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NORTHERN IRELAND CHILDREN'S SERVICES PLAN 2008-2011

Integrated planning for children and young people in Northern Ireland.

July 2008

NB This version contains Priority Actions for the [Western Area Children & Young People's Committee](#) in 2008/09. The final version will contain a summary of the Priority Actions for the 4 Children and Young People's Committees in 2008/09.

Foreword

We the four Chairs of the Area Children and Young People's Planning Committees are pleased to present this draft Children's Services Plan for 2008-2011. Over the past ten years all four Area Committees have increasingly collaborated. This year with the Reform of Public Administration, it seemed timely to move beyond collaboration to creating a single regional plan to drive our thinking over the coming three years.

Many people from a wide range of organisations, Statutory, Voluntary and Community, have helped produce this plan. They have been involved in identifying the priorities as well as delivering services at a local level. We would want to express our thanks to them for their hard work.

Most importantly we believe that having an outcome focussed approach will allow us all to better understand how effective the work being done by our organisations is in terms of improving the life chances of children and young people. For the first time we are seeking to put in place a measurement process which over time will affirm or challenge our aspiration as a society that we are improving the health and well being of children and young people. While work to develop outcomes and indicators remains a work in progress considerable agreement has been achieved over the last year to agree core indicators.

The report is issued for consultation and we will be particularly keen to seek the views of children and young people themselves as to the relevance of this work agenda in terms of their lives and aspirations.

We hope that you will find this plan helpful in terms of clarifying the contribution that your organisation is making towards enhancing the outcomes for children and young people.

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EXECUTIVE SUMMARY

There are four Area Children and Young People's Committees (ACYPC) in Northern Ireland. These Area Committees bring together senior representatives from Statutory, Voluntary and Community organisations, with the aim of planning services for vulnerable children and young people. Health and Social Services Boards have a duty to establish an Area Committee and to ensure children's services plans are produced and implemented. The four Committees are charged with improving the health and well being of vulnerable children and have long recognised that services for vulnerable children are more effective when they are planned alongside services for all children.

It has been agreed by the Eastern, Northern, Southern and Western Area Children and Young People's Committees that the Northern Ireland Children's Services Plan 2008-2011 should be produced on a regional basis. It is 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)", (hereafter referred to as the ten year strategy).

This plan sets out the regional priorities for the next three years and provides a common framework for each Area Committee to address local needs. The development of outcomes and indicators will allow over time work to be done on measuring the effectiveness of our services whether these be provided in the Statutory, Voluntary or Community sector.

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

- The participation of children and young people.
- 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.
- Locality planning which supports 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.
- Our thoughts as to possible future structures to enable integrated planning and commissioning from Government to local levels.

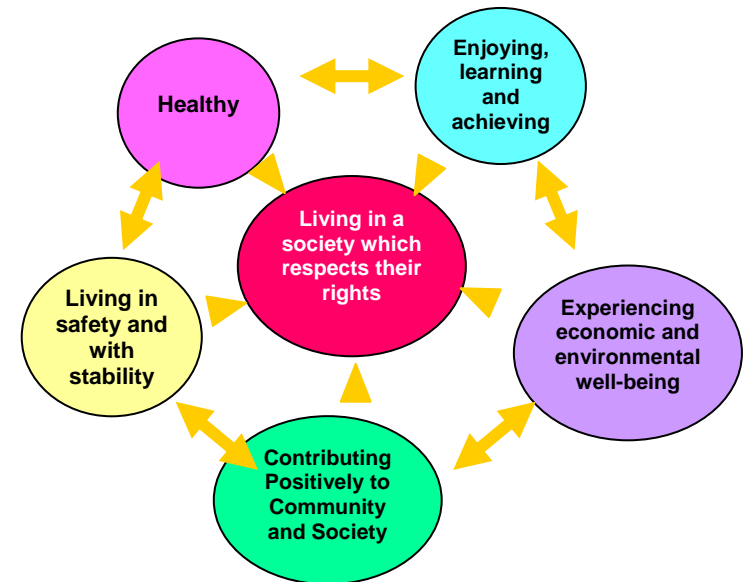
Chapter 2 sets out the core indicators agreed with OFMDFM to measure the ten year strategy's six outcomes.

Chapter 3 sets out 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. Indicators are presented which will allow us to measure progress over time and by geographical area for these young people. The priority themes and issues which the four Committees have agreed to work on during 2008-2011 are also presented with an immediate action plan for 2008-09 for your local area.

CHAPTER 1: INTRODUCTION

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 Committees. 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 Area 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 Area 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.

Everyone from Government to local communities has a role to play in helping to reach these goals. It is particularly important that agencies work together when designing and delivering the additional services vulnerable children and young people need to achieve their full potential. Children’s Services Planning (CSP)

is an inter-agency process which is child centred and supports families, carers and communities by building on their strengths.

Each Health and Social Services Board has a statutory duty to set up an Area Children and Young People's Committee to oversee the inter-agency planning of services for vulnerable children and young people in their area. Area Committees are made up of representatives from the Statutory, Voluntary and Community sectors and are required to produce a Children's Services Plan every three years. The work of each Area Committee is taken forward by inter-agency working groups set up to 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.

The four Area Committees have, over the past ten years increasingly collaborated developing common systems and structures which have been tried and tested. The Review of Public Administration has provided an impetus to produce a regional plan for the next three years. The four Committees have developed a clear outcome focus in this report consistent with OFMDFM's ten year strategy and have proposed some thoughts as to how to ensure integrated planning for children post RPA.

The priority groups of children were identified through the on-going work of the CSP groups at local and regional levels, and through consultations in September 2007, January and February 2008.

The Area Committees are keen to seek the views of all those interested in improving outcomes for children and young people. A questionnaire has been included with this report to assist in responding to this consultation paper.

FOUNDATIONS FOR INTEGRATED PLANNING AND COMMISSIONING

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 have been used across the four Area Committees to ensure their voice is heard and incorporated into service development. 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.

Outcomes based on needs and rights

The six outcomes (see page 5) provide a mechanism by which we can measure the state of the health and well being of our children and young people. [How healthy are all our children? Are all our children living in safety and with stability?](#) [How healthy are particular groups of children - those who are at risk of offending, those who have a disability?](#) 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) have been devised using the knowledge and expertise built up by CSP and OFMDFM Information Officers. 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

PARTICIPATION CHARTER

Children and young people are the best authorities on their own lives

Participation:-

- ❖ is a right (UNCRC)
- ❖ is a dialogue to influence change
- ❖ benefits everyone
- ❖ is everyone's responsibility
- ❖ depends on respect and honesty
- ❖ must be accessible and inclusive
- ❖ is built in

Participation Works (2006)

Child (UNCRC). Plans are underway to develop 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. Chapters 2 and 3 set out the detail of the outcomes and indicators to be used over the next three years.

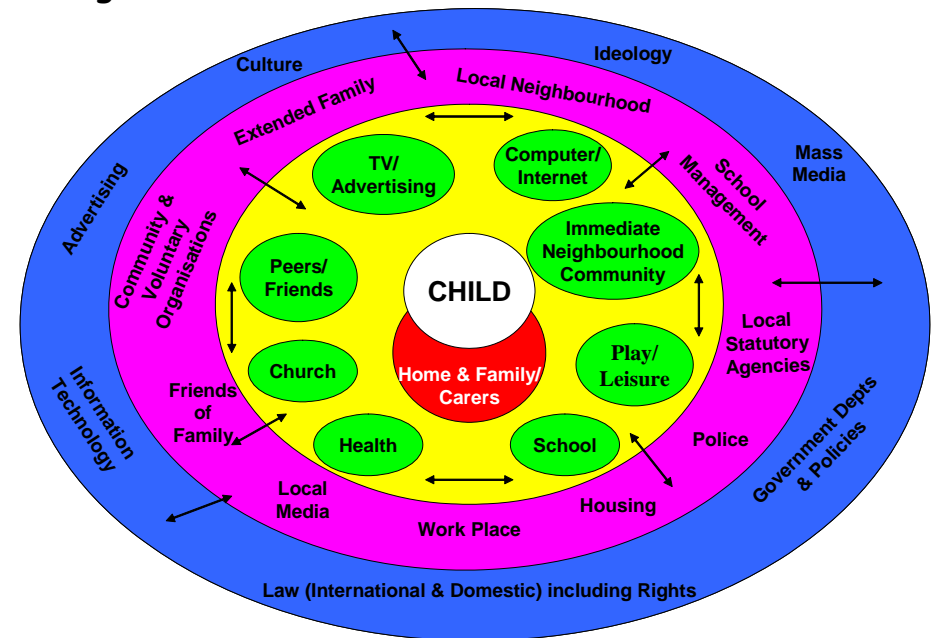
The Whole Child Model

In order for all agencies and communities to see the role they have to play in achieving the above 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 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.

Figure 1: Whole Child Model

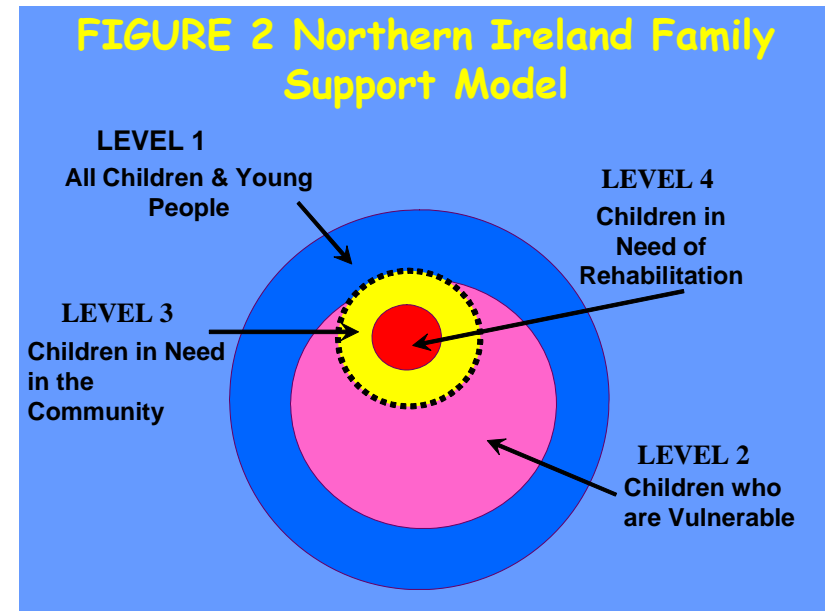


Supporting Families

For the vast majority of children in our society the family is the natural environment for their care and upbringing. Families play a vital role in providing a safe and secure setting in which children's physical, social, emotional and educational development is nurtured. There is however a relatively small number of families where children grow up at risk of significant harm or having their development adversely affected. In these circumstances it is the role of statutory agencies to create services which support families and carers to meet the needs of children or to arrange for alternative care either inside or outside the family. The CSP process provides a mechanism by which this can be done collaboratively.

The Northern Ireland Family Support Model has been developed through the Children's Services Planning process. 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.



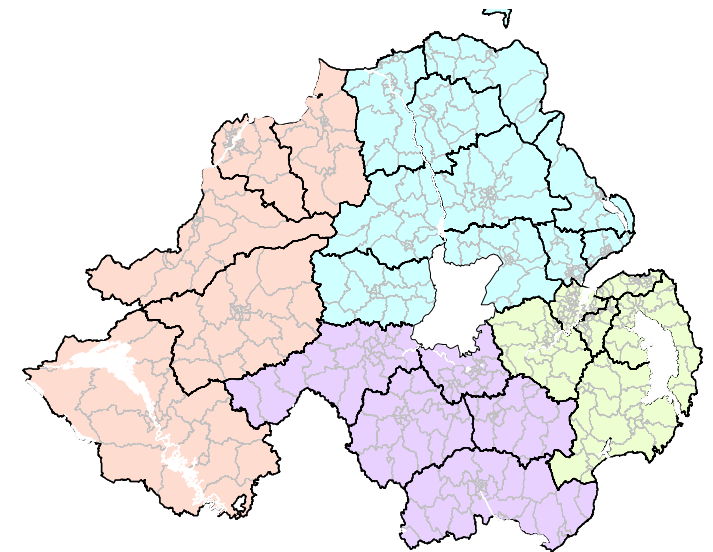
At the level of more specialist services for children with complex needs (Levels 3 and 4) the aim is to ensure that all the necessary services provided to that child, and other key family members, are delivered in a co-ordinated way across agencies.

During the period of this plan DHSS&PS have identified £3.5 million in year 3 for family support services. Health and Social Services Boards must have in place by June 2008 detailed plans developed through their Children's Services Planning processes for the long-term commissioning of the family support services. The commissioning plans will set out the regionally agreed principles upon which family support services should be provided, target groups of children, definitions of family support and interventions and the priority groups of children identified by each Area Committee.

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 will use the outcomes and indicators identified in this plan as the basis for local audits of needs to inform service development.



The four Children and Young People's Committees believe that local engagement in planning and delivery has highlighted particular benefits which include:-

- Giving a greater say to children, young people, parents and communities in the planning and design of services resulting in these being better tailored to meet needs.
- Creating greater ownership and commitment from communities to achieving better outcomes for children and young people.
- Using local community knowledge to enhance our understanding of the profile of the state of the health and well being of our children and young people.
- Addressing and supporting community needs through a wider strategic partnership with the ability to initiate change across agencies.
- Building an effective network across the Statutory, Voluntary and Community services which can share knowledge, expertise and increase inter-agency referrals.

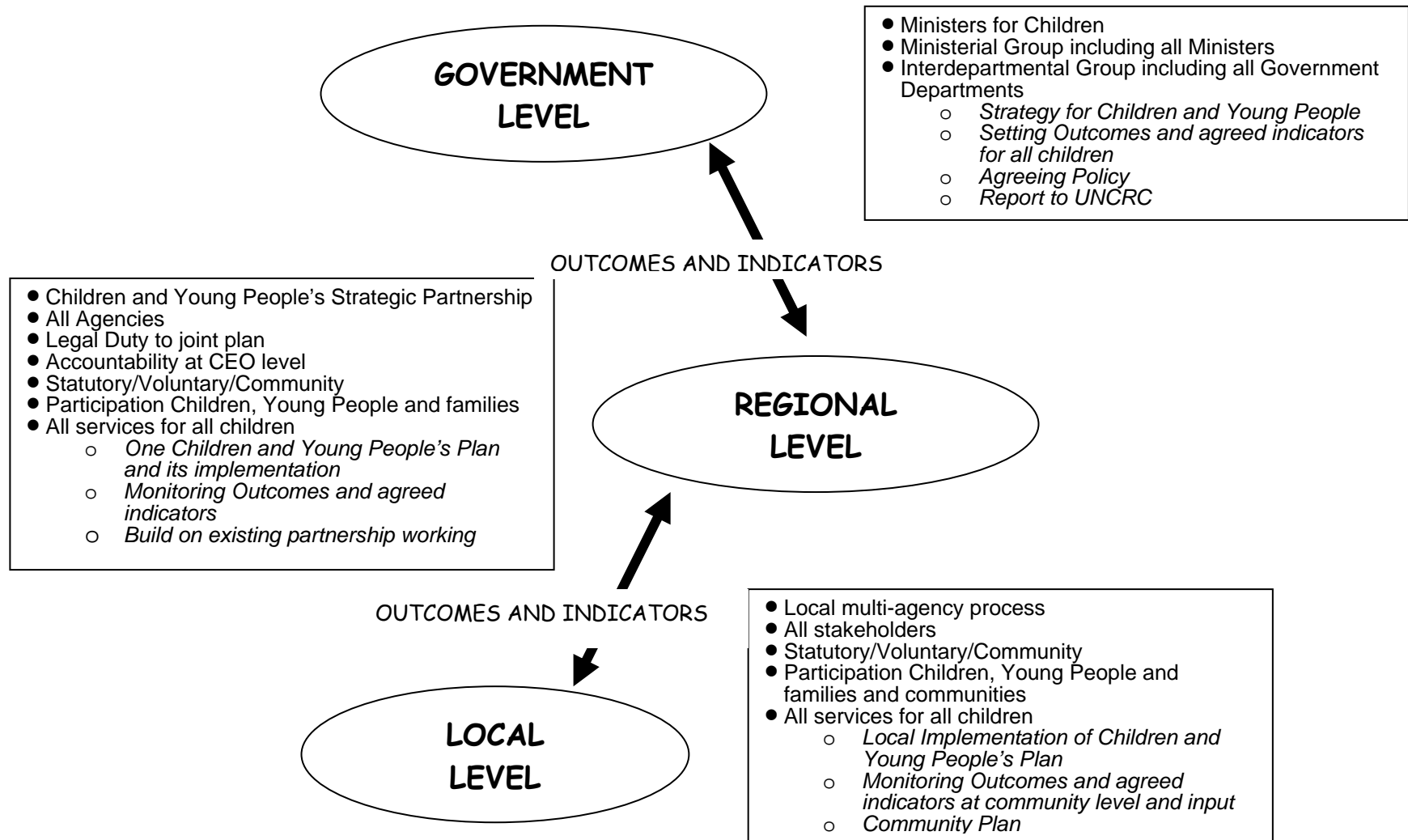
It is the intention of this plan to roll out locality planning across the region and to develop links with other locality based planning initiatives for example Local Commissioning Groups (Health and Social Care), Community Planning (Local Councils), Rural Development Programme Local Action Groups, Department of Agriculture and Rural Development (DARD).

Structures to Support Integrated Planning

The four Area Committees put forward the following thoughts based on our experiences of joint planning over the past ten years. The appointment by OFMDFM, of two Junior Ministers as Ministers for Children who will lead on the development of inter-departmental policy, provides an opportunity to build a more consistent and robust performance management framework for all agencies of Government.

We believe that:-

- There is a need for a co-ordinated strategy and policy at Government level which links into and holds to account co-ordinated 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. In addition a statutory duty should be placed on all agencies to produce together one Children and Young People's Plan.
- The Children and Young People's Plan should be supported by local 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 processes for children and families which may be developed as a consequence of RPA.
- It is necessary to ensure the full participation of children, young people, families and communities. The process should be properly resourced.



This is a time of transition and change as Government implements its Reform of Public Administration. Children's Services Planning wants to contribute to the debate as to how emerging structures can be used to best effect to improve the life chances of children and young people.

Monitoring and Evaluation

This Children's Services Plan will be monitored through an Annual Review process. It is recognised that improving well being (as measured by indicators linked to outcomes) may take time but a system for tracking change will be put in place. Indicator performance will be monitored and reported.

The Annual Review will monitor the process of integrated working, reflecting on the engagement of key agencies and the level of participation of children, young people and their parents.

CHAPTER 2: OUTCOMES AND INDICATORS FOR ALL CHILDREN

This Chapter details the regional core indicators for each of the six outcomes which have been agreed with the Office of the First Minister and Deputy First Minister to ensure consistency with the ten year strategy. The indicators will be analysed to:

- Track change over time.
- Compare different geographical areas - from the Board to District Council to Ward levels.
- Measure the well being of groups of vulnerable children by providing a further breakdown of the data for each of the groups outlined in Chapter 3 and the relevant Section 75 categories.
- At locality level these outcomes will be added to by qualitative local knowledge, building a rich profile of all our children and young people, and providing informed action plans.

The data for each outcome indicator is available in a regional document “Outcomes and Indicator Profile” which can be accessed on the following websites. Alternatively a paper copy can be obtained from your local CSP Planner. 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

Healthy

What we want to achieve for all children and young people:-

- Reduced inequalities in health and access to health services.
- Improved mental and emotional well being by strengthening services and promoting positive.
- Improved physical and sexual health.
- Young people supported to make healthy lifestyle choices.
- Parents provided with assistance from an early stage to ensure children have a good start in life and are supported into adulthood.

Core Indicators

How we will measure the health of all our children and young people:-

- **Infant mortality rates.**
- **Low birth weight rates.**
- **Teenage pregnancy rates.**
- **Rates of sexually transmitted diseases.**
- **Immunisation Rates.**
- **Measures of Emotional and Mental well being.**
- **Levels of tooth decay.**
- **Levels of abuse of alcohol/drugs.**
- **Obesity levels.**
- **Diabetes and Asthma rates.**



Enjoying learning and achieving

What we want to achieve for all children and young people:-

- Increased access to quality early years services particularly in rural areas.
- Improved outcomes for children who are not at school or are not reaching target attendance rates.
- Strengthened services at transition stages from home/preschool/primary/post primary/employment.
- Access to quality play and leisure facilities.
- Parents and carers supported to encourage children to enjoy, learn and achieve.

Core Indicators

How we will measure how well our children and young people are enjoying, learning and achieving:-

- **Percentage of children accessing preschool places.**
- **Percentage of children obtaining average levels of primary one assessment.**
- **Percentage suspended or expelled from school.**
- **Rate of children with less than 85% attendance.**
- **Percentage of young people:**
 - **Gaining 5 GCSEs (A-C) or above**
 - **Leaving school with no qualification**
- **Percentage of young people in education, training and employment by age 16-21.**
- **Uptake of young people who avail of sporting activities, physical activities, hobbies, leisure outside the home.**



Living in safety and with stability

What we want to achieve for all children and young people:-

- Children and young people to feel and be safe and secure in their homes and in their communities.
- Improved outcomes for children at risk of abuse.
- Access to family support services appropriate to age and location.
- Support for families at risk of being homeless.
- To be free from bullying.



Core Indicators

How we will measure the extent to which children and young people are living in safety and with stability:-

- **Rate of children on the child protection register.**
- **Number of children living in temporary accommodation.**
- **Number of children experiencing domestic abuse.**
- **Re-registration of children on Child Protection Register.**
- **Number of 0-17 year olds killed on the roads.**
- **Percentage of Looked After Children (LAC) (Rate per 1,000).**
- **Percentage of young people who feel safe and valued in their community.**
- **Percentage of children who are bullied.**

Contributing positively to Community and society

What we want to achieve for all children and young people:-

- That children and young people are valued by society and their communities.
- Increased opportunities for volunteering in community and voluntary work.
- Access to leisure activities involving young people in their design and delivery.
- A preventative and early intervention approach to youth offending.

Core Indicators

How we will measure the extent to which children and young people are contributing positively to community and society

- Percentage of young people involved in community and voluntary work.
- Percentage uptake of registered youth clubs and leisure centres.
- Percentage of young people cautioned/convicted, sentenced to custody.
- Number of young people entering the criminal system for the first time.
- Average time taken to process children through the youth justice system.
- One year reconviction rates for children.
- Resilience amongst young people.



Experiencing economic and environmental well being

What we want to achieve for all children and young people:-

- Improved outcomes for children who live in poverty.
- Access to safe, quality play areas.
- To live in homes that do not fail decent standards.
- To achieve economic stability and independence.



Core Indicators

How we will measure the extent to which children and young people are experiencing economic and environmental well being

- Percentage of young people living in overcrowded conditions and homes failing decent standards
- Number of families/children presenting as homeless
- Number of families/children/16-17 year olds living in temporary accommodation.
- Number of accessible quality play areas.
- Life expectancy.
- Percentage of children living in absolute low income poverty.
- Percentage of children living in relative low income poverty (<60% median).
- Percentage of children living in materially deprived and low income households.
- Number and percentage of children who are dependants of Job Seekers Allowance, Income Support and Disability Living Allowance.
- Percentage of children living in poverty (Noble).
- Percentage of lone parent families.

Living in a society which respects their rights

What we want to achieve for all children and young people

- Children, young people and their families participating in the planning and commissioning of all services - participation strategy.
- Initiate child's rights benchmarking
- Equal access and take up of services across the Section 75 groups - to address in particular unequal access related to disability, minority ethnic status and sexual orientation.
- Address the impact of rurality on equal access.
- Training on rights for children, parents and staff in all agencies.
- Address inequalities in budget spend on children compared to other UK areas.
- Information systems which enable the collection of disaggregation of data by Section 75 categories.
- Promotion of UNCRC rights through the dissemination of the observations of the UN Committee on the Rights of the Child.

Core Indicators

How we will measure the extent to which children and young people are living in a society which respects their lives

- Percentage of schools with school councils.
- Percentage of children and young people involved in participation processes.
- Percentage of children with access to education on rights.
- Percentage of staff provided with training on rights.



CHAPTER 3: PLANS FOR SPECIFIC GROUPS OF CHILDREN AND YOUNG PEOPLE

Chapter 2 identified the core indicators to measure the six outcomes for all children and young people. These core indicators will also be analysed for the following specific groups of children. In this Chapter a further group of outcome indicators has been identified to complement those identified in Chapter 2. Taken together these indicators will be able to 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 the key strategic developments and any Government service targets that relate to the groups of children and young people and the priority themes which the four Area Committees have agreed to work on during 2008-2011 and an immediate action plan for your local area for 2008-09. The Chapter begins with a number of cross cutting themes which are to be addressed regionally.

CROSS CUTTING THEMES

	PRIORITY THEMES TO BE ADDRESSED REGIONALLY 2008-2011
FAMILY SUPPORT SERVICES	<ul style="list-style-type: none"> • Implement PFA target - Develop, implement and monitor Area Commissioning Plans for £3.5m in funding for family support services. • Implement Families Matter Strategy. • Support the development of standards for parenting education and support. • Ensure a consistent model of family support emphasising early intervention and ensuring prevention, is implemented across the region.
LOCALITY PLANNING	<ul style="list-style-type: none"> • Develop the existing models of locality planning and support.
INFORMATION	<ul style="list-style-type: none"> • Develop, implement and maintain a regional information system which will increase access to services, information and outcome measures.
PARTICIPATION	<ul style="list-style-type: none"> • Develop and implement a regional Participation Strategy to ensure the involvement of children, young people, parents and carers in the planning of services.

Black and Minority Ethnic Children

Strategic Developments

- ❖ 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 bilingual staff in all relevant agencies

Key Indicators:

Healthy

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

Enjoying Learning and Achieving

- Key stage SAT results and GCSE results (disaggregated).
- % 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

- Number 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.
- Refugee children and young people have equal access to mainstream services.

PRIORITY THEMES TO BE ADDRESSED REGIONALLY 2008-2011

Assessment of Need

- Establish appropriate ethnic monitoring of services and outcomes.
- Ensure that appropriate placements are available for BME children and young people in the LAC system.

Provision of Service

- 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 recruitment of bi-lingual staff in all relevant agencies.

WESTERN AREA PRIORITY ACTIONS 2008-09

- Undertake a local scoping of the levels of and needs of children from ethnic minorities

Children, Young People and Offending

Strategic Developments

❖ Criminal Justice Children (NI) Order 1998

❖ Justice NI Act 2002

Strategy for priority offenders

Regional Strategy for the prevention of 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.

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 Youth 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.

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.
- % of 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.
- Address lack of educational support for young people in custody.
- Raise % of children involved in the Youth Justice Agency who come to the attention of the Education Welfare service 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.

WESTERN AREA PRIORITY ACTIONS 2008-09

- Implementation of the Early Intervention Project for the Prevention of Offending in the Western Area (Extern)
- Development of a local Implementation Plan in respect of the Regional Strategy on the Prevention of Offending

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

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 2009 no patient should wait longer than 9 weeks for outpatients, 9 weeks for diagnostics and 13 weeks for treatment services
- ❖ The establishment by September 2008 of a regional suicide prevention helpline
- ❖ The immediate establishment and implementation of local suicide prevention plans

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.
- Rate of pervasive developmental disorder.

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.
- Number of exclusions for END.
- Number of children making use of an in-school counselling service.
- Number of young people in special education provision who successfully complete an accredited programme.

Living in Safety and with Stability

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

Experiencing Economic and Environmental Wellbeing

- 16-19 year olds referred for mental health services.
- % of children with a (SEN) who exit school into employment, education or training.

Contributing Positively to Community and Society

- % of children experiencing bullying
- Measure of resilience as per core indicator – for children having received a Children and Adults Mental Health Services (CAMHS) or EBD service - possibly a strengths and difficulties questionnaire.

Living in a Society which Respects their rights

- % of LAC receiving formal CAMHS services.
- % of children at stages 3 and 5 who are in mainstream provision.

PRIORITY THEMES TO BE ADDRESSED REGIONALLY 2008-2011

Early Intervention

- 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.

WESTERN AREA PRIORITY ACTIONS 2008-09

- Roll out of peer led Emotional Well-Being Programme (Getting It Together)
- Seek to safeguard and develop “Chance for Change” (Early Intervention Programme delivered to parents through schools)
- Development of Crisis Intervention Service with CAMHS

Children and Young People with a Disability

Strategic Developments

- ❖ Develop services in line with Bamford Review
- ❖ Implementation of the SEN review
- ❖ Improved diagnoses and provision of interventions in line with the review of Autism services
- ❖ 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 a new or enhanced respite packages per annum

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.

The total number of cavities in children with a learning disability attending the Community Dental service.

Enjoying Learning and Achieving

% of children assessed as being at Level 3 who subsequently receive a formal statement of SEN.

Living in Safety and with Stability

% of disabled children living in out of home placements.

% of disabled children living in same placement for 2 years and over by type of placement.

% of disabled children living in inappropriate accommodation.

% of children on the CPR who are disabled.

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.

Living in a Society which Respects their Rights

% of children with a statement of SEN who attend mainstream educational provision.

Number of disabled children under 18 living in homes which do not provide for independent living.

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+.
- Assistive technology and independent living.
- Process required to progress the top priorities:

WESTERN AREA PRIORITY ACTIONS 2008-09

- Development of Integrated Support Panel in WHSCT
- Development of a flexible approach to respite provision

Children affected by Domestic Violence

Strategic Developments	Key Indicators
<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>Healthy Number of parents accessing a specialised support programme in relation to domestic violence. (e.g. Women's Aid “You and Me, Mum”). Number of women who acknowledge Domestic Violence (DV) via routine enquiry (DHSSPS circ.no HSS NMG 01/06).</p> <p>Enjoying Learning and Achieving Number. of schools that have DV policies in place. Number of schools participating in D.V. education and training (e.g. Women's Aid “No Fear Package”).</p> <p>Living in Safety and with Stability Number of children reported to be present at a DV incident. Number of non molestation and occupation orders. Number of referrals to Social Services Gateway Teams for DV. % of children on CPR where DV is a feature in the registration. Number of children in Women’s Aid refuges at point in year.</p> <p>Experiencing Economic and Environmental Well being Number of children living out of home as a result of DV (NIHE, Women's Aid)</p> <p>Contributing Positively to Community and Society</p> <p>Living in a Society which Respects their rights Number of children affected by DV.</p>

PRIORITY THEMES TO BE ADDRESSED REGIONALLY 2008-2011

Prevention

- 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.

Support

- 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 ongoing within Court Service.

Protection and Justice

- 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.

WESTERN AREA PRIORITY ACTIONS 2008-09

- Provision of support Programmes to parents/children affected by domestic violence
- Training/Awareness raising of Domestic Violence for SureStart Projects and for those working with care experienced young people

Drug and Alcohol including Hidden Harm

Strategic Developments

- ❖ New Strategic Direction for alcohol and drugs 2006-2011 (DHSSPS)
- ❖ Task force on binge drinking (DHSSPS)

Government Targets

- ❖ 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)

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

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

Experiencing Economic and Environmental Well being

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

Contributing Positively to Community and Society

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

Living in a Society which Respects their rights

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

PRIORITY THEMES TO BE ADDRESSED REGIONALLY 2008-2011

Early Intervention

- 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.

Provision of Service

- 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

WESTERN AREA PRIORITY ACTIONS 2008-09

- Implementation at a local level of the Regional Hidden Harm Action Plan
- Ensuring that the Joint Service Protocol is implemented in the Western Area
- Development of training/awareness programmes together with vulnerable young people
- Development of early intervention support for vulnerable young people

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

Key Indicators

Healthy

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

Enjoying Learning and Achieving

- % of children with Speech and Language delay at P1 (5yrs).
- % indicator on opportunities for play.

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

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

Living in a Society which Respects their Rights

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

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.

WESTERN AREA PRIORITY ACTIONS 2008-09

- Development of Performance Management Framework for SureStart Projects including Outcome-Focussed Monitoring
- Development of Locality Planning approach in relation to Early Years Services
- Develop an integrated approach to the identification of priorities for early years expenditure in 2008-11

Leaving Care/Youth Homelessness

Strategic Development

- ❖ 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

Government Targets

- ❖ 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

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.

PRIORITY THEMES TO BE ADDRESSED REGIONALLY 2008-2011

Provision of Service

- 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.

Service Quality Improvements

- Increasing 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.

WESTERN AREA PRIORITY ACTIONS 2008-09

- Development of local protocols between NIHE/Trust in relation to young people (16/17 years) presenting as homeless
- Consolidation of an integrated accommodation and support model for young people aged 16-21 years who are homeless/care experienced in the West
- Development of services to improve Education, Training and Employment outcomes for care-experienced young people
- Development of Health Improvement Programmes for Homeless/Care-Experienced 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

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 2.5 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.

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.

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 of LAC by health promotions and improved LAC at CAMHS and establish a wraparound therapeutic support service.
- 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.

WESTERN AREA PRIORITY ACTIONS 2008-09

- Development of a Health Improvement Strategy for Looked After Children
- Development of education support services for Looked After Children in residential care
- Development of Fostering provision to include fee-paid and salaried fostering

Safeguarding

Key Indicators

Strategic Developments

- ❖ Safeguarding Board NI
- ❖ SSI Our Children and Young People – Our Shared Responsibility – Inspection of Child Protection Services in 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

Healthy

- % of children who have been abused who have taken up therapeutic services.
- No of children referred to Health & 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-ham 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

- Number 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 Wellbeing

- % 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

- No 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.

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.

WESTERN AREA PRIORITY ACTIONS 2008-09

- Development of Gateway Services
- Establishment of Safeguarding Infrastructure in line with the SBNI and Trust Panel arrangements
- Contribution to the amendment of Regional Policies and Procedures
- Implementation of the Recommendations of Inspections, Case Management Reviews and Independent Review Report.

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

Key Indicator

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.

Number 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

Number 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.

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

WESTERN AREA PRIORITY ACTIONS 2008-09

- Implementation of the Regional Service (Barnardos) in the Western Area

