## Oxfordshire Children and Young People's Plan 2018 – 2022





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

Oxfordshire County Council

Oxfordshire Clinical Commissioning Group

City and District Council Members

**Thames Valley Police** 

Oxfordshire Safeguarding Children Board

Oxford Health NHS Foundation Trust

Safer Oxfordshire Partnership

Oxford University Hospitals NHS Trust

Representation from schools and colleges

Representation from the local Voluntary and Community Sector (OCVA)

Healthwatch Oxfordshire

Voice of Oxfordshire's Youth (VoXY)

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## Foreword

#### Welcome to Oxfordshire's Children and Young People's Plan 2018 – 2022

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

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

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

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

We welcome the initiative taken by Oxford City Council in developing their Children and Young People's Strategy, which will provide a delivery mechanism for the Children's Trust's Plan in Oxford. We would encourage other District Councils to follow this lead in their areas.

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

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

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

#### **Councillor Steve Harrod**

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

#### Jodie Lloyd-Jones

Vice–Chair of the Children's Trust and Chief Executive Officer of Oxfordshire Youth (Children & Young People's Forum)

## Introduction

The vision, areas of focus and values set out here represent the foundation for the Children and Young People's Plan 2018 – 2022, and our vision for integrated children's services delivered increasingly locally and through partnership arrangements.

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

As part of the development of this Plan we consulted with the public, partner organisations, voluntary sector organisations and schools and key messages from the feedback we received has been incorporated into this Children and Young People's Plan 2018 – 2022.

A Poster that sets out our Vision, Areas of Focus and our commitments for the Children and Young People's Plan 2018 – 2022 is included at <u>Annex 1</u>. This can be easily detached from this Plan for display.

N.B. The Children & Young People's Plan was originally from 2018-21. However, at the June 2020 Children's Trust Board it was agreed to extend the existing plan for a further year until 2022 and consult on a new plan in 2021. This was due to the need for all agencies to focus on the COVID-19 recovery planning and agreement that the original areas of focus continued to be the top priorities for the Board.

## **Our Vision**

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

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

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

- National data shows a decline in 11-15 year olds smoking and drinking alcohol. However there is an apparent increase in drug taking (but caution is needed with the data)
- Admissions for alcohol-specific conditions in females under 18 in Oxfordshire is above the national average
- There is an apparent increase in self-harm amongst young people in Oxfordshire.
- The number of domestic crimes in Oxfordshire involving children appears to have increased, however this increase may have been influenced by changes in police crime recording.

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

#### What do we need to do to make a difference?

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

## **Our Areas of Focus**

The information above, together with the feedback we received during our consultation has led to the development our Areas of Focus and the priorities that fit alongside. Our consultation story can be found <u>here</u>.

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

#### Be Successful

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

#### **Be Happy and Healthy**

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

#### Be Safe

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

#### **Be Supported**

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

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

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

Our implementation plan is included at <u>Annex 2</u>.

### **Our Values**

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

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

#### What do we need to do to make a difference?

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

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

#### To get it right we need to be:

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

#### When we don't get it right:

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

## **Monitoring and Governance**

The Children's Trust is a subgroup of the Health and Wellbeing Board and as such is governed by the Oxfordshire Partnerships Protocol. The Protocol governs relationships between key agencies working to promote the health and well-being of Oxfordshire's communities. It is intended to clarify the respective roles of individual partnership bodies and their relationship to each other. The Protocol can be found <u>here</u> in full and the Executive Summary gives an overview of the roles, responsibilities and inter-relationships between these key agencies. A diagram to illustrate these relationships can be found at <u>Annex 3</u>.

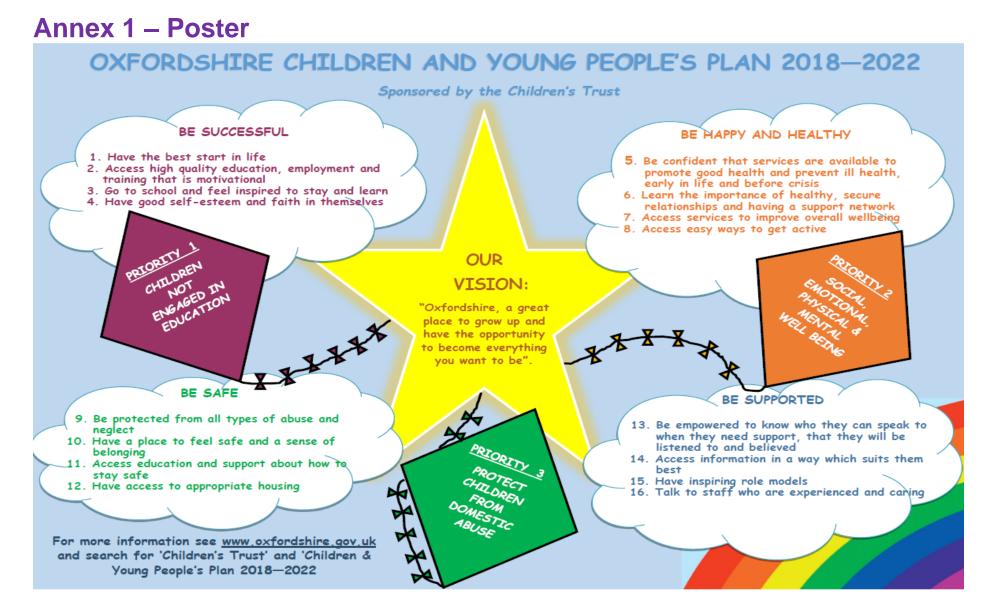
The organisations who make up the membership of the Children's Trust can be found in the most up to date Terms of Reference which can be found on the public website <u>here</u>

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

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

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

Children's Trust Board June 2018



## Annex 2 – COVID-19 Recovery Plan 2020-21 (Year 3)

Areas of Focus	Actions All priority areas to include a focus on children who are being exploited	Responsible agencies	How we will know this area of focus has improved	Children's Trust Board Lead	Reporting Timetable
Be Successful FOCUS ON CHILDREN WHO ARE NOT ENGAGED IN EDUCATION	<ul> <li>Develop inclusive practice and provision in order to improve the progress and life chances for our SEND, vulnerable and disadvantaged learners.</li> <li>This action will be reviewed and revised in September 2020 when the impact and extent of schools' recovery is clearer, to be encompassed in regular reporting cycles.</li> </ul>	<ul> <li>County Council – education service</li> <li>Early Help/LCSS</li> <li>City &amp; District Councils</li> <li>Health Visiting</li> <li>Schools and Early Years settings</li> <li>School health nurses</li> <li>CAMHS</li> <li>Community &amp; Voluntary Sector</li> <li>Thames Valley Police</li> <li>Oxfordshire Strategic Schools Partnership</li> </ul>	<ol> <li>Compare 2019-20 attendance data with national and statistical neighbours to identify strengths and areas for improvement. Vulnerable groups attendance at school will be drilled down with Social Workers to children with Child Protection and Child in Need plans.</li> <li>Impact of not being in school on other risk factors e.g. child exploitation, youth crime, mental health, substance misuse etc. Education input to optimise school attendance to national or better.</li> <li>Compare Oxfordshire attendance data from April-July 2020 to September to December 2020</li> <li>Establish an Elective Home Education parents' virtual network</li> <li>Identify electively home educated children on Child Protection and Child in Need Plans for focussed joint work with allocated Social Workers</li> <li>Track Ofsted outcomes when inspections resume pertaining to Recovery Curriculum impact</li> <li>Track Ofsted and School Improvement Partner findings on each school's development of inclusive curricula and practices.</li> </ol>	Chris Hilliard/ Hayley Good/ Jayne Howarth, Debbie Bell	Sept 2020

			<ol> <li>Measure the use of Bereavement support resources shared by OCC education services by assessing rates of downloading of those materials</li> <li>Measure impact of transition work by tracking Ofsted and School Improvement Partner findings</li> <li>Measure impact on EHCP timeliness and quality by drawing on SEND QA Panels findings.</li> </ol>		
Be Healthy FOCUS ON SOCIAL, EMOTIONAL, PHYSICAL & MENTAL WELL BEING	<ul> <li>Plan our recovery as a system (Health, Children Services and Education) and that joint plan will have an emphasis on prevention working with Public Health. We will use the school survey undertaken by public Health for our planning as well as evidenced based modelling.</li> <li>Undertake a systems gap analysis with regard to the impact of COVID including expected backlog, expected surge, impact of redeployment where relevant and potential reduced staff capacity due to self-isolation and illness.</li> <li>Put multi agency network meetings (Health, Children's Services, Education, Police and voluntary sector partners) in place to mitigate against</li> </ul>	<ul> <li>County Council – Early Help</li> <li>City &amp; District Councils</li> <li>Public Health</li> <li>Health</li> <li>Schools</li> <li>Community &amp; Voluntary Sector</li> </ul>	<ol> <li>Systems partners are committed to prevention and early help where appropriate</li> <li>Disseminate school survey and share findings to identify need and support planning for recovery</li> <li>Total number of children and young people that had a 1:1 intervention by the Public Health Workforce (School Health Nurses) at an attended appointment for resilience and emotional wellbeing during the academic term (primary, secondary and colleges)</li> <li>MHSTs to support Primary and Secondary Schools in Pilot schools to develop their Whole School Approach including having nominated Mental Health Leads</li> <li>Developing local community networks to support EHAs</li> <li>Once networks are developed it is anticipated that they will support up to 2000 EHAs a year</li> <li>Continue to increase the proportion of children with diagnosable mental illness, accessing CAMHS (national measure)</li> </ol>	Maria Godfrey, Lajla Johansson, Emma Leaver, Donna Husband, Vicky Norman, Sarah Breton, Alex Davis	December 20

	<ul> <li>expected surge and also the unknown impact of COVID we may discover in due course as society returns to the new normal.</li> <li>Use Trauma informed practice and other evidenced based interventions in our work with children and families.</li> </ul>				
Be Safe FOCUS ON DOMESTIC ABUSE	<ul> <li>A multi-agency group looking at recovery from domestic abuse for adults and children has identified a gap in support for children recovering from the effects of domestic abuse in their family which is likely to be exacerbated by the Covid-19 movement restrictions. This group will link with Family Solutions lead to ensure that this need is addressed and that this</li> </ul>	Domestic Abuse Strategic Board	<ol> <li>Improved knowledge of the barriers children and young people traumatised by domestic abuse face in accessing appropriate support</li> <li>Increased understanding of gaps in support for children and young people traumatised by domestic abuse</li> <li>Identification of options to address barriers and gaps in support and in response to this a multi-agency plan agreed with our Operational and Strategic Domestic Abuse Boards.</li> </ol>	Sarah Breton, Sarah Carter	March 21
	<ul> <li>fits within the broader CEF response for children impacted by domestic abuse.</li> <li>Oxfordshire County Council's Strategic Lead for Domestic Abuse will work with CEF and TVP domestic abuse leads to test out the effectiveness of Operation Encompass,</li> </ul>		<ol> <li>Increased number of Operation Encompass notifications to schools</li> <li>All schools will receive best practice guidance in relation to how to respond Operation Encompass notifications</li> </ol>		

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	make recommendations to		1. Improved outcomes for children in families affected by		
	optimise this initiative and		domestic abuse as set out in the FSPM domestic		
	develop best practice		abuse contract with the provider delivering the service.		
	guidance for schools.				
	<ul> <li>The Strategic Lead for</li> </ul>				
	Domestic Abuse will				
	support mobilisation of the				
	contract to deliver the				
	domestic abuse element				
	of CEF's new Family				
	Safeguarding Plus Model				
	(FSPM). Launching in				
	September 2020 this new				
	service will include ten				
	commissioned specialist				
	domestic abuse workers to				
	work across County and				
	will be embedded within				
	FSP teams. There will be				
	specialist workers for both				
	victims/survivors and				
	perpetrators of domestic				
	abuse, to reduce the				
	impact of parental				
	domestic abuse on				
	children within the family,				
	and as such improve				
Po Supported	outcomes.	<ul> <li>VOXY &amp;</li> </ul>	1 Llas 2010 8 2020 surveye as benchmark for	Popio Povos	Sopt 20
Be Supported	Consultation revised to		1. Use 2019 & 2020 surveys as benchmark for	Rosie Boyes	Sept 20
	ensure it is accessible to	Engagement	improvement	VOXY Reps	
	children with	Team			
	disabilities/SEND				
	<ul> <li>Repeat survey</li> </ul>				
					Jan 21
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### Annex 3 – Oxfordshire Partnership Protocol Overview Diagram

