

REPORT TO: Health & Wellbeing Board
DATE: 15th January 2014
REPORTING OFFICER: Strategic Director Children and Enterprise
PORTFOLIO: Children Young People and Families
SUBJECT: Halton Children's Trust Structures from 2014

1.0 PURPOSE OF THE REPORT

1.1 To outline the proposed structures for Halton Children's Trust from April 2014 and update on work on the new Halton Children & Young People's Plan 2014-17 so far.

2.0 RECOMMENDATION: That Board members

- 1. note the contents of the report;**
- 2. note the structures outlined in 5.1;**
- 3. support and comment upon work on the Halton Children & Young People's Plan 2014-17 as outlined in Section 6 and Appendix A.**

3.0 BACKGROUND

3.1 Halton Children's Trust was established in 2008 as the next stage in the development of inter-agency co-operation within Halton. The Trust built on the progress made by the Children & Young People's Strategic Partnership and Alliance Board arrangements.

3.2 The strategic priorities of Halton Children's Trust are agreed for a three year period, alongside the development of each Children & Young People's Plan (CYPP).

4.0 HALTON CHILDREN'S TRUST PRIORITIES FROM 2014

4.1 Following discussions throughout the Trust, all partners represented on the Trust Board have reached an agreement on the priorities from 2014 for Halton Children's Trust, these are:

- Integrated Commissioning
- Early Help & Support
- Closing the Gap

4.2 A working group has been established to meet regularly between November 2013 and March 2014 to develop the new CYPP and progress reports will be brought to each Trust meeting during its development.

4.3 As working titles, and in line with a proposal to link all aspects of the new CYPP to the Halton Children’s Trust strapline of ‘Working together to make the difference’ (see logo above), the full priority statements from 2014 could be as follows:

1. **Working together to** deliver services in a joined up way to make sure children and their families get the right help at the right time (*Early Help & Support*)
2. **Working together to** plan and fund services for children together, to make sure we deliver high quality services that are value for money (*Integrated Commissioning*)
3. **Working together to** focus services towards the needs of our most vulnerable children and young people to ‘close the gap’ by improving health and education outcomes

5.0

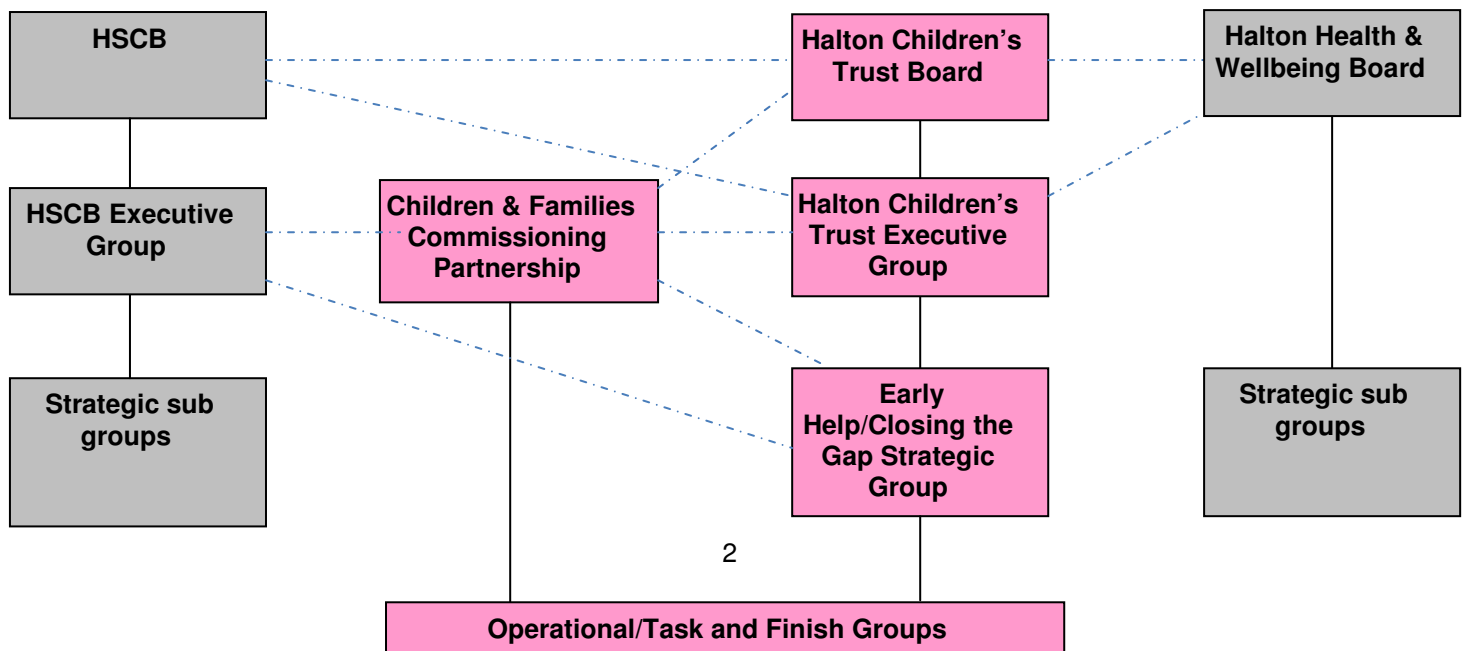
5.1

HALTON CHILDREN’S TRUST STRUCTURES FROM 2014

A number of possible options for the future structures of the Trust have been discussed at various meetings in autumn 2013. In October, Halton Children’s Trust Executive Group tasked a small working group Grady to look at all alternatives and bring possible options back to the Executive at its November meeting. From these, the structures below for the Trust (in pink) were agreed to be implemented from April 2014.

5.2

The diagram below shows how, in simple terms, the Trust structures would sit alongside the HSCB and Halton Health & Wellbeing Board, including the two-way challenge as appropriate.



5.3 More detail of the interrelationship across the three can be found in the joint protocol approved by each of the three in September 2013.

6.0 HALTON CHILDREN & YOUNG PEOPLE'S PLAN 2014-17

6.1 Initial draft elements of the Plan as of early December 2013 are attached in Appendix A. As way of explanation of these, the following should be noted:

- Multi-agency working group is meeting fortnightly.
- Each meeting includes an update on progress so far and two topics of focus for the Plan.
- It has been agreed that wherever possible, language will be simplified, the detail is often found in other documents and so the new Plan will be an introduction to the work of the Trust that is accessible to both professionals and other stakeholders. An example of this is included as page 6 of this document (page 2 of Appendix A) in relation to the contextual information on the Trust, Plan and priorities
- The intention is to focus on a web version primarily with a limited number of printed copies for partners on request and for inspection purposes.
- A simple indicative version of how the electronic version of the Plan will work is shown on page 7 of this report (page 3 of Appendix A). The format will allow colleagues to click straight to the information they require from the appropriate section of the Plan.
- Utilising the new Halton Children's Trust site (www.haltonchildrenstrust.co.uk – live from January 2014) gives scope for additional information in some areas. The final two pages of Appendix A provides indicative information on this as an example around data and stats. Previously this has been a single page around the format 'if Halton was a village of 100 CYP'. The new format allows further information to be included, split per priority as per the table and different methods to pictorially capture this will be used, as per page 8 of this report.

7.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

7.1 Children and Young People in Halton

All of the considerations outlined within this report directly contribute to improving outcomes for Children and Young People.

7.2 Employment, Learning and Skills in Halton

The Plan will contribute towards a broad range of aspects of the priority, for example improving educational attainment, skills and maximising employment opportunities.

7.3 **A Healthy Halton**

All of the areas outlined within this report focus on the linkages to improve the health and wellbeing of children and young people.

7.4 **A Safer Halton**

There are close links between partnerships on areas such as alcohol and domestic violence. It therefore remains a key consideration for the Health and Wellbeing Board.

7.5 **Halton's Urban Renewal**

The environment in which we live and the physical infrastructure of our communities has a direct impact on our health and wellbeing. It should therefore be a key consideration when developing strategies to address health and wellbeing.

8.0 **RISK ANALYSIS**

Without the agreement of a Plan to outline the work and direction of the Trust, there are risks of duplication, overlap and/or issues disappear through 'gaps' between the partnerships. The agreement of the new Plan from 2014-17 should significantly reduce these risks.

9.0 **EQUALITY AND DIVERSITY ISSUES**

This is in line with all equality and diversity issues in Halton.

10.0 **LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

Document	Place of Inspection	Contact Officer
Halton Children & Young People's Plan 2011-14	2 nd Floor, Rutland House, Runcorn	Mark Grady

Contact details for more information or to get involved:

Mark Grady
Principal Policy Officer, Children & Enterprise

Tel: 0151 511 7396
Email: mark.grady@halton.gov.uk
Twitter: @HaltonCT

Appendix A – Halton Children & Young People’s Plan 2014-17

Proposed CYPP 2014-17 Chapters

- Foreword

Welcome to Halton’s C&YP Plan

- What is a C&YP Plan?
- Key focus of the plan
- Introduction to the CT (include vision etc. link to purpose of the plan)
- How we developed the plan (include national context, update since the last plan/you said we did, where we are now & consultation)
- Understanding our community (what is Halton like, successes & If Halton was a village of 100 C&YP)

Our New Priorities in Detail

- Integrated Commissioning (tbc)
- Early Help and Support (tbc)
- Closing the Gap (tbc)
- How will we deliver our priorities?
- How will we measure success?
- Governance Arrangements

Underpinning Processes or Managing Our Services

- List similar to Integrated Processes opposite

Other options for CYPP 2014-17

- Strapline/Catchphrase for Plan e.g. Utilise ‘Working together to make a difference’

Welcome to Halton's Children and Young People Plan 2014-2017

What is a children and young people plan?

Halton's Children & Young People's Plan 2014-17 is the main plan for all partners within Halton Children's Trust, and the services they provide for children and young people in Halton. It sets out what we are going to do together to make things better for our children and young people.

What is the purpose of this plan?

This document provides a basis for what we must do together in Halton to ensure that regardless of their circumstances, every child and young person has access to the best services.

Introduction to Halton Children's Trust

What is Halton Children's Trust?

Halton Children's Trust was established in 2008 and is a partnership of all the different people that work with children and young people and their families.

We are the Doctors and Nurses, Teachers, Police Officers, Youth and Social Workers and all other staff children and young people may come across working together to meet the needs of and to make things better for all children, young people and families in Halton.

"Halton's ambition is to build stronger, safer communities which are able to support the development and learning of children and young people so they grow up feeling safe, secure, happy and healthy, and ready to be Halton's present and Halton's future"

Our priorities for 2014-2017 at a glance

The Children's Trust has 3 main areas for improvement over the next 3 years. Our priorities are:

- 1. Working together to** deliver services in a joined up way to make sure children and their families get the right help at the right time (*Early Help & Support*)
- 2. Working together to** plan and fund services for children together, to make sure we deliver high quality services that are value for money (*Integrated Commissioning*)

- 3. Working together to** focus services towards the needs of our most vulnerable children and young people to ‘close the gap’ and improve outcomes around health, education, etc.

[Indicative Halton CYPP 2014-17 Electronic Home Page](#)

Executive Summary

Vision & Priorities



Halton Children &
Young People’s Plan
2011- 2014

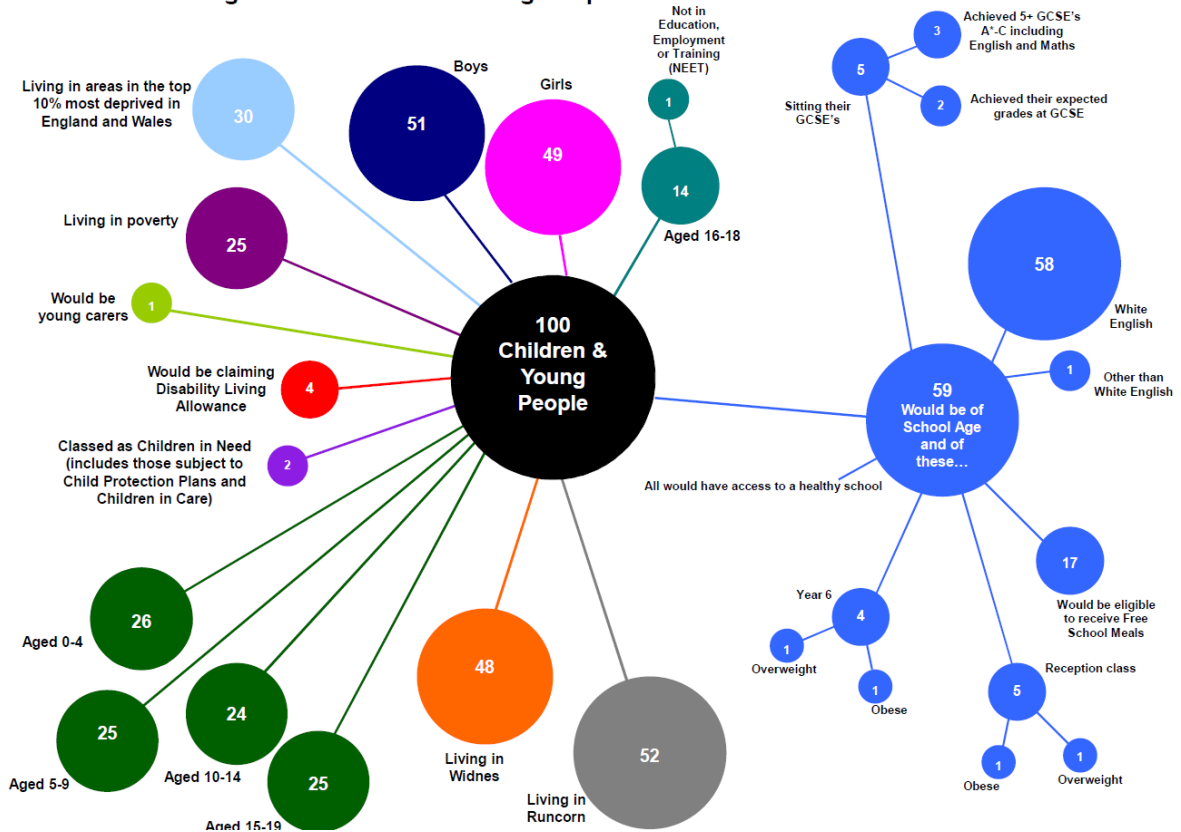


Halton Context

Involve

Information for CYPP Context – If Halton was a village of 100

If Halton was a village of 100 Children & Young People...



	Halton	England	North West
Teenage conception rate	41.5	35.3	30.7
Infant mortality (as a commissioning priority)	4.8	4.4	4.7
A & E attendances (0-4)	535	483.9	566.2
Hospital admissions – self-harm	208.7	115.5	145.1
Hospital admissions for mental health conditions	145.1	91.3	99.7
Hospital admissions due to injury (age under 18 years)	152.5	122.6	150.6
Hospital admissions due to substance misuse (age 15-24 years)	149.4	69.4	101.9
Hospital admissions due to alcohol specific conditions	122.9	55.8	93.7



46 Domestic Violence incidents

99 Missing from home

91 ASB incidents per 1,000 people

25 Disabled Children receiving short breaks

working together to make a difference

Overall CYP	Early Help & Support	Closing the Gap	Integrated Commissioning
Child Protection	Initial consultation each month	CiC immunisations	Infant mortality (as a commissioning priority)
Number of CYP 0-19	Family Support Services	CiCOLA	Children achieving a good level of development at age 5
Child Mortality	Number of open CAFs	GCSEs 5 A*-C CiC (Eng and Maths)	Teenage conception rate
GCSE 5 A*-C overall (Eng and Maths)	Low birthweight	NEET	Hospital admissions due to alcohol
Excess weight (4-5)	Smoking in pregnancy	First time entrants into YJ Sysem	Hospital admissions due to substance misuse
Excess weight (10-11)	Breastfeeding initiation	Children living in poverty (u-16)	A & E attendances (0-4)
Population 0-4	Breastfeeding at 6-8 weeks	CiC rate per 10000 (0-18)	Hospital admissions due to injury (u-18)
Population 0-19	EYFS – Good level of development	0-4 living in IMD top 10% most deprived	Hospital admissions – mental health
No. births	EYFS – Comm & Lang	FSM eligible pupils	Hospital admissions – self-harm
Unemployment rate	EYFS – Physical Dev	BME	SEN
Lone parents	EYFS - PSE	No. CiN	Domestic Violence
Incidents with crime	Number of referrals to CSC	No. LAC	ASB
	Vulnerable 2 year olds benefitting from free 2 year old entitlement	No. Child Protection	Disabled Children receiving short breaks
		No of households with 0-4 where dependent on workless benefits	Achieving L3 at 19
		FSM attainment gap KS2	Missing from Home or Care
		FSM attainment gap GCSE	
		FSM Gap L3 at 19	

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