



OXFORDSHIRE CLINICAL COMMISSIONING GROUP BOARD

Date of Meeting: 27 September 2018	Paper No: 18/59
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Title of Paper: The Oxfordshire Children and Young People’s Plan (CYPP)
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Paper is for: <small>(please delete tick as appropriate)</small>	Discussion ✓	Decision	Information ✓
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Conflicts of Interest <small>(please delete tick as appropriate)</small>	
No conflict identified	✓
Conflict noted: conflicted party can participate in discussion and decision	
Conflict noted, conflicted party can participate in discussion but not decision	
Conflict noted, conflicted party can remain but not participate in discussion	
Conflicted party is excluded from discussion	

Purpose and Executive Summary:
The CYPP is the key partnership strategy outlining what organisations who work with children and families, can do together to improve outcomes. The plan articulates the shared vision for children and families and goes on to identify four priorities for partnership working over the next three years and includes an action plan for Year 1.

This Plan has been produced in collaboration with young people and parents, with strong engagement from the voluntary and community sector. It has been developed through multi-agency workshops and an online consultation. Strategic oversight of the delivery of the plan will be with the Children’s Trust and Health and Wellbeing Board.

The CYPP has been endorsed by the Executive Committee. The committee recommended that there was closer alignment between the Health Improvement Board and the Children’s Trust in order to ensure action to address inequalities for children and families are addressed. In particular members wanted action around childhood obesity and self-harm. There was also a desire to see greater recognition of the known impact deprivation can have on future outcomes and encouragement to the Children’s Trust to see how these issues can be mitigated in planning for children and young people’s future. The committee also agreed to nominate Dr Miles Carter to replace Dr Matthew Gaw as OCC representative on the Children’s Trust. The recommendations were reported and agreed at the Children’s Trust meeting on 20th September 2018.

Engagement: clinical, stakeholder and public/patient:

- Oxfordshire Parent and Carer Forum
- Oxfordshire Youth Voice Group (VOXY)
- Oxfordshire Youth
- 3 multi – agency workshops
- Online consultation

Financial Implications of Paper:

None

Action Required:

The Board is requested to approve the CYPP

OCCG Priorities Supported (please delete tick as appropriate)

✓	Operational Delivery
✓	Transforming Health and Care
	Devolution and Integration
✓	Empowering Patients
✓	Engaging Communities
✓	System Leadership

Equality Analysis Outcome:

Equality Analysis formed a part of this work but there is no separate document

Link to Risk:

AF19, 802

Author: Sarah Breton, Head of Children's Commissioning

Clinical / Executive Lead: Dr Miles Carter and Diane Hedges.

Date of Paper: 20 September 2018

Oxfordshire Children and Young People's Plan 2018 – 2021



The Children's Trust Board is made up of representatives of the following organisations

Oxfordshire County Council

Oxfordshire Clinical Commissioning Group

City and District Council Members

Thames Valley Police

Oxfordshire Safeguarding Children Board

Oxford Health NHS Foundation Trust

Safer Oxfordshire Partnership

Oxford University Hospitals NHS Trust

Representation from schools and colleges

Representation from the local Voluntary and Community Sector (OCVA)

Healthwatch Oxfordshire

Voice of Oxfordshire's Youth (VoXY)

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Foreword

Welcome to Oxfordshire's Children and Young People's Plan 2018 – 2021

We want Oxfordshire to be a great place to grow up and for children and young people to have the opportunity to become everything they want to be.

We believe a joint plan which sets the strategic direction and priorities for services for children, young people and families in Oxfordshire is a vital part of making this happen. Experience shows that when organisations work together to deliver services we make a real difference to the lives of children, young people and their families.

It is crucial in times of limited budgets and increasing demands on services that the Children's Trust Board continues to enable and encourage partnership working. Together we can better meet the challenges we face and tackle the priority areas we have identified for this first year – children missing out on education, social and emotional well-being and mental health, and children affected by domestic abuse.

This plan has been developed through discussion with our partners including asking children and young people what is important to them. We have developed a more streamlined document, including a poster capturing the main elements that can be identified and displayed easily. We were pleased and encouraged by the strong engagement from our partners in the public sector, voluntary sector and children and young people through the Children in Care Council and Voice of Oxfordshire's Youth. Our responsibility as a Trust is to play our part in ensuring the actions included in the plan are delivered, performance is monitored and solutions are found.

We welcome the initiative taken by Oxford City Council in developing their Children and Young People's Strategy, which is fully aligned with the Children's Trust's Plan. We would encourage other District Councils to follow this lead in their areas.

We know that there have been some significant successes in achieving better outcomes for children and young people in Oxfordshire. Many are already safe, healthy and thriving at home and school. We also know that many of the services we commission and provide meet their needs very well. However, we also know this is not always the case. We want to ensure that all children and young people are successful, healthy, safe and supported.

As Chair and Vice-Chair of the Children's Trust we are responsible for ensuring that this plan makes a difference to the children and young people of Oxfordshire. The membership of the board was recently refreshed and reinforced putting us in a strong position to promote the value and importance of children and young people.

We look forward to making this plan a reality and thank you for your continued commitment to improving the lives of Oxfordshire's children and young people.

Councillor Steve Harrod

Chair of the Children's Trust and Oxfordshire County Council Cabinet member for Children and Families

Dr Matthew Gaw

Vice-Chair of the Children's Trust and Oxfordshire Clinical Commissioning Group representative.

Introduction

The vision, areas of focus and values set out here represent the foundation for the Children and Young People's Plan 2018 – 2021, and our vision for integrated children's services delivered increasingly locally and through partnership arrangements.

They have been developed and agreed by the partner organisations on the Children's Trust Board comprising 12 partner organisations including members of the Voice of Oxfordshire's Youth (VOXY) Board, who have all committed to achieve this Vision.

As part of the development of this Plan we consulted with the public, partner organisations, voluntary sector organisations and schools and key messages from the feedback we received has been incorporated into this Children and Young People's Plan 2018 – 2021.

A Poster that sets out our Vision, Areas of Focus and our commitments for the Children and Young People's Plan 2018 – 2021 is included at Annex 1. This can be easily detached from this Plan for display.

Our Vision

'Oxfordshire, a great place to grow up and have the opportunity to become everything you want to be'

What do we already know about what it is like to grow up in Oxfordshire?

- We want Oxfordshire to be a great place for everyone to grow up and be healthy and successful - this is already the case for many, but not for all.
- We have a growing population that is becoming more diverse.
- Social deprivation and child poverty still persist in places, but we are all working together to tackle this.
- Some specific groups of children and young people in Oxfordshire still do not do as well as the national average in achieving good school results, for example there is a 5% attainment gap in Early Years for children in BAME communities.
- Persistent absence rates in secondary schools in Oxfordshire have remained above (worse than) the national average
- There has been a significant increase in demand for services, including more people in care than would be expected and more young people referred to mental health services.
- Children and young people are generally healthier than elsewhere, although obesity has increased slightly for year 6 children.
- National data shows a decline in 11-15 year olds smoking and drinking alcohol. However, there is an apparent increase in drug taking (but caution is needed with the data)
- Admissions for alcohol-specific conditions in females under 18 in Oxfordshire is above the national average

- There is an apparent increase in self-harm amongst young people in Oxfordshire.
- The number of domestic crimes in Oxfordshire involving children appears to have increased, however this increase may have been influenced by changes in police crime recording.

Further details about what it is like to grow up in Oxfordshire today can be found [HERE](#). This report will be updated annually. The full annual Joint Strategic Needs Assessment covering a wealth of data about Oxfordshire's residents can be found [HERE](#).

What do we need to do to make a difference?

- Enable children and young people to be well educated and grow up to lead successful, happy, healthy and safe lives.
- Schools and universal services working together with local, targeted and specialist services is key to improving outcomes.
- Shift the focus to prevention and early help through real partnerships and using resources effectively.
- Support the most vulnerable, including children with SEND, to make sure everyone has an equal opportunity to become everything they want to be – for too many of our children and young people outcomes are not good enough.
- Deliver responsive services that place children, young people and families at the heart of what we do.

Our Areas of Focus

The information above, together with the feedback we received during our consultation has led to the development our Areas of Focus and the priorities that fit alongside. Our consultation story can be found [here](#).

We want to ensure that all children and young people can:

Be Successful

1. Have the best start in life;
2. Access high quality education, employment and training that is motivational.
3. Go to school and feel inspired to stay and learn
4. Have good self-esteem and faith in themselves.

Be Happy and Healthy

5. Be confident that services are available to promote good health and prevent ill health – early in life and before crisis
6. Learn the importance of healthy, secure relationships and having a support network
7. Access services to improve overall well-being
8. Access easy ways to get active.

Be Safe

9. Be protected from all types of abuse and neglect
10. Have a place to feel safe and a sense of belonging
11. Access education and support about how to stay safe
12. Have access to appropriate housing.

Be Supported

13. Be empowered to know who to speak to when in need of support, and know that they will be listened to and believed;
14. Access information in a way which suits them best;
15. Have inspiring role models;
16. Talk to staff who are experienced and caring.

Each year the Children's Trust will agree a set of key priorities based around our areas of focus and commit to an implementation plan of work against those priorities.

Progress against the performance indicators included in the implementation plan will be monitored by the Children's Trust at each quarterly meeting.

Our implementation plan is included at Annex 2.

Our Values

These values underpin and drive all that we do and how we go about doing it. They inform how we:

- communicate with children, young people and their families so they know about and access our services;
- treat children, young people and their families - with respect, courtesy and dignity;
- work in partnership with our children, young people and families;
- treat the personal information of children, young people and families;
- enable families to support each other.

What do we need to do to make a difference?

- Ensure women have access to the full range of maternity services, have a choice of antenatal care and receive personalised care, to ensure the best start for and the best outcomes for mothers and babies.
- Strengthen support for schools and other settings so they can provide full-time, high quality education and learning for their children and young people, for example:
 - All agencies working together to help schools and other settings meet their children's needs;
 - Ensuring that schools and other settings fulfil their responsibilities through appropriate use of their resources;
 - Advocating on behalf of children and young people when they don't.
- Identify and solve problems early - from an early age and when problems first arise.
- Enable children and young people to access a range of positive activities and opportunities, especially those who are vulnerable or who have particular needs.
- Protect children and young people from the harmful impact of domestic abuse and supporting them if they do experience domestic abuse in their relationships
- Promote the importance of good mental health for all children and ensure speedy access to appropriate help and support when they need it.
- Listen to, hear, respect and respond to the views of children, young people and their families.
- Work with children, young people and families as equal partners, including:
 - Involving children and families in the development of services;
 - Involving children and families in decisions and meetings that are about them;
 - Fitting services around children, young people and families rather than expecting them to fit in around us.
- Respect the ability of families to make good and appropriate decisions for their children and strengthening support for them to meet their children's needs, for example:
 - Asking families for solutions and enabling them to find them
 - Providing practical help to meet families' needs
- Work together with others through increased trust and confidence to own and solve problems jointly, for example:
 - Working as part of the team to meet the needs of the Whole Family;
 - Thinking about the needs of all children in the family, the parents and the wider family;

- Taking the role of the lead professional when appropriate, not just referring on to others to solve problems;
 - Taking individual as well as collective responsibility to find solutions;
 - Sharing information confidentially, appropriately and confidently - 'dare to share'.
 - Valuing other professionals and not criticising or blaming them;
 - The right support at the right time and for the right length of time;
 - Using common language and common assessment arrangements where appropriate.
- Give children and young people better information about the support that is available by involving them in how we improve our information and making sure that the information covers the full range of needs.
 - Explore how we can use digital technology to deliver services.
 - Explore how we can educate our children, young people and families in the safe use of digital technology.
 - Address inequalities and value diversity by targeting our resources and services to those in greatest need where appropriate, but not losing sight of our responsibility to meet the needs of all of our children and young people.

To get it right we need to be:

- Respectful, listen before acting;
- Collaborative, working with families and with each other, and not doing to or for;
- Focused on strengths and positives;
- Innovative and creative;
- Promoting equality of opportunity for all children and young people;
- Willing to take risks to improve outcomes;

When we don't get it right:

- some children have better opportunities than others;
- we 'watch' problems get worse and harder to solve;
- we pass families from one place to another and one assessment to another;
- we don't look at the Whole Family;
- we focus on weaknesses and what is missing, rather than strengths and positive stories;
- we blame families and we blame each other.

Monitoring and Governance

The Children's Trust is a subgroup of the Health and Wellbeing Board and as such is governed by the Oxfordshire Partnerships Protocol. The Protocol governs relationships between key agencies working to promote the health and well-being of Oxfordshire's communities. It is intended to clarify the respective roles of individual

partnership bodies and their relationship to each other. The Protocol can be found [here](#) in full and the Executive Summary gives an overview of the roles, responsibilities and inter-relationships between these key agencies. A diagram to illustrate these relationships can be found at Annex 3.

The organisations who make up the membership of the Children's Trust can be found in the most up to date Terms of Reference which can be found on the public website [here](#)

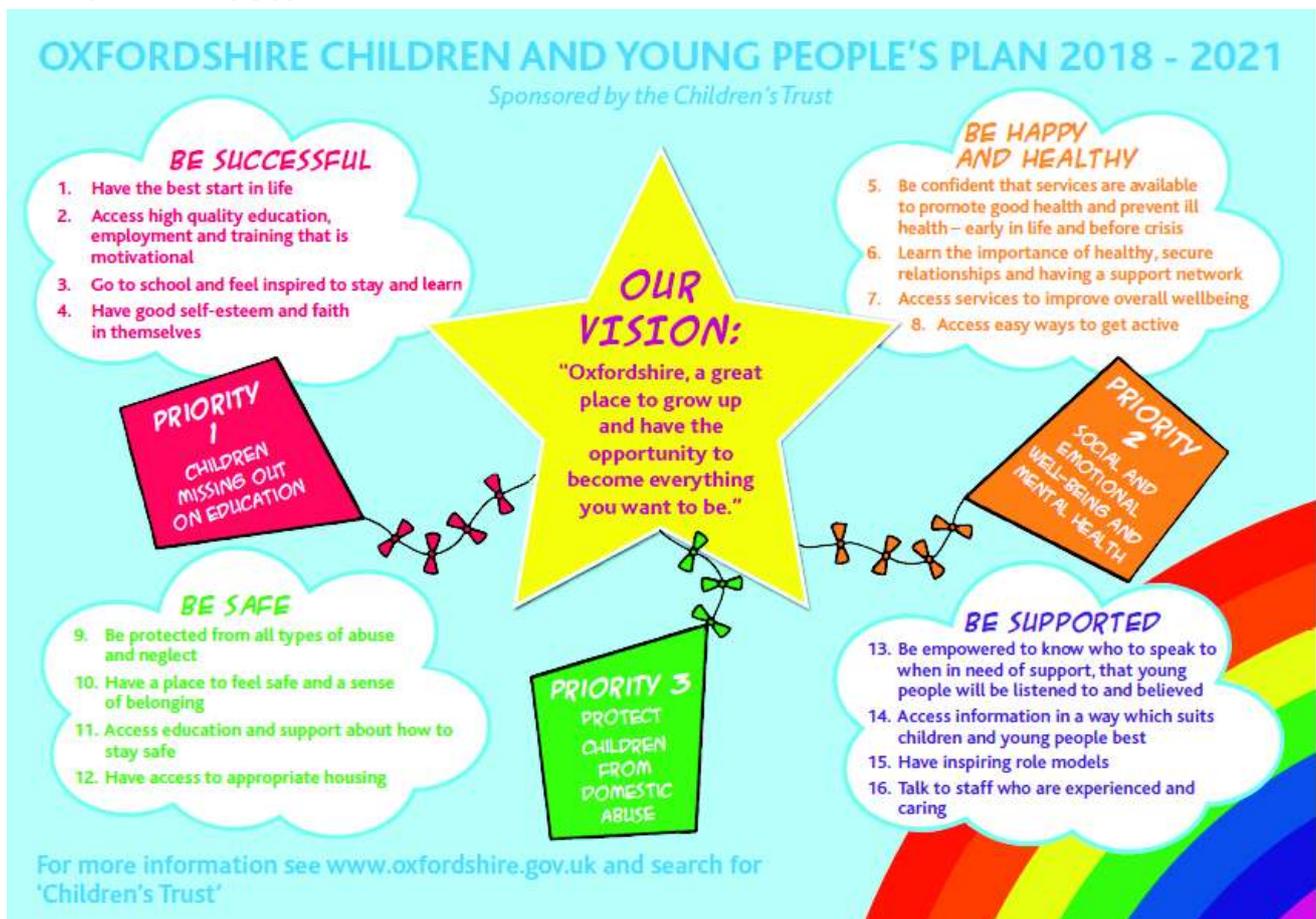
The Children's Trust has developed an implementation plan which has been agreed by the partner organisations. This sets out the actions that partners commit to take to achieve the Vision set out in this Plan, and how success will be measured. The implementation Plan is attached at Annex 2. Resource implications for partners will be identified as part of the implementation plan.

We will use the Children's Trust performance dataset to monitor progress against this plan. The dataset is reported to the Children's Trust Board at their quarterly meetings and actions will be identified from the information supplied in that report.

The Children's Trust will be responsible for monitoring one priority from the implementation plan at each Board meeting.

**Children's Trust Board
June 2018**

Annex 1 – Poster



Annex 2 – Implementation Plan

Area of Focus	Actions	Responsible agencies	How we will know this area of focus has improved	Children's Trust Lead	Timetable
<p>Be Successful</p> <p>FOCUS ON CHILDREN MISSING OUT ON EDUCATION</p>	<ul style="list-style-type: none"> • All partner agencies to clarify their offer in relation to children missing out on education and school readiness. • Draw up and implement an Inclusion Strategy to identify hotspots for pupils missing out in education, the main reasons for this and the multi-agency support that can be offered to reduce the numbers. • Set up a multi-agency Learner Engagement Board by end of June 2018. <p>Year 2 action: Focus on a wider campaign to reduce non-attendance.</p>	<ul style="list-style-type: none"> • County Council - education and learning, LCSS • City and District Councils • Health Visiting • School nurses • CAMHS • Community and Voluntary sector • Thames Valley Police 	<ol style="list-style-type: none"> 1. Increase the % of children reaching a good level of development in early years or foundation stage (target 75% for academic year 17/18) 2. Reduce the number of permanent exclusions to 44 in school year 18/19 3. All permanently excluded pupils will have a new placement within the statutory 6-day limit 4. Reduce the number of primary school children with a fixed term exclusion to 285 or less in school year 18/19 5. Reduce the number of secondary school children with a fixed term exclusion to 1335 or less in school year 18/19 6. Reduce the level of persistent absence in primary school children to 6.8% or less in school year 18/19 7. Reduce the level of persistent absence in secondary school children to 11.5% or less in school year 18/19 	<p>David Clarke</p>	<p>September 2018</p>

Annex 2 – Implementation Plan

			<p>8. Reduce the number of children on part time timetables in school year 18/19.</p> <p>9. Reduce the number of permanent exclusions for children with special education needs in school year 18/19 (target 28)</p> <p>10. Reduce the number of primary school children with special educational needs with one or more fixed term exclusions in school year 18/19 (target 102)</p> <p>11. Reduce the number of secondary school children with special educational needs with one or more fixed term exclusions in school year 18/19 (target 350)</p>		
<p>Be Healthy</p> <p>FOCUS ON SOCIAL AND EMOTIONAL WELL-BEING and MENTAL HEALTH</p>	<ul style="list-style-type: none"> Promote understanding of the services that are available to children and young people and how to access them (face to face and web access) Improve the early identification of low and hidden levels of harm e.g. self-harm. Promote self-referrals, how young people can help themselves and health promotion initiatives. 	<ul style="list-style-type: none"> County Council – early help City and District Councils Public Health Oxford Health Schools Community and Voluntary Sector 	<ol style="list-style-type: none"> Increase the number of early help assessments in the financial year 2018/19 to 2,100 or more Increase the number of children accessing the single point of access for CAMHS, and increase the proportion of children that have their first appointment within 12 weeks Reduce the number of A&E attendances for self-harm of children who are 12-17. Increase the number of Young Carers known and supported in Oxfordshire 	<p>Emma Leaver, Maria Godfrey and Donna Husband</p>	<p>December 2018</p>

Annex 2 – Implementation Plan

	<ul style="list-style-type: none"> Review with schools how they address mental health issues and what further support is needed (linking with Community Impact Zones). Seek to secure mental health as one of the key themes for the Strategic Schools Partnership Board. All partners to consider their offer in relation to early identification of mental health issues. <p>Year 2 action: Focus on children or young people who disengage from services and do not recognise their own needs.</p>		<p>5. Monitor the proportion of self-referrals into CAMHS.</p> <p>6. Update on progress on delivery of the 2 community impact zones in Oxfordshire.</p>		
Be safe FOCUS ON DOMESTIC ABUSE	Domestic Abuse operational group to report to Children's Trust on how the young people's domestic abuse pathway is embedded across all agencies and is known, understood and used.	Domestic abuse operational group - Led by Sarah Breton and Sarah Carter	The Domestic Abuse Strategic Board is responsible for this action and is reviewing and implementing a revised pathway. This will report later in the year and will include how quality assurance activity will be managed. The key measures of future success will depend on the outcomes of this work	Sarah Breton	March 2019
Be supported	Our 'Be Supported' area of focus will be tested through the actions listed above and reported at each meeting.				

Annex 3 – Oxfordshire Partnership Protocol Overview Diagram

