

Children and Young People's Plan 2014-2017 (extended to cover 2017-2018)

YR 4 Review 2017 – 2018 on delivery of progress made against the priority headings

RAG rating red/amber/green

How to use a RAG Status Report

Report only on key areas of performance. For example, overall progress, performance, budget, trends and scope. Add in supporting commentary but not in too much detail.

Red

- There are significant issues with the sub priority.
- The priority requires significant action to meet outcomes. The issue cannot be handled solely by the service manager or team.
- One or more aspects of project viability — time, cost, scope — exceed thresholds set by the project board.

Amber

- The priority requires action to meet outcomes. The issue can be handled solely by the service manager or team.
- One or more aspect of sub priority — time, cost, scope — is at risk of not being met.
- Action is taken to resolve the problem or a decision made to watch the situation with a clear timescale

Green

- The sub priority outcomes will be met.
- All aspects of viability time, cost, scope, are within thresholds.
- No action is needed

CYPP Priority Group - Healthy Weight Strategy Group
Priority lead – Denice Burton

Outcome

- All children and young people are a Healthy Weight

Key Objectives in CYPP

- Parents/carers and young people are able to achieve a healthy weight
- Increase participation in physical activity and sport
- Reduce obesogenic environments
- Increase cycling for transport and leisure

Progress Report

Performance against outcome measures/indicator:

RAG rating for the year 2017-2018

RAG

Infant Feeding - 6-8 week breastfeeding rates

There have been data quality issues that have emerged following the transition to Virgin Care. The entire 16/17 data was resubmitted nationally for the 6-8 week reviews in Qtr 1 but did not meet coverage data requirements so was not reported nationally. Significant work has been undertaken within the teams and the coverage rate for breastfeeding data is now improved and means that the data can now be reported nationally. Coverage rate for the whole 2017/18 year is 93% but it is expected to be 95%

Breastfeeding rates are:

- Qtr 1 60%
- Qtr 2 59%
- Qtr 3 57%
- Qtr 4 60%

Please note final published figures are not due until July 25th

By Locality

Somer Valley	48%
Keynsham /Chew	62%
Bath East	68%
Bath West	66%
Bath Central	55%

Please note these figures do not take into account the final adjusted year end update

Number of trained active peer supporters

Qtr 1	24
Qtr 2	14
Qtr 3	14
Qtr 4	3

NCMP published results for B&NES

In 2016/17 1,829 Reception Year children were measured in B&NES schools - a **participation rate** of 98.5% (34th out of 150 English local authorities, with 1st being the local authority with the highest participation rate). In 2016/17 1,633 Year 6 children were measured in B&NES schools - a participation rate of 94.8% (81st out of 150 English local authorities). The participation rates are both higher compared to 2015/16 (96.6% for Reception Year and 93.0% in 2015/16).

NCMP published results for B&NES in 2016/17 (based on those measure in B&NES schools):

- 23.8% of **Reception aged children (4 to 5 years old)** in B&NES are classified as having an excess weight, i.e. either overweight or obese (compared to 22.6% across England). 8.8% of Reception aged children in B&NES are classified as obese (compared to 9.6% across England).
- 27.7% of **Year 6 aged children (10 to 11 years old)** in B&NES are classified as having an excess weight, i.e. either overweight or obese (compared to 34.2% across England). 13.8% of Year 6 aged children in B&NES are classified as obese (compared to 20.0% across England).
- **Trends in childhood unhealthy weight** - including overweight and obesity - have been relatively static since the national measurement programme began in 2006/07, i.e. there has been no long-term significant upward or downward shift. This is in accordance with national findings that

demonstrate prevalence rates of overweight and obesity may have stabilised between 2004 and 2013.

- **Age** is a significant factor in the levels of obesity among children in B&NES, i.e. increasing with age.

Further analysis in Q4 using power BI has identified:

- a gender gap opening up in Year 6, with proportionately more boys than girls being classified as obese (or very overweight);
- A wide socio-economic (deprivation) gap in the levels obesity (very overweight) amongst Year 6 boys AND girls

In summary, children are starting school relatively heavy at an age when their diets are under parental control as they will ever be and although we benchmark well against other areas in absolute terms this is a big problem in the making when almost 3 in 10 children leave primary school overweight... and many will face a lifelong challenge to then gain and maintain a healthy weight

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SHEU - The Child Health-Related Behaviour Survey 2017 - key findings

Completed by 12/13 Secondary schools at Easter 2017 and 36 Primary schools in July 2017. Findings were disseminated to a wide range of partners, including the Healthy Weight Strategy Group. Healthy weight continues to be a priority area, although there have been some encouraging improvements in food choices, body image and physical activity levels in some groups.

Primary (years 4 & 6)

- Significantly more pupils; 41% in 2017 compared with 39% in 2015 reported that they ate at least 5 portions of fruit or vegetables the day before the survey, although levels of pupils skipping breakfast are higher than national figures remaining the same as last year at 8%.
- Although there has been a significant decrease from 2015 in the more intensive physical activity (41% to 36%) and the percentage of primary school pupils who reported walking

to school the day before the survey (52% to 45%); activity levels remain high. More pupils reported that they were active for at least 60 minutes on five days or more in the week before the survey, with 65% boys compared with 58% girls.

- Significantly more pupils are happy with their weight as it is, 73% in 2017 compared with 70% in 2015.
- Self-reported levels of self-esteem are significantly lower than in 2015 with 43% of boys and 35% of girls reporting high self-esteem, although levels in B&NES remain higher than national figures.

Secondary (years 8 & 10)

- Activity levels increased from 2015 with significantly more pupils responded that they were active for at least 60 minutes on three or more days in the week before the survey (83% compared with 79%) and a significant increase in the numbers of pupils being physically active after school. More pupils also reported that they enjoy physical activities 'quite a lot' or 'a lot'.
- Significantly more pupils reported to be happy with their weight; 52% in 2017 compared with 45% in 2015 and significantly less pupils reported to want to lose; 41% in 2017 compared with 47% in 2015 (although it would appear that not this many need too).
- Fruit and vegetable consumption significantly increased from 2015 and significantly fewer pupils responded that they didn't eat any lunch on the day before the survey.
- Significantly more pupils reported in 2017 that they found it hard to concentrate at school due to feeling tired or sleepy, with higher than national levels of pupils in B&NES skipping breakfast; especially girls.

Pupils reporting they receive school meals, or have done in the last 6 years have poorer lifestyles and lower self esteem than pupils who say they don't.

Performance against action plans/milestones

Objective 1 - Parents/carers and young people are able to achieve a healthy weight

Health Visiting and Children's Centres (0-5 services):

- An Infant Feeding Lead was appointed in Quarter 1 who delivered refreshed UNICEF Baby Friendly training to all Health visitors and Childrens Centre Staff to prepare all 0-5 services for a joint UNICEF assessment in May 2018. This is the first time children's centre services have been working towards BFI accreditation.
- There were on average 531 attendances by infants attending Baby Feeding Hubs (per quarter) across B&NES, where mothers will have received support from Health visitors, children centre staff, Peer supporters and other women. Issues discussed will have included mental health, feeding issues and oral health. This is a reduction from the previous year when the attendances were 927

School Nursing

- Virgin Care are working on healthy weight service review and were planning to pilot a Primary SHINE in targeted (school nurse plus) primary schools. This did not progress as planned
 - School nurses deliver a healthy weight intervention to young people who are referred via NCMP, referred in other ways (e.g. GPs, schools, parents etc.) or those that attend 'drop in' for help with unhealthy weight or are picked up when doing the school nurse assessment for another reason.
- Since April 17 there have been
 - 48 contacts for Universal Plus healthy weight intervention i.e. a specific intervention
 - 156 contacts following NCMP or at drop in or booked appointments were overweight was discussed
 - 178 contacts following NCMP or at drop in or booked appointments were underweight was discussed(. Please note that number of contacts does not reflect the number of children as there may be multiple contacts with each person.)
- Oral Health, health promotion, in targeted (School nurse plus) primary schools where

<p>school nurses are talking about 'hidden sugars' and using a 'sugar shockers' board in the playground.</p>	
<p>The Health in Pregnancy Service The service has achieved positive results. The SHINE model is no longer in use. The team have developed a more flexible, woman centred programme which is delivered flexibly over an average of 6 sessions throughout pregnancy</p> <p>1706 total booked in year</p> <p>Healthy weight 336 women with BMI 30m or above referred 306 eligible for service 196 women with a BMI 30+ engaged with service [64%]</p> <p>Outcomes [for all women seen with full data sets from start of service]:</p> <p>Number of all women supported by HIPS where weight gain in pregnancy is within the recommended thresholds 71.38%</p>	
<p>0-19 services / Childrens weight management services</p> <p>Courses delivered in 17/18</p> <ul style="list-style-type: none"> • 4 HENRY courses for 32 parents with 75% completers • 6 Parent Cook it courses for 37 parents with 59% completers • 7 Family Cook it courses for 29 parents with 76% completers • 38 Young People were referred to the bespoke 1-1 programme – mainly referrals came from GPs <p>National Child Measurement programme</p> <ul style="list-style-type: none"> • 2017/18 programme –Year 6 pupils are now being weighed and measured during Autumn/Winter and Reception during Spring/Summer 	

- The timing of the Year 6 weighing and measuring has been changed to earlier in the year to enable an intervention to be offered prior to transition to year 7.
- Schools have received individual schools NCMP result letters identifying the percentage of children at school above a healthy weight, compared with the national & B&NES average and are encouraged to support healthy weight through a whole school approach and are signposted to the DPH Award.
- As a trial this year, the results letter does not have the weight category i.e. we now don't state whether the child is overweight, underweight, healthy, or very overweight. This has been replaced with the child's BMI centile and a graph on the reverse of the letter. The parents can then find out for themselves which is the correct weight category for their child. This year the school nurses have not been making proactive phone calls to parents of children in the very overweight category before the results letter is sent. [It has been agreed by the Health Weight Strategy group that these letters will be used for the 18/19 NCMP programme.](#)
- 218 children were identified as underweight / very overweight as part of the 16/17 NCMP programme. However only a small number were referred into the Healthy Lifestyle Service. Virgin Care delivers both services and this process of notification from NCMP (school nursing) to children healthy weight services will be reviewed as part of the children's weight review. The Children's weight management programme, is still under review by Virgin Care, focusing on a Universal offer, Universal plus and Universal Partnership plus offer.
- There have been no formal complaints this year. There has been a slight increase in the number of families declining the programme.

Director of Public Health Award (see also objective 2)

- On April 1st 2017 the new charging structure for the DPH Award began. Both schools and EY setting are now charged an annual subscription to take part. Subscription has been introduced for the first time to EY settings and increased for schools. Schools and Settings can sign up at any time during the subscription year.
- Between April 2017 and March 2018 , 25 settings (15 schools and 10 EY settings)

subscribed to the DPH Award

- Early October 2017 Award group saw 11 settings (4 schools, 7 EY settings) achieve at least one certificate. The March Award group saw 9 schools and 4 EY settings achieve certificates, making 24 settings across the year.
- A review of DPHA began in August 2017 in light of budgetary savings required. A number of models were considered and further development of the selected model for the future of the programme is underway
- The DPHA supported the recruitment of Sugar Smart schools
- Developing a mentally healthy school' training was delivered in October attended by 9 delegates from B&NES schools.
- The Healthy School Rating scheme has not been launched (June election has delayed procurement and development nationally).

Sugar Smart Campaign

B&NES Council launched a local sugar smart campaign to raise awareness of the amounts of hidden sugars in food and drinks and to support people to make healthier choices. The following activities have been delivered since launching in June:

- 68 organisations have signed up to the campaign and pledged to take action on sugar including educational settings, leisure settings and health organisations.
- A total of 35 Primary Schools, 4 Secondary Schools , 2 Universities, 1 College, and 18 Early Years Settings have signed up to the campaign participating in a minimum of 4 Sugar Smart 'pledges' to make changes to the food environment to support healthier eating and to communicate campaign messages through the involvement of parents and careers and children and young people.
- Age specific resources have been developed age to show families where sugar is hidden in food and drinks, demonstrating how this can easily add up across the day and exceed the maximum daily amount
- For each of the 'pledges' settings can take part in, 'top tips' and ideas sheets have been

produced to help support a whole setting approach to Sugar Smart including working with Parent Teacher Associations.

- Sugar Smart workshops were held as part of the primary and secondary parliaments (February and June 2018).
- 18 sugar smart events have been held reaching over 5000 people. The majority of these events have targeted families, children and young people and Virgin Care Wellness Service have provided interactive cooking activities where possible.
- Sugar smart displays have been held in public settings such as shop windows, libraries and GP surgeries and 35 pharmacies have been invited to take part in the campaign during February.
- 2 sugar smart social media accounts (facebook and twitter) have been set up to increase family engagement with the campaign. A partnership with local media, the Bath Chronicle, has helped to increase campaign profile.
- An article was included within council Together Magazine, highlighting the work of Farmborough School carried out on the Sugar Smart Campaign which contributed to receiving the Director of Public Health Award.
- A small awards grant of £1800 has opened in Westfield and Radstock to fund community based Sugar Smart activities and this will be supported by future recruitment of Ambassadors and training of Ambassadors to support the campaign
- A Sugar Smart survey was carried out and a total of 233 completed the survey which provided some useful insight to inform the local campaign. The survey showed clearly that the majority of people 80% were very concerned or concerned about added sugar in food and drink. In particular respondents stated that they were concerned about the effects of sugar on weight (28%) closely followed by dental health (25%) and diabetes (25%). The majority of respondents felt that action should be taken locally, by asking schools to take action to limit sugary items being sold in schools (83% strongly agree), asking businesses and organisations to make healthy food and drink options more affordable (79% strongly agree) and asking businesses and organisations to provide fewer price promotions on high sugar foods and more on healthier foods (77% strongly agree).

Objective 2 : Increase participation in physical activity and sport

DPH award / School sports partnership

- 34 schools have been supported to deliver *Move a Mile* & developing Daily physical activity opportunities across the school day.
- Active Solutions intervention linking physical activity and mental health/resilience now available for schools to buy in as part of Healthy outcomes Certificate. The Active Solutions interventions has been piloted in 3 settings & this will be extended further next academic year.
- Learning Outside network continuing to be facilitated by DPHA team. Bathscape attended the summer meeting to gather views and information from a number of schools. The Spring Challenge was completed by 9 schools who got over 1500 children outside for learning during the challenge week in March. Clear links between learning outside and moderate to vigorous physical activity.
- Working to make schools are aware of PE and Sport Premium funding changes for schools. Increased funding due to the Sugar Levy introduced by the Government through the Childhood Obesity Plan. From September 2017, the premium has been doubled each primary school will receive £16k plus £10 per pupil per year. The SSP delivered a PE subject leader workshop to brief primary schools on the effective use of the Sports Premium linked to the 5 indicators that schools need to report against.
- Healthy Pupils Capital Funding guidance was disseminated to responsible bodies in March 2018. This capital funding is for schools to use to support projects for reducing childhood obesity. This could include refurbishing sports pitches and spaces etc.

Sport and Active Lifestyles Team

- School's Outdoor Activity Pilot is running at Entry Hill. 70 children attending on both

days and doing various outdoor activities (zip wire, tree climbing etc).

- Working with parks dept on joint initiative of stamp around in parks.
www.bathnes.gov.uk/playfulparks Spooky Stamp Around Event took place in October Half Term. A temporary trail was set up in the Great Dell (in Royal Victoria Park, Bath) with activities based around Temple of Minerva. Over 100 families participated. Spring Stamp Around Event took place in Keynsham Memorial Park in March to officially launch the initiative now there are over 50 stamp locations across B&NES, including many under-used play areas and open spaces. This event will be repeated in July 2018.
- Junior park run 2K (every Sunday) in Odd Down for 4 – 14 year olds.
- Level 1 Bikeability training is actively promoted to all B&NES schools and is currently booked in 3 schools as well as 3 holiday courses.
- Learn to ride training is also promoted to children of any age.

Bathscape

Key activity was consulting and planning for Delivery Phase, for 2018/19 and beyond with specific projects aimed at getting children more active as follows:

- Family nature day at Entry Hill (August 2017) attended by 100 people (mainly families from local area) – outdoor activities.
- Walking Festival September – which included a couple of walks aimed at children/families.
- Bioblitz schools day at Bushey Norwood (June 2017) – 160 school children, outdoor activities (not sure about weight loss angle, but certainly encouraging outdoor play).

Wesport

- Satellite Clubs is a national programme that Wesport are delivering across WofE. Focus on inactive 14 – 19 year olds. Main focus is deprived wards and hard to reach young people.

Objective 3 : Reduce obesogenic environments

Local food partnership Actions:

- **Developing a planning policy approach for the control of Fast Food Takeaways**
An evidence base has been collated to inform a local planning policy approach to control the concentration and clustering of fast food takeaways and their proximity to schools / youth settings. Policy options will be consulted on in Spring 2018 and will likely include the following; implementation of a B&NES wide fast food takeaway policy, introduction of ward specific policies or no policies will be introduced.
- **West of England Food Procurement Network** The West of England Food Procurement Group supports a wide range of public sector organisations to procure and provide healthy and sustainable food. Both local universities are active members of the group and are working to improve their food offer. The group is planning a second food procurement and catering conference on the 15th March to further engage multiple local organisations with healthier and more sustainable catering and procurement.

Leisure services:

- The leisure areas of the sport centre in Bath are now fully open and have been well received. Soft Play and Bowling opened at the end of October 2017. Usage of the bowling has been well over expected targets.
- After successfully piloting some small scale sessions in December, the new trampoline park opened its doors to the general public in early January. January also saw the start of the trial of our “Extreme Air” fitness class, which take place in the new trampoline park at Bath Sports and Leisure Centre. New toddler sessions have been added the programme along with an expansion of the junior gym programme.
- In March GLL held a private trampoline session for students of Project Search, and organisation that supports young adults with a range of learning difficulties to get work experience. One student with Project Search, is currently undertaking a placement at

Bath Sports and Leisure Centre and has become a hard working member of the team.

- Following discussions with specialist occupational therapists from Virgin Care, GLL also held a trampoline session for children with autism and learning difficulties in March. The session which was attended by around 20 people was very popular, and further talks will take place about a regular session.
- Bath Sports and Leisure Centre opened its new ten pin bowling alleys in November 2017. Peak times are very well utilised with a mix of family and social groups using the facility.
- The swimming pools and new wet changing areas will be open to the public in July.

B&NES Food Forum:

- B&NES Catering Service promoted the Sugar Smart campaign during Nationals School Meals Week and worked to reduce sugar provided in the school catering menu by 23% through reformulating recipes and also reducing portion sizes to be in line with the School Food Standards.
- B&NES central catering service will no longer be operating after 31st August 2018 and support has been provided to schools in seeking alternative suppliers for school meals and emphasising the importance of ensuring nutritional quality/ seasonality of produce and providing a hot meal especially to Free School Meal pupils as opposed to a packed lunch.
- A food procurement and catering session was run for schools in November 2017 – highlighting the importance of hot school meals for pupil premium children, links to health and well-being and attainment and schools statutory requirements (Ofsted, School food standards). There have been concerns over feasibility of schools without production kitchens on site finding alternative providers of school meals and reverting due to financial pressure to provide packed lunches to pupil premium pupils, which are less varied nutritionally. Cross council work to support schools around catering contract requirements and nutritional standards will need to be prioritised between March 2018-

September 2018.

- The number of school meal suppliers in B&NES will expand and emphasis will need to be put on schools to ensure compliancy to the School Food Standards and the importance of the school governors role here, will need to be highlighted. The role of the Food Forum needs to be reviewed within B&NES during 18/19.
- Supported Make Lunch Bath with promotion to staff and also advising on compliancy with food standards and meeting nutritional needs for children. Make lunch Bath is a targeted free holiday lunch club, delivered in each school half term from St Michaels Junior Bath and Southdown Methodist Centre.

Joint Spatial Plan – Transport Planning.

- WoE planning for housing growth; the unitary LAs have been working together to produce the draft JSP. It will go to the West of England Combined Authorities (WECA) Board and then to each LA Board/Cabinet for approval and then public consultation. It includes transport infrastructure and an element of active travel planning and WoE are looking at green infrastructure plan.

Air quality/air quality management.

- The Bath Action Plan is being refreshed; looking at a school's initiative (picking one of the air quality areas for pilot - focussing on schools approach to how pupils travel to schools; using pollution meters; encouraging walking/cycling to school gates.
- Clean Air Schools project pilot with St Andrew's CofE Primary School almost complete. Plan in place to develop a Clean Air Schools pack and disseminate during 2018-19 autumn term.

Objective 4 : Increase cycling for transport and leisure

Active TED group

<ul style="list-style-type: none"> • Commissioned Integrated Transport Planning Consultancy to develop an Active Travel Development Policy with a scoring matrix which has been agreed by the two cabinet members. • Highways have approx. 85 potential projects to deliver on; using the scoring matrix to produce a priority list .The policy was taken to the Access Forum (covers walking, cycling, disability issues etc) to explain this is how we are going to move forward with programmes. • Working on expression of interest for the Cycling & Walking Infrastructure Plan (WoE approach). • Cabinet Member for Transport has changed and is now Mark Shelford. • Public Realm Projects continues: way finding in city centre; encouraging people to walk/cycle; Bath Quay project on board; business districts want better promotion for area. 	
<p>Cross Cutting Theme - Workforce development</p> <ul style="list-style-type: none"> • 2 HENRY core training events were planned for October 2017 and January 2018. One course was cancelled due to bad weather in January 2018 • It has been identified that many health visitors received HENRY training over 2 years ago. They will be encouraged to refresh their skills in 2018.HENRY training has been recommissioned for 2018-19. 	

Children and Young People are Healthy
Priority lead – Denice Burton
CYPP Priority Group - Children and Young people substance misuse

CYPP 2014-2017 extended to cover 2017-2018

Outcome : All children and young people are free from misuse of substances

Key Objectives :

- Improved access to treatment and support for parents and carers
- Children and young people are supported to minimize /stop alcohol /substance misuse
- Improve intelligence re CYP alcohol use
- Increase knowledge and skills of children's workforce / parents and carers to identify , signpost and refer and to talk to young people about drugs and alcohol
- Increase in smoke free environments
- Reduction in exposure to second hand smoke
- Increase in knowledge and awareness in young people
- Reduction in children and Young People smoking

RAG rating for the year 2017-2018

RAG

<p>Alcohol admissions under 18s</p> <p>Alcohol-Specific Hospital Admissions for under 18 yr olds in B&NES are reducing, in line with national trends, but the latest data shows that B&NES admission rate is still significantly worse than the England average (B&NES has 50.8 admissions per 100,000 population compared to an England average of 34.2 per 100,000 pop). Actual numbers of admissions are low (53 over a 3 yr period).</p>	
<p>Smoking at time of delivery</p> <p>During 16/17 B&NES rates of Smoking at Time of Delivery (SATOD) were similar to 15/16 levels at 7.1% of pregnant women smoking. This equates to 144 women and is the lowest rate in the South West, and is significantly lower than the England average of 10.7%. The rate of smoking at time of delivery for 17/18 year to date (to December 2017) is 7.5%.</p>	
<p>Headlines from the Children’s School Health Survey 2017</p> <ul style="list-style-type: none"> • Alcohol <p>Primary Year 6</p> <p>Compared to 2015, reported drinking of alcohol (a whole drink, not just a sip) in Yr 6 Primary School pupils had stayed at similar levels. In 2015, 91% of Yr 6 pupils said they had never had an alcoholic drink and in 2017 this was 89%, which is not significantly different.</p> <p>Secondary Year 10</p> <p>When asked if they had drunk alcohol in the last 7 days, 23% of boys and 22% of girls in Year 10 said they had. These figures are similar to 2015 levels.</p> <p>Secondary Year 12</p> <p>In Year 12, 47% of boys and 49% of girls report drinking in the last 7 days. Of those Yr 12’s who had drunk alcohol in last 7 days, 8% of boys and 3% of girls had drunk over 14 units (the recommended adult</p>	

weekly limit).

43% of Yr12 pupils reported getting drunk in the last 4 weeks. This is significantly more than in 2015, where 31% reported this.

- **Smoking**

Regular smoking (at least one cigarette per week) is low amongst B&NES Secondary school pupils, but rises for girls in particular, in Year 12 (see table below)

Regular smoking 2017

Year	Boys	Girls
8	1%	1%
10	4%	4%
12	4%	10%

There has been a significant reduction in the percentage of pupils (Yr8 and Yr10 combined) reporting that people regularly smoke around them (e.g. in the home or car) from 20% in 2015 to 17% in 2017.

Illegal Tobacco

In Year 8, 13% of boys and 7% of girls report being offered cheap or foreign tobacco. This rises to 20% and 17% respectively in Year 10. By year 12, 24% of pupils report being offered cheap or foreign tobacco.

E-cigarettes

E-cigarette experimentation has risen significantly amongst young people, with 22% of pupils (YR8 and YR10 combined) saying they have used them 'at least once'. At year 8, 8% of boys and 6% of girls say they have tried them 'more than once'. This rises in Yr10 with 17% of boys and 13% of girls reporting

<p>trying e-cigarettes more than once.</p> <ul style="list-style-type: none"> • Drugs <p>Year 10</p> <p>In Year 10, 13% of pupils report having taken illegal drugs/ new psychoactive substances. Cannabis is the drug most commonly reported as used followed by NOS Nitrous Oxide gas. Cannabis usage rises as pupils progress through school with boys more likely to report usage. In Year 10, 3.5% of pupils report taking cannabis, rising to 11% in Yr 12.</p> <p>Year 12</p> <p>From 2015 there was a significant increase in pupils in Yr 12 reporting being offered cannabis, from 37% in 2015 to 58% in 2017. There was also a significant increase in Yr 12 pupils reporting that they had taken at least one drug (from those listed) in the past month from 3% in 2015 to 12% in 2017.</p> <p>Inequalities</p> <p>In year 8 pupils from an ethnic minority background were significantly more likely to report trying smoking, being offered drugs and taking drugs.</p> <p>In year 10, pupils who were young carers, from a single parent family, had a disability, long term condition or special needs were significantly more likely to have ever tried smoking. Young carers were also more likely to report drinking in the last week.</p>	
<p>Performance against action plans/milestones:</p>	
<p>Drug and Alcohol Performance Outcomes:</p> <ul style="list-style-type: none"> • The total number of young people accessing treatment has risen 4% during 16/17 and a further 20% during 17/18 with a total of 144 in treatment with the primary substances of cannabis and alcohol being used which is in line with the national picture • Young People accessing treatment have a range of vulnerabilities. 9/ 11 vulnerabilities recorded 	

are above the national average which reflects an increasing complexity amongst young people in B&NES. For young people with multiple complexities, it is important to have a team around the child, working together. Multi-agency working is very high in B&NES with 94% of young people being worked with in a multi-agency way compared to 60% nationally.

- 97% of young people complete their programme of specialist support compared to 81% nationally. Of those who complete, 0% re-present back into treatment compared to 4% nationally

Drug and Alcohol Performance Wellbeing Outcomes

- All young people who are in treatment complete a Young People's Outcome record (YPOR) which is a national tool to measure outcomes for substance misuse treatment. When young people leave treatment in B&NES they have higher life satisfaction; increased feelings of worthwhileness; increased feelings of happiness and reduced anxiety compared to the national picture.

Support for families and carers of change resistant drinkers

Training for frontline staff in how to support families and carers of treatment resistant drinkers took place in April 2018.

Increase knowledge and skills of children's workforce

Alcohol/Drugs

- Over 50 people took part in a 'Thinking about children's drinking' event in May 2017. Follow on actions and outcomes from the event include:
 - Alcohol lessons & activities for KS3 & 4 developed for schools & youth settings (YR10/11)

- Drugs Standards self-assessment tool for schools developed
- Power point presentation on Schools Health Survey results developed for schools
- School Nursing alcohol screening tool question changed
- Training has taken place at the RUH for nurses on the children's ward including alcohol misuse, CSE and safeguarding
- RUH CAMHS referral form reviewed to include direct referral to Project 28
- Curo staff (including Pathways/Foyer staff) trained in alcohol identification and brief advice and blue light harm reduction approach.
- Development of training session for frontline staff in South West Ambulance Service Trust on alcohol misuse and safeguarding
- Alcohol training included on the Children's workforce training programme for 18/19
- Training delivered to youth service staff in Southside

A screening tool and alcohol resource for midwives has been developed by public health. Midwives will be trained in its usage and recording throughout 18/19.

Project 28

- Workshops have been carried out for Bath college Somer campus focusing on mental health and cannabis, Workshops for young people have been delivered, with young people attending Xanax sessions; three diversionary workshops have also been run.
- Training has taken place for Foster Carers, the Early Help Panel and working arrangements with the new At Risk Team (ART) have all been undertaken.
- Two multiagency drug awareness training days have been delivered
- P28 have participated in a substance misuse forum for 6th formers at Beechen Cliff School
- 'Drugs and the impact on the body' session was delivered to 17 pupils and work done with the Princes Trust.
- A service user Art Exhibition was run on the 17.5.17 for 2 weeks as part of the Fringe festival delivered as part of the healthy relationship work carried out in partnership with Southside family project.

Smoking

- The specialist stop smoking service is working closely with P28 to support young people in treatment to quit smoking.
- Training has been delivered for youth workers and support offered on site in youth centres.
- School nurses have also received further training in supporting young people to quit.
- The Family Nurse Partnership team and health in pregnancy service have received joint training on supporting pregnant women to quit.
- 5 local sports clubs with youth teams have received grants, training and implemented smoke free sports club policies during 17/18
- An illegal tobacco campaign was instigated in Jan 2018 to raise awareness of the dangers of cheap smuggled tobacco in local communities which is linked to organised crime, facilitating young people's smoking and undermining public health efforts to support people to quit. Evaluation of this campaign will report in 18/19.

A core training plan is being designed for the Children's Workforce Training programme 2018. This will include training on:

- Brief interventions on smoking
- E-cigarettes
- Smoke Free Homes
- Stop Smoking Support Services / Referral

Children and Young People are Healthy

All children and young people have good emotional wellbeing and resilience

Priority lead – Denice Burton

Priority group - Mary Kearney-Knowles/The Emotional Health and Wellbeing Strategic Group

RAG rating for the year 2017- 2018 (where relevant)	RAG
<ul style="list-style-type: none">PUBLIC HEALTH in SCHOOLS DPH Award 12 schools and 10 Early Years settings are now signed up to the Award as of September 2017. 25 settings subscribed to the DPH Award during 2017 – 18. Of these, 15 were schools and 10 EY settings. Since late 2017, the DPH award has been under review to make it fit for purpose going forward and taking the Council restructuring into account. The decision has been made to continue with a schools offer, but this will be lighter touch and probably audit based. Schools will be invited to self-evaluate against a series of criteria. Their priorities will be determined by national and local data. The Early Years offer will remain but will also be reconfigured during 2018. Both new programmes will be launched in September 2018.	Green
Mental Health Training National Mental Health First Aid training (MHFA) was announced by Theresa May for all Secondary Schools to have at least one trained teacher by 2020. The first course in B&NES, arranged by MHFA, ran in November 2017 and was attended by 5 Secondary schools. In addition, Public Health has arranged youth MHFA courses to be delivered in B&NES for Primary School staff and other professionals working with children. 3 courses (each of 2 days) have been arranged. In July 2017 Public Health funded the cost of a trainer to become accredited in delivery of Youth Mental	Green

<p>Health First Aid. Three courses have been advertised two of which have now been delivered. Each course is 2 days and priority was given to applications from primary schools and other partners working with children and young people. Each course has 16 participants and places have been oversubscribed.</p>	
<p>SHEU Data SHEU data continues to be used by schools and others to identify health priorities and areas of work. The survey has been recommissioned for 2019.</p>	
<p>Boys in Mind Strategy The Boys in Mind pilot has now been completed culminating in a conference show casing good practice. Plans are in place to sustain the work through linking with other 3rd sector partners.</p> <p>Young men from CAMHS worked with film company Suited and Booted to produce a short film called Letter to Myself. National charity Young Minds are working with interested parties to produce some learning materials that can be used in secondary schools to accompany the film.</p> <p>Workshop sessions for students at Bath College on construction related courses - This resource has now been developed and delivered in Bath College Somer Valley Campus.</p>	
<p>• School Nursing Service</p> <p>FRIENDS session delivered to 11 classes of year 5 children including Fossway Special school. Sessions for academic year 2018-19 in development and agreed with Targeted schools. One to one interventions with individual children (Numbers not available at this time). School nurse contribution to Resilience Hubs at secondary schools. Offer of parent sessions to Targeted schools to support anxiety management.</p>	
<p>• CAMHS SERVICE (OXFORD HEALTH)</p> <p>CAMHS launched online referrals for professionals, young people and their families during Q2. This promotes faster routine referral to CAMHS and also enables young people and their parents to describe their mental health needs.</p> <p>The Mental Health Liaison service for under 18s commenced at the RUH in May 2017 following</p>	

investment by the CCG from CAMHS transformation funds. This new service works closely with the Emergency Department and the Paediatric ward to promote more timely mental health assessments, support to acute care colleagues, psychosocial contribution to clinical discussions and on-site training to acute care staff. The service commenced Monday to Friday 9 – 5 but from Q3 October 2017 with additional funding from Wiltshire CCG runs 9am – 8pm Monday – Friday and 10am and 6pm at the weekends.

During 17/18 waiting times for emergency, urgent and eating disorder referrals were fully compliant with national and local targets.

Routine referrals for specialist CAMHS assessments were below target:

- Within 4 weeks – average 47% (target 90%)
- Within 8 weeks- average 75% (target 95%)
- Within 12 weeks – average 94% (target 95%)

A waiting list improvement plan was implemented at the end of Q2 to address delays in assessment. Q3 data showed significant improvements across all routine waits but these deteriorated again during Q4.

Access to inpatient adolescent beds remains a significant risk due to lack of South West generic and specialist beds e.g. Psychiatric Intensive Care Units, and Eating Disorder beds which offer naso-gastric feeding. Commissioners and OHFT have been involved in intense discussions with NHSE who commission adolescent mental health beds nationally. NHSE have commissioned additional inpatient beds in the South West, including Bristol, and even more are planned to open during 18/19.

- The CCG has, in conjunction with the Local Authority Children’s Services, continued to develop the “local health offer” for children and young people who are eligible for EHC plans, this includes CAMHS input.
- Transitions was identified as an STP (BaNES, Swindon and Wiltshire) priority. In addition to the national CQUIN, the Mental Health Review in BaNES will consider whether services for 18-25 y/o’s are sufficient.
- The new children and young people’s community Eating Disorder Service (TEDS) developed by Oxford Health was launched across the STP in April 2017.
- Self-referral to CAMHS is now established in BaNES.
- On-line support and counselling services continued to be commissioned during 2017/18 from KOOTH.

The local uptake has been excellent. Commissioned face-to-face counselling is available in maintained secondary schools and in the community.

- A specialist mental health service for children and young people was recommissioned across the STP during 2017. A new service delivery model from Oxford Health will commence in April 2018.
- BlueICE (self-harm App for CYP) and HarmLess (a self-harm website for practitioners) were developed and are in use across BaNES.
- Resilience Hubs continued operating in secondary schools in BaNES. A named CAMHS practitioner liaises with each school and provides advice, training and consultation.
- An STP Local Maternity System was created in April 2017 in line with national recommendations. A Maternity Forum was established and has led the development of a Maternity Transformation Plan to support implementation of the “Better Births” recommendations across the STP. This includes better access to perinatal mental health support.
- Phase 2 of the BaNES Adult Mental Health Review is underway and colleagues are invited to input to the various work streams.
- Emotional Health and Well-being has been continued to be a key priority in the CYPP 2018-2021 and an agreed set of outcome measures have been endorsed by the Emotional Health and Well-being Strategy Group

The latest **CAMHS Transformation Plan** 2016/2017 (October 17) was reviewed by the Emotional Health and Wellbeing Strategy Group during 2017/18. The review confirmed that all areas identified have been progressed. The review also shaped the prioritization and allocation of funds for the 2017-2018 CAMHS Transformation Plan. The plan and details of the funding allocation can be found on :

<http://www.bathnes.gov.uk/sites/default/files/sitedocuments/Children-and-Young-People/StrategiesPoliciesPlanning/banes-transformation-plan-oct17v6.docx>

Mental Health was identified as a key strategic priority area across the Bath and North East Somerset, Wiltshire and Swindon (BSW) Sustainable Transformation Partnership in 2017. A draft STP Mental Health Strategic Overview was agreed in March 2018 – this details how the STP will deliver all areas identified in the Future in Mind Report as well as additional local priority areas: one of the key priority areas identified was effective

<p>transitions for young people from CAMHS to adult mental health services. The STP report directly to NHS England on progress against the strategy and the Future in Mind deliverables.</p>	
<p>Preventative Services Commissioning</p> <ul style="list-style-type: none"> • Theraplay (attachment based parent/child support 2-5 year-olds) <p>In this period, 63 children (5 complex cases through Alison Cliffe Associates and 58 through Bright Start Children's Centres) children aged 2-5 years with complex emotional/behavioural needs were supported through Theraplay intervention.</p> <p>CAMHS Transformation funding - £8,500 was allocated to Theraplay through the Emotional Health and Wellbeing Board specifically to support workforce development in 2017-2018.</p> <ul style="list-style-type: none"> • One 4 day Theraplay Institute Introductory Level course - 24 delegates (from B&NES and other local authority areas), • staff in Reception classes trained and able to deliver 10 Sunshine Circle sessions embedded into regular school practice development of a school based 'hub' in Somer Valley for Theraplay in schools • Further development of strategic work in partnership with Bright Start Children's Centres - coordinating information about the delivery of Theraplay across the integrated workforce (including Health, Social Care, Early Years/Children's Centres and the Third Sector). • Therapy launch event in June 2017 attended by service users, professionals from B&NES and other areas and strategic leads. 	
<p>Nurture Outreach Service (delivered by Brighter Futures) in primary schools.</p> <p>This unique locally developed service offers comprehensive support to primary schools throughout Bath and North East Somerset to support and include children presenting with emotional and behavioural issues which pose a barrier their ability to start school at reception.</p> <p>From April – August 2017 the service managed 27 cases entering into the reception year. Of this cohort 96% of children have improved their learning and 100% increased their emotional wellbeing rating.</p> <p>The service also provides supervision for school staff who have been trained to develop skills to better manage vulnerable children and how to adapt the curriculum and environment to support them.</p>	

CAMHS Transformation Fund has contributed to roll out of THRIVE training delivered by Brighter Futures through behaviour and attendance panels. THRIVE equips practitioners with skills to assess children's emotional levels and to adjust learning activities and group learning accordingly. This has been well received by schools attending.

Social Care

The clinical psychologist role (funded via the CAMHS Transformation Plan) within the Local Authority's family placement team provides support to the foster carers of Bath and North East Somerset Council, with the ultimate goal of helping to prevent placement breakdowns. The work consists of four separate streams – consultation work with foster carers; providing training; co-facilitating support groups and direct work with families. A total of 30 carers were referred for individual consultations between: January 2017-December 2017, none of the placements have broken down.

In addition to the core child in need, child protection and children in care planning, Children's Social Care have developed the following services that aim to support parent and carers having the resilience and the ability to care for their children at home and in the community, where possible. These services further enhance and build on families resilience and ability to develop creative solutions to presenting needs and are generally delivered with multi-agency partners

Footprints

- The Footprints service is currently working with 15 families.
- This service works sensitively with parents that have had their children removed from their care through care proceedings.
- We have also referred families that are in care proceedings to the Lighthouse group- this is a metallisation course for our parents. This is a 20 week course that runs on a weekly basis.
- We have 9 families that attend this course.

Family Group Conferences (FGC)

- The FGC service has taken off really well and the FGC co-ordinators are very busy.
- We have had very positive and powerful feedback from families about feeling empowered by the inclusivity of the FGC meetings.
- This is a service we would like to grow going forward into 2018. We are working to embed FGCs within Social Care and encouraging social workers to propose FGCs for most of the families that we are working with.

- The ethos of FGCs sits at the heart of our practice and aims to work with our families rather than doing to or for them. We hope to work towards families having 'one plan' and that this could be their FGC plan that they have produced, (Where appropriate).
- We hope to expand the work of the FGCs by having participation groups with the families that have had an FGC so that we can build upon their feedback to develop the service further.
- As the service continues we need to think about more measurable outcomes and whether our FGCs contribute to safely reducing our CP or LAC figures.
- We are also working towards our FGC service being accredited.

College

We promote good mental and emotional health by:

First Ofsted inspection for Bath College is Good in all areas following a merger and the appointment of a new Principal. One key finding is that:

- Disadvantaged and vulnerable learners, and those with additional needs, receive excellent support and practical assistance to help them overcome the difficulties they face.
 - Bath College has contributed to the Year of MH Programme.
 - Bath College in liaison with The Charlie Waller Memorial Trust have raised awareness of suicide prevention to construction student in May. Tutor training took place at Somer Valley Campus on the 11 April facilitated by Clare Laker. Evaluations of the focussed tutorials will be feedback in due course.
 - The CAMHS Transformation Fund has recently allocated funds for two Wellbeing Advisors (OTR) to work alongside the existing Welfare Teams providing 20 minute listening and support sessions for young people who face serious personal problems or suffer from mental health problems.
 - The CAMHS Hub is working well at the College with frontline staff having access to the Senior MH Practitioner each month for between 1-2 hrs to discuss YP and MH cases and training on YP and Anxiety, Self-Harm and Depression.
 - The College counsellors, welfare officers, safeguarding leads, nurses and the chaplain have delivered stress reduction workshops around emotional support and/or practical support ahead of the exam season, and for those students anxious about moving on to the next phase in their lives. The Wellbeing Festivals in May which focussed on stress reduction were a huge success.
 - Mid-Year data identifies there has been an increase in young men accessing all areas of welfare - 98 percent of those students accessing welfare support have been retained.
 - The College is looking into seeking additional funding for staff attachment aware training/emotional coaching/ mindfulness to even better support young people.

- The College has a new Wellbeing Committee to ensure a whole College approach to MH and has representation on the BANES Youth Justice Board, LSAB, LSCB, CSE, Self-Harm and Suicide Prevention.
- The Students' Union will appoint a MH Officer to represent the interests of students with MH conditions as well as campaigning on relevant issues.
- The Welfare Team continues to work closely with external services such as Project 28, CAMHS and other Services. It also provides the College Counselling Service in partnership with Off the Record, staffed by qualified professionals with links to web based resources, specialist external agencies including GPs & CAMHS. Providing counselling for students around bullying, low self-esteem, bereavement, trauma, phobias, concerns with drugs and alcohol, self-harm, eating difficulties, and anger management.
- The safeguarding team is available and accessible to all staff and students and picks up issues at the earliest opportunity, maximising positive outcomes.
- All learners have an individual progress review. This focus yields information on contributing factors to progress and if the tutor feels wellbeing should be considered they would initiate appropriate sign posting or intervention according to the issue. For example, if learners are suffering exam stress the tutor may arrange a 'mindfulness' session for the group to help improve wellbeing.
- Continuing to be visionary, and carrying out a comprehensive new student induction process, tutorial scheme of work and awareness campaigns of personal development, behaviour and welfare.
- Continues to ensure through student feedback students who experience mental health difficulties receive timely, appropriate support from the College, including access to specialist external support via the NHS or CAMHS where necessary.
- Ensuring student Risk Assessments or Fit to Study Assessments, are carried out in a timely manner, where there are concerns about students' emotional wellbeing and safety.
- Implemented drugs and alcohol misuse focussed tutorials delivered by Project 28, and sexting and sexual consent tutorials to all 16-18s.
- Comprehensive processes around those students with complex needs and EHCPs conducting educational and health needs assessments robustly.
- Ensuring students are given the opportunity to disclose any health needs on their application form, during interview, on their online welfare form or at enrolment.
- Supporting students transitioning to the College from secondary school with pre-existing conditions where young people meet key staff at the College (or within the secondary school setting) i.e. the Specialist Link Tutor or Student Welfare and Participation Manager to receive joined up care once in College.

<ul style="list-style-type: none"> • Delivering mandatory Safeguarding and Prevent training to all staff to know how to effectively refer students who experience mental health difficulties. • Launched the online Peer Mentoring Scheme; students supporting other students around the practicalities of student life where Peer Mentors can signpost students to welfare advice, guidance and support where necessary. • Celebrating other student-led initiatives i.e. the Got ya Back Campaign – River Safety Campaign. • Monitoring and mapping current trends relating to mental health and wellbeing referrals to illustrate any trends around students experiencing self-harm, suicidal thoughts and feelings and other ill health concerns i.e. depression, anxiety, phobias, eating problems, personality disorders. • Collates and uses data effectively to monitor, evaluate and inform the impact and development of its services in this area. • Continue to provide faith and spiritual provision through the College Chaplain and the Sanctuary Prayer and Meditation Rooms. • NB: Schools and College data will be submitted in September 2018 review 	
<p>P4S Virtual School</p> <p>CAMHS Transformation fund £2000 was allocated to the P4S Virtual Schools in order to add to the previous work on attachment awareness in schools. Research indicated the need for those with awareness to attend this. The priority focus for attachment awareness was on de-escalation, emotion coaching and strategies to support children in care and other children when they display symptoms of attachment or trauma difficulties. The £2000 was used to commission Kate Cairns Associates to provide 2-sessions with attendance from a leadership member of every school in BANES, out of authority for training on emotion coaching, strategies to support complex behaviour and ways to change rigid behaviour policies (40-attended each session. Some leadership attended from other schools out of authority even in Wales, where BANES children are educated).</p>	

Children and Young People are Safe
Priority lead – Richard Baldwin
Leigh Zywek

Key Objectives in CYPP 2014-2017 extended to cover 2017-2018

- Interagency co-operation MASH
- CSE/Missing and Domestic Abuse
- Children in care, care leavers and children with SEN are regularly seen by professionals and are supported through transitions

RAG rating for the year 2017-2018

RAG

Performance against action plans/milestones

In addition to the core child in need, child protection and children in care planning, Children’s Social Care have developed the following services that aim to support parent and carers having the resilience and the ability to care for their children at home and in the community, where possible. These services further enhance and build on families resilience and ability to develop creative solutions to presenting needs and are generally delivered with multi-agency partners

Footprints

The Footprints service is currently working with 11 families.
 This service works sensitively with parents that have had their children removed from their care through care proceedings. In the past six months, the service has been commended on two occasions by the judiciary for the quality of its work with parents

MASH

We held a multi-agency review meeting on the work and impact of the MASH in January of this year. This was well attended and provided a positive over-view of the work that is undertaken.
 Agencies have also agreed to dis-band the MASH Board which was over-seeing the strategic development of the MASH, This decision was taken in light of the work being firmly established as business as usual.
 Referrals to the MASH remain steady and the consistency of referrals and understanding of thresholds strong.

<p>Family Group Conferences (FGC) The work of the FGC service continues to develop, with increasing numbers of referrals over the past three months. Work and development of the service continues to be reviewed on a quarterly basis with specialist input from the Family Rights Group. The feed-back from families and practitioners is indicative that the service is now becoming increasingly embedded within planning and practice.</p>	
<p>Improvement Board; Following the Ofsted SIF inspection in May 2017, we took the decision to form an Improvement Board to ensure further and continued progress in order to build upon our rating as “Good”. The board meets on a quarterly basis and focuses on developing practice against the 8 recommendations identified by Ofsted, as well as other areas of development and improvement which emerge over time. Progress has been made in relation to; Re-design of plans Additional training on use of Plans Re-design of some aspects of the Legal Tracking Panel Re-structuring of Duty Team, leading to improvements in the timeliness of Single Assessments Introduction of the new QA/Service Improvement document.</p>	

<p>Children and Young People are Safe Priority lead – Richard Baldwin Workforce Development Report - Lesley Hutchinson/Workforce Strategy group Written by - Jen Russell</p>	
<p>Key Outcome in CYPP 2014-2017</p> <ul style="list-style-type: none"> • Workforce are skilled to meet the safeguarding needs of children and young people from early help through to statutory social care 	
<p>RAG rating for the year 2017-2018 (where relevant)</p>	<p>RAG</p>
<p>Children’s workforce are skilled and knowledgeable to address safeguarding and early help needs of children and young people in Bath and North East Somerset:</p>	

All training topics outlined in the LSCB business plan have been delivered within the training programme either through specific classroom courses, e-learning modules or learning about the issue taking place on an associated course. Additionally within this period presentations on Private Fostering were delivered in the CP schools forum and a workshop was also offered through the training programme. These events were aimed to raise awareness of Private Fostering and the responsibilities attached. Awareness of International Day of Zero Tolerance for Female Genital Mutilation (6th February) was also raised through posters, flyers and information being provided to delegates on all LSCB and LSAB courses in the weeks surrounding the event.

561 delegates have attended LSCB courses within the Oct 2017 – Mar 2018 period, which means an attendance of 1025 delegates across the financial year (excluding PREVENT). Single agency training has also been delivered to 7 organisations within the last six months, totalling 13 within the year (unfortunately one full day session had to be postponed due to weather conditions and one half day was postponed to meet the needs of the agency, both have been rearranged to take place in the next quarter).

The training programme continued to receive positive feedback with delegates recording an increase in confidence levels against learning outcomes and providing positive commentary on course content and the delivery and knowledge of trainers. A fuller evaluation of the programme can be gained through the Annual LSCB Training Report.

That the children's workforce is skilled and knowledgeable in assessing children and families and providing evidence based interventions which have measurable outcomes for children:

A variety of courses have been run throughout this period which focus on developing workers skills within this area, including Solution Focused training, Mental Capacity Act and Critically Curious Conversations Training (facilitated by the police). Additionally a 'Difficult Conversations' workshop was provided which specifically looked at some of the dynamics and conversations held when working with families within complex and child protection situations.

Challenges continue regarding providing appropriate Assessment and Analysis training across the workforce. As shared in Decembers report the two sessions provided in response to specific manager requests gained very low attendance; further courses planned have been placed on hold as it has recently concluded that the additional training identified would not meet the needs of the workforce. Consequently work is currently being undertaken to develop specific workshops and courses informed by the work undertaken by Strategic and Commissioning.

Alongside providing learning on specific interventions, the Children's Workforce Training programme provides courses on Children's Health and Development needs, to help inform work undertaken with families and the assessment process.

293 delegates have attended Children's Workforce Training courses within the Oct 2017 – Mar 2018 period, which means an attendance of 513 delegates across the financial year.

That the children’s workforce are safe in front line practice:

To build upon the findings of Ofsted in relation to this area and to further promote staff resilience and confidence a Safer Lone Working & Break- away course was provided in October as was a bespoke package of supervision training to Children’s Services managers. The supervision course covered the purpose of supervision and the mandatory requirements that need to be understood, before exploring some of the specific issues which face staff working in children’s services. For example the risks that are held by people working in this field, the dynamics that exist between supervisors and supervisees when working with complex issues, reflection / reflective practice and creating the right kind of support to supervisees (both organisational and therapeutic).

A course has also been arranged to take place in June to help practitioners develop confidence, understanding and skills in dealing with difficult & aggressive behaviour in work related settings. Based on delegate feedback and workforce need this area of training is being delivered by a different provider to the one used historically, therefore whilst this course is already oversubscribed further dates will not be arranged until evaluation of the provision has been undertaken.

Performance against action plans/milestones

The majority of actions identified under the Children’s Workforce Training plan 2015 – 2018 in relation to this key outcome have been completed. The only outstanding actions within this area relate to the ongoing work being undertaken with regards to assessment and analysis training (as stated above) and the possibility of implementing an OBA approach in plans moving forward.

The outstanding actions alongside the new learning and development priorities (identified in consultation with the Children’s workforce) have been incorporated into the Children’ Workforce Strategy 2018 – 2021 and the accompanying work plan.

**Children and Young People have Equal Life Chances
Priority leads – Tom Morrison/Chris Wilford**

Key Objectives in CYPP 2014-2017 (extended to cover 2017-2018)

RAG rating for the year 2017-2018

**RAG
2017-2018**

CYP with SEND enjoy good health and lead fulfilling independent lives

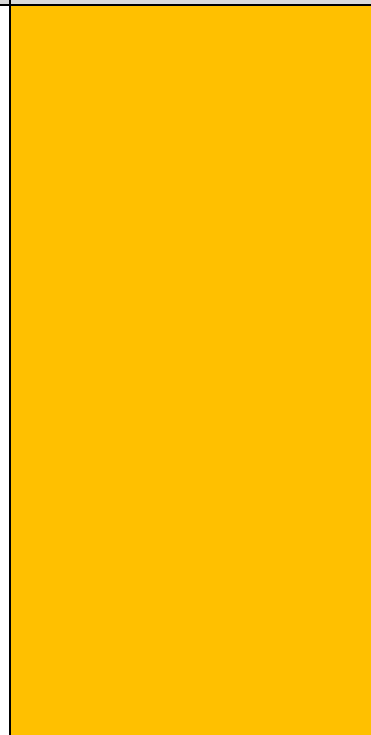
Currently the uptake of Annual Health Checks nationally is 75%, in B&NES it is 45% so work is being undertaken to have a more consistent approach for 14+ with a LD to receive their Annual Health Check. Those cyp who are entering the system via an EHCP, will generate a 'flag' notification to their GP, who will then offer the Annual Health Check. For those who are 14+ and are on an existing EHCP or have a statement awaiting conversion to an EHCP, the Annual Health Check is being promoted to special schools.

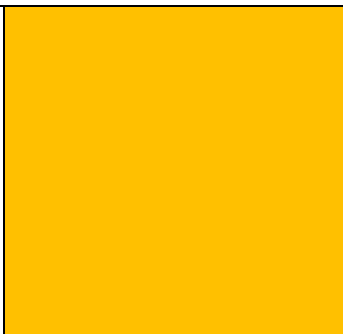
Update of no of EHCP Sept 2016 – Sept 2017

Year	Requests	Assessments
<u>2016/2017</u>	<u>253</u>	<u>186</u>

NEET data for young people with SEND aged 16-24 compares well with national data: 9.5% NEET B&NES cohort compared to national cohort of 11.1%.

No's of children with SEND in mainstream education and training 76.4% compared to national figure of 46.7%.



<p>Narrowing the educational achievement gap for cyp who are vulnerable learners, including BME, SEND, CP/CIN and LAC</p>	<p>The gap in performance between disadvantaged children (those in receipt of FSM, LAC or adopted from care) is closing at nearly all key stages but remains significantly larger than the national gap.</p> <p>The attainment of children with SEND is broadly the same as similar pupils nationally, but their progress is lower, meaning that these pupils are not doing as well as they should. BME attainment is variable due to the small numbers in each cohort in each ethnic group and so there is no overall pattern except that in several key stages the small number of black pupils have lower attainment than similar pupils nationally, and often lower progress. Some of these BME pupils also have SEND or are disadvantaged.</p>	
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Children and Young People have Equal Life Chances
Priority lead – Debbie Forward
Priority group – Early Help Board

Key Priorities CYPP 2014-2017 - extended to cover 2017- 2018

Early Help overview

The Early Help Board has refreshed the Early Help Strategy and the associated action plan with the following priorities:

1. *To achieve a consistently good quality and well- coordinated assessments, plans and reviews which include the child’s voice. There will be a call to action on improving the quality of multi-agency early help assessments, plans and reviews in 18/19.*
2. *To develop a Think Family approach so Adult Services, Housing and the Policy routinely consider the early help needs of pregnant women, babies, children and young people and support families to access early help support and that children’s early help services consider the needs of wider family members including parents.*
3. *Early Help monitoring data provides an accurate and comprehensive overview of the take-up, quality and effectiveness of Early Help support and a better understanding of the correlation between levels of Early Help interventions and Child Protection rates.*
4. *To improve early help systems and processes to ensure children, young people and families can access the right help at the right time by the right service.*

The impact of the Action Plan will be reviewed every 6 months by the Early Help Board and reported to the Children and Young People's Sub-Group and LSCB.

Progress Report

RAG rating for the year 2017- 2018

RAG

Preventative Services Commissioning

Theraplay (attachment based parent/child support 2-5 year-olds)

In this period, 63 children (5 complex cases through Alison Cliffe Associates and 58 through Bright Start Childrens Centres) children aged 2-5 years with complex emotional/behavioural needs were supported through Theraplay intervention.

CAMHS Transformation funding - £8,500 was allocated to Theraplay through the Emotional Health and Wellbeing Board specifically to support workforce development in 2017-2018. Training has been delivered to B&NES practitioners with attendance also from a range of other local authority representatives. B&NES is acknowledged as a national centre for Theraplay development and delivery due to the practicum of staff working in schools, early years settings, childrens centres and early help settings who are trained to deliver theraplay informed practice. This year has seen further development of strategic work in partnership with Bright Start Childrens Centres - coordinating information about the delivery of Theraplay across the integrated workforce (including Health, Social Care, Early Years/Children's Centres and the Third Sector) and a successful Therapy launch event in June 2017 attended by service users, professionals from B&NES and other areas and strategic leads.

Nurture Outreach Service (delivered by Brighter Futures) in primary schools.

This unique locally developed service offers comprehensive support to primary schools throughout Bath and North East Somerset to support and include children presenting with emotional and behavioural issues which pose a barrier their ability to start school at reception.

From April – August 2017 (September statistics due in January 2018), the service managed 27 cases entering into

the reception year. Of this cohort 96% of children have improved their learning and 100% increased their emotional wellbeing rating.

In this period the service worked with 17 primary schools, where 100% of schools have developed skills to manage children and have adapted the curriculum and environment to support them.

CAMHS Transformation Fund has contributed to roll out of THRIVE training delivered by Brighter Futures through behaviour and attendance panels. THRIVE equips practitioners with skills to assess children's emotional levels and to adjust learning activities and group learning accordingly. This has been well received by schools attending. Report available upon request from AMcColl, commissioner.

Children's Centre Services

Children's Centre Services are delivered by the Council managed Bright Start Children's Centres covering Bath East, Somer Valley and Keynsham and Chew Valley and, since April 2018, Action for Children who provide services in the Bath West area. Both services work closely in partnership together and with Maternity and Health Visitors and a "Early Childhood Service Pathway" has recently been developed to ensure other practitioners including GP's and other voluntary organisations supporting parents to be/parents of 0-5 year old children are familiar with when/where to refer according to needs identified. Children's Centre services also work in partnership to support families with Social Care and Adult services including DHI to ensure children and parents receive targeted early help support as soon as needs are identified.

Children's Centre Services have also recently worked with Health Visiting to achieve the Unicef Breastfeeding Initiative national accreditation and feedback has been very positive referring to "very kind compassionate and knowledgeable staff team who support the ethos of the infant feeding" confirming the integrated working relationship between each service to support parents and their children to achieve positive outcomes.

835 families received targeted support in 2017/18 and out of 601 cases closed, 136 children increased their readiness for school, 296 improved parenting skills (this continues to be the main presenting need at time of referral), 45 increased their education and employability skills, 98 families became healthier and 20 were supported to enable them to keep their children safe.

From Quarter 4, the services began recording other outcomes achieved in addition to the presenting need and this will be available for future reporting.

<p>Youth Support Services</p> <p>Preventative Youth Support Services include Youth Connect, Mentoring Plus and Compass who continue to provide support to young people who are at risk of suffering poor outcomes due to social and emotional needs which increase their risk of becoming NEET (not in education, employment or training) and/or entering the Youth Justice System. In 2017/18 669 young people have received targeted support, out of 447 cases closed 139 have increased their emotional and social wellbeing and resilience, 88 are healthier, 127 have reduced their risk taking behaviour, 140 have increased engagement in education, employment or training and a further 30 have become mentors themselves. Case studies received continue to illustrate how each service supports young people with a range of complex needs and the positive outcomes achieved as a result of receiving targeted support.</p> <p>Youth Connect also track young people aged 16/17 not in education, employment or training and in Q4 92.7% were in education, employment and training (only 1.3% were not known and 2.8% were NEET)</p>	
<p>Family Support</p> <p>The Family Support and Play Service is run by Southside in partnership with Bath Area Play Project. It provides a range of tailored support to families with children aged 5-19 years including parenting support, coaching, play support for children and young people to build social skills, confidence and tackle difficulties, family groups and play hubs and nurture groups in schools</p> <p>Between April and September 2017, 230 families received targeted support.</p> <p>For the 169 cases closed during the six month period, the following outcomes were achieved for families with listed presenting need at the time of referral:</p> <ul style="list-style-type: none"> • 68% parents have increased their ability to maintain boundaries and provide consistent parenting • 65% parents are better able to keep their children safe • 88% have increased their school attendance <p>The Family support and Play Service contract ends in 31st October 2018. It is intended that this contract will be extended to October 31st 2019.</p>	

SEND

The Early Years SEND Inclusion Team (SENDIT) continues to promote and support inclusive practice in Early Years Settings and promotes better outcomes for children with SEND across Bath and North East Somerset. The team successfully developed and delivered SENCo training to Early Years Providers in B&NES with an uptake of over 80% across all settings. As a result of this training the team has seen an improvement in the quality of requests coming through for inclusion funding, transition funding and EHCNAs. The team are also seeing an increase in requests for Area SENCo support (6% increase since 2016) for children aged 0-5 years which shows an increase in identification.

Since April 2017 to August 2017 80% of children who have received Inclusion Support Funding (ISF) have made positive progress in their Early Years Foundation Stage (EYFS). ISF is a process which allocates funding to an early years provider, primarily to promote continued progress and to enable children aged 2 years and over with SEND to achieve better outcomes and to access their Early Years Entitlement (EYE). This funding also supports prevention and a possible longer-term need for an Education Health and Care Plan (EHCP). In 2016-17 approximately 50% of the children who received inclusion support funding did not go on to receive a statutory plan (EHCP).

Early Help Board Update

- A Best start in Life Sub-group has now been fully established which comprises commissioners and providers of maternity, health visiting, FNP, early years settings and children's centres. The purpose of this group is to ensure effective referral pathways and joint working between services to improve outcomes for young children.
The DadPad App for B&NES, Swindon and Wiltshire is being launched on 18th June 2018 and will provide practical information and top tips for new dads to help them adjust to parenthood. A comms plan and publicity materials have been shared widely across the STP in preparation for the launch.
- The Baby J case was an SCR in Wiltshire which found that the CAF and TAC arrangements were not being used effectively to safeguard unborn and young babies. A task and finish group was established by the Early Help Board to review the effectiveness of arrangements in B&NES. 24 CAFs completed by the maternity service were tracked and data triangulated with health visitor, FNP and children's centre services to ensure all vulnerable women and babies with a CAF had access to appropriate interventions and support.

The task and finish group reported its findings into the LSCB SCR group in February this year. Other than FNP, the review found poor quality CAFs; significant gaps in information sharing between agencies; little case coordination and handover for CAFs or lead professional roles, and oversight hindered by lack of a shared electronic early help case management system. The review work instigated many immediate improvements by the agencies involved. The pathway (maternity, health visitor and children centres) was reviewed and updated and new processes put in place to share CAFs and ensure effective handovers. Maternity have trained and established a small team of midwives to work with more vulnerable pregnant women and there is now oversight of CAFs. The action plan from the review is now been overseen by the Best Start in Life Group. The early years' pathway will be reviewed again in two years.

- The multi -agency CAF audit group has continued meet to audit the quality of CAFs on a thematic basis and report each quarter into the Early Help Board. There are some practical issues to consider in the near future about resourcing some of the administration which supports the auditing activity and collection of CAF data.
- The multi-agency early help assessment (CAF) is being reviewed by a Task and Finish Group, and the draft process and paper work is currently being piloted by a group of early adopters across a number of agencies. The new assessment and plan will be rolled out from September. However, the number of CAFs completed has dropped from 351 per annum in 16/17 to 202 per annum in 17/18, and dropped significantly in the last quarter compared to previous quarter 4s (89 in 15/16, 99 in 16/17 and 30 in 17/18). The number of CAFs has reduced in part due to removal of the requirement to complete a CAF to access transitional funding, but potentially reflects a perceived/actual reduction in services and uncertainty in the workforce regarding the review of the CAF paperwork and process. Some analysis of the 'request for services' coming through the duty front door will also be undertaken to see if more cases are coming through this route , rather than a CAF to access early help. The reduction in CAFs is of concern and feedback from CYP sub group members would be welcome. It's important to note that agencies can continue to complete and submit the old CAFs during the transition.
- A quality assurance framework for commissioned early help services has been developed and is currently out to consultation with providers. It is planned to sign this off at a meeting of all commissioned early help providers on 25th June. The quality assurance framework will become part of the Early Help tool kit and LSCB assurance framework.
- The First Think family meeting has been set up with a range of adult and children's commissioners and providers. The first meeting will be a scoping meeting.

- A meeting with all commissioned Early Help and Alternative Provision providers is planned in June to enhance joint working for families with children and Young people in Alternative education provision.



Signed off CYP Sub Group Sept 19th 2018