

WIRRAL CHILDREN'S TRUST BOARD – 18 JANUARY 2011

EARLY INTERVENTION GRANT AND COMMISSIONING

1.0 Executive Summary

1.1 This report provides an update on the range of activities currently commissioned by the Children's Trust through external funding grants to be replaced by the Early Intervention Grant (EIG). These were:-

- 0-19 (including the Strategic partnership Contribution)
- Think Family
- Teenage Pregnancy
- Positive Activities for Young People (PAYP)
- Sure Start
- Youth Opportunity Fund
- Youth Crime Action Plan
- Young People's Alcohol and Substance Misuse
- Aiming High for Disabled Children and Families (AHDC)

The report includes proposals for the priorities to underpin the next round of commissioning and offers options for the length of the contracts and suggests a time line for the process

2.0 Background

2.1 The use of commissioning as a tool to identify the most appropriate providers of both targeted and universal services is growing across the public sector. Commissioning not only identifies providers it can also be used to underpin change management in respect of improving performance in service providers and also by involving service users in the decision making process. Over the last few years there has been an increase in commissioning as the means of identifying new providers to deliver services to meet specific policy requirements of government.

2.2 On 31 March 2011, the specific funding of the following programmes outlined in section one of this report, will cease. In the 2011-12 budget statement the government announced the launch of the Early Intervention Grant (EIG). Funding for this will run from 2011 until 2015. The guidance from the Department for education indicates that the EIG will cover the following:

- Sure Start children's centres
- Free early education places for disadvantaged two-year-olds
- Short breaks for disabled children
- Targeted support for vulnerable young people

- Targeted mental health in schools
- Targeted support for families with multiple problems.

The government also announced that while the EIG will fund these programmes the grant is not ring fenced and local decision making would determine priorities and commissioning requirements.

- 2.3 A number of providers in both the voluntary and statutory sector are currently funded by a number of grant regimes such as the Area Based Grant, Aiming High for Disabled Children and Sure Start and as already stated, funding will cease on 31 March 2011. The Commissioning process can take up to six months and in Wirral's case, Wirral Council has signed a Compact with the Voluntary Sector agreeing that commissioning will not take less than six months. Clearly commissioning would not be completed in time to enable contracts to be awarded by 31 March 2011. To ensure continuity of service provision, the Council has agreed to roll over the grants to voluntary and community organisations for an additional three months until 30 June 2011. With regard to the statutory sector, a number of their programmes, previously covered by the ABG, have been included in the main budget for 2011-12.
- 2.4 The Early Intervention Grant will, subject to agreement by the Council, be used to cover a number of priority areas. The allocation for the Early Intervention Grant for 2011-12 is £15.1 million. In addition, the range of interventions required will mean that commissioning will have to be very specific in its requirements and required outcomes. In some instances it will be units of specific interventions that will be commissioned as opposed to whole services. With this as the context for commissioning for 2011-12, commissioners have been meeting with strategic leads, colleagues from Health and the Voluntary and Community Sector with the intention to scoping the issues to be addressed in the commissioning process.

3.0 Early Identification of Priorities

- 3.1 It is essential that priorities are identified following analysis of evidence. Within Wirral there is more information and data to support decision making than has previously been available. These themes are in line with the national priorities and provide a framework for tackling issues that have been identified from Common Assessment Framework (CAF) returns, ASSET, the Youth Offending Service Evaluation tool kit and other returns from internal monitoring returns. There is now more evidence available to guide decision making regarding priorities (Please see Appendix Two). In essence, Commissioning should meet priorities and priorities should underpin themes.

Future commissioning themes are suggested as follows:

- Parenting and Compromised Parenting
- Children and Young People with Disabilities
- Behaviour in Children, Young People and Families.

- 3.2 In summary returns from both CAF and ASSET assessments show that the localities most in need run through Birkenhead, Tranmere, Rock Ferry, Liscard and Seacombe. In terms of gender White British Boys make up the biggest number of the CAF cohort. Behaviour, Parenting and Adult Mental Health were the main triggers that lead to the use of CAFs. The evidence from ASSET suggests that it is generally more white British Boys involved with the YOS. Both sources of evidence point to behaviour as the main causes of concern with parenting support being offered following both assessments.

4.0 Priorities identified from Corporate Consultation

- 4.1 As part of its approach to identifying its priorities, Wirral Council embarked on a corporate consultation (Wirral's Future Be part of It) with local people and businesses and voluntary organisations. With regard to the Children and Young people's Task Force areas identified included:

- Explore increased delivery of services by the Voluntary Community and faith Sector.
- Scrutinise the operation of Children's Centres for Best Value.

- 4.2 With these areas are aligned to needs assessment the commissioning priorities for the purpose of the Early Intervention Grant are suggested as follows:

- Sure Start.
- Parenting, Behaviour and Family Support.
- Aiming High for Disabled Children.

- 4.3 These priorities provide a framework within which services can be commissioned and are complementary to the Council Priorities. In addition, these priorities also allow for a co-ordinated planned response to key issues arising from the programmes listed in 3.1 and which contribute to the issues identified from the CAF and ASSET analysis.

5.0 Timeline

- 5.1 There is a requirement for Wirral Council to keep to its compact with the Voluntary Sector and informal conversations with representatives from the voluntary sector indicate that agreed timescales should be retained. With this in mind, the Time line (Appendix B) is attached for approval.

This timeline takes account of the need to report to Cabinet and also to allow preparation time for Pre-qualifying Questionnaires and method Statements thereby meeting Compact requirements. Commissioners, will liaise with colleagues from corporate procurement to ensure any requirements linked to the commissioning rules contained in the Official Journal of the European Union (OJEU), are adhered to.

6.0 Other Considerations

- 6.1 As part of the response to the Wirral's Future Be Part of It, consultation, the Council agreed to consider the management of children's' centres. This could result in a decision to commission new providers of services. In line with any commissioning of new providers there might also be the opportunity to revise delivery models to produce efficiencies and future savings. To achieve such an outcome it would be necessary to commission on a joined up basis to maximise the opportunity to make improvements. However any changes identified would not be in place in the next 3-6 months outside of the timeframe for this proposed round of commissioning, thereby requiring a second round.
- 6.2 With paragraph 6 in mind, there are two options presented for the commissioning of services from 2011-15. Both rounds would consecutively run for the period of the EIG 2011-2115. However in this approach, there are options to be considered with regard to the length of contracts to be commissioned.
- 6.3 Option One, commission for twelve months with the option to extend contracts as necessary if arrangements are not in place to start the second round of commissioning. The second round of commissioning would be for a period of at most 33 months subject to any contract extensions from round one. This would ensure that any necessary in-house operational changes would be identified in time to be included in commissioning proposals for round two. There is a risk with this approach in that an initial twelve month contract would not be attractive to some providers given the risk that they might not be re-commissioned.
- 6.4 Option Two, commission for 21 months and then for twenty four months. This would provide a contract that would be more attractive to providers and possibly encourage more organisations to bid. The risk with this approach is that any internal changes would be completed ahead of 21 months leaving in place arrangements not matched to priorities and not conducive to efficient working.
- 6.5 A key requirement from this commissioning is for services to be delivered more effectively to produce better outcomes for both service users and the commissioning authority. Therefore the second round of commissioning will be required to ensure that all priorities are addressed; provision is complementary and seamless; and effective in meeting improvement targets. Option One allows for necessary changes to take place and enables commissioning to progress if necessary in house changes have been made.

7.0 Financial implications

- 7.1 There is a budget of £15.1 million available. The actual allocation between priorities has yet to be agreed. Of this money approximately £500,000 was allocated to fund the rollover of contracts.

8.0 Recommendations

The Children's Trust Board are asked to approve

1. The priorities as outlined in Section 4.4
 - Sure Start
 - Parenting, Behaviour and Family Support
 - Aiming High for Disabled Children
2. The Time line (Appendix One) as attached
3. Option One as the agreed contract period for commissioning in round one.
4. The Trust Board are also asked to agree that the Children's Trust Executive oversee and agree service specification and be accountable for the time line.

David Armstrong
Interim Director of Children's Services

DRAFT TIMETABLE 1

Contract Details

Contract Title:	CYPD Early Intervention
Annual Value:	Above £156k
Procurement Process:	Restricted Without PIN
Contract Duration:	TBC
Period of Contract:	TBC

It is mandatory that for purchases over £10,000 in total value, all tenders and 'requests for quotation' must be channelled through Corporate Procurement to be posted through the approved e-tendering and sourcing portal – 'The Chest'.

Procurement Timetable (Above OJEU Threshold – Restricted Procedure)

Task	Complete by	Action
1 Completion of the PQQ, ready to send, With particular reference to the Technical Section which should mirror the final tender evaluation. A compliance schedule is useful for evaluation purposes.	21 st February 2011	Commissioning Managers (CM), Alison Abraham (AA) Corporate Procurement (CP)
2 Issue of OJEU Notice and PQQ – Restrictive Procedure, Corporate Procurement will upload the OJEU Contract Notice and PQQ onto the approved e-tendering and sourcing portal – 'The Chest'. Suppliers will be able to download blank PQQs from 'The Chest'.	25 th February 2011	CP
3 Supplier Workshop, Face-to-face discussion with potential tenderers to clarify tender document particulars and process.	4 th March 2011	CM, AA, CP
4 Develop Tender Documentation, scoring matrix and evaluation criteria Including additional specification if required, pricing schedule, scoring matrix to include price & quality). Outline plans for contract monitoring, state Performance Indicators if appropriate. More contract specific – relate to each aspect of the specification	Completed by March 2011	CM, AA, CP
5 Return Date for Completed PQQ and submission of support information (minimum 30 days) PQQs will be returned to 'The Chest' Do not ask for supplementary documentation unless necessary.	29 th March 2011	CP
6 Evaluation of PQQ Selection Criteria and support criteria including financial searches. Shortlist suppliers who meet selection criteria and issue with tender documents See Evaluation matrix and standard evaluation criteria in guidance. Can give more 'weight' to more important criteria for eg Technical.	30 th March 2011 – 8 th April 2011 (8 working days)	CM, AA
7 Issue of Tender Documents (40 days, including Easter/Royal Wedding Bank Hols) Issue shortlisted suppliers with tender documents. Tender documents will be returned to 'The Chest'.	11 th April 2011	CP
8 Issue of Reference Questionnaires to Short List. To nominated referees	If required	CP
9 Return of Reference Questionnaires Allow at least 2 weeks to respond Attach completed questionnaires to 'The Chest'	If required	CP
10 Return of Tender Documents Law, HR and Asset Management will arrange for opening of submitted tender documents from 'The Chest'.	23rd May 2011	Legal/CP
11 Tender Evaluation Use evaluation matrix and award criteria (with weightings) to score providers	24 th May – 8 th June 2011 (12 working days)	CM, AA, CP

12	Designated Day for Presentations/ Interviews. If required site visits and presentations scheduled for specific dates. All key personnel to be made available.	9 th & 10 th June 2011	CM, AA
13	Final Analysis – Tender Evaluation After Presentation/Interview final period to possibly amend scores and decide on final awards	13 th June – 15 th June 2011	CM, AA
14	Final Analysis – cabinet report Preparation and posting of report to Cabinet Must sit on server 3 weeks prior to Cabinet If total contract value is over £500k Cabinet must approve the decision before award letters are issued (letters subject to Alcatel) If total contract value is under £500k, award letters can be issued before Cabinet and subject to Cabinet approval and Alcatel	16 th June onward	CM, AA
15	Award of Contract Subject to Cabinet approval Clarify Terms and Conditions with Colin Hughes (unless they accept our own). Borough Solicitor to draw up contract. Need to issue successful / unsuccessful letters.	TBC	CM, AA, CP
16	Alcatel Ruling, 10 Day stand still Cool Off Period	TBC	CP
17	Award Notice to OJEU Please advise Corporate Procurement of contract award details OJEU AWARD Notice will be placed through 'The Chest'	TBC	CP
18	Hand Over Period – if required	TBC	
19	Contract Start Or a date as soon after evaluation and award as approved by Cabinet/Governors	1 st July 2011	

Future Commissioning Needs Assessment Needs Identified by CAF/TAC Process and YOS (v2)

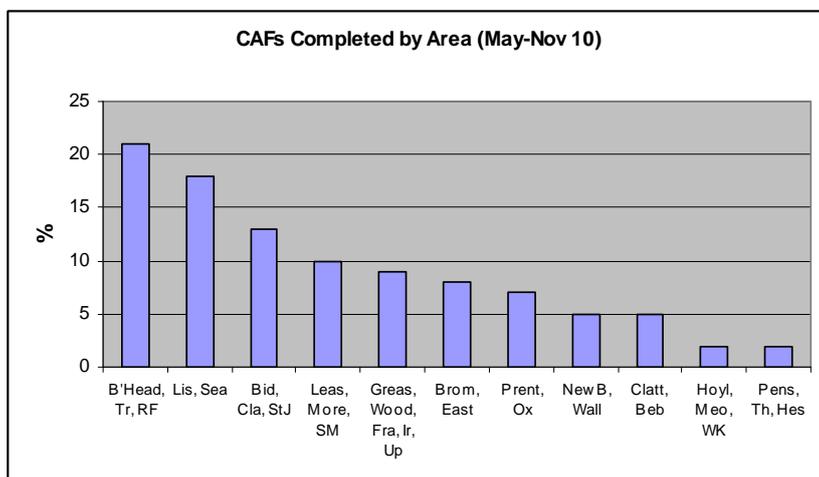
Summary

- This report is a summary of CAF data from the 11 Area Teams for May - November 2010
- Birkenhead/Tranmere/Rock Ferry (21%) and Liscard/Seacombe (18%) areas produced the most CAFs
- Primary (21%) and Secondary (20%) schools and health agencies (15%) author the most CAFs
- Most CAFs are completed on young people in the 5-10 age group (33%)
- 59% of CAFs are completed on boys; 41% on girls
- Where ethnicity is stated, 96% of C&YP describe themselves as white British
- 16% of CAFs are completed on C&YP with a disability
- Enjoy and Achieve (26%) reported as greatest need
- Behaviour (24%), Parenting (13%) and Health (10%) issues are the common triggers for a CAF
- Support from FSW, School Nurses, Health Visitors and Parenting Programmes are most requested services from CAF.

Introduction

This report is a summary of relevant findings from the CAF Activity reports produced between May and November 2010 and a recent audit of 154 CAFs produced in the same period. The presented data reveals the patterns of demand across the area teams and details identified needs and the agencies requested through the CAF and TAC (Team Around the Child) process. Also presented is a summary of youth offending activity for one year reported by the Youth Offending Service. The report also includes general population and specific deprivation data for comparison from the 2008 JSNA and the Office for National Statistics (ONS).

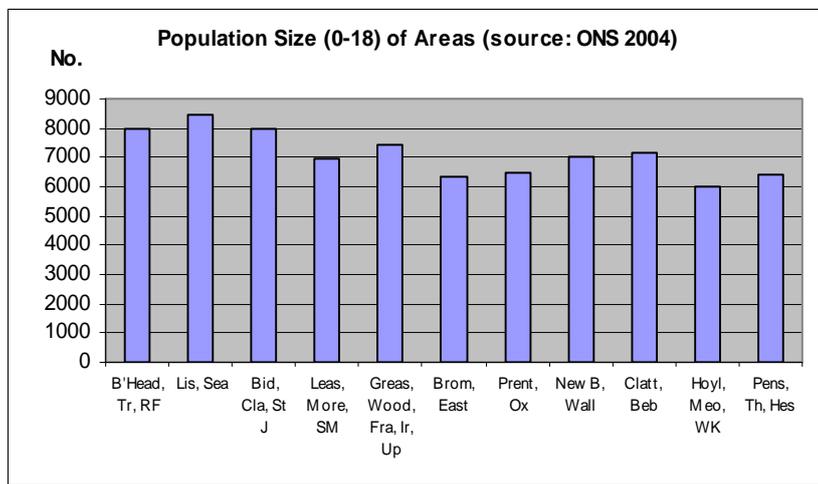
CAFs Completed by Area



11 multi agency area teams are located throughout Wirral based on the 2004 Ward boundaries. Each area team is responsible for monitoring all the CAF and TAC activity for agencies in their area.

The first graph shows the number of CAFs completed in each area between May and November 2010. It clearly shows that the three greatest areas of need are Birkenhead/Tranmere/Rock Ferry (21%) Liscard/Seacombe (18%) and Bidston/Claughton/St James (13%). The data also shows that need is at its lowest in West Wirral which accounts for less than 4% of CAF activity.

The second graph shows the comparative size of population (0-18) for each area. The graph reveals that the population size of each area is similar and does not reflect the pattern of need shown in the graph above. Data from both graphs has been used to show how many CAFs per '000 of the 0-18 population are produced by each area. The results are shown in the table overleaf.



CAFs completed per '000 of 0-18 Population

CAFs Completed in May to Nov 2010		
Area	Completed CAFs %	CAFs per '000 (0-18 popn)
Birkenhead, Tranmere, Rock Ferry	21	14
Liscard and Seacombe	18	12
Bidston, Claughton, St James	13	8
Leasowe, Moreton, Saugh Mass	10	8
Greasby, Woodchurch, Frankby, Irby, Upton	9	6
Bromborough and Eastham	8	7
Prenton and Oxton	7	6
New Brighton and Wallasey	5	4
Clatterbridge and Bebington	5	4
Hoylake, Meols, West Kirby, Thurst	2	1
Pensby, Heswall, Thingwall	2	2

By comparing the 0-18 year olds population data for each area to the number of CAFs undertaken the number of CAFs completed can be calculated. This information is shown in the accompanying table.

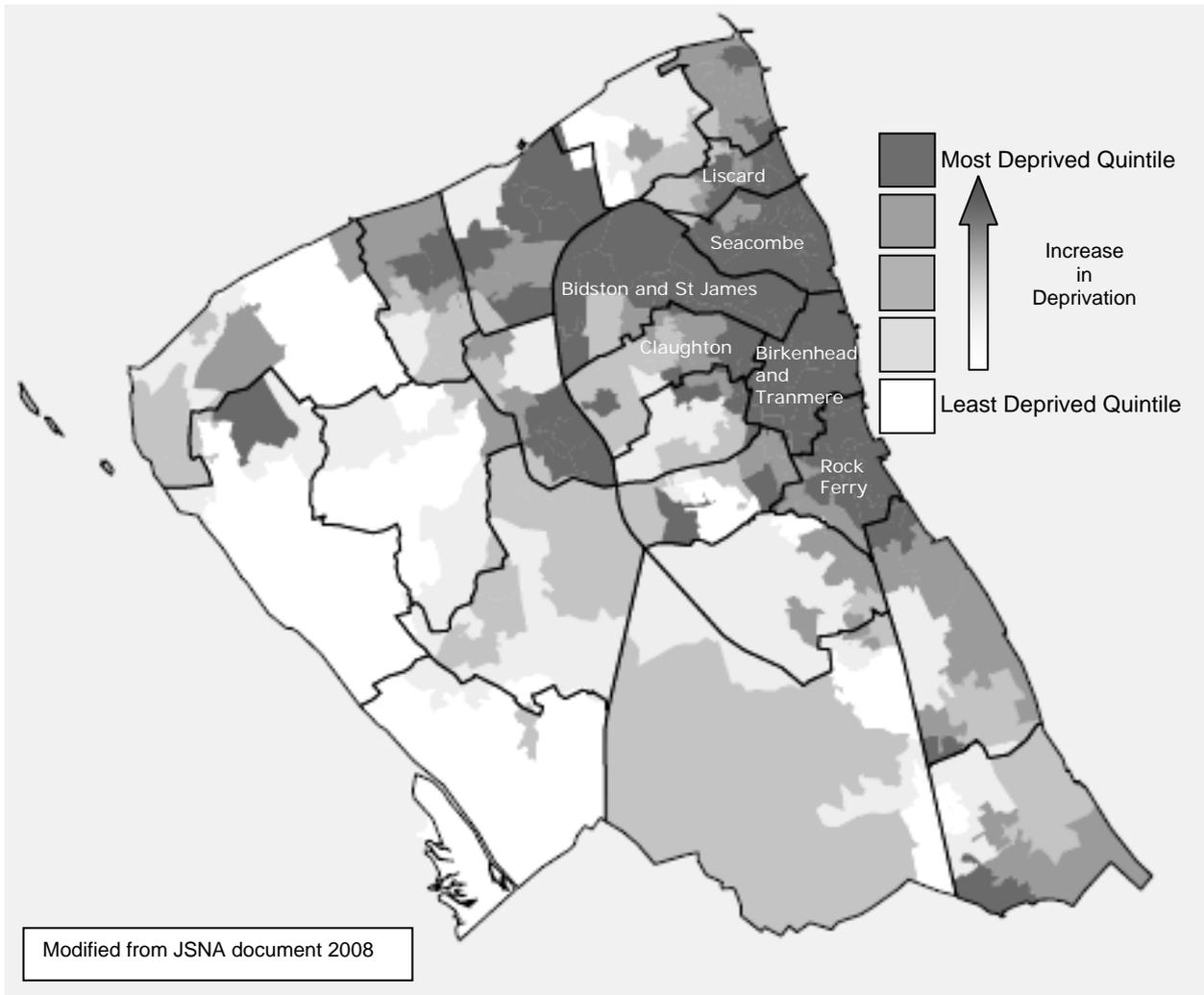
The information clearly shows that in the busiest areas more CAFs are completed per '000 children and young people rather than the busiest areas having a bigger population.

This supports findings which suggest that need is greatest in the area between Liscard and Rock Ferry.

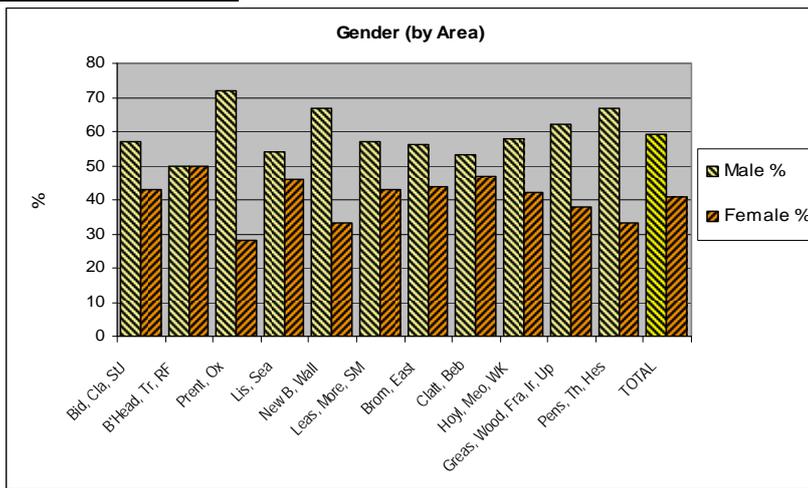
Index of Multiple Deprivation (IMD) 2007

The Index of Multiple Deprivation (IMD) 2007 is a combined measure of different indicators of poverty. It uses local data about income deprivation, employment deprivation, health deprivation and disability, education skills and training deprivation, barriers to housing and services, living environment deprivation, and crime to inform where a particular district sits in a rank order of deprivation. Wirral is the 60th most deprived of the 354 districts in the country and is in the bottom 20% nationally. Within Wirral however, local variations exist. The map below illustrates how levels deprivation and affluence vary across Wirral.

The map clearly shows that the most deprived areas are those in the north east of Wirral. The most deprived areas identified by the 2007 IMD are Seacombe, Bidston and St James, Birkenhead and Tranmere. It is in these areas where CAF activity is at its greatest.



CAF's by Gender



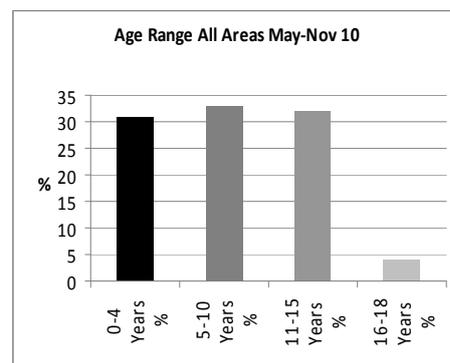
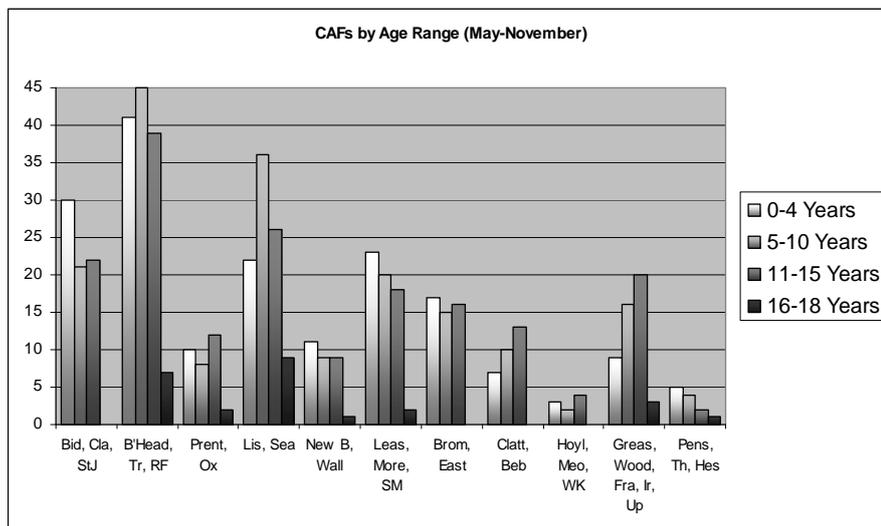
The majority of CAFs are completed on boys (59%) and this has been reported in every month apart from October 2010 when girls (52%) accounted for more CAFs for the first time.

This dominance by boys does not match the gender balance of Wirral as a whole where females account for 53% and boys for 47% of the population. The graph shows that boys dominate the CAF process in Prenton/ Oxtan, New Brighton/ Wallasey, Greasby/ Woodchurch & Pensby areas.

Girls are more visible in the CAF process in south Wirral, Birkenhead/Tranmere/Rock Ferry & Bidston/Claughton/St James areas.

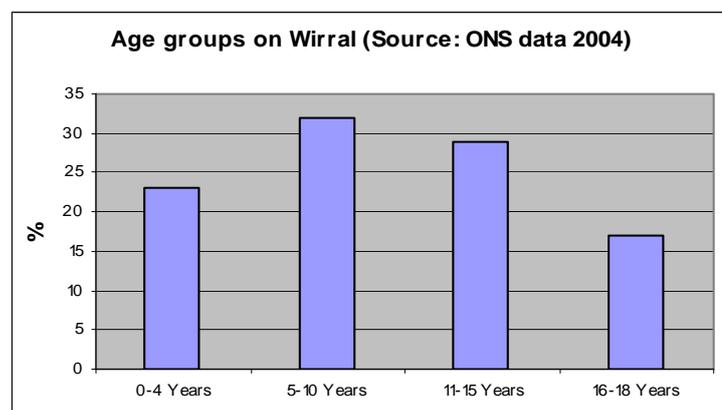
Schools author nearly half of all CAFs (Primary and Secondary both 21%). Health agencies, mainly health visitors, also undertake a significant amount (15%).

CAF's by Age Group



The graphs above show a breakdown of CAF clients by age group for each area. They show that local variations exist across area teams. Significantly they also show that in the two busiest areas (Birkenhead/Tranmere/ Rock Ferry and Liscard/ Seacombe) more CAFs are completed on 5-10 year olds.

Overall across Wirral 5-10 year olds have the greatest need (33%), with 11-15 year olds (32%) and 0-4 year olds (31%) showing similar demand for CAFs. Few CAFs (4%) are undertaken on 16-18 year olds.



The graph on the left shows the actual age breakdown of the 0-18 population on Wirral. The graph shows that 5-10 year olds account for 33% of the population followed by 11-15 year olds (27%) and 0-4 year olds (23%). This data would suggest that for the size of population 0-4 year olds have more CAFs completed than might be expected. Significantly, the opposite is true for 16-18 year olds who make up 17% of the 0-18 population but only account for 4% of CAFs.

Ethnicity of Child/Young Person

The CAF form records the ethnicity of the child/young person. This data shows that CAFs are overwhelmingly (96%) undertaken on children/ young people who consider themselves to be White British. There are no significant differences between recorded ethnicity across areas. Other groups recorded in the past year who account for less than 1% each are Polish, Black Caribbean, White and Black African, Asian, Chinese and Hungarian.

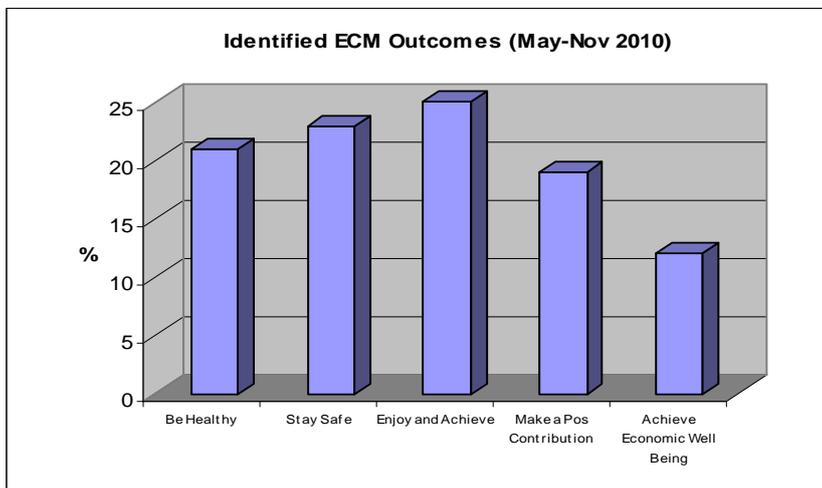
Data provided by the Office for National Statistics reveals that across all age groups on Wirral approximately 96% of people describe themselves as white British and the CAF data reflects this.

Recorded Disability

The form also records whether the child/ young person has a disability. Where this has been recorded it shows that 16% of CAFs are completed on a child/ young person who has a disability. This figure is fairly evenly reported from each area.

Identified Needs and Outcomes

Agencies are asked to indicate which of the 5 Every Child Matters outcomes apply to each completed CAF form. This data can then be analysed to inform what provision should be made available to each C&YP. This information is presented in the graph overleaf:



Enjoy and Achieve (26%) is identified as the greatest need in Bidston, Birkenhead, Liscard, Wallasey, Hoylake and Pensby areas.

Stay Safe (21%) is identified as the greatest need in Leasowe, Bromborough and Clatterbridge areas.

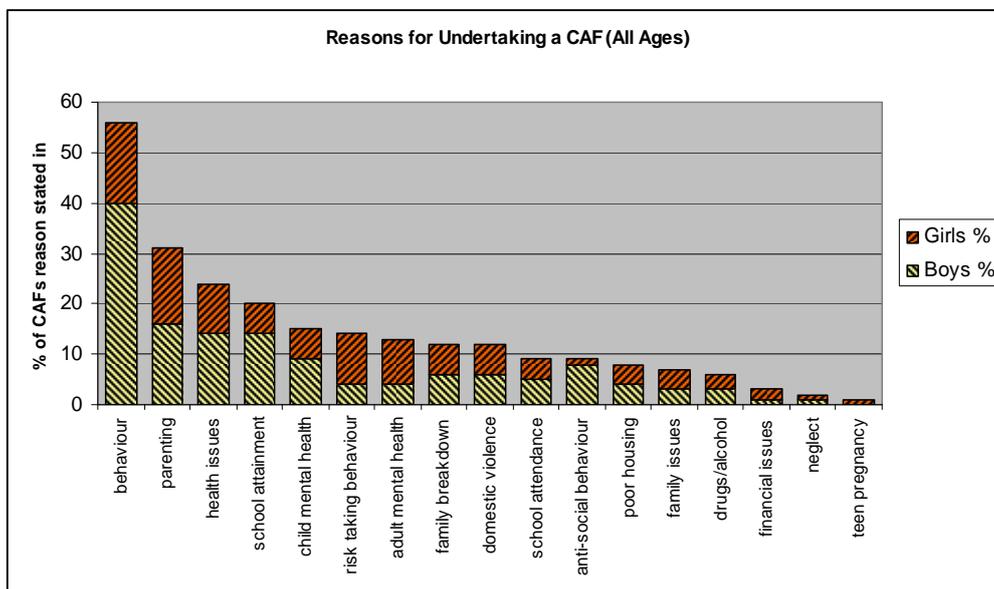
Make a Positive Contribution (20%) is identified as the greatest need in Greasby/Woodchurch area.

Be Healthy (18%) is identified as the greatest need in Prenton/Oxton area.

Enjoy Economic Wellbeing (15%) is not identified as the greatest need in any area.

CAF Audit

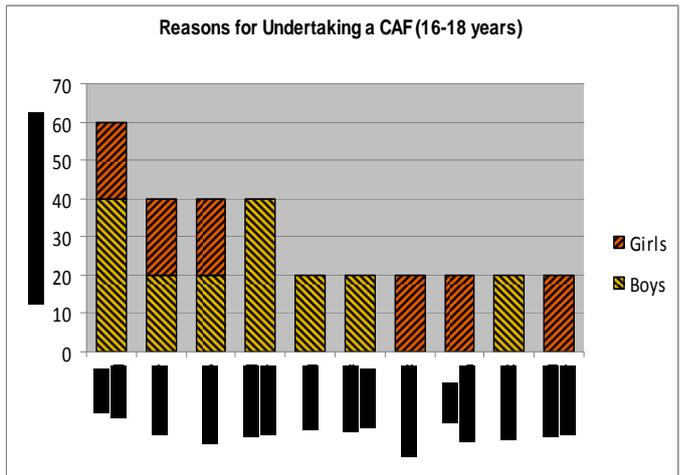
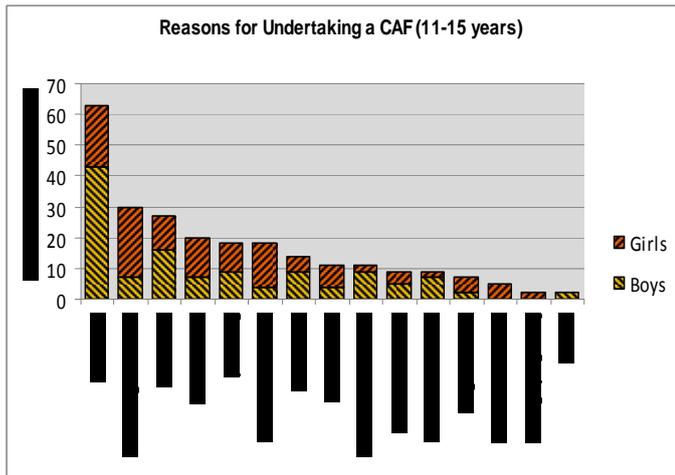
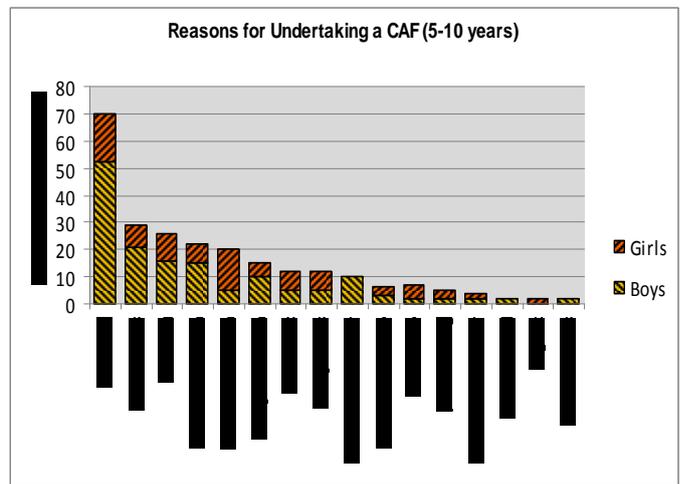
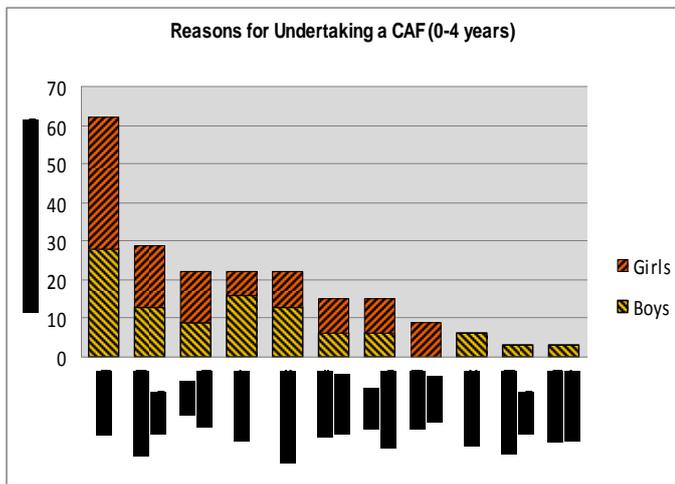
An audit of 154 CAFs completed between May and October revealed the following information:



The graph shows the reasons for CAFs being undertaken (by gender). It tells us that issues relating to behaviour (57% of CAFs), compromised parenting (31%) and general health issues (23%) are the most often cited reasons for a CAF being undertaken. Significantly the graph also shows that while general behavioural issues are 3 times more likely to relate to boys than girls, the opposite is true for risk taking behaviour which is dominated by girls.

The audit also revealed that 12% of CAFs cite the mental health needs of parents and 11% cite issues with domestic violence as contributory reasons for the CAF being undertaken.

Graphs which show the reasons for undertaking a CAF by age group are shown overleaf:



The four graphs show how the reasons for undertaking a CAF change as the child/ young person gets older.

0-4 Years

For under 5's issues around compromised parenting (stated in 62% of CAFs), health and housing are most common.

5-10 Years

For 5-10 year olds the important issues are related to behaviour (stated in 70% of CAFs), health and compromised parenting.

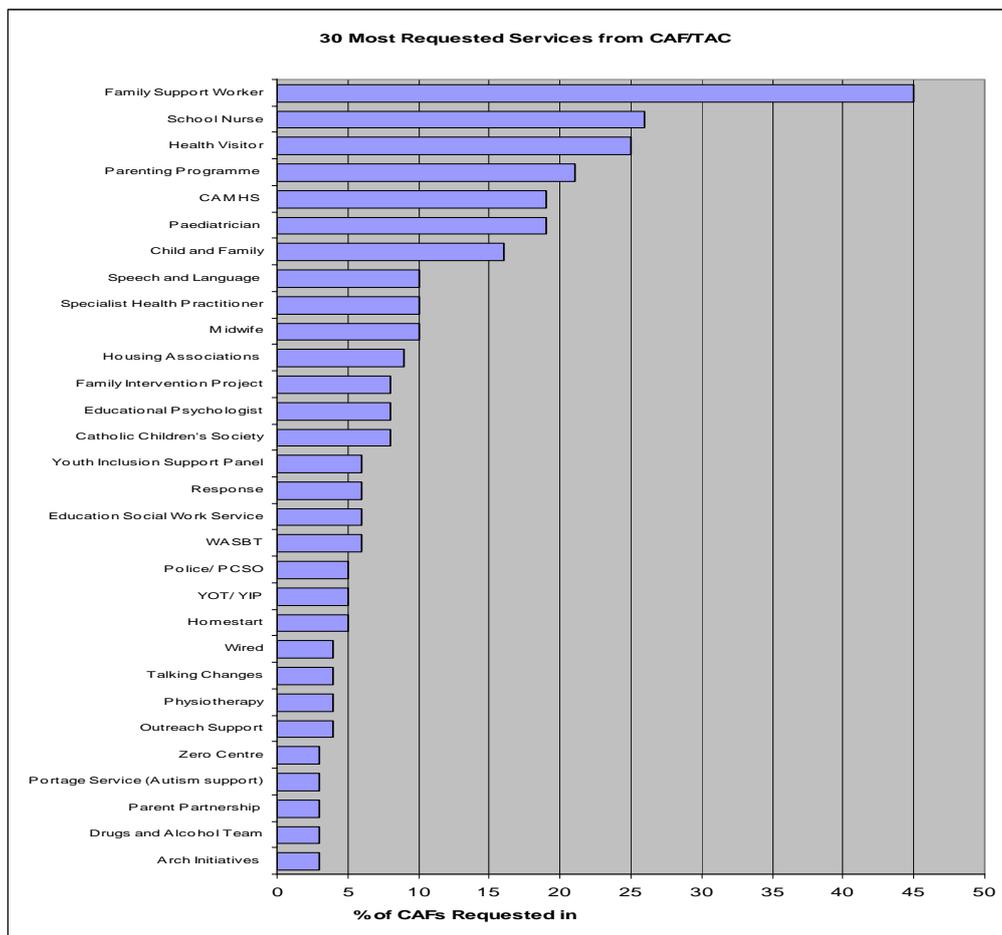
11-15 Years

Children in the 11-15 year age group are most likely to have issues with behaviour (stated in 62% of CAFs) and risk taking behaviour.

16-18 Years

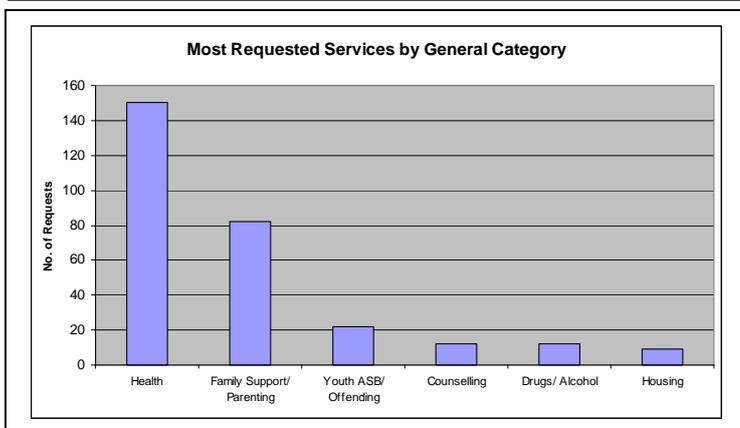
The needs of 16-18 year olds are dominated by drugs/ alcohol issues (stated in 60% of CAFs), behaviour and attendance. Although it should be noted that as few CAFs are undertaken on this age group the sample size is very small.

Services most Requested from CAF



The graph shows the 30 services which are most requested for Team Around the Child (TAC) meetings. The results are based on an audit of 154 CAFs completed across the area teams between May and Nov 2010.

The most requested service is that of a Family Support Worker (requested for Team Around the Child meetings from 45% of CAFs) who can work with the family on many issues which do not require a specialist input. School nurses (27% of CAFs) and health visitors (25% of CAFs) are also often requested as are access to parenting programmes (22% of CAFs) and more specialised health interventions.



The graph also confirms that many agencies from across the statutory and voluntary sector are actively involved with CAF and TAC.

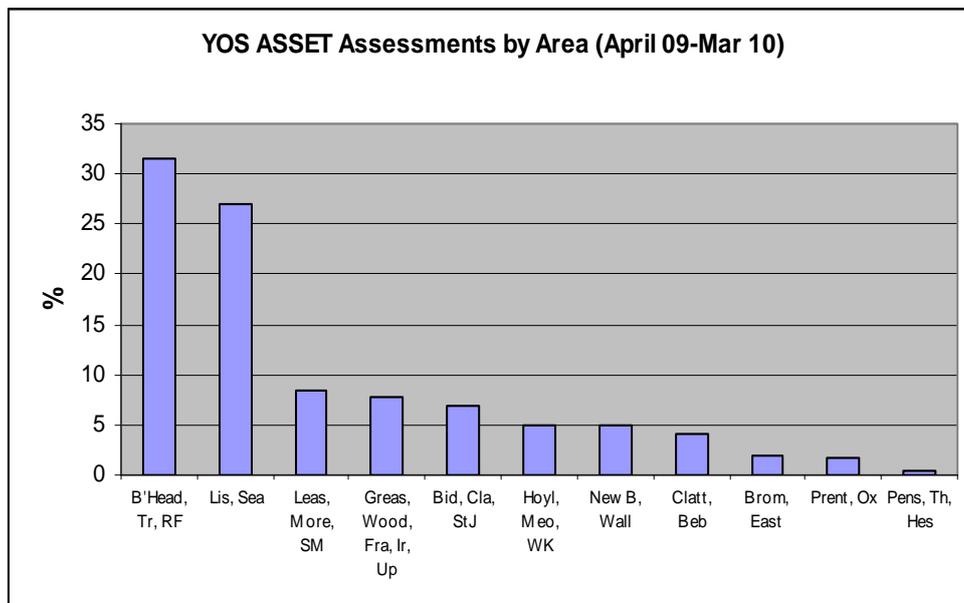
The second graph shows the most requested services by general category. By far the two most requested agents of intervention are health and family support/ parenting.

Wirral Youth Offending Service – ASSET Assessment Data

The Youth Offending Service (YOS) uses a standardised assessment using ASSET (a structured assessment tool produced by the Youth Justice Board) for all young people coming into the youth justice system. The assessment includes details about the lifestyle and circumstances of the young people, whether they have specific needs and their educational profile. The information is used to compile a risk assessment and to determine why the young person offended and what appropriate interventions should be employed.

The following few graphs show a summary of ASSET data collected between April 2009 and March 2010 and describes the profiles of young offenders and offences in Wirral.

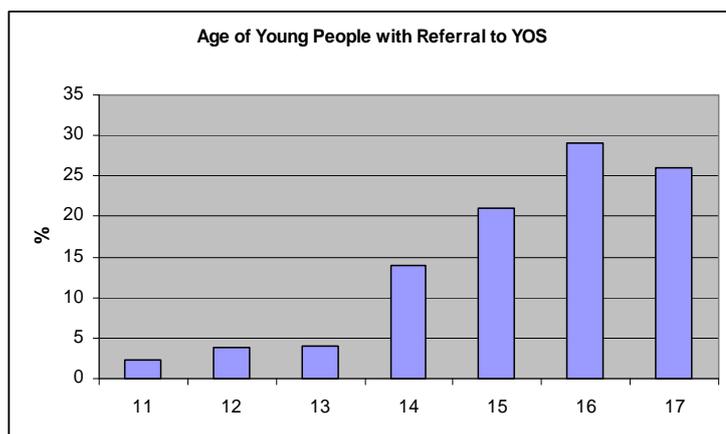
YOS Assessments by Area



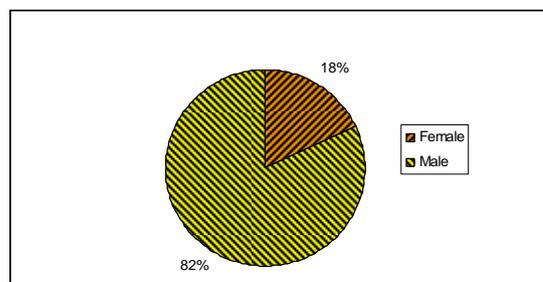
Young people who live in the two areas of Birkenhead/Tranmere/ Rock Ferry (32%) and Liscard/ Seacombe (27%) dominate work undertaken by the Youth Offending Service. These two areas also dominate the CAF activity. With the exception of Prenton/Oxton, South Wirral and West Wirral have the lowest amount of youth offending activity.

As already described earlier in this report, the geographical areas used in this report contain similar population sizes.

YOS Assessments by Age



YOS Assessments by Gender



YOS Assessments by Ethnicity

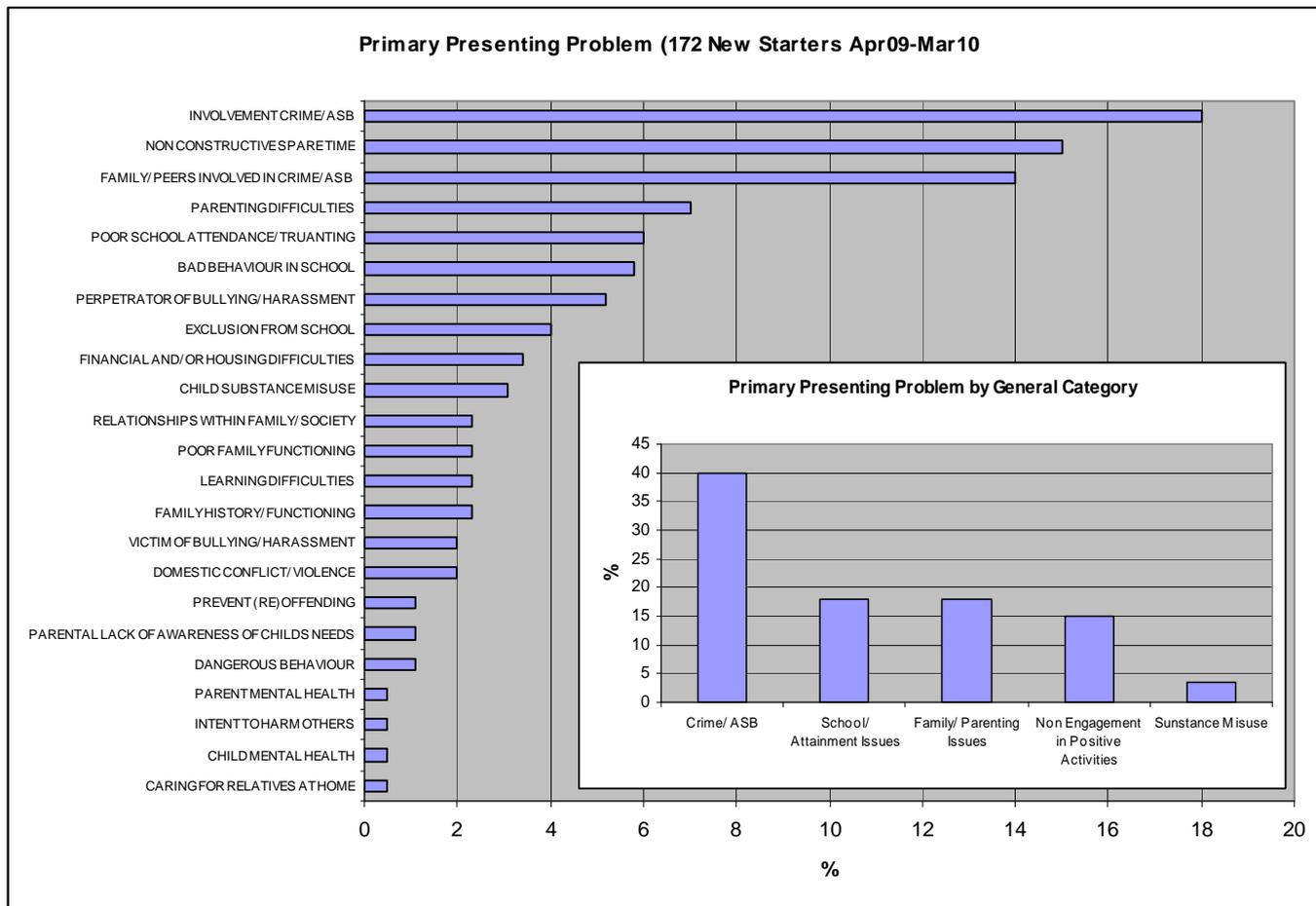
90% of young people described themselves as White British. 5% described themselves as mixed race.

Between April 2009 and March 2010 the YOS was actively supporting children and young people in the 11-17 age group. The graph above illustrates the breakdown by age and reveals that most youth offending is perpetrated by older children/young people.

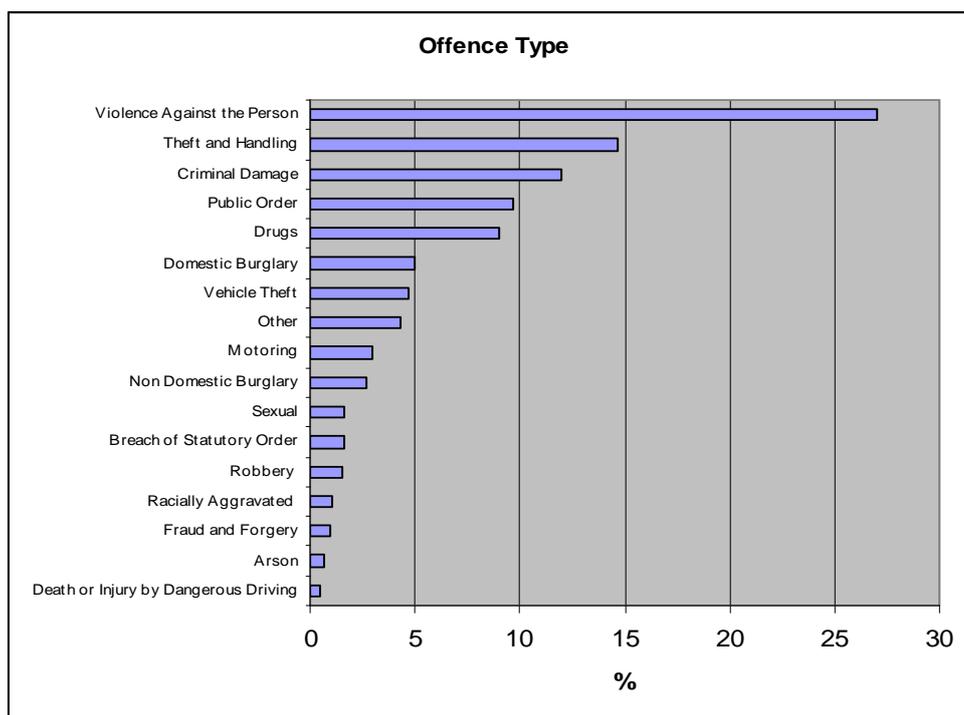
Over 50% of offending youngsters are 16 or 17 years old. The pie chart shows that these young people are overwhelmingly boys (82%). This is a much greater gender imbalance than for CAFs but both are dominated by boys.

The ethnicity profile of young people assessed by YOS is also different than for CAF. The ethnic profile of Wirral is about 96% white British and this is reflected by CAF. Slightly fewer white British (90%) young people appear in the YOS data.

YOS New Assessments by Primary Presenting Problem



The bigger graph above reveals data for 172 children and young people who started on an intervention programme with YOS between April 09 and March 10. The smaller graph shows the problems aggregated into general categories with the top five presented. The graphs detail the main reasons which led the children young people to be started on the programme. Issues involving anti social or poor school behaviour, compromised parenting and family/peer involvement in crime and non engagement in positive activities dominate the reasons why young people are ultimately referred to YOS. The issues, whilst generally more acute, reflect the reasons why CAFs are undertaken which are also often prompted by parenting or behavioural concerns. Health concerns however, are cited much more often on CAFs but mental health concerns (both parental and of the child) do appear on both assessments.



The graph on the left is a summary of the criminal offences involving young people who have been referred to the Wirral Youth Offending Service for an intervention between April 2009 and May 2010.

Offences are dominated by violence against the person (27%), theft and handling (14%) and criminal damage (12%).

Most offences involving young people are related to violence, theft or public order.

Closing CAFs

CAF episodes typically run for between four and six months but the length of individual cases varies depending on the complexity of need and engagement of the family. CAF episodes are mainly closed for the following reasons (where reason has been reported):

Needs met or partly met (47%); Escalated to Social Care (43%); Moved out of area (7%); Disengaged (3%).

Observations

The presented data reveals the pattern of CAF activity across Wirral and shows where the needs are greatest, how the needs of children and young people are changing as they get older and which types of intervention are being requested. Specific conclusions are provided under the headings below:

CAF Cohort

A similar amount of CAFs are undertaken on children and young people in the 0-4, 5-10 and 11-15 age groups, although the most populous of these groups (5-10 year olds) are just identified as the group of most need. More specifically the group is 5-10 year old boys (probably white British) who struggle with achieving the two Every Child Matters outcomes of Enjoy and Achieve and Stay Safe. The CAF audit adds a bit more detail to these needs and reveals that more specifically boys have needs with behaviour, anti social behaviour, compromised parenting and health issues. These unmet needs are mainly identified by schools who usually take on the role of Lead Professional. The data presented also reveals that the needs of boys and girls are often different and the needs of girls are becoming more visible and mainly exist around Stay Safe and Be Healthy.

However, the presented numbers regarding the group of most need tell only part of the story. The number of CAFs completed on the 16-18 year age group is very low for the size of the population and by contrast more CAFs are completed on the 0-4 age group than might be suggested by its size).

The CAF cohort accurately reflects the ethnic make up of Wirral's population with about 96% being white British. However, it is more heavily gender weighted towards boys (59%) than the general population (47% male).

Areas of Need

Birkenhead, Tranmere & Rock Ferry (21% of CAFs) and Liscard & Seacombe (18% of CAFs) are the two areas where the needs of children and young people are greatest. These two areas account for over a third of all completed CAFs. Needs are also high in Bidston, Leasowe and Greasby/Woodchurch areas. Pensby, Heswall & Thingwall (2% of CAFs) and Hoylake, Meols, West Kirby & Thurstaston (2%) are identified as the areas of lowest need. Each area has its own profile with regards to age groups and needs and these differences should be considered in future planning. The areas of greatest need are also the areas of greatest deprivation as shown by data from the 2008 JSNA and the 2007 index of multiple deprivation. These areas produce more CAFs per '000 of the 0-18 population.

Authoring CAFs

Schools author almost half of all CAFs and this is shared fairly evenly between primary and secondary schools. OFSTED commented positively on the participation of agencies, particularly schools. Over thirty agencies have been involved with the CAF/TAC process and apart from schools the greatest contributors are healthcare agencies, family support and children's centres. Several agencies currently have low levels of engagement with the CAF/TAC process and these include Connexions, WASBT, the Police and Housing (although the picture is slowly improving).

Providing Services

Many agencies are successfully engaged with attending TAC meetings and providing services. The most requested services identified through the CAF/TAC process are family support workers, agencies offering parenting support, health agencies and agencies specifically concerned with anti-social behaviour and youth offending.

YOS ASSET Data

The data from the youth offending service generally supports the findings from the CAF data with regard to areas of highest activity (Birkenhead, Tranmere, Rock Ferry and Liscard, Seacombe). Both are dominated by boys, more so for YOS, and although white British boys dominate both, fewer white British boys (90% as oppose to 96%) are involved with YOS showing that they deal with a higher proportion of ethnic minority groups than is reflected in CAF or in the general population. Issues relating to behaviour, parenting and anti social behaviour/ crime are common reasons why a CAF is undertaken or why a young person is referred to YOS.

Suggested Priorities

The CAF data suggests that adequate services who can offer support to children and their families with behavioural, parenting and health issues should be widely available across Wirral but targeted at the areas of most need. The data shows that these are the areas of greatest social deprivation and lie between Liscard and Rock Ferry.

Within behavioural issues there should also be provision of services who can target poor and anti social behaviour in boys and risk taking behaviour in girls. The profile of the typical boy and girl who are most likely to be the subject of a CAF are shown below. The CAF and YOS data also highlights the strong link between poor behaviour in children and parental and wider family issues such as parental mental health, domestic violence and family breakdown. Services which can effectively address all of these issues are likely to have a very positive effect on improving outcomes for children and young people and may help prevent behavioural problems (in boys particularly) developing and manifesting themselves as anti social and crime behaviours in the future..



Typical Boy:

- 5-10 year old
- White British resident of Birkenhead
- Unmet needs around behaviour ASB, health and parenting



Typical Girl:

- 11-15 year old
- White British resident of Birkenhead
- Unmet needs around risk taking behaviour, health and family issues