





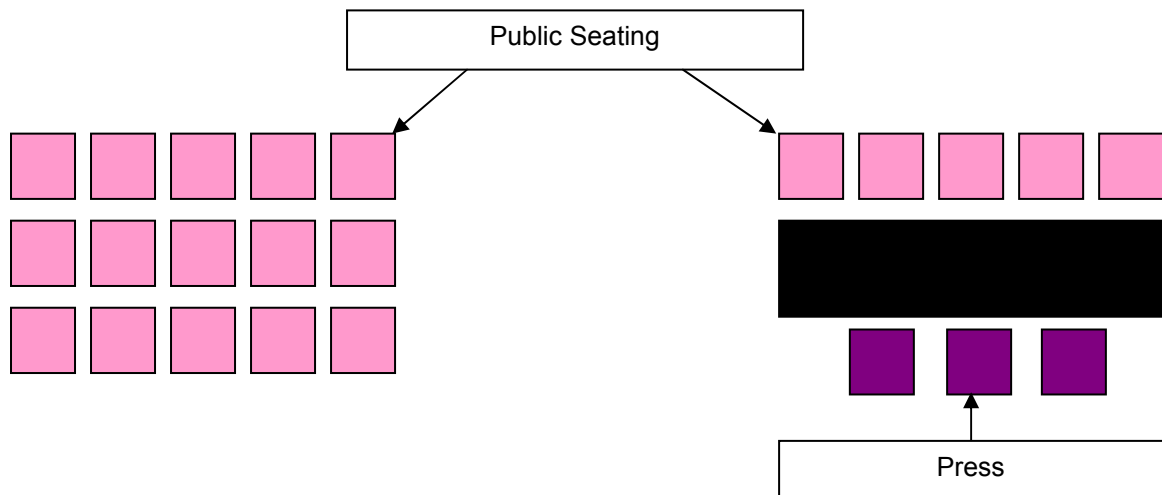
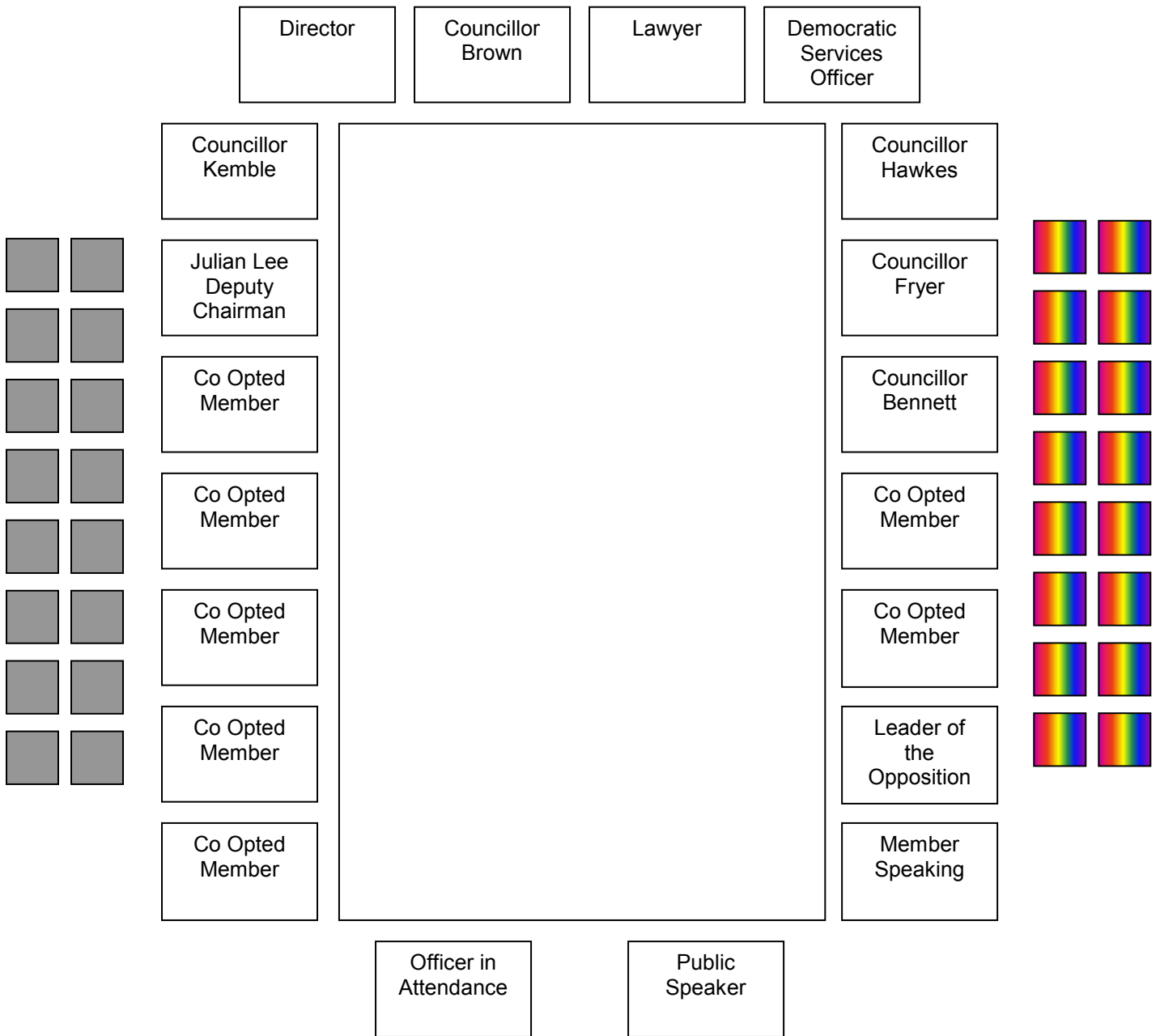
**Brighton & Hove  
City Council**

# Children & Young People's Trust Board

Title:	<b>Children &amp; Young People's Trust Board</b>
Date:	<b>20 October 2008</b>
Time:	<b>5.00pm</b>
Venue	<b>Council Chamber, Hove Town Hall</b>
Contact:	<b>Nara Miranda</b> Democratic Services Officer 01273 291004 (voicemail only) nara.miranda@brighton-hove.gov.uk

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# Democratic Services: Meeting Layout



## CHILDREN & YOUNG PEOPLE'S TRUST BOARD

The Following are requested to attend the meeting:

**Councillors:** Mrs Brown (Chairman), Bennett, Fryer, Hawkes (Opposition Spokesperson) and Kemble

**Brighton & Hove Primary Care Trust:** Julian Lee (Deputy Chairman), Darren Grayson and Dr Louise Hulton

**South Downs Health:** Simon Turpitt, Mo Marsh and Anne Caborn

**Non-Voting Co-optees:**

Lynette Gwyn Jones	Brighton & Sussex University Hospitals NHS Trust
David Standing	Community & Voluntary Sector Forum
Gail Gray	Community & Voluntary Sector Forum
Andrew Jeffrey	Parent Forum
Eleanor Davies	Parent Forum
Carole Shaves	Sussex Police Authority
Professor Imogen Taylor	Universities of Brighton & Sussex
Vacancy	Youth Council
Vacancy	Surrey & Sussex Strategic Health Authority

## AGENDA

### 25. PROCEDURAL BUSINESS

- (a) Declaration of Substitutes - Where Councillors are unable to attend a meeting, a substitute Member from the same Political Group may attend, speak and vote in their place for that meeting.
- (b) Declarations of Interest by all Members present of any personal interests in matters on the agenda, the nature of any interest and whether the Members regard the interest as prejudicial under the terms of the Code of Conduct.
- (c) Exclusion of Press and Public - To consider whether, in view of the nature of the business to be transacted, or the nature of the proceedings, the press and public should be excluded from the meeting when any of the following items are under consideration.

*NOTE: Any item appearing in Part 2 of the Agenda states in its heading the category under which the information disclosed in the report is exempt from disclosure and therefore not available to the public.*

*A list and description of the exempt categories is available for public inspection at Brighton and Hove Town Halls.*

### 26. MINUTES OF THE PREVIOUS MEETING

1 - 4

Minutes of the meeting held on 8 September 2008 (copy attached).

### 27. CALLOVER

- (a) Items 30 and 32 will be read out at the meeting and Members invited to reserve the items for consideration.
- (b) To receive or approve the reports and agree with their recommendations, with the exception of those which have been reserved for discussion.

### 28. CHAIRMAN'S COMMUNICATIONS

### 29. PATCHAM CATCHMENT AREA

Presentation by the Assistant Director, Schools, Central Area & school Support.

### 30. PERFORMANCE REPORTS

5 - 28

Report of the Director of Children's Services (copy attached).

Contact Officer: Steve Barton

Tel: 29-6105

## CHILDREN & YOUNG PEOPLE'S TRUST BOARD

*Ward Affected: All Wards*

### **31. DEVELOPING CHILDREN & YOUNG PEOPLE'S PLAN**

Presentation by the Assistant Director, Quality & Performance.

### **32. CAMHS (CHILD AND ADOLESCENT MENTAL HEALTH SERVICES) 29 - 36 COMMISSIONING AND SERVICE DEVELOPMENT**

Report of the Director of Children's Services (copy attached).

*Contact Officer: Sally Wadsworth Tel: 295060*

*Ward Affected: All Wards*

The City Council actively welcomes members of the public and the press to attend its meetings and holds as many of its meetings as possible in public. Provision is also made on the agendas for public questions to committees and details of how questions can be raised can be found on the website and/or on agendas for the meetings.

The closing date for receipt of public questions and deputations for the next Cabinet Member Meeting is 12 noon on the fifth working day before the meeting.

Agendas and minutes are published on the council's website [www.brighton-hove.gov.uk](http://www.brighton-hove.gov.uk). Agendas are available to view five working days prior to the meeting date.

Meeting papers can be provided, on request, in large print, in Braille, on audio tape or on disc, or translated into any other language as requested.

For further details and general enquiries about this meeting contact Nara Miranda, (01273 291004 (voicemail only), email [nara.miranda@brighton-hove.gov.uk](mailto:nara.miranda@brighton-hove.gov.uk)) or email [democratic.services@brighton-hove.gov.uk](mailto:democratic.services@brighton-hove.gov.uk)

Date of Publication - Friday, 10 October 2008



**BRIGHTON & HOVE CITY COUNCIL**  
**CHILDREN & YOUNG PEOPLE'S TRUST BOARD**

**5.00pm, 8 SEPTEMBER 2008**

**COUNCIL CHAMBER, HOVE TOWN HALL**

**MINUTES**

**Present:** Councillors: Mrs Brown (Chairman), Bennett, Fryer, Hawkes (Opposition Spokesperson) and Kemble

**Brighton & Hove Primary Care Trust:** Julian Lee (Deputy Chairman) and Darren Grayson

**South Downs Health:** Simon Turpitt and Mo Marsh

**Non-Voting Co-optees:**

David Standing, Community & Voluntary Sector Forum

Naima Noudjem, Community & Voluntary Sector Forum

**Apologies:**

Dr Louise Hulton, B&H City Primary Care Trust

Anne Caborn, South Downs Health

Rekha Rogers, Youth Council

Rob Scoble, Youth Council

**PART ONE**

**19. PROCEDURAL BUSINESS**

**19a Declarations of Substitutes**

19.1 There were none.

**19b Declarations of Interest**

19.2 Cllr Marsh declared a non-prejudicial interest in item 24 as the Ward Councillor for the Moulsecoomb area.

19.3 David Standing, representative of the Community & Voluntary Sector Forum, declared a non-prejudicial interest in item 24, in so much that he was involved with the YMCA.

**19c Exclusion of Press and Public**

19.4 The Board considered whether the press and public should be excluded from the meeting during the consideration of any items contained in the agenda, having regard to

the nature of the business to be transacted and the nature of the proceedings and the likelihood as to whether, if members of the press and public were present, there would be disclosure to them of confidential or exempt information as defined in Schedule 12A, Part 5A, Section 100A(4) or 100 1 of the Local Government Act 1972 (as amended).

19.5 **RESOLVED** - That the press and public be not excluded from the meeting.

## 20. MINUTES OF THE PREVIOUS MEETING

20.1 **RESOLVED** – That the minutes of the previous minutes held on 21 July 2008 be approved and signed by the Chairman as a correct record.

## 21. CALLOVER

21.1 **RESOLVED** – The Chairman reserved all items for discussions.

## 22. CHAIRMAN'S COMMUNICATIONS

22.1 The Senior Lawyer clarified, on behalf of the Chairman, that the reports on items 23 and 24 did not make reference to a couple of procedural items. The reports related to key decisions and, as such, they should have identified the reasons for the recommendations and the details of any alternative options. The lawyer accepted that such information could be found in the body of the reports. She requested, however, that verbal clarification was made to it by the relevant officers.

## 23. PHASE 3 CHILDREN'S CENTRE

23.1 The Board considered a report of the Director of Children's Services regarding the Department for Children, Schools and Families request that Brighton & Hove agree the number and location of the third and final phase of Children's Centres to open by March 2010 (for copy see minute book).

23.2 The Head of Service, City Early Years and Childcare, explained that the reasons for the recommendations were to follow DCSF requirements. The proposal was to create three small children's centres to ensure citywide coverage, as per the DCSF requirements, whilst also ensuring full use was made of existing Children's Centres to improve their long-term sustainability.

23.3 Members welcomed the report and the fact that health implications had been considered. Members also welcomed Government guidance that local authorities filled in any remaining gaps where such services were needed to support local families.

23.4 **RESOLVED** – That, having considered the information and the reasons set out in the report, the Board accepted the following recommendations:

(1) That the use of £300,000 of the capital funding to ensure that the existing Children's Centres are fully functional by funding both maintenance and improvements to the existing buildings and outside spaces where needed be agreed.



- (2) That the development of three gateway Children's Centres in the following areas be agreed:
- Preston Park
  - Westdene
  - Rottingdean/Saltdean
- (3) That a review of whether an additional Children's Centre was needed in Hove be agreed, subject to a decision being made to develop a new school as part of the Primary Strategy for Change.
- (4) That, in accordance with Children's Centre Phase 3 Planning and Delivery Guidance, CYPT officers be requested to ask existing private, voluntary, independent or statutory services for children and families in the areas listed in (2) above, to express an interest in developing a Children's Centre based on an agreed specification.
- (5) That it be agreed to consult local families about the final location of the Children's Centre in each of these areas.

## **24. MYPLACE STRATEGY**

- 24.1 The Board considered a report of the Director of Children's Services concerning Myplace Strategy, which informed members about the preparations being undertaken to submit a bid for Myplace funding, which would provide capital funding to build 'world class youth' facilities in Brighton & Hove (for copy see minute book).
- 24.2 Members welcomed the report and sought clarification about the timeframe for the bid's submission. The Commissioning Manager, Youth and Connexions Services, clarified that the outline proposal was for submission by 30 September 2008. The Director of Children's Services also explained that the bid required Member approval and that, by bringing the proposal to the Board, officers wished to secure both Member and Partner approval.
- 24.3 Naima Nouidjem, Community & Voluntary Sector Forum, enquired whether this project took account of BME young people's specific needs. The Assistant Director East Area, Early Years & NHS Commissioning explained that the proposal was for a city wide strategy and, therefore, it was for every young person. He further explained that individual youth hubs should be talking to members of their community about the specific needs of those communities.
- 24.6 Simon Turpitt, South Downs Health, indicated that one of the challenges for the health partners was how to engage with young people in matters relating to health and enquired whether this could be addressed within those youth hubs. The Assistant Director East Area, Early Years & NHS Commissioning, hoped this could be a way forward in relation to this matter. The youth hubs were expected to be centres of excellence with integrated teams, providing locally based services in order to improve resources within the

community. He indicated that officers would be bringing proposals to the next meeting of the Board meeting, outlining the mental health issues for young people.

24.7 **RESOLVED** – That, having considered the information and the reasons set out in the report, the Board accepted the following recommendation:

- (1) That the need analysis maps, suitability survey, draft Strategy for Change Framework and consultation with key stakeholders be noted.
- (2) That the proposal to submit a Myplace bid with the main focus being the redevelopment of the 67 Centre in Moulsecomb be approved, but with consideration given to linking this with smaller redevelopment projects in the other CYPT areas of the city.
- (3) That the proposal to work collaboratively with Hove YMCA to invite them to undertake more detailed work on the bid be approved.

The meeting concluded at 5.35pm.

Signed

Chairman

Dated this

day of

<b>Subject:</b>	<b>Performance Reports</b>		
<b>Date of Meeting:</b>	<b>20 October 2008</b>		
<b>Report of:</b>	<b>Director of Children's Services</b>		
<b>Contact Officer:</b>	<b>Name:</b>	<b>Steve Barton</b>	<b>Tel:</b> 29-6105
	<b>E-mail:</b>	<b>Steve.barton@brighton-hove.gov.uk</b>	
<b>Key Decision:</b>	<b>No</b>	<b>Forward Plan No. N/A</b>	
<b>Wards Affected:</b>	<b>All</b>		

### FOR GENERAL RELEASE

#### 1. SUMMARY AND POLICY CONTEXT:

- 1.1 This report presents the 1st quarter Performance Improvement Report (PIR) for 2008/9.
- 1.2 The PIR provides the Board with an overview of key issues which relate to the governance of the CYPT.

#### 2. RECOMMENDATIONS:

##### That the CYPTB:

- 2.1 Notes the data and analysis in the PIR and agrees to the action being taken to improve performance.

#### 3. RELEVANT BACKGROUND INFORMATION/CHRONOLOGY OF KEY EVENTS:

- 3.1 The CYPTB has previously agreed to receive a quarterly PIR. The purpose and content of the report is set out in an introductory section to the document (Appendix 1).
- 3.3 The information in both reports flows from and/or informs a range of other assessments and plans that the CYPT partnership makes a contribution to, including the council's Corporate Plan, the Local Area Agreement and the Joint Strategic Needs Analysis of children's health services.

#### 4. CONSULTATION

- 4.1 The PIR has been produced in consultation with the lead officers responsible for those areas of service.

## **5. FINANCIAL & OTHER IMPLICATIONS:**

### Financial Implications:

There are no direct financial implications arising from this report.

Finance Officer consulted: David Ellis

Date: 03/10/08

### 5.1 Legal Implications:

The report summarises performance improvement activity over the last quarter and asks the Board to note areas of concern. The proposed actions will enable the Trust to more effectively meet its statutory duties to children and young people.

Lawyer consulted: Hilary Priestley

Date: 06/10/08

### 5.2 Equalities Implications:

This report does not directly address equalities issues but the CYPP sets the principles that determine the delivery and commissioning of services to improve outcomes for children and young people from diverse communities and groups, and for those who live in deprived geographical communities.

### 5.3 Sustainability Implications:

The CYPP is organised under the 5 *Every Child Matters* outcomes which directly support the council's sustainability strategy including, concern for quality of life and well being, health improvement and healthy schools, enjoyment and participation in cultural & leisure activities, achievement of economic well being and effective clinical governance and health.

### 5.4 Crime & Disorder Implications:

This Report includes a report on First Time Entrants into the Youth Justice System and young people who are not in employment, education and training which includes young people supervised by the Youth Offending team

### 5.5 Risk and Opportunity Management Implications:

The CYPT Senior Management Team has reviewed its arrangements for reporting and managing risk and relevant data will be included in the next Performance Improvement Report to the Board.

### 5.6 Corporate / Citywide Implications:

Quarterly CYPP Performance Improvement Reports are the basis for performance reporting to the council's TMT, to the PCT and for monitoring the Local Area Agreement and Sustainable Community Strategy. This report also informs performance report to the Local Safeguarding Children Board and is linked to the PCTs Operating Framework and Commissioning Strategy.

## **6. EVALUATION OF ANY ALTERNATIVE OPTION(S):**

- 6.1 The alternative option would be not to review the performance of the CYPT Partnership at a strategic level. This is not recommended, as it would undermine the effectiveness of the CYPT's governance and partnership arrangements.
- 6.2 The content and presentation of the PIR is kept under constant review. Performance reports are presented by exception only. An alternative option would be to reduce the length of the PIR.
- 6.3 It is intended to publish a new Children and Young People's Plan in April 2009 and, as part of the review process, careful consideration will be given to ensuring the performance framework is fit for purpose and reflects the national policy to reduce the burden of reporting across the public sector.

## **7. REASONS FOR REPORT RECOMMENDATIONS**

- 7.1 The Children's Trust and the CYPTB have a responsibility to continuously look at ways to improve well being for children, young people and their families and rigorous, flexible performance review is part of that process.

## **SUPPORTING DOCUMENTATION**

### **Appendices:**

1. 1st Quarter Performance Improvement Report

### **Documents In Members' Rooms**

1. None.

### **Background Documents**

1. None



# Children And Young People's Trust

## Performance Improvement Report

1st Quarter (Apr to Jun 2008).



# Contents

<b>Introduction</b>	<b>3</b>
<b>Early Intervention and Prevention</b>	<b>4</b>
<b>Performance Exception Reports</b>	<b>8</b>
<b>Service Management</b>	<b>16</b>



## Introduction

This is the 1st quarter (April to June 2008) Performance Improvement Report (PIR) for the Children and Young People's Trust Board. The purpose of this report is to provide Board members with key information with which to track and challenge the progress, performance and management of the CYPT. To do this the report has 3 sections:

- Early Intervention & Prevention: three indicators to measure the development and impact of the Trust's strategic approach to commissioning and providing children's services.
- Performance Exception Reports: to address those areas where the Trust persistently does not meet local or national targets
- Service Management: Four reports, which, alongside regular budget reports to the Board, summarise progress on the key issues, which underpin and assure effective governance.

The national context for performance management continues to change. A new National Indicator Set has been launched, the NHS has a new Vital Signs performance regime and is implementing World Class Commissioning across the health sector. And the Audit Commission's new Comprehensive Area Assessment for local authorities (and their partners) will be introduced in 2009.

Some of the recent developments in Brighton & Hove that reflect these changes include:

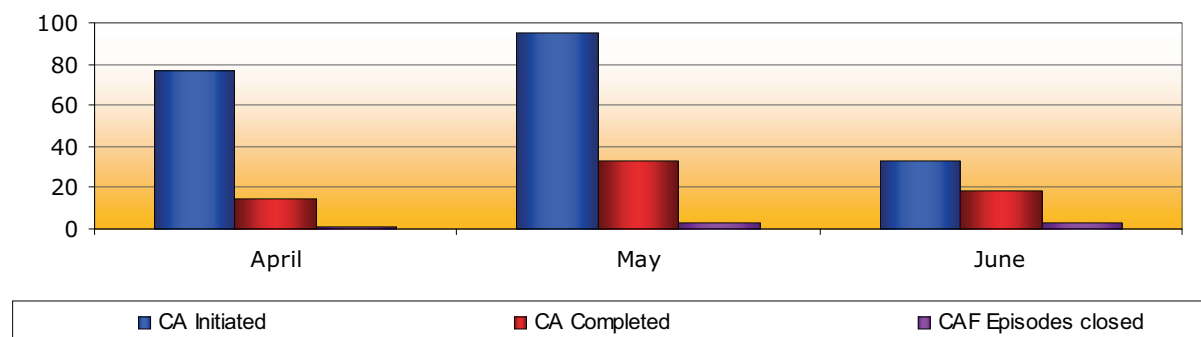
- Completion of the Local Area Agreement (LAA) including 12 indicators where the CYPT is the lead partnership, 9 where we are key partners and a range of 'strengthening communities' indicators directly relevant to our approach to participation and engagement.
- Publication of the city council's Corporate Plan setting out the administration's priorities for the next 3 years including a focus on children and young people under priority 3 'reducing inequality by increasing opportunity'.
- Completion of the Joint Strategic Needs Analysis of Children's Health Services as part of the 2008 Director of Public Health's Annual Report and development of the PCT's Commissioning Strategy for the city which will include Teenage Pregnancy and Childhood Obesity as 2 key initiatives
- Submission of the CYPT's Self Assessment for Ofsted's 2008 Annual Performance Assessment in which we graded improvements to outcomes for children and young people as good with excellent capacity to improve.

Work underway to produce a second Children and Young People's Plan (CYPP) will reflect these developments and also includes:

- Input from the CYPT's joint commissioning strategies including those which launched the CYPT in 2006 (Early Years, Connexions & Youth, Disability, CAMHS) and those developed subsequently including Parenting, Looked After Children, SEN & Behaviour, and Childhood Obesity.
- A review of CYPT provider arrangements and the development of a 3 year financial strategy
- Participative events for service users, partners and staff.

# Early Intervention and Prevention

## Assessments completed using the Common Assessment Framework



### Summary:

We are continuing to report on 3 outputs in order to monitor the introduction and impact of the Common Assessment Framework (CAF):

- Initiations: concerns identified requiring assessment
- Completions: Lead Professional and the parent/professional network have completed an Action Plan
- Closed Episodes: outcomes have been achieved or referral made to enhanced or specialist services

The 1st quarter has seen a significant reduction in initiations but an increase in completions compared to the last report. This reflects work undertaken by under-5s service to improve practice, including an almost 100% return for reported ethnicity.

When the CAF Implementation Programme is completed a baseline for the number of assessments across the CYPT Partnership will be established in order to set targets, analyse impact and predict trends. This is the position in most other children's services and we continue to work with the Government Office and DCSF to benchmark and share good practice.

### Issues:

Introduction of the CAF is on track with Phase 2 of the implementation programme being delivered to schools and cluster partnerships during the autumn term. Planning for Phase 3 has already started and will involve: adult services and housing; community and private childcare provision; midwifery, CAMHS and General Practitioners; the Police; and family support services across safeguarding, targeted youth support and grant funded programmes.

Organisational change on this scale continues to present significant challenges but there are signs that the necessary cultural shift is taking place:

- Following the Phase 1 programme, for example, Health Visitors are grappling with the implications for their professional practice and these are being taken up in the Quality & Standards Group that reports to the Clinical Governance Board.

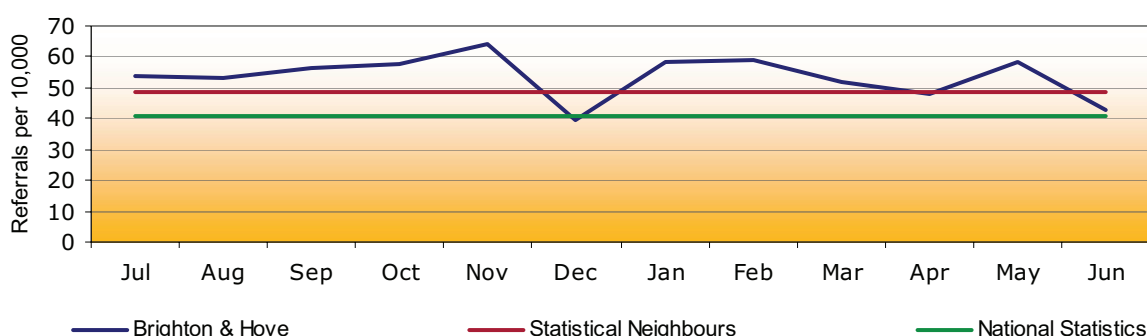
- Similarly, early sessions in Phase 2 have already raised the fit between the CAF and existing meetings and referral pathways between schools and CYPT services for vulnerable children and those with special educational needs.

**Performance Improvement Activity:**

Alongside the change programme the CAF Implementation Team has:

- Revised criteria for initiation of a CAF in Early Years Services – the initial proposal automatically to convert a ‘targeted-case’ to a CAF, created an unrealistic initial surge not followed through by completion of action plans or reviews. A new audit process is being introduced to monitor the agreed CAF quality standards.
- Established a forum to work with operational managers from the 3 area teams and the Workforce Development Team to reinforce a whole systems approach to the CAF
- Designed, and is testing a new local database created to fit with ContactPoint and the introduction of a national eCAF system. This will be a more effective tool for providing monthly reports to commissioners and operational managers
- Joined the second round of the national Local Authority Research Consortium (LARC) programme which in 2008/9 will focus on the introduction and impact of the CAF

**Referrals to CYPT Safeguarding Teams**



**Summary:**

Referrals to the 3 area Safeguarding Teams continue to be relatively stable and to show the steady downward trend reported in the last PIR.

During the 1st Quarter 2008/9 the pattern of referrals to the area teams was: \* East 41.3%; Central 32.6%; West 21.2% with 4.9% being made to the Children’s Hospital.

**Issues:**

The number of referrals is being used as a proxy to measure the impact of integrated services, partnership working in clusters and targeted early intervention programmes. The first section of the PIR aims to track these relationships by reporting on the CAF, referrals and, from now on, the CYPT Parenting Programme.

The level and pattern of activity following referral is also significant. The completion

rate of Initial (7 day) Assessments is good (and has been included as an indicator in LAA). The Management Information Report to the September Local Children's Safeguarding Board (LSCB) highlighted the significant increase in the number of children who are subject to a Child Protection Plan (previously who were on the now defunct Child Protection Register) with the June 2008 figure at 221 compared to 184 in March.

The reasons for this significant increase are as yet unclear. One hypothesis is that referrals are now better targeted, so that more progress straight to Initial Child Protection Conferences and Child Protection Plans, while preventive services pick up other child protection concerns at an earlier stage and referring them elsewhere into the new system. But there may be other factors impacting on the rising rates.

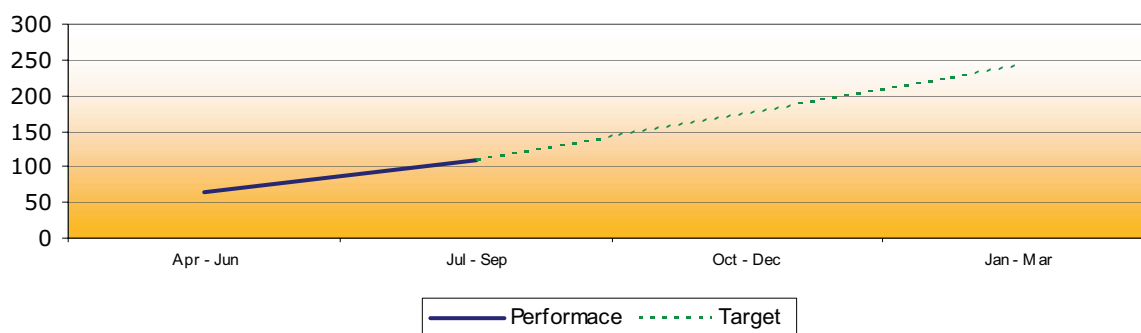
The LSCB and the Safeguarding Sub Group of the CYPT's Senior Management Team are monitoring the situation carefully. The LSCB 2008 thematic audit will address referrals and re-referrals across all agencies compared to the 2006 baseline audit completed just before the launch of the CYPT.

**Performance Improvement Activity:**

As well as the LSCB Audit a range of initiatives focus on referrals to the Safeguarding Teams including:

- Scrutiny of a detailed Monthly Monitoring report of safeguarding/social care data by all operational and senior managers
- Implementation of the Integrated Children's System for recording safeguarding and social care interventions
- A Business Re-engineering Programme to review referral pathways across the CYPT.

**CYPT Parenting Programme**



**Summary**

The graph shows the total number of parents receiving an input from the Triple P programme through 3 key interventions: group work, seminars, individual/family programmes

First quarter performance is shown in relation to the local target which is to provide a service to 240 parents

The CYPT Parenting Programme must be seen alongside a range of parenting support initiatives delivered by other council Directorates and partners, especially with respect to offending and anti-social behaviour. Future reports will take account of this data.

### **Issues**

The DCSF Parenting Early Intervention Pathfinder Pilot finished in March 2008 and activities have been continued on a reduced budget. The Pathfinder target group was for parents of for 8-13 year olds at risk. In order to mainstream the pilot programme the CYPT faces a number of challenges:

- Extending the preventative programme of seminars and tip-sheets to establish an early intervention and prevention system across the city
- Establishing a rolling programme of groups and seminars based on the work of the Pathfinder to provide a reliable service and increase numbers of groups and parents seen in order to meet local targets.
- Improving data quality so that the statistics collected are more reliable for groups than for individual work or seminars. During the Pilot practitioners delivering services have not reliably reported back their Triple P activity.
- Normalising the need for information and support for all parents as parenting programmes can be seen by parents and by some professionals as stigmatising and a criticism of parenting ability.
- Increasing sustainability of the programme by mainstreaming provision in CYPT core services.

### **Performance Improvement Activity:**

Improvement activity falls under 3 themes:

Promotion & normalising the concept of parenting support by:

- Providing information via the media, community, schools, newsletters
- During Parents Week (20-24th Oct) promoting Triple P with seminars in each area, displays in libraries
- Continuing to raise professional awareness of the Triple P System through presentations to teams and professional groups.

Establishing an ongoing programme:

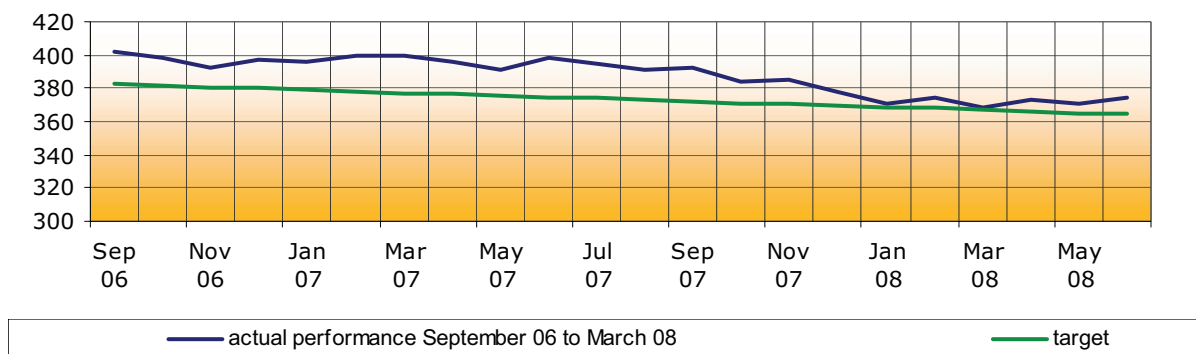
Liaising with providers through area Parenting Networks to develop a rolling programme of groups and seminars

Improve data collection:

Developing robust systems to collect statistics on seminars and individual work.

# Performance Exception Reports

## Number of Looked after Children



### Summary:

There were 375 looked after children at the end of June 2008 an increase of 9 from the 367 reported at the end of the 4th quarter 2007/8.

Reduction targets have now been set and by March 2012 it is predicted that there will be 326 looked after children and young people in Brighton and Hove

However the relatively high proportion of Looked after Children who are aged 14+ will mean that the targets for reduction in numbers will need to reflect this static group of children who are unlikely to leave the care system and who will need to be supported into leaving care services.

### Issues:

Although assessment of our overall performance compared to statistical neighbours must wait until publication of the updated national data set, Brighton & Hove is one of 50 Local Authorities in the Chartered Institute of Public Finance and Accountancy (CIPFA) 'Looked after Children Benchmarking Club'. This comparative financial data shows spending is levelling off, an indication that we are successfully re-engineering the local care system as set out in the November 2007 Looked After Children Strategy for Change e.g.

- Unit costs have increased by only 0.8% compared to 1.8% nationally – reflecting the predicted reduction in use of independent fostering placements
- The number of weeks in care per child is down to 303 compared to an increase nationally of 67
- The proportion of children in residential care is within the national average and our use of foster care is high

This data underpins the CYPT's emphasis on value for money in the provision of services to looked after children which has been a focus of attention for the Audit Commission during the 2007/8 corporate assessment.

### Performance Improvement Activity:

Additional funding from the Care Matters Grant is being used to improve the

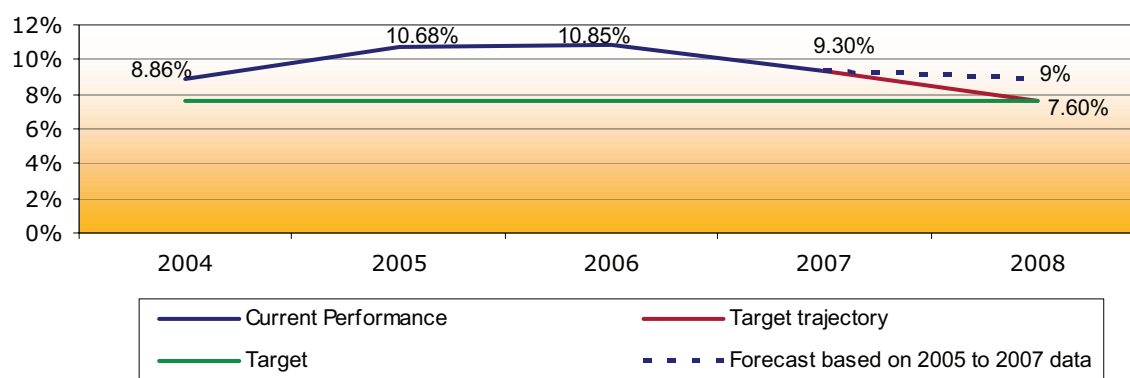
procurement and range of placements available, provide additional support to promote the emotional well being and educational attainment of Looked After Children, increase capacity in the Independent Reviewing Officer Team, address Child Trust Funds and establish a new Children in Care Council.

New arrangements jointly to commission and procure external placements with West Sussex County Council have been agreed and will go live in November.

The 2007/8 Adoption and Fostering Agency Annual Reports, which will include targets for the delivery of in house placements, will be presented to the Child Review Board later in the autumn.

The Senior Managers Safeguarding Sub Group is leading an analysis of the relationship between the level of referrals to safeguarding teams, the increase in numbers of Child Protection Plans and the implementation of the Looked After Children Strategy for Change.

### Young people not in education, employment or training (NEET)



#### Summary:

The progress against the NEET target is measured annually as an average for November, December and January. Compared to the 2006 figure of 10.85%, a significant improvement was made in 2007 with the figure of 9.24%. The encouraging news is that the June 2008 figure submitted to DCSF is 8.8% (412 young people). The June 2007 NEET figure was 9.8%. The June 2008 Unknown figure is 5.7% compared to 4.5% in June 2007. Within the NEET cohort, there are certain targeted groups which continue to present significant challenges e.g. 13% of the NEET cohort are teenage parents/pregnant.

#### Issues:

- Work to set up the new 'Connexions Plus' centres commenced during the first quarter. The centres opened in September in each of the three localities delivering multi agency support to young people in their local area. There will inevitably be a transition period for staff which will need to be carefully managed to avoid any drop in performance.
- Within the integrated area teams, staff employed by the council and those funded by the council i.e. employed by sub contractors will be located together

in the same buildings. This arrangement will be need to be managed carefully to ensure that all team members feel they are being treated equitably both in terms of office facilities and caseload distribution.

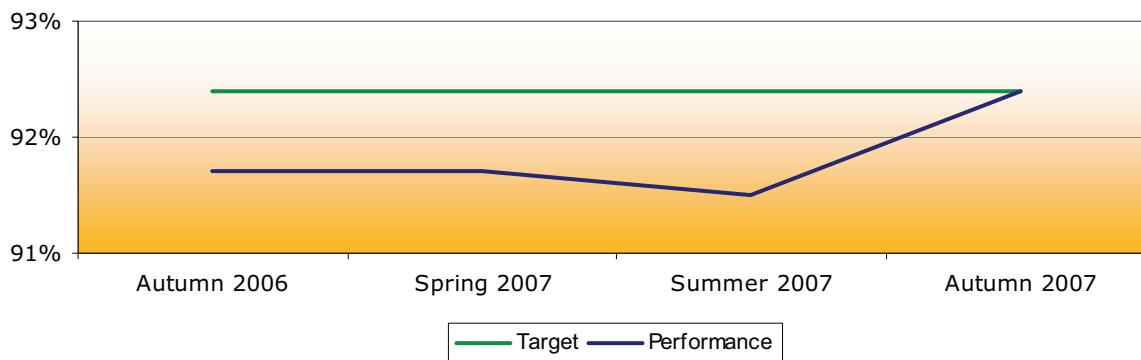
- Because of the change in the database and its corresponding reporting writing tool, there has been some delay in generating detailed NEET reports. However this will be resolved by the next quarter.

#### **Performance Improvement Activity:**

- The new database (Aspire) for the Youth & Connexions service is now operational. Youth & Connexions staff have been trained and are accessing the system with few problems reported. The access and training has also been provided to some key staff from the wider integrated youth support service.
- The new provider of the Connexions IAG contract is Prospects Services Limited and they will deliver services from 1st Sept 08. Their wide experience of successfully delivering Connexions services in the other parts of the country should significantly contribute to the achievement of the NEET target.
- The September Guarantee initiative for 2008 is currently underway. It is an entitlement to an offer of an appropriate learning opportunity for all young people age 16 and 17. CYPT is working closely with the Learning & Skills Council and post 16 learning providers to ensure that young people receive their entitlement and that the data is recorded appropriately on Aspire and submitted to DCSF by the required deadlines.

#### **School Attendance: Secondary**

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#### **Summary:**

The graph shows that secondary school attendance has improved consistently during the 2007/8 academic year and means that, for the first time, we have reached our attendance target for both primary and secondary schools.

Future reports will focus on the new national priority to reduce the number of Persistent Absence (PA) pupils in secondary schools i.e. pupils who have recorded 20% or more absence during the Autumn and Spring terms. This will include Persistent Absence Schools i.e. secondary schools which have 70 or more Persistent Absence pupils who form 7% or more of the school population.

Brighton & Hove is currently a 'targeted authority' because we have 5 PA schools:



Varndean, Falmer, Portslade, Hove Park and Patcham. Reductions in PA pupils have already been made by each of the 5 schools with Falmer achieving a reduction of almost 50%.

**Issues:**

Persistent absentees are more likely to have poor educational outcomes and to disengage from learning altogether. The national Children Plan has set a target for 2011 by which time no Local Authority should have more than 5% of its secondary pupils as persistent absentees. A persistent absence indicator will be introduced in the School Achievement and Attainment Tables from 2008.

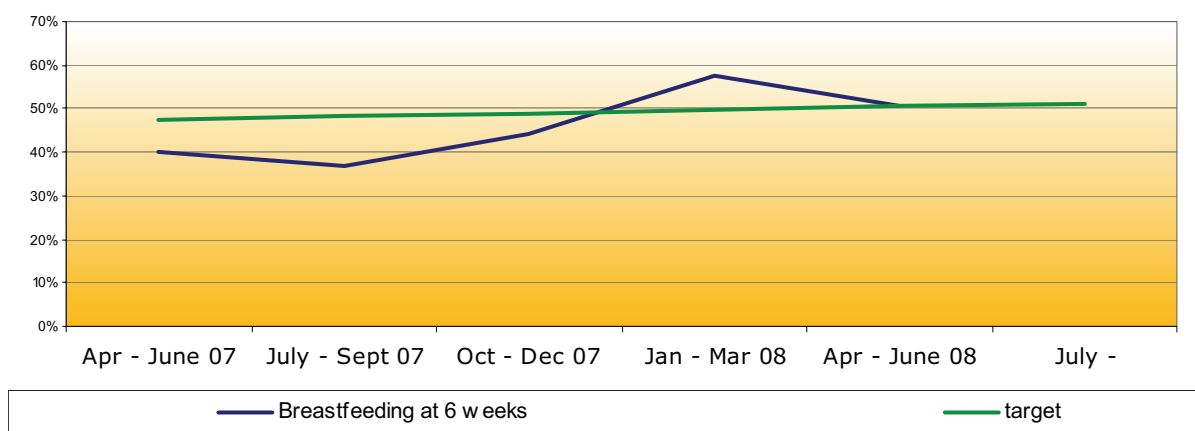
Although we are currently a targeted authority the DCSF has recognised the significant reductions that have already been made in the number of PA pupils and we have been asked to provide a case study to be used an example of good practice for the National Strategies Website.

**Performance Improvement Activity:**

The focus on secondary school attendance reflects the CYPT’s integrated approach to improving outcomes for children and young people and is closely connected to strategies to improve behaviour, support children with special educational needs and sustain the reduction in permanent and fixed term exclusions. Specifically we will:

- Target pupils at risk of becoming PAs and those schools experiencing particular problems with attendance
- Closely monitor new procedures are used consistently and are monitored and reviewed
- Benchmark with good practice in other authorities
- Consult on a revised Attendance Strategy during the Autumn Term
- Continue to work with Sussex Police to undertake regular ‘truancy sweeps’ across the city

**Breastfeeding at 6 weeks**



**Summary:**

The graph shows that the recorded rate of breastfeeding at 6 weeks across the city is 50.8%, a reduction of almost 10% since the 2007/8 4th quarter report. By area the

rate is: West 44.4%; Central 58.3%; East 40.1%

This reduction against a critical performance indicator is disappointing especially after a period of steady improvement.

**Issues:**

Data quality, the percentage of cases where data is consistently and accurately entered into the database by Health Visitors, remains an issue. The last Performance Improvement Report outlined the work undertaken to ensure staff understood the importance of accurately recording feeding status.

Staffing, operational and technical issues have undermined recent progress including staff shortages due to vacancies and sickness, the impact of implementing the CAF and problems with IT systems.

As a result it is not possible accurately to gauge whether the number of children being breast-fed at age 6 weeks has reduced or whether it is the number of recorded entries that has reduced – this will remain a priority issue for the under-5s service.

**Performance Improvement Activity:**

To improve data quality managers now have the facility to monitor data inputting for each staff member and this will be taken up in supervision sessions and team meetings. In addition the Health Visitor Development Day on November 4th will, again, address data quality.

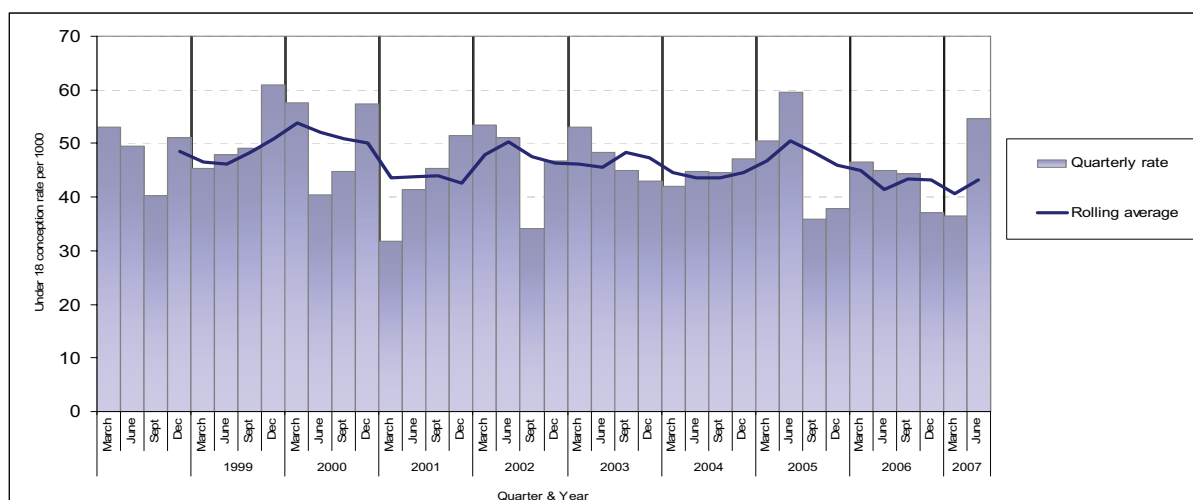
Quarter 1 results belie the range of positive initiatives across the city to support and promote breast-feeding including:

- One of the longest mother-led breast feeding support groups in the country
- A demonstration-site project in partnership with the National Centre for Social Marketing Research
- Public consultation about breast feeding in public and returning to work
- A fledgling city-wide peer support programme

A multi-agency group is incorporating these achievements into a new citywide strategy which will focus upon normalisation of breastfeeding by:

- Ensuring mothers who want to breastfeed are supported by the health systems, their community, friends and family to do so
- Enabling public facilities and employers in the city to do what they can to make feeding a baby as stress-free and satisfying as possible
- targeting additional support in the East Area where rates of breast feeding are low.

## Teenage Conception Rate



### Summary:

Final data for 2006 has been released to confirm a national reduction rate of 12.9% compared to 10.4% locally. The provisional Q2 data for 2007 confirms a national and local increase.

Data sharing arrangements are now in place so that this report will also be able to show births and termination activity levels monthly and will be available quarterly from Dec 08.

### Issues:

The birth rates are continually reducing locally, the reduction rate stands at 23% in 2006. The termination rates have increased by a further 1% and now are at 57%.

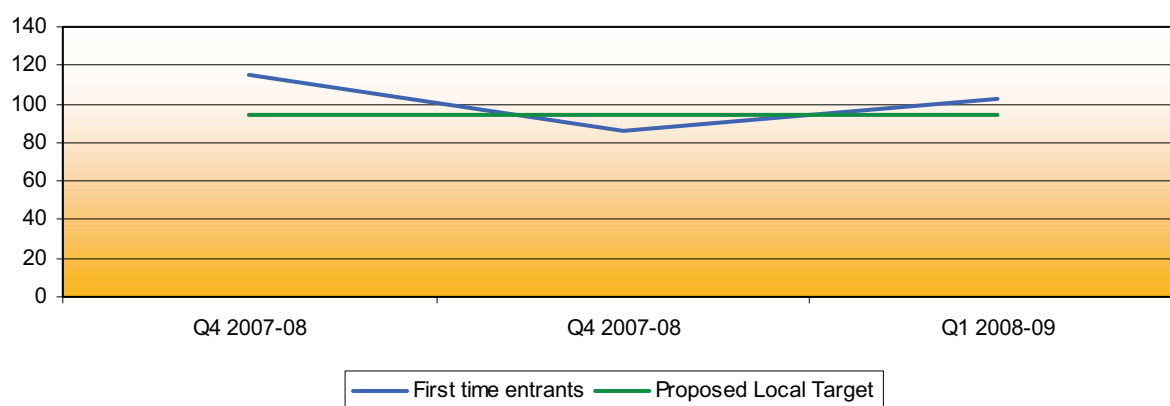
Reduction of teenage pregnancy rates is planned to be one of the top 8 performance targets in the PCT's Commissioning Strategy. A review of the CYPT's strategy and delivery plans has been completed and in future priority will be given to: increasing and publicising more effectively contraception services; targeted interventions to at risk groups; workforce and training development to test and challenge the hypothesis that a percentage of frontline staff have a non-intervention approach with regards to sexual activity and young people; and increasing the resources for youth work.

### Performance improvement activity:

The PCT has invested in a performance analyst post so that comprehensive quarterly performance reports will be available from the end of October. Other initiatives include:

- Implementing new targeted sexual health provision in 4 schools and increasing the school nursing resources to achieve this.
- Specialist teenage pregnancy posts located in the new targeted youth support service within each locality
- Funding to extend the Southdown's Family Planning Service to provide an increased sexual health and contraception service in post 16 Further Education provision.

## First time entrants into the Youth Justice System



### Summary:

The number of First Time Entrants peaked between April and June 2007 followed by a downward trend sustained until March 2008. The 1st quarter 2008/9 result shows an increase to 103 from the 2007/8 baseline of 98 per quarter (full year total of 395). To achieve a proposed local reduction target of 5% requires a reduction to 94 each quarter.

During 2007/8 the East Area had the highest number of first time entrants. Across the city 35% were female and 65% male, in line with previous trends. The mean average age was 14.8 years with the oldest being 17 and the youngest 10 and 22% being aged between 10 and 13.

Significantly national baseline data is not yet available and the 2008/9 target for the Local Area Agreement will not be set until the first review in 2009.

### Issues:

The impact of national policy tensions between First Time Entrants and Offences Brought to Justice has been discussed in previous Performance Improvement Reports. The Ministry of Justice has now published a Green Paper 'From the Neighbourhood to the National: Policing our Communities Together' which addresses this issue directly.

Public Service Agreements (PSAs), which may have had the unintended effect of encouraging police to focus on 'easy wins' have now been replaced. The Green Paper gives the police a mandate to focus on more serious and violent crime and for local priorities e.g. tackling lower level crime and anti-social behaviour, to be measured through public confidence indicators and partnership working.

Sussex Police are already taking this forward and it is anticipated there will be an impact on First Time Entrants.

### Performance Improvement Activity:

Nevertheless, the number of First Time Entrants remains high and there is a programme of improvement activity including:

- The coordinated roll out of the Targeted Youth Support Service and launch of

the new Restorative Justice Project (RJ) developed by the Youth Offending Team with police and other partners. The project involves referral of appropriate young people to take part in RJ or substance misuse programmes in order to 'no further action' offences and reduce the use of Reprimands for those who pose a low risk of re-offending.

- The CYPT is involved in a range of initiatives to reduce crime and anti-social behaviour as set out in the council's Corporate Plan and the LAA.

# Service Management

## Risk Management

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### Summary:

The CYPT Risk Register has been reviewed and work is underway to finalise the detailed assessment of each risk. Risks are held at 4 levels in the organisation:

- i. Risks held on the city council Corporate Risk Register:
  - Long Term Funding for Educational Premises
- ii. Risks held by DMT:
  - Supporting effective governance
  - Clarifying commissioning and procurement arrangements and the alignment of commissioning strategies
  - Providing integrated services within available resources
  - Sustaining partnership working
  - Workforce development
  - Delivering a CYPT wide capital strategy
- iii. Risks held by Assistant Directors at Branch level as part of their new Service Business Plans.
- iv. Risks held by the Clinical Governance Board, including regular reports from the council's Standards and Complaints Manager. Long waiting times for Autistic Spectrum Disorder assessments has been resolved since the last report leaving:
  - Inadequate storage space and transfer systems for health records
  - Safety of staff and service users at Morley Street due to client mix
  - Risk of abnormal development due to premature babies missing repeat screening for congenital hypothyroidism

The joint Health and Safety Committee 1st quarter report for 2008/9 included:

- 103 incidents reported compared with 159 in the previous quarter, a reduction from the previous quarter, but consistent with the same period in 2007.
- The three highest 'causes of incidents' were: slips/trips/falls on the level at 20 (19% of all incidents); Behaviour Management at 19 (18% of all incidents) and Challenging Behaviour at 13 (3% of all incidents).
- The number of days lost due to employee absence following a work-related incident was 33 days (compared to 61 during the last quarter).
- 8 incidents were reported to the Health and Safety Executive

### Issues:

Risk & Opportunity Management for the CYPT has been integrated with the council's new service business planning process to provide a clear mechanism to escalate risks as appropriate through the management chain.

Recruitment of a new Head of Nursing will be completed in October and this will provide dedicated management time and leadership for risk management.

### Performance Improvement Activity:

The Senior Management Team will finalise the CYPT's Risk Register during the next quarter so that risks are monitored across the management structure.

Clinical Governance arrangements have been strengthened by the creation of a Steering Group for the chairs of each of the Quality and Standards Groups to coordinate and ensure consistency. Each group now has clear terms of reference and processes in place to ensure compliance with Standards for Better Health, dissemination of good practice from NICE guidelines and reviewing clinical risks for the risk register.

## Value for Money

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### Summary:

The following developments took place during quarter 1:

- Publication of the Review of Value for Money (VFM) in Children's Services commissioned from the Audit Commission as part of the city council's programme of VFM reviews. The report focussed on services for children and young people in care and/or who have special educational needs. The report included a Management Action Plan to address the report's recommendations agreed by DMT.
- Each Assistant Director completed a Service Business Plan using a new template introduced following the comprehensive review of business planning across the city council. By aligning resources, service improvement priorities, workforce development and performance management the new Service Business Plans will embed VFM principles into the CYPT.
- Case Studies for Looked After Children and Special Educational Needs were included in the council's 2008 Self Assessment to meet the requirements of the Audit Commissions annual Use of Resources judgement.

### Issues:

The CYPT's approach to VFM is underpinned by Priority 2 of the city council's new Corporate Plan 'Better use of Public Money' which includes a commitment to provide services which are good value for money.

Ensuring good value for money will also be a critical driver in the CYPT's 3-year financial strategy currently being drafted by the Senior Management Team and will inform the development of the Trust's second Children and Young People's Plan as summarised in the introduction to this report.

### Performance Improvement Activity:

The Action Plan to improve VFM in services for children and young people in care and/or who have special educational needs will be monitored by the Senior Management Team and by the Assistant Directors leading on the Special Educational Needs and Behaviour strategies and the Looked After Children Strategy for Change.

Senior managers in the CYPT are participating in the council's preparation for the new Comprehensive Area Assessment regime which will be introduced in 2009.

Each Assistant Director will review the Service Business Plan for their branch including progress on VFM.

## Workforce

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### Summary:

- Safeguarding training is in place for all CYPT staff. This includes an e-learning package for every new member of CYPT staff with 100 licences made available for the Community & Voluntary Sector (CVS). The training programme for headteachers and designated school staff has been revised to fit with CYPT programme.
- A core skills training programme has been developed to support integrated working practices for all staff and to support new staff joining the CYPT to meet their induction standards. This will be open to the CVS who have been commissioned to deliver parts of it.
- Using funding from the Children's Workforce Development Council (CWDC), two leadership and management in integrated services modules have been developed and are being piloted with the University of Sussex and the University of Brighton.
- A CYPT Investors in People (IiP) action plan has been developed and CYPT Induction for new managers is now in place
- Throughout the year we have continued to deliver qualifications to social care workforce in the Trust in line with national and local requirements. 6 individuals achieved MSc in Social Work and 4 individuals achieved BA in Social Work all returning to council workforce in social work jobs. 9 achieved NVQ 3 awards.
- A training & development programme for all managers to support the CYPT supervision policy is in place for 2008/09
- A series of 'road shows' were run to promote the new CYPT training & development programme to all staff

### Issues:

- There will be a new national children's workforce development strategy published by the DCSF in Autumn 2008 which will need to be addressed in our CYPT workforce development strategy.
- The CWDC requires every Children's Trust to self assess their progress towards using the CAF and children's workforce reform. These findings will inform our workforce development strategy.
- Safer recruitment processes and training for managers needs is a priority for the CYPT, the council and health economy as to ensure we recruit the safest possible staff to work with children
- The competence and understanding of our managers needs to be developed to enable them to take a greater leadership role in identifying and supporting the integrated learning and development of their team members
- All CYPT managers need to update their supervision skills in the context of the CYPT supervision policy

### Performance Improvement Activity:

The following activities are scheduled for quarter 2:

- Completion of the CYPT leadership and management development



- programme
- Evaluation of the integrated safeguarding programme
- Preparation of the Core Skills Programme for publication in October 2008
- Publication of the Schools Learning Programme for 2008/9

## Equalities

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### Summary:

The Senior Management Team has agreed a draft Equality Impact Assessment (EIA) programme for 2008-10. Assessments to be completed by April 2009 are:

Integrated disability services (including PRESENS)

School admissions

Adult learning

Extended services in and around schools

Private fostering

Early years services

The Children and Young People's Plan

The CYPT is represented at the city council's Equalities Steering Group which has developed:

A draft Equalities and inclusion Policy and Equalities Scheme Action Plan

An EIA programme 2008-10

An EIA Toolkit for managers

The Local Area Agreement includes Services for Disabled Children (National Indicator 53) as a local indicator.

### Issues:

The issues identified in the last Performance Improvement Report remain a concern, especially the 'disconnection' between compliance with assessment and monitoring processes and the range and quality of our front line services.

As noted above recruitment of a new Head of Nursing will be completed by mid October and this will provide dedicated management time and leadership for equalities as well as risk management.

### Performance Improvement Activity:

During quarter 2:

The Quality & Performance Branch will work with the council's Equalities Team to support managers in the CYPT to complete EIAs scheduled for 2008/9.

Proposals to develop the survey of parents required to assess Services for Disabled Children, as included in the LAA, will developed in light of anticipated national guidance.

Discussions will continue with the Community and Voluntary Sector Forum to engage key partners to undertake a joint EIA of the Children and Young People's Plan.



<b>Subject:</b>	<b><i>CAMHS (Child and Adolescent Mental Health Service) Commissioning and Service Developments</i></b>		
<b>Date of Meeting:</b>	<b>20<sup>th</sup> October 2008</b>		
<b>Report of:</b>	<b><i>Director of Children's Services</i></b>		
<b>Contact Officer:</b>	<b>Name:</b>	<b><i>Sally Wadsworth</i></b>	<b>Tel:</b> <b>295060</b>
	<b>E-mail:</b>	<b>sally.wadsworth@brighton-hove.gov.uk</b>	
<b>Key Decision:</b>	<b>Yes</b>	<b>Forward Plan No. (CTB 4228):</b>	
<b>Wards Affected:</b>	<b>All</b>		

### FOR GENERAL RELEASE/ EXEMPTIONS

#### 1. SUMMARY AND POLICY CONTEXT:

- 1.1 The report is asking the board to agree proposed service developments for 14-25 year olds CAMHS service.
- 1.2 The report also updates the board on the Targeted Mental Health in Schools DCSF Pathfinder Project.

#### 2. RECOMMENDATIONS:

- 2.1 To agree the model of service for 14-25 year olds with mental health needs
- 2.2 To note the progress on the Targeted Mental Health in Schools DCSF Pathfinder Project

#### 3. RELEVANT BACKGROUND INFORMATION/CHRONOLOGY OF KEY EVENTS:

- 3.1 The CAMHS Commissioning Strategy was developed and agreed by the CYPT Board in 2006. Since this time a number of service developments have taken place within the commissioning strategy framework that have either been subject to previous board papers or will be subject to forthcoming board papers.
- 3.2 CAMHS has continued to be subject to continued national scrutiny and the Department of Health and the Department for Children, Schools and Families are in the process of undertaking a national review for CAMHS. An interim report was published in July 2008 and has identified six challenge areas for local CAMHS services:
  - Making the whole system work more effectively for all children and young people, families and staff

- Making a difference – research, effective practice, monitoring and evaluation of the impact of interventions
- Making sure children at risk of or experiencing mental health problems and their families have swift and easy access to effective services
- Workforce development across sectors and across the levels of specialist and non-specialist staff
- Resource deployment
- Cultural change and implementation

3.3 Locally, service developments are being developed within the overarching commissioning strategy as well as aiming to address the above challenges and service developments will be checked against the final national review report which is expected later this year.

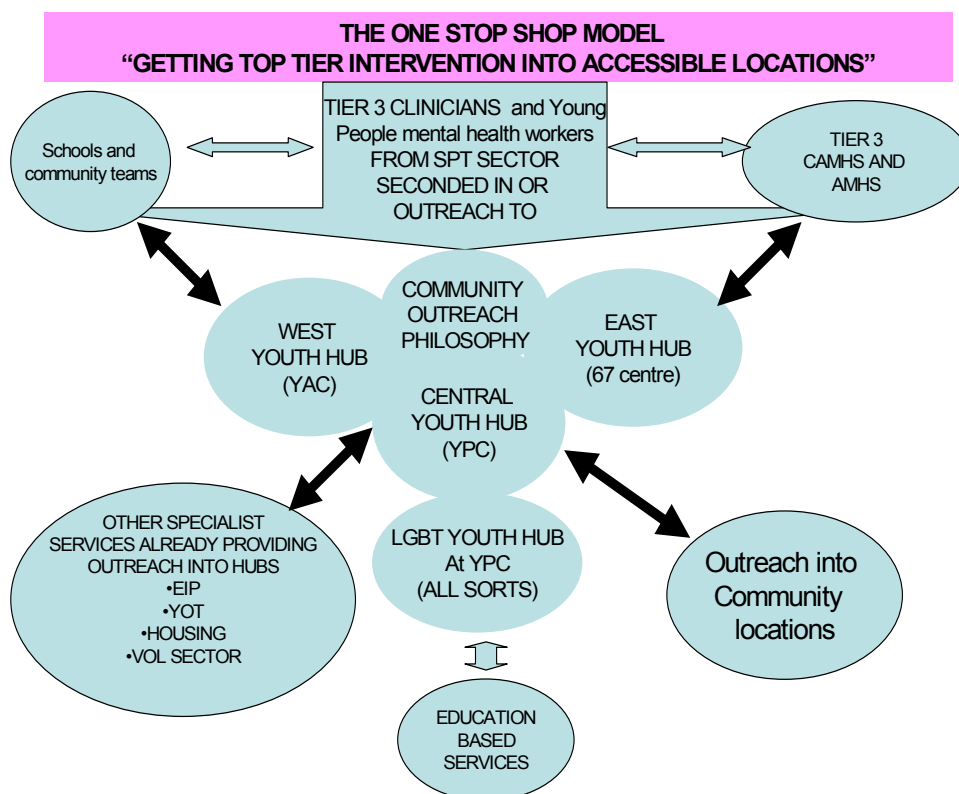
#### 3.4 **14-25 Year Old Service**

The CYPT CAMHS Strategic Implementation Group commissioned a sub group to scope and provide recommendations for a 14-25 year old mental health care pathway within Brighton and Hove.

The sub group have recommended the following model, the aim of which is to develop better access to services and earlier intervention for young people with mental health problems by linking CAMHS, EIP (early intervention in psychosis) and AMHS (adult mental health services) into Youth hub development as part of Targeted Youth Support in the community.

Young people's mental health workers will be employed to work in Youth Hubs where young people present for a range of problems and issues thus reducing stigma of presenting with mental health issues. A menu of support will be provided to meet needs. The service will link with specialist CAMHS, EIP and AMHS across transition for older teenagers. Sessional time will be made available from EIP and AMHS to support the care planning for young people with enduring mental health needs who will require these services as adults.

The model is illustrated in the following diagram:



The benefits of the model include:

- Accessible and acceptable services for young people leading to better engagement and fewer young people failing to access or dropping out of services
- Earlier intervention, better outcomes, preventing crises and relapse and reducing level of need for long term support
- Links between youth services and mental health services will improve quality of interventions through improved skill mix
- Greater integration of CAMHS, AMHS and Youth services to ensure care plans deliver improved outcomes
- Transitional care planning and lead professional/care coordinator identified for 16 year olds who are likely to need ongoing support in adulthood
- An integrated approach to meet range of needs including dual or multiple diagnoses by the designated lead professional/care coordinator for each young person ensuring links with specialist services, including substance misuse, learning disability, social care, housing and supporting people to make sure a comprehensive care plan is delivered
- Access to psychological therapies (IAPT) for young people as well as adults
- Youth workers become more mental health aware and can support young people better

- CAMHS, AMHS and EIP workers more approachable to young people and youth service aware
- 3.5 As agreed with the board previously, to update the board on the progress of the Targeted Mental Health in Schools DCSF Pathfinder Project.
- Steering group meeting dates set for the coming academic year
  - School 'group' meetings held once per half term in each of the four areas ('groups' are made up of each secondary school with its two feeder primaries). It is intended that the work will develop in these groups and each group will have an action plan with individual tasks and service level agreements for each school.
  - Project plan, implementation plan and risk register written, submitted to DCSF and agreed.
  - Training for schools commissioned for Silver SEAL (Healthy Schools Team), sociograms (University of Sussex), mental health awareness (Experience in Mind – Hove YMCA) and Triple P family support
  - Meetings in individual schools to undertake the audit covering baseline data and information on existing school systems and processes to identify and support children with emotional and mental health needs. Baseline data includes attendance, attainment, exclusion and other data. This outcome data will be used to track progress and impact over the three years of the project.
  - Contract for the local evaluation has been sent out to tender, September '08
  - Plan outlined to cover the intervention strand of the project. The plan involves the creation of two primary mental health worker posts to work alongside the schools in the project. Time and remit of existing staff such as educational psychologists, family therapists, clinical psychologists and school counsellors will be enhanced to allow for the trialling of evidence-based therapeutic interventions and good and successful practice will be identified through the local evaluation and rolled-out across staff teams working with all schools in Brighton and Hove.

### Plan for next 5 months:

September	October	November	December
School group meetings – action plans to be written and agreed	CAF training – plan to embed CAF	Triple P training	Quarterly monitoring
Draw up schools service level agreements	Steering group meeting	School group meetings – whole school development support and planning	Experience in Mind training
Silver SEAL training (small group work)	Behaviour and attendance consultation support for secondary schools	Plan consultation work with parents and young people	All staff delivering interventions in post
Progress report to DCSF	SEAL and whole school developments consultation for primary schools	Sociogram training part 2 – including support from educational psychologists	
Recruit staff to deliver interventions	Sociogram training part 1		

#### 4. CONSULTATION

- 4.1 For the 14-25 year old service review there has been extensive consultation by MIND in Brighton and Hove. 50 young people have either filled in a questionnaire or attended focus groups and their views are being incorporated into the recommendations of the review.
- a. A parent/carer consultation was also undertaken which has provided valuable insight into their views about access to services for their children. 35 parent/carers contributed to the findings
- 4.2 The targeted mental health in schools pathfinder is being developed following a successful bid to the DCSF. The project plan includes ways of involving parent/carers and young people in developing the next stages of the Pathfinder
- 4.3 The other service reviews have been commissioned following the production of the 10 year commissioning strategy which was written following consultation with staff, young people and parents

## 5. FINANCIAL & OTHER IMPLICATIONS:

### Financial Implications:

- 5.1 In 2008/09 for CYPT the total grant funding due is £419k and now forms part of the LAA/ABG. It is important that the overall funding is regularly reviewed to ensure that there are no additional costs to the council. The Young People's Mental Health Worker posts are to be funded by the PCT.

*Finance Officer Consulted: Paul Brinkhurst*

*Date: 30/09/08*

### Legal Implications:

- 5.2 Within the body of this report explanation is provided as to the background locally and the scrutiny of the DH and DCSF leading to identification, at an interim stage of six challenge areas. A Model is proposed which is informed by central government thinking in this area. The Local Authority has statutory duties to safeguard and make provision for vulnerable child and adults. The Model proposed fits with these statutory duties. A comprehensive consultation exercise is described involving relevant and interested parties.

The improved outcomes which is intended for young people through the application of the Model and consultation process described provides for compliance with the Human Rights Act 1998.

*Layer Consulted: Sandra O'Brien*

*Date: 29/09/08*

### Equalities Implications:

- 5.3 Improved access for all groups is part of the commissioning intentions for CAMHS, particularly for disadvantaged groups such as Looked after children and LGBT young people. These groups are covered in this report.

An Impact Assessment will need to be incorporated in the implementation plan for the young peoples mental health service.

### Sustainability Implications:

- 5.4 No adverse effect on environmental sustainability

### Crime & Disorder Implications:

- 5.5 Earlier intervention in working with young people with mental health needs will assist in the reduction in crime

### Risk and Opportunity Management Implications:

- 5.6 Real opportunity to positively contribute to the national policy drivers for CAMHS

### Corporate / Citywide Implications:

- 5.7 Plans are city-wide plans



**6. EVALUATION OF ANY ALTERNATIVE OPTION(S):**

- 6.1 No action, but young people's views are driving change and Targeted Mental Health in Schools is a national project

**7. REASONS FOR REPORT RECOMMENDATIONS**

- 7.1 Changes in young people's services need Board approval because there are implications of how services are organised and delivered
- 7.2 Recommend that the report be approved as there will be improved access to services and positive outcomes for young people.

**SUPPORTING DOCUMENTATION**

**Appendices:**

None

**Background Documents**

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| <ol style="list-style-type: none"><li>1. NICE National Institute for health and clinical excellence and Social care institute for excellence, Public Health Guidance Draft scope, The physical and emotional and wellbeing of looked after children and young people 25<sup>th</sup> June 2008</li><li>2. CAMHS Review, Improving the mental health and psychological wellbeing of children and young people, National CAMHS Review interim report 29<sup>th</sup> July 2008</li></ol> |
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