

Isle of Wight Local Preventative Strategy

For Agencies providing Island Services
for Children and Young People

2004-2005





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Foreword

We welcome the production of this strategy, which aims to reduce isolation and to promote good outcomes for all children and young people on the Island.

The Council has been working for a number of years to improve services for children and young people and this has recently been given additional emphasis with the Government's Green Paper on children services "Every Child

Matters". We believe every child does matter and this strategy seeks to make this a reality. It has come about as a result of a lot of hard work and input from a wide range of representatives from many relevant bodies.

We consider the resulting strategy to be robust and have real potential to improve opportunities for all Island children and young people.



Jill Wareham

Jill Wareham

Portfolio holder for Children's Services



Gordon Kendall

Gordon Kendall

Portfolio holder for Adult and Community Services

Local Preventative Strategy

Prevention – ‘the promotion of child well-being by enabling children and young people to develop their full potential, and the promotion of family well-being by enabling parents/carers to meet the overall needs of their children and themselves’

Sinclair, Hearn and Pugh, 1996

The aim of the Island's Preventative Strategy is to promote *positive outcomes* and prevent children and young people from experiencing negative outcomes, both as children and young people, and later in their lives as adults. This strategy will set the direction for the Island's children's and young people's services whose aim is to promote social inclusion.

Central to the Government's vision is the importance of effective joint working between bodies responsible for services for children and young people to address the major factors that stop young people from achieving their potential.

This Strategy is based on a commitment to:

- Listen to and act upon the views expressed by children and young people
- Designing and implementing a needs led and outcome based multi-agency approach, focused on local communities

- The collective analysis of service gaps relating to children and young people at risk of social exclusion
- Agreement of shared objectives and priorities, based on the analysis of service gaps
- Identification of priority areas for improvement in 2004/05 including the development of systems for information sharing and assessment of children at risk, within the local authority and across other agencies.
- The United Nations Rights of the Child

We recognise that this local preventative strategy is the mechanism for the Local Authority and other statutory and non-statutory agencies to achieve our objectives as currently set out in plans and locally agreed targets and drawing upon positive examples of good practice. The Island is committed to a co-ordinated approach to prevention across Local Authority and health care services for children and young people. To this end a 'Statement of Intent' has

been issued and agreed by the Local Authority, Health Care NHS Trust and the Primary Care Trust.

“The strong commitment made by the three authorities is that:

- in future they wish to see health and social care services delivered jointly with a view to full integration of those services wherever that either improves services to the people we serve, the working experience and development of our staff or creates greater efficiencies”

This Statement of Intent is based on the principle:

- “that services should be driven by the needs of the service user and our wider community rather than professional or organisational boundaries
- that all managers are expected to apply this principle in the future design and delivery of services”

In order to support the drive to secure preventative support for children and young people a range of work will be undertaken through:

- the Government’s information sharing and assessment (ISA) initiative;
- to facilitate the lawful sharing of information between all organisations with responsibility for children

Through the development of:

- protocol agreements to engage all agencies in the process of working together;
- information sharing arrangements and co-operative working practices;
- common referral and assessment formats

To improve outcomes for children and young people, in particular, those who are the most vulnerable, at risk of social exclusion.

These arrangements will be underpinned by an information and communication infrastructure using electronic information exchange systems. Steps will be taken to ensure the necessary safeguards are developed to ensure that the access and use of the systems are managed within the constraints of current legislation.

Consultation Feedback

Consultation was undertaken through professional and public meetings, advertisements in the local press with copies of the LPS being made available in public libraries. In addition, children and young people were consulted using 'viewpoint' a computer game with questions embedded to elicit responses to specific questions.

Approximately 100 people attended public and professional meetings and 1,000 copies of the LPS consultation document were distributed. The document was also available via the council website. In total 37 replies were received, however, in some cases, responses were on behalf of organisations rather than individuals.

There is overall agreement to the priorities of

the Local Preventative Strategy. There were some elements of disagreement but no strong disagreement.

There was disappointment expressed at being able to complete only some of the consultation on-line and this may have affected response rates. Responses came from a variety of areas including social services, education, health, voluntary sector, Surestart, Early Years, parents and a number of head teachers. In addition Housing Division, Fire Service and Family Learning made submissions.

The second part of the consultation sought to ascertain how organisations contributed to the goals set out in the LPS vision. The main points are set out in Annexe E.

1. It should be easier to find out about services and to get help.

Strongly disagree	0%
Disagree	0%
Don't know	3%
Agree	35%
Strongly agree	61%

2. The local preventative strategy will allow services to respond to local community needs.

Strongly disagree	0%
Disagree	3%
Don't know	16%
Agree	45%
Strongly agree	26%

3. Children at risk of exclusion should be identified early and services provided

Strongly disagree	0%
Disagree	0%
Don't know	10%
Agree	22%
Strongly agree	68%

4. I believe that children and young people will be better supported and safeguarded as a result of the Local Preventative Strategy.

Strongly disagree	0%
Disagree	3%
Don't know	16%
Agree	52%
Strongly agree	22%

5. I am in favour of the move towards Cluster Groups (Local Teams)

Strongly disagree	0%
Disagree	3%
Don't know	6%
Agree	48%
Strongly agree	42%

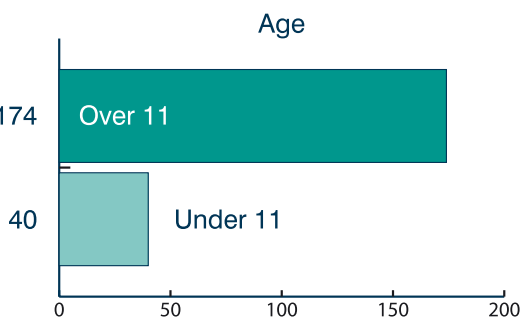
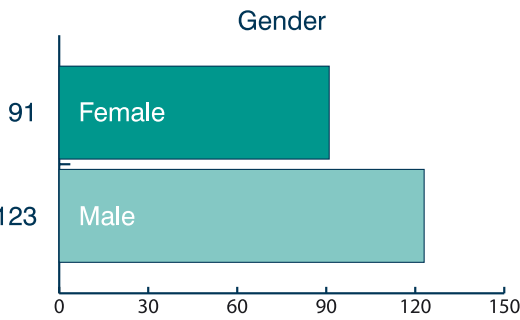
6. I believe that multi-agency teams will better meet the needs of children and young people.

Strongly disagree	0%
Disagree	3%
Don't know	6%
Agree	26%
Strongly agree	42%

Children and Young People's feedback

214 children and young people took part in the process.

The school-based Viewpoint interim findings are summarised as follows in reference to risk and protective factors:



School

Non-attendance at school = 22% have skipped school at least once in the last month
 Enjoying school = 53% did not enjoy school

Relationships

19% said adults out of school did not listen to them and 16.5% said adults or friends did not praise them when they had done something they were proud of.

20% were not part of a group of friends and 23% did not have a best friend.

Most worried about school tests/exams, leaving school/finding a job or being in serious trouble. 25% of children and young people found information from the internet or friends.

54% did not go to an after school club. Of those that did the majority did to play sport (69%). 41% said they thought that somewhere

they feel safe would be a play area close to home.

Health

83% had seen a doctor or nurse in the last year and 60% had been to St Mary's. Of these half had been to accident and emergency. Over 80% said that the NHS staff they saw were friendly and were respectful of them as young people.

6% said they were unhappy all the time and 8% said they were angry all the time. 55% said they did not like the way they looked.

28% said they had been bullied in the last year with just over half asking for help. 79% who did ask said they did get help. In total 28% said they had bullied someone in the last year.

75% did not smoke, 40% never drank alcohol and 87% never took drugs.

The top 3 services children thought were the most important were:

Counselling for children with problems

Children with long term illness

Children in violent homes

Vulnerability to social exclusion – factors

Child/Young Person development

School Exclusion

Non-Attendance at school

Truancy

Under-achievement

Bullying Others

Lack of punctual attendance

Children without a school place

Children with special educational needs

Being bullied

Developmental delay

Failure to thrive

Child's disability

Long Term sickness

Anxiety & Depression

Not registered with GP/Dentist

Multiple A+E attendance

Missed medical appointments

Mental ill health

Substance misuse

Poor nutrition

Early sexual activity

Teenage pregnancy

Physical/emotional abuse/neglect

Unmet physical needs

Missing child

Running Away from home

Refusing to return home

Violence towards parents

Anti-social behaviour

Young child left alone

Behavioural problems

Extreme changes in behaviour

Illegal employment

Racial, cultural, gender, disability, sexual orientation discrimination

Fatigue

Unaccompanied minor

Young carer

Parenting capacity

Condoned absence

Lack of support

Parental/experience of education and valuing of education

Parent/carer disability

Mental Health problems

Poor maternal health

Not accessing ante/post natal care

Poor parent/child relationships

Inability to recognise health/ education/ care needs

Inappropriate anxiety regarding child/health/education

Domestic violence

Poor parenting skills

Preoccupied with own needs

Parental criminality

Parental substance misuse

Parent or family member with a learning disability

Parent or family member with disability or poor health

Family conflict

Parent/carer refuses support

Refugee/asylum seeker

Parental expectations

Environmental factors

Lack of positive social role models

Inadequate Housing

High mobility

Isolation

Lack of extended family support

Absence of stimulation (e.g. toys, play equipment, books, language opportunities)

No other agency support

Low income

Siblings caring for younger children

Financial problems

Significant bereavement

Homelessness

Living in deprived locality/neighbourhood

Anti-social friendship network

Our vision



We will work together so that Island children:

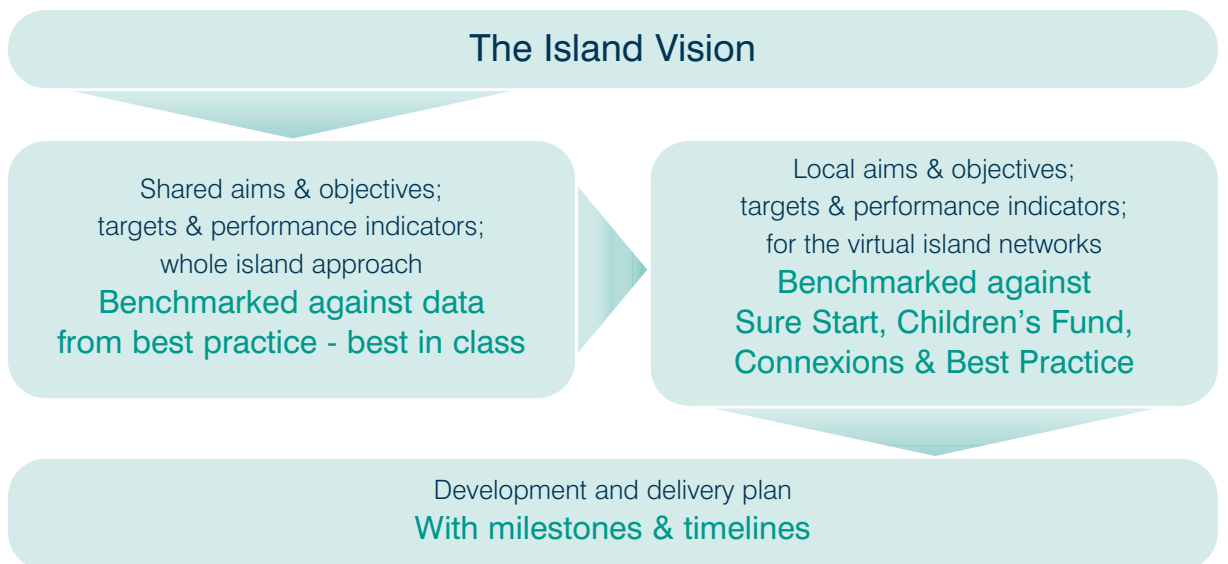
- Are healthy, safe, and well cared for;
 - Do well at preschool & school;
 - Are valued equally;
 - Are part of a caring family and social circle of friends;
 - Live in a crime free community;
 - Have a secure income and home as part of a family or as an individual
- and
- Become independent and able to make choices



Accountability framework

The delivery of the Island vision through this preventative strategy will be managed by the accountable groups, boards and partnerships

on the Island as in Figure 1. (For remit and operation of these groups see annexe B)

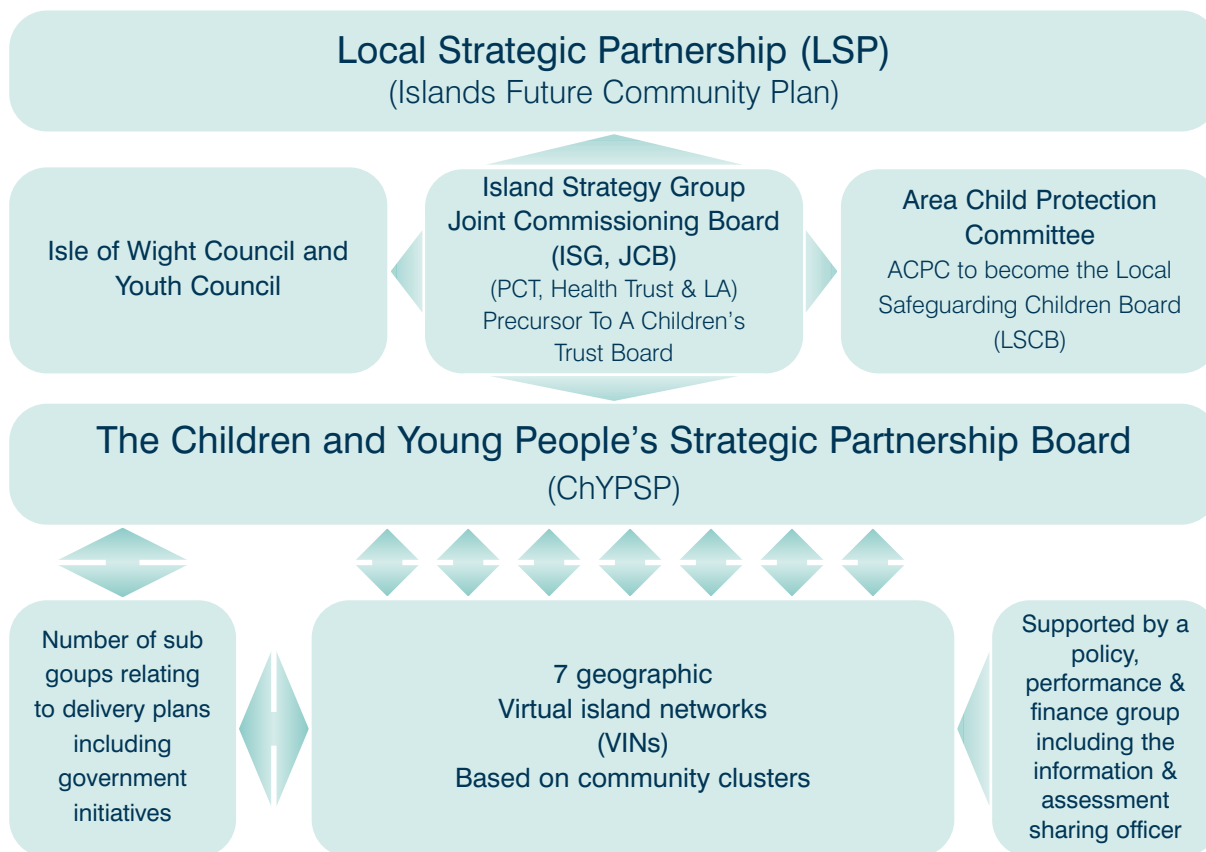


This preventative strategy brings together a range of existing groups, boards and partnerships in order to give a greater coherence and accountability in respect of services to children.

Lord Laming, from the enquiry into the death of Victoria Climbié, suggested there needs to be a chain of responsibility stretching from front-line staff through management to Chief Officers and Elected Members. His key conclusion about governance and accountability is that, *"The single most important change in the future must be the drawing of a clear line of accountability,*

from top to bottom, without doubt or ambiguity about who is responsible at every level for the well-being of vulnerable children." [1.27]

The structure in Figure 1 provides an accountability framework, starting from the local geographical networks through the Children and Young People's Strategic Partnership Board to the Local Strategic Partnership with Elected Members and key stakeholders of the Island community. Informed by two key Boards, the Area Child Protection Committee (to be replaced by the Local Safeguarding Children Board) and the Island Strategy Group/Joint



These networks would need to map local services; identify unmet needs; commission services and plan the workforce. Meeting the needs and identified outcomes by allocating finance, re-provisioning or bid for monies from appropriate funding sources

Figure 1

Commissioning Board (a precursor of a Children's Trust Board) in line with the Government's Green Paper "Every Child Matters". The Isle of Wight Council and Youth Council are vital to the process of accountability.

The council will be working with partners plans to have a Children's Trust in place by 2005. The aim is to deliver better outcomes for children, young people and their families across all services. This is the Government's preferred ultimate model. The Trust will integrate local education, social care and some health services for children and young people.

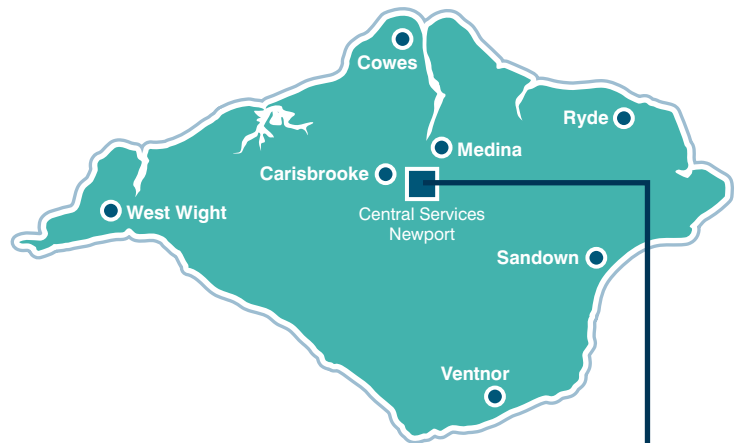
Children's Trusts will develop the following key characteristics as a commissioning body:

- co-located services such as Children's Centres and extended schools.

- multi-disciplinary teams and a key/lead worker system.
- common assessment framework across services.
- information-sharing systems across services so that warning signs are aggregated and children's outcomes are measured across time.
- joint training with some identical modules so that staff have a single message about key policies and procedures such as safeguarding children and can learn about each other's roles and responsibilities.
- effective arrangements for safeguarding children.
- arrangements for addressing interface issues with other services, such as services to parents with mental health problems.

Service locations

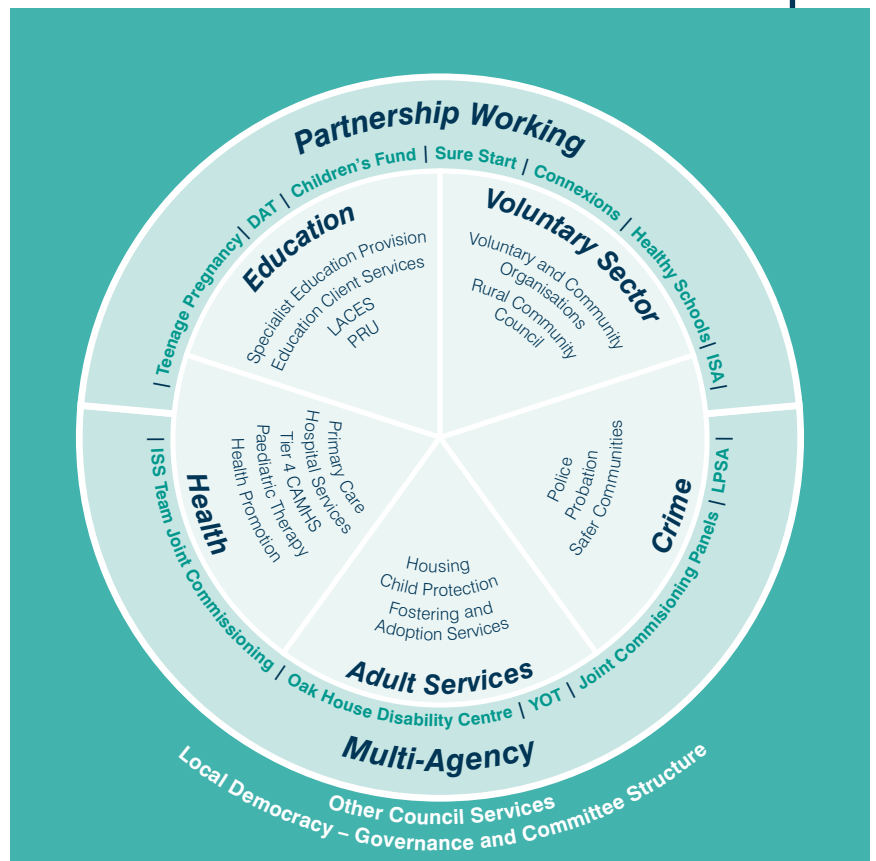
These diagrams attempt to convey the planned delivery of services for children, young people and families identifying those based centrally, delivering services on an Island wide basis and those to be developed through seven, planned community clusters / virtual Island networks (VINS) as shown by the map:



Central Services

Central services delivered on an Island wide basis. Partnership working is shown through the named Government Initiatives and by local multi-agency initiatives as groups around the central services.

(for terminology see glossary)

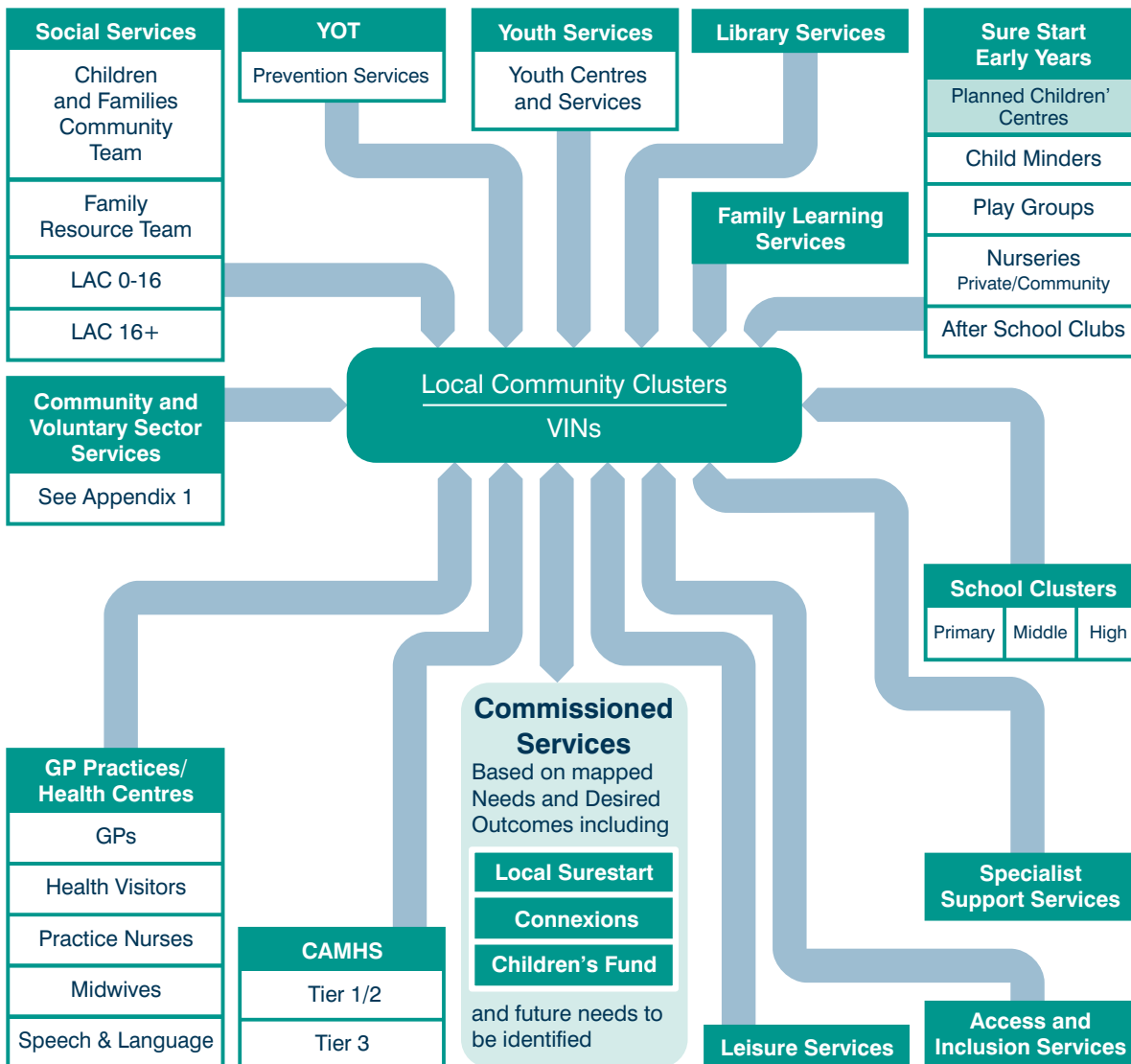


Community Cluster Services – 1st Stage (Current Contributions)

Work is underway to develop seven community clusters, based on school clusters together with Government funded Children's Centres and extended schools. The clusters will cover the following areas as shown previously on the map:

Cowes, Ryde, Sandown, Carisbrooke, West Wight, Medina and Ventnor

Some of our organisations are not big enough to provide individual staff in every cluster, hence the concept of virtual networks, where staff will be linked prior to co-location in a VIN area. The VINS will need to relate to centralised services and aim to bring together and focus services based on identified local needs.



See Annexe D – Mainstreaming

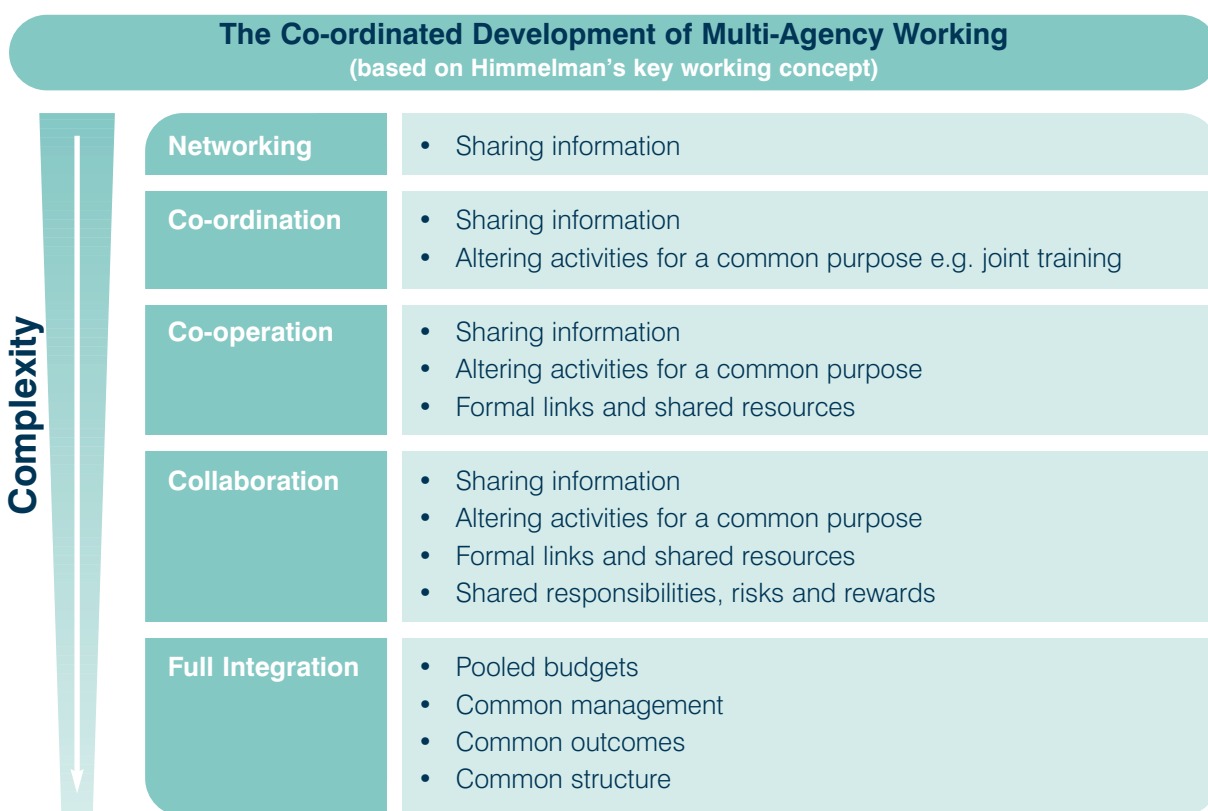
Response to the Green Paper organisational approach

This will be influenced by the emergent findings and approach, as laid out, by the National Service Framework for children (NSF) by the Department of Health in respect of child centred care.

The work of the national pilots for Children's Trusts and Information Sharing and Assessment

will be followed to inform and advise on best practice.

The following diagram represents the way in which organisational relationships evolve through a number of stages of complexity. The extent of integration will be guided by the needs of children and young people rather than by the



needs of Service Providers.

As a consequence of the implementation of the Green Paper "Every Child Matters" and subsequent Children Bill Next Steps guidance,

organisational structures will be reviewed and changed to bring about improved outcomes for children and families.

As a consequence of the implementation of the Green Paper "Every Child Matters" and subsequent Children Bill Next Steps guidance,

Workforce development

The Government's approach – next steps

The workforce reform measures proposed by the Government in *Every Child Matters* aims to develop a more coherent, stable and flexible children's workforce through:

- A set of common core occupational standards built up through a modular training framework
- The Sector Skills Development Agency (SSDA) to work with Government and a wide range of employers to set up a Sector Skills Council (SSC) to deliver this important children's workforce agenda. The SSC for Social Care, Children and Young People, will bring together those working in social care with other occupational groups who work with children and young people. Ensuring a robust and coherent approach to workforce planning for the children's workforce through a Children, Young People and Families Council.
- The Teacher Training Agency (TTA) will become the main delivery agency for training and developing school support staff and will be enhanced so that it is a key partner in the new process.
- The Chief Nursing Officer's review of nursing, midwifery, and the health visiting contribution to improving outcomes for children at risk will clarify and make recommendations for strengthening the role for these professionals in providing flexible, integrated and improved services for children.
- Addressing the need to recruit and retain more foster carers and to see them as part of the children's workforce. The Government will continue to build on the work of the *Choice Protects* Programme to expand and strengthen fostering services.

Implementation

Below are listed some of the key elements. Implementation for such a big change is a long term process for which this Local Preventative Strategy is a “blue print”. This leads into the timetable of developments set out on the following page.

Consultation

Consultation focussed upon key stakeholder groups e.g. looked after children, children in need, staff groups, parents and other agencies. It involved established groups, community partnerships and publicised events. Access and feedback was written and through viewpoint (an interactive method for children and young people) and also by limited internet access.

Timescales

Consultation process – January to April 2004

Timetable of developments – 2004-2008

Finance

Funding for services delivered as part of the Local Preventative Strategy will be channeled through the Council’s mainstream services and through the commitment contained in the joint statement of intent. There is a legal framework to

back the development of pooled budgets to allow for joint or integrated services.

The Legal Framework

The following Acts of Parliament provide the legal framework for pooled finance:

- The 1999 Health Act through Section 31
- The 2000 Local Government Act Section 2 together with the Local Government Act 1972

Accountability

- Functions delegated under Section 31 Health Act 1999.
- Accountability retained by parent bodies – including other organisations – statutory, voluntary and independent
- Scope of well being powers under Local Government Act 2000 Section 2 and Local Government Act 1972
- Agreement to be made at an Executive level

Access – Developing a common language

Eligibility for services operate at a range of levels (see annexe C):

- Level one** – Low risks/needs
- Level two** – Moderate risks/needs
- Level three** – Substantial risks/needs
- Level four** – Critical risks/needs

Timetable of developments

	National	Local
March 2004	Children Bill introduced. Sector Skills Council announced. Public Health consultation launched.	Refinement of the Local Preventative Strategy (LPS) following consultation. Multi-agency cluster meetings continue. Decision to enstate the CYPSP Board.
April	Ofsted and other Inspectorates consult on integrated inspection framework. Consultation on strategy for voluntary and community sector and children's services including streamlining funding. This will fit in with the work already undertaken by the Home Office.	Production of the LPS. Appointment of the Strategic Director for Children's Services. CYPSP Board revised Terms of Reference and work plan.
May	Consultation on local authority funding rationalisation. Consult on a Common Assessment Framework.	Consultants commissioned by the Strategic Health Authority in partnership with the LA, PCT, & Healthcare Trust to review the organisational structure of children and adult services. Draft implementation LPS plan.
July	Announce Spending Review and Public Service Agreement targets.	
Autumn	Further Next Steps document setting out: outcomes, indicators, Public Service Agreement targets and standards; more detail of national programme of change for children to be delivered in broad partnership; and funding for the period 2005 – 08 in the light of the 2004 Spending Review. Pay and workforce strategy.	Re-organisation completed of the Council Directorates. Appointment of the Lead Council Member (Portfolio Holder) for Children & Young People. Children's and Young people's outcome focused integration strategy actioned.
By November	Subject to the will of Parliament, Royal Assent for Children Bill.	
By end 2004	Publication of Public Health White Paper and National Service Framework for Children, young People and Maternity Services. Production of a Common Assessment Framework.	Work ongoing in line with issued guidance in respect of the establishment of an Island Local Safeguarding Children Board.
February 2005	Children's Commissioner appointed with children and young people involved in the process.	
April	Children's Commissioner in post.	Children's Trust established.
2006	Most local authorities to have a Director of Children's Services, Lead Council Member and Children's Trusts. Local Safeguarding Children Boards set up.	
2008	All local authorities to have a Director of Children's Services, lead Council Member and Children's Trusts.	

Glossary

A

ACPC Area Child Protection Committee

B

BEST Behaviour and Education Support Team

C

CAFCASS Children and Family Court Advisory and Support Service

CAMHS Child and Adolescent Mental Health Services

CDT Children's Disability Team

Children's Fund Government funded initiative to develop services for 5-13 year olds

Connexions Government funded initiative to develop services for 13 – 19 year olds

ChYPSB Children and Young People's Strategic Partnership Board

CYPU Children and Young People's Unit – now the Children Young People and Family Directorate

D

DAT Drug Action Team

DFES Department for Education and Skills

DH Department of Health

E

EYDCCP Early Years Development Child Care Partnership

I

IDAS The Island Drug & Alcohol Service

ISA Information Sharing & Assessment (formerly Identification, Referral & Tracking (IRT))

ISP Island Strategy Partnership

ISS Intensive Support Service (formerly known as IBIT)

J

JCB Joint Commissioning Board

L

LA	Local Authority
LACES	Looked After Children Education Service
LAC	Looked After Children
LDP	Local Delivery Plan (Health)
LSP	Local Strategic Partnership
LPSA	Local Public Service Agreement

N

NHS	National Health Service
NSF	National Service Framework

P

PCT	Primary Care Trust
PI	Performance Indicator
PPG	Partnership Planning Group
PSHE	Personal Social & Health Education
PRU	Pupil Referral Unit

S

SRB (LOCAL)	Single Regeneration Bid Government funded initiative to develop services for 0-5 year olds
SURESTART	

V

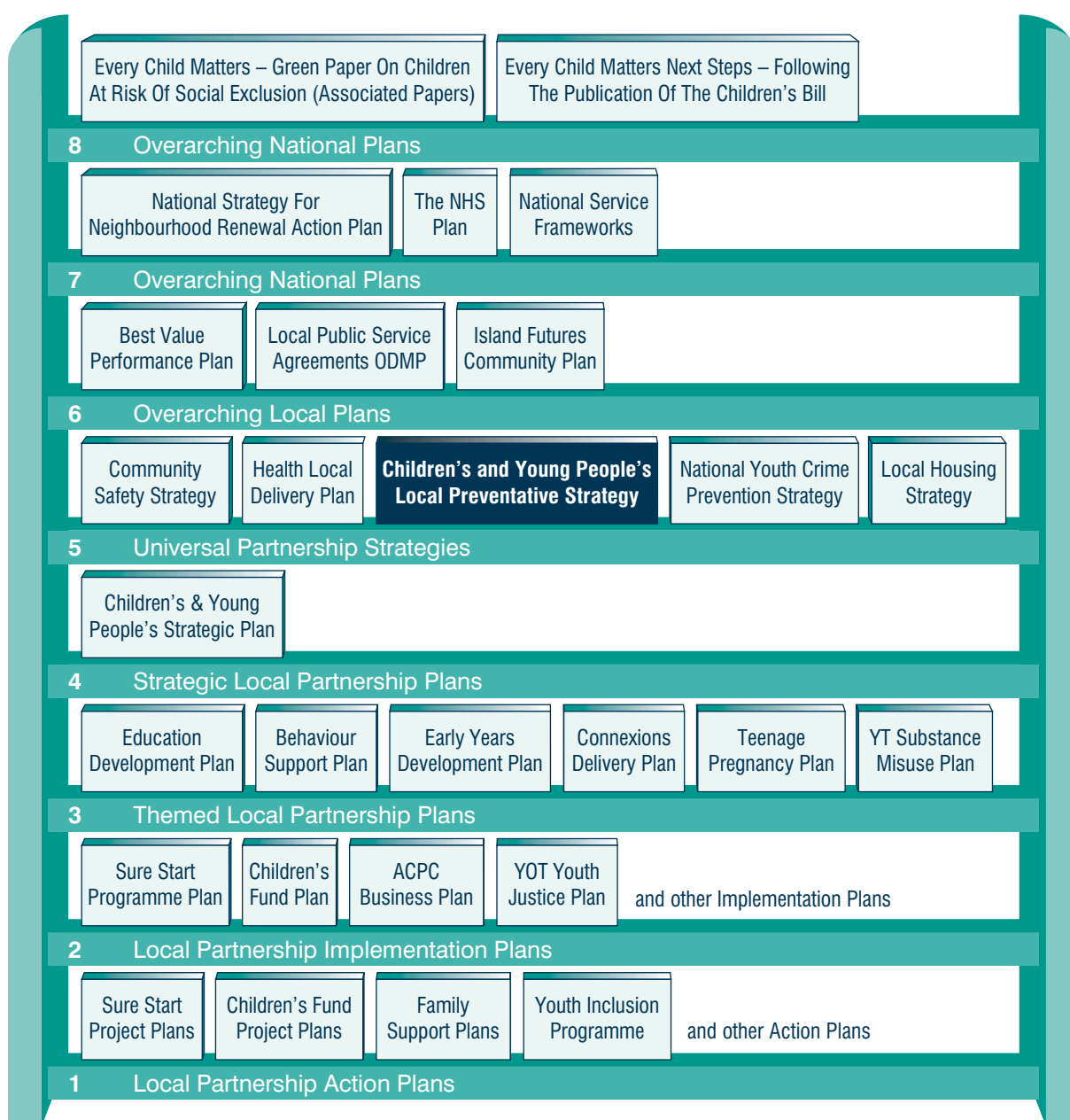
VINS	Virtual Island Networks
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Y

YOT	Youth Offending Team
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Annexe A

Partnership Planning 'bookcase'

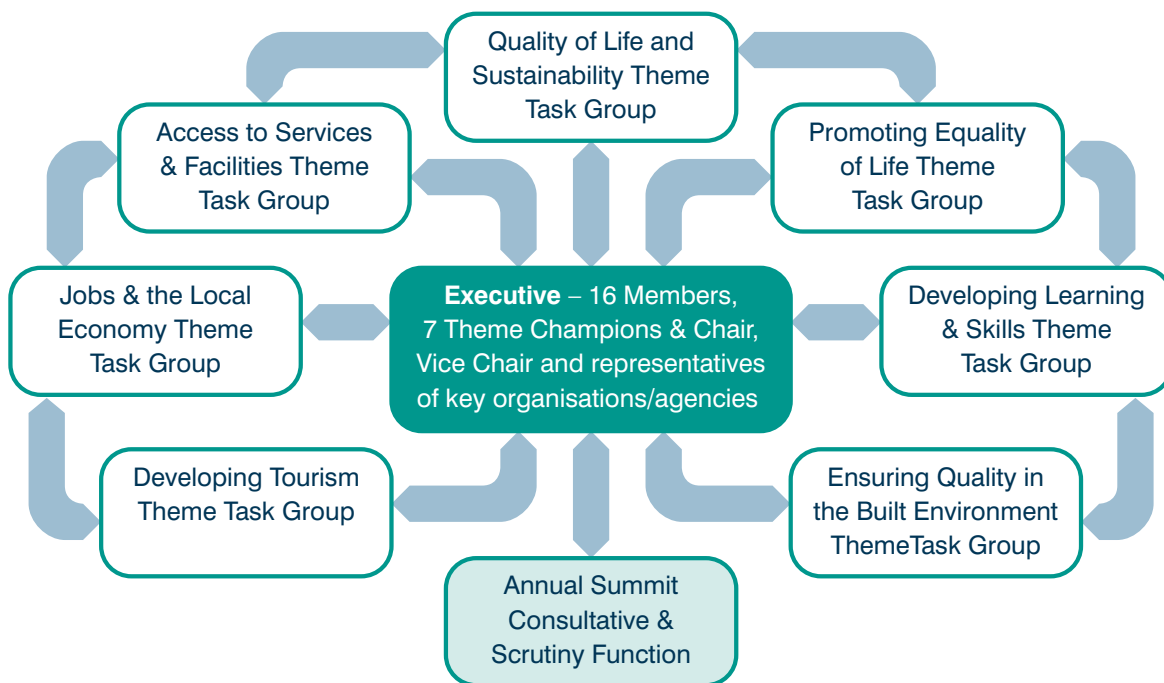


Annexe B

Roles, remit and membership of the named accountable groups

Annexe B(i)

Local Strategic Partnership



Island Strategy Group

Objectives

To consider the strategic direction for the future provision of health and social care services and other related public services on the Isle of Wight

and to oversee its implementation.

To act as the officer Group supporting the Local Strategic Partnership.

To oversee the implementation and funding for

the Local Delivery Plan and related area of the Community Strategy concerned with health and well-being.

To be the key forum for discussing other significant strategic issues relevant to those services on the Isle of Wight.

Membership

Primary Care Trust	Healthcare NHS Trust	Local Authority
Chief Executive	Chief Executive	Chief Executive
Executive Chairman	Deputy Chief Executive	Director of Social Services and Housing
Director of Public Health	Medical Director	Director of Education and Community Development
Director of Strategic Development		

Annexe B(ii)

Area Child Protection Committee

Remit

A multi-agency Group constituted as directed by the 1989 Children Act and advised by guidance, Working Together to Safeguard Children 2000, awaiting guidance for the establishment of an Island's Safeguarding Children's Board.

Roles and Responsibilities Working Together Chapter 4

Local Authorities, in exercising their social services function should ensure that there is an Area Child Protection Committee covering their area, which brings together representatives of each of the main agencies and professionals responsible for helping to protect children from abuse and neglect. The ACPC is an inter-agency forum for agreeing how the different services and professional groups should co-operate to safeguard children in the area and for making sure that arrangements work effectively to bring about good outcomes for children.

Responsibilities

- To develop and agree local policies and procedures for inter-agency work to protect children, within the national framework provided by this guidance; (Working Together)
- To audit and evaluate how well local services work together to protect children, for example through wider case audits;
- To put in place objectives and performance indicators for child protection, within the framework and objectives set out in Children's Services Plans;
- To encourage and help develop effective working relationships between different services and professional groups, based on trust and mutual understanding;
- To ensure that there is agreement and understanding across agencies about operational definitions and thresholds for intervention;
- To improve local ways of working in the light of

knowledge gained through national and local experience and research, and to make sure that any lessons learned are shared, understood, and acted upon;

- To undertake case reviews where a child has died or – in certain circumstances- been seriously harmed and where abuse or neglect are confirmed or suspected. To make sure that any lessons from the case are understood and acted upon; to communicate clearly to individual services and professional groups their shared responsibility for protecting children and explain how each can contribute;
- To help improve the quality of child protection work and of inter-agency working through specifying the needs for inter-agency training and development and ensuring that training is delivered; and
- To raise awareness within the wider community of the need to safeguard children and promote their welfare and to explain how the wider

community can contribute to these objectives.

Membership

Chair – Head of Children’s Services SSD

- Hampshire Police
- 2 Social Services representatives
- Social Services (data/information)
- LEA
- Training
- Health (designated CP Nurse)
- Health Authority
- Domestic Violence
- Child Protection Co-ordinator
- PCT/GP
- NSPCC
- Legal Services
- Probation
- Early Years
- ACPC Advisor
- Regional Education CP Co-ordinator.

Annexe B(iii)

The Children and Young People’s Strategic Partnership Board

Role

- Agree strategy for children and young people’s services/issues
- Sign off the Health Local Delivery Plan
- Lead Body for Children Fund development
- Co-ordinate and provide advice to commissioning groups

- 2 Connexions
- 2 Early Years/Sure Start
- 2 Children’s Fund
- 2 Voluntary Sector
- 2 Community Representatives
- 2 Children/Young People

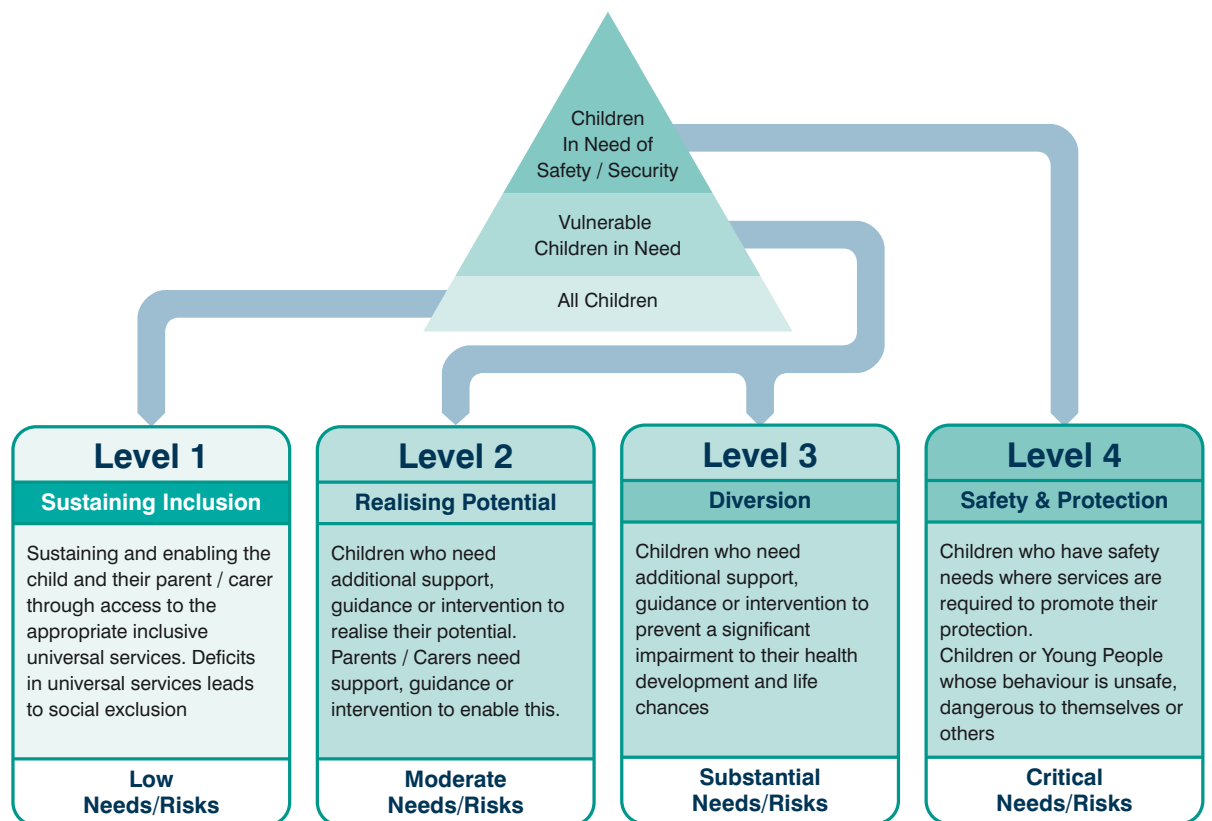
Membership

- 2 representatives from Health
- 2 Education
- 2 SSD

Currently two groups exist: the Partnership Planning Group (PPG) & Children’s & Young People’s Strategic Partnership Board (ChYPSB).

Annexe C

Access



Level One – Low Risks/Needs

At this level of need, the focus is on enabling the child and their parent or carer to seek help through the use of an appropriate universal service, such as health, education or the voluntary sector.

Children and families assessed at this level will receive advice and support to obtain the relevant services available on the Island.

Level Two – Moderate Risks/Needs

Children and families assessed to be at this level need additional support, guidance or intervention. This would be with the aim of helping them to keep to their expected standard of health, development and learning if they are to realise their potential.

Children and families assessed at this level will receive short-term, reviewed support.

Level Three – Substantial Risks/Needs

Children and young people at this level need additional support, guidance or intervention to deal with threats to their health, development and life chances. The aim would be to divert the child or family from things that might result in harm or put the individual or others at risk.

Level Four – Critical Risks/Needs

Children and young people with needs that are assessed to be at this level require services that will protect them. They may be at risk of harm or be experiencing a breakdown in their care. Their

behaviour may be unsafe, dangerous to themselves or others; they may have committed a serious crime.

Those who are assessed at level Three or Four will have had a multi-agency assessment which points to complex needs for help. A plan of services will be made with the family and the child(ren) dependent on their age/s. The plan may involve a number of agencies agreeing how to work with the family and their child(ren) and how success can be achieved.

The assessment may indicate that the family and/ child(ren) may require intensive and longer-term support.

Annexe D

Learning from experience

Mainstreaming

Proven Projects / Initiatives From Local Sure Start

Proven Projects / Initiatives From The Children's Fund

Proven Projects / Initiatives From Connexions

Early Excellence Centres/Children Centres/Extended Schools

Monitoring & Evaluation

The Island Vision

Shared aims & objectives;
targets & performance indicators;
whole island approach
**Benchmarked against data
from best practice - best in class**

Local aims & objectives;
targets & performance indicators;
for the virtual island networks
**Benchmarked against
Sure Start, Children's Fund,
Connexions & Best Practice**

Development and delivery plan
With milestones & timelines

Annexe E

Consultation comments

Consultation Comments on how those respondents to the consultation contribute to the Local Preventative Strategy.

Children are healthy, safe and well cared for:

- Schools contribute by providing a safe environment, making links with other agencies, promoting healthy eating and strong pastoral systems with 'Buddy' schemes and 'Listeners.'
- Education support emphasises training of teachers and assistants, good teaching and healthy schools.
- The Fire Service carries out training in schools at Key Stages 1, 2 and 3. They are also involved in a range of youth and community activities, which promote safety. They are also involved in a number of partnerships providing training in fire assessments for health visitors and housing division and road safety education with Education Liaison Officer.
- The Housing Division is committed to providing (funding) housing for foster carers, pregnant teenagers, young, single people and ex-offenders. It also sponsors direct access to hostels through the Salvation Army and undertakes a rough sleepers count.
- Health is a universal service ensuring that all mothers and babies are visited and offered advice on accident prevention and health promotion.

- In other areas, organisations stated that they followed rules and procedures.
- Social Services Children's Services has a statutory duty to ensure that the social and health care needs of vulnerable children in need and children who are looked after are addressed and that their safety is ensured.

Children do well at school and pre-school:

- In this area, responses were similar, highlighting high expectations of children, support for families, appropriate learning environment, health promotion and take-up of pre-school places.
- Social Services Children's Services has a statutory duty to ensure that the education needs of vulnerable children in need and, in particular, children who are looked after are addressed.

Children are valued equally:

- The point was made that Surestart is a universal service. In schools, there was

- reference to policies on equal opportunities, race equality, disability, SEN and positive behaviour management including Golden Rules and rewards. One school commented, refreshingly, that policies are in place and in practice and another that it is researching the motivation of boys particularly in handwriting.
- Health responses included giving same level of care to everyone and respecting children's rights.
 - Education support and Early Years referred to support for differentiation, access and inclusion. Mention was also made of inclusive consultation.
 - Voluntary sector said that opportunities are available regardless of race, gender or religion.
 - Social Services Children's Services is committed to equality.

Children are part of a caring family and social circle of friends:

- IDAS offers information and support to families and substance misusers.
- Schools endeavour to retain positive relationships with families and provide non-judgemental moral support for children. Good examples included Circle of Friends, Good Citizenship programme, dealing actively with friendship issues. One school referred to the 'school family' and another to the school community where children are happy and relaxed.
- Education support referred to parental support for interventions, promotion of social skills and whole school community.
- Voluntary sector provided opportunities for belonging to particular groups.
- Social Services Children's Services seeks to ensure that children in need and children looked after are securely attached to carers capable of providing safe and effective care for the duration of their childhood.

Children live in a crime free community:

- IDAS provide treatment for drug and alcohol misuse.
- One school said it could do this within the school, others mentioned the work of the Police Liaison Officer, PSHE education and making choices. Another stated that there was a strong moral message in 'the school as part of the community'
- Health promoted positive parenting and said that they must be good role models for the community.
- Education support again referred to good teaching, promotion of social skills and links with other groups.
- Voluntary sector response indicated a code of conduct.
- The Fire Service Education Liaison Officer coordinates the Juvenile Firesetters Intervention Programme. Fire service also represented on the "Arson Reduction in Schools," group.
- Housing Division commits to providing three units of accommodation for vulnerable ex-offenders and to providing additional hostel units in conjunction with DAT, for substance misusers.
- Social Services Children's Services are partners in ensuring safer communities

Children have a secure income and home as part of a family or as an individual:

- Some schools did not believe that they had a role in this area. Others believed that they should work with social agencies on behalf of family of child, offer support to families in hardship or teach basic skills required to get a job.
- Health saw their role as signposting families to services and advocating when communication was difficult.

- Education supports education for life. There was also mention of family learning and increasing skills in cooking etc,
- The Housing Division Homelessness Strategy commits to increasing provision of social housing, emphasising key worker housing and shared ownership, sponsors direct access to hostels.
- Social Services Children's Services seeks to ensure secure family lives, in particular for young people leaving our care.

Children become independent and able to make choices according to their age:

- One school wanted to add, "...and ability," to this vision. Others mentioned programmes leading to independence, responsibilities including school council and pupil forum and encouraging parents to let go.
- Health mentioned positive parenting as relevant and encouraging healthy lifestyle choices.
- Education support referred to appropriate provision and again to supporting education for life. There was also reference to local Healthy Schools Programme encouraging pupils to take responsibility. This also supported adding "...and ability."
- Concern was also voiced about "adding ability" as it was seen as open to subjective variable judgement by adults.
- Early Years promoted independent learning.
- Voluntary organisation had a programme of activities to develop each individual's potential.
- The fire service contributes to "No Smoking Day," and educates children on dangers of smoking, both to themselves and the environment.
- Social Services Children's Services seek to equip children and young people receiving services with appropriate independence skills, in particular acting as a corporate parent for those leaving our care.

Voluntary and Community Sector Comment:

As Council for Voluntary Services on the Isle of Wight, the Rural Community Council is the infrastructure body and as such, represents the interests of all the voluntary organisations on the Island. In response to the Green Paper and the drafting of the Local Preventative Strategy, a Voluntary Sector Forum specialist network for those organisations working with children & young people has been established.

The Network provides a forum for the community and voluntary sectors in all matters relating to children and young people. The Network supports current and future working relationships (including those with the statutory sectors), sharing best practice, policy development, training and workforce planning.

The Network operates within the agreed Local Compact with the Isle of Wight Council and includes; Home Start, Sure Start, National Society for the Prevention of Cruelty to Children, The Hampton Trust, Young Carers, Women's Refuge, Winchester House, The Isle of Wight Youth Trust and many other small groups and organisations. The Network also links with Connexions and the Early Years and Childcare Development Partnership.

The Network welcomes the Local Preventative Strategy for improving the lives of children, young people and families on the Isle of Wight and looks forward to contributing to its development and delivery in line with the 'Every Child Matters' Green Paper and the Treasury's 2002 Cross Cutting Review of the Role of the Voluntary and Community Sector in Service Delivery.

Other Comments:

- Additional comment from Family Learning included:
Clusters need to reconfigure to avoid confusion and gaps in provision. 'Virtual' is not

a concept families will understand. Isle of Wight buildings need revisiting as to usage and suitability for Children's Centres/Extended Schools initiatives.

Also need clarification of role of inspectors in communications between existing school cluster groups and multi-agency services which support them. FIZ needs to be a conduit for service information and will therefore need expansion and investment.

- Additional comments from Play Challenge included:

The suggestion that we should have an eighth outcome in the vision, that Children and Young People should grow up having facilities and opportunities to play safely. Play Challenge were concerned that play was not represented in any of the community clusters or under the Community or Voluntary services and that the review of children's play should be incorporated into the planning bookcase.

Appendix 1

Voluntary & community sector services

Organisations – A

ADHD Support Group
Advocacy Consortium
AFASIC – Assoc. For All Speech Impaired Children
Age Concern (IW)
Arts Unit
Arthritis and Rheumatism
Arthritis Care
Arthritis Research Campaign
Autism Support Group
Autistic Society (IW)

Organisations – B

Baha'i Faith Group
Baylink Schools Project
British Diabetic Association (IW)
British Heart Foundation
British Red Cross, Branch Headquarters

Organisations – C

Carousel
Challenge and Adventure
Childminding Network
Childrens Head Injury Trust
Childrens Liver Disease Foundation
Childrens Society
Christian Respite Centre
Contact a Family
Computability IW.
Crossways (RDT)
Cystic Fibrosis Trust

Organisations – D

Deaf Association (Hants, IW & Channel Islands)
Deaf Childrens Association (IW)
Dial (IW)
Disabled Motorists' Caring Association
Discovering Dyspraxia
Discovering Dyspraxia IW Support Group
Down's Syndrome Trust
Downside Community Association
Dyslexia Association (IW)

Organisations – E

Earl Mountbatten Hospice Trust
ERBS Palsy Group

Early Years

Providing & supporting community initiatives

Childminding Network
Early Years Partnership
Early Years Unit
Family Information Zone

Economic & Employment Orgs

Providing & supporting community

IW Economic Partnership
Southern Careers
Newport Job Centre
New Deal

Education Orgs

Providing & supporting community initiatives

Barton Nursery
Dover Park Primary School
Hunnyhill Primary School
Isle Of Wight College
Learning Skills Council
Little Acorns Day Nursery
Local Education Authority
Northwood County Primary
Ofsted
Parent Partnership
Ryde High School
Youth & Community
West Wight Nursery

Organisations – F

Families First Ltd
Friends Of The Earth

Organisations – G

GFS Platform
Gingerbread
Girls Brigade
Girls' Venture Corps Air Cadets
Guide Association (IW)
Gullain Barre Syndrome Support Group

Government Initiatives

Providing community initiatives

Children's Fund (GOSE)
Connexions
Sure Start
YOT

Organisations – H

Haemophilia Society
Hampton Trust
Healthy Eating On A Low Income (RCC)
Help East Cowes Kids
Home-Start (IW)
Hyperactive Childrens Support Group

Health

Providing & supporting community initiatives

Child & Adolescent Mental Health Service
CoDA - Community Drug & Alcohol Service
GUM Clinic
IW Healthcare Trust
PCT
Speech & Language Therapy Service

Housing Orgs

Providing & supporting community initiatives

Foyer Federation
Medina Housing Association
Medina Housing & Care
IW Housing Association
South Wight Housing Association
Stonham Housing Association

Organisations – I

ICAIR
IDAG + DDA
Inclusion Project, RHS
Independent Arts
Independent Housing Advice Centre
Island 2000
Island Leukaemia Support
Island Volunteers
Island Women's Refuge
Island Youth Water Activities Centre
IW Association for Spina Bifida & Hydrocephalus
IW Play Association
IW Scope Society
IW Youth Trust
IW Autistic YC
IW Epilepsy Group
IW Gateway Club
IW Kidney Patients Association
IW Learning Partnership
IW Rural Community Council
IW Sports & Recreation Council

Organisations – J

Jubilee Sailing Trust

Organisations – L

Leukemia Research (IW)

Organisations – M

Macmillan Cancer Relief
Mafia
Meadow Road Community Shop
Medina Marching Band
Mencap (IW)
Mobile Youth Initiatives
Muscular Dystrophy Group

Organisations – N

National Asthma Campaign
National Eczema Society
NIPA
NSPCC (IW)

Organisations – O

Older Voices Forum
Osel Enterprises Ltd

Organisations – P

Parent Support Group
People Off The Streets (POTS)
PHAB Club (IW)
PHAMLY
Physically Handicapped Society (Cowes)
Physically Handicapped Society (Newport)
Physically Handicapped Society (West Wight)
Physically Handicapped Society (Ventnor)
Play Works
Portsmouth Diocesan Board
of Education, IW Gardens
Pre-School Learning Alliance
Preston Community Partnership

Organisations – Q

Quay Arts Kids Club

Organisations – R

Renal Dialysis Group
Riding For The Disabled
RSVP
RSVP (West Wight)
Ryde Development Trust
Ryde Play Forum
Ryde Young Womens Enterprise

Organisations – S

Samaritans
Saturday Club For Deaf Children
Scope (IW)
Scope (Southern & South East)
Scout Council
Shanklin Voluntary Youth & Community Centre
Sight Concern
Soroptimist International
Sound Advice – RNIDeaf
Spina Bifida & Hydrocephalus Association
Sports and Recreation Club for the Disabled (IW)
St John Ambulance County Headquarters
St Mary's Hospital League of Friends
Student Services
Sundowners
Sun Ryders

Social Services

Providing & supporting community initiatives

Childrens Services Division
Children's Disability Team
Children & Families Community Team
Family Resource Team

Organisations – T

The Diocese of Portsmouth & Church of England
The Riverside Centre
Toy Library & Opportunity Group (IW)
Tourette Syndrome Association

Organisations – V

Vectis Association for the Disabled
Ventnor Forum
Victim Support (IW)

Organisations – W

Wessex Cancer Trust
West Wight Community Forum
West Wight Sports Centre
Wheelchair Users Group (IW)
Wight Activities Group
Wightout – Gay, Lesbian & Bi-Sexual
Wroxall-In-Action Partnership

Organisations – Y

Young Arthritis Care
Young Carers Project



SureStart

Making life better for children, parents and communities by bringing together:

- ▶ early education
- ▶ childcare
- ▶ health and family support

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