

Hull's Children, Young  
People and Families Plan  
2019 - 2023



# FOREWORD



**Councillor Peter Clark,**  
Portfolio Holder, Children, Young  
People and Families  
Hull City Council

Hull is an amazing city, with a long proud history and whilst we recognise the achievements of the past we are focussing on a future that we can be equally proud of for all our children, young people and families.

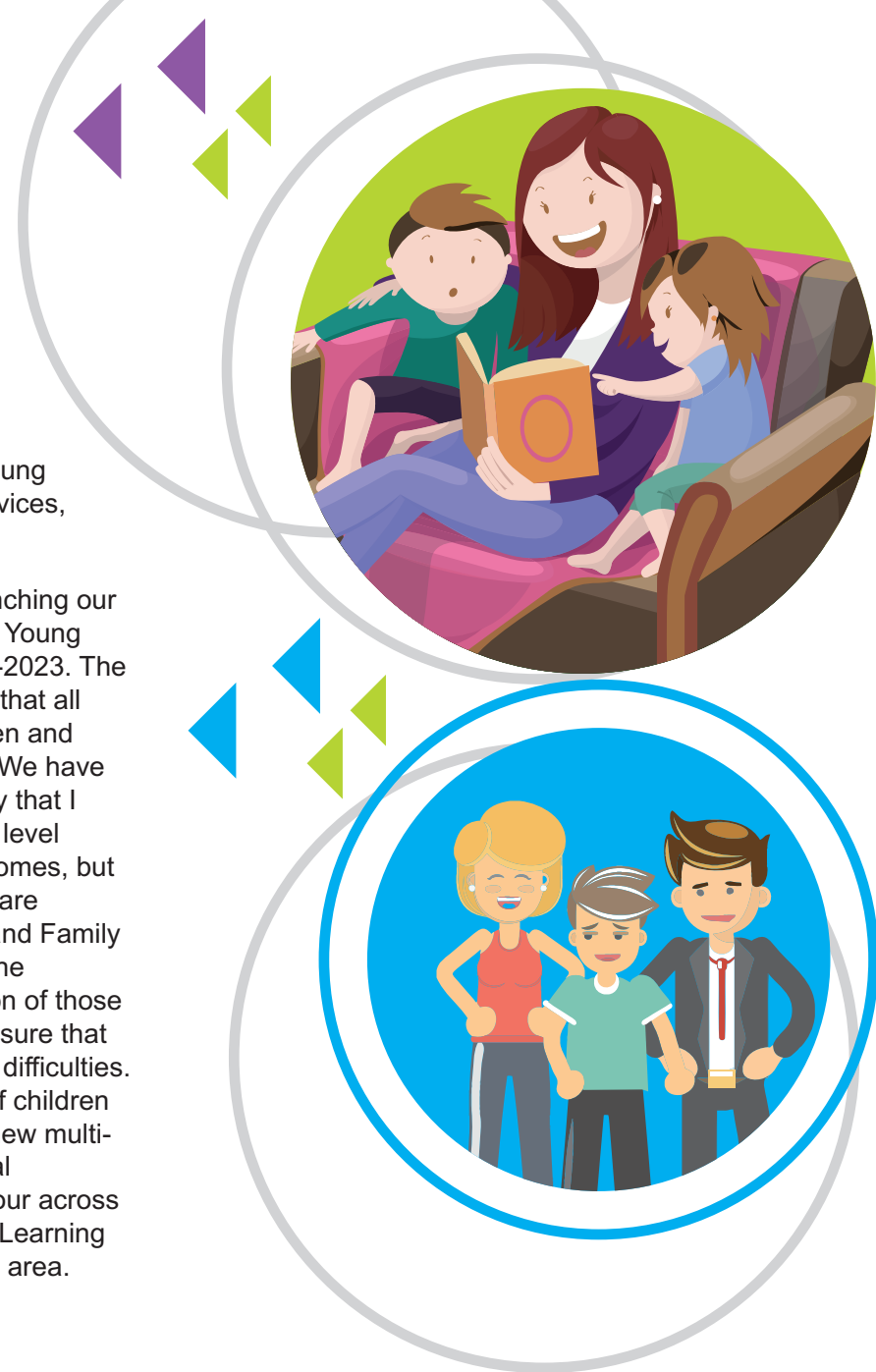
We are ambitious for our city and for our young people too, as the future of the city is built upon the future success of our young people. We know what our challenges are and know that together we can achieve a brighter future for our children, young people and families.

We are absolutely determined that outcomes will improve and for this to happen all agencies and sectors must work together. We can only do this if all services work together to deliver and improve the outcomes for our children, young people and families. This plan has been put together working across all those agencies and I very much look forward to seeing the work that will be delivered to make this plan a reality for the children, young people and families in this city.



**Alison Murphy,**  
Director of Children, Young  
People and Family Services,  
Hull City Council

I am pleased to be launching our refreshed Children and Young People's Plan for 2019-2023. The plan reasserts the vision and outcomes that all agencies are signed up to for the children and young people of Hull and their families. We have included a one page executive summary that I hope will prove useful not just as a high level summary of the vision and desired outcomes, but also a summary of the key priorities we are tackling in the Children, Young People and Family Partnership. Plans are in place across the partnership to improve early identification of those children and families most in need to ensure that we provide support early in the onset of difficulties. We are working to reduce the number of children who need to be looked after through a new multi-agency approach. Improving educational attainment remains a collective endeavour across the city and we will be setting up a new Learning Partnership to drive improvement in this area.



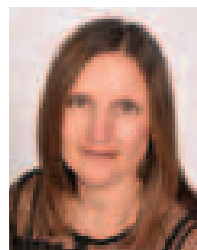


**Julia Weldon,**  
Director of Public Health  
Hull City Council

As Director of Public Health I really welcome the publication of the Hull Children and Young People's Plan. The Plan reminds us that although health and wellbeing for children and young people is improving overall, we still have far too many children growing up in poverty and experiencing disadvantage in Hull. Early disadvantage tracks forward to influence health and development throughout life.

Focusing on ensuring children and young people are safe from harm, ready for school and transition, healthy and free from poverty and ready for life and work is essential, but we will not achieve this unless we address the inequalities within Hull.

Our Health and Wellbeing Board is committed to creating a fairer more inclusive Hull where everyone has the opportunity to thrive. Focusing on children, young people and their families is a good place to start.



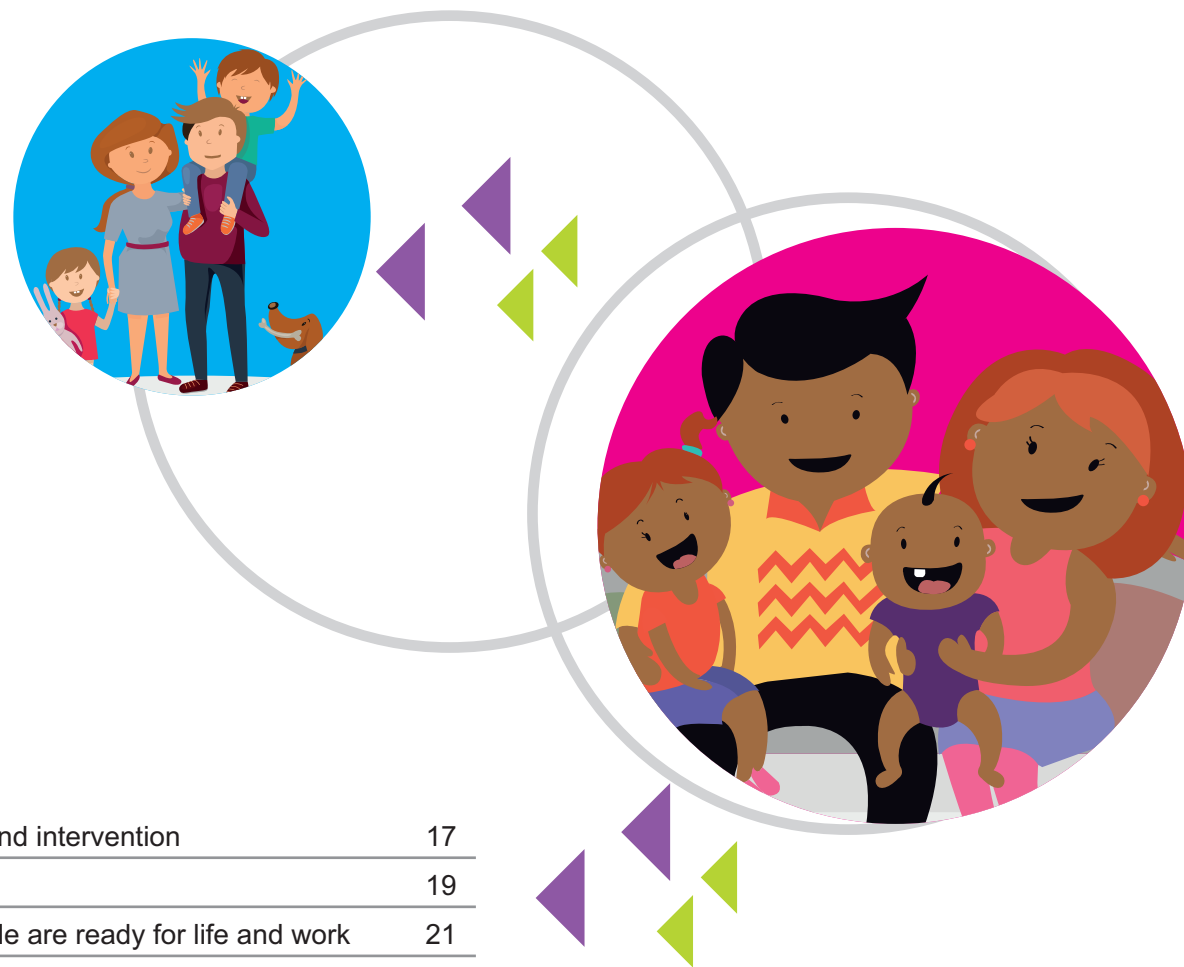
**Joy Dodson,**  
Director of Integrated  
Commissioning,  
Hull Clinical Commissioning  
Group

The health and wellbeing of children, young people and families is central to the priorities of the CCG. We aim to ensure that children and families receive the best possible health services at the right time and place.

We are committed to working with partners to ensure early intervention and prevention is embedded throughout the services we commission to give children the best start in life. This includes working closely with partners from education, health and care services to tackle inequality and provide local inclusive provision for children and young people with special educational needs and disabilities (SEND).

Our aim is to support children and young people to achieve their full potential by getting the right support as early as possible. As a CCG, we have some specific responsibilities for improvement. These include working with Humber Coast and Vale Sustainable Transformation Plan to improve maternity services locally and across our region. We are also improving access to a range of emotional wellbeing and mental health services. We are committed to commissioning health services which are designed to ensure no family or child is overlooked. We believe that by working closely with our partners this will lay the foundations for healthy, inclusive and resilient adults who can contribute positively in their communities.





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# OUR VISION – Facing the future together

## Children, Young People and Families Board

“Our vision is to make Hull an inspiring City – safe and healthy to learn, play, work and live in. We want all children, young people and their families to be healthy, be safe from harm and have the confidence to be ambitious and to achieve their aspirations.”

### What will the board do?

- We will work with parents to ensure that they access appropriate support at the earliest opportunity and are equipped to support and develop their children
- Children in Hull will be ready for school by five years old and transition at 11 years old
- We will improve educational attainment and attendance
- We will safeguard our children and young people and provide early help for families who need it
- We will reduce health inequalities and tackle child poverty including ensuring that appropriate accommodation and benefits are provided when necessary
- We will ensure our young people are ready for life and work
- We will ensure children and young people have a voice in Hull and are able to become active citizens, parents and carers
- We will ensure that children and young people with special educational needs and disabilities have the right provision, at the right time and in the right place. So they can achieve well in their early years, in school and at college and participate in and contribute to the local community in which they live.

### How is the board going to deliver?

#### We will:

- Put in place an annual programme of support and challenge which holds partners to account for delivery against the priorities outlined in this plan, ensuring actions are taken when outcomes are not improving
- Continue to use the Joint Strategic Needs Assessment (JSNA) to shape services and commissioning
- Identify opportunities for integrated/joint commissioning and service development
- Address barriers to meeting priorities including information and data sharing
- Focus on prevention and early help to identify issues at the earliest point, build resilience and help families to help themselves
- Demonstrate a continued commitment to promote inclusion across all services and sectors
- Ensure a robust performance framework is in place used by all partners to maintain an effective overview and progress against priorities
- Build on good practice, using evidence based approaches and commit to re-designing services when appropriate to meet priority improvements.

### Partnership Working

The Hull Children, Young People and Families Board (CYPFB) is the city-wide leadership group, the focal point for coordinating, shaping and influencing services for children, young people and families across the city. The board provides strategic vision and leadership and promotes innovation in order to improve life chances of children, young people and families living in Hull.

The board will work closely with partners in other key boards including the Children’s Safeguarding Board, the Health and Wellbeing Board, the Community Safety Partnership and the Integrated Commissioning Officer Board. The board leads on specific areas of work on their behalf, and is responsive to the relevant Overview Scrutiny Commissions.



# GROWING UP IN HULL TODAY

There are approximately 260,000 people living in the city, of which 63,000 are aged 0 to 19 years

Of the overall number of pupils in Hull schools, 14% are on Special Education Needs (SEN) support, and 3% have an Education Health Care Plan (EHC)

Across primary schools the percentage of pupils eligible for a free school meal is 22%; nationally the figure is 14%. In the secondary phase the city percentage is 23% and the national figure 13%

931 adults with alcohol dependency live with children

Almost 41,000 children and young people attend educational provision across 97 establishments in the city

The infant mortality rate is similar to the England rate with an average of 16 infants dying before age 1 each year (2015-2017)

The health of the people of Hull is generally worse than the England average

For 2015-17, life expectancy at birth for Hull men was 75.9 years and for Hull women it was 79.9 years. The absolute gap between Hull and England is -3.7 years for men and -3.2 years for women

The prevalence of smoking among adults in Hull (at 30.7%) is amongst the highest of all local authorities

Almost twice as many adults (27.4%) in England were qualified to degree level or higher compared to Hull (15.2%), and half as many people in Hull (31.7%) had no qualifications compared to England (22.5%) (ONS - 2011 Census).

1,765 children live with an adult who has an alcohol dependency

Premature CVD mortality or premature 2012-14 was significantly higher for both men and women (15% and 9% respectively) in Hull than in England

Long term unemployment in Hull is significantly worse than the England average and there are lower levels of educational attainment

From the local adult Health and Lifestyle Survey 2011-12, large differences in the progress 8 indicator



## The City Context for Learning

Kingston upon Hull is a compact and highly urbanised city. Around forty thousand children and young people attend educational provision across 95 establishments in the city. Free school meal eligibility is significantly higher than England averages and more than a third of children and young people live in income deprived households. Over recent years the city has experienced rapid and major social changes as the local population becomes increasingly diverse. Around 15% of pupils in the city's schools speak English as an Additional Language, with more than 120 individual languages being represented.

The ongoing significant increase in population of recent years has brought with it challenges for place planning, both in mainstream and SEND provision, within such a compact and urbanised city.

Of the overall number of pupils in Hull schools, 14% require SEN support, and 3% have an EHC Plan. This puts the city slightly above the national average for pupils with an EHC Plan and 2% above the national average for pupils on SEN support.

## Learning Based Outcomes

At Early Years Foundation Stage Profile, the city faces significant challenges in closing the gap between local and national outcomes. The newly implemented KS1 phonics assessments have shown some 'green shoots' in improvement. At Key Stage 1, local results have kept pace with regional results at Expected Standard but the city lags behind comparators at Greater Subject Depth. A strategic priority for the city is working

with nurseries and families to ensure that children are 'school ready'.

Primary schools have embraced the challenge of significant changes to assessment at Key Stage 2 and in 2018, for the second year running, have exceeded England averages at some core attainment and progress measures. Particularly welcome were advances made at the higher end of assessment at Key Stage 2 – Higher Standard/ Greater Depth.

Key Stage 4 has been the subject of considerable change in accountability over recent years and, whilst the city has made more improvement at headline measures than has been seen across comparators, there remains a challenge for secondary schools to maintain this success and further narrow the gaps between local and national outcomes.

## Health

What happens in early years has a lifelong impact. Giving every child the best start is crucial to reducing health inequalities across the life course. Healthy and informed parents who have control over their own wellbeing will have healthier babies and raise healthier children.

Children who are ready for school will be able to get the most out of their education and fulfil their potential. Building emotional resilience will help children handle the pressures of growing up and give them the right knowledge and skills to overcome challenges.

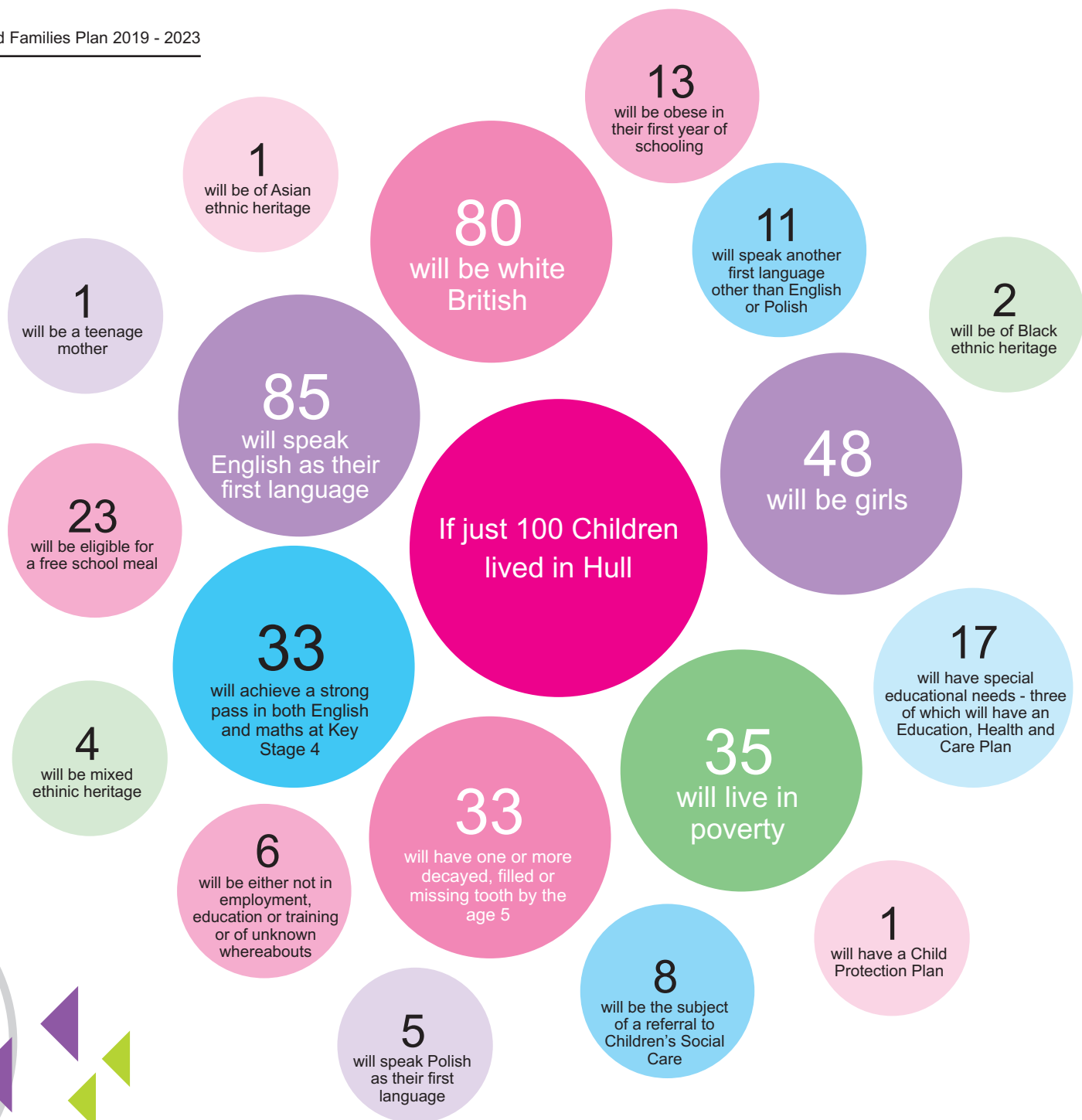
## Child Poverty

Too many children and young people in Hull are growing up in poverty, including many who are in homes where parents/carers are working. When children grow up in poverty they miss out. They miss out on the things most children take for granted: warm accommodation, clothes, school trips, having friends over for tea. It also impacts on health, educational outcomes and the overall experience of childhood.

Child poverty affects the life chances of our children and young people. Leaving school with few qualifications translates into lower earnings over the course of a working life. Poorer childhood health results in more complicated health histories over the course of a lifetime, again influencing earnings as well as overall life quality.

Hull is addressing child poverty through a partnership approach to prevention, early help and intervention with a key focus on getting parents and carers into work; adopting healthier lifestyle choices; improving parenting skills and abilities such as 'cooking on a budget'; the provision of free/low cost school lunches; early education and childcare for the most vulnerable; helping families to sustain their tenancies and remain in their homes; family budgeting support and help through crisis.

According to End Child Poverty (January 2018) more than a third (34.9%) of children and young people live in income deprived households.





# CHILDREN AND YOUNG PEOPLE HAVE A VOICE IN HULL AND ARE ABLE TO BE ACTIVE CITIZENS



## Hull Today

Hull has a good track record of mechanisms in place for children and young people's views to be heard and used as a fundamental part of the planning and review of services. The United Nations Convention on the Rights of the Child (UNCRC, 1989) enshrines the right of children to be involved in all decisions that affect their lives. The Children's Act 2004 also stresses the importance of involving children in decision-making, specifically in child protection cases.

The Hull Young People's Parliament (HYPP) has been in place for 12 years. Young people set their own themes and agendas and any action agreed at the parliament is taken by young people to the city's decision makers.

The parliament meets three times per year and is firmly embedded and recognised across the children's partnership network in the city. It also elects representatives who attend the UK Youth

Parliament at regional and national level, ensuring that young people from Hull are part of national debates in the House of Commons and national campaigns.

In March 2018 HYPP elected the first 'Young Mayor' who was welcomed into post by the Portfolio Holder for Learning, Skills and Safeguarding Children and the Lord Mayor of Hull. The Young Mayor's role is to represent and be an ambassador for young people on children's issues.

There are also a number of groups ensuring representation from more vulnerable young people, who often struggle to make their voices heard. The Hull Young Voices in Care Council (YVIC); LGBT group; CYP emotional and mental health groups/forums; and Young Carers Forums are two examples. The YVIC group meet monthly and members support the delivery of training for Foster Carers and the work of the Corporate

Parenting Board, they are also responsible for the development of Hull's 'pledge' which must be adopted by the council in support of its role as a Corporate Parent.

At a local level schools are shaping services to meet local need, utilising views of young people from schools councils and youth groups.

Across the safeguarding and early help systems, the child's voice is embedded into assessment and planning processes in order to ensure that it is heard separately to that of the parent/carer and that it is listened to, sometimes using independent advocates as appropriate. Following the recommendations in the 2014 Ofsted Inspection that the social care workforce needed to improve the recording of the children's views.

## Ambition

Participation, engagement and co-production with children and young people will be embedded in everyday practice from frontline services to strategic decision-making, enabling the voices of children and young people to be listened to, heard and respected so that they influence change. It will be underpinned by a city wide Voice and Influence Framework that is owned and signed up to by all partners, led by the Hull Safeguarding Children's Board.

The challenges which children and young people identify and prioritise will be addressed and make Hull a better place for children and young people to live.

Across Safeguarding and Early Help there will be further improvements to ensure that the voice of the child is heard and effectively represented across all family work.

Children and young people from vulnerable groups such as SEND, children looked after and young carers will be supported to ensure they have a voice and are given opportunities to help shape services to support themselves and their families

## Success Measures

- The Hull Voice and Influence (V&I) Framework is agreed and owned by partners and children and young people
- Youth voice is an integral part of service planning across the children's partnership network

- There is evidence of policy and service change in the city in response to the voice of children and young people
- There is evidence of young people from a range of communities and with a range of vulnerabilities having their voice heard in the city
- Children and young people report that they feel listened to
- To provide support for 3 Hull Young People's Parliament per annum
- Youth Parliament representatives and the Hull Young Mayor are elected on a bi-annual and annual basis respectively
- A workforce development plan is developed to underpin the V&I Framework
- Children and young people's voice and influence is a core part of all public sector commissioning requirements for children's services
- There is clear evidence of changes to policy and services in Hull in response to the voice of children and young people – "you said, we did" – with clear and consistent feedback channels back to young people.

## Making it Happen

- Implementation of the Hull Youth Voice Framework, led by HSCB partners
- The council continues to lead work with young people and partners to grow and develop the Hull Young People's Parliament as the city-wide vehicle for strategic influence

- Young people continue to have the opportunity to elect their representatives for the UK Youth Parliament and the Hull Young Mayor
- A range of learning opportunities are available for professionals and services to help improve their practice in CYPs voice and influence
- The city continues to grow the range of forums which support more vulnerable groups with a focus on LGBT, Young Carers, children and young people in care, children and young people SEND, children and young people with emotional and mental health issues
- Schools to support the development of school councils at a local level.





## THE VOICE OF OUR YOUNG PEOPLE

Young People were asked 'What it was like growing up in Hull? These are the responses:



### Young People like...

"I like living in Hull cos it's a friendly place and my family & friends live here."

"I like it when I am at the park with my friends and we play games – I like having breakfast at school."

"I like where I live, I like school as we do a lot of exciting things and have lots of play time, I like getting the bus into town with my mum."

"Love Hull and enjoy that I can get to see my friends really easily even though they live in a different part of Hull. We get involved with all types of things organised through youth clubs and school, so we are always busy."

"I loved it last year when there was loads of stuff to do – there's not as much this year but I have still had a good time with my friends."

### Young People don't like...

"I get sad some of my friends aren't allowed to play because their mums say it's not safe – but it is – there are always loads of people around to look after us."

"I don't like the street where I live – it's awful, rubbish is never collected and it is always all over."

"It's crap – just constant trouble - something needs to happen because young people aren't happy living here."

### Young People would like ...

"I like it, but I wish there was more sports stuff to do that doesn't cost money."

"I would like more things to do like youth clubs, rock challenge type of things and dance classes."

"There are a load of good fish and chips shops, and I like playing football with my mates but would like to have more places to play for free."

"When I was at primary school it felt that we had a lot more freedom – at secondary school it's harder. It's not the school's fault but it means that we have to study hard and have less time to meet our friends."



## BEST START IN LIFE

### Hull Today

Outcomes for young children in Hull for health and well-being and school readiness are well below the national average. One of Hull's biggest challenges is in making sure children arrive at school ready to learn, achieve and get the full benefit from the foundation stage education.

A wide range of research now shows that what happens in pregnancy and early childhood is the most crucial phase of development and impacts on physical and emotional health all the way through to adulthood. In Hull supporting good maternal health is a key priority, important for safe delivery and good birth weight and giving babies the best start possible.

The national maternity transformation programme is responsible for driving improved outcomes in maternity care. This work is led by Humber Coast and Vale Local Maternity System with further local implementation through the Maternity Voices Partnership which has a detailed work plan aimed

to improve outcomes and achieve the Secretary of State's ambition to half the number of stillbirths, neonatal and maternal deaths and brain injuries by 2030.

Key priorities for Hull include to:

- Reduce neonatal mortality and stillbirths to meet the national requirements to reduce by 20% by 2020 and 50% by 2030. The 2015 baseline figure for stillbirths and neonatal death rates per 1000 births for Hull is 6.21 (MBRRACE Report 2015)
- Reduce the rate of women that smoke at the time of delivery from the current 20% (2017/18) in line with the Tobacco Control Plan's ambition for maternal smoking at the time of delivery to 6% by 2020
- Increase the rates of breastfeeding at birth (initiation) and 6-8 weeks (Data PH).

The work of maternity staff, health visitors, children's centres, primary care and other partners, alongside parents and carers is

important in helping to develop loving, secure and reliable relationships between babies, children and their parents. This is key to securing a positive home learning environment; developing the child's emotional and mental health; and their capacity to form and maintain positive relationships with others. Vital language and brain development takes place in the first 1001 days from conception to two years of age, shaping a child's ability to learn. In short the child's experiences during pregnancy and their first two years of life shape's their future. It is parents who have the biggest influence on their child's early learning, for example talking and reading their baby helps stimulate language skills right from birth.

At the age of two the most vulnerable children, who may be living in or near poverty or have special educational needs or disabilities have access to free early education and Hull's uptake of the two year old early education entitlement is 76%, above the national average. Hull's nurseries and childminders play a crucial role in supporting children's early education, working with parents

and carers, assisting in many aspects of their daily lives, through social, emotional, educational and practical interaction, nurturing and guidance.

In 2017 a total of 96% of all three and four year olds of working parents take up the offer of 30 hours of free early education, however only 38.7% of pupils entered school at the age and stage of development typically expected for their age. In 2017 65.1% of children left The Early Years Foundation Stage (EYFS) having achieved a 'Good Level of Development' ready to move into Year 1 which is lower than both statistical neighbours and the national average.

## Ambition

Hull's ambition is that all children will be ready to learn when they start school and we know that for this to happen we need for:

- Mothers to have a healthy pregnancy and good maternity care
- Babies to be of a good birth weight and have a safe birth
- Parents and carers to build strong bonds with their babies and young children and understand how to nurture and support their children's welfare and development right from birth

- Children to have good early nutrition and be well cared for
- Children to live in a warm, safe and stable home environment and feel loved, safe and secure with their parents/carers
- Parents to value learning and play and understand how to get children ready for school
- Families to be able to access good and outstanding early education provision and support in their local community
- Early identification of those children who are falling behind their peers and/or who have Special Educational Needs and Disabilities in order to ensure the child and family needs are met on a multi-agency basis and they thrive, and in order to focus on key areas of language and literacy skills, which help them thrive.

By the time children start school they will have good social and emotional development, good language and communication skills, be ready to enjoy learning and thrive at school and are able to achieve a good level of development.

## Success Measures

- Reduction in the rates of stillbirths, neonatal and maternal deaths and brain injuries
- Reduction in the number of women who smoke at the time of giving birth
- Increase in breastfeeding rates of birth (initiation) and at six-eight weeks
- Improvements in obesity rates in reception and primary school and a decrease in the levels of poor oral health in five years old's.
- Uptake of two year old early education entitlement is in line with national
- Uptake of the 30 hours early education entitlement for three and four year olds of working parents meets or exceeds DfE target
- Increased number of early year's provisions judged to be 'Good' or 'Outstanding' by Ofsted.
- More children enter school at age related expectations
- Children make good progress from their baselines throughout Foundation stage in order to achieve Good Level of Development at the end of Early Years Foundation Stage
- The local authority gap between the lowest 20% of achieving children and their peers is narrowed and closer to that seen nationally.

## Making it Happen

- To implement the local maternity work programme through the Humber Coast and Vale Local Maternity System and the Hull Maternity Voices Partnership. This will support improvements in reducing neonatal mortality and stillbirths, maternal smoking at the time of delivery, increased breastfeeding rates at birth and six-eight weeks
- Develop an Integrated Early Years Improvement Programme, involving all key partners in order to promote integrated working across the early years workforce
- A clear focus on early identification of needs through the use of the integrated 2/2.5yr development review, improved information sharing and joint working to support children and families
- Implement the 'Hull Oral Health Action Plan' in order to reduce the percentage of poor oral health in five year olds
- Engage partners in the 'whole system approach to tackling obesity' in order to reduce childhood obesity levels
- Implement a city wide programme of evidence based parenting support programmes for all areas of needs, including SEND, to improve parenting skills and the home learning environment
- Continue to offer relevant, high quality and appropriate training for all early years practitioners and trainees by targeting identified areas that will have an impact on improving outcomes for all children at the end of EYFS
- Implement the marketing strategy promoting early education for 2,3 & 4 year olds during the summer term to maintain current levels of uptake
- Support individual early education settings through regular visits and tailored support based on the jointly agreed annual priorities and Ofsted inspection framework
- Use detailed analysis of both the EYFSP and baseline information to inform and target support offered to schools in order to increase the number of children achieving GLD at the end of EYFS.





# REDUCE HEALTH INEQUALITIES AND TACKLE CHILD POVERTY

## Hull Today

Hull is proud of its achievements in certain health measures. Our child immunisation rates are higher than the England average; we have seen a very steep drop in smoking rates by secondary school children and teenage pregnancy rates are falling faster in Hull than in England as a whole.

However, these successes sit against a backdrop of significant and persistent challenges. Hull is ranked the third most deprived local authority in England, a third of our children live in poverty and health is generally worse than the national average.

Significant health inequalities exist within Hull as well as other areas. Childhood obesity is worse than the England average, as are levels of teenage pregnancy, GCSE attainment, breastfeeding initiation and smoking in pregnancy.

## Ambition

Hull takes pride in its strong communities and track record of partnership working. We have shown from our year as UK City of Culture and our winning £7M Headstart (Big Lottery) funding bid that ambition brings results. We are ambitious in our drive to improve health inequalities and child poverty, despite the challenge of continued reductions in the overall local authority budget.

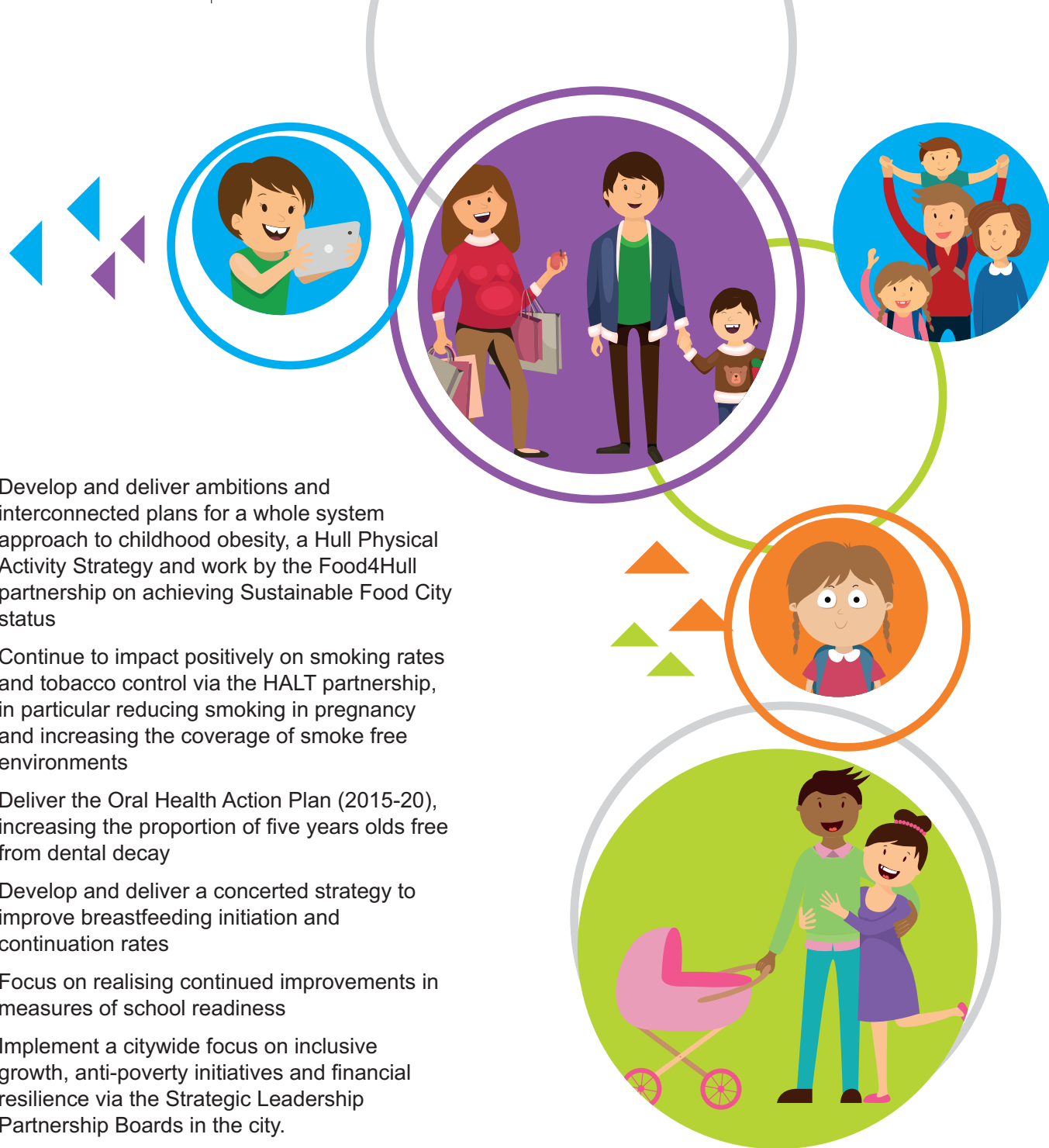
HeadStart Hull aims to build emotional health and resilience in young people aged 10-16 and prevent the development of serious mental health issues. Young people have been central in designing and delivering many HeadStart projects, within both school and community settings. It is not only their emotional health that young people aspire to improve. It is encouraging that three quarters of girls and two thirds of boys also want to eat a more healthy diet and be more active. We

will take a participatory, whole systems approach to tackle child obesity, aiming to turn the curve of the recent worsening picture, for Reception year children especially.

The targeted drive to reduce smoking rates, particularly among the most deprived areas of the city, will continue alongside the ambition to increase the coverage of smoke free environments, focussing on places frequented by families.

At the highest level partnerships in the city are working as a priority to make sure that people are not in a state of poverty. Economic growth in the city benefits all of the population of the city.





## Success Measures

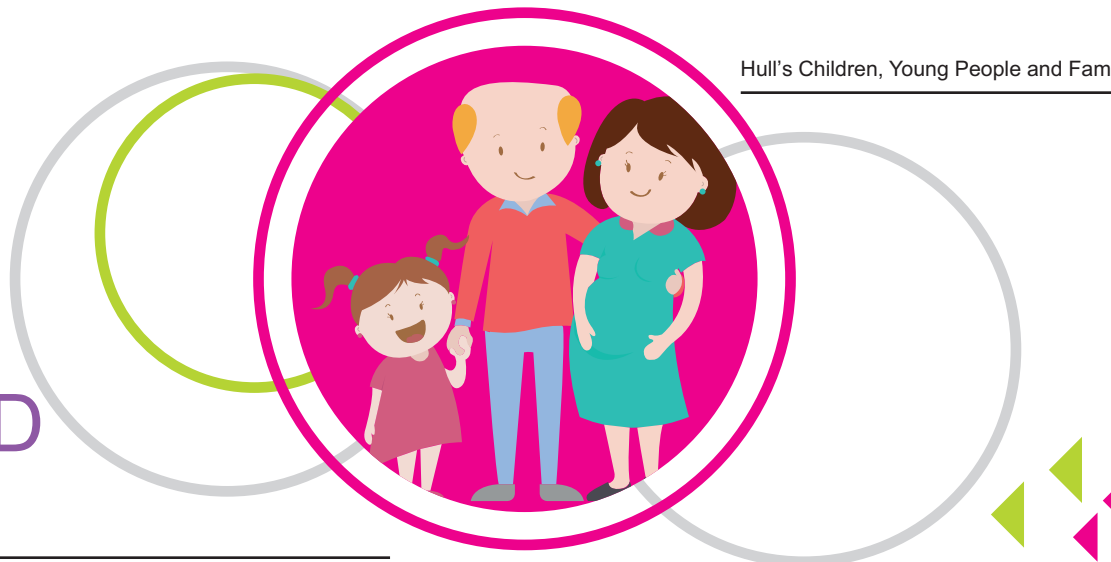
- By 2023, our ambition is for health and wellbeing outcomes to be improved together with narrowing local and national inequalities gaps
- Children and young people's perceptions and self-reported views of their health and wellbeing to be improved
- Child poverty rates to have fallen, alongside improvements in the economic and housing measures that affect children's wellbeing (eg. in-work poverty, fuel poverty, children in homeless households)

## Making it Happen

- We will implement the Hull Transformation Plan to deliver a system that improves the underlying emotional health and wellbeing of children and young people in the city as well as ensuring that more children and young people are able to access the care they require

- Develop and deliver ambitions and interconnected plans for a whole system approach to childhood obesity, a Hull Physical Activity Strategy and work by the Food4Hull partnership on achieving Sustainable Food City status
- Continue to impact positively on smoking rates and tobacco control via the HALT partnership, in particular reducing smoking in pregnancy and increasing the coverage of smoke free environments
- Deliver the Oral Health Action Plan (2015-20), increasing the proportion of five years olds free from dental decay
- Develop and deliver a concerted strategy to improve breastfeeding initiation and continuation rates
- Focus on realising continued improvements in measures of school readiness
- Implement a citywide focus on inclusive growth, anti-poverty initiatives and financial resilience via the Strategic Leadership Partnership Boards in the city.





# EARLY HELP AND INTERVENTION

## Hull Today

Hull's Early Help and Priority Families Strategy sets out the city's vision and delivery model for the provision of integrated support for children, young people and families. A strong partnership delivery model identifies individuals and families as early as possible and brings services and agencies together to collectively look at what support is needed. Services then work together to deliver the required support in a coordinated way.

Early Help is provided across a continuum of need from universal services such as schools, GPs, midwifery, family support workers through Children's Centres, health visiting, youth services through to additional targeted services such as substance misuse, targeted youth services, housing support, mental health, neighbourhood nuisance, domestic abuse partnership (DAP) and youth justice. This model supports public sector services working alongside our voluntary and community sector partners.

Hull's approach to delivering early help and intervention includes the use of a 'Lead Practitioner Role' who acts as the key point of contact for the family, leads the early help assessment process, pulls the 'Team Around the Family (TAF)' meetings and ensures that a clear multi-agency plan is developed, monitored and delivered.

The Troubled Families Programme (Priority Families in Hull) is embedded as an integral part of the overall approach to early help with targeted resources utilised to support children and families most at risk of poor outcomes.

## Ambition

- Ensure that all partner agencies and professionals are able and empowered to take the role of 'lead practitioner' where they are best placed to do so
- Improve the quality and consistency of early help assessments through greater emphasis on quality assurance and supervision across all partners

- Further strengthen the partnership wide early help offer for families through effective workforce development across partners
- Embed a strong and consistent process for cases 'stepping down' from social care to prevent any re-escalation of concerns
- Well embedded, effective systems for parent/carer feedback which supports ongoing service development across the partnership
- Provide an improved offer of support for our most vulnerable groups of children and young people such as SEND, Young Carers, Teen Parents etc.
- Continue to improve information sharing across agencies through improved access to shared recording systems across the partnership
- To put in place an Integrated Commissioning Strategy for prevention and early intervention.



## Success Measures

- No of Early Help Assessments completed
- No of Early Help cases closed
- % of children 0-five years registered with a Children's Centre
- % of 0-two years olds sustained contact with Children's Centre/Early Help Family Support
- % of children 0-18/19yrs with SEND supported
- % of teen parents supported
- No of young people 10-19yrs accessing youth services
- No of attendances of young people 10-19yrs at youth services
- No of young people from vulnerable groups provided with support and advice
- No of re-referral rates into social care.

## Making it Happen

The council will continue to embed the Early Help Delivery Model, working with agencies across the wider partnership. Locality based Early Help Networking events will be held three-four times per year which bring together partners across the area with a focus on key themes to support improved integration and service delivery; further development of the EH Locality Hub Teams; further improve the case allocation and management process through EHAMs and Allocations Meetings and the use of the Early Help Module; and deliver evidence based programmes which improve outcomes for families.

Specific priorities for action include:

- Increase the use of evaluation and feedback from families through the introduction of a twice yearly family survey that will engage 5-10% of families worked with

- A new and improved Quality Assurance Framework will be implemented across council early help services
- An increased Early Help Training Offer for partners, including a specialist offer for schools to support use of the EH Assessment and role of lead practitioner
- A revised Early Help Performance Framework which gives us more robust data to drive service improvement and quality
- Continue to review and improve support in key areas of specialism and vulnerability such as CYP SEND, missing children and support for young carers
- The consistent delivery and use of CIN Panels with social care and the role of the Early Help Social Workers to support the 'step down' of cases from social care into early help services
- Implementation of the SEND Improvement Plan for 'Early Identification and Notification'.



# LEARNING

## Hull Today

The success of the BSF programme means the city contains some of the most modern education facilities in the country. Despite this, the rapid growth in pupil numbers is challenging the school estate. Primary school places are sufficient to meet the need, but there needs to be substantial further capital investment to ensure there are sufficient secondary school places.

The increase in the school aged population has also resulted in the need to further expand the special educational needs and disabled provision across the city and there is also a pressure on sufficiency of places for children with these needs.

Generally, children make expected progress from Early Years to KS4, so Hull is in line with national standards in terms of progress.

Too many children are not ready for school and performance at Early Years Foundation Stage remains below the national average.

Only 38% of children are entering education at KS1 with the 'expected' skills and knowledge to be school ready.

Unfortunately, this low starting point means that despite making expected progress, Hull is struggling to reach national targets in terms of overall outcomes, so attainment is still low.

Good progress is made through the primary phase, but this is not sufficiently strong and embedded to improve outcomes by KS4.

83% of Primary age children attend good and outstanding Primary schools.

54% of young people attend good and outstanding secondary schools. Primary Ofsted outcomes are above the regional average, but below the national average. Secondary Ofsted outcomes are below both (2019).

## Ambition

Education in Hull can only be successful if it can meet the needs of every child.

Our ambition is to provide a city-wide, coherent education system that enables every child and young person in Hull to fulfil their potential.

To achieve this ambition we would provide a needs-led, co-ordinated, person-centred approach to all aspects of education policy and practice across the service.

A proactive early identification process would ensure that the needs of every child were met, in both an equitable and timely manner.

Our universal offer would be to promote high standards and expectations, challenge underachievement and provide the right support, at the right time. We aim to enable every child in the city to flourish and fulfil their potential, regardless of background or starting point.

Each of the different specialist education services will work collectively around the needs of the child. Education will work hand in glove with all other services, partners, providers and settings to ensure that every child in the city, regardless of ability, be that gifted or needing support, would fulfil their potential to become happy, productive and proud members of our Hull community.



## Success Measures

- % of children attending good and outstanding education provision
- Key Stage 1 – Expected or Greater Depth Reading, Writing and Maths
- Key Stage 2 – Expected or Higher Reading, Writing and Maths
- Key Stage 4 – Basics Measure Expected and Higher
- Key Stage 4 - Progress 8 Measure and Attainment 8 Measure
- Number of Permanent Exclusions
- Number of Elected Home Educated
- % Education, Health and Care Plans issued in 20 weeks
- Number of SEND Tribunals
- Number of complaints
- Outcomes of Vulnerable Groups – Pupil Premium / SEND / EHCP / LAC
- Higher levels of attendance.

## Making it Happen

- Develop a School Place Planning Strategy to address the increasing school age population that is expected to continue to grow for another five years
- Develop a city-wide Inclusion Strategy that has clearly defined pathways, and access to resources that ensure we can meet the needs of every child requiring additional support. This needs to include all aspect of support, such as transport
- Support mainstream schools and settings to develop their SEND provision, and ensure sufficiency of places in high quality specialist provision across a continuum of needs
- Establish new working partnership with all educational institutions, regardless of status, to enable the local authority to facilitate the changes required to bring about educational improvement
- Ensure all commissioned work and places have clearly defined and established key performance indicators, along with robust quality assurance mechanisms, so that the local authority retains control of quality and maximises value for money
- Challenge and support providers' academies to establish clear city-wide expectations regarding the management of behaviour and disengagement issues
- Across the Education Service, establish clear lines of management and accountability, with measurable performance indicators, that are understood, agreed and observed by all
- Work with local, regional and national partners to bring the very best practice and opportunities into the city to improve the educational experiences of all children.

# YOUNG PEOPLE ARE READY FOR LIFE AND WORK



## Hull Today:

Despite performance at Key Stage 4 being below the national average, the majority of young people continue to participate in learning post-16. Only 41.3% of young people achieved a Level 3 qualification by the age of 19, which is below the national figure of 57.1%.

The combined Not in Education, Employment, Training (NEET)/Not Known figure is currently (February 2018) stands at 5.8%, which is 0.3% above the national figure. In isolation, Hull's NEET figure of 5.8% remains high compared with statistical neighbours and national comparisons of 3.9% and 2.8% respectively. The unemployment rate for our 18-24 year olds currently stands at 4.7% which is 1.8% above the national average.

The occupational profile of the workforce is skewed towards lower skilled occupations resulting in below average wages. Hull continues to have fewer residents qualified to Level 4 and

above (Hull 29.6% - national 38.2%) and more residents with no qualifications (Hull 10.5% - national 8.0%).

All young people with Education, Health and Care Plan (EHCP)'s will be able to access expert advice and guidance on education, training and employment options from a Connexions Adviser who will also attend their annual reviews. Connexions will also work pro-actively with employers to enable more young people with SEND to progress into either full or part-time employment via supported internships (extended placements of around six months that help young people develop work related skills). We aim to increase the number and quality of supported internships available locally and encourage businesses to use them to employ a more diverse workforce.

Where young people are likely to require support from social care post 18, we will ensure that early referrals are made to Adult Social Care (at age 14

for the most complex cases). This will help to ensure a smooth transition. In addition, we will look at ways to create bespoke packages of provision and support including leisure and personal development activities for those for whom full time employment is not possible.

## Ambition

Our ambition is to increase the number of residents qualified to Level 3 or above and in employment.

The focus on preparing young people for work is through good participation in learning and strong attainment to Level 3 and above at 19. We need to make sure that there are high quality options for young people to undertake both academic and vocational education.

For those young people who are hardest to reach, we will develop a collaborative approach to re-engagement provision capitalising on all available



opportunities to reduce the NEET population further and increase the employment rate of young people.

Careers education, information, advice and guidance is key to ensuring young people make the right choices at key transition points, we need to develop a collaborative approach with key partners including schools and colleges. This will include the further development of log on move on to make sure young people have access to the full range of training on offer.

To make sure young people experience work whilst still at school or college through working with employers to deliver work experience visits, business visits to schools and other school/ business partnerships. The council as an employer will lead on this by example.

## Success Measures

- Reduction in NEETs (the number of Not Knowns is already well below national average)
- Increase employment rate of 18-24 year olds
- Increase percentage of 19 year olds with a Level 3 or above qualification

- Increase percentage of 19 year olds with Level 2 English and Maths qualification
- Increase the number of work experience opportunities available to young people
- Increase the number of supported internship placement, by at least 10
- Progress of vulnerable children.

## Making it Happen

- Work with schools, colleges and training Providers to develop a shared responsibility and robust strategy to drive improvement and ensure high quality education and training opportunities which result in successful outcomes for young people
- Understand why we have a high number of 16-24 year olds who are NEET by working with the DWP and other partners to understand the characteristics of this group and their background. This information can be used to reprioritise service and improve early intervention
- Enhance the use of Labour Market Intelligence to establish replacement demand, new sector developments and skills gaps allowing young people to make better informed plans

- As part of our statutory responsibility, we work with colleges, schools and training providers to make sure sufficient suitable education, learning and skills provision which meets the need of the city is available
- Maximise the use of external funding to meet the outcomes
- Further improve the utilisation of social clauses contained in the procurement contracts across the partnership
- Engage with local employers to facilitate links and opportunities to support people into the labour market through work experience, career days and mentoring
- Support and promote the delivery of quality careers education, information, advice and guidance in schools, colleges and training providers. Work with schools and local employers to increase the number of quality placements both pre and post 16 for young people with SEND.



# MENTAL HEALTH TRANSFORMATION

## Hull Today

The profile of children and young people emotional and mental health has never been higher and tackling mental health problems and the stigma that surrounds them is one of the great challenges our society faces today. In Hull, and nationally, the needs of children and young people and the demand on support services is increasing year-on-year, compounded by social media, a high-pressure education system and labour market uncertainty.

Hull was one of six local authority areas who successfully bid for funding as part of the Big Lottery Fund programme, 'HeadStart' and has been awarded a total of £8.8m over a five year period with the aim of enabling children and young people to have positive mental health and wellbeing, thrive in their communities and be able to bounce back from life's challenges through improved children and young people's emotional

resilience. The HeadStart Hull delivery model has an increased emphasis on prevention for children and young people aged five-16 years including workforce development, PSHE across all schools and whole organisation approaches. It also provides improved access to early intervention services for those young people aged 10-16 to identify and intervene early, reduce the need for clinical services and deliver sustained change to embed an asset-based approach to emotional health and wellbeing. It has been running for two years and is delivering real and tangible systems change for Hull's universal services, while providing targeted (early help) interventions to address current need. This in the longer term will reduce the need for specialised clinical interventions.

The recent mental health prevalence data for children and young people (2017) has shown an increase in need from the previous 2004 data,

which estimated one in 10 children and young people would need a mental health intervention.

The 2017 data shows:

- One in eight (12.8%) of five-19 year olds had at least one mental disorder when assessed by Child and Adolescent Mental Health Services (Camhs) services.

This includes:

- One in 12 (8.1%) had an emotional disorder e.g. anxiety, depression/low mood
- One in 20 (4.6%) had a Behavioural (conduct) disorder
- One in 50 (2.1%) had a less common disorder e.g. Autistic Spectrum disorder, eating disorder, etc.
- One in 60 (1.6%) had a Hyperactivity disorder.

Poor mental health is cumulative and the impacts can begin in pregnancy and in early years:

- One in 18 (5.5%) two-four year olds has a mental health disorder
- One in 10 (9.5%) five-10 year olds has a mental health disorder
- One in seven (14.4%) 11-16 year olds has a mental disorder
- One in six (16.9%) 17-19 year olds has a mental health disorder

The most common in early years and primary school is behavioural disorders and the most common in secondary school and post 16 is emotional disorders.

Early intervention is key to reducing this prevalence.

Children and young people in Hull are growing up in an environment of high rates of multiple deprivation, poverty, low employment and a low wage culture, which reflects a number of risk factors for poor emotional health, wellbeing, and mental health issues.

Hull Contact Point (CAMHS) receives the referrals for all children and young people including autism, learning disability and ADHD. Referrals received by CAMHS have increased by an average of 5.9% per month since April 2015. Hull CCG and Hull City Council are working in close partnership to manage early intervention and prevention, and specialist services, to respond to local need.

Headstart Hull is working to address some of this and has provided targeted (early help support) to 1241 Young People aged 10-16 on emotional health and has supported 253 parents to access targeted/early help support on family emotional Headstart Hull aims to enable children and young people to have positive mental health and wellbeing, thrive their communities and to bounce back from life's challenges.

## Ambition

Our Local Transformation Plan for children and young people's emotional wellbeing and mental health states:

"We will ensure children and young people who are emotionally vulnerable and may be experiencing mental health issues receive the right support at the right time. By working in partnership with statutory and voluntary sector organisations children, young people and their families will be supported to ensure prevention, early assessment and intervention encouraging and promoting positive emotional and mental health for this generation and the next."

Children and young people living in Hull that are emotionally vulnerable and may be experiencing mental health issues have access to timely, integrated, multi-disciplinary mental health services which will ensure effective assessment, treatment and support for them and their families. Statutory and voluntary sector organisations will work in partnership to support children, young people and their families to ensure prevention, and early intervention encouraging and promoting positive emotional and mental health for this generation and the next.

## Success Measures

- Children and young people are confident to discuss feelings/worries with a trusted adult and support their peers
- Children and young people are able to find and access support when and where they need it
- Parents are confident in and appropriately support their children with emotional health and well-being
- Everyone working with children and young people can identify emotional health issues early and provide effective support to young people and their families
- Quick access to effective targeted interventions which reduce the need for specialist clinical services
- Quarterly assurance and an annual refresh of the Transformation plan are required by NHS England. Progress is measured against the priorities in the plan and if assurance isn't achieved further action is required
- Headstart Hull Performance Framework including KPI's based on young people with improved resilience, confidence to speak to a trusted adult, improved family networks, and improvement on presenting issue. This will form the basis of the Thrive performance framework which will capture data from across the system.





## Making it Happen

Building on the recommendations of the national Future in Mind report (2015) and the work of the local Transformation Plan Partnership, which includes health, early help, social care, public health and voluntary sector organisations, Hull will be adopting the Thrive Framework. This will deliver a needs led model of care to be provided flexibly across four distinct groups with an integrated multi-agency approach:

- Getting Advice
- Getting Help
- Getting more help
- Risk support

The model provides a systems approach to prevention, early intervention and treatment.

Key priority actions include:

- Further embed the HeadStart Hull programme, providing support from universal (for five -16 year olds) through to targeted (early help) provision for 10-16 year olds

- Review the City wide workforce development plan delivered to increase skills, knowledge and ability of the wider workforce to support Emotional Health and Well Being Board
- Review of ASD services and a reduction in waiting times
- Embed the existing voice and influence of children, young people and families in co-production of services, including campaigns, young commissioners model and the continued development of the 'how are you feeling' website [www.howareyoufeeling.org.uk](http://www.howareyoufeeling.org.uk). This work will also be embedded in the city wide voice and influence framework
- Support for maternal perinatal mental health issues in pregnancy and post pregnancy focused on the early identification through the vulnerable pregnancy pathway by Midwifery, Health Visiting, GPs and Children's Centre services and specialist support from the perinatal mental health team
- Parenting support in the early years provided through both 1-1 support via midwives, health visitors and other early years practitioners and via evidence based parenting programmes, for example Triple P; HENRY and Incredible Years programmes
- CAMHS Contact point to merge with Ehash to create one multi-agency front door
- Map all existing services against thrive model and identify gaps
- Develop one performance framework for the Thrive model
- Establish a range of Task and Finish groups to drive forward change and address priority areas:
  - Communications and engagement group to map stakeholder engagement and establish consistent messaging on Thrive e.g. Thrive briefings for staff.
  - Support /interventions for five-nine year olds
  - Support/interventions for 16-25 year olds
  - Parental support including working closely with adult services e.g. adult mental health services and adult social care
  - Review and analysis of referral rates, and understanding pressures and capacity in the system.



# DOMESTIC ABUSE

## Hull Today

Tackling domestic abuse is a key priority for all agencies in Hull working in partnership as part of a co-ordinated community response to reduce the harmful effects of domestic abuse. It is estimated that 24,690 women and 18,486 children and young people are experiencing domestic abuse each year. Sadly, we know it is likely that this is just the tip of the iceberg, as domestic abuse is the most hidden of all crimes. It can be very difficult, and risky, for victims and their families to come forward and seek support. During April 2017 and March 2018 Humberside police received 9,701 calls for service due to domestic Abuse. The Domestic Abuse Service provided information, support and advice to 2159 victims. 906 high risk victims, who had 1024 children and young people living in the same household were referred to a Multi-agency risk Assessment Conference. Of these high risk victims 15% were BAMER, 2% LGBT and 17% had a disability. 2% of the victims were aged 16 /17 years and 1.5% of those who harmed were aged 16 /17 years.

Domestic abuse is a factor in approximately 50% of referrals to children's social care in Hull.

Domestic abuse has been a significant feature in a number of recent local serious case reviews and one Domestic Homicide review.

The local refuge is always full and the demand on temporary housing for victims and their children remains high. Furthermore, 593 victims and their children were supported to remain in their own homes with increased security and support, enabling them to remain in their own community with continued access to schools and support networks.

The Strength to Change Voluntary Perpetrator programme and Building Better Relationships programme delivered on a mandatory basis to them by the National Probation Service remain oversubscribed, with demand outstretching available resources.

The focus for Hull continues to be to raise awareness and promote services so that everyone knows what services are available and how they can access them safely and that they will be listened to, believed and protected. Early Intervention and prevention is a key driver to reducing domestic abuse in the longer term.

Community engagement is also vital to make social and cultural changes that promote zero tolerance in our community. Work in schools is a fundamental and underpinning strategy to support this social change. Becoming a White Ribbon city also supports this message.

## Ambition

"Kingston upon Hull is a city where everyone can live safe lives, without the threat and fear of domestic abuse."

Hull's Domestic Abuse Strategy 2017 -2020 is aimed at all those who live and work in the city of Hull and have a role and responsibility regarding early intervention and prevention, service provision or protection in respect of domestic abuse. We want to send a clear message that domestic abuse is not acceptable and every agency and individual has a responsibility to challenge and collectively work towards the prevention and elimination in all its forms.

Partners across Hull share a passion to make a positive difference for all individuals affected by domestic abuse. We are determined to create a climate and context across all communities where

domestic abuse will not be tolerated and will be actively challenged. We believe that by working in partnership we will strengthen our individual efforts and our combined endeavours will have a far greater impact and will achieve more positive outcomes.

## Our Values

In Hull, we will:

- Put individuals affected by domestic abuse and their voices at the centre of our work
- Take a systemic whole family approach
- Agree and work towards shared goals, values and outcomes with clear plans in place for each family
- Be open and transparent
- Foster and share mutual trust and respect
- Maintain an open dialogue, listen and communicate respectfully and effectively.

## Success Measures

In 2020, our outcomes will be:

- **Preventing abuse through early identification and intervention**
- Continue to move to a culture where domestic abuse is culturally unacceptable
- Domestic abuse is identified at the earliest possible opportunity

- A preventative model for domestic abuse embedded in practice
- Domestic abuse and understanding healthy relationships is an integral part of education in schools, colleges and the university in the city
- **Provision of Services**
- Increasing the number of people coming forward and reporting domestic abuse reduce repeat victimisation to prevent further abuse for victims and their families
- All services are delivering positive outcomes for victims and children and young people and perpetrators
- Appropriate options available for victims, children, young people to access support
- Improved access to services for all irrelevant of complexity and need
- Better accessible information about domestic abuse and better informed professionals
- **Pursuing Perpetrators**
- Have a clear strategic, planned and sustainable approach to dealing with perpetrators of domestic abuse
- Support victims and their children to access support and increase safety
- Hold perpetrators to account for their behaviour

- **Partnership Working**
- Effective MARAC processes that maintain a joined up and co-ordinated response
- Increased understanding and knowledge of domestic abuse
- Develop a common language and increase understanding of risk and safety planning strategies
- Fully integrated "whole family" approach.

## Making it Happen

- Preventing Domestic Abuse through Early identification and Intervention

We must:

- Increase knowledge of the complex issues associated with domestic abuse with those working with vulnerable families
- Educate children and young people that domestic abuse is unacceptable and raise awareness of and promote healthy relationships
- Raise awareness of the issues of domestic abuse within the local community.





### Provision of Services

#### We will:

- Meet the National Statement of Expectations (NSE) at all times
- Promote early identification and intervention in order to ensure services are provided at the earliest possible opportunity
- Improve access to and confidence in services and support for all victims and their families affected by domestic abuse
- Identify and support children and young people affected by domestic abuse, including supporting young people in abusive relationships
- Take a co-ordinated approach to responding and supporting victims and their families by exploring the potential for a single front door via a multi-agency early help safeguarding hub
- Do this through delivery of a high quality, co-ordinated family response to domestic abuse.

### Pursuing perpetrators and seeking justice

#### We want to:

- Hold perpetrators accountable and provide effective interventions for their abusive behaviour
- Work jointly with appropriate organisations to reduce reoffending and bring offenders to justice
- Develop a common approach and understanding of risk and safety planning
- Support and empower victims through the civil and criminal justice system
- Partnership working.

#### Multi-agency working is critical to our success. We will:

- Work jointly with appropriate organisations to reduce repeat victimisation and increase reporting
- Provide a high quality response that is fair and non-discriminatory
- Be timely in responding to needs.

# SAFEGUARDING CHILDREN TIMELY AND PURPOSEFUL SOCIAL WORK



## Hull Today

Hull CYP&FS is working with high levels of demand and high caseloads, characterised by domestic abuse, neglect and adult substance misuse. A strong focus on front line practice and the systems which support this is ensuring that senior managers understand current practice and performance well. Clear plans are in place to enhance the capacity and skills of the workforce and to bring about greater consistency in the quality of practice.

A systemic practice model provides a strong evidence base for assessments and interventions with children, young people and families and significant investment has been made in recent years to train and develop staff. Staff retention remains a significant strength to identify these children.

The numbers of children looked after in Hull is twice the England average. Closer exploration

evidences that this is due to drift and delay in achieving permanence for children and young people. Analysis of recent activity on a month by month basis indicates that children aged 11-15 are most significantly affected. Too often these children will be placed away from their community, maybe outside of Hull and away from their schools. There is little evidence that outcomes are improved and in fact being away from home may place them at greater risk of exploitation

## Ambition

To identify those children who need protection and safeguarding at the earliest point working with other agencies to provide the right level of help and protection quickly and efficiently.

To offer early identification and intervention taking a proactive approach, providing the right help at the right time in order to prevent the escalation of need and risk and ensure good child development and outcomes.

To target our safeguarding service on the most vulnerable so that we can be most effective in reducing risk, allowing more children to live safely with their families. When this is not possible we will prioritise extended family care, promoting existing relationships and attachments when in the child's best interests.

To provide high quality services for all of our children. We will know this because children and families tell us that they feel listened to and able to influence decisions about them and their plans. An absolute commitment to children's experiences and voice, reflective, analytical and evidence based practice is imperative to this.

To ensure that young people and their families can access support to enable them to safely live at home to maintain family relationships and support and develop resilience for future life challenges.

## Success Measures

- A reduction in the number of social care assessments and an increase in early help assessments. Assessments will be timely and clear in their analysis and recommendations.
- A reduction in the number of assessments which do not need a service at conclusion
- A reduction in the number of children in need. We want to see a reduction in the length of time cases are open to social care and confident that we are successful in our focused change work with families
- A reduction in the number of Looked After Children by securing earlier permanence plans for more children
- More children receiving services through early help and universal services for longer, without the need for further escalation to social care and better use of early help and universal services to support families to sustain change where Children's Social Care no longer need to be involved.
- The average length of time for CLA reduces
- More children and families receive a service from Edge of Care
- Use of external placements reduces as more children and young people are placed in Hull resources and remain at home.

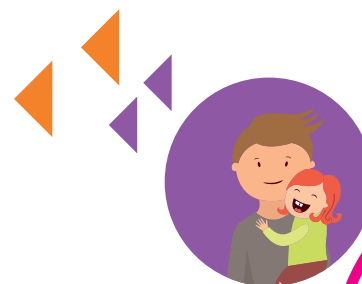
For this to happen, we must see an increase in the Lead Practitioner role held by partner agencies

## Making it Happen

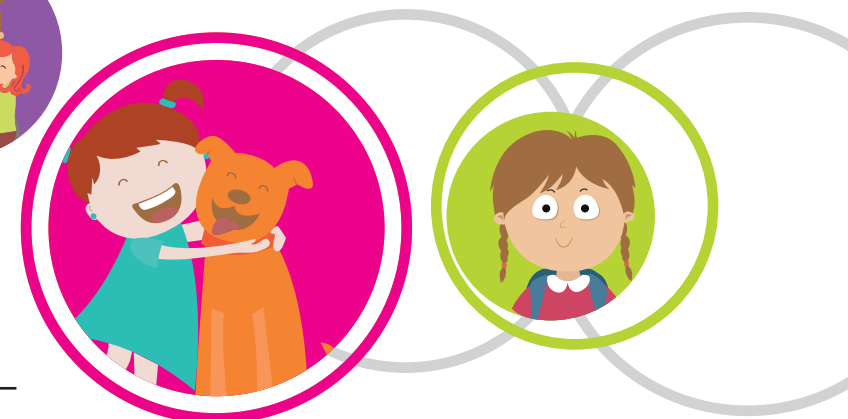
We will achieve this by:

- Strengthening the offer to defined groups of vulnerable children, young people and families, in order to support more children for longer through Early Help and universal services.
- Strengthening step up/step down arrangements, so that children and families are supported by the most appropriate service based on assessed risk.
- Strengthening partnership working around the Lead Practitioner role and Team Around Family approach
- Reducing caseloads in social care so that social workers are focused on the reduction of risk, supporting and effecting sustained change in families and with young people.
- Strengthening decision making and management oversight at key points in the child's journey through services
- Improving timeliness and purposefulness of statutory interventions in order to improve outcomes for children and young people.
- Edge of Care Service has been established. Partners have added their resources noticeably from the police and YJS. There are plans to include 'Life Coaches' and Speech and Language Therapists as health contribution. Based on 'No Wrong Door' model – receiving support from North Yorkshire.





# SPECIAL EDUCATIONAL NEEDS AND DISABILITIES (SEND)



## Hull Today

In September 2014, the Children and Families Act 2014 came into force. Part 3 of the Act is entitled Children and Young People in England with Special Educational Needs and Disabilities and places duties on local authorities and other services in relation to disabled children and young people and those with SEND. These are known as the SEND reforms.

Ofsted and the Care Quality Commission (CQC) undertook a joint inspection in October 2017 of the effectiveness of the work Hull City Council and the NHS in Hull had undertaken to implement the SEND reforms set out within the Children and Families Act 2014. As a result of the findings of the inspection, a Written Statement of Action (WSOA) / SEND Improvement Plan had to be submitted because of significant areas of weakness in practice.

A SEND Accountability Forum (SAF) has been established to oversee the implementation of the

SEND Improvement Plan The SAF reports to SEND strategic Board. The following four key areas have been prioritised for improvement:

- Strategic leadership and governance of the SEND reforms in Hull;
- Families are involved in decision-making about the services and support they need and are aware of the resources available to them in the local area;
- Improve self-evaluation of service quality and impact and focused improvement planning to facilitate better provision and outcomes in the local area for children and young people who have SEN and/or disabilities;

There is an effective strategy in place for jointly commissioning services across education, health and social care.

## Ambition

Hull's ambition for children and young people with special educational needs and disabilities is for

them to have the right provision, at the right time and in the right place, so they can achieve well in their early years, in school and at college and participate in and contribute to the local community in which they live.

For this to happen we need to:

- Improve multi-agency working and coordination of services for children with special educational needs and disabilities;
- Improve support for and the involvement of parents and carers, children young people and families;
- Improve the quality and sufficiency of SEND education provision and services by Supporting mainstream schools and settings to develop their SEND provision and developing local specialist services to ensure sufficiency of places in high quality provision across a continuum of needs
- Improve the transition to adulthood.

## Success Measures

- Improve the number of EHC Plans issued in 20 weeks
- Ensure EHC reviews are responded to in four weeks from receipt
- Improve the quality of EHC Plans
- Increase the number of families accessing the Local Offer website and social media
- Increase the number of families involved in service development
- Reduce the number of SEND pupils who are excluded and improve attendance
- Build on the skills and knowledge of education staff so they can identify and meet needs in schools and settings
- Increase the number of early years children passed onto the early years SEND team following the two year old development assessment
- Increase in the number of families with a child with SEND accessing early help services (children's centres, SEND early help and parenting support)
- Reduction in the number of pupils waiting for specialist educational provision

- Increase in young people and families who experience a smooth transition to adulthood
- Increase in Participation of young people with SEND
- Reduction in the waiting times for ASD assessment and SALT assessment and treatment.

## Making it Happen

- A SEND Accountability Forum (SAF) has been established to oversee the implementation of the SEND Improvement Plan which is being delivered through a work stream approach.
- There are nine work streams that report into the SAF:
- SEND Data Systems and Analysis - JSNA SEND Dashboard to enable an assessment of need and assets
- Workforce Development - SENCO Workforce development, Early Years, Social Care, Early Help, Health and Hull CC SEN workforce development
- Education Health and Care Plan Processes and Pathways - Assessment, Planning and Review EHCP Processes and pathways, Person centred approaches, QA Framework

- Transition to Adulthood - Preparation to Adulthood
- Early Identification, Notification and Support - Ensure children with SEND needs are identified and supported, Transition between ages and stages
- Information and Engagement - The Local Offer and Engagement Strategy
- Vulnerable Groups in Education - Inclusion, SEND Sufficiency, EHE for SEND, Medical needs
- Integrated Commissioning and Delivery – Joint Commissioning Strategy, Autism, Sensory Processing, SALT, Short Breaks, Personal Budgets
- Home to School Transport. Medical needs, efficiency and independence

As a Written Statement of Action had to be submitted following the SEND Inspection, the Local Authority and NHS CCG have quarterly monitoring meetings with DFE and NHS England. The SEND Improvement plan is updated prior to these meetings.



# GOVERNANCE FRAMEWORK



## Interdependencies and relationships

There are a number of detailed plans which are interdependent with Hull's Children and Young People's Plan (CYPP) and which are driving forward the development of services for children and young people, these include:

- Humber Coast and Vale five year Forward Plan and Sustainable Transformation Plan (STP)
- Hull's Health and Wellbeing Strategy
- Hull SEND Strategy, SEND sufficiency Strategy and SEND Improvement Plan
- CYP Emotional and Mental Health Transformation Plan
- Humberside Police and Crime Commissioner Plan
- Hull Community Safety Partnership Domestic Abuse Strategy 2017-2020

- Hull Safeguarding Children's Board Business Plan
- Hull Housing Strategy 2017-20
- Corporate Strategy HCC
- City Plan.

Members of the CYPFB have influential roles in supporting the development and delivery of all the above and are key to ensuring that the needs of children and young people in Hull are accounted for across the range of partnership strategies and boards.

## Place Based Board information

The Hull Place Plan aims to create a framework for local organisations to work together in a place-based system designed to meet the population health and care needs.

Hull City Council and Hull CCG have formalised their partnership to improve health and care outcomes for people who live in Hull.

The two organisations are leading the transformation programme in partnership with the wider public sector including; Humberside Fire and Rescue, Humberside Police, Hull University Teaching Hospital NHS Trust, Humber Teaching NHS Foundation Trust, City Health Care Partnership (CIC), Yorkshire Ambulance Service, Hull College and Representatives from the community and voluntary sector.

The plan is designed to address changing needs, for the population of Hull, across the life course and describes how the local community, commissioners and providers will work together to improve health, care and outcomes.

This document should be read in conjunction with the commissioning strategy.

# Glossary

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## ACRONYMS:

**ADHD** – Attention Deficit Hyperactivity Disorder

**BAMER** – Black, Asian, Minority Ethnic and Refugee

**CAMHS** – Child and Adolescent Mental Health Services

**CCG** – Clinical Commissioning Group

**CIC** – City Health Care Partnership

**CIN** - Children in Need

**CYP** – Children and Young People

**CYP&FS** – Children, Young People and Family Services

**CYP&FB** – Children, Young People and Families Board

**DAP** – Domestic Abuse Partnership

**DfE** – Department for Education

**EH** – Early Help

**EHCP** – Education, Health and Care Plan

**EMHWP** – Emotional Health and Well Being Board

**EYFS** – Early Years Foundation Stage

**GLD** – Good Level Development

**HSCB** – Hull Safeguarding Children's Board

**HYPP** – Hull Young People's Parliament

**JSNA** – Joint Strategic Needs Assessment

**KS** – Key Stage

**LAC** – Looked After Children

**LSCB** – Local Safeguarding Children's Board

**LGBT** – Lesbian, Gay, Bi-sexual and Transgender

**MARAC** – Multi Agency Risk Assessment Conference

**MBRRACE Report** – Confidential Enquiry into Maternal Deaths

**NEET** – Not in Education, Employment, Training

**NHS** – National Health Service

**NOMIS** – Office for National Statistics

**NSE** – National Statement of Expectations

**PH** – Public Health

**PHE** – Public Health England

**SEND** – Special Education Needs

**STP** – Sustainable Transformation Plan

**TAF** – Team Around the Family

**UNCRC** – United Nations Convention on the Rights of the Child

**YJS** – Youth Justice Service

**YVIC** – Hull Young Voices in Care Council



Hull's Children, Young  
People and Families Plan  
2019 - 2023

