## children and young people's plan 2008 - 2011 2009 - 2010 annual report - part 2 delivery plan



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# annual review

## Annual review of progress against priorities 2009-10

In the second year of our plan (2009-10) much has been achieved to improve the outcomes for Wirral's children and young people with significant improvements in key areas, including:

- A continued reduction in the number of teenage conceptions through robust monitoring of the teenage pregnancy Strategic Action Plan.
- 100% of Wirral schools achieving the national Healthy Schools status well ahead of target.
- Launch of the Health Services in Wirral Secondary Schools programme with twelve schools participating as part of the first phase with a further six schools to follow, including special schools.
- Working in collaboration with the School Sport Partnerships to support the Active Lifestyles Project which will be piloted with 30 schools. These schools have been identified using the National Child Measurement Programme data.
- Target for Human Papilloma Virus (HPV) vaccinations achieved.
- Launch of breastfeeding peer support programme in March 2010 to support breastfeeding mothers.
- Improved support for child care workers engaged with vulnerable children through monitoring and quality assurance of Common Assessment Framework and Team Around the Child activity.
- More children in care are living in stable placements (72.1%

of children in care have lived in the same placement for 2 or more years), and fewer children in care have experienced 3 or more placement moves (9.7%).

- More children with a disability are accessing a wider range of short break services through the Aiming High for Disabled Children programme; with children and families telling us, and being involved in commissioning what they need.
- More Police presence to tackle teenage alcohol consumption through Operation Stay Safe; 3,264 teenagers are engaged with a wide range of services.
- Fewer children in care are living in independent sector residential placements (currently 45 compared to 52 in the previous year).
- We have responded positively to the National Challenge, Gaining Ground and Extra Mile programmes.
- The Intensive Support programme in primary schools has demonstrated positive impacts on raising standards.
- There is now a very comprehensive programme of leadership and management development for schools.
- The Managed Moves Protocol has become firmly embedded into secondary sector and has reduced the level of permanent exclusions.
- 100% of Wirral schools engaged in the 1-1 tuition programme & schools are developing a range of models for tuition delivery.

- Continued improvement in levels of attendance at targeted schools.
- We have achieved a reduction in First Time entrants to the Criminal Justice System.
- The Wirral Young Carers Project is continuing the process of engaging harder to reach Young Carers and their families from BME communities, those living with the consequences of parental problematic drug and alcohol use and those living with the consequences of parental mental health problems.
- The findings from a 'Feel Safe, Play Safe' survey were converted into an action plan designed to reduce children's fear of playing beyond the confines of their home environment.
- Over 200 young people received an Open College Network qualification in 'Personal and Social Skills' via their participation in programmes with Wirral Brook.
- The Youth opportunity Fund Grant paned decided to top slice one hundred thousand pounds from the Youth Opportunity Fund for allocation to the Voluntary, Community and Faith sector.
- The successful delivery of the 'Wirral Apprentice' programme which received national recognition.
- The redesign of the local offer for learners with Learning Difficulties and Disabilities (LDD) supported by the Wirral brokerage project.

- The delivery of the September Guarantee for 16 and 17 year olds in Wirral.
- The extension of the Activity Agreement Programme for vulnerable Not in Education, Employment and Training (NEET) young people aged 16 and 17.
- Continuing year on year reductions in the number of young people NEET despite the global recession.

We also recognise that there are key areas that continue to be a challenge, these include:

- Reducing teenage conception rates with an aim to achieve very challenging national targets.
- Realisation of the investment in social care resulting in supporting more vulnerable children in the community, making children's plans more timely and robust and safely reduce the high number of children in care.
- The reduction of 16-18 NEET to meet targeted levels.
- The ongoing recession and narrowing the gap between experiences and economic well being in different parts of the Borough.
- The impact of the recession creates an uncertain financial climate in which to plan future services.

## outcome area: being healthy

"We want to improve all children's health and to narrow the gap in health outcomes experienced by our most disadvantaged children."

## Priority: Reduction in the harmful consequences of risk taking behaviour

What we said we would do	What we did	Status
<ol> <li>Implement the Children and Young People's (CYP) Substance Misuse Plan which addresses issues around drugs and alcohol.</li> <li>Develop a package of interventions for families at risk of substance misuse to improve parenting skills.</li> </ol>	Project commissioned with CYPD to develop a model of evaluated service delivery based on the 'whole families approach' to ensure provision of support services to families of alcohol users, specifically children (age 14-17) of harmful/hazardous drinkers, with particular emphasis on engagement of alcohol affected families with specific needs that are less likely to engage.	In progress on track
<ul> <li>Refresh pathways to reduce the number of Hospital Admissions, including A&amp;E attendance and improve links to Young People's Services.</li> </ul>	Joint commissioning of CAMHS / Youth Service to work alongside A&E staff to look at trends of young people admitted to A&E where alcohol misuse is related presentation and employ alcohol pathway. Findings of this project will be available to NHS Wirral by the end of March 2010.	In progress on track
• Support the expansion of the Young Persons Alcohol Intervention Project through recurring funding to 2013.	Continued provision of interventions to support young people at risk, to improve confidence & competence and encourage them to make the right decisions about drinking alcohol. Parents supported to educate their children about the risks of alcohol, and supported to stay together and break the cycle of problems being transferred between generations.	Completed
<ul> <li>Develop and deliver a Wirral wide social marketing campaign in relation to Young People and parents / carers.</li> </ul>	Insight work into social marketing campaign completed. Campaign Wirral wide Summer 2010.	In progress on track
<ul><li>2. Implement the Teenage Pregnancy Strategic Action Plan.</li><li>Increase strategic leadership and direction through</li></ul>	Strategic Leaders appointed across Children's Trust along with champions & accountable leads for priority areas.	Completed
<ul> <li>appointment of teenage pregnancy strategy champions.</li> <li>Implement and support 'The Family Nurse Partnership'</li> </ul>	Steering Group established and Coordinator and Nurses appointed (November 2009).	In progress on track
<ul> <li>Implement and support the ranny Nuise rannership across Wirral for vulnerable first time teenage parents.</li> <li>Enhance provision and support available to children in care to recognise their vulnerability to teenage pregnancy.</li> </ul>	Joint commissioning of targeted support for Children in Care (CiC) and Foster Carers. Holistic assessments conducted for all CiC through LAC Nursing service.	In progress on track
<ul> <li>Embed support for teenage parents in targeted youth support agenda, including the development of the Joseph Paxton Site.</li> </ul>	Better Support Sub Group of the Teenage Pregnancy Steering Group is chaired by Head Teacher from Joseph Paxton site.	In progress on track
<ul> <li>Review YAIP pathways to include EHC service for young people.</li> </ul>	Pathway reviewed & young people signposted for sexual health services through engagement with youth service.	Completed
<ul> <li>Monitor the effectiveness of the Young Woman's Antenatal Group run through Children's Centres.</li> </ul>	Referral route established and implemented successfully, evaluation of effectiveness required.	In progress milestone rescheduled
<ul> <li>Monitor and evaluate targeted support for teenage parents delivered by Children's Centres, e.g. Beacon Babes.</li> </ul>	Groups in existence but evaluation of effectiveness required.	In progress milestone rescheduled

What we said we would do	What we did	Status
• Ensure Teenage Pregnancy Strategic Action Plan and Parenting strategy are joined up to reflect role of parents in reducing conceptions and raising aspirations.	Parenting commissioner attends Being Healthy Group and Teenage Pregnancy Steering Group top ensure strategies joined up. Newly appointed TP Coordinator to further develop links between the two groups.	In progress on track
<ol> <li>Implement the Sexual Health Plan including increasing the proportion of eligible young people screened for Chlamydia.</li> <li>Increase Chlamydia screening sites by 25% through implementation of Heath Services in Schools (HSIS) within Schools and Colleges and across Children's Centres.</li> <li>Increase availability and access to young people friendly sexual health and contraceptive services through HSIS and Emergency Hormonal Contraception (EHC) in Pharmacies.</li> <li>Formally launch the Sexual Health Policy and Guidance across Children's services and include in training for all staff.</li> <li>Establish robust Condom Distribution scheme across Wirral using accessible and user friendly settings for young people to comply where possible with You're Welcome Quality Criteria.</li> </ol>	<ul> <li>HSIS launched November 2009 across twelve schools in the first phase. Chlamydia screening offered with further targeted approach to those sites providing highest positivity and development of a call / recall marketing norm across all sites.</li> <li>Phase two HSIS to include further twelve schools by April 2010.</li> <li>Policy still to be launched although features in sexual health training for front line staff.</li> <li>Withdrawn from NHS Strategic Plan due to poor evidence base for effectiveness. Agreed to include as requirement in all commissioned outreach services.</li> </ul>	In progress on track In progress on track In progress milestone rescheduled Deleted
<ul><li>4. Increase the take up of Kooth.com.</li><li>Incorporate within the Healthy Schools Action Plan.</li></ul>	<ul> <li>Action plan to increase take-up of Kooth.com is incorporated within Healthy Schools Action Plan.</li> <li>Rolling programmes of delivery and sign up are embedded within 11 secondary schools.</li> <li>A pilot scheme across Wirral was trialled in 7 primary schools to support Year 6 pupils with transition in the Summer Term 2009.</li> <li>A presentation and workshop was delivered to the Primary Pupil Panel which accessed 70% of all primary schools to raise awareness of Kooth.com in the Summer Term 2009.</li> <li>In March 2009 there were 1836 registered users. From April to December 2009 the number has increased to 4051 registered users with sustained uptake in the 12-15 year old age range.</li> <li>From March to September 2009 the number of male users increased from 25% to 34%.</li> <li>Healthy schools is represented on the Kooth.com steering group.</li> </ul>	Completed
<ul><li>5. Develop and deliver actions to prevent accidents within and outside of the home environment.</li><li>Develop an action plan including actions for each Children's Centre aimed at reducing local accidental injury rates.</li></ul>	Review undertaken of accident prevention scheme and joint development of Royal Society for the Prevention of Accidents (RoSPA) scheme across the NHS, Children's Centres, and Homestart Wirral. Also reported through Staying Safe	In progress on track

### *Priority: Reduction in the prevalence of overweight children and obesity in children.*

What we said we would do	What we did	Status
<ol> <li>Implement the Child Obesity Action Plan incorporating the care pathways for children 0-2yrs, 2-4yrs and 4-16yrs, which includes action on physical activity, food and drink, breast feeding &amp; Healthy Schools, Pre-Schools and Children's Centres.</li> <li>Deliver the National Child Measurement Programme (NCMP) to include staff training, production of appropriate resources and providing feedback to parents.</li> </ol>	<ul> <li>Weighing and measuring of children May - July 2009, target coverage achieved.</li> <li>School Nurse Support Team delivered activities on healthy eating and physical activity alongside the measuring which was well received by school children and staff.</li> <li>6,900 Feedback letters sent to parents of all children measured informing them of their child's weight.</li> <li>Parents drop in sessions offered by school nurses, five 'healthy weight workshops' were offered over the school holidays for Year 6 families and a focus group for parents, this is under review due to low uptake.</li> <li>Specially designed workbooks have been produced and distributed to school nurses and child weight management services.</li> </ul>	Completed
<ul> <li>Commission additional providers to target weight management in early years.</li> </ul>	<ul> <li>Launch of new adult, child and family weight management services took place in March 2009 with over 130 professionals attending.</li> <li>New child referral forms have been developed and distributed to a wide range of health professionals.</li> <li>Additional services for adolescents have been commissioned.</li> </ul>	Completed
• Monitor existing contract with MEND and Lifestyle and Weight Management service to ensure referral targets met.	<ul> <li>The number of referrals is low and behind target - marketing and publicity campaign planned for 2010/11 to boost take up of service.</li> <li>2 physical activity 'clubs' are available specifically for Mind, Exercise, Nutrition, Do It! (MEND) and LWMS children.</li> </ul>	In progress milestone rescheduled
• Ensure access to relevant activity sessions for 0-5 year olds in Children's Centres, e.g. Top Tots, Active Tots, Fizzy Tots and that Active Tots resources are incorporated into the Healthy Child Programme.	<ul> <li>All Children's Centres offer a wide variety of physical activity sessions aimed at children of different ages, e.g. Karmatime Yoga, Giggle &amp; Wiggle, Indoors &amp; Outdoors and Merry Movers, and are well attended.</li> <li>10 Active Tots sessions held in December and resource packs distributed in January and February 2010.</li> </ul>	In progress on track
• Ensure school children aged 5 – 16 have weekly access to 2 hours of high quality PE and Sport in school and a further 3 hours outside school hours. To be monitored through the School Sport Partnership Programme.	<ul> <li>71% of schools have achieved the 2 hours of high quality PE.</li> <li>Pensby School Sport Partnership (SSP), (35 Primary and 9 Secondary Schools): 46% of school children are achieving 3 hours of PE and School Sport and 40% achieving 5 hours.</li> <li>Park SSP – (35 Primary and 10 Secondary Schools): 48% of school children are achieving 3 hours of PE and School Sport and 40% achieving 5 hours.</li> <li>Bebington SSP – (29 Primary and 7 Secondary Schools): 47% of school children are achieving 3 hours of PE and School Sport and 39% achieving 5 hours.</li> </ul>	In progress on track

What we said we would do	What we did	Status
• Implement the Active Families Sport England & Physical Activity Alliance Project for 0-17 year olds and their families.	<ul> <li>3 Buggy Park Fitness classes available in two parks with an average attendance of 22 women.</li> <li>3 Teen Fitness sessions commenced in November at West Kirby Concourse Leisure Centre.</li> <li>Currently investigating the development of a Junior Invigor8 pass to target overweight and obese children.</li> </ul>	In progress on track
<ul> <li>Implement Sport England's Free Swim programme for under 18's across Wirral Leisure Centres.</li> </ul>	• Between May – Aug 2009 10,733 children registered for the Free Swim initiative.	Completed
<ul> <li>Ensure Obesity Action Plan and Parenting Strategy are joined up to reflect role of parents in reducing obesity.</li> </ul>	• Parenting coordinator now attends Being Healthy to take this action forward.	Completed
<ul> <li>Ensure BMI data from childhood screening programme (aged 2-2½ years) is collated and used as a measure to inform appropriate commissioning of services.</li> </ul>	• Staff given training in preparation for the launch of the Healthy Child Programme July 2009. Health Visitors, Community nursery nurses and staff nurses are competent to complete reviews. Child Health data systems are being prepared to collate at 2-2½ years.	In progress on track
<ul> <li>Implement 'Wirral's Taste for Healthy Food Policy', including specific guidance on public venues and residential settings.</li> </ul>	<ul> <li>Healthy Food Policy &amp; guidance have been produced and now in the process of working with the PCT and the Council to adopt these policies. Policy has been presented at the Council's Corporate Health Group &amp; Cabinet.</li> <li>Early Years settings and Schools have had exemplar food polices for a number of years and 93% of Wirral Schools have a Whole day Food and Nutrition Policy.</li> </ul>	In progress on track
• Deliver the Breastfeeding Strategic Action plan to increase initiation & prevalence of breastfeeding at 6-8 weeks, to include roll out of BOAT integrated ante natal programme across Wirral, recruiting an Advanced Practitioner for Infant Feeding, implementing UNICEF Baby Friendly standards in the hospital and the community, maintain Baby Friendly Status in Children's Centres and developing a peer support programme and an effective communication strategy.	<ul> <li>Breastfeeding initiation and duration rates continue to be collated quarterly.</li> <li>Advanced Practitioner appointed by PCT in October 2009 to proceed with achieving the UNICEF Baby Friendly Initiative in the community.</li> <li>Successful funding application to Department of Health to increase capacity at Hospital to achieve UNICEF Baby Friendly Initiative. Infant Feeding Specialist and administrator appointed.</li> <li>UNICEF Project management training attended by key staff.</li> <li>Peer Support Provider identified. Scheme co-ordinator and administrator appointed. Peer Support Volunteers to attend UNICEF training and programme launched March 2010.</li> <li>NHS Wirral has joined an existing social marketing campaign. Campaign materials developed to be tested with the public. Campaign awareness days arranged for professionals to take place in March 2010.</li> </ul>	In progress on track
• Deliver Healthy Eating Groups to parents with very young children through Children's Centres, along with advice on healthier lifestyle choices based on the 'Change 4 Life' programme.	Family Support Teams advise families on "Healthy Eating" following the key messages from Change4Life and signpost to weaning groups facilitated by Health Visiting teams. Sessions delivered include Bumps to Babes, Beacon Babes, Looking at Cooking, Fun with Food etc.	In progress on track
• Ensure the Henry Programme is accessed by all Children's Centres and Early Years practitioners.	Training programme developed to enable roll-out of the 'Heath, Exercise and Nutrition for the Really Young' (HENRY) programme. Sub-regional planning taking place for delivery across the area.	In progress on track

## Priority: Implement the Child Health Strategy

What we said we would do	What we did	Status
1. Implement the Healthy Child Programme (0 – 5 years), in partnership with Children's Centres, to include targeted and universal care packages and incorporating support from the Family Nurse Partnership Programme for vulnerable and hard to reach families.	<ul> <li>Developing teams led by health visitors.</li> <li>Schedule developed and implemented in June 2009.</li> <li>Family Nurse Partnership set up, in progress and on target.</li> <li>Developments of CHiCC to include commissioning strategy.</li> <li>Planned CPD for all practitioners, including GPs, to ensure competency.</li> <li>Maternity review implemented.</li> <li>Think Family developed.</li> <li>Integrated Working Guidance reviewed.</li> <li>Ongoing delivery of parenting strategy.</li> </ul>	In progress on track
2. Monitor the effective provision of CAMHS including the embedding of the CHICC project and design and implement a workforce development strategy and implement recommendations arising from the plan.	Continue to deliver comprehensive CAMHS.	In progress on track
3. Early Years and Teen Life Check programmes available and easily accessible to parents and young people and offered through a range of services, to include HSIS, and Children's Centres.	Lifecheck steering group established and promotional plan agreed and delivered across target groups. Youth workers employed to promote Teen Lifecheck and ensure links made to Kooth.com.	In progress on track
4. Monitor and evaluate the implementation of the Health Promoting Early Years Programme.	56 settings are committed to the health promoting early years programme (HPEY) with 6 achieving HPEY status in June 2009.	In progress on track
5. Monitor and evaluate the BOAT (Better Outcomes Achieved Together) Project within Children's Centres.	BOAT programme delivered in some children's centres and early years' settings evaluated in December 2009 for further programme roll out in March 2010.	In progress on track
6. Implement the Healthy Schools Action Plan arising from the Self Evaluation Toolkit to ensure that 10% of schools are engaged in the 'Enhanced Healthy Schools Programme' by 2010 and ensure nutrition and oral health training is provided to 50% of all Wirral schools throughout 2009/10.	100% of schools achieved Healthy School status. Over 50% of schools have received oral health and nutrition training.	In progress on track

## *Priority: Inequalities in the health of children and young people are reduced.*

What we said we would do	What we did	Status
1. Ensure Actions relating to CYP in the Health Inequalities Plan are included in the Being Healthy Strategic Action Plan. Monitor and evaluate the plan throughout the period to ensure outcomes are being met to reduce health inequalities.	<ul> <li>Teenage Pregnancy Strategic Action Plan monitored through Teenage Pregnancy Steering Group and Being Healthy Group.</li> <li>Child Accident Prevention Scheme under review and reported through Staying Safe Group.</li> <li>Obesity programme and breastfeeding rates monitored through Obesity Programme Board and reported through Being Healthy.</li> <li>Actions to reduce smoking in pregnancy reviewed through Being Healthy and closer links forged with NHS strategic plan smoking programme.</li> </ul>	In progress on track
<ul><li>2. Develop specific actions to:</li><li>Reduce the number of dental caries through the Fluoride Milk Programme, the Bright Smiles Programme and the Dental Bus</li></ul>	Health visitors deliver dental health advice at 9 month and 2 year reviews. Oral health dental bus visits children's centres.	In progress on track
<ul> <li>Reduce the proportion of women who continue to smoke throughout pregnancy.</li> <li>Ensure all Children's Centres have fully integrated plans on smoking cessation, obesity, breast feeding, oral health and services for disabled children including access to relevant specialist agencies and ensure these plans are fully aligned with complimentary service plans and activities.</li> </ul>	<ul> <li>Smoking cessation nurse employed to work across WUTH. Midwives and health visitor discuss at every opportunity (through hand held notes system) and refer for support.</li> <li>BOAT programme delivered in some children's centres and early years' settings, following conclusions of evaluation in March 2010 will roll out programme.</li> <li>FEAST courses run for parents in most children's centres.</li> <li>Pro-Score activities commissioned in 10 children's centres identified as having highest rates of obesity in reception aged children.</li> <li>Active Tots and Health Promoting Early Years Programme across all children's centres.</li> <li>Breast feeding baby cafes in most children's centres.</li> <li>Oral health dental bus visits children's centres.</li> <li>Aiming High programme to roll out across children's centres.</li> <li>Parents groups run through children's centres for parents of children with disabilities.</li> <li>Regular meetings between children's centre managers and health visitor managers to align plan &amp; activities.</li> </ul>	In progress milestone rescheduled In progress milestone rescheduled
3. Implement actions to increase (and maintain) the take up of childhood vaccinations and immunisation programme. Implement new vaccination programmes effectively ensuring high uptake from inception	<ul> <li>Target for HPV vaccinations achieved.</li> <li>Swine Flu vaccination to be implemented as directed.</li> <li>Health Visiting teams routinely raise awareness of immunisation programme and review status with families to promote uptake.</li> </ul>	In progress on track

What we said we would do	What we did	Status
4. Develop and implement actions to reduce the number of infant mortalities.	<ul> <li>Co-sleeping policy drafted and campaign delivered in local shopping centres in partnership with LSCB.</li> <li>CONI and CONI+ programme supported through health visiting service.</li> <li>Accident data reported through Staying Safe.</li> <li>Collision Reduction Partnership developing actions to reduce children killed or injured on roads – to be reported through Being Healthy.</li> <li>Baby Lifecheck programme being implemented across all early years settings and promoted by health visitors through hand held notes system.</li> <li>New born screening programme implemented to ensure early identification of congenital abnormalities.</li> </ul>	In progress on track
5. Implement and start to embed the TaMHS (Targeted Mental Health in Schools) project in Wirral.	<ul> <li>External trainers commissioned to train health visiting teams for early identification of mothers with mental health needs and use of Edinburgh Post Natal depression scale and HADS.</li> <li>A joint commissioning group consisting of multi agency partners meets quarterly. This feeds into the Being Healthy group.</li> </ul>	Completed
<ul> <li>6. Develop CAMHS to include</li> <li>Joint commissioning of mental health promotion and early intervention support</li> <li>Enhanced service for CYP with Learning Disabilities</li> <li>Appropriate accommodation for 16 – 17 year olds who</li> </ul>	Additional investment from NHS Wirral has increased the size of the Learning Disability team. The team are now in process of drawing up professional pathways and transition documents and increasing contact across the multi-agency forum for this group of children and their families. Maple ward has now been opened in Chester for any young person requiring inpatient care with a higher	In progress on track In progress on
require in patient placements	level of psychiatric need than admission to YPC. This in line with government directive regarding young people not being admitted to Adult Mental Health beds where possible.	track
• 24 hour cover in partnership with the Acute Hospital	24 hour cover is in place with a policy of procedures jointly agreed with Arrowe Park Hospital Paediatric department, for any young person with psychiatric or Mental Health needs being admitted out of hours.	In progress on track

## outcome area: staying safe

*"We want to support children earlier, closer to their communities and wherever possible by supporting families."* 

Priority: More children grow up in secure, stable families where they belong, either through receiving timely, earlier intervention and support within their communities, or through belonging to permanent, substitute families.

What we said we would do	What we did	Status
1. Embed improved system and process underpinning the child concern model, which measures and supports Common Assessment Framework (CAF) and Team Around the Child (TAC).	1. Monthly data reports produced to monitor CAF's completed and needs identified; 402 completed by December 2009. Monthly CAF Quality Assurance (QA) report produced following multi-agency assessment monitoring. Six month CAF review undertaken and reported. Integrated Working Guide updated, briefings held in spring 2010.	In progress on track
2. Review and improve systems and processes to support and deliver timely multi-agency plans for children in need.	2. Post of Children in Need (CIN) quality assurance/Independent Reviewing Officer (IRO) established. Cross agency audit of CIN and TAC cases undertaken in February 2010. LSCB reviewing escalation process and protocol for domestic violence referrals with the Police.	In progress milestone rescheduled
3. Implement the strategic plan to support the coherent and joined up development of Area Teams / Children's Centres & Extended Schools.	3. Integrated working group has continued to implement improvements e.g. Integrated Working Guide, Co- location plan for Area Teams, national co-location funding secured. New Preventative Services Project Board to be implemented from 1 April 2010.	In progress milestone rescheduled
4. Continue to provide credible programmes for courts to consider as alternatives to custody, for 'prolific and serious' offenders including implementation of Multi-Systemic Therapy.	4. Youth Rehabilitation Order (YRO) implemented, alongside Scaled Approach to increase flexible, proportionate approach to young people who offend. Multi-Systemic Therapy (MST) implemented, targeted at 11-17 year olds at risk of care or custody.	In progress on track
5. Implement the Area Team development plan, which includes co-locating Area Teams.	5. 7.5 Area Team Leaders permanently recruited, new Information Sharing Co-ordinators (7.5) recruited. Plan supported by national remodelling findings. Family Nurse Partnership have attached HV's in Area Teams with new health screening to allow for early alert to health, speech and language difficulties.	In progress milestone rescheduled
6. Review and refresh the Parenting Strategy; implement PEIP; monitor the impact on improved outcomes delivered by commissioned services.	6. Multi-agency Parenting Steering group meets bi-monthly, mapping survey issued January 2010. 0-19 Commissioning undertaken – monitoring group meets bi-monthly. PEIP (Parenting & Early Intervention Programme) co-ordinator in post from January 2010 offering training to deliver a coherent approach to supporting parents. Parenting Development Co-ordinator & Catholic Children's Society delivered Nurturing Programme. Family Group Meeting training delivered for Area Team Family Support.	In progress on track

What we said we would do	What we did	Status
7. Implement plans to further develop and co-located services to deliver IYSS / TYS.	7. Youth provider meetings in each District, to ensure co-ordination of local offer to meet the needs of 13-19 year olds.	In progress milestone rescheduled
8. Support more children and adolescents with their families through developing the work of the Adolescent Support Team. Extend capacity to deliver more family group meetings, and increase short break provision to support more children and adolescents with their family in the community.	8. Rolling programme of adolescent workshops with required attendance for all newly qualified social workers. Fostering Service prioritising increased short breaks for adolescents.	In progress milestone rescheduled
9. More timely progression of plans, for more children to be adopted or achieve permanence through adoption, Special Guardianship and Residence Orders, where this will best meet their needs.	9. Tracking systems for children to achieve adoption placement within 12 months of decision enhanced. Sessions of permanence training delivered and the Special Guardianship service has been reconfigured. The results are improved timescales, reduced waiting times and closer monitoring. Current projections are that 75% of children are placed within 12 months of the "should be placed for adoption" decision.	In progress on track
10. Implement the multi-agency 'Turning the Curve' action plan to safely reduce the numbers of children in care, particularly focusing on reducing the number of children in care placed at home with parents.	10. Turning the Curve action plan delivered resulting in: an increase in the number of children achieving Special Guardianship Orders (SGC); reduction in Placed with Parents by 20 since 2008; 617 children in care at December 2009, a slight reduction on the previous year; increased placement stability (NI 62) with fewer children having 3 or more moves; an increase in children in care for 2.5 years or more staying in the same placement for 2 years, from 67.8% to 72.1% (NI 63).	In progress milestone rescheduled
11. Sustain improved processes for contact, referral and assessment – the 'front door' into social care.	11. New Permanent Practice Manager at Central Advice and Duty Team. Weekly monitoring of a new Contact, Referral and Assessment Action Plan and a re-launched MARF to track feedback to agencies, improve escalation procedures and formally review thresholds through auditing, Cross Merseyside Review of 66 priority cases with an action plan delivered through the LSCB. The number of referrals progressing to initial assessment (NI 68) is 64.7% at December 2009 a slight increase from 64.3% April 2009. Increase of 611 assessments undertaken in 9 months, compared to same period in previous year.	In progress on track
12. Provide strong organisational and operational links between Children's Centres and fieldwork services, focussing on safeguarding systems and training to meet assessed needs.	12. Improved joint working between Children's Centres and Social Care in all Districts including joint training delivered e.g. Team Around the Child and Domestic Violence.	In progress on track

What we said we would do	What we did	Status
13. Develop the appropriate involvement of children's centres in the delivery of support to all children 0-5 subject to a child protection plan.	13. Children's Centre leads are routinely invited to child protection conferences for 0-5 year olds, and other significant child in need meetings.	In progress on track
14. Implement early intervention and planning of services to families with children under five involving midwives, health visitors, children's centre outreach workers and social care professionals with a focus on the needs of the reach population of the centre.	14. Family support referrals to Children's Centres received from a range of professionals. A range of programmes are offered dependent on local need.	In progress on track
15. Improve consistency of response, in accordance with regulation to children living with Private Foster Carers.	15. Multi-agency training programme delivered – specific programme for social workers regarding process and timescales. District Manager audit of cases to ensure threshold consistency with report to LSCB annually. 37 private foster carers approved, majority visiting children from Belarus.	In progress on track
16. Implement the Children's Social Care and Safeguarding restructure, to increase the number of social workers, increase capacity to deliver improved management and performance oversight, and expansion of LSCB activity.	16. Number of posts recruited to with ongoing advertising. Structure implemented by April 2010. Safeguarding induction/refresher training developed to ensure new and existing staff have core competencies. LSCB Business Manager in post, key task to develop sub-committees and oversight of agency performance against section 11 standards. Reviewed LSCB budget: additional funding from schools allows for Common Assessment Framework post to continue.	In progress milestone rescheduled

# Priority: Reduce the incidence of anti social, risk taking and harmful behaviour experienced by children and young people.

What we said we would do	What we did	Status
1. Sustain and strengthen joint working between the CYPD, NHS Wirral and Wirral Family Safety Unit to further reduce the incidence of domestic violence and repeat occurrences.	1. All health visitors, NHS Trust staff and 7 Children's Social Care Teams have been trained in MARAC (Multi-agency Risk Assessment Committee) and domestic abuse (DA) awareness. MARAC repeat cases reduced to 12% (NI 32) (nationally 23%). Agreed process between Central Advice and Duty Team and Family Support Unit (FSU) to check all contacts to inform decision making. FSU representation at TAC meetings following MARAC referral. LSCB review of Domestic violence policy and practice has embedded clear referral pathways.	In progress milestone rescheduled
2. Continue to develop more consistent targeting of services for children at risk of offending, through early identification systems triggering YOS input.	2. Wirral Youth Offending Service involvement with the Challenge and Support Respect Project and School Cluster Programmes assisting families with young children who are assessed as developing anti social behaviour.	In progress on track
3. Review Merseyside Protocol and further develop services for children identified as missing from home / care, and / or involved in sexual exploitation.	3. Merseyside Protocol reviewed, endorsed by LSCB and issued following national guidance. Contract awarded to current provider (Barnardos) for Safer Future project (missing from home/care, sexually harmful behaviour & sexual exploitation). Barnardos working with secondary schools on young runaways, targeting areas with the highest incidence.	In progress on track
4. Monitor and review children's accident and emergency referral pathway, to continue to reduce the incidence of children presenting following excessive alcohol consumption / substance misuse.	4. A risk taking behaviour pathway is in place within the A&E department. From April to December 2010, 80 young people under the age of 16 attended either the Children's Emergency Department or the main Accident and Emergency Department following ingestion of alcohol. Of the 80 attendees, 36 took up the offer of an appointment with Response and 13 engaged with the service. There is currently work ongoing to better target these patients through staff education by Response workers and possibly having a Response worker working in the department at times of peak attendances.	In progress on track
5. Jointly deliver Operation Stay Safe, and monitor the impact upon reduced incidence of young people's excessive consumption of alcohol.	5. 12 Stay Safe operations between June and November 2009. 3,264 children engaged with by a variety of agencies. 12 young people moved to a place of safety, none by use of legislative powers. Evaluation to include impact on young people's consumption of alcohol.	In progress on track
6. Promote, develop and deliver parental guidance and awareness raising strategies to keep children safe, including the co-sleeping awareness campaign.	6. Care of the Next Infant scheme to be commissioned and delivered by Wirral NHS provider services and Wirral University Teaching Hospital. Safe sleeping guidelines ratified across the Health economy and delivered to midwifery & Health Visiting staff. Awareness raising event in local shopping centre took place in October with promotional leaflets given to local residents.	In progress on track
7. Continue to deliver comprehensive LSCB training plan for all staff, level 1-3 and refresh Section 11 Audit and Action plan by all LSCB Board members.	7. Training plan delivered. Section 11 Audit overview report completed by independent consultant and reported into LSCB.	In progress on track

# Priority: More children are safe at home, at school and in the community, including reducing road traffic accidents and bullying.

What we said we would do	What we did	Status
1. Implement the road safety strategy for children through the Road Safety partnership.	1. Road safety strategy continues to be delivered.	In progress on track
2. Extend and develop opportunities for children and young people to tell us what makes them feel unsafe, and deliver programmes to improve their safety and resilience.	ung people to tell us what makes them feel unsafe, and information has been used to develop training programmes delivered in February 2010 for play staff to promote protective behaviours, road safety and promoting positive behaviour. Opportunities are built into	
3. Continue to support the development of anti-bullying strategies in schools, on school transport, and in community facilities. Develop and disseminate an LA Anti-Bullying Policy; raise awareness among parents of bullying – specifically e-safety and cyber-bullying (in line with the national focus for 2009).	3. 16 workshops were delivered for parents and carers on cyber bullying during Wirral Anti- bullying week (16-20 November). Draft policy statement is undergoing stakeholder consultation with a launch scheduled for September 2010.	In progress milestone rescheduled
4. Implement and evidence learning from Child Death Overview Panels.	4. Annual report on local child deaths agreed at LSCB and available on website. Wirral are active members of regional and sub-regional group on learning from child death events.	In progress on track
5. Children's centres to develop action plans and activities designed to reduce the rate of emergency hospital admissions caused by unintentional and deliberate injuries to children aged 0 – 5 resident in the reach area of the centre.	5. Range of activities developed and implemented – "Beep Beep" road safety awareness; first aid training for parents; parenting courses and parenting support; domestic violence awareness, signposting and 'freedom' training. CAPT training for staff and parents. New Child Safety Scheme with additional capacity to be implemented by April 2010.	In progress on track

## Priority: Children in care are safe and supported.

What we said we would do	What we did	Status
1. Complete the review of residential short break and community services for children with learning disabilities and complex health needs in accordance with Aiming High for Disabled Children Strategy.	1. Aiming High programme implemented and is low risk rated due to its impact and the progress made. A strong parent forum, good governance structure and workstreams are in place. New services have been commissioned with full parental engagement in commissioning process and services are being delivered to a wide service user base.	In progress on track
2. Improve the quality of multi-agency transition arrangements for children in care with learning disabilities and / or mental health issues.	2. Co-located Transition Team with Department of Adult Social Services in place following agreement in January 2010. 49 young people aged 16 plus to be allocated to the Team; 116 aged 14 plus to receive joint planning from the Transition Team.	In progress milestone rescheduled
3. Ensure good or excellent standards of care in all directly provided residential care, foster care and commissioned services.	3. Practice review completed in 2 residential homes (for children with a disability) achieving adequate in inspections, improvement plan in progress. Adoption Task Force monitored action plan has lead to an improvement in the numbers of children with adoption plan. In January 2010 20 children have been adopted, 12 placed and papers lodged and 11 placed not yet lodged. Proposals confirmed to increased capacity to provide post adoption support. Fostering service retained "good" Ofsted rating with 268 approved carers. Mainstream Children's Home retained "good" Ofsted rating.	In progress milestone rescheduled
4. Improve the quality and choice of provision for children becoming looked after, particularly in LA fostering provision and reduce the number of children living in out of borough independent sector residential placements.	4. Provider forum meets to plan how services provide support for children with the most complex needs locally. Independent Placement Panel monitors use of independent placements, ensuring in house alternatives used wherever possible and placements achieve good quality outcomes and value for money. A LAC Service Manager is in post and the fostering recruitment strategy has been refreshed. Numbers out of Borough have reduced from 52 in April 2009 to 45 in December 2009.	In progress on track
5. Maintain a full complement of trained and skilled social workers, so that all children in care have a qualified and suitably trained social worker to meet their needs in a timely way.	5. Rolling recruitment in place and new staff development officer in post from February 2010 to develop training pathways for all social work staff including embed NQSW (Newly Qualified Social Worker), Early Professional Development and ASW (Advanced Social Worker) outcomes framework for training and supervision. 102 social workers in post, out of a full complement of 111 (9 new posts confirmed in year). December 2009 94.3% children allocated to a qualified social worker.	In progress milestone rescheduled

# *Implement the government action plan in response to Lord Laming review of protection of children in England.*

What we said we would do	What we said we would do What we did	
Delivery plan outlined in the Local Safeguarding Children Board Business plan.	LSCB have reviewed the capacity to deliver key elements of the national and local requirements and changes made thus far: interim independent chair secured for 2010 for 24 days per year; LSCB Business Manager recruited; Local Authority Designated Officer post established; Independent chair for Serious Case Review Panel and CAF Quality Assurance Officer post agreed and financed through Board; Lead Member now a 'participating observer'. Review of Children's Trust and LSCB relationship following national Working Together consultation carried out in January 2010. PCT and Acute Trust reviewed safeguarding capacity against national guidance (NICE) and capacity increased. Wirral LSCB taking part in Social Care Institute for Excellence (SCIE) pilot for improving the Serious Case Review framework.	In progress on track

## outcome area: enjoy and achieve

*"We want to raise the achievement of all our young people and to narrow the gap in attainment experienced by our most disadvantaged children."* 

### Priority: Public money is spent to maximum effect in all our schools.

What we said we would do	What we did	Status
1. Remove surplus capacity in Primary & Secondary Schools through phased reviews of provision across the Borough	Work continues with the phased programme for the review of surplus places in both primary and secondary schools. In primary schools we are in the process of completing Phase 5, which is delayed as a consequence of the request to explore sites. The analysis for Phase 6 has begun. In secondary schools we are in the process of supporting the DCSF to establish an Academy as part of Phase 1. Phase 2A is making good progress.	In progress milestone rescheduled

# Priority: Young children and families are well supported, especially the most vulnerable, through the network of Children's Centres

What we said we would do	What we did	Status
1. Further develop the governance and scrutiny function of 'Wirral's Children First' Strategic Board. Develop sharing of	Membership has been revisited to ensure that the Early Years Outcome duty is fully represented.	Completed
good practice & ensuring consistency of policy and approach across Children's Centres in all their work.	Policy review cycle in place in partnership with Equality Impact Assessment (EIA) lead, which has resulted in all policies meeting the requirements of EIA quality indicators.	Completed
2. Ensure priority is given to improving the outcomes for vulnerable families in the 5 ECM themes, via continuous	Soft smart has been replaced by E Start. This is a more effective management information system for managers to use to measure impact in the future.	In progress on track
data analysis, regular reports to the board, development of case studies of good practice. Deliver a conference to show- case the work of the Children's Centres.	Children's Centre Managers and the Team Leader provide reports to every board meeting.	Completed
case the work of the children's centres.	A conference is to be planned for Autumn 2010.	In progress on track
3. Use of tighter performance management structures and common agendas across children's centres; develop integrated multi-agency networks across areas and districts.	New Performance Management system in place which has resulted in priorities identified linked to targeted resources.	In progress on track
4. Create robust information sharing protocols and systems across all partners.	First for Families model in place, however, more discussion with health colleagues required.	In progress milestone rescheduled
5. Develop and pilot the role or Portage as key workers to some families, integrate early support into the First for Families model and explore locality-based delivery through Children's Centres.	Piloted Portage Key Working in June - December 2009. Identified key strengths and weaknesses and Integrated Early Support documentation into the protocols. Aligned Portage/EPs with District model of delivery.	Completed
6. Publication of the Childcare Sufficiency Audit	Childcare sufficiency audit has been published and subsequently refreshed with an action plan implemented to address gaps in provision.	In progress on track
7. Launch of Information System for parents and providers.	ISSP has been replaced by Parent Know How. Initial implementation plan in place, however, there are still some technical issues.	In progress milestone rescheduled
8. Completion of Phase 3 Children's Centre developments	Phase 3 developments in place.	In progress on track

### *Priority: Children & families are supported with their social & emotional development*

What we said we would do	What we did	Status
1. Ensure priority is also given to work with vulnerable families on emotional and social development, e.g. via Social and Emotional Aspects of Learning (SEAL) programmes, Family Works, and nurturing training provided by Special Educational Support Service (SESS).	<ul> <li>All primary schools and special (primary) schools and have been offered ongoing support to develop SEAL through a detailed action plan;</li> <li>One primary school has been identified as a national SEAL tracker school.</li> <li>14 Secondary schools and 4 secondary special schools have SEAL action plan, and have received support (including INSET) to sustain development.</li> <li>4 secondary schools have achieved the Family Welcome Plaque.</li> <li>Family Works embedded in 65 primary schools.</li> <li>The following data has been collected, collated and analysed: <ul> <li>Development of SEAL skills;</li> <li>Impact on reading and writing.</li> </ul> </li> <li>Data has also been collected and matched to Ofsted parental questions, for example: <ul> <li>'1 know how my child's school helps my child prepare for the future'</li> </ul> </li> </ul>	In progress on track Completed In progress on track In progress on track Completed In progress on track
2. Further embed the Managed Moves protocol in secondary and in primary schools especially in order to further reduce the levels of exclusion.	Managed Move Protocol firmly embedded into secondary sector reducing permanent exclusions by a further 20%. Unable to introduce protocol into primary sector due to staffing and capacity issues.	In progress milestone rescheduled
3. Continue to roll out Restorative Practices training.	Five, 3 day Facilitator Skills Training courses held plus one Restorative Circles event held with more planned.	In progress

# *Priority: Extended Services, delivered through schools and partners working in clusters, impact upon the outcomes for children and families*

What we said we would do	What we did	Status
1. Continue to implement the Extended Services Action Plan.	Action Plan has been implemented - All schools except the new Academy have achieved the Full Core Offer (FCO).	In progress on track
2. Priorities for 2009-2010 are: a. All clusters to have robust plans clearly targeted using allocated resources effectively	a. Each cluster has robust action plan completed following audit linked to identified needs against a clear budget.	In progress on track
b. Improve measurement of impact	b. All plans have clearly identified impact statements – all ACES have had training on Turning the Curve and Outcome Based Accountability (OBA).	
c. Implement training programme for ACES, governors, chairs of clusters	c. Training programme has been delivered to all groups.	
d. Further training on School Improvement Toolkit	d. All clusters have received training on Toolkit.	
e. Develop extended Services around Special Schools	e. All special schools now meet the Full Core Offer and have attended training and are working with the co-ordinator to offer support.	
f. Achieve the Full Core Offer across all schools by 2010	f. Academy has just joined LA and is working to meet the offer by April 2010.	

Priority: Raise standards in schools and settings by continuing to improve the quality of leadership and management, curriculum, assessment and learning, thereby ensuring none fall into an OFSTED category

What we said we would do	What we did				Status
1. Put revised School Improvement Policy into practice; provide appropriate briefings of councillors, governors and head teachers	new national statute and guidance.	Councillors, Gove	rnors and Headteac	s being developed. This is in response to hers have been briefed on developing tners and CYPD. Approval has been given	track
2. Ensure primary schools causing concern or in an Ofsted category make sufficient progress to be removed in the shortest possible time.	monitoring visit. Progress was judge plan was judged satisfactory and is	of December 2009, two schools have fallen into an Ofsted category, Manor and Well Lane. Manor has had a first nitoring visit. Progress was judged to be inadequate due to the lack of evidence about impact. The LA action n was judged satisfactory and is on track. The LA action plan for Well Lane is being prepared and the school is eady being supported and challenged.			
3. Identify underachieving and underperforming schools, subjects and groups within schools (including underperforming vulnerable learners) through analysis of data. This includes ensuring through the National	Primary: Analyses of the 2009 SATs i and show the following related to F benchmarked data:			on. Targets for 2010 have been analysed ne national top 25% of schools	In progress on track
Challenge and Gaining Ground programmes that by		No <fftd< td=""><td>% <fftd< td=""><td>% FFTD</td><td></td></fftd<></td></fftd<>	% <fftd< td=""><td>% FFTD</td><td></td></fftd<>	% FFTD	
Summer 2011 no secondary school is below 30% for	En/Ma Level 4 Plus	30/86	35%	65%	
5+A*-C grades (including English and mathematics).	En 2 Levels Progress Ma 2 Levels Progress	33/86 31/86	38% 36%	62% 64%	
	Adjustment of one child in each of th	ese schools would	make the following	difference:	
		No <fftd< td=""><td>% <fftd< td=""><td>% FFTD</td><td></td></fftd<></td></fftd<>	% <fftd< td=""><td>% FFTD</td><td></td></fftd<>	% FFTD	
	En/Ma Level 4 Plus	15/86	17%	83%	
	En 2 Levels Progress	16/86	19%	81%	
	Ma 2 Levels Progress	19/86	22%	78%	
	Schools setting below FFTD: SIPs & Co	bols setting below FFTD: SIPs & Contact Officers revisit potential schools with a view to adjusting the overall targets.			

What we said we would do	What we did				Status
	Secondary 2009 GCSE 5+A*-C including English & Maths r • Overall the provisional result for all Wirral schools in 2009 v • The average rise in the 6 National Challenge schools was 5.2 secondary schools from 2008 to 2009. School 2007 Resul Park High School for Boys 26% Ridgeway High School for Boys 26% Ridgeway High School 18% The Oldershaw School 28% Wallasey School 29% • Overall the 2 Gaining Ground schools had an average incr Wirral secondary schools from 2008 to 2009. • Overall, the rise in attainment for Free School Meals pupi	as 53.5% whi % compared 2008 Result 26% 25% 38% 23% 18% 29% ease of 3.3%	with a rise of <b>2009</b> <b>Result</b> 27% 40% 47% 25% 27% 29% compared v	Change from 2008 +1% +13% +10% +2% +9% -1% with a rise of 1.5% in all other	
	<ul> <li>compared with a rise of 2% in all other Wirral schools from</li> <li>As of December 2009, 12 secondary schools had been rate rated as good, 3 as satisfactory with none in an Ofsted cat</li> </ul>	d as Outstan		ir most recent Ofsted report, 7	
4. Ensure early intervention in potential schools causing concern.	<ul> <li>10 schools receive Intensive Support Programme / Wirral</li> <li>In secondary over 50% of curriculum support has been ta</li> </ul>				In progress on track
5. Measure impact of support provided.	The impact of support is monitored and evaluated through Outcomes establish a benchmark for support. Evaluations of has focussed intensively on standards of achievement, prog teaching and learning. Termly meetings with National Strate that our progress and support is good. At primary, RAG ratin Feedback so far indicates that Special Educational Need (SEI good. No special schools are currently in an Ofsted category	impact indi ess, leadersh gies also pro gs are now p ) support ha	cate positive nip and mar wide a mea predominan s been at le	e improvement where support nagement and the quality of sure of impact and indicate tly green or dark green.	In progress on track

What we said we would do	What we did	Status
6. Increase accuracy of assessment and consistency of moderation at transition points.	<ul> <li>EYFS and Key Stage 1 statutory Qualifications and Curriculum Development Agency (QDCA) plans have been approved and acted upon successfully. The QDCA reported that robust processes were in place.</li> <li>In primary, lead SEN practitioners are involved in supporting standardisation and moderation activities in special and mainstream schools.</li> <li>Two additional secondary Assessment Consultants have been appointed and are raising the profile of assessment and in particular Assessing Pupil Progress strategies.</li> <li>Wirral Special schools are developing in-house moderation procedures. They are also part of Greater Merseyside special school network which involves moderation activities at all levels of ability. The Special Education Support Service have completed transition packs, special schools involved in person centred planning activities and SEN specialist support identified is being implemented.</li> </ul>	In progress on track
7. Ensure priority is given to ISP and WISP in primary schools; and coordinated, targeted support in secondary schools. Focus in particular on raising standards in English and maths.	<ul> <li>10 Intensive Support Programme (ISP) schools were prioritised for support and challenge. A dedicated ISP/WISP adviser was allocated to support ISP/WISP. Raising Achievement Plans were initiated, resourced and managed with progress against plans evaluated at regular intervals.</li> <li>In addition, a second layer of 10 schools were identified for WISP support. RAPs were negotiated and resourced as above.</li> <li>All SIPs and Principal Managers are regularly updated on SEN data/pupil progress issues. Key comparative data sources have been introduced to all schools, in particular new National Strategies Progression Guidance and Comparison and Analysis of Special Pupil Attainment (CASPA.).</li> <li>Provisional GCSE English Language results for 2009 improved by 2% on 2008 whilst provisional Mathematics GCSE results improved by 2.9%.</li> </ul>	In progress and on track
8. Develop strategy for succession planning in schools as part of enriched Leadership and Management programme.	The strategy for supporting the development of Leadership and Management across schools, especially with teachers but increasingly with other staff, is now well established. Feedback and evaluations from the professional development activities are very good and this is impacting upon the quality of leadership and management in schools at all levels.	Completed
9. Identify models of excellent leadership and management within our school which especially enables all head teachers to influence the raising of standards and achievement, closing the attainment gap and meeting the challenges of the ECM agenda.	There are a range of programmes to support leadership and management in schools. In addition we have reviewed the programme of support, updates and briefings for head teachers.	Completed
10. Implement curriculum changes in line with the 21st Century School programme and the review of the Primary Curriculum	Funding has been found to facilitate the secondment of a suitable practitioner to support the additional work involved in the implementation of this initiative. A task and finish group has been set up to co-ordinate implementation. A number of separate projects through Extended Schools Funding have been agreed for headteachers.	In progress on track

What we said we would do	What we did	Status
11. Develop a high quality e-learning community that supports an improving and developing curriculum and encourages collaboration.	The vast majority of Wirral schools have embraced the Wirral Virtual Learning Environment (VLE) as their preferred learning platform. All schools that are participating in this project have received initial training and ongoing support. There is a variety of online activity that is stimulating learning both within the ICT curriculum and across all other curriculum areas. The VLE is being developed with positive collaborative activities happening between schools.	In progress on track
12. Support the implementation of the new Framework for the inspection of schools in England from September 2009.	Briefings have taken place for headteachers, governors and other relevant staff which have raised awareness of the new Ofsted Framework and its implications for schools. One result of these briefings is that schools have updated their safeguarding monitoring procedures. There have been joint lesson observations with senior leaders in two secondary schools against the new framework so far resulting in increased levels of confidence and accuracy in making judgements about the quality of teaching and learning in these schools.	Completed
13. Embed APP across English, mathematics, science and ICT teaching.	Targeted Assessing Pupil Progress (APP) training has taken place for primary and secondary schools. This has been followed up where appropriate with tailored in-school support on developing APP. Active work being undertaken in secondary BESD schools. Primary schools are trialing writing frames for investigations that match new primary science APP criteria	In progress on track
14. Further develop effective teaching and learning strategies and the sharing of good practice to raise the quality of learning.	<ul> <li>Tailored in-school curriculum and teaching and learning support is being offered across primary and secondary schools. All secondary schools were judged at least satisfactory for learning and teaching in their last Ofsted visit.</li> <li>98% of primary schools were judged to be at least satisfactory.</li> <li>Schools are being supported in their validation of their teaching and learning judgements. Inclusion Award identifies areas of good practice to be shared with other colleagues.</li> </ul>	In progress on track
15. Implement the next phase of 1-1 tuition extending from KS2 to KS3 and KS4; identify and support schools	100% of Wirral schools engaged in programme. Schools are developing a range of models for delivery of tuition. The LA has recruited a pool of tutors for schools to access. The programme is managed cross-phase and strategies are in place to ensure information sharing and engagement from colleagues at Primary, Secondary and LA level.	In progress on track

### Priority: Close the attainment gap where poverty affects achievement.

What we said we would do	What we did	Status
1. Improve outreach of all Children's Centres to vulnerable families.	New footprints have been developed with Together for Children, resulting in a more even spread of services across Wirral.	Completed
2. In collaboration with Speech and Language Team from PCT, initiate training programme for TAs, and VCF sector, in Hanen approaches to language development, in order to narrow gaps at EYFS.	A number of training programmes have been held. 'Learning Language and Loving It' and 'Encouraging Language Development in Early Childhood' were delivered to participants from early years and children's centre settings with some courses specifically directed at staff involved with deaf children.	
3. Implement data training programme, including neighbourhood data, on effects of poverty on achievement across the partnership	A range of Narrowing the Gap projects targeted at areas of deprivation are being supported over 2009-2010. A working group looking at performance and deprivation has been established. There has been a comprehensive programme of training for the workforce around teenage pregnancy. SIPs in secondary schools have been trained and as part of their monitoring visits have discussed the levels of and issues surrounding teenage pregnancy.	In progress milestone rescheduled
4. Develop the use of range of intervention strategies to support under-achieving and under-attaining groups of pupils, e.g. via dissemination of Action Research findings of EPs.	Provided training to 39 schools over five sessions. Schools were invited to take part in action research to determine the effectiveness of Acceleread/ Accelewrite. The analysis will be used in a Headline report in April 2010.	In progress milestone rescheduled
5. Ensure all schools know the extent of their attainment gap; monitor schools on their ability to 'close the gap' for children on FSM and other vulnerable groups. Report progress in narrowing the gap to Children & Young People's Strategic Management Board, & the Overview and Scrutiny Committee.	<ul> <li>Primary: Analyses undertaken of vulnerable groups and information included in the new 'Super Report'; analysis available for schools and SIPs via the web based Wirral Data Portal. Schools and SIPs were briefed at training in September 2009.</li> <li>At secondary a Wirral Initiative on Narrowing the Gaps one-year action research project has been initiated with 10 schools opting into the programme. Individual school plans have been produced and are being acted upon.</li> <li>A focus on each special schools core subject attainment gaps, with particular reference to 1, 2 &amp; 3 levels of progress gains, from one key stage to another, has been a key focus of this year's special school SIPs target setting activities. SIPs use new Progression Guidance to challenge schools individual and cohort targets.</li> </ul>	In progress on track
6. Promote and develop the implementation of the National Strategies Inclusion Development Programme in all Wirral schools to improve the overall quality of Quality First Teaching	7 pilot schools selected and have received 4 days additional training on Quality First Teaching. The impact of IDP Phase 1 and 2 materials will be evaluated by end of summer term 2010. IDP Steering group recently formed.	In progress on track
7. Improve the progress of the lowest attaining 20% of pupils in mainstream schools and narrow the SEN/non-SEN achievement gaps at KS2 in English/Maths and increase the number of SEN/LDD pupils achieving A*-C GCSE English/Maths.	Improvement in the % pupils not achieving level 3 or above in KS2 English and maths combined and in English alone. The SEN non-SEN gaps remain above the national but are improving.	In progress on track

What we said we would do	What we did	Status
8. Make effective use of the new progression guidance (2009-2010) to set accurate and challenging core subject targets for the lowest attaining pupils in the borough.	Extensive support and guidance been enacted and developed since its introduction in 2009. Extensive guidance materials made available to SIPs and school support staff.	Completed
9. Work with schools to reduce the level of Persistent Absence (PA) in primary schools and secondary schools.	Education Social Welfare Service (ESWS) provided additional training and support for eight identified PA Priority Secondary Schools via Attendance Leaders Network Meetings focusing on sharing good practice. By the end of half term 5, five of the eight schools had reduced levels of PA in comparison with the previous year, two schools showed increased levels of PA and one school showed no change. Similar work in partnership with the Primary Behaviour Manager together with identified PA Primary Schools resulted in improved attendance in eight of the twelve schools by the end of half-term 5. Presentations in relation to the Persistent Absence Agenda were also given at Head Teachers Conferences, Behaviour & Attendance Partnership Meetings, and at the School Governors Training Forum.	In progress on track
10. Work with the Virtual School to improve the school attendance of Looked After Children.	<ul> <li>ESWS produces a monthly attendance report of all children in Wirral schools. This is examined and discussed at a monthly meeting between the Head of ESWS and the Virtual Headteacher. Also considered at the meeting are the reports received from Welfare Call, commissioned to monitor the attendance of children looked after by Wirral and placed in schools outside Wirral.</li> <li>At the meeting pupils are identified and prioritised for support through the LACES Team, ESWS, and the Virtual School Attendance Officer. A strategic approach to improving attendance is also utilised. The Head of ESWS reports on attendance of children in care to LAC-EAT group and Virtual School Governing Body Meetings.</li> <li>The Outcomes for Children (OC2) return to DCSF requires LA's to report on the percentage of pupils who have been in care for 1 year or more who have missed more than 25 days of school for any reason. This year 12.5% of children in care missed 25 days or more. Whilst this is a disappointing increase on last year's figure it compares with a National figure of between 12-13% for the last 5 years. Children living at home on a care order are disproportionately represented in those with low school attendance. The reasons for this are complex and are being addressed through multidisciplinary Turning The Curve Group.</li> </ul>	In progress on track

What we said we would do	What we did	Status
11. Improve the outcomes for children who have English as an Additional Language.	2006       2007       2008       2009         National WIRRAL       Other than English Other than English       41.7       43.5       44.8       47.9         S1.9       47.1       53.6       56.5       56.5	In progress on track
12. Reduce child poverty by supporting families experiencing unemployment through family, adult and employability programmes	A wide variety of lifelong and family learning and employability courses aimed at targeted groups are on offer.	In progress on track
13. Raise standards of Looked After Children so their outcomes are comparable to their peers'	In terms of National Indicators we have dropped slightly at KS2 with 59% of pupils achieving level 4 in English, 50% in maths and 77% in science. This is well ahead of national average last year of 46% in English, 44% in maths and 60% in science of pupils achieving level 4. We have concentrated our resources on supporting looked after pupils at KS2 and have narrowed the gap in performance between them and their peers who are not looked after. There is still a gap but it has been reduced. At KS4 19% of pupils achieved 5A*-C at GCSE, 50% of pupils achieved 5A*-G and 76% achieved at least one GCSE pass. These compare favourably with National averages for looked after learners but still demonstrate a serious gap between looked after learners and their peers. The figure of 7% achieving 5A*-C inc E&M is disappointing, though this was the estimated figure based on prior attainment.	In progress on track
14. Ensure that the educational needs of Looked after Children are identified at an early stage and appropriate support put in place which tracks attainment and progress and increases levels of attainment	We have introduced a tracking system to monitor the attainments of children in Wirral's care. The information collected is used to inform their Personal Education Plans and Reviews and regular discussion with Designated Teachers in order to prioritise pupils in need of additional tuition or support either from the schools' own resources, LACES Learning Mentors, or specifically commissioned support.	In progress on track

## outcome area: positive contribution

"We want to engage all young people more fully in issues affecting their lives and particularly those at risk of disaffection."

# *Priority: Fewer children and young people are involved in offending and anti social behaviour.*

What we said we would do	What we did	Status
1. Quarterly analysis of FTE data to ensure targeted prevention resources to reduce numbers entering the youth justice system.	1. Data returns indicate a reduction in the number of First Time Entrants entering the Youth justice System	In progress on track
2. Expansion of the Restorative Justice (RJ) Protocol to ensure RJ principles are followed effectively and that all young people entering the youth justice system for the first time are considered for RJ as an alternative to prosecution.	2. There is a Protocol between The Crown Prosecution Service (CPS), Merseyside Police, Youth Offending Service (YOS) and CYPD, to ensure that RJ is used with regards to Looked after Children. The funding of the Youth Crime Action Plan (YCAP) identified a YOS officer within the Merseyside Police Custody Suite to work using RJ principles with young people who have never been involved in the Criminal Justice System. There are also plans to train more Police Officers to deliver RJ on the streets.	In progress on track
3. Increase use of Restorative Practice in schools to reduce exclusions.	3. Training continues within school staff in the delivery and understanding of RJ Conferences. Five, three day, facilitator training courses have been held plus one, one day, Restorative Circles Training Day. Permanent exclusions have fallen considerably and restorative practices may play some part in this reduction.	In progress on track
4. Ensure all young people are assessed at the point of entry to YOS and that ETE needs are addressed in intervention planning.	4. We continue to perform well in this area, all start assess ETE needs and intervention reflects need, including referrals to Connexions or Education Social Work services.	In progress on track
5. Annual Partnership Agreement between Connexions and YOS reviewed and refreshed to sustain positive partnership working as cited during recent Ofsted ETE inspection.	5. Discussions delayed due to local authority commissioning implications. Connexions is no longer commissioned to provide "Attachments to YOS". There will be detailed discussions between YOS and Connexions on new operating procedures.	In milestone rescheduled

What we said we would do	What we did	Status
6. Connexions Personal Adviser support to YOS reconfigured to include Activity Agreement Advisor enabling direct access to the programme for Young Offenders.	6. This dedicated PA resource was trialled from April to November 2009 and resulted in no significant increase in referrals. Referrals now come direct from YOS manager to Connexions Additional services Manager for assessment and allocation. There is an evaluation of the delivery of the current AAP Models to enable best value and services to young people, as AAP has been extended to March 2011. To date three courses have run with an average of five offenders per course.	In milestone rescheduled
7. ETE mentors recruited and trained to support young people accessing ETE.	7. New Mentors with ETE mentor availability will be provided with training early 2010.	In milestone rescheduled
8. Work with current providers to ensure an increase in accommodation available for young people whose previous convictions or behaviour might otherwise prevent them from being accommodated.	8. Meetings have taken place with service providers and we are working towards service level agreements. The YOS contributed half the annual cost of the Stop Gap project which worked to provide accommodation for vulnerable young people and those who are difficult to accommodate.	In milestone rescheduled
9. Substance Misuse Strategy supports early intervention to reduce harm in children and young people.	<ul> <li>9. The partnership's capacity to deliver alcohol interventions to young people and their parents has been increased. The current commissioning processes were reviewed to better support the effective and consistent delivery of young people's substance misuse interventions across a range of strategic approaches and planning groups. Universal and targeted providers were involved in the adoption and delivery of appropriate early identification and screening processes between all young peoples' substance misuse services.</li> <li>The impact has been a continuous decrease in Hospital admissions for alcohol for age 0-17, rate per 100, 000: 2006/07 181.89</li> <li>2007/08 161.83 (11% decrease from the previous year)</li> <li>2008/09 144.70 (10.6% decrease from previous year)</li> <li>2009/10 142.29 (1.67% decrease from previous year (7 months data))</li> </ul>	In progress on track

# Priority: Children and young people have access to a range of appropriate play opportunities which meets their needs.

What we said we would do	What we did	Status
1. The Commissioning of Hubs to provide a focus for District planning to make youth service provision available over six nights a week.	1. Local planning groups established to oversee the implementation of District provision. Plans are in place to recommend to Cabinet that the Youth and Play service advisory Committee acts as the overarching monitoring group reporting on the provision of commissioned and non commissioned activities.	In progress on track
2. The Youth Opportunity Fund/ Youth Capital Fund will be used to commission access to leisure facilities for young people aged 13-19.	<ul> <li>2. Established a Commissioning sub group with representatives from the Grant Panel, Executive Youth Board (EYB) and UK Youth Parliament (YP). This group made the following decisions: <ul> <li>a. Each Hub was allocated £18,400 to develop the facilities.</li> <li>b. £100,000 was top sliced from the Youth Opportunity Fund for third sector organisations to enhance their provision for young people.</li> <li>c. A further 19 organisations have received funding.</li> </ul> </li> </ul>	Completed
3. The District activity fund will be used to commission specialist support organisations to ensure there is engagement with young people from vulnerable groups.	<ul> <li>3. PSS Wirral Young Carers worked closely with the young carers participation group to apply for Youth Opportunity Fund (YOF) monies, they were successful in receiving funds for positive and self-esteem building activities and issue based materials and equipment. Sixteen organisations have been commissioned either directly or in consortia arrangements to ensure there is engagement with young people from vulnerable groups.</li> <li>2134 Specialist units or 6402 hours of activities have been commissioned to work with young people providing access to specialist programmes.</li> <li>Four part time participation workers have been commissioned to promote engagement in positive activities in each of the districts.</li> </ul>	Completed
4. The District Activity Fund will be used to commission additional activities to enhance the District Youth Offer and to engage with a broader range of young people.	<ul> <li>4. The following additional activities have been commissioned to enhance the District Youth offer: <ul> <li>166 Youth Arts / cultural units</li> <li>104 Sports Development nights</li> <li>23 Hip Hop Units (3 hours)</li> </ul> </li> </ul>	Completed
5. Young Carers will be taking part in a twelve week programme designed by Young Carers. The programme seeks to provide opportunities to explore areas of concern and also to provide fun and challenging activities.	5. PSS Young Carers completed questionnaires with regards to issues that they felt impacted on their life due to their caring role. A large majority of the young carers wanted to experience fun activities and have respite from their caring role. Issues they felt were important were safety around the home, first aid, healthy eating and sexual health. Other issues that were covered were choices and consequences to build on personnel power, drug and alcohol workshops and bullying.	Completed

What we said we would do	What we did	Status
6. All young carers will receive a pack which contains information on activities available in their areas, health guidelines, useful phone numbers and Young Carers Project update.	6. A small group of young carers became involved in the manufacturing of the monthly newsletter, which includes sections covering project updates, free family days out in the Wirral, useful telephone numbers, healthy recipes, young carers pictures and articles about specific issues.	Completed
7. We will continue to ensure that Children in Care are able to access leisure activity programmes during the holiday periods.	7. This programme was run as a pilot for 2009, providing supporting evidence for a successful lottery bid for £87,000. Ten week courses for young people in care from 2010-2012 will be funded.	Completed
8. Promote play opportunities for children and young people on quarterly basis in conjunction with extended school cluster groups.	8. Play ranger sessions, play practitioner projects and summer provision, promoted with extended schools clusters via promotional leaflets and Extended Schools co-ordinators.	Completed
9. Collate baseline data to establish how C&YP feel about playing out.	9. We surveyed 244 children and young people on how safe they felt when playing out. The data was analysed and the key findings were developed into tasks as part of the 'Feel Safe, Play Safe' Action Plan. The plan highlights training needs and the initial survey will be repeated in April 2010 to evaluate any improvements in children feeling safe playing outdoors.	Completed
10. Complete action plan to address areas of concern raised by October 2009.	10. Action plan developed from findings of survey which established areas of concern.	Completed
11. Play Staff will be trained to manage areas of concern with training undertaken in January 2010.	11. Training sessions on protective behaviours, road safety and promoting positive behaviour were held. Baseline data and Play Training sessions are being carried out with playworkers and play rangers.	In progress on track
12. Complete "Feel Safe, Play Safe" action plan by Mar 10.	12. "Feel Safe, Play Safe" action plan will be completed by March 2010.	Completed
13. C&YP make presentation to Wirral Play Partnership.	13. End of year annual review involving children and young people in contributing to Youth and Play Service Advisory Committee (YAPSAC) in 2010.	In progress on track
14. Consult with C&YP on four equipped play areas.	14. We provided more challenging play equipment in response to feed back from a Children and Young People Department consultation on Play areas.	Completed
15. Membership of play Partnership or commissioned organisation is dependent on signing up to Play Strategy Implementation plan.	15 Organisations represented on Wirral Play Partnership signed up to Play Strategy Implementation Plan in December 2008.	Completed

## *Priority: Children & Young People are actively engaged in community and democratic decision making process.*

What we said we would do	What we did	Status
1. The Executive Youth Board (EYB) will review its annual progress and make recommendations for future activity.	1. The review produced a revised priorities list and agreement on how the Board will conduct future work in relation to engagement with other organisations.	Completed
2. EYB will prepare an action plan and progress will be reported to schools, youth organisations through Schools Councils, Youth Forums, Connect-uz.	2. The role of the EYB has been linked into the District Youth Forum Structure. EYB members are accountable to their District Board and will be responsible for reporting back on any actions to address concerns.	Completed
3. Arrangements are in place to consult with children and young people on the priorities and actions included in the Children and Young People's Plan.	3. Youth consultation week held in December 2009. Consultation involved young people from a diverse range of youth organisations.	Completed
4. EYB meets with representatives of Older People's Parliament to identify appropriate structures for co- working to address community cohesion concerns.	4. EYB met with representatives and agreed a number of further meetings to agree on areas of mutual interest and joint working.	In progress on track
5. Young people will be trained in recruitment and selection procedures. Eight young people in 2009/10 and twelve young people in 2010/2011.	5. Seven young people undertook and completed the 'Involving Young People in Recruitment and Selection' training day. All successfully completed the course and are eligible for the Young People's Interview Panel (YPIP). In late 2009, the existing Young People's Panel have also taken part in interviewing for the position of Local Safeguarding Children's Board Manager.	In progress on track
6. Four Young carers will be trained in recruitment and selection in 2009/10 and they will then be involved in the recruitment of staff within the Young Carers project. All children and young people who come into the care of the local authority will be directly contacted.	6. Seven young carers were trained in Recruitment and Selection and were able to utilise these new skills in two rounds of recruitment for two different roles. The young carers devised their own questions for interviews with the candidates for project worker posts.	Completed

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What we said we would do	What we did	Status
7. All young people who access the AAP programme will complete a questionnaire to gather their views on provision accessed. These views will feed into the commissioning and direct purchase of future provision.	7. One hundred and sixty one young people completed the programme and completed evaluations. These views will feed into the commissioning and direct purchase of future provision to ensure further take-up of AAP and other opportunities. This will also help to embed the good practice of this unique practitioner support to young people across Wirral.	Completed
<ul> <li>8. For 2009/10 a young people's grant panel have been established to distribute the Youth Opportunity Fund and Youth Capital Fund. The young people identified two priority areas:</li> <li>Strategic commissioning (£293,220) to improve young people's access to transport and leisure facilities.</li> <li>General fund (£100,000) applications which specifically address priority areas identified by children and young people will be given priority. (Areas include: reducing teenage pregnancy; substance and alcohol misuse; homelessness; music, arts and media projects for young people; environmental projects which benefit the community).</li> </ul>	<ul> <li>8.The group have had a number of meetings with Mersey travel, Wirral Council Forward Planning Team, Elected Members and Managing Directors of Bus Companies with the following results: <ul> <li>Arrangements are being put in place for the YOF to fund a number of transport initiatives.</li> <li>Secured agreement from the bus companies to assist young people accessing extended school activities.</li> <li>Secured agreement from bus providers to further explore how they could support Big Events Nights in the Youth Hubs.</li> <li>Established the existence of a discount travel card for young people aged 16-22.</li> <li>Secured agreement from two of the bus companies directors' to be hot seated at the Youth Voice Conference in 2010.</li> </ul> </li> </ul>	Completed



# social and economic well-being

"We want to equip our young people better for adult life and particularly to narrow the gap experienced by our most disadvantaged young people in their prospects."

### *Priority: Increase the number of young people who are participating and achieving their potential.*

What we said we would do	What we did	Status
<ol> <li>Continue to progress the 14-19 reform agenda and to provide a range of opportunities and courses of high quality through the implementation of the:</li> <li>14-19 Plan.</li> <li>LSC Quality Assurance Framework post-16.</li> </ol>	<ol> <li>A range of developments through the plan and framework:</li> <li>Participated in National Test &amp; Trail of Foundation Learning at KS4 and post 16 to develop positive progression pathways 14-19.</li> <li>Delivered engagement opportunities through European Social Fund and KS4 Engagement programme.</li> <li>Developed and trialled 14-19 QA Framework.</li> <li>Developed and trialled School Sixth Form Quality Monitoring &amp; Evaluation Framework.</li> <li>Roll out of eight Diploma lines in September 2009.</li> <li>Increase in courses at Wirral Metropolitan College with multiple entry points.</li> <li>Expanded the Young Apprenticeship offer to include Health &amp; Social Care, Engineering and Construction.</li> </ol>	In progress on track
<ul><li>2. Increase post 16 participation and achievement through the implementation of the:</li><li>Borough EET Strategy.</li><li>IYS Strategy.</li></ul>	2. Borough Education, Employment and Training (EET) Strategy has been reviewed, refreshed and approved by the Children's Trust Board. Integrated Youth Support (IYS) Strategy has been reviewed and refreshed and received Cabinet approval in November 2009.	In progress on track
3. Support Wirral Care Leavers to access HE and achieve academic success.	3. Wirral Care leavers continue to be supported to access Higher Education and Aim Higher is now ring- fencing Summer School places for year 10 Children in Care.	In progress on track
4. Provide young people with confidence and skills, and information to travel independently using public transport, or by walking or cycling.	<ul> <li>4. Wirral Travel Training Scheme is open to all age 16+, provides 1 to 1 travel training service to enable young people to use public transport independently and with confidence. A specific project was delivered pupils with special educational needs.</li> <li>Wirral travel team attend colleges and events promoting transport options and providing free travel cards to young people to attend interviews or assist with first months travel. Development of transport pages of young peoples website "teen wirral" to provide specific information regarding issues that affect young people.</li> <li>Development work with the Young Peoples Parliament with regard to identifying specific projects to benefit young people using external funding.</li> <li>Delivery of the WorkWise scheme to assist young people with the provision of a 6 month loan of a scooter or a cycle where public transport cannot serve the journey.</li> <li>Cycle training offered to all secondary schools.</li> </ul>	In progress on track

## *Priority: Reduce numbers of 16-18 vulnerable young people NEET in line with LAA targets and the PSA 2010 trajectory.*

What we said we would do	What we did	Status
<ol> <li>In recognition of the current economic climate and global recession we will refresh the:</li> <li>Borough EET Strategy</li> <li>IYS Strategy</li> <li>14-19 Plan</li> <li>With a specific focus and monitoring of the progress of vulnerable groups and appropriate preventative and targeted intervention including:</li> <li>Looked After Children</li> <li>Teenage mothers</li> <li>Young Offenders</li> <li>Young People with SEN/LDD</li> <li>Those with substance misuse issues.</li> </ol>	<ol> <li>Borough EET Strategy has been reviewed, refreshed and approved by the Children's Trust Board. IYS Strategy has been reviewed and refreshed and received Cabinet approval November 2009.</li> <li>14-19 Plan is being implemented. Progress into EET of vulnerable groups is monitored monthly to ensure interventions can be targeted effectively specifically focussing on teenage mums, those leaving care, those young people with Learning Difficulties and Disabilities (LDD) and young offenders. The 'Wirral Apprentice' programme has been given additional funding to target vulnerable groups including those leaving care. The 'brokerage project' is bearing fruit to support the redesign of the local offer of learning for those with Special Educational Needs (SEN) /LDD. The Greater Merseyside Sensory Education Service has been established.</li> </ol>	In progress on track
<ul><li>2. Deliver the:</li><li>Activity Agreement Pilot</li><li>Positive Activities for Young People programmes.</li></ul>	2. Activity Agreement project has been delivered and though due to complete in March 2010 has now been extended to March 2011. The current PAYP programme ended in December 2009 and commissioning of key worker resource is underway for 2010.	In progress on track
3. Develop Borough Strategy and implementation plan for the local application of the National standards for Information, Advice and Guidance (IAG).	3. The implementation plan for the local application of the National IAG standards has been developed and a self assessment process has been completed.	In progress on track
4. Extend the employability programmes for NEET Young people and specifically vulnerable groups and implement the Wirral Apprenticeship Programme.	4. The 'Wirral Apprentice' programme phase 1 has commenced and offering 112 places in the borough. 22% of young people previously NEET have been appointed to local apprenticeships. Phase 2 has been agreed with funding from Wirral Neighbourhood Fund for 50 additional apprenticeships. The programme has been identified as a model of good practice by the North West Employer Organisation.	In progress on track

## *Priority: Contribute to the reduction in levels of child poverty and minimise the number of children and young people living in poor housing.*

What we said we would do	What we did	Status
1. Implementation of the CES Employment Strategy, WEDS priorities and Borough EET Strategy including the 'whole family' approach to addressing worklessness acknowledging the current economic climate and impact of the recession.	e developed and presented to the CES Board in November 2009 identifying key areas of growth and challenges for the LCR.	
<ul> <li>2. Improve access to life opportunities such as education, employment or training, healthcare and social/recreational opportunities by providing:</li> <li>Work wise (scooters, cycles and travel cards)</li> <li>Dial a link (DRT bus service)</li> <li>Travel Team (travel advice and journey planning)</li> <li>Travel Training.</li> </ul>	<ol> <li>Access opportunities improved through:</li> <li>Workwise scheme (scooters, cycles and travel cards) has funding until December 2010. Alternative funding sources to be investigated as the project is extremely successful.</li> <li>DRT bus service pilot was evaluated and found to be un-successful, therefore the service was not continued when the funding expired.</li> <li>The Travel team are funded until December 2010. Successful project involves proactively engaging the community and providing travel advice and journey planning. Distribution of free travel cards to assist with travel to interviews, and first month of employment was successfully rolled out.</li> <li>Travel training was funded until March 2010 and future support is being investigated for the continuation of the scheme.</li> </ol>	In progress on track
<ul> <li>3. Support young people including care leavers to access and maintain accommodation where needed by developing and progressing the following:</li> <li>Increase the number of households containing children and young people that are referred to power Health through Warmth for heating and insulation grants, thereby reducing fuel poverty amongst this group.</li> <li>Monitor support/accommodation provided to lone teenage parents.</li> </ul>	<ol> <li>Current Health through Warmth team data not available at the time of this review.</li> <li>Teenage parents and pregnant teenagers were given advice and assistance on housing matters from the Wirral Council Homeless and Housing Options from April to September 2009. One lone parent homeless case was given a full housing duty.</li> <li>Work is being continued to assist young parents to access appropriate housing in the private rented sector and to access the Tenancy Deposit scheme. Further developments in recording and monitoring processes have been initiated.</li> </ol>	In progress milestone rescheduled



## refreshed priorities

Wirral priorities have been re-evaluated in response to the activities undertaken in the second year of the plan and national and local changes.

#### Priority

#### **Be Healthy**

- Reduction in the harmful consequences of risk taking behaviour.
- Encourage and support all children and families to achieve and maintain a healthy weight and lifestyle (Refreshed).
- Implement the Child Health Strategy.
- · Inequalities in the health of children and young people are reduced.

#### **Staying Safe**

- More children grow up in secure, stable families where they belong, either through receiving timely, earlier intervention and support within their communities, or through belonging to permanent, substitute families.
- Reduce the incidence of anti social, risk taking and harmful behaviour experienced by children and young people.
- More children are safe at home, at school and in the community, including reducing road traffic accidents and bullying.
- Children in care are safe and supported.
- · Implement the government action plan in response to Lord Laming review of the protection of children in England.

#### **Enjoy and Achieve**

- Public money is spent to maximum effect in all our schools.
- · Young children and families are well supported, especially the most vulnerable, through the network of Children's Centres.
- · Children and families are supported with their social and emotional development.
- Extended Services, delivered through schools and partners working in clusters, impact upon the outcomes for children and families.
- Continue to raise standards in schools and settings by continuing to improve the quality of leadership and management, curriculum, assessment and learning, thereby ensuring none fall into an OFSTED category.
- Close the attainment gap where poverty and disadvantage affect achievement.

#### **Positive Contribution**

- Fewer children and young people are involved in offending and anti social behaviour.
- · Children and young people have access to a range of appropriate play and developmental opportunities which meets their needs.
- Children & Young People are actively engaged in community and democratic decision making processes.

#### **Economic wellbeing**

- Increase the number of young people who are participating and achieving their potential.
- Reduce numbers of 16-18 vulnerable young people NEET in line with LAA targets and the PSA 2010 trajectory.
- · Contribute to the reduction in levels of child poverty and minimise the number of children and young people living in poor housing.

### outcome area: being healthy

"We want to improve all children's health and to narrow the gap in health outcomes experienced by our most disadvantaged children."

Priority	How we will deliver	How we will be judged
consequences of risk taking behaviour.	<ol> <li>Implement the Children and Young People's Substance Misuse Plan which addresses issues around drugs and alcohol.</li> <li>Develop a package of interventions for families at risk of substance misuse to improve parenting skills.</li> <li>Refresh pathways to reduce the number of Hospital Admissions, including A&amp;E attendance and improve links to Young Peoples Services.</li> <li>Recruit 2 posts based within the Children and Young People's Department to liaise between adult drug treatment services and Young Peoples Services to ensure children of drug using parents are supported in line with key recommendations within Think Family and "Hidden Harms".</li> <li>Provide a range of brief interventions to divert young people with less-severe substance misuse problems away from developing more severe problems and substance-related harm.</li> <li>Increase availability and access to young people friendly substance misuse services through Heath Services in Schools (HSIS).</li> <li>Implement the Teenage Pregnancy Strategic Action Plan.</li> <li>Monitor progress and performance of 'The Family Nurse Partnership' across Wirral for vulnerable first time teenage parents.</li> <li>Targeted outreach sexual health work with vulnerable at risk groups to include young people involved in offending and Children in Care and monitor impact and outcomes.</li> <li>Monitor and evaluate targeted support for teenage parents delivered through Children's Centres, e.g. Beacon Babes / Girls Aloud / BOAT.</li> <li>Continue roll out of 'speakeasy' training to enable parents to speak to children about health relationships.</li> <li>Support the preparation for the implementation in September 2011 of statutory PSHEE in schools.</li> <li>Support schools with the implementation of the revised DCSF guidance for Sex and Relationship</li> </ol>	<ul> <li>NI 115 Substance misuse by young people (reported through positive contribution).</li> <li>NICE PH004 Interventions to reduce substance misuse among vulnerable young people.</li> <li>NI 39 Alcohol harm-related hospital admission rates.</li> <li>NI 39 Alcohol harm-related hospital admission rates.</li> <li>NI 112 Under 18 conception rate.</li> <li>VSB08 Teenage Pregnancy.</li> <li>PSA 11 Narrow the gap in educational achievement between children from low income and disadvantaged backgrounds and their peers.</li> <li>VSB13 Chlamydia Prevalence.</li> <li>NI 113 Prevalence of Chlamydia in under 20 year olds.</li> </ul>

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Priority	How we will deliver	How we will be judged
Reduction in the harmful consequences of risk taking behaviour (continued).	<ol> <li>Implement the Sexual Health Plan including increasing the proportion of eligible young people screened for Chlamydia.</li> <li>Increase accessibility and provision of Chlamydia screening through implementation of HSIS within Schools and Colleges and across Children's Centres.</li> <li>Increase availability and access to young people friendly sexual health and contraceptive services through HSIS and EHC in Pharmacies.</li> <li>Formally launch the Sexual Health Policy and Guidance across Children's services.</li> <li>Review contract with Kooth.com and establish local goals.</li> <li>Monitor accident prevention scheme and develop an action plan to include actions for each Children's Centre aimed at reducing local accidental injury rates.</li> </ol>	<ul> <li>NICE PH 003 One to one interventions to reduce the transmission of sexually transmitted infections (STIs) including HIV, and to reduce the rate of under 18 conceptions, especially among vulnerable and at risk groups.</li> <li>NI 50 Emotional health of children.</li> <li>NI 51 Effectiveness of child and adolescent mental health (CAMHS) services.</li> <li>NI 70 Reduce emergency hospital admissions caused by unintentional and deliberate injuries to children and young people (Also reported through Staying Safe).</li> </ul>

Priority	How we will deliver	How we will be judged
Encourage and support all children and families to achieve and maintain a healthy weight and lifestyle.	<ul> <li>To achieve a reduction in the prevalence of overweight and obese children through the implementation of the key child targets within the Obesity Action Plan and pathway by:</li> <li>1. Enhanced delivery of the National Child Measurement Programme (NCMP) 2009-10. A coordinated approach with the Active Lifestyles Project with a minimum of six schools through engagement with parents and children and continue to provide feedback to parents.</li> <li>2. To promote and monitor the child weight management providers (MEND &amp; Lifestyle and Weight Management Service) to ensure referral targets are met.</li> <li>3. Ensure BMI data from childhood screening programme (aged 2-2½ years) is collated and used as a measure to inform appropriate commissioning of services.</li> <li>4. Implement Wirral's Taste for Healthy Food Policy including specific guidance on public venues and residential settings.</li> <li>5. To provide support for overweight and obese pregnant women by producing a care pathway, developing exercise classes and providing healthy eating information.</li> <li>6. To provide a programme of physical activity sessions for 0-5 year olds in Children's Centres, e.g. Top Tots, Active Tots, Fizzy Tots.</li> <li>7. Deliver Healthy Eating Groups to parents with very young children through Children's Centres, together with advice on choosing healthier lifestyles based on the 'Change 4 Life' programme and link in with the 'Start 4 Life' campaign.</li> <li>8. Ensure the Henry Programme is accessed by all Children's Centres and Early Years practitioners.</li> <li>9. To implement the Health Promoting Early Years Programme.</li> <li>10. To increase the percentage of pupils aged 5-16 who take part in 2 hours of high quality PE and sport in school and a further 3 hours outside school hours – to be monitored through the School Sport Partnership Programme.</li> <li>11. Implement the Active Families Sport England &amp; Physical Activity Alliance Project for 0-17 year olds and their families.</li> <li>12. Continue to implement Spo</li></ul>	<ul> <li>NI 55 Obesity among primary school age children in Reception Year.</li> <li>NI 56 Obesity among primary school age children in Year 6.</li> <li>NI 57 Children and young people's participation in high quality PE and sport.</li> <li>PH017 Promoting physical activity for children and young people.</li> <li>NICE PH008 Guidance on the promotion and creation of physical environments that support increased levels of physical activity.</li> <li>NI 53 Prevalence of breast feeding at 6 – 8 weeks from birth.</li> <li>VSB09 Childhood Obesity.</li> <li>VSB11 Prevalence of breast feeding at 6-8 weeks.</li> <li>NICE PH011 Guidance for midwives, health visitors, pharmacists and other primary care services to improve the nutrition of pregnant and breastfeeding mothers and children in low income households.</li> </ul>

Priority	How we will deliver	How we will be judged
Implement the Child Health Strategy.	<ol> <li>Implement the Healthy Child Programmes - Pregnancy 0-5 years and 5-19 years programmes - across the Children's Trust Partnership.</li> <li>CHiCC to be reshaped as Parent Infant Mental Health Service (PIMHS). Commissioning strategy to be completed, workforce development to be integrated into Children's Trust Workforce Development Strategy and CPD delivered to ensure competency.</li> <li>Baby Lifecheck and Teen Life Check programmes available and easily accessible to parents and young people. Baby Lifecheck to be integrated into delivery of Children's Centres and HCP 0-5 years; Teen Lifecheck to be integrated into delivery of HSIS, PSHEE curriculum and HCP 5-19 years.</li> <li>Roll out one BOAT in each locality with additional parent education classes and health promoting early years to be provided at other early years' venues.</li> <li>Implement the Healthy Schools Action Plan arising from the Self Evaluation Toolkit to ensure that 10% of schools are engaged in the 'Enhanced Healthy Schools Programme' by 2010 and ensure nutrition and oral health training is provided to 50% of all Wirral schools throughout 2009-10.</li> <li>Conduct regular reviews of young people's website (11-19 years) to ensure up to date health information is provided and key messages are accessed, aligned and consistent across Children's Trust partnership.</li> <li>Implement Aiming High for Disabled Children Strategy.</li> </ol>	NI 55 Obesity among primary school age children in Reception Year. NI 50 Emotional health of children. NI 51 Effectiveness of child and adolescent mental health (CAMHS) services. You're Welcome Quality Framework.

Priority	How we will deliver	How we will be judged
Inequalities in the health of children and young people are reduced.	<ol> <li>Implement relevant actions relating to CYP in the Health Inequalities Plan. Monitor and evaluate the plan throughout the period to ensure outcomes are being met to reduce health inequalities.</li> <li>Ensure all children's centres have fully integrated plans to:         <ul> <li>Reduce the inequalities in oral health:</li> <li>Continue the Fluoride Milk Programme, the Bright Smiles Programme and the Dental Bus service.</li> <li>Develop the dental pilot to roll out across relevant areas.</li> <li>Protect children from the harmful effects of tobacco:</li> <li>Reduce the proportion of women who continue to smoke throughout pregnancy.</li> <li>Ensure all Children's Centres have fully integrated plans on smoking cessation.</li> <li>Train smoking cessation advisors within children's centres.</li> <li>Ensure for disabled children:</li> </ul> </li> <li>Provet children from the harmful effects of tobacco:         <ul> <li>Ensure all Children's Centres have fully integrated plans on smoking cessation.</li> <li>Train smoking cessation advisors within children's centres.</li> <li>Ensure for disabled children:</li> <li>Bevelop pathway to ensure peer support programme is embedded in ante natal clinics within children's centres.</li> <li>Services for disabled children:</li> </ul> </li> <li>Roll out aiming high programme across children's centres including access to relevant specialist agencies and ensure these plans are fully aligned with complimentary service plans and activities.</li> <li>Implement new vaccination programmes effectively ensuring high uptake from inception.</li> <ul> <li>Undertake baseline review of National Institute for Clinical Excellence (NICE) Guidance and implement action plan.</li> <li>Link with dental pilot to identify children who have missed immunisations and offe</li></ul></ol>	<ul> <li>NI 112 Under 18 conception rate.</li> <li>VSB08 Teenage Pregnancy.</li> <li>RTA measure.</li> <li>NI 55 Obesity among primary school age children in Reception Year.</li> <li>NI 56 Obesity among primary school age children in Year 6.</li> <li>dmft (5 year olds).</li> <li>DMFT (12 and 14 year olds). (decayed, missing and filled teeth).</li> <li>Proportion of women who continue to smoke throughout pregnancy.</li> <li>VSB 10 Individuals who complete immunisation by recommended ages. Infant mortality rate.</li> <li>NI51 Effectiveness of child and adolescemental health (CAMHS) services.</li> <li>Increase uptake from 0.4% (children) and 0.1% (women) (September 2009 snapshold)</li> </ul>

### outcome area: staying safe

*"We want to support children earlier, closer to their communities and wherever possible by supporting families."* 

Priority	How we will deliver	How we will be judged
More children grow up in secure, stable families where they belong, either through receiving timely, earlier intervention and support within their communities, or through belonging to permanent, substitute families.	<ol> <li>Sustain improved processes underpinning the Team around the Child model, which measures and supports CAF and TAC.</li> <li>Review and improve systems and processes to support and deliver timely multi-agency plans for children in need supported by CIN IRO.</li> <li>Implement the Integrated Preventative Services Plan to support the coherent and joined up development of Area Teams, Children's Centres and Extended Schools.</li> <li>Continue to provide credible programmes for courts to consider as alternatives to custody, for 'prolific and serious' offenders including embedding Multi-Systemic Therapy.</li> <li>Implement the Area Team development plan, and co-locate all Area Teams.</li> <li>Deliver the revised Parenting Strategy; implement PEIP; monitor the impact on improved outcomes delivered by commissioned services.</li> <li>Implement plans to further develop and co-locate services to deliver IYSS / TYS.</li> <li>Refocus the Adolescent Crisis Team towards earlier intervention with adolescents and their families and carers.</li> <li>Extend capacity to deliver more family group meetings, and increase short break provision to support more children and adolescents with their family in the community.</li> <li>Deliver timely plans, for more children to be adopted or achieve permanence through adoption, Special Guardianship and Residence Orders, where this will best meet their needs. Extend and develop capacity to provide post adoption / Special Guardianship support.</li> </ol>	<ul> <li>NI 59 Initial assessments for children's social care carried out within 7 working days of referral.</li> <li>NI 60 Core assessments for children's social care carried out within 35 working days of their commencement.</li> <li>NI 61 Stability of looked after children adopted following an agency decision that the child should be placed for adoption.</li> <li>NI 63 Stability of placements for looked after children: length of placements.</li> <li>NI 68 Referrals to children's social care going on to initial assessment.</li> <li>Reduction in the number of adolescents placed in care and those placed have a clear plan about the purpose for being looked after and their needs into adulthood.</li> </ul>

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Priority	How we will deliver	How we will be judged
More children grow up in secure, stable families where they belong, either through receiving timely, earlier intervention and support within their communities, or through belonging to permanent, substitute families (continued).	<ol> <li>Safely reduce the numbers of children in care, particularly focusing on reducing the number of children in care placed at home with parents.</li> <li>Sustain improved processes for contact, referral and assessment – the 'front door' into social care, implementing the findings from the Unannounced Inspection of Contact, Referral and Assessment Services.</li> <li>Provide strong organisational and operational links between Children's Centres and fieldwork services, focussing on safeguarding systems and training to meet assessed needs.</li> <li>Develop the appropriate involvement of children's centres in the delivery of support to all children 0-5 subject to a child protection plan.</li> <li>Implement early intervention and planning of services to families with children under five involving midwives, health visitors, children's centre outreach workers and social care professionals with a focus on the needs of the reach population of the centre.</li> <li>Embed consistency of response, in accordance with regulation, to children living with Private Foster Carers.</li> <li>Deliver the Children's Social Care and Safeguarding restructure, to increase the number of social workers, increase capacity to deliver improved management and performance oversight, and expansion of LSCB activity.</li> </ol>	<ul> <li>NI 59 Initial assessments for children's social care carried out within 7 working days of referral.</li> <li>NI 60 Core assessments for children's social care carried out within 35 working days of their commencement.</li> <li>NI 61 Stability of looked after children adopted following an agency decision that the child should be placed for adoption.</li> <li>NI 63 Stability of placements for looked after children: length of placements.</li> <li>NI 68 Referrals to children's social care going on to initial assessment.</li> <li>Reduction in the number of adolescents placed in care and those placed have a clear plan about the purpose for being looked after and their needs into adulthood.</li> </ul>

Priority	How we will deliver	How we will be judged
Reduce the incidence of anti social, risk taking and harmful behaviour experienced by children and young people.	<ol> <li>Sustain and strengthen joint working between the CYPD, NHS Wirral and Wirral Family Safety Unit to further reduce the incidence of domestic violence and repeat occurrences.</li> <li>Continue to develop more consistent targeting of services for children at risk of offending, through early identification systems triggering YOS input.</li> <li>Review Merseyside Protocol and further develop services for children identified as missing from home / care, and / or involved in sexual exploitation.</li> <li>Monitor and review children's accident and emergency referral pathway, to continue to reduce the incidence of children presenting following excessive alcohol consumption / substance misuse.</li> <li>Jointly deliver Operation Stay Safe, and monitor the impact upon the incidence of young people's excessive consumption of alcohol.</li> <li>Promote, develop and deliver parental guidance and awareness raising strategies to keep children safe, including the co-sleeping awareness campaign.</li> <li>Continue to deliver comprehensive LSCB training plan for all staff, level 1-4 and refresh Section 11 Audit and Action plan by all LSCB Board members.</li> <li>Develop a Risk Governance procedure within the LSCB that supports individual and multi- agency risk management and ensures that the risk management plans for those at very high risk are clear, co-ordinated, defensible and appropriately resourced.</li> </ol>	<ul> <li>NI 32 Repeat incidents of domestic violence.</li> <li>NI 43 Young people within the Youth Justice System receiving a conviction in court who are sentenced to custody.</li> <li>NI 19 Rate of proven re-offending by young offenders.</li> <li>NI 19 Rate of proven re-offending by young offenders.</li> <li>NI 19 Rate of proven re-offending by young offenders.</li> <li>NI 19 Rate of proven re-offending by young offenders.</li> <li>NI 19 Rate of proven re-offending by young offenders.</li> <li>NI 19 Rate of proven re-offending by young offenders.</li> <li>NI 19 Rate of proven re-offending by young offenders.</li> <li>NI 19 Rate of proven re-offending by young offenders.</li> <li>NI 19 Rate of proven re-offending by young offenders.</li> <li>NI 64 Child protection plans lasting 2 years or more.</li> <li>NI 65 Children becoming the subject of a child protection plan for a second or subsequent time.</li> <li>NI 67 Child protection cases which were reviewed within required timescales.</li> <li>NI 70 Hospital admissions caused by unintentional and deliberate injuries to children and young people.</li> <li>NI 71 Children who have run away from home / care overnight (Measured from 2009 onwards).</li> <li>Agency use of the Risk Governance process.</li> <li>Young people's risk management plans lead to reduced risk for the young person and the community in general.</li> </ul>

Priority	How we will deliver	How we will be judged
More children are safe at home, at school and in the community, including reducing road traffic accidents and bullying.	<ol> <li>Implement the road safety strategy for children through the Road Safety partnership.</li> <li>Extend and develop opportunities for children and young people to tell us what makes them feel unsafe, and deliver programmes to improve their safety and resilience.</li> <li>Continue to support the development of anti-bullying strategies in schools, on school transport, and in community facilities, and implement a strategic rollout of the Anti-Bullying policy with all partners and interested parties. Liaise with Anti-Bullying Alliance and the National Strategy - Behaviour and Attendance to develop a Wirral Anti-Bullying Strategy.</li> <li>Implement and evidence learning from Child Death Overview Panels.</li> <li>Children's centres to develop action plans and activities designed to reduce the rate of emergency hospital admissions caused by unintentional and deliberate injuries to children aged 0-5 resident in the reach area of the centre.</li> </ol>	NI 48 Children killed or seriously injured in road traffic accidents. NI 69 Children who have experienced bullying.

Priority	How we will deliver	How we will be judged
Priority Children in care are safe and supported.	<ol> <li>How we will deliver</li> <li>Ensure effective multi-agency planning and commissioning of services for children with disabilities in accordance with the Aiming High for Disabled Children framework.</li> <li>Improve the quality of multi-agency transition arrangements for children in care with learning disabilities and / or mental health issues.</li> <li>Ensure good or excellent standards of care in all directly provided residential care, foster care and commissioned services. Complete review of in house residential services.</li> <li>Improve the quality and choice of provision for children living in out of borough independent sector residential placements.</li> <li>Maintain a full complement of trained and skilled social workers, so that all children in care have a qualified and suitably trained social worker to meet their needs in a timely way.</li> <li>Establish the Corporate Parenting Body (through re-designating the Virtual School Governing Body) and develop / implement the Corporate Parenting Strategy.</li> </ol>	<ul> <li>How we will be judged</li> <li>NI 62 Stability of placements of looked after children: number of moves.</li> <li>NI 66 Looked after children cases which were reviewed within required timescales.</li> <li>NI 58 Emotional and behavioural health of children in care. (Reported through Being Healthy).</li> <li>Improvement in performance against PSA 16 targets.</li> </ul>
	<ul><li>7. Continue to ensure that the mental health needs of children in care are recognised and responded to through a continuum of provision from consultation, advice, training, specialist assessments and interventions through to specialist placement provision.</li><li>8. Increase the number of former care leavers aged 19 years in suitable accommodation and in employment, education and training.</li></ul>	

Priority	How we will deliver	How we will be judged
Implement the government action plan in response to Lord Laming review of protection of children in England.	Delivery plan outlined in the Local Safeguarding Children Board Business plan.	Review completed and implemented.

### outcome area: enjoy and achieve

"We want to raise the achievement of all our young people and to narrow the gap in attainment experienced by our most disadvantaged children."

Priority	How we will deliver	How we will be judged
Public money is spent to maximum effect in all our	1. Remove surplus capacity in Primary & Secondary Schools through phased reviews of provision across the Borough.	% of surplus places in primary schools.
schools.	2. Implement a programme to review and improve Special School provision.	% of surplus places in secondary schools.

Priority	How we will deliver	How we will be judged
Young children and families are well supported, especially the most vulnerable, through the network of Children's Centres.	<ol> <li>Improve outreach of all Children's Centres to vulnerable families.</li> <li>Ensure priority is given to improving the outcomes for vulnerable families in the 5 ECM themes, via continuous data analysis, regular reports to the board, development of case studies of good practice.</li> <li>Use of tighter performance management structures and common agendas across children's centres; develop integrated multi-agency networks across areas and districts.</li> <li>Create robust information sharing protocols and systems across all partners.</li> <li>Publication of the Childcare Sufficiency Audit.</li> <li>Launch of Information System for Parents and Providers.</li> <li>Completion of Phase 3 Children's Centre developments.</li> </ol>	NI 92 narrowing the gap between the lowest achieving 20% in Early Years Foundation Stage profile and the rest. NI 118 Take up of formal childcare by low income working families. NI 109 Number of Children's Centres. Numbers of children and families accessing services and the proportion from vulnerable/disadvantaged backgrounds.

Priority	How we will deliver	How we will be judged
Children and families are supported with their social and emotional development.	<ol> <li>Ensure priority is given to work with vulnerable families on emotional and social development, e.g. via Social and Emotional Aspects of Learning (SEAL) programmes, Family Works, and nurturing training provided by Special Educational Support Service (SESS).</li> <li>Further embed the Managed Moves protocol in secondary and primary schools especially in order to further reduce the levels of exclusion.</li> <li>Continue to roll out Restorative Practices training.</li> </ol>	Number of children excluded from school (fixed and permanent exclusions). Numbers of schools engaged with the SEAL programmes.

Priority	How we will deliver	How we will be judged
Extended Services, delivered through schools and partners working in clusters, impact upon the outcomes for children and families.	<ol> <li>Continue to implement the Extended Services Action Plan.</li> <li>Priorities for 2010-2011 are:         <ul> <li>a. All clusters to continue to have robust plans clearly targeted using allocated resources effectively.</li> <li>b. Improve measurement of impact.</li> <li>c. Achieve the Full Core Offer across all schools by 2010.</li> </ul> </li> </ol>	NI 88 Number of extended Schools. RAG rating by Extended Services Regional Team. Number of children accessing services.

Priority	How we will deliver	How we will be judged
Raise standards in schools and settings by continuing to improve the quality of leadership and management, curriculum, assessment and learning, thereby ensuring none fall into an OFSTED category.	<ol> <li>Put revised School Improvement Policy into practice; provide appropriate briefings of councillors, governors and headteachers.</li> <li>Ensure primary schools causing concern or in an Ofsted category make sufficient progress to be removed in the shortest possible time.</li> <li>Identify underachieving and underperforming schools, subjects and groups within schools (including underperforming vulnerable learners) through analysis of data. This includes ensuring through the National Challenge and Gaining Ground programmes that by Summer 2011 no secondary school is below 30% for 5+A*-C grades (including English and mathematics).</li> <li>Increase accuracy of assessment and consistency of moderation at transition points.</li> <li>Ensure priority is given to ISP and WISP in primary schools; and coordinated, targeted support in secondary schools. Focus in particular on raising standards in English and maths. Implement the World Class Primary Curriculum.</li> <li>Implement curriculum changes in line with the 21st Century School programme and the review of the Primary Curriculum.</li> <li>Develop a high quality e-learning community that supports an improving and developing curriculum and encourages collaboration.</li> <li>Implement the Masters in Teaching and Learning Programme.</li> <li>Embed APP and AFL across English, mathematics, science and ICT teaching.</li> <li>Further develop effective teaching and learning strategies and the sharing of good practice to raise the quality of learning.</li> <li>Implement the next phase of 1-1 tuition, monitor and evaluate the impact.</li> <li>As appropriate implement the requirements of the Children Schools and Families Bill and disseminate to school settings and partners.</li> </ol>	NI 89 Reduction of number of schools judged as requiring special measures and improvement in time taken to come out of the category. All DCSF attainment targets and linked NI's will be measured. NI 78 - Reduction in number of schools where fewer than 30% of pupils achieve 5 or more A*- C grades at GCSE and equivalent including GCSEs in English and maths.

Priority	How we will deliver	How we will be judged
Close the attainment gap where poverty and disadvantage affect achievement.	<ul> <li>Better Communication Strategy <ol> <li>Develop and implement new models of service delivery for children and young people with speech, language and communication needs.</li> <li>Identify and pilot effective screening tools.</li> <li>Develop and implement a costed training plan for professional development across the workforce for parents/carers.</li> <li>Refine outcome and impact measures for this area of work.</li> </ol> </li> <li>Marrowing the Gap <ol> <li>Interrogate more deeply performance data including neighbourhood data, on effects of poverty on achievement across the partnership. Devise a strategy based on action research and the National Strategy Narrowing the Gap programme.</li> <li>Reduce child poverty by supporting families experiencing unemployment through family, adult and employability programmes.</li> </ol> </li> <li>Inclusion and Special Education Needs <ol> <li>Develop the use of range of intervention strategies to support under-achieving and under-attaining groups of pupils, e.g. via dissemination of Action Research findings of Educational Psychologists.</li> <li>Further reduce the SEN/non-SEN gap at the end of all Key Stages in the core subjects.</li> <li>Further develop greater collaborative working between schools to ensure that all mainstream schools have effective SEN provision maps that utilise provide and reliable intervention approaches and contribute towards raising SEN standard/schievements.</li> <li>Ensure all schools are making good use of IDP and progression Guidance materials to improve Quality First Teaching and enable them to set challenging and reliable targets to raise the achievements of all pupils.</li> <li>Work with schools to reduce the level of Persistent Absence in primary schools and secondary schools.</li> <li>Work with schools to reduce the level of Persistent Absence in primary schools and secondary schools.</li> <li>Work with schools to reduce the level of Persistent Absence in primary schools and secondary schools.</li> <li>Work with schools to reduce th</li></ol></li></ul>	<ul> <li>NI 92 narrowing the gap between the lowest achieving 20% in Early Years Foundation Stage profile and the rest.</li> <li>NI 102 Achievement gap between pupils eligible for free school meals and their peers achieving the expected level at KS2 and 4.</li> <li>NI 87 proportion of pupils who are Persistently Absent in secondary schools.</li> <li>Proportion of Children In Care who miss 25 days or more of school.</li> <li>NI 99 Children in care reaching level 4 in English at Key Stage 2.</li> <li>NI 100 Children in care reaching level 4 in Maths at Key Stage 2.</li> <li>NI 101 Looked After Children achieving 5 A*-C GCSE's.</li> <li>% care leavers in education, employment or training at age 19.</li> </ul>



### outcome area: positive contribution

"We want to engage all young people more fully in issues affecting their lives and particularly those at risk of disaffection."

Priority	How we will deliver	How we will be judged
Fewer children and young people are involved in offending and anti social behaviour.	<ol> <li>Quarterly analysis of FTE data to ensure targeted prevention resources to reduce numbers entering the youth justice system.</li> <li>Expansion of the Restorative Justice Protocol to ensure RJ principles are followed effectively and that all young people entering the youth justice system for the first time are considered for RJ as an alternative to prosecution.</li> <li>Increase use of Restorative Practice in schools to reduce exclusions.</li> <li>Ensure all young people are assessed at the point of entry to YOS and that ETE needs are addressed in intervention planning.</li> <li>Annual Partnership Agreement between Connexions and YOS reviewed and refreshed to sustain positive partnership working as cited during recent Ofsted ETE inspection.</li> <li>Connexions Personal Adviser support to YOS reconfigured to include Activity Agreement Advisor enabling direct access to the programme for Young Offenders.</li> <li>ETE mentors recruited and trained to support young people accessing ETE.</li> <li>Work with current providers to ensure an increase in accommodation available for young people whose previous convictions or behaviour might otherwise prevent them from being accommodated.</li> <li>Embed the Substance Misuse Strategy with identified actions reported through the integrated Youth Support Strategy.</li> <li>Provide courtroom skills training for Wirral young people giving them the opportunity to explore the consequences of offending and anti-social behaviour.</li> </ol>	NI 111 First-time entrants to the youth justice system aged 10-17. NI 86 Number of secondary schools judged as having Outstanding Behaviour. NI 45 Young offender's engagement in suitable education employment and training. NI 46 Young offenders access to suitable accommodation. NI 115 Tellus Survey, the total number of young people reporting either frequent use of drugs, or alcohol or both is lower compared to the number of respondents in October 2007 returns. NI 39 Alcohol harm-related hospital admission rates.

Priority	How we will deliver	How we will be judged
Children and young people have access to a range of appropriate play and developmental opportunities which meets their needs.	<ol> <li>Youth Hubs to provide a focus for District planning, delivering and monitoring of provision to improve the quality of services.</li> <li>The Youth Opportunity Fund/ Youth capital Fund will be used to support the Youth Offer.</li> <li>Young Carers will be taking part in a programme designed to provide opportunities to explore areas of concern and also to provide fun and challenging activities.</li> <li>We will continue to ensure that Children in Care are able to access leisure activity programmes during the holiday periods.</li> <li>Promote play opportunities for children and young people on quarterly basis in conjunction with local feeder schools.</li> <li>Children and young people can participate in a range of inclusive and accessible play activity in areas of identified need.</li> <li>Review and evaluate year one PlayBuilder sites.</li> <li>Deliver Play Safe action plan to address fears and concerns highlighted by children playing outdoors.</li> <li>Consult with Children and Young People on the design and improvement of eleven equipped play areas.</li> <li>Increase the percentage of Wirral schools working towards eco-school status which provides suitable outdoor play areas for all young people.</li> </ol>	NI 57 Children and young people's participation in high quality PE and sport. NI 110 Young People's participation in positive activities.

Priority	How we will deliver	How we will be judged
Children & Young People are actively engaged in community and democratic decision making process.	<ol> <li>The Executive Youth Board will annually review progress, make recommendations for future activity and report through District Youth Forum meetings.</li> <li>Establish robust consultation mechanism building on existing structures to consult with children and young people on the New Children and Young People's Plan.</li> <li>EYB agree with Older People's Parliament appropriate actions for co-working to address community cohesion concerns.</li> <li>Young people will be trained in recruitment and selection procedures. Twelve young people in 2010/2011.</li> <li>All children and young people who come into the care of the local authority will be directly contacted.</li> <li>Young people will continue to informally evaluate the Activity Agreement Programme.</li> <li>A grant panel will be established to oversee the allocation of the Youth Opportunity and Youth Capital Funds. The outcomes will be reported to both the Positive Contribution and the Integrated Youth support strategy Groups.</li> <li>The Commissioned youth activities will be monitored to ensure agreed targets and performance measures are achieved. Young people will be involved in the monitoring process.</li> <li>Pupil Panels for pupils from Special Schools will be developed to increase the involvement of young people will be actively involved in developing resources to support KS2/3 transition and will contribute to the launch and training of relevant professionals.</li> </ol>	NI 110 Young People's participation in positive activities. 10% of schools engaged in Healthy Schools Enhancement model. Representatives from 4 districts are engaged in the decision making process with the Executive Youth Board. NI 110 Young people's Participation in positive Activities

# social and economic wellbeing

"We want to equip our young people better for adult life and particularly to narrow the gap experienced by our most disadvantaged young people in their prospects."

Priority	How we will deliver	How we will be judged
Increase the number of young people who are participating and achieving their potential.	<ol> <li>Continue to progress the 14-19 reform agenda and to provide a range of opportunities and courses of high quality through the implementation of the:         <ul> <li>14-19 Plan.</li> <li>14-19 Quality Assurance Framework.</li> <li>School Sixth Form Quality Monitoring &amp; Evaluation Framework.</li> </ul> </li> <li>Increase post 16 participation and achievement through the implementation of the:         <ul> <li>Borough EET Strategy.</li> <li>IYS Strategy.</li> </ul> </li> <li>Support Wirral Care Leavers to access HE and achieve academic success.</li> <li>Provide young people with confidence and skills, and information to travel independently using public transport, or by walking or cycling.</li> </ol>	<ul> <li>NI 90 Take up of 14-19 learning diplomas.</li> <li>NI 79 Achievement of a level 2 qualification by the age of 19.</li> <li>NI 80 Achievement of a level 3 qualification by the age of 19.</li> <li>NI 117 Reduce the percentage of 16-18 year olds not in education employment or training (NEET).</li> <li>NI 91 Participation of 17 year olds in education or training.</li> <li>NI 148 Care leavers in Education, employment and training.</li> </ul>

Priority	How we will deliver	How we will be judged
Reduce numbers of 16-18 vulnerable young people NEET in line with LAA targets and the PSA 2010 trajectory.	<ol> <li>In recognition of the current economic climate and global recession we will refresh the:         <ul> <li>Borough EET Strategy.</li> <li>IYS Strategy.</li> <li>I4-19 Plan.</li> </ul> </li> <li>With a specific focus and monitoring of the progress of vulnerable groups and appropriate preventative and targeted intervention including:             <ul></ul></li></ol>	NI 117 16-18 year olds not in education employment or training (NEET). N148 Care leavers in Education, employment and training. NI 45 Young Offenders engagement in suitable education employment and training.

Priority	How we will deliver	How we will be judged
Contribute to the reduction in levels of child poverty and minimise the number of children and young people living in poor housing.	<ol> <li>Implementation of the CES Employment Strategy, WEDS priorities and Borough EET Strategy including the 'whole family' approach to addressing worklessness acknowledging the current economic climate and impact of the recession.</li> <li>Improve access to life opportunities such as education, employment or training, healthcare and social/recreational opportunities by providing:         <ul> <li>Work wise (scooters, cycles and travel cards)</li> <li>Travel Team (travel advice and journey planning)</li> <li>Travel Training.</li> </ul> </li> <li>Support young people including care leavers to access and maintain accommodation where needed by developing and progressing the following:         <ul> <li>Increase the number of households containing children and young people that are referred to power Health through Warmth for heating and insulation grants, thereby reducing fuel poverty amongst this group.</li> <li>Monitor support/accommodation provided to lone teenage parents.</li> </ul> </li> </ol>	<ul> <li>NI 116 Proportion of children in poverty.</li> <li>NI 176 Working age people with access to employment by public transport (and other specified modes).</li> <li>NI 118 Take up of formal childcare by low-income working families.</li> <li>NI 45 Young offenders access to suitable accommodation.</li> <li>NI 147 Care leavers in suitable accommodation.</li> </ul>

## outcome framework performance indicators

National Indicator		Ac	tual			Tar	gets		Historical
	2006/07	2007/08	2008/09	2009/10	2009/10	2010/11	2011/12	2012/13	performance
NI 19 - Proven Reoffending by young offenders 10 - 17 (lower is better)	-	0.3	1.3		1.3	1.2	1.2 To be agreed with Youth Justice Board		-
NI 22 - Perceptions of parents taking responsibility for the behaviour of their children in the area (%)	-	-	32.5	-	-	Target	setting from	2011	-
NI 43 - Young people within the YJS receiving a conviction in court who are sentenced to custody (%) (lower is better)	4.8	3.8	4.0	-	< 5.0	< 5.0	< 5.0	< 5.0	$\leftarrow \rightarrow$
NI 44a - Ethnic composition of offenders on YJS disposals - White (%)	0.9	-0.3	0.3		0.0	0.0	0.0	0.0	$\leftarrow \rightarrow$
NI 44b - Ethnic composition of offenders on YJS disposals - Mixed (%)	-0.1	1.1	0.2	-	0.0	0.0	0.0	0.0	$\leftarrow \rightarrow$
NI 44c - Ethnic composition of offenders on YJS disposals - Black (%)	0.3	0.4	0.4	-	0.0	0.0	0.0	0.0	$\leftarrow \rightarrow$
NI 44d - Ethnic composition of offenders on YJS disposals - Asian (%)	-0.4	-0.5	-0.3	-	0.0	0.0	0.0	0.0	$\leftarrow \rightarrow$
NI 44e - Ethnic composition of offenders on YJS disposals - Chinese (%)	-0.7	-0.6	-0.6	-	0.0	0.0	0.0	0.0	$\leftarrow \rightarrow$
NI 45 - Young offender's engagement in suitable education, training and employment (%)	70.1	83.9	82.0	-	90.0	90.0	90.0	90.0	$\downarrow \uparrow$
NI 46 - Young offender's access to suitable accommodation (%)	97.5	97.3	98.2	-	95.0	95.0	95.0	95.0	↑
NI 50 - Emotional Health of Children (%)	-	-	60.4	57.2	-	Target setting from 2011			$\checkmark$
NI 51 - Effectiveness of CaMHS (%)	15.0	15.0	15.0	-	16.0	16.0	16.0	16.0	$\leftarrow \rightarrow$

National Indicator			tual		Targets			Historical performance	
	2006/07	2007/08	2008/09	2009/10	2009/10	2010/11	2011/12	2012/13	performance
NI 52a - Take up of school lunches - Primary (%)	-	-	40.8	-	Target setting from 2010				-
NI 52b - Take up of school lunches - Secondary (%)	-	-	38.5	-		Target settir	-		
NI 53 - Prevalence of breastfeeding at 6-8 weeks from birth (%)	-	-	29.0	-	29.9 Target setting from 2010			-	
NI 54 - Services for disabled children (%)	-	-	-	63.0	Baseline year 2010 Target setting from 2011			-	
NI 55 - Obesity in reception aged children (LAA) (%) (lower is better)	9.13	9.57	9.55	-	9.23	9.37	9.50	-	↓↑
NI 56 - Obesity in year 6 aged children (%) (lower is better)	19.7	19.1	20.6	-	20.4	20.9	-	-	↓↑
NI 57 - Participation in sporting activities (%)	67.0	71.0	71.0	-	-	84.0	90.0	95.0	$\leftarrow \rightarrow$
NI 58 - Emotional health of children in care (lower is better)	-	-	15.3	-		Target settir	ng from 2011		-
NI 59 - Percentage of initial assessments for children's social care carried out within 7 working days of referral (%)	81.6	78.8	77.4		72.0	76.0	78.0	80.0	$\downarrow$
NI 60 - Percentage of core assessments for children's social care that were carried out within 35 working days of their commencement (%)	82.4	89.8	79.1	-	80.0	80.0	82.0	84.0	$\downarrow \uparrow$
NI 61 - Timeliness of adoption (%)	76.2	55.6	61.1	-	68.0	80.0	85.0	90.0	ſ
NI 62 - Stability of placements: number of placements (%) (lower is better)	10.3	12.5	10.2	-	10.0	9.0	9.0	9.0	ſ

National Indicator		Ac	tual			Tar	gets		Historical
	2006/07	2007/08	2008/09	2009/10	2009/10	2010/11	2011/12	2012/13	performance
NI 63 - Stability of placements: length of placement (%)	62.3	51.9	67.5	-	70.0	72.0	72.5	73.0	$\downarrow\uparrow$
NI 64 - Child protection plans lasting 2 years or more (%) (lower is better)	7.7	3.4	4.8	-	5.0	4.0	4.0	4.0	Ŷ
NI 65 - Child protection plan for a second or subsequent time (lower is better)	8.9	14.5	11.2	-	15.0	14.0	13.0	13.0	$\downarrow \uparrow$
NI 66 - LAC cases which were reviewed within required timescales (%)	89.8	95.2	96.3	-	100.0	100.0	100.0	100.0	Ŷ
NI 67 - Child protection cases which were reviewed within required timescales (%)	100.0	100.0	99.2	-	100.0	100.0	100.0	100.0	$\leftarrow \rightarrow$
NI 68 - Percentage of referrals to children's social care going on to initial assessment (LAA) $(\%)$	40.5	65.9	64.3	-	72.0	75.0	77.0	80.0	$\downarrow \uparrow$
NI 69 - Children who have experienced bullying (results for NI 69 are not directly comparable due to changes in the questionnaire) (%) (lower is better)	-	-	45.9	26.8		Target settir	g from 2010		N/A
NI 70 - Reduce emergency admissions to hospital relating to unintentional and deliberate injuries to children (lower is better)	155.9	161.1	159.6	-	129.9	Target	setting from	n 2010	$\downarrow \uparrow$
NI 71 - Young Runaways (number between 1-15)	-	-	14.0	-	-	15.0	15.0	15.0	-
NI 72 - Achievement of at least 78 points across the Early Years Foundation Stage (LAA) (%)	45.0	46.0	49.0	52.1	56.0	57.0	To be agr Youth Just		ſ
NI 73 - Achievement at level 4 or above in both English and maths at Key Stage 2 (LAA) (%)	72.0	72.0	75.0	74.0	77.0	78.0	To be agr Youth Just		Ŷ
NI 75 - 5+ GCSE A*-C (Inc English and maths) (LAA) (%)	46.3	48.4	50.2	53.8	55.2	57.0	To be agr Youth Just		ſ

National Indicator		Actual				Tar	gets		Historical
	2006/07	2007/08	2008/09	2009/10	2009/10	2010/11	2011/12	2012/13	performance
NI 76 - Number of schools where less than 55% achieve L4 KS2 English and maths (lower is better)	16.0	11.0	8.0	11.0	-	16.0	To be agreed with DCSF		$\downarrow \uparrow$
NI 78 - Number of schools where less than 30% achieve 5+ GCSE including English and maths (lower is better)	6.0	6.0	4.0	4.0	-	2.0	0.0	0.0	Ŷ
NI 79 - Achievement of level 2 by the age of 19 (%)	69.3	70.8	74.0	-	-	-	82.0	-	Ŷ
NI 80 - Achievement of level 3 by the age of 19 (%)	44.4	43.9	48.0	-	-	-	54.0	-	ſ
NI 81 - Inequality gap at level 3 by the age of 19 (%) (lower is better)	32.4	33.1	32.8	-	-	-	28.0	26.0	$\leftarrow \rightarrow$
NI 82 - Inequality gap at level 2 by the age of 19 (%) (lower is better)	50.8	51.0	59.5	-	-	-	64.0	66.0	Ŷ
NI 84 - 2 or more A*-C GCSE science (%)	50.8	54.5	53.4	60.5	58.7	60.6	63.0	64.0	Ŷ
NI 85a - Post-16 participation in physical sciences (physics)	-	-	128.0	133.0	-	-	-	-	Ŷ
NI 85b - Post-16 participation in physical sciences (chemistry)	-	-	246.0	270.0	-	-	-	-	Ŷ
NI 85c - Post-16 participation in physical sciences (maths)	-	-	276.0	306.0	-	-	-	-	Ŷ
NI 86 - Secondary schools judged as having good or outstanding standards of behaviour (%)	81.8	86.4	86.4	-		90.0	90.0	90.0	Ŷ
NI 87 - Secondary schools persistent absence (LAA) (%) (lower is better)	8.0	7.1	4.9	-	6.4	5.5	To be agr DC		Ŷ

National Indicator		Ac	tual			Tar	gets		Historical
	2006/07	2007/08	2008/09	2009/10	2009/10	2010/11	2011/12	2012/13	performance
NI 88 - Schools offering extended services (%)	-	-	85.0	98.0	70.0	72.0	72.5	73.0	-
NI 89a - Number of schools judged as requiring special measures (lower is better)	-	-	-	-	5.0	4.0	4.0	4.0	-
NI 89b - Average time taken for schools to come out of category (lower is better)	-	-	-	-	15.0	14.0	13.0	13.0	-
NI 90 - Take up of 14 - 19 Learning Diplomas	-	-	-	-	Target se	Introduced tting from a	in 2009/10 cademic yea	r 2010/11	-
NI 91 - Participation in of 17 year olds in education or training (%)	79.0	79.0	-	-	-	-	To be agreed		-
NI 92 - Narrowing the gap at FSP (LAA) (%) (lower is better)	37.4	34.3	31.9	31.3	30.2	29.0	To be agreed with DCSF		Ŷ
NI 93 - Progression of 2 levels English KS1 - KS2 (LAA) (%)	80.5	83.8	87.2	84.0	86.0	87.0	To be agr DC		$\downarrow \uparrow$
NI 94 - Progression of 2 levels maths KS1 - KS2 (LAA) (%)	73.7	74.8	77.2	80.0	79.0	82.0	To be agr DC		ſ
NI 99 - LAC reaching L4 English at KS2 (LAA) (%)	36.0	41.0	62.0	-	44.0	53.0	To be agr DC		1
NI 100 - LAC reaching L4 maths at KS2 (LAA) (%)	36.0	52.0	62.0	-	44.0	56.0	To be agr DC		ſ
NI 101 - LAC achieving 5+ A*-C (Including English & maths) (LAA) (%)	-	-	10.5	7.3	7.4	6.3	To be agreed with DCSF		-
NI 102a - FSM/non-FSM gap at KS2 English and maths (%) (lower is better)	25.4	23.7	21.7	-	-	-	To be agr DC		Ŷ

National Indicator	Actual 2006/07 2007/08 2008/09 2009/10 2				2009/10	Tar; 2010/11	2012/12	Historical performance	
	2000/07			2005/10	2005/10	2010/11			
NI 102b - FSM/non-FSM gap at KS4 English and maths (%) (lower is better)	34.8	36.5	37.6	-	-	-	To be agreed with DCSF		¥
NI 103a - SEN statements within 26 weeks (excluding exceptions) (%)	-	-	97.0	100.0	100.0	100.0	100.0	100.0	-
NI 103b - SEN statements within 26 weeks (including exceptions) (%)	-	-	91.0	100.0	95.0	100.0	100.0	100.0	-
NI 104 - SEN/non-SEN gap at KS2 English and maths (%) (lower is better)	56.2	55.9	51.2	48.6	-	-	46.0	44.0	ſ
NI 105 - SEN/non-SEN gap at KS4 English and maths (%) (lower is better)	43.7	44.1	46.4	50.4	-	-	47.0	45.0	Ţ
NI 106 - Young People from low income backgrounds progressing to university (%)	30.0	31.0	-	-	-	27.0	26.0	25.0	-
NI 109 - Delivery of Sure Start Centres (%)	-	-	95.0	-	100.0	100.0	100.0	100.0	-
NI 110 - Young peoples participation in positive activities (%)	-	-	80.5	63.7	-	Target	et setting from 2011		-

National Indicator	Actual Targets						Historical		
	2006/07	2007/08	2008/09	2009/10	2009/10	2010/11	2011/12	2012/13	performance
NI 111 - First time entrants into the Youth Justice System (LAA) (lower is better)	1440.0	1620.0	1370.0	-	1570.0	1500.0	-	-	↑↓
NI 112 - Reduction in the under 18 Conception Rate (LAA) Data subject to timeframe of gestation and registering of birth. (lower is better)	-5.6	-6.7	-	-	-28.0	-39.0	-50.0	-	Ŷ
NI 113 - Prevelence of chlamydia in under 25's (%) (lower is better)	-	21.6	-	-	-	Targe	Target setting from 2010		-
NI 114 - Permanent exclusions from school (%) (lower is better)	0.10	0.10	0.08		0.07	0.07	0.07	0.07	<b>↑</b>
NI 115 - Substance misuse by young people (%) (lower is better)	-	-	11.1	13.9	-	Target setting from 2011		า 2011	-
NI 117 - Percentage of 16 - 18 year olds NEET (LAA) (%) (lower is better)	10.0	9.5	9.1	8.9	7.1	6.9	Target set 20	ting from 10	¢
NI 118 - Take up of formal childcare by low-income working families (%)	19.4	21.1	-	-	-	-	-	-	-
NI 147 - Care leavers in suitable accommodation (%)	80.5	91.1	91.4	-	-	95.0	95.0	95.0	↑
NI 148 - Care leavers in EET (%)	56.1	40.0	55.2	-	-	Targe	t setting fron	1 2010	↑↓

