

NORTHERN IRELAND

CHILDREN'S SERVICES PLAN 2008-2011



ANNUAL REVIEW – 2008/2009

*Integrated planning for children and young
people in Northern Ireland*

FOREWORD

This is the first annual review of the Northern Ireland Children's Services Plan for 2008-2011. During the past year, as a result of the Review of Public Administration, the Health and Social Services Boards, which previously provided the Chair of each Children and Young People's Committee, (CYPC) have now been replaced by one Health and Social Care Board covering Northern Ireland.

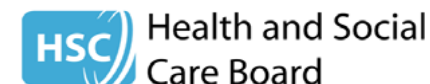
I am therefore introducing this document, as, given my role as Director for Social Care and Children's Services for the Board, I have responsibility for the Children's Services Planning process across Northern Ireland. The current CYPCs are continuing for some time, while new arrangements for Children's Services Planning are worked through. I see it as critical to maintain continuity between the very important work of CYPCs and their sub groups, carried out over the past 11 years, and any new processes. Many people from a wide range of organisations, Statutory, Voluntary and Community, are working, through these groups, to put the Children's Services Plan into action. I express my thanks to them for their continued hard work.



The outcome focussed approach of Children's Services Planning is demonstrated strongly by the Review being accompanied by the Outcome Monitoring Report 2009. This Report brings together information on specific indicators, linked to the High Level Outcomes for children set by the NI Strategy for Children and Young People. For the first time, this document brings together such indicators and information on them trended over time. This important development starts to show us how children are doing across a range of indicators related to their rights and needs. We are using this statistical information increasingly in the planning process, but are also ensuring that children, young people and their families participate, so that qualitative as well as quantitative information is used.

We are in a time of change – new organisations are coming into existence, and new responsibilities are being formed in relation to working together with the population to improve outcomes. Over this year I will be seeking involvement from additional partners for the Children's Services Planning process for integrated planning, so I hope that everyone who reads this review and report finds them useful, as we want you to be supported to contribute to this process of working together to ensure that outcomes for children and young people across Northern Ireland are continually improved.

Fionnuala McAndrew, Director, Social Care and Children's Services, Health and Social Care Board.



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executive summary

This Review is of the Northern Ireland Children's Services Plan 2008-2011, which has been provided jointly by the four Children and Young People's Committees (CYPCs) in Northern Ireland. These Committees bring together senior representatives from Statutory, Voluntary and Community organisations, and are charged with improving the health and well-being of vulnerable children. The Committees have long recognised that services for vulnerable children are more effective when they are planned alongside services for all children.

A **significant improvement** this year has been the production of the **Outcome Monitoring Report 2009**, to accompany this Review. Both documents should be read alongside the Plan. The Plan itself is based on the six outcomes set out in "Our Children and Young People - Our Pledge - a ten year strategy for children young people in Northern Ireland 2006-2016 (The Office of the First Minister and Deputy First Minister)", (hereafter referred to as the ten year strategy).

The Review notes any changes to regional and local priorities set out in the Plan and to the development of indicators related to the rights and needs of specific groups of children. The Outcome Monitoring Report 2009 provides information on indicators related to the ten year strategy (indicators for all children), trended back over time with geographical comparisons. **This allows us to see which indicators are worrying and require work for children's outcomes to be improved.**

Chapter 1 sets out **progress** against the foundations necessary for effective planning. These have been developed through experience, research and practice and include:-

- The **participation** of children and young people – young people now **leading** transition planning.
- An **outcomes approach** to needs and rights based on the six outcomes set out in the ten year strategy.
- The **whole child model** which provides a way of understanding the dynamic influences impacting on children's lives.
- **More locality planning processes** set up - which support communities to improve outcomes for children and young people.
- A model of family support which can be used to analyse levels of need and service provision from early intervention and prevention through to specialist services.
- Possible **future structures** to enable **integrated** planning and commissioning from Government to local levels.

Chapter 2 is a narrative on **progress on work towards an agreed set of indicators in relation to the ten year strategy's six outcomes**. These are being developed together with OFMDFM but remain interim, as further work on the inclusion of rights indicators is required. The Outcome Monitoring Report 2009 provides information, mapped over time, for those of these indicators for which information is currently available.

Chapter 3 sets out **progress** relating to specific groups of children who are deemed by agencies to be children in need or at risk and for whom a more focussed approach is required if their health and well-being is to be improved. Changes to the indicators have been included. These indicators are designed to allow us to measure progress over time and by geographical area for these young people. **Progress** and any changes related to the priority themes and issues which the four Committees have agreed to work on during 2008-2011 are included, as well as **progress during 2008-2009** and an immediate action plan for 2009-2010 for regional work and work to be taken forward in each local area.

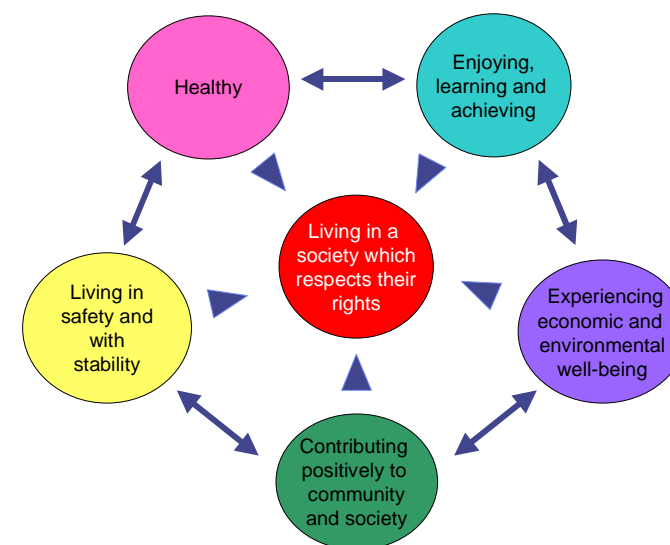
chapter 1

progress on foundations for integrated planning & commissioning

This Review of the Northern Ireland Children's Services Plan 2008-2011 has been produced jointly by the Eastern, Northern, Southern and Western Area Children and Young People's Committees¹. It has an outcome focus based on the six outcomes set out in "Our Children and Young People - Our Pledge - a ten year strategy for children and young people in Northern Ireland 2006-2016 (The Office of the First Minister and Deputy First Minister)". These are that all children and young people should:-

- **Be healthy;**
- **Enjoy, learn and achieve;**
- **Live in safety and with stability;**
- **Experience economic and environmental well-being;**
- **Contribute positively to community and society; and**
- **Live in a society which respects their rights.**

The four Children and Young People's Committees are charged with improving the health and well-being of vulnerable children. This group includes children at risk of harm or abuse, children in need and looked after children. The Committees hold, as a principle, that services for vulnerable children are more effective when they are planned alongside services for all children believing that children often find specialist services stigmatising.



¹ The age range covered by the plan would generally be 0-18 but in some circumstances, for example, legislative requirements, or the need for transition planning the age range may be extended.

The statutory duty to set up a Children and Young People's Committee to oversee the inter-agency planning of services for vulnerable children and young people in their area now rests with the Northern Ireland wide Health and Social Care Board, which has replaced the four Health and Social Services Boards. The current four Committees, which are made up of representatives from the Statutory, Voluntary and Community sectors, will continue for some time, while new arrangements for Children's Services Planning are put into place. The work of each Committee is taken forward by inter-agency sub groups which assess needs by focusing on particular groups of children or geographical areas. There is consistency across the region in the make-up of these groups although there is also some variation between the four Committees.

A detailed proposal² related to future arrangements has been developed during the past year, by a multi-departmental group, under the auspices of the Reform and Implementation process (a process for the improvement of children's services led by the Department of Health, Social Services and Public Safety). This proposal is now under consideration by the DHSSPS and the Children's Champions across Government Departments. The proposals suggest that:-

- There is a need for a coordinated strategy and policy at Government level which links into and holds to account integrated planning and delivery at regional and local levels.
- This accountability, and the associated performance measurement, is deliverable through the implementation of the ten year strategy for Children and Young People with its associated Outcomes and Indicators.
- At a regional level there should be a Children and Young People's Strategic Partnership with accountability at CEO level through which the strategic vision can be developed. In addition a statutory duty should be placed on all agencies to produce together one Children and Young People's Plan. The Partnership and the Safeguarding Board for Northern Ireland should link.
- The Children and Young People's Plan should be supported by local and regional processes to deliver services to meet locally assessed need. This local process must include all local stakeholders especially communities themselves and it needs to be linked into other local planning processes, especially community planning.
- It is necessary to ensure the full participation of children, young people, families and communities. The process should be properly resourced.

² *Integrated Planning and Commissioning to Improve Outcomes for Children and Young People in Northern Ireland.* The full proposal can be found at the websites listed on the first page of chapter 2 or can be provided by one of the local planners listed on the last page of this document.

THE PARTICIPATION OF CHILDREN AND YOUNG PEOPLE

The participation of children, young people and their families is **central** to the Children's Services Planning process. A variety of methods continues to be used to ensure, across the four areas, that their voice is heard and incorporated into service development. A significant development is that **disabled young people are now leading transition planning**. Participation has been built into the proposals for the future of integrated planning which are now under consideration. A regional Participation Strategy will be developed, to co-ordinate and standardise this work and to develop a cost effective way of ensuring true representation of children's and young people's views. This will include engagement with the Participation Network at regional and local levels and **ensuring the involvement of children and young people in the ongoing process of developing outcomes, indicators and actions to improve them**.

OUTCOMES BASED ON NEEDS AND RIGHTS

The six outcomes (see page 6) provide a mechanism by which we can measure the state of the health and well-being and realisation of rights in relation to our children and young people and to identify the actions necessary for improvement. Common outcomes provide a consistent framework for all agencies and groups to demonstrate the unique contribution that they are making to improving the life chances of children and young people. **Indicators (the data we will collect to measure the outcomes) are being devised using the knowledge and expertise built up by CSP and OFMDFM Information staff**. Further detail on the work carried out is in Chapter 2, and information on indicators currently available is published, for the first time, in the accompanying Outcome Monitoring Report 2009.

INFORMATION ABOUT SERVICES

Work has continued this year on the development of a computer based system which combines the information being collected to measure the outcomes alongside details of the services available in a particular geographical area. This will allow comparison of need by geographical area as well as providing easier access to information for staff, parents and children and young people.

Work on this family support database, which will show on the website the information on services available, is well under way. A multi-agency stakeholder forum is ensuring that the database is user friendly and fit for purpose. All services will be mapped onto the web based database, and these will be geographically mapped alongside indicators of need and rights.

A leaflet is available from Children's Services Planners which provides more information on the database development, which is the first part of a communication plan to ensure that **all services are listed on the website, and that children and young people, families and agencies know about the database and how to make use of it**.

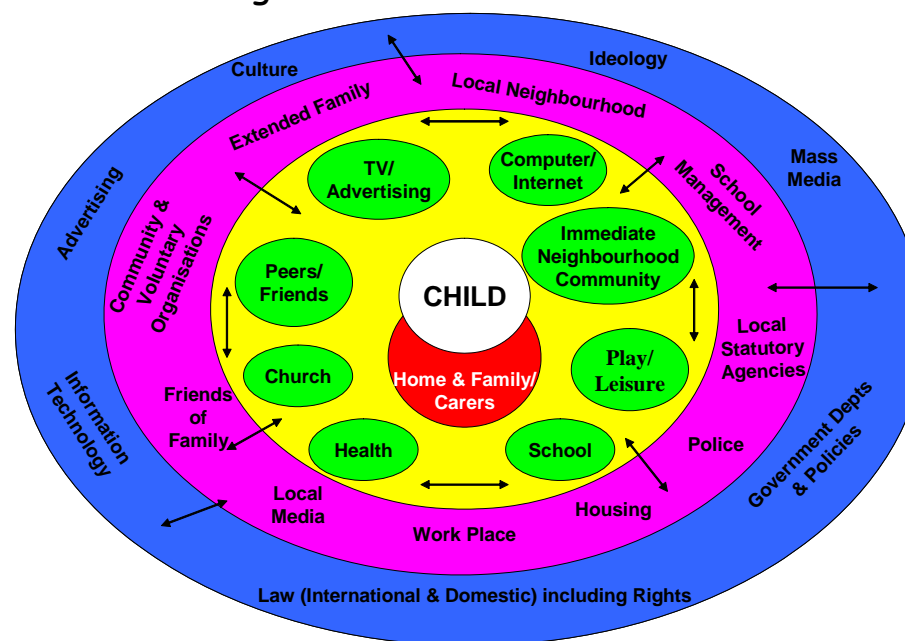
THE WHOLE CHILD MODEL

The Whole Child Model continues to provide one of the foundations of our planning process. In order for all agencies and communities to see the role they have to play in achieving the outcomes for children, it is vital to have a common way of understanding children's lives. The "Whole Child" Model (Figure 1) establishes a common way of thinking which can be agreed between agencies, between sectors (Voluntary, Community and Statutory) and between Departments of Government - for understanding how society impacts upon children, and on how children impact on society.

The Model demonstrates that children are not and should not be passive recipients, but are active participants. It maps out those influences which must be considered when attempting to connect with children. Understanding these influences is critical in designing services that will be relevant to children who have additional needs.

The Whole Child Model can therefore be regarded as a core "map" for integrated planning and commissioning. It helps agencies think through how they can both promote the rights and address the needs of children and young people. **This model has now been incorporated into 'Families Matter: Supporting Families in Northern Ireland. Regional Family and Parenting Strategy' DHSSPS 2009.**

Figure 1: Whole Child Model

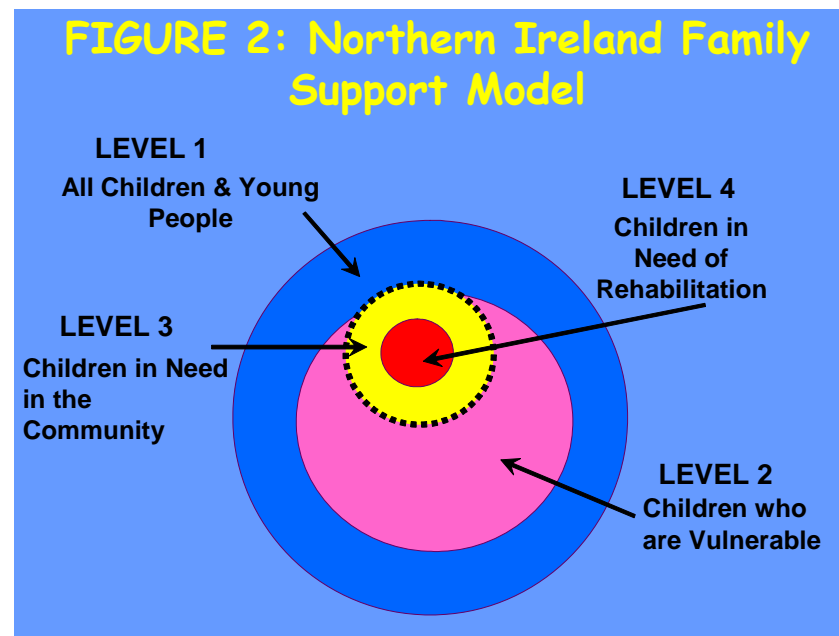


SUPPORTING FAMILIES

The Northern Ireland Family Support Model also continues to provide a foundation for the planning of services. It categorises needs and services into four levels as described in Figure 2 and shows how planning services for vulnerable children cannot be done in isolation from planning for all children across the four levels of need.

At Levels 1 and 2 our aim is to strengthen communities and locality networks so children and families can have a wider and more easily accessible range of family support services. Our goal is to create community based support which promotes early intervention as well as providing additional support for more vulnerable families and children.

At the level of more specialist services for children with complex needs (Levels 3 and 4) the aim is to ensure that all the necessary services provided to that child, and other key family members, are delivered in a co-ordinated way across agencies. We aim to ensure that, where possible, supports and services are delivered at the earliest point where they can enhance the experience and outcomes for children and their families – rather than at a late stage when their needs can only be addressed by specialist services, or when the family has broken up. **The proposals on regional planning have included this model**, with a view to ensuring that linkages between regional and local provision work well so that **each child receives the services required to meet their individual needs and circumstances.**





Launch of Families Matter, 12 March 2009
at the Dry Arch Centre, Dungiven

L-R John Duffy, Anne Hardy, Ann Godfrey,
Michael McGimpsey, (Minister for Health, Social
Services & Public Safety), Gerry Conway

Families Matter Strategy

The DHSSPS has launched the 'Families Matter: Supporting Families in Northern Ireland: Regional Family and Parenting Strategy'. **The Northern Ireland Family Support Model has been incorporated into the Families Matter Strategy** and it has been agreed that the **Strategy Action Plan and the Children's Services Plan will be linked.**

An important aspect of the Strategy was the provision of specific **funding for Parent Education and Support**, which **funding was allocated** alongside additional preventative family support funding, **through the processes described overleaf.**

New Family Support Services

In 2008, for the first time, the DHSSPSS set a specific 'Priorities for Action' target for preventative family support services to be provided. **The four CYPCs were charged with developing, implementing and monitoring Area Commissioning Plans for £3.5m in funding for such family support services.** A regional agreed commissioning plan was developed, setting out the regionally agreed principles upon which family support services should be provided.

Commissioning and monitoring processes were developed in the four areas for this fund, together with the Parenting Education and Support funding. The processes are set out overleaf. Further information on these funds is available from your local Children's Services Planner at the address at the end of this document.

HOW FAMILY SUPPORT SERVICES HAVE BEEN COMMISSIONED IN EACH AREA

<p>Northern Area</p> <p>The NACYPC issued an open call for partnership applications to provide early intervention and preventative family support services to meet priority areas identified through the Children's Services Planning process. Following a robust selection process contracts were awarded to successful partnerships. All projects are closely monitored and supported by a relevant Children's Services Planning sub or locality group.</p>	<p>Western Area</p> <p>The WACYPC addressed the commissioning process in the context of a strategic, building block approach to service developments, with planning and delivery around local service hubs, a stabilisation of existing locality services and a prioritisation of service development within the local service hub framework, initially addressing service deficits in Omagh and Fermanagh. Investment in new services in Omagh and Fermanagh was allocated following a tendering process against specifications developed by the WACYPC.</p>
<p>Southern Area</p> <p>The SACYPC agreed priorities – adolescent services, including homelessness, disability, early intervention for the prevention of offending, domestic violence, BME, and Parent Education and Support. It then commissioned the services through a multi-agency funding panel and an open call for applications. The vast majority of the services are through the community and voluntary sectors. Monitoring of the services is through Children's Services Planning.</p>	<p>Eastern Area</p> <p>Both family support and Parent Advice and Support services were commissioned in line with the Eastern Area Family Support Strategy, which proposes that early intervention services be developed at a locality level to provide a coordinated network of statutory, voluntary and community based services. Commissioning took place through the Belfast and South Eastern HSC Trusts, which had established mechanisms with voluntary and community sector partners to carry out this commissioning.</p>

SUPPORTING COMMUNITIES: A LOCALITY APPROACH

The Whole Child Model described earlier emphasises the need for children to be at the centre of planning and recognises the importance of local communities. **Children's Services Planning has promoted the development of integrated planning at community/locality level.** The aim of this approach is to develop and support community based responses which help communities, alongside Statutory agencies and Voluntary sector partners, improve the health and well-being of children and families in their area.

Local action groups/partnerships are using the outcomes and indicators identified in this plan as the basis for local audits of needs to inform service development.

Locality planning has begun to roll out across the region as described overleaf. Links will be developed with other locality based planning initiatives for example Local Commissioning Groups (Health and Social Care) and Rural Development Programme Local Action Groups (Department of Agriculture and Rural Development (DARD)).

The linkage between the local and locality aspects of Children's Services Planning and the development of Community Plans (Local Councils) is especially important. For the first time, planning for children and young people can link into planning with and for the population as a whole. A process is in train, through which the promoting health and well-being responsibility of the Public Health Agency, the Health and Social Care Board's commissioning of services responsibilities, the statutory Children's Services Planning responsibility to plan for vulnerable children and young people and the statutory responsibility of local councils to provide a Community Planning process, can all be brought together in a way that further supports the improvement in outcomes for children and young people.

<p>Northern Area</p> <p>Since 2000 inter-agency, cross-sectoral locality partnerships have been an integral component of the work of NACYPC. A successful evaluation of the model was carried out in 2006. To date seven areas have been supported to develop inter-agency forums, compile audits of need and plan services to meet those needs. Areas currently involved are the electoral ward area of Bushmills, District Council areas of Larne, Carrickfergus, Cookstown, Antrim, Ballymena and Newtownabbey.</p> <p>The Groups have developed close working relationships with other partnerships such as community safety partnerships, youth diversionary forums, extended schools clusters to ensure co-ordination of planning for children and young people. During the past year a locality development worker has been funded to support the current partnerships and extend the model to the remaining District Council areas of Moyle, Magherafelt, Coleraine and Ballymoney.</p>	<p>Western Area</p> <p>The WACPC locality planning model is at current District Council levels and is linked to:-</p> <ol style="list-style-type: none"> 1. Locality Planning Group led by Action For Children with the aim of “developing and maintaining a model of integrated planning for the improvement of outcomes for children and young people at a local level”. 2. The development of Locality Early Intervention Family Support Partnerships (Service Hubs) based on the provision of coordinated early intervention services to vulnerable children and young people. These are at an early stage of development but seek to build local partnerships around local Family Centres, SureStart Projects and other local agencies.
<p>Southern Area</p> <p>A locality process to improve outcomes for children and young people in the Lurgan area, ‘Together for All’, has been set up, funded through Atlantic Philanthropies.</p> <p>A new locality planning group is being set up to cover the South Armagh area. The lead group is the Women and Family Health Initiative. The Outcomes Based Planning Model, developed through CAWT, is being used to support the planning process, together with community development support, funded through CAWT.</p>	<p>Eastern Area</p> <p>A locality planning arrangement has been established within the SE Trust area in line with the Eastern Area Family Support Strategy and this has been the vehicle to commission early intervention family support services to meet local need.</p> <p>Discussions are ongoing within the Belfast Trust area to link together a number of local planning initiatives.</p>

MONITORING AND EVALUATION

This review sets out general progress since the Plan was published. Improving well-being (as measured by indicators linked to outcomes) will take time, but the system for tracking change over time against baseline information will be put in place. (Please see accompanying Outcome Monitoring Report 2009). Indicator performance will be monitored and reported.

This review monitors the process of integrated working, reflecting on the engagement of key agencies and the level of participation of children, young people and their parents and progress against agreed targets.

It has been agreed that a regional rolling programme of surveys and research will bring together and build upon the children's services planning needs assessment material to address the balance of quantitative and qualitative information.

Monitoring is being carried out of the following programmes commissioned through Children's Services Planning

- **Family Support,**
- **Parent Education and Support**
- **Young Carers Services**
- **Services for Early Intervention of the Prevention of Offending.**



Family Support & Reflective Practice Conference
4th December 2008

Speakers L-R

Prof Pat Dolan, NUI Galway, Pauline Leeson, CiNI,
Koulla Yiasouma, Include Youth, Ann Godfrey, Children's
Services Planner, Prof Jan Fook, Prof Neil Thompson

chapter 2

outcomes & indicators for all children & young people

This brief chapter describes the **work to date with OFMDFM in designing a core set of indicators**. These indicators are subject to review and improvement over the life of the plan. The indicators have been informed by previous needs assessments carried out by CSP working groups, local knowledge and information systems currently in use and are set in the context of the United Nations Convention on the Rights of the Child (UNCRC). The indicators collect a mix of child well being and service based data.

The work undertaken this year has included a focus on **children's rights** and this is still continuing. A representative of the Northern Ireland Commissioner for Children and Young People has now joined with us in this work, which strengthens the possibility of incorporation of right based indicators into the final set of indicators. It is envisaged that a final set of indicators will be developed this year.

It has been agreed that **all needs assessments** previously carried out through Children's Services Planning across the four areas will be drawn together and also **mapped against the high level outcomes**. This will provide information on what research and further needs assessments are required, to ensure that qualitative as well as quantitative information is used to measure how well children are achieving the 6 high level outcomes.

The data collected to date is available in the accompanying **Outcome Monitoring Report** which can be also be accessed at websites below. The information has been provided at locality level where possible, with comparable data at District Council/Trust/Board/Northern Ireland/GB levels and includes trends over time.

www.ehssb.n-i.nhs.uk
www.southernareacsp.n-i.nhs.uk

www.northernchildrensservices.org
www.wacy-pc.org

chapter 3

plans for specific groups of children & young people

The Outcome Monitoring Report 2009 sets out the interim core indicators to measure the six outcomes for all children and young people. These core indicators will also be analysed for specific groups of children set out in this Chapter as well as for the Section 75 (NI Act 1998) categories.

In this Chapter a further group of outcome indicators has been identified to complement those identified in the Outcome Monitoring Report.

The sets that appear here have been amended by further work by the sub groups during this year, to ensure a realistic needs and rights based set of indicators. These indicators, alongside those in the Outcome Monitoring Report, will demonstrate whether services are improving outcomes for these particular groups of children and young people over time and highlight where issues need addressing.

The Chapter also outlines **updates in key strategic developments and any Government service targets** that relate to the groups of children and young people, as well as in the priority themes which the four CYPCs have agreed to work on during 2008-2011. It includes action taken and **progress made in 2008-2009** and **action plans for 2009/2010 for regional work and for each local area for each specific group of children and young people.**

BLACK AND MINORITY ETHNIC (BME) CHILDREN

STRATEGIC DEVELOPMENTS	PRIORITY THEMES TO BE ADDRESSED REGIONALLY 2008-2011
<ul style="list-style-type: none">• The Human Rights Act 1998• The Northern Ireland Act 1998 Section 75• Race Relations (NI Order) 1997• Criminal Justice (NI) Order 2004 (Hate Crime)• Racial Equality Strategy 2005-2010.• Policy on supporting ethnic minority children and young people who have English as an additional language (including an equality impact assessment)• Support recruitment of bi-lingual staff in all relevant agencies	<p>Assessment of Need</p> <ul style="list-style-type: none">• Establish appropriate ethnic monitoring of services and outcomes.• Ensure that appropriate placements are available for BME children and young people in the LAC system. <p>Provision of Service</p> <ul style="list-style-type: none">• Implement on a regional basis the recommendations of the BME Access to Services In the Southern Area Report, June 2007• Increase access of BME children to appropriate early years provision.• Address language needs of BME children within educational settings.• Increase access for BME children and young people to youth and leisure provision.• Support the development of culturally sensitive services including the recruitment of culturally and linguistically diverse staff teams <p>Participation of children and young people in the planning process.</p>

BLACK AND MINORITY ETHNIC (BME) CHILDREN

KEY INDICATORS

Healthy

- GP registration (disaggregated).
- Parental mental health.
- Referrals to Mental Health services.

Enjoying Learning and Achieving

- % of BME children accessing early years support.
- % of BME children and young people accessing language support within education.
- % of Traveller children receiving educational support.
- % of Traveller parents receiving educational support.

Living in Safety and with Stability

- Rates of racially motivated incidents recorded by PSNI.
- % of 10-19 year olds reporting being bullied, attacked or threatened, or experiencing rudeness due to skin colour in last 12 months.
- Young people report feeling excluded from wider community.

Experiencing Economic and Environmental Well-being

- NIHE housing waiting lists disaggregated by equality groups.
- Literacy and numeracy rates (children and young people and parents).

Contributing Positively to Community and Society

- % of 10-19 year olds admitting to bullying, attacking, threatening or being rude due to skin colour in last 12 months.
- % of BME children and young people involved in school/college councils.

Living in a Society which respects their rights

- BME children and young people report on their inclusion within education.
- Traveller children and young people live with access to basic hygiene, electricity and running water.
- Children who have insecure immigration status or children in families who have no recourse to the public purse

BLACK AND MINORITY ETHNIC (BME) CHILDREN

CHILDREN & YOUNG PEOPLE'S COMMITTEES
PROGRESS DURING 2008/09

Eastern	<ul style="list-style-type: none"> • The provision of Language Bag resources and associated training to support bilingual children in the Early Years setting. • Further experiential training was provided which explored second language acquisition and how to support bi-lingual early years settings. • A workshop based event “Families, Faith and Culture” was held to raise awareness of the culture of a range black and minority ethnic families.
Northern	<ul style="list-style-type: none"> • The Cookstown cultural Integration project has been supporting BME children and their parents in the area over the past 2 years. The service works through local primary schools and is managed by G-old Sure Start. • All locality groups have included the needs of BME families in their audits and action plans.
Southern	<ul style="list-style-type: none"> • The BME Working Group developed a strategy for BME children, based on extensive consultation and research (Queens University). As a result funding has been agreed by Atlantic Philanthropies for a £1 million programme over 3 years – the Belong programme. • The BME Access to Services report resulted in support from OFMDFM for a NICEM run conference on ethnic monitoring. • Southern Area information staff involved with regional process on ethnic monitoring. • Traveller and Migrant representation improved on BME Working Group.
Western	<ul style="list-style-type: none"> • The Western Area has sought to improve accessibility to a range of services. Information has been made available in a range of languages eg SureStart Services. • Support has been provided to Sai Pak Community Project to develop information for the Chinese Community on a wide range of services.

BLACK AND MINORITY ETHNIC (BME) CHILDREN

Priority Actions for 2009/10.

Regional Priority Actions 2009/10

- BME Access to Services Report recommendations will be pursued, starting with ethnic monitoring. This work will follow up OFMDFM sponsored NICEM report on ethnic monitoring, and any government department led processes to develop appropriate information systems to ensure the monitoring of outcomes for BME children.
- Access to early years services work will be addressed.
- The Belong programme will be used to inform best practice for BME children and young people across Northern Ireland.

Eastern	<ul style="list-style-type: none"> • Continue the bi-lingual language bag initiative within early years settings. • Improve the collection and analysis of service take up by BME families
Northern	<ul style="list-style-type: none"> • Oversee Cookstown Cultural Integration Project. Evaluate it and disseminate learning across Northern Ireland. • Collate information on needs/services re BME children from Locality Group Audits of Need and across all CSP groups. Design/secure services to meet needs. • Raise awareness and develop early intervention programmes across all locality groups to address the growing issue of hate crime.
Southern	<ul style="list-style-type: none"> • Launch of Belong May 2009. Service design for Belong will start June 2009 and programme services will start late 2009. • Robust evaluation will be designed, with support from National University of Ireland, Galway. • BME governance structure includes a consultative forum for BME families and children. This will be set up in 2009.
Western	<ul style="list-style-type: none"> • Further work will be undertaken to undertake a local scoping of the needs of BME children and young people through research commissioned by Western Investing for Health.

CHILDREN, YOUNG PEOPLE & OFFENDING

STRATEGIC DEVELOPMENTS

- Criminal Justice Children (NI) Order 2008
- Justice NI Act 2002
- Strategy for priority offenders
- Regional Strategy for the Prevention of Offending

PRIORITY THEMES TO BE ADDRESSED REGIONALLY 2008-2011

- Regional strategy for the Prevention of Offending Action Plan to be implemented.
- Multi-agency information sharing process linked to the above.
- Monitoring of the Early Intervention Services for the Prevention of Offending.
- Children with an identified mental health problem who gain access to appropriate services when they enter and leave the Juvenile Justice Centre and Youth Offending Centre.
- Raise % of young people involved with the Youth Justice Agency who access drug and alcohol services within 3 months of referral to those services.
- Improve educational/training and employment support for young people leaving custody.
- Improve referrals to appropriate agencies from Education Welfare regarding children who come to their attention because of poor school attendance.
- Raise % of parents in custody accessing Family Links services.
- Decrease average number of days from charge to disposal.
- Increase % of parents/carers involved in their young person's care planning process including custody.
- Analyse groups of children and young people over-represented in the Youth Justice System.
- Participation of children and young people in the planning process.

CHILDREN, YOUNG PEOPLE & OFFENDING

KEY INDICATORS

Healthy

- Rates of emotional and mental well-being, including suicide and self-harm rates.

Enjoying Learning and Achieving

- % of children included in mainstream school.

Living in Safety and with Stability

- The rate of prosecutions of 10-17 year olds per 1,000 of all 10-17 year olds.
- Rate of crimes against children, including assaults on children by children.
- Fear of and/or crime/anti-social behaviour rates.
- Young people feel safe and secure and valued by the community (core) – comparison for young people involved in offending.
- No. of serious injuries experienced by children in custody and outcomes of independent reviews.

Experiencing Economic and Environmental Well-being

- % of young people aged 16-19 subject to statutory supervision in employment, education or training at the end of the supervision period.

Contributing Positively to Community and Society

- The % of children who enter the Criminal Justice System for the first time.
- % of young people re-offending within 12 months.
- % of young people charged with an offence diverted from prosecution.
- Number of ASBOs.
- % of Looked After Children entering the Youth Justice System (YJS).
- Rates of racist bullying or being bullied for 10-19 year olds.

Living in a Society which Respects their Rights

- Average number of days from charge to disposal;
- % of parents/carers involved in their young persons Youth Justice Agency (JYA) care planning processes including custody.
- Number of under 18 year olds detained in adult prisons.

CHILDREN, YOUNG PEOPLE & OFFENDING

**CHILDREN & YOUNG PEOPLE'S COMMITTEES
PROGRESS DURING 2008/09**

Eastern	<ul style="list-style-type: none"> • Services to Children with Sexually Harmful Behaviour: A draft Protocol has been developed for cooperative working between YJA, HSC Trusts and community based therapeutic services. • A joint project between YJA and PBNI has been developed to provide a more intensive and coordinated service to young offenders considered to be within a priority grouping across the Eastern Area. • The early intervention service has been established.
Northern	<ul style="list-style-type: none"> • The Choices Family Support project for 10-17's who are at risk of offending has been set up and is delivering innovative family support. The partnership project is managed by the Youth Justice Agency. • The Den in Bushmills Locality group continued to provide local access for young people. • A Task Group has been set up to identify gaps in the provision of community based activities for young people. • The early intervention service has been established. • Contribution to the action plan for the regional prevention of offending strategy.
Southern	<ul style="list-style-type: none"> • An understanding of effective interventions has been established and a report written. • Group contributed to the action plan for regional prevention of offending strategy. • Restorative practice in schools supported offending, and local good practice brought to a attention of the Department of Education. • Needs of young people vulnerable to paramilitary type offending identified – to be met through diversionary activities. • The early intervention service has been established.
Western	<ul style="list-style-type: none"> • The Western ACYPC, through its Youth Justice Sub Committee has established arrangements for monitoring the local development of the Early Intervention Service provided by Extern. • The Western area has been awaiting the development of the Regional Action Plan to support the development of a Local Implementation Plan. • The early intervention service has been established

**CHILDREN, YOUNG
PEOPLE & OFFENDING**
Priority Actions for 2009/10

Regional Priority Actions 2009/10

- To reduce the number of children and young people convicted or reconvicted over 3 years by implementing the Regional Strategy for the Prevention of Offending and Action Plan. A regional group will be set up reporting to the four Area Children and Young People's Committees to oversee the implementation.
- Early Intervention Services are being delivered by NIACRO (CAPS Belfast and CAPS Southern), Extern (S2S Newtownards and Bangor and S2S Western) and Action for Children's Early Intervention Project in the Northern Area, and have been commissioned and monitored through Children's Services Planning. Oversight of these projects will be through the above regional group.

Eastern	<ul style="list-style-type: none"> • Improve the working arrangements between HSC Trusts and YJA to reduce the repeat offending behaviour of LAC. • Continue to role out the joint funded (HSCB/NIO) restorative practices in residential care project.
Northern	<ul style="list-style-type: none"> • Oversee FS Project for 10-17's. • Support Inter-agency group on needs of children/families of prisoners. • Monitor implementation of ASBOs. • Disseminate learning from the Youth Offending Drug and Alcohol (YODA) project. • Strengthening Youth Justice/LAC/16+ interface. • Support local groups to develop early intervention projects.
Southern	<p>To maintain young people in the community through:</p> <ul style="list-style-type: none"> • Supporting young people to remain in Trust facilities – including through the inclusion of restorative practices • Supporting the CAPS project and monitor local family support programme for prevention of offending. • Supporting young people to remain in mainstream education –including through supporting restorative practices in school. • Formal monitoring of the NI wide early intervention services
Western	<ul style="list-style-type: none"> • To continue to monitor the development in the West of the Early Intervention service provided by Extern • To develop an Implementation Plan for the West of the Regional Action Plan. • To develop a response to the needs of Looked After young people in residential care who are vulnerable in terms of offending behaviour/criminality

CHILDREN AND YOUNG PEOPLE WITH EMOTIONAL, PSYCHOLOGICAL AND BEHAVIOURAL DIFFICULTIES

STRATEGIC DEVELOPMENTS

- The Bamford Review of Mental Health and Learning Disability
- Protect Life. A shared vision. The Northern Ireland Suicide Prevention Strategy
- The development of Mental Health Service Standards Framework
- Code of practice in relation to the identification and assessment of Special Educational Needs (SEN)
- Pastoral care in schools "Promoting Positive Behaviour"
- Education Order (NI) 1996 SENDO (NI) 2005
- Review of Mental Health Promotion Strategy.
- Regulation and Quality Improvement Authority now inspect mental health services (Mental Health Commission abolished)

GOVERNMENT TARGETS

- By March 2009 a 13 week maximum waiting time for psychotherapy services
- By March 2011 achieve a reduction of at least 15% in the average suicide rate.
- By March 2010 no patient will wait longer than 13 weeks for CAMHS services
- Outworking of a regional suicide prevention helpline
- Local Protect Life Plans.

PRIORITY THEMES TO BE ADDRESSED REGIONALLY 2008-2011

Early Intervention

- Improve awareness and develop interventions which recognise the importance of infant mental health to long term outcomes.
- Suicide prevention.
- 4-12 year olds with behavioural issues targeted for service intervention.
- Improve the provision of information for children, young people, parents and staff.

Provision of Service

- Provide alternatives to physical punishment - parenting skills.
- Increase number of young people receiving crisis assessment within 24 hours of assessment.
- Services for teenagers.

Service Quality Improvements

- Implement National service standards framework.
- Decrease number of young people re-referred to a CAMHS service within 6 months of discharge.
- Address the needs of children who fail to access an appropriate education placement.
- Address issues relating to a society emerging from conflict and inter-generational issues.
- Address the needs of particular groups of children; eg Looked After Children.
- Explore potential of a Northern Ireland prevalence study re children and young people and mental health.

Participation of children and young people in the planning process.

CHILDREN AND YOUNG PEOPLE WITH EMOTIONAL, PSYCHOLOGICAL AND BEHAVIOURAL DIFFICULTIES

KEY INDICATORS

Healthy

- Rate of suicide and self harm incidents 0-16 year olds and 16-19 year olds.
- % of mothers with post-natal depression.
- No of children waiting for longer than 13 weeks for CAMHS services.
- No of under 18's in 'out of Northern Ireland' placements
- No of under 18's in adult psychiatric facilities.

Enjoying Learning and Achieving

- Number of children at Stages 3 and 5 on Code of Practice for Emotional, Psychological and Behavioural Difficulties (EBD).
- Indicator re emotional mental health in school.

Living in Safety and with Stability

- Number of children of parents/carers with substance abuse.
- Number of children of parents/carers with mental health difficulties.
- Number of children with parent/carer in prison.

Contributing Positively to Community and Society

- Measure of resilience as per core indicator - for children having received a Child and Adolescent Mental Health Service (CAMHS) or EBD service - possibly a strengths and difficulties questionnaire.

Living in a Society which Respects their rights

- % of LAC receiving CAMHS services.
- % of children at Stages 3 and 5 of the Education Code of Practice who are in mainstream provision.

CHILDREN AND YOUNG PEOPLE WITH EMOTIONAL, PSYCHOLOGICAL AND BEHAVIOURAL DIFFICULTIES

CHILDREN & YOUNG PEOPLE'S COMMITTEES PROGRESS DURING 2008/09	Eastern	<ul style="list-style-type: none"> • A crisis and assessment team has been established with extended working hours including Saturday and Sunday to provide immediate assessment. • Additional staff have been recruited to work with young people with eating disorders. • The Choice and Partnership Approach (CAPA) has been adopted to free up and regulate the availability of specialist staff for outreach work.
	Northern	<ul style="list-style-type: none"> • Group on mental health and emotional well-being established, and needs assessment materials compiled/priority areas identified. • Locality Groups supported to identify actions to promote mental and emotional well-being. • Conference for community based youth services jointly funded by NEELB Youth Services and CSP. • Staff identified re mental health needs of new entrants to looked after system. • Strengths and Difficulties, and Emotional Well-being Questionnaires have been administered to looked after children population.
	Southern	<ul style="list-style-type: none"> • The local review of service provision, based on Bamford, has taken place. • A Southern Area and CAMHs network co-ordinator is in place and convenes the Working Group. • Additional practitioner posts have been established and filled. • Protect Life strategy is being implemented through local group. • The Working Group is establishing actions required to address the indicators for the 6 high level outcomes and the indicators re EBD.
	Western	<ul style="list-style-type: none"> • The Getting It Together peer education programme has been delivered in the last year, and has received the NI Integrated Health Award, been shortlisted for a national award and identified by RQIA as a model of good practice. • The “Chance for Change” Programme, delivered by Action for Children has been funded by DHSSPS until March 2011. It is hoped that this funding will be recurring beyond that time. At this time, funding constraints have inhibited the potential to expand the service beyond its current catchment area.

CHILDREN AND YOUNG PEOPLE WITH EBD

Priority Actions for 2009/10

Regional Priority Actions 2009/10

- Information required on outcome measures for future in-service counselling in school, and the evaluation of the service to date.
- Highlight the need for a local prevalence study of the mental and emotional well-being of children and young people in Northern Ireland.

Eastern	<ul style="list-style-type: none"> • Mainstream the funding for specialist drug and alcohol practitioners. • Develop the capacity for continued day care services.
Northern	<ul style="list-style-type: none"> • Northern CAMHS' Strategy Group to take account of need identified through CSP. • Disseminate/implement findings of the Review of Mental Health Needs of Children with a Learning Disability. • Develop mental health services for deaf children. • Support local groups to develop mental health and emotional well-being improvement programmes. • Monitor and promote projects addressing the mental and emotional well being of LAC. • Locality Groups will facilitate the work of the NHSSB Suicide Prevention Co-ordinator.
Southern	<p>Actions to improve those aspects of the 6 high level outcomes related to EBD and specific EBD indicators, including;-</p> <ul style="list-style-type: none"> • CAMHS and Adult mental health links. • Expand links with Protect Life C&YP working group. • Develop Service User Forums and Community Outreach Services. • Benchmark Tier3 CAMHS through the QINMAC National Standards Framework. • Develop dedicated CAMH services for CYP with disabilities. • Promote Links with the ACE service. • Continue to develop CAMHS to meet the needs of LAC.
Western	<ul style="list-style-type: none"> • The delivery of the Getting It Together Programme to specific groups of vulnerable young people – Looked After Children, young offenders. • The monitoring of the improved CAMHS infrastructure through improved timeliness of access to services e.g. Intensive Crisis Management.

CHILDREN AND YOUNG PEOPLE WITH A DISABILITY

STRATEGIC DEVELOPMENTS

- Develop services in line with Bamford Review
- Implementation of the SEN review
- Implement Autism Action Plan through regional autism group, ensuring there are links between this group and CSP.
- Develop strategic recommendations to tackle poverty and promote service inclusion for people with a disability

GOVERNMENT TARGETS

- By 2009, 13 week maximum waiting line for AHP and Psychotherapy services
- By March 2009 ensure all long stay children are resettled from learning disability hospitals
- By March 2011 provide new or enhanced respite packages through the provision of an additional 50 respite packages per annum (increasing to 200 by March 2011).

PRIORITY THEMES TO BE ADDRESSED REGIONALLY 2008-2011

Early Intervention and Family Support

- Provide early intervention family support services for children with a disability.
- To improve the dental care of children with a learning disability.
- Support for siblings.

Provision of Service

- To ensure no child is living in a learning disability hospital by April 2009.
- A reduction in waiting times for care assessment and treatment in respect of multi-disciplinary therapeutic interventions.
- Improved and enhanced regionally planned and consistent therapy services - including appropriate delivery mechanisms e.g. through leisure services.
- Transition - a Person Centred Planning approach should be adopted within an agreed transition process with adult services responsible for transition 14+, in conjunction with children's services.
- Assistive technology and independent living.
- Improved identification and response to children and young people with special educational needs.

Participation of children and young people in the planning process.

CHILDREN AND YOUNG PEOPLE WITH A DISABILITY

KEY INDICATORS

Healthy

- Rate of depression, self-harm, suicide amongst disabled children and young people.
- % of children in special schools who are identified at age 8/9 as being over weight/obese.
- % of young people with disabilities who present with dietary problems and ill health resulting from poverty related issues.
- % of young people with SEN taking part in physical activities

Enjoying Learning and Achieving

- % of young people with SEN achieving GCSE level
- % of young people with SEN moving to further education, training or employment
- % of young people with SEN who access IT through Assistive technology in school and at home

Living in Safety and with Stability

- % of disabled children living in out of home placements.
- % of disabled children living in inappropriate accommodation.
- Number of young people in special education provision who successfully complete an accredited programme.

Experiencing Economic and Environmental Well-being

- % of new carers of disabled children who receive a carer's assessment.
- % of disabled children attending organised play activities - including accessible facilities.
- % of households having access to a bus service at least once per hour (accessible transport).
- % of disabled school leavers in paid employment above minimum wage.

Contributing Positively to Community and Society

- % of disabled children who access direct payments.
- % of disabled 10-19 year olds bullied/attacked due to disability.
- % of young people with SEN who participate in e.g. Youth Services.
- % of young people with SEN who transfer into employment

Living in a Society which Respects their Rights

- % of children with a statement of SEN who attend mainstream educational provision.
- % of disabled children under 18 in homes not providing for independent living.

CHILDREN AND YOUNG PEOPLE WITH A DISABILITY

**CHILDREN & YOUNG PEOPLE'S COMMITTEES
PROGRESS DURING 2008/09**

Eastern	<ul style="list-style-type: none"> • All children in Muckamore Abbey Hospital have been resettled in new homes in the community. • Schools based multi-disciplinary teams now in place. • Pilot oral health project under way and has developed assessment tool for use by staff in Child Development Clinics, aiding decision making on most appropriate dental service to see the child. • Respite services been developed with 24% of the 200 new packages for children with a learning disability and 24% of the 200 packages for children with physical disabilities and sensory impairments.
Northern	<ul style="list-style-type: none"> • The Multi Disciplinary Teams are established and support Primary and Nursery Schools. • Projects funded to support: <ul style="list-style-type: none"> • Children aged 14-17 with learning disability to prepare for the transition to adult services. • Children who are blind or partially sighted and their families. • Parents of children with a disability. • Parents of children with autism. • Parents of children with ADHD. • Youth Project for children with a disability in Cookstown area. Project achieved NI Youth Project Award. • Task group established to identify gaps in services/issues for children with a disability accessing play/leisure activities.
Southern	<ul style="list-style-type: none"> • Children, young people and families involved in all CSP/Wraparound planning processes. • No child within area placed in any long term disability hospital. • Transition Working Group established, led by disabled young people, to implement report. • Models of complex care developed further, inc. Hospice at Home, Wheelchair service improvement, following regional review, and use of IT suite. • Autism: 0-25 years ASD team being commissioned. • Multi disciplinary team set up for early interventions focussing on extended schools and post child development clinic services.
Western	<ul style="list-style-type: none"> • Integrated Support Panel for coordinated approach to child centred planning and resource allocation. • Western Autism Strategy implemented, and involvement in Regional ASD Network. • Development of Multi-Disciplinary Teams to work with primary schools. • Funding for children with Complex Health Care Needs has meant service improvements. • Regional implementation group for workforce, respite, transition care pathways and direct payments. • Launch of 'Say What' booklet by siblings of children with complex health care needs and life limiting illnesses.

CHILDREN AND YOUNG PEOPLE WITH A DISABILITY

Priority Actions for 2009/10

Regional Priority Actions 2009/10

- Regional autism work, ensuring that this connects with the CSP process re all disabilities. The regional plan for ASD services is presently out for consultation and a regional implementation group has been convened to ensure roll out of the agreed plan and to ensure consistency across Northern Ireland.
- Report of Transition Working Group from Southern area to be brought to the regional process.
- Life limited children – regional planning process to improve services – regional planning for children with complex needs.
- Wraparound ethos to be translated into regional areas relating to children and young people with disability.
- Regional consistency in access to children’s disability services based upon identified need to be harmonised.

Eastern	<ul style="list-style-type: none"> • Through the Regional Autism ASD Network develop the service response to meet the pfa targets for assessment and the provision of services. • Open an assessment and treatment unit for children and young people with a learning disability. • Establish Business Cases for longer term care and respite services.
Northern	<ul style="list-style-type: none"> • Monitor implementation of Family Support Services Projects. • Monitor impact of recent investment/targets on service provision and identify gaps. • Implement recommendations from Northern Inclusive Play and Leisure Task Group. • Inform HSCB Commissioning process regarding emerging pressures. • Raise awareness of the gaps in core statutory services.
Southern	<ul style="list-style-type: none"> • Transition Working Group will address action required for better outcomes through transition. Connection will be made with regional work on transition, including OFMDFM group.. • Wraparound/CSP and other planning groups will include children, young people and parents. • Monitoring of family support services.
Western	<ul style="list-style-type: none"> • Linking Trust’s Integrated Support Panel and emerging Local Family Support Service Hubs (Early Intervention) • Recruitment to specialist Autism health visiting posts. • Joint protocols with Education for mainstream services. • NICH (Northern Ireland Children’s Hospice) to build a 4/5 bedded children’s hospice.

CHILDREN AFFECTED BY DOMESTIC VIOLENCE

STRATEGIC DEVELOPMENTS	PRIORITY THEMES TO BE ADDRESSED REGIONALLY 2008-2011
<ul style="list-style-type: none"> • Tackling Violence at Home (Strategy) • Community Safety Strategy for NI • Local Community Safety Partnership Plans • Children Order Advisory Committee reports • Sexual Health Strategy • Homelessness review • Drugs and Alcohol strategies 	<p>Prevention</p> <ul style="list-style-type: none"> • All schools should address Domestic Violence as part of the curriculum. • Training on Domestic Violence included within child protection training for teachers and other professionals. • Regional guidelines should be developed for schools. • Geo-mapped information used to specify locations for priority action. <p>Support</p> <ul style="list-style-type: none"> • UNOCINI to include a specific risk assessment for Domestic Violence. • Consistent range of supports at all levels for children affected. • Agree protocols for providing support/maintaining access to services for homeless children including those in Domestic Violence hostels. • The regional commissioning of training should be addressed for all professional groups. • Review of training currently on-going within Court Service. <p>Protection and Justice</p> <ul style="list-style-type: none"> • Men Overcoming Domestic Violence (MOVD)/Intervention Domestic Abuse Programme (IDAP) programmes to be available to incorporate support/involvement of children (both Court and non-Court mandated). • Regional guidance/procedures Guardians ad Litem. • Protocols/standards/training for contact centres in NI. • Formal statutory remit for Domestic Violence in Safeguarding Board NI arrangements. • Domestic Violence offenders to be included in the new Public Protection processes. <p>Participation of children and young people in the planning process.</p>

CHILDREN AFFECTED BY DOMESTIC VIOLENCE

KEY INDICATORS

Healthy

- Rates of parents accessing a specialised support programme in relation to Domestic Violence.
- Rates of women who acknowledge Domestic Violence (DV) via routine enquiry (DHSSPS circ.no HSS NMG 01/06).

Enjoying Learning and Achieving

- % of schools that have DV policies in place.
- % of schools participating in DV education and training.

Living in Safety and with Stability

- Rates of children reported to be present at a DV incident.
- Rates of non-molestation and occupation orders.
- Referral rates to Social Services Gateway Teams for DV.
- % of children on CPR where DV is a feature in the registration.
- % of children in Women's Aid refuges at point in year.

Experiencing Economic and Environmental Well being

- % of children living out of home as a result of DV.

Contributing Positively to Community and Society

Living in a Society which Respects their rights

- Rates of children affected by DV.

CHILDREN AFFECTED BY DOMESTIC VIOLENCE

CHILDREN & YOUNG PEOPLE'S COMMITTEES
PROGRESS DURING 2008/09

Eastern	<ul style="list-style-type: none"> • A project funded by PSNI, NI Housing Executive and Belfast HSC Trust for a Women's Aid worker to support the police response to Domestic Violence has been expanded to cover Police Districts A & B across the Belfast Trust geographical area. • Women's Aid have produced a Directory Of Services to children. • Work is underway to ensure children access appropriate services, whilst in hostels with • North Down and Ards Women's Aid having a child worker post and • Belfast and Lisburn Women's Aid a Children's Project.
Northern	<ul style="list-style-type: none"> • Locality groups continue to support organisations providing services for children and families affected by domestic violence. • Nomination from Northern CSP to regional group on domestic violence.
Southern	<ul style="list-style-type: none"> • Routine Enquiry for pregnant women rolled out across the Trust area. • Evaluation of the Barnardo's Risk Assessment model undertaken by CSP Group chair. This also being independently evaluated by Barnardo's. • Family Support Funding has been secured and used to fund WA work in schools. • Education Rep. secured for the CSP group. • Preventing Violence relationships and Men Overcoming Domestic Violence programmes ongoing • Family Group Conferences available across the Trust area.
Western	<ul style="list-style-type: none"> • In the Western area, there is a range of supports available through Women's Aid for parents/children affected by Domestic Violence. The main difficulty associated with these remains the lack of sustainable funding. This continues to impede development at a local level. • The re-establishment of the Western Domestic Violence Partnership led by the Western HSC Trust has provided a new focus for collaborative delivery to meet the needs of children and parents affected by Domestic Violence.

CHILDREN AFFECTED BY DOMESTIC VIOLENCE

Priority Actions for 2009/10

Regional Priority Actions 2009/10

See Priority Themes to be addressed regionally 2008-2011

Eastern	<ul style="list-style-type: none"> • Evaluate the effect of the Women’s Aid worker in PSNI districts A and B. • Continue to emphasise the effects of DV on the long-term outcomes for children with such children remaining a priority vulnerable group for family support funding.
Northern	<ul style="list-style-type: none"> • Develop action plan to address issues identified in the review of the needs of children and young people affected by domestic abuse in the Northern Board area. • Contribute to Regional CSP Groups on Domestic Violence and ensure local implementation. • Ensure there is an effective interface with Northern Domestic Abuse Partnership to improve outcomes for children and young people.
Southern	<ul style="list-style-type: none"> • Links to be made with Leaving and After Care Group re work in relation to Non Abusing Relationships. • Take forward work re children from BME communities with the BME working group. • Consultation to take place with children in relation to their needs. • Engage with Churches, community groups and the youth sector in relation to education and support programmes. • Extend the range of services available.
Western	<ul style="list-style-type: none"> • The scoping of services available to children and young people affected by Domestic Violence. • The inclusion of children and young people affected by Domestic Violence in the developing work of the Family Support Service Hubs (Early Intervention). • The development of Protocols in relation to collaborative working between Domestic Violence agencies, Children’s Services (Trust) and Family Support providers.

DRUG AND ALCOHOL INCLUDING HIDDEN HARM

STRATEGIC DEVELOPMENTS	PRIORITY THEMES TO BE ADDRESSED REGIONALLY 2008-2011
<ul style="list-style-type: none">• New Strategic Direction for alcohol and drugs 2006-2011 (DHSSPS)• NSD Binge Drinking Advisory Group (DHSSPS) <p>GOVERNMENT TARGETS</p> <ul style="list-style-type: none">• By March 2011 ensure a 10% reduction of young people who drink or report getting drunk• By March 2010 ensure a 5% reduction in the proportion of young adults taking drugs• By March ensure a 10% reduction on the number of children at risk from parental alcohol/drug dependency• By March 2009 establish a local action plan to support the Regional Hidden Harm Action plan (June 2008)	<p>Early Intervention</p> <ul style="list-style-type: none">• Pilot the protocol to promote inter-agency working with children and families affected by Parental Substance Misuse and complete the evaluation.• Development of local Hidden Harm action plans. <p>Provision of Service</p> <ul style="list-style-type: none">• Increase availability of services to young people with drug and alcohol problems including binge drinking.• Develop protocols to access services for Looked After Children and other priority groups. <p>Participation of children and young people in the planning process</p>

DRUG AND ALCOHOL INCLUDING HIDDEN HARM

KEY INDICATORS

Healthy

- % of pupils in years 8-12 who have ever been drunk.
- % of pupils in years 8-12 who have ever taken illegal drugs.

Enjoying Learning and Achieving

- Number of drug incidents reported to the Police within schools.

Living in Safety with Stability

- Rates of people accessing treatment for drug/alcohol problems who have dependent children.
- Rates of alcohol related incidents recorded by PSNI.

Experiencing Economic and Environmental Well being

- Rates of children on Child Protection Register (CPR) where parental substance misuse is an issue.
- Rates of young people referred/assessed by Health & Social Care Trust for drug/alcohol problems.

Contributing Positively to Community and Society

- Rates of young people availing of targeted education programmes on drugs or alcohol.

Living in a Society which Respects their rights

- Rates of young people assessed by the Regional Initial Assessment Tool (RIAT).
- Rates of young people receiving Tier 2/Tier 3 intervention services.

DRUG AND ALCOHOL INCLUDING HIDDEN HARM

CHILDREN & YOUNG PEOPLE'S COMMITTEES
PROGRESS DURING 2008/09

Eastern	<ul style="list-style-type: none"> The evaluation of the pilot of the Protocol for interagency working with children and families affected by Parental Substance has been completed with the draft report expected before the end of May. Local Hidden Harm action plan has been developed. The Regional Initial Assessment Tool (RIAT) was developed and piloted within the YJA Community Services from February – September 08. Local Eastern area voluntary organisations also took part in the pilot.
Northern	<ul style="list-style-type: none"> Contributed to the development of the Northern Hidden Harm workshop and Action Plan. Antrim Locality group – Parenting Programme developed and implemented included a focus on drug and alcohol issues. Youth Offending Drug and Alcohol Project (YODA) implemented. Locality groups continue to develop responses to alcohol and drug misuse in their areas.
Southern	<ul style="list-style-type: none"> Contributed to workshop held in Southern area in relation to development of a Southern Hidden Harm action plan. Workshop also focused on awareness raising of existing services in relation to Drugs/Alcohol services and particularly services for children and how such can be accessed. Draft Action plan shared with other areas to facilitate a regional perspective
Western	<ul style="list-style-type: none"> Western Hidden Harm Action Plan developed, with substantial consultation including young people. Local plan finalised by May. Joint protocol between Drugs and Alcohol Services and Children's Services being finalised, in the context of Gateway Services and of Family Support Service Hubs (Early Intervention level). Range of voluntary and community sector services developed for "young person friendly" services to raise awareness and to support those affected by parental misuse. This is being undertaken through the development of Local Family Support Service Hubs.

**DRUG AND ALCOHOL
INCLUDING HIDDEN HARM
Priority Actions for 2009/10**

Regional Priority Actions 2009/10

- **Development of the Regional Hidden Harm action Plan in the context of Care Matters and Families Matter.**
- Development of a Regional Protocol between Drugs and Alcohol Services, Children's Services and Family Support Services

Eastern	<ul style="list-style-type: none"> • Assist in the implementation of the local Hidden Harm Action Plan. • Support the implementation of the RIAT in the Eastern area. • Development of a pilot intensive support service for young substance misusers in partnership with ASCERT, Opportunity Youth, Belfast HSCT, SE HSCT, YJA, Loughshore Education and Resource Centre and the SEELB.
Northern	<ul style="list-style-type: none"> • Contribute to the implementation of the Northern Hidden Harm Action Plan 2008-11. • Develop community based inter-agency responses to alcohol and drug misuse by young people in all Locality Groups.
Southern	<ul style="list-style-type: none"> • Contribute to Implementation of the Hidden Harm Action Plan in the Southern Area and any regional plan which may develop from the amalgamation of the 4 local plans • Development of Protocols between Drug & Alcohol Services and Children's Services.. • Continue through SACYPC working groups awareness of the UNOCINI process and its interface in relation to Hidden Harm.
Western	<ul style="list-style-type: none"> • The implementation of the Joint Services Protocol at the interface between Drugs and Alcohol Services, Children's Services (Trust) and Family Support Services. • The implementation of the Key Actions outlined in the Western Area Hidden Harm Action Plan.

EARLY YEARS

STRATEGIC DEVELOPMENTS

- Early Years Strategy (0-6 yrs) (DE)
- Our Children and Young People - Our Pledge - a ten year strategy for children and young people in Northern Ireland 2006-2016) (OFMDFM)
- Childcare in Rural Areas (DARD)

GOVERNMENT TARGETS

- By 2010 bring the attainment levels of primary schools identified as having 51% or more pupils living at a postcode with a Neighbourhood Renewal Area up to 5% poverty of NI average

PRIORITY THEMES TO BE ADDRESSED REGIONALLY 2008-2011

Early Intervention

- Link Early Years services into the wider Children's Services locality planning arrangements and identify the contribution of individual projects to improving outcomes.

Provision of Service

- Enhance the provision of service to vulnerable groups.

Service Quality Improvements

- Introduce a revised outcomes based business planning model for the Sure Start Projects that maximises the efficient use of resources.
- Work with DE to establish new arrangements for Early Years services based upon new RPA structures and the Strategy for children aged 0-6 years.
- Sustainable and mainstream funding through strategic long term planning
- Family support/locality planning.
 - Early years services part of an integrated local network of services 0-18.
 - Regional consistency needed on services/commissioning.

Participation of children and young people in the planning process.

EARLY YEARS

KEY INDICATORS

Healthy

- % of children breastfed.
- children's emotional well-being.
- obesity rates.
- % dental caries at P1 screening.

Enjoying Learning and Achieving

- % of children with Speech and Language delay at P1 (5yrs).
- % indicator on opportunities for play
- % of children in specified age groups attending different types of childcare.

Living in Safety and with Stability

- % of families in a Sure Start area receiving a service.
- % of attendances at A & E of children (0-4 yrs) due to home accidents.

Experiencing Economic and Environmental Well being

- % of full day care places per total number of pre-school children.
- % of Income Support and Job Seekers Allowance claimants with dependants.

Contributing Positively to Community and Society

- % of children from BME backgrounds registered with Sure Start services.

Living in a Society which Respects their Rights

- % of disabled children accessing early years services (as per definition).
- Volume of 'green spaces' available for play as per % of the geographical area.

EARLY YEARS

**CHILDREN & YOUNG PEOPLE'S COMMITTEES
PROGRESS DURING 2008/09**

Eastern	<ul style="list-style-type: none"> • Work undertaken with Sure Start to introduce outcome based performance measures aimed at refocusing Sure Start provision as a core component of integrated locally based early intervention services • Sure Starts operating within the South Eastern Trust area have been linked into the Trust wide family support locality planning arrangements. • Sure Start in the Upper Springfield (Saol Úr) Andersonstown (Outerwest) and Beechmount areas now operational. • An additional 10 developmental Programmes for Two Year Olds commenced in 2008-09 bringing the eastern total to 25.
Northern	<ul style="list-style-type: none"> • Northern Childcare Partnership Action Plan 2008/09 was implemented and activities were completed to achieve outcomes and objectives as stated. A review report for 2008/09 will be completed. • All the CSP locality groups have early years representation through the Sure Start projects. • The Sure Start projects completed Year 1 of their 3 Year business plans. • The Northern Childcare Partnership contribute to regionally developed transition arrangements for Early Years Services
Southern	<ul style="list-style-type: none"> • Work undertaken with Sure Start to incorporate appropriate indicators for 3 Outcome areas-all Business plans for 09/10 focus activities on these Outcome areas. • ArKe Sure Start expanded into 3 additional wards in Armagh city. • Sure Start projects provided an additional 3 Programmes for Two Year olds in year, providing a total of 19 programmes to date. • Targeted use of Early Years Development Funds-to support vulnerable children and families by improving their access to local Early Years services. • Early Years services supported to seek Sustainable Funding opportunities.
Western	<ul style="list-style-type: none"> • Through the Western Child Care Partnership, a Performance Management framework has been developed for SureStart Projects to include:- Financial Management; Outputs; Child Well-Being (related to the 6 Outcomes); Organisational Well-Being (PQASSO model) and User Feedback • The Locality Planning model used in the West has now been merged with the Early Years Fora to address a local prioritisation/planning needs for the Early Years sector, based on monitoring the well-being of children against outcomes. This process is at an early stage.

EARLY YEARS

Priority Actions for 2009/10

Regional Priority Actions 2009/10

To continue to emphasise the life long importance of supporting children in their early years by linking Early Years Services into the wider locality planning arrangements. The Child Care Partnership arrangements are to continue for a further year whilst work is undertaken with DE to establish new arrangements based upon the RPA structures and the strategy for children aged 0-6.

Eastern	<ul style="list-style-type: none"> • Progress the DE capital programme to improve early years infrastructure. • Introduce three additional programmes for two year olds in the recently established Sure Start projects if funding becomes available. • Provide Sure Start services in the 'pockets of deprivation' not currently covered by Sure Start projects.
Northern	<ul style="list-style-type: none"> • All CSP locality groups will continue to include Early Years representation through Sure Starts. • Continue to support the development of Sure Start activities based on 6 high level outcomes. • Continue to monitor and support Sure Start projects. • Provide/disseminate information on Early Years and family support services available. • Inform groups of funding opportunities, including early years Services Funding Scheme.
Southern	<ul style="list-style-type: none"> • Continue working with Sure Start projects in developing an appropriate Outcomes based approach to the delivery of service. • Support the expansion of the Programme for Two Year olds within Sure Start –target of 28 programmes across SCCP area for 09/10 • Continue to monitor and facilitate access to Early years and Family Support services for excluded groups. • Development of a Transitions Policy to facilitate best practice in arrangements for children moving across settings
Western	<ul style="list-style-type: none"> • Maintenance of the Child Care Partnership and its activities during the RPA Transition period. • The development of links between Sure Start/Early Years services and the newly emerging Locality Family Support Hubs (Early Intervention) • The implementation of relevant parts of the 0-6 Strategy when published by DE • The prioritisation of additional investments by DE in terms of both recurrent and capital funding.

LEAVING CARE/YOUTH HOMELESSNESS

STRATEGIC DEVELOPMENTS	PRIORITY THEMES TO BE ADDRESSED REGIONALLY 2008-2011
<ul style="list-style-type: none"> • Children (Leaving Care) Act (NI) 2002 • Care Matters in NI: a bridge to a better future (DHSSPS) • Fit Futures (DHSSPS) • NIHE Homelessness Strategy • Supporting People <p>GOVERNMENT TARGETS</p> <ul style="list-style-type: none"> • By March 2011 increase by 50% the proportion of care leavers in education, employment or training • By March 2011 increase by 25% the number of care leavers aged 18-20 living with their former foster carers or supported family • By March 2009 to have appointed dedicated • development workers within transition teams 	<p>Provision of Service</p> <ul style="list-style-type: none"> • To increase the proportion of care leavers in education, training and employment. • Improve the range and quality of accommodation and care options of young people aged 16 plus. • Preparation for adulthood programmes available from early adolescence. • Improve the health outcomes of looked after/care experienced and homeless young people. <p>Service Quality Improvements</p> <ul style="list-style-type: none"> • Increase in the number of care leavers living with their former carers. • Development of an information system to support service planning. • Develop service standards. • Integrated model of planning and delivery of accommodation and support services for care experienced and homeless young people. • Development of structures to support the “through-care” continuum. • Development of protocols between NIHE/DHSSPS/DEL to support integrated delivery for care experienced and homeless young people - to reflect a range of services/need. • Development of services to promote access to education/training/employment (including protected work placements and employment in Trusts/other agencies and employers). • Delivery of the Care Matters agenda. <p>Participation of children and young people in the planning process</p>

LEAVING CARE/YOUTH HOMELESSNESS

KEY INDICATORS

Healthy

- Number of births to care leavers aged 17-20.
- Rate of sexually transmitted infections for care leavers.
- % of care leavers identified as misusing drugs and/or alcohol.
- Rate of referral of care leavers to CAMHS/adult mental health services.
- Number of self-harm incidents recorded for care leavers/homeless young people.
- % of care leavers registered with a dentist.

Enjoying Learning and Achieving

- Core indicators disaggregated for care leavers/homeless young people.

Living in Safety and with Stability

- % of care leavers living in appropriate accommodation.
- % of care leavers living with their former foster carers.
- % of care leavers who experienced 2 or more accommodation moves in the previous 12 months.
- Number of young people presenting as homeless/accepted as homeless to NIHE.
- % of homeless young people living in inappropriate accommodation.
- % of care leavers/homeless young people subject to bullying due to racism, sectarianism or sexual orientation.

Experiencing Economic and Environmental Well being

- % of care leavers who left care aged 16 or over and are still in touch with their social worker, or other approved person at age 17,18,19, 20.
- % of care leavers receiving financial assistance towards the cost of education or training.
- Literacy and numeracy rates for care leavers.
- % of care leavers living in fuel poverty.

Contributing Positively to Community and Society

- % of care leavers cautioned or convicted of an offence in previous 12 months.
- % of care leavers involved in community/voluntary work.

Living in a Society which Respects their Rights

- % of young people aged 16-18 presenting as homeless who receive an assessment as a child in need.

LEAVING CARE/YOUTH HOMELESSNESS

**CHILDREN & YOUNG PEOPLE'S COMMITTEES
PROGRESS DURING 2008/09**

Eastern	<ul style="list-style-type: none"> • Services established to increase care leavers in education, training and employment, including a Princes Trust training programme, Trust employability and apprenticeships for care. • £229k recurrently allocated to Trusts for services including transition workers and dedicated employment workers. • Regional multi agency group has been established in partnership with DEL to address the career planning needs of LAC.
Northern	<ul style="list-style-type: none"> • Leaving Care legislation implemented; • Action plans developed by NHSCT regarding relevant PFA targets, plans approved by NHSSB, funding released and action plans being progressed; • NHSCT contributed to development of policies and procedures by regional Leaving and Aftercare group; • Joint Commissioning Plans agreed between NHSCT, NHSSB and Supporting People on addressing the accommodation needs of care leavers; • Planning advanced on full establishment of 16+ teams.
Southern	<ul style="list-style-type: none"> • Local Joint Commissioning Group has expanded to include young people aged 16/17 who are homeless/at risk of homelessness from a non care background. • A coordinator has been appointed to expand and develop the STAY project • Ongoing development of the TASKE project • Team Managers have been actively involved in a number of areas relating to policy development on a regional basis • A job description and personnel specification has been developed for the position of an Employability Worker • Leaving and After Care Teams have reconfigured into a 16+ Service
Western	<ul style="list-style-type: none"> • Local protocols between NIHE and WHSCT awaiting regional agreement re Accommodation/Support Needs of 16-21 years. Local work will be within this framework and in context of regional work re. service model for 16/17 year olds homeless/at risk of homelessness. • Joint Commissioning arrangement for accommodation and support services for young people aged 16-21. • "Give and Take" scheme continued with plans for employability scheme, to be informed by regional Guidance developed by Task group chaired by Margaret Lynch. • Health Advisor for care experienced young people to be employed.

LEAVING CARE/YOUTH HOMELESSNESS

Priority Actions for 2009/10

Regional Priority Actions 2009/10

- Following appropriate consultation, the dissemination and implementation of the Regional Standards for Leaving Care Services in Northern Ireland.
- CHNI, on behalf of the PSI Youth Homelessness Working Group, will coordinate a detailed analysis of the nature and scale of youth homelessness across Northern Ireland to better inform strategic planning.
- Improvement in the level and quality of engagement with care experienced/homeless young people in terms of planning, delivery and monitoring of service.

Eastern	<ul style="list-style-type: none"> • Increase capacity in Trust Leaving and After care Teams. • Provide two additional social work posts in each Trust to ensure fast track assessments of homeless 16 and 17 year olds. • Provide one extra link social worker to cover foster carers participating in the living with former foster carers scheme in fostering teams in each of the Belfast and South Eastern HSC Trusts.
Northern	<ul style="list-style-type: none"> • Ensure 16+ teams fully 'bedded in', operating policies/procedures developed by Regional Leaving and Aftercare Group. • Ensure appropriate accommodation and support, and progress Business Case for a proposed unit in Coleraine and developing proposals on Floating Support Plus. • Support employment, education and training through Employability Support Scheme, establishing "Assist Employability" budgets.
Southern	<ul style="list-style-type: none"> • Roll out of TASKE across the Trust area. • Appointment of the Employability Worker • Completion of pilot in conjunction with CHNI re common data collection for young people who are homeless • Development of STAY project • Identification and development of additional Support Acc. With SASPP
Western	<ul style="list-style-type: none"> • Local protocols for NIHE/Western HSC Trust based on the Regional Good Practice Framework. • Production of plan for accommodation and support provision for care experienced/homeless young people with a particular focus on Omagh and Fermanagh. • Further work to better coordinate the health planning for Looked After/Care Experienced children and young people.

LOOKED AFTER CHILDREN

STRATEGIC DEVELOPMENTS

- Care Matters in NI: a bridge to a better future (DHSSPS)

GOVERNMENT TARGETS

- By September 2008 introduce a pilot therapeutic support scheme in two Intensive Support Units (ISUs) with a full scheme operational in at least 10 residential children's homes across NI
- By December 2008 establish a regional independent birth parent mediation service and an agreed regional model for adoption services
- By March 2009 reduce by 3% the number of children in care
- By March 2011 reduce by 12% the number of children needing to be placed on the child protection register who are looked after
- Increase total number of foster carers by 300 by March 2010 and by March 2011 the number of salaried foster carers by 100

PRIORITY THEMES TO BE ADDRESSED REGIONALLY 2008-2011

Service Provision

- Increase the range of placement options available for children and young people in care by increasing the number of fee paid foster carers and establishing a number of intensive support units.
- Improving the education outcomes for Looked After Children (LAC) by introducing an effective monitoring system via the Education and Library Boards and introduction of Personal Education Plans (PEPS) and further development of Education Services.
- Improve health outcomes for LAC.
- Increase involvement/access of LAC to sport, leisure and out of school activities.

Service Quality Improvements

- Increase speed of permanency decision making as per regional policy on Permanence
- Ensure access to independent advocacy for all LAC.

Participation of children and young people in the planning process

LOOKED AFTER CHILDREN

KEY INDICATORS

Healthy

- Number of Serious Adverse Incidents related to self-harm.
- % of LAC using drugs and/or alcohol.

Enjoying Learning and Achieving

- % of LAC who completed their age appropriate key stage SATs in June and achieved average or above average levels.
- % of LAC achieving 85% attendance at an appropriate educational provision.

Living in Safety and with Stability

- % of LAC experiencing 2 or more moves in the previous 12 months.
- % of LAC as at 31st March who had been looked after continuously for at least 21/2 years who were currently in a foster placement where they had spent the last 2 years..
- Number of episodes of LAC being reported as missing to the police in the previous 12 months.
- Number of children waiting for a long-term placement for more than 6 months after the Care Plan decision.
- % of children in JJC who are looked after.
- % of LAC assessed as requiring long-term placement not matched to placement or adoptive family.
- Number of LAC living in an unregulated position.
- Number of serious injuries experienced by LAC and outcomes of independent reviews.

Experiencing Economic and Environmental Well-being

- % of LAC aged 16+ in employment, education or training.
- % of LAC engaged in one or more organised out of school activities per week.
- % of LAC attending organised play activities.

Contributing Positively to Community and Society

- % of LAC in regular contact with a family member or other important adult outside of the care placement arrangements.
- % of LAC cautioned or convicted for a criminal offence within the previous 12 months.

Living in a Society which Respects their Rights

- % of LAC aged 11+ who attended their previous LAC review.

LOOKED AFTER CHILDREN

**CHILDREN & YOUNG PEOPLE'S COMMITTEES
PROGRESS DURING 2008/09**

Eastern	<ul style="list-style-type: none"> • The range of placement options for looked after children have been increased through Intensive Support Residential Units, Intensive Support Fostering Scheme and additional fee paid foster carers. • The EHSSB allocated £317 in 2008-09 to the Trusts to establish therapeutic support services for looked after children. • A regional group to implement a regionally agreed career grade foster care scheme has been set up.
Northern	<ul style="list-style-type: none"> • Develop pilot therapeutic support into residential care – C.A.R.E Model. • Develop Emotional Health & Well-Being Model for LAC – initial formulation of children coming into care. • Consolidation of permanency model policy. • Ongoing recruitment of foster carers – specialist carers. • Educational needs of LAC through the LAC Support Service. • Contribute to Regional PEP's Group. • Health needs of LAC being identified through a Healthy Care Steering Group.
Southern	<ul style="list-style-type: none"> • Recent Fostering Network audit has provided details of unmet need re placements. • Revision of the LAC education booklet commenced • Commencement of Resource Panel re Care Admissions • Appointment of Senior Practitioner for Foster Care Training • Ongoing development of therapeutic foster care scheme
Western	<ul style="list-style-type: none"> • An Improving Health Outcomes model has been developed to support further work on the integrated Health Outcomes service for Looked After Children. • An increased level of support has been commissioned for residential facilitates in the Western Area to improve access to individual tuition packages. • There has been a gradual improvement in the recruitment of fee-paid and salaried fostering during 2008/09.

LOOKED AFTER CHILDREN

Priority Actions for 2009/10

Regional Priority Actions 2009/10

- The development of an information system, which can provide timely information on the LAC population to support analysis and planning in terms of the 6 High Level Outcomes.
- The production of an Action Plan to improve the Health Outcomes of Looked After/Care Experienced Young People.
- The development of an Implementation Plan in relation to the relevant sections of Care Matters in Northern Ireland.
- Improvement in the level and quality of the participation of Looked After Children and Young People in individual and service planning.

Eastern	<ul style="list-style-type: none"> • Ensure foster carers recruited can meet need for long term placements for older children, traditionally remit of fee paid carer schemes. • Progress Belfast Trust CLASS (Children Looked After Support Service) and S.E.T. Trust Connects service to provide range of assessment and therapeutic support • Establish more robust information systems to track educational achievements of LAC after children.
Northern	<ul style="list-style-type: none"> • PFA targets monitoring. • Implement recommendations from evaluation of LAC education support services. • Support development of Northern Trust Healthy Care Steering Group and Healthy Care quality framework programme. • Develop programmes re health needs of LAC including mental and emotional well-being. • Address the needs of LAC re Criminal Justice System. • Development of Fostering provision to include fee-paid and salaried fostering.
Southern	<ul style="list-style-type: none"> • Development of dedicated specialist support for LAC to prevent involvement with CAMHS • Completion of the LAC education booklet revision • Launch of information booklet for children and young people admitted to Care. • Full establishment of Therapeutic Foster Care Scheme
Western	<ul style="list-style-type: none"> • Further work on the Improving Health Outcomes model to better coordinate the health planning for Looked After Children and Young People • In the context of the Western Area's Care Matters: Family Support plan, the level of residential/specialist residential provision will be reviewed.

SAFEGUARDING

STRATEGIC DEVELOPMENTS

- Safeguarding Board NI
- SSI Our Children and Young People – Our Shared Responsibility – Inspection of Child Protection Services in NI
- Protection of Children and Vulnerable Adults (NI) Order 2003
- Public Protection Arrangements NI

GOVERNMENT TARGETS

- Reduce by 20% the number of children requiring to be placed on the CPR or in care by 2013
- By March 2009 500 children should have participated in a Family Group Conference
- By June 2008 have agreed regional guidance on the use of Family Group Conferencing

PRIORITY THEMES TO BE ADDRESSED REGIONALLY 2008-2011

Service Provision

- Establishment of a Child Death Review Protocol.
- Establish the Gateway service and roll out the reform and implementation agenda.
- The information sharing protocol to be issued, together with the revised Public Protection arrangements.
- Training, guidance and policies to be in place on sexual exploitation.

Service Quality Improvement

- Transition from ACPCs to SBNI.
- Review of the CMR process.
- Societal change - safeguarding to respond to BME issues and post conflict issues.

Participation of children and young people in the planning process.

SAFEGUARDING

KEY INDICATORS

Healthy

- % of children who have been abused who have taken up therapeutic services.
- Number of children referred to Health and Social Care Trusts for an assessment of need in the previous 6 months.
- Number of children entering case planning after de-registration.
- Childhood mortality.
- Emotional and mental wellbeing, including suicide and self-harm rates.
- GP registration.

Enjoying Learning and Achieving

- % of children on Child Protection Register (CPR) achieving 85% attendance at school.
- % of children on CPR who have statement of SEN.

Living in Safety and with Stability

- % of children who have been on the CPR who are re-registered within 2 years of removal from the CPR.
- % of children on the CPR who become looked after following registration.
- Number of children receiving intensive family support from HSS Trusts.
- Number of child protection investigations.

Experiencing Economic and Environmental Well-being

- % reported accidents and injuries sustained by children.
- % children in reported accidents and injuries at home.
- Rate of assaults on children in their localities.

Contributing Positively to Community and Society

- Number of children on CPR cautioned or convicted for a criminal offence in the previous 12 months.
- % of 10-19 years olds admitting to being bullied attacked or threatened due to skin colour race or religion in last 12 months.

SAFEGUARDING

**CHILDREN & YOUNG PEOPLE'S COMMITTEES
PROGRESS DURING 2008/09**

Eastern	<ul style="list-style-type: none"> • The Eastern ACPC since 1st April 2009, operates as a sub committee of the Health and Social Care Board • Gateway teams are in operation in both Trust areas. The Reform and Implementation process is continuing. • The revised Sharing to Safeguard document and Public Protection Arrangements were disseminated through the ACPC through the hosting of 2 one day seminars in each Trust.
Northern	<ul style="list-style-type: none"> • The Northern ACPC, since 1st April 2009, operates as a sub committee of the Health and Social Care Board • Transition to new arrangements - Safeguarding Boards, Development of Trust Safeguarding Panels, Facilitating implementation of new public protection arrangements. • An Omnibus Survey commissioned by the four ACPC's collected public attitudes towards child protection. • Carrickfergus locality group continues to support the local development of an anti-bullying network.
Southern	<ul style="list-style-type: none"> • The Southern ACPC, since 1st April 2009, operates as a sub committee of the Health and Social Care Board • An alternative Case Management Review is being undertaken in a number of cases. This work is currently ongoing and should assist in the current review being undertaken by DHSSPS and Queen's University Belfast into Case Management Reviews.
Western	<ul style="list-style-type: none"> • The Western ACPC, since 1st April 2009, operates as a sub committee of the Health and Social Care Board • Gateway Services in the Western area have further progressed. • ACPC has completed Transition Report re transfer to SBNI and Trust Safeguarding Panels. • Legacy Trusts are operating Panels with a Common Chairperson. • Improving Quality Together Project working on recommendations from SSI Inspection Report, Case Management Reviews and Independent Review Reports, and developed Action Plan. • Following one Independent Review Report, Project established to improve working arrangements between Adult Mental Health and Children's Services.

SAFEGUARDING

Priority Actions for 2009/10

Regional Priority Actions 2009/10

- The four ACPCs will continue to assist and support the work being progressed through the Reform Implementation Team and the implementation of such into operational practice. The four ACPCs will continue to provide information and advice to the RIT Project Team for the establishment of the Safeguarding Board for Northern Ireland and to assist in the transition, through an interim stage of a Northern Ireland wide ACPC.
- The four ACPCs will continue to work with and support the new Public Protection Teams and their multi-agency approach to safeguarding. They will also continue to support regional initiatives, for example the role out of the MARAC process in domestic violence and the Safeguarding Vulnerable Groups Legislation with its onus on identifying those who pose risks to the most vulnerable in our society.

Eastern	<ul style="list-style-type: none"> • Work with DHSSPS to establish a regional ACPC to maintain appropriate oversight of CP process whilst the SBNI is developed. • Implement the products of the Reform and Implementation work-streams.
Northern	<ul style="list-style-type: none"> • Co-operate in development of Trust Safeguarding Panels. • Promote/develop modernisation programme of change agenda in child protection services. • Facilitate the implementation of and monitor the impact of new public protection arrangements. • Support development of an anti-bullying support network in Locality Group areas.
Southern	<ul style="list-style-type: none"> • Transition to one Safeguarding Panel within the SACPC area. • Continue progressing regional child protection report action plan and links with other SSI Reports, Case Management Reviews and Independent Enquiry Reports. • Work with the Regulation and Quality Improvement Authority (RQIA) re follow up review of child protection services.
Western	<ul style="list-style-type: none"> • Improvement in capacity of the Gateway and Family Intervention services to respond appropriately and safely to the level of demand. • The Western ACPC will continue to monitor the implementation of Action Plans arising from the Improving Quality Together Project (SSI Inspection, CMR and Independent Review Report recommendations) and disseminate learning.

YOUNG CARERS

STRATEGIC DEVELOPMENTS

- Northern Ireland Act 1998 (Section 75)
- Carers Assessment and Information Guidance DHSSPS, 2005
- Caring for Carers DHSSPS, 2006
- DHSSPS Circular ECCU 4/2006

GOVERNMENT TARGETS

- Carers' assessments

PRIORITY THEMES TO BE ADDRESSED REGIONALLY 2008-2011

Identification of Young Carers

- Trusts have processes in place to identify young carers.
- Trusts to hold and update record of those young carers.
- Sensitive arrangements in place in schools, primary, secondary and further education to ensure that young carers (wishing to be identified) are identified.
- Young carers to know how to make contact with relevant agencies.

Information to Young Carers

- Information is available in schools for young carers.

Assessing the Needs of Young Carers

- All care management and similar assessments should prompt consideration on whether an assessment should also be carried out on the needs of young carers.
- Assessments of need of young carers carried out in full consultation with them

Provision of Service

- Within each Trust area, appropriate services will be promoted on a multi-agency basis, to include:- respite care, specialist services, and mainstream services.
- A planning process is in place for young carers who reach 18 and retain caring responsibilities, in order that the transition to adult carer services is carried out in a planned and effective way.
- User feedback from young carers who have received a service. The baseline should be set by a user questionnaire, on registration, across a range of questions on health, development and level of inclusion.
- Absenteeism from school will be reduced.
- The needs of ethnic minority young carers will be equally addressed.

Participation of children and young people in the planning process

YOUNG CARERS

KEY INDICATORS

Healthy

- Number of awareness raising sessions conducted on an inter-agency/multi-disciplinary basis each year.
- % of identified young carers registered with a general dental practitioner.

Enjoying Learning and Achieving

- % of identified young carers involved in community based youth activity.
- School attendance rates of identified young carers.
- % of young carers referred to services through education.

Living in Safety and with Stability

- % of identified young carers in employment, education or training at age 19 years.
- User feedback regarding services, health and well-being, education and ability to learn, assistance in caring, information, advice, guidance and practical assistance, signposting and participation.

Experiencing Economic and Environmental Well-being

- % of young carers receiving carer's assessment on transition at age 18.

Contributing Positively to Community and Society

- Identification and acknowledgement of all young people in a caring role.

Living in a Society which Respects their Rights

- % of identified young carers who receive a separate assessment of their needs as carers.
- Number of young carers identified per Trust area compared with incidence from research.

YOUNG CARERS

**CHILDREN & YOUNG PEOPLE'S COMMITTEES
PROGRESS DURING 2008/09**

Eastern	<ul style="list-style-type: none"> • The regional young carers service was commissioned regionally through Children's Services Planning, and is provided in the Eastern Area by Action for Children. • This service is in addition to an existing service for young carers in the Eastern area by Crossroads.
Northern	<ul style="list-style-type: none"> • Implementation of the regionally funded young carers project in the Northern area. • Local young carers supported in the production of a DVD/Audio presentation at Northern Hidden Harm workshop. • Contribute to regional information collection systems for young carers.
Southern	<ul style="list-style-type: none"> • Further work on model of assessment and service delivery with Southern Trust, • Further work on referrals from a range of agencies, in particular education and Trust • Further work on information flows re young carers – ensuring that Trust able to identify young carers who are receiving a service • Young carers offered and receiving social and emotional support • Promotional materials designed by projects across Northern Ireland.
Western	<p>The Young Carers Service provided by Barnardos has progressed through 2008/09 through:-</p> <ul style="list-style-type: none"> • The development of an integrated Steering Committee • The dissemination of information to promote the identification of young carers and to publicise the availability of the service.

YOUNG CARERS

Priority Actions for 2009/10

Regional Priority Actions 2009/10

- Young Carers Model of assessment and service delivery to be rolled out in Northern Ireland wide through Reform and Implementation process.
- Monitoring of the Young Carers Projects will be carried out by Health and Social Care Board, and supported by local discussion within CSP Working Groups which exist.
- Young carers forum to be set up across Northern Ireland to ensure that young carers participate in regional work as well as local work.
- Launch of young carers services and model of assessment/service delivery late autumn

Eastern	<ul style="list-style-type: none"> • Work with both service providers within the Eastern Area to ensure a comprehensive and consistent service for young carers.
Northern	<ul style="list-style-type: none"> • Implement Local Action Plans aimed at improving educational outcomes for young carers. • Continue to develop information systems to measure attendance at school for young carers and looked after children.
Southern	<ul style="list-style-type: none"> • Model of assessment and service delivery to be finalised in the Southern Area • Information flows from project to Trust and Board to be finalised and put into action. • Monitoring of services information provided.
Western	<ul style="list-style-type: none"> • The needs of young carers will be included in the development of Locality Family Support Service Hubs to improve the access of children and young people with emerging vulnerability to a coordinated early intervention package of support.

CONTACT DETAILS

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