

# Wirral Children and Young People's Plan 2012-2013

DRAFT 3

12 MARCH 2012



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# Vision for Children and Young People

Children and young people are society's future and with them rest our hopes and aspirations. Supporting their interests and welfare is paramount. Our most important principle is that we will secure an active partnership of parents, carers and services, working together to deliver the best outcomes for all our children and young people and thus enabling them to fulfil their potential.

Our vision is

**“To enable Wirral’s children, young people and families to access services quickly in order to be secure, healthy, have fun and achieve their full potential.”**



Councillor Sheila Clarke MBE  
Lead Member for Children's Services  
and Lifelong Learning  
Chair of Wirral Children's Trust

*<signature on approval>*



David Armstrong  
Acting Director of Children's Services  
Children and Young People's  
Department

*<signature on approval>*

# Introduction

This plan is designed to continue to build on the progress made for delivering Children's Services in Wirral described in previous Children and Young People's Plans (CYPP). It sets out how all partners working through Wirral Children's Trust will continue to develop our joint approach to make a positive difference to the lives of children, young people and their families.

All agencies involved with children and young people in Wirral have contributed to this plan and are working together to deliver our shared vision. We listen carefully to what children, young people and their families tell us and ensure we shape our services to reflect this. A key theme in all our CYPPs has been our commitment to work with disadvantaged children to improve their life chances and this will be strengthened by the delivery alongside this plan of the Wirral Child and Family Poverty Strategy.

We write this plan at a time of significant change and financial constraint and we understand how vital it is that we maximise our use of public resources and provide services that meet local need. Key changes include the re-organisation of the National Health Service, the move of Public Health to Local Authority control and the establishment of Health and Well Being Boards. A number of Department for Education policy changes are ongoing including those related to schools and academies, new children's social care initiatives and children's services inspection arrangements. In 2012-13 we will develop our work with families with multiple and complex needs and carefully monitor the impact of Welfare Reform on service users. This evolving picture in the public sector impacts significantly on how we develop our work and through this plan all partners show their commitment to adapting to change whilst continuously improving services.

In light of the significant changes occurring Wirral Children's Trust has agreed to produce a one year plan for 2012-13. With this new plan comes clear priorities and identified activities to deliver them, we also describe how we will measure our success through improved outcomes to ensure that we make a difference. Published alongside this new plan is a review of our 2011-12 CYPP which outlines what was achieved last year.

## Children and Young People in Wirral

Wirral is home to about 74,500 children and young people aged 0-19. If Wirral had just 100 children:

- 49 would be girls, 51 would be boys;
- 93 would be white British and 7 would be from ethnic minorities, most probably 1 or 2 would speak English as an additional language;
- 20 would be living in families in receipt of Child Tax Credit, (<60% median income), Income Support or Job Seekers Allowance and 19 would be living in lone parent families;
- For some school would be a refuge from home; 3 would have been allocated a social worker, 1 would be in care and less than one would be subject to a child protection plan;
- Most young people would make a positive contribution to their community. Only 1 would get in to enough trouble to be dealt with by the Youth Offending Team;
- 14 would have a special educational need, 2 of whom would have a statement, most probably for moderate learning difficulty;
- Overall most children would be healthy however approximately 5 of the 31 children in primary school would be classified as obese;
- 80 would achieve 5 or more A\*-C grades at GCSE, however 14 would be struggling to read fluently by the time there were 11, and 9 would not be in any form of education, employment or training at 16.

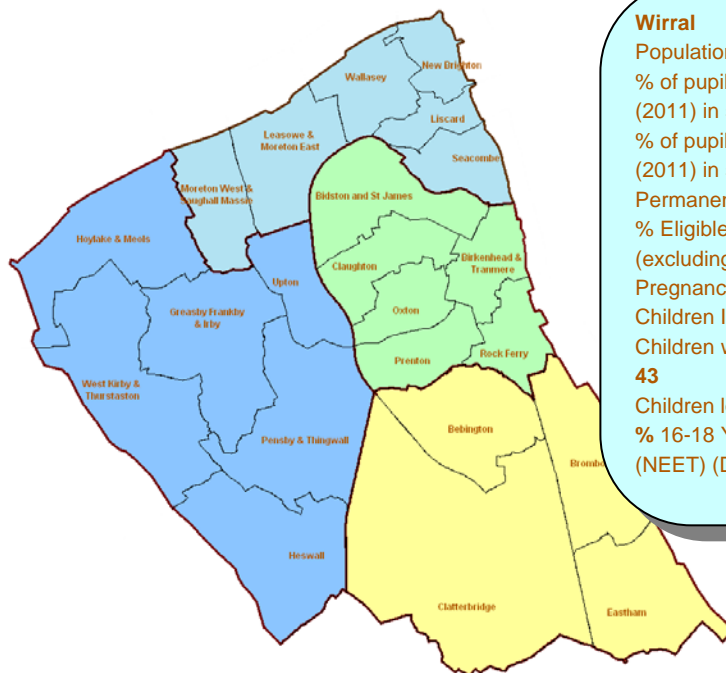
Wirral is a good place to grow up and most children and young people will fulfil the aspirations that we, their parents and carers have for them. However some children and young people experience real disadvantage and hardship and they require higher levels of support from the agencies which are there to help them and their families.

There are great disparities in Wirral related to wealth. In some areas there are high levels of poverty which impacts upon children's lives and their development. One of the key challenges for us is to eliminate the differences in outcomes for children linked poverty. This plan sets out key activities that are underway and is aligned to the Wirral Child and Family Poverty Strategy which outlines how all organisations in the Borough are working together to drive forward the anti-poverty agenda.

Figure 1 illustrates the stark differences in outcomes for children and young people living in different Wirral districts.

We believe that the children and young people of Wirral are its greatest potential assets; we want to ensure that all of them have the best possible start in life.

**Figure 1: Outcomes for Children and Young People in Wirral**



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**Wirral**

Population of children 0 – 17 (2010) **66,800**  
 % of pupils attaining L4+ inc Eng & Ma at Key Stage 2 (2011) in schools maintained by Wirral **77.2**  
 % of pupils attaining 5+ GCSEs at grade A\*-C inc Eng & Ma (2011) in schools maintained by Wirral **64.4**  
 Permanent school exclusions (2009/10) per 10,000 **3**  
 % Eligible for Free school meals from January 2011 Census (excluding part time pupils) **26.4**  
 Pregnancy rate for 15-17 year olds (2010) per 1,000 **46.4**  
 Children In Need (2009/10) per 10,000 **857**  
 Children with a Child Protection Plan (2009/10) per 10,000 **43**  
 Children looked after (2009/10) per 10,000 **102**  
 % 16-18 Years olds not in education, employment or training (NEET) (Dec 2010) **8.9**

**Wirral West**

Population of children 0 – 17 **16,258**  
 % Key Stage 2 L4+ inc Eng & Ma **83.4**  
 % 5+ GCSEs at A\*-C inc Eng & Ma **73.2**  
 Permanent School Exclusions per 10,000 **2**  
 % Eligible for Free School Meals **12.9**  
 Pregnancy rate for 15-17 per 1,000 **26.0**  
 Children In Need per 10,000 **325**  
 Children with Protection plan per 10,000 **27**  
 Children in care per 10,000 **40**  
 % NEET **4.4**

**Wallasey**

Population of children 0 – 17 **19,485**  
 % Key Stage 2 L4+ inc Eng & Ma **72.1**  
 % 5+ GCSEs at A\*-C inc Eng & Ma **58.1**  
 Permanent School Exclusions per 10,000 **5**  
 % Eligible for Free School Meals **30.7**  
 Pregnancy rate for 15-17 per 1,000 **55.6**  
 Children In Need per 10,000 **819**  
 Children with Protection plan per 10,000 **42**  
 Children looked after per 10,000 **84**  
 % NEET **10.7**

**Birkenhead**

Population of children 0 – 17 **19,348**  
 % Key Stage 2 L4+ inc Eng & Ma **71.8**  
 % 5+ GCSEs at A\*-C inc Eng & Ma **55.6**  
 Permanent School Exclusions per 10,000 **4**  
 % Eligible for Free School Meals **40.2**  
 Pregnancy rate for 15-17 per 1,000 **68.9**  
 Children In Need per 10,000 **1283**  
 Children with Protection plan per 10,000 **64**  
 Children looked after per 10,000 **193**  
 % NEET **12.7**

**Wirral South**

Population of children 0 – 17 **11,709**  
 % Key Stage 2 L4+ inc Eng & Ma **85.0**  
 % 5+ GCSEs at A\*-C inc Eng & Ma **71.5**  
 Permanent School Exclusions per 10,000 **0**  
 % Eligible for Free School Meals **15.9**  
 Pregnancy rate for 15-17 per 1,000 **25.5**  
 Children In Need per 10,000 **402**  
 Children with Protection plan per 10,000 **22**  
 Children looked after per 10,000 **29**  
 % NEET **5.4**

# Children's Services

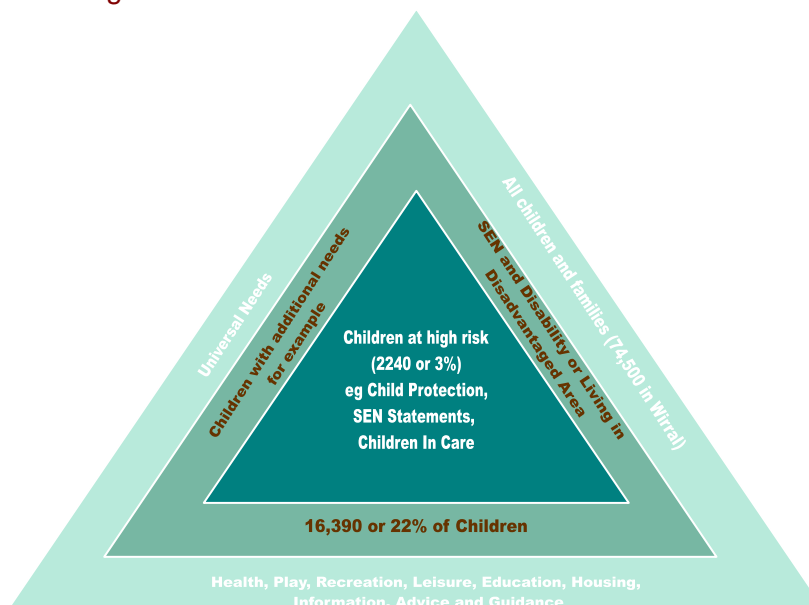
Wirral Children's Trust is a partnership of all organisations who work with children, young people and their families. When we use the term 'we' in this plan it means the Children's Trust Partnership. It ensures that we will deliver the outcomes and aspirations identified in this plan.

We organise our work around children and young people; what they say, where they are and what they need. We value every child equally and strive for positive outcomes for all of them. We have a shared vision and operating principles and effective governance arrangements to ensure accountability and delivery of our priorities. The governance structure of Wirral Children's Trust is shown in Appendix 1.

Of the 74,500 children and young people living in Wirral not every child requires the same services. Universal services meet the needs of all children and young people; they include early years provision, mainstream schools, health services and play and recreation. Within that broadly 22% (16,390) children at any one time will have additional needs which require some extra targeted support provided by individual or multi-agency services. These services support groups of children and their families such as those with special educational needs or disability or those requiring parenting support. A high proportion of these children will be living in the more disadvantaged areas. Within this group of 16,390 approximately 2,240 children have more complex needs which require a high level of specialist support. These children would otherwise be at risk of poor outcomes. They include young people subject to the child protection register, those with serious health issues or involved in youth offending.

The aim is to support children and young people with specialist support for appropriate periods of time and then, where possible meet their need within universal provision. We invest in child-centred multi-agency early intervention and prevention work delivered within the community. This approach not only improves outcomes for families earlier and reduces the number of children that escalate into requiring additional support but reduces costs in the long term.

Figure 2: Wirral triangle of need





Wirral Children's Services is governed by the following principles:

- Every child matters
- Keeping our children safe through effective safeguarding
- Improving outcomes for children, young people and their families
- Organising around children and young people, taking account of their views
- Operating across the partnership as a single integrated Children's Service
- Continuing to build on excellent partnership working
- Integrated strategy and governance
- Integrated delivery and processes
- Early intervention and prevention
- Targeted support for vulnerable groups
- Equal value and common standards
- Fitness for purpose utilising new approaches and technology to improve our efficiency and service
- Responsibility and accountability

## An Update Since Our Last Plan

In November 2011 Wirral Children's Services received its annual Children's Services Assessment rating and report from the Office for Standards in Education, Children's Services and Skills (OFSTED). Children's Services was assessed as 'performs excellently' a score of four on a four point scale. Wirral is one of only 28 Local Authorities to achieve this rating.

OFSTED reported that "Good performance has been sustained and further improvement has been achieved in a number of areas. The very large majority of services, settings and institutions inspected by OFSTED are good or better and most provision effectively helps children and young people to learn and to stay safe."

Inspection judged services for safeguarding and looked after children to be 'good' with good capacity to improve and some 'outstanding' features. OFSTED identified the strong commitment demonstrated by the council and partners to protect the most vulnerable children and young people and to improve services for looked after children.

Wirral Children's Services has made significant progress in many areas however we are not complacent and know that we can continue to improve. This plan sets out our future priorities and what we will do to achieve them.



# Summary of Our Priorities for 2012-13

Organising our work across five areas through multi-agency strategy groups provides a framework to ensure accountability and effective monitoring of delivery of our priorities. However there are no barriers as all groups and agencies work together on key activities such as providing support for vulnerable groups like children in care or those with learning difficulties and disabilities and families living in poverty.

Table 1: Children and Young People's Plan 2012-13 Priorities.

<p><b>Being Healthy</b></p> <p>Promote wellbeing through health promotion and behaviour change approaches.</p> <p>Reduce the harmful consequences of risk taking behaviour including substance misuse and sexual activity resulting in unplanned teenage conceptions and sexually transmitted infections.</p> <p>Encourage and support all children and families to achieve and maintain a healthy weight and lifestyle.</p> <p>Improve positive mental health outcomes for children and young people.</p>
<p><b>Staying Safe</b></p> <p>Ensure vulnerable children, young people and families receive targeted, early intervention which meets their needs and improves their life chances.</p> <p>Improve outcomes for children in care and care leavers.</p> <p>Improve outcomes for children and young people in need of protection.</p> <p>Ensure children live in communities where they feel safe, and where harmful behaviour is actively addressed and reduced.</p>
<p><b>Enjoying &amp; Achieving</b></p> <p>Implement and evaluate the new School Improvement Strategy ensuring we meet our statutory duties.</p> <p>Improve the educational outcomes for children and young people affected by poverty and disadvantage including children in care.</p> <p>Improve provision, choice and outcomes for children and young people with Special Educational Needs and/or disabilities.</p> <p>Review the provision of behaviour support and reduce school exclusion.</p> <p>Ensure that the services provided through our Sure Start and Children's Centres deliver effective support based on the needs of our local residents and communities.</p>
<p><b>Making a Positive Contribution</b></p> <p>Reduce the number of children and young people involved in offending and anti social behaviour.</p> <p>Ensure children and young people have access to a range of appropriate play and developmental opportunities which meet their needs.</p> <p>Provide opportunities for children and young people to be actively engaged in community and democratic decision making processes.</p>
<p><b>Social and Economic Well Being</b></p> <p>Ensure that all young people aged 16-18 particularly those in vulnerable groups are effectively supported to access the education, employment and training opportunities available.</p> <p>Minimise the impact of poverty on children.</p> <p>Support vulnerable young people and children with additional housing needs to access suitable housing options.</p> <p>Ensure that our young people have excellent skills and opportunities into employment, including through Wirral's Apprenticeship programme.</p>

## Managing Our Services

All partners in Wirral work effectively together with a clear shared vision and strong operating principles. There are transparent governance arrangements through Wirral Children's Trust to drive partnership working and improvement and to ensure appropriate levels of challenge. The positive outcomes delivered for children, young people and families achieved since our last plan are evidence of our strong integrated working, clear vision and ambition.

To deliver the vision and priorities we need to ensure we design, manage and continuously review our services effectively and ensure that the best use is made of limited public resources for the benefit of children, young people and families.

### Integration of Services

In order to be responsive to local need Wirral has organised services in shared locations. Providing a range of services in one place produces benefits for service users and leads to greater efficiency of service delivery.

Our co-located area teams provide locally based integrated preventative services to families which reflect local need. They have a core membership from across the partnership. The professionals include Social Workers, family support workers, Education Social Workers, youth workers, educational psychologists, health visitors, Connexions personal advisors, the Police and CAMHS workers. The area teams have strong links with community, voluntary and faith organisations.

Our network of children's centres ensures that all parents and carers with children under 5 years old can access services that are responsive to local need. 'Wirral's Children First' Strategic Board ensures a consistent approach to early years priorities and outreach.

Our Integrated Youth Support Service (IYSS) ensures the work of teams such as youth offending, teenage pregnancy, alcohol and substance misuse work together. Benefits include co-ordinated locality youth provision within youth Hubs, youth clubs and voluntary, community and faith sector youth projects. The teen Wirral website sets out a range of "things to do and places to go", including Wirral Youth Theatre activities and the Duke of Edinburgh Award Scheme set alongside other leisure services and voluntary sector activities.

### Integrated Processes

We know that working together with a common approach is crucial to address unmet needs and help children access the right services earlier. In 2012-13 the development of our new Intensive Family Intervention Project will ensure that there is continuous development in this area.

We have published guidance for all those working with children, young people and their families which includes information on key processes including the Common Assessment Framework (CAF) and Team around the Child (TAC).

The CAF enables information to follow the child between services in a common format. CAF activity is monitored and quality assured across the partnership and intelligence is used to commission early intervention services. Team around the Child (TAC) working allows all agencies and the child and their family to be involved in working together to support the family, led by a Lead Professional providing a single point of contact for the child or family and co-ordinating the delivery of agreed actions.

Use of the integrated working framework and CAF and TAC processes effectively assists practitioners to understand and respond to the needs of the child and their family and allows a preventative approach through early identification of additional needs.

## **Workforce Development**

Through our workforce strategy we ensure our staff develop the right skills and that their individual professional specialisms are understood and respected. A common induction programme for all staff is delivered by the Voluntary, Community and Faith Sector ensuring specialist knowledge relevant to professional practice is in place. Our new Wirral Children's Trust Workforce Development Strategy 2012-15 has been produced alongside this plan.

## **Commissioning**

Commissioning is the process by which local needs are met and involves both specifying and securing high quality provision. It is vital in the effective management and development of services to meet needs and improve outcomes. It ensures that spending decisions are directly informed by the priorities and aspirations of the Children and Young People's Plan and represent best value.

Wirral Children's Trust Board is the key driver to ensure the effective commissioning of all services to children and young people in Wirral. To deliver this work effective joint commissioning is essential. The benefits of joint commissioning are that it will help agencies together to:

- Target services to give the greatest impact on outcomes
- Avoid duplication of services
- Ensure value for money & efficiency
- Develop coordinated services
- Share expertise and best practice
- Share intelligence about needs

Our operational Joint Commissioning Group imposes the discipline of the commissioning cycle i.e. assessing demand, reviewing present service configuration, assessing available budgets, implementing service redesign, monitoring performance and adjusting service provision to improve the match between capacity and demand. The group delivers a work plan to support continued improvement of joint commissioning practices and operates with regard to our published Strategic Joint Commissioning Framework for Children and Young People in Wirral.

## **Equality and Diversity**

Wirral Children's Trust has a commitment to contributing to a fairer society by ensuring that unlawful discrimination, harassment and victimisation is eliminated, equality of opportunity is advanced and good relations are fostered between different groups.

Each year we review and refresh the equality impact assessment that is published alongside this plan. This allows us to highlight the ongoing work that is undertaken as well as providing a focus on areas of equality that need addressing. Our review indicates that building on previous plans we continue to make progress in many areas to promote equality of opportunity and to remove barriers to services. Our refreshed action plan is carefully monitored by Wirral Children's Trust Executive and through our strategy groups we will continue to make progress on areas identified in 2012-13.

## **Performance Management**

All CYPP priorities have a lead officer who is accountable for their delivery. Performance is reported quarterly to the Children's Trust Board who provide governance, support and challenge. Wherever the information suggests that action needs to be taken to ensure progress is maintained the Children's Trust Board sees that this is done.

Children's Services are subject to a range of inspections of carried out by OFSTED. For each individual inspection we listen carefully to what they tell us about where improvements are required and act swiftly on their recommendations. We will respond positively to changes to inspection frameworks planned in 2012-13.

We benchmark our services against other Local Authorities (LAs) and learn from best practice in other areas. In 2012-13 we will fully engage in the new peer review framework developed by the Children's Improvement Board for sector-led improvement in children's services.

Importantly we will monitor whether this plan is being implemented effectively by continuing to ask children, young people and families if by working with us positive changes are happening in their lives.

# What We Will Do in 2012-13

## Being Healthy

***“We want to improve all children and young people’s health and wellbeing, reduce health inequalities and keep people well, through innovative and sustained delivery of the Healthy Child Programme 0 - 19 years.”***

This section is about the steps we are taking to encourage children young people and their families to stay healthy throughout their lives. It covers physical and mental health as well as children’s happiness and emotional well being.

### **Where we are now**

A number of programmes are in place to encourage the local population to assess, and if needed, amend their lifestyles for improved health and wellbeing. Wirral achieved high coverage of children measured through the National Child Measurement Programme (97% 2010-11) and a reduction in the percentage of children who are obese (10.6% to 9.4% for reception and 20.3% to 18.6% for year 7). However our breastfeeding rates remain below the average for the North West and England, with 56.6% of women initiating breastfeeding and 31.2% continuing to breastfeed at 6-8 weeks (Q2 2011-12), although 44% of the women supported by the breastfeeding peer support programme continue to breastfeed at 6-8 weeks. These areas remain a priority for Wirral and we will support the Change4Life national strategy to improve outcomes in these areas.

Wirral’s Health Visiting service is one of 20 sites nationally to be early implementers of the National Health Visiting Development Plan and leads on the delivery of the Healthy Child Programme 0-5 years. One indicator of the effectiveness of the programme is the high number of children with social and communication delays identified and appropriately supported by the age of 2½ years. 125 young women were engaged in the programme during 2011-12 and in 2012-13 the team’s capacity will be increased to support 175 families by 2013. The Family Nurse Partnership helps prevent child abuse and neglect, improves ante-natal health behaviours and birth outcomes and improves children’s emotional, behavioural and cognitive development. The programme is monitored by the national team at the Department of Health and the annual review in 2011 was assessed as ‘good’.

Wirral’s teenage conception rate remains a challenge with a rolling quarterly average rate of 48.7 per 1000 young women. This is higher than the North West average of 42.1 and 36.3 for England. The local teenage pregnancy action plan has been refreshed for 2012-13 to include targeted interventions for young people most at risk of early parenthood.

The areas of substance misuse, sexual health and alcohol related hospital admissions of under 18s remain priorities. In 2011-12 a 16% reduction in the number of young people requiring specialist treatment for substance misuse, including alcohol was achieved and the number of young people leaving treatment in a planned way between April-September 2011 was 87%, 9% higher than the national average. Despite these improvements we retain our focus in this area and following findings from the Substance Misuse Needs Assessment, bespoke projects will be commissioned during 2012-13 to target vulnerable young women and alcohol.

Wirral’s School Nursing Service will be reviewed during 2012-13 and the revised service commissioned from 2013. School Nurses are the lead professionals for the delivery of the Healthy Child Programme 5-19 years and the lead Wirral’s Health Service in Schools programme (HSIS). HSIS continues to deliver positive outcomes for young people with 28 secondary schools participating. Additional interventions have been commissioned to enhance service provision to include smoking cessation, mental health and wellbeing and

targeted contraception provision. Our Multi-systemic therapy programme has been re-launched following review, and additional targeted parenting support for families with a child with Attention Deficit Hyperactivity Disorder (ADHD) launched from January 2012. An integrated diagnosis and care pathway for this group will be implemented by April 2012.

In 2012-13 there will be wide ranging changes in the health landscape as Public Health prepares to move over to the Local Authority and the Commissioning Support Organisation prepare to support the Clinical Commissioning Groups to meet their overall aims and objectives. With the establishment of a Health and Wellbeing Board and the continuing priority given to the Children’s Trust Board, the Being Healthy Group is well placed to influence the commissioning of services to improve outcomes for the health and wellbeing of children and young people and reduce health inequalities and child poverty across Wirral.

## Our new priorities

Priority	How we will deliver	How we will measure success
<b>Wellbeing is promoted through health promotion and behaviour change approaches.</b>	<ol style="list-style-type: none"> <li>Promote healthy start vitamins and increase uptake amongst eligible women and children.</li> <li>Ensure all children are referred for a Health Assessment at the point of becoming Looked After and that they have a clear health plan that is fully implemented.</li> <li>Increase awareness of the negative health outcomes related to excessive weight gain before and during pregnancy and promote a healthy weight and to target pregnant smokers to promote healthy weight messages.</li> <li>Implement the findings from the review of the Healthy Child Programme (0–19 years) to ensure effective health promotion messages are delivered appropriately to all children and young people.</li> <li>Provide programmes to equip parents with the skills, knowledge and confidence to protect their children from the harmful effects of alcohol, drugs, smoking and sexual exploitation.</li> <li>Use the findings from the needs assessment to determine the reasons for emergency and urgent care attendance in the 0-4 age group and ensure appropriate health promotion messages are prioritised across early years provision. (<i>See also Staying Safe</i>).</li> <li>All commissioned services to be required to access brief intervention/ behaviour change training to ensure health promotion messages are delivered. Potential for enhanced availability of free condoms to Children’s Centres and development of a ‘sexual health self-care’ closer to home model to be explored.</li> <li>Explore opportunities for closer working relationship between GP practices and Children’s Centres to ensure access for families to support parents of children with: <ul style="list-style-type: none"> <li>disabilities</li> <li>sleep management interventions</li> <li>toileting</li> </ul> </li> </ol>	<p>Under 18 conception rate. (PI 112).</p> <p>Obesity rate of primary school age children in Reception Year. (PI 55)</p> <p>Obesity rate of among primary school age children in Year 6. (PI 56).</p> <p>Proportion of women who continue to smoke throughout pregnancy. (PI 1300).</p> <p>Effectiveness of child and adolescent mental health (CAMHS) services. (PI 51).</p> <p>The Operating Framework for the NHS in England 2012-13.</p> <p>The Operating Framework for Public Health in England 2012-13.</p> <p>Reduce emergency hospital admissions caused by unintentional</p>



Priority	How we will deliver	How we will measure success
	<p>9. Continue to support and develop the Healthier Homes initiative to ensure that Looked after Children and young people at the edge of care have the best possible opportunities to follow healthy lifestyles.</p> <p>10. Establish membership and terms of reference of Change4life strategy group and develop Change4Life Action Plan by March 2013.</p> <p>11. Deliver Social Marketing Behaviour Change project. 0-5 years and families' awareness of and uptake of physical activity within the 20% most deprived areas of Wirral.</p>	<p>and deliberate injuries to children (Aged 0-4). (PI 70a).</p> <p>Emotional health of looked after children. (PI 58).</p> <p>Evaluation evidencing increased physical activity produced by March 2013.</p>
<p><b>The harmful consequences of risk taking behaviour including substance misuse and sexual activity resulting in unplanned conceptions and sexually transmitted infections are reduced.</b></p>	<p>1. Implement the Children and Young People's Substance Misuse Plan which addresses issues around drugs and alcohol:</p> <ul style="list-style-type: none"> <li>• Continue to deliver a package of interventions for families at risk of substance misuse to improve parenting skills.</li> <li>• Reduce the number of alcohol related hospital admissions, including Accident and Emergency Department (A&amp;E) attendance and improve links to Young Peoples Services.</li> <li>• Explore available programmes to provide a safe and supportive environment in which young women can explore issue based topics relevant to them. Including Healthy Lifestyles, Alcohol, Drugs and Sexual Health.</li> <li>• In partnership with adult treatment services contribute to the development of joint protocols between drug and alcohol services and children and family services to safeguard, protect and improve outcomes for children.</li> <li>• Provide a range of diversionary interventions for young people with less-severe substance misuse problems to prevent them from developing more severe problems and substance-related harm.</li> </ul> <p>2. Implement the Teenage Pregnancy Strategic Action Plan.</p> <ul style="list-style-type: none"> <li>• Ensure targeted approach for vulnerable young people living in areas known to have higher than average teenage pregnancy rates.</li> <li>• Ensure a rolling programme of tiered Relationship and Sex Education and Health Promotion Training is in place for all C&amp;YP.</li> </ul>	<p>Alcohol harm-related hospital admission rates. (PI 39).</p> <p>Meet compliance requirements laid down by the National Treatment Agency and Department of Health.</p> <p>Percentage of Young People reporting to use alcohol. (HELP Survey). (PI 1301).</p> <p>Under 18 conception rate. (PI 112).</p>



Priority	How we will deliver	How we will measure success
	<p>3. Implement the Sexual Health Plan including increasing the proportion of eligible young people screened for Chlamydia.</p> <ul style="list-style-type: none"> <li>• Increase availability and access to young people friendly sexual health and contraceptive services through Health Services in Schools (HSIS) and Emergency Hormone Contraception (EHC) in Pharmacies and increasing easy and free access to condoms.</li> </ul> <p>4. Act on the findings of the young offender health needs assessment to ensure unmet health needs are met.</p> <p>5. Sports Development Projects Reducing drug and alcohol misuse of young people aged 13-19 years and reducing crime:</p> <ul style="list-style-type: none"> <li>• Engagement with 80 referrals from key agencies.</li> <li>• Delivery of 10 youth sports nights per week engaging with 700 young people. (<i>See also Positive Contribution</i>).</li> </ul>	<p>Prevalence of Chlamydia in under 20 year olds. (PI 113).</p> <p>The Operating Framework for the NHS in England 2012-13.</p> <p>Youth Offending Service (YOS) health services commissioned to meet need and contract monitoring in place.</p> <p>Percentage of Young People reporting to use alcohol. (HELP Survey). (PI 1301).</p>
<p><b>All children and families are encouraged and supported to achieve and maintain a healthy weight and lifestyle.</b></p>	<p>1. Continue to monitor the commissioned specialist weight management providers to ensure key performance targets are met, including provision of a service for pregnant women.</p> <p>2. Ensure Body Mass Index (BMI) data collected at 2-2½ year review is collated and used as a measure to inform appropriate commissioning of services.</p> <p>3. Evaluate the impact of the Health Exercise and Nutrition for the Really Young, (HENRY) training across early years settings.</p> <p>4. Continue to promote and support the Health Promoting Early Years Programme</p> <p>5. Continue to deliver the enhanced National Child Measurement Programme and ensure a robust pathway is in place from identification of families to engagement in specialist weight management interventions</p> <p>6. Increase the take up of school meals in 10 targeted school with the lowest take up</p> <ul style="list-style-type: none"> <li>• Continue to deliver school meal pilot project at Mosslands School and target 20% of pupils who are overweight or obese to access specialist in house exercise and nutrition services.</li> </ul> <p>7. Deliver the breastfeeding strategic action plan to</p>	<p>Obesity rate of primary school age children in Reception Year. (PI 55)</p> <p>Obesity rate of among primary school age children in Year 6. (PI 56).</p> <p>OFSTED reports will demonstrate that early years settings involved in the programme are working at “good” or “outstanding” for developing a healthy lifestyle.</p> <p>The Operating Framework for the NHS in England 2012-13.</p> <p>The Operating Framework for Public Health in England 2012-13.</p> <p>10% increase in the take up of school meals in 10 targeted schools.</p> <p>Increased free school meal take up at Mosslands School to 50%.</p>

Priority	How we will deliver	How we will measure success
	<p>increase initiation and prevalence of breastfeeding at 6 – 8 weeks and support hospital and community settings to achieve and deliver UNICEF Breastfeeding Initiative.</p> <p>8. Increase participation rates in physical activity of the least active young people by supporting all schools to be engaged in Level 1 and 2 of the School Games Framework.</p> <p>9. Deliver the Active Families Programme; a one to one 12 week programme for children referred for specialist input and physical activity opportunities for families.</p> <p>10. Develop a project to increase the uptake of free Vitamin D supplements to all women and children who are eligible for 'Healthy Start' and increase the uptake amongst any pregnant, breastfeeding women and their children who want to purchase them at low cost prices.</p>	<p>Prevalence of breast feeding at 6- 8 weeks from birth. (PI 53).</p> <p>Activity levels of the least active pupils in all school settings aged 3-19 years increased by 10%.</p> <p>Sport England monitoring framework measuring uptake of physical activity.</p> <p>Increase in uptake of Vitamin D supplements for women and children.</p>
<p><b>Positive mental health outcomes for children and young people are improved.</b></p>	<p>1. Implement the 'No Health Without Mental Health' strategy and encourage schools to prioritise health and wellbeing through a positive mental wellbeing approach.</p> <p>2. Embed the Health Services in Schools mental health 1-1 service and brief intervention training within all participating secondary schools to ensure smooth transition from primary to secondary school. Include promotion of available tools such as kooth.com and 'mymind' websites.</p> <p>3. Ensure delivery of an effective Multi-systemic Therapy (MST) programme for children and young people. <i>(See also Positive Contribution).</i></p> <p>4. Act on the findings from the baseline review of the NICE Guidance (CG128) for the recognition, referral and diagnosis of children and young people on the autism spectrum to ensure coordination between health agencies and other key services such as education, social care and the voluntary sector.</p> <p>5. Through the Intensive Family Intervention Programme strengthen pathways and integrated working related to adult mental health.</p>	<p>Emotional health of looked after children. (PI 58).</p> <p>Effectiveness of child and adolescent mental health (CAMHS) services. (PI 51).</p> <p>Quarterly monitoring of usage of Kooth.com and 'mymind' websites to tailor service development.</p> <p>Successful MST completed with 18 families.</p> <p>Monitored through NICE Clinical governance group evaluation.</p>

## Staying Safe

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

This section is about ensuring that all children grow up in a safe caring environment free from harm and neglect.

### **Where we are now**

Improvements in safeguarding in Wirral are evident. This was recognised in the OFSTED inspections of Fostering and Adoption during 2011 which found both services to be ‘good’ with ‘outstanding’ features. The Children’s Services Assessment grade was informed by the positive Unannounced Inspection of Child Protection Services in 2010 and the Safeguarding and Looked After Children’s Services announced inspection in January 2011. In February 2012 front line child protection services received a further unannounced inspection; the Central Advice and Duty Team were assessed as a strength, along with the implementation of thresholds across the partnership and the effective implementation of the common assessment framework.

During 2011 Wirral’s Safeguarding Children Board (WSCB) targeted areas of concern and completed a multi-agency audit focusing on cases which featured parental mental health and neglect, and commissioned a number of audits to improve practice.

Investment in front line social work services continues to strengthen safeguarding practice, however increasing numbers of children requiring statutory intervention has proved challenging, both in terms of the volume and the complexity of the work. Key areas of development during 2011 have been to improve assessment skills, in particular the analysis of risk and protective factors and to improve supervision practice through bespoke training for front line managers. The focus for the forthcoming year must remain on embedding improvements, learning from best practice and critical incidents and improving areas which require sustained development, for example work with children who are being neglected or who have experienced sexual abuse.

A continued focus on early intervention and prevention activity is important to use resources in the most effective way to improve children’s life chances. More children are receiving effective multi-agency support through the Team Around the Child (TAC) approach, however we have rising numbers of children subject to a child protection plan (360 in February 2012) and high numbers of children in care (680 in February 2012) and so we still need to understand more about which children, now receiving high levels of intervention in care or on the edge of care, could have benefited from more focused earlier intervention. There is much to learn from the successful development of a range of short break services for children with a disability, which provides a menu of choice for children and families, and which constantly strives to integrate and include children into mainstream activities.

Building on the improved quality of our services for children in care, our focus is to increase the number of children living within families, and where children cannot return home, increase the number of children secured in families permanently through adoption and special guardianships. Where older young people need to live in a children’s home, these services will be of excellent quality and value and, where safe, as local as possible. As numbers of children in care remain high, this is placing significant pressure on the fostering service in particular. Our priorities are to reduce the time children wait from adoption approval to being placed for adoption, increase children’s placement stability in care, and make sure that children’s voices are heard loudly and clearly, to inform their care plans and collectively to shape services through their participation in Children in Care Council.

In 2012-13 policy changes, in particular the Governments response to the Munro review of children in need and requiring protection will have a significant impact on partnership practice. The review is also providing a driver to increase the time spent in direct work with children through reducing bureaucracy, and making sure we effectively learn lessons from serious child care incidents. An area of focus is strengthening the offer of early help, so there is a framework of coherent and transparent services available to respond quickly to the needs of vulnerable children and families. Rolling out a programme of work with the Intensive Family Intervention Project (Community Budget) will commence in 2012, and will complement our focus on continuously improving our early help offer to achieve sustainable change.

## Our new priorities

Priority	How we will deliver	How we will measure success
<b>Vulnerable children, young people and families receive targeted, early intervention and support which meets their needs and improves their life chances.</b>	<ol style="list-style-type: none"> <li>1. Area Teams will use local intelligence to support agencies, children and families in the Common Assessment Framework (CAF) and Team Around the Child (TAC) processes as part of early identification of children's needs.</li> <li>2. Use of the CAF Quality Assurance Framework by agencies and area teams will help to ensure children, young people and families receive high quality interventions through the CAF and TAC process.</li> <li>3. Practitioners and agencies will receive targeted programmes of CAF and TAC training.</li> <li>4. The Children in Need Project plan will be implemented, evidenced by a new practice framework in place, new recording exemplars and training delivered for lead professionals by March 2013.</li> <li>5. Family Support Services will be reviewed, with changes beginning to be implemented from January 2013.</li> <li>6. Review the delivery of targeted and evidence based CAMHS (Child and Adolescent Mental Health Service) interventions to young people with mental health problems and their families, using multi-agency processes including CAF and TAC.</li> <li>7. Undertake a review of the delivery of accessible support to prevent family breakdown for young people with emotional and behavioural problems and their families through the CAMHS Children in Need Team.</li> <li>8. Devise programmes to continue to increase the number of children with a disability accessing short breaks, increase the take up of personalised budgets and jointly review with Adult Social Services the work plan for the Transition service.</li> <li>9. Delivery of the Integrated Youth Support Strategy (IYSS) will improve outcomes for vulnerable children and young people through:</li> </ol>	<p>Area Teams will support agencies to complete over 900 CAFs each year.</p> <p>At least 90% of CAFs will be rated as at least satisfactory by the 4<sup>th</sup> quarter of 2012.</p> <p>Annually updated packages of training will be available to all agencies involved with children and young people.</p> <p>Effectiveness of child and adolescent mental health (CAMHS) services. (PI 51).</p> <p>Reducing the number of looked after children. (PI 1400).</p> <p>Provision of short breaks for disabled children delivered. Service user feedback positive.</p> <p>Reducing the number of first time entrants (FTE's) into the youth</p>

Priority	How we will deliver	How we will measure success
	<ul style="list-style-type: none"> <li>• Improved co-ordination, alignment and targeting of services.</li> <li>• Development of a menu of services that provide appropriate targeted interventions for young people at risk of offending.</li> <li>• Development of universal activities to enable young people to achieve. <i>(See also Positive Contribution)</i>.</li> </ul> <p>10. Review the joint working protocol between social care and IYSS, incorporating new legislation and statutory requirements and responsibilities.</p> <p>11. Implement District based multi-agency “edge of care” meetings to target children at risk of care and ensure children are reported to remain at home safely.</p> <p>12. Implement and monitor the refreshed Parenting Strategy:</p> <ul style="list-style-type: none"> <li>• Monitor the impact of Family Support commissioned services.</li> <li>• Implement and monitor the European Social Fund Families project.</li> <li>• Use all available needs led information to inform the re-commissioning process.</li> </ul>	<p>justice system. (PI 117).</p> <p>Reducing the number of looked after children. (PI 1400).</p> <p>Successful parenting interventions (PI 1410).</p>
<p><b>Outcomes for children in care and care leavers are improved.</b></p>	<p>1. Complete the actions set out in the Looked After Children Strategic Change Project for 2012-13.</p> <p>2. Review the effectiveness of local foster care provision by:</p> <ul style="list-style-type: none"> <li>• Refresh the Sufficiency Plan to identify need, the quality and capacity of local provision and capacity within the Family Placement Service and Fostering Panel.</li> <li>• Monitor the progress of children leaving care quarterly through the Looked After Children Performance Board.</li> <li>• Monitor and review the ‘Maintaining Future’ Fostering scheme and increase the ‘Fostering Futures’ scheme to full capacity.</li> <li>• Monitor the implementation of the revised Special Guardianship policy and increase the number of children securing permanence from the 2011-12 baseline.</li> <li>• Refresh and monitor the Foster Care recruitment strategy in order to increase the number and variety of foster families and carers.</li> <li>• Monitor the impact of the foster carer marketing strategy and adjust to secure maximum impact.</li> </ul> <p>3. Review the effectiveness of Independent residential provision by:</p> <ul style="list-style-type: none"> <li>• Monitor the progress of children with complex needs being placed appropriately in placements which are value for money, through the Independent Placement Panel and Traffic Light meeting.</li> <li>• Refresh the Housing Strategy for 16-17 year olds to improve adequacy of suitable accommodation for</li> </ul>	<p>Timeliness of adoptions. (PI 61).</p> <p>Percentage of children who cease to be looked after who are adopted. (PI 1411).</p> <p>Stability of placements (number of placements). (PI 62).</p> <p>Stability of placements (length of placements). (PI 63).</p> <p>LAC reviews completed within timescales. (PI 66).</p> <p>Number of Foster Carers recruited (PI 1406).</p> <p>Attainment of looked after children at Key Stage 2 Level 4 in English. (PI 99).</p> <p>Attainment of looked after children at Key Stage 2 Level 4 in maths. (PI 100).</p>

Priority	How we will deliver	How we will measure success
	<p>this age group. (<i>See also Social and Economic Wellbeing</i>).</p> <p>4. Deliver the Corporate Parenting Action Plan for 2012-13 and effectively monitor by the Corporate Parenting Group:</p> <ul style="list-style-type: none"> <li>• Review and monitor the impact of partner's delivery of the Children in Care 'Promise'.</li> <li>• Evidence that opportunities presented by the Children in Care council are promoted to all looked after children aged eight plus.</li> </ul> <p>5. Evidence that continued improvement in care plans is delivered through:</p> <ul style="list-style-type: none"> <li>• Records of assessments, plans and reviews reflect a focus on children's views and wishes, the cultural and identity needs of children and families and provide a clear picture of their life story and reasons for decisions.</li> <li>• Improve the consistency of the quality of personal education plans for the youngest children in care and the pathway plans for care leavers.</li> <li>• Review the provision of consultation and direct therapy model of care by the Wirral CAMHS Looked After Children Team to Wirral looked after children.</li> </ul>	<p>Attainment of looked after children achieving 5+ GCSE A*-C, including English and maths. (PI 101).</p> <p>Care leavers in suitable accommodation. (PI 147).</p> <p>Reduce the number of looked after children. (PI 1400).</p> <p>Increase in the number of special guardianship orders.</p> <p>Increase in the number of approved carers.</p> <p>OFSTED Unannounced and Announced Inspections.</p> <p>Percentage of care leavers in education, employment and training. (PI 148).</p>
<p><b>Outcomes for children and young people in need of protection are improved.</b></p>	<p>1. Commence the delivery of Munro reforms to ensure that systems are centred on the needs of children and young people and their journey:</p> <ul style="list-style-type: none"> <li>• consult with stakeholders on the Munro reforms and prepare a position statement that identifies areas for development by the end of July 2012;</li> <li>• develop recommendations, across the partnership to address areas for improvement identified in the Munro stakeholder consultation, by the end of November 2012;</li> <li>• pilot the implementation of the recommendations agreed to address the Munro reforms in Wirral in one District by the end of March 2013.</li> </ul> <p>2. Develop robust audit process that evidences the impact of learning from SCR's and audit.</p> <ul style="list-style-type: none"> <li>• Staying Safe Group and WSCB to complete a threshold audit on a number of cases.</li> <li>• Implement the required changes identified as part of the threshold audit to policy, practice and procedure.</li> </ul> <p>3. WSCB review of safeguarding supervision across the partnership with an aim to developing a common approach by March 2013.</p> <p>4. Ensure safe implementation of all policy requirements for children in Private Fostering placements by March 2013.</p>	<p>SCR's continued to be evaluated by OFSTED as adequate or good.</p> <p>Findings from OFSTED unannounced and announced Inspections.</p> <p>Initial Assessments completed within timescales. (PI 1405).</p> <p>Referrals leading to Initial Assessment. (PI 68).</p> <p>Child Protection Plans lasting 2 years or more. (PI 64).</p> <p>Child Protection Plans for a second or subsequent time. (PI 65).</p> <p>Child protection cases reviewed within timescales. (PI 67).</p>



Priority	How we will deliver	How we will measure success
	<p>5. Pilot a programme to enhance engagement with schools and social work teams.</p>	
<p><b>Children live in communities where they feel safe, and where harmful behaviour is actively addressed and reduced.</b></p>	<ol style="list-style-type: none"> <li>1. Deliver the Intensive Family Intervention Project (IFIP) (Community Budgets) Pilot: <ul style="list-style-type: none"> <li>• Project Plan for IFIP completed and submitted.</li> <li>• 300 families in most need of support from the IFIP are identified.</li> <li>• Development of parenting and family support interventions to target families with complex and multiple needs.</li> <li>• Services commissioned to engage with families are based on evidence based practice. <i>(See also Positive Contribution).</i></li> </ul> </li> <li>2. The Local Authority Designated Officer (LADO) role is clearly understood by all agencies and the impact of their intervention is reported to the LSCB on a quarterly basis.</li> <li>3. Through the Multi-Agency Risk Assessment Conference (MARAC) process, the Family Safety Unit (FSU) will support victims of domestic abuse and fast track children into investigation and support mechanisms.</li> <li>4. Ensure that the dedicated commissioned services from Barnados continues to provide interviews for all young people who run away and refers children who need safeguarding when appropriate.</li> <li>5. Ensure that membership of the Anti Bullying Steering Group includes representatives from Early Years Settings, Social Care, Schools and Youth Settings.</li> <li>6. Continue to address road safety issues by implementing the Partnership road safety action plan for 2012-13 to further reduce the number of children killed or seriously injured on roads.</li> <li>7. Ensure targeted intervention for 16-18 year olds that are at risk of or are victims of relationship abuse remain a priority within commissioning and monitor service delivery to ensure the needs of young people are appropriately met.</li> <li>8. Secondary school staff receive training by the NHS and deliver awareness raising and information regarding relationship abuse support for young people.</li> <li>9. The development and facilitation of a half day workshop on "Early sexualisation and young people's perception of risk" for the Children and Young People's workforce. A multi-agency group, led by NHS Wirral will develop and facilitate 7 sessions for school staff.</li> <li>10. Continue to deliver the confidential online</li> </ol>	<p>300 families engaged with IFIP in 2012-13.</p> <p>Maintain or improve low number of repeat cases reported to MARAC.</p> <p>Evidence through commissioned services monitoring returns.</p> <p>All settings have an anti-bullying policy, and consistent message promoted.</p> <p>Children Killed or Seriously Injured in Road Traffic Accidents. (PI 48).</p> <p>The Operating Framework for Public Health in England 2012-13.</p> <p>At least 80% of Wirral schools will be using the resource within their curriculum.</p> <p>Evidence by post training evaluation.</p>



Priority	How we will deliver	How we will measure success
	<p>counselling service through Kooth.com and review provision, making recommendations before 31 March 2013.</p> <p>11. Review of hospital admissions 0-4 years due to unintentional injuries. Developing and implementing an action plan for the “Child Home Safety” Steering Group. Review both the Public Health and Children Centre schemes in view of the Children’s A&amp;E Needs Assessment findings. <i>(See also Being Healthy).</i></p>	<p>Unintentional and deliberate injuries to children 0-4 years. (PI 70a).</p>

# Enjoying and Achieving

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

This section is about ensuring that all young people are able to make the most of and enjoy the wealth of educational opportunities available. It is about supporting all children to reach their potential and ensuring the most vulnerable receive special attention.

## Where we are now

Educational standards for children and young people of all ages in Wirral have continued to improve and for most performance measures we perform in line with or better than national and comparator authority figures. OFSTED inspections of schools show an improving trend with currently no schools in an OFSTED category. There is a new OFSTED framework for schools which “raises the bar” even further and schools are responding well to the new challenges. There is continuous focus on the quality of teaching, learning, curriculum, leadership and management.

National changes in the education landscape through the Education Act 2011 mean that core Local Authority resource focuses on statutory functions and in particular on monitoring, challenging, intervention and support where there is underperformance. Also, as a result of funding to support school improvement now being allocated to schools we have developed and implemented Education Quality, Wirral’s school improvement traded service. Buy-back from schools has been high, the service has been highly rated and we continue to ensure it provides schools with the bespoke services they need. In 2012-2013 we will continue to develop school-to-school support and work closely with any designated Teaching Schools and schools that are awarded a Leadership License.

Inspections of Children’s Centres have continued with most being rated good or outstanding and we have achieved our target of at least 70% registrations of children with our Centres. Inspections of private providers have also continued to improve with demonstrable impact of the support provided by the Sure Start programme. We continue to provide the free entitlement to 15 hours per week childcare for 3 and 4 year olds as well as funding for the most vulnerable 2 year olds. These support our work to improve outcomes for our youngest children and their families and to support the children’s readiness for school. Providing effective, high quality universal and targeted services for 0-5 year olds through the Sure Start programme remains a high priority. A key early years challenge for 2012-2013 is to ensure that we are working with the right families and that intervention is having an impact.

Narrowing the gap in attainment between those affected by disadvantage and other children in Wirral is a high priority. The difference in performance of children entitled to free school meals and those that are not is an issue at every key stage when we compare Wirral performance with that of national and comparator authority figures. Our “100 Club” initiative at Key Stage 4 has been able to demonstrate impact and we will now share that learning and develop individual strategies for each key stage. We will continue to focus on reducing the achievement gap for vulnerable groups of children such as those with special educational needs and children in care.

At post-16 we have continued to support curriculum change and in particular the continued development of alternative and appropriate learning pathways and qualification routes for vulnerable children. We still need to improve outcomes at post-16 and in particular “narrow the gap”.

Support for children with Special Education Needs (SEN) is of high quality and there is much good and outstanding provision across Wirral. Whilst the support and outcomes for children

with SEN are very good, in 2012-13 particular areas of development are required. We will communicate the “local offer” more effectively to providers, parents/ carers and professionals and through this process establish more clearly “who does what”. We will also focus on specific development work related to behaviour support and for children with Autistic Spectrum Disorder (ASD).

## Our new priorities

Priority	How we will deliver	How we will measure success
<p><b>The new School Improvement Strategy is implemented and evaluated ensuring we meet our statutory duties.</b></p>	<ol style="list-style-type: none"> <li>1. Raise attainment in schools at all key stages with a particular emphasis on those schools where underperformance has been identified.</li> <li>2. Improve the levels of early language development through implementation of the revised strategy for speech and language.</li> <li>3. Review, redesign and market Education Quality (Wirral's school improvement traded service).</li> <li>4. Further improve capacity within and across schools by developing a framework for school-to-school support which includes Academies and Teaching Schools by March 2013.</li> <li>5. Ensure that schools below floor standards, schools causing concern and/or schools in an OFSTED category make good or better progress; those in Schools Causing Concern or an OFSTED category should be removed from that category in the shortest possible time.</li> </ol>	<p>Achievement at Level 4 and above in both English and maths at Key Stage 2. (PI 73).</p> <p>Attainment of 5+ GCSE A*-C, including English and maths. (PI 75).</p> <p>Foundation Stage Profile- Language for Communication, Language and Literacy. (PI 72a).</p> <p>Percentage uptake of schools of Education Quality school improvement service. (PI 1507).</p> <p>Framework for school-to-school support embedded by the end of March 2013.</p> <p>Number of schools judged by OFSTED as requiring special measures or in a category for concern. (PI 89a).</p>
<p><b>Educational outcomes for children and young people affected by poverty and disadvantage including children in care are improved.</b></p>	<ol style="list-style-type: none"> <li>1. Reduce the attainment gap between children eligible for free school meals (FSM) and those not eligible across all key stages.</li> <li>2. Continue to build the capacity of schools to support children with English as an Additional Language (EAL) and from Black and Minority Ethnic (BME) groups in order to further improve the attainment of such children.</li> </ol>	<p>Attainment gap between the lowest achieving 20% in the Early Years Foundation Stage Profile and the rest. (PI 92).</p> <p>Achievement gap between pupils eligible for free school meals and their peers at Key Stage 2. (PI 102a).</p> <p>Achievement gap between pupils eligible for free school meals and their peers at Key Stage 4. (PI 102b).</p> <p>Achievement of EAL pupils at KS2 English &amp; maths level 4. (PI 107).</p> <p>Persistent absence rate in Secondary Schools. (PI 87a).</p>

Priority	How we will deliver	How we will measure success
	<p>3. Reduce Persistent Absence and improve attendance in all schools.</p> <p>4. Deliver primary school involvement in the Liverpool City Region (LCR) child poverty strategy school readiness pilot in collaboration with Cambridge University.</p> <p><i>Children in Care:</i></p> <p>5. Raise the attainment of Looked After Children at all key stages.</p> <p>6. Ensure that Looked After Children in school settings at KS4 have access to up-to-date information, advice and guidance so they can make informed choices.</p>	<p>Persistent absence rate in Primary Schools. (PI 87b).</p> <p>Wirral schools pilot information successfully submitted.</p> <p>Attainment of looked after children at Key Stage 2 Level 4 in English. (PI 99).</p> <p>Attainment of looked after children at Key Stage 2 Level 4 in maths. (PI 100).</p> <p>Attainment of looked after children achieving 5+ GCSE A*-C, including English and maths. (PI 101).</p> <p>Percentage of school providing appropriate 1:1 interviews for Looked After Children (PI 1508).</p>
<p><b>The provision of behaviour support is reviewed and school exclusion reduced.</b></p>	<p>Produce a revised policy and practice document related to behaviour and exclusions in partnership with all Wirral schools including those that offer specialist provision by March 2013.</p>	<p>Primary Schools with good or outstanding behaviour standards. (PI 86b)</p> <p>Secondary Schools with good or outstanding behaviour standards. (PI 86a)</p> <p>Rate of permanent exclusions from school. (PI 114)</p> <p>Rate of fixed term exclusions from school in Primary. (PI 114a)</p> <p>Rate of fixed term exclusions from school in Secondary schools. (PI 114b)</p> <p>Transparent co-ordinated pathway through behaviour services published to all service users by the end of March 2013.</p>
<p><b>Provision, choice and outcomes for children and young people with Special Educational Needs and/or disabilities are improved.</b></p>	<p>1. Evaluate the pilot for commissioning places in Wirral's Special Schools and determine a final policy by the end of December 2012.</p> <p>2. Review policy and practice around the support and provision for needs that arise out of an Autistic Spectrum Disorder by the end of December 2012.</p> <p>3. Produce an action plan based on the 11 recommendations arising from the review of provision for children with</p>	<p>Attainment of children with Special Educational Needs statements at Level 4 and above in English and maths at Key stage 2. (PI 1600)</p> <p>Percentage of children with Special Educational Needs statements achieving 5+ GCSE A*-C, including English and maths. (PI 1601)</p> <p>Action plans produced by July 2012 and December 2012.</p>

Priority	How we will deliver	How we will measure success
	<p>Profound Multiple Learning Difficulties by the end of July 2012.</p> <p>4. In line with the Special Educational Needs and Disability Green Paper produce a Local Offer regarding services and provision available by the end of September 2012.</p>	<p>Local offer published by September 2012.</p> <p>Percentage of Statements issued within timescales. (PI 103a and 103b).</p>
<p><b>Services provided through our Sure Start and Children's Centres deliver effective support based on the needs of our local residents and communities.</b></p>	<p>1. Improve access to early intervention services in Children's Centres so there are increased registrations and engagement of children and families, especially those that are most vulnerable.</p> <p>2. Improve the OFSTED outcomes in Children's Centres and Private Voluntary and Independent (PVI) childcare settings.</p> <p>3. Improve parental access to a flexible early years entitlement of 15 hours per week.</p> <p>4. Enable the Local Authority to meet the national target for the increased childcare offer to vulnerable 2 year olds.</p> <p>5. Implement the national Children's Centre Payment by Results research pilot to further improve the quality of targeted provision.</p> <p>6. Develop criteria and funding methodology for meeting the needs of under-5 children with SEN within allocated budget enabling continuity of support to primary education.</p> <p>7. Effectively monitor commissioned parenting programmes for vulnerable families with children under 5 to ensure improved family outcomes.</p>	<p>Percentage of 0-5 year olds registered at Children's Centres. (PI 1505a).</p> <p>Percentage of 0-5 year olds registered at Children's Centres from disadvantaged backgrounds. (PI 1505b).</p> <p>Numbers of good or better inspections of Children's Centres.</p> <p>Percentage of Private Voluntary and Independent (PVI) childcare settings that achieve good or better OFSTED inspection results.</p> <p>Percentage of Early Years Settings delivering flexibility in relation to the 15 hour free entitlement. (PI 1504)</p> <p>Numbers of vulnerable 2 year olds being supported.</p> <p>Pilot submission approved by the Department for Education by March 2013.</p> <p>Clear criteria and funding methodology agreed and implemented by March 2013.</p> <p>Percentage of parents who rate the parenting intervention service as successful. (PI 1410)</p> <p>Achievement of at least 78 points across the Early Years Foundation Stage. (PI 72)</p>

## Positive Contribution

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

This section concerns the ways young people are supported to make a positive contribution to their communities. It is about involving all young people at every stage in the decisions that affect them and young people themselves making the decisions. It also includes provision of opportunities to do as well as to learn, helping them to develop their self-confidence, resilience and a sense of purpose and ensuring that there are no barriers to their involvement in these positive activities.

### Where we are now

Since our last plan we have improved our approaches to commissioning of services and young people have been actively involved in setting priorities and in deciding which services should be commissioned. Young people are heavily involved in the commissioning of short breaks for disabled children programme. This has successfully increased the range of opportunities available to young people with more children, young people and families accessing these opportunities.

The number of First Time Entrants into the Youth Justice System rose slightly in 2011 which was largely due to fare evasion on trains and buses by young people. The Youth Offending Service has successfully negotiated with Mersey Travel to ensure that where possible the young people are offered the option of Restorative Justice thereby preventing them from entering the Youth Justice System whilst working to ensure future prevention of offending.

Our young people asked us to celebrate their achievements, in 2011 the CiC achievement awards celebrated the success of 137, and our Youth Voice Conference event brought together 126 young people to discuss issues that are important to them. In order to improve our use of technology to engage with young people Wirral successfully launched the ‘teen Wirral’ website which provides information and advice to young people as well as a forum to celebrate their achievements.

The re-launch of the Multi-systemic Therapy programme in February 2012 will be complementary to the Intensive Family Support Programme (IFIP), formally Community Budgets, which aims to improve outcomes for Troubled Families. Innovative approaches to working with children and young people involved in risk taking behaviour has included the training of 80 Youth Workers to help young people assess their use of alcohol and related substances. This is an innovative way of promoting early intervention to prevent problems from escalating.

Involvement and engagement of young people continues with a number of successful programmes in 2011-12. Young people peer educators have worked in different settings to highlight the consequences of alcohol and substance misuse. In December 2011 at the Pilgrim Youth Arts Centre, young people from across Wirral showcased their achievements in the youth arts programmes funded by the Early Intervention Grant (EIG). In December 2011 14 young people graduated after successful completing the Merseyside Fire and Rescue Beacon Programme through a number of accredited courses.

In 2012-13 we will be working in schools to further develop young people’s involvement in the Youth Voice Conference and Youth Parliament. These events allow young people to effectively contribute to a wide variety of workshops and work directly with elected members to influence the work of the Council. Young people will be given the opportunity to inform decisions relating to the Youth Opportunity Fund and other commissioning activities. A key area for development is ensuring there is feedback to young people on the impact of their

involvement in consultation. Taking account of the current financial climate and young people's feedback, we will be looking at charging policies for young clubs and positive activities to ensure charges are not a barrier to taking part. Work with our children and young people who are looked after continues to be a priority and is retained in next year's plan. For children and young people with learning difficulties and disabilities, work is ongoing to ensure they are able to be effectively involved in Wirral Involvement Schools Council and also in other decision making opportunities.

In order to continuously develop our youth provision in the borough we will undertake a feasibility study to determine the viability of a youth zone development at Birkenhead Fire Station. At all times the focus will be on helping children and young people to make a Positive Contribution.

## Our new priorities

Priority	How we will deliver	How we will measure success
Fewer children and young people are involved in offending and anti social behaviour.	<ol style="list-style-type: none"> <li>1. Delivery of the Integrated Youth Support Strategy (IYSS) will improve outcomes for vulnerable children and young people through: <ul style="list-style-type: none"> <li>• Improved co-ordination, alignment and targeting of services.</li> <li>• Development of a menu of services that provide appropriate targeted interventions for young people at risk of offending.</li> <li>• Development of universal activities to enable young people to achieve. <i>(See also Staying Safe)</i>.</li> </ul> </li> <li>2. Increase the use of Triage by the police as a means of early assessment of young people who have been involved in anti social behaviour.</li> <li>3. Deliver 12 multi-agency weekend Operation Stay Safe programmes to target young people at risk from their behaviour.</li> <li>4. Develop a framework to monitor the impact of Restorative justice and share good practice between agencies</li> <li>5. Provide Beacon Programmes in term time for young people at risk of offending and becoming NEET.</li> <li>6. Provide Life Programmes during holiday periods to engage with young people at risk of offending and becoming NEET.</li> <li>7. Deliver the Intensive Family Intervention Project (IFIP) (Community Budgets) Pilot: <ul style="list-style-type: none"> <li>• Project Plan for IFIP completed and submitted.</li> <li>• 300 families in most need of support</li> </ul> </li> </ol>	<p>Number of first time entrants (FTE's) into the youth justice system. (PI 111).</p> <p>Reported incidents of anti-social behaviour. (PI 1701).</p> <p>18 programmes delivered in 2012-13.</p> <p>Framework agreed and embedded by March 2013.</p> <p>Reduce the percentage of 16-18 year olds not in education employment or training (NEET). (PI 117).</p> <p>300 families engaged with IFIP in 2012-13.</p>



Priority	How we will deliver	How we will measure success
	<p>from the IFIP are identified.</p> <ul style="list-style-type: none"> <li>• Development of parenting and family support interventions to target families with complex and multiple needs.</li> <li>• Services commissioned to engage with families are based on evidence based practice. <i>(See also Staying Safe)</i>.</li> </ul> <p>8. Ensure delivery of an effective Multi-Systemic Therapy programme for children and young people. <i>(See also Being Healthy)</i>.</p> <p>9. The Alcohol Intervention Programme will provide young people with the opportunity to assess their substance misuse habits.</p> <p>10. Deliver the Peer Education Programme on Alcohol Misuse in schools.</p> <p>11. Sports Development Projects Reducing drug and alcohol misuse of young people aged 13 – 19 years and reducing crime:</p> <ul style="list-style-type: none"> <li>• Engagement with 80 referrals from key agencies.</li> <li>• Delivery of 10 youth sports nights per week engaging with 700 young people. <i>(See also Being Healthy)</i>.</li> </ul>	<p>Successful MST completed with 18 families.</p> <p>PI 39 Alcohol harm-related hospital admission rates. (PI 39).</p> <p>Percentage of Young People reporting to use alcohol. (HELP Survey). (PI 1301).</p>
<p>Children and young people have access to a range of appropriate play and developmental opportunities which meet their needs.</p>	<p>1. To ensure commissioned activities for children and young people are relevant to their needs and wishes services will be required to demonstrate how young people have influenced their delivery and to promote a positive image of young people.</p> <p>2. Taking account of the current economic climate and feedback from young people we will review the charging policies for young clubs and other positive activities.</p> <p><i>Targeted Activity</i></p> <p>3. Young people will determine the scope of the Youth Arts Workshops on risk taking behaviour. Young people will deliver the workshops as part of the production Addressing Risk Taking behaviour.</p> <p>4. We will continue to ensure that Children In care are able to access leisure activity programmes during the holiday periods.</p> <p>5. Ensuring a range of short break services are available to children with disabilities including weekends and school holidays and that more children access the provision.</p>	<p>Evidence through commissioned services monitoring returns.</p> <p>Participation in and outcomes from youth work: Participation. (PI 1700a).</p> <p>Evidence through commissioned services monitoring returns.</p> <p>Evidence through commissioned services monitoring returns.</p> <p>800 short break opportunities accessed in 2012-13.</p>

Priority	How we will deliver	How we will measure success
	<p>6. Provision of 288 holiday activity sessions provided through the Early Intervention Grant to provide activities for looked after children, the youth inclusion programme and children with disabilities.</p> <p><i>Universal Activity:</i></p> <p>7. The Youth Fest will take place in May and will involve 300 young people in a music festival.</p> <p>9. The battle of the Bands Final will take place in May involving young people from across Wirral.</p> <p>10. We will run two National Citizenship Scheme programmes.</p> <p>11. Play Day will take place in August and will enable children and young people engage in positive play activities.</p> <p>12. Wirral Civic Award scheme will deliver a programme with schools, youth clubs and play projects.</p> <p>13. Summer holiday programme will provide borough-wide open access play provision for children 6- 14 years.</p> <p>14. Project to identify and promote opportunities for volunteering and work experience.</p> <p>15. Through the Sportivate Programme, 40 sporting projects of 6 weekly sessions for 14-25 year olds of high quality coaching, capturing the excitement of sport and the 2012 Olympic Games will be delivered. This initiative will contribute towards an increase in participation in sport.</p>	<p>Evidence through commissioned services monitoring returns.</p> <p>Participation in and outcomes from youth work: Participation. (PI 1700a).</p> <p>Participation in and outcomes from youth work: Recorded Outcomes. (PI 1700b).</p> <p>Participation in and outcomes from youth work: Accredited Outcomes. (PI 1700c).</p> <p>Delivery of the Sportivate performance framework.</p>
<p>Children and Young People are actively engaged in community and democratic decision making processes.</p>	<p>1. Increase the involvement of young people with Learning Difficulties and Disabilities (LDD) in the Wirral Involvement School's Council (WISC).</p> <p>2. Young people will be recruited to act as Inspectors as part of the "Young People Friendly Services" to ensure health services are young people friendly.</p> <p>3. Children and Young people will be actively involved in identifying outcomes and action plans to achieve Enhanced Status as part of the Healthy Schools Programme.</p>	<p>50 pupils with LDD engaged in the WISC.</p> <p>A minimum of 10 organisations will be engaged in or have achieved "Young People Friendly Service" status.</p> <p>A minimum of 10 schools will be engaged in or have achieved Enhanced Status.</p>

Priority	How we will deliver	How we will measure success
	<p>4. Schools will be involved in planning for the Youth Parliament. Pupils will be trained in the rules of debate to maximise the opportunity to engage in the decision making process provided by the Youth Parliament.</p> <p>5. The Youth Opportunity Fund priorities and allocations will be determined by young people as members of the Executive Youth Board and Grant Panel.</p> <p>6. All children and young people who come into the care of the local authority will be directly contacted regarding opportunities available to them.</p> <p>7. Young people will be involved in the development, delivery and evaluation of the teenage pregnancy action plan, marketing and service delivery.</p>	<p>20 Secondary Schools will be involved in the Youth parliament. (PI 1408).</p> <p>Representation from each of the 4 district youth forums.</p> <p>Percentage of Children in Care aged 8 plus who are aware of the function of the CiC Council. (PI 1409).</p> <p>Feedback event held at the Youth Voice Conference in October 2012.</p>

## 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.”***

This section is about preparing young people with the skills they need to cope with the challenges of the modern world. We want them to be happy confident individuals equipped to make the most of opportunities such as further training, education or employment and to achieve their potential.

### **Where we are now**

Year on year progress has been made with young people Not in Education, Employment or Training (NEET) current levels are remaining reasonably steady against a worsening economic backdrop and are less than 10%. Performance against the September Guarantee target for an offer of learning for young people in Wirral was strong; the ‘offer met’ for the Year 11 cohort was 95.55% and for the year 12 cohort 89.91%.

Effective partnerships have been demonstrated by the success of the Working Neighbourhood Funded ‘Wirral Apprentice’ programme. This programme supports employers by funding apprentices for up to 18 months, matched by a pledge of permanency from the employer. The programme has been extended to 2013 with new apprenticeships targeted towards Wirral residents aged 16-18; or 19-24 and NEET or unemployed. Wirral is an active participant in the Liverpool City Region (LCR) Employment and Skills agenda and has contributed to the development of the LCR Apprenticeship Strategy.

A full strategic analysis of Wirral learning and training provision 16-19 was carried out during 2011 published in the form of a Commissioning Statement. The curriculum challenge has been to deliver a foundation learning curriculum at Key Stage 4 that offers positive progression opportunities post-16 and a flexible level three curriculum post 16.

Too few of our care leavers are in education, employment or training (EET), particularly by age 19 and too many young people drop out of their chosen courses at 17. A dedicated employability team has been introduced to enhance EET opportunities for care leavers. In response to changes in statutory duties on the LA to deliver information, advice and guidance to young people a new delivery model is to be implemented.

In 2012-13 economic pressures and the impact of ongoing austerity measures mean that providing engagement opportunities in education, employment and training to all young people remains a significant challenge. Through the implementation of the Raising the Participation Age (RPA) plan the attainment of children and young people who are affected by poverty will be an area of focus. Targeted interventions with vulnerable groups such as care leavers, young offenders, those with learning difficulties and disabilities and teenage parents will be prioritised to ensure the gap between the most able and most vulnerable does not continue to widen. Interventions to enable children from disadvantaged backgrounds to achieve a full level three by age 19 will be delivered.

It is recognised that many of our vulnerable young people have additional housing needs and we will review the services we deliver to ensure that support is effective and targeted appropriately. A further key area for development will be Children’s Trust involvement in the development and delivery of the Wirral Child and Family Poverty Strategy.

## Our new priorities

Priority	How we will deliver	How we will measure success
<p><b>All young people aged 16-18 particularly those in vulnerable groups are effectively supported to access the education, employment and training opportunities available.</b></p>	<ol style="list-style-type: none"> <li>1. Commission a targeted careers education, information, advice and guidance (CEIAG) service.</li> <li>2. Examine pooled resources with education sector providers to assist with travel costs to schools for those on low incomes.</li> <li>3. Implement the Raising the Participation Age Plan (RPA) to include: <ul style="list-style-type: none"> <li>• Developing a Risk of NEET Indicator tool (RONI).</li> <li>• Delivery of the DfE RPA Locally Led Delivery Project.</li> <li>• Implementation of the RPA Communication Plan.</li> </ul> </li> <li>4. Determine local priorities and barriers young people have to participation.</li> <li>5. Identify any gaps in post-16 learning provision in the borough and commission through the Education Funding Agency as appropriate.</li> <li>6. Develop a fit for purpose funding system for allocating funding for learners with learning difficulties and disabilities (LDD) aged 16-25. (For full implementation in the academic year 2013-14 following national guidance).</li> </ol>	<p>Achievement of a level 2 qualification by the age of 19. (PI 79).</p> <p>Achievement of a level 3 qualification by the age of 19. (PI 80).</p> <p>Inequality gap at level 3 aged 19. (PI 81).</p> <p>Inequality gap at level 2 aged 19. (PI 82).</p> <p>Participation of 17 year olds in education or training. (PI 91).</p> <p>Reduce the percentage of 16-18 year olds not in education employment or training (NEET). (PI 117).</p> <p>Care leavers in Education, employment and training. (PI 148).</p>
<p><b>The impact of poverty on children is reduced.</b></p>	<ol style="list-style-type: none"> <li>1. Focus Lifelong and Family Learning provision to engage and motivate disadvantaged families, encourage achievement and progression and strengthen communities.</li> <li>2. Undertake a comprehensive Childcare Sufficiency Assessment to improve the penetration rates of childcare places per 1000 head of population. Focus to be on areas of greatest disadvantage and for parents of children with disabilities.</li> <li>3. Further develop the Families Information Service website and marketing materials, offering information, advice and guidance to parents and carers of children from birth to 19.</li> <li>4. Ensure that new childcare provision is developed on a sustainable business basis and that current provision continues to operate in areas of economic</li> </ol>	<p>Proportion of children in poverty. (PI 116).</p> <p>Take up of formal childcare by low-income working families. (PI 118).</p> <p>Implementation of the Wirral Child and Family Poverty Strategy.</p>

Priority	How we will deliver	How we will measure success
	disadvantage.	
<b>Vulnerable young people and children with additional housing needs are supported to access suitable housing options.</b>	1. Develop a plan to address the housing needs of vulnerable children and young people incorporating the review of housing services for at risk young people and young people in care. <i>(See also Staying Safe)</i> .	Care leavers in suitable accommodation. (PI 147).
<b>Young people have excellent skills and opportunities into employment, including through Wirral's Apprenticeship programme.</b>	<ol style="list-style-type: none"> <li>1. Deliver the From Care2Work Plan.</li> <li>2. Increase apprenticeship participation.</li> <li>3. Provide young people with the information, skills and confidence to assist them to travel independently.</li> <li>4. Assess the travel and transport needs of young people and promote and maximise the use of sustainable modes of transport.</li> </ol>	<p>Care leavers in Education, employment and training. (PI 148).</p> <p>Number of 16-18 apprenticeships. (PI 1509).</p>

## Resources

This plan identifies the priorities for improving the lives of children and young people in Wirral and provides a clear focus for all who work in this field. The partnership continues to work towards greater budget co-ordination. Effective value for money and efficient use of resources is a key activity for us in order to effectively deliver our priorities and create better outcomes for children and young people.

*Information currently being finalised.*



# Safeguarding

Protecting our children and young people from harm is a key priority for the whole partnership and is led by the Wirral Safeguarding Children Board (WSCB). This places safeguarding at the centre of the Children's Trust's overall commitment to supporting children and families. The Director of Children's Services and the Lead Member for Children's Services have clear roles and responsibilities as champions for children, young people and their families. The Director reports directly to the Council Chief Executive.

WSCB promotes high standards in safeguarding work across the partnership and has the responsibility to hold organisations to account to ensure these standards are met. The WSCB Business Plan is refreshed annually and is integrated with the Children and Young People's Plan through the work of the Staying Safe Strategy Group.

Key areas of work completed in 2011-12 included:

- Two Serious Case Reviews (SCRs) were completed and evaluated as 'adequate' by OFSTED.
- Improved learning from Critical Incidents and contributing to national learning on how Serious Case Reviews will be undertaken in the future through the Munro reforms.
- A multi-agency audit was completed in the area of parental mental ill-health to inform a working group and provide training and guidance.
- A joint protocol for working with parents who have mental ill-health issues was agreed between Wirral Council and Cheshire and Wirral Partnership Trust.
- Improved accessibility to safeguarding procedures was achieved for all agencies through the introduction of an online resource.
- Joint working arrangements with the Safeguarding Adults Partnership Board (SAPB) were strengthened through a shared chairperson and a joint head of safeguarding services.
- The Child in Need (CiN) process was reviewed and improvements through revised guidance, updated recording systems and training will be implemented in 2012-13.
- A quality assurance framework and toolkit which covers all aspects of the Common Assessment Framework (CAF) and Team around the Child (TAC) was developed.
- A distance travelled tool for CAF and TAC which measures progress and outcomes from the child and family's perspective was implemented.
- A committee for Children with Disabilities was established to advise and guide colleagues on safeguarding issues specific to this group of children.
- In response to SCRs a number of reviews were completed including a study on barriers to effective inter-agency challenge, a review of children and families who enter the child protection process for a second time and an analysis of child protection plans which end at the first review.
- The Child Death Overview Panel became part of a Pan-Merseyside group to allow improved learning in identifying trends and targeting resources.
- 27 different training courses updated to reflect learning from SCRs were attended by in excess of 1,000 practitioners. Workshops on e-safety and neglect issues were delivered.
- WSCB strengthened links with housing providers establishing a group of safeguarding leads from private, social and council housing associations.

Key areas for development in 2012-13 are:

- Further develop the WSCB website to provide access to more information and guidance for children and families.
- Produce a toolkit and guidance for multi-agency practitioners working with parents who have known mental health issues.
- Deliver a targeted training programme on child sexual abuse.

- Produce and implement a quality assurance cycle for WSCB to further develop effectiveness in co-ordinating and monitoring arrangements for safeguarding across the partnership.
- Respond appropriately to the outcomes of the Munro Review of Child Protection which will include a review of the status of procedures, implementation of Serious Case Review requirements and the development and oversight of the 'early offer' for children and families.

## Consultation with Young People

Active engagement of children and young people in decision making processes is a key area where much progress has been made. Increased opportunities are available for young people to positively impact on the issues that affect them. This is done formally through arranged groups and informally through youth clubs and our 'teen Wirral' website. Organisations on Wirral have signed up to the 'Charter of Participation' to enhance participation of children and young people in designing, developing and evaluating their services. Our aim is to 'hardwire' engagement into all our work and ensure the views and wishes of children and young people drive improvements. The structure of the formal engagement processes is shown in Appendix 2.

A consultation exercise involving children and young people was carried to inform the priorities in this new CYPP. The consultation was designed to be as inclusive as possible to ensure the views of a wide range of children and young people across Wirral were captured. A range of groups in different areas of the borough were involved including: youth clubs, the Children in Care Council, and the Wirral Youth Parliament. It is not possible to do justice to the richness of all the ideas we received in this plan but the key points can be outlined.

Young people told us that Wirral had good outdoor spaces. In particular they noted that the local facilities on offer were good and thought that the transport network was convenient for them. They said the beaches and parks are great places to visit and were positive about youth clubs and sports and leisure facilities. They said that they enjoyed school and that the standard of education provided were high.

Although many young people said that they enjoyed living in the Borough, some noted that they felt unsafe on the streets especially at night time. A number of young people said that they felt that litter and vandalism was an issue for their neighbourhood and that they felt that there was a lack of community spirit and care about the communities they live in. Young people wanted more affordable transport, better careers advice on the choices available to them when they leave school and more job opportunities. They wanted their views to be heard and thought that more should be done to celebrate their achievements.

The 'word clouds' below illustrate what is best and worst about living in Wirral with the size of the text representing the number of young people who had strong feelings about these topics.

*(word clouds under development)*

The consultation feedback has informed the priorities in this new plan. Key areas identified by young people with planned actions to address them in 2012-13 are outlined below.

We are very grateful to all the young people who contributed to the consultation and we will ensure that those involved receive feedback on how their views have informed this plan.

Area	Young People Defined Activities	Action in 2012/13
Being Healthy	There should be more lessons on how to cook healthy food in schools and healthy food should be available in schools.	All Wirral schools have achieved healthy school status and should already be offering healthy food in schools. Further consultation will take place during 2012-13 through the Healthy Schools Pupil Panels, Children in Care Council and other forums to identify need and barriers and to address the request for cookery lessons as part of the school curriculum. The findings will inform the multi-agency Change4Life and Healthy Settings Enhanced Status planning.
	More opportunities to get fit through sporting activities.	<p>All schools are being encouraged to engage in either level 1 or 2 of the School Games framework. There are numerous sporting activities organised by Sports Development throughout the year</p> <p>The 'Step into Leisure' programme continues to be offered to all children who are 'in need' or 'looked after' and free swimming is available for under 18s during the holidays in all our Leisure Centres.</p> <p>The Active All Sports Programme runs during the holidays and weekends and some evenings for young people with a disability or who are over weight. Junior Invigor 8 membership is available at all Leisure centres.</p>
Staying Safe	Better street lighting to provide safer streets at night.	Further discussion with young people will take place to identify locations for investigation and potential street lighting improvement.
	More should be done to stop Bullying.	Anti-bullying work in Wirral will be strengthened through increased membership of the Anti Bullying Steering Group to include representatives from Early Years Settings, Social Care, Schools and Youth Settings. All settings will have anti-bullying policies, and a consistent message will be promoted.
	In meetings with social workers children should be involved in making decisions about their future.	New information leaflets for Children in Care (CiC) have been produced. Workshops and audits are being held in 2012-13 on listening to children's needs. CiC Council members will train social workers to improve practice.
	Reducing anti-social behaviour (ASB) and vandalism.	There is continued investment in the ASB team. There is an integrated response to reducing ASB through the Integrated Youth Support Strategy (IYSS), with youth outreach teams working together.
	Foster carers should be given training about alcohol and drugs awareness.	A new targeted training programme about young people's alcohol use will be delivered to Foster Carers during 2012-13.
Enjoy & Achieve	Help with money management and budgeting.	Head teacher representatives on the Enjoy and Achieve group will share this with schools to take it into account when designing the curriculum and

Area	Young People Defined Activities	Action in 2012/13
		extra-curricular activities. This area will also be progressed through the Wirral Child Poverty Action Plan.
	More school and after school activities associated with independent living including cooking.	Head teacher representatives on the Enjoy and Achieve group will share this with all schools so they can take this into account when designing the curriculum and extra-curricular activities.
	Children in care (CiC) should be provided with extra support in schools for education, exams and attendance.	Schools have been provided with information regarding funding for CiC including the Pupil Premium and the Personal Education Allowance, both of which could be used by schools to provide extra support. This will be raised with schools through review meetings and by the Virtual Head Teacher(s) (who represent CiC) at head teacher meetings.
Positive Contribution	More opportunities for young people to volunteer and gain work experience.	Work is underway to identify and promote opportunities for volunteering and work experience.
	More should be done to listen to the views of young people.	Commissioned services will have to demonstrate how they have involved young people in the decision making process in their organisation.
	Better communication of the youth activities that are available.	We are currently working to identify a number of ways to communicate the opportunities that are available for young people.
	More diversionary indoor activities to accommodate those with disabilities.	We will ensure this is considered as part of the process for the rollover of contracts for the provision of Short Breaks for Disabled Children and Risk taking Behaviour in Children and Young people.
	Reduction in the costs associated with Youth Clubs.	We will review the charging policies for youth activities.
	More positive promotion of the achievements of Wirral young people.	This is an area that has not developed as well as we would want. It is a priority for 2012-13. Commissioned services will be required to provide evidence to promote positive images of young people.
	More opportunities to feedback to young people on consultations.	Work is underway through schools and youth organisations to develop clear processes to feedback to young people on consultations.
Social & Economic Well Being	Young people should be given more support on careers advice and how to get the job they want.	Will be launching Greater Mersey Interactive, on the 1 <sup>st</sup> April 2012. This is a web based interactive portal which will bring together a wealth of information to support and enable young people to better make informed career decisions.
	More inclusive opportunities for workplace experience courses.	The Council is looking to provider greater internal work placement and internship opportunities for young people.
	More affordable transport.	The Council will be supporting sustainable modes of transport. Free bicycles will be made available for those young people who have an offer of a job. Travel cards may also be made available for





# Wirral Children and Young People's Plan 2012-13

## Our Vision

"To enable Wirral's children, young people and families to access services quickly in order to be secure, healthy, have fun and achieve their full potential."

## Our Principles

- Every child matters
- Keeping our children safe through effective safeguarding
- Improving outcomes for children, young people and their families
- Organising around children and young people, taking account of their views
- Operating across the partnership as a single integrated Children's Service
- Continuing to build on excellent partnership working
- Integrated strategy and governance
- Integrated delivery and processes
- Early intervention and prevention
- Targeted support for vulnerable groups
- Equal value and common standards
- Fitness for purpose utilising new approaches and technology to improve our efficiency and service
- Responsibility and accountability.

## Our Priorities

<b>Being Healthy</b>
Promote wellbeing through health promotion and behaviour change approaches. Reduce the harmful consequences of risk taking behaviour including substance misuse and sexual activity resulting in unplanned teenage conceptions and sexually transmitted infections. Encourage and support all children and families to achieve and maintain a healthy weight and lifestyle. Improve positive mental health outcomes for children and young people.
<b>Staying Safe</b>
Ensure vulnerable children, young people and families receive targeted, early intervention which meets their needs and improves their life chances. Improve outcomes for children in care and care leavers. Improve outcomes for children and young people in need of protection. Ensure children live in communities where they feel safe, and where harmful behaviour is actively addressed and reduced.
<b>Enjoying &amp; Achieving</b>
Implement and evaluate the new School Improvement Strategy ensuring we meet our statutory duties. Improve the educational outcomes for children and young people affected by poverty and disadvantage including children in care. Improve provision, choice and outcomes for children and young people with Special Educational Needs and/or disabilities. Review the provision of behaviour support and reduce school exclusion. Ensure that the services provided through our Sure Start and Children's Centres deliver effective support based on the needs of our local residents and communities.
<b>Making a Positive Contribution</b>
Reduce the number of children and young people involved in offending and anti social behaviour.

Ensure children and young people have access to a range of appropriate play and developmental opportunities which meet their needs.

Provide opportunities for children and young people to be actively engaged in community and democratic decision making processes.

### **Social and Economic Well Being**

Ensure that all young people aged 16-18 particularly those in vulnerable groups are effectively supported to access the education, employment and training opportunities available.

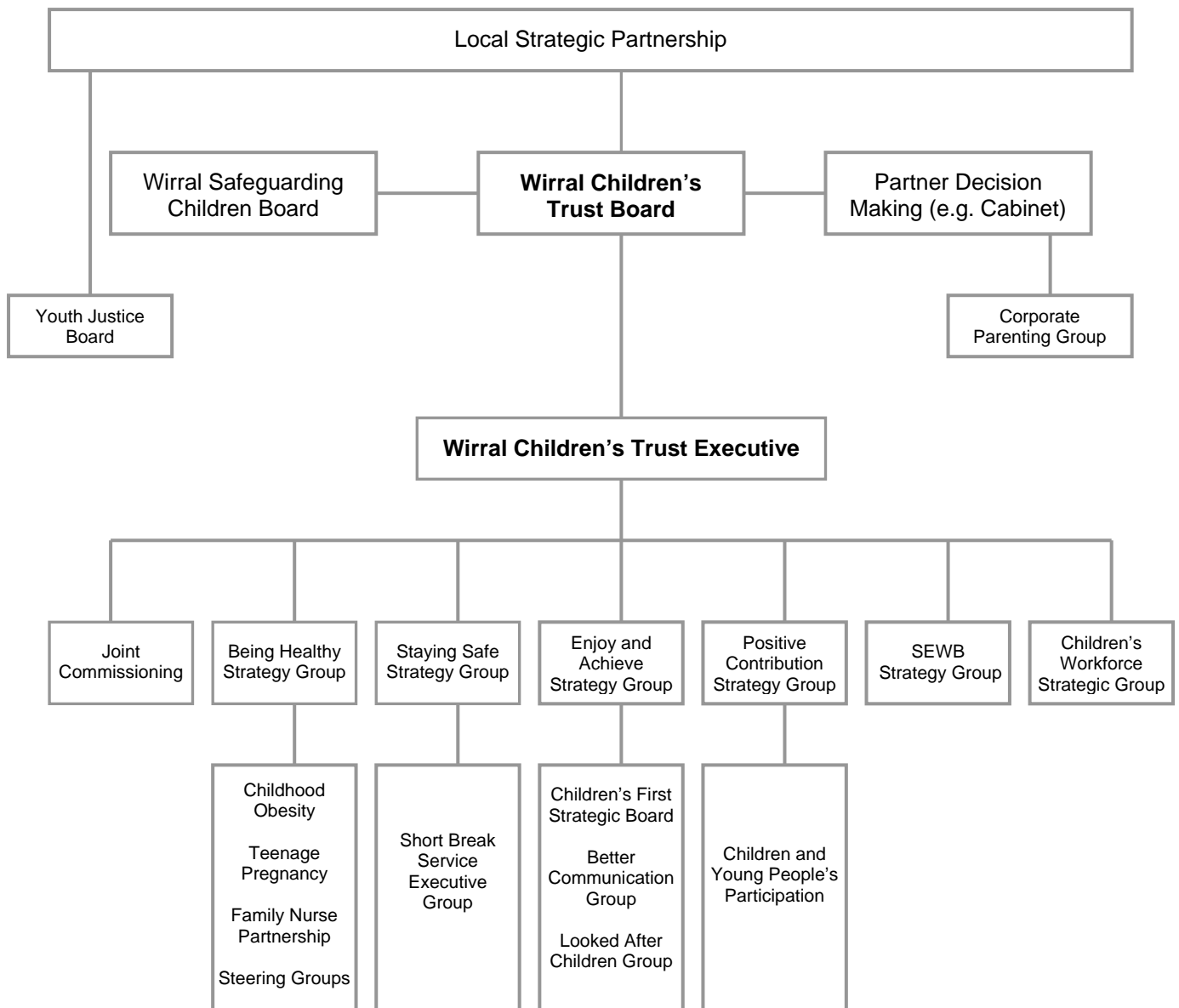
Minimise the impact of poverty on children.

Support vulnerable young people and children with additional housing needs to access suitable housing options.

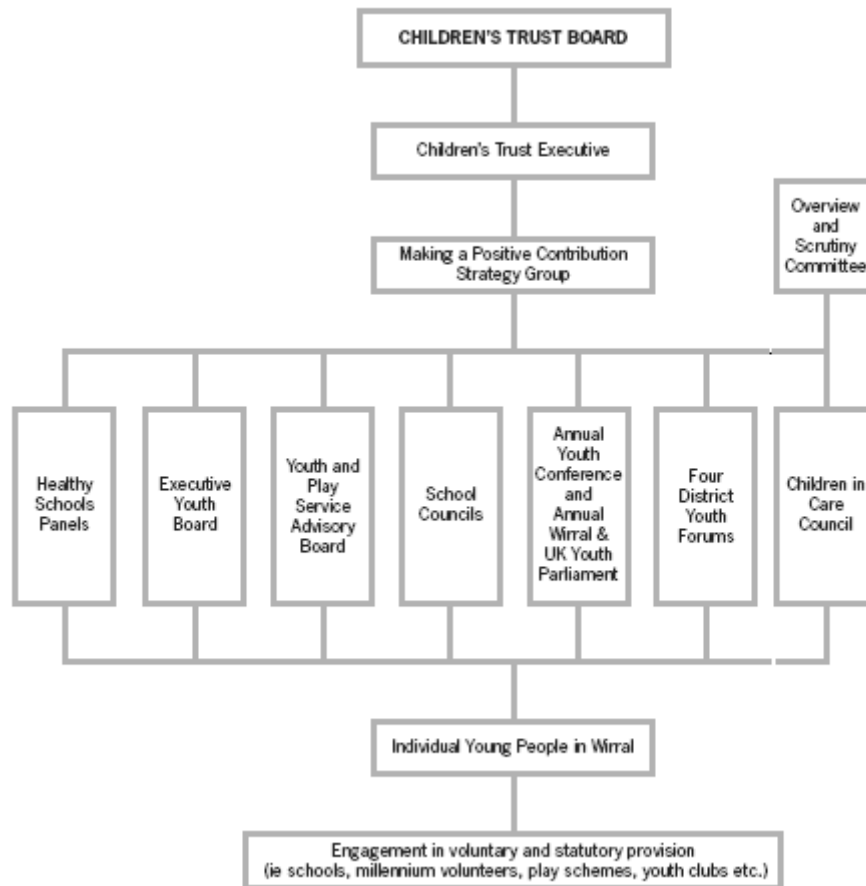
Ensure that our young people have excellent skills and opportunities into employment, including through Wirral's Apprenticeship programme.



## Appendix 1: The Structure of Wirral Children’s Trust and associated key groups



## Appendix 2: Wirral Young People Engagement Structure



### Appendix 3: Performance Framework

Performance Indicator Title	Actual			Targets		Historical Performance
	2009/10	2010/11	2011/12	2011/12	2012/13	
PI 39 - Alcohol related hospital admission rates (lower is better)	2,335	2,174	1,123 (Q2)	2,874	3,113	↑
PI 48 - Children Killed or Seriously Injured in road traffic accidents	tbc	tbc	-	0	0	↑
PI 51 - Effectiveness of CAMHS	16	16	16 (Q3)	16	16	↔
PI 53 - Prevalence of Breastfeeding at 6 - 8 weeks from birth	27.0	29.9	30.2 (Q3)	35.1	35.1	↑
PI 55 - Obesity in Reception aged Children	9.3	10.6	9.4	9.9	9.4	↑
PI 56 - Obesity in Year 6 aged Children	20.6	20.3	18.6	19.3	18.6	↑
PI 58 - Emotional Health of Children in Care (lower is better)	12.2	12.5	-	12.0	12.0	↔
PI 61 - Timeliness of adoption	87.5	70.6	71.4 (Q3)	80.0	80.0	↓
PI 62 - Stability of placements: number of placements (lower is better)	6.5	8.9	10.7 (Q3)	9.0	9.0	↓
PI 63 - Stability of placements: length of placement	64.5	59.8	66.8 (Q3)	70.0	70.0	↔

Performance Indicator Title	Actual			Targets		Historical Performance
	2009/10	2010/11	2011/12	2011/12	2012/13	
PI 64 - Child Protection Plans lasting 2 years or more (lower is better)	1.7	1.8	4.3 (Q3)	4.0	4.0	↔
PI 65 - Child Protection Plan for a second or subsequent time (lower is better)	17.1	17.0	17.5 (Q3)	15.0	15.0	↔
PI 66 - LAC cases which were reviewed within required timescales.	94.0	97.1	96.6 (Q3)	100.0	100.0	↑
PI 67 - Child Protection cases which were reviewed within required timescales	99.3	100.0	99.5 (Q3)	100.0	100.0	↑
PI 68 - Percentage of referrals to children's social care going on to initial assessment	74.7	90.0	96.6 (Q3)	90.0	90.0	↑
PI 70a - Emergency admissions to hospital for unintentional and deliberate injuries to children aged 0 - 4 (lower is better)	136.6	140.6	136.2 (Q3)	122.0	125.8	↔
PI 72 - Achievement of at least 78 points across the Early Years Foundation Stage	52	58	57	57	60	↑
PI 73 - Achievement at level 4 or above in both English and maths at Key Stage 2	74	75	77	79	80	↑
PI 75 - 5+ GCSE A*-C (Inc English and maths)	53.8	58.7	64.1	60.7	64.0	↑
PI 79 - Achievement of level 2 at 19	75.7	77.9	-	82.0	78.5	↑
PI 80 - Achievement of level 3 at 19	47	50.7	-	54.0	52.0	↑

Performance Indicator Title	Actual			Targets		Historical Performance
	2009/10	2010/11	2011/12	2011/12	2012/13	
PI 81 - Inequality gap at level 3 aged 19 (lower is better)	31.8	36.0	-	28.0	29.0	↓
PI 82 - Achievement of a Level 2 qualification by the age of 19 by FSM Group ( higher is better)	57.5	59.7	-	64.0	61.5	↑
PI 86a - Secondary schools judged as having good or outstanding standards of behaviour	90.9	90.0	-	90.0	90.0	↔
PI 86b - Primary schools judged as having good or outstanding standards of behaviour	90.1	91.0	-	95.0	95.0	↔
PI 87a - Secondary Schools Persistent Absence (Lower is better)	-	9.0	Introduced 2012/13		8.8	New Definition
PI 87b - Primary Schools Persistent Absence (Lower is better)	-	6.0	Introduced 2012/13		5.5	New Indicator
Pi 89a - Number of Schools judged by OFSTED as requiring Special Measures	1	3	1 (Q3)	0	0	↔
PI 91 - Participation of 17 year olds in Education or Training	83	85	-	87	86.5	↑
PI 92 - Narrowing the Gap at FSP (Lower is better)	31.3	27.6	29.9	27.6	27.0	↔
PI 99 - LAC reaching L4 English at KS2	59	51.9	65.4	18.0	50.0	↑
PI 100 - LAC reaching L4 maths at KS2	50	55.6	57.7	15.0	50.0	↑

Performance Indicator Title	Actual			Targets		Historical Performance
	2009/10	2010/11	2011/12	2011/12	2012/13	
PI 101 - LAC achieving 5+ A*-C ( Including English & maths)	7.4	7.8	10.9	5.0	20.0	↑
PI 102a - FSM/Non FSM gap at KS2 English and maths (lower is better)	24.5	21.6	20.8	17.9	17.0	↑
PI 102b - FSM/Non FSM gap at KS4 English and maths (lower is better)	36.9	34.9	34.5	30.2	29.0	↑
PI 103a - SEN statements within 26 weeks (Excluding exceptions)	100.0	95.6	100 (Q3)	100.0	100.0	↔
PI 103b - SEN statements within 26 weeks (Including exceptions)	99.2	94.8	98 (Q3)	100.0	100.0	↔
PI 111 - First Time Entrants into the Youth Justice System (lower is better) ( <i>Targeted reduction to be revised on receipt of 2011/12 data</i> )	1179	-	-	1156	1133	↑
PI 112a - Under 18 Conception Rate (lower is better)	40.1 (2008)	44.0 (2009)	48.1 (2010)	25.3 (2010)	46.0 (2011)	↓
PI 113 – Coverage for screening of prevalence of Chlamydia (lower is better)	24.9	23.1	14.5 (Q2)	30.0	30.0	↔
PI 114 - Permanent exclusions from School (lower is better)	0.07	0.04	-	0.0	0.0	↑
PI 114a - % Primary Pupils Fixed Term Exclusions	0.7	-	Introduced 2012/13		0.6	
PI 114b - % Secondary Pupils Fixed Term Exclusions	6.2	-	Introduced 2012/13		5.9	

Performance Indicator Title	Actual			Targets		Historical Performance
	2009/10	2010/11	2011/12	2011/12	2012/13	
PI 117 - 16 to 18 year olds who are not in education, employment or training (NEET) (lower is better)	9.1	8.2	8.9	7.9	9.0	↔
PI 116 - Children in Poverty	25.9	A new national child poverty indicator is under development.				
PI 147 - Care Leavers in Suitable Accommodation	89.6	90.9	-	95%	95%	↑
PI 148 - Care Leavers in EET	54.2	38.6%	-	58%	65%	↓
PI 1300 - Mothers smoking during pregnancy	17.4	14.6	13.8 (Q2)	13.5	13.0	↑
PI 1301 - Reported alcohol use amongst young people (HELP survey)	-	-	29.9%	-	25.0%	New in 2012
PI 1400 - Number of looked after children (lower is better)	629	668	668 (Q3)	635	615	↓
PI 1405 - Percentage of initial assessments for children's social care carried out within 10 working days of referral	-	77.9	55.2 (Q2)	70.0	75.0	↓
PI 1406 - Number of Foster Carers	Introduced in 2011/12		24 (Q3)	25	35	-
1408 - Number of Secondary Schools engaged with the Youth Parliament	Introduced in 2011/12		12	12	20	-
PI 1409 - Children in Care aged 8 and above who are aware of the Children in Care Council	-	-	Introduced 2012/13		100	-
PI 1410 - Percentage of Successful Parenting Interventions	-	-	Introduced 2012/13		80.0	-



Performance Indicator Title	Actual			Targets		Historical Performance
	2009/10	2010/11	2011/12	2011/12	2012/13	
PI 1411 - Percentage of children who ceased to be looked after who were adopted.	15%	15%	-	15%	15%	-
PI 1504 - Percentage of EY settings delivering flexibility in relation to the 15 hour free entitlement	-	-	40.0 (Q3)	40.0	45.0	-
PI 1505a - Percentage of 0 - 5 year olds registered at a Children's Centre	Introduced in 2011/12		67.0 (Q3)	70.0	80.0	-
PI 1505b - Percentage of 0 - 5 year olds registered at a Children's Centre (Disadvantaged Backgrounds)	Introduced in 2011/12		70.0 (Q3)	70.0	80.0	-
PI 1507 - Percentage uptake of schools receiving School Improvement Services.	-	-	94.0	80.0	80.0	-
PI 1508 - Percentage of Children Centre inspections rated as good or outstanding.	-	-	100.0 (Aug 11)	-	100.0	-
PI 1509 - Percentage of PVI inspections rated as good or outstanding.	-	-	63.0 (Aug 11)	-	67.0	-
PI 1508 - Percentage of schools providing 1:1 interviews for LAC	-	-	Introduced 2012/13		100.0	-
PI 1509 - Number of 16 – 18 Apprenticeships	-	-	Introduced 2012/13		1930	-
PI 1600 - % SEN attainment at Key Stage 2	17	14	Introduced 2012/13		18	New
PI 1601 - % SEN attainment at Key Stage 4	6	9	Introduced 2012/13		10	New
Local 1700a - Participation in and outcomes from youth work: Participation	18	31	-	23	28.0	↑

Performance Indicator Title	Actual			Targets		Historical Performance
	2009/10	2010/11	2011/12	2011/12	2012/13	
Local 1700b - Participation in and outcomes from youth work: Recorded Outcomes	73	76	-	65	70.0	↑
Local 1700c - Participation in and outcomes from youth work: Accredited Outcomes	21	16	-	30	25.0	↓
Local 1701 - Number of reported incidents of anti-social behaviour (lower is better)	14,125	13,203	-	15,965	13,261	↑

## Glossary

Body Mass Index (BMI)	Body Mass Index is a measure based on height and weight, which is used to identify whether an adult is over/under weight or obese.
Change4Life	A national initiative to support families in healthy eating and activities.
Charter of Participation	A charter developed by children and young people to support all organisations to build participation into their strategic planning and service delivery and to help ensure that children and young people will play an increasingly important role in Wirral organisations.
Child & Adolescent Mental Health Services (CAMHS)	A range of services available which provide help and treatment to children and young people who are experiencing emotional or behavioural difficulties, or mental health problems, disorders and illnesses.
Child Protection Plan (CP Plan)	A child is subject to a child protection plan if they are considered to be at continuing risk of significant harm.
Child Tax Credit	Child Tax Credit is for people who are responsible for at least one child or qualifying young person. Child Tax Credit is paid direct to the person who is mainly responsible for caring for the child or children.
Children and young people	Generally refers to a person under the age of 18. Also includes any person aged 18, 19 or 20 whom a local authority has looked after at any time after attaining the age of 16, or who has a learning disability.
Children and Young People's Plan (CYPP)	The single, strategic, overarching plan for all services affecting children and young people.
Children in Care Council	Children in Care act as a reference group for the Council to scrutinise policy issues and other developments that will affect children in care. The Council has direct access to the Director of Children's Services and the Lead Member to discuss any issues affecting children in care.
Children in need	Children are deemed "in need" if they are unable to experience positive outcomes without interventionist services or support.
Children's Centre	Children's centres are developed in line with the needs of the local community so no one children's centre is the same. However, there is a core set of services they must provide, including, child and family health services, and advice on parenting, local childcare options and access to specialist services for families.
Commissioning	Commissioning is about ensuring effective and efficient services are in place to meet the identified needs of communities and individuals. It involves the full process from needs assessment, planning, implementing, analysis and evaluation.
Common Assessment Framework (CAF)	A nationally standardised approach to conducting an assessment of the needs of a child or young person and deciding how those needs should be met.
Early Years Foundation Stage Profile (EYFSP)	Early learning for 3-5 year olds.
Equality Impact Assessment (EIA)	An Equality Impact Assessment is a tool for identifying the potential impact of policies and services on the community. It is about ensuring needs are met and that equality is promoted.
Every Child Matters outcomes	Underpinning the ECM agenda is the aim that every child, whatever their background or their circumstances, has the support they need to: Be Healthy, Stay Safe, Enjoy & Achieve, Make a Positive Contribution, and Achieve Economic Well-Being.
Further education (FE)	Post-statutory education primarily for 16-19 year olds.
FSM	Free School Meals.
GCSE	General Certificate in Secondary Education.
GP	General Practitioner.
Health Services in Schools (HSiS)	Health services hosted in Wirral secondary schools. Each school has a school nurse and a youth worker attending.

Healthy Schools Status (HSS)	Healthy Schools Status is the standard a school works towards, under the Healthy Schools agenda. Core themes include physical activity, healthy eating and emotional well-being.
HENRY	Health, Exercise, Nutrition for the really young programme
Index of Multiple Deprivation (IMD)	The Index of multiple deprivation is a Deprivation index, created by the Department for Communities and Local Government (DCLG).
Key Stages (KS)	The age groups within which the educational progress of children is monitored through National Assessment Tests: KS1 (age 5-7), KS2 (age 7-11), KS4 (age 14-16). KS3 tests were discontinued in 2009.
Lead Professional (LP)	A lead professional role acts to reduce overlap and inconsistency in the services received by children and families through a single point of contact for the child or family co-ordinating the delivery of agreed actions.
Learning Difficulties and Disabilities (LDD)	Some children, young people or adults have learning difficulties and /or disabilities. Children with learning difficulties or disabilities have a wide variety of support and services available.
Level 2/Level 3 qualification	Level 2 qualifications refer to GCSEs at grades A*-C and equivalent vocational qualifications. Level 3 refers to A Levels and equivalent.
Local Strategic Partnership	The aim of the Local Strategic Partnership (LSP) to bring together the key organisations in a local area with the aim of delivering a better quality of life for local people
Looked after (also known as "in care")	Sometimes a child in need may be assessed as needing to become looked after/in care in order to provide them with better opportunities to meet the five ECM outcomes. This is either as part of a voluntary agreement with the child's parents, or via court order (in which case the local authority has parental responsibility). In most cases, it involves the child living away from home with foster carers or in a residential setting, as appropriate.
Multi Systemic Therapy (MST)	Multi Systemic Therapy (MST) (so-named because it addresses the different systems in an adolescent's life) is an intensive, family-focused and community-based treatment program for chronic and violent youth. The evidence-based therapy is goal oriented and aims at helping caregivers manage and nurture their challenging adolescents more effectively.
Multi agency	Working across a number of agencies to achieve an outcome.
Narrowing the Gap	Reducing the differences between different groups of children and young people in terms of achievement, opportunity and quality of life.
National Child Measurement Programme (NCMP)	The National Child Measurement Programme (NCMP) is part of the programme of work to implement the Healthy Weight, Healthy Lives strategy, and is overseen by the Cross-Government Obesity Unit. Children in Reception Year (ages four and five) and Year 6 (ages 10 and 11) are weighed and measured at school. The information is then used to help the NHS plan and provide better health services for children.
Needs assessment	An analysis of what children, young people and their families need in order to achieve the five ECM outcomes.
NICE	National Institute for Clinical Excellence
NHS	National Health Service.
Not in education, employment or training (NEET)	Young people not in education, employment or training are at risk of further negative outcomes and as such, services aim to reduce the number of young people with this status.
OFSTED	OFSTED is the Office for Standards in Education, Children's Services and Skills. They regulate and inspect services, schools and settings to achieve excellence in the care of children and young people, and in education and skills for learners of all ages.
Outcome	An outcome is the end result which we are aiming towards.
Participation	Participation refers to the full and active involvement of children, young people and families in the development and improvement of services.
Physical Education (PE)	Physical Education.
PI	Performance Indicator.
Performance management	The set of processes adopted by an organisation to ensure it attains its key objectives and targets.

Priorities	Priorities are the identified areas on which we will focus resource and effort. They are based on a number of key drivers and are agreed by the Children's Trust.
Programme	A programme is made up of a specific set of projects (see below) identified by an organisation that together will deliver some defined objective, or set of objectives, for the organisation.
Project	A project is a temporary organisation that is needed to produce a unique and pre-defined outcome or result at a pre-specified time and using pre-determined resources.
Restorative Justice (RJ)	An approach to justice that focuses on the needs of victims and offenders, instead of satisfying abstract legal principles or punishing the offender. Victims take an active role in the process, while offenders are encouraged to take responsibility for their actions.
SCIE	Social Care Institute for Excellence
Serious Case Reviews	Serious case reviews are conducted by the Wirral Safeguarding Children Board when a child dies, and abuse or neglect are known, or suspected to be a factor. The purpose of serious case reviews is to establish whether lessons can be learned from the case about the way local professionals and organisations work together to safeguard and promote the welfare of children, to act upon these lessons and as a consequence improve inter-agency working.
Special Educational Need (SEN)	A child with special educational need is one who will require something additional to or different from what is provided for other children of the same age in order to make progress. This may involve obtaining a statement of this need.
Special Educational Needs and Disability (SEND)	Some children and young people have both special educational needs and/or a disability.
Sure Start	The Government's programme to deliver the best start in life for every child, bringing together education, childcare, health and family support. It covers children from conception through to age 4, and up to age 16 for those with special educational needs and disabilities.
Targeted Service	A service specifically targeted at individuals or groups requiring specialist support or intervention. The aim is to support children, young people and families for appropriate periods of time and then where possible to meet their need within universal provision.
Team Around the Child (TAC)	A team made up of professionals from across the children and young people's workforce convened together to meet the needs of the child or young person.
Teen Wirral	Wirral Council's website for young people aged 13 plus providing a range of information regarding youth activities and advice and support. <a href="http://www.teenwirral.com/">http://www.teenwirral.com/</a>
UNICEF	United Nations Children's Fund with a mandate to address the long-term needs of children and women in developing countries everywhere.
Universal Service	Services designed to meet the needs of all children and young people.
Wirral Children's Trust (WCT)	Wirral Children's Trust refers to the partnership between organisations working with children, young people and their families. It includes statutory, voluntary community and faith agencies within the area.
Wirral Involvement Schools Council	A schools council for children in special schools
Wirral Safeguarding Children Board (WSCB)	The Wirral safeguarding children board is a multi-agency partnership with the aim of safeguarding all children and protecting them from harm.
Youth Offending Service (YOS)	A Youth Offending Service (YOS) is a multi-agency team that is coordinated by a local authority, which is overseen by the Youth Justice Board. It deals with young offenders, sets up community services and reparation plans, and attempts to prevent youth recidivism and incarceration.