

# Public Document Pack



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## CABINET

**DATE: TUESDAY 10 NOVEMBER 2009**  
**TIME: 2.00 PM**  
**PLACE: COUNCIL HOUSE, PLYMOUTH**

### **Members –**

Councillor Mrs Pengelly, Chair

Councillor Fry, Vice Chair

Councillors Bowyer, Brookshaw, Jordan, Michael Leaves, Monahan, Ricketts, Dr. Salter and Wiggins

***Members are invited to attend the above meeting to consider the items of business overleaf***

***Members and Officers are requested to sign the attendance list at the meeting.***

**BARRY KEEL**  
**CHIEF EXECUTIVE**

## **CABINET**

### **PART I (PUBLIC MEETING)**

**1. APOLOGIES**

To receive apologies for non-attendance submitted by Members.

**2. DECLARATIONS OF INTEREST**

Members will be asked to make any declarations of interest in respect of items on this Agenda.

**3. MINUTES**

**(Pages 1 - 2)**

To sign and confirm as a correct record the minutes of the meeting held on 20 October 2009.

**4. QUESTIONS FROM THE PUBLIC**

To receive questions from the public in accordance with the Constitution.

**5. CHAIR'S URGENT BUSINESS**

To receive reports on business which, in the opinion of the Chair, should be brought forward for urgent consideration.

**CABINET MEMBERS: COUNCILLOR BOWYER AND RICKETTS**

**6. JOINT FINANCE AND PERFORMANCE REPORT (TO FOLLOW):**

CMT Lead Officers: CMT

**CABINET MEMBERS: COUNCILLOR MONAHAN**

**7. BUILDING SCHOOLS FOR THE FUTURE (BSF): PROJECT GOVERNANCE AND BSF CABINET COMMITTEE (TO FOLLOW):**

CMT Lead Officer: Director for Children and Young People

**CABINET MEMBERS: COUNCILLOR MONAHAN**

**8. PLYMOUTH'S CHILDREN AND YOUNG PEOPLE'S TRUST PLAN 2008 - 2011: REFRESH 2009:** **(Pages 3 - 66)**

CMT Lead Officer: Director for Children and Young People

**CABINET MEMBERS: COUNCILLOR BROOKSHAW**

**9. LICENSING ACT 2003 – 12 MONTH REVIEW OF THE CUMULATIVE IMPACT POLICY (TO FOLLOW):**

CMT Lead Officer: Director for Community Services

**CABINET MEMBERS: COUNCILLOR BROOKSHAW**

**10. GAMBLING ACT 2005 - 3 YEAR REVIEW OF THE STATEMENT OF PRINCIPLES (TO FOLLOW):**

CMT Lead Officer: Director for Community Services

**CABINET MEMBERS: COUNCILLOR DR SALTER**

**11. RESIDENTIAL CARE: UPDATE ON MODERNISATION OF OLDER PEOPLES SERVICES (2005 - 2015):** (Pages 67 - 104)

CMT Lead Officer: Director for Community Services

**12. EXEMPT BUSINESS**

To consider passing a resolution under Section 100A(4) of the Local Government Act 1972 to exclude the press and public from the meeting for the following item(s) of business on the grounds that it (they) involve(s) the likely disclosure of exempt information as defined in paragraph(s) of Part 1 of Schedule 12A of the Act, as amended by the Freedom of Information Act 2000.

**PART II (PRIVATE MEETING)**

**MEMBERS OF THE PUBLIC TO NOTE**

That under the law, the Committee is entitled to consider certain items in private. Members of the public will be asked to leave the meeting when such items are discussed.

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## Cabinet

Tuesday 20 October 2009

### PRESENT:

Councillor Mrs Pengelly, in the Chair.  
Councillor Fry, Vice Chair.  
Councillors Brookshaw, Jordan, Leaves, Monahan and Ricketts

Apologies for absence: Councillors Bowyer, Dr. Salter and Wiggins

The meeting started at 2.00 pm and finished at 2.30 pm.

*Note: At a future meeting, the Cabinet will consider the accuracy of these draft minutes, so they may be subject to change. Please check the minutes of that meeting to confirm whether these minutes have been amended.*

### 69. DECLARATIONS OF INTEREST

The following declarations of interest were made in accordance with the Code of Conduct from Members in relation to items under consideration at this meeting –

<b>Name</b>	<b>Item</b>	<b>Declaration</b>	<b>Reason</b>
Councillor Jordan	Minute 74 – Devonport Regeneration Community Partnership Succession Strategy	Personal	Member of Devonport Community Leisure Limited

### 70. MINUTES

The minutes of the meeting held on 28 September 2009 were signed as a correct record.

### 71. QUESTIONS FROM THE PUBLIC

There were no questions from members of the public for this meeting.

### 72. CHAIR'S URGENT BUSINESS

There were no items of Chair's urgent business.

### 73. LOCAL DEVELOPMENT FRAMEWORK: DEVELOPMENT GUIDELINES SUPPLEMENTARY PLANNING DOCUMENT - DRAFT FOR CONSULTATION

The Director for Development and Regeneration submitted a written report.

Resolved that –

- (1) Cabinet approve the Development Guidelines Supplementary Planning Document (Consultation Draft) for the purposes of public consultation and as a material consideration in the determination of planning applications;
- (2) Cabinet delegate authority to the Assistant Director of Development (Planning Services) to approve the final publication version of the consultation draft Supplementary Planning Document;
- (3) Cabinet instruct officers to review the Supplementary Planning Document after one-year of its operation in a planning application context, in consultation with the Portfolio Holder for Planning, Strategic Housing and Economic Development.

## 74. **DEVONPORT REGENERATION COMMUNITY PARTNERSHIP SUCCESSION STRATEGY**

The Director for Development and Regeneration submitted a written report.

Resolved that the Devonport Regeneration Community Partnership Succession Strategy be approved in principle subject to the following conditions -

- (1) completion of financial checks to include Neighbourhood Manager costs, Devonport Community Land and Leisure Limited Trusts and their asset bases;
- (2) discussion and agreement to the letter of intent between DRCP and the City Council;
- (3) the approval of Communities and Local Government of the Devonport Community Land Trust governance arrangements;
- (4) completion of the review into the future use of Parkside by the Director for Corporate Support;
- (5) subject to agreement that we will be engaged in the discussion between DRCP and DCLG during the period end of October to April 2010;
- (6) final approval of the strategy be delegated to the portfolio holder for Planning Regeneration and Economic Growth in consultation with the Chief Executive and Director for Corporate Support.

(Councillor Jordan declared a personal interest in the above item).

## 75. **PEOPLE STRATEGY**

The Director for Corporate Support submitted a written report.

Resolved that Cabinet formally adopt the strategy.

## 76. **EMERGENCY RESPONSE PLAN - FUNDING**

The Assistant Chief Executive submitted a written report.

Resolved that the Assistant Chief Executive be asked to identify the funding as required within existing Policy, Performance and Partnerships departmental budgets and having regard to other priorities. The funding identified can be met from within existing resources.

## 77. **EXEMPT BUSINESS**

There were no items of exempt business.

**CITY OF PLYMOUTH**

**Subject:** Refresh of the Children and Young People's Plan 2008 – 2011.

**Committee:** Cabinet

**Date:** 10 November 2009

**Cabinet Member:** Councillor Monahan, Cabinet Member for Children and Young People

**CMT Member:** Director of Services for Children and Young People

**Author:** Richenda Broad, Head of Strategic Planning and Children's Trust Business

**Contact:** Tel: (01752) (30)7341  
e-mail: Richenda.Broad@plymouth.gov.uk

**Ref:** RCB

**Part:** I

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**Executive Summary:**

This report outlines the progress on implementing the Children and Young People's Plan 2008-2011.

The local authority is required to ensure that a Children and Young People's Plan is developed and agreed with all the partner agencies who deliver services for children and young people in Plymouth and that this plan is reviewed annually. This is the first review of Plymouth's Children and Young People's Plan 2008-2011 which was agreed by Cabinet last year. The three year plan was developed based on a comprehensive needs analysis that drew together the data from a range of agencies and the views and wishes of children and young people. From this, ten priorities were identified as improvement areas to improve outcomes for children and young people. The review of the needs analysis undertaken this year confirmed that the priorities within the plan remain relevant. Consequently the refresh of the plan has been deliberately light touch and focuses on the achievements so far and the areas for improvement and development.

The refresh of the Children and Young People's Plan is in two parts, a summary document which is aimed to be easily readable by our service users and staff and a more technical document that provides the information for assessing how the objectives will be met.

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**Corporate Plan 2009-2012:**

All the Children and Young People's Plan priorities support the corporate improvement priorities in particular Corporate Improvement Priority 7, Keeping Children Safe; Corporate Improvement Priority 8, Improving Skills and Educational Achievement and Corporate Improvement Priority 9, Developing High Quality Places to learn in.

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**Implications for Medium Term Financial Plan and Resource Implications:  
Including finance, human, IT and land**

The implications for this plan have been identified through the implementation plans for each priority which are monitored by the Children’s Trust Executive each month. The resource implications have been shared across all the participating agencies and will be closely monitored by the Executive.

**Other Implications: e.g. Section 17 Community Safety, Health and Safety, Risk Management, Equalities Impact Assessment, etc.**

None

**Recommendations & Reasons for recommended action:**

The Cabinet are requested to endorse the 2009 refresh of the Children and Young People’s Plan.

**Alternative options considered and reasons for recommended action:**

None

**Background papers:**

- Plymouth Children and Young People’s Plan 2008 – 2011
- Department for Children, Schools and Families Children and Young People’s Plan Guidance 2009 (available on the DCSF website)

**Sign off:**

Fin	NC 16/10 /09	Leg	LS1 059 16/10 /09	HR		Corp Prop	CJT /039 /221 009.	IT	2009 1021 /42N JC.	Strat Proc	N/A
Originating SMT Member : Richenda Broad, Head of Strategic Planning and Children’s Trust Business											



**Plymouth Children and Young People's  
Plan 2008 - 2011  
Refresh 2009**



**Working for excellence**

## **Table of Contents**

<b>Towards excellence</b>	<b>3</b>
<b>Our vision, purpose and priorities</b>	<b>4</b>
<b>How are we doing?</b>	<b>5</b>
<b>Big Issues for 2009-2011</b>	<b>8</b>
<b>Key objectives for next year</b>	<b>10</b>

## **Refresh 2009**

### **Summary**

## **Towards excellence**

We've turned our hopes into action during the first year of Plymouth's Children and Young People's Plan. Staff across the city have strived to turn the plan into reality and we've achieved many of the things that we set out to do.

We continue to narrow the education gap for children and young people living in the most disadvantaged families by giving them the chance to take part in high quality learning and leisure activities. We've increased the services we offer both before and after school and during the school holidays. The city now boasts 16 children centres and this autumn we have opened 3 brand new schools.

By listening to the issues concerning children and young people, and working with them, we are tackling bullying in the city. We've introduced fantastic new initiatives that aim to prevent bullying – police community support officers make themselves available outside school entrances at lunchtimes and at the end of the day to reduce the opportunities for bullying to happen. We've also created Bully Buster information packs to support schools in their efforts and we've updated our guidance to consider new forms of bullying, such as cyber bullying.

Children and young people told us that they wanted better parks and safer and cleaner streets so we've renovated seven of the city's parks in the past year, with another seven due next year, using traditional materials and equipment that encourage fitness and outdoor play. We've introduced 'Street Wise' teams made up of police officers and social care staff to patrol the city at night on weekends making sure children and young people are safe and not at risk – this also helps to reduce street drinking and antisocial behaviour.

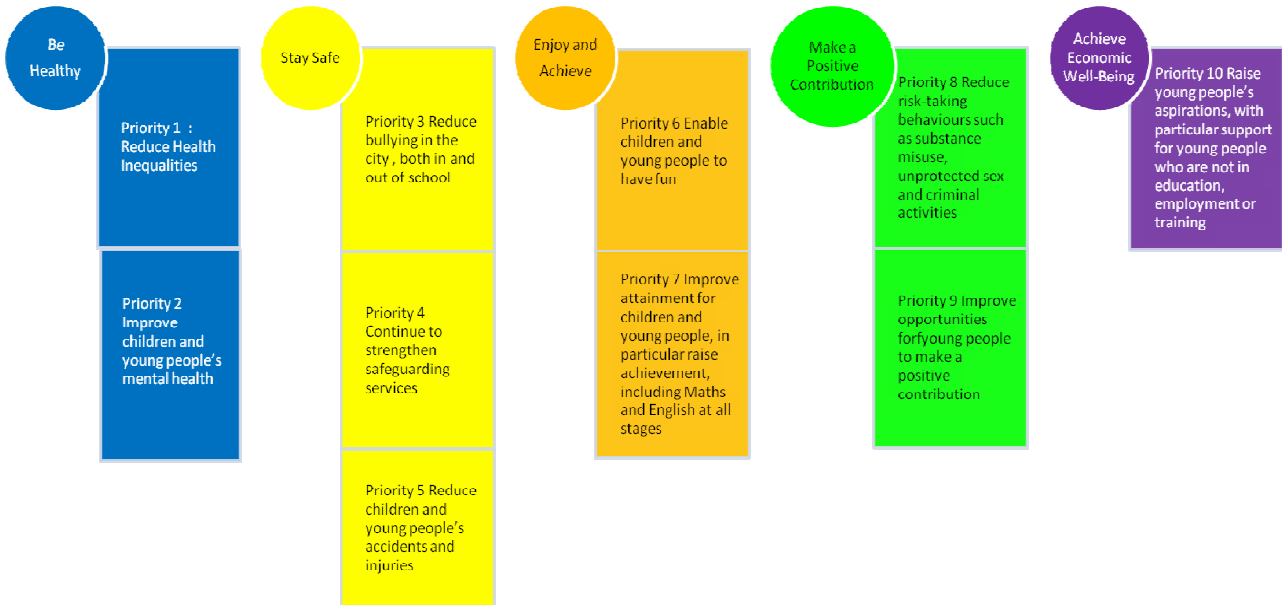
We've been very successful in gaining funding for the city to act as trail-blazers for the government. We are increasing the amount of direct access to mental health workers in schools and were rewarded with the chance to run a pilot to test new therapies for children and young people with complex needs. We've been awarded grant funding to set up a pilot to address child poverty by working with parents who are separating and to prevent worklessness. Plymouth has taken part in national research into parent support programmes, carrying out innovative work that has proved very successful, seeing parents who took part in the courses returning to help teach others.

We continue to provide high quality services recognised by customers and external inspections. The health of children and young people in Plymouth is generally good but we are concerned about how many children are obese and how many young people smoke. We want to help give them the best start in life, so it's these kinds of issues we still need to tackle.

We have a lot to be proud of over the last year and we know what we have to do this year...

## Our vision, purpose and priorities

In 2007 -2008 we asked lots of children, young people and families what they thought of our services and the issues that concerned them about growing up in Plymouth. We turned their thoughts and feelings into 10 top priorities for the city and they formed the basis of the Children and Young People’s Plan 2008-2011.



At the same time the Children and Young People’s Trust Executive asked children and young people what they thought would make a great place to grow up and their ideas became the vision for the Children and Young People’s Trust.

***‘We want all our children to live, grow, achieve and exceed in their hopes for the future’***

We’ve since had another look at the original work we did to see if it is still relevant. To do this we used national guidance, national and local data and more of the views of children, young people and their families over the past year. This showed us that we needed to keep the same priorities but update the plan with all the new work we are doing to achieve them.

This refreshed plan also brings together some of the ways we are succeeding in tackling our priorities to achieve excellent services.

## How are we doing?

Since creating the plan in 2008 we've made real progress towards achieving our priorities. Each of the priorities falls in one of the Every Child Matters outcomes, which are the aims the government has set everyone working with children and young people across the country.

## Be healthy – Priorities 1 and 2

We know that too many children and young people in Plymouth are obese or they smoke. Starting on the road to a healthy adult life begins at an early age so we want to tackle these two important issues.

So far...

- 99% of schools take part in the Healthy Schools programme beating our target
- Fitness and healthy lifestyles are encouraged through excellent community work that includes street dance groups, Kickz football in the community, summer sports camps at Plymouth College and StreetGames in Southway, North Prospect and Coxside, plus a new youngsters gym at Brickfields Sports Centre called SHOKK.
- Healthy eating and cooking are promoted through schools and community organisations by hosting 'Ready Steady Cook' style food events, allotment projects run by Diggin It, the Efford Community Allotment scheme and learning how to make healthy snacks with events like the picnic day at Tothill Community Centre in St Judes. In a new school we have included a kitchen for parents to use.

## Staying safe – Priorities 3, 4 and 5

Everyone working with children and young people have felt the impact of national concerns about the safety of children. We have received more referrals and the number of children in care and on child protection plans has risen. We've responded to this rise in demand by staying focussed and providing high quality services that ensure standards continue to be met.

Keeping children safe is more than just child protection and we have worked hard this year to understand how we can prevent accidents in the home and community that result in children and young people going to hospital.

Reducing bullying is the priority that children and young people have told us concerns them most. We are launching our bullying strategy and we know that by raising the profile of bullying, this could result in more incidents being reported. We think this is good – we want children and young people to feel able to report bullying and that it will be dealt with by adults.

- 100% of child protection cases were reviewed on time
- Continued to reduce the number of children on protection plans for a second time
- A toolkit to address bullying has been developed for all schools and settings with the active involvement of children and young people. This will be launched during Bullying Week in November
- Bully Busters – a programme devised by pupils in Plymouth schools, is being rolled out across Plymouth.

## Enjoy and Achieve : Priorities 6 and 7

Children and young people told us that we did not give the priority 'enjoy' enough attention so we have separated them.

Fun is an essential part of children and young people's development and we have spent the last year understanding what how children and young people can participate in fun and what may stop them. As a result we have achieved

- Free access for children in care to access Plymouth City Council leisure facilities using a leisure card

We know that children and young people want to learn and achieve and in the current economic climate, they are aware of the increased competition for employment. To equip our children and young people we have:

- Opened 3 brand new schools where we have included multi-agency space to allow services to be delivered locally;
- Children and young people participating with Sport, Leisure and Culture services to jointly plan for new facilities
- Free access for many children and young people in care to city council leisure facilities.
- We have established our virtual school for children in care and the Executive Headteacher is ensuring that there is targeted support for these children and young people;
- Developed an Integrated Curriculum across Primary and Secondary schools in response to young people asking for more active, including out-doors learning and inter-related lessons.

## **Make a Positive Contribution : Priorities 8 and 9**

Young people have to manage a range of competing demands – media, fashion, communication, fun and learning.

Risk-taking behaviour is a major concern for us in the City. In the last year we've made some real ground in:

- Growing our teenage pregnancy partnership so that agencies are making their full contribution, this has already led to better services in the community, for example Youth centres run a clinic in a box.
- We've carried out a number of new initiatives through the Youth Crime Action Plan including an Operation Stay Safe that protects young people who are out on the streets late at night.
- Many young people felt that there were often negative perceptions of them. The Police have been working hard with young people to break down misconceptions and are challenging their own new recruits to think and act positively.

We think we're doing a better job of listening to the views of children and young people:

## **Achieve Economic Well-Being : Priority 10**

The global economic crisis has had a damaging impact on children and young people. Many children and young people are worried about job prospects for themselves and their families:

- We have kept in touch with the majority of young people aged 16-18 and make sure they have all the support they need to find work or training. The number of young people who are not in education, employment or training is higher than last year but isn't as high as other authorities like ours.
- More families are taking advantage of childcare tax credits.
- The majority of our care leavers are in education, employment or training when they turn 19.

## **How will we know that we have made a difference?**

We will make sure that when our services are offered to families they can describe the difference they make to improving outcomes for children and young people. We will ensure that parents and children and young people have information about how well we are doing so that they can ask us to show what difference we are making. This may be how a school is supporting healthy outcomes for children and young people, how we are reducing accidents in the home or community or how children and young people are involved in decisions about their services. We will do this by

- Making as much information as possible available on our website;
- Testing our progress against other local authorities to see how well we do in comparison with them;
- Being clear about the timescale for achieving what we have said we will do.
- Encouraging challenging questions to be put to us;
- Learn from good practice both locally and nationally and put this into practice;
- Supporting children and young people and their families to participate in council committees so that they can examine our progress and challenge us to do even better.

## Big Issues for 2009-2011

The work of the Children and Young People's Trust emphasises the importance of the link between a child having a good start in life and becoming a young person who has ambition, strives to achieve and is emotionally resilient. Reducing child poverty continues to be a national and local priority and will be a theme that informs all the actions of the Plymouth Children and Young People's Trust. We will **ensure that all our services work to reduce child poverty.**

A specific example of this is the Trust's commitment to implement the recommendations of the Bercow Report. This report reminds us of the importance of **supporting speech and language development** to ensure that children do not fall behind in their learning and social development as a consequence of communication difficulties.

**Ensuring that all children can achieve their ambitions and aspirations** underpins the vision for the Children and Young People's Trust and drives all our actions. We know that many young people and their families are worried about their future. While the media tells us that the recession is over, for many families it is that the consequences may last longer. There are current challenges for young people to find employment. Our work with Plymouth schools and colleges ensures that they set ambitious individual targets for students and are supported to enable pupils to achieve these. We want all children and young people to have high hopes for their future and to support them in achieving them.

Ensuring that we provide **high quality services that offer effective and efficient services** is a key issue for 2009 and 2010. **Commissioning services** involves us changing the way we work to engage more collaboratively with service users and professionals to understand what is required, putting the appropriate services in place and monitoring them to ensure they deliver improved outcomes for children and young people. Sometimes this different way of working is more effective than increasing the amount of money to fund services. As all our services need to be commissioned this way we are starting to undertake this with our services both in individual agencies and jointly across a range of services, such as Health, the voluntary and community sector and the council, so that we work together to plan and deliver our services to prevent duplication and increase the services that are integrated. We know that parents and families want services to work together as much as possible and through commissioning together we will ensure value for money and services that improve outcomes for children and young people.

We will continue to listen to children and young people's concerns about the issues that are important to them such as bullying and affordability of leisure and transport in Plymouth. The participation of children and young people as well as their families will continue to be a core element of how we plan and deliver services and how we know that they are making a difference.

The impact of the recession is likely to provide an additional challenge for young people in the coming year. We have a high performing 14-19 Strategy that works to ensure that there is flexible and **personalised learning** for young people and where the diploma's offer an extended range of choice for young people in Plymouth. In conjunction with the Connexions service who are commissioned to offer **information, advice and guidance to young people** on their career choices, we will strive to expand the opportunities for apprenticeships across the city, encourage employers to take up the incentives available for them to employ a young person and promote the regeneration of Plymouth as an attractive location for companies to establish themselves.



## Key objectives for 2009 – 2011

### Our key objectives are :

- To increase the speed of changing our delivery of services from centrally provided services to **services delivered locally and in partnership** that are easier to access. We know that this is what children, young people and their families want.
- To reduce **child poverty** across Plymouth by improving children and young people's life chances by continuing to raise the attainment of children and young people in the city, encouraging young people to participate in positive activities in and out of school, ensuring that parents have access to good quality information and advice and when necessary effective support services. The impact of the work of children's services will be greatly increased when this is done along side other services such as adult and community services and we will strive to increase the opportunities to provide services together.
- To combat **health inequalities** within Plymouth through promoting healthy living. With all nearly all our schools signed up to Healthy Schools we have a fantastic opportunity to build on the interest in being healthy and in where food comes from to influence the lifestyles of children and young people and their families.
- To continue to work to ensure that children and young people **are safe** within the city. Though reducing accidents, supporting them to develop positive relationships that will over time reduce bullying and when they are have experienced harm or are at risk of harm, we ensure that they are safe either within their own families or living apart from their families.
- To reduce the impact of the recession on children and young people by supporting families and young people to find **training, education and employment**.
- To ensure that children and young people **enjoy their learning and leisure** and that they have access to the high quality facilities that both challenge and stimulate them and that they enjoy.

# **2009 Technical Refresh of the Children and Young People's Plan 2008 – 2011**

Be Healthy	
<b>Priority : 1. Reduce Health Inequalities</b>	
<b>Champion : Paul O'Sullivan</b>	<b>Priority Coordinator: Candice Sainsbury</b>
<p>Please comment on key achievements and outstanding actions from the past year?</p>	<p>A core management group with representatives from NHS Plymouth, Public Health Development Unit and Services for Children and Young People has overseen the development and delivery of this implementation plan. This group has utilised pre-existing partnerships established around specific areas, e.g. breastfeeding and obesity, to achieve its objectives. Progress against relevant National Indicators is as follows:</p> <p><u>Healthy Lifestyles</u></p> <ul style="list-style-type: none"> <li>▪ Inspection findings across pre-school and school settings demonstrate that progress continues to be made on providing the right environment and culture to promote healthy lifestyles and choices for children with the majority of settings achieving good or excellent in the Be Healthy outcome.</li> <li>▪ Plymouth is performing well in comparison to its statistical neighbours and to all authorities in England.</li> <li>▪ In addition 99% of schools are participating in the Healthy Schools programme. This priority has been encompassed in the Local Area Agreement that has set a stretch target for 97 % of schools to achieve Healthy Schools standard. Performance is on track with 82% of schools already having the standard.</li> </ul> <p><u>Breastfeeding</u></p> <ul style="list-style-type: none"> <li>• Plymouth has a breastfeeding strategy that was formally signed up to by all partners in a public ceremony that took place this year. This priority is reflected in the Local Area Agreement. Following the development of a recovery plan, performance has more recently improved with 37.7% of women breastfeeding at 6 – 8 weeks against a target of 37%. In addition the levels recording breastfeeding status has also increased in response to guidance to General Practice and increased performance monitoring.</li> </ul> <p><u>Smoking in Pregnancy</u></p> <ul style="list-style-type: none"> <li>• A new 'opt out' referral pathway was introduced during this year in order to ensure that all pregnant women who smoke are offered smoking cessation support. This has resulted in a significant increase in</li> </ul>

referrals to the smoking cessation service and in turn the number of women who have quit.

#### Obesity

- In 2008 there was a significant increase in the numbers of primary schools that participated in the national child health measurement programme bringing the rate up to 95% of eligible children. Department of Health research has shown that an increase in participation rates can lead to an increase in identifying the prevalence of obesity. Consequently Plymouth has seen a rise to 17.1% of children in year 6 measured as being obese. The situation in Plymouth is very similar when compared to neighbouring authorities and England as a whole.

#### Take up of School Lunches

- National survey results and NI 52 show a drop in meal take-up across England between 2005 and 2008. In Plymouth, take-up levels for primary and special schools show a marginal drop from 34% to 32.6% (2007/08 versus 2008/09) and an increase from 29.5% to 33.25% for secondary schools. However, these figures exceed the take-up when compared to the rest of the South-west. For the year to date (April - July 2009 - 62 term days) the number of meals served have increased by 30,963 when compared directly with the same period last year (April - July 2008 - 64 term days). The majority of these meals being Free School Meals.
- The School Meals Service has fully implemented the mandatory Food-based Standards for School Lunches (September 2006) for all sectors (primary, special and secondary schools) and the mandatory Nutrient-based Standards for primary schools ahead of the required implementation date of September 2008. Nutrient-based standards for secondary and special schools are required to have been implemented on 01 September 2009. Menus for special schools are fully compliant and those for the secondary schools managed by the service will be compliant by January 2010.
- 43 primary school kitchens have now been upgraded and refurbished. In August 2008 £1.46m of Exceptional Capital Funding was awarded to the service to install kitchens at all primary schools without kitchen facilities (i.e. those currently receiving transported meals from other schools) and to upgrade existing Regen Kitchens to full production status. A second Exceptional Capital Grant of £596k was awarded to the service in July 2009 to specifically address dining facilities at 15 schools (a mix of primary, special and secondary) between August 2008 and August 2011.

- To improve take-up of school lunches, 8 Real Fast Food Road shows were held at secondary schools in February, March and April 2009, and a consultation exercise with children and parents commenced in June 2009, and is currently underway across the South-west locality working with Routeways and the Plymouth Parent Partnership. Over 2000 responses have so far been received from parents/carers and pupils/students to date. Information collated will contribute to a marketing campaign aimed at increasing uptake of school meals, and in particular of free schools meals.

#### Participation in PE and Sport

- Plymouth is performing well when compared to its statistical neighbours and England as a whole. Further data is required to say if this has improved over time and if it is consistent across the city – not available at time of writing.

#### Satisfaction with parks and play areas

- Plymouth shows a higher level of satisfaction amongst children and young people with parks and play areas when compared with other authorities and England as a whole.

#### Children in Care

- There has been a significant increase in numbers of initial health assessment and reviews for children in care. Improving the timeliness and quality of these assessments and reviews has also been a focus and is subject to ongoing work. Improved liaison and co-ordination is taking place between social care and the dedicated health and mental health teams for children in care to improve provision.

#### Access to Healthcare Services

- Waiting times for access to primary and secondary healthcare services have continued to improve for the whole population as well as for children and young people with most people waiting no longer than 4 hours in emergency settings (MIU + A&E) and 18 weeks for routine treatment.
- Progress also continues to be made on providing more dedicated health facilities for children for example through the opening of a children emergency department at Derriford and completion of plans for a new young person's mental health inpatient facility.
- Contraception and sexual health services have extended the range of clinics and venues so as to increase access by young people, including the provision of a dedicated young people's service.

<p>The needs analysis refresh highlights some of the key performance issues within this area. What do you think are the factors behind success / failure in outcomes? Does the data prompt any actions for next year?</p>	<p>Progress over the past 12 months has demonstrated that while overall effort to improve children and young people's health and access to health care continues, further analysis of data will enable the core management group to identify areas of focus where health inequalities exist in relation to key areas of focus, which include:</p> <ul style="list-style-type: none"> <li>• Teenage Pregnancy</li> <li>• Breastfeeding</li> <li>• Obesity</li> <li>• Smoking in Pregnancy</li> <li>• New Outpatient DNAs (Do Not Attend)</li> <li>• Emergency Admissions</li> <li>• Chlamydia Screening</li> </ul> <p>For each area of focus, data has now been collated to show the fifth 'worst', 'deprived' and 'best' neighbourhoods alongside the city average. This has allowed the core group to focus attention on specific neighbourhoods and localities where significant inequalities exist. This data will be fed back to the relevant strategic groups, with the aim understanding why the situation exists and to identify actions to respond directly to the inequalities identified. This will form the basis of the refreshed implementation plan, delivery of which will be overseen by the core management group.</p> <p>A key challenge around the area of health inequalities is the perception that addressing health inequality is only about access to health care. This perception contributes to the continued inequality experienced by families, as non health care factors affect their health status, such as housing, economic status, lifestyle choices etc. With this in mind, the challenges per area of focus include:</p> <p><b><u>Healthy Lifestyles</u></b></p> <p><b>Progress in non mainstream educational settings, including:</b></p> <p><b>i. Inspection findings and national benchmarking is less favourable for Further Education settings. Given the known challenges in Plymouth regarding potentially harmful risk taking behaviour amongst young people, these points to an opportunity to do more in promoting healthy choices</b></p>
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**and access to services for young people to reduce smoking and substance misuse and promote sexual health.**

*Actions*

- Engage FE establishments in reviewing weaknesses in current performance in Being Healthy and support development actions plans.
- Review how health promotion input is targeted to FE settings and other services for young people.
- Improved access or delivery of services for young people and progress the 'You're Welcome' standard as a quality / kite mark for services and one that young people themselves recognise and value.

**ii. Special Schools and Pupil Referral Units showed a lower performance in this area compared to mainstream settings. Children who are vulnerable as a result of disability or other factors that mean they are not in mainstream school are likely to have poorer health outcomes.**

*Actions*

- Support from education support services to these settings to share best practice and develop actions to improve inputs in this area to be reflected in improved inspection judgements.

**iii. Health inequalities continue to exist in key neighbourhoods or locality areas, for example in levels of obesity, rates of smoking or breastfeeding.**

*Actions*

- The progress made in pre-school and school settings provide a good platform from which to analyse whether there are themes that remain a challenge across individual settings and how support can be better targeted to reduce inequalities. A strategic analysis through a school–health partnership can develop a themed approach to support governors/ head teachers as well as inform the work of the SIP's.
- This information should also be used to inform the commissioning of a range of extended services to complement the work of schools and pre-schools in providing more opportunities for children and their families to engage in activities that will promote healthier lifestyles and choices. Given that a child's health will be heavily influenced by the choices their parents make, engaging parents and families at a local level will be critical to improvements in this area.

**Breastfeeding**

Despite recent progress, Plymouth continues to have levels breastfeeding below that of its Statistical Neighbours and that are low in comparison to authorities across England. In addition there is variation of

up to 39% in the rates of breastfeeding between different neighbourhoods in the city. There is a significant link between breastfeeding and reduced levels of obesity and therefore this area is essential to improving health outcomes.

#### *Actions*

- Progress in achieving the Baby Friendly Initiative (BFI) accreditation standard needs to be maintained in both the hospital and community with the aim of promoting the uptake of breastfeeding. The appointment of a peer support co-ordinator will also be helpful in providing support to women in sustaining breastfeeding. Further work can also be undertaken to ensure businesses, public organisations, leisure facilities etc. support women to breastfeed their babies.
- These city wide initiatives need to incorporate the enhancement or targeting of services / support to specific areas of the city to increase rates of breastfeeding in those areas and reduce the gap. The commissioning dialogue / process with children's centres should be used for this purpose to build on the work already taking place to enhance and spread best practice. The Early Years Strategic Partnership has set this as a KPI and should be used to develop action plans and monitor progress.

#### **Smoking in Pregnancy**

Despite the improved performance this LAA target is unlikely to be achieved and rates of smoking in pregnancy remain high in Plymouth. In addition there is a 32% difference in the rates of smoking during pregnancy between different neighbourhoods.

#### *Actions*

- Further work needs to be undertaken in informing young women about the harm associated with smoking to both themselves and their future babies. In addition opportunities for engaging with women early in pregnancy and with parents through children's centres should be consistently maximised with particular focus on those worst performing areas. The actions for children centres can be planned and monitored via the Early Years Strategic Partnership as above. A review of the information available and content of PHSE for young women in schools and further education should be reviewed, involving young women themselves, to ensure it is engaging, informative and effective in achieving the best outcome (linked to action 1 above).

#### **Obesity**

Clearly Plymouth, as in other authorities, has not yet been able to achieve a halt or indeed to reverse the rise in the levels of obesity. In addition there is approximately a 10% difference in the levels of obesity between different neighbourhoods in the city and therefore much more to do in targeting action to



specific areas in order to reduce the inequality as well as the level of obesity for the city as a whole.

A range of services are required ranging from prevention through the promotion of healthy lifestyles for all children through to dedicated services for those children who have already been identified as being obese. Indeed there are many examples of individual services or initiatives taking place that can have a positive impact on levels of obesity including the MEND programme delivered by the weight management service, participation in sport and community based activities, allotment schemes etc. The challenge is co-ordinating these into a coherent and comprehensive strategy that is appropriately targeted to achieve the maximum impact.

*Actions*

- Refresh and re-launch obesity strategy
- Appoint obesity co-ordinator to develop a comprehensive action plan that draws together the wide range of services required. This action plan should include prevention through to specific interventions as well as support targeted toward both families and direct work with children.
- Focus phase 2 of Healthy Schools Plus to address obesity and identify effective practice that can be shared across the city, but specifically targeted toward those worst performing areas in order to reduce the gap.

**Take up of School Lunches**

Challenges for the future include continuing to increase the take-up of school lunches (FSM and Paid for Meals) and balancing the real costs of the service, increased labour for fresh food preparation and cooking, as well as the well-publicised increases in food and fuel costs. The service is currently in receipt of the School Lunch Grant from the DSCF which equates to a 20 pence per meal subsidy and is further subsidised by the Local Authority.

The School Lunch Grant is due to cease in March 2011 and the service is using its position as South-west representative on the DCSF's national School Food Reference Group and the LACA Regional Committee to lobby for this grant and/or an alternative method of funding to continue beyond this date.

*Actions*

- Further work should be done to promote the extension of cookery clubs based in schools as a way

of engaging both parents and children in engaging in healthy cooking and eating. This could be commissioned on a locality basis as part of the increasing range of extended services.

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### **Participation in PE and Sport**

Further analysis at locality and neighbourhood level as well as cross referencing with other information is required to identify whether those areas that are performing poorly against other health indicators are the same areas that have not yet achieved higher levels of participation. This can then result in an informed and targeted action plan aimed at increasing the levels of participation in key areas in order to reduce the gap.

### **Satisfaction with parks and play areas**

On an anecdotal basis and through participation concerns about the safety and suitability of parks continues to be an issues for children, whilst young people highlight the lack of adequate and dedicated leisure facilities.

### **Children in Care**

National research shows that children in care continue to have poorer health outcomes. In Plymouth the numbers of young people choosing not to have an annual review of their health needs remains high in comparison with younger children. This is potentially a missed opportunity to identify health needs and facilitate access to services, for example in relation to sexual health or substance misuse, alongside other services such as accommodation or work.

#### *Actions*

A comprehensive action plan has been endorsed by children's trust executive to address the health needs of children in care. This action plan includes:

- Continuing to improve the timeliness of health assessments through co-ordination with social care.
- Increasing the take up of health reviews, particularly amongst young people.
- Increasing use of the information gathered through assessments and reviews to inform the delivery of health services so as to increase access by children in care.

### **Access to Healthcare Services**

	<ul style="list-style-type: none"> <li>• Despite the good work underway, waiting times for therapy services remains too long particularly for speech and language therapy.</li> <li>• Further work is required to co-ordinate and, if necessary, enhance health provision for children with learning disabilities who have a health need.</li> <li>• More children need to be provided with the option to have their long term nursing at home and to choose to die at home or out of hospital where appropriate. This will require further development in provision of palliative care services and community based nursing services.</li> <li>• There is a significant difference / inequality between neighbourhoods and localities in the city in terms of:             <ul style="list-style-type: none"> <li>a. the numbers of children who do not attend their outpatient appointment;</li> <li>b. the numbers of children who attend for emergency care;</li> <li>c. children from more deprived areas being more likely to DNA and to attend A&amp;E.</li> </ul> </li> </ul>
<p>The needs analysis also highlights some of the key issues that have emerged from consultation with children and young people/parents and carers. Please respond to that feedback and add back messages that you've had from consultation during the year.</p>	<p>Engagement and consultation with children, young people and families is undertaken by the relevant strategic groups and partnerships. Specific work undertaken in partnership with the Health Inequalities core management group includes the participation and engagement work with children, young people and parents undertaken by the school meals service in partnership with Routeways and the Plymouth Parent Partnership to better understand what can be done to make school lunches a more attractive option.</p>
<p>Please comment on any inspection outcomes or recommendations from the last year.</p>	<p>Feedback from inspections across the broad range of settings suggests that key services are judged good or better at Being Healthy.</p>
<p>What actions taken</p>	<p>Data collated over the last quarter illustrates health inequalities in terms of the fifth 'worst', 'deprived' and</p>

<p>this year will demonstrate how this priority is address Reducing Child Poverty</p>	<p>'best' neighbourhoods alongside the city average for focus issues such as breastfeeding, obesity, smoking during pregnancy, outpatient DNAs. This provides a key opportunity to 'drill down' into why such inequalities exist and how we can collectively address them. Strategic partnerships working on such issues will be challenged and asked to demonstrate how they will respond.</p>
<p>What actions taken this year will demonstrate how this priority to reflect Narrowing the Gap</p>	<p>Tackling the issue of deprivation and poverty is a core part of reducing health inequalities, as it is not only a problem relating to 'health care', but links closely with other 'non health care' issues such as family make up &amp; break up, poor housing, the current economic recession, isolation, poor physical environment, unemployment and stress etc.</p> <p>This implementation plan aims to demonstrate how it will address underlying issues of health inequalities through the creation of partnerships across the LSP, and by targeting those specific neighbourhoods and groups where significant inequalities exist.</p>
<p>Are there any other significant policy drivers (such as the Governments response to Lord Laming's review of Safeguarding) that are likely to inform the implementation of this priority.</p>	<p>The new child health strategy, '<b>Healthy Lives, Brighter Futures</b>' (Department of Health, 2009) focuses on three age groups: pregnancy and up to five; school age; and young people, and outlines new proposals for universal, targeted, and specialist services for each age group. The strategy recognizes the importance of good health in the achievement of all other outcomes, including educational attainment, personal well-being, and economic success.</p> <p>The strategy discusses the changing epidemiology of morbidity, with the increase in lifestyle-related health concerns such as obesity and sexual health problems, and the consequences of alcohol consumption, smoking, and substance misuse. The importance of minimising the impact of poverty and social inequalities on child health are also acknowledged. To address these public health concerns, the strategy proposes:</p> <ul style="list-style-type: none"> <li>• Better engagement with children and families</li> <li>• The provision of health information and advice for families</li> <li>• A focus on creating healthy environments</li> <li>• Extra support for the most disadvantaged in society.</li> </ul> <p>The intention is to make services locally available through extending the roles of both Children's Centres and schools, to provide health, education, and social care services.</p> <p>This strategy provides the foundation for the implementation plan to reduce health inequalities. As such it ensures that the Children and Young People's Trust is able to respond to both local and national policy drivers.</p>

Be Healthy	
Priority 2: Improve children and young people's mental health	
<b>Champion:</b> <b>Paul O'Sullivan</b>	<b>Priority Coordinator: Candice Sainsbury / Ann Penwell</b>
Please comment on key achievements and outstanding actions from the past year?	<p>Alongside the process of developing a five year joint commissioning strategy for emotional wellbeing and mental health, the partnership developed a one year interim action plan for 2008-2009. The action plan was based on a mental health commissioning framework developed in February 2008.</p> <p>Key areas of progress during this period include:</p> <p><b>1. Vulnerable groups &amp; targeted services</b></p> <ul style="list-style-type: none"> <li>• Promotion of an integrated approach to the way in which services are delivered to meet the mental health needs of specific groups of children and young people.</li> <li>• Development of multi agency care pathways was central to this, resulting in pathways being developed around: sadness &amp; depression, dual diagnosis (substance misuse and mental health), autism spectrum disorder, care leavers and emotionally based school refusals.</li> <li>• Ongoing work is taking place for CYP presenting with high-risk behaviours (chaotic) that do not meet the threshold for current specialist services.</li> </ul> <p><b>Remaining challenges</b></p> <ul style="list-style-type: none"> <li>• Integrating pathway planning across the Trust is new to many services and individuals, and as such pathways have not always been implemented as effectively as possible. The partnership proposes to develop a standard template for use across the Trust to ensure that pathways are easy to understand and are implemented.</li> <li>• Targeting of vulnerable groups remains an issue – the strategy identifies key groups to receive a targeted/enhanced service around mental health including CYP with a learning disability, asylum seeking and refugee children, CYP disengaged from school/NEET, children in care/care leavers and young offenders.</li> </ul> <p><b>2. Service Development</b></p> <ul style="list-style-type: none"> <li>• <b>Redesign of health based CAMHS:</b> this major piece of work has brought together what were previously know as Specialist and Community CAMHS into one streamlined, comprehensive service made up of dedicated teams to meet the mental health needs of children and young people in Plymouth.</li> </ul>

The model is separated into two main areas of delivery. **Mainstream Provision** refers to support for services targeted to those with an increased risk of developing mental health problems or disorders, and includes the Early Year's Team, a team for CYP with a severe and profound learning disability and a Mainstream Team (including the targeted provision of Primary Mental Health Workers and CAMHS input to paediatric liaison). **Intensive support** via the Intensive Multimodal Practice (IMP) Team will provide specialist mental health assessment and intervention in the community. Inpatient care will also continue to be provided.

- The emotional wellbeing and mental health partnership was successful in its bid to DCSF to implement a two year **Targeted Mental Health in Schools (TaMHS)** pilot project (2009-2011). 23 schools (primary, secondary, special and PRUs) will take part in this project, which brings together VCS service provision with educational psychologists, school based primary mental health workers and all school staff in order to promote emotional wellbeing and to respond quickly to emerging mental health needs.
- **Multi agency training for universal services** was rolled out during 2008-2009. This training provides an introduction to mental health, including mental health promotion, and enables staff to identify when a child or young person has emerging mental health needs. The training will provide a key component of the TaMHS project in order to training all school staff.
- **Healthy Schools Plus** attracted 8 primary/secondary schools that have elected to focus on EWB as their topic area.
- **Pushed into the Shadows** referenced Plymouth's excellent practice in not admitting adolescents into adult mental health in-patient units.
- **Safety in Numbers:** An intervention group for women experiencing post-natal depression. Developed by a Primary Mental Health Worker and Health Visitor it is now delivered across the city, albeit not as often as we would wish. Evaluation shows excellent outcomes for the women and we know that this improves attachment and thus outcomes for the infants
- **Social and Emotional Aspects of Learning (SEAL)** work within schools in Plymouth has been commended to the Prime Minister's Delivery Unit as an outstanding example of raising aspirations, achievement and attainment.
- **Multi systemic therapy (MST)** is an intensive family and community-based treatment programme for young

people with complex clinical, social, and educational problems such as violent behaviour, drug abuse and school expulsion. This new project commenced in 2008 and is delivered by The Zone in partnership with key agencies and services.

- **Stigma pathfinder:** Plymouth was successful in becoming a pathfinder project to combat the stigma associated with mental health, as part of a national roll out. CYP were central in the development of this multi agency project.

#### **Remaining challenges**

- The need to bring together the various pieces of work around transitions, and to clarify the outcomes we expect for CYP when going through times of transition.

### **3. Service Infrastructure**

- **Strategy Development:** Development of a comprehensive five year joint commissioning strategy for emotional wellbeing and mental health – this strategy is pioneering in its approach to both emotional wellbeing and mental health, as most mental health strategies focuses on emerging or established need. Development of the implementation plans is now underway, with expectations to have an active plan in place by November 2009.
- **Strategic Partnership:** Active membership of the partnership has increased dramatically, with representation now from the majority of sectors and services across the Trust. Clarifying language and increasing understanding across stakeholders that mental health is everyone's business has been a key part of the partnerships success over the past 12 months. The partnership has recently clarified its role as being responsible for service improvement, leadership of change, support and challenge and provision of expertise to the commissioning process.
- **Commissioning:** The strategic partnership acknowledged that the role of commissioning (particularly contract management) should to be separated from the strategic parts of its work, and an active commissioning group is now in operation, responsible for ensuring that the strategy is commissioned appropriately and in response to identified need. Performance will be monitored by this group, but scrutinised by the strategic partnership.
- **Engagement with CYP, parents and stakeholders:** Young people have been involved in a DVD project called 'Beneath the Smile' which raised awareness of the voices of children & young people who have

	<p>experience of mental health issues. The DVD resource is seen nationally as best practice. Children and young people have fed into the stigma plan which has its objective the reduction of making services for CYP more accessible and have advised on the CAMHS restructure. Parents played an integral part in CAMHS strategy development – parents attended Strategy development meetings, the parent's health theme group reviewed the strategy and PSAs enabled meetings in schools between CAMHS staff and parents. In addition, the partnership has a PSA representative. Parents were also supported to attend Infant Mental Health services development group.</p> <ul style="list-style-type: none"> <li>• <b>Mental health provider network:</b> made up of representatives from services whose primary function is mental health, this network works closely with the EWB &amp; MH partnership and has undertaken some significant pieces of work including service mapping and service pathway development. The network has strong VCS representation, and is a member of the partnership.</li> </ul>
<p>The needs analysis refresh highlights some of the key performance issues within this area. What do you think are the factors behind success / failure in outcomes? Does the data prompt any actions for next year?</p>	<ul style="list-style-type: none"> <li>• Strong leadership, good challenging relationship between commissioner and provider, clear vision and facilitation of productive relationships between key agencies based on shared understanding of need and clarification of language.</li> <li>• The profile of mental health and understanding of its role in securing positive outcomes has been instrumental in successes to date.</li> <li>• The Plymouth emotional wellbeing and mental health partnership is becoming a well developed and inclusive body representing the key services working with children and young people. Active discussion and debate between universal, targeted and specialists services addressing the continuum of needs has actively promoted the message that we are all responsible for CYP's emotional wellbeing and mental health. Particular success is within schools, with active engagement on the partnership and having secured a school based pilot project to improve emotional wellbeing, including training for ALL school staff. In addition, VCS engagement on the partnership and provider network has also been very prominent.</li> <li>• Development of a comprehensive five year joint commissioning strategy has clarified how we will collectively respond the continuum of needs in relation to emotional wellbeing and mental health. The strategy is pioneering in its approach to both emotional wellbeing and mental health, and is one of the first in the country of its type, ahead of government recommendations (CAMHS review). Strategic outcomes focus on an integrated approach to mental health promotion, early responses to emerging need, and effective interventions for established need.</li> </ul>



	<ul style="list-style-type: none"> <li>• The strategy provides an excellent example of how to embed commissioning within service planning and development, as illustrated by the redesign of health based CAMHS, which is aligned with and directly responds to the strategic outcomes and objectives.</li> <li>• Strategy and service design has listened to and responded to the needs of CYP, families and practitioners themselves. Active engagement and participation is a cornerstone of the successes over the past year e.g. development of stigma project and development of educational DVDs – ‘beneath the smile’. In addition, schools have consistently stated that they wanted more capacity and a physical presence of mental health professionals attached to schools – this approach is now being piloted under the management of health based CAMHS in partnership with other services.</li> <li>• The use of CAF is promoted within the strategy but is not currently being used – this is a key strategic outcome which will rely heavily on the new structures and processes in place for CAF.</li> </ul>
<p>The needs analysis also highlights some of the key issues that have emerged from consultation with children and young people/parents and carers. Please respond to that feedback and add back messages that you've had from consultation during the year.</p>	<ul style="list-style-type: none"> <li>• <i>Children and Young People feel strongly that all staff in schools should be given equal status in supporting their emotional wellbeing, including meal time assistants, teaching assistants etc: The TAMHS project addresses this area of concern – all school staff will receive the training for staff in educational settings, with a focus on a whole school approach to emotional wellbeing</i></li> <li>• <i>Mental health support needs to be placed in the venues they feel comfortable in: a core feature of the strategy and of health based CAMHS redesign is the delivery of services in local, community settings, where appropriate.</i></li> </ul>

<p>Please comment on any inspection outcomes or recommendations from the last year.</p>	<ul style="list-style-type: none"> <li>The emotional wellbeing and mental health partnership scored 4/4 for its proxy indicators on 1) service provision for 16/17yr old, and 2) 24/7 service provision. The partnership scored itself as 3/ 4 for 1) provision of comprehensive services to meet the mental health needs of CYP with a learn disability, and 2) comprehensive early intervention services for mental health.</li> </ul>
<p>What actions taken this year will demonstrate how this priority is address Reducing Child Poverty</p>	<p>The identification of vulnerable groups of children, young people and families is a core part of the joint commissioning strategy for EWB and MH. The issue of deprivation, poverty and inequalities and their effects on the mental health of children, young people and families are highlighted within the needs analysis and responded to accordingly.</p> <p>Specific projects implemented this year that aim to narrow the gap include:</p>
<p>What actions taken this year will demonstrate how this priority to reflect Narrowing the Gap</p>	<ul style="list-style-type: none"> <li>TAMHS project – implemented in 23 schools in areas of high deprivation and low attainment.</li> <li>Provision of targeted mental health services – e.g. children in care CAMHS team (includes care leavers)</li> <li>Dedicated primary mental health worker allocated to Devonport (funding secured for three years)</li> </ul>
<p>Are there any other significant policy drivers (such as the Governments response to Lord Laming's review of Safeguarding) that are likely to inform the implementation of this priority.</p>	<p>The final report of the independent <b>National CAMHS Review (2008)</b> sets out a clear vision for how we can all take responsibility for promoting children's psychological well-being and mental health and how we can best achieve a step change in the quality and consistency of services at all levels. Plymouth's joint commissioning strategy addresses most of these, in particular the three fundamental changes that the report states needs to take place:</p> <ol style="list-style-type: none"> <li>1. Everybody needs to recognise and act upon the contribution they make to supporting children's mental health and psychological well-being. And they need to recognise the contribution others make, including parents and carers.</li> <li>2. Local areas have to understand the needs of <b>all</b> their children and young people – at population and individual level – and engage effectively with children, young people and their families in developing approaches to meet those needs. For parents, carers, children and young people, this means being listened to, knowing what is available and being able to access help quickly and in places they choose to go to.</li> <li>3. The whole of the children's workforce needs to be appropriately trained and, along with the wider</li> </ol>

	<p>community, well informed. For practitioners, this involves having access to the best evidence and knowledge on improving outcomes for children and young people. For parents, carers, children and young people this means having the confidence that the people they are in daily contact with, as well as specialists, understand about mental health and psychological wellbeing and what works best if things go wrong.</p>
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<b>Staying Safe</b>	
<b>Priority : 3 Reduce Bullying in the City, both in and out of School</b>	
<b>Champion Maggie Carter</b>	<b>Priority Coordinator: Candice Sainsbury</b>
Please comment on key achievements	<ul style="list-style-type: none"> <li>- The profile of tackling bullying in schools and the community has been raised</li> <li>- A 'Tackling Bullying Together' joint strategy has been developed and was informed by children and young people.</li> </ul>

and outstanding actions from the past year?

- Cyber bullying and e-safety training and guidance pack has been produced and launched, which is recognised as best practice regionally.
- Anti-bullying work within schools includes – preventative work delivering the SEAL agenda – to create and promote an environment where CYP can discuss issues with regard to bullying, and the development of children and young people's emotional resilience.
- Further work in school is around the Healthy Schools Award where schools reflect on the efficiency of their anti bullying policy and take steps to promote CYP's mental health – which is further developed by the range of curriculum materials in PSHEE/citizenship and across the range of subjects.
- Parent Support Advisors are now in every school and support parents to tackle issues of bullying at an early stage.
- Innovative approaches such as the 'Bully Busters' programme are currently being rolled out across the city
- A 'Tackling homophobic bullying in schools' resource pack has been launched
- Advertising campaigns in the city support the 'Say No to Bullying' message for example Sainsbury's till receipts message.
- Embedding of children and young people participation in the work of the Children's Trust at all levels.
  - Shadow Children's Trust set-up
  - Involvement of children and young people on Overview and Scrutiny Panel
  - Young people on appointment panels for posts at all levels.
  - City Youth Council, Youth Cabinet and Youth Parliament in place.
- Children and young people voice heard through participation activity.
  - Production of DVDs (Behind the Smile, mental health; Count Me In, disability; someone Who Listens, children's workforce)
  - Consultation events
  - Young people involved in planning, participating and evaluating activities and programmes as part of the Youth Service.
  - Presentation by children and young people at conferences locally an nationally e.g. Listen and Care Council
  - Children in care at conference in London.
- All schools have school councils who influence the way school are run and feed into the City Youth Council.
- Participation teams from Routeways and the Youth Service train and support children and young people to enable meaningful participation through a range of mediums.
- Children and young people have been involved in design panels for new schools, city Centre Area Action Plan etc.
- Training for volunteers rolled out to young people in conjunction with Princes Trust through Youth Steps. V-involved recognises young people's contribution to volunteering in Plymouth.

	<ul style="list-style-type: none"> <li>• Specific groups of children and young people e.g. children in care, children with disability are informing service developments in those areas.</li> <li>• Website set up with database detailing daily, weekly and monthly activities for children and young people across the city.</li> <li>• Work to promote positive image of young people – high profile events such as Youth Arts Festival, Young Stars, National Youth Work Week, Schools Out event, Relay for Life Walk.</li> </ul> <p><u>Actions Outstanding:</u></p> <ul style="list-style-type: none"> <li>• Work on implementation of Hear by Right Standards.             <ul style="list-style-type: none"> <li>- Adaptation of individual service planning and review processes to maximise child/young people friendliness.</li> <li>- A comprehensive 'toolkit;' of approaches to preventing and tackling bullying is being developed to support the Tackling bullying strategy which will be ready for the November launch during national anti bullying week.</li> <li>- A refreshed implementation plan based on the strategy is being developed</li> </ul> </li> </ul>
<p>The needs analysis refresh highlights some of the key performance issues within this area What do you think are the factors behind success / failure in outcomes? Does the data prompt any actions for next year?</p>	<p>Bullying is high on the agenda for our CYP, demonstrated by the Tellus results and local consultation. We have identified in our Anti-bullying strategy group that there are difficulties with quantifying actual bullying incidences and problems with reporting mechanisms. This is an area we would like to address and work towards a more robust quantitative picture of CYP being bullied.</p> <p>We are currently meeting our local performance targets, the National Indicator NI 69 definition was changed mid 2008 which has affected our results. School inspection data identifies that 100% of secondary schools inspected are good or outstanding for management of behaviour CN186, which is top quartile performance. In order to learn more and further understand issues affecting our CYP we have contributed questions around bullying to the Children's Consultation Fund Questionnaire to be launched later this year which will further enrich our knowledge and help us monitor our performance.</p>
<p>The needs analysis also highlights some of the key issues that have emerged from consultation with children and young</p>	<p>A recent City Youth Council event showed that bullying is still a concern for our young people. The CYP that were consulted felt that they needed more lessons on bullying, its effects and the different types of bullying i.e. homophobic, as well as assemblies on bullying. This would imply that for these young people at least, more needs to be done to raise awareness and improve education around bullying. Our city wide Tackling Bullying Together Strategy will address this as it is one of our strategic outcomes to ensure ALL CYP have a shared understanding of bullying, including the forms it takes, the damage it does, with a specific focus on bullying associated with homophobia, racism, disability, sexism, religion and cyber bullying.</p> <ul style="list-style-type: none"> <li>• The CYP consulted also wanted to be able to talk to someone about bullying and perhaps have a</li> </ul>

<p>people/parents and carers. Please respond to that feedback and add back messages that you've had from consultation during the year.</p>	<p>counselling system and to be able to speak out about it. Through our strategic outcomes and development of our implementation plans we hope to create an environment where our CYP feel safe and supported so that ALL CYP are able to report bullying and know that it will be dealt with effectively.</p>
<p>Please comment on any inspection outcomes or recommendations from the last year.</p>	<p>Last years Annual Performance Assessment stated that an area for improvement was 'To ensure our citywide bullying strategy is implemented throughout ALL services' Our strategy has been developed and the toolkit will support this. We have identified to the need to take this beyond educational setting and into the wider community. Reaching all services will be developed through our implementation plan.</p> <p>The safeguarding continuum is a key factor in the strategy as we recognize that bullying can be a form of abuse. And a recurring agenda item on the anti-bullying strategy group is a 'PSCB and E-safety update'.</p>
<p>What actions taken this year will demonstrate how this priority is address Reducing Child Poverty</p>	<p>Section 4.1.1 of the 'Tackling Bullying Strategy' describes how child poverty has been discussed in relation to bullying and is a cross cutting issue throughout our strategy and therefore our implementation plans.</p> <ul style="list-style-type: none"> <li>• Ensuring that <b>all</b> children and young people have their voices heard through school councils in all schools and tailoring Tellus and other survey activity to ensure issues of economic well-being are covered.</li> <li>• PRU partnership work with the Youth Service through Duke of Edinburgh.</li> <li>• Targeting the Education Schools Disadvantage Grant programme in areas of social deprivation to ensure access to positive activities.</li> <li>• Targeted youth support in areas of social deprivation.</li> <li>• Children in care access to support funds for extended school activities.</li> </ul>
<p>What actions taken this year will demonstrate how this priority to reflect Narrowing the Gap</p>	<p>Creation of our implementation plans and the establishment of task and finish groups to action our strategic outcomes will work towards narrowing the gap. During our needs analysis to inform our strategy certain groups of CYP were identified who are likely to be more vulnerable to bullying behaviour and bullying associated with homophobia, racism disability, sexism and religion have been identified as requiring a tailored response.</p> <p>Tackling bullying will work towards narrowing the gap in terms of narrowing the attainment gap for example – bullying behaviour may result in exclusion and being bullied may result in poor attendance and lack of engagement in school or poor behaviour (these are included in our measures of local performance) which therefore impacts upon attainment levels and as most of the 'vulnerable' groups identified in the programme</p>

	have been identified in our strategy as being more likely to be bullied it will contribute to improving their outcomes.
Are there any other significant policy drivers (such as the Governments response to Lord Laming's review of Safeguarding) that are likely to inform the implementation of this priority.	The new framework of Ofsted inspections for schools to be in place in September this year has an element of how safe pupils feel at school – which is a driver for schools to continue to build upon anti-bullying policy which will be further supported by the Plymouth's joint 'Tackling Bullying' strategy.

<b>Staying Safe</b>	
<b>Priority : 4 .Continue to Strengthen Safeguarding Services</b>	
<b>Champion</b> <b>Mairead MacNeil</b>	<b>Priority Coordinator: Maureen Grimley</b>
Please comment on key achievements and outstanding actions from the past year?	<p>The timing of Initial and Core Assessments has continued on target, with quality being assured by Team Manager and Service Manager audit. This has recently been verified by external consultants.</p> <p>Multi agency safeguarding review completed and presented to the Plymouth Safeguarding Children Board, Action plan to be presented in September 2009 with the aim of improving multi agency working for children with a child protection plan, thus ensuring their safety is achieved at the earliest opportunity.</p> <p>Hidden Harm implementation plan agreed and in process of being implemented.</p> <p>Family Support services involved with all children who are subject to a child protection plan, thus focussing support on the most vulnerable children and young people.</p> <p>Reviews of children with a child protection plan are always completed on time, and reviews of children in care are nearly always completed on time. The participation of children within their reviews is excellent.</p> <p>The stability of placements, i.e. the number of moves a child in care has, is a key area for improvement and a process of "stability meetings" which identify issues leading to possible placement moves, has now been</p>

<p>The needs analysis refresh highlights some of the key performance issues within this area. What do you think are the factors behind success / failure in outcomes? Does the data prompt any actions for next year?</p>	<p>implemented.</p> <p>CWDC Induction programme has raised awareness for professionals regarding information sharing. There is a comprehensive programme of training in safeguarding delivered by the Plymouth Safeguarding Children Board. For the coming year, the rise in referral rates, and a rise in the number of children with a child protection plan and children in care, as a result of the publicity around the Baby P case in Haringey, continues to be a challenge for safeguarding. The Southwark judgement ( young people presenting as homeless) has also impacted in that there are now 70 more young people receiving a service from Children's social care than previously.</p>
<p>The needs analysis also highlights some of the key issues that have emerged from consultation with children and young people/parents and carers. Please respond to that feedback and add back messages that you've had from</p>	<p>Feedback from foster carers is routinely sought and is being fed into the "Payment for skills" work programme, which seeks to reward foster carers for enhanced skills to care for the children and young people of Plymouth within the city.</p> <p>The Listen and Care Council has been involved in the writing of The Pledge for children in care.</p> <p>Young people regularly take part in the interview process for workers within the social care workforce.</p> <p>Children in care have the opportunity to complete the Have Your Say document for the review of their care plan; they also have the services of independent advocacy to enable their voice to be heard within the planning process.</p> <p>The young people identified the misuse of drugs and alcohol as an issue for Plymouth, social workers have now been trained in the use of the DUST tool to identify difficulties and plan accordingly.</p> <p>Family Support services seek feedback when their intervention with a family ceases, their views are taken into account for service improvement.</p>



consultation during the year.	
Please comment on any inspection outcomes or recommendations from the last year.	Plymouth Fostering Agency, Adoption Agency and Private fostering arrangements were judged as Good or Outstanding by Ofsted.
What actions taken this year will demonstrate how this priority is address Reducing Child Poverty	The work to improve safeguarding focuses
What actions taken this year will demonstrate how this priority to reflect Narrowing the Gap	
Are there any other significant policy drivers (such as the Governments response to Lord Laming's review of Safeguarding)	The Government's response to the Lord Laming report will drive work forward over the next year. The Review of Working Together to Safeguard Children is due in December 2009. Safeguarding Disabled Children will drive safeguarding work in the Integrated service for children with disability.

that are likely to inform the implementation of this priority.	
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**Staying Safe**

**Priority : 5. Reduce Children and Young People’s Accidents and Injuries**

**Champion : Dave Sumner**      **Priority Coordinator: Graham Palmer**

Please comment on key achievements and outstanding actions from the past year?	<p>The Working Group has met consistently throughout the year and planned and organised a “Scoping Day” with key stakeholders.</p> <p>From this “Scoping Day” the Working Group have produced a detailed Needs Analysis, which concluded that here were four specific areas that required work and identified key neighbourhoods that needed to be prioritised for interventions with children and young people.</p> <p>The Working Group has worked with partners to secure a Homes Safety Scheme for Plymouth and training is underway to provide risk assessments alongside Fire and Rescue colleagues.</p> <p>We have a number of Home Safety Packs (from ROSPA), that will be fitted into the target neighbourhoods.</p> <p>The working group advertised and supported the Child Safety Week recently and the Champion figured in the local press, endorsing the work in the city.</p> <p>We are now concentrating on a Marketing Strategy.</p>
The needs analysis refresh highlights some of the key performance issues within this area. What do you think are the factors behind success / failure in outcomes? Does the data prompt any actions for next year?	<p>The Working Group has produced a comprehensive Needs Analysis.</p> <p>Key areas of development include the Home Safety Scheme and work on Marketing.</p> <p>We are confident of making an impact with the Home Safety Scheme, having arranged the training with the Fire and Rescue Service and ROSPA.</p> <p>Storage, distribution and fitting of the Home Safety packs have also been arranged.</p>
The needs analysis also highlights some of the key issues that have emerged from	<p>The Scoping Day included representatives from Children and Young People and whilst reporting to Scrutiny (Plymouth City Council), the views of Children and young people have been considered and included in our planning.</p>

<p>consultation with children and young people/parents and carers. Please respond to that feedback and add back messages that you've had from consultation during the year.</p>	<p>Recent consultation with Children and Young People has brought focus to the following ideas.</p> <ul style="list-style-type: none"> <li>• <i>More supervision in and out of schools</i></li> <li>• <i>Schools should learn life skills and have group sessions to talk.</i></li> <li>• <i>Improve safety of facilities, and do regular checks on equipment.</i></li> <li>• <i>Understand what is happening and how people are getting injured.</i></li> <li>• <i>More to be done to stop people acting in the wrong way.</i></li> <li>• <i>Keep children occupied, by providing safer places to go.</i></li> <li>• <i>Safer environments, youth cafes.</i></li> <li>• <i>Need to take responsibility for themselves.</i></li> <li>• <i>More signs to warn of dangers.</i></li> <li>• <i>Areas marked out for sports and teams.</i></li> <li>• <i>Advertisements for road safety and other general safety advice.</i></li> <li>• <i>Important as no one needs to get hurt.</i></li> <li>• <i>Not enough money invested.</i></li> </ul> <p>There are currently a number of important initiatives in the city. The PCC Road Safety Team run a range of activities in schools, as do both the Police and Fire and Rescue Service. Recently Plymouth hosted 'Learn to Live,' a conference on road safety/driving for young people in the city. This is a hard hitting initiative that highlights the dangers to young road users.</p>
<p>Please comment on any inspection outcomes or recommendations from the last year.</p>	<p>The Working Group took over from the Sub Group of the Plymouth Safeguarding Children Board. There were no specific recommendations, but there has been a great deal of multi agency co-operation in this work.</p>
<p>What actions taken this year will demonstrate how this priority is address Reducing Child Poverty</p>	<p>The Needs Analysis concentrated on specific areas of deprivation in the city. We used the experience of group members, including Children's Centres, Community Policing, Fire and Rescue Service and the Road Safety Team to ensure we addressed this area. The target areas are also the areas of greatest deprivation in Plymouth.</p>
<p>What actions taken this year will demonstrate how this priority to reflect</p>	<p>We intend to demonstrate both practical steps, in terms of home safety and engaging a social marketing perspective, to ensure that we are using a range of appropriate methods to engage with neighbourhoods and identified groups to Narrow the Gap.</p>

Narrowing the Gap	
Are there any other significant policy drivers (such as the Government's response to Lord Laming's review of Safeguarding) that are likely to inform the implementation of this priority.	Hear by Right – listening to young people in order to influence decision making.

<b>Enjoy and Achieve</b>	
<b>Priority : 6 . Enable Children and Young People to Have Fun</b>	
<b>Champion William Woyka</b>	<b>Priority Coordinator: Karl Sweeney</b>
Please comment on key achievements and outstanding actions from the past year?	<p>Over the last year a core group of dedicated stakeholders has been formed with engagement from Sport, Culture and Leisure as well as representatives of the Arts Intelligence Council, Schools Sports Coordinators, Youth Service and the Voluntary and Community Sector. This is enabling a more holistic integrated Trust focused development of actions to achieve our aims.</p> <p>A number of stakeholder meetings have informed a 'Situation Analysis' and 'SWOT Analysis', which were sent out for consultation via the core Fun group. This helped us to identify the activities that are available and what the demand is like. Furthermore it highlighted common barriers to access which cross cut different types of activities. This analysis has been used to develop our 'Framework for Fun' document. This Framework will inform and shape future actions and help raise the profile of this priority as we have highlighted its contribution to the ECM Outcomes and contribution towards numerous other Plymouth CYPP Priorities.</p> <p>CYP are more involved and aware of Arts and culture events and award ceremonies are being harmonised and we are able to provide better examples for promoting the positive image of</p>

	CYP in the city.
The needs analysis refresh highlights some of the key performance issues within this area. What do you think are the factors behind success / failure in outcomes? Does the data prompt any actions for next year?	<p>A key factor behind success is regular and consistent engagement from our stakeholders, which the core group are well aware of and over this last year we have formed a committed group. Some of our key performance indicators are not only influenced by work towards Priority 6. Having identified this we need to establish more collaboration with other priorities to have a greater impact on outcomes.</p> <p>We have concerns about some the representativeness of some of our baseline data and we look ahead to more representative sample in Tellus 4. We have also designed questions to go into the Children's Fund Consultation which will further contribute towards monitoring performance in this priority.</p>
The needs analysis also highlights some of the key issues that have emerged from consultation with children and young people/parents and carers. Please respond to that feedback and add back messages that you've had from consultation during the year.	<p>Consultation with CYP has helped us to understand what it feels like to them to have fun and common themes emerged i.e. I feel happy and feel like smiling, which has informed our Framework for Fun.</p> <p>CYP felt that there were still gaps in provision and date, times and cost were cited as common barriers to participation. These are all areas we have highlighted in the Framework for Fun and we have identified that a key stakeholder i.e. Sport Culture and Leisure services have engaged with CYP when planning new facilities to bring together supply and demand.</p>
Please comment on any inspection outcomes or recommendations from the last year.	<p>Priority 6 has identified certain groups of CYP which will require additional support to enable them to have fun – these include looked after children which were cited in last year Annual Performance Assessments (APA) as being encouraged and given practical support to access leisure and cultural facilities – this work will be further developed – Plymcard giving free access for CYP in care.</p> <p>The APA also cited CYP with learning difficulties and/or disabilities (LDD) as wanting more opportunities for inclusive leisure and play. The Framework for Fun document has outlined the need for extra support for CYP with disabilities and this work will be further developed through our implementation plan.</p>
What actions taken this year will demonstrate how this priority is address Reducing	PSA Delivery Agreement 9 shows measures used for material deprivation, which we will be tackling by targeting children already affected by deprivation and focusing work on enabling them to have fun. Our parameters for fun outlined in the Framework for Fun document will

Child Poverty	<p>incorporate sports such as swimming and hobby and leisure activities both formal and informal.</p> <p>Our Framework for Fun and the upcoming joint stakeholder day (Improving the State of our Minds Strategy and Framework for Fun) in September will help to raise the profile of this priority across the city.</p> <p>Implicit throughout our work and the framework document is how having fun and enjoying life seriously impacts on each of the ECM outcomes.</p>
What actions taken this year will demonstrate how this priority to reflect Narrowing the Gap	<p>Many CYP in care will now, using a leisure card scheme, be able to access PCC leisure facilities for free – Narrowing the Gap in wellbeing and health potentially.</p> <p>The Framework for Fun document identifies key groups who may experience multiple barriers to participation, most of whom are included in the Narrowing the Gap programme – through the development of our implementation plans we will work towards narrowing the gap for these CYP.</p> <p>Extended Schools Economic Disadvantage Subsidy  “Aims to ensure that children and young people disadvantaged by economic circumstances, and children in care (the “target group”) are financially supported to take part in extended schools activities.”  Therefore narrowing the Gap in attainment and wellbeing. This subsidy is set to increase next year.</p>
Are there any other significant policy drivers (such as the Governments response to Lord Laming's review of Safeguarding) that are likely to inform the implementation of this priority.	<p>The Ofsted inspection framework for maintained schools in England included judgements on the extent to which pupils <i>enjoy</i> their learning.</p> <p>The recent White Paper – ‘Your child, your schools, our future: building a 21st century schools system’ – includes a pupil guarantee to ensure pupils have access to high quality cultural activities in and out –of-school – with an aim to reaching 5 hours a week as well as the 5 hour offer of high quality sport and PE, both of which we have identified as a strategic outcomes for this priority.  <b>Strategic outcome</b> (from Framework for Fun)  ‘All children and young people’s experience of learning is enriched through access to educational leisure time activities’</p>

**Priority : 7. Improve Attainment for Children and Young People, in Particular Raise Achievement, Including Mathematics and English at all Stages**

**Champion : Colin Moore**

**Priority Coordinator: John Searson**

Please comment on key achievements and outstanding actions from the past year?

**Connecting**

- The use of Merlin is beginning to make a real difference to the ease and effectiveness of electronic communication and to support partnership activity. Various web portal communities have developed that now have added value and impact through the benefits of a customised web presence.
- National recognition has been achieved for our work within South West Grid for Learning on e-safety with regional conferences being particularly successful.
- Drake's Island Virtual World (see case study). Students at SDCC exploring learning through a virtual world within Teen Second Life, creative partnership between Plymouth Lifelong Learning Team, SDCC and Two Four Productions. This virtual world is like those used by young people in leisure time and has proved to make learning fun and have a significant impact on standards. A powerful tool to raise boys' enthusiasm for creative writing too! Boys in the pilot group progressed twice as fast in their literacy work. Won a regional and international Media Innovation Award this year and celebrated at the United Kingdom Literacy Association national conference in July 2009. Interest from a number of countries wanting to get involved.

**Collaboration**

- The EMA Team worked closely with a city primary school with a high percentage of pupils with English as an Additional Language to develop an innovative community languages project involving pupils, parents and school staff. Over the course of a term the Headteacher worked with EAL pupils and their families to learn more about the culture of the city, supported by the Local Records Office, and to share together aspects of their own culture and heritage. The school also worked with the city library exploring stories focusing on family life, and families worked with the school to translate the story in a celebration 'Night in the Library' where children shared their work and enjoyed a multi-lingual bear hunt. The project was highlighted at United Kingdom Literacy Association conference in London this summer and by CILT, the National Centre for Languages as being excellent practice.
- Stories in the city linked community and commercial groups with primary schools in a city-wide event to raise awareness of the importance of reading. Over 40 venues hosted story times, free of charge for pupils aged 5-11.
- Joint initiative with the library produced an anthology of children and young people writing

over 550 entries with approximately 100 published in the anthology.

- Working with the Museum Service to develop the History Centre with a view to accessibility and stimulation for children and young people. Similar collaboration with the Minster Church of St Andrew's, City Centre.
- British Armed Forces Week (see case study) saw many children and young people visiting the Dockyard heritage site to have fun exploring the exhibits, having 'hands on' sessions with the Museum in Transit service and sharing their thoughts with Veterans and serving members of the Armed Forces. Visits took place twice daily to ships and submarines and the Citadel and HMS Raleigh. The weekend saw children and young people enjoying entertaining the public in the city centre and on the Hoe with music, dance and competitions, such as the junior field gun run and dance groups. Catering in the veterans Centre was provided by one of our secondary schools. A large display of pupils work linked to peacekeeping across the world was a focal point of the centre, as will a film made by pupils that was shown on the BBC big screen. A choir supported the church service and young musicians performed alongside professional musicians at the evening concert in the Guildhall. There were even children on board frigates in Plymouth Sound for the sail past and gun salute to the Lord Mayor on the Sunday. The Lifelong Learning team played a central role in co-ordinating the children's contribution to the event.
- The Early Years Strategic Partnership was created and has ownership of the Early Outcomes Duty. An action plan is in place and partnership activity is strengthening significantly.

### **Challenge**

- The Virtual School for Children In care has been established and the Executive Headteacher has made a significant contribution to the targeting of extra support. Data analysis has improved and the range of enrichment and curriculum support has broadened. Results at KS2 are very positive when compared to the city's profile this year and the 2008 national average.
- The Pathways to Success programme enables school partnerships to work collaboratively to support schools deemed 'satisfactory' by Ofsted to become 'good' by improving leadership and management. In the pilot five 'outstanding' schools were partnered with schools aspiring to be good. The programme's innovative approach is based on nationally accepted good practice. Early monitoring indicates that the programme is encouraging the development of leadership beyond the senior leadership level.
- The Challenge, Support, Standards and Intervention (CSSI) Team supports, challenges and monitors schools who are categorised by Ofsted or the local authority. One of the team acts as project manager and is responsible for a local authority plan to move the school out of category – usually in one year. This is monitored at six-weekly School Review Group (SRG)



meetings, where the head and chair of governors have to report progress to the team. Any consultants/advisers involved in the support package also attend to feed in their views. This ensures that schools implement recommendations. The support and challenge is 'front-loaded' and tapers off as the school grows stronger, with an exit strategy agreed. The CSSI team continues to monitor schools that have recovered, via performance data reviews and regular communication with the school's SIP. The CSSI team also manages the SIP programme for the local authority schools.

- The number of permanent exclusions in the City continues to fall and there have been no permanent exclusions from primary schools or special schools or of Looked After Children with statements of special educational need in the 2008-09 academic year.
- Overall absence of pupils from school continues to reduce in both primary and secondary sectors and targeted support for primary schools with above threshold levels of persistent absentee pupils has contributed to a significant reduction in the number of these schools

#### **Consistency**

- Targeted project (using our own early years RAG process) for 5 Private Voluntary and Independent settings on "sparkling story times" with Schools Library Service is good evidence of capacity building within early years.
- Improvements in LA tracking of lowest 20% achievers in early years. Targeted support is now in-line with this analysis. e.g PSED project with 4 schools, Language for Communication and Thinking (LCT) project and focussed Spring term training for these schools. The LA met its target for NI 72 this year.
- The newly formed SEN/LDD Strategic Forum has been established to drive further improvement and has the involvement of health, connexions and the LSC. The Inclusion Development programme has reached nearly 50% of schools and has been very well received with evaluations being extremely positive.

#### **Change**

- The 14-19 partnership continues from strength to strength. Our applications to deliver the diplomas in Retail and Business, Sport and Active Leisure as well as Travel and Tourism were successful and were awarded a grade 1 and the best feedback ever.
- The Ofsted inspection survey of 14-19 confirmed the view that LA leadership of this agenda is good and that good progress has been made in the 12 months since the last inspection.
- Our Strategy for Change team hit all the deadlines and Plymouth remains one of the top new

	<p>LAs to be taken into the BSF programme in the autumn ahead of the original date.</p> <p><b>Outstanding actions:</b></p> <ul style="list-style-type: none"> <li>• Delivering the internet to the most deprived students at home is still progressing and procurement through BECTA is underway.</li> <li>• The work with supplementary schools is still to start and has been delayed due to other pressures for example delivering one to one tuition which became an urgent delivery priority unexpectedly.</li> </ul>
<p>The needs analysis refresh highlights some of the key performance issues within this area. What do you think are the factors behind success / failure in outcomes? Does the data prompt any actions for next year?</p>	<ul style="list-style-type: none"> <li>• The needs analysis from Ofsted has highlighted some potential areas of focus but there are few serious concerns that we were not aware of. It appears that the vast majority of indicators are quite positive – indeed there is much to celebrate!</li> <li>• Validated outcomes at KS2 in 2008 are ranked first or second when compared to statistical neighbours.</li> <li>• The data around PRU's is more concerning and one that we are already tackling with some urgency. The Alternative Complementary Education strategy will be launched in the autumn 2009 and will provide leadership and focus to ensure service continued improvement. The Ofsted judgments of our pupil referral units as satisfactory confirms the need for a review of the services for pupils out of school and the development of the Alternative Complementary Education Strategy will help to address the issues.</li> <li>• The amber RAG for early years outcomes (NI72) will cease to become a concern given that outcomes in 2009 will represent big improvements on last years results. A 6% improvement in NI72 will probably place us in-line with the National Average and therefore green and is in excess of our target!</li> <li>• The data around BME groups is on the surface a concern but numbers are small for these groups. Given that we have now restructured the Ethnic Minority Achievement Service to make them more fit for purpose and able to cater for the larger numbers of young people in Plymouth we are in a better position to deal with the need. The data used to determine the RAG is based upon small cohorts, however we will carry out a full analysis of the 2009 performance data in order to target resources effectively.</li> <li>• The data concerning Children in Care again refers to old cohorts and the 2009 KS2 data will be much more positive.</li> </ul>
<p>The needs analysis also highlights some of the key issues that have emerged from consultation with children and young</p>	<ul style="list-style-type: none"> <li>• CYP are clear that they want lessons that are more active and inter-related. We are already working with schools on restructuring the curriculum to place greater emphasis on active learning that has a strong outdoor element. The primary Curriculum Innovation Group meets regularly to support schools in achieving this. A number of Secondary schools have implemented an Integrated Curriculum at KS3. This is theme-</li> </ul>

<p>people/parents and carers. Please respond to that feedback and add back messages that you've had from consultation during the year.</p>	<p>centred and involves interactive team-teaching, activities-based learning, and cross-curricular links. All secondary schools are moving towards a skills-based curriculum, as opposed to a focus on range and content. Study Plus programmes in English and Maths are in place in 5 Secondary Schools and have provided a successful source of motivation and innovative teaching and learning scenarios. A Literacy Plus initiative at Post 16 has energised and motivated young people to develop their literacy skills.</p> <ul style="list-style-type: none"> <li>• <i>'More discussions than writing in lessons'</i>. We are working with schools on the importance of talk – and are delivering programmes particularly in early years e.g. Every Child a talker. Opportunities to develop more discussion and public speaking will be built into our refresh.</li> <li>• ECAW pilot authority – promotes talk for writing and this in itself is in rollout across the city.</li> <li>• Plymouth Drama Steering Group are devising a suite of training offers to schools to support active learning across the phases that includes a comprehensive conference and a range of exciting opportunities for children and young people that are linked across the curriculum.</li> <li>• <i>'More physical subjects'</i>. We are working with School Sports partnerships to ensure that every child gets access to 5 hours of PE and sport each week in and after school. Outdoor education is a priority and we are developing the concept of a city farm and country park, with colleagues in the capital planning team, which will give an excellent venue for this type of learning.</li> <li>• <i>'Combine subjects e.g. use food in maths'</i>. Cross curricular learning is an important part of our agenda too. We are working with schools to achieve this.</li> <li>• <i>'More help for people with learning difficulties. Help if pupils are struggling with lessons. After school tutoring away from school e.g. youth cafes '</i>. We are introducing one to one tuition that will help with this but we are also supporting schools in improving the support they give to pupils with special needs. We are doing this through training and advice.</li> <li>• Our discussions with CYP confirm the views expressed here. Students want more engaging and exciting lessons where they get involved and can learn in different places. Our Building Schools of the Future programme will deliver new learning environments and it is one of the city's top 14 priorities to achieve.</li> </ul>
<p>Please comment on any</p>	<ul style="list-style-type: none"> <li>• Given that we have regular and robust in-year discussions about our educational</li> </ul>

<p>inspection outcomes or recommendations from the last year.</p>	<p>performance with the DCSF, GOSW and National Strategies as well as with Councillors we are able to adapt and amend our interventions and strategies as the year develops.</p> <ul style="list-style-type: none"> <li>• We have been challenged to work more creatively within mathematics and will be addressing this in the autumn with a focus on maths games and puzzles as well as maths in art. This should be appreciated given the feedback from students.</li> <li>• Given our national success with regard to 14-19 there are new challenges to tackle in the coming year. These include the Machinery Of Government changes that take effect in April 2010 as well as the need to champion and secure larger numbers of apprenticeships within the city. Increasing the number and quality of applied learning environments are an important priority too. We will open Healthtec during the next year as an example of this.</li> <li>• Improving outcomes post-16 is a high priority, especially the % of Young People who achieve the L3 threshold by age 19. Working with our schools and FE colleges, we have put in place a wide range of strategies:             <ol style="list-style-type: none"> <li>1. We have appointed a full time permanent 14-19 adviser with responsibility for post-16;</li> <li>2. We have just carried out an extensive student voice exercise in order to establish their views on the quality of Teaching and Learning;</li> <li>3. We are introducing a leadership course for existing and/or aspiring heads of post-16;</li> <li>4. We have set up 8 city subject networks for the most underachieving A level subjects;</li> <li>5. We are piloting a post-16 literacy intervention project;</li> <li>6. We are working with the University of Plymouth to run conferences on study skills for post-16 learners;</li> <li>7. We are expanding the range of qualifications available post-16 (IB, new TVC courses, Diplomas etc);</li> <li>8. We are involved in the pilot of the Framework for Excellence with eight of our sixth forms;</li> <li>9. Our adviser is supporting the head of sixth in all schools were the sixth form was judged to be either satisfactory or one grade lower than the whole school grade.</li> </ol> </li> <li>• Getting consistent and high quality E-safety practice within early years settings especially will be an important priority.</li> <li>• Every Child a Talker will be a new programme to be targeted on 20 early years settings and PSED/SEAD will continue to be delivered at a universal and a targeted level.</li> <li>• Talk for writing training being rolled out to all primary schools.</li> <li>• With partners we will be delivering innovative practice to better support pupils with speech, language and communication needs (Bercow pathfinder).</li> </ul>
<p>What actions taken this year will demonstrate how this</p>	<p>Increasing the attainment of children from the poorest families is one of our top priorities and has driven our interventions for several years. Educational success leads to higher paid jobs and lifts</p>

<p>priority is address Reducing Child Poverty</p>	<p>families out of poverty. To achieve this we work with schools to set aspirational targets for every pupil. School Improvement Partners work with Headteachers to ensure that every pupil makes good progress. We target spending to those schools with the greatest challenges and the Excellence Cluster provides additional services, advice and support to maximise attainment for schools serving areas of deprivation. The majority of our training and project packages will be prioritised to support schools based on the prior attainment and deprivation levels of their students. We devolve funding to schools with the aim to support greater engagement within schools that cater for the most deprived students. Supporting family learning in our most deprived neighbourhoods will complement our school based interventions. Increasing the number of pupils receiving PfS study support will boost the attainment of pupils from poorer backgrounds as we look to engage these schools more heavily into the programme. The out of school hours learning subsidy will be used to provide positive activities for young people in the poorest communities to lift aspirations and boost self-esteem.</p>
<p>What actions taken this year will demonstrate how this priority to reflect Narrowing the Gap</p>	<p>We have strong evidence to support the view that our current proposals are making a big difference. We must continue to deliver and target our programmes and funding towards strengthening the improvements that have already been made. Tackling underperformance within ethnic minority groups is an important area where we can target support and advice. We will focus support on those schools and settings that have the greatest need to deliver improved outcomes, through bespoke support packages aimed at developing sustainable capacity. We will also offer a core package of funded central training for teachers, aimed at mainstreaming provision for EAL pupils, and train EMA Lead Teachers in each school. These Lead Teachers will be supported through funded local support groups.</p> <p>The majority of our plans will help to further narrow the achievement gaps in Plymouth. One to one tuition is a new intervention that will add more capacity and focus to allow schools to raise the attainments and improve the progress made by underachieving pupils. Closer partnership working with the library and museum service and other partners will give a greater impact across the city. Leading the SW ISP Hub also strengthens regional collaboration focused on raising standards.</p>
<p>Are there any other significant policy drivers (such as the Governments response to Lord Laming's review of Safeguarding) that are likely to inform the implementation of this priority.</p>	<p>The 14-19 reform agenda as well as the 21<sup>st</sup> century schools white paper will make a big impact on the way that we work with schools and build capacity for school improvement. Funding for school improvement is likely to change significantly by 2011. More local needs will be identified that require tailored packages of support to be created. The localities agenda will also require a different type of school improvement engagement to deal with community wide needs.</p>

<b>Make a Positive Contribution</b>	
<b>Priority : 8 Reduce Risk-Taking Behaviours such as Substance Misuse, Unprotected Sex and Criminal Activities</b>	
<b>Champion : Verity Jones</b>	<b>Priority Coordinator: Dave Schwartz</b>
<p>Please comment on key achievements and outstanding actions from the past year?</p>	<ul style="list-style-type: none"> <li>• We have reduced the number of first time entrants into the criminal justice system over the last year from 304 to 252.</li> <li>• Young offenders engagement in suitable education, employment or training shows year on year improvement of 8.8%</li> <li>• Young offenders access to suitable accommodation reaches 96.8%.</li> <li>• Planned discharges from young people's substance misuse treatment increase from 29% in 2006/07 to 81% (upper quartile) in 2008/09 –this is a key outcome indicator for treatment and this reflects a major improvement in performance.</li> <li>• Implementation of a city wide challenge and support team, 'Streetwise', focusing on anti-social 'hot-spots'. Evidence is demonstrating decreases in crime and anti-social behaviour where the service has been active.</li> <li>• Plymouth attracts £35,000 from the Department of Health to support innovative alcohol work delivered through locality networks.</li> <li>• Plymouth attracts £350,000 into city as part of the Youth Crime Action Plan – including funds that support parent and family projects impacting on crime, anti-social behaviour and substance misuse issues.</li> <li>• Plymouth attracts £200,000 to support capital project to support Hidden Harm agenda</li> <li>• Hidden Harm strategy and implementation plan in place.</li> <li>• New Sexual Health Strategy in place for city that will reduce teenage conception rates, improve the sexual health of young people and support teenage parents.</li> <li>• Significant increase in activity to reduce teenage conception rates in City including</li> </ul>

	<p>considerable increase in young people accessing contraception services.</p> <ul style="list-style-type: none"> <li>• We have significantly improved intelligence and analysis supporting our most coherent understanding of need particularly as it relates to prevention and early intervention.</li> </ul>
<p>The needs analysis refresh highlights some of the key performance issues within this area. What do you think are the factors behind success / failure in outcomes? Does the data prompt any actions for next year?</p>	<ul style="list-style-type: none"> <li>• The Youth Offending Service is improving performance against its key targets and this improvement must be sustained. Additionally we need to ensure accurate and reliable data is available to the partnership to support high quality intelligence for planning and analysis and effective performance management.</li> <li>• Substance misuse performance is good but measure was unreliable. This year this measure is likely to be much more reliable and will provide a better basis for evaluating performance. Key areas for focus are: developing locality capacity to work with substance misuse including awareness raising and local campaigns to reduce problem alcohol use; building capacity to deliver prevention and early intervention; effective use of CAF; improving access to specialist treatment.</li> <li>• Teenage conception rates have dropped by 9% since 1998 baseline. However we have not been able to sustain a clear downward trend in line with hitting out LAA target. Along with the increase in activity which we have achieved over the last year key actions in the coming year need to focus on; improving performance management of the partnership; effective use of targeted support; effective use of CAF; improved access to and quality of sexual health and relationship information and advice; improved access to contraception; supporting parents to talk to children.</li> <li>• In line with supporting the Child Poverty agenda we should seek to ensure that benefit maximisation is considered where appropriate within all actions that link to delivery of provision.</li> <li>• We have not been successful in establishing a locally delivered training programme supporting Motivational Interviewing and Solution Focused Brief Interventions – these should be core competencies for staff working risk taking behaviour. This year should achieve the aim of having such a programme in place.</li> </ul>
<p>The needs analysis also highlights some of the key issues that have emerged from consultation with children and young</p>	<ul style="list-style-type: none"> <li>• Young people want more and better information on sex and relationship issues. This is reflected through numerous consultations and surveys. SRE is due to become compulsory in schools from September 2010. It is important that sex and relationship education, information and advice are available through school the youth service and a range of other young people focused services.</li> </ul>

<p>people/parents and carers. Please respond to that feedback and add back messages that you've had from consultation during the year.</p>	<p>Key messages from the consultation with young people in support of our sexual health needs analysis:</p> <ul style="list-style-type: none"> <li>▪ How to get parents to engage with their children around sex and relationships.</li> <li>▪ The transition between primary and secondary school is important in relation to SRE.</li> <li>▪ Young people want to have (age appropriate) SRE before going secondary school.</li> <li>▪ Language is not helpful in schools – SRE has different content according to age.</li> </ul> <ul style="list-style-type: none"> <li>• Young people clearly want to feel safe. They want to participate in and influence local responses to issues in their communities including risk taking behaviour. Participation initiatives and consultative processes must be in place that ensure young people's views help make services relevant and effective, that they can routinely feedback and be party to decisions that affect their communities. Ensuring engagement in these processes of some of our more vulnerable young people who themselves are involved in risk taking behaviour will require strong commitment.</li> </ul>
<p>Please comment on any inspection outcomes or recommendations from the last year.</p>	<ul style="list-style-type: none"> <li>• Plymouth Young People's Service (Substance Misuse) is highlighted in the National Treatment Agency Annual Report for 2008.</li> <li>• Hidden Harm work being cited as an example of best practice by the National Treatment Agency.</li> </ul>
<p>Overarching Comments</p>	<p>In developing this priority significant amount evidence was used that established a model supporting a correlation between multiple vulnerability and risk taking behaviour.</p> <p>Key in this evidence was Plymouth Public Health Development Unit's 'Atlas of Child Health and its Determinants'. This work clearly demonstrated high correlation between substance misuse, teenage conception and crime with our most deprived neighbourhoods and localities.</p> <p>The impact of delivering the risk taking behaviour implementation plan will be to narrow the gap, reduce child poverty and improve safeguarding. These issues are at the heart of what would reflect success with this priority.</p>
<p>What actions taken this year will demonstrate how this</p>	<p>Actions improving outcomes for young people and families include supporting young people who are NEET and families who are disadvantaged. Actions need to be geared to ensure that as part</p>



priority is address Reducing Child Poverty	of the work undertaken maximising benefit take up is included.
What actions taken this year will demonstrate how this priority to reflect Narrowing the Gap	As this priority is focused on reducing risk taking behaviour much of the impact will be focused on vulnerable young people and families - so narrowing the gap. Therefore all actions impact on narrowing the gap.
Are there any other significant policy drivers (such as the Governments response to Lord Laming's review of Safeguarding) that are likely to inform the implementation of this priority.	<ul style="list-style-type: none"> <li>• <u>PSA Delivery Agreement 14</u>: Increase the number of children and young people on the path to success</li> <li>• Youth Crime Action Plan. Home Office. 2008</li> <li>• Youth Alcohol Action Plan. DCSF. Home Office. DoH. 2008</li> <li>• Drugs; protecting families and communities – The 2008 drug strategy (2008-2018)</li> <li>• Healthy Lives, Brighter Futures (DoH, 2009):</li> <li>• Progress and priorities – working together for high quality sexual health: Review of the National Strategy for Sexual Health and HIV (DoH, 2008)</li> <li>• Teenage Pregnancy: Accelerating the Strategy to 2010 (Department for Children, Schools and Families, 2006):</li> <li>• Teenage parents: Who Cares? A guide to commissioning and delivering maternity services for young parents (Department for Children, Schools and Families &amp; Royal College of Midwives, 2008):</li> <li>• Reaching Out: Think families. Social Exclusion task force – Cabinet Office. 2007</li> <li>• Protection of Children in England a Progress Report. Lord Laming. 2009</li> </ul>

<b>Make a Positive Contribution</b>	
<b>Priority : 9 . Improve Opportunities for Young People to Make a Positive Contribution</b>	
<b>Champion : Maggie Carter</b>	<b>Priority Coordinator: Hannah Jordon</b>
Please comment on key achievements and outstanding actions from the past year?	<ul style="list-style-type: none"> <li>• Embedding of children and young people participation in the work of the Children's Trust at all levels. <ul style="list-style-type: none"> <li>- Shadow Children's Trust set-up</li> <li>- Involvement of children and young people on Overview and Scrutiny Panel</li> <li>- Young people on appointment panels for posts at all levels.</li> </ul> </li> </ul>

	<ul style="list-style-type: none"> <li>- City Youth Council, Youth Cabinet and Youth Parliament in place.</li> <li>• Children and young people voice heard through participation activity.             <ul style="list-style-type: none"> <li>- Production of DVDs (Behind the Smile, mental health; Count Me In, disability; someone Who Listens, children's workforce)</li> <li>- Consultation events</li> <li>- Presentation by children and young people at conferences locally an nationally e.g. Listen and Care Council</li> <li>- Children in care at conference in London.</li> </ul> </li> <li>• All schools have school councils who influence the way school are run.</li> <li>• Participation teams from Routeways and the Youth Service train and support children and young people to enable meaningful participation through a range of mediums.</li> <li>• Children and young people have been involved in design panels for new schools, city Centre Area Action Plan etc.</li> <li>• Training for volunteers rolled out to young people in conjunction with Princes Trust.</li> <li>• Specific groups of children and young people e.g. children in care, children with disability are informing service developments in those areas.</li> <li>• Website set up with database of activities for children and young people.</li> <li>• Work to promote positive image of young people – high profile events such as Youth Arts Festival, Schools Out event, Relay for Life Walk.</li> </ul> <p><u>Actions Outstanding:</u></p> <ul style="list-style-type: none"> <li>• Work on implementation of Hear by Right Standards.</li> <li>• Adaptation of individual service planning and review processes to maximise child friendliness.</li> </ul>
<p>The needs analysis refresh highlights some of the key performance issues within this area What do you think are the factors behind success / failure in outcomes? Does the data prompt any actions for next year?</p>	<ul style="list-style-type: none"> <li>• Participation in care planning and statement reviews:             <ul style="list-style-type: none"> <li>- Need to monitor and potentially broaden e.g. to include CAF participation.</li> </ul> </li> <li>• N114 – Rate of permanent exclusions is in upper middle quartile nationally.</li> <li>• Tellus data – new Tellus Survey data available in January 2010 should provide more accurate picture:             <ul style="list-style-type: none"> <li>- Young people are encouraging schools to take part though events and meetings, and there already exists a predicted significant increase in take-up of Tellus across the city.</li> <li>- Local children and young people consultation conducted by Routeways will give more information.</li> </ul> </li> </ul>
<p>The needs analysis also highlights some of the key issues that have emerged</p>	<ul style="list-style-type: none"> <li>• More schools have signed up to take part in TELLUS 4 next year which is encouraging as it will give us a more accurate picture of life for children and young people in Plymouth. In particular the views and opinions about how involved and listened to they feel will hopefully echo the</li> </ul>

<p>from consultation with children and young people/parents and carers. Please respond to that feedback and add back messages that you've had from consultation during the year.</p>	<p>improved volunteering, participation, Positive Activities, involvement in decision-making and governance opportunities that are now available for young people.</p> <ul style="list-style-type: none"> <li>• Young people are more involved in initiating activities/projects and being involved in having a say, this is evidenced through the increased amount of youth forums, youth groups across VCS, Youth Service and the use of the Youth Opportunity/Capital Funds by young people in the city.</li> <li>• How we communicate what's available for children and young people to take part within will be crucial to their engagement (this includes text, emails, websites, advertising etc).</li> <li>• Mapping the work, partnership working and feeding back to children &amp; young people on actions and outcomes will encourage more involvement in decision-making.</li> <li>• Young people are now more involved in opportunities around governance (i.e. UK Youth Parliament, Youth Cabinet, CYPOSP etc). Local Democracy Week 2009 (13-19<sup>th</sup> October) in Plymouth will host a variety of opportunities including Young People's Question Time, and UK Youth Parliament presentations to full council).</li> </ul>
<p>Please comment on any inspection outcomes or recommendations from the last year.</p>	<p>The evidence of participation of children and young people in all services is recognised through inspection undertaken last year including Fostering and Adoption and the Youth Service.</p>
<p>What actions taken this year will demonstrate how this priority is address Reducing Child Poverty</p>	<ul style="list-style-type: none"> <li>• Ensuring that <b>all</b> children and young people have their voices heard through school councils in all schools and tailoring Tellus and other survey activity to ensure issues of economic well-being are covered.</li> <li>• Targeting the Education Schools Disadvantage Grant programme in areas of social deprivation to ensure access to positive activities.</li> <li>• Targeted youth support in areas of social deprivation.</li> <li>• Children in care access to support funds for extended school activities.</li> </ul>
<p>What actions taken this year will demonstrate how this priority to reflect Narrowing the Gap</p>	<ul style="list-style-type: none"> <li>• Targeting participation support and opportunities to specific vulnerable groups e.g: <ul style="list-style-type: none"> <li>- Children with Disability</li> <li>- Children in Care</li> <li>- Young Carers (The Zone and Youth Service)</li> <li>- BME groups</li> <li>- LGBT (Out Youth group)</li> </ul> </li> </ul> <p>Ideas and new approaches to engaging these groups will come from consultations and forums with target group and established systems such as UK Youth Parliament, TELLUS, City Youth Council, Youth Cabinet and the Shadow CYP Trust.</p>

	<ul style="list-style-type: none"> <li>• Hear By Right, a toolkit to enable and ensure the voices of children &amp; young people are being involving within decision-making will help identify gaps and put forward ideas around different ways of working with children &amp; young people in the city.</li> </ul>
<p>Are there any other significant policy drivers (such as the Governments response to Lord Laming's review of Safeguarding) that are likely to inform the implementation of this priority.</p>	<ul style="list-style-type: none"> <li>• Aiming High for Disabled Children</li> <li>• Care Matters</li> <li>• Lord Laming Review</li> <li>• Aiming High' outlines 6 Promises to young people these are: Empowering young people, Rebalancing public narrative about young people, Increasing the number of places to go, Removing barriers and supporting access, Improving capacity and quality of services and Supporting Youth Workers to do their best for young people. Priority 9 will have an implementation plan that includes training, accessibility, positive recognition of young people in the media, continued support for young people in applying for Youth Opportunity/Capital funding and evaluation by children and young people of services though toolkits such as Hear By Right.</li> </ul>

Achieve Economic Well-Being	
Priority : 10. Raise Young People's Aspirations, with Particular Support for Young People who are Not in Education, Employment or Training	
Champion : Colin Moore	Priority Coordinator: Carole Henwood / Theresa Brooks
<p>Please comment on key achievements and outstanding actions from the past year?</p>	<p>Some of the key achievements from this year are the NEETs and the Aspiration Needs Analysis that are due to be completed shortly.</p> <p>The set up of Summer University 2010</p> <p>The set up of Pathfinder pilot for Key Stage 2 Career Related Learning in Plymouth.</p> <p>Some of the outstanding actions are hosting a stakeholder for Priority 10 to launch the needs analysis and kick start the implementation plan refresh this is planned for October.</p>
<p>The needs analysis refresh highlights some of the key performance issues within this area. What do you think are the factors behind success / failure in outcomes? Does the data prompt any actions for next year?</p>	<p>Some of the key barriers are the economic downturn which is not helping reducing the number of NEETS in the city. However, the intention is to focus on barriers such as these as part of the implementation plan refresh. In the process of being developed currently is a City Wide strategy to tackle NEET levels within the city which will also help to overcome these areas.</p> <p>The Youth Service intervention and project aimed at NEETs and aspiration and self esteem levels in the universal sense have greatly improved by the strong sense of leadership within the Youth Service.</p> <p>Further areas for improvement for this priority which will be addressed in the implementation plan refresh are</p> <ul style="list-style-type: none"> <li>• Early years intervention with both aspiration and NEET and</li> <li>• Stronger links with Higher Education.</li> </ul>
<p>The needs analysis also highlights some of the key issues that have emerged from consultation with children and young people/parents and carers.</p>	<p>Part of the aspiration needs analysis involves working with the shadow trust to establish what their thoughts are around the specific issues concerning low aspiration levels. We hope to conduct this exercise in August/September time.</p> <p>Parents and Carers have provided detailed feedback and input into the Key Stage Two Pilot programme that is due to run in Plymouth.</p>

<p>Please respond to that feedback and add back messages that you've had from consultation during the year.</p>	<p>In response to the consultation with Children and Young People, the learning that Priority 10 will take is that parents/carers and children and young people would like valued and easily accessible services for all. We will also include details of how we intent to ensure that the families are worked with as a whole in our implementation plan refresh.</p>
<p>Please comment on any inspection outcomes or recommendations from the last year.</p>	<p>NEETs continue to be monitored and be affected by the economic down turn. 14-19 inspection identified strong leadership as the positive force within the Children and Young People's Services that was delivering good outcomes.</p> <p>Recent Ofsted inspections in schools have picked up that greater preparation needs to be achieved in achieving economic well being which will be picked up as part of our implementation plan refresh when we look at how to address this in early years and preventative work.</p>
<p>What actions taken this year will demonstrate how this priority is address Reducing Child Poverty</p>	<p>Both of Priority 10's Needs Analysis have uncovered a significant amount of statistical and theoretical evidence to demonstrate that social deprivation is a linked to poor aspiration and Neets. Taking the learning from Narrowing the Gap will be a key work stream in Priority 10 and these issues will be included in the implantation plan refresh. This will also be reinforced by implementing the recommendations from Aiming Higher, working with Connexions on an plan to for the early identification and prevention of young people who may become NEET and the robust work of the 14-19 Strategy to ensure that personalised learning, diploma's and high quality Information, Advice and Guidance is provided to young people from a well motivated and skilled workforce.</p>
<p>What actions taken this year will demonstrate how this priority to reflect Narrowing the Gap</p>	<p>In our implementation plan we will target specific groups for increased support whilst maintaining a universal approach also. From April we will also be in receipt of economic disadvantage subsidy funding for extended schools. Which will also closely link to narrowing the gap.</p> <p>We will examine the barriers to learning and employment in Plymouth such as access to affordable transport, affordable housing and the impact of employment opportunities as a result of the recession.</p>
<p>Are there any other significant policy drivers (such as the Governments response to Lord Laming's review of Safeguarding) that are likely</p>	<p>Some of the key drivers around priority ten are close multi agency working examples of this are our work creating summer university.</p> <p>Greater emphasis on extended schools and building schools for the future and delivering both universal and targeted youth support.</p>

to inform the implementation of this priority.

Service Management :	
Champion : Verity Jones	Priority Coordinator: Richenda Broad/Claire Cordory
<p>What part of the Implementation Plan has been completed in the past year?</p>	<p><b>Common Assessment Framework :</b> Re-launch of the CAF in September 2009 has included specific training for Managers and information sharing training. The work to track the chronology of referrals and CAF's will identify areas of good practice and where additional training and support is required. Locality Managers and locality working will support the embedding of CAF across all services.</p> <p><b>Joint Needs Analysis :</b> The Joint Needs Analysis has formed the foundation for all Strategies and Implementation Plans. It has been revised and continues to form the basis for the planning for children and young people in Plymouth. Plymouth participated in Children's Service Mapping providing access to needs assessment and service information.</p> <p><b>Strategic Commissioning / :</b> The Strategic Commissioning Framework has been agreed by the Trust and will drive the service improvements required to achieve excellence. This will include establishing specifications for all services to ensure efficiency, effectiveness and value for money.</p> <p><b>Workforce Strategy :</b> Plymouth is working to achieve the standards described in One Children's Workforce. The common induction is established as core offer for all staff joining services across the Trust.</p> <p><b>Value for Money – Use of Resources :</b> Financial mapping will be undertaken using the Children's Service Mapping tool to ensure lack of duplication and efficient use of all resources to meet identified needs.</p> <p><b>Building Schools for the Future :</b> Plymouth was judged the highest priority by the DCSF for 3<sup>rd</sup> wave BSF and it is anticipated will have their readiness assessment approved in the autumn 2009. This</p>

	will enable the next phase of BSF to proceed.
<p>What are the performance issues within this area (please specify each performance indicator and how they have performed. Are there outstanding issues to be addressed?</p>	<p><b>Common Assessment Framework :</b> Analysis of CAFs has show considerable variation in who and when CAF's are undertaken. Analysis of CAF's and training in 2009 and 2010 will address this to ensure consistency.  <b>Joint Needs Analysis :</b>  <b>Strategic Commissioning :</b>  <b>Workforce Strategy :</b>  <b>Value for Money – Use of Resources :</b></p>
<p>What issues have emerged from consultation with children and young people/parents and carers?</p>	<p><b>Joint Needs Analysis :</b> <b>The consistent involvement of children and young people in this work enables the</b>  <b>Strategic Commissioning :</b>  <b>Workforce Strategy :</b> Including children and young people's views in training and induction has been a powerful tool. Over the past year the Strategic Workforce team, the Substance Misuse Team and the Disability Service have produced DVD's which provide strong messages about what workforce children and young people wish to see.  <b>Value for Money – Use of Resources :</b></p>
<p>What specific inspection outcomes should be reflected in your refreshed implementation plans.</p>	<p><b>Common Assessment Framework :</b> The importance of CAF to Plymouth's ambition to provide early intervention and prevent crisis is critical and underpins the recommendation from Lord Laming, Your Child, Your School, Our Future and Narrowing the Gap.  <b>Joint Needs Analysis :</b> Narrowing the Gap recommendations on the use of data and the national Children's Plan identify the importance of integrated needs assessment and data sets that are accessible to frontline staff as well as planners.  <b>Strategic Commissioning :</b> Effective commissioning underpins the recommendations from Lord Laming, Your Child, Your School, Our Future and Narrowing the Gap.  <b>Workforce Strategy :</b> All inspections will challenge the Plymouth's implementation of One Children's Workforce, and the recommendations for workforce development and training from Lord Laming's report and Your Child, Your School, Our Future and Narrowing the Gap.  <b>Value for Money – Use of Resources :</b></p>
<p>What actions taken this year will demonstrate how this priority is address Reducing Child Poverty</p>	<p><b>Common Assessment Framework :</b>  <b>Joint Needs Analysis :</b>  <b>Strategic Commissioning :</b> Think Family will provide the policy framework for the specification of all services that provide Think Family services. This will ensure that they reflect Think Family which includes issues of worklessness and employment as well as Value for Money – Use of Resources.</p>



	<b>Workforce Strategy :</b>
What actions taken this year will demonstrate how this priority to reflect Narrowing the Gap	<p><b>Common Assessment Framework :</b></p> <p><b>Joint Needs Analysis :</b> Ensuring that staff have access to integrated data sets that inform their practice and enable them to target effective early intervention</p> <p><b>Strategic Commissioning :</b></p> <p><b>Workforce Strategy :</b> The focus of the Workforce Strategy is that the Trust should have a skilled and appropriately trained workforce is critical to closing the gap across/ embedding good practice. Whole system training should provide the work force with sufficient knowledge about child development to obtain specialist help when needed; lead professionals should understand learning, welfare, health and development issues.</p> <p><b>Value for Money – Use of Resources :</b></p>
Are there any other significant policy drivers (such as the Governments response to Lord Laming's review of Safeguarding) that are likely to inform the implementation of this priority.	<p><b>Common Assessment Framework : Joint Needs Analysis : Strategic Commissioning : Workforce Strategy : Value for Money – Use of Resources :</b> Narrowing the Gap; Think Family; Youth Crime Action Plan; Lord Laming's Review of Safeguarding 2009; One Children's Workforce.</p>

<b>Locality Working</b>	
Champion : Maggie Carter	
Priority Coordinator: Lisa Hartely	
What part of the Implementation Plan has been completed in the past year?	<p>The configuration of Plymouth into 6 localities, based on the 43 neighbourhoods has now been adopted by the local strategic partnership as the basis for planning and delivery of services across the city. There are 6 Locality Commissioning groups established. These groups comprise key 'movers and shakers' from each locality from the statutory, voluntary and private sector. Some have already commissioned specific activities using available budgets. The work of commissioning groups was recognised as good practice in the White Paper.</p> <p>A locality directory has been produced and is now on the Parent Partnership website, this identifies key personnel working in each locality.</p> <p>Training facilitated by Annie McGee and the CWFD has been delivered in each locality for the network of practitioners.</p>

	<p>Three locality managers have been appointed to lead on this work supported by the Excellence Cluster. There are office spaces in 5 localities for the managers to use.</p> <p>Locality needs analysis is completed and updated, Children's Centres now in place in all Localities.</p> <p><u>Outstanding actions:</u></p> <ul style="list-style-type: none"> <li>• Embedding CAF in locality working.</li> <li>• Finding co-location opportunities.</li> </ul>
What are the performance issues within this area (please specify each performance indicator and how they have performed. Are there outstanding issues to be addressed?)	NA
What issues have emerged from consultation with children and young people/parents and carers?	Young People and their families have consistently told us that they wish services to be provided locally. Children and young people in particular refer to their wish for non-stigmatising services provided from a joint location that provide universal and targeted support so that when they enter it is not clear if they are seeking a specific service.
Have there been any inspection recommendations that need to be addressed from the last year?	NA
What actions taken this year will demonstrate how this priority is address Reducing Child Poverty	<p>Early intervention and the development of Integrated services in the community should better identify and support the most needy children and families.</p> <p>The Education Schools Disadvantage Grant funding will help subsidise access to an exciting range of activities that disadvantaged children and young people and children in care, who through economic circumstances would otherwise be unable to participate.</p>
What actions taken this year will demonstrate how this priority to reflect Narrowing the Gap	Early intervention and a team around the child approach through the use of CAF will support narrowing the gap in outcomes particularly health, mental health and educational attainment.
Are there any other significant policy drivers (such as the Governments response	<p>Lord Laming Review</p> <p>"Your Child, Your Schools, Your Future" (White Paper 2009)</p> <p>Health Inequalities Strategic Review (the Marmot Review 2010)</p>

to Lord Laming's review of Safeguarding) that are likely to inform the implementation of this priority.	
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**Children's Integrated Disability Service**

Champion : Maggie Carter	Priority Coordinator: Jo Siney
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<p>What part of the Implementation Plan has been completed in the past year?</p>	<p><u>Integration of Services</u></p> <ul style="list-style-type: none"> <li>• Teams within Plymouth City Council integrated working to Integrated Disability Service Manager, with integrated budget.</li> <li>• Close day to day working with PHNT staff.</li> <li>• Relocated and co-located teams on Scott Business Park site.</li> </ul> <p><u>Achievements in Service Delivery</u></p> <ul style="list-style-type: none"> <li>• Set up a Parents Reference Group to work with us as we develop services.</li> <li>• Widened choice for families in short breaks provision to include family based care and access to inclusive opportunities.</li> <li>• Provided training to mainstream providers to enable them to include children and young people with disability (e.g. holiday play schemes, child care providers) through the Plymouth Inclusive Child Care Service.</li> <li>• Set up an equipment store on the Scott Business Park site including a short loans facility for specialist equipment to inclusive providers.</li> <li>• Published a 'short-breaks' newsletter "Break into Summer" for families prior to the summer holiday break on what is available.</li> <li>• Set up a provider's forum for voluntary and community sector providers for children and young people with disability to work with us on developing the Aiming High core offer.</li> <li>• Been recognised as good practice by the DCSF for our short breaks work as part of the 'Aiming High' agenda.</li> <li>• Worked with a group of children and young people with disabilities through a specialist participation worker to ensure their views are heard.</li> <li>• Produced a DVD called "Count Me In" in which children and young people talk about what they want for positive activities.</li> <li>• Developed protocols with Adult Learning Disability Services around transition to adulthood</li> </ul>
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	<p>specific developments.</p> <ul style="list-style-type: none"> <li>• Developed 'wrap-around' support packages across home and school to enable children and young people with the most complex needs to remain in the city with families.</li> <li>• Extended the Communication and Interaction Team to reflect increased numbers and complexity of children and young people with Autistic Spectrum Disorder (ASD).</li> <li>• Developed a multiagency assessment and care pathway (Oasis) for children and young people with ASD.</li> <li>• Joint work with Woodlands School to develop specialist trained staff to support children and young people with multi sensory impairment.</li> <li>• Focussed work with young people with hearing impairment who are British Sign Language users educated out of the city, to develop their links with the Plymouth Deaf Community.</li> <li>• Provided Independent Travel Training for 26 young people this year from special and mainstream schools to enable them to use public transport and working to roll out the programme into Devon and into Adult Services.</li> </ul> <p><u>Actions outstanding:</u></p> <ul style="list-style-type: none"> <li>• Implementing the Single Point of Contact (SPoC) for families into services for disability.</li> <li>• Completion of co-location of services.</li> <li>• Developing a comprehensive needs analysis for children and young people with disability.</li> <li>• Developing a city-wide strategy for children and young people on the Autistic Spectrum.</li> </ul>
<p>What are the performance issues within this area (please specify each performance indicator and how they have performed. Are there outstanding issues to be addressed?</p>	<ul style="list-style-type: none"> <li>• No specific reference to disability outcomes within needs analysis.</li> <li>• Performance data set for SEN and Disability will develop to include N154 (Parents views) and other indicators such as the SEN/non-SEN attainment gap (N105)</li> <li>• N103 – pressures continue in production of statements within statutory timescales being addressed by management action and liaison with health. Further action needed to reduce numbers of statements by greater delegation to schools.</li> <li>• N105 – Plymouth is in upper middle quartile nationally for SEN/non-SEN gap.</li> <li>• There have been no permanent exclusions of pupils with statements of special educational need for the past 3 years.</li> </ul>
<p>What issues have emerged from consultation with children and young people/parents and carers?</p>	<ul style="list-style-type: none"> <li>• Feedback from children and young people with disability is that they want to do what all children and young people do e.g. have sleepovers, go horse riding and go to nightclubs.</li> <li>• Feedback from parents is that they want to be able to use mainstream facilities e.g. the Life Centre with their children:</li> </ul>

	<ul style="list-style-type: none"> <li>- they want more flexible responses to their families needs</li> <li>- they want easier access to a broader range of short break opportunities and minimised bureaucracy</li> <li>- they recognise a need for a broader workforce of care providers for their children.</li> </ul>
Have there been any inspection recommendations that need to be addressed from the last year?	No inspections have taken place in the past year. Previous inspections and current national good practice continue to inform this work.
What actions taken this year will demonstrate how this priority is address Reducing Child Poverty	<ul style="list-style-type: none"> <li>• Better information for parents through the Single Point of Contact will include information on benefit availability and income maximisation.</li> <li>• Increased accessible childcare through Aiming High, including childminding.</li> <li>• Training and support for young people into adulthood by work with Connexions and LSC.</li> <li>• Parents Reference Group are a vehicle for raising economic issues.</li> </ul>
What actions taken this year will demonstrate how this priority to reflect Narrowing the Gap	<p>All the work of the Service is aimed at 'narrowing the gap' in all five outcomes for children and young people with disability. The Aiming High Core Offer, the Disability Strategy and the Inclusion policy all focus on this agenda.</p> <p>The Disability Needs Analysis and dataset aims to allow us to evidence this more clearly.</p>
Are there any other significant policy drivers (such as the Governments response to Lord Laming's review of Safeguarding) that are likely to inform the implementation of this priority.	<ul style="list-style-type: none"> <li>• The Lamb Report on Special Educational Needs</li> <li>• Aiming High for Disabled Children</li> <li>• Lord Laming Safeguarding Review</li> <li>• New Family Support Act due 2011</li> </ul>

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**CITY OF PLYMOUTH**

**Subject:** Residential Care: Update on Modernisation of Older Peoples' Services 2005-2015

**Committee:** Cabinet

**Date:** 10<sup>th</sup> November 2009

**Cabinet Member:** Councillor Dr Salter, Cabinet Member for Adult Health and Social Care

**CMT Member:** Director for Community Services

**Author:** Julia Penfound

**Contact:** Tel: (01752 (30) 7344  
e-mail: Julia.penfound@plymouth.gov.uk

**Ref:** Your ref.

**Part:** 1

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**Executive Summary:**

In accordance with the recommendations within the Cabinet Paper dated 14<sup>th</sup> July (Appendix 1), this report is to provide feedback to Cabinet in relation to the consultation initiative that has taken place about respite provision in the City, and the future of Whitleigh Residential Respite Home.

The consultation process took place over a twelve week period. A variety of approaches were adopted to ensure that users and their carers were afforded opportunities to provide feedback.

This report provides a summary of the outcomes of the consultations.

Although 135 people who were users of Whitleigh were invited, only a small number of people chose to attend the consultation events themselves. Of the questionnaires distributed 60% were returned and the majority of the remainder were contacted by telephone. A number of individual appointments were also offered.

All appeared to appreciate the time given to air their views and to receive confirmation of the Council's continued investment in carers' services. Whilst many expressed a desire for Whitleigh to remain open, it was apparent from the feedback received that the concern about the future of Whitleigh was intimately connected to a need for information around alternatives and a reassurance that there would be no overall reduction in respite provision.

The consultation provided an opportunity to ensure that service users and carers were more familiar with the choices available to them and the range of services on offer and to give further reassurance that we would continue to purchase and provide good quality respite services.

In respect of the long stay resident a social worker and an advocate were linked with the family and the resident to ascertain her views and reassess her care needs. The resident has viewed a new dual registered home in the independent sector and moved there recently for a trial period with a member of Whitleigh staff accompanying her for support.

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**Corporate Plan 2009-2012:**

This report links directly to the Council's Corporate objectives outlined in Corporate Improvement Priority 3 (Helping People to Live Independently) and Corporate Improvement Priority 14 (Providing Better Value for Money)

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**Implications for Medium Term Financial Plan and Resource Implications:  
Including finance, human, IT and land**

The proposals around Whitleigh will lead directly to budget savings whilst ensuring no decrease in the amount of respite available. We estimate that the full year financial saving will be approximately £350K.

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**Other Implications: e.g. Section 17 Community Safety, Health and Safety, Risk Management, Equalities Impact Assessment, etc.**

None for the purposes of this report.

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**Recommendations & Reasons for recommended action:**

1. It is recommended that Cabinet agrees to the reprovision of Whitleigh Residential Respite Home and the reinvestment into alternative respite services.

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**Alternative options considered and reasons for recommended action:**

To maintain our residential homes without significant future investment will not meet Care Quality Commission (formerly CSCI) minimum standards. Providing alternative respite arrangements promotes choice and control for individuals.

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**Background papers:**

Cabinet Paper 29<sup>th</sup> November 2005 (Ref: C 61 05/06) – “Residential Care: Proposals to Modernise Older Peoples’ Services 2005-2015”

Cabinet Paper 14<sup>th</sup> July 2009 (Ref: ) – “Residential Care: Update on Modernisation of Older Peoples’ Services 2005-2015”

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**Sign off:** comment must be sought from those whose area of responsibility may be affected by the decision, as follows (insert initials of Finance and Legal reps, and of HR, Corporate Property, IT and Strat. Proc. as appropriate):

Fin	JB (CoSF AC09 10 002)	Leg	RW 105 7	HR		Corp Prop	CJT /037 /151 009	IT		Strat Proc	
Originating SMT Member: CB											



**RESIDENTIAL CARE: UPDATE ON MODERNISATION OF OLDER  
PEOPLES' SERVICES (2005-2015)**

In accordance with the recommendations within the Cabinet Paper dated 14<sup>th</sup> July (Appendix 1), this report is to provide feedback to Cabinet in relation to the consultation initiative that has taken place about respite provision in the City, and the future of Whitleigh Residential Respite Home.

**1. Background**

On 14<sup>th</sup> July 2009 Cabinet received a paper updating on the progress that has been made in relation to the modernisation of Older Peoples' Services as outlined in the strategy agreed in November 2005.

Cabinet approved the proposed direction of travel outlined in the 14<sup>th</sup> July paper:

- Changing the use of Stirling and Frank Cowl Residential Homes from long to short-stay occupancy (gradually to reduce the numbers of people who are permanent within the homes over the next 2-3 years – noting the new Extra Care Schemes coming on stream - The next Extra Care Housing Scheme to be completed will be in Devonport with handover expected January 2011
  
- Consult users/carers about alternatives to the current respite facility (Whitleigh) – noting that there has been a trend of under-occupancy within the unit as carers are already choosing alternative respite services.

**2. Whitleigh Consultation Process**

2.1. A 12-week consultation period was initiated following Cabinet's decision.

The methodology encompassed a range of initiatives to gather feedback:

- Consultation events
- Questionnaires
- Feedback through the Council's website
- 1:1 visits
- Advocacy support

## 2.2. Consultation Events

All those people who had used Whitleigh in the last 12 months were contacted and sent a questionnaire; they were also invited to consultation events.

On the 28<sup>th</sup> and 29<sup>th</sup> September 2009 Adult Social Care ran two events inviting service users and their carers to discuss how the potential reprovision of Whitleigh may affect them should such a decision be taken. These events also explored how the Council intended to develop alternative provision to extend the range of options already available to carers.

135 people were invited – in total only 13 people attended both events.

**Event 1:** held on Monday, 28<sup>th</sup> September 2009 10.00 -12.00 pm at the Pavilions, Plymouth

Attended by: Four service users and six carers  
Supported by: PCC Commissioning Manager  
Independent Consultant  
Unit Manager, Whitleigh Respite Care Home  
Unit Manager, Stirling House Residential Care Home

**Event 2:** held on Tuesday, 29<sup>th</sup> September 2009, 4.00- 6.00 pm at Elspeth Sitters House, The Barbican

Attended by: Three carers and Carer's Champions representative  
Supported by: As above

The feedback from these events along with any written responses received by the Council has been collated.

A summary of the key questions and issues raised by service users and carers at the events is detailed below:

***What would be the refurbishment cost to raise Whitleigh to the required standard? Is this an option?***

*Rooms at Whitleigh are not large enough to build en suite facilities and the building is outdated.*

***In order to raise occupancy levels in Whitleigh, couldn't beds be used for step-down care from hospital?***

*As the occupancy rates have fallen the rooms have been used to support hospital discharge and emergency placements but there has still not been sufficient demand for the unit.*

***If Whitleigh were to close, would this reduce the access to respite beds?***

*No – the council would ensure that respite beds would be available to meet identified need.*

***Could Stirling, as a Plymouth Council home and an alternative respite provider, accommodate the current level of respite at Whitleigh?***

*There are currently 4 respite beds in Stirling and as beds become available it was confirmed that they could be used for carer respite if this is needed.*

*When discussing respite beds across the sector, the group felt that what was most important was to ensure all respite services had staff trained to the same standard and would treat people with dignity and respect.*

***Carers expressed concern about accessing other independent care homes for respite. Perceptions of the independent sector were varied and based on anecdotal evidence***

*It was confirmed by the Commissioning Manager that a small number of homes would be identified with a good rating where respite beds would be commissioned as alternatives.*

### **2.3. Questionnaires**

Out of the 135 number of questionnaires distributed, 60% have been returned and the majority of the remainder of people have been contacted by telephone to ensure that their comments have been taken into account.

### **2.4. Website**

The Councils website has been refreshed with a page for people to email their comments. All stakeholders have been emailed and informed. Their comments have been taken into account.

### **2.5. 1:1 Visits**

All Service Users and their carers who had stayed at Whitleigh in the past year were invited to the consultation events and provided with a questionnaire to complete. People who utilised Whitleigh more than 4 times in the same period were offered additional support from the manager of Whitleigh. This resulted in a number of individual appointments to discuss with carers and service users on a personal basis and gain their views on the future of Whitleigh.

### **2.6. Advocacy**

An Advocacy Service has been offered to everyone involved in the consultation through Plymouth Age Concern.

### **2.7. Long Stay Resident**

There is one long-stay resident still residing at Whitleigh. A social worker and an advocate were linked with the family and the resident to ascertain her views and reassess her care needs.

The resident has viewed a new dual registered home in the independent sector and moved there recently for a trial period with a member of Whitleigh staff accompanying her for support. It was made clear to the family and resident that we would not want to put any undue pressure on them and that this decision had to be one of personal choice. We are confident that the family and the resident are happy with this outcome.

## **2.8. Summary from consultation**

All appeared to appreciate the time given to air their views and to receive confirmation of the Council's continued investment in carers' services. It was apparent from the feedback received that the concern about the future of Whitleigh was intimately connected to a lack of information around alternatives. However the consultation provided an opportunity to ensure that service users and carers were more familiar with the choices available to them and the range of services on offer, and to reiterate that this was not about an overall reduction in respite provision in the City. There was also some reassurance felt about the Council's commitment to purchase quality care from the independent sector as an alternative.

The small number of service users and carers who attended the events expressed a desire for Whitleigh to remain open.

## **3. Staff Consultation**

Managers have met with the staff employed at Whitleigh and explained the decision by Cabinet and the arrangements for consultation. Staff were encouraged to feedback their views in a number of ways as described above (Questionnaire, website etc.)

The Unions have also been informed. Clearly at this stage no decision has been taken and therefore the Council is not formally consulting with them about their future employment.

## **4. Recommendations**

Taking into account the results of the consultation events and the feedback from the questionnaires. I am recommending that:

4.1. Cabinet agrees to the reprovision of Whitleigh Residential Respite Home and the reinvestment into alternative respite services.

**CITY OF PLYMOUTH**

**Subject:** Residential Care: Update on Modernisation of Older Peoples' Services 2005-2015

**Committee:** Cabinet

**Date:** 14 July 2009

**Cabinet Member:** Councillor Dr Salter

**CMT Member:** Director for Community Services

**Author:** Julia Penfound

**Contact:** Tel: (01752 (30) 7344  
e-mail: Julia.penfound@plymouth.gov.uk

**Ref:** Your ref.

**Part:** 1

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**Executive Summary:**

In November 2005 Cabinet approved a new strategic direction to modernise older people's services over a 10 year period. Modern high quality extra care accommodation would be built in the immediate vicinity of our residential homes wherever possible.

Several of our older people residential homes were in outdated buildings that did not meet current day expectations. There are also no en-suite facilities in any of the remaining units.

This paper both updates on our progress to date and outlines the proposed continued direction of travel to achieve the 2005-2015 ambitions taking into consideration new national and local expectations.

Since 2005 we have achieved significant progress against the strategy set out in the Cabinet paper – specifically:

- Peirson was de-commissioned with the transfer of skilled staff into the Local Care Centre at Mount Gould
- Three new extra care facilities (Torrige Way, St Pauls and Astor Court) have been built and Paternoster de-commissioned.

The Council has remained committed to its policy that no older person currently residing in a Plymouth City Council residential home will have to move. However, they will be offered first choice of the extra care accommodation available and built in the same neighbourhood.

Plymouth City Council are recognised as regional leaders in the successful delivery of extra care schemes. The next phase of our delivery plans proposes to continue to develop extra care accommodation, and to develop alternative forms of respite provision in consultation with users and carers, to support both older people themselves and their carers in having choices about the preferred type of service.

We currently have three long-stay residential homes for older people: Frank Cowl, Stirling and Lakeside.

- There are 22 beds in Frank Cowl Residential Home in Devonport. Currently there are 11 long stay placements and 11 used for interim care (short stay). Work has commenced on a new scheme in Devonport which will be completed in 2011 and is part of the regeneration of this area. There will be 40 extra care units of accommodation in this scheme. It is recommended that we offer residents of Frank Cowl first choice of the extra care accommodation developed in Devonport.
- There are 28 beds in Stirling Residential Home in Honicknowle and currently 24 of these have long term placements and 4 are used for interim care (short stay). We are currently exploring the possibility of securing land in Honicknowle and work is ongoing to acquire this to develop an extra care scheme.
- Lakeside is a specialist dementia care facility and at present we have no plans to move to extra care given the increase in demand for residential support for people with dementia. However, the building is outdated and there may be opportunities to develop partnerships to re-provide services in the independent sector.

This report recommends that we change the use of Stirling and Frank Cowl from long to short stay and gradually reduce the numbers of people who are permanent within these units over the next 2 to 3 years i.e. when a long-term bed becomes available it will revert to short-term care. For each scheme those residing at these homes who wish to move to the new accommodation with the same levels of care and support will be able to do so.

We have one predominately short-stay residential unit - Whitleigh

- There are 23 beds at Whitleigh Residential Home - with 1 long stay placement and 22 used for respite care to support users and their carers. Occupancy levels for respite has been at increasingly lower levels as carers are already choosing alternative respite services.

Given the outdated nature of the facilities at Whitleigh and the relatively low useage we believe this is an appropriate time to consider de-commissioning. Therefore there is a further recommendation that we consult with service users/carers about respite provision in the City and the use of Whitleigh for

this purpose, and that views are taken into account in relation to decisions regarding de-commissioning. This is not about reducing the amount of respite provision, but offering a wider choice of alternatives which could range from residential independent sector provision to direct payments to enable users and carers a greater level of control over how they are supported.

This is in line with the new national strategies for both Carers and Putting people First. These strategies emphasise the drive to significantly increase opportunities for people to have greater choice and control over their lives including introducing individual budgets and expanding direct payments.

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**Corporate Plan 2009-2012:**

This report links directly to the Council's Corporate objectives outlined in Corporate Improvement Priority 3 (Helping People to Live Independently) and Corporate Improvement Priority 14 (Providing Better Value for Money)

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**Implications for Medium Term Financial Plan and Resource Implications: Including finance, human, IT and land**

The proposals around Whitleigh will lead directly to budget savings whilst ensuring no decrease in the amount of respite available. We estimate that the full year financial saving will be approximately £350K.

There is no financial impact from the change from long-stay to short-stay at Stirling and Frank Cowl.

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**Other Implications: e.g. Section 17 Community Safety, Health and Safety, Risk Management, Equalities Impact Assessment, etc.**

None for the purposes of this report.

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**Recommendations & Reasons for recommended action:**

1. It is recommended that we consult with users and carers (using advocacy services where appropriate) and dedicated social work professionals about respite provision in the City and the use of Whitleigh for this purpose, and that views are taken into account regarding decisions to de-commission.
2. It is recommended that we consult with staff
3. This report recommends that we change the use of Stirling and Frank Cowl from long to short stay and gradually reduce the numbers of people who are permanent within these units over the next 2 to 3 years i.e. when a long-term bed becomes available it will revert to short-term care. It is recommended that we offer residents of Frank Cowl first choice of the extra care accommodation developed in Devonport.

4. Work with all users/carers and the single long-stay resident of Whitleigh on an individual basis to listen to their views and ensure that appropriate service provision is in place to meet their needs.
5. It is recommended that the results of consultations are reviewed at Health & Wellbeing Overview & Scrutiny Panel

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**Alternative options considered and reasons for recommended action:**

To maintain our residential homes without significant future investment will not meet Care Quality Commission (formerly CSCI) minimum standards. Promoting Extra Care Housing as an alternative ensures accommodation of the highest quality and promotes independent living as outlined in 'Our Health, Our Care, Our Say' national strategy. Providing alternative respite arrangements promotes choice and control for individuals.

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**Background papers:**

Cabinet Paper 29<sup>th</sup> November 2005 (Ref: C 61 05/06) – “Residential Care: Proposals to Modernise Older Peoples’ Services 2005-2015” (Appendix 1)

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**Sign off:** comment must be sought from those whose area of responsibility may be affected by the decision, as follows (insert initials of Finance and Legal reps, and of HR, Corporate Property, IT and Strat. Proc. as appropriate):

Fin	MC 160 609.	Leg	LT1 017	HR		Corp Prop	CJT /032 /120 609	IT		Strat Proc	
Originating SMT Member: CB											



**RESIDENTIAL CARE: UPDATE ON MODERNISATION OF OLDER  
PEOPLES' SERVICES (2005-2015)**

**1. Vision**

Plymouth City Council is committed to supporting Older People to remain independent whenever possible within the community of their choice.

**2. Strategy 2005 -2015**

The strategy agreed at Cabinet in November 2005, set out a strategic direction for increased development of Extra Care facilities and the future of our residential homes (Attached as Appendix 1). At the time of the 2005 Cabinet Paper there were 1,715 people permanently living in residential/nursing facilities across the City funded by the City Council, and by March 2009 this number had reduced to 1,111.

We currently have 5 Extra Care Schemes in the City providing 158 independent apartments.

**3. Context for Change**

A number of national strategies have emphasised the need to maximise independence, offer a wide range of alternatives to support users and carers promoting choice and control.

This report seeks to confirm agreement to the continued direction of travel.

**4. Current In-House Residential Service Provision**

**4.1.** Plymouth City Council currently provides residential facilities for Older People in the following facilities.

<b>Residential Home</b>	<b>Beds available</b>	<b>Occupancy 2008/09</b>
Whitleigh	1 long stay 22 Respite short stay	70%
Frank Cowl	11 Long stay 11 Short stay	87%
Stirling	24 Long stay 4 Short stay	87%
Lakeside – specialist support for Dementia	29 long stay 1 Short stay	92%

**5. Extra-Care Facilities Planned:**

**5.1.** The current plans for further Extra Care facilities in the City are:

- Thomas Pocklington Trust has recently opened a new scheme (May 2009). This offers 75 units of accommodation with onsite care and support commissioned by Adult Social Care.
- Work has started on a new extra care scheme in Devonport – this will be a 40 unit scheme, expected to complete in 2011. This scheme is located near Frank Cowl Residential Home.
- We are currently exploring the possibility of securing land in Honicknowle and work is ongoing to acquire this to develop an extra care scheme.

## **6. PROPOSALS FOR MODERNISING OLDER PEOPLES SERVICES 2009 - 2015**

Plymouth City Council is committed to supporting older people to remain independent whenever possible within the community of their choice. The proposals below outline the next phase in our ambitions to deliver on the 2005-2015 strategy but also reflect the national context as set out above.

### **6.1. Frank Cowl Residential Home**

It is proposed to change the registered use of this unit from long stay to short stay and gradually reduce the numbers of people who are permanent within the unit over the next 2-3 years. When a long-term care bed becomes vacant this will revert to short-term care. It is anticipated that with the development of the Devonport Extra Care Scheme those who wish to move from Frank Cowl into this new unit with the same level of care and support will be able to do so.

However, no long term resident will be forced to move as a result of this proposal.

The Devonport Extra Care Scheme scheduled for completion in 2011 will have 40 extra care units.

It is recommended that we offer residents of Frank Cowl first choice of the extra care accommodation developed in Devonport.

### **6.2. Stirling Residential Home**

It is proposed to change the registered use from long stay to short stay and gradually reduce the numbers of people who are permanent within the unit over the next 2-3 years. When a long-term care bed becomes vacant this will revert to short-term care. Once again, no long term resident will be forced to move as a result of this proposal.

We are currently exploring the possibility of securing land in Honicknowle with a view to developing an extra care scheme. If successful we would look to progress this scheme and engage with residents in the same way as with Frank Cowl.

### **6.3. Lakeside Residential Home**

Lakeside is a specialist dementia care facility and at present we have no plans to move to extra care given the increase in demand for residential support for people with dementia. However the building is outdated and there may be opportunities to develop partnerships to re-provide services in the independent sector in the future.

### **6.4. Whitleigh Respite Care Home**

It is proposed that users and carers are consulted about alternative respite provision. Useage of Whitleigh has gradually declined and we would like to develop and deliver more innovative solutions to support carers in their crucial role. Over the last 4 years we have been developing key partnerships with independent sector care providers and housing strategy to deliver this objective.

There is capacity in the independent sector to provide short respite breaks. In addition, as part of our strategy to promote choice and control a range of options for short respite breaks is already being explored – for example, we have already developed a Carer's Voucher Scheme whereby Carers can be issued with vouchers to enable them to choose directly their preferred provision.

Given the outdated nature of the facilities at Whitleigh and the relatively low useage we believe this is an appropriate time to consider de-commissioning. Therefore there is a further recommendation that we consult with service users/carers about respite provision in the City and the use of Whitleigh for this purpose, and that views are taken into account in relation to decisions regarding de-commissioning. This is not about reducing the amount of respite provision, but offering a wider choice of alternatives which could range from residential independent sector provision to direct payments to enable users and carers a greater level of control over how they are supported.

#### **6.4.1. Budget**

The total budget for Whitleigh is £855,942. Within the budget for 2009/10 savings have been identified to be achieved by alternative commissioning of respite services. It is anticipated that the full year savings would be approximately £350k.

#### **6.4.2. Impact on budget availability for alternative provision**

Note that if the proposal is not accepted the savings of £350k will still need to be identified from other areas within the Adult Social Care budget.

#### **6.4.3. General Information on Whitleigh respite care home**

Whitleigh residential home is a 23-bed unit which predominately provides accommodation for respite breaks for individuals and their carers. This

respite can be both planned and unplanned. Whitleigh also has one long-stay resident.

The unit employs 35 staff (22.3 Full time equivalent) across a range of roles including Domestic, Kitchen Assistants, Care Assistants, Assistant and Unit Managers

In previous years, a core group of regular users would choose Whitleigh as their preferred location for respite. However, recent years have seen a significant reduction in the number of people selecting Whitleigh for respite and occupancy levels through 2008/2009 have been low, averaging at 70% occupied (significantly lower than occupancy levels in all other in-house residential units – see table in section 4.1 above).

We believe this partly reflects our progress on ensuring people have more choice and control over where and how their services are delivered and that people are now either choosing alternative residential locations for their respite or are opting to manage this in different ways e.g. through Direct Payments.

The Whitleigh building itself offers small single rooms and has a number of shared lounges and kitchen areas available to all users and would not now meet the new CQC (formerly CSCI) standards when opening a new residential service.

#### **6.4.4. Users of the Service**

Consultation with all users and carers would be undertaken and supported by both our Social Work team and Care Staff and will be conducted in a sensitive and supportive way.

Consultation would include:

- a) Discussion with the one long-stay resident and their family regarding the future of Whitleigh and the options that are available. These options will include support to identify a new residential facility or should the resident not wish to move, advice and support on how we will continue to provide support and accommodation at Whitleigh.
- b) Consultation with all users/carers and their families who are currently occupying or scheduled to use Whitleigh for their respite care in 2009. This will include support and assistance in identifying alternative solutions for respite.
- c) Offers of support to any potential users who may contact us following this news being made public that may have been considering Whitleigh as a location for future respite care.

#### **6.4.5. Staff**

A comprehensive HR process and plan is available and will be agreed with all relevant unions prior to any formal announcement to staff. This plan sets out

in detail each step of the process, the timeframes involved and all the support and information staff will receive during the process.

Our intentions are to support our staff through the proposed de-commissioning and work towards finding suitable alternative employment (through the redundancy avoidance policy) with the Council. However, it is anticipated that not all staff will be successful in finding alternative roles and that some redundancies will be unavoidable.

#### **6.4.6. Future of the Whitleigh building and site**

An options appraisal has been undertaken on the building to consider its potential for future use:

- For Extra Care Housing  
The costs of converting the premises for extra care housing would be prohibitive. Work continues with the Council's Housing Strategy Unit to look at expansion of extra care provision in the City for Older People.
- For community use  
The building is not suitable for community use without investment to support conversion. This has not been budgeted for at present and would require a financially viable business case.
- For disposal  
Any receipt from potential disposal has not been accounted for in the Council's planned disposals over the next five years. Therefore in the event Whitleigh is de-commissioned the Council would need to consider options for the building/site under the Council's surplus property disposal scheme.

### **7. Recommendations**

- To consult with users and carers (using advocacy services where appropriate) and dedicated social work professionals about respite provision in the City and the use of Whitleigh for this purpose, and that views are taken into account regarding decisions to de-commission.
- Consult with staff
- Change the use of Stirling and Frank Cowl from long to short stay and gradually reduce the numbers of people who are permanent within these units over the next 2 to 3 years i.e. when a long-term bed becomes available it will revert to short-term care. It is recommended that we offer residents of Frank Cowl first choice of the extra care accommodation developed in Devonport.
- Work with all users/carers and the single long-stay resident of Whitleigh on an individual basis to listen to their views and ensure that appropriate service provision is in place to meet their needs
- It is recommended that the results of consultations are reviewed at Health & Wellbeing Overview & Scrutiny Panel.

## CITY OF PLYMOUTH

**Subject:** Residential Care: Proposals to Modernise Older Peoples Services 2005-2015

**Committee:** Cabinet

**Date:** 29<sup>th</sup> November 2005

**Cabinet Member:** Councillor Camp

**CMT Member:** Director for Community Services

**Author:** Pam Marsden

**Contact:** Tel: (01752 (307344)  
e-mail: Pamela.Marsden@plymouth.gov.uk

**Ref:** C 61 05/06

**Part:** I

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**Executive Summary:**

The proposals set out in the Green Paper: *Independence Well being and Choice* if fully implemented will mean a shift in the provision of current services to those which promote community living and provide alternative solutions such as Extra Care housing.

Several of our older people residential homes are in outdated buildings that do not meet current day expectations. When new CSCI minimum standards relating to room sizes (projected start 2008) come into force most of the rooms in these units will fail this standard. There are also no en-suite facilities in any of the units.

The report recommends that we modernise our services to older people over a 10 year period. Modern, high quality extra care accommodation will be built in the immediate vicinity of our residential homes.

No older person currently residing in a Plymouth City Council residential home will have to move however they will be offered first choice of the extra care accommodation built in the same neighbourhood.

The Torridge Way Extra Care scheme will be completed in November 2007 and is part of the regeneration of the Heart of Efford. There will be 40 units of accommodation in the new scheme, which will have the capacity to house 65 people due to the high ratio of 2 bedroom apartments.

There are 32 beds in Paternoster Residential Care Home, Efford. Currently there are 20 long-stay placements and 12 used for interim care (short-stay).

The report recommends that we change the use from long stay to short stay and gradually reduce the numbers of people who are permanent within the unit over the next 2 years. When a long-term care bed becomes vacant this will revert to short-term care. It is anticipated that with the development of the Torridge Way Extra Care Scheme those who wish to move from Paternoster into this new unit with the same level of care and support will be able to do so.

There is a further recommendation that Peirson be decommissioned once the Local Care Centre opens in Autumn 2006. The anticipated number of bed days required (based on 2004-2005 admission statistics) in the new Local Care Centre, are 231. Adult Services will contribute to the LCC to secure these bed days to continue to provide intermediate care.

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**Corporate Plan 2004-2007:**

This report leads directly to the Corporate Objectives of looking after vulnerable adults and using the Council Tax efficiently.

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**Implications for Medium Term Financial Plan and Resource Implications: Including finance, human, IT and land**

These proposals around Peirson and Paternoster will lead to a budget saving. We have estimated that in the financial year 2006/07 there would be an overall saving of approximately £139k and £358k in 2007/08, leading to approximately £488k in 2008/09. Some of this saving however will be dependent upon residents choosing to move from Paternoster, which would enable us to decommission the building.

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**Other Implications: e.g. Section 17 Community Safety, Health and Safety, Risk Management, etc.**

None for the purpose of this report.

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**Recommendations & Reasons for recommended action:**

1. It is recommended that we decommission Peirson once the Local Care Centre opens in Autumn 2006.
2. It is recommended that we offer residents of Paternoster first choice of the extra care accommodation developed in Torridge Way in 2007.

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**Alternative options considered and reasons for recommended action:**

To maintain our residential homes without significant future investment will not meet CSCI minimum standards (projected start date 2008). Promoting Extra Care Housing as an alternative ensures accommodation of the highest quality and promotes independent living, as outlined in the Green Paper, Independence Well-Being & Choice.

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**Background papers:**

Green Paper: Independence Well-Being & Choice: '[www.dh.gov.uk](http://www.dh.gov.uk)'

Housing Strategy: PCC website, 'Housing Strategy'.

Supporting People Strategy : PCC website, 'Supporting People Strategy'.

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**Sign off:**

Fin	AB	Leg	DS	Head of HR	GM	Head of AM	N/a	Head of IT	N/a
Originating CMF Member									



## **RESIDENTIAL CARE: PROPOSALS TO MODERNISE OLDER PEOPLES SERVICES 2005-2015**

### **Vision**

Plymouth City Council is committed to supporting older people to remain independent whenever possible within the community of their choice.

### **Strategy 2005-2015**

It is proposed that we modernise our services to older people over a 10 year period. Modern, high quality extra care accommodation will be built in the immediate vicinity of our residential homes.

- No older person currently residing in a Plymouth City Council residential home will have to move however they will be offered first choice of the extra care accommodation built in the same neighbourhood.
- The accommodation will be of the highest quality. All the facilities will be disability designed with en-suite bathrooms.
- The 24 hour care will be delivered by the same staff who currently care for residents in our Homes whenever possible.

### **Context for Change**

1. The proposals set out in the Green Paper: *Independence Well being and Choice* if fully implemented will mean a shift in the provision of current services to those which promote community living and provide alternative solutions such as Extra Care housing.
2. Several of our older people residential homes are in outdated buildings that do not meet current day expectations. When new CSCI minimum standards relating to room sizes (projected start 2008) come into force most of the rooms in these units will fail this standard. There are also no en-suite facilities in any of the units.

### **Where we are now?**

In relation to extra care, housing partnership working and strategic planning is well established in Plymouth. We successfully bid for Department of Health Extra Care funding of £1.37m in 2003-04 to help achieve our current planned provision and have been successful in the second bidding round 2004/05 for £1.6 m both with the Housing Corporation match funding.

Work has been undertaken through strategy and planning to identify sites, which would be suited to developing extra care housing. (See appended information extra care schemes in planning and in operation.)

### **Timeframes**

**Pierson Community Resource Centre:**

This home provides an intermediate care facility of up to 6 weeks for 25 service users. The Local Care Centre at Mount Gould will be completed in Autumn 2006 and this will offer 60 intermediate care beds.

**Proposal**

Peirson to be decommissioned once the Local Care Centre opens in Autumn 2006.

The anticipated number of bed days required (based on 2004-2005 admission statistics) in the new Local Care Centre, are 231. Adult Services contribute to the LCC to secure these bed days to continue to provide intermediate care.

**Paternoster Residential Care Home Efford:**

There are 32 beds in this unit. Currently there are 20 long stay placements and 12 used for interim care (Short Stay). The Torridge Way Extra Care scheme will be completed in November 2007 and is part of the regeneration of the Heart of Efford. There will be 40 units of accommodation in the new scheme, which will have the capacity to house 65 people due to the high ratio of 2 bedroom apartments.

**Proposal**

Change use from long stay to short stay and gradually reduce the numbers of people who are permanent within the unit over the next 2 years. When a long-term care bed becomes vacant this will revert to short-term care. It is anticipated that with the development of the Torridge Way Extra Care Scheme those who wish to move from Paternoster into this new unit with the same level of care and support will be able to do so.

**How will these changes affect users and carers?**

- Services should be designed to meet planned and urgent need. Supporting carers through the availability of short breaks is recognised as a key factor in enabling them to continue in their caring role.
- With the exception of Paternoster and Pierson these proposals, if approved, will be carried out over a 10-year period, which will give sufficient time to plan for the care of individual service users.
- We will seek to provide extra care housing wherever possible close to existing units to prevent unnecessary loss of community connections for the current residents.

**How will these changes affect staff?**

- PCC redundancy avoidance policy and procedure will apply to all employees whose posts may be at risk as a result of these proposals.
- This process will include 3 months formal consultation with employees and trade unions with a view to reaching agreement on the avoidance of any compulsory redundancies. Voluntary and wider expressions of interest for redundancies will be considered.
- Every effort will be made to find employees suitable alternative employment and an agreed HR process will be followed. This will include an appropriate vacancy freeze, ring-fence arrangements, preference exercise, and corporate redeployment.
- Employees whose place of work is compulsorily changed, and who incur extra travel expenses, will receive compensatory payment in accordance with the Single Status Agreement.

### **Recommendations**

- Consult with users and carers using advocacy services where appropriate and dedicated social work professionals.
- Consult with staff.
- Intermediate care services to be integrated into the Local Care Centre in Autumn 2006 and Pierson closed.
- Cease admissions of long stay placements into Paternoster.
- Work with all residents currently living in Paternoster on an individual basis to listen to their views and to ensure that an appropriate service provision is in place to meet their needs.
- Review the job descriptions and train the care staff within Paternoster so that the same staff group could continue to work with the same residents if and when these residents transfer into the new build extra care units.
- Gain agreement for a programme of development and partnership with housing strategy, which will increase the capacity of extra care housing units within the city to meet future demand. Seek to develop extra care housing in the same part of the city as our current residential home wherever possible.

### **Appendix 1**

#### **What is Extra Care Housing?**

Extra Care Housing provides a housing setting for the provision of care and support to older and disabled people. Tenants have control over their finance and they have security of tenure. Domiciliary care is provided within schemes

tailored to meet individual need. The domiciliary care into the current extra care schemes is provided by an independent agency.

Plymouth has held an Extra Care Seminar to raise the profile of this resource and to ensure joint planning of future developments. However more detailed analysis of need and demand will be undertaken to allow for demographic changes and review of current provision. The table shows the difference between residential care and extra care housing.

Although units are owned and managed by housing associations the eligibility criteria and nominations agreements agreed by Plymouth's legal services ensures that people admitted to the scheme are those that are at a significant risk of admission into care.

The first extra care-housing scheme was built approximately 5 years ago Hanover Housing Association manages it. The scheme has 24 hour care team commissioned by social services through the independent sector. This scheme has been commended by the housing corporation both in terms of the service it provides, the partnership working between the Plymouth City Council officers involved in meeting the objectives of offering choice and independent living.

The second scheme opened in May 2005. It is owned and managed by Sarsen Housing Association. This scheme has 24 hour care and which is commissioned separately by social services and design features to help people with dementia.

The opportunity in 2003-04 to bid for a new Extra Care Housing Fund through the Department of Health led to the success of Plymouth's first bid which is funding the Signpost development in the East End. This is part of the regeneration of the area.

Plymouth has been successful a second time in 2004-05 in a bid for funding to develop a scheme near to Paternoster at the heart of Efford. Total funding including match funding from the Housing Corporation £3.365 million.

**Appendix 2: Focus on Extra Care - How does extra care differ from residential care?**

Dependency Level	Low		Medium	Medium	High	
Provision Type	'Category 1' sheltered housing	'Category 2' sheltered housing	Residential Home	Extra Care Housing	Nursing Home	Hospital/Hospice
Features	<p>Independent Flats or bungalows. Baths or showers Fully fitted kitchens.</p> <p>Communal facilities (sometimes): Residents' lounge Laundry (residents' use) Guest room</p>	<p>Independent flats Baths or showers Fully fitted kitchens</p> <p>Communal facilities: Residents' lounge Laundry (resident's use) Guest room Assisted bathroom (sometimes)</p>	<p>Bedrooms 11sq m</p> <p>En Suite washing/toilet facilities (sometimes)</p> <p>Communal facilities: Residents' lounge Laundry/slucice Assisted bathroom Dining room Visiting hairdresser</p>	<p>Independent flats 50sq m Level access Showers in all flats to disability standard Fully fitted kitchens, Wheelchair accessible. Communal facilities: Residents' lounge Laundry (residents' use) Laundry/slucice Guest suite Assisted bathroom Restaurant Hairdressing salon Bar Shop Activities room</p>	<p>Bedrooms Wash hand basins Ensuite sometimes</p> <p>Communal facilities: Residents' lounge Laundry/ slucice Assisted bathroom Dining room Visiting hairdresser</p>	<p>Bedspaces or bedrooms (sometimes)</p> <p>Communal facilities: Day room Laundry/slucice Assisted bathroom</p>

Nature of Support	Warden/Estate Manager (sometimes) Individual support packages from external providers	Warden/Estate Manager Individual support packages from external providers	Manager/Matron 24-hour in house care team  Disposable Income £18.80 pw	Estate Manager 24-hour in-house care team  Disposable Income Up to £140 pw (inc. attendance allowance & pension)	Matron 24 hour nursing care	Medical/Nursing Staff 24-hour nursing care
Independence Rating	High	High	Low	Low	Low	Low

### Appendix 3: Provision of Extra Care Housing operational and in planning

<b>Provider</b>	<b>Type of provision</b>	<b>No. of units in the scheme</b>	<b>Total annual cost of contract revenue for care and support</b>	<b>No. of clients</b>	<b>Operational /In Planning</b>
Runneymede Court Hanover Housing Association	Extra Care housing for older people .24 hour care team on site	33 x 1 bedroom 5 x 2 bedroom	Supporting People £ Care Contract £139,256	Min 38 Max 43	Operational
St Barnabas Court  Sarsen Housing Association	Extra Care Housing for older people including people with dementia 24 hour care team on site	15 x 2 bedroom 17 x1 bedroom	Supporting People £60,000 Care contract £ 190.000	Min 32 Max 47	Operational
Signpost Extra Care Scheme Cattedown	Extra care Scheme for people over 55 years old 24 hour care on site 2-4 interim beds	25 x 1 bedroom 5 x 2 bedroom	Supporting People £ 35K* Care contract £ 190,000*	Min 30 Max 35	Opens November 06
<b>Torrige Way</b> Sarsen Housing association	Extra care Scheme for people over 60 years old 24 hour care on site 2-4 interim beds	25 x 2 bedroom 15 x 1 bedroom	Supporting People £35K Care Contract £190,000	Min 40 Max 65	In planning Completion November 2007

These are projected costs based on the schemes currently in operation with annual uplift.

**Appendix 4: Financial Information-Residential Units**

PCC Scheme	Start Date for Implemented Savings	PCC Revenue	PCC Capital Costs upgrades	Number of Beds
<b>Peirson</b>	The work stream will transfer to the Local Care Centre Autumn 06	£865,488 per annum		6 RITA beds 20 Rehab Beds
<b>Paternoster</b>	As each long stay bed becomes vacant it will transfer to short term. Remaining residents will be offered a placement at the extra care scheme Nov 07	£637,426 per annum		20 long stay 12 short stay interim placements



**APPENDIX 5****RESIDENTIAL CARE AND EXTRA CARE HOUSING**

(ALL SAVINGS AT 2006/07 PRICES)

**Overall Strategy**

To respond to the recommendations from the inspection of service to older people by reducing the number of residential care places purchased and investing in additional extra care housing.

Home	Current Service Provision	2006/07 £'000	2007/08 £'000	2008/09 £'000	2009/10 £'000	2010/11 £'000	Change in Service Provision
Peirson	4 x long stay plus 26 intermediate care	-179	-358	-358	-358	-358	30 intermediate care placements
Paternoster	20 x long stay + 12 x short stay	40	0	-130	-130	-130	16 short stay placements plus 16 extra care placements.
<b>TOTAL</b>	<b>Net savings</b>	<b>-139</b>	<b>-358</b>	<b>-488</b>	<b>-488</b>	<b>-488</b>	

**Assumptions:-**

Estimated 20% natural loss of long stay residential placements

Estimated 30% of long stay placements requiring alternative long stay provision

Estimated 50% of long stay placements choosing extra care housing provision

Financial provision made for extra staffing in homes to meet additional short stay placements during interim term

Cost of purchasing placements from the independent sector based on the average unit fee paid for current commitments

Client contribution based on the average contribution paid by current commitments.

## Appendix 2 - Equality Impact Assessment - Standard Assessment Template

### Section A: Assessment

<b>Policy</b> Consultation with service users, carers, staff and interested parties in respect of possible de-commissioning of Whitleigh Respite Care Home	<b>Officer conducting this assessment with Contact Details</b> Debbie Butcher – Commissioning Manager, Adult Social Care	<b>Date</b> 4 <sup>th</sup> September 2009
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#### 1. The Policy

Is this a new or existing policy?	<b>Existing:</b> This EIA is being conducted in relation to the above mentioned consultation and is not a policy.
What is the purpose of the policy?	In response to the Cabinet Report – Residential Care: Update on Modernisation considered 14 <sup>th</sup> July 2009 – a consultation exercise has been commissioned to obtain the views of service users, carers, staff and other interested parties in respect of the possible de-commissioning of Whitleigh Care Home.
How do the aims of the policy fit in with corporate priorities i.e. Corporate Plan	CIP 2 Informing and involving residents: this consultation exercise seeks the views of service users, carers, staff and other interested parties Whitleigh Care Home. Their views and comments will be taken into consideration as part of the decision making process for the future of the Home. CIP 3 Helping people to live independently: modernised services that promote individual choice and control, minimise risk and

	<p>enhance people's quality of life by supporting them to live independently.</p> <p>CIP 14 Providing better value for money: useage of Whitleigh Care Home has gradually declined and its facilities have become outdated. Within the budget for 2009/10, savings have been identified to be achieved by alternative commissioning of respite services to approximately £350k per year.</p>
Who will benefit from the policy?	Users and their carers of Whitleigh Care Home will benefit from a wider choice of alternatives in their care which could range from residential independent sector provision to direct payments. This would give them a greater level of control over how they are supported.
What outcomes are wanted from this policy?	Improved quality of life and independence for vulnerable adults and their carers, provision of modernised services for users/carers, effective use of resources and meaningful dialogue with this community group.
Are there any factors that might prevent outcomes being achieved?	Willingness of some service users and carers to embrace the modernisation agenda.

## 2. Data Collection

What qualitative data do you have about the policy relating to equalities groups (e.g. monitoring data on proportions of service users compared to proportions in the population)?	<ul style="list-style-type: none"> <li>• Putting People First</li> <li>• Our Health, Our Care, Our Say</li> <li>• National Frameworks such as Healthy Plymouth and Joint Strategic Needs Assessment</li> <li>• National Carers Strategy</li> <li>• Statement of Community Involvement/Plymouth Compact</li> </ul>
What quantitative data do you have on the different groups <sup>1</sup> (e.g. findings from discussion groups, information from comparator authorities)?	<ul style="list-style-type: none"> <li>• Self Assessment Survey 2008</li> </ul>

<sup>1</sup> Age, (young/old) disability, Gender (Male, Female), Race, Faith and Belief, Sexual Orientation (Lesbian, Gay, Bi-sexual, Trans

	<ul style="list-style-type: none"> <li>• RAP Return 2008</li> <li>• PSSEX1 Return 2008</li> <li>• Reducing occupancy number at Whitleigh since initial Cabinet Report in 2005</li> </ul>
Please indicate the source of the data gathered? (e.g. Service/Department/Team)	Performance & Business Support Team
What gaps in data have you identified? (Have to put actions to address this in your action plan?)	None identified

### 3. Impact

Please complete the following tables using ticks.

Consider the information gathered in section 2 of this assessment form, comparing monitoring information with census data as appropriate<sup>2</sup> and considering any earlier research or consultation. You should also look at the guidance in appendix 1<sup>3</sup>

Equalities Issue	Positive impact	Negative impact	None	Reasons for decision
Age	X			The modernisation agenda is committed to improving and positively enhancing the health and well being of those people who are aged 50+ currently receiving respite and long term services via Local Authority Residential/Respite Units and their carers, regardless of age, disability, faith, gender, race or sexual orientation.
Disability	X			
Faith	X			
Gender	X			
Race	X			
Sexual Orientation	X			

<sup>2</sup> [www.ons.gov.uk](http://www.ons.gov.uk) (Office National Statistics website)

<sup>3</sup> See SIU equalities legislation paper for additional guidance ([inclusion@plymouth.gov.uk](mailto:inclusion@plymouth.gov.uk))

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### 3.1 Do you think that the policy impacts on people because of their age? <sup>4</sup>

Age <sup>5</sup>	Positive	Negative	None	Reasons for your decision
Young (Children and young people, up to 18)	<b>x</b>			Our target group are vulnerable people and carers aged 18+, nevertheless the modernisation could also positively impact of young members of their families.
Older (Working age, and above)	<b>x</b>			Whitleigh Care Home provides services for adults aged 18+. Their views are sought along with their carers and staff working at the home as part of the consultation exercise.

### 3.2 Do you think that the policy impacts on people with a disability? <sup>6</sup>

Disability	Positive	Negative	None	Reasons for your decision
Visual impairment	<b>x</b>			The modernisation is committed to positively enhance people's quality of life and independence irrespective of any visual / hearing impairment, or physical disability. Whitleigh Care Home provides services for adults who may have a visual or hearing impairment, or may be physically disabled. Their views along with their carers will be sought as part of the consultation exercise. If they have special requirements to enable them to participate in the consultation such as
Hearing impairment	<b>x</b>			
Physically disabled	<b>x</b>			

<sup>4</sup> For demographic data see [www.plymouth-informed.gov.uk](http://www.plymouth-informed.gov.uk) or [www.ons.gov.uk](http://www.ons.gov.uk)

<sup>5</sup> Individual services should look at how the above age criteria best relates to them, and make clear reference to it in deciding on any impact

<sup>6</sup> Disability is defined as an impairment, which has a substantial, long-term adverse effect on a person's ability to carry out normal day-to-day activities.

				Braille documents, audio tapes , mobility aids or representation, this will be provided as appropriate and when requested.
Learning disability			<b>x</b>	Whitleigh Care Home does not provide services to clients with Learning Disabilities or Mental Health related illnesses.
Mental health			<b>x</b>	
Other (HIV positive, multiple sclerosis, cancer, diabetes, epilepsy)	<b>x</b>			Whitleigh Care Home does not provide long term care terminally ill clients. They do however, provide respite and short term care for clients and carers irrespective of any long term chronic illnesses.

### 3.3 Do you think that the policy impacts on people because of their faith/belief? <sup>7</sup>

	Positive	Negative	None	Reasons for your decision
Faith and Belief	<b>x</b>			Services are designed to meet the needs of those with a faith background and therefore during the course of the consultation, any issues relating to this area will be addressed (including requests for Translate Plymouth).

### 3.4 Do you think that the policy affects men and women in different ways?

Gender	Positive	Negative	None	Reasons for your decision
Male	<b>x</b>			The modernisation agenda aims to improve the quality of life for the individual around assessed needs irrespective of their gender.  Whitleigh Care Home provides services for both male and female clients and carers. Their views will be sought irrespective of gender as part of this consultation exercise.
Female	<b>x</b>			

<sup>7</sup> Religious groups cover a wide range of groupings the most of which are Buddhist, Christians, Hindus, Jews, Muslims, and Sikhs. Consider these categories individually and collectively when considering impacts

**3.5 Do you think that the policy impacts on people on the grounds of their race? <sup>8</sup>**

<b>Race</b>	<b>Positive</b>	<b>Negative</b>	<b>None</b>	<b>Reasons for your decision</b>
Promoting equality of opportunity	<b>x</b>			The modernisation agenda and this consultation exercise will be expected to operate within the requirements of the Race Relations Amendment Act 2000. Any specific requirements such as translators or translated documents will be provided as appropriate and when requested. Use of services such as Translate Plymouth will considered in these situations.
Promoting good race relations	<b>x</b>			As above
Eliminating unlawful discrimination	<b>x</b>			As above

**3.6 Do you think that the policy impacts on people because of their sexual orientation?**

<b>Sexual Orientation</b>	<b>Positive</b>	<b>Negative</b>	<b>None</b>	<b>Reasons for your decision</b>
Gay Men	<b>x</b>			Whilst no specific focus has been made in response to peoples sexual orientation, all services including this consultation exercise are expected to promote equality of opportunity and operate within the requirements of the Equality Act of Sexual Orientation Regulation 2007.
Lesbians	<b>x</b>			
Bi-sexual	<b>x</b>			

<sup>8</sup> Under the Race Relations Act, it is unlawful to discriminate against anyone on grounds of race, colour, nationality (including citizenship or ethnic or national origin). Includes Gypsy and Traveller Communities.

Trans communities (i.e. Trans-gender, trans-sexual and transvestite and gender reassignment) <sup>9</sup>	<b>x</b>			
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#### 4. Summary

Which equality groups have positive or negative impacts been identified for (i.e. differential impact). <sup>10</sup>	NONE: Learning Disability and Mental Health (see 3.2)  All other areas are identified as POSITIVE.
Is the policy directly or indirectly discriminatory under the equalities legislation? <sup>11</sup>	The consultation exercise is neither directly or indirectly discriminatory under Equalities legislation.
If the policy is indirectly discriminatory can it be justified under the relevant legislation? <sup>12</sup>	N/A

<sup>9</sup> Transgender/transsexual person: a person whose perception of their own gender (gender identity) differs from the sex they were assigned at birth. A Transvestite will dress as a member of the opposite sex but doesn't have feelings of belonging to the opposite sex or alienation from their own bodies. Source: [www.herts.ac.uk/services/counselling/understanding\\_gender\\_dysphoria.pdf](http://www.herts.ac.uk/services/counselling/understanding_gender_dysphoria.pdf)

Gender reassignment: the process of transitioning from the gender assigned at birth to the gender the person identifies with. This may involve medical and surgical procedures.

<sup>10</sup> Differential Impact suggests that a particular group has been affected differently by a policy, in either a positive, or negative way.

<sup>11</sup> Direct discrimination is treating people less favourable than others, e.g. on the grounds of age, disability, gender, race, religion and belief, sexual orientation.

Indirect discrimination is applying a provision, criterion or practice that disadvantages people, e.g. on the grounds of age, disability, gender, race, religion and belief, sexual orientation and that can't be justified as a proportionate means of achieving a legitimate aim.

(If needed please seek advice from Legal Services and/or your manager)





**Appendix 3**

**Plymouth City Council  
Delegated Decision - Equalities Impact Assessment Template**

<b>Policy</b>	<b>Date</b>
<b>Data used in conducting this assessment</b>	<b>Officer conducting this assessment with contact details</b>

<b>Equalities Issue</b>	<b>Positive impact</b>	<b>Negative impact</b>	<b>None</b>	<b>Reasons for decision</b>
<b>Age</b>				
<b>Disability</b>				
<b>Faith</b>				
<b>Gender</b>				
<b>Race</b>				
<b>Sexual Orientation</b>				

Page 101

The guidance on undertaking a standard EIA (see appendix 1) is also applicable to a basic assessment.

This EIA template is suitable for small-scale assessments of delegated decisions

**Section B: Action**

**5. Please complete your action plan below. Issues you are likely to need to address include**

- What **consultation** needs to take place with equality groups (bearing in mind any relevant consultation already done and planned corporate consultation exercises)
- What **monitoring/evaluation** will be required to further assess the impact of any changes on equality target groups

**Equalities Impact Assessment Implementation Action Plan**

Issue to be addressed	Responsible Officer	Action Required	Timescale for completion	Action Taken	Comments
No issues	Debbie Butcher	EIA to be reviewed	End of October 2009		

**6. Report and publication**

<p><b>Please record details of the report or file note which records the outcome of the EIA together with any actions / recommendations being pursued (date, type of report etc)</b></p>	<p>Review to be undertaken as above.</p>
<p><b>Please record details of where and when EIA results will be published</b></p>	<p>Adult Social Care pages of Plymouth City Council website.</p>

**Name of Officer completing** \_\_Debbie Butcher\_\_\_\_\_

**Signed** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Name of Senior Manager Authorising Assessment and Action Plan for publication** \_\_\_\_\_

**Signed:** \_\_\_\_\_

**Date:** \_\_\_\_\_

