11	8	72.7%
Promoting healthy living Tackling childhood obesity, improving diets, improving oral health, cutting smoking rates	6	3	50.0%	3	2	66.7%
Reducing teenage conceptions Reducing the rate of teenage conceptions	4	3	75.0%	3	3	100%
Reducing substance misuse Reducing substance misuse and its impact on children and young people	5	5	100%	0	0	N/A
Strengthening positive behaviour Diverting children and young people from anti-social and offending behaviour (including homophobic and other forms of bullying) and promoting socially responsible behaviour)	15	13	86.7%	5	3	60.0%
4. Achievement All children and young people will leave school with the best skills and qualifications they can achieve and will be ready for work or further learning	27	14	51.9%	7	2	28.6%
Engaging learners better Improving school attendance and improving engagement and progression from age 16 in education, emplyoment and training	8	5	62.5%	4	1	25.0%
Improving attainment Improving educational attainment and skills	11	3	27.3%	3	1	33.3%
Closing the gap Closing the gap in attainment and skills between disadvantaged groups and their peers	4	3	75.0%	0	0	N/A
14. 14-19 reform Preparing for significant changes for this age group, with a new 14-19 strategy and the raising of school leaving age	4	3	75.0%	0	0	N/A
5. Economic well-being Child poverty will be significantly reduced	5	4	80.0%	2	1	50.0%
15. Tackling child poverty Tackling worklessness and supporting adults to gain Level 2 skills or higher so they are able to progress in work and earn more	5	4	80.0%	2	1	50.0%
Overall	111	62	55.9%	47	23	48.9%

Description	Good Performance	Outturn 2011/12	Outturn 2012/13	Q1 2013/14	Q2 2013/14	Q3 2013/14	Q4 2013/14	Target 2013/14	Better than / Equal to Previous Year	Target Met / On Target
1. Strategic Objective Young people and f		·			support	and prot	ection to	o empowe	er them to	
overcome difficultie					• •	•		•		
1. Operational Objectiv	re - Stronger Safegu	arding								
Improving safeguardin neglect, and accidenta	•	es, to keep	children a	and young	people s	afe from p	hysical, e	motional a	and sexual a	buse,
NI 032 - Repeat incidents of domestic violence (MARAC) (Crime & Drugs Partnership)	Lower percentages	18.3%	13.2%	16.1%	17.3%	11.9%	21.6%	~	×	~
CIN-8 - Initial assessments for children's social care carried out within 10 working days of referral (Tracey Nurse)	Higher percentages	95.9%	91.0%	85.4%	84.0%	76.7%	70.3%	80.0%	×	×
CIN-11 - % of Core Assessments in Timescale (35 days) (Tracy Nurse)	Higher percentages	~	94.0%	90.5%	89.2%	87.6%	85.0%	To monitor and review	×	~
CP-8 - Child protection plans lasting 2 years or more (Helen Blackman)	Lower percentages	7.7%	4.9%	5.4%	4.9%	3.4%	2.8%	6.5%	✓	✓
CP-7 - The percentage of children becoming the subject of Child Protection Plan for a second or subsequent time within two years of the previous plans ending (Helen Blackman)	Lower percentages	~	~	6.5%	8.8%	7.5%	7.8%	8.0%	~	√
CP-10 - Child protection cases which were reviewed within required timescales (Helen Blackman)	Higher percentages	100%	99.4%	99.4%	98.8%	98.0%	96.0%	97.0%	×	×
	Not too high or low percentages	65.6%	77.4%	81.1%	86.9%	90.1%	91.4%	To monitor and review	✓	~
CIN-13 - Number of Section 47 Enquiries	~	806	988	258	417	695	1119	850	~	~
(per 10,000 per annum) (Tracey Nurse)	Lower numbers	(129)	(158)	(164)	(132)	(165)	(178)	(135)	×	×
CP-4 - Number of children subject to a	Lower numbers	296	440	428	398	456	479	400	~	~
Child Protection Plan (per 10,000) (Helen Blackman)	(Per 10,000)	(47)	(70)	(68)	(63)	(72)	(76)	(64)	×	×
CIN-2 - Number of Referrals	Lower numbers	5318	4261	1072	2291	3577	5007	4729	×	✓
(per 10,000) (Tracey Nurse)	(Per 10,000)	(851)	(682)	(681)	(727)	(757)	(795)	(750)	×	×
CIN-4 - The percentage of Referrals that are made within 12 months of a child previously being discharged from Children's Social Care (Tracey Nurse)	Lower percentages	~	~	11.3%	16.1%	17.8%	19.1%	15.0%	~	×
All current Child Protection Activities - (No. of offenders where a child who is living with/has contact with the offender is subject to a Child Protection Plan) (Probation)	Higher numbers	136	131	144	109	113	117	~	×	~
All current Risk to Children Activities - (No. of offenders who present a current risk to children.) (Probation)	Higher numbers	482	439	406	359	376	348	~	×	~
Number of Families with Children in Temporary Accommodation (Housing)	Lower numbers	53	60	52	56	62	66	~	×	~
Number of Children in Temporary Accommodation (Housing)	Lower numbers	107	85	83	96	89	109	~	×	~
2. Operational Objectiv Achieving a growing s circumstances are idea	hift of mainstream r	•		•		l preventio	on to ensu	ure that far	milies in cha	llenging
Number of CAFs initiated (per 10,000)	Higher numbers (cumulative totals)	1071	801	222	392	626	987	To better the previous	✓	✓
(Viv McCrossen)			 		 	t	 	year's outturn	1	1

Description	Good Performance	Outturn 2011/12	Outturn 2012/13	Q1 2013/14	Q2 2013/14	Q3 2013/14	Q4 2013/14	Target 2013/14	Better than / Equal to Previous Year	Target Met / On Target
3. Operational Objective	ve - Reducing infant	mortality								
NI 053a - Percentage of infants being breastfed at 6-8 weeks (breastfeeding prevalence) (Health - Deborah Hooton)	Higher percentages	46.2%	45.5%	~	~	~	~	43.0%	×	√
NI 053b - Percentage of infants for whom breastfeeding status is recorded (breastfeeding coverage) (Health - Deborah Hooton)	Higher percentages	99.4%	٠	~	~	٠	~	~	~	~
NI 126 - Early access for women to maternity services (Health - Deborah Hooton)	Higher percentages	88.5%	~	88.0%	89.4%	~	~	90.0%	✓	×
Infant mortality per 1000 live births (Health)	Lower numbers (3 year average)	5.6 (08-10)	~	~	Available May 2014	~	~	~	~	~
Low birth weight (< 2500 grams) (Health)	Lower percentages	9.1% (2010)	~	~	Available May 2015	~	~	~	~	~

2. Strategic Objective - Strong families

Young people and families will benefit from early and effective support and protection to empower them to overcome difficulties

4. Operational Objective - Improving parenting support Improving support for parents and carers, particularly younger ones

5. Operational Objective - Supporting children with learning difficulties and disabilities Providing better co-ordinated care for children and young people with learning difficulties and disabilities, emotional and behavioural difficulties

	1	1								
NI 103a - Special Educational Needs - statements issued within 26 weeks: Percentage of final statements of special education need issued within 26 weeks excluding exception cases as a proportion of all such statements issued in the year (Mirth Parker)	Higher percentages	100%	100%	100%	100%	100%	100%	94.0%	✓	✓
NI 103b - Special Educational Needs – statements issued within 26 weeks: Percentage of final statements of special education need issued within 26 weeks as a proportion of all such statements issued in the year (Mirth Parker)	Higher percentages	100%	100%	100%	100%	100%	100%	77.0%		✓
CS141a - The percentage of Key Stage 4 pupils who have access to full time alternative education provision (Yr 10 =24 Hrs+; Yr 11 = 25 Hrs+) (Mirth Parker)	Higher percentages	98.0%	87.0%	80.0%	88.0%	95.0%	93.0%	100%	√	×
CS141b - The percentage of Key Stage 3 pupils who have access to full time alternative education provision (KS3 = 24 Hrs+) (Mirth Parker)	Higher percentages	100%	100%	100%	100%	100%	100%	100%	✓	✓
CS141c - The percentage of Key Stage 2 pupils who have access to full time alternative education provision (KS2 =23.5 Hrs+) (Mirth Parker)	Higher percentages	100%	100%	100%	100%	100%	100%	100%	\	✓
Number of Direct Payments (Disabled Children) (Viv McCrossen)	Higher numbers (cumulative totals)	144	163	156	172	188	199	~	✓	~
Initial Assessments to Disabled Children's teams (Viv McCrossen)	Higher percentages	94.1%	80.7%	76.0%	80.6%	81.4%	82.5%	~	√	~
Core Assessments to Disabled Children's teams (Viv McCrossen)	Higher percentages	96.1%	81.9%	85.2%	91.3%	94.4%	93.4%	~	✓	~
Number of Referrals to MALT CAMHS (Viv McCrossen)	Higher numbers (cumulative totals)	1372	1361	408	783	1133	1540	Higher than previous year	✓	✓

6. Operational Objective - Improving corporate parenting Improving the quality of life and outcomes for children living in care and preparing for independent living

						•				
CC-8 - Stability of placements of LAC: number of moves (Rolling 12 months) (Joy Chambers)	Higher percentages	11.5%	11.2%	12.8%	14.7%	12.8%	12.9%	10.0%	✓	✓
CC-9 - Stability of placements of LAC: length of placement (Joy Chambers)	Higher percentages	73.1%	68.0%	65.3%	62.8%	65.5%	63.2%	66.0%	×	×
CC-10 - The percentage of CiC reviewed within the appropriate timescale (Helen Blackman)	Higher percentages	~	~	97.9%	98.1%	97.4%	97.6%	97.0%	~	√

Description	Good Performance	Outturn 2011/12	Outturn 2012/13	Q1 2013/14	Q2 2013/14	Q3 2013/14	Q4 2013/14	Target 2013/14	Better than / Equal to Previous Year	Target Met / On Target
NI 100 - Children in care reaching level 4 in Maths at KS2 (Mirth Parker)	Higher percentages	50.0%	45.0%	~	~	58.0%	~	~	✓	~
NI 101 - Children in care achieving 5 A*-C GCSEs (or equivalent) at KS4 (including English and Maths) (Mirth Parker)	Higher percentages	7.1%	0.0%	~	~	15.6%	~	~	✓	~
CL-1 - The percentage of care leavers in suitable accommodation at 19 years (Helen Blackman)	Higher percentages	~	~	66.7%	66.7%	86.0%	89.6%	90.0%	~	×
CL-4 - The percentage of care leavers in employment, education or training at 19 years (Helen Blackman)	Higher percentages	~	~	25.0%	25.0%	35.1%	45.5%	55.0%	~	x
CC-1 - Number of looked after children	Lower numbers	541	561	587	578	580	584	524	~	~
(per 10,000) (Helen Blackman)	(Per 10,000)	(87)	(89)	(93)	(92)	(92)	(93)	(83)	×	×
CC-25 - Percentage of Looked After Children with a completed Personal Education Plan (Helen Blackman)	Higher percentages	98.0%	92.0%	95.0%	95.0%	89.0%	93.0%	95.0%	✓	×
CC-12 - The percentage of CiC with an up-to-date health assessment (Helen Blackman)	Higher percentages	77.6%	79.6%	71.5%	71.0%	67.3%	71.8%	91.0%	×	x
CC-13 - The percentage of CiC with up-to-date dental checks (Helen Blackman)	Higher percentages	82.7%	82.7%	81.7%	73.1%	70.7%	82.5%	90.0%	×	×
Percentage of LAC NEET (Michelle Wright)	Lower percentages	25.3%	11.7%	18.5%	22.2%	24.7%	23.5%	~	×	~
Percentage of LAC Not Known (Michelle Wright)	Lower percentages	7.2%	4.6%	1.8%	6.5%	2.1%	1.1%	~	✓	~
Percentage of Care Leavers NEET (Michelle Wright)	Lower percentages	27.8%	43.8%	50.9%	43.4%	41.5%	42.4%	~	✓	~
Percentage of Care Leavers Not Known (Michelle Wright) 3. Strategic Objective	Lower percentages	10.6%	8.1%	3.0%	6.7%	4.3%	1.0%	~	✓	~

3. Strategic Objective - Healthy and positive children and young people Children and young people will be healthier, fitter, more emotionally resilient and better able to make mature decisions

7. Operational Objective - Promoting healthy living Tackling childhood obesity, improving diets, improving oral health, cutting smoking rates

NI 055a - Obesity among primary school age children in Reception Year (% of children with height and weight recorded who are obese) (Health - Sarah Diggle)	Lower percentages	10.9%	10.9%	~	~	~	~	11.8%	~	~
NI 055b - Obesity among primary school age children in <u>Reception</u> <u>Year</u> (% of children with height and weight recorded) (Health - Sarah Diggle)	Higher percentages	90.9%	90.0%	~	~	~	~	88.0%	~	~
NI 056a - Obesity among primary school age children in <u>Year 6</u> (% of children with height and weight recorded who are obese) (Health - Sarah Diggle)	Lower percentages	22.0%	22.9%	~	22.6%	~	~	19.5%	✓	×
NI 056b - Obesity among primary school age children in <u>Year 6</u> (% of children with height and weight recorded) (Health - Sarah Diggle)	Higher percentages	92.7%	91.70%	~	~	~	~	88.0%	~	~
CS23b - Percentage of schools achieving the Healthy Schools Status (Chris Wallbanks)	Higher percentages	84.0%	85.0%	85.0%	86.0%	86.0%	86.0%	85.0%	✓	✓
CS23c - Percentage of schools engaged in the Healthy Schools 'Health & Wellbeing Improvement' model (Chris Wallbanks)	Higher percentages	41.3%	52.0%	~	54.0%	54.0%	54.0%	52.0%	✓	✓
school age children in Year 6 (% of children with height and weight recorded who are obese) (Health - Sarah Diggle) NI 056b - Obesity among primary school age children in Year 6 (% of children with height and weight recorded) (Health - Sarah Diggle) CS23b - Percentage of schools achieving the Healthy Schools Status (Chris Wallbanks) CS23c - Percentage of schools engaged in the Healthy Schools 'Health & Wellbeing Improvement' model	Higher percentages Higher percentages Higher percentages	92.7%	91.70% 85.0%	~ 85.0%	86.0%			88.0% 85.0%	~	×

8. Operational Objective - Reducing teenage conceptions Reducing the rate of teenage conceptions

NI 112 - Under 18 conception rate (per 1,000) (Chris Wallbanks)	Lower numbers	54.3	49.7	45.5	42.6	42.6	37.6	52.6	✓	✓
Chlamydia diagnosis rate per 100,000 population aged 15-24 years (measured through the Public Health Outcomes Framework) (Ellyn Dryden)	Lower numbers	~	2,813	3,254 Page 43	2,169	~	~	2,300	✓	✓

Description	Good Performance	Outturn 2011/12	Outturn 2012/13	Q1 2013/14	Q2 2013/14	Q3 2013/14	Q4 2013/14	Target 2013/14	Better than / Equal to Previous Year	Target Met / On Target
Percentage of 15-24 year olds testing positive for Chlamydia (Ellyn Dryden)	Lower percentages	7.8%	8.5%	9.7%	9.1%	~	~	~	×	~
Percentage of Nottingham City residents aged 15-24 in contact with Nottingham University Hospitals Contraception & Sexual Health (CASH) services who take up the offer of a Chlamydia screen (Ellyn Dryden)	Higher percentages	~	34.3%	33.9%	33.8%	39.2%	44.0%	44.0%	✓	✓
9. Operational Objective Reducing substance n				ung peopl	le					
Drugs offences committed by under 18's (Police)	Lower numbers (12 month rolling total)	142	129	25	52	76	104	~	✓	~
Number of new presentations to young people's specialist drug and alcohol treatment (CDP)	Higher numbers (cumulative totals)	211	~	~	206	~	~	~	✓	~
Percentage of new alcohol presentations to young people's specialist drug and alcohol treatment (CDP)	Higher percentages	17.2%	13.0%	15.0%	~	~	~	~	✓	~
Percentage of referrals from Children & Family Services (CDP)	Higher percentages	43.0%	14.0%	19.0%	~	~	~	~	✓	~
CSS162 - Percentage of young people leaving treatment in an agreed and planned way (CDP)	Higher percentages	75.0%	76.0%	~	~	~	~	~	✓	~
10. Operational Object Diverting children and and promoting socially	young people from	anti-social		ding beha	nviour (inc	luding ho	mophobic	and othe	r forms of b	ullying)
Rate of proven re-offending by young offenders (Ken Beaumont)	Lower numbers (Comparable frequency of re- offending over 12 months in previous years)	1.00	1.00	0.91	0.88	0.88	0.96	To reduce	✓	✓
Percentage of 10-17 year olds who are sentenced to custody (Ken Beaumont)	Lower percentages	~	8.9%	6.1%	9.6%	6.3%	7.5%	5.0%	✓	×
Increase the number of young people supervised by YOT in full-time education, training or employment (Ken Beaumont)	Higher percentages	71.5%	68.8%	68.6%	63.1%	58.9%	69.5%	90.0%	✓	×
Percentage of <u>School Age</u> young people supervised by the YOT in full-time ETE (relates to NI 045) (Ken Beaumont)	Higher percentages	86.0%	85.7%	81.8%	73.5%	75.0%	77.0%	~	×	~
Percentage of Above School Age young people supervised by the YOT in full-time ETE (relates to NI 045) (Ken Beaumont)	Higher percentages	59.5%	58.6%	58.6%	51.6%	52.5%	65.0%	~	✓	~
NI 111 First time entrants to the Youth Justice System	Lower numbers (Running total quarter on	394	240	82	140	193	238	420	✓	✓
(per 100,000 10-17 year olds) (Ken Beaumont)	quarter)	(1753)	(941)	(321)	(549)	(757)	(929)	(1647)	✓	✓
Burglary offences committed by under 18's (Police)	Lower numbers (12 month rolling total)	224	66	9	24	42	45	~	✓	~
Criminal Damage offences committed by under 18's (Police)	Lower numbers (12 month rolling total)	228	262	42	84	123	163	~	✓	~
Fraud & Forgery offences committed by under 18's (Police)	Lower numbers (12 month rolling total)	7	11	0	0	0	0	~	✓	~
Other offences committed by under 18's (Police)	Lower numbers (12 month rolling total)	38	26	35	68	99	135	~	×	~
Robbery offences committed by under 18's (Police)	Lower numbers (12 month rolling total)	101	59	9	28	40	55	~	✓	~
Sexual offences committed by under 18's (Police)	Lower numbers (12 month rolling total)	24	11	3	7	7	8	~	✓	~
Theft offences committed by under 18's (Police)	Lower numbers (12 month rolling total)	689	451	96	206	306	392	~	✓	~
Violence offences committed by under 18's (Police)	Lower numbers (12 month rolling total)	512	630	78	168	265	354	~	✓	~

4. Strategic Objective - Achievement

All children and young people will leave school with the best skills and qualifications they can achieve and will be ready for work or further learning

Description	Good Performance	Outturn 2011/12	Outturn 2012/13	Q1 2013/14	Q2 2013/14	Q3 2013/14	Q4 2013/14	Target 2013/14	Better than / Equal to Previous Year	Target Met / On Target
11. Operational Object Improving school atter			ment and μ	orogressio	on from ag	ge 16 in ea	lucation, e	emplyome	ent and traini	ing
NI 117 - 16-18 years old City resident young people who are	Lower percentages	5.2%	6.2%	6.8%	5.2%	5.9%	6.5%	~	×	~
NEET (Michelle Wright)	Lower numbers	387	622	697	494	594	683	~	×	~
Percentage/Number of NEET -	Lower percentages	6.6%	5.4%	4.3%	2.5%	2.3%	2.2%	~	✓	~
Not Knowns (Michelle Wright)	Lower numbers	532	615	289	239	200	177	~	✓	~
NI 087 - State Funded Secondary School Persistent Absence rates (including Academies) - 20% Threshold (Mark Andrews)	Lower percentages	6.7%	9.9% (Full Year 11/12)	6.42% (Autumn & Spring 12/13)	6.42% (Autumn & Spring 12/13)	9.5% (Full Year 12/13)	7.17%	8.3%	✓	×
CS 024 - State Funded Secondary School Overall Absence rates (including Academies) (Mark Andrews)	Lower percentages	8.0%	6.91% (Full Year 11/12)	7.15% (3 terms to Autumn 2012)	6.74% (3 terms to Spring 2013)	6.8% (Full year 12/13)	6.7% (3 terms to Autumn 2012)	6.2%	✓	×
CS 025 - Primary school persistent absence rate - 20% Threshold (Mark Andrews)	Lower percentages	4.5%	5.27% (Full Year 11/12)	5.92% (Autumn & Spring 12/13)	5.92% (Autumn & Spring 12/13)	5.2% (Full year 12/13)	4.7%	4.0%	×	×
CS 026 - Primary school overall absence rate (Mark Andrews)	Lower percentages	6.4%	5.0% (Full Year 11/12)	5.34% (3 terms to Autumn 2012)	5.36% (3 terms to Spring 2013)	5.3% (Full year 12/13)	4.8% (3 terms to Autumn 2013)	4.75%	✓	✓
12. Operational Object Improving educational										
Achievement at level 4+ in all of Reading, Writing and Maths at KS2 (Nick Lee)	Higher percentages	~	~	~	72.0%	~	~	~	~	~
NI 075 - Achievement of 5 or more A*-C grades at GCSE or equivalent including English and Maths (Nick Lee)	Higher percentages	46.7%	49.6%	~	~	50.3%	~	53.0%	✓	×
NI 089 - Number of schools judged as requiring special measures (Nick Lee)	Lower numbers	3	1	1	1	8	9	0	×	×
Pupils making expected progress in Reading from KS1 to KS2 (Nick Lee)	Higher percentages	~	~	~	87.0%	~	~	~	~	~
Pupils making expected progress in Writing from KS1 to KS2 (Nick Lee)	Higher percentages	~	~	~	91.0%	~	~	~	~	~
NI 094 - Progression by 2 levels in Maths between KS1 and KS2 (Nick Lee)	Higher percentages	84.0%	85.0%	~	88.0%	~	~	~	√	~
NI 114 - Rate of permanent exclusions from school (per 100 pupils) (Mirth Parker)	Lower percentages	0.02%	0.04% (Autumn term 2012)	0.02% (Spring term 2013)	0.04% (Provisional - (Summer term 2013)	0.06%	0.11%	~	×	~
CS 015 - % of eligible pupils in LA maintained schools who attain at least one qualification at GCSE or equivalent (Nick Lee)	Higher percentages	98.2%	98.7%	~	~	98.5%	~	98.0%	×	✓
Educational settings inspected by Ofsted based on latest inspection	Percentage 'Good or Better'	68.0%	69.0%	70.0%	69.4%	67.7%	69.8%	~	✓	~
reports (Nick Lee)	Percentage 'Requiring Improvement'	27.0%	25.0%	25.0%	23.6%	18.2%	17.7%	~	×	~
13. Operational Object	Percentage 'Inadequate' ive - Closing the gar	4.0%	6.0%	5.0%	6.9%	11.1%	12.5%	~	_ ^	~
Closing the gap in atta			advantage	d groups	and their	peers				
NI 102a - Achievement gap between pupils eligible for free school meals and their peers achieving the expected level at KS2 (Nick Lee)	Lower percentages	12.0%	13.0%	~	13.2%	~	~	~	×	~
NI 102b - Achievement gap between pupils eligible for free school meals and their peers achieving the expected level at KS4 (Nick Lee)	Lower percentages	26.0%	27.4%	~	21.6%	~	~	~	✓	~
NI 104 - The Special Educational Needs (SEN)/non-SEN gap – achieving KS2 English and Maths threshold (Mirth Parker)	Lower percentages	42.0%	45.0%	~	44.9%	~	~	~	✓	~

Description	Good Performance	Outturn 2011/12	Outturn 2012/13	Q1 2013/14	Q2 2013/14	Q3 2013/14	Q4 2013/14	Target 2013/14	Better than / Equal to Previous Year	Target Met / On Target
NI 105 - The Special Educational Needs (SEN)/non-SEN gap – achieving 5 A*-C GCSE inc. English and Maths (Mirth Parker)	Lower percentages	46.6%	47.0%	~	38.9%	~	~	~	✓	~

14. Operational Objective - 14-19 reform

Preparing for significant changes for this age group, with a new 14-19 strategy and the raising of school leaving age

NI 079 - Achievement of a Level 2 qualification by the age of 19 (Development)	Higher percentages	71.7%	74.3%	~	~	75.4%	~	~	✓	~
NI 080 - Achievement of a Level 3 qualification by the age of 19 (Development)	Higher percentages	43.2%	43.3%	~	~	45.8%	~	~	✓	~
NI 081 - Inequality gap in the achievement of a Level 3 qualification by the age of 19 (Attainment figure shown) (Development)	Lower percentages	24.0%	25.0%	~	~	27.0%	~	~	×	~
I/Attainment tiguire chown)	Higher percentages (This measures the % who were on FSM)	57.0%	58.0%	~	~	62.0%	~	~	✓	~

5. Strategic Objective - Economic well-being Child poverty will be significantly reduced

15. Operational Objective - Tackling child poverty

Tackling worklessness and supporting adults to gain Level 2 skills or higher so they are able to progress in work and earn more

NI 151 - Overall employment rate (working age) (Development)	Higher percentages	56.8%	61.3%	59.7%	59.1%	57.8%	58.4%	62.0%	×	×
NI 163 - Working age population qualified to Level 2 or higher (Development)	Higher percentages	61.4%	66.7%	71.6%	~	~	70.7%	72.0%	√	√
18 to 24 year old JSA claimants (Job Centre Plus)	Lower numbers Q4 = Apr 2014	4550	3960	~	3405	~	2915	~	√	~
Lone Parent Income Support claimants (Job Centre Plus)	Lower numbers Q4 = Nov 2013	5215	4970	~	4535	~	4460	~	✓	~
All JSA claimants (Job Centre Plus)	Lower numbers Q4 = Apr 2014	14677	14331	~	12152	~	11308	~	✓	~



Title	of paper:	The refreshed Family Support Pathway			
Repo	ort to:	Children's Partnership Board			
Date	:	2 nd July 2014			
Rele	vant Director:	Candida Brudenell - Strategic Wards affected: All			
		Director of Early Intervention			
Auth	or:	Simon Down as Lead Commissioning Manager, Commissioning &			
		Insight.			
	er officers who	Helen Blackman – Acting Director of Safeguarding			
have	provided input:	Colin Monckton – Head Of Commissioning and Insight			
		Young People's Plan (CYPP) objectives(s):	,		
		With a key focus on ensuring that there are high standards of	Υ		
	safeguarding across all agencies and that the Partnership takes a pro-active approach to				
	the elimination of domestic violence.				
Healthy living – With a key focus on increasing the proportion of children and young people Y who have a healthy weight.					
Reducing substance misuse – Partnership work to lessen the impact on children of Y					
	parental drug and alcohol misuse and to reduce drug and alcohol misuse amongst children				
and young people.					
	Raising attainment – Raising the attainment levels and increasing engagement in Y				
employment, education and training.					
	Improving attendance – Improving rates of attendance at both Primary and Secondary as Y				
a key foundation of improving outcomes.					
Sum	mary of issues (in	icluding benefits to customers/service users):			
This report seeks approval of the refreshed Family Support Pathway which will ensure that recent					
legislative and policy updates, including Munro and Working Together 2013, are reflected in					
practice in Nottingham's children's workforce to best meet the needs of the city's children and					
young people.					
	ommendations:				
1	That the board approve the refreshed Family Support Pathway as partnership policy,				
	replacing all previous versions of the said document.				
2	That the board ap	at the board approves the publicity plan for the refreshed Family Support Pathway			

1. BACKGROUND AND PROPOSALS

- 1.1 In March 2014 the Children's Partnership Board (CPB) approved plans to refresh the Family Support Pathway to incorporate both local changes (such as Children and Families Direct and signs of safety) and national changes (such as the Munro report and Working Together 2013).
- 1.2 Since then, the document has been considered by key stakeholders across NCC and beyond through both the CPB and the Safeguarding Board to produce a Family Support Pathway (appendix 1) that reflects the changing national and local policy/feedback and will continue to ensure that children and families are appropriately supported to achieve positive outcomes in Nottingham.

- 1.3 A broader consultation has not been undertaken so as to avoid confusion between forthcoming consultation for the wider rewrite of the Children and Young People's Plan 2015-2020 (including the FSP and Family Support Strategy).
- 1.4 In addition to the anticipated changes, the FSP has been strengthened in terms of its definition of and reference to "Children in Need" so as to ensure that Nottingham City Council meets its statutory requirements with regards to this legislatively defined group.
- 1.5 The new FSP will be distributed electronically through; direct email, a Children and Families newsletter, NCVS' bulletin and via the website. It will also be expected that board members will verbally promote the new FSP as appropriate.

2. RISKS

- 2.1 The refreshed FSP mitigates the risks of having outdated partnership guidance and helps to ensure that children and young people are appropriately safeguarded.
- 2.2 There is a risk that practitioners will continue to make use of the outdated FSP rather than the new one. This risk is heightened by the lack of a glossy hard copy being produced. This risk will be mitigated through a clear dissemination plan (as per 1.5 above) which will include a request to destroy any remaining copies of the previous iteration.

3. FINANCIAL IMPLICATIONS

3.1 Because the new FSP will be distributed electronically no financial resources are required for its dissemination. There are therefore, no financial implications

4. LEGAL IMPLICATIONS

4.1 Working Together to Safeguard Children 2013 is issued under section 7 of the Local Authority Social Services Act 1970 and sections 11(4) and 16 of the Children Act 2004 which all state that the local authority must act/have regard to any guidance given to them by the Secretary of State. The new FSP meets our statutory obligation to have a "threshold" document and the redeveloped CYPP will then meet this requirement thereafter.

5. CLIENT GROUP

5.1 The FSP is entirely cross cutting and as such can be considered to effect every single child and young person in the city.

6. IMPACT ON EQUALITIES ISSUES

6.1 The changes to the FSP are applicable to all children and young people in the city and are not expected to have any specific equalities implications.

7. OUTCOMES AND PRIORITIES AFFECTED

7.1 This proposal sits across all CYPP objectives and priorities

8. CONTACT DETAILS

8.1 Colin Monckton – Head Of Commissioning and Insight, NCC, 0115 8764832, colin.monckton@nottinghamcity.gov.uk.

Family Support Pathway

Earlier support, stronger families

Threshold Document - Guidance for Practitioners





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Introduction to the Family Support Pathway

In Nottingham, the Children's Partnership is committed to shifting its resources towards greater prevention and early intervention. This represents our early help offer which is available to all children and young people in Nottingham. Our aim is to reduce the demand for specialist services by preventing children growing up to experience behavioural problems, domestic abuse, mental illness, substance misuse, teenage parenthood, low educational attainment, crime and antisocial behaviour.

"Early help" was first defined by the Munro review and Nottingham has adopted this definition as its own. Munro writes of early help being delivered both before and after needs have emerged. This incorporates the "Working Together 2013" definition of early help which considers early help being delivered only once needs have been identified through an early help assessment (this is primarily the Common Assessment Framework (CAF) in Nottingham).

We will identify children and families with high risk factors and low protective factors and provide the appropriate support at the earliest opportunity with an effective and more personalised service. Support to children and families will be delivered by a range of statutory and non-statutory organisations, including the voluntary sector who will continue to deliver a broad range of family support services to the local community.

The purpose of the Family Support Pathway is to ensure children and families receive the right help at the right time. It highlights the level of support that may be needed by children and families from universal, additional, extensive to protection. The Pathway also highlights the need for good quality assessment processes and evidence based interventions to meet the needs of the whole family. The CAF is integral to the effective delivery of the Family Support Pathway, and will ensure that the needs of children and families are assessed and identified earlier and that coordinated multi agency action plans are produced and implemented when needed.

The Family Support Pathway is a practitioner focussed document that seeks to be accessible to the whole of the children's workforce. Further, more detailed, guidance from a safeguarding perspective is available in the Nottinghamshire and Nottingham City Safeguarding Children Boards' Safeguarding Children Procedures which are available on line.

The Family Support Pathway supports the implementation of Nottingham Children's Partnership Family Support Strategy, will work within the developing operating model and ensures fit with national policy and guidance (Children and Families Act 2013, Munro review of child protection, Working Together 2013). It supports strengths based case working (underpinned by the Signs of Safety approach and tool) and incorporates the CAF Guidance and the Access to Social Care Protocols/Thresholds so that practitioners within the Children's Partnership can help those in need of support access services in a more consistent, inclusive and accessible way. There will be no 'closed door' to those in need of support as all members of the workforce have a shared responsibility in delivering timely, effective and seamless services in order to improve outcomes for our children and families in Nottingham.

Thresholds / Levels of support

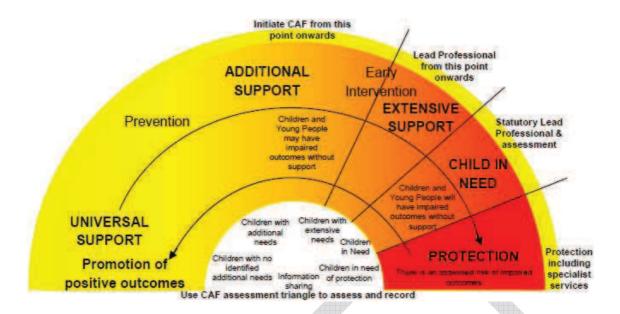
Nottingham City offers a wide range of support services enabling the needs of most children and young people to be met within universal services which by their very definition are universally accessible to all children and young people (i.e. there is no threshold). Where it is evident that a child's needs cannot be met within universal provision then a CAF (early help assessment) should be implemented to ensure that the additional support is best targeted/co-ordinated to meet the needs of the child or young person. Should the concerned person not be CAF trained (such as a concerned neighbour or volunteer) then they should contact Children and Families Direct. Children and Families Direct encourages contact for all concerns/support requirements for Children and Young People in Nottingham and so sets a low threshold (still within "Universal") to ensure that early help can be provided in a timely manner.

There is a clearly defined process and set of responsibilities to support and guide practitioners when children's needs move between a CAF and Social Care threshold (for support as a Child in Need or as a child in need of protection). This is referred to as the step up/step down process (appendix 1) which ensures that workers are confident to escalate cases upwards or de-escalate downwards as appropriate.

If a child is already suffering or likely to suffer significant harm (see "Indicators requiring an immediate referral to social care" on page 8) then either Children or Families Direct (telephone: 0115 876 4800 email: CandF.direct@nottinghamcity.gcsx.gov.uk) or the Emergency Duty Team (out of hours – 0115 876 1000) should be contacted. This will then allow a trained social worker to assess whether or not formal social care assessment/support is required.

No	Universal	Child and family are doing well and there are no significant concerns
threshold		about health, development or achievement that cannot be met within
***************************************		universal services.
CAF	Additional	
threshold		services to work together with other support services to prevent
		problems increasing.
	Extensive	Children and families who are experiencing a range of increasing
		problems; with extensive multi- agency support to meet the needs of
		the whole family, crisis are likely to be prevented.
Social care	Children	A child is deemed as 'in need' if they are disabled or unlikely to
assessment	in Need	achieve a reasonable standard of health or development unless
threshold		services are provided (Children Act 1989).
unconold	Protection	Children who are suffering or likely to suffer significant harm

Nottingham's model for prevention, early intervention and early help below highlights our endeavour to move children and young people back to lower levels of need/support whilst ensuring that there is continuity of provision that will continue to meet their specific needs.



Principles of early intervention, early help and seamless service provision

- Listening to children, young people and families and designing services based on need.
- Meeting families' needs within their local communities.
- Working with families using evidence based interventions.
- The CAF will provide an early, holistic assessment across services engaged with the family.
 This is ideally initiated at the point additional needs are identified.
- A completed CAF will identify which services are required to meet a child's needs and may lead to a multi-agency action plan (if required) and the identification of a lead professional.
- The CAF and role of lead professional will be the key processes for families to experience seamless service provision.
- The CAF will be shared with practitioners appropriately in order to develop the multi-agency support required.
- Any situation in which a child or young person needs a specialist intervention before a
 preventative intervention, as a result of crisis, will be reviewed to find out how and why the
 crisis was not predicted or anticipated and preventative measures put in place.
- Access to universal services will be maintained and promoted for children receiving specialist support or interventions.
- The Step-Up and Step-Down process ensures timely, appropriate and well managed transfer between Protection and Extensive/Additional.

The Early Help Assessment (CAF)

The effective implementation of the Family Support Pathway relies on high quality assessments that provide relevant information and analysis about the needs of children and families.

Identifying needs at an early stage using the CAF gives agencies working with children, young people and their families a common language to understand the needs of the child or young person and what is happening to them. The appropriate support can then be put in place.

All organisations involved with children and young people are duty bound to co-operate in safeguarding children and young people. The CAF is a multi-agency tool that is most effective when all agencies involved with a child or young person are active participants. Whilst it is recognised that CAF participation has resource implications, organisations must plan for the use of their practitioner resource in this way and seek to ensure consistency in practitioner involvement in individual CAFs (i.e. the same practitioner being involved across the lifetime of an individual CAF).

THE CAF IS NOT TO BE USED FOR CHILDREN IN NEED WHERE THERE ARE SIGNIFICANT OR IMMEDIATE CHILD PROTECTION CONCERNS

The CAF should be used when:

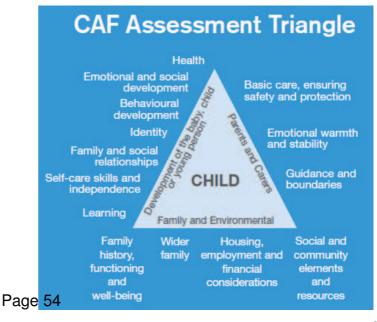
- You are worried about how well a child is progressing. You might be worried about their health, development, welfare, behaviour, progress in learning or any other aspect of their wellbeing.
- A child or their parent / carer raises a concern with you.
- The child's needs are unclear, or broader than your service can address i.e. multiagency.
- The child would benefit from an assessment to help you or your colleagues understand their needs better.
- The child has substantial disabilities and their needs cannot be met by universal services.
- There are concerns regarding the child's/young person's development.
- There are concerns regarding the parent's/carers capacity to meet the child's/young person's needs.
- There are concerns regarding the parent/carer capacity to meet the unborn child's needs (pre birth assessment).
- The wider family and environmental factors are impacting on the child's/young person's development and the parent/carer's parenting capacity.

Each domain has a number of dimensions (see diagram) and is compatible with specialist

assessments, (e.g. Children in Need, Asset,

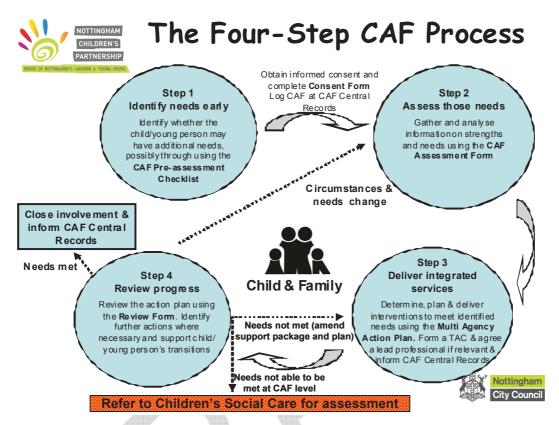
SEN etc.)

CAF Assessment Triangle – showing domains and dimensions



Assessment process and stages

Assessment requires practitioners to gather information and form judgements about a child's needs and the ability of the family to meet those needs within any given set of circumstances. At times, this will also require practitioners to consider the likely level of risk to a child where there are concerns about the circumstances the child is living within. The following diagram illustrates the process of assessment.



In circumstances where parents/children do not consent to Early Help, the lead professional should make a judgement (with advice from their line manager) as to whether, without help, the needs of the child will escalate. If this is the case, consideration will need to be given to a Children's Social Care referral.

Information sharing

Information sharing is key to the delivery of quality services that are coordinated around the needs of the child.

Working with families using the Pathway approach means that Children and Families practitioners gain informed consent to share information about the child / family through the CAF process. This provides workers with a sound legal basis upon which to exercise their professional judgement when sharing information and maintaining confidentiality.

From time to time situations may arise where it seems appropriate to share information without consent. For instance, where a child or family member may disclose additional information that suggests a child is at risk of significant harm. In these instances, practitioners must use their professional judgement to decide whether there is sufficient public interest or public safety concerns to share and gather information without consent.

More extensive guidance can be accessed at https://www.gov.uk/government/publications/information-sharing-for-practitioners-and-managers

In all cases, if a worker remains in any doubt about whether or not to share information then they should consult with their line manager.

Decision making

Practitioners and managers are expected to apply professional judgment to their decision making. If needs cannot be met within universal services, practitioners will need to consider if additional and more extensive, specialist or protective support is required. Requests for extensive and protective support can be particularly challenging for professionals, which is why it is important that decisions are based on high quality assessments using a multi-agency approach (CAF process).

Support and resources

To support decision making processes there are a number of tools available to practitioners to enable them to make an assessment of need and/or risk and gather evidence for a request for extensive support or a referral to Children's Services Social Care, if required. **The Common Assessment Framework** and the CAF toolkit alongside the Signs of Safety tool are the key tools to undertake this work.

Nottingham's Early Help Offer document (appendix 2) provides practitioners and managers with a range of evidence-based resources to aid their day-to-day work with children and families. This includes early help interventions and approaches for the child/young person, parents, carers and, the whole family.



"Responsive" immediate protection

Where there are immediate concerns about a child's safety and a view that the child(ren) is suffering or likely to suffer significant harm, a referral should be made into Social Care (via Children and Families Direct or, out of hours, the Emergency Duty Team) without delay and without the need for a CAF. However, normally, in situations when children have additional/emerging safeguarding needs, a CAF will have already been in place to support them.

Determining whether a child or young person is suffering, or at risk of suffering, significant harm can be complex. Practitioners in all agencies have a responsibility to be aware of the indicators of significant harm, the NCSCB Safeguarding Children Procedures and, their own agency's Child Protection Policy.

Children's Social Care is the lead agency for undertaking Child Protection enquiries including section 47. If there is any doubt about whether to refer to Social Care or not, the case should be discussed with the line manager and/or agency safeguarding lead as well as contacting Children and Families Direct for advice and guidance.

For further details please refer to the **Levels of need section (page 11 - 18)** and **Social Care Processes** (appendix 3).

Indicators requiring an immediate referral to Social Care

- Child is at immediate risk or has suffered significant harm including physical, sexual, emotional harm or neglect
- Unexplained injuries or injuries where there is an inconsistent explanation of the injury
- Under two years old and has unexplained bruising
- Under 1 year old where the parents/carers have significant substance use issues
- Where there are serious concerns regarding the risk of significant harm to an unborn baby
- Lives or has contact with adults who are known to pose a risk to children
- There is evidence of repeated domestic violence witnessed and/or experienced by child; adult mental health issues or substance use issues
- Allegations or disclosures of abuse including sexually abused or evidence of grooming
- Left "home alone" and their age and vulnerability places them at risk, certainly all children "home alone" aged 5 years old and under should be referred.
- Adults who pose a risk
- Child victims of trafficking

Family Support Pathway – High level visual

This diagram broadly summarises the Family Support Pathway; it describes the levels of support and the processes by which practitioners can help children and families access services based on the complexity of needs within the family.

SUPPORT NEEDS

UNIVERSAL ACCESS AND SUPPORT

Child and family are doing well and there are no significant concerns about health, development or achievement that cannot be met within universal services.

ADDITIONAL SUPPORT

Child or family with some additional needs Child and family are experiencing problems requiring universal services to work together with other support services to prevent problems increasing.

EXTENSIVE SUPPORT

Child and family are experiencing problems requiring universal services to work together with other support services to prevent problems increasing.

If child is in need of immediate protection refer to Social Care

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CHILDREN IN NEED

A child is deemed as 'in need' if they are disabled or unlikely to achieve a reasonable standard of health or development unless services are provided (Children Act 1989).

PROTECTION

Child in need of protection

Children who are suffering or likely to suffer significant harm

ACTION

Routine health or learning assessment and review

Additional needs emerging

Initiate CAF and record evidence of assessment of additional needs on the CAF to establish an appropriate action plan

Support needs increasing

Current level of support not achieving desired outcomes Continue multi-agency CAF and consider more support services.

Continuing support

To ensure children and families' needs are met within the CAF process.

Refer to Children's Social Care for assessment

NEXT STEPS

Universal services can meet all needs of the child and family

Logged at CAF Central Records

Services working together to provide support and deliver an agreed action plan (consider need for a "team around the child" and a Lead Professional

Multi-agency responses required to meet needs and deliver an agreed action plan:

- . Form team around the child and family
- · Identify a lead professional
- · Formulate a multi-agency action
- · Attend Multi-Agency Forum

Social care assessment and provision of Children in Need services and

Section 47 Enquiry

Child Protection Conference Child Protection Plan IC Care Plan

Risks reduced and needs met within effective delivery of Family Support Services

Levels of need

Using the domains of the CAF Assessment Triangle, the following tables provide a summary of the level of need a child and his/her family may be experiencing to help practitioners identify the appropriate levels of support that may be required.

The tables are not intended to be a definitive list but give examples.

Universal Support

Child and family are doing well and there are no significant concerns about health, development or achievement that cannot be met within universal services.

Examples of Need Indicators

Child and Young Person Health and Development Health:

- Physically well
- Developmental assessments / immunisations up to date
- Meets developmental milestones
- · Accesses health services
- Child with disabilities and all needs are met by universal support

Education and Learning:

Attends school: sense of educational achievement and progress

Emotional Behavioural Development

- Good early attachments
- A sense of belonging to school social circle
- Age appropriate behaviour and self control
- No concerns about aggressive behaviour
- Age appropriate respect for boundaries and rules

Identity:

 Positive sense of self & demonstrates sense of belonging

Family and Social Relationship:

- Positive attachment to significant other
- Good, stable relationships with carers, siblings / peers

Self Care Skills:

· Age appropriate self care skills

Parents and Carers

Basic Care and Protection:

- Parents / carers provide secure and consistent parenting / caring
- Parent / carers provide for children's needs and protect from danger and harm

Emotional Warmth and Stability:

Shows warmth and encouragement

Guidance, Boundaries and Stimulation:

- Provides appropriate boundaries and guidance
- Supports development through interaction and play
- Access to Leisure Services

Family and Environmental Factors

Family History and Functioning:

 Good family relationships and good friendships outside of family unit

Housing, Employment and Finance:

- Not living in poverty
- Appropriate accommodation and facilities

Family Social Integration:

 Family included in social aspects of community

Community Resources:

Family accessing universal services

Universal Support

Examples of Assessments

- Routine:
 - Health assessment
 - Educational assessment
- CAF assessment process can be used as a helpful framework for recording needs and strengths

Examples of Family Support Service Providers

- Family Community Teams Children's Centres, Youth and Play
- 0-5 Early Years provision (including Child Care)
- Health Visitors
- Midwives
- GP's
- 1-1-1 helpline
- School Nurses
- Schools
- Nottingham Futures
- NGY universal provision
- Further Education providers
- Police
- Leisure Services
- Voluntary & Community Sector (VCS), including:
 - Charities
 - Grass Root organisations
 - Social Enterprise
- Religious organisations

Further details of appropriate services/interventions can be found in appendix 2 – Nottingham's Early Help Offer

Additional Support

CHILD AND FAMILY WITH SOME ADDITIONAL NEEDS

Child and family are experiencing problems requiring universal services to work together with other support services to prevent problems increasing

Examples of Need Indicators

<u>Child and Young Person Health and Development</u>

Health:

- Not reaching developmental milestones
- Concerns about diet / poor nutrition/obesity
- Dental decay and not accessing treatment
- Not accessing appropriate health services e.g. not registered with GP, defaulting on health appointments
- Pregnant under 17
- Child with disabilities whose needs are not met by universal support

Education and Learning:

- Few opportunities to play / socialisation.
- Poor school attendance / exclusion.
- Additional learning needs
- Disengagement from school and education
- Not achieving key stage benchmarks

Emotional and Behavioural Development:

- Mental health concerns about the child/young person
- Experiencing bullying
- Disruptive or anti-social behaviour.
- Involved in criminal activity / offending
- Uses substances

Identity

- Some insecurity around identity
- Poor sense of self
- Lack of confidence in self as a learner
- Child prevented from making links with own community
- Low self esteem

Family and Social Relationship:

- Dysfunctional family relationships impacting on child and their development.
- Receiving poor/inconsistent standards of care
- Young carers

Self Care Skills

- Not always adequate self care skills, poor hygiene
- Slow to develop age appropriate self-care skills
- Over protected/unable to develop independence

Parents and Carers

Basic Care and Protection:

- Inability to recognise care needs of self or child
- Mental / physical health needs may affect ability to provide basic care
- Substance misuse may impact on ability to provide basic / adequate care
- Suspected domestic violence

Emotional Warmth and Stability:

- Child perceived to be a problem by parent
- Poor maternal health not accessing ante or post natal health care / concealed pregnancy / post natal depression
- Attachment issues

Guidance, Boundaries and Stimulation:

- Inconsistent boundaries offered
- Parent provides limited interaction/stimulation
- Condones absence from school
- Child is not exposed to new experiences
- · Lack of routine
- Inconsistent parenting
- Few age appropriate toys/games in house/lack of activity outside of home
- · Needs assistance to access leisure activities

Family and Environmental Factors

Family History and Functioning:

- Family conflicts / difficulties that can involve the children
- History of involvement with statutory services
- Parent previously looked after by Local Authority
- Loss of significant adult.
- Young carers
- Carer is not getting a break from the care of their disabled child and this could be facilitated by access to additional support

Housing, Employment and Finance:

- Stress factors (poor housing / debt / unemployment) impacting on ability to adequately care for children
- Not in employment, education and training

Family Social Integration:

Family socially isolated / excluded

Community Resources:

- Family not accessing universal services.
- Parental engagement with services is poor and is impacting on their ability to meet the needs of the child

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Additional Support

ADDITIONAL NEEDS EMERGING

Initiate CAF and record evidence of assessment on CAF to establish appropriate action plan.

Collaboration of services to assist in meeting individual needs.

Consider:

- Team around the Child (TAC)
- Lead Professional

Examples of Assessments and Interventions

- Common Assessment Framework (CAF)
- Early Support Programme (ESPCAF)
- Ngage
- Parent Assessment Manual (PAM)
- Portage Approach Home Based Precision Teaching
- Early Years Action/Early Years Action Plus
- School Action/School Action Plus
- Solihull Approach
- Motivational Interviewing
- Solution Focussed Brief Therapy

Please also refer to the following information as appropriate:

- The Integrated Care Pathway for Disabled Children and Young People Guidance
- The Integrated Care Pathway for Disabled Children and Young People
- Access to Child and Adolescent Mental Health Services (CAMHS) in Nottingham
- The Teenage Pregnancy Pathway

Examples of Family Support Service Providers

Relevant services at previous levels plus:

- Family Community Teams
 - o Children's Centre
 - Play and Youth Support provision
 - Targeted Youth Support team
 - Education Welfare Service
 - Community Child and Adolescent Mental Health Services (CAMHS)
- Short Breaks Offer (see Nottingham Short Breaks Threshold document)
- Contraception And Sexual Health (CASH) services
- NHS Therapeutic Services
- Family Nurse Partnership
- NGY targeted provision
- Counselling Services
- Drug and Alcohol services
- Inclusive Education Services
- Parent Advisors
- Learning Mentors
- Community Policing
- Housing Services
- Job Centre Plus
- Behavioural Support Team
- VCS agencies

Further details of appropriate services/interventions can be found in appendix 2 – Nottingham's Early Help Offer

Extensive Support

CHILD AND FAMILY IN NEED

Child and family are experiencing a range of increasing problems. With extensive multi- agency support to meet the needs of the whole family, crises are likely to be prevented.

Examples of Need Indicators

Child and Young Person Health and Development

Health:

- Substantial and life long disability needing enhanced or specialist offer of short breaks
- Life threatening conditions
- Chronic or recurring health problems
- Serious obesity
- Multiple A & E attendance causing concern

Education and Learning:

- Statement of educational needs requiring intensive support
- Pre school child under stimulated so as to impair development
- Persistent absenteeism from school with or without parental acceptance
- Behaviour problems in school likely to cause exclusions
- Multiple temporary exclusions
- High level of intensive support in school to meet education needs

Emotional and Behavioural Development:

- Significant mental health needs, emotional and behavioural difficulties
- Behaviour puts own life at risk-self harming / suicide attempts
- Persistent and problematic involvement in alcohol / substance misuse
- At risk of sexual exploitation
- Children who go missing
- Associates with criminals
- Violent / aggressive / anti-social behaviour/ involved in criminal activity
- Beyond parental control
- Placed in custody
- Child witnessing and experiencing domestic abuse

Identity:

- Difficulty in accepting/identifying race, gender, sexuality
- Involved in gang culture

Family and Social Relationship:

- Socially excluded and isolated
- Young carers

Self Care Skills

- Independence beyond years
- Poor self care skills for age

- No support given to develop self-care skills and independence
- Presents as being neglected persistent hygiene problems/clothes regularly unwashed

Parents and Carers

Basic Care and Protection:

- Mental or physical health problems, learning disability or chaotic substance misuse that severely impacts on ability to provide appropriate care for child /family
- Family / child homeless
- Pregnant under 16 and teenage parents with concerns
- Pregnant care-leavers where concerns exist about lifestyle and ability to provide suitable care (25yrs)
- Providing substantial care to a child with substantial and life long disabilities whose needs cannot be met by additional support
- Suspected domestic violence

Emotional Warmth and Stability:

Attachment issues

Guidance, Boundaries and Stimulation:

- Serious parent / child relationship problems which may also result in family breakdown
- History of concerns around their offending behaviour

Family and Environmental Factors

Housing, Employment and Finance:

- Serious debits / poverty impacting on ability to meet family's basic needs, (heat, food, clothing, hygiene) and ability to care for child
- Inaccessible housing or need for aids and adaptations

Family Social Integration:

- Family significantly socially excluded
- Escalating victimisation / harassment

Extensive Support

Continue a multi agency CAF and consider more support services.

- Form Team around the Child
- Allocate Lead Professional
- Create an extensive or additional CAF plan
- Use Specialist Assessments as part of multi agency action plan
- Regular review meetings
- Attend Multi-Agency Forum (MAF) if required

If the current CAF arrangements are not improving outcomes for the child or they are unlikely to achieve a reasonable standard of health or development (i.e. they could be considered a Child in Need) then they should be referred to Children's Social Care for further assessment.

Examples of Assessments and Interventions

- Nottingham City Short Breaks Threshold Criteria
- Social care Children's Assessment and Core Assessment.
- Specialist Occupational Therapy (OT) Assessment by Disabled Children's Team
- Asset (Youth Offending Team)
- Early Support Programme
- Ngage
- · Domestic Abuse Risk Identification Form
- Portage Approach Home Based Precision Teaching
- Education, Health and Care Plan (regarding SEND)
- Parent Assessment Manual (PAM)
- Drugs and Alcohol (Hidden Harm Assessment)
- Schools Assessments
- CAMHS Assessments
- Solihull Approach
- Solution Focussed Brief Therapy
- Motivational Interviewing
- Parenting Programmes Triple P, Webster Stratton (Incredible Years), Strengthening Families Strengthening Communities

Please also refer to the following information as appropriate:

- The Integrated Care Pathway for Disabled Children and Young People Guidance
- The Integrated Care Pathway for Disabled Children and Young People
- Access to Child and Adolescent Mental Health Services (CAMHS) in Nottingham
- The Teenage Pregnancy Pathway

Examples of Family Support Service Providers

Relevant services at previous levels plus:

Family Community Teams

- Community Child and Adolescent Mental Health Services (CAMHS)
- o Disabled Children's Team
- Family Support Teams (inc. Children's Centres)
- Youth Offending Team (YOT)
- o Social Care Children's Resource Teams
- Family Intervention Project
- Short breaks/ continuing care services
- Family Nurse Partnership
- Paediatricians

- Palliative Care Services
- Children's Development Centre (City Hospital)
- Adult Mental Health Services
- Clinical Psychologists
- Drug treatment services
- Domestic Violence services
- Community Education Psychology
- Learning Centres (Pupil Referral Units)
- Special Educational Needs Services
- Transitions Team
- Special Schools
- VCS agencies

Further details of appropriate services/interventions can be found in appendix 2 – Nottingham's Early Help Offer Page 64

Protection

CHILD IN NEED OF PRTECTION Child is suffering or likely to suffer significant harm

Examples of Need Indicators

Child and Young Person Health and Development of Health:

- Substantial, life long disability, complex health needs, extreme challenging behaviour, significant learning disabilities, autistic spectrum disorder with safeguarding concerns
- Severe/ chronic health problems
- Acute mental or physical health needs

Education and Learning:

No educational provision

Emotional and Behavioural Development:

- · Child is victim of trafficking
- Fabricated or induced illness
- Inappropriate sexual behaviour
- Sexual activity under 13
- Sexual exploitation
- Frozen watchfulness
- Causes significant harm to other children and young people through violent or sexual offending
- Endangers own life through self harm/substance misuse (including alcohol)/ eating disorder)

Identity:

- Experiences persistent discrimination due to race, sexuality, gender, culture
- Is socially isolated and lacks positive role models
- Alienates self from others
- Significantly distorted self image
- Significantly low self esteem
- Extremist views

Family and Social Relationship:

- Unaccompanied asylum seeker
- Pregnancy where there have been previous child protection concerns
- Severe and significant developmental delay due to neglect/poor parenting
- Forced marriage of a child under 18 yrs
- Subject to an injunction to prevent nuisance and annoyance or, a criminal behaviour order (CBO) or an Acceptable Behaviour Contract (ABC)
- Young carer has significant responsibilities that result in neglect

Self Care Skills:

- Unable to make positive choices for self
- · Significant self neglect due to substance misuse

Parents and Carers

Basic Care and Protection:

- Child / children previously subject to Child Protection Plan
- Child / children previously removed from parents care
- Families with history of statutory involvement and repeat referrals to Social Care
- Parents/Carers do not accept concerns, fail to or are unwilling to engage in extensive support offered
- Victim of crime
- Persistent domestic abuse

Emotional Warmth and Stability:

 Inconsistent parenting/highly critical/apathetic towards child, impairing the child's emotional development

Guidance, Boundaries and Stimulation:

 Involved in serious criminal acts that may impact on the child e.g. drug dealing, anti-social behaviour

Family and Environmental Factors

Family History and Functioning:

- Chronic substance misuse
- Persistent anti-social behaviour within family

Housing, Employment and Finance:

- Extreme poverty/debt impacting on ability to care for child/children
- Chronic and long term unemployment due to significant lack of basic skills or long standing issues such as substance misuse / offending
- Accommodation places the child in physical danger
- No fixed abode or homeless

Family Social Integration:

- · Family socially excluded
- Persistent transient families

Community Resource:

- Family do not access any services
- Family refuses appropriate services

Protection

Examples of Assessments and Interventions

Specialist needs or risk assessments as required such as:

- Social Care Children's Assessment
- Strategy Meeting & Section 47 Enquiry
- Child Protection Conference
- Child Protection Plan
- Section 31 Care Proceedings
- Children in Care Care Plan
- Asset Risk of Serious Harm
- Assessment and Early Intervention Panel
- Multi-Agency Public Protection Arrangements
- Edge of Care Panel
- Pre-Birth Assessment

Examples of Family Support Service Providers

Relevant support services at previous levels plus:

- Children & Families Social Care Teams (including Children in Care, 15+ Team and Targeted Support team)
- Children's Residential Care Services
- Disabled Children's Team
- Youth Offending Team (YOT)
- Learning Centres (Pupil Referral Units)
- Child and Adolescent Mental Health Services (Specialist CAMHS)

Resolving Inter-Agency Disagreements

To ensure positive multi-agency working a discussion between partner agencies and Social Care about the nature and level of concern and the most appropriate level of intervention is expected. It is essential, however, that practitioners from all agencies do not let these discussions take the focus away from the welfare of the child and the need to safeguard and promote their welfare.

In some cases, a more formal mechanism is required to assist in the speedy resolution of disagreement using problem solving and mediation, particularly when responding to complex cases. It is generally accepted that all agencies manage risks in different ways, and that these differences are mostly helpful in providing checks and balances in work with families. There is a need, however, to avoid polarisation by different agencies. Where this occurs there is a risk that the focus on the child will be lost and services can lose sight of the needs of the child.

It is impossible to set strict timescales for the resolution of disagreements, however good practice would dictate that we should resolve them as soon as it is practically possible and in some cases where there is a perceived high level of risk this should be resolved as far as is possible with a 24 hour period.

There are two possible points at which conflict may arise:

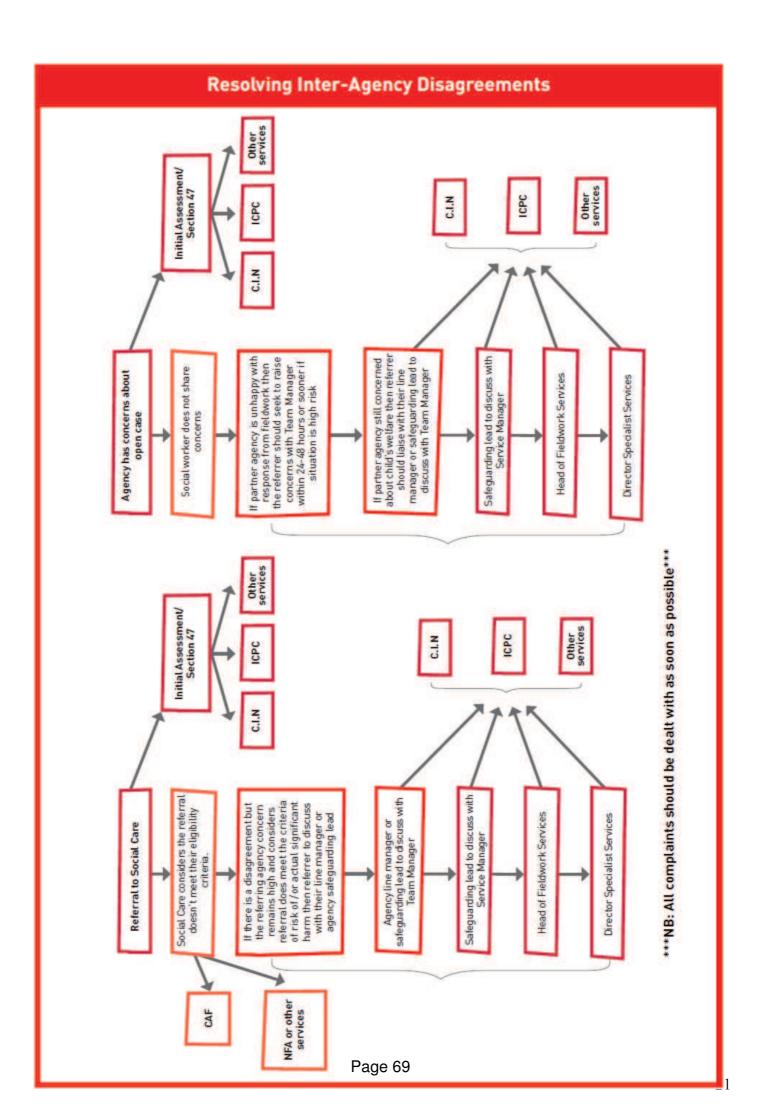
- 1. When agencies make referrals into Social Care and a decision is made not to accept a referral. When this occurs, feedback should be made to the referrer verbally within 24 hours. If disagreement occurs this needs to be resolved quickly to prevent drift. Where possible the disagreement should be resolved within 48 hours, although the mediation stages could take longer. The stages are as follows:
- If the referrer is unhappy with the response from the Screening or Duty Social Care worker, they should seek to raise their concerns with the Screening or Duty Manager. The time in which this should be done is dependent on the level of concern, but again, attempts should be made to resolve this within 24-48 hours. If the situation is deemed to be high risk then attempts to raise and resolve this should be done within a much quicker time frame.
- Should this fail to resolve the issue and the referrer remains concerned about the child's welfare, the referrer should liaise with their line manager or the safeguarding lead for their agency.
 The line manager or safeguarding lead should then discuss the issues with the Screening or Duty Team Manager
- Where disputes about access to Social Care services remain, the line manager or safeguarding lead should take their concerns to the Screening or Duty Service Manager. In most situations it is hoped this would lead to a resolution.
- If concerns are not resolved at this stage the concern should be escalated up to Head of Service,
 Neighbourhood Fieldwork and ultimately the matter will be resolved by the Director of Safeguarding Services and their equivalent in the agency concerned.

Resolving Inter-Agency Disagreements

- Where agencies have concerns about families already open to Social Care and this concern is not shared by the allocated social worker.
 In this instance a similar process is to be followed:
- If the referrer is unhappy with the response from the fieldwork Social Care worker, they should seek
 to raise their concerns with the appropriate Team Manager. The time in which this should be done is
 again dependent on the level of concern, but again, as before attempts should be made to resolve this
 within 24-48 hours. If the situation is deemed to be high risk then attempts to raise and resolve this
 should be done within a much quicker time frame.
- Should this fail to resolve the issue and the referrer remains concerned about the child's welfare,
 the referrer should liaise with their line manager or the safeguarding lead for their agency. The line
 manager or safeguarding lead should then discuss the issues with the appropriate Team Manager.
 Again if this fails to resolve the issue the safeguarding lead should seek to liaise with relevant service
 manager for that area.

It is important to note that in some situations it may be difficult to contact the Social Worker or Team Manager in a timely manner. If this is the case, contact should be made with the relevant service manager. Again this should be done within a time frame which is commensurate with the situation and the perceived level of risk. This may need resolving at the earliest point possible (i.e. within a matter of hours) or within a 24 hour period depending on perceived level of risk.





Useful information

The needs of disabled children should be met across all services. For further details regarding access to support for disabled children, please refer to the following:

The Integrated Care pathway for Disabled Children and Young People Guidance – http://www.nottinghamcity.gov.uk/ics/CHttpHandler.ashx?id=27050

The Integrated Care pathway for Disabled Children and Young People – http://www.nottinghamcity.gov.uk/ics/CHttpHandler.ashx?id=27051

Priority Families (ways of working) -

http://www.nottinghamcity.gov.uk/ics/index.aspx?articleid=25866

For further details regarding access to support for children and young people with mental health issues, please refer to:

Access to CAMHS Services in Nottingham City -

http://www.nottinghamcity.gov.uk/ics/CHttpHandler.ashx?id=27090

For further information regarding the Teenage Pregnancy Pathway please visit – http://www.nottinghamics.org.uk

For further information regarding the Multi-Agency Forum please visit – http://www.nottinghamcity.gov.uk/ics/index.aspx?articleid=14310

Key contacts

Children and Families Direct

For all concerns/support/safeguarding requirements for children and young people in Nottingham.

- 0115 876 4800

Family Information Service

Provides information and support to parents in Nottingham City on childcare, children's centres, activities for children and young people 0-19, working with children and young people and national and local family support services.

– 0800 458 4114

Emergency Duty Team

Provides help, advice and assistance when day service teams and social workers are not available (i.e. out of hours only).

- 0115 876 1000

Disabled Children's Team

Provides help, advice and assistance regarding children and young people between 0-19 years who have a permanent and substantial disability, whose welfare, health or development are likely to be impaired without the provision of specialist short breaks, support services, adaptations or equipment.

- 0115 883 8266

Domestic Abuse Referral Team (DART)

For safeguarding concerns for children and young people in Nottingham regarding domestic abuse.

- 0115 915 0494

Mental Health single point of access (Child and Adolescent Mental Health)

For all emotional/mental health concerns or support needs regarding children and young people in Nottingham.

– 0115 915 8900

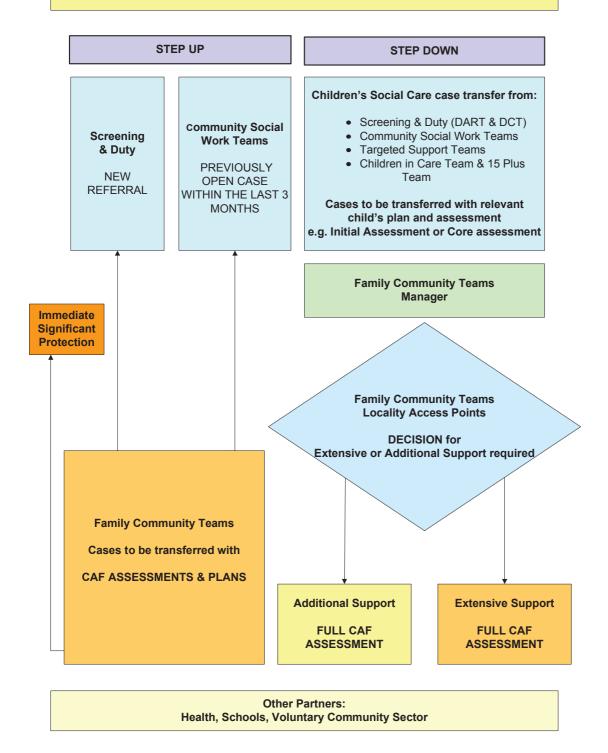
Appendix 1: Step-Up Step-Down Process

More information on the Step-up Step-Down process can be found here

The information in this link and the following process chart are operational documents and are to be viewed on line only given that they are likely to be subject to change.

Step-up Step-down process flowchart

Step-Up and Step-Down Process between Children's Social Care and Family Community Teams Flow Chart



Appendix 2 – Nottingham's Early Help Offer

Nottingham's Early Help Offer

Context:

Nottingham City has, for a number of years, been developing its strategy and structures around the principle of intervening earlier to support children, young people and families before crisis point and in April 2008, Nottingham Children's Partnership launched the City's Early Intervention Programme publicizing its commitment to this agenda and deeming itself an Early Intervention City.

Learning from the Programme has now been embedded in a number of mainstream services and is central to our response to Munro's 'early offer of support'. Early intervention is driving our commissioning activity, with cross-cutting reviews seeking to shift investment from more costly specialist services towards more cost effective, evidence-based preventative and re-enablement approaches in order to deliver a seamless and integrated service.

Our Joint Strategic Needs Assessment (JSNA) details that Nottingham's high levels of deprivation, high levels of unemployment, low educational attainment and unhealthy lifestyle, including poor diet, high levels of smoking and low levels of physical activity, are all interrelated determinants of its poor health outcomes and high levels of inequalities. This analysis has informed the strategic objectives within the Nottingham Plan, the Children and Young People's Plan and our Safeguarding Plan which focus on Strong Families, Healthy and Positive Children and Young People, Achievement and Economic Wellbeing.

Strategic Approach:

Our early help offer forms part of our **Family Support Strategy** which was developed by the Partnership and launched in May 2011. It sets out a clear vision for family support in Nottingham City based on the principle of "earlier support, stronger families"; with the key aim of reducing the demand for specialist services by preventing children growing up to experience behavioural problems, domestic abuse, mental illness, substance misuse, teenage parenthood, low educational attainment, crime and anti social behaviour

The Family Support Strategy Implementation Group leads on the delivery of the strategy and reports to the Children's Partnership Board and the Nottingham City Safeguarding Board.

To support this strategy, the **Family Support Pathway** has been developed to clearly and consistently identify the recognized levels of need and the routes for professionals to access the appropriate support for families, ensuring children and families receive the right help at the right time. This embeds the Common Assessment Framework (CAF) at the centre of planning for the family and ensures that the escalation of cases is appropriate and that partnership activity is initiated to meet the needs of the child and their family by providing the most appropriate support at the right time.

The Family Support Pathway sets out the following levels of support:

Universal Support: offered to all, when the child and family are doing well and there are no significant concerns about health, development or achievement.

Additional Support: offered when the child and family are experiencing problems requiring universal services to work together with other support services to prevent problems increasing.

Extensive Support: offered when the child and family are experiencing a range of increasing problems and the current level of support is not achieving the desired outcomes. This is likely to require a multi agency approach to meet the needs of the whole family in order for crises to be prevented.

Children in Need: offered when a child is disabled or unlikely to achieve a reasonable standard of health or development unless services are provided (Children Act 1989). This is likely to require a multi agency approach (including statutory and specialist provision) to meet the needs of the whole family in order for crises to be prevented.

Protection: offered by statutory services when a child is suffering or likely to suffer significant harm

The Family Support Strategy and Pathway will be refreshed in spring 2014 for republishing and dissemination in the early summer(see Children's Partnership Board and Safeguarding Board reports on this matter for further details).

Universal Support:

Universal provision, available to all children and families in Nottingham City, has been enhanced by aligning locality boundaries and management arrangements in Health, Police and the Council to improve the co-ordination of services, respond to needs in local communities and to ensure ease of access. The Families Information Service provides information, guidance and support to parents and carers on the range of services and activities available in their area.

From pre-birth to 19 years, a range of universal services are planned and delivered at a community level by the children's workforce across the partnership.

Health Services:

General Practitioners, Midwives and Health Visitors support our families from pre-pregnancy up until the child is 5 years old, offering support sessions from a range of settings including Children's. Each Children's Centre has a named Health Visitor who will lead and co-ordinate the delivery of the evidenced based Healthy Child Programme which currently reaches 96% of all city children aged 0-5 years

The Health Visitor Implementation Plan 2011-2015 "A Call to Action" sets out the service that families can expect from Health Visitors and their teams; locally this has seen an 150% increase in the numbers of Health Visitors and a transformed high quality accessible service offer to families which is based on need.

Early Years Service:

Our Early Years Service is responsible for training, mentoring, offering advice, challenge and ensuring quality with all our providers including the private, voluntary, independent and maintained sectors. The team works to ensure that there are sufficient early learning and childcare places for the City's 2, 3 and 4 year olds and providers in receipt of grant funding adhere to the requirements of the statutory guidance (Early Education and Childcare) and the code of practice. In Nottingham, 85% of providers offering funded places for 2 year olds are graded by Ofsted as good or above.

The Early Years Foundation Stage Profile (EYFSP) measures the attainment of a child at the end of reception year. The Early Years Service is responsible for the moderation of the EYFSP in Nottingham. Moderation is a quality assurance of teacher assessments, to ensure that the resulting data is an accurate record of practitioner judgments. Moderation also ensures that the pattern of outcomes for an individual child makes sense in relation to wider knowledge of children's learning and development.

Free early learning for 2 year olds has been offered in Nottingham since 2006.

To date over 5,000 children have benefited from this opportunity. The programme objective is to secure 15 hours of free, high quality early learning for the most disadvantaged 2 year olds, 'This will improve the attainment and life chances of some of our most disadvantaged children and support working parents' (Early Education for 2 Year Olds: Information for LA's, DfE website). In September 2013, this funding became a statutory offer to all eligible 2 year olds. With the current eligibility criteria, 20% of all 2 year olds nationally are entitled to funding. This equates to approximately 1,498 children in Nottingham. When the eligibility criteria extends September 2014, 40% of all 2 year olds nationally will be entitled to free early learning; approximately 2,686 in Nottingham. The team works with partner agencies, including Health, Family and Community teams and Social Care, to ensure families are aware and supported to access their entitlement.

18 Children's Centres:

Our Children's Centres, based within the Family Community Teams Directorate deliver an open access programme of activities in partnership with other agencies including Health, Job Centre Plus and the Early Years Service. The Children's Centres workforce is made up of Family Support Workers and Play and Youth Workers who provide direct work with families. The activities will vary throughout the City, based on evidence of the needs within each community. Some of the activities include parenting sessions, baby massage, breastfeeding groups, baby singing sessions, health drop-ins, CAMHS advice sessions, play and youth sessions and outreach work.

The core purpose of Children's Centres has been re-defined recently by the Government as being to improve outcomes for young children and their families, particularly for the most disadvantaged, in order to reduce inequalities in child development and school readiness and to improve parenting skills and child and family health which has lead to a more targeted approach by our services. The new target groups are those children under 5 who are subject to Child in Need, Child Protection or who are looked after; children under 5 within a priority family, children under 5 subject to a CAF, children under 5 affected by domestic violence and those identified as eligible for the 2 year programme. Two of the previous target groups, Teenage Parents with under 5s and under 5 Disabled Children have also remained in the target groups to be measured. There has been an increase in registration for all the new target groups since they were established in September 2013. The current level of registration across the city for all of the vulnerable groups is 54% which is below the target of 65%. However the level of sustained contact of those groups which are registered is at 68% which is above the target of 65%.

From April 1st 2012 to date (10th March 2014), 22582 individuals have accessed the 18 centres, receiving 208,356 contacts within the process.

Family Support Workers in Children's Centres work closely with their colleagues in Targeted Family Support teams and Social Care to ensure children and families receive a seamless service according to their current needs.

15 of the 18 Children's Centres have been inspected; of these, 8 resulted in grades that were Good or Outstanding.

Early Support Programme:

This programme supports parents and carers of disabled children aged 5 and under. It brings together all the services and support available from different agencies. This makes it easier for families to coordinate their child's health, education and social care needs. In Nottingham we have combined the features of the Early Support Programme and the Common Assessment Framework to avoid duplication and to fit in with the Disabled Children's Pathway.

Schools:

Schools employ Teaching Assistants, Parent School Advisors and Family Support Workers as additional operational resources to identify early concerns in children.

The Family Support in Schools Project; a partnership between Family Community Teams and Schools has proven to be a success with 15 schools (14 Primary and one Secondary including academies and Local Authority maintained schools). Investing in Family Support Workers that are located in schools has built capacity within school to provide targeted support and swifter access to services for children, young people and families. Some schools have accessed and utilised their Pupil Premium funding to purchase this additional resource.

Liz Anderson, Head Teacher, Djanogly Northgate Academy states:-

"Having a family support worker based in school is proving very successful. Some of our more 'hard to reach' families are now engaging as they see the support as coming from the school rather than an outside agency. It has certainly freed teachers up to get on with their core purpose of teaching and learning."

Future plans include an option to increase the number of Family Support Workers from Family Community Teams' resource to be located in schools. There is an opportunity to build on the effectiveness of Family Support Workers in schools and the broader workforce in schools to further embed the consistency and quality of the CAF.

Attendance Improvement: The City's approach to attendance is to tackle the causes not just the symptom through early intervention. Therefore there is not a distinct attendance strategy as the Family Support Strategy provides the framework to tackle the causes of poor attendance instead of just focusing on absence as a symptom of underlying issues of the family.

Schools and their partner services provide a tiered approach to both supporting and challenging families with poor attendance. These range from additional support in school through to intensive external support and sanctions such as legal action where engagement is poor. Non-attendance is increasingly seen as a shared issue due to this integrated cross service approach to the problem.

A number of key developments to support this approach have enabled us to secure improvements in attendance:

- Many schools are prioritising attendance together locally and are funding or sharing resources, such as family support workers or school attendance officers, to address the priorities for their family of schools
- The City's School's Common Attendance Protocol which was implemented in 2010 to ensure common practice is being embedded by Nottingham schools
- A CAF assessment is undertaken with all Persistent absentees who are referred to Family community teams
- A strong commitment to tough action when other options fail reflected in the increasing number of cases taken to Court
- A fast track attendance process, which aims for significant improvement or more formal action within 12 weeks
- Focus on those children, families and localities where the problems are most entrenched

Attendance in schools is still a mixed picture:

- Primary absences overall have deteriorated in line with the national trend from 5.04% in 2011-12, to 5.5% in 2012-13. Persistent absences have deteriorated more than the national trend, from 5.27% in 2011-12 to 5.6% in 2012-13.
- Secondary Absences overall have improved better than the national trend from 6.89% in 2011-12, to 6.8% in 2012-13 as have persistent absences from 9.53% in 2011-12, to 9.2% in 2012-13.
- There has been an overall decrease in permanent exclusions from schools form 30 in 2010-11 to 21in 2012-13.

Play and youth:

A range of statutory and commissioned play and youth provision is delivered in the community for children and young people linked to Children's Centre areas and governed by advisory groups to co-ordinate resources and programmes.

Play and Youth resources have been allocated on the basis of needs across the City, so that although it remains universal provision which is open to all, there is more available in the areas of the city with the highest needs. The allocation of resources on the basis of need is supported by the development of a Planning Toolkit that enables stronger reporting of progress and outcomes as a result of engagement and a Quality Assurance Framework that enables self assessment against planned outcomes and effective performance management. There have been more than 35,000 individual attendances at play and youth sessions in 2013-14, allowing children and young people in some of the neediest areas of the city to develop supportive relationships with trusted adults that build resilience as they go through childhood. In addition, the City Council provides more than a million pounds of funding for voluntary sector provision of youth and play in Nottingham.

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Additional and Extensive Support:

When our children, young people and families have emerging needs, our universal services respond quickly in order to prevent problems from increasing. When needs are deemed to be more complex, a multi-agency response is usually more appropriate. In accordance with the Family Support Pathway, additional and extensive support is provided by our Community Family Support Teams (Children's Centre workers and Play and Youth workers) and Targeted Family Support Teams (Family Support Workers, CAMHS Practitioners, Portage Workers and Educational Welfare Officers) working together with partners.

The early offer of additional or extensive support delivered by our integrated teams uses the Common Assessment Framework and the Team around the Child approach. The early offer of additional or extensive support aims to prevent problems from escalating and avoid the need for statutory service intervention.

The number of referrals to Children's Social Care hit a high in 2010-11 of 6,294. This number has continued to fall, with 4261 referrals being made in 2012-13 and 3957 being made in the 10 months to January 2014.

Access:

Children and Families Direct:

Access to support services has been simplified for families through the newly established Children and Families Direct helpline. A trained Service Adviser answers the call, understands the enquiry and ensures the caller is connected directly to the service required. If the call relates to a safeguarding concern it will be immediately put through to the Screening and Duty Team. If the call relates to the need for extensive support it will be referred to the appropriate Locality Access Point for Targeted Family Support Services and if the call relates to the need for additional support, it will direct cases to our Family Support Services to provide an early help offer and prevent the need for more serious statutory interventions.

By making it simple to access our services, we can help provide the right support, at the right time, to meet the needs of our families.

Our longer term vision is to ensure that Children and Families Direct provides multi-agency coordination, so that this one number also allows families to access the services of our partners: only then can we provide a seamless service for our families and be truly joined up.

Since Children and Families Direct was launched on November 25th 2013 we have received over 5000 enquiries. We have been able to reduce the volume of calls received by the Social Care Duty team by 40%. This is enabling them to focus on the children that require their service. It has also resulted in a significant improvement in referrals to our Early Help and CAF services.

Domestic Abuse Referral Team (DART):

Domestic violent crime makes up a third of all violent crimes in the City. In addition, statistics show that Nottingham has the second highest reporting of domestic violence in the Country.

Services for children and families who experience domestic violence were fragmented and there was often multiple handling across agencies of DV referrals. The previous system involved 3 different agencies, Social Care, Police and Health capturing standard, medium and high risk DV referrals and entering the data onto their respective systems; this lead to an inconsistent and uncoordinated response for families requiring a service.

The DART Team became operational from the 25th June 2012 and is based at Oxclose Lane Police Station and consists of Police, Children's Services, Health, Adult social care and Women's Aid.

The purpose of the DART team is to provide an information sharing hub in response to Domestic Violence referrals and make effective decisions in relation to children their families and vulnerable adults who meet the Social Care threshold for services. This is achieved by identifying, through the best information available to the partnership, those children, young people and vulnerable adults who require support or a necessary and proportionate intervention. We then Identify victims and future victims who are likely to experience harm and ensure partners work together to deliver harm reduction strategies and intervene early.

Since the inception of the DART, 8325 incidents have been reported and referred on appropriately.

Missing Children Team.

Safeguarding and promoting the welfare of children is a key duty on local authorities and requires effective joint working between agencies and professionals. When a child goes missing or runs away they are at risk. Safeguarding children therefore includes protecting them from this risk. Local authorities are responsible for protecting children whether they go missing from their family home or from local authority care. There are no exact figures for the number of children who go missing or run away, but estimates suggest that the figure is in the region of 100,000 per year. Children may run away *from* a problem, such as abuse or neglect at home, or *to* somewhere they want to be. They may have been coerced to run away by someone else. Whatever the reason, it is thought that approximately 25 per cent of children and young people that go missing are at risk of serious harm. There are particular concerns about the links between children running away and the risks of sexual exploitation. Missing children may also be vulnerable to other forms of exploitation, to violent crime, gang exploitation, or to drug and alcohol misuse.

The Missing team sits within the Family Community Team Directorate and began operating in September 2012.

The team was established primarily to ensure that the local protocol 'Children Who go Missing from Home, Care or Education' is implemented. The team took over from the Social Care Information Management Team to receive and process 'missing' and 'found' notifications from the Police and from the NSPCC Home and Away Service. The team record and where required, take action on receipt of the notifications. If there is already an allocated worker, they are informed of the 'missing' episode and relevant follow-up action requested. If there is no allocated worker, return interviews, further work, or multi-agency meetings for relevant young people are undertaken

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by the 'missing' family support worker or senior practitioner. Where appropriate, we offer short-term contact with a young person and/or their family. If longer term support is needed or there are immediate child protection concerns, other relevant services will be contacted without delay.

There were 1436 episodes of children going missing in Nottingham city in 2013. 77% of these children and young people were home within the first 24 hours. The 14-15 year old age band was responsible for 43% of these missing episodes. The "Missing team" are committed to understanding the "push" and "pull" factors that contribute to young people going missing. Nottingham city's performance in speaking to these young people to reduce missing episodes has improved markedly in the last 12 months.

Assessment:

As defined in the Family Support Pathway guidance, additional support needs will be assessed by initiating the Common Assessment Framework (CAF) at the earliest point of working with children, young people and families. This ensures that support is put in place to enable the family to independently care for their child(ren) wherever possible. Universal Services work jointly on a case or can seek advice and guidance from targeted and specialist services so that support is continued with families in local settings.

The number of CAFs initiated on CAF Central Records in the year to date for 2013/14 (as of the 6th March) is already 16% greater than the figure initiated during 2012/13 with a figure of 999 compared to that of 863 for the previous year. Although it is still below the highest number initiated of 1121 in 2011-12, the figure is significantly higher than the years preceding that (467 in 2008/09, 530 in 2009/10 and 573 in 2010/11).

2013/14 year to date has seen the most CAFs closed with needs having been met with 444, which 101 higher than any previous year. This equates to 50.2% of all closures for the year so far and compares favourably with an average of 46.5% of cases closed due to needs met in the last five years and is the highest percentage achieved of closures through needs met compared to any of the previous years.

The number of CAFs closed due to escalation to Children's Social Care for 2013/14 as of the year to date is 16.17% which again compares favourably to the average of the last 5 years of 16.7% Only 2011-12 had a smaller percentage of closures due to escalation to Children's Social Care.

After reviewing our CAF processes, we are working towards a more consistent approach to recording information through establishing a quality assurance system and a more robust performance framework. Our longer term vision is to align or merge the single assessment and family assessment and to implement an e-CAF approach to improve information sharing.

Evidence-based Programmes:

Nottingham is committed to delivering evidence-based interventions and approaches wherever possible; to meet the needs of our children, young people and families and through the 0-19 Child Development Review will consider extending the offer and scaling up a number of successful programmes. Existing Programmes include:-

Family Nurse Partnership:

In response to our high level of teenage pregnancies, FNP was commissioned to provide support to first-time pregnant teenagers and their partner, in order to positively impact on their parenting skills and outcomes for them and their child. The programme is commissioned to work with 25% of the eligible cohort and at the moment they are successfully working with 167 young women. In March, the FNP team are commencing 2 group FNP programmes as part of the National RCT trials

Incredible Years Parenting Programme:

Many of our Children's Centres provide support to our parents in a variety of ways including offering the Incredible Years Programme which aims to prevent and treat young children's behaviour problems and promote their social, emotional and academic competence.

In 2013, 181 individuals attended the Incredible Years Programmes delivered from our Children's Centres.

As a snapshot of impact, the course that ran from January – March 2013 had 11 parents attending, with 10 completing the course. Impact in relation to the course's outcomes is as follows:-

Child behaviour and relationship

- 5 greatly improved
- 4 improved
- 1 slightly

Expectation for good results from programme

- 6 very optimistic
- 4 optimistic

Multi Systemic Therapy (MST):

MST is in the early stages of implementation and has been commissioned in response to the number of aggressive young people being accommodated because their families feel unable to deal with their behaviour. MST is an intensive family and community-based treatment programme that focuses on addressing all environmental systems that have an impact on chronic and violent juvenile offenders, including their homes and families, schools and teachers, community and friends.

DrugAware:

The DrugAware Programme is a whole school approach to Drug Education supported by an early referral system into our Young Person's Substance Misuse Service, Compass. The Education Link Workers within this service work closely with our DrugAware Coordinator and key personnel within schools and offer our most vulnerable young people, those experimenting with drugs and those at highest risk of using drugs; targeted packages of support. In 2013, 128 vulnerable young people

were referred to this service. On average, the recidivism rate has been 5% compared with 47% within the YOT further down the line. Drug-related exclusions have reduced by 50% over the last 2 years and a number of schools have recorded a reduction in binge drinking or drunkenness following the focussed programme.

At present, 47 schools have achieved the DrugAware Standard for excellent practice and a further 16 are working towards achieving it (out of a total of 103 schools and learning centres).

Early Help Services:

Services supporting our children, young people and families with additional or extensive needs are listed within the Family Support Pathway with additional information relating to new services and processes detailed within this paper.

Escalation to Protection Services and de-escalation to Family Community Teams:

Where problems are so serious that the child and family are likely to suffer significant harm, they will be required to work with our social work or youth justice services.

The aim of our Early Help Services is to prevent problems from escalating and to ensure that when they do, they are helped to 'step down' to lower levels of need by early enhanced targeted support. Details of the 'step up and step down' process can be found in the **Family Community Team's Case Management Guidance**.

Ways of Working:

Nottingham is committed to evidence-based approaches in its early intervention work and recognizes that support services and interventions stand or fall on the quality of delivery. Workforce development and shared training opportunities with Family Community Teams, Children's Social Care and Health Professionals in evidence-based practice, ensures practitioners have the expertise to deliver interventions effectively. Our Strategic Core Development Standard sets out a competency framework and recommended training programme for all practitioners working with children, young people and families. Our key delivery approach reflects an asset-based model with a strengths based communication style. Signs of Safety has been delivered across our children's workforce.

Future Developments:

CAMHS Tier 2 Service:

When our children, young people and families have emotional or mental health needs a referral is made to our NCC Single Point of Access. This is for all emotional/mental health referrals for children and young people in the city. This is hosted and managed by us and ensures a timely response and process to support our city children and young people with emerging mental health concerns. Young People and their families can also self refer to us.

Referrals for acute or significant and enduring mental health concerns are transitioned to our health colleagues at Tier 3 Specialist CAMHS.

Our Tier 2 service offers and range of support to children, young people and families and works in a multi agency way to ensure that families are supported and that emotional and mental health issues are addressed at the earliest point possible.

Our Tier 2 service uses the CAPA model, giving Choice assessments to referrals as quickly as possible and conveniently for children, young people and their families.

The service works with a significant number of children, young people and families in the city and steps up to Specialist CAMHS only when there is risk and presenting symptoms cannot be managed at a Tier 2 level in the community. Last year out of 1301 referrals only 96 of them went on to Specialist CAMHS for services and out of the 96, 53 of these were jointly supported.

The service provided a range of therapeutic support for children and young people and includes direct work with their families. It also offers more specialist work including:

- Work around children and young people affected by abuse
- Children and young people with learning disability and/or pervasive
- Developmental disorders
- Children and young people with emotional health problems and sexual health needs
- Children and young people with self harming behaviours
- LGBT support

SHARP (Self Harm Awareness & Resource Project) is a new innovation, developed as part of the service offered by Tier 2 CAMHS.

CAMHS recognises that training and consulting professionals is an important investment in tackling adolescent self harm and suicidality and that effective inter-agency working is essential to achieve early intervention and suicide prevention.

The SHARP team will raise awareness, build confidence and skills and provide support to frontline service providers and professionals to intervene and manage young people who present with self harm and suicidal behaviours.

SHARP Practitioners will also provide children and young people with opportunities and strategies for hope and recovery from the effects of self-harm and minimise the risk of future harm.

They will offer the following support:

- 3 training modules for professionals;
 - 1: Self Harm Awareness
 - 2: Suicide Everybody's Business
 - 3: Using interventions and understanding the self harm care pathway
- SHARP Clinics (in school support)
- Social Worker and other professionals telephone consultations (every Tuesday 9:00 11:00am)
- Raising awareness of self harm and suicide in education (assemblies, PSHE workshops, positive mental health promotion)

- SHARP young people's crisis cards
- ME-Source (building self esteem and resilience group for young adolescents)
- Family support through mediation
- Individual therapeutic support for young people
- SHARP resource pack (giving guidance and creative interventions for professionals who work with young people who self harm)

Appendix 3 – Social Care Processes

Within appendix 3 disabled children are sometimes singled out for specific mention in terms of social care processes. This is because disabled children are, at the point of referral, deemed to be children in need under the Children's Act 1989 and the services for disabled children are structured in such a way so as to ensure that the specific statutory duties in relation to disabled children are met via the provision of a specialist social care service.

Referrals into Social Care including Disabled Children's Team

- When a referral is made to Social Care by a professional, the referrer should confirm this in writing within 24 hours.
- The Common Assessment Framework (CAF) provides a structure and information for the written referral, supporting the decision making process, though the lack of a CAF should not preclude a referral.
- Local Authority Children's Social Care should acknowledge a written referral within one working day of receiving it, if the referrer has not received an acknowledgement within 3 working days, they should contact Local Authority Children's Social Care again.
- In Nottingham, all enquiries in relation to children/young people who aren't already open to Children's Services Social Care are initially dealt with by Children and Families Direct. Children and Families Direct will log the information given by the caller and determine from the information given by the caller as to whether the information requires an Initial Contact or Referral.
- Children's Services Social Care should decide and record next steps of action within one working day. Where the Local Authority Children's Social Care decides to take no further action at this stage, feedback should be provided to the referrer, who should be informed of this decision and the reasons for making it. In the case of public referrals, this should be done in a manner consistent with respecting the confidentiality of the child.

Child Protection and Disabled Children

- In relation to disabled children, only those with life long and Substantial disabilities will be eligible for assessment and services from the Disabled Team (See Nottingham City Disabled Children's Team and Short Breaks Threshold policies).
- Those children with mild to moderate disabilities who meet the threshold for Children's Services Social Care services should be referred to the Duty team.
 When there are child protection concerns in relation to a child with substantial and life long disabilities a referral should be made immediately to the Disabled Children's Team, except in the following circumstances:
 - Where the disabled child is part of a large sibling group, the case should be referred to the Duty team who will become the primary case holders. The Disabled Children's Team will remain as secondary worker for the disabled child. In such cases, the Duty team will have ultimate responsibility for managing the child protection process. However there must be joint working between the two teams and an early planning meeting should be held where possible, to establish the roles of those workers involved.
 - Where there is uncertainty about the nature of the child's disability, the need to safeguard the child takes precedence. In these circumstances the Duty team will be responsible for the resulting child protection enquiries whilst The Disabled Children's Team establish the nature of the disability. A joint visit in these circumstances is good practice but should not delay a response to safeguard the child.

Information Sharing and Consent

Working Together 2013 gives clear guidance about the need to share information with children's Social Care where there is a belief that a child may be suffering, or be at risk of suffering significant harm.

Professionals who have concerns about families and child welfare should first seek to discuss their concerns with the family and seek their agreement to make referrals to children's Social Care, where doing so would not place a child at increased risk of significant harm.

In cases where agencies encounter concerns about a child's welfare that may constitute a criminal offence against the child, they must always consider sharing that information with children's Social Care or the police in order to protect the child or other children from the risk of significant harm. If agencies decide not to share this information, the reasons for this must be recorded.

In terms of information sharing, Professionals need to consider their legal obligations and whether they have a duty of confidentiality to the child. In these instances, professionals can lawfully share information if the child consents or if there is a public interest of sufficient force. This must be judged on the facts of each case but in cases where there is a clear risk of significant harm to a

child, the public interest test is likely to be satisfied.

The child's best interests must be the overriding consideration in making decisions about the need to share information.

Upon receipt of a referral, Children's Social Care may decide a children's assessment is necessary which will require certain checks to be made of other agencies. This will also be the case should a section 47 investigation be required.

In both scenarios parents will be informed and asked if they will consent to these checks being undertaken. However if parents refuse to cooperate or provide consent, professionals again need to consider what is in the child's best interests and override parents withholding of consent if concerns remain about the child's welfare.

Process for Joint Working with Social Care

If joint work / multi agency work is required as part of a child protection plan Social Care will refer to the relevant teams in Family Community Teams in order to access the appropriate support. The social worker will retain their statutory responsibility as the case holder.

Children's Assessments undertaken by Children's Services Social Care (including Disabled Children's Team)

The decision to carry out an Children's Assessment will be made, where it is deemed necessary to gather more information in order to determine whether the child is a Child in Need, the nature of any services required, and whether further, more detailed assessment work should be undertaken. It is a brief assessment, but should still incorporate the views of all the agencies relevant to a child. It should be undertaken within a maximum of 10 working days of the date of the referral. The information held within a CAF, if completed, will be used to populate the Children's Assessment and used to support the work undertaken by Social Care.

The Children's Assessment should:

- Be led by a qualified and experienced worker with management oversight.
- Should Involve seeing and speaking to the child alone (according to age and understanding) and family members as appropriate. If a decision is taken that it is not necessary to see the child then the reasons for this must be clearly recorded.
- Ensure relevant information is sought from all appropriate agencies and professionals, who are in contact with the family.
- Draw together and analyse available information from a range of sources including existing records.
- Ensure all historical information pertinent to the child and family has been accessed and taken into account.

- Ensure that any decisions made are endorsed at a management level and recorded in writing.
- Completed within a maximum of 45 working days.

In situations where evidence emerges that suggests a child requires immediate safeguarding, section 47 enquiries should be initiated without delay. This may become apparent in the early stages of the Children's Assessment and the decision to initiate section 47 should therefore be made in a timely manner, rather than waiting for the Children's Assessment to be completed.

When a section 47 enquiry is triggered because there are concerns that a child is suffering or likely to suffer significant harm. The children's assessment is the means by which a S47 enquiry is carried out. The Framework for the Assessment of Children in Need and their Families provides a structured framework for collecting and analyzing information and risks about a child and family within the following three domains:

- The child's developmental needs
- Parenting capacity and
- Family and environmental factors.

It helps provide sound evidence on which to base difficult professional judgements about whether to intervene to safeguard and promote the welfare of a child and if so, how best to do so and with what outcomes.

It is expected that children's assessments should be led by Children's Social Care and completed in consultation with agencies relevant to the circumstances of the child and family. In order to ensure commissioned services are conducted safely and appropriately, a planning meeting should be held chaired by a Children and Families Team Manager.

In the case of pre-birth assessments where there are identified safeguarding risks and indicators, an initial planning meeting to commission the assessment must be chaired by a Community Team Manager or a Children's Social Care Team Manager. This meeting should allocate key tasks, record risks, identify the timescales and review the process. Where a pre-birth assessment involves the contribution of Family Community Teams, there needs to be clear and ongoing conversations between the Family Community Team and the Social Care Team.

When a S47 investigation concludes that a child requires safeguarding by means of a Child Protection Plan, the children's assessment will form the basis of the report to the Initial Child Protection Conference. The conference may determine that additional assessment activity is required. This should be referred to as further or specialist assessment and it should build on the children's assessment already completed.

Following a children's assessment, Social Care should inform the family, the original referrer and other professionals and services involved in the assessment what action has been or will be taken. Consideration should be given to respecting the confidentiality of the child and family where appropriate to do so.



Title of paper:	Opportunity Notts'			
Report to:	Children's Partnership Board			
Date:	02 July 2014			
Relevant Director:	Alison Michalska, Corporate	Wards affected: All		
	Director Children & Adults.			
Contact Officer(s)	Martin Smith, Sport, Outdoor Lea	rning and Adventure Se	rvices	
and contact details:	Manager			
	0115 947 6202			
	martin.smith@collegest.org.uk			
Other officers who				
have provided input:				
Relevant Children and Young People's Plan (CYPP) objectives(s):				
Stronger safeguarding – With a key focus on ensuring that there are high standards of				
safeguarding across all agencies and that the Partnership takes a pro-active approach to				
the elimination of domestic violence.				
			X	
who have a healthy weight. Reducing substance misuse – Partnership work to lessen the impact on children of				
parental drug and alcohol misuse and to reduce drug and alcohol misuse amongst children				
and young people.				
			Χ	
employment, education and training.				
Improving attendance – Improving rates of attendance at both Primary and Secondary as X			Χ	
a key foundation of improving outcomes.				

Summary of issues (including benefits to customers/service users):

Exposure to a broad range of experiences both within the family, school and other non-school settings directly relate to a young person's life chances and personal development. Recent research has shown that cultural, sporting and other outdoor activities contribute to the development of character and resilience, which in turn directly influences social mobility, learning and skill development.

Nottingham provides many opportunities for young people to broaden their horizons, however, the pathways to these opportunities are often unclear. In response to this and the desire to help young people achieve their full potential we have developed a simple programme, made up of a series of challenges, that can be used to support and encourage young people to take part in more activities. We would like to see young people challenging schools, other youth settings and their own families to provide opportunities to undertake the programme and contribute to a young person's journey into adulthood.

Opportunity Notts provides five levels of challenge for young people aged from 5-16. It will be a simple on-line 'tick list' of 'things to do', evidenced through a verbal report to their peers under adult supervision, once they have completed a section. A certificate with a list of their achievements will be issued and there are a number of 'offers' available from organisations and attractions across the City to incentivise progress onto the next section.

The resulting certificates can be used to illustrate a young person's achievements and by the time they are 16 or 18 would demonstrate to employers or further education establishments their wider achievements in addition to just academic achievement.

Recommendations:

1 The Report is noted.

BACKGROUND AND PROPOSALS

There is a 'growing body of research highlighting how character traits and resilience are directly linked to being able to do well both at school and in the work place.' (Paterson et al, 2014, 'Character and Resilience Manifesto'. All Party Parliamentary Group on Social Mobility)

Recent research and reports have shown that young people who have access to a broad range of experiences engage more readily with learning and develop skills more suited to employer's needs. Extra- curricular activities play a key role. In 2012 the Joseph Rowntree Foundation (1) found a strong and consistent correlation between involvement in school sport and educational attainment, for example (p38). Recent research in the US has also found that team sports made a 'significant and consistent difference to students' academic grades'. Engaging in sport has also been linked to increased education aspirations and commitment to school (p39)

There is also evidence that there are impacts relating to other forms of extra curricular activities including music. It has been reported that being involved in an orchestra had a 'positive impact on children's personal and social development, including increase confidence, self-esteem, team working skills and expanded social networks'.

Further, engagement with the 'outdoors' has been recognised as having a positive effect on non-cognitive skill development and recent research has indicated that 'outdoor adventure programmes are a promising tool to promote the health and well-being of young people'. The need to develop such non-cognitive skills is beginning to gain momentum both within this country and abroad. In fact, even the Singapore Government is reviewing its curriculum. The Minister of Education recently stated that they wanted to make their curriculum more student-centric, to be centred on values and character development. 'Character development is about developing social emotional competencies…Personal values such as grit, determination and resilience enable the individual to realise his or her potential' (2)

Our Service has long recognised the value of engaging young people in a wide range of experiences beyond the classroom and developing some of the personal traits highlighted above. We feel that to broaden young people's horizons is to broaden their minds and it is to this end we have developed 'Opportunity Notts'.

Opportunity Notts brings together a range of progressive real world learning experiences, for young people in Nottingham, that help to broaden their knowledge of themselves, the city they live in and the wider world.

Broadening the horizons and raising the aspirations of the young people and families we work with in Nottingham.

Helping young people feel secure and relaxed in the way we act and the place we live.

Developing healthy lifestyles and helping people make informed lifestyle choices.

Developing the life skills needed to make mature decisions.

Engaging children and young people in learning through broad, balanced and varied experiences.

Making a positive contribution to our neighbourhoods, the city and beyond.

Preparing young people for the world of work.

Being proud of the city we live in.

The programme is a simple 'tick list' of activities for young people to undertake. There are five levels of activity, not necessarily linked to age but which have a progressive theme. They range from 'climbing a tree' and 'rolling down a hill' at the first level to going on to 'learn to play a musical instrument', visit an Art Gallery and raise some money for a 'worthy cause', to taking part in the Duke of Edinburgh's award scheme. A more detailed outline of the programme is attached to this report.

The activities could be undertaken through families, nurseries, voluntary organisations, schools, youth centres and family and community centres; in fact, any child setting. It is about putting that individual young person first and foremost with everything else being there to facilitate their experience. We hope that young people will begin to ask child settings to undertake such activities.

Many of the experiences are low cost / no cost and involve a huge range of community partners from across the city. Young people will be able to keep their own unique on-line record of progress, which can be 'signed off' by the relevant venue or leader. There will also be recognition of the young person's achievement at each level of progress from the local authority through certificates and other rewards.

It is hoped that for schools, participation in the programme will illustrate their commitment to deliver a broad and balanced curriculum that will contribute towards increased attainment, progress and engagement. Progress through the experiences will lead into many other initiatives that exist across the city for the benefit and development of children and young people.

We have presented the idea to young people, staff and partner organisations across the City and they have all been extremely positive in their feedback.

A more detailed outline is presented in the Annexe.

Cummings et al, 2012, 'Can Changing Aspirations ad Attitudes Impact on Educational Attainment? A Review of Interventions, Joseph Rrowntree Foundation Singapore Ministry of Education, Mr Heng Swee Keat, Minister of Education, Opening Address at the Ministry of Education Work Plan Seminar, 22nd September 2011

1. RISKS

(Risk to the CYPP, risk involved in undertaking the activity and risk involved in not undertaking the activity)

There are only very limited risks with this proposal, only opportunities.

2. FINANCIAL IMPLICATIONS

Costs currently include the development of the website £10,000, of which £5,000 is funding secured from One Nottingham and the remaining £5,000 has been allocated from within the Sport, Outdoor Learning and Adventure Service Budget.

There is an additional cost of on-going maintenance of the website, Domain name and some officer time identified to support the programme, which can be readily absorbed into the service.

3. LEGAL IMPLICATIONS

None

4. CLIENT GROUP

(Groups of children, young people or carers who are being discussed in the report) All young people

5. IMPACT ON EQUALITIES ISSUES

This will be a universal provision, with in built flexibility to allow it to adapt to need.

6. OUTCOMES AND PRIORITIES AFFECTED

The programme will contribute towards developing healthy outcomes for young people by encouraging increased physical activity and linking and signposting to many of the initiatives promoted by the Healthy Schools team and PSHE in general.

By making some sense and raising the profile of the huge number of opportunities available to young people to broaden their horizons we hope the initiative will help improve attendance and contribute to pupil progress and attainment at school.

In providing a wealth of opportunities that impact on character and resilience we hope that the initiative will contribute towards the employability and improved future life chances of young people.

7. CONTACT DETAILS

Martin Smith
Sport, Outdoor Learning and Adventure Services Manager
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College Street
Nottingham
NG1 5AQ

0115 947 6202 martin.smith@collegest.org.uk

Nottingham Music Service

We are a charitable incorporated organisation, closely allied to NCC.

As the lead partner for **Nottingham Music Hub** (funded primarily by Arts Council/DfE) we work with a range of partner organisations to provide musical opportunities for young people in Nottingham, and support schools in fulfilling the expectations of the National Music Plan





What do we do?

- Whole Class Ensemble & In Harmony programmes
- Area Bands and intermediate orchestra
- Band Factory and World Musics
- Robin Hood Youth Orchestra
- Musical Inclusion programme
- Large scale city events
- Great Orchestra Experiment & Big Sing
- Connections with community & professional musicians
- Professional development/Certificate for Music Educators





Some indications of impact

Numbers of young people engaging increased from 500 to 7500 since 2002

In 84% of city primary schools, every child learns to play an instrument

YP involved in music now match closely to city profile for Free School Meals, Ethnicity, SEN

Schemes of work and models published nationally





Find out more

Ian Burton, CEO, Nottingham Music Service

ian.burton@collegest.org.uk 0115 9476202 x251

www.nottinghammusichub.org.uk

Follow us on:
Twitter @nottmusichub
Facebook NottinghamMusicHub





Nottingham Music Hub and the DfE National Plan for Music Education

Ways in which Nottingham Music Hub supports city schools in meeting DfE/Ofsted expectations for music education

### Clear progression routes are available and affordable to all young people* ### Clear progression routes are available and affordable to all young people* ### Clear progression routes are available and affordable to all young people* ### Clear progression routes available through instrumental/vocal examinations/Arts Award* ### Pathways for talented young musicians* ### Clear young is sings regularly and that choirs/vocal ensembles are available* ### Clear public sings regularly and that choirs/vocal ensembles are available* ### Clear public sings regularly and that choirs/vocal ensembles are available* ### The Big Sing Festival of Singing (schools with professional singing group at the Albert Hall each July) ### Singing workshops and CPD ### Singing wo	National Music Plan key expectations:	Nottingham Music Hub offer:		
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CPD subject review support for school music improvement plans lesson	"Schools will seek curriculum advice and	Web library of <u>national reports and guidance</u>		
*Schools will expect music hubs to provide • CPD, subject review, support for school music improvement plans, lesson	support including CPD from music hubs"	Level 4 Certificate for Music Educators		
סטווסטוס איווו סאַסטג ווועסוט וועסס גט פורטיועס	"Schools will expect music hubs to provide	CPD, subject review, support for school music improvement plans, lesson		
them with expert advice and challenge and observations and development work		observations and development work		
take action on this" • Feedback on <u>DfE music data return</u> to aid self evaluation		Feedback on <u>DfE music data return</u> to aid self evaluation		

Nottingham Music Service

- 1) Nottingham Music Hub has been charged by Ofsted to secure that all schools in Nottingham engage with the music hub and the National Plan for Music Education; have regular conversations with each school about the quality of music education for all pupils in that school; and support all schools in improving the music education they provide, especially in class lessons, and support them in evaluating it robustly
- 2) Nottingham Music Service is the **lead partner for Nottingham Music Hub**, a partnership of key local and regional music organisations, working together to create joined up, high quality music education for children and young people
- 3) In 2012-13 Nottingham was once more significantly above the national average for music in many of the areas measured by DfE: 88% of primary schools with a Whole Class Ensemble programme; 44% of YP continuing learning after the WCE programme
- 4) The service has developed into one of the most inclusive in the country:
 - 18% of the school population are learning instruments, representing a 1366% increase since 2002
 - 28% of young people (YP) learning instruments are on Free School Meals. (Overall city figure 33.8%)
 - 20% of YP learning instruments are registered as SEN (Overall city figure is 21.8%)
 - 45.9% of YP learning instruments are from BME groups (Overall city figure is 45.8%)
- 5) The service is one of only six in England to be selected to run the national (and international) In Harmony/El Sistema programme, and is hoping to expand this offer beyond the four schools currently taking part
- 6) The service has developed new music accreditation strategies for Nottingham in association with senior management of the ABRSM (largest music exam body). Nottingham is the only music service to have ensemble band arrangements accredited by the ABRSM, enabling YP to gain music medals through taking part in area band. 133 post-Whole-Class-Ensemble young people gained ABRSM grade 1, grade 2 or a music medal in summer 2013.
- 7) Schemes of work and resources developed by the music service have been published by national bodies, including the government Innovation Unit, Musical Futures and have been featured as case studies in National Curriculum guidance and the DCMS cultural report
- 8) Nottingham Music Service has won **awards** for *Innovation* and *Serving Nottingham Better*. Nottingham Music Hub was a finalist for the *National Music Hub Innovation award 2013* and was nominated for the *National Lotttery awards 2014*
- 9) The music service offers expert leadership in music education, including staff with experience as performers and composers, as published authors of music education books and resources, as a Senior Lecturer in Music Education in universities, as Arts Awards advisers, of running Initial Teacher Training and national CPD, as a specialist Music Ofsted inspector, as a principal examiner and specification development for multiple exam boards
- 10) The service is one of the first centres in the country to offer the new Level 4 Certificate for Music Educators, providing training for the wider music education workforce as recommended in the DfE National Plan for Music Education



Title of paper:	National Citizen Service			
Report to:	Children's Partnership Board			
Date:	2 nd July 2014			
Relevant Director:	Alison Michalska, Corporate	Wards affected: All		
	Director of Children and Adults			
Contact Officer(s)	Jon Rea, Engagement and Participation Lead			
and contact details:	Jon.rea@nottinghamcity.gov.uk, 0115 8764817			
Other officers who	Charlotte Croft, Youth Cabinet representative on the Children's			
have provided input:	Partnership Board			
Relevant Children and	Young People's Plan (CYPP) obje	ectives(s):		
Stronger safeguarding – With a key focus on ensuring that there are high standards of				
safeguarding across all agencies and that the Partnership takes a pro-active approach to				
the elimination of domestic violence.				
Healthy living – With a key focus on increasing the proportion of children and young people				
who have a healthy weight.				
Reducing substance misuse – Partnership work to lessen the impact on children of				
parental drug and alcohol misuse and to reduce drug and alcohol misuse amongst children				
and young people.				
Raising attainment – Raising the attainment levels and increasing engagement in x			Х	
employment, education and training.				
Improving attendance – Improving rates of attendance at both Primary and Secondary as			x	
a key foundation of improving outcomes.				

This report:

- Informs the board about the scope of the National Citizen Service in Nottingham City and its impact on young people
- Informs the board about how the Youth Cabinet is supporting the NCS programme

Summary of issues (including benefits to customers/service users):

 Asks the board to consider ways in which members of the Children's Partnership can work with NCS to help achieve the aims of the Children and Young People's Plan and other strategic plans

Rec	Recommendations:			
1	The Board recognises the positive impact of National Citizen Service on the lives of 16-17 year olds and its potential to bring numerous social benefits to the city.			
2	The Board agrees to support the National Citizen Service in developing their programme and promote the scheme as a valuable addition to the opportunities for young people in the city.			
3	Board partners are asked to consider how they can further contribute to citizenship development opportunities for children and young people.			

1. BACKGROUND AND PROPOSALS

National Citizen Service (NCS) is a two to four week programme run in school holiday time designed to give 16-17 year olds new experiences, build life skills and develop them as citizens.

Each NCS programme consists of a residential adventure, followed by a series of skills development workshops, contact with charities and other voluntary sector organisations, and planning and delivery of a community action project. A formal graduation ceremony concludes each programme.

Nationally all young people aged between 16 and 17 are entitled to a place on the programme, which has sessions in spring, summer and autumn. NCS is inclusive and makes provision for young people with additional needs and specific cultural requirements. There is a £50 cost for the residential activity but most providers subsidise this for lower income households.

Young people complete the programme in teams of 15, each team supported by a group leader and a group mentor. Teams are design to be socially mixed to encourage young people to meet new types of people and make friends across the social and cultural spectrum.

National picture

NCS is a Government-backed scheme, graduation certificates are signed by the Prime Minister, and was introduced as part of the Big Society initiative. Original overseen by the Cabinet Office, following the piloting and full introduction of the scheme in 2013 a new National Citizen Service Trust took over governance of the scheme.

NCS in Nottingham

New College Nottingham and Nottingham Forest in the Community hold the NCS delivery contract for the Greater Nottingham conurbation. Since 2012, there have been 1217 graduates from Nottingham, performing a total of 36510 hours of social action; roughly 800 places are available to young people this summer. Approximately two thirds of the intakes are from the City with the other third from County boroughs.

In 2013 members of the Youth Cabinet supported by the Engagement and Participation lead engaged c.300 NCS graduates in training to develop their skills to deliver youth-led social action projects. They also undertook consultation on young people's needs and aspirations for the Children Development Strategic Commissioning Review led by Quality and Commissioning.

This year the Youth Cabinet will train NCS team leaders and mentorS to deliver the same training workshops. In addition as part of the drive to raise awareness about the new Individual Voter Registration scheme the Council's Electoral Services team will engage c.600 NCS graduates in 'Bite the Ballot' workshops. This will include workshops on why it is important to vote, question and answer with Councillors, and a registration of all NCS young people voters on to the attainers list (for 16 and 17 year olds).

Challenges and opportunities

In addition to this work there are other opportunities for the Children's Partnership Board and other Council partners to work with NCS and help improve the impact on communities of NCS social action programmes.

NCS would like to work more closely with the Children's Partnership Board to:

- Encourage awareness and sign-up of young people in the city and maintain good levels of participation
- Raise awareness and profile in schools and colleges
- Link NCS social action projects to community based groups and organisations and unlock the support and resources of community-based partners
- Find new partners to contribute to the NCS workshop programme and bring new citizenship experiences to young people
- Improve young peoples' understanding of the role of the Council and increase participation in active citizenship projects and forums after they have graduated

In addition Board members may have opportunity to link existing citizenship objectives with NCS.

2. RISKS

The contract holder for NCS in Nottingham and South Nottinghamshire is New College Nottingham in partnership with Nottingham Forest FC in the Community. The contract runs until 2018 after which the picture is uncertain.

3. FINANCIAL IMPLICATIONS

None

4. LEGAL IMPLICATIONS

None

5. CLIENT GROUP

Young people aged 16 to 17 who are eligible to take part in the scheme.

6. IMPACT ON EQUALITIES ISSUES

Addressed in the background report above.

7. OUTCOMES AND PRIORITIES AFFECTED

This work contributes to the following CYPP outcomes: **Raising attainment**, through improving young people's focus on positive learning activity in informal settings; and **Improving attendance**, by motivating them to take a more active role in their own personal and educational development and improving their understanding of how organisations and institutions including schools and colleges can benefit them.

8. CONTACT DETAILS

Jon Rea
<u>Jon.rea@nottinghamcity.gov.uk</u>
0115 8764817

National Citizen Service

Presentation by:

Charlotte Croft Rob Ghahremani Uzair Hashmi





National Citizen Service (NCS)

Overview

National Citizen Service (NCS) is a two to four week programme run in school holiday time designed to give young people between the ages of 16-17; experiences, life skills and opportunity to develop as citizens.

Each NCS programme consists of a residential adventure, followed by a series of skills development workshops, contact with charities and other voluntary sector organisations, and planning and delivery of a community action project. A formal graduation ceremony concludes each programme.





NCS

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Young people complete the programme in teams of 15. Each team is supported by a group leader and a group mentor.

Teams are designed to be socially mixed to encourage young people to meet new types of people and make friends across the social and cultural spectrum.





NCS Nationally

National picture

NCS is a Government-backed scheme - graduation certificates are signed by the Prime Minister – and was introduced as part of the Big Society initiative

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NCS locally

Local Picture

New College Nottingham and Nottingham Forest in the Community hold the NCS delivery contract for the Greater Nottingham conurbation. NCS have recently been awarded contract extension for delivery to 2018.

Since 2012, there have been 1217 graduates from Nottingham, performing a total of 36510 hours of social action activity. 800 places are available this summer and Nottingham City young people will account for two thirds of this figure.





Youth Cabinet Involvement

Youth Cabinet contribution

In 2013 the Youth Cabinet ran workshop sessions for around 300 NCS members. Workshops included skills for running social action projects, conducting peer-led surveys and developing communication skills. Young people also got to visit the Council House and meet different Council staff and talk about how the Council works.

This year we will train staff to deliver the same workshops and also run a major engagement with Electoral Services to register 600 new voters under the new Individual Voter Registration scheme.





Youth Cabinet Involvement

Challenges

- Encouraging awareness and sign-up of young people in the city and maintaining good levels of participation
- Raising awareness and profile in schools and colleges
- Linking NCS social action projects to community based groups and organisations, unlocking the support and resources of communitybased partners
- Finding new partners to contribute to the NCS workshop programme and bring new citizenship experiences to young people
- Improving young peoples' understanding of the role of the Council and increasing participation in active citizenship after graduation
- Links to other citizenship work in the City





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Children's Partnership Board Forward Plan

To be scheduled

CYPP PRIORITY HEALTHY LIVING: SCHOOL NURSING REVIEW AND AVOIDABLE INJURIES

MST UPDATE

BI-ANNUAL CAF REPORT

TEENAGE PREGNANCY PLAN

BI-ANNUAL LSCB REPORT

CYPP PRIORITY: REDUCING SUBSTANCE MISUSE

CYPP PRIORITY: RAISING ATTAINMENT
CYPP PRIORITY: STRONGER SAFEGUARDING
CYPP PRIORITY: IMPROVING ATTENDANCE

PARTNER UPDATES:
SECONDARY EDUCATION
EDUCATION (FTE)
FUTURES (CONNEXIONS)
JOBCENTRE PLUS
POLICE

VOLUNTARY SECTOR

Please contact Dot Veitch if you have any suggestions for future items for the forward plan

dot.veitch@nottinghamcity.gov.uk