

## CHILDREN, YOUNG PEOPLE AND FAMILIES PARTNERSHIP

**Venue:** Town Hall, Moorgate  
Street, Rotherham. S60  
2TH

**Date:** Wednesday, 17th July, 2013

**Time:** 2.00 p.m.

### A G E N D A

1. Apologies for Absence.

#### **For Decision:-**

2. Minutes of the Previous Meeting held on 22nd May, 2013 (herewith) (Pages 1 - 10)
3. Matters Arising.

#### **For Discussion:-**

4. Issues and Concerns
  - Looked After Children Council
  - Youth Cabinet
  - Parent and Carers Forum
5. Annual LCSB Report and Business Plan (Officers to report)
  - Alan Hazell to report
6. Memorandum of Understanding between LSCB and Health and Wellbeing Board (including CYP&F Partnership) - report attached (Pages 11 - 16)
  - Joyce Thacker to report
7. Commissioning/delivery of Emergency Hormonal Contraception to young girls aged 14-16 years - report attached (Pages 17 - 18)
  - Gill Harrison to report
8. Children and Young People's Services Action Plan - report attached (Pages 19 - 40)
  - Sue Wilson to report

#### **For Information:-**

9. Any Other Business.

10. Date and Time of Next Meeting.

All meetings begin at 2.00 pm at Rotherham Town Hall:-

- Wednesday 18<sup>th</sup> September, 2013
- Wednesday 20<sup>th</sup> November, 2013
- Wednesday 22<sup>nd</sup> January, 2014
- Wednesday 19<sup>th</sup> March, 2014
- Wednesday 21<sup>st</sup> May, 2014
- Wednesday 16<sup>th</sup> July, 2014

**CHILDREN, YOUNG PEOPLE AND FAMILIES PARTNERSHIP**  
**Wednesday, 22nd May, 2013**

Present:- Councillor Lakin (in the Chair); Tracy Blakemore, Deborah Bullivant, Clair Burton, Warren Carratt, Karen Etheridge, Sara Graham, Juliette Greenwood, Maria Langham, Jenny Lingrell, Shona McFarlane, Clair Pyper, Joanne Saunders, Susan Skalycz, Dorothy Smith, Karen Smith, Sue Wilson and Sarah Whittle.

Apologies for absence:- Apologies were received from Jason Harwin, Alan Hazell, Kimber, Julie Mott, John Radford, Joyce Thacker, Janet Wheatley and Chrissy Wright.

**208. MINUTES OF THE PREVIOUS MEETING HELD ON 20TH MARCH, 2013**

The minutes of the meeting held on 20<sup>th</sup> March, 2013, were considered and approved as a correct record subject to the inclusion of Karen Smith's apologies.

Further to Minute No. 204 (Sexual Exploitation), Sara Graham asked for clarification with regard to "how to get the voluntary and community sector better involved in the multi-agency team." Clair Pyper undertook to check this with the Sexual Exploitation Team.

It was also noted that the Home Affairs Select Committee was to publish its report in June.

Dorothy Smith reported that the Child Sexual Exploitation (CSE) Strategy and action plan had been launched at the end of March through the Local Safeguarding Children Board (LSCB). Partner perception was that the documents were Council documents and not owned them.

It was emphasised that, whilst the Council had pulled the Strategy and action plan together and facilitated the consultation, it was important that all parties owned their roles and responsibilities.

The Performance Management Framework was almost complete. It was to be updated on a monthly basis and reported quarterly to the LSCB with the first performance report due in late July.

Practice was underpinned by a fortnightly Silver Group and a monthly meeting of the Gold Group with representation almost secure across relevant agencies. Currently the LSCB was considering the role of the current Exploitation Sub-Committee and the option could be to merge it with the Silver Group.

**209. ISSUES AND CONCERNS**

**Looked After Children's Council**

- Currently meeting for Voice and Influence training and development sessions and preparing presentations on raising the profile of their work
- Weekly "chill and chat" meetings as well as sessions examining life story work – young people talking about their experiences, issues and exploring their feelings around being put into care. They had had sessions looking at self-awareness and self-esteem and had delivered a presentation to the Corporate Parent cluster
- Eleven Million Take Over Day – the young people had attended a regional transport event where those from Rotherham and Sheffield had delivered a workshop around acceptability of transport for young people. They had received an invitation to attend the First Bus depot to speak to some of the drivers to talk about the issues young people faced. They were also to have discussions with PS Rupert Chang about some of the issues
- The Youth Cabinet also been involved in a recent Scrutiny Review around a peer anti-bullying project
- Following a request from Youth Cabinet members an Anti-Fascist Group has been started

#### **Parents and Carers Forum**

- Annual update to be circulated to the Partnership
- The Forum had made quite a difference to parents over the last year - impact on transport arrangements and a massive impact around the voice of parents through the Charter which had been recognised nationally

#### **Inspections**

- There would be a joint inspection looking at Child Sexual Abuse and Child Sexual Exploitation - part of the Joint Inspection Business Plan
- HM Inspectorate of Probation would be focussing on work to protect children. There would be 2 inspections - Adult Offending Work and a thematic inspection encompassing work undertaken both by the Probation Trust and Youth Offending Teams. 6 Probation Trusts would be identified for inspection between October, 2013 and March, 2014, and would be focussing on cases and looking to see if child safeguard issues were being properly assessed and action taken

### **210. CHILDREN AND YOUNG PEOPLE'S VOICE**

Sue Wilson, Performance and Quality Manager, gave the following powerpoint presentation regarding progress on gaining customer feedback and experiences:-

### Aims

- To develop the “learning from customers” culture across the Directorate
- To develop a performance management culture which was not just about targets, indicators and statistics but where it was also about real life experiences and outcomes
- Where the voice of the children, parent and family was considered alongside statistical data, quality assurance findings, learning from complaints and finance to improve services

### Establishing a Baseline

#### How do we currently obtain feedback?

- Every team across the Directorate had now documented and reviewed (with the support of the P&Q Team) the activities they used to capture feedback from child(ren), parents and carers using the Services

#### How teams currently capture customer feedback

- Quality assurance checks
- Minutes
- Case studies
- Interviews
- Videos/DVD
- Assessments including Reviews
- Groups/meetings
- Surveys

#### What was the most appropriate activity

- Mystery shopping in person/telephone
- Listening into calls
- Learning from complaints
- Home truths video diary
- Case study
- Independent customer interviews
- Customer journey mapping
- Website/electronic survey
- Telephone satisfaction survey
- Postal satisfaction survey

### Support focus to date

- Operational safeguarding
- Adoption
- Fostering recruitment and selection
- Fostering supervisory

### Operational Safeguarding

- Completed a pilot using semi-structured face-to-face interviews with families after Case Conference Reviews
- Updated questions and answers around Safeguarding on the Council website

- Set up the facility for Case Conference Chairs to capture on case notes on CCM the children's/parents' views from 1:1 meeting prior to conference (embedded)

#### More activities carried out

- Case Conference booklets were being redesigned and now included a separate page for obtaining the views of the child(ren)/parents prior to Case Conference
- A text message facility was currently being set up to give children/parents/carers a more modern and faster way to put forward their views prior to Case Conference

#### Adoption and Fostering

- Customer journey mapping – tracking the customers' experience of Services from initial point of contact to completion of their journey via telephone conversations

#### Fostering

- Over 20% of the Foster Carers registered with the Council had taken part in telephone surveys
- Surveys were first carried out in September, 2012, and every month since capturing feedback on their initial point of contact and experience at their first Panel
- There had been a change in the customers' experiences
- The Supervisory Team survey focussed on:-
  - The foster carers' expectations of fostering
  - Supervision and support received
  - Their ideas on how they would change Fostering
  - What made it rewarding for them
- Changes suggested were around
  - The lack of availability, communication and support from the child's social workers
  - Removing/amending/clarifying rules and regulations preventing the children from being treated as "normal" as possible (e.g. bathing, hairdressers, going for tea, going on holiday)

#### Next Steps

- Services to change feedback activities accordingly
- Customer feedback to be collated by P&Q and included in performance reports
- Primarily focus should be on "the child"
- Evidence that we listen and act through service improvement

Sue was thanked for her presentation.

## 211. CYPP ACTION PLAN

Sue Wilson, Performance and Quality Manager, and Tracy Blakemore, Corporate Improvement Officer, circulated copies of the Children and

Young People's Action Plan 2013-2016.

It had been developed around the 6 joint key priorities and linked into the Health and Wellbeing Strategy and the Joint Strategic Needs Assessment. The action plan underpinned the plan on a page and identified the high level actions, key links to existing workstreams, lead officers and delivery milestones. In addition, overarching outcome measures had been selected which would allow the Partnership to evidence the difference that its joint working was making to the lives of children, young people and their families.

The action plan now needed a named person to lead on each of the themes.

Resolved:- (1) That the action plan be sent electronically to all Partnership members requesting that:-

(a) they nominate a lead for each of the 6 Priorities  
 (b) notify Sue and/or Tracy of any feedback on the Plan by the close of play Friday 14<sup>th</sup> June 2013.

(2) That an updated version of the Plan be submitted to the Partnership's July meeting.

## 212. 'ONCE UPON A SCHOOL PROJECT'

Deborah Bullivent, Inspire, gave the following presentation:-

### **Facts about Literacy in Rotherham**

Key Stage 2 attainment 2012:

- In Yorkshire, 6% of schools were performing below floor targets
- Reading – 81% of Rotherham and 82% of Sheffield children, against the national average of 86%, attained Level 4 or above
- Writing - 77% of Rotherham, 79% Sheffield children achieved Level 4 against the national average of 81%
- The gap was significantly greater for those families classed as being in the 10% most disadvantaged areas, and increasing each year (apart from the period of RDA project)

Difference made by Inspire projects on 10% most deprived

- 11.4% improvement in English at KS2 across the board
- 11.8% improvement in level 4+ reading for boys
- 11% improvement in level 4+ writing for boys
- 22.6% improvement in reading at level 4+ for EAL pupils

Where is the Rotherham's literacy strategy placed in Rotherham's planning in 2013

- Build a literacy volunteer framework
- Read/Write for Pleasure Ambassadors
- Invest in the quality of interactions children had inside and outside the

- home in relation to print and books
- Ensure there were spaces for literacy which were engaging and conducive to inspiring the thirst for literacy learning
- Ensure children and young people could experience something radically different, something inspirational which injected some energy into the learning
- Enable shared experiences across year groups (older children mentoring)
- Break the cycle of low aspirations in families
- A development of outreach learning programmes which reached families who were often marginalised
- Family Learning Strategy
- Parent involvement
- Extend the reach of literacy – in terms of space, developing new imaginative spaces where children and young people's skills could be extended

### **Once Upon a School**

[http://blog.ted.com/2008/03/18/dave\\_eggers/](http://blog.ted.com/2008/03/18/dave_eggers/)

### **Story Festival 2013**

- Was there an appetite for this in Rotherham?
- Awards for All Lottery funding and now with volunteers as funding was complete
- 36 sessions of learning since February half term
- Hardly any advertising so far
- All children received a Children's University passport
- 209 family members had engaged in at least 3 hours of learning since the Festival began
- 129 children had undertaken from 3 hours to 27 hours (9 different sessions) of learning each so far
- 36 volunteers (75% of these were out of work adults) had signed up
- Feedback was good to outstanding – "Rotherham children need something like this", "it doesn't feel like learning but it is", "my son said this was the best day of his life, and I agree with him".
- Children were writing stories in their own time as a choice.

Discussion ensued with the following issues raised/clarified:-

- Ministry of Stories was the shop in London, hoped to be replicated in Rotherham
- The project was thriving – the work was all free even to schools by bringing in outside funding and selling products in the shop which were designed and contained stories written by the children
- The Ministry of Stories had advertised for franchises of which Rotherham had been successful
- Each franchise had a different theme – Manchester=superheros –



Bristol=inventors – Blackpool=sea creatures – Brighton=weird and strange. Rotherham=magical creatures

- Initially Magical Creatures Supply Co. (Rotherham) had occupied shop premises on Corporation Street but would be relocating to first floor premises temporarily
- The children would come via community engagement, local engagement, referrals from Children's Services and other agencies. The facility would also accommodate/work with children with mental health problems
- Important to stress family learning to encourage parents to read to their children
- The project wanted to support the Town Centre but was difficult to find a property which also had outdoor space. If that was not possible there was the opportunity to have "pop ups" that could be taken to other spaces. The design company had suggested creating a room in the building that was an enchanted forest so the outside could be brought inside
- Needed to draw schools' attention to the project
- Imagination Library to be built into the project

Deborah was thanked for her presentation.

Resolved:- That Karen Smith draw attention to the project at the Learning Communities meeting and request that it be included on the agenda of the Joint Heads meeting.

**213. TRANSFORMING THE EARLY HELP SERVICES AND SUPPORT FAMILIES**

Jenny Lingrell, Troubled Families Co-ordinator, presented a report highlighting some areas of delivery where a new approach was being taken that may, if successful, help to inform wider change to Services.

The areas highlighted were:-

- Enhanced Leadworker provision
- Enhanced support for families where children were subject to a Child Protection Plan delivered by the Voluntary and Community Sector alongside statutory services
- Supporting access to Improving Access to Psychological Services
- New Working relationships with Job Centre Plus

Discussion ensued on the report with the following issues raised/clarified:-

- The Director of Psychological Therapies for RDaSH sat on the national IAPT (Improving Access to Psychological Services) Panel if there were difficulties with the thresholds/clarification required
- As from June, 2013, multi-agency discussion panels would be established to look at complex families and ensure that their packages and commissioning was part of the discussion
- Work was happening nationally to link Troubled Families work with the Public Health agenda. Explicit guidance had been sent to Directors of Public Health and there may be opportunities to explore joint commissioning activities. Through this work, as gaps in provision were explored and an understanding of where those gaps were, it may be a conversation the Partnership would want to follow up through Public Health
- Would be helpful to bring a report on DfE procedures for funding.
- Troubled Families was aligned to Early Help but at present there was not a wide range of services jointly commissioned. There was an opportunity to examine the partnership funding coming into the local authority to deliver services which were benefiting the Partnership as a whole e.g. how much was Mental Health provision costing. The Partnership needed to consider the sustainability of provision against the cost of provision

Resolved:- (1) That the potential for the Families for Change Work to inform different models for Service delivery be noted.

(2) That detailed case studies be submitted in 6 months to exemplify how the highlighted development areas were supporting families.

#### **214. Y&H REGIONAL HEALTH AND WELLBEING ACTION PLAN**

Dorothy Smith, Director of Schools and Lifelong Learning, presented the above Action Plan which considered ways to improve health outcomes for children within Rotherham.

The Plan had been e-mailed to Partnership members requesting their comments which had been incorporated into the final draft.

Karen Smith expressed concern that she had replied with comments which did not seem to have been taken on board. She was particularly concerned about the language used in the document querying what the target audience was and whether it would be understood.

Resolved:- That Joanna Saunders, Sarah Whittle, Sue Wilson, Chrissy Wright, Warren Carratt and Karen Smith meet to discuss the Action Plan further.

**215. COMMISSIONING PRIORITIES (CYPP LINK)**

Claire Burton, Commissioning Officer, presented a report setting out the outturn for the identified commissioning priorities for Children and Young Peoples' Services for 2012/13 detailing the successful completion of commissioning activities and work in progress to be carried forward to 2013/13.

The report also set out proposals for 2013/14 Commissioning Priorities that met the identified priorities for the Directorates, the Partnership and the Health and Wellbeing Strategy as follows:-

- Rotherham Health and Wellbeing strategy – focussing on the Starting Well and Developing Well
- Special Educational Need and Disabilities
- Leaving Care
- Contracts for In-house services
- Budget Action Challenge Plan
- Health and Wellbeing Board Outcomes
- Strategic Commissioning Work Plan

Resolved:- (1) That the outturn achieved against the Commissioning Priorities for 2013/14 be noted.

(2) That that commissioning proposals for 2013/14 be noted.

(3) That regular progress reports be submitted to the Partnership.

(4) That further joint commissioning opportunities in 2013/14 be developed with partners.

**216. DISABLED CHILDREN'S CHARTER - NATIONAL AND LOCAL COMMITMENTS**

The Partnership had been requested to consider the above Charter by the Health and Wellbeing Board (Minute No. 86(1) refers) in light of the Partnership having already signed up to the Every Disabled Child Matters Charter.

Clair Pyper, Interim Director, Safeguarding Children and Families, reported that the 7 points included in the Charter, whilst in principle were well actioned, there would be further work needed to be done.

Discussion ensued. It was felt that the Partnership and Board had spent considerable time considering their principles and values which encompassed every group that they worked with. Children with disabilities were prioritised and could be easily evidenced. It would involve further work to be undertaken to rewrite what already existed to fit the Charter and it was felt that that time and effort could be put to better

use implementing/commissioning good services.

Resolved:- That the Health and Wellbeing Board be informed that the Partnership did not feel that it should sign up to the Charter in light of the comments made above.

**217. MINUTES OF ROTHERHAM LOCAL SAFEGUARDING BOARD**

The minutes of the Rotherham Local Safeguarding Board held on 15<sup>th</sup> March, 2013, were noted.

**218. ANY OTHER BUSINESS.**

Sara Graham reported that Rotherham CYPF Consortium was leading on a Big Lottery Bid, 'Fulfilling Lives,' which had sign up from all statutory partners.

They had been successful at the Expression of Interest stage and were now putting together a bid for the long list stage, which was due in on 7<sup>th</sup> June, 2013. The bid was aimed at supporting the health and wellbeing of children from pre-birth to 3 years. There were 3 key aims which related to diet and nutrition, speech and literacy, social and emotional wellbeing. If the bid got through to the short list stage, there was a £400,000 Development Fund.

The bid would ultimately be awarded to 3-5 local authorities and was worth £30-50M over 8-10 years. Notification of success at the next stage would be made in August, 2013.

**219. DATES OF NEXT MEETING**

Resolved:- That the next meeting be held on Wednesday, 17<sup>th</sup> July, 2013, commencing at 2.00 p.m. in the Town Hall.

**ROTHERHAM****June 2013**

## **Protocol**

between

### **Rotherham Local Safeguarding Children Board**

and

### **Rotherham Health and Wellbeing Board; including the Children, Young People and Families Strategic Partnership**

#### **1 PURPOSE**

This protocol will outline and confirm the functions and responsibilities of Rotherham's key children's strategic partnership planning /commissioning forums and the relationship between them.

#### **2 OBJECTIVE**

To provide clarity in terms of the relationships between the Rotherham Local Safeguarding Children Board and the Rotherham Health and Wellbeing Board, including the Rotherham Children Young People and Families Strategic Partnership; and articulate the specific links and reporting arrangements between them.

#### **3 BACKGROUND**

3.1 Rotherham Local Safeguarding Children Board (RLSCB) is a statutory partnership board and the Children Young People and Families Strategic Partnership (CYPFSP) is a key leadership forum for services provided to children and their families. Both have important, complimentary but distinctive roles in ensuring that the strategic planning needs for children and young people in the borough are understood and met. This includes keeping children safe and promoting their welfare.

3.2 There is not a hierarchical relationship between the Rotherham Local Safeguarding Children Board and Children Young People and Families Strategic Partnership but a joint responsibility to ensure that the needs of

children and young people in Rotherham are prioritised at a strategic level and delivered effectively at an operational level.

- 3.3 The Children Young People and Families Strategic Partnership contributes to the local Joint Strategic Needs Assessment (JSNA) developed by the Health and Wellbeing Board (HWBB). The CYPFSP also reports the Children and Young People's Commissioning Plan into the Health and Wellbeing Board as part of its function, in order to take account of and contribute to the Health and Wellbeing Strategy for the borough. This ensures that local priorities and improved outcomes for children and young people are aligned and identified through the JSNA.

#### **4 ROTHERHAM LOCAL SAFEGUARDING CHILDREN BOARD**

- 4.1 The RLSCB is not a service delivery body; it is the scrutiny and decision making body for multi-agency safeguarding responsibilities within Rotherham. It is a statutory partnership board; its work is directed by statutory guidance.

- 4.2 Safeguarding and promoting the welfare of children is defined as:

- protecting children from maltreatment;
- preventing impairment of children's health or development;
- ensuring that children grow up in circumstances consistent with the provision of safe and effective care; and
- taking action to enable all children to have the best outcomes.

- 4.3 The Chief Executive of the Local Authority has a statutory responsibility for ensuring that an effective Local Safeguarding Children Board is in place for the Local Authority area.

- 4.4 The core objectives of Rotherham Local Safeguarding Children Board which are set out in Section 14 of the Children Act 2004 are:

(a) to coordinate what is done by each person or body represented on the Board for the purposes of safeguarding and promoting the welfare of children in the area; and

(b) to ensure the effectiveness of what is done by each such person or body for those purposes.

- 4.5 Regulation 5 of the Local Safeguarding Children Boards Regulations 2006 and Working Together 2013 further prescribes the functions in relation to these objectives as:

- developing policies and procedures for safeguarding and promoting the welfare of children in the area of the authority.

- communicating to persons and bodies in the area of the authority the need to safeguard and promote the welfare of children, raising their awareness of how this can best be done and encouraging them to do so;
- monitoring and evaluating the effectiveness of what is done by the authority and their Board partners individually and collectively to safeguard and promote the welfare of children and advising them on ways to improve;
- participating in the planning of services for children in the area of the authority; and
- undertaking reviews of serious cases and advising the authority and their Board partners on lessons to be learned.
- Regulation 5 (3) provides that an LSCB may also engage in any other activity that facilitates, or is conducive to, the achievement of its objectives.

4.6 The Rotherham Local Safeguarding Children Board is responsible for challenging each relevant partner, as defined by the Children Act (2006)<sup>1</sup> on their effectiveness in safeguarding children and ensuring their welfare.

4.7 LSCBs do not commission or deliver direct frontline services though they may provide training. While LSCBs do not have the power to direct other organisations they do have a role in making clear where improvement is needed. Each Board partner retains their own existing line of accountability for safeguarding children.

4.8 By September annually Rotherham LSCB will publish a report and business plan.

- RLSCB is chaired by an independent chairperson appointed by the Council Chief Executive in conjunction with Board partners. The RLSCB Chair sits on the CYPFSP.
- The Strategic Director for Children and Young People's Services and the Director of Public Health are RLSCB Members
- The Cabinet Member for Children Young People and Families Services is a participating observer on the RLSCB.

## 5 ROTHERHAM HEALTH AND WELLBEING BOARD

5.1 The Health and Wellbeing Board, a statutory sub-committee of the council established under the Health and Social Care Act 2012, is the single strategic forum to ensure coordinated commissioning and delivery across the NHS, social care, public health and other services directly related to health and wellbeing in order to secure better health and wellbeing outcomes for the

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<sup>1</sup> 'The Local Safeguarding Children Boards Regulations 2006 (Statutory Instrument 2006 No.90)

whole Rotherham population.

5.2 The functions of the Health and Wellbeing Board include:

- To oversee the development of local commissioning plans, to ensure that all commissioning plans take account of the Health and Wellbeing Strategy and are aligned to other policies and plans that have an effect on health and wellbeing. ~
- Assess the needs of the local population and lead on the JSNA
- To hold relevant partners to account for the quality and effectiveness of their commissioning plans
- To enable, advise and support organisations that arrange for the provision of health or social care services to work in an integrated way.
- To ensure that public health functions are discharged in a way that help partner agencies to fully contribute to reducing health inequalities.
- To ensure that there are arrangements in place to provide assurance that the standards of service provided and quality of service are safe, meet national standards and local expectations
- The Cabinet Member for Children Young People and Families Services is a member of the Health and Wellbeing Board
- The Strategic Director for Children and Young Peoples Services is a member of the Health and Wellbeing Board
- The Director of Public Health, who is also a member of the Health and Wellbeing Board is responsible for ensuring that vulnerable children's issues feature in the JSNA (WT 2013)

## **6 ROTHERHAM CHILDREN, YOUNG PEOPLE AND FAMILIES STRATEGIC PARTNERSHIP**

6.1 The Children, Young People and Families Strategic Partnership<sup>2</sup> is the local partnership that brings together the organisations responsible for strategic planning and commissioning of services for children, young people and families with a shared commitment to improving children's lives.

6.2 The functions of the CYPFSP are to<sup>3</sup>:

- a) develop and promote a local vision – set out in the CYP Commissioning Plan – to drive improved outcomes for local children, young people and their families
- b) have in place robust arrangements for inter-agency co-operation

<sup>2</sup> Determined as a statutory obligation under the Apprenticeships, Skills, Children and Learning Act 2009

<sup>3</sup> Extract from consultation of 'Statutory Guidance on co-operation arrangements .....' para 1.7



- c) develop integrated strategies such as commissioning with pooled or aligned budgets, shared data and workforce development
- d) support those strategies via more integrated processes, including effective joint working
- e) develop and promote integrated front line delivery, organised around the child in a setting which supports family life rather than statutory intervention, professional or institutional barriers.
- f) develop the Children and Young People’s Plan, keeping it under review and revising it as necessary
- g) monitor progress and produce a report on the extent to which the CYPFSP partners are delivering their commitments in the Children and Young Peoples Plan and its Commissioning Plan
- h) feedback progress to the Rotherham Health and Well Being Board against delivery of the Children and Young People’s Plan, its Commissioning Plan and contribute to the JSNA and overarching Health and Wellbeing Strategy priorities.
  - The CYPFSP is chaired by the Cabinet Member for Children Young People and Families Services
  - The Strategic Director for Children and Young People’s Services is a member of the CYPFSP.
  - The Director of Public Health is a member of the CYPSP

## **7. THE RELATIONSHIP BETWEEN THE RLSCB AND CYPFSP**

- 7.1 The Independent Chair of the RLSCB is a member of the CYPFSP and the Chair of the CYPFSP is a participating observer on RSLCB.
- 7.2 CYPFSP expects that RLSCB will fulfil its statutory functions and duties under 4.4 – 4.8 of this protocol.
- 7.3 The RLSCB produces an Annual Report which is presented to the CYPFSP. The Annual Report follows a format which accords with statutory guidance and should be completed by September each year.
- 7.4 The Board minutes for both the CYPFSP & RLSCB are shared in a timely manner.
- 7.5 The RLSCB will be formally consulted by the CYPFSP when the Children’s Commissioning Plan is being refreshed. The consultation phase will be sufficiently long to allow a thorough debate to support the RLSCB response to the consultation. The Children’s Commissioning Plan will draw on the ‘support and challenge’<sup>4</sup> from the RLSCB Annual Report and other on-going work.

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<sup>4</sup> See ‘Working Together...’ para 3.63

**8 THE RELATIONSHIP AND COMMITMENTS BETWEEN ROTHERHAM HEALTH AND WELL BEING BOARD, RLSCB AND ROTHERHAM CYPFSP**

8.1 The CYPFSP will provide two formal reports to the Health and Wellbeing Board annually:

- a progress update against the key priorities of both the CYPFSP and the key milestones and targets within the Children and Young People’s Commissioning Plan.

8.2 The RLSCB will submit provide two formal reports to the Health and Wellbeing Board annually:

- Presentation of the RLSCB Annual Report; and
- its 3 year Business Plan

8.3 The Health and Wellbeing Board will ensure that:

- The Joint Strategic Needs Assessment takes account of key areas for vulnerable children identified via the RLSCB Annual Report and the CYPFSP key priorities. The Director of Public Health has specific responsibility for this
- Any refresh/revision to the Health and Wellbeing Strategy should include reference to the CYPFSP Commissioning Plan priorities (which may include some of the priorities identified within the RLSCB Annual Report and Business Plan)

8.4 The Health and Wellbeing Board may also request that the CYPFSP and/or the RLSCB to consider issues for development, action or scrutiny.

**9 SIGNATURES**

Name..... Date.....

**Independent Chair Rotherham Local Safeguarding Children Board**

Name..... Date.....

**Chair Rotherham Health and Wellbeing Board**

Name..... Date.....

**Chair Rotherham Children, Young People and Families Strategic Partnership**

**JUNE 2013**

**ROTHERHAM BOROUGH COUNCIL – CHILDREN, YOUNG PEOPLE AND  
FAMILIES PARTNERSHIP**

<b>1.</b>	<b>Meeting:</b>	<b>Children, Young People and Families Partnership</b>
<b>2.</b>	<b>Date:</b>	<b>17<sup>th</sup> July 2013</b>
<b>3.</b>	<b>Title:</b>	<b>Arrangements for the provision of Emergency Hormonal Contraception (EHC) for young girls aged 14-16</b>
<b>4.</b>	<b>Directorate:</b>	<b>Public Health</b>

**5. Summary:**

The current Public Health Services contract in relation to Emergency Hormonal Contraception (EHC) with Pharmacists operating in Rotherham specifies that they provide the service, free of charge, to females over the age of 16 years. This is an alternative choice of provision within the community to that which is offered by General Practitioners, outreach Nurses, Rotherham Contraception and Sexual Health service and Rotherham Genito-Urinary service. The contract is designed to provide greater access and choice for women/young women in Rotherham and aims to reduce unintended pregnancy and termination of pregnancy.

Females under 16 years are not able to obtain EHC at pharmacies under this contract at present (due to the lack of a robust care pathway in relation to safeguarding issues) denying this vulnerable group of young people a valuable service choice based in the community. However, it is acknowledged that by extending this service to this age group the service providers need to be especially vigilant in relation to any safeguarding issues which may arise. It is proposed, therefore, that the contract be renegotiated to allow for an extended service to females over the age of 14 years and that a care pathway be introduced for females between 14 and 16 years to address any safeguarding issues which may arise.

**6. Recommendations:**

It is recommended that the Public Health Services Pharmacy contract (originally held by NHS Rotherham ) in relation to EHC provision be reviewed and an agreement be sought through the Local Pharmaceutical Committee (LPC) in order to extend the provision to females over the age of 14 years. It is further recommended that a care pathway be developed to enable Pharmacists to automatically refer all young women between the ages of 14 and 16 years to Rotherham Integrated Youth Support Services (IYSS).

**7. Proposals and Details:**

It is proposed that the Public Health Service Pharmacy Contract be reviewed following the transfer from Primary Care Trust to Local Authority contract management. It is acknowledged that an extension of the contract to provide for females aged between 14 and 16 years could provide a valuable service which is, at present lacking. When the service was first introduced in Rotherham EHC was offered to young girls but it was subsequently

reviewed in the light of a need to develop robust protocols. During the 2009/2010 period a total of 811 woman accessed EHC under this scheme. 27% of the women were under 18 and 6% were young women under the age of 16. The service should also contribute to the decline in young teenage pregnancies. It is, however, acknowledged that there are potential safeguarding issues related with the extension of this service. It is, proposed, therefore, that Public Health works closely with members of the LPC and Rotherham IYSS to develop a comprehensive care pathway for any young woman under 16 years accessing EHC provision in a Pharmacy setting. It is envisaged that any Pharmacist supplying EHC to a young woman aged between 14 and 16 years would then automatically refer through to the appropriate contact within Rotherham IYSS.

### **8.Finance:**

There are no additional financial concerns as the overall contractual value for the Pharmacy EHC contract in Rotherham takes into account an estimated level of activity across all ages.

### **9.Risks and Uncertainties:**

Rotherham has made good progress in relation to tackling unintended teenage pregnancy, the numbers having fallen in recent years. The lack of community based EHC provision for younger, vulnerable young women could lead to an upward trend in unintended pregnancy, reversing the progress that has been made in the borough. It has been acknowledged, however, that there are safeguarding issues to be taken into consideration with sexual activity below the age of 16 years and, therefore, an automatic referral system between Community Pharmacists and IYSS is being developed.

### **10.Policy and Performance Agenda Implications:**

This recommendation has implications for performance in relation to the Public Health Outcomes Framework (Teenage pregnancy). The introduction of the safeguarding measures should also be seen as contribution to measures designed to identify and prevent sexual exploitation.

### **11.Background Papers and Consultation:**

Public Health Outcome Framework for England, 2013 - 2016

### **Contact Name :**

**Gill Harrison, Public Health Specialist,  
Jo Abbott, Consultant in Public Health**

# Rotherham Children and Young People's Action Plan 2013 – 2016

## Our Mission

*'To improve the lives of all children and young people.'*

The Children and Young People's Plan has been replaced by a Plan on a Page which has been produced by the CYPS Partnership. This has been developed around six joint key priorities and is linked into the Health and Wellbeing strategy and Joint Strategic Needs Assessment.

## Our Priorities

- 1. We will ensure children have the best start in life*
- 2. We will engage with parents and families*
- 3. We will reduce the harm to children & young people who are exposed to domestic abuse, alcohol & substance misuse and neglect*
- 4. We will work with partners to eradicate child sexual exploitation from the borough*
- 5. We will focus on all children and young people making good progress in their learning and development*
- 6. We will target support to families in greatest need to help access learning/employment opportunities*

## Needs Assessment

The following are the needs highlighted in the Health & Wellbeing Strategy/JSNA

- Low birth weight & high infant mortality*
- High smoking rates in pregnancy*
- Low breastfeeding rates*
- High teenage conceptions*
- High obesity rates*
- Low attainment, skills and aspirations*
- Low levels of physical activity*
- High rates of emotional, behavioural or attention deficit disorders*
- High levels of worklessness and benefit culture*
- High emergency admissions*
- Meeting the needs of increasingly diverse minority ethnic and migrant communities*
- High levels of oral Disease*

*"Many families feel trapped in a cycle of poverty with little prospect to escape....."*

This action plan underpins the plan on a page and identifies the high level actions, key links to existing work-streams, lead officers and delivery milestones. In addition overarching outcome measures have been selected which will allow the partnership to evidence the difference our joint working is making to the lives of children, young people and their families.

**PRIORITY 1 :**

**We will ensure children have the best start in life**

**Strategic Lead: Frances Hunt, Assistant Head Of Ses: 0-7**

ACTION	KEY LINKS	DELIVERY MILESTONES	LEAD/S
<p>(i) We will ensure that parents receive good health information, advice and support during pre-birth and preschool</p>	<ul style="list-style-type: none"> <li>• Alcohol consumption in pregnancy</li> <li>• Best Start: pre-birth to 5 strategic group</li> <li>• Breastfeeding Strategy</li> <li>• Delivery of health activities through children's centre service delivery</li> <li>• Infant Mortality Action Plan</li> <li>• Maternity Action Plan</li> <li>• Oral Health Promotion programmes e.g. bottle to cup, distribution of toothbrush and paste</li> <li>• Smoking in pregnancy pathway</li> </ul>	<ul style="list-style-type: none"> <li>• Rotherham midwives consistently and accurately assess levels of alcohol consumption during pregnancy by the systematic use of the screening tool Audit C</li> <li>• Rotherham Midwives, where positive audit C complete full audit and refer to specialist midwifery service</li> </ul>	<p>Delivery - RFT Midwifery services</p> <p>Strategy - Anne Charlesworth</p>
		<ul style="list-style-type: none"> <li>• Audits of mothers knowledge on infant feeding – including dental health</li> <li>• Audits of professional knowledge on infant feeding - including dental health</li> <li>• Distribution of toothbrush and paste at 6 to 9 month checks</li> <li>• Increase in breastfeeding initiation rates (baseline 58% 2012/13)</li> <li>• Increase in the number of Breastfeeding Friendly Public Places in Rotherham</li> <li>• Increased uptake of the Rotherham Breast Buddies</li> <li>• Progress against UNICEF accreditation for Hospital and Community Services</li> <li>• The prevalence of breastfeeding at 6 – 8 weeks will increase (baseline 30% 2012/13)</li> </ul>	<p>Delivery RFT – Maternity and Health Visiting Children's Centres and Early Years(Mary Smith)</p> <p>Strategy - Public Health Rebecca Atchinson</p>

ACTION	KEY LINKS	DELIVERY MILESTONES	LEAD/S
		<ul style="list-style-type: none"> <li>• Increase in Safe Sleeping Action Plans completed</li> <li>• Increased access and uptake of Healthy Start Scheme including maternal and children's vitamins</li> <li>• Reduced infant mortality rate</li> </ul>	<p>Delivery - RFT – Maternity and Health Visiting</p> <p>Children's Centres - Mary Smith</p> <p>Strategy - Public Health Rebecca Atchinson</p>
		<ul style="list-style-type: none"> <li>• Fall in number of mothers who smoke at delivery (baseline 19.3% (12/13 outturn))</li> <li>• Higher percentage of mothers who successfully give up smoking (baseline 45% of those who set a date to quit smoking are successful)</li> </ul>	<p>Delivery - RFT</p> <p>Strategy - Alison Iliff</p>
<p>(ii) We will provide support for new parents including help to develop their child's communication and language, social, emotional and physical development from birth</p>	<ul style="list-style-type: none"> <li>• "I Can" strategies for parents to support their children from birth to 3</li> <li>• Children's Centre's</li> <li>• Early Year's setting and schools</li> <li>• Integrated joint Health/Education assessment</li> <li>• Thrive Strategies</li> </ul>	<ul style="list-style-type: none"> <li>• Parents of children in children's centres are effectively using "I Can/Thrive" strategies to support the development of their child's communication, language and PSED – impact on children's ages and stages</li> <li>• The new joint 2 year old Health and Education Review (Integrated joint Health/Education assessment) involving health colleagues, children centre early years practitioners, the private and voluntary sector early education and childcare providers and parents will be piloted in the Aughton Early Years children centre reach area</li> <li>• Rollout to all children's centres by September 2013</li> <li>• Rollout to all PVI by September 2014</li> <li>• Pilot with child minder's by September 2014 in preparation for a phased roll out to other areas</li> </ul>	<p>France Hunt Mary Smith</p>

ACTION	KEY LINKS	DELIVERY MILESTONES	LEAD/S
(iii) We will continue to develop activities for all families that promote healthy eating and lifestyles	<ul style="list-style-type: none"> <li>• Children’s Centres</li> <li>• Healthy Packed Lunch Policy</li> <li>• Healthy Schools</li> <li>• Obesity Strategy</li> <li>• Rotherham Play Strategy</li> <li>• School Meals</li> </ul>	<ul style="list-style-type: none"> <li>• 55% of schools to implement a healthy packed lunch policy by March 2016</li> </ul>	Kay Denton-Tarn
		<ul style="list-style-type: none"> <li>• Overweight and obesity in primary school age children in reception and year 6 will decrease (measured by National Child Measurement Programme)</li> <li>• Targets to be established in new service specifications for achievement of reduction in weight or weight maintenance for children accessing weight management services</li> </ul>	Delivery - RFT, Clifton Lane Medical Centre, MoreLife Ltd, DC Leisure  Strategy - Joanna Saunders
		<ul style="list-style-type: none"> <li>• Improve school meal process and promote service</li> <li>• Increased uptake of school meals</li> <li>• Maximise health impact school meals can have on children and young people</li> </ul>	Ron Parry
(iv) We will ensure that every child is registered on the Child Health Information System and increase awareness with parents/carers about the childhood vaccination programme	<ul style="list-style-type: none"> <li>• Childhood vaccination programme</li> <li>• Promotion of the childhood vaccination programme through children centre delivery</li> </ul>	<ul style="list-style-type: none"> <li>• Achieve above 90% across all areas of the childhood vaccination programme – sharing vaccination uptake with staff working in early years – ensuring parents have the right information</li> <li>• Ensure all children are registered on the Child Health Information System</li> <li>• Ensure babies identified at increased risk from TB or Hepatitis B is appropriately vaccinated. Follow up DNA’s to maximise protection</li> <li>• Monitor uptake and address under performance with individual providers</li> <li>• Work with NHS England Area Team to ensure the appropriate commissioning of immunisation services</li> </ul>	Di Birkinshaw – RFT Children and Young People’s Health Services  Fiona Jorden (NHSE AT)  Kathy Wakefield (RMBC PH)



ACTION	KEY LINKS	DELIVERY MILESTONES	LEAD/S
(v) We will ensure that every child is registered to a dentist in their local area and increase awareness with parents/carers to ensure attendance at dental health appointments	<ul style="list-style-type: none"> <li>• Children's centre delivery of oral health awareness</li> <li>• Dental Health of looked after children and children with special needs</li> <li>• Oral health programmes</li> </ul>	<ul style="list-style-type: none"> <li>• Ensure that an increasing proportion of children regularly attend a dentist</li> <li>• Identify children with special needs as early as possible, to enable an appropriate dental health preventive programme to be initiated for each child as early as possible</li> <li>• Increase knowledge and awareness of parents/carers to ensure dental disease is prevented as far as possible through sound dietary patterns and oral hygiene practices as part of everyday life</li> </ul>	<p>Community Development Structure</p> <p>NHS England/ Oral Health Promotion/ Dental Public Health</p>
(vi) We will reduce teenage pregnancy	<ul style="list-style-type: none"> <li>• Teenage pregnancy rates</li> <li>• Work through children centre delivery</li> </ul>	<ul style="list-style-type: none"> <li>• Implemented targeted preventative interventions for those at highest risk of teenage pregnancy</li> <li>• Increased access to contraception</li> <li>• Parental engagement to assist with providing education, advice and support around relationships and sexual health</li> </ul>	Anne Clack
(vii) We will improve the mental health of children and young people by promoting resilience and mental wellbeing, and providing early and effective evidence based treatment interventions for those who need it	<ul style="list-style-type: none"> <li>• CAMHS, including CYP-IAPT</li> <li>• Early Help Strategy</li> <li>• Vulnerable Groups</li> <li>• Working Together 2013</li> </ul>	<ul style="list-style-type: none"> <li>• Increased easy access to mental health and emotional well-being services and interventions for children and young people</li> <li>• Increase access to counselling through provision of drop –in sessions including self-referral for secondary school students</li> <li>• Sustained delivery of 1:1 mental health support and counselling by Rotherham &amp; Barnsley Mind in Rotherham Schools, including primaries</li> </ul>	Sara Graham Simon Priest

## HOW WE WILL EVIDENCE THE DIFFERENCE WE HAVE MADE

1. Breastfeeding Rates
2. Childhood obesity
3. Infant Mortality
4. Levels of oral disease
5. Lifestyle Survey
6. Teenage Pregnancy rates
7. Vaccinations and Immunisations

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**Strategic Lead: Sue Wilson, Performance & Quality Manager**

ACTION	KEY LINKS	DELIVERY MILESTONES	LEAD/S
<p>(i) We will identify and work with families at the earliest stages of need to allow them to stay empowered, to take responsibility for their own situations, to build resilience, and enable them to regain control and become independent of services</p>	<ul style="list-style-type: none"> <li>• Children’s Centres delivery through universal and targeted offers</li> <li>• Early Help Strategy</li> <li>• Families for Change</li> <li>• Family CAF</li> <li>• Families Information Service</li> <li>• Family Recovery Programme</li> <li>• Rotherham Safeguarding Children’s Board</li> </ul>	<ul style="list-style-type: none"> <li>• Develop a performance management framework for Early Help within the LA (August 2013)</li> <li>• Established an Early Help Support Panel to provide a point of escalation for “stuck” families (June 2013)</li> <li>• Provide an annual review of the progress made and identify gaps (March 2014)</li> <li>• Review the effectiveness of the Early Help Prospectus offer and report to the LSCB on partner engagement (March 2014)</li> </ul>	<p>Warren Carratt Mary Smith</p>
<p>(ii) We will develop customer feedback and the voice of the child throughout the partnership ensuring their views, feelings and wishes inform future service delivery and improvement</p>	<ul style="list-style-type: none"> <li>• Children’s Centres – parents forums and advisory boards</li> <li>• Customer Insight</li> <li>• Customer Journey/pathways</li> <li>• Ofsted inspection frameworks</li> </ul>	<ul style="list-style-type: none"> <li>• December 2013</li> </ul>	<p>Sue Wilson</p>
<p>(iii) We will improve parent and carer satisfaction by implementing the Charter for Parent and Child Voice across schools, children’s centres, early years settings and services</p>	<ul style="list-style-type: none"> <li>• Customer Access</li> <li>• Customer Voice</li> </ul>	<ul style="list-style-type: none"> <li>• Currently have 18 schools and settings championing the Charter</li> <li>• Every Rotherham school and service to be working towards the Charter (in some way) by 2015</li> </ul>	<p>Rotherham Parent Forum</p>

ACTION	KEY LINKS	DELIVERY MILESTONES	LEAD/S
(iv) We will work together to support young carers and their families to ensure that they are identified and provided with the appropriate support	<ul style="list-style-type: none"> <li>Rotherham's Joint Action Plan for Carers 2013-2016</li> </ul>	<ul style="list-style-type: none"> <li>Identify and evaluate what support Integrated Youth Support (IYS) offer young carers</li> <li>Promote a Family CAF to identify health needs and wider Early Help support</li> <li>Raise awareness in schools and in other young people's settings of support for Young Carers and of the Young Carers Service – to be reviewed September 2013</li> <li>Support the Rotherham UK Youth Parliament Members in developing a Young Carers Card – to be reviewed September 2013</li> </ul>	<p>Showkat Ali Kay Denton Paul Theaker</p>
(v) We will ensure Children & Young People's Services delivering the spectrum of universal to complex services make the best possible use of the specialist substance misuse services	<ul style="list-style-type: none"> <li>Alcohol Strategy</li> <li>Health &amp; Well Being Strategy</li> <li>IYSS</li> <li>RDaSH</li> <li>Rotherham Safeguarding Children's Board</li> </ul>	<ul style="list-style-type: none"> <li>Ensuring CYPS systematically screen on drug and alcohol use making referrals and asking for specialist help at the earliest possible stage</li> <li>Substance misuse services engagement with core groups, and reviewing processes including specialist Midwifery Services</li> </ul>	<p>Delivery – CYPS Strategy - Matt Pollard RDASH Delivery - Public Health Strategy – CYPS</p>
(vi) We will support services working with adults who are misusing substances, and who also have children to engage in family based activities as part of their recovery	<ul style="list-style-type: none"> <li>Alcohol Strategy</li> <li>Health &amp; Well Being Strategy</li> <li>Rotherham Safeguarding Children's Board</li> <li>RDaSH</li> </ul>	<ul style="list-style-type: none"> <li>Continue to expand and support families in attending at venues such as the funky monkey recovery café</li> <li>Encourage families to attend events such as the regional celebration of recovery</li> <li>Maintain and expand the women's group and child care provision</li> </ul>	<p>Delivery - Matt Pollard RDASH Strategy - Anne Charlesworth</p>

## HOW WE WILL EVIDENCE THE DIFFERENCE WE HAVE MADE

1. Customer Journey Maps
2. Customer satisfaction
3. Family CAF engagement rates and outcomes
4. Parent and Child Voice take-up and outcomes

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**PRIORITY: 3**

**We will reduce the harm to children and young people who are exposed to domestic abuse, alcohol/substance misuse and neglect**

**Strategic Lead: Clair Pyper, Interim Director of Safeguarding Children and Families**

ACTION	KEY LINKS	DELIVERY MILESTONES	LEAD/S
(i) We will maximise opportunities for early intervention and prevention approaches to alcohol and substance misuse across the partnership	<ul style="list-style-type: none"><li>• Alcohol Strategy</li><li>• Children's Centres</li><li>• Health &amp; Well Being Strategy</li><li>• Health Schools</li><li>• IYSS</li><li>• School and FE College Drug &amp; Alcohol education programmes</li><li>• VCS</li></ul>	<ul style="list-style-type: none"><li>• All partners who deliver alcohol messages to adopt the single alcohol message and ensure delivery reflect this</li><li>• Partners to have completed and promote CIAN e learning</li><li>• Re instate the substance misuse scenario in Crucial Crew</li><li>• Re-commission tier 2 alcohol services to deliver more preventative work and Training/education opportunities</li></ul>	Delivery – Mel Howard  Strategy - Anne Charlesworth
(ii) We will ensure adult substance misuse services are undertaking appropriate safeguarding checks with all clients, including undertaking home visits as necessary within the agreed protocols	<ul style="list-style-type: none"><li>• Alcohol Strategy</li><li>• Children's Centres</li><li>• Health &amp; Well Being Strategy</li><li>• Rotherham Safeguarding Children's Board</li></ul>	<ul style="list-style-type: none"><li>• Annual audit process - to monitor compliance with existing safeguarding protocols</li></ul>	Delivery - Matt Pollard RDaSH  Strategy – Anne Charlesworth

ACTION	KEY LINKS	DELIVERY MILESTONES	LEAD/S
(iii) We will maintain the Know The Score specialist young people's service and capacity. Enabling continued delivery of both casework with individual young people using substances, supporting CYPS and schools in delivering preventative messages	<ul style="list-style-type: none"> <li>• Alcohol Strategy</li> <li>• Health &amp; Well Being Strategy</li> <li>• RDaSH</li> <li>• SRP</li> </ul>	<ul style="list-style-type: none"> <li>• Enhance tier 1 + 2 reporting</li> <li>• Maintain tier 3 treatment data and level</li> <li>• Secure funding for 2014/15</li> </ul>	<p>Delivery - Matt Pollard RDaSH</p> <p>Strategy – Anne Charlesworth</p>
(iv) We want to identify baseline information on the percentage of cases of children in the CAF process where parent/carer substance misuse is a concern	<ul style="list-style-type: none"> <li>• Health &amp; Well Being Strategy</li> <li>• Rotherham Safeguarding Children's Board</li> </ul>	<ul style="list-style-type: none"> <li>• 2013/14 to establish a mechanism for collecting this information and establishing a baseline</li> <li>• 2014/15 onwards to look towards reducing or at least maintaining this position</li> </ul>	CYPS
(v) We will continue to develop domestic abuse awareness in schools	<ul style="list-style-type: none"> <li>• Anti-bullying</li> <li>• Sexual exploitation</li> </ul>	<ul style="list-style-type: none"> <li>• Promote agencies where support and advice can be sought</li> <li>• Promote appropriate resources e.g. 'Expect Respect' Women's Aid curriculum resource, to all phases</li> </ul>	Kay Denton-Tarn
(vi) Deliver training to the children and young people's workforce to raise awareness of the impact of domestic abuse on children and young people	<ul style="list-style-type: none"> <li>• Domestic abuse strategy</li> <li>• Early Help Strategy</li> <li>• Health &amp; Well Being Strategy</li> <li>• Rotherham Safeguarding Children's Board</li> </ul>	<ul style="list-style-type: none"> <li>• April 2013 - launch of the Early Help Prospectus for low level DA training, and the RLSCB Prospectus for Module 2 training</li> <li>• Next milestone will be September 2013 and six months thereafter, reviewing progress of update and evaluation on a regular basis.</li> </ul>	Warren Carratt

ACTION	KEY LINKS	DELIVERY MILESTONES	LEAD/S
<p>(vii) We will work together to safeguard children and young people by identifying signs of neglect and taking appropriate action and support to prevent escalation</p>	<ul style="list-style-type: none"> <li>• Early Help Strategy</li> <li>• Rotherham Safeguarding Children's Board</li> <li>• Working Together 2013</li> </ul>	<ul style="list-style-type: none"> <li>• July 2013 – improved step down of CIN/CP cases into early help by utilising Troubled Families contracts (YWCA)</li> <li>• August 2013 – Analysis of long term neglect case longitudinal study following multi-agency review of selected cases</li> <li>• August 2013 – Establishment of Early Help Support Panel to ensure robust packages of support are in place where neglect is manifestation of need</li> <li>• September 2013 - Improved performance management systems in place to capture step down to Early Help Assessment Team where contacts are made to CART</li> <li>• September 2013 – consultation of draft local protocol, which will provide a localised approach to multi-agency safeguarding practices</li> </ul>	<p>Warren Carratt</p>

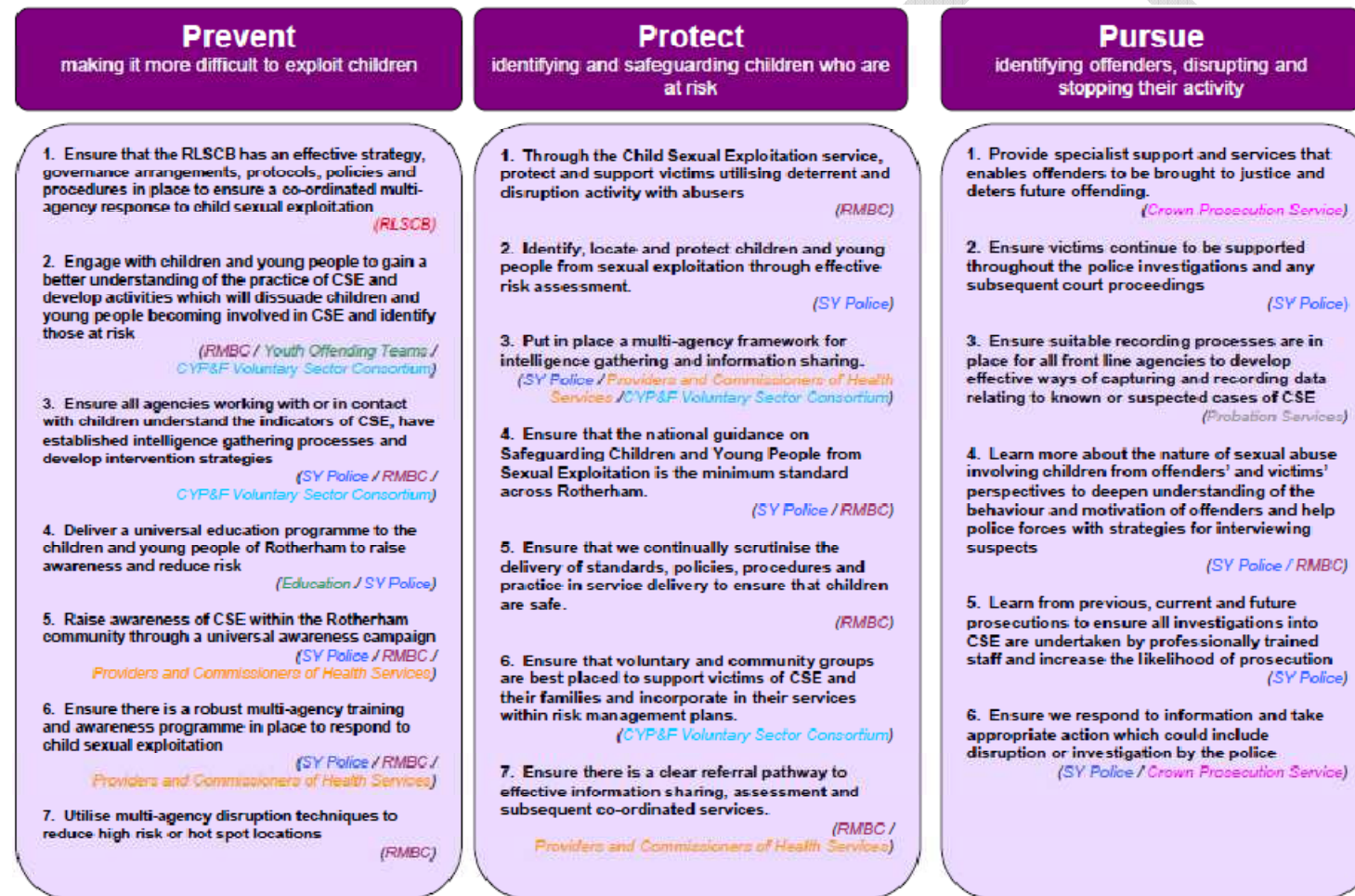
**HOW WE WILL EVIDENCE THE DIFFERENCE WE HAVE MADE**

1. Number of children on Child Protection Plans due to neglect
2. Social care contacts and referrals linked to;
  - Domestic Abuse
  - Alcohol
  - Substance Misuse
  - Neglect
3. Young People's Alcohol usage (Lifestyle Survey)



Strategic Lead: Jason Harwin, Chief Superintendent,

The Child Sexual Exploitation Strategy plan on a page



Each partner will have in place its own agency action plan to support overall delivery of the Child Sexual Exploitation strategy.

The Rotherham Local Safeguarding Children Board, through a specific performance management framework will ensure partners work together effectively to achieve the shared key strategic priorities for 2013 – 2016 and will review progress on the delivery of the strategy on a quarterly basis.

They will also hold agencies to account through the outcome of Serious Case Reviews, joint Child Sexual Exploitation operations and a review of implementation of Learning Lessons Reviews.

**PRIORITY: 5**

**We will focus on all children and young people making good progress in their learning and development**

**Strategic Lead: Karen Borthwick, Head of School Effectiveness Service**

ACTION	KEY LINKS	DELIVERY MILESTONES	LEAD/S
<p>(i) We will support the Learners First school partnership group to deliver their mission of;</p> <ul style="list-style-type: none"><li>▪ all students making at least good progress;</li><li>▪ no underperforming cohorts;</li><li>▪ all teachers delivering at least good learning;</li><li>▪ all school moving to at least the next level of successful performance</li></ul>	<ul style="list-style-type: none"><li>• Floor targets and standards</li><li>• Learners First</li><li>• Ofsted inspection frameworks</li><li>• School Effectiveness</li></ul>	<ul style="list-style-type: none"><li>• All schools to be judged by OFSTED as good or outstanding overall effectiveness grade within the next three years</li><li>• All schools to be judged by OFSTED with a good or outstanding quality of teaching grade within the next three years</li><li>• No secondary schools below the DfE floor standard in 2013</li><li>• Reduce the FSM gap to the national average FSM gap by 2013</li><li>• Reduce the number of primary schools below the new DfE floor standard to 5 schools in 2013</li><li>• To be in line with the national average in the expected levels of progress from the end of KS2 to KS4 in mathematics in 2013</li><li>• To continue to exceed the national average in the expected levels of progress from the end of KS2 to KS4 in English</li><li>• To reduce the gap in the expected levels of progress from the end of KS1 to KS2 in reading, writing and mathematics to within 2% of the national average in 2013 and in line with the national average in 2014</li></ul>	<p>Karen Borthwick Dorothy Smith</p>

<p>(ii) We will work with schools, young people and families to ensure a high level of attendance and engagement in learning</p>	<ul style="list-style-type: none"> <li>• Early Years and Child Care Service</li> <li>• Education Welfare</li> <li>• Families for Change</li> <li>• Persistence Absence</li> </ul>	<ul style="list-style-type: none"> <li>• Local Authority and school level primary and secondary attendance rates to be in line with the national average</li> <li>• Persistent absence to be in line with the national average</li> <li>• Raising awareness and increasing take up by parents of early education for children at the age of 2, 3 and 4</li> </ul>	<p>Karen Borthwick Dorothy Smith</p>
<p>(iii) We will ensure there is effective post 16 place planning based upon the learning and support needs of our young people including those with LDD and from opportunities available within the VCS</p>	<ul style="list-style-type: none"> <li>• Learners First</li> <li>• Ofsted inspection frameworks</li> <li>• Statutory responsibility for the LA is to ensure sufficient learning place for every 16-19 (25) year old (although the LA has limited powers to achieve this in the sense of no funding, commissioning, contracting or quality assurance levers)</li> </ul>	<ul style="list-style-type: none"> <li>• Development of bespoke packages with other agencies and utilising VCS</li> <li>• Learning Disability assessment completed for learners with Statements or those with significant additional needs.</li> <li>• Mapping of provision to identify gaps in LDD post 16 Offer</li> <li>• Work done with schools to identify future need</li> </ul>	<p>Fiona Featherstone</p>
<p>(iv) We will continue to narrow the gap in the education of our most vulnerable groups</p>	<ul style="list-style-type: none"> <li>• Boys – White British</li> <li>• Children eligible for Free School Meals</li> <li>• Children in Need</li> <li>• Looked After Children</li> <li>• New Arrivals</li> <li>• SEN</li> </ul>	<ul style="list-style-type: none"> <li>• Improved attainment of children by the age of 5</li> <li>• Improve the outcomes of all vulnerable groups.</li> <li>• Improve the performance of pupils eligible for free schools meals by 10% at KS2 and 8% at KS4 by 2013 in line with the national average</li> <li>• Vulnerable groups are not over-represented in the NEET's category</li> </ul>	<p>Karen Borthwick Dorothy Smith</p>

<p>(v) We will continue to focus on the improvement of communication, language and literacy skills of children and young peoples</p>	<ul style="list-style-type: none"> <li>• Children’s Centre’s – local hub of championing improvements to children’s communication and language development with practitioners and parents and other PVI settings(0-5)</li> <li>• ECAT</li> <li>• “I Can” strategies</li> <li>• Imagination Library</li> <li>• Inspire Rotherham</li> <li>• Library Strategy</li> </ul>	<ul style="list-style-type: none"> <li>• Customer and Cultural Services will work with partners to deliver family learning activities in locations across the Borough, including in our libraries, customer service centres, Clifton Park Museum and Boston Castle</li> <li>• “I Can” trainers to cascade their training to lead teachers of children’s centres/PVI practitioners/child care officers at a local level by March 2014</li> <li>• Summer Reading Challenge, open to children from 4-11, within our Libraries and Customer Service Centres, supporting a programme of holiday time reading-related activities</li> <li>• We will deliver the book-gifting offers of Booktrust, including the Baby pack, the Treasure pack and the Booktime packs for children as they go into the Reception year</li> <li>• We will offer Chatterbooks (<i>The Reading Agency</i>) groups in our Libraries and Customer Service Centres, delivering reading groups with related activities for children of KS1 and KS2 ages</li> <li>• We will offer children opportunities to use our services in groups, supported by their school, including visits to libraries, Clifton Park Museum, heritage sites and the Civic Theatre pantomime</li> <li>• We will offer song, story and simple craft activities for preschool children in Libraries &amp; Customer Service Centres</li> </ul>	<p>Elenore Fisher France Hunt Dorothy Smith</p>
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**HOW WE WILL EVIDENCE THE DIFFERENCE WE HAVE MADE**

1. English, reading and literacy achievement levels
2. Key stage 2 and 4 attainment floor targets
3. Key stage 2 and 4 attainment levels
4. Narrowing the gap measures for LAC, CIN, BME & Free school meals
5. School attendance & persistence absence
6. School inspections

**PRIORITY: 6**

**We will target support to families in greatest need to help access learning/employment opportunities**

**Strategic Lead: Warren Carratt, Service Manager - Strategy, Standards & Early Help**

ACTION	KEY LINKS	DELIVERY MILESTONES	LEAD/S
<p>(i) We will ensure appropriate, targeted and integrated learning and support for our most vulnerable young people who are, or are at risk of becoming, NEET</p>	<ul style="list-style-type: none"> <li>Care Leavers</li> </ul>	<ul style="list-style-type: none"> <li>Improve access of LAC / Care leavers to the youth work curriculum to build their confidence and social skills</li> <li>Provide work experience pre 16 and work trials post 16 through liaison with schools the Get Real team and Action for Children</li> <li>Provide support intensive mentoring activity in year 12 to improve retention and transitions at the end of year 12</li> <li>Work with employers to provide bespoke opportunities to young people to develop employability skills</li> <li>Develop a grant /bursary fund to support care leavers to access work experience and employment opportunities</li> <li>Work closely with Job Centre plus to source vacancies and support young people leaving care to access and secure jobs</li> </ul>	<p>Kerry Byrne</p> <p>Sandra Gabriel</p> <p>IYSS Youth Support Worker Care Leaver</p> <p>Carole Davison</p> <p>Carole Davison</p> <p>Carole Davison</p>
	<ul style="list-style-type: none"> <li>Integrated Youth Support Service</li> </ul>	<ul style="list-style-type: none"> <li>Support engagement and progression of vulnerable groups aged 11- 19 in learning through integrated case working at locality level to overcome barriers and address needs</li> <li>Work with the local authority RPA team and all learning providers to re-engage those who are disengaged from learning aged 11- 16 or NEET aged 16-18</li> <li>Involve young people in the design, delivery and evaluation of the service</li> </ul>	<p>IYSS Managers</p> <p>IYD Managers Learning Partnership and Youth Offending IYSS Managers</p>

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ACTION	KEY LINKS	DELIVERY MILESTONES	LEAD/S
	<ul style="list-style-type: none"> <li>Raising Participation</li> </ul>	<ul style="list-style-type: none"> <li>Develop progression pathway protocols with post-16 providers to ensure that entry criteria and data sharing needs are agreed and acted upon across the partnership</li> <li>Develop partnership arrangements with schools regarding coordinated delivery of targeted support to vulnerable students to ensure that all young people are fully supported to engage in learning and make a sustainable transition to post 16 learning</li> <li>Implement managed transitions for young people with LDD, utilising the S139a and managed moved protocols</li> <li>Develop and publish the post 16 Rotherham Offer for students with LDD</li> <li>Ensure that tailored provision is developed around traineeships ESF, and Youth Contract to address the learning needs of all Rotherham's young people not in education employment and training , with a particular focus on the most vulnerable young people in the borough</li> <li>Develop apprenticeship pathways and transition support for 16,17 and 18 year olds</li> <li>Manage the September Guarantee for 16 and 17 year olds and ensure offers lead to participation in line with RPA</li> </ul>	<p>Collette Bailey</p> <p>Ewan Cumming</p> <p>Fiona Featherstone</p> <p>Fiona Featherstone</p> <p>Anthony Evans/ Collette Bailey</p> <p>Janet Andrew</p> <p>Collette Bailey</p>

ACTION	KEY LINKS	DELIVERY MILESTONES	LEAD/S
	<ul style="list-style-type: none"> <li>• Teenage Parents</li> </ul>	<ul style="list-style-type: none"> <li>• Provide support to young parents to access tailored, accredited and non-accredited, personal and social development opportunities to improve motivation, confidence, aspiration, life and employability skills including volunteering and enterprise</li> <li>• Provide intensive transitional support to ensure successful retention, achievement and progression to post 16 opportunities including information on care to learn</li> <li>• Deliver locality based targeted work with young women at risk of early pregnancy and young men at risk of early fatherhood, with particular emphasis on the 11 highest deprivation neighbourhoods</li> </ul>	<p>Kerry Byrne</p> <p>Carol Davison</p> <p>IYSS Manager lead Health and Well Being /Locality Managers</p>
<p>(ii) We will support families to look after their children when they need it and helping children and young people and their families to prioritise healthy and positive behaviour</p>	<ul style="list-style-type: none"> <li>• Behaviour Support</li> <li>• Children's Centres</li> <li>• Families for Change</li> <li>• Integrated Youth Support Service</li> <li>• Pupil Referral Units</li> <li>• Safer Rotherham Partnership</li> <li>• SES Outreach</li> </ul>	<ul style="list-style-type: none"> <li>• Delivery of Healthy activities through Children Centre service delivery</li> <li>• Short term targeted individual and small group support in schools to promote positive behaviour for learning and the successful inclusion of those children identified by schools as in need of early intervention.</li> <li>• Seven outreach mentors to be deployed to work in two Learning Communities</li> </ul>	<p>Warren Carratt Frances Hunt Paula Williams</p>

ACTION	KEY LINKS	DELIVERY MILESTONES	LEAD/S
<p>(iii) We will support adults to access learning to improve their chances of securing or retaining employment</p>	<ul style="list-style-type: none"> <li>• Adult Safeguarding Learning</li> <li>• Adult Skills Budget</li> <li>• Children's Centres</li> <li>• Family Learning</li> <li>• Libraries &amp; Customer Service Centres</li> </ul>	<ul style="list-style-type: none"> <li>• Completion of Community Learning Strategy</li> <li>• Delivery of adult learning through children's centre delivery</li> <li>• Delivery of associated actions (as per strategy)</li> <li>• Increase the use of children's centres, Libraries &amp; Customer Service Centres as places to access information and improve skills, including offering free access to and assistance to use the internet</li> <li>• Offer opportunities for apprenticeships, placement and volunteering within Customer and Cultural Services</li> <li>• Provide assessment of need, in particular with regard to basic skills and ESOL, referrals to information, advice and guidance and appropriate use of training</li> <li>• Provide work clubs in children's centres and access to/signposting parents to adult learning opportunities</li> </ul>	<p>Karen Borthwick Mary Smith</p> <p>Julie Roddis Elenore Fisher</p> <p>Elenore Fisher</p> <p>Sue Skalycz (DWP)</p> <p>Mary Smith</p>



ACTION	KEY LINKS	DELIVERY MILESTONES	LEAD/S
<p>(iv) Further develop the partnership response to respond to the needs of the ROMA community and new arrivals</p>	<ul style="list-style-type: none"> <li>• Children and Families</li> <li>• Community Learning</li> <li>• Early Help Services</li> <li>• EU Migrants</li> <li>• Migration Yorkshire</li> <li>• National Roma Network</li> <li>• Schools</li> <li>• Voluntary and Community Organisations</li> </ul>	<ul style="list-style-type: none"> <li>• Attendance rates will rise and participation in the earliest forms of education – e.g. children’s centres</li> <li>• Deliver and evaluate a pilot multi-agency ‘family induction day’ at Lifewise – Sept 2013</li> <li>• Engage key relevant Headteachers and senior staff from within CYPS to discuss long term strategy to accommodating New Arrivals</li> <li>• Engage relevant staff in a re-evaluation of the system, given the current circumstances: the potential increase of number of New Arrivals from Romania and Bulgaria, increase in the number of SEN EAL learners.</li> <li>• Extend the Strategic Management Group to include key representatives from schools and the Director of Lifelong Learning - June 2013</li> <li>• Implement the Roma Matrix delivery plan, meeting key deliverables and outcomes with the Roma Community as per funding requirements and delivery plan. –June 2013 to March 2015</li> <li>• Monitor progress of children who arrive in Rotherham at KS3 and KS4</li> <li>• Reduce the number of Roma / EU Migrant children who are not accessing full-time education – August 2014</li> <li>• Overall NEET’s profile will continue to improve with no disproportionate increase for this community</li> </ul>	<p>Dorothy Smith</p>

ACTION	KEY LINKS	DELIVERY MILESTONES	LEAD/S
(v) We will reduce the inequalities gap in outcomes for the boroughs most deprived communities	<ul style="list-style-type: none"> <li>• Children's Centres</li> <li>• Deprived communities project</li> </ul>	<ul style="list-style-type: none"> <li>• We will increase opportunities within the community to gain employability skills and training</li> <li>• We will recruit and train people within the community to become Community Advocates whose role will be to act as liaisons between the various organisations, charities and groups to help promote skills, training and employability services to the wider community</li> <li>• We will support families by getting them work ready and encouraging a stable and supportive family life</li> <li>• We will improve access to Employment Opportunities</li> </ul>	<p>Andrea Peers</p> <p>Waheed Akhtar</p> <p>Malc Chiddey/ Sarah Curren Zaidah Ahmed Marcus Hurcombe Andrea Peers</p>

**HOW WE WILL EVIDENCE THE DIFFERENCE WE HAVE MADE**

1. Deprivation
2. Employment statistics
3. Families for Change outcomes
4. Poor communities accessing learning
5. Young People Not in Education, Employment or Training