

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

The Children and Young People's Plan action plan underpins the Plan on a Page which was developed around six joint key priorities and is linked into the Health and Wellbeing Strategy and Joint Strategic Needs Assessment.

Lead officers, high level actions and delivery milestones have been identified for each of the six joint key priorities.

The Children and Young People's Plan was approved by the children, young people and families partnership board in September 2013 and it was agreed that a progress report on the delivery milestones would be produced on a bi-annual basis.

This is the 1st of these progress reports and each of the delivery milestones has being ranked as one of the following:

- **Green - the delivery milestone is complete and/or is exceeding the identified target**
- **Amber – the delivery milestone is ongoing and/or there are no issues with the project**
- **Red – the delivery milestone is at risk of not being delivered within the timescales identified and/or there are issues with the project**
- **No information available or no update provided**

Pages 2 of the report provides an overview of the progress of the delivery milestones under each of the priorities.

Page 3 onwards provides details on the progress of each of the delivery milestones.

Overview					
Priority	Green	Amber	Red	Blue	Total
1: We will ensure children have the best start in life Strategic Lead/s: Frances Hunt/Joanna Saunders	12	28.5	11.5	0	52
2: We will engage with parents and families Strategic Lead/s: Sue Wilson	3.5	10	1.5	0	15
3: We will reduce the harm to children and young people who are exposed to domestic abuse, alcohol/substance misuse and neglect Strategic Lead/s: Clair Pyper	14	8	0	0	22
5: We will focus on all children and young people making good progress in their learning and development Strategic Lead/s: Karen Borthwick	4.3	23.3	2.3	0	30
6: We will target support to families in greatest need to help access learning/employment opportunities Strategic Lead/s: Warren Carratt	6	33	1	0	40
Total	40	103	16	0	159
%	25	65	10	0	

Please note: some of the delivery milestones have split RAG statuses which accounts for the above scoring.

Please note: Priority 4 –“We will work with partners to eradicate child sexual exploitation” has being excluded from this progress report as this is being managed through the LSCB child sexual exploitation strategy with each partner having in place its own agency action plan to support the overall delivery of the 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.

PRIORITY: 1	We will ensure children have the best start in life Strategic Leads: Frances Hunt, Assistant Head Of Ses: 0-7/Joanna Saunders, Head of Health Improvement – Rotherham Public Health
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ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
(i) We will ensure that parents receive good health information, advice and support during pre-birth and preschool	1. Rotherham midwives consistently and accurately assess levels of alcohol consumption during pregnancy by the systematic use of the screening tool Audit C	<ul style="list-style-type: none"> Discussions were started, however due to a change in personnel these are to be re-instigated 	Delivery - RFT Midwifery services Strategy - Anne Charlesworth
	2. Rotherham Midwives, where positive audit C complete full audit and refer to specialist midwifery service	<ul style="list-style-type: none"> As above Please also note that the 'Red Book' is to be amended from Autumn 2014 to include a copy of the Audit C/full AUDIT document 	
	3. Audits of mothers knowledge on infant feeding including dental health	<ul style="list-style-type: none"> No audits completed since NHS reorganisation 	Delivery RFT – Maternity and Health Visiting and Children's Centres and Early Years(Mary Smith) Strategy - Public Health Rebecca Atchinson Anna Clack
	4. Audits of professional knowledge on infant feeding including dental health	<ul style="list-style-type: none"> No audits completed since NHS reorganisation 	
	5. Distribution of toothbrush and paste at 6 to 9 month checks	<ul style="list-style-type: none"> 1195 distributed for the period Q3 and Q4, 2013/14 	
	6. Increase in breastfeeding initiation rates <ul style="list-style-type: none"> baseline 58% - 2012/2013 target 65.5% - 2013/2014 	<ul style="list-style-type: none"> Actual figure: 59.91% (2013/2014) Performance clinic being held on the 30th June 2014 with all partners and stakeholders 	

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
	7. Increase in the number of Breastfeeding Friendly Public Places in Rotherham <ul style="list-style-type: none"> • baseline 61 - 2012/2013 • target 71 - 2013/2014 	<ul style="list-style-type: none"> • There are currently 67 Breastfeeding Friendly Public Places (BFPP) across Rotherham. Further outlets and settings are awaiting accreditation visits and certification • Once these outlets/settings are awarded this should bring the number of BFPP in line with the 2013/14 target 	
	8. Maintain the number of active breast buddies of 60	<ul style="list-style-type: none"> • There are currently 57 trained and active breast buddies to date (May 2014) • A further training programme is currently running with a further 8 breastbuddies soon to be active across the borough 	
	9. Progress against UNICEF accreditation for Hospital and Community Services	<ul style="list-style-type: none"> • Community services are at Stage1 and Maternity services are continuing to work to stage 3 of the Baby Friendly Initiative 	
	10. Increase the prevalence of breastfeeding at 6 – 8 weeks <ul style="list-style-type: none"> • baseline 30% - 2012/2013 • target 33.5% - 2013/2014 	<ul style="list-style-type: none"> • No available data (see initiation target comments) 	
	11. Launch and implementation of antenatal pathway	<ul style="list-style-type: none"> • The antenatal pathway was launched on the 16th September 2013 and is now fully implemented 	RFT – Maternity and Health Visiting
	12. Review Children’s Centres registration process to enable more families to receive information about Children’s Centres services	<ul style="list-style-type: none"> • As at 1st April 2013, 13314 Rotherham children aged under 5 years were registered with a Rotherham Children’s Centre – 87%. • As at 1st April 2014 14211 Rotherham children aged under 5 years were registered with a Rotherham Children’s Centre – 91% 	Children’s Centres and Early Years (Mary Smith) Strategy: Public Health Anna Clack

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
	<p>13. Increase in Safe Sleeping Action Plans completed</p> <ul style="list-style-type: none"> • baseline 81% - 2012/2013 • target 85% - 2013/2014 	<ul style="list-style-type: none"> • A full review of the safe sleeping assessment via an audit will be conducted in July 2014 • A recent audit of new mother's records showed that a 100% of safe sleeping assessments had been completed • Due to the NHS reorganisation we have had difficulty in accessing the full assessment coverage information for all families • The assessment tool has been incorporated into the child patient held record 'red book' 	<p>Maternity – Emma Royle CCG</p> <p>Health Visiting Caroline Burrows NHS England</p>
	<p>14. Maintain access and uptake of Healthy Start Scheme including maternal and children's vitamins</p> <ul style="list-style-type: none"> • 4% women • 1% children 	<ul style="list-style-type: none"> • All children's Centres across Rotherham are distributing both maternal and children's Healthy Start Vitamins • There was a lapse in the availability of vitamins following the NHS reorganisation. However, since April 2014 120 maternal vitamins and 120 children's vitamins drops have been distributed across Rotherham • Percentage figures will be generated following a full quarter of distribution (July 2014) 	

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S																									
	<p>15. Fall in number of mothers who smoke at delivery</p> <p>Smoking in pregnancy trajectory</p> <table border="1" data-bbox="539 403 1144 746"> <thead> <tr> <th></th> <th>Q1</th> <th>Q2</th> <th>Q3</th> <th>Q4</th> </tr> </thead> <tbody> <tr> <td>2011/12</td> <td>21.2</td> <td>20.9</td> <td>20.6</td> <td>20.3</td> </tr> <tr> <td>2012/13</td> <td>20</td> <td>19.7</td> <td>19.4</td> <td>19.1</td> </tr> <tr> <td>2013/14</td> <td>18.8</td> <td>18.5</td> <td>18.2</td> <td>17.9</td> </tr> <tr> <td>2014/15</td> <td>17.6</td> <td>17.3</td> <td>17</td> <td>16.74</td> </tr> </tbody> </table> <p>16. Higher percentage of mothers who successfully give up smoking (baseline 45% of those who set a date to quit smoking are successful)</p>		Q1	Q2	Q3	Q4	2011/12	21.2	20.9	20.6	20.3	2012/13	20	19.7	19.4	19.1	2013/14	18.8	18.5	18.2	17.9	2014/15	17.6	17.3	17	16.74	<p>Update June 2014</p> <ul style="list-style-type: none"> • 13/14 outturn 19.7 smoking at delivery • The service has just transferred to sit within midwifery which we hope will improve ownership of the issue within community midwifery • Once staff transition has settled (Q2/Q3) PH and midwives will work together to audit data collection of SATOD data • It is recognised nationally that data quality can be poor and regional anecdotal reports suggest sometimes smoking status is copied from booking, despite women having quit • We want to assure our position and what action may need to be taken <ul style="list-style-type: none"> • Awaiting year end data of quitter numbers and quit rate • Mid-year performance suggests likely to achieve quitter numbers and be close to quit percentage. • Suggest revising this action to quitter numbers rather than percentage quitting – aim is to recruit more women into the service which evidence tells us is likely to reduce quit rate 	<p>Delivery - RFT</p> <p>Strategy - Alison Iliff</p>
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<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>	<p>17. 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</p> <p><i>(linked to priority 5, delivery milestone 17)</i></p>	<ul style="list-style-type: none"> Parents of children in children's centres continue to effectively use Thrive strategies, to support the development of their child's PSED In February 2014, the EYFS curriculum adviser was trained in London as an I CAN national trainer. Rotherham's I CAN trainer is at present coordinating future dates in order for her to then train further Rotherham's own I CAN trainers, this will include some lead teachers. These trainers will then train 39 EY practitioners each – who will then train parents This timeline has slipped due to the date in which the EYFS curriculum adviser could be trained by the national I CAN organisation, and the need to prioritise in the Autumn term 2013 improvements to the LA statutory EYFS Profile moderation processes and procedures, which the EYFS adviser has led on 	<p>Frances Hunt Mary Smith</p>
	<p>18. 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</p>	<ul style="list-style-type: none"> The significant changes of children's centres that is underway has required us to work joint with Health to establish and build on integrated working across the borough As there is a now a focus on developing the F Years going forward, the learning from the pilot will be used to inform service development. High level agreement with TRFT is now established and a sub group is working on integrated arrangements and data sharing protocols The programme is well established at Aughton Early Years Children's Centre for children and families who attend the centre The joint review is becoming established for children who attend other settings in the reach area. It is well established for those who attend full day care provision, 	

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		<p>but is still developing for children who attend sessional pre-school provision</p>	
	<p>19. Rollout to all children's centres by September 2013</p>	<ul style="list-style-type: none"> • All children's centres with day care are establishing the joint review • It is working well at Maltby Stepping Stones and Wath Victoria • Where children are already attending day care before they become 2 years old it is also working well in other centres However, many centre day cares are finding that by the time vulnerable 2 year olds take up their EEF entitlement in the term following their 2nd birthday Health have already completed their 2 year check so it is not possible to complete a joint review • The EY Lead and the Health lead for the joint review are aware of this issue and investigating ways to ensure this can be overcome, one being through future Health service commissioning from April 15 	
	<p>20. Rollout to all PVI by September 2014</p>	<ul style="list-style-type: none"> • This is occurring in the Aston Locality, through the impetus of practitioners and Health colleagues working effectively at the Aughton Early Years Centre • The roll out has not yet begun for PVI settings in areas other than Aughton • However, through the PVI annual evaluation process settings are indicating they would welcome this approach Due to the issues identified around the roll out to children's centres, this is being addressed as a priority before the wider roll out to the PVI sector begins • In the interim all settings are encouraging parents to share the 2 year progress check with health visitors where the health 2 year check has not already taken place 	

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	21. Pilot with child minder's by September 2014 in preparation for a phased roll out to other areas	<ul style="list-style-type: none"> • Aughton EYC are piloting this at present • No further work on this has taken place yet 	
	22. We will ensure that every child with a diagnosed disability is offered help and supported to ensure a smooth transition to adult services	<ul style="list-style-type: none"> • Not all children with a diagnosed disability meet Adult services criteria. This is initially considered at the 14+ assessment (1986 act) but currently this data is not up to date • For those who meet criteria following assessment there are good links between IYSS and Adult services but these are not formalised. This is currently being reviewed and will be part of the EHC Assessment Pathway • Some provision is jointly funded and support and planning is shared across IYSS and Adult Social care • A transitions social care post exists which cuts across both children's and adults services, however, there are issues around capacity and resourcing this work • Some gaps have appeared within children's transitions arrangements due to loss of key posts. 	Jackie Parkin
(iii) We will continue to develop activities for all families that promote healthy eating and lifestyles	23. March 2016 - 55% of schools to have implemented a healthy packed lunch policy	<ul style="list-style-type: none"> • 91 + (74%) schools have a 'Food in schools Policy' which incorporates all food provision including packed lunches • Specific mention of packed lunches to be part of future Healthy Schools Re-accreditation (Whole School Review) update process, however, deadline for submission not until 23/05/14 	Kay Denton-Tarn
	24. Overweight and obesity in primary school age children in reception and year 6 will decrease (measured by National Child Measurement Programme)	<ul style="list-style-type: none"> • In terms of children, data from the National Child Measurement Programme (NCMP) indicates that among Reception year children, the prevalence of overweight pupils (12.6%) was greater than the prevalence of obese (9.6%) 	Delivery - RFT, Clifton Lane Medical Centre, MoreLife Ltd, DC Leisure

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	<p>25. Targets to be established in new service specifications for achievement of reduction in weight or weight maintenance for children accessing weight management services</p>	<ul style="list-style-type: none"> In Year 6, the opposite was true with prevalence of overweight children (14.0%) being lower than that of obese children (21.2%) Our rates compare favourably with the national average in Reception, but our rate is higher than the national average for children in Year 6 <ul style="list-style-type: none"> Weight Management Services in Rotherham are currently out to tender. However the current and future specifications clearly outline targets for the achievement of reduction in weight or weight maintenance for children accessing the services Current figures below are from March 2014 <table border="1" data-bbox="1077 715 1850 1337"> <thead> <tr> <th>Service</th> <th>Cumulative no. of referrals 2009 to date</th> <th>No. attending 1st session</th> <th>No. completing</th> <th>No. of completers achieving weight loss*</th> </tr> </thead> <tbody> <tr> <td>MoreLife Clubs/DCL Children T2 Data to 30/06/13**</td> <td>1,040</td> <td>908</td> <td>531</td> <td>516 97%</td> </tr> <tr> <td>RIO Children T3 Data to 08/11/13</td> <td>505</td> <td>505</td> <td>174</td> <td>112 64%</td> </tr> <tr> <td>MoreLife Camps Children T4</td> <td>176</td> <td>n/a</td> <td>168</td> <td>168 95%</td> </tr> </tbody> </table>	Service	Cumulative no. of referrals 2009 to date	No. attending 1 st session	No. completing	No. of completers achieving weight loss*	MoreLife Clubs/DCL Children T2 Data to 30/06/13**	1,040	908	531	516 97%	RIO Children T3 Data to 08/11/13	505	505	174	112 64%	MoreLife Camps Children T4	176	n/a	168	168 95%	<p>Strategy - Joanna Saunders</p>
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	26. Improve school meal process and promote service	<ul style="list-style-type: none"> Plans in place to provide Universal Infant Free School Meals from September 2014 Publicity/Marketing of this scheme commenced, booklets about the free meals will be distributed for parents/carers of eligible pupils 	Ron Parry
	27. Increase uptake of school meals (baseline 2012/2013 – 17,083 meals per day)	<ul style="list-style-type: none"> 2013-2014 average meals per day increased by 530 meals per day (excluding Wales High School from the baseline, private catering from Sept 2013) 17,087 meals per day increased from 16,553 	
	28. Maximise health impact school meals can have on children and young people	<ul style="list-style-type: none"> Menus are created to provide the nutrients recommended within the legislation 	
(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	29. Achieve above 90% across all areas of the childhood vaccination programme	<ul style="list-style-type: none"> Achieved for all the Childhood and adolescent vaccination programmes. The following are awaiting further information; <ul style="list-style-type: none"> The new Rotavirus vaccine, which has now been introduced across SY&B will not provide an accurate reflection of the coverage until further into the delivery of the programme. HPV annual survey (previously 91.5% uptake) 	Di Birkinshaw Fiona Jorden Kathy Wakefield Richard Hart
	30. Ensure babies identified at increased risk from TB or Hepatitis B is appropriately vaccinated. Follow up DNA's to maximise protection	<ul style="list-style-type: none"> A Hepatitis B clinical pathway has been developed for South Yorkshire & Bassetlaw The Screening and Immunisation Co-ordinators(NHSE) across SY&B are currently developing a BCG pathway 	
	31. Work with NHS England Area Team to ensure the appropriate commissioning of immunisation services	<ul style="list-style-type: none"> Performance issues and risks associated with screening and immunisation are being addressed through the South Yorkshire and Bassetlaw Screening and Immunisation Advisory Group and the local Vaccination and Immunisation Committee 	

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(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	32. Ensure that an increasing proportion of children regularly attend a dentist	<ul style="list-style-type: none"> The number of children attending a dentist in the two year period up to 31 December 2013 was 73.8% and up to 31 March 2014 was 73.7% The corresponding numbers were 41,385 and 41,363 so there has been a very small decrease in access in the most recent figures 	Kate Jones Ken Wragg Public Health England
	33. 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	<ul style="list-style-type: none"> Children with special needs are referred to the CDS by Paediatricians, school nurses and health visitors Health professionals area aware of the referral pathway From July 2014 Special schools will be offered the opportunity of providing a brushing club to support children to continue to develop the skills of tooth brushing and increasing the exposure of their teeth to fluoride 	Louise Collins Rotherham Community Dental Service
	34. 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	<ul style="list-style-type: none"> Currently Oral Health Promotion work with Children's Centres and other early years settings (including private settings) providing weaning and dental health training for staff. The team also provide input into the positive parenting programme provided through Children Centres along with other input to parents sessions on request Resources are available for loan that promote what happens at the dentists and include an inflatable dental chair, dental back drop and other resources such as books and games to promote positive dental message. However, even though it is recognised that this is not always targeted to the most disadvantaged areas or the most needy families the majority of the work is carried out by Children Centre's in the 11 disadvantaged areas Input into the positive parenting sessions target 'needy' 	

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		<p>families and family workers use the dental knowledge gained and resources available from the oral health team to work with families individually</p> <ul style="list-style-type: none"> • Tooth Brushing clubs, where children brush their teeth during the day in the early years setting they go to, are also in operation throughout the 11 disadvantaged areas. This programme aims to increase the exposure of children's' teeth to fluoride and is meant as an additional opportunity for the children to brush their teeth. Consent is given by the parent or guardian to take part in the scheme and staff work with parents/guardians to remind them to brush regularly at home as well. The opportunity is also taken to promote the correct level of fluoride needed in the toothpaste used by the family • Oral Health Promotion also provides health visitors with tooth brushes and toothpaste to encourage tooth brushing at the 6 – 9 months health promotion contact. This is a universal offer across Rotherham and currently a cup is provided alongside the toothbrush/toothpaste to promote moving from a bottle to a cup by the age of one year so as to contribute to the development of the muscles for chewing and speaking. This is also used as an opportunity to discuss drinks and promote milk and water as well as avoiding costly sugary baby juices and drinks. • The new oral health service specification aims to ensure that we have improved impact and auditable information. The specification will be focused to the most disadvantaged areas to make as large an impact as possible on the oral health of Rotherham's children. The specification is now agreed and will begin 1st of July 2014 	

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(vi) We will reduce teenage pregnancy	35. Increase the availability of support for those at risk of becoming teen parents	<ul style="list-style-type: none"> Rotherham has developed a Teenage Pregnancy Plan to further support and enhance services provided to those who may be vulnerable to teenage pregnancy Young people within IYSS who may be vulnerable are offered now offered one-to-one support Overall we have seen a reduction in teenage conception rates across Rotherham due to a range of interventions and targeted activity Rotherham's current teenage conception rate is at its lowest level for 10 years (rate: 30.0 per 1,000 births) 	<p>Ann Berridge H&WB Lead IYSS</p> <p>Anna Clack Public Health</p>
	36. Increasing breadth of access to contraception in the community	<ul style="list-style-type: none"> Education/information sessions have been provided by IYSS staff to vulnerable groups including LGBT, PRU, teenage parents, housing projects and ESOL provision. These sessions resulted in 1055 contacts being made with young people over and above the regular provision Sexual health services and provision in Rotherham are being reviewed by Public Health with a new service specification. As part of the Rotherham sexual health strategy and teenage pregnancy plan a review of contraceptive provision across the borough has been proposed to ensure that services are equitable across the borough and data will be collected about service coverage within contract The Hardwear Scheme is also co-ordinated from Youth Start giving young people, and in particular, young men, access to free condoms in their localities, aiming to reduce the spread of sexually transmitted infections and maintain the downward trend of teenage pregnancies. Additionally, in partnership with nurses from RCASH, workers from IYSS staff the network of youth clinics across the Borough, giving young women and men access to a wide range of sexual health education, resources and treatment 	

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		<ul style="list-style-type: none"> Using the IYSS mobile provision, information awareness sessions have taken place targeting local Colleges, and communities where Youth Clinics are located to help to increase footfall within the sexual health provision Within the IYSS Youth Start offers young people access to a range of sexual health interventions and in particular focuses on sex and relationship education as a key component of the Early Help and CSE agendas 	
	<p>37. To engage teenage parents to provide education, advice and support around relationships and sexual health to prevent further (second time) teen pregnancies</p>	<ul style="list-style-type: none"> Rotherham IYSS have commissioned with Rotherham GROW to deliver a bespoke education programme for teenage parents to provide parenting education and develop skills and aspiration among this group of young people The GROW Pathway Project also provides a support service for pregnant young women and mothers (not only first time pregnancies), and their partners to improve their health and wellbeing. Workers take a holistic approach to identified needs of particularly vulnerable groups of young women and their partners. Since October 2010, 119 young women directly and 89 partners/extended family members both directly and indirectly The Rotherham teenage pregnancy plan has established milestones relating to the prevention of the second pregnancies There are also a range of programmes and services that are in place to support teen parents and prevent further second time pregnancies. The Family Nurse Partnership has been running since October 2011 and has the capacity to support 105 young women. There are 12 families due to graduate (complete) the programme in the next six months. The service 	

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		currently includes four full time nurses and a supervisor who are supporting 77 women across Rotherham. The service is in the process of recruiting a further full time nurse to increase the capacity to 130 places on the programme	
(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 interventions for those who need it	38. Implementation of evidence based interventions for children and young people experiencing mental health issues and linking into locality based provision	<ul style="list-style-type: none"> • The Emotional Wellbeing & Mental Health Strategy for Children & Young People 2014-19 has identified the need to look at pathways into services for children and young people ensuring that they are evidenced based • A CAMHS pathways event is being held for stakeholders on the 26th June 2014 • Task and Finish Group of the Suicide Prevention and Self Harm Group working on a self-harm pathway to be used by Universal workers who have contact with children and young people who self-harm • Continued roll out of Youth Mental Health First Aid Training (Rotherham Public Health) 	Ruth Fletcher-Brown
	39. Increased easy access to mental health and emotional well-being services and interventions for children and young people	<ul style="list-style-type: none"> • The Emotional Wellbeing & Mental Health Strategy for Children & Young People 2014-19 has identified the need to: <ul style="list-style-type: none"> ○ investigate options for provision of web-based support for parents & young people ○ investigate provision for e-platforms (e-clinic), email and text based support ○ investigate options for provision of a 24/7 service including telephone and crisis support • The development of family focused children and adolescent mental health services will see services focus on self-help, self-referral, flexible appointment times and consultation with young people and families regarding choice and location of services (The Emotional Wellbeing & Mental Health Strategy for 	Ruth Fletcher-Brown

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		<p>Children & Young People 2014-19)</p> <ul style="list-style-type: none"> • Work has been undertaken by the Youth Cabinet to improve access for young people seeking help and support around self-harm. The recommendations from the review were endorsed by OSMB at its Children's Commissioner Day meeting of February 27, 2014 were forward to Cabinet In April for its consideration 	
		<ul style="list-style-type: none"> • The GP Top Tips is now complete and has being available to GP's for the last year. It is currently being updated • The directory of mental health/emotional health is completed and services and was launched with universal workers from January 2014. This is also currently being updated 	Nigel Parkes
	40. Increase access to counselling through provision of drop –in sessions including self-referral for secondary school students	<ul style="list-style-type: none"> • Currently working with: <ul style="list-style-type: none"> ○ 4 secondary schools ○ 11 Primary schools • Previous update (Dec 2013) was working with: <ul style="list-style-type: none"> ○ 10 secondary schools ○ 1 PRU ○ 15 primary schools (this will rise to 17 in January 2014) 	Rebecca Bates
41. Sustained delivery of 1:1 mental health support and counselling by Rotherham & Barnsley Mind in Rotherham Schools, including primaries		<ul style="list-style-type: none"> • This forms part of the pathway development • A CAMHS pathways event is being held for stakeholders on the 26th June 2014 	Rebecca Bates

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	42. Continue to improve the transition for children and young people from CAMHS to adult services	<ul style="list-style-type: none"> This forms part of the pathway development A CAMHS pathways event is being held for stakeholders on the 26th June 2014 	Ruth Fletcher-Brown
(viii) We will have robust and effective joint commissioning of services. These include maternity, hospital and community services for ill children including those with complex health needs, continuing care needs and child and adolescent mental health services (CAMHS)	43. All CAMHS referrals are assessed within 24 hours in A & E	<ul style="list-style-type: none"> RDaSH have consistently met this target since October 2013 	Nigel Parkes Sarah Whittle
	44. Implementation of the maternity tariff which will increase the link between payment and quality of care, therefore improving best clinical practice and better patient outcomes	<ul style="list-style-type: none"> Tariff commenced in March 2013 in line with national target Payment is now based on the pathway implemented 	
	45. Implementation of national service specification for asthma, epilepsy and diabetes which will raise the quality of care for long term conditions	<ul style="list-style-type: none"> Top tips for GPs have being developed including:- fever, constipation, enuresis, faltering growth, ITI and gastro-oesophageal reflux Still awaiting national guidance for epilepsy The care closer to home group works on this 	
	46. Monitoring of the percentage of CAMHS staff accessing safeguarding training	<ul style="list-style-type: none"> Monitor figures relating to the percentage of CAMHS staff who access safeguarding training, but these are for RDaSH as a whole and not just Rotherham services 	
	47. Supporting care closer to home by investing in the paediatric community nurse team	<ul style="list-style-type: none"> A programme has being developed and is now implemented 	

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
	48. Training of staff in commissioned services to deliver psychological therapies to children and young people	<ul style="list-style-type: none"> This is happening through the CYP IAPT initiative which involves RDaSH and CAMHS This initiative also includes Rotherham & Barnsley MIND 	
(ix) We will ensure that all parents of all eligible children are aware of and supported to take up their 2 year old early education entitlement	49. Work with partner organisations to roll out a core service offer for children 0 – 5 to ensure children get the best start in life	<ul style="list-style-type: none"> Developing this work further through the Foundation Years' Service A strategic foundation years group has been established and this action is to be mandated to one of the task groups, and will form part of the core offer delivered by children's centres from April 1st 2015 The birth and beyond programme work is being considered as part of this 	Mary Smith
	50. Ensure there is adequate provision to enable eligible children to take up a place <i>((Linked to priority 5 delivery milestones 13 and 19))</i>	<ul style="list-style-type: none"> Capital funding has been awarded to a total of 14 providers to create 443 new 2 year old places in areas of need There is currently one area which still has insufficiency capacity to accommodate eligible two year olds Sufficiency data is currently being gathered to inform ongoing requirements The number of Childminders contracted to delivery early education places has risen dramatically over the last year to a total of 62 	

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
	51. Ensure that eligible parents are aware of their entitlement through direct contact and through partner organisations	<ul style="list-style-type: none"> • The DfE now provides details of eligible children on a termly basis • The Families Information Service (FIS) makes contact with families to raise awareness of the entitlement and also shares the information with Children's Centres who support in awareness raising • Promotional banners have been produced for all childcare providers to promote availability of free places • Ongoing communication takes place with childcare providers and partner organisations to support the promotion of awareness raising 	
	52. Work with Children's Centre to support families to take up their entitlement	<ul style="list-style-type: none"> • The FIS shares the information on eligible children with Children's Centres so 1:1 support can be provided to support parents to take up their entitlement where needed 	

PRIORITY: 2

**We will engage with parents and families
Strategic Lead: Sue Wilson, Performance & Quality Manager**

ACTION	DELIVERY MILESTONES	Update June 2014	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>	<p>1. Develop a performance management framework for Early Help within the LA (August 2013)</p>	<ul style="list-style-type: none">• Early Help Dashboard has been published and is received regularly by Think Family Steering Group and RLSCB Performance Sub-Group	<p>Warren Carratt</p>
	<p>2. Established an Early Help Support Panel to provide a point of escalation for “stuck” families (June 2013)</p>	<ul style="list-style-type: none">• Panel has been established and meets on a monthly basis	
	<p>3. Provide an annual review of the progress made and identify gaps (March 2014)</p>	<ul style="list-style-type: none">• Due to the relative low number of cases referred to EHSP to date, it is difficult to provide evidence of significant impact for a wide range of cases• However, the minutes of each panel meeting identify actions and these are checked at subsequent meetings	
	<p>4. Review the effectiveness of the Early Help Prospectus offer and report to the LSCB on partner engagement (March 2014)</p>	<ul style="list-style-type: none">• Report went to Learning & Improvement Sub-Group in February and updates are included as a standing item	

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
(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	5. Work to take place with key partners to ensure that systems are in place to capture the voice of the child and their families	<ul style="list-style-type: none"> • Significant work has taken place around the wishes and feelings and satisfaction testing for safeguarding children and families and is currently being embedded and tested out through an audit process • Work has now commenced around SEND services as part of the service transformation and reforms • Further work is now due to start with Health Colleagues and Voluntary sector to explore how this is approached within these organisations 	Sue Wilson
(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	6. Every Rotherham school and service to be working towards the Charter (in some way) by 2015	<ul style="list-style-type: none"> • The aspiration for all schools to work towards the Charter by 2015 has been reviewed by the team. It has been agreed that for schools to embed the Charter principles of genuine partnership/co-production advocated by the SEND reforms a two year process of training, gathering feedback and monitoring is required • There is insufficient capacity within the team (a co-productive partnership involving parents, services and schools) to deliver the programme simultaneously to large numbers of schools. The risk of attempting shortcuts to enable all schools/settings to achieve Charter status quickly is a loss in parental confidence if they are found to then fall short of expectations. The preferred option is to increase the numbers of schools more slowly to ensure parental confidence in our schools is strengthened and to promote the Charter culture more widely from a more secure base 	Jayne Fitzgerald Rotherham Parent/Carer Forum

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
		<ul style="list-style-type: none"> • However, the number of Charter schools working towards Charter Gold accreditation is growing steadily: <ul style="list-style-type: none"> ○ The first 6 schools will formally receive Charter Gold accreditation 18th June in a Charter Celebration event as part of the Children's Festival ○ A further 14 schools/settings are at different stages of the two year process (working towards Charter Gold accreditation) ○ 4 schools and 1 setting have enquired about starting the process in the autumn term • It is hoped that the Charter process will also be extended to include settings 0-25 and services as part of Rotherham SEND strategy (pending funding), as recommended by Donald Rae. This has already started with a period of research and it is hoped that developments for services will evolve a similarly robust if leaner model that is still fit for purpose, continues to promote co-delivery and flexibly meets the needs of a range of services • To reflect the wider scope of the Charter the name has changed to simply the Rotherham Charter and the strapline: Genuine Partnership with Parents, Carers, Children and Young People. • A Charter Awareness Raising Event held in May 2014 was well attended by settings 0-25 and a wide range of services including health. Feedback illustrated the demand for the roll 	

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
		<p>out</p> <ul style="list-style-type: none"> The team will present to medical practitioners in July. CAMHS and the VI service have expressed an interest in piloting any model being developed The aim is that the Rotherham Charter process will be promoted to services and settings as part of Rotherham's Local Offer 	
(iv) We will work together to support young carers and their families to ensure that they are identified and provided with the appropriate support	7. Identify and evaluate what support Integrated Youth Support (IYSS) offer young carers	<ul style="list-style-type: none"> IYSS staff provided with Young Carers service referral information Barnardos/IYSS auditing a sample of care plans to determine how joint working can be more effective 	Kay Denton Paul Theaker Rachel Nicholls
	8. Promote a Family CAF to identify health needs and wider Early Help support for young carers	<ul style="list-style-type: none"> Barnardos Young Carers service currently have 12 Family CAFs CAF Team undertaking a review of the quality of these CAFs and also of the identification of young carers within wider CAFs 	
	9. Run short courses for young carers (e.g. cookery classes)	<ul style="list-style-type: none"> This will form part of the Rotherham Carers' charter and action plan 	
	10. Support the Rotherham UK Youth Parliament Members in developing a Young Carers Card – to be reviewed September 2013	<ul style="list-style-type: none"> The Young Carers Card was launched in September 2013 A pilot project is taking place in three secondary schools and evaluation is to take place in October 2014, with rollout to all schools thereafter 	

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
<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</p>	<p>11. Ensuring CYPS systematically screen on drug and alcohol use making referrals and asking for specialist help at the earliest possible stage</p>	<ul style="list-style-type: none"> • IYSS use several tools to capture relevant information on substance misuse to focus the delivery of advice and information and facilitate referrals to specialist services, these include the local 'Where are you at' screening tool • A local pathway within A&E is established for those aged up to 16 and the development of a pathway for 16+ is underway. • CAMHS – There is no use of a universal screening tool used. There is new post to educate staff in service to undertake and ask about drug and alcohol use • A reporting mechanism will be required to gain information on of this is happening on a wider basis 	<p>Delivery – CYPS Strategy – CYPS/Public Health</p>
	<p>12. Substance misuse services engagement with core groups, and reviewing processes including specialist Midwifery Services</p>	<ul style="list-style-type: none"> • The drug/alcohol service manager/team leader attend the RMBC MASP panel on a fortnightly basis 	<p>Delivery - Public Health Strategy – CYPS</p>
<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</p>	<p>13. Continue to expand and support families in attending at venues such as the funky monkey recovery café</p>	<ul style="list-style-type: none"> • The cafe continues to run within the town centre – away from service premises – this will continue until the new 'Recovery Hub' is up and running and then will re-locate • The recovery hub is a capital initiative from Public Health England, Rotherham were successful in securing a £875,000 bid to develop this) 	<p>Delivery - Matt Pollard RDASH Strategy - Anne Charlesworth</p>

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
	14. Encourage families to attend events such as the regional celebration of recovery	<ul style="list-style-type: none"> • Service Users and families are being recruited for the 'Empower Cup', 5 aside recovery orientated football event in Scunthorpe • The services continue to support service users and families to participate in Recovery Walks, games and similar activities throughout the year 	
	15. Maintain and expand the women's group and child care provision	<ul style="list-style-type: none"> • There is a new programme in place for the next 12 months of group delivery • This includes invites to women from other services and professionals in order to normalise the issues raised for example Breast Care, Sexual Health 	

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
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ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
(i) We will maximise opportunities for early intervention and prevention approaches to alcohol and substance misuse across the partnership	1. All partners who deliver alcohol messages to adopt the single alcohol message and ensure delivery reflect this	<ul style="list-style-type: none"> Alcohol awareness was delivered to 250 attendees of Rotherham IYSS conference on the 8th February 2014 and as an update to 65 attendees at an update event for those who have completed Family CAF training Young Peoples Substance Misuse Education and Prevention group have agreed to develop an alcohol awareness week pack with themed days that can be delivered by any partner 'off the shelf'. This will be developed by September 2014 and will incorporate the single message 	Delivery – Mel Howard Strategy - Anne Charlesworth
	2. Partners to have completed and promote Call it a Night (CIAN) e learning	<ul style="list-style-type: none"> Ongoing promotion of the site and e-learning Promoted further via the updated 'making every contact count' pack 	
	3. Re instate the substance misuse scenario in Crucial Crew	<ul style="list-style-type: none"> Agreed in principle - details of delivery to be agreed by the 5th June. Melanie Howard to attend Crucial Crew to gain further information Action also now part of Young Persons Substance Misuse Education and Prevention Group. Agreed completion time for next Rotherham round of crucial crew 	

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
	4. Re-commission tier 2 alcohol services to deliver more preventative work and Training/education opportunities	<ul style="list-style-type: none"> • In addition to the previous update, the following number of individuals have had alcohol awareness training delivered in the period Nov 2013 – March 2014 <ul style="list-style-type: none"> ○ Workforce Events Number People Trained – 189 ○ Community Training Number People Trained - 1095 	
(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	5. Annual audit process - to monitor compliance with existing safeguarding protocols	<ul style="list-style-type: none"> • Audit in March 2014 showed further improvement in compliance • A further audit will take place in October 2014 	Delivery - Matt Pollard RDaSH Strategy – Anne Charlesworth
(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	6. Enhance tier 1 + 2 reporting	<ul style="list-style-type: none"> • Know The Score is now fully integrated into CAMHS • Regular reporting established on Tier 1 and Tier 2 numbers 	Delivery - Matt Pollard RDaSH, Neil Power, CAHMS RDASH Strategy – Anne Charlesworth
	7. Maintain tier 3 treatment data and level	<ul style="list-style-type: none"> • Service responding to changing local needs 	
	8. Secure funding for 2014/15	<ul style="list-style-type: none"> • No plans to reduce service 	

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
(iv) We want to identify baseline information on the percentage of cases of children in the CAF and broader social care process where parent/carer substance misuse is a concern	9. 2013/14 to establish a mechanism for collecting this information and establishing a baseline, going on to identify the trends of substance of choice, level of use, referrals onto services and the overall level of the presenting issue. Using this information to subsequently plan to meet the need. For example provision of alcohol identification and brief advice training to all social care staff and lead professionals in the CAF process	<ul style="list-style-type: none"> Information now included in the Family CAF paperwork, and is factored into commissioning activity in response to the Government's Troubled Families initiative Update reports on FCAF and Troubled Families received at Think Family Steering Group as stranding agenda items Annual reports submitted to CYP&F Partnership on Troubled Families progress 	Warren Carratt Anne Charlesworth
	10. 2014/15 onwards to look towards reducing or at least maintaining this position as established	<ul style="list-style-type: none"> Work continues in line with the above, and future developments of Troubled Families Financial Framework should provide greater freedoms locally to determine indicators of need, though as above substance misuse is a local priority already in planning/commissioning 	
(v) We will continue to develop domestic abuse awareness in schools and children's centres	11. Promote agencies where support and advice can be sought	<ul style="list-style-type: none"> Childline input for primary schools outlined & promoted and a clip to show C&YP what happens when childline is accessed covered at PSHE Leads meetings National & local helping organisations for general support circulated to secondary schools in updated exam stress leaflet to disseminate to students Samaritans assemblies promoted in secondary PSHE leads meeting Wellbeing Roadshow opportunity for agencies to promote services in schools & children's centres; up to DA agency if they attend events 	Kay Denton-Tarn

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
	12. Promote appropriate resources e.g. 'Expect Respect' Women's Aid curriculum resource, to all phases	<ul style="list-style-type: none"> 'This is abuse' and 'consent' campaigns promoted at the secondary PSHE Leads meeting, to reinforce positive teenage relationships work. CEOP resources linked to CSE also promoted in both PSHE Leads meetings National supplementary Guidance for SRE outlined in PSHE Leads meetings and the importance of DA work, consent, abuse etc. highlighted New additions to support relationships work in Primary SOW highlighted 	
(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	13. April 2013 - launch of the Early Help Prospectus for low level DA training, and the RLSCB Prospectus for Module 2 training	<ul style="list-style-type: none"> Prospectuses re-published in April 2014 and are inclusive of relevant workshops 	Warren Carratt
	14. Next milestone will be September 2013 and six months thereafter, reviewing progress of update and evaluation on a regular basis	<ul style="list-style-type: none"> Updates provided to LSCB L&I sub-group and wider LSCB as part of Sub-Group Chair's report Establishment of MASH will be next operational millstone that will require workforce development input, and this is included in the MASH project plan 	
(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	15. July 2013 – improved step down of CIN/CP cases into early help by utilising Troubled Families contracts (YWCA)	<ul style="list-style-type: none"> Process now in place, and lead worker network meetings helping to provide QA check on compliance, with deviations escalated to the Head of Service where required Additional services commissioned as part of 2014-15 Troubled Families Plan 	Warren Carratt

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
	16. August 2013 – Analysis of long term neglect case longitudinal study following multi-agency review of selected cases	<ul style="list-style-type: none"> Analysis has taken place and a report delivered to the CYPS Improvement Panel & LSCB Monitoring of Neglect a priority for LSCB in 14-15 	
	17. August 2013 – Establishment of Early Help Support Panel to ensure robust packages of support are in place where neglect is manifestation of need <i>(Linked to priority 2 delivery milestone 3)</i>	<ul style="list-style-type: none"> Panel has been established and meets on a monthly basis 	
	18. September 2013 - Improved performance management systems in place to capture step down to Early Help Assessment Team where contacts are made to CART <i>(Linked to priority 2 delivery milestone 1)</i>	<ul style="list-style-type: none"> Early Help Dashboard has been published and is received regularly by Think Family Steering Group and RLSCB Performance Sub-Group 	
	19. September 2013 – consultation of draft local protocol, which will provide a localised approach to multi-agency safeguarding practices	<ul style="list-style-type: none"> Protocol signed off by LSCB in December 2013 Working draft in place by September 2013 Full implementation planned by end of May 2014 	
	20. We will respond quickly and effectively to Serious Case Review and Lesson Learned recommendations	<ul style="list-style-type: none"> Work of the SCR sub-group and case review group continues to review cases and issues of lesson's learned, and responsive actions are planned e.g. recent Suicide Prevention Conference has been held following lessons' learned review. 	

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
	21. We will increase in-house provision for Looked after Children, providing the best possible outcomes for child permanence, be that fostering, adoption or residential	<ul style="list-style-type: none"> • The Fostering Service succeeding in achieving a net gain of 20 foster carer households in 2013/14 • The Adoption Service increased the number of adoptive families recruited from 18 in 2012/13 to 31 in 2013/14 	Paul Dempsey
	22. We will ensure all contacts, referrals and assessments are dealt with in a timely manner	<ul style="list-style-type: none"> • A new duty rota has been developed and implemented from March 2014 to build in 'protected days' to allow time for assessments to be written up in a timely manner. • A new manager has been appointment to CART and took up post on the 9th June 2014 • Capacity in CART has been strengthened with additional social work staff by moving staffing resources around • Contacts timeliness is now being measured as a performance indicator as this had not been the case previously • Performance team attend Borough wide managers meeting, as well as SMT • Plans for a Multi-Agency Safeguarding Hub (MASH) are progressing, due to go live on 4th August 2014 • The new single assessment was introduced to the duty teams in March 2014 and is now being implemented wider across Social Care • The RAG rating that was on contacts has been amended electronically to reflect 24 hours as specified in Working Together 2013 • Work is ongoing to address the inconsistencies in quality of MARF's received 	Kelly White

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	DELIVERY MILESTONES	Update June 2014	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"> ▪ all students making at least good progress; ▪ no underperforming cohorts; ▪ all teachers delivering at least good learning; ▪ all school moving to at least the next level of successful performance 	<p>1. All schools to be judged by OFSTED as good or outstanding overall effectiveness grade within the next three years</p>	<ul style="list-style-type: none"> • 74% of all schools judged to be good or outstanding for overall effectiveness compared to the national average of 79%. (Data source, OFSTED Data View - as of 31/12/2013), this is the latest comparison to the national average • The current profile for Rotherham is 75% of all schools judged to be good or outstanding and 78% of pupils attending a good or outstanding school (as of 30/04/2014) 	<p>Karen Borthwick Dorothy Smith</p>
	<p>2. All schools to be judged by OFSTED with a good or outstanding quality of teaching grade within the next three years</p>	<ul style="list-style-type: none"> • 75% of all schools judged with a good or outstanding quality of teaching grade compared to the national average of 79%. (Data source, OFSTED Data View – as of 31/12/2013), this is the latest comparison to the national average) • The current profile for Rotherham is 76% of all schools judged with a good or outstanding quality of teaching grade and 78.5% of pupils attending schools judged with a good or outstanding quality of teaching grade (as of 30/04/2014) 	
	<p>3. Continue to increase the OFSTED grade of PVI childcare provision</p>	<ul style="list-style-type: none"> • Since October 31st 2013, the percentage of Childminders achieving a Good or Better Ofsted outcome has increased from 70.3% to 73.2% • Inspection of childcare in before and after school provision good inspections has risen 	

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
		<p>from 66.7% to 71.4%</p> <ul style="list-style-type: none"> All childcare inspections from 73.3% to 75.5%. Children Centre inspections good risen from 84.2% to 85% Super group total has risen from 73.9% to 76.1% 	
	4. Increase uptake of 2,3,4 year old early education provision	<ul style="list-style-type: none"> A total of 767 two year olds were taking up their early education entitlement in the Spring term 2014 - this is an increase of 8% on the previous term Take- up of early education by 3/4 year olds was at 96% in the Spring Term 2014. The eligible cohort has increased this year but the take-up levels have been maintained at the same level as in 2012/13 	
	5. No secondary schools below the DfE floor standard in 2013	<ul style="list-style-type: none"> In 2013 one secondary school was below the DfE KS4 floor standard, this school was also below in 2012. Executive Headteacher system leadership arrangements are in place and the sponsor-led academy conversion process has begun 	
	6. Reduce the FSM gap to the national average FSM gap by 2013	<ul style="list-style-type: none"> At KS2 the gap between FSM and non FSM pupils at L4+ in reading, writing and mathematics was reduced by 3.0% to 22% The national average gap remained at 19% At KS4 the gap between FSM and non FSM pupils at 5+A*-C inc E&M increased by 2.8% to 34.4% in 2013. This is 7.8% above the national gap By the end of EYFS the attainment gap between FSM and non FSM pupils at the age 	

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
		<p>of 5 has narrowed</p> <ul style="list-style-type: none"> In Ofsted's annual report Early Years 2012/2013 Rotherham was identified as joint 33rd highest LA out of all LA's nationally with regard to the percentage of children on FSM achieving a good level of development by the end of the EYFS in 2013 	
	<p>7. Reduce the number of primary schools below the new DfE floor standard to 5 schools in 2013</p>	<ul style="list-style-type: none"> The DfE floor standard changed in 2013, the reading test, writing teacher assessment and maths test combined attainment and progress measures for each of these subjects will be part of the floor standard The number of primary schools below the more challenging floor standard was 8 in 2013 Two of the schools below the floor standard are sponsored-led primary academies 	
	<p>8. 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</p>	<ul style="list-style-type: none"> In 2013 KS2-KS4 progress by 3 levels in mathematics increased by 4.4% to 70.4%. National averages increased by 1.7% to 70.7% Rotherham has reduced the gap to national averages to 0.3% 	
	<p>9. To continue to exceed the national average in the expected levels of progress from the end of KS2 to KS4 in English</p>	<ul style="list-style-type: none"> In 2013 KS2-KS4 progress by 3 levels in English increased by 3.5% to 75.5%. National averages increased by 2.4% to 70.4% Rotherham exceeds the national average by 5.1% 	

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
	10. 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	<ul style="list-style-type: none"> • KS1-KS2 progress by 2 levels in reading decreased by 3% to 83% • National averages decreased by 2% to 88%, the gap to national averages increased by 1% to 5% <ul style="list-style-type: none"> • KS1-KS2 progress by 2 levels in writing increased by 1% to 89% • National averages also increased by 2% to 92%, the gap to national averages increased to 3 <ul style="list-style-type: none"> • KS1-KS2 progress by 2 levels in mathematics increased by 4% to 88% • National averages increased by 1% to 88% • Rotherham met the national average for the first time in 2013 	
(ii) We will work with schools, young people and families to ensure a high level of attendance and engagement in learning	11. Local Authority and school level primary and secondary attendance rates to be in line with the national average	<ul style="list-style-type: none"> • Nationally, the latest figures (Autumn Term 2013 Data) show that there has been an increase in the overall attendance rates across state funded primary and secondary schools • Despite Rotherham's overall attendance rate being below the National Average, the recorded attendance rates are at their highest since Autumn 2006, when termly data was first collected: <ul style="list-style-type: none"> ○ Rotherham LA: KS1 – KS2 – Overall Attendance Rates in Primary increased from 95.0% in Aut 2012 to 95.7% in Autumn 2013 ○ Rotherham LA: KS3 – KS4 – Overall 	Karen Borthwick Dorothy Smith

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
		<p>Attendance Rates in Secondary show an increase of 0.9% from 93.8% in the Autumn Term 2012 to 94.7% in the Autumn Term 2013</p>	
	<p>12. Persistent absence to be in line with the national average</p>	<ul style="list-style-type: none"> • Nationally, the latest figures (Autumn Term 2013 Data) show that in state funded primary and secondary schools, the percentage of pupils who are, or may become persistent absentees has • Rotherham LA: KS1 – KS2 – The percentage of pupils who are, or may become, persistent absentees fell from 6.7% in Aut Term 2012 to 5.1% in Aut Term 2013. • Rotherham LA: KS3 – KS4 – Secondary Schools saw a slightly bigger decrease in Persistent Absentee rates than primary schools. The percentage of pupils who are, or may become, persistent absentees fell from 9.6% in Aut 2012 to 7.2% in Aut 2013 	
	<p>13. Raising awareness and increasing take up by parents of early education for children at the age of 2, 3 and 4 <i>(Linked to priority 1 delivery milestone 50 and priority 5 delivery milestones 19)</i></p>	<ul style="list-style-type: none"> • Awareness raising methods continue to be developed. <ul style="list-style-type: none"> ○ Banners outside childcare provision ○ Direct contact with eligible families ○ FIS / Children’s Centre Facebook pages ○ Posters / flyers in community venues ○ Providing a range of ways for parents to check their eligibility: telephone, online, post ○ Sharing of details of eligible children with Children’s Centres 	

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
	14. We will improve achievement and standards across all key stages of education, with particular focus on key stage 2	<ul style="list-style-type: none"> No update as the results from the year are not published until July 2014 	
(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	15. Development of bespoke packages with other agencies and utilising VCS	<ul style="list-style-type: none"> 22 Packages developed - the packages include Training Providers, FE Colleges, Specialist Providers, VCS agencies and IYSS staff/ services Feedback from families is very positive. All young people are engaged in the packages and are continuing to have educational and other appropriate interventions 	Fiona Featherstone
	16. Learning Disability assessment completed for learners with Statements or those with significant additional needs	<ul style="list-style-type: none"> 96.4% completed (2013 leavers) 2014 leavers are currently being completed 	
	17. Mapping of provision to identify gaps in LDD post 16 Offer	<ul style="list-style-type: none"> Provision continues to be mapped and new options considered Gaps identified are around complex ASC, and behavioural and emotional difficulties Packages are being developed for 2014 leavers to meet some of the more complex needs 	
	18. Work with schools to identify future need	<ul style="list-style-type: none"> Work is continuing and linking to the new SEN legislation and requirements 	

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
(iv) We will continue to narrow the gap in the education of our most vulnerable groups	19. Create sufficient early education provision to enable eligible 2 year olds access to their entitlement and increase take up <i>(Linked to priority 1 delivery milestone 50 and priority 5 delivery milestone 13)</i>	<ul style="list-style-type: none"> Capital funding has been awarded to a total of 14 providers to create 443 new 2 year old places in areas of need 	Collette Bailey Elenore Fisher Karen Borthwick Dorothy Smith
	20. Improved attainment of children by the age of 5	<ul style="list-style-type: none"> The national EYFS Profile assessment system has changed in 2013., so no comparison can be made to previous years attainment levels However, in 2013 56% of children achieved a good level of development, compared to the national average of 52% 	
	21. Improve the outcomes of all vulnerable groups	<ul style="list-style-type: none"> No update as the results from the year are not published until July 2014 	
	22. 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	<ul style="list-style-type: none"> At KS2 the proportion of pupils eligible for free school meals (FSM) achieving level 4+ reading, writing and mathematics combined has increased by 4.6% to 53.9% in 2013 compared to the national average increase of 1%. Rotherham averages are 6% below the national average. At KS4 the proportion of pupils eligible for free school meals (FSM) achieving 5+A*-C inc E&M increased by 1.8% to 34.7% in 2013 compared to the national average increase of 1.7% to 38%. Pupils not eligible for FSM were 4.5% above the national average 	

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
	23. Vulnerable groups are not over-represented in the NEETs category	<p><u>April 2014 (NCCIS)</u></p> <ul style="list-style-type: none"> • Overall picture of NEET academic age 16-18 • 6.1% against a target of 6.5% and improvement on the position at the same time last year (8.1%) • LDD NEET is 8.1% showing a continued reduction on the picture last year (12.6%) • LAC Care leavers for whom RMBC holds corporate responsibility 23.3% NEET improvement on last year (27.7%) – the majority of whom are aged 18 or above. • Teenage mothers NEET stands at 65% a reduction on the position at the same time last year 75%. No change from last year, the significant majority of these are aged 18 and 19 • Young offenders currently on orders – 40.4% NEET in comparison to 47.7% at the same point last year 	
	24. Customer and Cultural Services will work with partners to deliver family learning activities in locations across the Borough	<ul style="list-style-type: none"> • Attendance at skills based activity sessions in Libraries/Customer service centres during 2013-14 was 32,352 • Attendance at skills based activity sessions in Clifton Park Museum, Boston Castle during 2013-14 was 1,403 	
(v) We will continue to focus on the improvement of communication, language and literacy skills of children and young people	25. "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 <i>(linked to priority 1 delivery milestone 17)</i>	<ul style="list-style-type: none"> • In February 2014, the EYFS curriculum adviser was trained in London as an I CAN national trainer. Rotherham's I CAN trainer is at present coordinating future dates in order for her to then train further Rotherham's own I CAN trainers, this will include some lead 	Elenore Fisher Frances Hunt Dorothy Smith

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
		<p>teachers. These trainers will then train 39 EY practitioners each – who will then train parents</p> <ul style="list-style-type: none"> • This timeline has slipped due to the date in which the EYFS curriculum adviser could be trained by the national I CAN organisation, and the need to prioritise in the Autumn term 2013 improvements to the LA statutory EYFS Profile moderation processes and procedures, which the EYFS adviser has led on 	
	<p>26. 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</p>	<ul style="list-style-type: none"> • Summer 2013: 2,212 starters and 1,320 completed the challenge 	
	<p>27. 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</p>	<ul style="list-style-type: none"> • Total number of packs delivered 2013-14 was 5,769 	
	<p>28. 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</p>	<ul style="list-style-type: none"> • 2013-14: these are now taking place in Riverside House, Aston library/customer service centre, Dinnington library/customer service centre, Maltby library, Mowbray Gardens library, Thurcroft library, Wath library, Wickersley library 	

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
	29. 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	<ul style="list-style-type: none"> • Total visits 2013-14: <ul style="list-style-type: none"> ○ 15,702 pupils visited libraries in class visits ○ 647 pupils visited Clifton Park Museum and Boston Castle 	
	30. We will offer song, story and simple craft activities for preschool children in Libraries & Customer Service Centres	<ul style="list-style-type: none"> • Total visits 2013-14: <ul style="list-style-type: none"> ○ 7,353 attendances at RhymeTime sessions in libraries/customer service centres 	

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	DELIVERY MILESTONES	Update June 2014	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>	<p>Care Leavers</p>	<ul style="list-style-type: none"> • LAC/Care leavers continue to access the youth work curriculum through group work and a residential to Portugal that took place during the Easter holiday (9 young people) • 500 letters sent out to foster carers and social workers to promote the LAC Council • An Easter card sent to all elected members by LAC Council to thank councillors for being a corporate parent and to raise awareness of LAC/Care leavers • Voice and Influence worker has met with foster care teams in each locality • Youth Support Workers have supported LAC young people to access NCS and have accompanied LAC/Care Leavers on youth work residentials to enhance their life experience • Work is ongoing to integrate LAC/Care leavers into activities within their own locality in order to encourage the development of confidence and social skills 	<p>Carole Davison Kerry Byrne Paul Dempsey Sandra Gabriel</p>
	<p>1. Improve access of LAC / Care leavers to the youth work curriculum to build their confidence and social skills</p>		
	<p>2. Provide work experience pre 16 and work trials post 16 through liaison with schools the Get Real team and Action for Children</p>	<ul style="list-style-type: none"> • RMBC continues to provide work experience pre 16 and work trials post 16 through liaison with schools, the Get Real team and Action for Children 	

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
	<p>3. Provide support intensive mentoring activity in year 12 to improve retention and transitions at the end of year 12</p>	<ul style="list-style-type: none"> • There is IYSS liaison between the Leaving Care Team/colleges and training providers to ensure that young people who are not attending provision or showing signs of wanting to leave provision are provided with information, advice and support to remain in learning and/or find an alternative learning opportunity which best suits their needs and • Percentage of academic age 17 in learning has increased from 83.8% in April 2013 to 86.6% April 2014 	
	<p>4. Work with employers to provide bespoke opportunities to our most vulnerable young people to develop employability skills</p>	<ul style="list-style-type: none"> • Human Resources continue to work with the Leaving Care Service to offer, when referred by a Key Worker, a personalised and well supported 30 day work experience to LAC/Care leavers in appropriate and varied areas of RMBC and partner organisations Wilmott Dixon and Morrison • Since Jan 2014 this opportunity has being offered to 6 young people inc 1 commencing w/c 9th June and 2 in process of arranging 	
	<p>5. Develop a grant /bursary fund to support care leavers to access work experience and employment opportunities</p>	<ul style="list-style-type: none"> • Care leavers are supported through grant funding to access employment and work experience opportunities • Funding covers things such as transport to work and interview costs, interview clothing and work clothing costs, such as suits or steel toe capped boots, costs related to gaining health and safety or building site certificates/cards etc 	

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
	<p>6. Work closely with Job Centre plus to source vacancies and support young people leaving care to access and secure jobs</p>	<ul style="list-style-type: none"> • RMBC has recently secured a data sharing agreement with JC plus and they have committed to providing intensive support to care leavers • The Ambition programme will commence in June 2014 and this will support 18-24 year olds to access work experience and employment 	
Integrated Youth Support			<p>IYD Managers Learning Partnership and Youth Offending IYSS Managers</p>
	<p>7. 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</p>	<ul style="list-style-type: none"> • During the period April 2013 to 31 March 2014 <ul style="list-style-type: none"> ○ IYSS have provided one to one support for 5231 young people aged 11-19 ○ IYSS are currently working with 573 young people aged 11-19 through early intervention ○ Overall academic age 16-18 in learning has increase by 3.1% to 84.8% • SEN reviews, S139a assessments, CAF meetings, Core Group meetings, Case Conferences, RONI support in Y11, Early Intervention referrals, careers interviews. • Explore and refer to appropriate provision, including bespoke training/education, e.g. LEAP (Morthyng). • Arrange visits to and attend college/training provider interviews with young people. • Tracking of young people known to have left provision – school, college and training provision. • Close partnership working with key school staff, Year Managers, ASD Resource staff, 	

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
		attendance, achievement, exclusion etc. <ul style="list-style-type: none"> Partnership working with Social Care (and any other relevant agencies) Team work with locality colleagues and IYSS partners to address specific needs – <i>(Please see appendix one for examples)</i>	
	8. 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	<ul style="list-style-type: none"> Overall picture of NEET academic age 16-18 6.1% - a 2% reduction on the position at the same time last year (8.1%) 	
	9. Involve young people in the design, delivery and evaluation of the service	<ul style="list-style-type: none"> Consultation with young people about the recent realignment of IYSS (via open access provision) Discussion with young people both on a one to one basis and in groups about the service and how it is delivered within localities and encouraging them to feed back any ideas for changes/improvements in the current planning process Young People's evaluation of careers interviews in school 	
	Raising Participation		Anthony Evans Collette Bailey Ewan Cumming Fiona Featherstone Janet Andrew
	10. 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	<ul style="list-style-type: none"> LA data sharing protocols have been updated, shared and discussed with the three colleges, as the largest providers The LA securely shares appropriate data and usage of the portal has improved significantly 	

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
	11. Develop partnership arrangements with schools and colleges 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	<ul style="list-style-type: none"> • Partnership agreements are in the process of being updated with schools and colleges • Targeted work with schools • Transition passport will be implemented for all year 11 vulnerable young people worked with by IYSS 	
	12. Develop apprenticeship pathways and transition support for 16,17 and 18 year olds	<ul style="list-style-type: none"> • Apprenticeship programmes are embedded into the LA recruitment policies, thus modelling the process for our partners • The LA continues to work closely with NAS, employers, schools, training organisations and the city region to maintain this momentum • Advice and guidance is provided by IYSS • The LA continues to design additional programmes that support pathways and transition when funding is available • The LA is currently developing a vacancy bulletin to address the mismatch in supply and demand between vacancies and recruitment of young people 	
	13. Develop and publish the post 16 Rotherham Offer for students with LDD	<ul style="list-style-type: none"> • Work is ongoing with the Offer as required by the new SEN legislation • The Post 16 element will form part of this work 	

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
	14. 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	<ul style="list-style-type: none"> • Youth Contract continues to perform well, up until May 2014: <ul style="list-style-type: none"> ○ 181 young people have engaged with workers and signed up to the programme ○ 133 have been supported to re-engage in learning - 73% success rate ○ 33 to date have stayed in learning for more than 6 months - 25% success rate ○ 16 -1 9 year old NEET is 6.1% - its lowest rate for the past 5 years 	
	15. Implement managed transitions for young people with LDD, utilising the S139a and managed moved protocols	<ul style="list-style-type: none"> • Successful transition has taken place for 2013 leavers - 96.4% of S139a completed • In April 2014 3.4%% of 16, 17 and 18 year old LDD were not known (target of 5%) and 88.6 % were in learning (target 82%) • This is better than the national trends 	
	16. Manage the September Guarantee for 16 and 17 year olds and ensure offers lead to participation in line with RPA	<ul style="list-style-type: none"> • Y11 – 72.5% already have recorded offers (awaiting TRC offer data which should have significant impact on this figure) • 17 year old – cohort currently being set so no robust data yet available • The final Intended Destination return for the 2014 Y11 leavers showed that 99% had a recorded Intended Destination (up on last year's figure which was 98%) 	

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
	Teenage Parents		Carole Davison Collette Bailey Kerry Byrne
17. 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	<ul style="list-style-type: none"> • GROW have been awarded the specification to design a bespoke programme for 16-19 year olds, this will be monitored on a quarterly basis • GROW are tasked to engage young parents aged 17 and 18 to engage them in personal development and accredited learning opportunities. This commenced in April 2014 and the project is currently recruiting young people • Young parents have informed the development of the bespoke programme that will be accredited through AQA • NEET follow up – offering ongoing access to support via drop-in in the youth centre or one to one interviews in a convenient location within the locality, including home visits • Referral to and partnership working with locality Children’s Centres - using updates every month from local Children’s Centres about their provision sharing with IYSS colleagues and young people <p><i>(Please see appendix two for examples)</i></p>		
18. Provide intensive transitional support to ensure successful retention, achievement and progression to post 16 opportunities including information on care to learn	<ul style="list-style-type: none"> • All teenage mothers have an allocated caseworker to support progression to post 16 • Data for April 2014 shows 29.8% of teenage mothers aged 16-18 are in learning which is an improvement of 7.5% at the same point last year 		

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
	19. 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	<ul style="list-style-type: none"> • In Rother Valley South IYSS staff are trained in Hardwear and deliver a weekly health clinic in Dinnington School where sexual health and contraception information is discussed and provided • There is also weekly clinic delivery over the Wentworth North and South area (Thyrbergh, Wath, Rawmarsh, Swinton, Dearne Valley College) • There is a young men's drop in at Wath Young People's Centre weekly • A residential experience for young women from the Rawmarsh and Thrybergh area • around Child Sexual Exploitation took place in April <p><i>(Please see appendix three for examples)</i></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	20. Delivery of Healthy activities through Children Centre service delivery	<ul style="list-style-type: none"> • Between 1.4.13 and 31.4.14, 79% of families accessed activities at a Children's Centre to promote health and wellbeing 	Frances Hunt
	21. Parenting Programmes in Children's Centres	<ul style="list-style-type: none"> • Central point of coordination for all parenting programmes in the borough now established, and improved links being made with GPs and other universal providers 	
(iii) We will support adults to access learning to improve their chances of securing or	22. Completion of Community Learning Strategy and delivery of associated actions	<ul style="list-style-type: none"> • Learning strategy for 2014/15 in development will be completed by August 14 	Elenore Fisher Julie Roddis Karen Borthwick

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
retaining employment	23. Delivery of adult learning through children's centre delivery	<ul style="list-style-type: none"> Project developed to focus on target centres some work has already taken place but needs further development 	Mary Smith Sue Skalycz (DWP)
	24. Increase the use of children's centres, Libraries & Customer Service Centres as places to access information and improve skills, including offering free access to and assistance to use the internet	<ul style="list-style-type: none"> Community Learning currently in process of implementing a timetable of learning support in libraries supporting the development of digital skills and complementing activity of library staff 	
	25. Offer opportunities for apprenticeships, placement and volunteering within Customer and Cultural Services	<u>2013-14</u> <ul style="list-style-type: none"> Annual total of volunteer hours – libraries = 1,670 Heritage Services – 48 volunteers Theatres Service – 36 volunteers 	
	26. Provide assessment of need, in particular with regard to basic skills and ESOL, referrals to information, advice and guidance and appropriate use of training	<ul style="list-style-type: none"> ESOL sessions taking place weekly in Mowbray Gardens library Attendance 2013-14 was 1,745 	
	27. Provide work clubs in children's centres, customer services centres and libraries and access to/signposting parents to adult learning opportunities	<u>2013-14</u> <ul style="list-style-type: none"> 2,387 attended work clubs or accessed advice on employment in libraries and library/customer service centres 	

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
	28. Attendance rates will rise and participation in the earliest forms of education – e.g. children’s centres	<ul style="list-style-type: none"> • Registration as at 1.4.13 was 87% - this has increased to 91% at 1.4.14 • 10571 (69%) of children and their families accessed children’s centre services between 1st April 2013 and 31st March 2014, this is an increase from 2013 the previous year where 62% (10053) of children and their families accessed children’s centre 	
(iv) Further develop the partnership response to respond to the needs of the ROMA community and new arrivals	29. Deliver and evaluate a pilot multi-agency ‘family induction day’ at Lifewise – Sept 2013	<ul style="list-style-type: none"> • The second multi-agency ‘family induction day’ was held on the 10th February 2014 with 20 parents in attendance and the next one is planned for the 15th October 2014 	Dorothy Smith
	30. Engage key relevant Headteachers and senior staff from within CYPS to discuss long term strategy to accommodating New Arrivals	<ul style="list-style-type: none"> • Head teachers and Director of Schools and Lifelong Learning attend EU/Roma Strategic Group meetings 	
	31. Extend the Strategic Management Group to include key representatives from schools and the Director of Lifelong Learning - June 2013	<ul style="list-style-type: none"> • Following a meeting of the Chief Executive Officers Group 01/05/14 – the District Commander for Rotherham is taking the lead on EU Migration Strategic Group • New terms of reference are in the process of being developed 	
	32. 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	<ul style="list-style-type: none"> • An updated delivery plan has been produced for Year 2 activities <ul style="list-style-type: none"> ○ Key objectives delivered to date include: ○ Pathways to employment programme has engaged 30 Roma young people in pre-apprenticeship activity ○ 2 Roma Youth Work apprentices have been recruited and in post from April 2014 ○ Cross community mediation activity has 	

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
		<p>taken place in the Eastwood area</p> <ul style="list-style-type: none"> ▪ 2 Community Clean up events including all sections of the community have taken place ▪ Planning is underway for the formation of a parents group in Ferham ▪ Members of the Roma community are involved in the planning group for Eastwood Funfest <ul style="list-style-type: none"> ○ REMA have been commissioned to provide Community Engagement activity to Roma Matrix activities until March 2015 ○ Planning and student identification taken place for workshops with children who are not in school. This will be a joint enterprise between Families for Change team, Education Welfare/CME team and IYSS 	
	<p>33. Reduce the number of Roma/EU Migrant children who are not accessing full-time education</p>	<ul style="list-style-type: none"> • Unfortunately the EU Migrant Community Engagement Officer has being on long term sick since December 2013 and this work has not being covered in her absence • As a result there are no further updates on CME cases and the admissions and appeals process for EU Migrant families 	

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
	34. Overall NEETs profile will continue to improve with no disproportionate increase for this community	<ul style="list-style-type: none"> • Rotherham's overall NEET picture has improved significantly in the past 12 months reducing from 7.8% in May 2013 to 6.2% in May 2014 (reduction of 162 young people) • The BME NEET % for the same time period has also shown the same rate of decrease from 12.9% in May 2013 to 7.0% in May 14 (a reduction of 14 young people) • NCCIS figures do show a NEET % for those of White Gypsy/ROMA denomination of 31.3% in May 2013 reducing to 29.8% in May 2014, and therefore following the same trend as the overall and BME figures • The White Gypsy/ROMA figures should, however be treated with some caution as this community has proved difficult to identify in any robust way due to the diverse ethnicity declarations used. Work needs to be undertaken to ensure an accurate baseline is established across all services 	
(v) We will reduce the inequalities gap in outcomes for the boroughs most deprived communities	35. We will look at new ways of assisting those disengaged from the labour market to improve their skills and readiness for work to align with action 2 of the poverty theme of the HWB strategy	<u>Adult Skills</u> <ul style="list-style-type: none"> • Review of adult skills provision across all disadvantaged communities identified that wide range of providers are delivering relevant courses (English, maths, IT) at a variety of local venues to support people back into work. However, all areas experience the same issues of low recruitment to courses, retention of those learners once recruited, progression on to further learning and mobility i.e. the unwillingness of learners to travel in short distances in order to access provision • In order to investigate these issues further a 	Andrea Peers Malc Chiddey Waheed Akhtar Zaidah Ahmed

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
		<p>pilot project has been developed by the Boston Ward Community First Panel to provide an outreach worker to work with a targeted group of people to offer support to access provision. The project runs until March next 2015</p> <ul style="list-style-type: none"> The learning from the project will be shared across the DC's <p><u>Employment:</u></p> <ul style="list-style-type: none"> Due to the higher number of people claiming disability related benefits in the East Dene area, a Disability Employment Advisor (DEA) is based in Mowbray Gardens Library on Thursday afternoons. The adviser will help the individual job-seeker address any health or disability related barriers to employment. 43 people have used the advice service over a two month period between January and March 2014. Although there are,as yet, no direct employment outcomes this has helped in providing stepping stones for individuals back towards employment The Rotherham Growth Plan is being developed and this includes a priority on deprived neighbourhoods An Access to Employment has been established to influence and improve pathways between education, skills and employment within Rotherham. The underlying purpose of this work is to improve opportunities for local people to increase their financial wellbeing and avoid poverty. It will sit under the auspices of the Health and Wellbeing Board, but report where appropriate 	

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
		to a range of other relevant bodies, including the economy board. The group has carried out a mapping exercise on existing training	
	36. 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	<ul style="list-style-type: none"> • Co-ordinating the “Count me in” campaign with turning June into Volunteers month to raise the profile of volunteering and its benefits as well as supporting the quality of volunteering opportunities on offer • Increased reach into deprived neighbourhoods in Rotherham with the use of new publicity materials, highlighting the benefits of volunteering particularly those who are furthest from the labour market • Promoted Volunteering to a number of groups supporting young people, including South Yorkshire Housing, Target Housing, and RCAT, TARA’s, and Dearne Valley College • Recruited 6 Community Volunteer Ambassadors (CVA) from diverse communities in Rotherham. Part of their focus is to promote volunteering as a route to increase employability skills to those who would not usually engage, i.e. those from BME backgrounds, those furthest from the labour market. All our CVA’s have undergone induction and received publicity packs. Each week they promote the benefits of volunteering as a route to employment to a number of groups • Signed up to support the Headstart programme, supporting those furthest from the labour market and our deprived communities to access an holistic programme 	Janet Wheatley VAR

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
		<ul style="list-style-type: none"> of support including volunteering Worked with Jobcentre Plus to highlight the implications of volunteering for those on benefits, exploring the difference between work placements, work trials and volunteering 	
	<p>37. We will support families by getting them work ready and encouraging a stable and supportive family life through the Families for Change programme</p>	<ul style="list-style-type: none"> The Families for Change programme has achieved outcomes with 355 families (out of a possible 730 by April 2015) 324 outcomes are based on sustained improvement in school attendance and a sustained reduction in involvement in ASB or youth crime In 13 families an adult has entered employment, and in 16 families an adult has made progress to work In 1 family an adult has sustained employment throughout the period of intervention 	Jenny Lingrell
	<p>38. We will increase the engagement of vulnerable families through targeted deployment of our children's centre staff and the Families for Change delivery plan</p>	<ul style="list-style-type: none"> As of March 31st 2014, 644 families were engaged as part of the Families for Change Programme 	Jenny Lingrell
	<p>39. We will increase the support available across all communities in respect of benefit and welfare advice</p>	<ul style="list-style-type: none"> A module related to benefits and welfare advice has been developed and delivered as part of the Early Help Development Prospectus. This will up-skill the Early Help workforce and ensure that they can effectively access benefit and welfare advice on behalf of the families they work with Work to support families affected by the Benefits Cap has made important links 	Jenny Lingrell

ACTION	DELIVERY MILESTONES	Update June 2014	LEAD/S
		<p>between CYPS and the Advocacy & Appeals and Financial Inclusion teams within RMBC Phase 1 of this work (externally funded) will end in June 2014</p> <ul style="list-style-type: none"> • Solutions to achieve a sustainable roll-out of the work are currently under consultation 	
	<p>40. We will ensure there is sufficient high quality childcare and early education, particularly in areas of deprivation</p>	<ul style="list-style-type: none"> • Childcare sufficiency is assessed on an annual basis • Based on the current sufficiency analysis there is adequate provision to meet current needs • However additional provision will be required to meet the new 2 year early education entitlement Capital funding has been awarded to a total of 14 providers to create 443 new 2 year old places to meet the anticipated needs 	<p>Frances Hunt Mary Smith</p>

Appendix One – Priority 6: Delivery Milestone 7

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

Example 1

The school based Youth Support Worker (YSW) made contact with mum after failing to locate A in school after he was identified at being at risk of NEET. A. said that he was on a part time table because he refused to attend mainstream classes after being bullied. Although attending ‘the base’ sporadically, A had become disengaged from school despite being predicted C’s and above in his subjects. The YSW agreed a meeting with A to establish the support he needed. A had no aspirations in terms of a career, work or learning after year 11. Despite applying to college he had failed to attend his interviews and had since decided that he no longer wanted to go. A was at risk of being withdrawn from exams due to his attendance and lack of commitment. A said that although he was attending the base 1 hour per day that he had received no work to help him with his revision. The YSW emailed A’s teachers and progress manager requesting revision work for A. Despite A missing a number of meetings with his YSW she maintained contact with him by telephone. The YSW liaised with the schools exam officer to clarify A’s exam timetable and agreed to encourage A to attend – collecting him to bring in for exams where possible. The exams officer was delighted when A turned up for his first exam in full uniform and used allocated time in full to complete his exam. The YSW agreed to accompany the Families for Change Coordinator on a home visit as both A and his older brother who was NEET were on her list. The YSW arranged an interview for A’s older brother at Community Training Services and agreed to collect A and help him to do a CV and letter so that he could apply for apprenticeships.

Outcome:

Both boys are engaging well – the YSW is working intensively with both of them.

A’s older brother started at CTS (training organisation) and is meeting with the YSW to discuss progress and other issues and is no longer NEET.

After agreeing with A, the YSW picked him up from home and worked with him at Rawmarsh Customer Service Centre to complete his CV and letter, set up an account on the national apprenticeship service and help him apply for a vacancy. The YSW has discussed A’s worries and concerns around confidence following bullying incidents and has agreed to take him on a visit to the Advanced Manufacturing Research Centre to raise help his aspirations and a music recording studio to help build his confidence.

Example 2

The school based YSW managed to make contact with mum in April 14 following a number of phone calls and a home visit. Mum finally responded to a letter sent to both her and her son by the YSW. Mum said that she had disengaged from taking calls from school and services as she felt bombarded after her son had become disengaged from school after becoming ill following changes to his timetable. Z had stopped attending his CAHMS session at Rowan and had not been seen since Nov 13. The YSW agreed a home visit with mum and met with both mum and Z to tell them about the transition support available. Z said that he had no aspirations or ideas for learning or work after he left Y11.

Outcome: The family are now engaging with the YSW who has agreed a further home visit to work with Z to establish careers that match his likes/dislikes and provide information about learning and work opportunities.

Example 3

I have been working with a young man year 10 (aged15) I have worked closely with school and supported him by visiting Get Sorted Music Academy to add this into the provision that school offer. He is on a part time table and is at risk of becoming involved in crime. I have also supported him to access a worker through Know the Score to gain support for substance misuse.

Example 4

I have been working with a young man for 6 months doing work around a youth caution he received. This has been successful and he has not reoffended. As part of our work I have supported him in visiting colleges and training providers for when he leaves school (He is year 11). I am going to refer him to the Youth Contract team soon to gain extra support around his education in the future.

Example 5

Through our locality-based drop-in "Job-shop", we identified a group of local young men (East Herringthorpe and Dalton) who were NEET. They had all previously been worked with via the Early Intervention Team so had been supported by and had developed a trust of workers. They had been signposted towards various other training opportunities, some of which were more successful than others. However, this particular group of half a dozen young men were also involved in Anti-Social Behaviour in the community and there were issues with them as a collective, identified via the Safer Neighbourhood Team.

Example 6

At the Job-shop, we introduced them to the Rotherham United Community Sports Trust Development worker. As the group were reluctant at that point to move too far out of the area, it was decided they could do some sessions at Dalton Youth Centre to familiarise them with a course, the Level 1 Sports Course, in conjunction with Dearne Valley College. The young men all signed up, supported by the workers in the session and began their course, which would run through to July.

Since then, two of the young men have dropped off the course but the rest have remained. From being based solely in Dalton, they now travel to Dearne Valley College, have been on a residential and have undertaken some placements in community sports. They will be on the course until the summer, by which time they will have gained their Level 1 Diploma and been part of the National Citizen Service programme. They have joined with another group of young people from other areas, a real bonus in itself, and two of the group in particular are certain to go on to positive destinations at Level 2 and 3 in the field of sport and coaching and the others are felt to be much more ready for other training or employment.

The group have also undertaken functional skills and had workshops on crime and consequence, delivered by our Youth Support Worker for Justice, and drugs and alcohol as well as taking part in teamwork-building sessions.

The young men still meet weekly at Dalton youth centre for one of their sessions and for some of them, this is the longest they have sustained on any kind of training course.

The feedback from the group has been that they would not have attended had it not been for individuals working together to address their needs and listen to their concerns about where the course was initially based. They have gained confidence through being out and about in the Rotherham area and are involved in fewer ASB incidents. All the group are now actively looking for progression into another course, apprenticeships or training.

Other Examples

MS is a young man at Dearne Valley College. The family wanted him to go out of area but we have put in place a programme with a youth worker and college that means M accesses appropriate education and also develop his personal and social skills. He see the youth worker weekly and does cooking and accessing local community provision. By doing this he has also managed to start attending music sessions at Herringthorpe on his own after some initial support. He is accessing and developing social needs as well as accessing college provision.

JR is at Rotherham College. He left Hilltop early and we had some temporary placements till we got a programme together. He now has a programme based at Rotherham College but with work experience and also a taught session at Get Sorted. He also has support from a youth worker and they do appropriate social activities for his age. He needs to have positive role model (male) and look at positive activity as he is at risk of being pulled into inappropriate behaviours in his local community.

Roma young woman who came from Glasgow. Was in school but as 17+ in Rotherham we looked at College. Support from Youth Support Worker to link with the family, encourage independent travel and encourage the young woman to attend appropriate provision. She is now attending college and the Youth Support Worker still has contact to maintain the placement.

Young man at Freeman who has a lot of emotional and behavioural difficulties as well as ASD. He has been funded for 4 years exceptionally. Joint work with locality team, Vulnerable Persons Unit (VPU) and colleges mean we have a transition plan in place to try to meet his needs. It is early days but the aim is supported time in local college, supported work experience via Speak Up and also support from VPU and the locality worker to make him as busy and safe as we can.

Appendix Two – Priority 6: Delivery Milestone 17

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

Example 1

Although provided with information on learning opportunities and the Children's Centre whilst in school S had not engaged in learning since leaving school in June 12 and having her baby in Aug 12. The school based Youth Support Worker (YSW), who had previously built up a relationship whilst in school with S offered to go with her to visit the Children's Centre with her now 2 year old during ad hoc home visit. S was also provided with information about Care to Learn and free nursery places. The YSW walked with the S and her toddler to the Children's Centre where she was provided with information about the services and trips. The YSW offered to arrange a supported visit to Rotherham College to look at facilities and courses and agreed to make contact with S's friend who also lived in the area and was expecting a baby. The YSW will support both young parents to engage them with the Children's Centre and learning opportunities, which will be beneficial to both young parents and their babies in terms of developing confidence and skills.

Example 2

J responded to a follow up letter sent and said that she wanted help finding training or work. The area YSW contacted J who said that she would like help applying to college. The YSW agreed to send information about the course of interest and Care to Learn and followed this up with a further call to ask if J would like to meet to help her complete the application form. The YSW offered to meet at Rawmarsh Customer Service Centre, which was within walking distance and more convenient for J than getting on the bus with her toddler. The YSW met J and helped her complete her application form and advised her how to declare her criminal record. She also offered a supported visit to the Children's Centre for information about childcare courses. J was unable to go that day so the YSW called in at the Children's Centre and asked them to send information about free childcare places to J who had agreed they could be given her address.

Other Examples

We have supported a young dad into employment through the Creative Arts Apprenticeship programme. The young man suffers from low self-esteem and was not in education, employment or training. Our support enabled him to develop his confidence, encourage job search and raise his aspiration levels. Throughout the process we have supported the young man around parental access, patriarchal rights and parental mediation.

New centre based group in Treeton which is starting with the basic Voice and Influence approach...how do young people want to see the centre running, what activities?

A group in Thurcoft is involved with IYSS and the Big Local in developing a youth work centre based provision.

From 1st July we will be targeting referred young people to be part of our “issue based” group and will be enabling and encouraging them to have an influence on the format and running of the group.

Appendix Three – Priority 6: Delivery Milestone 19

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

The Youth support Worker is working with two groups of young women around staying safe, relationships etc....one in Aston and one in Thurcroft.

Detached Youth Work provision in Thurcroft with young men examines their use of pornography and their treatment and view of women.

Detached workers have delivered Hard Wear training in Aston and from the Youth Bus in Thurcroft ... a total of approx. 30 young people

In terms of one to one work another Youth Support Worker has worked with a young woman who is pregnant but she has made sure she has a Family Nurse Partnership worker to work with her for two years so they will talk to her about subsequent pregnancies etc.