



# Hounslow Children and Young People's Plan 2011-2012

## Foreword

Welcome to Hounslow's latest Children and Young People's Plan. The plan sets out how the different agencies and groups working with children and young people in the borough will work together to improve outcomes.

We have been successful in doing this in the past as evidenced in the borough's Ofsted inspection of Safeguarding and Services for Looked After Children where we were rated "good", and more recently in the 2010 annual performance

assessment where we were rated by Ofsted as performing "excellently". There remain challenges however, and we will need to work hard together if we want to continue to make a real and lasting difference to children's lives. We must retain our focus on keeping children safe, we must continue to improve educational standards and especially to narrow the gap between our highest and lowest attaining students; we must tackle those areas where our performance is less good, including immunisation and obesity

rates and teenage pregnancy, and we must do more to support the social and emotional development of our children and young people.

There are lots of changes at a national and local level, resources are limited and reducing, but it has never been more important that we continue to play our part in making what happens in Hounslow as strong as we can for the children and young people of the borough.



**Cllr Jagdish Sharma,  
Leader & Chair of Hounslow  
Children's Trust Board**



**Cllr Lily Bath,  
Cabinet Member for Children,  
Youth and Families**



**Cllr Steve Curran  
Cabinet Member for Education  
and Housing**



**Judith Pettersen  
Director of Children's Services  
and Lifelong Learning (CSLL)**

## Contents

	Pages
<b>Introduction</b>	<b>7</b>
<b>Our principles</b>	<b>9</b>
<b>Early Intervention and Prevention – a model of service delivery in Hounslow</b>	<b>12</b>
<b>The Hounslow Context</b>	<b>15</b>
<b>Understanding Needs</b>	<b>21</b>
<b>Deriving local priorities</b>	<b>24</b>
<b>Health</b>	<b>26</b>
<b>Priority 1</b> Improving the health of children, young people and families by promoting safe and healthy lifestyle choices	<b>32</b>
<b>Priority 2</b> Improving maternal and early years health services	<b>34</b>
<b>Social and Emotional Well-being</b>	<b>36</b>
<b>Priority 3</b> Developing the social and emotional capabilities of children	<b>39</b>
<b>Priority 4</b> Emotional well-being and mental health is supported through targeted and specialist settings	<b>41</b>

	<b>Pages</b>
<b>Safeguarding and Child Protection</b>	<b>43</b>
<b>Priority 5</b> Intervening early and protecting children and young people from harm	<b>45</b>
<b>Priority 6</b> Improving the life chances of looked after children	<b>46</b>
<b>Priority 7</b> Better skilled and supported social workers	<b>47</b>
<b>Community Safety</b>	<b>48</b>
<b>Priority 8</b> Reducing young people who offend for the first time and those who re-offend	<b>50</b>
<b>Priority 9</b> Children and young people feeling safe in schools and the community	<b>51</b>
<b>Education and Learning</b>	<b>52</b>
<b>Priority 10</b> 'Getting it right' in the early years (0-5)	<b>55</b>
<b>Priority 11</b> Developing an integrated response for children with the most complex disabilities	<b>57</b>
<b>Priority 12</b> Maximising the educational achievement of all children and young people and reducing inequality	<b>58</b>

	<b>Pages</b>
<b>Priority 13</b> Improving school standards	<b>61</b>
<b>Priority 14</b> Ensuring sufficient places for all Hounslow children	<b>62</b>
<b>Community Participation and Engagement in Local Decision Making</b>	<b>63</b>
<b>Priority 15</b> Children and young people are actively engaged in and influence decision making processes	<b>64</b>
<b>Transition to Adulthood</b>	<b>66</b>
<b>Priority 16</b> Reducing the numbers of young people not in education, training or Employment	<b>67</b>
<b>Priority 17</b> Improve the access to support for young people at key transition points	<b>68</b>
<b>Child Poverty</b>	<b>69</b>
<b>Priority 18</b> Breaking the cycle of poverty through early intervention	<b>70</b>

	<b>Pages</b>
<b>Turning our Vision into Reality</b>	<b>71</b>
<b>Arrangement for Partnership Working</b>	
<b>Use of Resources</b>	<b>71</b>
<b>Commissioning</b>	<b>73</b>
<b>Developing the workforce</b>	<b>75</b>
<b>Strategic approach to funding</b>	<b>75</b>
<b>Information systems</b>	<b>76</b>
<b>Monitoring and Reviewing Performance</b>	<b>77</b>
<b>Related Plans and Strategies</b>	<b>79</b>

## Introduction

The Children and Young People's Plan (CYPP) is the key strategic document for Hounslow's Children's Trust. It is a partnership plan which sets priorities for the delivery and development of all local services relating to children and young people in Hounslow. This one year plan replaces the four year 2007 – 2011 CYPP and reflects new flexibilities to develop local improvement outcomes for children, young people and families.

Hounslow Council has worked with its partners and consulted with a range of professionals, young people and parents to develop this over-arching plan

The plan applies to three groups, which are children and young people aged 0-19 years, young people over 20 leaving care and young people up to the age of 25 with learning difficulties.

The plan covers all the services for which the local authority is directly responsible and the work of partners who provide services for children and young people. The services include those of health, education, social care, youth services, youth offending services and early years. It also includes Connexions and a range of voluntary services. It will inform the development of more local service plans that will provide the detail of how we will deliver the actions that it outlines. We will monitor the plan systematically to ensure that we achieve the intended progress.

Significant national policy changes impacting upon children's services have taken place since the last plan was written in 2007. In particular the last year has seen more of a focus on the early years and early intervention with: the 'Allen' review of early intervention, the 'Tickell' review of the Early Years Foundation Stage, the 'Field' review of Poverty and Life Chances and the 'Munro' review of Child Protection.

Schools have more devolved powers linked to the introduction of the Academies Bill in July last year and the introduction of the Pupil

Premium will enable schools to have direct influence on tackling issues of under achievement amongst the most disadvantaged pupils.

All of the changes have taken place within a Government spending review that has seen significant cuts to the local government budget as part of the overall deficit reduction in public spending.

As a response to this, Hounslow Council and its partners have looked to re-model services, reduce management and back-office costs, to ensure critical frontline services are maintained.

Hounslow Council Children's Services as part of the Council's overall Savings and Transformation programme and in response to national policy changes re-modelled its Directorate into a two division model of Specialist and Early Intervention Services. The model will better enable partners' roles in the support of the most vulnerable children and families. The new model will ensure early intervention to address need and prevent that need escalating and will also ensure provision is available for those with the most complex and enduring need.

The new Early Intervention Division will consist of multi-disciplinary teams working across three localities (East, West and Central Hounslow) and will bring together dedicated early intervention and family support workers with existing Youth Services, Children's Centres staff. This will lead to greater efficiencies in joined-up working practices and ensure an appropriate and timely response where a multi-disciplinary team is needed to respond to complex and vulnerable families.

In recognition of School's devolved powers, Children's Services has created small School Effectiveness and Early Years Teams. The role of the teams will be to: provide strategic advice to schools and early years providers, to monitor the effectiveness of the offer they make to Hounslow children and young people and providing independent challenge to schools.

### This Plan:

- States our shared commitment and principles of working together across the partnership putting our children and young people first
- Identifies how we have used current demographic, needs assessment and consultation evidence to inform our priority setting
- Sets out the actions and measures of success we will need to deliver outcomes against each of the priority themes:

Health

Social and Emotional Well-Being

Safeguarding and Child Protection

Education and Learning

Community Participation and Engagement in Local Decision Making

Transition to Adulthood

Child Poverty

- Outlines how we are commissioning services and developing the workforce to support delivery of our priorities/outcomes
- Explains our partnership and performance management arrangements

## Our Principles

We believe that there are some core principles which underpin everything we do in delivering the priorities identified in this plan and in every development that we make.

### We work together in partnership

Hounslow's Children's and Young Peoples Trust Board will continue its focus on improving the lives of children and young people by:

**Championing:** the best quality of life outcomes from birth through to adulthood; reducing inequalities; promoting fair access and a voice for children and young people

**Acting as a Catalyst:** bringing a range of stakeholders together, to develop a shared understanding of the needs and priorities for children and young people in Hounslow

### Intervening early on

- Investing in 'the foundation' years to maximise 'school readiness' for all children
- Recognising the difficulties and problems that confront children, young people and their families at as early a stage as possible
- Working together with families to address difficulties and problems that have been identified
- Making sure that enough is done to solve problems before they get worse

### Developing a 'Think Family' approach to supporting parents and families

- Thinking about the needs of the whole family
- Working with families to find solutions to problems
- Tailoring services to meet the needs of individuals
- Embed lessons learnt and evidence their impact
- Increasing knowledge, skills and a common understanding of family support amongst staff in public, private and third sectors

### Safeguarding children

- Ensuring that all children's settings operate a safeguarding approach
- Expectation that all agencies to have an understanding of safeguarding and knowledge of where to go for advice and support in this area
- Keeping the outcome for the child at the centre of all that we do

### Tackling child poverty

To ensure the five key areas of intervention in tackling and reducing child poverty are built into The Children's Trust Board, LSP Planning processes and Hounslow's linked strategies.

- Getting parents into work, inc. addressing childcare issues
- Supporting families to get all the benefits and tax credits they are entitled to
- Supporting families to avoid debt
- Uncoupling socioeconomic status from educational achievement
- Addressing housing conditions

### Building stronger and united communities

- Positively addressing the needs of vulnerable groups, especially disabled children and those who are looked after by the Local Authority
- Making sure that all children and young people experience equality of opportunity, helping them to overcome any barriers they may experience and responding to equalities legislation
- Responding to the needs of individuals, making sure everyone is included and engaging young people
- Focusing resources in areas and/or within groups with the greatest identified need

- Promoting good relations and understanding between children and young people of all communities by emphasising shared values and aspirations and challenging racism and separation on grounds of race

### Working more efficiently as partners

- Maximising the potential for efficiency savings via multi-agency and joint -borough procurement
- Improving customer access through ICT innovation
- Reviewing and transforming front-line services to meet changing demand in a more cost effective manner
- Investing in front-line services by rationalising and joining-up 'back-office' functions as a partnership
- Developing a common understanding of needs / priorities in the borough to inform joint-commissioning

## Early Intervention and Prevention – a model of service delivery in Hounslow

Whilst the majority of our children and young people are healthy, safe, achieving well at school, engaged in purposeful activities and have good prospects for the future, there is a significant minority for whom the predicted outcomes remain poor.

The current challenge is one of increasing need and costs, at a time when budgets are reducing. Early intervention is a targeted response to identified need at what is commonly referred to as Tier 2. It aims to identify, vulnerable children, young people and families who are at risk of poor outcomes early, acting quickly to meet their needs and helping them to resolve their problems before they become more serious, entrenched and difficult and costly to resolve.

Early intervention is not about solving a single one-off problem, it is about empowering and strengthening the resilience of families, equipping them with the skills to achieve success, resist stress, solve their own problems and manage issues that will arise in the future.

### Why early intervention?

Timely early intervention can deliver good, sustainable outcomes for children and young people and enhance the quality of life for families. It reduces welfare reliance, helps break the cycle of poverty and deprivation and lowers the costs of agencies working with children and adults.

Effective early intervention will reduce the number of children being referred to social care, coming into care and the number of families

needing to access and often becoming dependent on high cost specialist services. It will enable social care agencies to focus their resources on the children, young people and their families where their skills and expertise is most needed.

### What is changing?

Delivering evidenced based early intervention services will require a shift in approach and culture so that -

- Agencies see themselves as being the resource and avoid passing or referring children on to others unless the need is such that a referral is required
- Families are empowered and their resilience is strengthened increasing their independence from targeted and specialist services
- Community involvement is promoted encouraging ownership and responsibility for children, young people and families within a locality
- Agencies work more effectively together to secure, maximise and target resources to achieve better outcomes for families
- Agencies think and work outside of their old 'silos' considering who else is, or might be, working with a family and as well as what other help might be available to meet a family's need
- Everyone working with children and young people understand and respects each others roles.
- Everyone working with children and young people is aware of the range of resources and skills available to them and how to access them.

To achieve the above the Council's Children's Services and Lifelong Learning (CSLL) department will extend its early

intervention service this year to make it more multi agency and more easily accessible to partners. Early intervention will be a key element of a number of services within CSLL but three multi disciplinary, integrated locality teams will be tasked with shaping, developing and leading the early intervention offer across the Children's Trust.

### The three Locality Teams will:

1. Target services to the communities they serve, based on a local knowledge of need.
2. Support families with children and young people aged 0-18 years (up to 25 for those with a disability) whose needs cannot be met through universal provision, with a bespoke package of support from a team around the family.
3. Support Schools and universal services such as health, adult services and third sector agencies to provide a seamless service to children and young people with additional needs. This will include enabling a swift and easy access to services through a bespoke package of support delivered by a team around a child or family.
4. Provide a single point of contact for children, young people and families to access early intervention services through the Common Assessment Framework.
5. Safeguard children by identifying and working with vulnerable children earlier to try to prevent their needs and difficulties increasing unnecessarily and escalating children thought to be children in need / at risk of harm to children's social care.
6. Deliver the statutory duties relating to Educational Psychology Service and Educational Welfare Service around statutory SEN assessments and school attendance.
7. Build on what is working well bringing professionals together to work in teams around families so that they share information, jointly assess need, problem solve, plan and deliver bespoke packages of support.
8. Work in partnership with families to ensure that they participate in and have a real say in the assessment of their needs and the planning, delivery and review of the services they receive.
9. Support families to access and navigate universal and targeted early intervention services more efficiently so that they are linked to the right service at the right time.
10. Actively seek and providing outreach support to families who are hard to reach or find it hard to engage.
11. Provide intensive, structured support to families with multiple problems whose needs and problems have become entrenched over many years.
12. Work in partnership with schools and other partner agencies to ensure their views are heard, their contribution is valued and that they have easy access to consultation where they have a concern about a child, young person or family.

## How will we do it?

This will be achieved by -

- Embedding a single assessment of need; a speedy and timely access to single early intervention services; and a co-ordinated multi agency response through the Common Assessment Framework
- Creating new partnerships across the Hounslow Children's Trust with a range of agencies including those from the voluntary, community and independent sector, to support the development of family focused services
- Providing tools and processes to enable services to work more effectively together
- Developing a good practice portfolio of evidence based interventions that we know will work in Hounslow

## Measures of success

The success of the Early Intervention programme in Hounslow will be measured through -

- Improved outcomes for children, young people and families that are sustained over time
- Increased service satisfaction levels of local children young people and families
- Increased service satisfaction levels of residents and partner agencies including schools, health, the police and the voluntary and community sector
- A reduction in demand for specialist services (at tiers 3 & 4) and the associated costs incurred by these services
- A reduction in the number of inappropriate referrals and re-referrals to social care
- A greater take up of universal provision in for example children's centres and youth centres
- An increase in school attendance figures

## The Hounslow Context

Hounslow's projected population for 2011 is 239,748.<sup>1</sup> 57% of Hounslow's population is White British and approximately 43% is from Black, Asian and minority ethnic backgrounds. There are more than 140 languages spoken in the area. The ethnic composition of the borough continues to change, with new communities establishing themselves in the area. This trend looks set to continue, as a pattern of new arrivals from the European Union Accession States emerges.

The borough is next to Heathrow airport and this has a major impact. It makes a significant contribution to the local and national economies but it is also a major source of traffic congestion and the cause of high levels of both air and noise pollution. Hounslow's economy reflects the variety of the surrounding area with a combination of industries, including telecommunications, pharmaceuticals, media and technology.

On the combined index of income, employment and education, Hounslow is one of the most deprived boroughs in West London with hidden areas of deprivation contrasting with more well-off areas. The Indices of Multiple Deprivation data for 2010 indicates overall deprivation within the borough has changed little since 2007. Although pockets of extreme deprivation noted in the West of the borough has declined since 2007.

The index of multiple deprivation uses a number of indicators to work out the level of deprivation in an area: income, employment, health and disability, education, skills and training, housing and services, living environment, and crime. Areas of multiple deprivation in Hounslow at ward level shown on the map overleaf. The most deprived areas are within Feltham West, Hanworth and

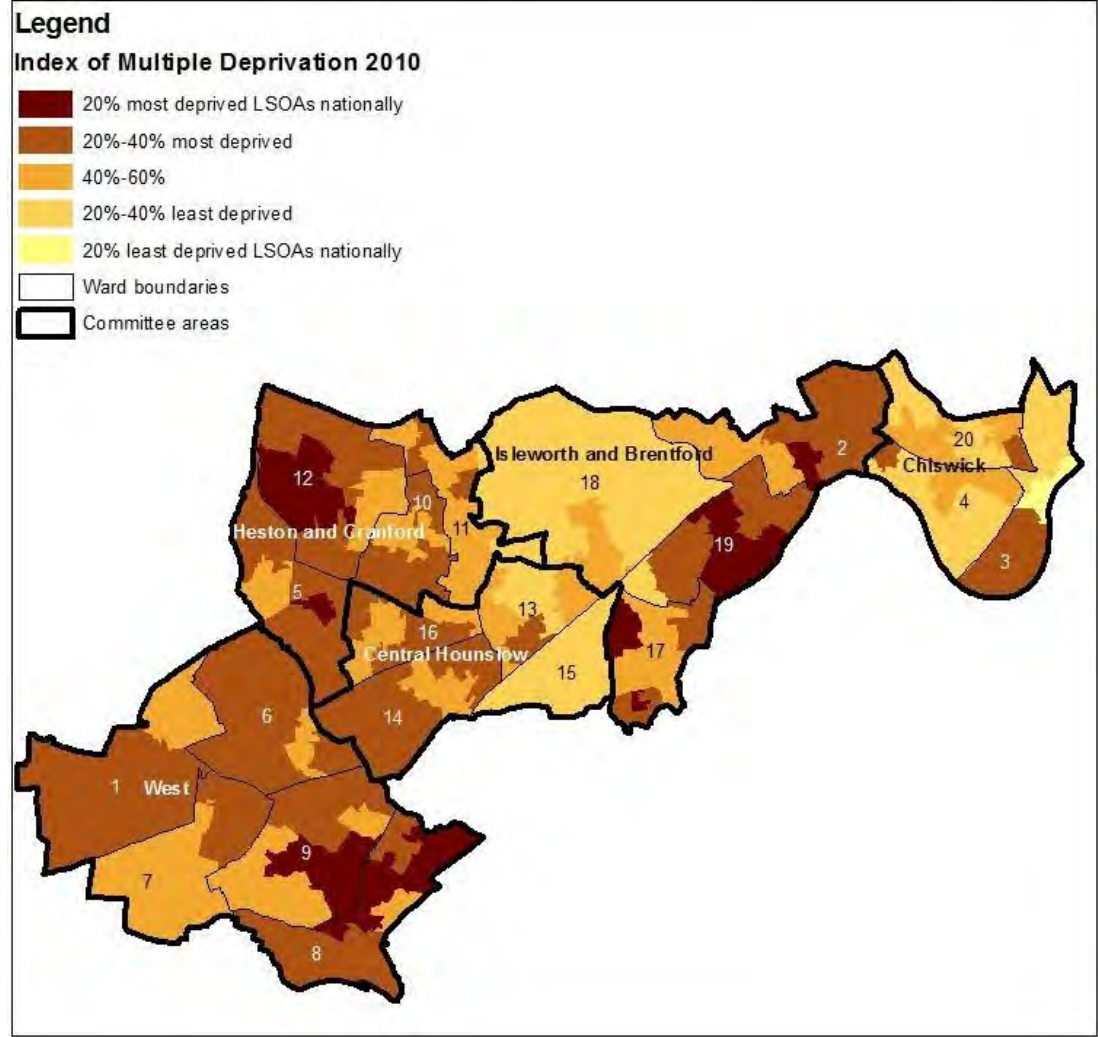
Isleworth, which are, in fact, amongst the 10% most deprived areas in England. Four wards within Hounslow have been identified as being in the 10% most deprived wards in the UK.<sup>2</sup> Further analysis of the sub-domains shows that Hounslow deprivation rankings are highest in the areas of: material well-being, children in need, housing and crime.

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<sup>1</sup> GLA 2010 Round Ethnic Group Projections - SHLAA

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<sup>2</sup> <http://www.endchildpoverty.org.uk/london/child-poverty-in-london-the-facts/hounslow-31/>



Number	Ward
1	Bedfont
2	Brentford
3	Chiswick Homefields
4	Chiswick Riverside
5	Cranford
6	Feltham North
7	Feltham West
8	Hanworth
9	Hanworth Park
10	Heston Central
11	Heston East
12	Heston West
13	Hounslow Central
14	Hounslow Heath
15	Hounslow South
16	Hounslow West
17	Isleworth
18	Osterley and Spring Grove
19	Syon
20	Turnham Green

## The Children and Young People of Hounslow

Greater London Authority projections for 2011 show the 0-19 population for Hounslow is around 63,000<sup>3</sup>, which equates to approximately a quarter (26%) of the total population.

Statistics show that there has been a significant increase in birth rates in Hounslow since 2000. This has led to a significant increase in the under 5s population.

The expected increase in the 5-9 and 10-14 age bands that will result, will impact how services are shaped and used in the future. Based on GLA figures, the population projection for children and young people in 2020 is as follows<sup>4</sup>:

Age	2011	2020	Percentage change
0 - 4	19,476	18690	-5%
5 - 9	15,775	17667	12%
10 - 14	14,502	16704	15%
15 -19	13,254	13870	5%

Figures show that the highest proportion of children and young people are in West Area containing wards (Feltham, Hanworth and Bedfont) that are within the 10% most deprived in England. Whilst the smallest proportion of children and young people live in the Chiswick Area, which is the most affluent area in the borough.

Children and young people in Hounslow come from a range of cultural and ethnic backgrounds.

The school roll census shows<sup>5</sup> that while White British pupils form the largest ethnic group in schools (27%) this has decreased significantly since the last census where they made up 50% of Hounslow's young population. Indian and Pakistani pupils continue to make up the second largest ethnic group of the school population. Pupils from mixed heritage background make up 8% of the school population.

There is an increasing refugee community from countries including Afghanistan, Albania, Bosnia, Kosovo, Iran, Iraq, Sri Lanka, Kenya and Somalia. Of these countries, the percentage of pupils from Somali (4.9%) and Afghani (3.8%) backgrounds are particular large.

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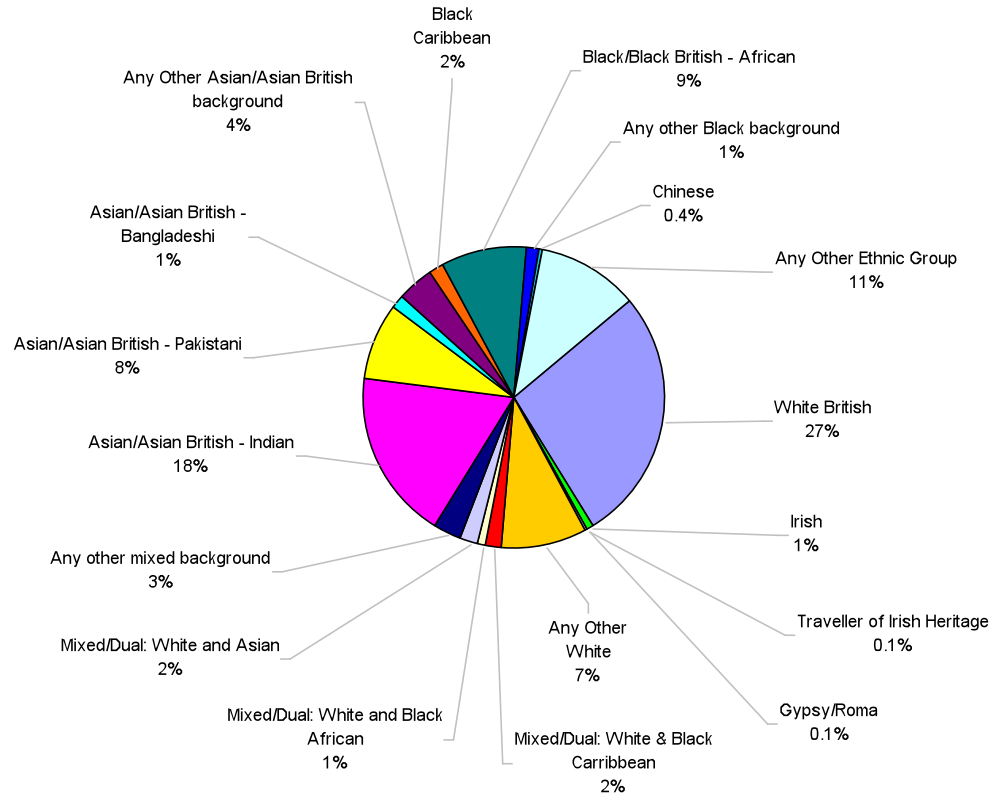
<sup>3</sup> Mid-Year 2009 Projections, GLA

<sup>4</sup> 2010 Round of Demographic Projections

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<sup>5</sup> January School Census 2010

**ETHNICITY OF TOTAL SCHOOL POPULATION**



The most commonly spoken first languages among Hounslow pupils are English (46%), Panjabi (8%) and Urdu (6%).<sup>6</sup> This shows that over half of children and young people in Hounslow having a language other than English as a first language.

### Deprivation affecting children

Outcomes for children and young people in Hounslow are good overall, although there are a number of significant things that impact on the lives of some children and young people. These include the pockets of deprivation within the borough, a mobile and transient population, lone-parent households and families living in poverty.

The Income Deprivation Affecting Children Index, (IDACI) is a specific subset of the income Deprivation Domain relating to child poverty factors. It measures the proportion of children under the age of 16 in an area living in low income households. The data suggests that deprivation affecting children is more acute than overall deprivation highlighted in the previous section. 32% of the Borough's LSOAs are classified as being within the 20% most deprived nationally (compared to 9% on the overall Indices of Multiple Deprivation).<sup>7</sup>

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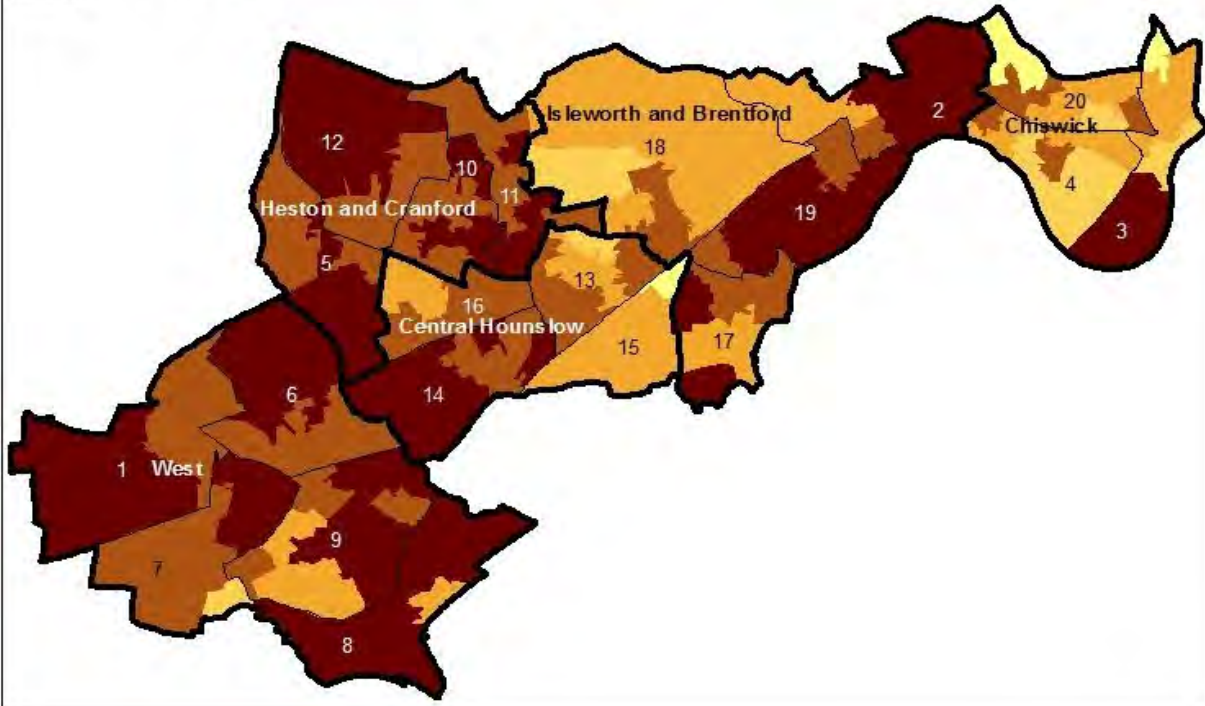
<sup>6</sup> Pupil Language Survey, March 09, MIT updated 2010

<sup>7</sup> Hounslow Local Economic Assessment – 2010 - SQW

**Legend**

**Income Deprivation Affecting Children Index 2010**

- 20% most deprived LSOAs nationally
- 20%-40% most deprived
- 40%-60%
- 20%-40% least deprived
- 20% least deprived LSOAs nationally
- Ward boundaries
- Committee areas



Number	Ward
	<b>Bedfont</b>
2	<b>Brentford</b>
3	<b>Chiswick Homefields</b>
4	<b>Chiswick Riverside</b>
5	<b>Cranford</b>
6	<b>Feltham North</b>
7	<b>Feltham West</b>
8	<b>Hanworth</b>
9	<b>Hanworth Park</b>
10	<b>Heston Central</b>
11	<b>Heston East</b>
12	<b>Heston West</b>
13	<b>Hounslow Central</b>
14	<b>Hounslow Heath</b>
15	<b>Hounslow South</b>
16	<b>Hounslow West</b>
17	<b>Isleworth</b>
18	<b>Osterley and Spring Grove</b>
19	<b>Syon</b>
20	<b>Turnham Green</b>

### Income related Child Poverty at ward level in Hounslow

Data is based upon National Indicator 116 which defines poverty as: The number of children in families in receipt of either out of work benefits or tax credits where their income is less than 60% of the median income, divided by the number of children in that area.

The table below highlights the extent of poverty at ward level in the borough. The ward with the highest level of poverty is Isleworth where 40% of children live in poverty. Significantly Child Poverty has not decreased but slightly increased in most wards, with Turnham Green and Heston Central showing the highest increases of nearly 1%.<sup>8</sup> Latest figures from HMRC (2008) show that Lone Parents account for the majority of workless families living in poverty. In the wards of Bedfont, Brentford, Chiswick Riverside, Cranford, Feltham West, Hanworth Hanworth Park, Heston West children from lone parent families living in poverty make –up over 80% of the total of workless families.<sup>9</sup>

Ward	Children Living in poverty – 2010 mid year estimates
Bedfont	33%
Brentford	34%
Chiswick Homefields	17%
Chiswick Riverside	15%
Cranford	33%
Feltham North	27%
Feltham West	32%
Hanworth	38%
Hanworth Park	25%
Heston Central	28%
Heston East	33%
Heston West	38%
Hounslow Central	24%
Hounslow Heath	31%
Hounslow South	12%
Hounslow West	23%
Isleworth	40%
Osterley and Spring Grove	15%
Syon	35%
Turnham Green	14%
<b>Hounslow</b>	<b>28%</b>

<sup>8</sup> End Child Poverty 2011 - Children Living in poverty – 2010 mid year estimates

<sup>9</sup> HM Revenue and Customs Child Poverty Statistics 2008

## Understanding Needs

### Finding out what children and young people need

In developing this plan, it has been important to find out what the needs of children and young people are, what needs to be improved, and what gaps exist.

We consulted with a range of people who are involved with services including:

#### Children, young people, parents and carers

- Met with Children, Young People, Parents and Carers focus groups and existing forums to gather views
- A children and young peoples on-line survey launched through the LB Hounslow website
- A parents and carers on-line survey (hard copies distributed to Children's Centres, Libraries and other community venues)

#### The local community

- Carried out focus group consultation on the emerging priorities for the plan
- Asked the views of a group of voluntary agencies

#### Professional groups

- Held thematic stakeholder meetings to seek the views of people working with children and young people, refining outcomes and setting a range of challenging actions and targets to achieve over the year

## What children and young people have told us:

When asked to identify what the main issues were for them, young people in Hounslow mentioned the following were key concerns:

### Health and Relationships

- The greatest concern, young people have around their health is 'relationships/girlfriends/boyfriends', which was ranked the highest issue by 63% of young people
- Bullying is a major issue for young people, where 63% said the greatest concern they have around their health is 'being bullied'

### Community Safety

- What worries young people the most in ensuring their personal safety is 'Too many gangs and young people hanging on the streets', which was ranked the highest concern for 55% of young people

### More Learning Support

- One third (33%) felt that 'smaller class sizes' and a further 30% said 'more teaching assistants' would be beneficial to their learning

### Participation

When young people were asked if they would like to be engaged more often about services which affect young people, over three quarters (77%) said 'Yes'

## What parents and carers have told us:

We surveyed parents and carers of children and young people and found that the following were key concerns:

### Health and Relationships

- parents and carers were asked what worries them most about keeping their child healthy, one of the greatest concern was 'more focus on health in schools including health food, more PE, sexual relationship and emotional health'

### Community Safety

- A 'reduction in crime' was among the top 3 safety concerns at 42% for parents. Parents felt that having 'more things for young people to do and safe places for them to go' were seen as key to ensuring young peoples safety for over half of parents (56%)
- 50% of parents surveyed said that 'better education of tolerance of others and tackling bullying and discrimination' was a key priority to ensuring young people's feelings of safety

### More Learning Support

- Over half (53%) of parents said there is a need for 'more after school learning opportunities' which was ranked as the greatest concern for parents. This is followed by a need for 'more information for parents of how they can support their children' at 44%. Over a third (38%) stated 'extra teaching support staff'

## Participation

- 67% of parents expressed a need for 'raising awareness and teaching manners, tolerance and mutual respect'. 41% said a need for 'more family orientated activities to support young people contributing and becoming more involved in their communities'

## Early Intervention

- Parents were asked "What kind of support would you like as a parent?" More than half of respondents (56%) said 'more information on where to go before things go wrong'

## The Children and Young People's Plan and Joint Strategic Needs Assessments

The 2011 Needs Assessments highlight the following service issues for Hounslow:

- a higher than the average rate for England of teenage pregnancy, although there is some evidence of a recent decline
- significantly high overweight and obesity rates, compared to national and regional rates
- poor oral health are risk factors for other chronic diseases and is linked to social deprivation. Nearly one third of children at age 5 in Hounslow have experience of teeth decay
- there are specific groups of children and young people who under-achieve at school such as White British Boys

(literacy). Pupils from Somali, Black Caribbean, Afghani, Traveller heritage as well as those claiming Free School Meals, children with Special Educational Needs and Looked After Children also under-achieve across the key stages

- Speech, Language and Communication Needs (SLCN) are the highest growing area of special needs in Hounslow. Referrals for Speech and Language Therapy (SLT) has seen a 445% increase from 244 in 2004 to 1330 in 2010
- the most prevalent youth offences during 2009/10 were drugs related, theft (shoplifting), and violence. The first time drugs related offending has been the most frequent offence category. Involvement of young people in gang related activity remains a matter of concern.
- there has been a significant increase in the number of referrals received by children's social care. Referrals have been increasing year on year and reflects a trend for increased referrals across London. In 2008, 37% of Child Protection Conferences had evidence of domestic violence

## Deriving Local Priorities

The key things that we have found from our analysis of needs and consultation have informed the setting of our local priorities for Children and Young People. These are as follows:

### Children's health

Improving Children's Health by promoting safe and healthy lifestyle choices, improving maternal health and early years health services. A subgroup of both the Health & Well Being Board and the Children's Trust board is being set up to lead on children's health.

### Social and emotional well being

Developing the social and emotional resilience of children and young people, improving parenting skills and the range of evidence based interventions to address early behaviour problems, reducing the level of conduct disorder and recourse to Child and Adolescent Mental Health Services (CAMHS).

### Safeguarding and child protection

Intervening early and protecting children and young people from harm, in particular working to address neglect and the harm caused to children from alcohol and drug abuse by parents as well as mental health problems and domestic violence.

### A safer borough

Reducing the numbers of children and young people who offend and those who re-offend. Ensuring that a range of initiatives exist to deter young people from offending and addressing the underlying causes of persistent offending.

### A focus on the 'Early' pre-school years

Evidence shows that intervention at this age has the most significant impact in terms of the wellbeing and life chances of children and the impact for the community.

### Developing our services for children with the most complex disabilities

Ensuring services are more integrated and responsive, supporting the development of personal budgets and responding to the changes proposed in the working of special educational needs procedures.

### Maximising the educational achievement of every child

Improving the standards of Hounslow's Schools overall. Reducing inequalities relating to educational performance and children who do least well in Hounslow Schools.

### Ensuring sufficient school places for all Hounslow children

Meeting the current increased demand for school places in the borough. Ensuring there is sufficient school place capacity in the future in line with population projections.

### **Community Participation and engagement in local decision making**

Ensuring Children and Young people are involved in and can influence a range of decision-making in areas that impact on their current and future well-being.

Maximising and promoting the opportunities for Children and Young People to engage in a range of democratic decision-making processes and forums.

### **Transition to adulthood**

Supporting young people to both stay on at school with the extension of the school leaving age from 2012 and to make the successful transition to work and or further training.

Ensuring clear, joined –up and transparent care pathways between children’s and adult services. Supporting the development and delivery of personalised services.

### **Child Poverty**

Early Intervention will be crucial to ensure we make lasting improvements in the lives of children; forestalling and eradicating many persistent problems and ending their transmission from one generation to the other. Child Care, Early Years education and a range of ‘Sure –Start’ style services delivered from our Children’s Centres will be key to this.

## HEALTH

### We know that:

#### Overall Health

- In a survey (Speak Out 2011) conducted with children and young people, most of the respondents said that they felt healthy. 91% said they felt either very healthy or healthy. When asked how happy they feel, a similar proportion (88%) said they were very happy or happy.<sup>10</sup>
- Outcomes of a survey showed that whilst young people largely felt healthy and happy, there were some signs of anxieties and concern. The greatest concern young people have around their health is 'being bullied' and 'relationships', which were both ranked the highest by 63% of young people. The third greatest concern for young people was 'school work and exams', as agreed by a relatively smaller proportion of 28% of respondents.<sup>11</sup>
- Responses to the Speak Out survey showed that in order to help young people improve their health, 57% said there is a need for 'More sports and activities during out of school hours'. 46% said 'More park and play areas' and 35% said 'More exciting courses and physical activities'.<sup>12</sup>
- The Healthy Schools programme is a long term initiative that supports the links between health and wellbeing and behaviour, attainment and achievement of children and young people, promoted through a whole-school approach. The Hounslow Healthy Schools programme is currently very successful and currently 95% of schools have the status, exceeding the national milestone of December 2010 for 90%

- of schools to achieve the status. To date, over 50% of schools are participating in the new Enhanced Healthy Schools Programme.<sup>13</sup>
- Significant progress has been made in relation to looked-after children and young people's health and attainment. The health of children and young people in care can be poor at the time of entry to the care system. In Hounslow detailed health action plans are prepared and the service has been recognised in London as an example of good practice. More than 92% of LAC and young people receive annual health checks and dental examinations.<sup>14</sup>

#### Sexual Health

- The Borough continues to have a higher than the average rate for England of teenage pregnancy, although there is some evidence of a recent decline. In 2009 the teenage conception rate was 37 conceptions per 1,000 15-17 year old girls in Hounslow. This represents a total of 136 conceptions and a 25% reduction on our 1998 baseline (49.6 per 1,000 conceptions). The rate of teenage conceptions from the baseline is not decreasing as quickly as national (13.3%) and London (12.7%) trends. There has been little improvement in the rate of teenage pregnancy from the previous year in 2007 where the conception rate had been 46.1 per 1000 15-17 year olds in Hounslow. Reducing teenage pregnancies remains high on the agenda for all relevant partners. In 2006-08, 58% of conceptions led to abortions, this is higher than the national average at 50% but lower than figures for Outer London at 62%.

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<sup>10</sup> Hounslow 'Sort it Out' Survey 2011

<sup>11</sup> Hounslow 'Sort it Out' Survey 2011

<sup>12</sup> Hounslow 'Sort it Out' Survey 2011

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<sup>13</sup> Verified by Lee Souter May 2011

<sup>14</sup> Verified by Jacqui McShannon May 2011

- The National Chlamydia Screening Programme (NCSP) covers the target population of all sexually active 15 to 24 year olds. In 2008-09, NHS Hounslow achieved 4246 screens, equating to 14.5% screening coverage against a target of 17%, with a positivity rate of 5.2% (96 positive clients). The target for 2009/10 was 25% (7275 screens) of the target population of 29,100 young people. NHS Hounslow achieved 23.7% (equating to 5547 screens), with a positivity rate of 4.9% (273 positive clients) against the London average positivity rate of 5.0% and the national average of 6.0%. Currently, London remains the highest screening region in England. For 2010/11, the target has been set nationally at 35% of the target population (which is 28,700 for Hounslow), equating to 10,045 screens. The most recent data (for quarter 3 of 2010/11) shows a screening rate of 5616 screens (19.5%).

### Obesity<sup>15</sup>

- As part of the annual National Child Measurement Programme (NCMP) commissioned by the Government, in 2009-2010 a total of 4957 (98%) children in reception (4-5 years olds) and year 6 (10 – 11 year olds) were measured in Hounslow.
- From the cohort of 2610 reception children measured, 71.9% were a healthy weight, 12.4% overweight, 13.9% obese and 1.8% were found to be underweight.
- The overweight figures for reception is 0.7% lower compared to 2008-2009, however the obese figures have risen by 1.8% in 2009-2010.
- In the Year 6 cohort of 2347 children measured, Hounslow continue to show significantly high overweight and obesity rates. The NCMP result showed 58.2% were a healthy weight, 15.6% overweight, 24.6% obese and 1.7%

underweight. Both overweight and obese figures have risen compared to 2008-2009 NCMP results.

- The combined overweight and obese data for Year 6 gives a prevalence rate of 40.2%, which is significantly higher when compared to the England average of 33.3% and the London average of 36.9%. This is also similar in the reception data. The combined overweight and obese data for reception is 26.3% which is higher when compared to England average 23.1% and the London average 24.3%.
- When comparing Hounslow to both national and regional data on obesity figures, it is apparent that Hounslow's children are considerably heavier and the trend also highlights the year on year rise of childhood obesity.
- Comparing Hounslow and the neighbouring boroughs such as Richmond, Hillingdon and Ealing provides a sober picture for the obesity prevalence in Hounslow. The combined overweight and obese data for reception children in Richmond is 17.2%, Hillingdon 21.5% and Ealing 24.9% (Hounslow 26.3%). The combined overweight and obese data for Year 6 children in Richmond is 26.5%, Hillingdon 33.5% and Ealing 36.1% (Hounslow 40.2%).

### Vitamin D Deficiency

- Over the past 10 years, there has been an increase in vitamin D deficiency diseases (such as Rickets) in the UK, particularly in areas with high prevalence of South Asian children, such as Hounslow.
- There are no data on prevalence or incidences of vitamin D deficiency in Hounslow but despite this, the indications are that vitamin D insufficiency/deficiency could be an important problem for the borough. Between April 2008 and August 2010 there were 20,433 individual requests from GPs for vitamin D level testing. An audit carried out at West Middlesex University Hospital found that within one year (2007 -2008) 75% of all requested Vitamin D level tests were deficient. Hounslow PCT have also noted an increase in the prescriptions for vitamin D deficiency and insufficiency

<sup>15</sup> Data verified by Buvana Ailoo and Khalida Aziz June 2011

treatments over the last few years. Over a 12 month period (Sept 2009 – Sept 2010), there were 77,457 prescriptions for treatments for vitamin D deficiency.<sup>16</sup>

### Dental Health

- Poor oral health are risk factors for other chronic diseases and is linked to social deprivation. Nearly one third - 32.6% - of children at age 5 in Hounslow have experience of teeth decay. This is higher than the national average of 30.9% in England, and only slightly lower than the regional average of 32.7%<sup>17</sup>. The national study carried out by the NHS Dental Epidemiology Programme may underestimate the problem due to methodological issues, as the same study carried out the previous year, found the problem to be greater in Hounslow with 47 per cent of children under five having experienced tooth decay<sup>18</sup>.
- In Hounslow 5 year olds, only 6% of teeth with decay have been filled. This is considerably lower than the national and regional averages of 14%. However, a relatively higher proportion of teeth have been extracted/removed than London and England. There is a need to ensure young children are given appropriate prevention and treatment in Hounslow<sup>19</sup>. A successful project in Hounslow which provides fluoride varnishing on teeth to help increase their resistance to decay is currently followed by many other PCTS around the country. The project offers an alternative public health approach to improving oral health and reducing inequalities in Hounslow children.

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<sup>16</sup> Updated by Catherine Heffernan June 2011

<sup>17</sup> Oral Health of 5 year old Children 2007/08, BASCD

<sup>18</sup> This is the first survey to be carried out following a number of methodological changes, including the introduction of positive consent. This is likely to have introduced bias, but it is not possible to quantify the effect of this.

<sup>19</sup> Updated by Clare Robertson, February 2010

- In the 2011 Speak Out survey, almost half of respondents (49%) see their dentist every 6 months, 19% every year and 18% said every 3 months.<sup>20</sup>

### Substance Misuse

- Results of the 2009 TellUs 4 Survey showed that the proportion of young people in Hounslow stating that they have never had an alcoholic drink was significantly higher than the national average (66% compared with 51% nationally). 87% of pupils surveyed reported never having taken drugs, which is in line with national figures.
- Cannabis and alcohol are the main substances that result in young people needing help from Visions. 73% of young people presented cannabis use for treatment followed by 21% presenting alcohol use in 2008/09. The picture in Hounslow is broadly consistent with that found nationally and the profile of young people presenting for treatment is also similar to that in other London boroughs.
- The Visions service exceeded its 2008-09 target for targeted drug prevention by 32%, with 328 young people receiving this level of support. Early intervention and treatment has also been effective, meeting the target of 80 young people coming into treatment and receiving a psychosocial intervention.
- Two thirds (67%) of the young people who received a treatment or intervention had a successful outcome. These outcomes related to young people completing their intervention drug free or having reduced their drug use. These outcomes are much improved from 2007/08 when the figure was 44%.

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<sup>20</sup> Hounslow 'Sort it Out' Survey 2011

## Maternal and Infant Health

- The number of children living in Hounslow has been increasing fairly rapidly through the decade. The total number of live births registered in 2009 was 4,297. This is 88 births higher than in the previous year and whilst the increase has slowed down it continues the sharp upward trend that began in 2000. The average rate of increase in Hounslow (4.6%) is higher than the rate of increase for London Boroughs (3.2%)<sup>21</sup>.
- Fertility rates have also been rising steadily: up from 66 per 1000 women aged 15-44 in 2001 to 77.9 per 1000 in 2009. Total fertility rates however have remained fairly consistent ranging from 2.14 to 2.26 children per women of child bearing age between 2006 -2009.
- In 2009, 86.5% of mothers breastfed at birth, which is higher than the national average, however, by the 6-8 week check, only 60.4% of babies were recorded as being either fully breastfed or partially breastfed. This is lower than the London 6-8 prevalence rate of 65% but higher than the England average of 46.2%.
- In 2008 the percentage of babies in Hounslow with a low birth weight (of less than 2.5kg) was 8%, which is higher (though not significantly) than London and England averages (6.8% and 7.3% respectively).<sup>12</sup> The percentage of live births under 2.5kg ranged from 6.1% in Isleworth to 10.1 in Hounslow Heath. When examined by small area, low birth weight is negatively correlated to deprivation. The higher the deprivation, the lower the birth weight.<sup>22</sup>
- In 2008 the infant mortality rate is 4.8 per 1000, which is similar to London's 4.3 and England's 4.7.<sup>12</sup> The perinatal mortality rate for the same year was 6.9 per 1000, which is lower (though not significantly) than London (7.8) and

England (7.6).<sup>12</sup> There has been a decrease in perinatal mortality rates since 2004, when the rate was 9.6 per 1000.

## Health Visiting

- Community Practitioners and Health Visitors Association (CPHVA) guidance states that health visitors should have responsibility for caseload of approximately 350 families per whole time equivalent. In Hounslow, there are approximately 1:800 families<sup>23</sup>. This ranks Hounslow the 8<sup>th</sup> worst in the country.<sup>24</sup>
- Health visitors in Hounslow are part of a modernised 0-16 model of service delivery where they are supported by a skill mix team which includes community staff nurses, nursery nurses, and support workers, in the delivery of services to children and families. This consists of eight 0-19 child and family teams and one sure start team. Work is delegated by the health visitor who maintains overall caseload responsibility and is responsible for the initial new birth assessment.
- Nationally there is a problem of recruiting and retaining health visitors and the problem is particularly pronounced in London. 8 out of 10 PCTs with the lowest ratio of children under 5 to health visitors are in London.<sup>25</sup> As of June 2011, our current establishment of HV is 24.69 and vacancy is 6.8 fte.

## Immunisation

- Historically in Hounslow, the reported uptake of childhood immunisation has been lower than the national target levels and lower than most other boroughs within North West

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<sup>21</sup> For the years pooled 2005-2008, Births and Deaths 2008, DMAG 2009

<sup>22</sup> PCT Annual Public Health Report 2010

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<sup>23</sup> Updated by Natalie Douglas, May 2010

<sup>24</sup> Health visitor Report, Family and Parenting Report, published in April 2009

<sup>25</sup> Health Visitor Report, Family and Parenting Report, published in April 2009

London. Recently however there have been significant improvements in immunisation rates in Hounslow.

- The World Health Organisation (WHO) recommends that 95% of children receive the MMR by 12-18 months and that 95% herd immunity be achieved for the other childhood immunisations including the '5-in-1' (diphtheria, tetanus, polio, Hib and whooping cough). It is recommended that there is a 90% uptake for the HPV vaccine in school children to ensure herd immunity against HPV strains that cause cervical cancer. (Figures for 2010/11 are not yet finalised but initial figures show a huge improvement on the 2009/10 figure of 68%).
- In 2010/11, 90% of children under the age of 1 received their primaries ('5-in-1') and 82% of children aged 2 received MMR. This reflects a small increase on the 2009/10 rates.<sup>26</sup> However, only 67% of children have a completed immunisation schedule by the age of five years and 68% have received both MMR vaccines. Work continues to promote the second dose of MMR and the 'pre-school booster'.
- There have been historical problems with data collection in Hounslow meaning that reasons for low uptake have most likely been due to underreporting. The PCT now has a robust process implemented with GP practices, which involves extracting monthly immunisation data from the GP clinical system and uploading it to the PCT's reporting system.

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<sup>26</sup> Immunisation COVER report for Hounslow, 2010/11, Child Health Information Team

## Priority 1: Improving the health of children, young people and families by promoting safe and healthy lifestyle choices

### What outcomes are we expecting to achieve?

- **Reducing teenage pregnancy and improving young people's sexual health**
- **Reducing childhood obesity**
- **Reduce risk of vitamin D deficiency diseases amongst children**
- **Improving oral health of children**
- **Supporting healthy and informed choices around drugs, smoking and alcohol**
- **Ensuring effective interventions for children with substance misuse problems**
- **Supporting better health outcomes for children with disabilities**

### KEY OUTCOMES:

- Continue the downward trend in teenage pregnancy from 1998 baseline.
- Numbers of under 25 year olds (age 15-24) screened for Chlamydia & prevalence of Chlamydia in under 25 year olds – target of 25% this year.
- Reduce % obese children in Reception from 14% in 2009/10 to 12% for 2011/12.
- Reduce % obese children in Year 6 from 24% in 2009/10 to 23% for 2011/2012.
- Reduce incidence of rickets in young children in Hounslow.
- Reduction from 41.8% of 12 year olds (2008/09) with tooth decay experience to England average of 33.4% (DMFT for Hounslow is 2.28 compared to 2.04 for London and 2.21 for England).
- Percentage of schools awarded national Healthy Schools status.
- Number of vulnerable young people receiving targeted drug education via Visions.
- A well established pathway for children and young people with learning disabilities and ASCs, who also have a mental health problems and a reduction in out of borough assessment, treatment and residential care.

## Priority 2: Improving maternal and early years health services

### What outcomes are we expecting to achieve?

- **Reduce the number of women smoking in pregnancy**
- **Improve breastfeeding rates**
- **Improve maternal mental health**
- **Supporting the implementation of the Health Visiting Implementation Plan**
- **Improve Childhood Routine Immunisation rates**
- **Establish a Children's Health Sub-Group**

### KEY OUTCOMES:

- Reduce the % of women smoking at time of birth from 10% (2009/10 rate).
- Increase breastfeeding rates from 85% at initiation (2009/10) and rates at 6-8 weeks from 65% (2009/10).
- Long-term outcome is reduction of impact on child's health and development (maternal mental health is shown to be the biggest determinant of a child's health and well-being).
- 95% New Birth Home Visit Standard 10-14 days.
- 100% of family health assessments completed by health visitor within 1 month of the new birth notification.
- Improve uptake in 2011/12 from the following %:
  - 89.7% primaries (age 1)
  - 81.8% MMR (age 2)
  - 80.2% Hib/Men C booster (age 2)
  - 80.7% PCV booster (age 2)
  - 67.2% preschool booster (age 5)
  - 68% MMR II (age 5)

## SOCIAL AND EMOTIONAL WELL-BEING

### We know that:

#### Children and Adolescent Mental Health Services (CAMHS)

- Current performance against the joint PSA target strongly suggests the Partnership's commissioning priorities should focus on the development of jointly commissioned early intervention mental health provision and services for children with learning disabilities, which also includes a strong early intervention element.<sup>27</sup>
- The CAMHS target population is predicted to rise steadily over the coming 5-10 years, particularly the 10-14 year age group. This will lead to a rise in referrals and caseload which will need to be planned for.<sup>28</sup>
- The ethnic profile of CAMHS tier 3 users strongly suggests there is unmet need within the Asian and Asian British population.<sup>29</sup>
- Current service usage trends by location suggest there is unmet need amongst white young people from West of the borough and ethnic minority population in central Hounslow.<sup>30</sup>
- Children accepted onto the CAMHS Caseload who live out of borough require some follow to establish 1) why they are not using their own local CAMHS and 2) if there any financial reimbursements are being received by Hounslow.
- CAMHS to ensure Hounslow Commissioners still receives the expected level of service for the local population.<sup>31</sup>

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<sup>27</sup> CAMHS Needs Assessment 2010

<sup>28</sup> CAMHS Needs Assessment 2010

<sup>29</sup> CAMHS Needs Assessment 2010

<sup>30</sup> CAMHS Needs Assessment 2010

<sup>31</sup> CAMHS Needs Assessment 2010

There is a high level of unmet needs of young people with mental and emotional problems. Local caseloads of CAMHS are considerably lower than expected at all tiers. This is explained in part by the limited capacity for services to meet demand.<sup>32</sup>

- Young people with mental and emotional health problems are not addressed early on and escalate in older adolescents presenting more complex problems at Tier 3. This is linked to the threshold of severity for access to treatment as too high in Hounslow. Majority of caseloads to Tier 3 come from older children aged 15-17 which do not follow the expected step change in the younger cohort between 11-12 years. There is a need to address the lack of early intervention provision at Tier 2 across all groups. An efficiency review has been undertaken, and a range of recommendations to expand capacity at Tier 2 will go to the CAMHS Partnership Board for review.<sup>33</sup>
- Cases reporting eating disorders are on the increase. CAMHS caseload for the period April-September 2009 show that 99 patients' contacts took place with children with eating disorder related symptoms. Presentations at A&E and consultations with health and education professionals report an increasing problem of self-harm and suicide. Tier 3 CAMHS caseload data for the 6 month period between April -September 2009 show 138 cases with a self-harm element at presentation. Concerns have been raised about the high risk of self harm and suicide particularly amongst unaccompanied asylum seekers.

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<sup>32</sup> Verified by Toby Cade 2011

<sup>33</sup> Verified by Toby Cade 2011

- Referrals from A&E to Tier 3 CAMHS are significantly higher than other neighbouring boroughs. There were 90 referrals received from A&E to Tier 3 compared with 7 in Ealing and 1 in Hammersmith and Fulham. In Hounslow the lack of accessibility and provision at lower levels, escalate problems to A&E and in turn to Tier 3 and 4. Most admissions to Tier 4 are made in crisis and there is a need to review urgent care pathway for acute mental health and reconfigure support at Tier 3. Commissioning priorities will examine the business case for a CAMHS Paediatric Liaison Service to improve the unscheduled care pathway and reduce the demand on A&E.
- The number of Tier 4 cases is rising significantly from 13 in 2007/8 to 29 in 2009/10 (to month 7). Sufficient and well co-ordinated services at Tiers 2 and 3 can help reduce admissions.<sup>34</sup> The length of stay has also increased noticeably. More than half the cases exceed the recommended 28 days. Acute Tier 4 beds are not suitable for long-term placement and there is a need for longer term care to be delivered elsewhere.<sup>35</sup>
- 43% of referrals to CAMHS are inappropriate. 45% of inappropriate referrals to Tier 3 teams came from GPs. Consultations showed that some schools believe that GP referrals rather referrals made by the school were more likely to be accepted onto the CAMHS caseload. There is a need to make clear the referral criteria and map out pathways for mental and emotional support among stakeholder groups.<sup>36</sup>
- CAMHS services are dominated by young white people who are over-represented. There is an unmet need within the Asian and Asian British population which makes up over 30% of the young population in Hounslow, but are accessing only 14% of CAMHS services. Data from previous years showed there is a higher than expected percentage of children and young people of Africa/Caribbean heritage accessing CAMHS. Data presented in the most recent CAMHS Needs Assessment shows an underrepresentation of African/Caribbean young people accessing services. There is a need to investigate and monitor admissions.<sup>37</sup>
- The highest presenting conditions per child for CAMHS were ADHD. There were 1566 children presenting conditions of ADHD. The number of stated children and young people with an identified primary need of Autistic Spectrum Disorders (ASD) in Hounslow has increased by 110% between January 2006 and January 2010. Local knowledge and demand for services indicates that Hounslow has high levels of children experiencing behavioural problems, ADHD and autism. This necessitates the development of additional behavioural, social and emotional difficulty (BESD) and ASD specific provision within the Borough.<sup>38</sup>
- Other vulnerable groups are also under represented such as those with learning disabilities, LAC and young offenders, which indicate an element of unmet need. There are additional services arranged at Tier 2 with a clear care pathway into Tier 3 CAMHS to meet the mental health needs of looked-after children and children with disabilities.<sup>39</sup>
- More needs to be done to identify emotional problems at an early stage and prevent more serious mental health difficulties from developing. Training is being carried out to uplift the skills of school staff to better identify early signs of emotional and mental problems, as well as a nurturing program to support parenting problems and issues of attachment in deprived areas. An efficiency review has been

<sup>34</sup> CAMHS Tier 4 Service Review 2010 /verified by Toby Cade May 2011

<sup>35</sup> CAMHS Tier 4 Service Review 2010 /verified by Toby Cade May 2011

<sup>36</sup> Verified by Toby Cade May 2011

<sup>37</sup> CAMHS Needs Assessment 2010/verified by Toby Cade May 2011

<sup>38</sup> Updated by Merle Abbott, February 2010

<sup>39</sup> Verified by Toby Cade May 2011

undertaken and a TaMHS proposal which will develop a whole school approach to emotional wellbeing and mental health - including a particular focus on self harm; attention and eating disorders - have been put forward. Priorities have also been set around developing the capacity of Tier 2.<sup>40</sup>

- The greatest concern, young people have around their health is 'relationships/girlfriends/boyfriends', which was ranked the highest issue by 63% of young people. Similarly, when parents and carers were asked what worries them most about keeping their child healthy, one of the greatest concern was 'more focus on health in schools including health food, more PE, sexual relationship and emotional health'. This might indicate a need for greater sex and relationships education/advice for both children and families.

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<sup>40</sup> Verified by Toby Cade May 2011

### **Priority 3: Developing the social and emotional capabilities of children**

#### **What outcomes are we expecting to achieve?**

- **Raised awareness amongst workforce to enable better support for children's social and emotional well-being and mental health issues**
- **Provision of early identification for children and young people with social, emotional and mental health issues**
- **Provision of intervention and support through accredited evidence based programmes for children and young people in a range of settings to promote and develop social and emotional capabilities and resilience**
- **Provision of appropriate emotional well being support and development for children with ADHD and ASD across a range of settings**
- **Good parenting and support for families in the community is promoted**

## KEY OUTCOMES:

- There are 6 further schools accredited in training and delivery of the programme.
- Staff in 6 schools have been trained and will have school protocols for recognising and managing self harm.
- Increase in school referrals by 2% to the Visions Team Increase referrals from the identified voluntary/community groups by 2% sector agencies.
- Minimum of 10 staff trained – these will include the Early Years Advisers, Children Centre teachers and Outreach teams.
- Minimum of 12 settings where staff have been trained and where the package is being implemented and monitored.
- Common Assessment Framework panels, EIS multi agency case reviews and Targeted Youth Services data show that these needs are identified and appropriate resources are put in place at Tier 2.
- At least 2 Common Assessment Framework training sessions will be offered to a range of staff (40-50).
- SENCo conference with a focus on early identification/ intervention is attended by 80% of schools.
- 2 training programmes will be offered to train 24 additional staff in the borough.
- There are at least two joint funding bids for social enterprises/3<sup>rd</sup> sector providers to develop parenting and family support work.
- Children Centre Ofsted Inspections will reflect emotional wellbeing of children.
- A minimum of 12 group parenting support programmes will have been delivered, including pre and post questionnaires.

#### **Priority 4: Emotional well-being and mental health is supported through targeted and specialist settings**

##### **What outcomes are we expecting to achieve?**

- **Children and young people's mental and emotional well-being is supported throughout the range of settings (this refers to specialist CAMHS and inpatient settings) that they come into contact with**
- **There are accredited, evidenced based programmes or treatments for parents and/or carers, children and young people that result in the promotion of self esteem, emotional intelligence, courage and confidence**
- **There is an appropriate range of mental health support for the increasing number of children and young people diagnosed with Attention Deficit Hyperactivity Disorder (ADHD) and Autistic Spectrum Disorders**
- **There is a range of local support for children and young people with learning disabilities and additional mental health difficulties**
- **The under – representation of children and young people from Asian or British Asian heritage accessing mental health services is explored and addressed**
- **Reductions in the specialist CAMHS budgets are managed in ways that minimise the impact on children and young people**

## KEY OUTCOMES:

- The number of re-referrals.
- The number of Bed Days (Tier 4).
- Percentage reduction in specialist CAMHS referrals due to community based CAMHS provision.
- Percentage of patients who waited more than 11 weeks for a first appointment with specialist CAMHS.
- Percentage of cases under shared care.
- Number of cases involving nurses prescribing.
- Number of carers/service users involved in group programmes.
- Percentage of children receiving medication for ADHD transferred to shared care between GPs and CAMHS.

## SAFEGUARDING AND CHILD PROTECTION

### We know that:

- Professor Eileen Munro's review; 'A child-centred system' May 2011<sup>41</sup>, outlines a radical new approach to improve the quality of child protection services in the UK. The review suggests significantly reducing central prescription and regulation and to develop Child Protection more responsive to local need; freeing professionals to use their expertise to fully assess a child and provide the right help. The review also underlines the need to improve the knowledge and skills of social workers, from training through to continuing professional development.
- The Ofsted inspection in October 2009 of safeguarding services reported that the "overall effectiveness and provision of safeguarding services to ensure that children and young people are safe in Hounslow is 'Good' ". There is an established priority given to safeguarding and child protection which is underpinned by a strong ethos of responsibility and accountability across all partnership agencies.
- During 10/11 there were 16,026 contacts made to Hounslow's Social Care teams, this represents a 21% increase on the previous year and an 80% increase on 08/09. This increased volume of contacts places significant pressure on front door social care assessment services who have to identify and prioritise the most vulnerable children.<sup>42</sup>
- During 10/11 there were 2553 which led to 2059 social work assessments to determine the levels of vulnerability and need. 861 children required complex and detailed comprehensive assessments. 412 children were the subject of child protection investigations.<sup>43</sup>
- There are 1445 Children in Need who were supported through the provision of specialist Services, this does not include Children in Care to the council and those children who required a child protection plan.<sup>44</sup>
- In March 2011 there were 205 children with a Child Protection Plan.<sup>45</sup> Monitoring information indicates that neglect and emotional abuse continues to be the primary reason for requiring a Child Protection Plan. Domestic violence remains a key concern.
- In 2009-10 Hounslow Domestic Violence Outreach Service (HDVOS) had 4050 referrals, 758 women were supported and 289 children were supported indirectly.
- There are 344 Children in Care to the Council in Hounslow.<sup>46</sup> Workforce planning has ensured that all looked after children have been appropriately allocated to qualified Social Workers.
- 90.9% of Children and Young People in Care to the Council aged 0 to 16 years are now placed in foster care or placed for adoption.<sup>47</sup> The stability of placement is good with 66.7% of all cases looked after continuously for at least 2.5 years, resided in the same placement for at least 2 years.
- Our Strategy for recruitment of Foster Carers for Hounslow is proving successful and we have increased our overall numbers of Foster Carers By 10%.

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<sup>41</sup> commissioned by the Dept. for Education

<sup>42</sup> Swift Database, Updated in March 2011

<sup>43</sup> Swift Database, Updated in March 2011

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<sup>44</sup> Swift database, Updated in March 2011

<sup>45</sup> Swift database, Updated in March 2011

<sup>46</sup> Swift Database, Updated in March 2011

<sup>47</sup> Swift Database, Updated in March 2011

- The numbers of Care leavers we now have attending University is 25.
- Recent unannounced OFSTED Inspections of Hounslow's Homes for Children have been conducted with The Ride (Residential unit for 11-16 year old children) being rated as "good" and Westbrook (Respite unit for Children with Disabilities) retaining its "outstanding" rating.

## Priority 5: Intervening early and protecting children and young people from harm

### What outcomes are we expecting to achieve?

- **Providing earlier and more effective support to vulnerable families and children**
- **Children are protected from emotional, physical and sexual abuse and neglect**
- **Timely and effective assessment and support for children in need and their families**

### KEY OUTCOMES:

- Reduce the number of initial contacts made to Children's Social Care by 800.
- 20 families are supported to improve their stability, functioning and independence.
- 5% reduction of repeat referrals from Education to Social Care.
- The responsibility to safeguard children and young people is understood and prioritised by all agencies and professionals working with children.
- 70% of core children's social care assessments carried out within 35 working days of commencement.
- 6% of children who have child protection plans lasting two years.
- 12% of children becoming the subject of Child Protection Plan for a second or subsequent time.
- 100% of children with child protection plans receive regular 6-monthly reviews.
- 30 families to benefit from Family Group Conferences March 2012.
- 20 families to benefit from a comprehensive and expert family assessment.
- Young people aged 16+ who are homeless or at risk of homelessness are provided with a timely assessment and support appropriate to their needs.

## Priority 6: Improving the life chances of Looked After Children (LAC)

### What outcomes are we expecting to achieve?

- **Enhanced life chances for children in care from educational opportunities, health care and social care**
- **Children and young people are supported to remain in safe, stable and secure placements**
- **Maximise the benefits of resources for children in care ,ensuring choice, effectiveness and value for money**

### KEY OUTCOMES:

- 100% of Looked after children have an allocated social worker or personal advisor.
- 100% of Looked After children have statutory reviews of their care plan.
- 90% of LAC has a regular medical review of their physical and emotional health and well being.
- 100% of children newly in care receive the Pledge Pack.
- Net increase of ten foster carers by 2012.
- 90% of all looked after children aged 0-16 are in a foster placement or placed for adoption.
- 9% looked after children are adopted.
- Fewer than 12 % of looked after children experience more than two placement moves within the year.
- Realise savings of £1m from the total placement costs.
- Reduce average placement days by 10%.
- Reduce average unit costs by 10% across the financial year.
- Reduction in expenditure on expensive specialist placements.
- Reduction in unit costs of placements across West London.

### **Priority 7: Better skilled and supported social workers**

#### **What outcomes are we expecting to achieve?**

- **Supporting effective social work practice**
- **Increase retention of social workers – link to interim business plan priority**

#### **KEY OUTCOMES:**

- 15% increase in the number of social workers accessing high quality training by 2012.
- Creation of a learning system that improves the quality of help that vulnerable children and families receive.
- Seven social workers from the Graduate Trainee scheme to qualify summer 2011.
- Five Step Up to Social Work graduates to take up employment in Hounslow by March 2012.
- Reduce the vacancy rate for social workers to 10%.

## COMMUNITY SAFETY

### We know that:

- Young people think that Hounslow is a good place to grow up<sup>48</sup> however there are concerns around safety in the Borough. Whilst Children and young people feel safe in school (68%), their perception of safety drops to 59% when travelling to and from school, and declines further when young people are on the streets, at the park and in the local area to 39%.
- Key concerns are around the level crime in the streets - 'too many gangs and young people hanging on the streets' were ranked the highest concern for 55% of young people followed by 49% who agreed 'too much crime' as their second greatest concern.<sup>49</sup>
- Parent's and young people's confidence level of young people's safety also deteriorates after dark, especially at night in the town centre, and in unlit areas.
- 45% of residents felt that teenagers hanging around in the streets were a problem in their local area<sup>50</sup>, but the proportion of young people involved in criminal conduct is relatively small. 475 young people were involved in crime in Hounslow in 2009/10 this represents 1.7% of the youth population.<sup>51</sup> Young people account for around 20% of crime related activity in the borough as victims or perpetrators.
- The numbers of young people entering the Criminal Justice System for the first time is reducing. During the period of 2009/10 there were 287 young people compared with 340 first time entrants (FTE's) in 2008/09.
- Proven offending related to violence and substance misuse are the two highest offence categories among young people. Drug offences are increasing which are predominantly linked to cannabis.
- The introduction of Triage arrangements has been successful and have contributed to good progress in the reduction of first time entrants.
- Comparing years 2007, 2008 and 2009 the number of young people re-offending after 12 months has increased, but numbers of offences per young person has decreased in 2009. The rate of re-offences is decreasing from 0.85 offences per young person in 2009 from a 2005 baseline of 1.17 offences per young person.
- There are particular hotspots for youth crime which are around Hounslow and Feltham town centres.
- Black young people remain over-represented in the local youth justice system, especially as first time entrants.
- Serious violence and gang related activity among young people has increased in 2010/11 after a decline in the preceding 2 years. These gangs are active in East, Central and in the West of the borough.
- Use of custody remains low as a proportion of sentencing outcomes.
- In Hounslow, approximately 22% of all violent crime in Hounslow is domestic violence<sup>52</sup> and a significant proportion of children with a Child Protection Plan, domestic violence was recorded as the main reason or featured heavily at the initial conference.
- Bullying is an issue that children, young people and parents want to see addressed in school and the community. A recent survey showed however that nearly half of young respondents have been bullied at least once, which is of great concern.

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<sup>48</sup> Hounslow 'Sort it Out' Survey, March 2011

<sup>49</sup> Hounslow 'Sort it Out' Survey, March 2011

<sup>50</sup> Hounslow Resident's Panel Tracker Survey, November 2010

<sup>51</sup> Based on 2010 population figures for 10-19 years old

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<sup>52</sup> Hounslow Community Safety Partnership, Updated by Sabeel Khan May 2011.

- National research show that cyber bullying is on the increase. Sexual bullying such as homophobic and sexist-name calling is also showing signs of increasing trend.<sup>53</sup>
- The numbers of racist incidence in schools have increased from 2008/09 by 6% to 331 incidents recorded in 2009/10. This represents the highest number of incident over a 6 year monitoring period. The rate of increase has dropped however from 2008/09 which saw a 12% rise. The majority of reported racist incidents are from within primary schools which make up 312 incidents.

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<sup>53</sup> Student Focus Group: Composite Report – Gender Relationships, 2009

## **Priority 8: Reducing young people who offend for the first time and those who re-offend**

### **What outcomes are we expecting to achieve?**

- **Reduce the number of young people entering the criminal justice system for the first time**
- **Reduce the number of young people from Black and minority ethnic groups in Hounslow as a proportion of the number of young people entering the criminal justice system for the first time**
- **Reduce the number of young people in the criminal justice system who re-offend**
- **Partner agencies are involved in integrated, early intervention and crime reduction activities to reduce offending**
- **Develop the capacity of children and young people to make choices that reduce their involvement with gangs and serious youth violence**
- **Reduce proportion of young people within the youth justice system receiving a conviction in court who are sentenced to custody**

### **KEY OUTCOMES:**

- 2% reduction in the number of young people entering the criminal justice system for the first time.
- Audit report completed.
- Undertake 3 targeted prevention sessions in schools/ youth centres in Hounslow.
- 2% reduction in the rate of re-offending by young people.
- Develop and implement group programmes addressing substance misuse risks.
- Reduce re-offending by black young people from 38.7% (cohort 2009).
- 2% reduction in the number of young people who commit serious youth violence.
- no more than 4% sentenced to custody.

## **Priority 9: Children and young people feel safe in schools and the community**

### **What outcomes are we expecting to achieve?**

- **Ensuring children and families feel safe from crime and anti-social behaviour in school, in places where they live, travel and receive services**
- **Maximising the awareness of bullying and discrimination**
- **Develop the capacity of parents to support children and young people's concerns around safety**
- **Integrated working to reduce serious youth violence**
- **Supporting children and young people to develop common understanding and promote tolerance and mutual respect**
- **Reduce the possibility of extremism taking hold amongst isolated and alienated communities, residents and groups**

### **KEY OUTCOMES:**

- 2% reduction on the 2010/11 outturn in victim based crime.
- 60 uniformed officers on the streets by March 2012.
- A minimum of 15 schools to repeat delivery of the Learning to Respect Programme.
- 1,500 more young people educated on healthy/abusive relationships through the Learning to Respect programme.
- All schools consulted on new Anti-Bullying guidance.
- 50% of schools engaged with new Enhanced Healthy School's status.
- Monitor and record number and quality of interventions.

## EDUCATION AND LEARNING

### We know that:

#### The Early Years

- In 2010 pupils in the Early Years Foundation Stage improved in all 13 assessment areas and above expected levels in all areas with the exception of Personal, Social and Emotional Development.
- The gap between median scores of all pupils at the Foundation Stage and those from the bottom 20% decreased by 0.8% and stands at 35% in 2010.

#### Special Educational Needs

- Behavioural, emotional and social difficulty (BESD) is the second most predominant need, accounting for 21.7% of the cohort. Although, most of these pupils (408) are within the primary schools, they account for a significant share (25.2%) within secondary schools too.
- Children with disabilities and complex needs in Hounslow are frequently placed out of the area. Although there has been a significant reduction in Independent and Non-maintained placements of pupil with statements of SEN since 2006, there has been a 25% increase in pupils placed in out-borough maintained Special schools and Units attached to out-borough mainstream schools. This reflects the increased number of children and young people with complex special educational needs, despite increased in-borough provision.<sup>54</sup>
- Speech, Language and Communication Needs (SLCN) are the highest growing area of special needs in Hounslow.
- Speech, language and communication needs are the third largest predominant SEN factor; accounting for 16.4% of all needs.

- Referrals for Speech and Language Therapy (SLT) has seen a 445% increase from 244 in 2004 to 1330 in 2010. The annual increase is 5%.

#### Key Stage Results

- At Key Stage 1<sup>55</sup> the proportion of children achieving the expected threshold in speaking & listening is 87%, remained the same as 2009 and in line with the national average. Performance in reading, writing and mathematics have all improved by 1% and are all now above 2009 national averages. Attainment in science dropped slightly from last year to 87%, indicating a continued two year decline and is now below national average.
- There has been continued improvement in the proportion of pupils making the expected progress from Key Stage 1 to Key Stage 2 in English over the last three years. Almost nine in ten pupils made the expected progress in 2010, indicating 5.6% increase from 2009 average. Pupils have also been making the expected progress in mathematics, rising to 85% in 2010.
- A Key Stage 2<sup>56</sup> The proportion of pupils reaching the expected threshold in both English & mathematics is 77%; indicating a 3.0 percent increase on the 2009 average and 3.7% above national average. The proportion of pupils achieving beyond the expected level also increased by 3.7% to 25% in 2010 and is 2% above national average.
- A record number of young adults are leaving school with good GCSEs with eight in ten pupils achieving five or more GCSE grades at A\* - C; indicating a 6.6 percent increase from 2009.

<sup>54</sup> Updated by Merle Abbott, February 2010

<sup>55</sup> Updated by Gloria Walker, April 2010

<sup>56</sup> CSLL MI team Feb 2011

- The proportion of children achieving 5+ A\* - C grades including English and mathematics improved from last year by 2.2 percentage points to 58%.
- 2010 saw a record result in the proportion of pupils achieving 2 or more A\*-C grades in sciences at 68%. This is a 13% increase on last year and is 7.9% above national average.

### Reducing Inequality

- There are specific groups of children and young people who under-achieve at school - White British Boys (in literacy) and those from Somali, Black Caribbean, Afghani and Traveller heritage, those claiming Free School Meals; children with Special Educational Needs and Looked After Children. It is also evident that children entering school mid-term achieve less well than their peers.<sup>57</sup>
- The performance of all minority ethnic groups improved in 2010 with the performance of Black-Somalia pupils increasing by 14% and that of Black-Caribbean by 4% for the proportion gaining 5+A\*-C including English and maths. Almost eight in ten (78%) of Black-Caribbean pupils achieved level 2 qualifications (GCSEs of 5+A\*-C) indicating an increase of 26% from the 2006 average. The performance of Black-Somalian pupils also improved over the same period by 35% to 68% in 2010.
- In 2010 44% of pupils eligible for free school meals also obtained 5+A\*-C including English and maths an increase of 6% from 2009.
- 47% of looked after children achieved level 2 qualifications in 2010 a significant rise from 28% in 2009. 13% of looked after children gained 5+A\*-C including English and maths compared to 6% in 2009.

### Improving 14 – 19 pathways

- In 2010 the percentage of 17 year olds participating in education and work based learning has increased significantly to 96%.  
The proportion of young people achieving Level 2 and Level 3 by the age of 19 has also improved. In 2009/10, 84% of young people studying in Hounslow achieved Level 2 (79% for England) and 59% achieved Level 3 (52% for England). Level 2 achievement is above the average (by 2%) of our statistical neighbours and just below the average (by 1%) at Level 3.
- The number of young people aged 16 -18 achieving 3 or more A grades at A Level has increased each year for the last 3 years. However, it is 6% below the average of our statistical neighbours and Hounslow is ranked 8<sup>th</sup> (out of 11).
- The achievement gap by the age of 19 of young people in receipt of free schools meals compared with those not in receipt of free school meals has shrunk significantly (by 7%) both at Level 2 and Level 3. For Level 2 this improvement places Hounslow as the highest of our statistical neighbours and for Level 3 Hounslow is the 2<sup>nd</sup> highest.

### School Place Planning

- There is an increasing demand Early Years and Primary School places due to the rise in birth rates and the free Early Education Entitlement.
- The areas with the greatest pressures for school places are: Feltham / Bedfont, Heston, Central Hounslow, and Isleworth.

<sup>57</sup> Agreed with Avtar Sherri, March 2010

## **Priority 10: 'Getting it right in the Early Years'**

### **What outcomes are we expecting to achieve?**

- **Increase the number of PVI, Childminder, and maintained settings rated good or outstanding by Ofsted / the Local authority**
- **Improve outcomes for children at 5 years old by targeting:**
  - **Early language Development**
  - **Personal Social and Emotional Development**
  - **Parenting skills in supporting their children**
- **All providers prepare to implement the revised Early Years Foundation Stage statutory framework from September 2012**
- **Increase the numbers of children achieving expected level in the EYFS Profile**
- **Narrow the gap between the lowest performing 20% and the overall cohort**
- **Improved outcomes for children identified with SEN accessing early years settings by providing early identification and intervention and promoting partnership working with parents**
- **Improving early years practitioners skills in providing quality inclusive practice and knowledge of early identification and management of SEN**

## KEY OUTCOMES:

### Improve current Ofsted judgements in Non Maintained Early Years Settings

Inadequate 2% - improve to 0%  
Satisfactory 31% - improve to 20%  
Good 60% - improve to 70%  
Outstanding 7% - improve to 10%

### Improve current Ofsted judgements in Maintained schools

Inadequate: 0 % - maintained  
Satisfactory: 18% - improve to 10%  
Good: 66% - improve to 70%  
Outstanding: -16% improve to 20%

### Early Language:

- Increase the number of EY Settings engaged with the Every Child A Talker Programme from 30 to 40.
- Every Child a Talker data shows a 10% decrease in the number of children at risk of language delay and a 10% increase in the number of children ahead in the 4 aspects of language:
  - Listening and attention
  - Understanding of language
  - Speech sounds and talk
  - Social skills

### The Early Years Foundation Stage

- Increase the numbers of children achieving the expected levels of the Foundation Stage from 54% to 62% in 2012.
- To reduce the gap between the lowest achieving and the overall cohort from 35% to 30% by 2012.

### **Priority 11: Developing an integrated response for children with the most complex disabilities**

#### **What outcomes are we expecting to achieve?**

- **Increase number and range of Hounslow maintained specialist provision in order to reduce the proportion of children with disabilities and complex needs placed in schools outside of the borough**
- **Working in partnership with parents and carers around the design and commissioning services**

#### **KEY OUTCOMES:**

- The proportion SEN pupils placed in out-borough non-maintained and independent special schools reduced by 1%.
- 20 additional primary special school places available for academic year 2011/2012.
- 24 additional primary Centre Places available by Academic year 2011/2012.
- To increase by 5% the numbers of families who have access to a trained key worker.
- Menu of Services developed for parents of children with complex needs and disabilities.

## **Priority 12: Maximising the educational achievement of all children and young people and reducing inequality**

### **What outcomes are we expecting to achieve?**

- **Positive behaviour amongst all children and young people is promoted and exclusions from school are reduced**
- **Provide a range of high quality 14-19 pathways that enable all learners to make genuine progression**
- **To 'narrow the gap' in achievement between the highest and lowest attaining groups**

### **KEY OUTCOMES:**

- Maintain all Primary and Secondary schools judged as having good or outstanding behaviour in OfSTED inspections (based upon criteria for judgement remaining unchanged.)
- All maintained secondary schools to reduce persistent absence to 5% or less.
- Reduce by 50% the number of primary schools where persistent absence is identified as an issue at the end of the Autumn Term. (26 January 2011 to 13 January 2012).
- Reduce permanent exclusions from secondary schools to 47.
- Increase percentage of pupils leaving school at end of Key Stage 4 with at least one qualification from 98.9% in 2010 to 99.1% in 2011.
- Increase percentage of young people qualified at level 2 by age 19 from 84% in 2010 to 85% in 2011.
- Increase percentage of young people qualified at level 3 by age 19 from 59% in 2010 to 61% in 2011.
- Maintain significant reduction in percentage points difference between Free School Meal pupils and their peers qualified at level 2 by age 19 at 8% achieved in 2010.
- Maintain significant reduction in percentage points difference between Free School Meal pupils and their peers qualified at level 3 by age 19 at 14% achieved in 2010.

## KEY OUTCOMES:

### Narrowing the gap

#### SEN

The attainment gap at KS4 5 A\*-C inc English and Maths in 2010 was 50% - pupils will make 6% improvement in attainment in 2011 to reduce the gap to 48%.

The attainment gap at KS2 L4+ including English and Maths in 2010 was 46.2% - pupils will make a 5% improvement in attainment to reduce the gap to 44.5%.

#### Free School Meals

The attainment gap at KS4 5 A\*-C inc English and Maths in 2010 was 18% - pupils will make 6% improvement in attainment in 2011 to reduce the gap in 2011 to 16%.

The attainment gap at KS2 L4+ including English and Maths in 2010 was 13.2% - pupils will make a 5% improvement in attainment to reduce the gap in 2011 to 12%.

#### Ethnicity

Needs assessment evidence suggests monitoring of:

- White British Boys
- Somali pupils (1817 pupils in 2011)
- Black Caribbean pupils (651 pupils 2011)
- Afghani pupils (1403 pupils in 2011).

#### Key Stage 4

##### White British Boys

The attainment gap at KS4 5 A\*-C inc Eng & Maths in 2010 was 7% pupils will make 6% improvement in attainment in 2011 to reduce the gap in to 5%.

## KEY OUTCOMES:

### Black Somali

The attainment gap at KS4 5 A\*-C inc Eng & Maths in 2010 was 22% pupils will make 7% improvement in attainment in 2011 to reduce the gap in to 18%.

### Black Caribbean and Afghani

The attainment gap at KS4 5 A\*-C inc Eng & Maths in 2010 was 43% pupils will make 7% improvement in attainment in 2011 to reduce the gap in to 40%.

### Key Stage 2

#### White British Boys

The attainment gap at KS 2 L4+ inc Eng & Maths in 2010 was 4% pupils will make a 4% improvement in attainment to narrow the gap to 3% in 2011.

#### Black Caribbean and Black Somali

The attainment gap at KS2 L4 + inc Eng & Maths in 2010 was 12% pupils will make 6% improvement in attainment in 2011 to reduce the gap to 9% in 2011.

#### Afghani

Maintain improvement of Afghani pupils where achievement which was 7% above all pupils at 84% in 2010.

### Priority 13: Improving school standards

#### What outcomes are we expecting to achieve?

- **Monitoring and identifying early on schools causing concern and providing appropriate challenge and support**
- **To maintain and improve outcomes for all pupils in Hounslow's Schools**

#### KEY OUTCOMES:

- No school to be placed in an OfSTED category of concern following inspection (maintains 0% achieved in 2008-9 and 2009-10).
- Reduce the number of schools judged satisfactory at OfSTED inspections from XX in 2009-10 to XX in 2011-12.
- Increase the percentage of pupils progressing by 3 levels in English between Key Stage 2 and Key Stage 4 to 72.5% in 2012.
- Increase the percentage of pupils progressing by 3 levels in Maths between Key Stage 2 and Key Stage 4 to 76.3% in 2012.
- Increase the percentage of pupils progressing by 2 levels in English between Key Stage 1 and Key Stage 2 to 91% in 2012.
- Increase the percentage of pupils progressing by 2 levels in Maths between Key Stage 1 and Key Stage 2 to 90% in 2012.
- Increase the percentage of pupils attaining 5 or more A\*-C grades at GCSE including English and Maths from 58.7% in 2010 to 63.9% in 2012.

**Priority 14: Ensuring sufficient places for all Hounslow children**

**What outcomes are we expecting to achieve?**

- **Accurately projecting and responding to current and future school place demands**

**KEY OUTCOMES:**

- 1% level of accuracy for school place projections.
- Provide sufficient places to meet demand.
- Percentage of parents for September 2011 receiving a top-3 preference:
  - a) Primary school places 92.81%
  - b) Secondary school places 86.34%.

## COMMUNITY PARTICIPATION & ENGAGEMENT IN LOCAL DECISION MAKING

### We know that:

- 60% of young people feel that there are enough things for young people to do in their local area. However when given the choice, young people would like more safe park and play areas (57%) more sports and leisure facilities (55%) and more organised activities (54%).<sup>58</sup>
  - There is a need to provide more safe places for young people to hang out particularly in the evenings and the weekends.<sup>59</sup>
  - A higher than national average number of school pupils participates in leisure activities<sup>60</sup>. Over half of young people surveyed do something active everyday or every other day (56%).<sup>61</sup>
  - Children, young people and their families in Hounslow have trouble in accessing leisure facilities because there are not enough affordable facilities in local areas.
  - 43% of school pupils reported a lack of information about activities available on the weekend.<sup>62</sup> More information is needed about local facilities and activities to make sure that children, young people and their families can access them.
  - Consultation with young people on wider Council and partnership decisions are limited and uncoordinated.
- Results show that few young respondents are involved in influencing decision making. When asked “How often do you participate/give your view in questionnaires/surveys /consultations/youth council, over half (59%) said they had never participated in giving their views. Over three quarters of young people would like to be engaged more often about services that affect young people.<sup>63</sup>
  - There are barriers to children and young people with disabilities in Hounslow participating.
  - Consultation with children in care has been recognised as good practice by inspectors and regulators.
  - Children want feedback about the issues they raised through consultation.

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<sup>58</sup> Hounslow 'Sort It Out' Survey, March 2011

<sup>59</sup> Tell Us 4 Survey, 2009

<sup>60</sup> TellUs4 Survey 2009

<sup>61</sup> LBH Young People's Survey, March 2011

<sup>62</sup> Tell Us 4 Survey, 2009

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<sup>63</sup> LBH Young People's Survey, March 2011

**Priority 15: Children and young people are actively engaged in the community and influence local decision making processes**

**What outcomes are we expecting to achieve?**

- **Ensure a coordinated framework for consulting and involving young people in decision making**
- **Engaging children and young people in a range of democratic processes**
- **Ensuring there is a range of opportunities for children and young people to influence and shape the services they receive that is relevant to young people's needs**
- **Improve the participation of children and young people with disabilities and/or learning difficulties and those from hard to reach groups**
- **Ensuring children, young people and families have a range of activities and places for leisure and recreation**
- **Children and young people are engaged in a range of volunteering opportunities**

## KEY OUTCOMES:

- 100% of secondary schools with active school councils.
- 40 young people engaged in Youth Council.
- Ensure 83% attendance over 2011-12 to LSP Board meetings.
- Increase participation of young people in Youth Takeover Day to 20.
- Increase candidates standing for election to Youth Participation by 40%.
- Percentage of young people responding to Annual Survey is increased by 5% from baseline (1050).
- Ensure representation of hard to reach groups in Hounslow is reflected in the Youth Council.
- Minimum 1000 children and young people with disabilities accessing short break activities.
- Monitor young people's views on the range of leisure and recreation activities via the Annual Survey.
- Establish a baseline for levels of youth volunteering.
- Directory available and distributed to all schools and 14-19 education providers by January 2012.

## TRANSITION TO ADULTHOOD

### We know that:

- There has been continuous improvement in reducing the number of young people not in education, training or employment in Hounslow. The percentage of young people aged 16 – 18 who are NEET by the end of target period (Nov- Jan) in 2010/11 is now equivalent to West London average of 4.5%.<sup>64</sup>
- There is a high proportion of NEETs in the West Area of the borough. 30% of the total numbers of NEETs are from the West Area. Within that total, the highest proportions of NEETs are from Hanworth, Feltham West and Bedfont. Also Syon, Isleworth and Osterley wards are noticeably higher than this time last year by 4%.<sup>65</sup>
- A high proportion of NEETs (15%) have a learning disability or difficulty. The number of young people recorded as having a learning difficulty and/or disability in Hounslow who are NEET has increased substantially every year since 2002.<sup>66</sup>
- The proportion of 16-18 year olds leaving the NEET group in Hounslow to re-engage in employment, education or training (EET) has increased by 1% to 79% in last 12 months, which is higher than the other six West London boroughs.
- There are limited work placements in Hounslow in some occupational areas for students taking vocational qualifications. A significant proportion of
  - parents believe that schools could improve on their provision of careers advice to young people.<sup>67</sup>
  - Parents need more information and support when their children are about to move into adult care services.
  - Parents need transparency about the access criteria of services and clear care pathways.
  - Parents thought that Health & Social Care Service providers need to work together and be more flexible to families' needs.

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<sup>64</sup> GOL NEET Calculator, Hounslow Connexions -Jan 2011, Updated by Buddhika Gunasekara March 2011

<sup>65</sup> NEET Characteristics by Ward and Ethnicity for Hounslow, Jan 2011 – Hounslow Connexions, Updated by Buddhika Gunasekara March 2011

<sup>66</sup> GOL At Risk report December 2010 - Hounslow Connexions, Update by Buddhika Gunasekara March 2011

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<sup>67</sup> Agreed with Kate Vintiner, February 2010

## **Priority 16: Reducing the numbers of young people not in education, training or employment**

### **What outcomes are we expecting to achieve?**

- **Continue to reduce the number of young people not in education, employment or training**
- **Deliver the statutory information, advice and guidance (IAG) offer to schools and young people who are NEET, with priority given to 16-18 year olds and young people with a learning difficulty aged 16 -24 years**
- **Continue to make provision to meet the challenge of raising the participation age in education to 17 by 2013**

### **KEY OUTCOMES:**

- Reduce the percentage of young people not in education, training or work from 5.3% in 2010/11 to 5% in 2011/12.
- Increase in the number of 18 year old NEETs referred to Job Centre Plus programmes from the 2010/11 baseline figure of (to be confirmed) to (target to be confirmed).
- 100% literacy and numeracy assessments completed with every young offender assessed on entry.
- Increase the percentage of young offenders in Employment, Education and Training from 2010/11 baseline figure of 75% to 80% in 2011/12.
- Increase in percentage of 16 – 18 yr olds with Learning Difficulties and Disabilities in Employment, Education and Training from baseline figure of 66.1% in 2009/10 to 70% in 2011/12. (18-24 indicator to be defined).
- Increase in the percentage of 17 year olds in education or work-based learning from 91% in 2010 to 92% in 2011.
- Increase in percentage of year 11 leavers remaining in full-time education and work based learning from 89% in 2008 to 93% in 2011.
- Increase Level 1 attainment at 16 (including vocational qualifications) from 96.1% in 2010 to 96.5% in 2011.
- Continue to increase number of young people starting an apprenticeship from 2009/10 outcome of 233 to 240 for 2010/11.
- Increase apprenticeship success rate from 64% in 2010 to 65% in 2011.

**Priority 17: Improve the access to support for young people at key transition points**

**What outcomes are we expecting to achieve?**

- **Providing clear, joined –up and transparent care pathways between children’s and adult services**
- **Ensure transitional changes are minimised and planned for early on**
- **Support the development and delivery of personalised services**
- **An integrated approach to supporting young carers and their families needs**
- **Providing parents with more support and information at transition stages**

**KEY OUTCOMES:**

- Children and young people who access play provision through the resource allocation panel are offered a minimum of 9 flexible play sessions a year.
- A minimum of 10 young people 16+ are in receipt of a personal Centred Plan.
- Ensuring person centred planning training is available twice a year.
- Publish a short breaks services statement by October 2011.

## CHILD POVERTY

### We know that:

- Hounslow is ranked as the 19th most deprived borough in London and has the 18th highest rate of child poverty (out of the 32 boroughs in the capital).
- Four wards within Hounslow have been identified as being in the 10% most deprived wards in the UK.<sup>68</sup>
- Child poverty is defined by the number of children living in households below 60% of contemporary median equivalised household income. The most recent mid year estimates showed that 28% of Hounslow's children were living in poverty.<sup>69</sup>
- HMRC (2008) figures show that Lone Parents account for the majority of workless families living in poverty. In the wards of Bedfont, Brentford, Chiswick Riverside, Cranford, Feltham West, Hanworth, Hanworth Park, Heston West children from lone parent families living in poverty make –up over 80% of the total of workless families.<sup>70</sup>
- An analysis of the 10 lower super output areas in Hounslow (areas with a minimum population of 1000) showing 50% or more children living in poverty highlight that the highest number of Free School Meal claimants largely come from White British backgrounds.
- In terms of proportion to the Hounslow population however, the highest claimants of Free School Meals (FSM) are
  - Somali groups and new arrival communities where in some cases over 90% are registered for FSM. Looking at school pupil data from 2010 shows that a higher percentage of Somali pupils are living in the 10 areas with the highest rates of poverty, consisting of up to 19% of FSM claimants in areas. In contrast Somali pupils represent only 4% of the school population.
  - High child poverty levels in Hounslow is therefore linked with language and cultural support needs, access to key services and employment opportunities for parents, particularly lone parents.
  - The Governments 'Foundation Year's review'<sup>71</sup> sets a series of recommendations that gives greater prominence and funding towards children aged 0-5 years. Recommendations from the review include:
    - i.) All disadvantaged children should have access to affordable full-time, graduate led childcare from age two
    - ii.) Sure Start Children's Centres should refocus on the disadvantaged and should extend their services and functions so that they become community hubs.

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<sup>68</sup> <http://www.endchildpoverty.org.uk/london/child-poverty-in-london-the-facts/hounslow-31/>

<sup>69</sup> End Child Poverty 2011 - Children Living in poverty – 2010 mid year estimates

<sup>70</sup> HM Revenue and Customs Child Poverty Statistics 2008

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<sup>71</sup> The Foundation Years: Preventing poor children becoming poor adults. Frank Field – 2010.

### **Priority 18: Breaking the cycle of poverty through early intervention**

#### **What outcomes are we expecting to achieve?**

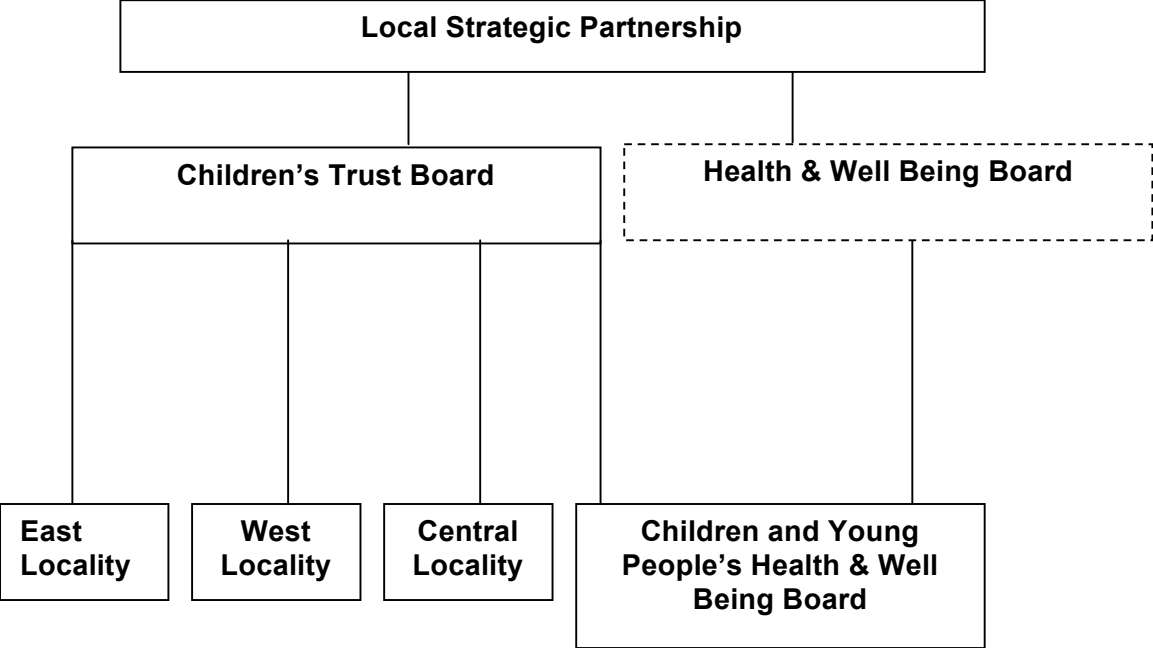
- **Increasing the providers / settings for free childcare for 2 year olds from disadvantaged backgrounds**
- **Sufficient high quality and affordable childcare is available to meet the specialist needs of working parents**
- **Promoting and raising awareness of childcare services to increase take-up amongst disadvantaged groups**
- **Increasing targeted outreach services based in children's centres**

#### **KEY OUTCOMES:**

- Ensure all Outreach Frontline Support Workers and Qualified Teachers understand the Early Education Entitlement (EEE) and Working Tax Credit criteria and at every opportunity staff promote to all families including the most vulnerable.
- Uptake in the Early Education Entitlement increases.
- More families have access to information on Working Tax Credit and uptake increases.
- Promote to parents what options are available to them for emergency child care.
- Increase the promotion of the availability and range of SEN childcare.
- Increase in school nursery places.
- Increase the number of families accessing the Family Information Service.
- Increase in the numbers of vulnerable families accessing targeted support in Children Centre settings.

# Turning Our Vision into Reality

## Arrangements for partnership working



The review of the Children's Trust arrangements and structure was completed in 2010. The Children's Trust Board (CTB) has been established and work is ongoing to finalise 3 Locality Groups that sit beneath the Board within the new Children's Trust structure.

The Children's Trust Board brings together all the agencies working with children and young people in Hounslow. The Board is chaired by the Leader of Hounslow Council and includes representation from a wide range of local agencies including health, the police and the voluntary sector, Council services, schools, parents, carers and young people. The main purpose of the Board is to improve outcomes for children and young people, by commissioning services and seeking to continuously improve services and standards. Its key responsibilities include:

- Setting the strategic direction for the Trust.
- Carrying out a strategic needs analysis on an annual basis and ensure that any targeted needs analyses are co-ordinated, effective and prioritised.
- Agreeing the commissioning priorities for the Trust.
- Maintaining a strategic oversight of project plans.
- Ensuring that there is effective participation from children, young people and families in shaping and the services they receive.
- Responding to the findings of external inspections of services.

Following the publication of the white paper 'Equity & Excellence: Liberating the NHS' (2010) and the subsequent public health white paper 'Healthy Lives Healthy People' (2010), the London Borough of Hounslow has to set up a statutory board 'Health & Well-Being Board' which will support collaboration across the NHS and Local Authority.

This is a new role for local government to encourage coherent commissioning strategies across the NHS, social care, public health and others.

To ensure that health and well-being needs of children remain a high priority in Hounslow, it is proposed that there would also be a sub-group of the Health and Well-Being Board that would focus solely on children.

This group will be accountable both to the Health and Well-Being Board and to the Children's Trust. It would work to the vision set out in the Children's and Young People's Plan and would influence and support the Health and Well-Being Board's commissioning intentions for children.

## Use of Resources

### Commissioning

Developing shared capacity to commission services for children and young people is essential to delivering improved outcomes for children and young people, ensuring resources are effectively targeted, more efficient joined-up processes and avoidance of duplication.

There is a strong culture of agencies working together in Hounslow and a number of jointly commissioned services delivered in partnership include; service to young offenders and CAMHS services to children with disabilities and Looked After Children.

It will be a challenge to ensure consistency of quality and approach to procurement, market analysis, contract monitoring and evaluation. We will need to ensure that our processes are streamlined and do not require providers to duplicate information to different agencies. There will also be a need to ensure that decisions about commissioning are implemented following established good practice for corporate procurement and commissioning in the Council, and that they have due regard to the relevant corporate guidance.

Work to ensure that existing and new partnerships and commissioning arrangements are clearly located within a formal commissioning framework will be a key priority. This framework will both recognise the complex nature of strategic planning and operational commissioning and promote more integrated and coherent provision.

Critical commissioning areas lie within:

#### Children's Social Care Placements

Hounslow is working to increase the amount and utilisation of local in-house foster care resources, and decrease its use of independent fostering agency and private residential placements. In house placements are substantially less costly and Hounslow's ambition is to save £1million from total placement expenditure.

Hounslow is also working with its partner Authorities in the West London Alliance (WLA) to jointly procure independent fostering services, and private residential services. Baseline costs for all the WLA authorities have been established, and category managers appointed. A tendering exercise will be carried out which will realise further savings through the improved knowledge of the market, quantification of existing cost and demand, and combined purchasing power of the seven authorities.

The viability of creating cross-authority fostering resources will be explored as an opportunity for developing greater capacity which is high quality, flexible and cost effective.

### Children's Special Educational Needs Placements

In parallel with the work on fostering and residential placements, Hounslow is also working with the WLA to achieve savings in the costs of education placements for children whose needs cannot be met by provision in the borough. A similar approach is being pursued: establishing baseline costs and demand, appointing a category manager, and a tendering process for the combined educational placement needs for all seven borough boroughs.

### 'Short Breaks' for disabled children and their families

Hounslow aims to strengthen and diversify the Short Breaks available to disabled children and their families through a robust and effective commissioning process which:

- Understands and reviews the needs of disabled children and families in the local area;
- Significantly increases the volume and range of short breaks available through developing 'value for money' services;
- Increases the number and quality of short breaks.
- Ensures that short breaks are provided by appropriately qualified and experienced providers and staff,
- Improves the access to short breaks for families through an understandable eligibility criteria and referral pathway, and are provided at times of most need;
- Develops a flexible and personalised approach to short breaks for disabled children and their families

Short Breaks works in partnership with parents, through the local parent's forum to ensure that services commissioned are those that families need and will use.

Together with stakeholders, Hounslow intends to review how Short Breaks are commissioned and provided with a view to developing partnerships with third sector organisations and providers.

### The 14 – 19 Agenda

Local authorities have a duty to secure sufficient suitable education and training opportunities to meet the reasonable needs of all young people in their area. Young people are those who are over compulsory school age but under 19, or are aged 19 to 25 and subject to a learning difficulty assessment. Local authorities also have a duty to secure sufficient suitable education and training for young people subject to youth detention. In deciding whether education or training is suitable, the local authority must have regard to, amongst other things, the quality of the education and training and may challenge where this is poor or inadequate.

Local authorities working with their partners may shape provision in their area by identifying gaps, enabling new provision and developing the market. They may wish to set this out formally in a strategic overview of provision and needs in their area. This is part of their wider leadership of education up to the age of 19 and their place-shaping and economic development roles beyond 19.

We are establishing a network for providers offering pre and post 16 entry and level 1 pathways with a web resource available to schools;

We are also establishing network for providers offering Apprenticeship pathways and deliver information, events and resources in schools;

We are establishing a panel for funding and securing education and training for Learners with Learning Difficulties and/or Disabilities. The panel consists of members from social services, health services, special education needs and commissioning.

We have inter-borough meetings with neighbouring boroughs where young residents access education. We have established two inter-borough meetings: South-West London and Surrey.

### Developing the workforce

Key challenges for the Children's Trust Partnership will be:

- Developing and retaining more people, particularly in critical front-line areas such as Social Work
- Strengthening inter-agency and multi-disciplinary working and workforce re-modelling
- Promoting strong leadership, management and supervision
- Developing a workforce that is flexible and responsive to new ways of working
- Developing a workforce that is representative of the local community.

The Trust will also need to respond to future workforce development and training recommendations linked to the 'Munro'

review of Social Work practice and the 'Tickell' review of the Early Years.

A series of innovative development programmes have already commenced to increase recruitment and retention of social workers. This will be built upon particularly in the areas highlighted in the Munro review around continuous and professional development.

### Strategic approach to funding

This plan will be delivered at a time of significant structural changes within the Children's Services environment and severe financial constraints. Resources will need to be managed more effectively to make sure this plan is delivered.

Agencies will work together to find ways of re-shaping services and to make sure that the resources are directed to the priority areas.

As a Children's Trust in Hounslow, we need to address some strategic funding issues including: joint procurement and the devolvement of budgets to locality teams.

In 2010 Children's Services at LB Hounslow began an ambitious savings and transformation programme, linking in with a number of corporate –wide projects aimed at: improving customer access, rationalising support and back office functions, reducing property assets and procurement costs, reviewing fees and charges and ensuring our commissioning processes for the future are cost effective. This process is just the start of a four year savings programme in response to the government's spending review.

## Information Systems

The formation of Children's Services has changed the way in which councils and their partners deliver services to children and this will continue to evolve. Modern, well-maintained, adaptable and accessible information systems are vital to delivering efficient and effective services to children. In Hounslow, we are working towards storing data in key modern and appropriate systems that will enable us to have up to date and accurate information on the children we are working with to assist us in delivering the best service to children, parents and carers. They will help us in reaching our stated objectives and measuring our performance in delivering those services.

We aim to reduce the total number of systems, ensuring that data is not needlessly duplicated and that the information across systems meets the same standards of quality and integrity. We aim to simplify the way we are able to engage with both the public, other Council Departments, Central Government, as well as local and national partners. We are working towards collecting data once and using it many times, but ensuring that the information is always safe and accessed only by those who have the right to see it.

We are developing standard ways of working, which will ensure that systems are appropriate to the needs of both children, parents and carers and to those who are working with them, and which meet the targets set by Central Government. We are working with all other Authorities in England to ensure that every child receives the universal services to which they are entitled and that the key information systems we have in Hounslow meet the needs of the modern world. Key projects for Hounslow in this area are implementation of the TRIO project (Transforming Recording and

Improving Outcomes) which will replace the current social care system, provide an enhanced early intervention service and support a more efficient transfer of child information between services. In addition five education projects are being delivered as part of a Departmental programme to bring the EMS One business critical system into a fit for purpose state that is once again supported by the supplier, this will provide the platform for this system to link into the TRIO system. These are all tools which enhance information sharing and practice standards across agencies.

## Monitoring and Reviewing Performance

### How do we know we are improving outcomes for children and young people in the Borough?

#### Performance Management

Performance management is a term used to describe the process by which we define what we are seeking to achieve and track our progress towards our objectives, in order to ensure they are being delivered. It means basing our priorities for children and young people on sound evidence, knowing what outcomes need to be improved, regularly checking whether these improvements are being achieved, and taking corrective action where we are not doing as well as we could. Strong performance management arrangements are therefore critical to ensuring that the commitments set out in this plan are realised.

#### Hounslow Children's Trust Board

Hounslow's Children's Trust Board brings together key partners delivering services to children and young people in the borough, to focus on improving outcomes for the young population.

The Children's Trust Board will play an imperative important role in ensuring the effective monitoring of actions and targets set out in the plan. The Children's Trust Board will receive management information reports from the three Locality Based Sub-Groups on a quarterly basis and at any other time on an exceptional basis.

Each of the partner organisations represented on the Board has its own ways of managing performance. A key early task for the Trust

is to update the way all partners are involved in the process of monitoring progress of the plan. This will take into account the national performance improvement cycle for Children's Services, including external assessment, and will be linked to the Council's own arrangements for performance management.

#### Implementation Plan

In this plan, we have identified the actions that will be taken at a strategic level to improve outcomes for children and young people. In some cases, delivery of these actions is the responsibility of one agency; others will need to be taken forward collectively by several partners. In order to ensure that this happens and that all partners are clear about their respective responsibilities, an implementation plan will be developed. This will identify key milestones for each action, named responsible officers and timescales. The plan will be supported by a range of more detailed operational service plans at a team or service level, both within the Council and partner organisations. It is important to ensure that these plans are clearly linked to the Children and Young People's Plan and that it drives business planning in organisations. In this way, we can ensure that the priorities and actions in this plan are filtering into the work plans of teams and ultimately individual members of staff.

#### Performance Targets

For each of the priorities in the plan we have identified key outcome measures, together with targets for improvement, which have been drawn from a range of sources. These performance indicators will need to evolve over time to ensure that the impact of activities on outcomes is being measured in the most effective and accurate way. The performance indicators will therefore be subject to review.

Targets, particularly those set for the longer term, may also need to change and will therefore be reviewed at least annually. The Children's Trust Board will monitor the outcome measures on a regular basis and part of its role will be to challenge the rate of progress that is being achieved. Key measures will also be reported to the Council's Executive as part of the corporate performance monitoring process. The monitoring process will also include a review of actions and milestones. The Board will retain overall responsibility for monitoring the plan and identifying significant issues or concerns for action.

Aside from the Children's Trust Board, the following bodies within the Council will also have a major role in the monitoring and evaluation process:

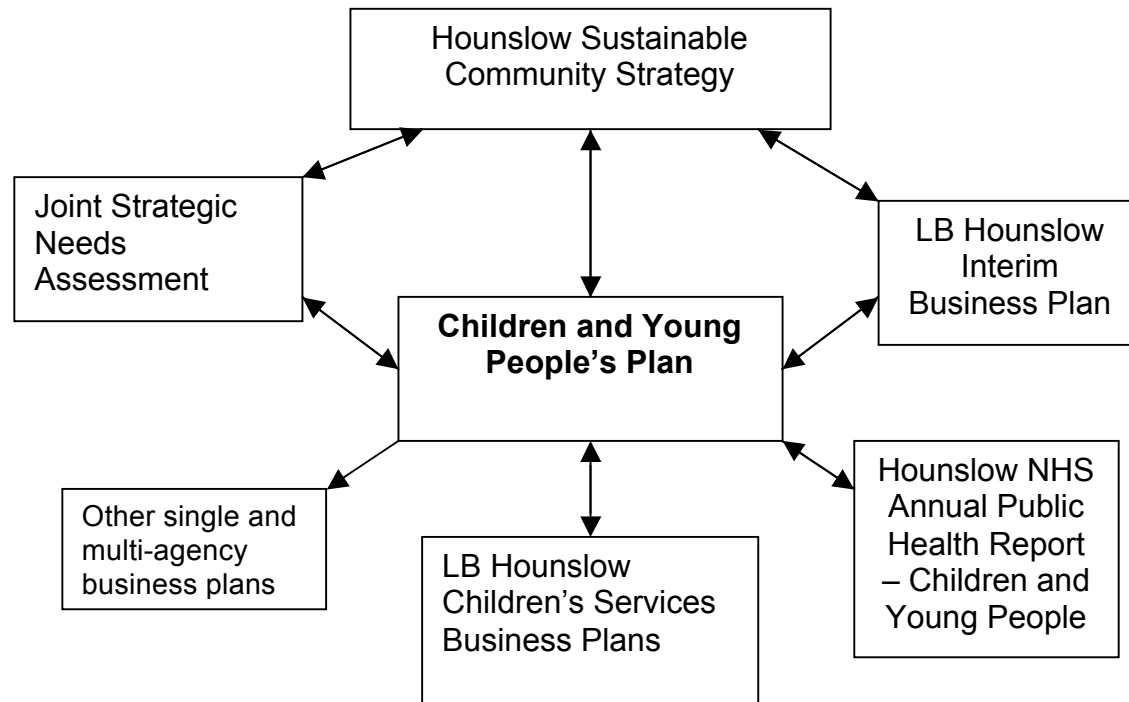
- The Council's Executive
- Children and Young People Scrutiny Panel
- Local Strategic Partnership

Additional monitoring and reporting will take place at an individual agency level. Mechanisms will also be developed to ensure that children and young people have a role in the monitoring process and steps will be taken to involve children and young people.

## Related Plans and Strategies

This plan is one of a number of plans and strategies that are part of a framework designed to deliver services to children and young people across Hounslow. Some of the plans in this framework are specifically about children and young people and others are more general plans from the Council and partner agencies.

The priorities for children and young people within this plan are directly linked to and support the objectives that are set out in the more over-arching Council and partnership plans, such as the Sustainable Community Strategy, which relate to the whole community. We have summarised the linkages between these plans in the diagram below.



**Our Vision and Long Term Outcomes for Hounslow**

**Leadership**

**We will live in a borough where people and families enjoy living and choose to stay throughout their lives**

**We will take coordinated action as partners to tackle the key local challenges which affect us all.**

**We will deliver local public services through seamless, responsive, efficient partnerships**

**People:**

**We will live in a borough safe from crime, disorder and danger**

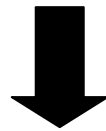
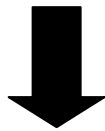
**We will be active citizens, involved in volunteering and engaged in our strong, vibrant and united community**

**We will live healthier, more independent lives**

**We will have tackled inequalities and improved the life chances for vulnerable people**

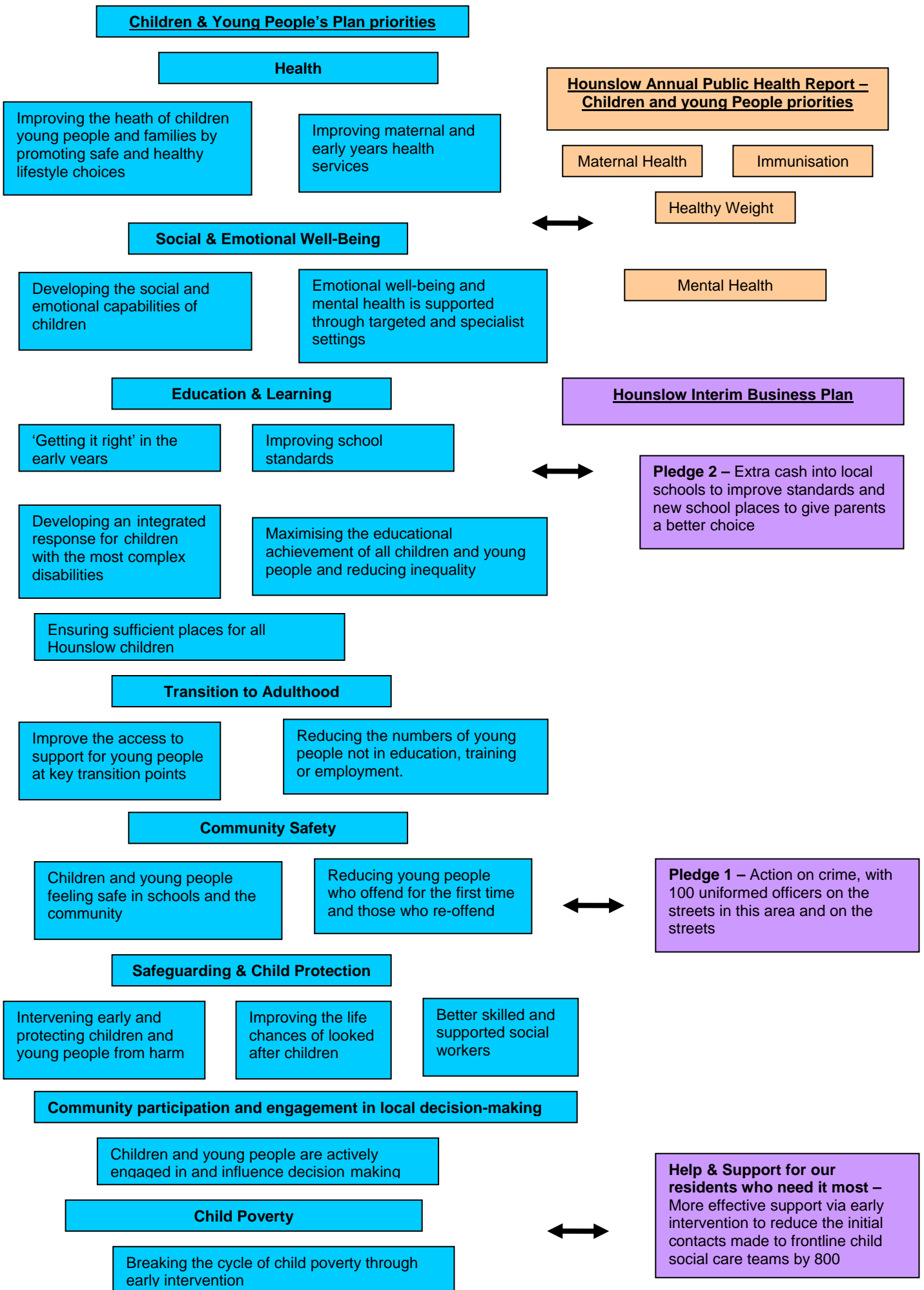
**Our children will have the best start in life, growing into confident individuals and responsible citizens**

**Our children will have the best start in life, growing into confident individuals and responsible citizens**



- We will ensure that services to children in early years settings are targeted, evidence based and have measurable outcomes.
- We will support and challenge schools as appropriate to continue and increase the number deemed excellent
- We will ensure the provision of sufficient high quality school places for all children using an inclusive model for those with special educational needs as well as expanding specialist provision
- Reducing the numbers of young people not in education, training or employment
- We will address the issue of child poverty through appropriate and targeted interventions to support families
- We will work in partnership with all agencies to offer early help to families with multiple problems intervening at the right time to minimise the likelihood of escalation to more serious difficulties





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Please **[www.hounslow.gov.uk](http://www.hounslow.gov.uk)** for further information and an Executive Summary of the Plan.

If you require this plan in an alternative format please contact: Tel: **020 8583 2593**

email: **[childrens.ppu@hounslow.gov.uk](mailto:childrens.ppu@hounslow.gov.uk)**