

SUNDERLAND

CHILDREN AND YOUNG PEOPLE'S PLAN 2017-2022

Sunderland Children's Strategic Partnership



SUNDERLAND CHILDREN'S STRATEGIC PARTNERSHIP



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1. INTRODUCTION

We are delighted to present our Children and Young People's Plan (CYPP) for 2017-22. It is the first strategic plan of our recently established Children's Strategic Partnership in Sunderland.

Whilst there have been a series of CYPPs in Sunderland led by the former Children's Trust, this new plan reflects the aspirations of our new partnership, and is informed by the current and anticipated needs of children, young people and families in our city.

The plan covers:

- All children and young people aged 0-19 years and their families¹
- Those over 19 years receiving services, including those leaving care
- Those aged between 19 and 25 years with special educational needs and/or disabilities

Since the Ofsted inspection of our services for Children in Need of Help and Protection, Children Looked After and Care Leavers in May-June 2015, those partners delivering services for children, young people and families have been galvanized into action, to make Sunderland a great place to raise a family. There have been many recent improvements, particularly around strengthened leadership, improved partnership working, a new quality assurance framework and the workforce in the city now feel more positive about the journey we are on. There is still much to be done and most certainly we will face challenges on this journey, but there are also some exciting times ahead.

From April 2017, many of the services for children and young people which were delivered by the council have now moved to a new company, Together for Children. Sunderland is one of the first local authorities to move to this type of service delivery, which is designed to drive improvements across all services for children and young people, and provide the council with assurance around the delivery of its statutory responsibilities. This move provides a real opportunity for Together for Children to work more proactively with partners, to develop relationships with individual agencies and to influence improvements across the city to improve outcomes for children, young people and their families.

We must review our early help services across the city, agree a shared understanding of what we mean by early help and develop a coherent and coordinated offer which provides targeted, early help interventions that are effective at preventing the escalation of children and families' needs. We need all partners to sign up to the offer and commit to its development and delivery at an appropriate level.

A great deal of work has been undertaken regarding the recruitment of social workers. However, much more needs to be done around the recruitment and retention not only of high quality social workers, but also in other professions particularly teaching and health professionals in the city. As we move forward, our desire is to have a more integrated approach to workforce development across agencies, and to develop innovative ways to recruit to essential and difficult to fill posts. We want to foster an approach which is aimed at early identification and early intervention to support the emotional health and wellbeing of children and families and ensure early access to support services from relevant agencies.

Sunderland has always had a strong culture of participation and engagement of children and young people in specific activities. However this needs to be more widespread if we are to fulfill the city's ambition to be an 'all age friendly city', making Sunderland a liveable place for all. In doing so we must ensure the voice of children and young people is consistently listened to when we design and evaluate services, as well as when we are working with them to meet their individual wishes, aspirations and needs.

¹ The Children's Strategic Partnership recognises the diversity of families and therefore defines families in the most inclusive sense, including the traditional family of two parents and their child/ren; same-sex families; single parent families; adoptive and foster families; children living with step-parents; joint-custody families where children live with parents who are separated or divorced; children living with a relative, such as a grandparent; extended families living in more than one household; and people of no relation who are living in the same household and who consider themselves a family.

We want Sunderland to be a fantastic place for children and young people to live, to learn and to go on to achieve successful and fulfilled lives. For families who need support along the way, we want them to benefit from outstanding services which increase their resilience and independence, and make possible new ways of addressing some of the most challenging problems that children, young people and families face.

We will deliver this by providing the leadership, systems and tools to enable the children's workforce to be confident, competent and well equipped to support families and help them to bring about positive change, making a real difference to children and young people's lives now, and for their future.

The Children's Strategic Partnership has a key role in driving forward service improvements and changing children's lives for the better. We embrace the ethos of true partnership working and recognise that we can do much more for children, young people and families by working together.

This CYPP describes how these improvements will happen by tackling underlying issues that affect children, young people and their families. This plan is about prevention; promoting a culture of early rather than late intervention, finding new ways to give children a better start in life, enabling every child and young person to develop social and emotional capability and improving the lives of all children and young people in our city, especially those who are most vulnerable. This includes, but is not limited to, looked after children, children with special educational needs and/or disabilities, young carers, children from black and minority ethnic communities and those from low income families.

It sets out the ambitions we have for children, young people and families and how we can achieve those ambitions by working together.

2. SUNDERLAND KEY FACTS AND FIGURES

Demographics

- In 2015, 277,150 people lived in Sunderland. There were 57,630 children and young people aged 0-18 years, of which 29,629 were boys and 28,001 girls
- 24,384 children lived in areas classed in the 20% most deprived in the country, 12,332 in the 10% most deprived areas and 3,127 in the 3% most deprived areas
- In 2015 there were 2,889 babies born in Sunderland. The birth rate fell in the five years from 2011 from a high of 3,250

Health and wellbeing

- The infant mortality rate during 2012-14 was 3.6 per 1,000 births
- In 2015/16, 24.2% of reception pupils were obese or overweight (of which 11.4% were in the obese category) and 39.7% pupils in year 6 were obese or overweight (of which 24.2% in Year 6 were in the obese category)
- There were 34.6 conceptions per 1,000 young women aged 15-17 in 2015 and 8.5 conceptions per 1,000 young women aged 13-15
- 4% of 5-15 years olds have an emotional disorder. This rises to 9% for 16-17 year olds

Community safety and safeguarding

- 606 per 100,000 young people aged 10-17 years were first time entrants to the criminal justice system in 2015/16
- 37% of young offenders aged 10-17 years reoffend during the period 2013/14

In January 2017, there were:

- 2767 open social work cases,
- 633 children with a Child In Need plan,
- 426 children subject to a child protection plan, and
- 525 looked after children

School demographics and attainment

- In primary schools 8% of pupils are from a black and minority ethnic background with 7% in secondary
- In 2016, 5.7% of pupils in primary schools have English as an additional language and 4.7% in secondary
- 23% of pupils are entitled to Free School Meals (aged 5 to 16)
- 31% of pupils are eligible for the pupil premium (aged 5 to 16)
- 2.5% of children have a statement of special educational need (SEN) or an Education Health and Care Plan. 13% children are classified as having SEN without a statement or plan (aged 5 to 16)
- As at December 2016, 79% of our children attend learning settings which are rated by Ofsted as Good or better

- 68% of all pupils achieved a good level of development at the end of Reception in 2016, compared to:
 - 60% of looked after children
 - 33% of children with special educational needs (with or without a statement of SEN/EHC Plan)
 - 52% of children eligible for free school meals
- 61% of all pupils achieved expected level in Reading, Writing and Maths by the end of primary school in 2016, compared to:
 - 30% of looked after children
 - 26% of pupils with special educational needs (with or without a statement of SEN/EHC Plan)
 - 44% of pupils eligible for free school meals
- 59% of all pupils achieved A*-C Grades in English and Maths in 2016 (as part of the English Baccalaureate), compared to:
 - 11% of looked after children
 - 21% of pupils with special educational needs (with or without a statement of SEN/EHC Plan)
 - 39% of pupils eligible for free school meals
- In 2016, the attainment gap for those eligible for free school meals and others is 20% in EYFS; 21% at Key Stage 2 and 25% at GCSE (A*-C in English and Maths)
- In 2015/16, persistent absence in the primary sector was 8.7% and 15% in secondary
- In 2015/16, 0.04% of pupils were permanently excluded in the primary sector and 0.19% in secondary. Fixed term exclusions were at 0.48% and 3.52% respectively
- In 2016, 4% of young people were NEET and the status of a further 4% of young people was unknown

3. VISION, PRINCIPLES AND PRIORITIES

Our vision is “Working together for children, young people and families.”

The principles that underpin our approach to achieving this vision are:

Voice and influence of children, young people and their families

- We will place children and families at the heart of everything we do
- We will involve, respect, hear and respond to the voice of children, young people, their families and communities to influence the design and evaluation of services
- We will guarantee children's rights to essential services
- We will empower children and young people to participate in family, community and social life

Efficient and intelligence-led services

- We will improve the commissioning of services, eliminate duplication, align resources to achieve the best value for money, simplify processes and evaluate outcomes to ensure services are as effective as they can possibly be
- We will use data and intelligence to identify priority issues and to monitor the impact of services
- We will regularly review the effectiveness of our interventions to ensure that they are up-to-date and based on evidence of what works

Early identification, intervention and prevention

- We will work closely with all service providers to identify all children, young people and families who are vulnerable and need help, and intervene at the earliest possible stage to tackle problems before they escalate
- We will ensure there is support for children and young people across all key transitions

Narrowing the gap

- We will know where the gaps in outcomes exist for all children and young people
- We will focus on narrowing inequality gaps for all vulnerable children and young people, including looked after children, children with special educational needs and/or disabilities, children from black and minority ethnic communities and those from low income families

Strong and inspiring leadership and a skilled and stable workforce

- We will build a restorative, child-focused and family-centred approach to working with children, young people and their families
- We will provide effective leadership and management to attract and support a skilled workforce
- We will have a relentless focus on continuous improvement of services and outcomes
- We will continue to build trusted working relationships and shared learning across services for children and young people

- We will engage other strategic partnerships where we believe they can help to improve outcomes for children, young people and their families

Our six priorities have been selected because we believe they are a powerful starting point, providing a way to improve outcomes for all children and their families and to tackle the complex issues affecting the most vulnerable. They are:

1. All children, young people and families who need help are identified and supported as early as possible
2. All children have the best start in life
3. All children and young people enjoy good health and wellbeing
4. All children and young people do well at all levels of learning and have ambition and the skills for life
5. All children and young people are kept safe from harm
6. All children, young people and their families will have a voice and influence

The Children and Young People's Advisory Network have considered the priorities and agree these are the right ones for us to focus on.

PRIORITY 1

All children, young people and families who need help are identified and supported as early as possible

Why is this a priority?

All families face challenges, difficult situations or crises from time to time. The majority of families in our city have the coping mechanisms needed to respond to their challenges positively.

However, a significant number need support to manage and cope with the challenges life throws at them. It is important that these families are supported to prevent their situation spiraling to a point where they require costly and more intensive services and safeguarding interventions. It is equally important to build resilience in families so that they are able to support themselves and no longer require even low-level interventions.

Sunderland must develop an Early Help offer to identify and support families in the city as early as possible before problems arise to enable them to make good responses to future events.

We must recognise our role in strengthening family resilience and shift our focus to deal with the underlying causes rather than the symptoms of a family's problems. We must develop trusting relationships with families and a whole-family approach to support, building on existing strengths, harnessing the expertise of wider family members and utilising community resources. For example, in setting up pathways of support for a child with neurodevelopment difficulties such as autism, it is essential that practitioners are sensitive to the emotional wellbeing of the wider family in dealing with and managing the child's disability.

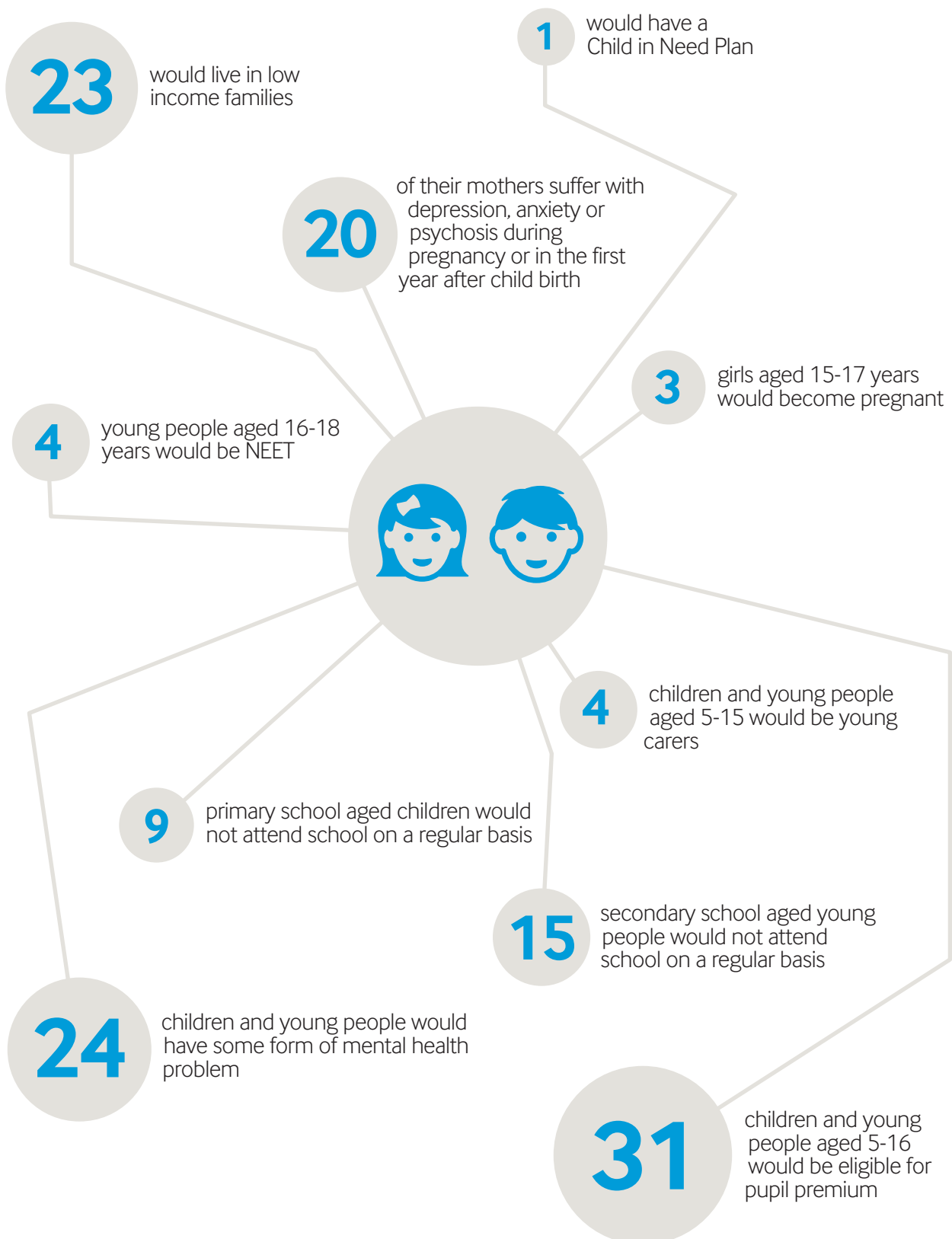
We must have a shared vision about our approach to early help and how we all work together to improve outcomes for families, and this vision must be understood by our collective workforce. All agencies working with families have a responsibility to deliver early help services: early help should never be someone else's problem and for families needing help 'no further action' is never an outcome.

We need our universal services, including schools and colleges, to identify those children, young people and families who need support, and for those services to make the earliest offer of help. For the most vulnerable children, young people and families or those with the most complex needs, we all need to work together to deliver excellent pathways of support.

We want every family to develop an intergenerational cycle of positive parenting, relationships and behaviour, where they have the resources and capabilities to provide a supportive and enriching environment for their children to grow up and flourish in.

We believe that a strong early help offer will make the biggest difference to turning the lives around of families who are struggling and we are committed to developing the best offer we can. We will know that our early help approach has been successful when we see a positive shift in all outcomes for children, young people and families. For example, improved school attendance, reduced numbers of NEETs, better childhood health, narrowing the gap in all outcomes for vulnerable groups and reduced numbers escalating up the tiers of need and requiring safeguarding interventions. Similarly, we should see a shift in family-related outcomes, for example increased identification and support to young carers, or increased collaboration between adult mental health and children's services where there is poor parental mental health.

IF SUNDERLAND WAS A VILLAGE OF 100 CHILDREN...



The actions we will take to achieve improvements in this area are:

- Develop an Early Help Strategy
- Design and implement a multi-agency Early Help assessment, planning and review toolkit, (See, plan, do review) as well as clear routes by which early help can be accessed and “wrapped” around a family
- Develop a comprehensive performance framework to measure and monitor the impact of the early help offer
- Ensure all partners understand and can fully commit to the delivery of multi-agency early help
- Combine our early help and Troubled Families programme offers to deliver one programme to all vulnerable families

We will measure the impact of our actions by monitoring the following indicators:

- Total number of early help plans
- % of early help cases that were closed with two or more successful outcomes

These indicators will be collected as a minimum, and a comprehensive dataset will be developed alongside the Early Help Strategy and Assessment, Planning and Review Toolkit.

Supporting plans and strategies:

Sunderland Early Help Strategy – to be developed

Sunderland Early Help assessment, planning and review toolkit

Sunderland Neglect Toolkit – to be developed

Sunderland Threshold guidance



PRIORITY 2

All children have the best start in life

Why is this a priority?

What happens during pregnancy and the first two years of life has a lasting impact on the health, wellbeing and attainment of a child. From conception and through the early years the foundations of human development are laid, impacting physically, emotionally and intellectually. We need to make sure that prevention and health improvement are recognised as being essential to giving every child the best start in life. This means building knowledge about pre-conceptual care, supporting good maternal physical and mental health and providing positive early experiences, including supporting good attachment and sensitive parenting, ensuring a child has a loving, secure and reliable relationship with a parent or carer and providing access to high quality early education. By achieving this we will ensure our children have the most positive early experiences which will support good health, social and cognitive development, language development, readiness to learn, emotional wellbeing and resilience.

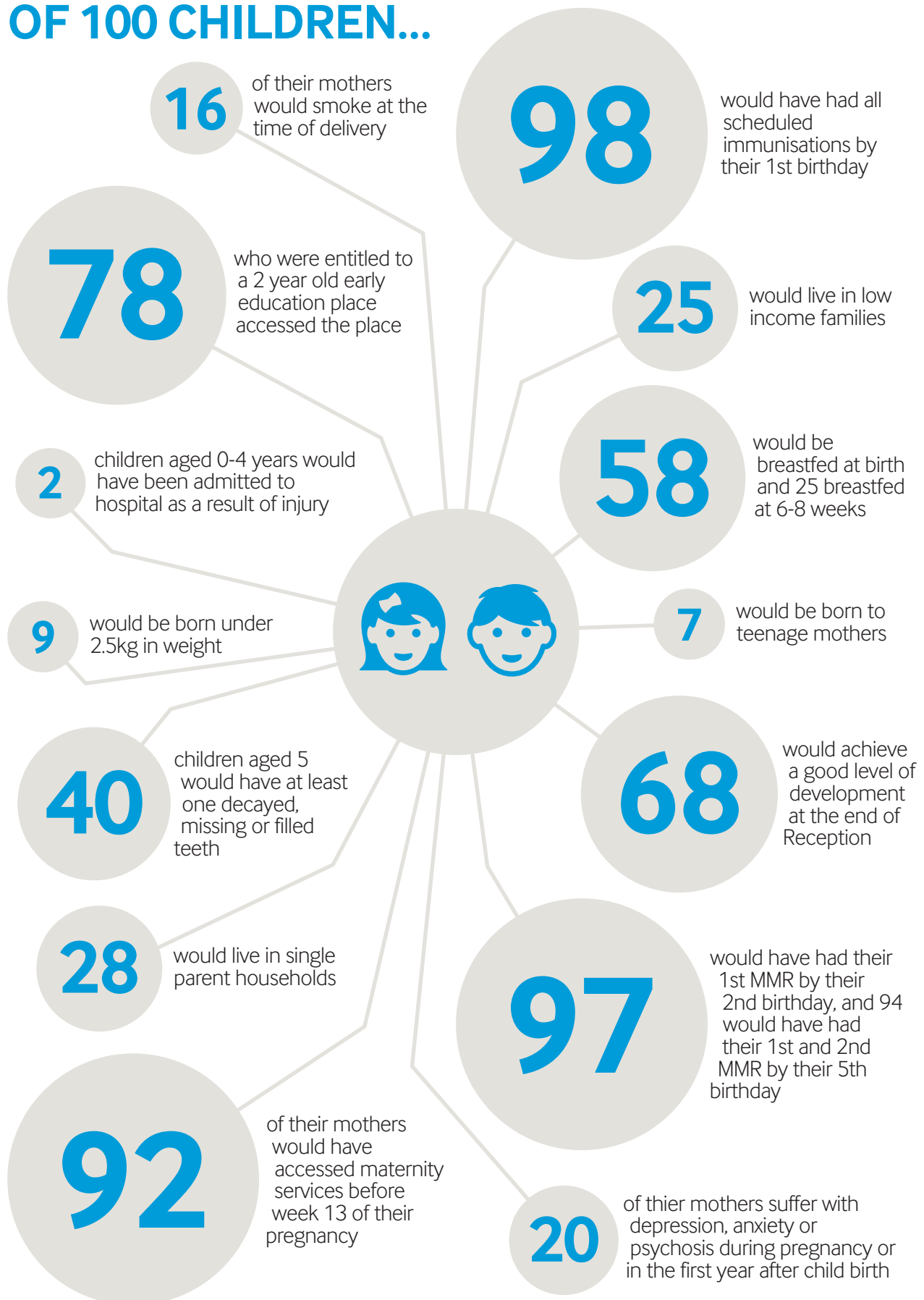
By giving children the best start in life, they are more likely to be happy, secure, healthy and experience positive outcomes in later life. We know that for those who start from a position of disadvantage compared to their peers, the inequality gaps widen throughout their lives.

It is essential therefore that we focus our efforts to reduce health inequalities and improve life chances for all children and families by supporting the transition to parenthood and throughout the early life of the child where needed. This must begin by providing an effective universal offer through maternity and health visiting services, supported by more specialist services as appropriate, including services to support parental mental health.

Pregnancy and the birth of a baby provide a real window of opportunity where parents can be especially receptive to offers of advice and support. We must use this opportunity to support parents to create the conditions where stress is reduced, positive bonds and attachments with their babies are formed and language and communications skills develop.

We will develop an effective working environment so that practitioners can have the right conversations, in the right place and at the right time with families.

IF SUNDERLAND WAS A VILLAGE OF 100 CHILDREN...



The actions we will take to achieve improvements in this area are:

- Ensure the commissioning and delivery of universal services embed prevention and health improvement outcomes, including the promotion of healthy behaviours such as smoking cessation, breast feeding and healthy eating
- Research parenting programmes and commission the most effective programmes for the city
- Deliver the behaviour change pilot to increase the take up of early education places for disadvantaged two year olds
- Facilitate universal access to Healthy Start vitamins
- Work with the Adults Partnership Board to develop a joint approach to supporting families with dependent children where there is parental vulnerability, including poor mental health

We will measure the impact of our actions by monitoring the following indicators:

- Women's smoking status at time of delivery
- Maternal mental health
- Breastfeeding initiation rates
- Breast feeding at 6-8 weeks after birth
- Teenage parents
- Hospital admissions due to injuries in children aged 0-4 years
- A&E attendances for children aged 0-4 years
- Reception class children who are overweight or obese
- Children with one or more decayed, missing or filled teeth
- Take up of early education place for disadvantaged 2-year olds
- Children in low income families
- Children achieving a good level of development

Supporting plans and strategies:

Public Health England High Impact Areas

Health Matters: giving every child the best start in life

Sunderland Health & Wellbeing Strategy



PRIORITY 3

All children and young people enjoy good health and wellbeing

Why is this a priority?

In order to thrive, children and young people need to have good health and well-being – by this we mean physically healthy, happy, have secure social relationships both at home and school, are emotionally resilient and able to cope with adverse circumstances.

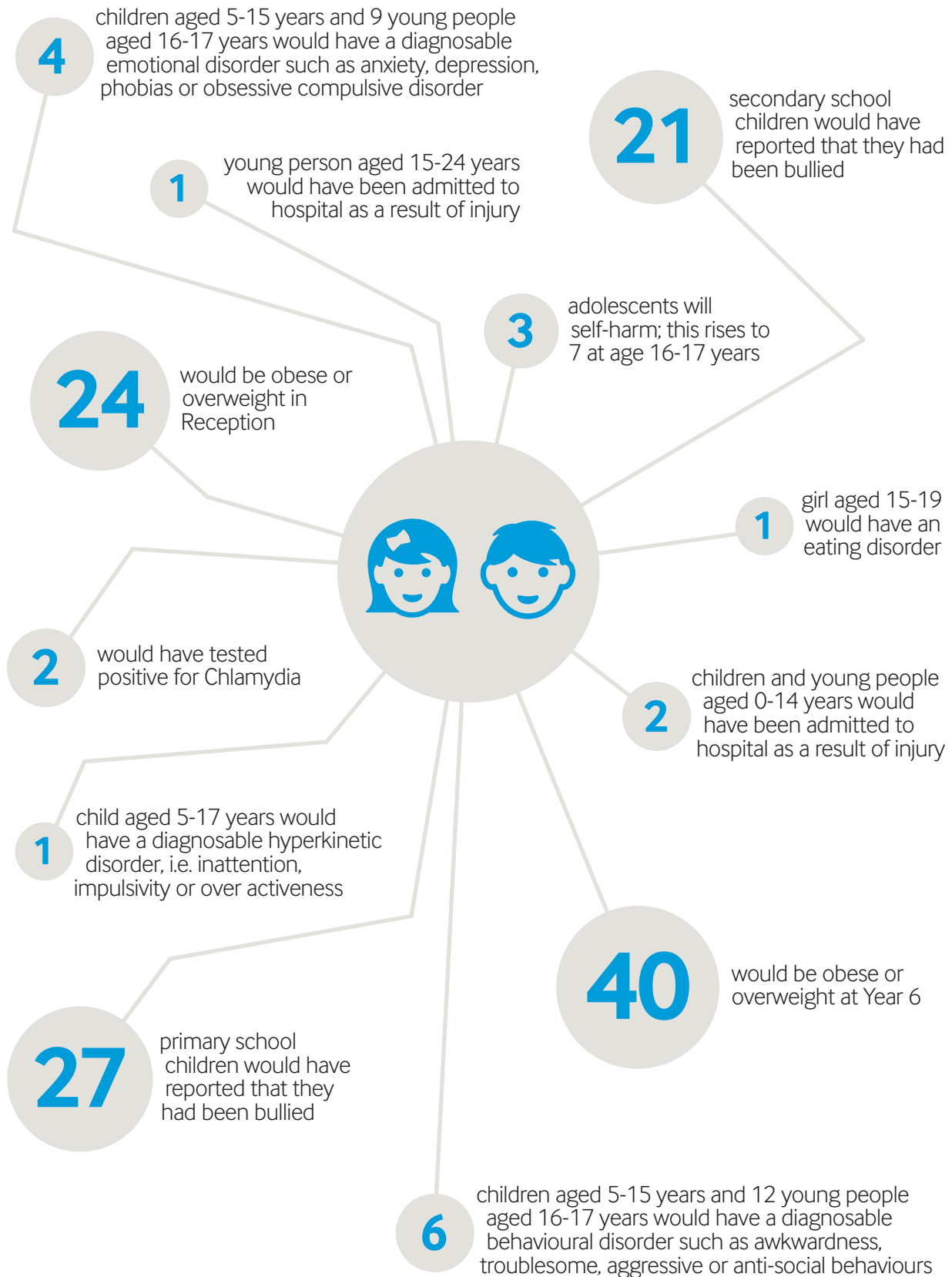
We firmly believe that one of the greatest investments we can make is to support families to have positive relationships and behaviours, particularly in early childhood, to ensure our children and young people are healthy, happy and emotionally resilient throughout their lives.

We will build on the positive work that we undertake with families in a child's early years to ensure good physical and mental health and wellbeing throughout childhood and into adulthood. For all age groups we will have good universal services that encourage healthy eating, exercise and positive lifestyles and activities.

Emotional resilience is fundamental to positive life outcomes. Young people who are happy and emotionally resilient are able to play an active part in their communities and make positive choices, particularly in adolescence and early adulthood when they are faced with opportunities to engage in a range of risk taking behaviours. Sunderland performs poorly in many measures of adolescent resilience, with teenage pregnancy and teenage mother rates, alcohol and substance misuse, youth offending and self-harm all too high. We also need to engage with our young people to develop our understanding of what it means for them to be happy.

In a 2015 national survey of head teachers, two-thirds named the mental health of pupils as their top concern (The Key 2015). We know that over half of mental ill-health in adult life (excluding dementia) starts by the age of 14 and seventy-five per cent by age 18. Therefore we need to be certain that our services for supporting children and young people presenting with mental health issues are first class. This must begin with our universal services – midwives, health visitors and GPs – providing effective support to parents and carers with poor mental health. Schools also need to be able to quickly identify children and young people presenting with mental health issues and be confident in supporting them and their families. For children, young people and families whose needs are more complex, we need to ensure there is a consistent, systematic approach to the support that they receive.

IF SUNDERLAND WAS A VILLAGE OF 100 CHILDREN...



The actions we will take to achieve improvements in this area are:

- Ensure 0-19 commissioned services reflect the health needs of children and young people in the city
- Commission a piece of work to understand how happy children and young people are in Sunderland and act upon the findings
- Improve the Sex & Relationships Education offer in the city
- Improve the offer for substance misuse services for young people in the city
- Develop a thorough understanding of our current emotional wellbeing services, including the demand for these services, and deliver the change needed

We will measure the impact of our actions by monitoring the following indicators:

- Children and young people with a diagnosable mental health condition will access evidence based treatment
- Number of referrals to Community Child and Adolescent Mental Health Services (CAMHS)
- Number of referrals to in-patient Child and Adolescent Mental Health Services
- Children and young people accessing 24/7 crisis resolution and liaison mental health services
- Hospital admissions due to alcohol specific conditions
- Hospital admissions due to substance misuse
- Prevalence of smoking at age 15
- Young people diagnosed with Chlamydia
- Under 18 conception rates
- Reception class children who are obese or overweight
- Year 6 children who are obese or overweight
- Children aged 5 with one or more decayed, missing or filled teeth
- 15 year olds physically active for at least one hour per day seven days a week
- 15 year olds with a mean daily sedentary time in the last week over 7 hours per day

Supporting plans and strategies:

Sunderland Health and Wellbeing Strategy

Sunderland CAMHS Transformational Plan



PRIORITY 4

All children and young people do well at all levels of learning and have ambition and the skills for life

Why is this a priority?

Children's attainment can determine their opportunities for the rest of their lives. Young people who do not achieve good educational qualifications have significantly diminished opportunities compared to those who do. Our ambition is that all children and young people attain the very best results which will give them the best opportunities to take an active part in the economy and achieve their personal aspirations.

We will complement the work of the Economic and Education Leadership Boards which want everyone to have the skills, attributes, qualifications and experiences that enable them to realise their full potential, placing children and young people at the heart of a strong economy. We will support schools to improve and raise pupil attainment across the city by focusing our attention on supporting children and young people to access school and the curriculum.

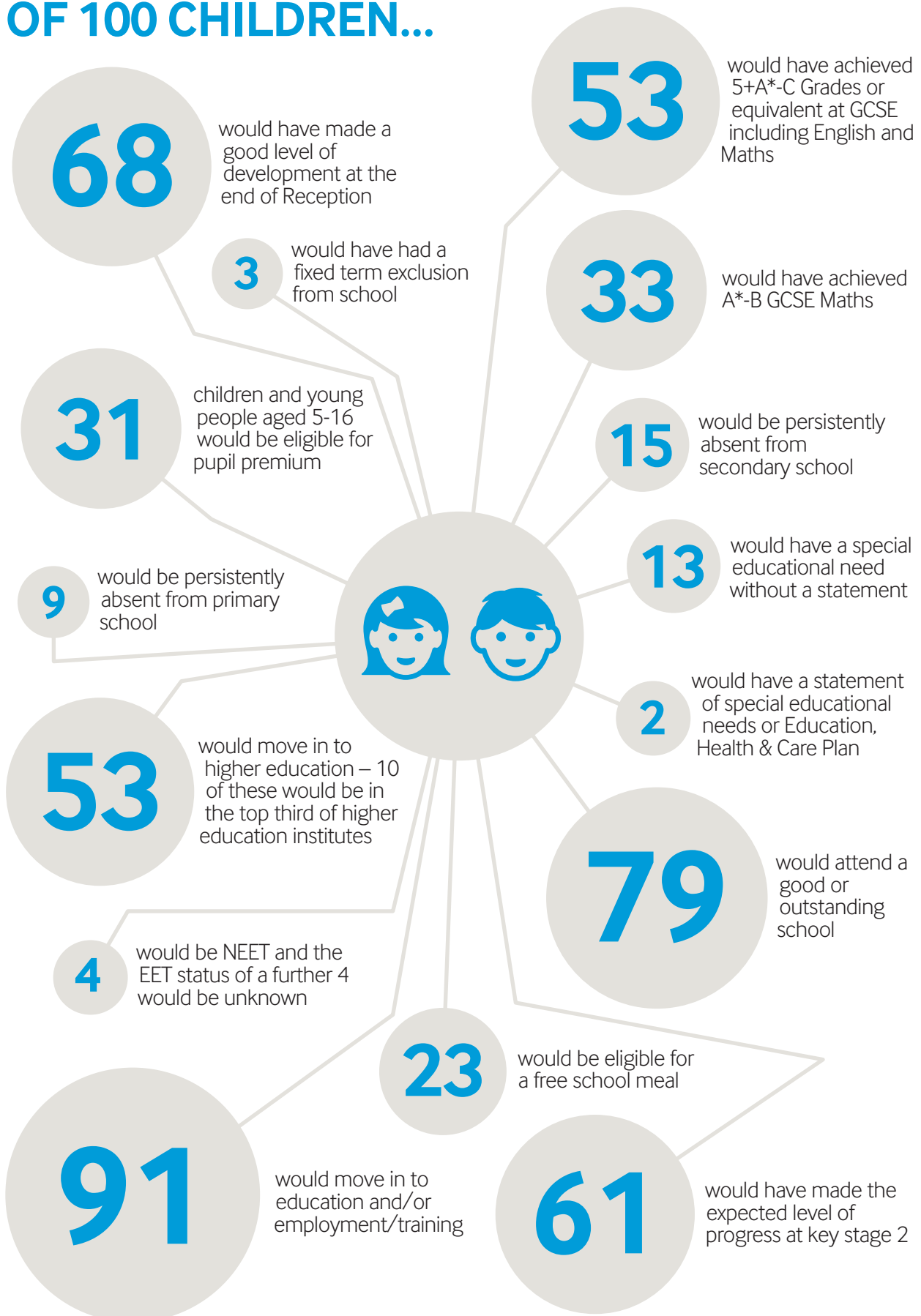
School persistent absence rates in the city are too high and the equation is quite simple: if a child or young person is not attending school or other formal education setting, they cannot hope to achieve the qualifications required for a prosperous future. However, we recognise that by focusing on children with poor attendance we will often find more complex issues within the family such as child or parental mental health or learning difficulties, alcohol or substance misuse, domestic violence and caring responsibilities, to name a few. It is essential therefore that we have effective links to the early help offer to respond to these issues and holistically support individual families' needs.

We need children to be ready for learning at every stage and are supported to make the most of education and training made available to them. However, we know that children and young people can be affected when transitioning from one education establishment to another, and so we must ensure that there are effective mechanisms in place to support this.

We know that many young people disengage from education at around age 14 – in between key stages 3 and 4. We must identify the trigger points to prevent this from happening and apply early intervention processes when it does.

Our more vulnerable children and young people need more support to access the curriculum, particularly children and young people who are looked after, have special educational needs and those from low income families. It is important we look to address these inequalities and narrow the attainment gap by making best use of pupil premium and other resources we have available.

IF SUNDERLAND WAS A VILLAGE OF 100 CHILDREN...



The actions we will take to achieve improvements in this area are:

- Develop a Positive Transitions Programme for all schools and settings to ensure children are supported at key transitions in their education
- Conduct a piece of research to understand why young people, particularly those between Key Stages 3 and 4, disengage from education and act on the findings
- Learn from those schools that make the best use of Pupil Premium and roll out best practice across the city
- Review the role of the Virtual School and its impact in narrowing gaps in performance for looked after children

We will measure the impact of our actions by monitoring the following indicators:

- Pupils in reception achieving a Good Level of Development
- Pupils at the end of Key Stage 2 achieving the expected standard in Reading, Writing and Maths
- Pupils at the end of Key Stage 4 attaining Level 4+ in GCSE English and Maths
- Students in Key Stage 5 achieving A*-A grades at A-level or equivalent
- Students in Key Stage 5 achieving A*-E grades at A-level or equivalent
- % of permanent exclusions of school population
- % of fixed term exclusions of school population
- % of pupils persistently absent in primary school
- % of pupils persistently absent in secondary school
- % of young people who have reached statutory school aged (Academic year 12-13) who are in employment, education or training
- Young people leaving Key Stage 5 who have moved onto a Higher Education Institute
- Young people leaving Key Stage 5 who have moved onto a top third Higher Education Institute

NB. We will analyse this data for all pupils and where the data is available, we will also analyse it by gender, ethnicity, free school meals eligibility, looked after children, children with special educational needs and/or disabilities to understand where inequalities exist and where the gap needs to be narrowed. We will also monitor multiple protected and non-protected characteristics, i.e. gender and free school meals eligibility, gender and different ethnicities, etc.

Supporting plans and strategies:

Sunderland Education Strategy – Get Ready



PRIORITY 5

All children and young people are kept safe from harm

Why is this a priority?

There is nothing more important than keeping children safe from abuse and harm. Notwithstanding the immediate emotional effects of abuse and neglect, such as isolation, fear and an inability to trust, the long term impact can be equally damaging. The life chances of children in need or in need of protection and those in the care system are way below their peers. They often suffer from poor health and wellbeing with a significant number having poor mental health. They often do not achieve well at school or move in to further and higher education. Many become NEET, involved in crime or alcohol and substance misuse. Into adulthood, those in the social care system often experience low self-esteem, depression, and relationship difficulties. It is essential we prevent this from happening.

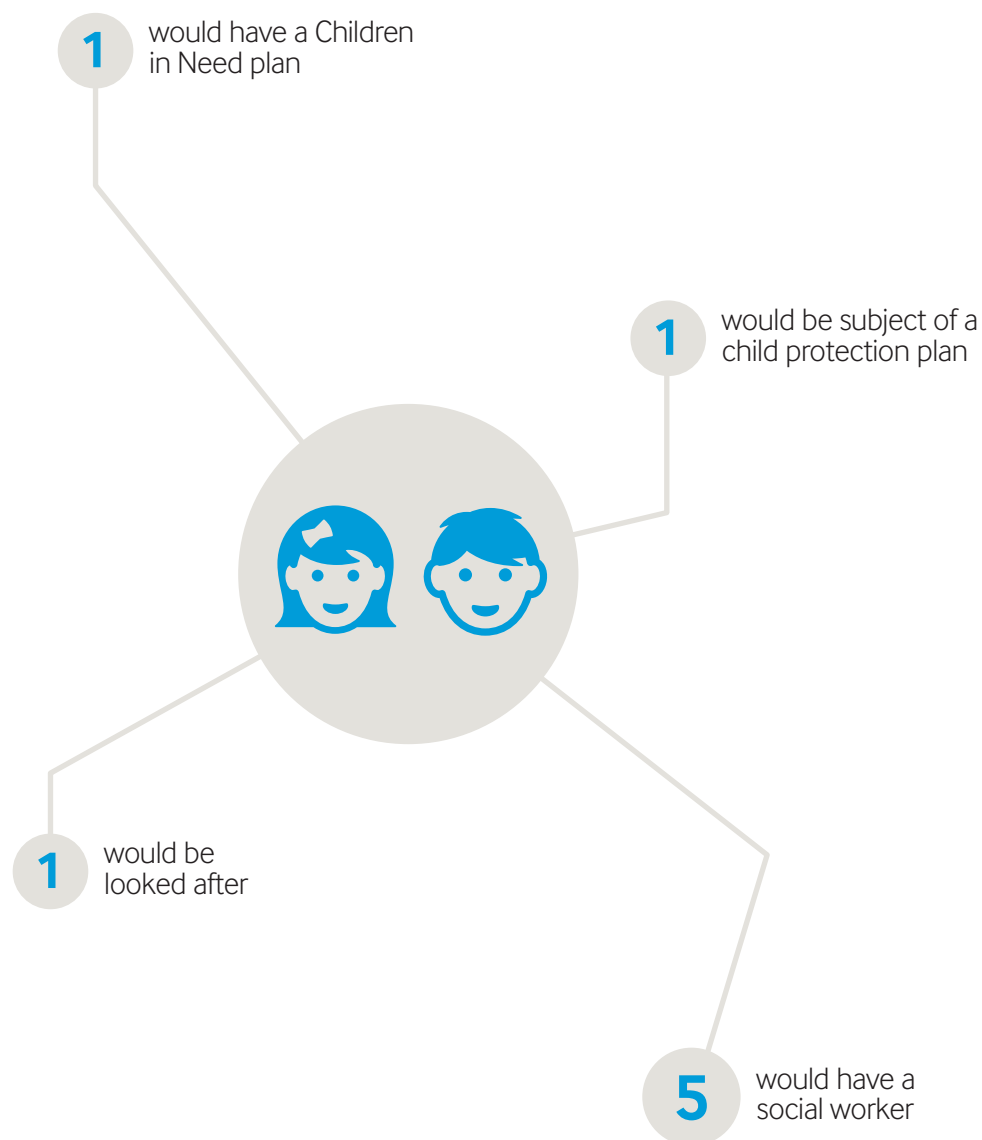
The Children's Strategic Partnership recognises the role of the local authority, Together for Children and the Sunderland Safeguarding Children Board in reducing the number of children and young people who are in the social care system. To that end we would not want to duplicate their work, however we feel there is some complementary preventative work we can engage in to support families and prevent them from reaching crisis point.

The majority of child protection cases in the city are as a result of neglect. We therefore need to identify the signs of neglect at an earlier stage and support families who need help. We will work with the Safeguarding Children Board to link the Threshold Model for safeguarding and the SSCB's responsibilities around promotion of welfare with the early help offer, and roll out training for practitioners so that they are confident when to escalate a case to children's social care. Having a coherent and coordinated early help offer in the city will help us to support families at an earlier stage, providing them with the coping mechanisms needed and prevent children from entering the social care system.

In addition, there are a disproportionate number of cases in the children's social care system where there is domestic violence in the family. We will work with the Safer Sunderland Partnership to support children who are affected by domestic violence and raise awareness of its impact on children's lives.

There are a number of areas being highlighted nationally, which we need to address locally. These include the sexual exploitation of children and young people, the Prevent agenda to minimise the risk of young people becoming radicalised and Female Genital Mutilation (FGM). We will work across partnerships to develop suitable approaches and raise awareness of those issues and ensure that we have a coherent response for practitioners and services where they find evidence of these in our communities.

IF SUNDERLAND WAS A VILLAGE OF 100 CHILDREN...



The actions we will take to achieve improvements in this area are:

- Revise, review, refresh and develop the Threshold Model with the Sunderland Safeguarding Children Board to include improved understanding of neglect and early help
- Work with the Safer Sunderland Partnership, Sunderland Safeguarding Children Board and Safeguarding Adults Board to develop a coherent approach to support children affected by domestic violence
- Engaging with the Sunderland Safeguarding Children Board and the Safer Sunderland Partnership, develop approaches to address vulnerable children including Child Sexual Exploitation (CSE), risk taking behaviour, Female Genital Mutilation and preventing radicalisation

We will measure the impact of our actions by monitoring the following indicators ...

- Rate of children in need per 10k of the population
- Rate of children subject to a child protection plan per 10k of the population
- Rate of Looked After Children (LAC) per 10k of the population
- Rate of referrals per 10k
- Percentage of all referrals with the outcome of No Further Action (NFA)
- Percentage of children subject to a child protection plan for a second or subsequent time
- Number of LAC missing

Supporting plans and strategies:

Sunderland Threshold Guidance

Operation Encompass

Northumbria Operation Sanctuary



PRIORITY 6

All children, young people and their families have a voice and influence

Why is this a priority?

Listening to and respecting the views of children, young people and families is one of the leading principles underpinning our approach to improving outcomes for children, young people and families.

There is a lot of good work happening around the city to engage with young people and ensure they have a means to participate and have their views heard. This includes the following groups:

- Sunderland Youth Parliament
- Change Council (Looked After Children)
- Children and Young People's Advisory Network
- Sunderland Young Inspectors
- City Equals (disabled children and young people)
- Lesbian, Gay, Bisexual and Transsexual (LGBT)+ Forum/ Support Group
- EYE Group (Mental Health) - NTW

Young people also get involved in 'Make Your Mark' and 'State of the City Debate'.

However, we now need to develop our approach and further strengthen the voice of children, young people and families in service development and in decisions that affect them. We hope to empower people across the city to influence decisions and to participate in family, community and social life.

The actions we will take to achieve improvements in this area are:

- Build partnership capacity to increase participation, voice and influence of children and young people in service design and delivery and decisions that affect them
- Expand the breadth of children and young people who participate and influence service design and delivery to include primary school children, seldom heard voices and all vulnerable groups, for example young offenders, looked after children, young carers, those living in poverty and any children and young people that feel disenfranchised by society
- Establish a virtual network of officers to engage with more children and young people to ensure their voice is more representative of the population
- Commission a piece of research to understand how children and young people want to participate in play, leisure, culture and sporting opportunities
- Commission a piece of research to understand what it's like to be a young person growing up in the city and design solutions to issues with young people
- Work with the Adults Partnership Board to progress Sunderland's commitment to be an All Age Friendly city



4. WORKING IN PARTNERSHIP

The Children's Strategic Partnership will work with other strategic partnerships providing advisory support as well as monitoring and assurance on issues relating to children and young people. These partnerships are the Health and Wellbeing Board, Economic Leadership Board, Education Leadership Board, the Sunderland Safer Partnership and the Sunderland Safeguarding Children Board. Appendix A sets out how the priorities of each of those partnerships and other agencies complement each other in working towards achieving the same goals for children, young people and their families.

The Sunderland Children's Strategic Partnership will engage with these individual partnerships to:

- Ensure the needs of children and young people, particularly vulnerable groups, are reflected in their priorities and plans
- Provide the mechanism by which they can take forward work in relation to children and young people
- Advise on emerging issues for children and young people in Sunderland
- Provide progress updates in relation to the key priorities identified for children and young people in Sunderland

The Partnership will also support and oversee the work of key multi-agency partnerships for children and young people.

A diagram showing the relationship between the Children's Strategic Partnership and other partnerships is included at Appendix B.



5. DELIVERING THE PLAN AND MEASURING IMPACT

The actions identified to achieve the vision and priorities described in this plan will be delivered through existing work programmes and strategies, or through newly founded task and finish groups. Progress on actions will be reported to the Children's Strategic Partnership through a bi-monthly performance programme which is set out below.

This CYPP covers the period 2017-22, however we anticipate that the actions will be achieved in the first one or two years. Therefore, the action plan will be reviewed annually to assess the impact on the lives of children, young people and families, and new actions will be developed accordingly.

Where there are particular concerns or our improvement actions are found to have little impact, we will challenge each other to take decisive action. Where positive impacts are identified, we will explore how we can extend this good practice to other areas of work.

Our 'Plan on a Page' summarising our vision, principles, priorities and actions can be found at Appendix C.

Performance monitoring programme 2017/18

| CSP Meeting | Priority area |
|----------------|---|
| April 2017 | Early Help |
| June 2017 | Best Start & Voice of children and young people |
| September 2017 | Health & Wellbeing including CAMHS |
| November 2017 | Education (provisional data for 2016/17) & Early Help |
| December 2017 | Safeguarding |
| February 2018 | Full plan review in preparation for 2018/19 |

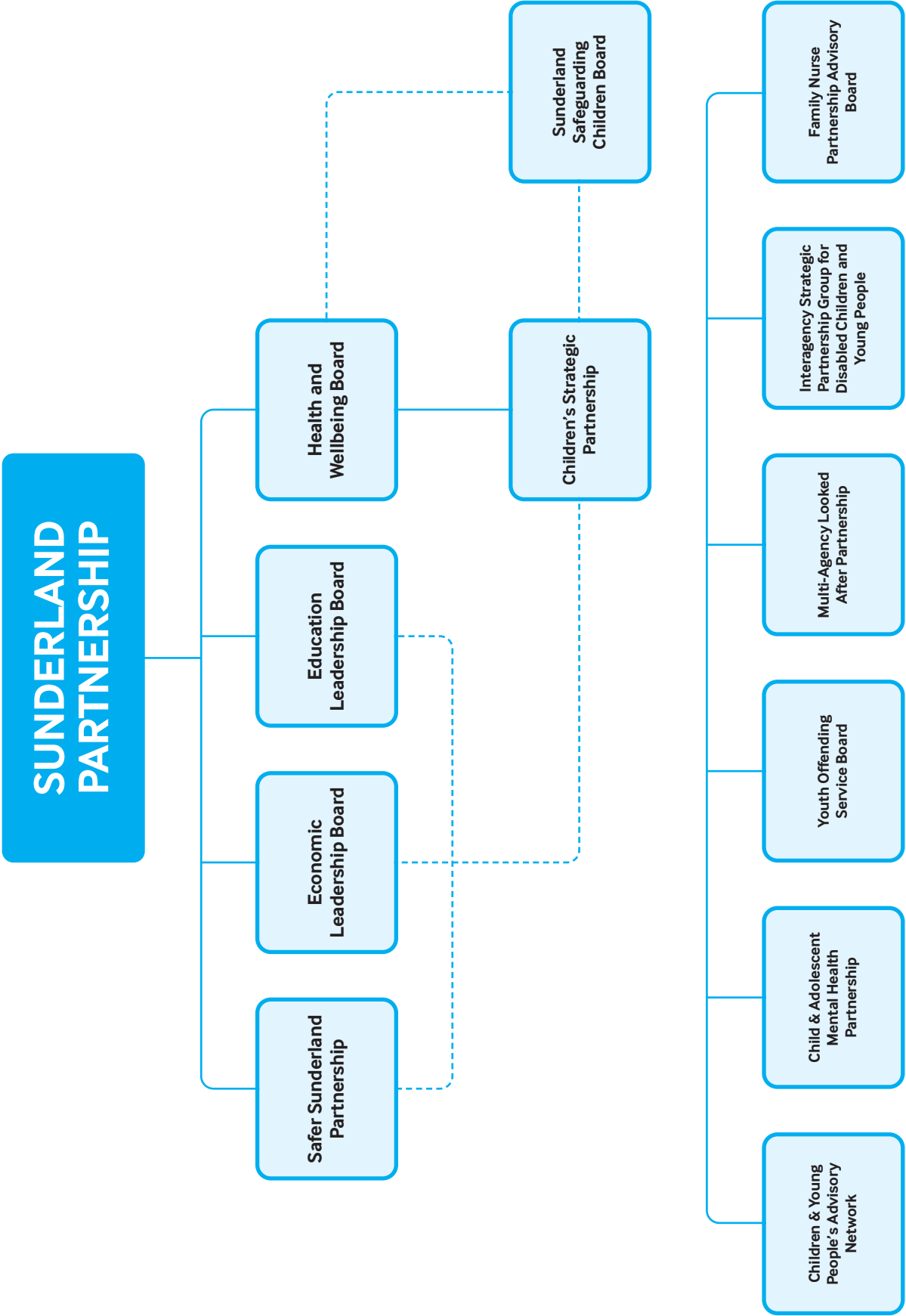
Dates for performance reporting beyond 2017/18 will be agreed in line with the reviewed action plan and resulting new priorities, as appropriate.

APPENDIX A

STRATEGIC PARTNERSHIPS - PRIORITIES

| | Children's Strategic Partnership | Health & Wellbeing Board | Safer Sunderland Partnership | Sunderland Safeguarding Children Board | Education Leadership Board | Economic Leadership Board | Adults Partnership Board |
|---|----------------------------------|--------------------------|------------------------------|--|----------------------------|---------------------------|--------------------------|
| All children, young people and families that need help are identified and supported as early as possible | ✓ | | ✓ | ✓ | | | ✓ |
| All children have the best start in life | ✓ | ✓ | | | ✓ | | |
| All children and young people enjoy good health and wellbeing | ✓ | ✓ | ✓ | | | | |
| All children and young people do well at all levels of learning and have ambition and the skills for life | ✓ | | | | ✓ | ✓ | |
| All children and young people are kept safe from harm | ✓ | | ✓ | ✓ | | | |
| All children, young people and their families have a voice and influence | ✓ | | | | | | ✓ |

APPENDIX B



APPENDIX C

CHILDREN AND YOUNG PEOPLE'S PLAN ON A PAGE

| Our 5 year plan: 2017/18 to 2021/22 | | | | | | |
|-------------------------------------|--|--|---|---|---|--|
| Vision | Working together for children, young people and families | | | | | |
| Priorities | All children, young people and families who need help are identified and supported as early as possible | All children have the best start in life | All children and young people enjoy good health and wellbeing | All children and young people do well at all levels of learning and have ambition and the skills for life | All children and young people are kept safe from harm | All children, young people and their families have a voice and influence |
| | <ul style="list-style-type: none"> Develop an Early Help Strategy Design and implement a multi-agency Early Help assessment, planning and review toolkit Develop a comprehensive performance framework Ensure all partners understand and can fully commit to the delivery of multi-agency early help Combine Early Help and Troubled Families into one offer | <ul style="list-style-type: none"> Ensure universal services embed prevention and health improvement outcomes Research parenting programmes and commission the most effective Deliver the behaviour change pilot to increase the take up of the 2-year old offer Facilitate universal access to Healthy Start vitamins Work with the Adults Partnership Board to support families where there is parental vulnerability | <ul style="list-style-type: none"> Ensure services reflect the health needs of children and young people Understand how happy children and young people are in Sunderland and act upon the findings Improve the Sex and Relationships Education offer in the city Improve the offer for substance misuse services for young people in the city Develop our understanding of emotional wellbeing services and deliver the change needed | <ul style="list-style-type: none"> Develop a Positive Transitions Programme to support children at key transitions Understand why young people disengage from education and act on the findings Learn from schools that make the best use of Pupil Premium and roll out best practice across the city Review the role of the Virtual School and its impact in narrowing gaps in performance for looked after children | <ul style="list-style-type: none"> Revise the Threshold Model Develop a coherent approach to supporting children affected by domestic violence Develop approaches to address vulnerable children | <ul style="list-style-type: none"> Build partnership capacity to increase the voice of children and young people Expand the breadth of children and young people who participate Establish a virtual network of officers to engage with more children and young people Understand how children want to participate in play, leisure, culture and sporting opportunities Understand what it's like to be a young person growing up in the city and design solutions to issues Progress Sunderland's commitment to be an All Age Friendly city |
| Principles | Voice and influence of children, young people and their families | Place children and families at the heart of everything we do Involve children, young people, their families and communities in the design and evaluation of services Guarantee children's rights to essential services Empower children and young people to participate in family, community and social life | | | | |
| | Intelligence led services | Improve the commissioning of services, eliminate duplication, achieve the best value for money, simplify processes and evaluate outcomes Use data and intelligence to identify priorities and monitor the impact of services Review the effectiveness of our interventions | | | | |
| | Early identification and prevention | Identify all children, young people and families who need help and intervene early Ensure there is support for children and young people across all key transitions | | | | |
| | Narrowing the gap | Know where the gaps in outcomes exist for all children and young people Focus on narrowing inequality gaps for all vulnerable children and young people | | | | |
| | Strong and inspiring leadership | Build a restorative, child-focused and family-centred approach to working with children, young people and their families Attract and support a skilled workforce Focus on continuous improvement Build trusted working relationships and shared learning across services for children and young people Work with other strategic partnerships to improve outcomes | | | | |

