CREATING OPPORTUNITIES AND TACKLING INEQUALITIES SCRUTINY COMMITTEE

Agenda Item No. 7

7 JANUARY 2013

Public Report

Report of the Executive Director of Children's Services

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PREVENTION AND EARLY INTERVENTION FOR CHILDREN AND YOUNG PEOPLE AND FAMILIES IN PETERBOROUGH

1. PURPOSE

1.1 To inform Members on the development of an Overarching Multi-agency Prevention and Early Intervention Strategy.

2. **RECOMMENDATIONS**

2.1 Members are asked to comment on and support the proposed strategy and to receive updates on progress relating to its' implementation on a 6-monthly basis.

3. LINKS TO THE SUSTAINABLE COMMUNITY STRATEGY

- 3.1 The report links to several priorities identified in the Sustainable Community Strategy, including:
 - Supporting vulnerable people;
 - Improving skills and education;
 - Making Peterborough safer;
 - Building community cohesion.

There are also a number of key performance indicators that the implementation of the Strategy will help Children's Services and key partners to achieve, including:

- Reducing referrals to Children's Social Care Service;
- Reducing repeat referrals to Children's Social Care Services;
- Reducing the number of children and young people who have statements of special educational needs;
- Improving child and maternal health;
- Building better emotional and mental health resilience among children and young people;
- Reducing offending and anti-social behaviour;
- Reducing the numbers of young people who are Not in Education, Employment or Training.

In addition there are a number of softer outcomes that the implementation of the Strategy will help to achieve, including:

- Increasing the accessibility of prevention and early intervention services;
- Providing pathways into employment for newly arrived community members and helping services to recruit workforces that reflect the communities served;
- Reforming the children's workforce so that families experience services that are delivered in a more holistic and efficient way.

4. BACKGROUND

- 4.1 The Prevention and Early Intervention Strategy is organised into four principal sections, summarised below. These are:
 - Needs Analysis
 - Priority Outcome Areas and Actions
 - Cross Cutting Themes
 - Governance and Delivery

The strategy is a multi-agency one and focuses on those priority needs that require a coordinated, multi-agency approach if they are to be successfully addressed. The multi-agency partnership has agreed the Strategy in principal through the Children and Families Commissioning Board.

The strategy has been developed through an analysis of statistical information about levels of needs in Peterborough, supplemented by the views of practitioners working with children, young people and their families in the City.

The need for a comprehensive Prevention and Early Intervention Strategy was identified by OFSTED in the most recent inspection of safeguarding arrangements in Peterborough.

5. KEY ISSUES

5.1 This section of the report summarises each of the four main parts of the Prevention and Early Intervention Strategy, beginning with the Needs Analysis.

Main Issues identified in the Needs Analysis

Peterborough has a rapidly growing child population and the population is becoming increasingly diverse:

The 2011 Census found that the number of children and young people aged 0-18 in Peterborough has increased significantly since the 2001 census, and the increase in the 0-5 population is one of the highest proportionately in the country.

It is also clear that the child population of Peterborough is becoming rapidly more diverse, with growing numbers of children and families from Eastern European communities in particular.

An increasing child population will place additional pressures on an overall reducing amount of resources, meaning that we need to change the way that we do things if we are to continue to meet needs effectively.

An increasingly diverse population presents challenges in ensuring that particularly those from communities newly arrived in the UK know how and where to access the help and support that they need.

Many maternal and Child Health Indicators are poor:

Peterborough has significantly worse rates of smoking in pregnancy, children born with low birth rates, numbers of mothers who breastfeed their babies and low immunisation rates than national averages. In common with much of the UK, childhood obesity is high. Childhood obesity is associated with much higher risks of shortened life expectancy and significant health complications in later life.

A number of maternity professionals in Peterborough are also concerned about what they perceive to be increasing numbers of babies born with foetal alcohol syndrome.

There are considerable concerns about high levels of emotional and mental health needs among children and young people in Peterborough, which some ascribe to high levels of domestic abuse between parents.

Attainment levels are low and too many young people are NEET:

Attainment levels in Peterborough are lower than national and statistical neighbour averages across all key stages. The gap in achievement at foundation stage between disadvantaged

children and all children has widened in recent years in Peterborough, against the national trend.

Pupils who have English as an Additional Language do less well at Key Stages 2 and 4 compared with English speaking pupils in Peterborough, while the nationally pupils with English as an additional language out-perform English speaking pupils.

Non-school attendance is an issue at some of our schools: in 2010/11 16% of pupils at one of our primary schools missed more than 15% of school – equivalent to about 6 weeks. In the same year 18% of pupils at the then Voyager School were absent at least 15% of the time, and 12% were absent for more than 20% of the time.

Peterborough has relatively high numbers of young people who are NEET, many of whom have behavioural, emotional or social difficulties and/or a degree of learning disability.

There are families with multiple needs and children and young people in need of protection:

There are significant numbers of children and young people in Peterborough who have child protection plans, while numbers of children and young people in care has risen in recent years. Practitioners identify a number of themes associated with children being at risk of suffering significant harm. These include:

- Parents with alcohol and/or substance misuse;
- Parents with mental health difficulties;
- Domestic abuse and violence;
- Extreme issues relating to the ability to communicate and appreciate views of others;
- Families where children's lives are characterised by extreme neglect.

Too many children and young people in Peterborough are affected by persistent poverty:

Rates of child poverty are high in Peterborough, with a number of wards where over 25% of all children are living in poverty. In a number of neighbourhoods in the City, child poverty rates exceed 40%.

Persistent child poverty is associated with significantly poorer outcomes for children and young people as they grow into adulthood.

There are high rates of children and young people who have statements of Special Educational Need

3.9% of Peterborough pupils have a statement of Special Educational Need as opposed to a national average of 2.8%. A much higher proportion of pupils with a statement in Peterborough are placed in special schools -48% - than the national average of 18%. Compared with our statistical neighbours, we place a higher proportion of children in independent provision -5.6% of all our pupils are placed in this type of school.

The statementing process is costly to administer and so higher proportions of pupils with statements means that there are fewer resources available to meet the needs of all pupils. Children and young people placed in special schools can leave education less prepared for the challenges of adult life, and so be more likely to find it difficult to secure and maintain employment or further training.

Independent provision is costly – a weekly boarding school place for a young person with behavioural, social or emotional difficulties is typically $\pounds 60,000$ per annum. As well as reducing the amount of funding available for all pupils, outcomes for pupils placed in such provision are generally less good than for pupils learning in other types of provision.

There are increasing numbers of children and young people with disabilities in Peterborough:

The number of children and young people eligible for Disability Living Allowance in Peterborough has been increasing steadily since 2003, and the number of children aged 0-5 in receipt of this benefit has increased significantly since January 2008.

Priority Outcome Areas and Actions

This part of the strategy sets out the priority prevention and early intervention outcome areas, following on from the needs analysis above. These are:

- Safeguarding;
- High need families;
- Early Years particularly as these relate to communication, positive attachments and special relationships, healthy lifestyles and being ready to learn and achieve;
- Children and young people with special educational needs, particularly those with a diagnosis of autistic spectrum disorder or who have a learning difficulty or disability;
- Vulnerable young people;
- Emotional health and wellbeing, and;
- Children and young people who have disabilities and their families.

The Strategy describes specific outcomes to be achieved by the partnership over the next two to three years under each of these headings.

For each group of outcomes, a delivery group is identified that is accountable for ensuring that progress is being made.

A key priority for the delivery of effective prevention and early intervention services in Peterborough is the need to ensure that there are a range of family support services able to support families to address difficulties across the spectrum of need. We are therefore exploring how to develop a number of targeted family support options that compliment the work undertaken within children's centres and offered by some schools.

These programmes will be accessed through the Multi-Agency Support Groups [MASG's] and will offer targeted support to families who are experiencing difficulties but who do not yet reach the thresholds for accessing children's social care services. The purpose of these interventions is to work with the family and prevent their needs escalating to the point that Children's Social Care services are required.

Cross Cutting Themes

This part of the strategy identifies cross cutting issues that must be addressed if the prevention and early intervention agenda is to be achieved in a sustainable way in Peterborough.

The first of these themes relates to *accessibility of services*, and draws on research about which families typically access services. This research has found that the most vulnerable families are often those who access support services least, frequently because they do not know they are available, and sometimes because they feel anxious about being judged if they do access the support on offer.

In a City like Peterborough, where the population of children and families is rapidly changing and there are new arrivals coming to the city all the time, ensuring that families know about the services available is a continuing challenge. Simply sign-posting the availability of such services has been found not to be effective for the most vulnerable families; they need someone to get alongside them, build a relationship with them, and then walk them into the service.

To address this need, the Strategy outlines the development of Community Family Engagement volunteers, building on the already successful 'Better Together' volunteering programme. We envisage recruiting volunteers from the community, including from newly arrived communities, providing them with training, and using them to build relationships with vulnerable families and then walking them into services such as children's centres, enabling them to access the support they need.

For the volunteers, involvement in this programme will help them to access paid employment in the services that are available, such as children's centres or in schools and so on. This in turn will help those services to employ a workforce that reflects the community served, which in turn will help to make the services more accessible to the whole community.

Another cross cutting theme identified is that of **workforce reform**. This relates to the idea that particularly for those families who have complex needs, it is often the case that a number of different types of professional can all be working with different aspects of the family's 'problem'.

Families often experience this as very confusing; they are often unclear what it is that a particular professional is trying to achieve, and often find that different professionals give them conflicting advice.

As part of our **Connecting Families** approach, we are using a Team Around the Professional model. This is where a single worker does the main work with the family, but they are supported in the background by a virtual multi-disciplinary team, which can offer advice and guidance on how to tackle non-school attendance or how to promote a healthy diet and so on.

The other element of workforce reform is to ensure that all practitioners working with a family are able to recognise needs that are outside their own area of specialism. For example, a health visitor should be able to offer advice and challenge when visiting the home of a new born baby and finding a school age child at home during the school day.

Finally, we need to be able to measure the effectiveness of services and interventions and the impact that these have on outcomes for children and their families. We will therefore use a distance travelled tool called the 'Outcomes Star' across all services that work with children and families. This is an evidenced based but quite simple tool which enables families to identify their strengths and weaknesses at the beginning, middle and end of an intervention.

Governance and Delivery

The overall accountability for monitoring and ensuring delivery of the outcomes identified within the Strategy lies with the Children and Families' Commissioning Board. Reporting to this board will be an overarching Prevention and Early Intervention Delivery Group, on which the chairs of all the delivery groups with a role in delivering the outcomes of the strategy will sit.

Most of the work identified within the strategy is being assigned to existing delivery groups – there is no appetite to create a large number of new delivery groups. The groups are:

- SEN/Disabilities Strategy Group;
- Welfare Reform and Family Poverty Reduction Groups;
- Connected Families Steering Group;
- Domestic Abuse strategy group;
- CAMHS Strategy Group;
- NEET/Raising the Participation Age Delivery Group;
- Specialist Commissioning;
- Workforce Reform Delivery Group;
- Parenting Delivery Group;
- Young People's Delivery Group;
- Citizen Engagement and Access to Services Delivery Group.

Progress will be reported quarterly to the Children and Families' Commissioning Board.

6. IMPLICATIONS

6.1 There will a greater focus on commissioning outcomes based on a sound needs analysis and evidence base of what works; this may result in decommissioning and commissioning of new services.

The report is relevant to the whole city.

7. CONSULTATION

7.1 Consultation has taken place with stakeholders among the multi-agency partnership through the Children and Families Commissioning Board.

There has not been any specific new consultation with children, young people and families themselves, but the results of existing consultations have been used to inform the development of the strategy.

The Citizen Engagement and Access to Services delivery group will have accountability for ensuring that children, young people and their families are able to engage with and inform the delivery of the Strategy.

8. NEXT STEPS

8.1 The Strategy will be adopted and resulting action plans put into place by the various Delivery Groups. Progress will be monitored on a quarterly basis by the Children and Families' Commissioning Board. Scrutiny may wish to receive monitoring updates as well, in which case a six monthly update report would seem appropriate.

9. BACKGROUND DOCUMENTS

9.1 None

10. APPENDICES

10.1 Prevention and Early Intervention in Peterborough: A Partnership Strategy