

GATESHEAD HEALTH AND WELLBEING BOARD AGENDA

Friday, 15 June 2018 at 10.00 am in the Bridges Room - Civic Centre

From the Chief Executive, Sheena Ramsey

Item	Business
1	Apologies for Absence
2a	Minutes (Pages 3 - 10) The minutes of the business meeting held on 20 April 2018 and Action List are attached for approval
2b	Action List (Pages 11 - 14)
3	<u>Declarations of Interest</u> Members of the Board to declare an interest in any particular agenda item. <u>Items for Discussion</u>
4	Community Linking Project - Presentation by Sarah Gorman
5	Children & Young People in Care and Care Leavers Strategy - Jill Little (Pages 15 - 58)
6a	Reflections on Health & Social Care Peer Review Report - Steph Downey/All (Pages 59 - 68)
6b	Reflections on Health & Care Integration Workshop Report-out - Verbal Update
	<u>Performance Management Items</u>
7	Performance Management Report for the Health and Care System (Pages 69 - 84)
8	Updates from Board Members
9	A.O.B

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GATESHEAD METROPOLITAN BOROUGH COUNCIL

HEALTH AND WELLBEING BOARD MEETING

Friday, 20 April 2018

- PRESENT:**
- | | |
|-----------------------------|---------------------------|
| Councillor Lynn Caffrey | Gateshead Council (Chair) |
| Councillor Paul Foy | Gateshead Council |
| Councillor Martin Gannon | Gateshead Council |
| Councillor Malcolm Graham | Gateshead Council |
| Councillor Michael McNestry | Gateshead Council |
| Councillor Gary Haley | Gateshead Council |
- IN ATTENDANCE:**
- | | |
|----------------------|-------------------------------------|
| John Gibson | NTW |
| Judith Turner | NTW |
| Michael Brown | Gateshead Healthwatch |
| Jane Mullholland | Newcastle Gateshead CCG |
| Natalie Royston | Mölnlycke Health Care |
| Catherine Richardson | Newcastle Gateshead CCG |
| Carl Sketchily | South Tyneside NHS Foundation Trust |
- APOLOGIES:** Councillor Ron Beadle and Councillor Mary Foy, Mark Adams, Alice Wiseman, Sir Paul Ennals and Sheena Ramsey

HW12 APOLOGIES FOR ABSENCE

Apologies for absence were received from Cllr Mary Foy, Cllr Ron Beadle, Sheena Ramsey, Mark Adams, Alice Wiseman and Sir Paul Ennals.

HW13a Minutes

RESOLVED:

- (i) The minutes of the last meeting held on 19 January 2018 were agreed as a correct record.

HW14 ACTION LIST

John Costello provided an update of the Gateshead Health & Wellbeing Board Action List from the agenda. It was noted that all actions from the last meeting are complete and the Pharmaceutical Needs Assessment has been agreed by all necessary parties and has now been published.

RESOLVED:

- (i) Board Members noted the above.

HW15 DECLARATIONS OF INTEREST

There were no declarations of interest.

HW16 HEALTH & CARE INTEGRATION UPDATE - ALL

The Board received a report providing an update from local system leaders on progress in taking forward the integration of health and care in Gateshead, building upon the recommendations of the report agreed by the Board on 8 September 2017.

It was noted from the report that there is whole system support for an integrated approach to health and care in Gateshead to meet three key objectives:

- To shift the balance of services from acute hospital care and crisis interventions to community support with a focus on prevention and early help.
- To support the development of integrated care and treatment for people with complicated long term health conditions, social problems or disabilities.
- To create a better framework for managing the difficult decisions required to ensure effective, efficient and economically secure services during a period of continued public sector financial austerity.

It was noted that a previous update report had recommended the establishment of a formal group under the auspices of the health and wellbeing board, to further develop the proposals for the integration of health and care services. It was also noted that the Board had endorsed the proposed direction of travel and asked that regular updates on progress be provided.

A summary of the work undertaken by each workstream area as well as planned next steps was provided to the Board. This included plans to hold a one week workshop in early June to consider key issues, opportunities and challenges identified by the workstream areas to-date. It was noted that a report out from the workshop would be compiled and provided for Board members, including the next steps to be undertaken.

A concern was raised that the update report contained no information around wider engagement – it was noted that engagement is planned and an update on this will be presented in the next report.

RESOLVED:

- (i) The Board noted the contents of the report

HW17 CHILDREN & YOUNG PEOPLE MENTAL HEALTH LOCAL TRANSFORMATION PLAN - CATHERINE RICHARDSON

Catherine Richardson provided an introduction to the Children and Young People Mental Health Local Transformation Plan. The Board then received a presentation providing further detail of the plan and progress on the implementation of new Children and Adolescent Mental Health Service CAMHS model. A copy of the

presentation is to be circulated to members of the Board following the meeting. It was noted that estimates suggest that just under 1 in 10 children aged 5 to 16 will have some form of poor mental health, with the prevalence increasing with age.

An overview of hospital admissions for mental health conditions and self-harm was provided highlighting that there are a small number of children aged 0-17 with mental health conditions severe enough to be admitted to hospital. It was further noted that currently the number of admissions per year stands at around 42. From the presentation it was reported that in recent years, on average around 147 young people aged 10-24 have had an emergency hospital admission for self-harm for each year. It was also reported that compared to England, Gateshead's emergency admissions are significantly higher and have been consistently so over recent years.

The presentation highlighted the proposed single point of access for advice and treatment – a key component of the new whole system CAMHS model for Gateshead. Further information was also provided to the Board on local initiatives in addition to key points from the Local Transformation Plan. In explaining the next steps for the plan an overview of 'Kooth' was provided noting this is to be an 18 month pilot for an online counselling and emotional wellbeing service.

A question around waiting times was raised noting that some patients are waiting a long time following their initial referral for treatment. It was noted that the service are working towards a maximum waiting time of 18 weeks.

It was said that the workforce needs to be adaptable to the changing needs of children referred. It was also said that the long wait times for those requiring autism assessments is being looked at to make this more timely. It was noted that a recent unannounced CQC inspection came back with positive feedback for the service.

A concern was raised that the wait time of up to 18 weeks is too long but it was said that not all patients will wait this maximum time to be seen. It was further noted that those suffering trauma will be seen within 24 hours. It was noted that when the new system goes live it is expected there will be an increase in referrals due to processes being streamlined.

An additional concern was noted that additional services are not being commissioned to deal with the variety of issues patients are facing; it was said that the new model will seek to move resources 'up stream'. It was noted that there have been lengthy discussions on the new model.

The issue of voluntary sector service providers with contracts ending was raised noting that some services have fallen victim to austerity. It was highlighted that it was not reassuring that vital voluntary sector services that patients rely upon currently may no longer exist in the future. It was also said that this can have a knock on effect on Council Services which are struggling financially. It was noted that the CCG is also experiencing financial pressures and that, ultimately, mental health services are not being adequately resourced by government.

A concern that patients who miss three appointments would be taken off waiting lists was raised. It was said that this is not the case however there needs to be a cut off

for patients who continually fail to attend appointments (although it was also noted that failure to attend an appointment may rest with young peoples' parent(s) or carer(s) rather than young people themselves).

A comment was made that the Board wants the best for the children of Gateshead. The work of the service was acknowledged noting that they have a difficult job to do. Members of the Board agreed that an open dialogue needs to be maintained on this ongoing issue to ensure that the new process is working.

It was agreed that an update of this report would be brought back to the Board in the near future.

RESOLVED:

- (i) The Board noted the contents of the report and presentation.
- (ii) The Board agreed to receive further updates throughout the phased implementation of the CAMHS transformation programme.
- (iii) The Board agreed to receive further updates on current waiting list positions.
- (iv) The Board agreed the refreshed Children and Young People Mental Health, Emotional Wellbeing & Resilience plan and implementation arrangements.

HW18 CAMHS WAITING TIMES - CATHERINE RICHARDSON

The Board received the report of Catherine Richardson to seek views on a position paper on Children and Young People Mental Health Services Waiting Times. Representatives from NTW FT and STFT also spoke to the item.

It was noted that limited data was provided on waiting times for CAMHS services which only covered 1st appointments and did not cover waiting times for treatment. It was also noted from the report that work is underway to understand pressures on services from both new referrals and waits for treatment and specific therapies. The Board reviewed the paper which outlined the number of Gateshead residents on waiting lists for 1st appointment pathway. It was further noted from the report that the looked after population of children that attend NTW services are recognised to be one of the most vulnerable groups.

It was acknowledged that there are huge pressures on services to support those requiring treatment. It was further reiterated that an open flow of communication between providers is required to ensure the best possible outcomes for patients.

RESOLVED:

- (i) The Board noted the contents of the paper.

HW19 BETTER CARE FUND QUARTER 4 RETURN - JOHN COSTELLO

John Costello provided the Board with the Better Care Fund return to NHS England for the 4th Quarter of 2017/18. It was proposed that the Board endorse the 4th

Quarter return for 2017/18 to be submitted to NHS England.

RESOLVED:

- (i) The Board endorsed the report.

HW20 SECTOR LED IMPROVEMENT: 'MINI' HEALTH AND SOCIAL CARE SYSTEM REVIEW - STEPH DOWNEY

The Board received a report and presentation providing an overview of CQC Appreciative Inquiry methodology and the forthcoming mini peer review that Gateshead is having in preparation for a potential CQC Appreciative Enquiry.

From the presentation a summary of the review approach by the CQC was provided in addition to an overview of reviews undertaken across various local authority areas. The Board were advised that the reviews are being carried out in the following format:

- Formal Notification (6 weeks)
- Briefings and working groups
- Data analysis and SOIR
- Case tracking
- Review team on site (week 6)
- Range of meetings, visits, focus groups
- Daily feedback, evolving programme, information requests
- High level feedback (day 5)

It was acknowledged that to date there have been a mix of good and poor performance of the 20 reviews completed. It was noted from the presentation that the CQC have found a strong commitment and enthusiasm from organisations and staff working across health and social care services to meet the needs of people who use services, their families and carers.

Further information was delivered to the Board outlining the priority areas for system leaders with emphasis on the CQC encouraging leaders to enable and incentivise health and social care partners to establish aligned objectives, processes and accountabilities.

An overview of the Local Sector Led Improvement Offer was given advising that the Gateshead Mini system review would take place on 11 May 2018 which will provide an opportunity to test out strategic plans and identify best practises. The Board were also advised that the national programme is expected to continue.

From the presentation the following challenges and opportunities were outlined:

- 1) The interface between an emerging Gateshead 'place' based approach to the integration of health and care to meet locally identified needs and priorities and a broader Cumbria & NE system wide approach.

- 2) Moving to an efficient and effective 7 day system, ensuring all parts of the system are able to respond to the challenge to deliver the right care, at the right time, in the right place.
- 3) The opportunity to learn from other health and social care systems, who have a similar vision and goals to Gateshead.

A comment was made acknowledging that external scrutiny of Gateshead services is useful.

RESOLVED:

- (i) The Board confirmed its commitment to participating in the review.
- (ii) Agreed to make relevant officers available for interview/focus groups on the day of the review.

HW21 HEALTH PROTECTION ANNUAL REPORT - GERALD TOMPKINS

The Board received a report on health protection responsibilities and arrangements in Gateshead as part of the Council's statutory duties regarding health protection assurance.

From the report a brief summary was provided on prevention work; this included immunisation, screening, emergency preparedness, resilience and response. A further summary of surveillance and control work was provided to the Board highlighting that the rate of new STIs excluding chlamydia diagnoses in 15-24 year olds was 712 per 100,000 residents compared to 750 per 100,000 in England.

An overview of excess winter deaths was given noting that in Gateshead in winter 2014/15 there were 173 excess winter deaths compared to 70 in 2013/14. It was also noted from the report that the majority of deaths occurred amongst those aged 75 and over.

The report was concluded noting that existing health protection assurance arrangements are working well and have been effective in dealing with all aspects of health protection.

It was acknowledged that this report provided information in arrears as it related to 2016/17.

RESOLVED:

- (i) The Board noted and agreed the report.

HW22 UPDATES FROM BOARD MEMBERS

Sally Young updated the Board on a new report entitled 'GAN Canny' – information on this is to be circulated to Board members.

Steve Anderson advised that prevention work is underway within the Fire Service with the over 65's to reduce falls at home. Home safety checks are being carried out where necessary and advice provided.

James Duncan advised the Board that NTW FT is undergoing an inspection from CQC.

Caroline O'Neil gave an overview of a recent focussed inspection of her service with a letter expected to be received by 11 May 2018. From this an action plan will be put in place – Caroline agreed to provide the Board with a further update on this at a future meeting.

Michael Brown advised the Board of the recent Healthwatch Continuing Healthcare report which is due to be published in April 2018.

RESOLVED:

- (i) The Board acknowledged the updates from Board members.

HW23

A.O.B.

RESOLVED:

- (i) There was no other business.

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**GATESHEAD HEALTH AND WELLBEING BOARD
ACTION LIST**

AGENDA ITEM	ACTION	BY WHOM	COMPLETE or STATUS
Matters Arising from HWB meeting on 20th April 2018			
Children & Young People Mental Health LTP	Copy of presentation to be circulated to Board members Further updates to be provided to the Board during the phased implementation of the CAMHS transformation programme	Melvyn Mallam-Churchill Catherine Richardson	Completed. To feed into the Board's Forward Plan.
CAMHS Waiting Times	Further updates to be provided to the Board on CAMHS waiting times	Catherine Richardson	To feed into the Board's Forward Plan.
Sector Led Improvement: Mini Health & Social Care System Review	Board members to ensure that relevant officers from their organisations are available on the day of the review	All Board members	Completed.
Matters Arising from HWB meeting on 1st December 2017			
Gateshead Newcastle Deciding Together, Delivering Together	Progress reports to be brought to the Board on a quarterly basis.	Ian Renwick	To feed into the Board's Forward Plan.
Matters Arising from HWB meeting on 20th October 2017			
Development of a Whole System Healthy Weight Strategy for Gateshead	A progress report to be brought back to the Board.	Emma Gibson	To come to the Board's meeting in July.

AGENDA ITEM	ACTION	BY WHOM	COMPLETE or STATUS
Matters Arising from HWB meeting on 8th September 2017			
Joint Strategic Needs Assessment Update	<p>An update report on the JSNA to be received by the Board in September 2018.</p> <p>Consideration to be given to the relationship between poverty and peoples' mental health.</p>	Alice Wiseman	To feed into the Board's Forward Plan.
Integrating Health and Care in Gateshead	<p>Further proposals to be brought back to the Board over the coming months for consideration.</p> <p>Colleagues from the VCS to be advised as to how they can best input to the process.</p>	All	<p>Completed.</p> <p>Completed.</p>
Feedback from Joint Members Seminar	Six monthly meeting arrangements to be set up in order to continue the NHS and Local Authority leadership conversations.	CCG/ Council	Ongoing.
Matters Arising from HWB meeting on 21st July 2017			
Contribution of the VCS to Improving Health & Wellbeing in Gateshead	That a half-day session be organised to look at and re-define relationships with the VCS, including the Gateshead Compact	Partner organisations / VCS	Ongoing.

AGENDA ITEM	ACTION	BY WHOM	COMPLETE or STATUS
Matters Arising from HWB meeting on 23rd June 2017			
Gateshead Health & Care Workforce: Challenges and Opportunities	<p>A report to be brought to a future Board meeting on an Organisation Development plan currently being developed for the local health and care system.</p> <p>Workforce agenda to be an agenda item for future Board meetings. This should include contributions to regional work through the Local Workforce Action Board/Group.</p>	<p>Jackie Cairns</p> <p>All</p>	<p>To feed into the Board's Forward Plan.</p>
Matters Arising from HWB meeting on 28th April 2017			
Final Gateshead Substance Misuse Strategy & Action Plan	<p>That future reports be received by the Board so that it can scrutinise and provide challenge against progress made.</p>	<p>Joy Evans/Alice Wiseman</p>	<p>To feed into the Board's Forward Plan.</p>

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**TITLE OF REPORT: Children and Young People in Care and Care Leavers
Strategy 2018 - 2023**

**REPORT OF: Jill Little – Service Manager Looked After Children and Corporate
Parenting**

Purpose of the Report

The Looked After Children and Care Leavers Strategy sets out the strategic vision and intentions for the Looked After Service. This strategy sets out our new approach to providing services and support for Looked after Children and Young People and Care Leavers in Gateshead. It is based on supporting children in the community where it is safe and appropriate to do so, using strengths based practice. It also looks to improve the offer from ourselves and our partners, in supporting these children and young people to reach their full potential.

Background

In 2014, the Children and Young People in Care and Care Leavers Strategy was taken to Cabinet for approval. The 2018 – 2023 Strategy builds upon the previous strategy and highlights the Council's role in corporate parenting and as such, this document also serves as the Council's Corporate Parenting Strategy.

Gateshead Council has always been very clear about their role as Corporate Parents for Looked After Children and Care Leavers and has always had high aspirations for a child in care or care leaver as any good parent would have for their own child, in accordance with the national care leavers charter (Appendix 1). It means providing them with the stability and support they need to make progress, and helping them to access new opportunities and experiences that inspire them to set ambitious goals for themselves. It means celebrating their successes, but also recognising that they will sometimes make mistakes and need help to get back on track. It also means supporting them to gain the skills and confidence to live independent lives, while letting them know that they have someone to call on for help if the going gets tough.

The Government has introduced a set of Corporate Parenting principles that require all departments within a local authority to recognise their role as corporate parents, and encourage them to look at the support and services they provide (p7 of strategy) and it is paramount that as corporate parents we are clear about what is expected of us and how we all look at the support and services we provide to looked after young people and care leavers

Proposal

The strategy and its delivery plan will be monitored through the Corporate Parenting Sub Overview and Scrutiny Committee, who are responsible for ensuring the Council fulfils its role as a corporate parent

The corporate parenting partnership is an officer group chaired by the Service Director, Children and Families which meets every three months, with the sub groups meeting monthly. This ensures priorities are monitored and reviewed and progress is evidenced within the work plan.

The priorities are informed by what or looked after young people and care leavers tell us and we have identified seven key priorities which are at the heart of the strategy:

- Our Children and Young People are **respected** and **involved**;
- Our placements are **safe** and meet the **needs** of our Children and Young People;
- **Positive** relationships and **identity**;
- Our Children and Young People will be **supported** to **improve** their physical and emotional health and wellbeing;
- Our Children and Young People are **encouraged** to **reach** their educational, employment and training potential;
- Our Young People moving into adulthood will be **supported** to **achieve** their full potential in life;
- **Improve** our role as the Corporate Parent;

The strategy invites us to work together with a common purpose, putting the welfare of our children in care at the heart of everything we do

Conclusion

The strategy is aspirational and needs to be fully endorsed by all of the Council and it's partners.

Success will be directly measured against the following outcomes:

- Young people make successful transitions to adult life and achieve their aspirations through having the care, support and help they need from Gateshead Council acting as corporate parents;
- Care Leavers receive the help they need through having well developed Pathway Plans in place.
- Care leavers will be successful in obtaining education, employment or training
- We believe that if we get this right we will have achieved success and this is how it will look:
- Looked after Children and Care Leavers needs are championed across Gateshead;
- A robust offer is in place that is understood by all and interpreted in the same way;
- Our Looked after Children and Care Leavers achieve good outcomes that exceed the national average;

- Our Looked after Children and Care Leavers have higher aspirations and are on their way to achieving their aspirations;
- Our Looked after Children and Care Leavers tell us that they have been supported to reach their aspirations whether this is in education, employment or training;
- Numbers of Care Leavers in Education, Employment and Training are above the national average and rising;
- Young people are telling us that they are recognising their suggestions translating into service development and are happy with what they see;
- Increased Education, Training and Employment opportunities across Gateshead for Looked after Children and Care Leavers.
- Access to mainstream and specialist health services, which meet their physical, mental and sexual health needs;

Recommendations

It is recommended that the Health and wellbeing board endorse the Children and young people in Care and Care Leavers Strategy.

For the following reason(s)

- (i) To ensure that Corporate Parenting is embedded across the Council and with partners
- (ii) To ensure we achieve the priorities set out in the strategy
- (iii) To obtain advice and guidance from partners on any additional support or resources available to ensure better outcomes for Looked After young people and Care Leavers

The views of Board members are sought on how they can best contribute to the implementation of the strategy.

Contact: Jill Little – Ext: 3420

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**Children and Young People in Care
& Care Leavers Strategy**

2018 - 2023

DRAFT

Foreword

Welcome to Gateshead's Children and Young People in Care and Care Leavers strategy which covers the period 2018 to 2023.

We know that many children and young people who become looked after have experienced significant challenges in their young lives. Children and young people who are in the care of the local authority are among the most vulnerable in our community. They are entitled to the best services that can be provided and achieving this for them requires understanding, commitment and passion from all agencies and individuals who hold a responsibility to provide services for them. We therefore take our responsibilities as Corporate Parents very seriously and work with our partners and others to ensure these children are provided with good quality care and nurturing, to give them the best possible start in life, education. and independence.

We pledge to put children and families at the heart of everything we do. Our role as Corporate Parents is embedded within the Children and Young People in Care and Care Leavers Strategy 2018-2023, and as such, this document also serves as the Council's Corporate Parenting Strategy. It will be used to guide our decisions and ensure that we are doing the right things at the right time with the right level of resources.

This strategy sets out our new approach to providing services and support for Looked after Children and Young People and Care Leavers in Gateshead. It is based on supporting children in the community where it is safe and appropriate to do so, using a whole family strengths based practice; a recognition that we need to reduce the demand on our services through the transformation of edge of care and early help services; and improve the offer from ourselves and our partners, in supporting these children and young people to reach their full potential.

Signed by:



Councillor Gary Haley,
Cabinet Member for
Children and Young
People



Signed by:



Caroline O'Neill
Strategic Director, Care
Wellbeing and Learning



Contents

1. Introduction	4
2. Vision and Principles	4
3. What Children and Young People in our Care Say	4
4. Our Priorities	5
5. The Gateshead Picture	6
6. Role of Corporate Parent	7
7. How Corporate Parenting works in Gateshead	8
8. The Focus on Achieving our Priorities	8
9. Measuring Success	19

1. Introduction

All children, regardless of circumstance, need to know someone is there for them, fighting their corner, listening to their needs and doing what they can to provide support. It is our belief that all children should be provided with the best start in life, and this should be no different for the children and young people in our care and for those young people who embark on a new journey as Care Leavers.

Elected members, the Leadership Team and employees all have a special responsibility to ensure that the Council acts as a corporate parent for children in our care. This means, as a Council, we need to ensure each individual child has their own needs addressed and is truly being listened to, and looked after, in order to reach their full potential.

By understanding and addressing the needs of our looked after children, we can turn around their experiences from challenging backgrounds by asking: “What would I want for my own child?”

2. Vision and Principles

We want every child and young person in the care of Gateshead Council to reach their full potential. They have a right to be healthy, happy, safe and secure and to feel loved, valued and respected.

We want our children and young people to have everything that a responsible and conscientious parent would want for their children.

We want our children in care and care leavers to work with us, along with their parents and carers, in shaping how we manage and organise the planning, resources and services that support and care for them.

We want our children and young people to be happy and healthy, physically, socially and emotionally, to be safe and protected from harm and exploitation, and to be supported each step of the way to adult life.

We want them to achieve their potential, including at school, to make the most of the learning opportunities they are offered and to participate in the decisions affecting their care and their lives. This includes making the transition to adulthood with continuity of support, access to the right jobs and higher education, while living in good housing and being financially secure.

3. What Children and Young People In our Care Say

- Find moving into a new home a difficult experience;
- Need to understand why they came into care;
- Need to be able to build relationships with adults they can trust;
- Rely on the adults caring for them to help keep them safe;

- Support to maintain relationships once they leave care, on an informal basis;
- Want professionals who provide support to have high aspirations for them;
- Reported that leaving care still felt like a 'cliff-edge';
- Felt that the process of leaving care itself was often rushed and that planning for leaving care should start earlier;
- Wanted more choice about where they lived and who supported them;
- Know what they were entitled to from universal services.

Our strategy invites us to work together with a common purpose, putting the welfare of our children in care at the heart of everything we do.

Our principles are to:

- Safeguard the welfare, health and happiness of all children in care;
- Listen and respond to children and young people's views and wishes;
- Provide a stable and supportive home with caring consistent relationships;
- Have high aspirations for each child and young person;
- Respect and value diversity;
- Place children and young people within families whenever possible and as close to the local community as possible;
- Promote contact with family and friends;
- Respect and promote children and young people's rights;
- Make decisions based on assessments of need;
- Celebrate children and young people's achievements.

4. Our Priorities

Informed by what our Looked after Children and Young People say is important to them, we have identified seven key priorities which are at the heart of this strategy:

- Our Children and Young People are **respected** and **involved**;
- Our placements are **safe** and meet the **needs** of our Children and Young People;
- **Positive** relationships and **identity**;
- Our Children and Young People will be **supported** to **improve** their physical and emotional health and wellbeing;
- Our Children and Young People are **encouraged** to **reach** their educational, employment and training potential;
- Our Young People moving into adulthood will be **supported** to **achieve** their full potential in life;
- **Improve** our role as the Corporate Parent;

5. The Gateshead Picture

The services that support the children and young people in our care are currently rated Good by Ofsted. In our role as Corporate Parents we strive to continually improve outcomes for children and young people, but this does not come without its challenges. Our services will support a child in the community with their family where it is appropriate and safe to do so and managing the reduction of demand is central to best outcomes for young people. We are committed to ensuring that children and young people are at the centre of all service delivery.

Gateshead has a population of around 201,600 people. Gateshead's population is projected to increase by 11,000 (5.5%) between 2014 and 2039 to 211,500.

The population is ageing: it is projected that by 2039 there will be an additional 14,400 people aged 65 or older, an increase of 38%. There will also be a slight decrease in the number of children and young people aged 0-15 of around 500 or 1.5%.

1 in 4 children in Gateshead live in poverty. Children who live in poverty are significantly more likely to experience poor mental as well as physical health.

Entering care is strongly associated with poverty and deprivation, and with emotional and mental health problems. Research suggests that around 45-60% of looked after young people have emotional and mental health problems, increasing to 72% for those in residential care.

At the end of reception, just under 6 in 10 Gateshead pupils achieve a Good Level of Development at Foundation Stage. This is similar to the North East and just below the England averages. Nationally there is a gap of around 10% achieving a good level of development between the richest and poorest areas (based on IMD 2015 deprivation).

Nationally, the number of Looked After Children has continued to rise; it has increased steadily over the last six years. There were 72,670 looked after children at 31 March 2017, an increase of 3% compared to 31 March 2016 and an increase of almost 5% compared to 2015. The rise this year reflects a rise of 260 in unaccompanied asylum-seeking children, compared to a rise of 2,220 in all looked after children.

As at 31 March 2018, there were 392 children and young people classed as being Looked After. This figure includes 7 unaccompanied asylum-seeking children. There were also 138 Care Leavers.

57% of Looked After Children are male, and 43% female and these proportions have varied little over recent years. We have seen an 18% reduction in the number of looked after children aged 0-2, whilst those aged 3-5 have increased by 38%. The 6-8 age group, the 12-14 age group and the 12-14 age group have remained the same with only a slight increase in those aged 9-11.

Whilst we have seen an increase in older children over the last few years, there has been an 8% reduction of those aged 15-17 over the last few months.

6. Role of Corporate Parent

Gateshead Council has always been very clear about their role as Corporate Parents for Looked After Children and Care Leavers and has always had high aspirations for a child in care or care leaver as any good parent would have for their own child, in accordance with the national care leavers charter (Appendix 1). It means providing them with the stability and support they need to make progress, and helping them to access new opportunities and experiences that inspire them to set ambitious goals for themselves. It means celebrating their successes, but also recognising that they will sometimes make mistakes and need help to get back on track. It also means supporting them to gain the skills and confidence to live independent lives, while letting them know that they have someone to call on for help if the going gets tough.

The Government has introduced a set of Corporate Parenting principles that require all departments within a local authority to recognise their role as corporate parents, and encourage them to look at the support and services they provide. The principles require corporate parents:

- To act in the best interests, and promote the physical and mental health and well-being, of those children and young people;
- To encourage those children and young people to express their views, wishes and feelings;
- To take into account the views, wishes and feelings of those children and young people;
- To help those children and young people gain access to, and make the best use of, services provided by the local authority and its relevant partners;
- To promote high aspirations, and seek to secure the best outcomes, for those children and young people;
- For those children and young people to be safe, and for stability in their home lives, relationships and education or work; and
- To prepare those children and young people for adulthood and independent living.

7. How Corporate Parenting Works in Gateshead

We have a well-established model of Corporate Parenting. It includes well-defined decision making processes in the Council with clear links to the Children in Care Council (One Voice). The Council regularly reviews how we deliver these functions and that there are tangible outcomes through active and regular feedback from the children and young people.

This strategy and its delivery plan will be monitored through the Corporate Parenting Sub Overview and Scrutiny Committee. The role and remit of this Sub Committee is to receive and consider monitoring reports on children in the Council's care, and to

keep under review the Council's arrangements for ensuring that the Council fulfils its role as corporate parent.

The Corporate Parenting Partnership is an officer group chaired by the Service Director, Children and Families. This group oversees all aspects of our work in relation to our statutory and aspirational work with children in care and care leavers. There are several sub groups with responsibility for leading on particular areas of the delivery plan:

- Arts, Leisure & Activities; - subgroup lead by children's participation officer
- Education, training and employment; - subgroup lead by REALAC
- Health; - subgroup lead by designated nurse LAC
- One Voice Children In Care Council; sub group lead by Children's rights officer
- Placements and accommodation; subgroup lead by commissioning
- Care Leavers – themed Sub Group lead by LAC and leaving care team

The corporate parenting partnership meets every three months, with the sub groups meeting monthly. This ensures priorities are monitored and reviewed and progress is evidenced within the work plan.

All councillors have a responsibility to ensure that services for our children and young people continue to be at least good and to ensure there are sufficient resources and accommodation choices available. The councillors undertake training to ensure they have the knowledge to fulfil their safeguarding and corporate parenting responsibilities.

8. The Focus on Achieving our Priorities (see delivery plan, Appendix 2)

Priority 1: Our Children and Young People are Respected and Involved

We will ensure children and young people in our care are aware of their entitlements and know where to access information, how to seek advice and support and understand how to make a complaint.

We will ensure there are strong and active children in care council (One Voice) which is able to help influence and shape the delivery of services through direct access to councillors and officers of the Council.

We will ensure:

- Staff have the knowledge, skills and commitment to engage and listen to looked after children and care leavers in effective ways, appropriate to their age, ability and interest;
- We maximise the involvement of looked after children and care leavers in decisions made that affect them and provide feedback on any actions that are/are not taken as a result;
- Looked after children and care leavers are aware of their entitlements and know where to access information, how to seek advice and support, and understand how to make a complaint;
- The Council and its partners support One Voice (and our wider Children in Care Council activities) and deliver against the commitments made in 'Our Care Pledge' and the 'Care Leavers' Charter';
- Looked After Children and Care Leavers' engagement and participation is embedded within each priority of this Strategy;
- We celebrate the achievements of our looked after children and care leavers;
- The number of looked after children and care leavers who are involved in our Children in Care Council activities increases.

What this means in practice

- Looked after children are visited at least every 6 weeks (unless otherwise agreed as part of a permanence plan) and are seen alone;
- Contact with care leavers is made at least every 8 weeks, unless otherwise agreed;
- Looked after children and care leavers are active participants in their review and meet their Independent Reviewing Officer regularly, and before each upcoming review;
- We provide a variety of ways for children and young people to express their views including independent advocacy and MOMO (Mind of My Own). Have a strong and active Children in Care Council (One Voice) which is able to help influence and shape the delivery of services through direct access to senior officers of Children's Services;
- An annual event is held to recognise the achievements of our looked after children and care leavers;
- Looked after children and care Leavers are regularly involved in the recruitment and interview process for Children's Social Care staff.

Our key areas for continuous improvement

- We need to ensure One Voice has a prominent position within the governance arrangements for looked after children and care leavers – with One Voice included as a sub group of the Corporate Parenting Partnership;
- We need to develop our approach to Gateshead's Children in Care Council, building on the existing One Voice group and establishing a structured approach to engaging care leavers and younger looked after children;
- We need to ensure that the views of young people are at the heart of the LAC review process and are sought in a timely and facilitative way;
- We need to improve on evidencing how we have responded to a young person's views and the difference this has made, outlining reasons for our response;
- We have more to do to ensure looked after children and care leavers maximise their take-up of rights and entitlements through more accessible information available in a range of formats, including e-materials;
- Looked after children and care leavers engage in structured interviews at key points and responses demonstrate a high level of positive feedback on the services they've received. However, in order to make the most of this process, findings need to be systematically collected, collated and reported, to ensure this information presents an accurate picture and is useful in informing service development;
- We need to continue to develop our approach to participation and engagement, building capability across the service so that we can hear and respond to the voices and views of children, young people and their families;
- We need to ensure young people placed at a distance are regularly offered opportunities to engage with Children in Care Council activity, and are consulted on key issues relating to service development;
- We need to develop our approach to involving looked after children and care leavers in our recruitment processes, ensuring we create a sustainable and flexible approach that values young people's involvement.

Priority 2: Our Placements are Safe and Meet the Needs of Our Children and Young People

We will ensure that we have a range of placements available for our children and young people and that there will be minimum placement moves for any looked after child.

We will ensure:

- We implement our Sufficiency Strategy to help deliver improved options for looked after children and care leavers;
- We have a range of placements available for our children and young people;

- Visits to all placements are undertaken at a minimum of every 6 weeks;
- Looked after children and young people have a variety of ways to express any concerns they have and act promptly on these;
- Placements changes are kept to a minimum;
- Our Edge of Care offer will support children and families to live safely together through bespoke packages of intervention and planned respite care.

What this means in practice

- Maximise permanency for children in care so as to ensure that where possible and appropriate, children in care are provided with stable placements via adoption, special guardianship or long term/ permanent fostering;
- There are very few unplanned placement changes;
- Independent reviewing officers (IROs) meet with children and young people alone prior to their looked after review;
- A clear escalation process is in place to ensure that IROs can bring concerns to the attention of managers in a timely manner;
- Action for Children is available for independent advocacy;
- Concerns and complaints are responded to promptly and the local authority designated officer (LADO) is involved if required;
- A range of accommodation opportunities available for our young people and care leavers as they move towards adulthood;
- Social workers or managers visit placements, including residential, before moving children and young people to ensure the quality of the service they offer;
- Follow procedures and take a multi-agency approach when children and young people go missing ensuring that young people are listened to and action is taken to keep them safe.

Our key areas for continuous improvement

- We have to do more to secure sufficiency in our fostering options, particularly when placing siblings, adolescents and children with complex needs;
- Increase the number of the in-house foster carers who are local to the Gateshead area through an improvement in recruitment and retention processes;
- We have more to do in driving solutions for children and young people to enjoy choice of placement, including with their siblings where appropriate;
- Sufficiency is a significant challenge and we have recognised the need to develop our placement offer, ensuring fostering, residential, edge of care, leaving care and commissioned services drive the sufficiency agenda to improve choice and the range of placements. Our aim for all placements is to:
 - Support young people to successfully stay at home through our edge of care offer

- Improve placement choice and placement stability
- Increase the number of placements available including for sibling groups and adolescents.
- Increase the provision of supported accommodation
- Reduce the number of emergency placements
- Continue to make decisions about permanence in a timely manner to avoid drift and delay

Priority 3: Positive Relationships and Identity

Children and young people are supported to maintain, build and sustain positive relationships with others, including their birth families, siblings in care, carers and their peers. Children and young people know who they are, why they are in care and understand their heritage. They feel valued by others, and their individual needs arising from race, culture, religion, sexual orientation or disability are understood and met.

We want to encourage our looked after children and young people to feel part of their local community and support them to be involved in a range of activities, including volunteer schemes and leisure activities.

We will ensure:

- Children and young people are encouraged, and have opportunities, to develop strong peer relationships;
- Children and young people are enabled to sustain family relationships with parents, siblings and extended family in a safe and positive way;
- Children and young people have access to more specialist support if required to ensure needs are met;
- A coordinated strategy is developed with partners to increase looked after children and care leavers participation in extracurricular activities such as arts and cultural events and organised sports activities, to contribute to better enjoying and achieving outcomes for looked after children and care leavers;
- Children and young people know who they are, why they are looked after and understand their background and heritage;
- They feel valued by others, and their individual needs arising from race, culture, religion, sexual orientation or disability are understood and met.

What this means in practice

- Where possible, placements are local and priority is given to children and young people to help them continue in the same school or education establishment where this is in their best interests;

- A permanency planning process ensures that early decisions are made and any drift is avoided;
- Extended families are always considered as part of the planning process and children are placed with extended family where it is safe to do so;
- Contact with family and siblings is always considered as part of planning including Adoption and Special Guardianship Support Plans;
- A variety of activities are provided through the year for looked after children and care leavers;
- MAX cards and Leisure cards are available to support leisure opportunities for looked after children and care leavers. This provides free access to gym and swimming in the borough's facilities as well as reduced costs to specific cultural venues;
- A genogram is undertaken for all young people to aid understanding of their family and identity;
- Life story work is considered with all looked after children where there is a decision of permanency;
- At the point of placement, a robust matching process is in place to consider issues of identity and belonging;
- Where there is not the same cultural identity for the child/young person within their placement, opportunities to ensure close cultural links are considered and sought accordingly.

Our key areas for continuous improvement

- Increase numbers of local, available placements to maintain local links and retain relationships;
- Facilitate Family Group Conferences to retain, and where appropriate, strengthen family and friend relationships;
- Undertaking Family Group Conferences to help young people be part of a strength based approach and to help understand the dynamics of their birth family;
- Ensure children and young people placed at a distance have equivalent access to leisure and cultural activities as their peers;
- Ensuring as much information as possible is sought from parents, family and friends at the early stage of Children's Services involvement;
- Continue to invest in our life story work to reflect the story of the child and help them understand their experiences and background.

Priority 4: Our Children and Young People will be Supported to Improve their Physical and Emotional Health and Wellbeing

Our children and young people will be encouraged and supported to choose healthy and active lifestyles. They will have access to specialist health services as required, including those associated with additional needs or disability.

We will ensure:

- The health needs of children and young people are assessed and reviewed in a timely way;
- All children coming into care have a Child looked After Health Assessment with a medical practitioner. The health plan and health needs are reviewed annually for 5 - 18 year olds and 6 monthly for under 5 year olds by an appropriate health professional;
- Children and young people looked after have access to specialist health services as required including those related to additional needs or disability;
- Our children and young people are encouraged to choose healthy and active lifestyles;
- Children living outside the local authority area will not be disadvantaged in having their health needs met.
- Our children and young people have access to information on the risks of alcohol, and substance misuse and the risks of sexual exploitation. Those identified as at risk are offered support through specialist services;
- Health outcome targets are met for Looked After Children;
- Children and young people have their need for additional emotional support recognised and addressed, interventions will improve their knowledge and skills to achieve emotional stability, resilience and self-confidence;
- Looked After Children are consulted on evaluation and improvement plans for health services they are engaged with.

What this means in practice

- There is evidence of health plans being reviewed and informing care plans of the health needs and support required that needs to be in place to ensure physical and emotional health needs are met, promoting a sense of security and belonging;
- Positive attachments are promoted with key adults in a child/young person's life. Important attachments are retained, and where possible strengthened, to improve sense of self and wellbeing;
- Young people have their current and enduring health needs assessed when 15 years old to inform their pathway plan.

Our key areas for continuous improvement

- Health services work with public health to complete a Health Needs Assessment of Gateshead LAC population;
- Timeframes for health assessments will be performance managed to achieve the national standard;
- Actions on health plans are monitored within the care plan review process to ensure health outcomes are achieved;
- Strengths and Difficulties Questionnaire (SDQ) is utilised for KPI measurements and as a tool for assessing and evaluating changes in the emotional health needs of individual LAC. This assessment informs case reviews and care planning. Statistical information is used to assist in service development;
- Local CAMHS services have a pathway for looked after children to ensure they have their emotional health needs assessed and met, outcomes are measured and reported;
- Health information is available for every child/young person to ensure continuous engagement with the health services they require, particularly in times when there is a change of placement or changing circumstances;
- Ensure that we are building the skills and experience within our professional networks to support children/young people's emotional stability and wellbeing, identifying the times and challenges when more support is needed i.e. anniversaries;
- Identify additional support which may help a child/young person's emotional wellbeing and promote resilience, and give opportunities to facilitate this, e.g. sport, hobby, musical instrument, guides, cadets etc;
- Promote understanding of the link between positive physical health and emotional wellbeing with stability in school, placement and family;
- Report on the views of young people relating to their health needs and views of the services they receive.

Priority 5: Our Children and Young People are Encouraged to Reach their Educational, Employment and Training Potential

- We will support all Looked after children to attend an appropriate education resource that helps them achieve their potential;
- We will support and encourage all care leavers to attend education, employment or training;
- We will have high aspirations for all of our looked after children and care leavers.

We will ensure:

- Children and young people are supported to attend school;
- All children have an effective, high quality personal education plan;

- Children's attainment and progress from Reception to 16 years is monitored and responded to according to individual need. From 16 to 18 years identify those students who are at risk of disengaging as seen in PEP information;
- School moves happen only in exceptional circumstances;
- Partners are aware and receive training on the unique needs of individual and groups of looked after children;
- We have a multi-agency Education, Employment and Training panel which bring together expertise to support young people's aspirations;
- Young people leaving care are encouraged and supported to enter further education, employment and training.

What this means in practice

- 100% of our looked after children and young people have a personal education plan;
- Additional needs are identified and where required a Special Educational Needs (SEN) intervention initiated;
- Placement changes are kept to a minimum;
- The Head teacher of the Virtual School has effective monitoring to evaluate attainment and progress. Actions, including interventions are identified to address emerging themes. At post 16 students at risk of disengaging are identified and actions identified to support re-engagement;
- Looked after children access their statutory entitlement to full time education and attendance is in the good or better range;
- School moves are kept to a minimum and where necessary transitions are carefully planned and the most appropriate education provision is secured;
- Training including statutory support to Designated Teachers is delivered to a range of partners including foster carers and social workers on what works to support children's education;
- Looked after children and care leavers have access to work experience opportunities and prioritised for careers advice, training, apprenticeships and career opportunities;
- The EET Panel monitors the progress and creates opportunities for young people entering further education, employment and training.

Our key areas for continuous improvement

- Promoting a good understanding by social workers on pupil progress through school reports and educational achievements and then rewarding looked after children and young people accordingly;
- Embed Staying Put Policy to avoid disruption for care leavers moving into further and higher education;

- Improve the offer to looked after children and care leavers aged 16 – 25;
- Ensure looked after children and care leavers are aware of their entitlements to financial support to promote their education, training and employment aspirations;
- Supporting the development of appropriate work experience and apprenticeships and enable young people to access them.

Priority 6: Our Young People Moving into Adulthood Will Be Supported to Achieve Their Full Potential in Life

We know that transition into adulthood is not always easy and for care leavers the transition can be more complex. We know how important it is that our young people are supported into adulthood in a seamless manner and provided with progressive and ongoing interventions. We want our care leavers to be confident and be able to access support and ensure that young people are engaged in education, employment and training and have the opportunity to live successful adult lives.

We will ensure:

- Children and young people enter adulthood in a planned way, with a home to live in, the skills to look after themselves and the ability to earn a living or continue in education or training;
- Ensuring entitlements are made clear to all care leavers;
- Utilise the Transitions team/panel to support the planning for young people from the age of 16, who may be eligible for support from Adult Services.

What this means in practice

- Allocating a personal advisor to all eligible young people at the age of 16 who will work alongside the allocated social worker until the young person is 18. The personal advisor remains involved until the young person reaches the age of at least 21 and continues to offer support up to the age of 25;
- Allocate a worker from the Transitions Team at the age of 16 for young people who may have eligible needs at 18 under the Care Act 2014
- Clear expectations are in place to help young people prepare for adulthood and have the life skills to achieve this;
- Opportunities are given for young people to build confidence over a prolonged period for more independence and self-responsibility;
- A range of accommodation options are considered to facilitate plans for young people leaving care;
- Ensure all necessary information has been obtained for the young people in a timely way that is needed when moving towards adulthood, e.g. birth certificate, National Insurance number, bank account, etc;

- Increasing the number of young people in Staying Put arrangements;
- Young people receive a health passport when they leave care. This is a comprehensive summary of their health history and identifies support and services for adulthood; it includes current registration i.e. with GP and additional health service details. Care leavers also continue to have access to the Platform substance misuse service, with a planned transition to adult substance misuse services at an appropriate point if required.

Our key areas for continuous improvement

- Preparation for independence at an earlier stage for this to be built upon well before plans for moving are finalised;
- Accessibility and take up of health care and ensure young people are aware of the importance of dental appointments, staying healthy, etc;
- Improve range and quality of placement provision for young people leaving care aged 18 and over including options of supported and semi-supported accommodation;
- Further develop the multi-agency care leavers accommodation panel to monitor the progress of care leavers accommodation plans, and identify themes and gaps with the intention of improving service delivery and strengthening multi agency working;
- Improve the quality of our pathway planning through having a quality assurance auditing process with a view to evidencing an increase in the contribution from our young people into their planning;
- Increase the numbers of care leavers aged 21 and over who return the service to access support.

Priority 7: Ensuring all partners support work as ambitious Corporate Parents

Continue to improve outcomes for looked after children and care leavers via the further implementation of a corporate parenting and partnership approach to the development and delivery of services.

We will ensure:

- At the core of everything we do is our understanding of our responsibility as a Corporate Parent;
- All partners focus service delivery on corporate parenting priorities;
- Elected members and senior officers take a lead role in raising awareness of the needs of children in care and care leavers with all council services and partner agencies;

- Promotion of the role of elected members as corporate parents and appropriate mechanisms are in place to enable the Council to fulfil its statutory responsibilities in this area.

What this means in practice

- The Corporate Parenting Sub Overview and Scrutiny Committee meets on a quarterly basis to monitor reports on children in the Council's care, and review the arrangements for ensuring the Council is fulfilling its role as corporate parent;
- Corporate Parenting training continues to be provided to elected members;
- Listening to the voice of children and young people in our care, and those leaving care, either directly or indirectly, through national and local inspection reports, service user surveys, independent reviewing officer's reports, reports from advocates, and other professionals, and use what we learn to improve services and outcomes.

Our key areas of continuous improvement

- An increase in the sense of corporate responsibility across all the statutory agencies in the support for our looked after children and care leavers, improving the impact of multi-agency support;
- Ensure good mechanisms are in place for challenge and counter challenge, between social workers, carers, young people, to realise the ambition we have for looked after children in Gateshead;
- Continue to develop the multi-agency approach to corporate parenting to become more effective in the delivery of the Corporate Parenting plan;
- One Voice (Children in Care Council) are active participants in the partnership and able to contribute and offer challenge;
- Raise awareness with all new staff employed by Gateshead Council with regard to their corporate parenting responsibilities.

9. Measuring Success

How we will know our strategy is achieving the desired outcomes for Children and Young People in Care and Care Leavers?

To find out how well our strategy is working we will:

- Listen and act on the views of Looked After Children and Care Leavers;
- Listen and act on the views of the parents and carers of Looked After Children and Care Leavers;
- Monitor and challenge our own progress through the Corporate Parenting Partnership Board and Corporate Parenting Sub Overview and Scrutiny Committee;

- Monitor the trends in our Looked After Children and Care Leaver population in order to ensure we have the right support and accommodation for our young people
- Monitor the outcomes of our Care Leavers to the age of 25 to ensure they are achieving positive outcomes.

Success will directly be measured against the following outcomes:

- Young people make successful transitions to adult life and achieve their aspirations through having the care, support and help they need from Gateshead Council acting as corporate parents;
- Care Leavers receive the help they need through having well developed Pathway Plans in place.
- Employment

We believe that if we get this right we will have achieved success and this is how it will look:

- Looked after Children and Care Leavers needs are championed across Gateshead;
- Recognition that we work with our Looked after Children and Care Leavers effectively;
- A robust offer in place that is understood by all and interpreted in the same way;
- Our Looked after Children and Care Leavers achieve good outcomes that exceed the national average;
- Our Looked after Children and Care Leavers have higher aspirations and are on their way to achieving their aspirations;
- Our Looked after Children and Care Leavers tell us that they have been supported to reach their aspirations whether this is in education, employment or training;
- Numbers of Care Leavers in Education, Employment and Training are above the national average and rising;
- Young people are telling us that they are recognising their suggestions translating into service development and are happy with what they see;
- Increased Education, Training and Employment opportunities across Gateshead for Looked after Children and Care Leavers.

Our local key performance indicators will be measured through data:

- The number of Care Leavers remaining engaged in education, taking up training opportunities and undertaking activities aimed at improving employability;
- Improved support for Care Leavers while they are at a further education college or university;
- An ongoing reduction in the number of Care Leavers who are NEET, through improved support by mainstream and specialist services;
- Access to mainstream and specialist health services, which meet their physical, mental and sexual health needs;

- Programmes in place that reduce homelessness and address the specific needs of Care Leavers;
- Programmes in place that reduce crime and the risk of young people being exploited specifically addressing the needs of Care Leavers;

And through surveys of Care Leavers through our Children in Care Council (One Voice)

- Improved support for Care Leavers while they are at a further education college or university;
- Improved financial support and guidance on offer so that Care Leavers are able to manage their income and reduce the risks of falling into debt;
- Care Leavers reporting that they feel safe and that they live in suitable accommodation that meets their individual needs;
- Care Leavers receiving high quality ongoing support from their local authorities so that they do not feel lonely and isolated;
- Care Leavers leaving care at a time when they are ready;
- Care Leavers are knowledgeable about their entitlements through our website, Care Leavers Charter and our comprehensive guides to leaving care;
- Improvements in the quality of assessments, plans and reviews.

Our Care Pledge

1. Looking After You

- You will get your own social worker who is properly qualified to work with you
- We will make sure your Social Worker doesn't change unless there is a good reason for it, unless you want to change who your Social Worker is
- Your social worker will stay in touch regularly to check you are OK
- You will have a care plan which is all about you and your needs, and which is looked at regularly

2. Finding the Right Place for you

- If it is part of your care plan for you to go back home we will make sure this happens as quickly and as safely as possible. We will check to make sure you are safe after you go home
- If you can't go home we will find the right place for you and make sure you live with people who care about you
- We will try to give you a choice about where you live and who you live with
- If we can we will find someone else in your family who can care for you.
- If we can, we will keep you with your brothers and sisters.
- We will help you keep in touch with your birth family wherever possible. If it's not possible we'll tell you why.

3. Involving you

- We will take your feelings into account in decisions that affect you
- We will make sure you are fully involved in your reviews
- We will help you to have your say and listen to your views
- If you want to make a complaint we will provide you with access to an advocate to help you get your views across

4. Treating you right

- We won't talk about you to other people where it's none of their business – unless we need to, to keep you or others safe
- We will always listen to you and treat you with respect
- We will explain what is going on in words you understand

5. Getting a good education

- We will make sure you get a place at a good nursery or school
- We will make sure that you don't have to change schools wherever possible, especially in years 10 and 11
- There will be a designated teacher at your school to make sure you're doing OK – but they won't treat you differently to others
- We will let you know who your designated teacher is so you know where to go if you need help in school
- We will make sure you don't miss any school and help you get back on track with extra support if you fall behind

6. Keeping you healthy and happy

- We'll make sure you get regular health-checks and if you need any treatment or support that you get it quickly
- We will work together with your school, carers and the health team to make sure all your health needs are met
- We'll make sure you have opportunities to do fun things, including free access to our leisure facilities, and give you opportunities to get to know other Looked After Children
- We'll help you find out about activities that are on, so that you can get involved.
- We will make sure you can keep going to activities you are involved in if you move placement

7. Helping you get on in life

- We will give you the help you need when it's the right time for you to move on from care to find a place to live and learn to live on your own
- If you can't live on your own we'll make sure that choices are there for you after you are 18
- We will make sure you have enough money and help you to manage it well
- We will help you if you want to do an apprenticeship, go to college or university
- We'll help you get ready for the world of work, find a job or training placement and give you the chance to get work experience

Complementing the Pledge, the Council and its partners support the principles, values and commitments as detailed in the Charter for Care Leavers produced by the Department for Education and the Care Leavers Foundation.

The Care Leavers Charter

The Charter for Care Leavers is designed to raise expectation, aspiration and understanding of what care leavers need and what the government and local authorities should do to be good Corporate Parents. Gateshead Council have adopted the charter and are committed to improving outcomes for Care Leavers as reflected in the charter.

We Promise:

To respect and honour your identity

- We will support you to discover and to be who you are and honour your unique identity. We will help you develop your own personal beliefs and values and accept your culture and heritage. We will celebrate your identity as an individual, as a member of identity groups and as a valued member of your community. We will value and support important relationships, and help you manage changing relationships or come to

terms with loss, trauma or other significant life events. We will support you to express your identity positively to others.

To believe in you

- We will value your strengths, gifts and talents and encourage your aspirations. We will hold a belief in your potential and a vision for your future even if you have lost sight of these yourself. We will help you push aside limiting barriers and encourage and support you to pursue your goals in whatever ways we can. We will believe in you, celebrate you and affirm you.

To listen to you

- We will take time to listen to you, respect, and strive to understand your point of view. We will place your needs, thoughts and feelings at the heart of all decisions about you, negotiate with you, and show how we have taken these into account. If we don't agree with you we will fully explain why. We will provide easy access to complaint and appeals processes and promote and encourage access to independent advocacy whenever you need it.

To inform you

- We will give you information that you need at every point in your journey, from care to adulthood, presented in a way that you want including information on legal entitlements and the service you can expect to receive from us at different stages in the journey. We will keep information up to date and accurate. We will ensure you know where to get current information once you are no longer in regular touch with leaving care services. We will make clear to you what information about yourself and your time in care you are entitled to see. We will support you to access this when you want it, to manage any feelings that you might have about the information, and to put on record any disagreement with factual content.

To support you

- We will provide any support set out in current Regulations and Guidance and will not unreasonably withhold advice when you are no longer legally entitled to this service. As well as information, advice, practical and financial help we will provide emotional support. We will make sure you do not have to fight for support you are entitled to and we will fight for you if other agencies let you down. We will not punish you if you change your mind about what you want to do. We will continue to care about you even when we are no longer caring for you. We will make it our responsibility to understand your needs. If we can't meet those needs we will try and help you find a service that can. We will help you learn from your mistakes; we

will not judge you and we will be here for you no matter how many times you come back for support.

To find you a home

- We will work alongside you to prepare you for your move into independent living only when you are ready. We will help you think about the choices available and to find accommodation that is right for you. We will do everything we can to ensure you are happy and feel safe when you move to independent living. We recognise that at different times you may need to take a step back and start over again. We will do our best to support you until you are settled in your independent life; we will not judge you for your mistakes or refuse to advise you because you did not listen to us before. We will work proactively with other agencies to help you sustain your home.

To be a lifelong champion

- We will do our best to help you break down barriers encountered when dealing with other agencies. We will work together with the services you need, including housing, benefits, colleges and universities, employment providers and health services to help you establish yourself as an independent individual. We will treat you with courtesy and humanity whatever your age when you return to us for advice or support. We will help you to be the driver of your life and not the passenger. We will point you in a positive direction and journey alongside you at your pace. We will trust and respect you. We will not forget about you. We will remain your supporters in whatever way we can, even when our formal relationship with you has ended.

Appendix 2: Children in Care and Care Leavers Delivery Plan 2018-19

Objective 1: Our Children and young people are respected and involved				
Strategy	What we will do	How we will achieve this	What else we need to do	How will we measure progress and achievement
<p>Ensure Looked After Children and care leavers are aware of their entitlements and know where to access information, how to seek advice and support and understand how to make a complaint.</p>	<ul style="list-style-type: none"> • Ensure staff have the knowledge, skills and commitment to engage and listen to looked after children and care leavers in effective ways appropriate to their age, ability and interests • Ensure we maximise the involvement of looked after children and care leavers in decisions made that affect them and provide feedback on any actions that are/are not taken as a result • Ensure We celebrate the achievements of all of our looked after children and care leavers 	<ul style="list-style-type: none"> • Looked after children are visited at least every 6 weeks (unless otherwise agreed as part of a permanence plan) and seen alone • Contact with care leavers is made at least every 8 weeks unless otherwise agreed • Looked after children and care leavers are active participants in their reviews and meet their Independent Reviewing Officer regularly and before each upcoming review • Providing a variety of ways for children and young people to express their views including independent advocacy and MOMO 	<ul style="list-style-type: none"> • Looked after children and care leavers engage in structured interviews at key points to evidence how they feel about the services they receive. Findings need to be systematically collected, collated and reported back to the Corporate Parenting Partnership to inform service development • We need to do more to ensure looked after children and care leavers maximise their take up of rights and entitlements through more accessible information available in a range of formats, including e-materials • Improve on evidencing how we have responded to a young person's views and the difference this has made 	<ul style="list-style-type: none"> • Children say they feel safe • Care Leavers say they feel supported in their own accommodation • There will be an increase in the of young people who use MOMO • All statutory visits are completed in timescale

<p>Ensure that young people who lack capacity or have communication barriers are supported as far as practicable</p>	<ul style="list-style-type: none"> • Undertake Mental Capacity Assessments on decision specific issues • Utilise necessary communication tools 	<ul style="list-style-type: none"> • Ensure Mental Capacity assessments are completed at the age of 16 where there is doubt about capacity and if necessary make an application to the Court Of Protection should they lack capacity to consent to their accommodation and care • Ensure key staff are trained to use PECS, Makaton and any other communication tool 	<ul style="list-style-type: none"> • We need to ensure that the views of the young people are at the heart of the LAC review process and sought in a timely and facilitative way 	<ul style="list-style-type: none"> • Staff will be confident that we have made every effort to ensure supported decision making and young people are involved as much as possible in decisions and make best interest decisions around their care • Applications will have been made to the Court of Protection to authorize any
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				Deprivation of Liberty
Have a strong and active children in care council (one voice) which is able to help influence and shape the delivery of services through direct access to Senior Officers of Children's services	<ul style="list-style-type: none"> Ensure the Council and its partners support One Voice and our wider children in care council activities and deliver against the commitments made in our care pledge and the care leavers charter 	<ul style="list-style-type: none"> Regular meetings of One Voice Attendance at One Voice by Senior officers Attendance at Overview and Scrutiny Committee by One Voice Members Looked after children and care leavers are regularly involved in the recruitment and interview process for children's social care staff 	<ul style="list-style-type: none"> Increase the membership of One Voice by ensuring all Looked after young people and carers are aware of the purpose and function of the group Continue to develop our approach to participation and engagement, raising awareness and building capacity across services so that we can hear and respond to the voices and views of children, young people and their 	<ul style="list-style-type: none"> More young people and care leavers will attend One voice on a regular basis Feedback from One Voice via regular meetings with Leadership Team. Twice yearly visits to Corporate Parenting OSC
Objective 2: Our placements are safe and meet the needs of our Children and Young People				
Strategy	What we will do	How will we achieve this	What else do we need to do	How will we measure progress and achievement
We will ensure that we have a range of placements available for our children and young people and that there will be minimum placement	<ul style="list-style-type: none"> Implement a sufficiency strategy to help deliver improved options for looked after children and care leavers 	<ul style="list-style-type: none"> Recruitment and retention of foster carers Maximise permanency for children in care so as to ensure that where 	<ul style="list-style-type: none"> Sufficiency is a significant challenge for us and we have recognized the need to develop our placement offer, ensuring fostering, 	<ul style="list-style-type: none"> There will be better placement choice for children and young people

<p>moves for any looked after child</p>	<ul style="list-style-type: none"> • Placement changes are kept to a minimum • Ensure children’s plans are robust, with a focus on permanence • Ensure looked after children and care leavers have a variety of ways to express any concerns they have about their placement and that these are acted on promptly 	<p>possible and appropriate, children in care are provided with stable placements via adoption or long term/permanent fostering</p> <ul style="list-style-type: none"> • Drift is avoided by having a robust permanency planning process • Work with commissioning to source any external placement requests • Social workers or managers visit placements, including residential before moving children to ensure the quality of the service they offer • Visit placements every 6 weeks (unless otherwise agreed as part of a permanence plan) • A clear escalation process is in place to ensure the IRO’s can bring concerns about a placement to the attention of a manager in a timely manner 	<p>residential, edge of care, leaving care and commissioned services drive the sufficiency agenda to improve the choice and range of placements</p>	<ul style="list-style-type: none"> • The number of staying Put arrangements will increase • New supported accommodation model will be implemented in July and reviewed every 6 months • Monthly multi disciplinary supported accommodation panel will monitor placements and outcomes of young people • Placement moves and length of time in placement will be reported monthly to the management team and annually to the Dfe • Monitor and report on the permanence plans for children
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<p>For those who are eligible for Adult care and support under the Care Act 2014 their foster placement will become a Shared Lives placement, in line with best practice guidance (if this is the wish of the young person)</p>	<p>Determine eligibility around the age of 17 to ensure young people and carers are clear about the pathway for support</p>	<ul style="list-style-type: none"> • Independent advocacy is available to all young people • Concerns and complaints are responded to promptly • Performance reports will demonstrate placement stability, permanence planning and highlight areas for improvement • Referring LAC young people with disabilities to the Transitions Team at the age of 16 to undertake assessment process 	<ul style="list-style-type: none"> • Ensure that every young person who is eligible for adult care and support completes a My Home Form to inform future housing needs to the Accommodation and Support Group (Adult social care) 	<p>and young people to ensure there is no drift and delay</p> <ul style="list-style-type: none"> •
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Objective 3: Positive Relationships and Identify

Strategy	What we will do	How will we achieve this	What else do we need to do	How will we measure progress and achievement
<p>Children and young people are supported to maintain, build and sustain positive relationships with others including their birth</p>	<ul style="list-style-type: none"> • Children and young people (where appropriate) will be enabled to sustain family relationships with parents, siblings 	<ul style="list-style-type: none"> • Where possible placements are local and friendships are encouraged • Extended family are always considered as 	<ul style="list-style-type: none"> • Increase numbers of local, available placements in order for young people to maintain links and retain relationships 	<ul style="list-style-type: none"> • All age appropriate LAC are involved in their reviews and feel able to contribute if they want to

<p>families, siblings, carers and their peers.</p> <p>Children and young people know who they are, why they are in care and understand their heritage. They feel valued by others and their individual needs are understood and met.</p>	<p>and extended family in a safe and positive way</p> <ul style="list-style-type: none"> • Children will understand why they are in care and life story work will be undertaken to support them and help them make sense of their need to be looked after • We will value all young people and their individual needs arising from race, culture, religion, sexual orientation or disability will be understood • Children and care leavers will have opportunities to participate in a range of activities, including arts and cultural events, sporting activities and drop in events to support with independence • Children and young people will have access to specialist support if required to ensure needs are met • Children and young people will be encouraged and have 	<p>part of the planning process and children are placed with extended family when it is safe to do so</p> <ul style="list-style-type: none"> • Wherever possible children and young people will remain in the same school or education provision • A permanency planning process ensures that early decisions are made and any drift is avoided • At the point of placement, a matching process is in place to try and minimise placement moves. Where there is not the same cultural match, support is given to ensure close cultural links are maintained • A variety of activities are provided throughout the year for looked after children and care leavers • MAX and leisure cards are provided to 	<ul style="list-style-type: none"> • Ensure young people placed at a distance have equivalent access to leisure and cultural activities as their peers • Continue to invest in life story work to reflect the story of the child and help them understand their experiences and background • Obtain as much information as possible from parents, birth family and friends at the earliest stage of Children's services involvement • Improve the offer from our partners in leisure, arts and culture to enable care leavers to access facilities in the same way as looked after children can 	<ul style="list-style-type: none"> • All LAC and Care Leavers feel listened to
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	opportunities to develop strong peer relationships	young people and foster carers to support visits to a range of cultural venues and leisure facilities		
Objective 4: Our Children and Young People will be supported to improve their physical, emotional health and wellbeing				
Strategy	What we will do	How will we achieve this	What else do we need to do	How will we measure progress and achievement
<p>Our children and young people will be encouraged and supported to choose healthy and active lifestyles. They will have access to health services/interventions as identified within their health plan including those associated with additional needs or disability</p> <p>LAC, birth parents, foster parents and birth siblings have access to free leisure facilities</p> <p>Young people who have Learning Disabilities will be referred to the</p>	<ul style="list-style-type: none"> • The health needs of children and young people will be assessed and reviewed in a timely way • Children and young people looked after will have access to health services/interventions as identified within their health plan those related to additional needs or disability. • Children and young people will be supported in all areas to choose healthy and active lifestyles. • Children and young people will have access to information on the risks of alcohol, substance misuse, 	<ul style="list-style-type: none"> • All young people coming into care will have a health assessment with a medical practitioner within 20 days. 100% of health plans and health needs, will be reviewed 6 monthly for children under 5 and annually for children age 5 – 18 • Children and young people in need of additional emotional support will have their needs assessed and will be directed to the appropriate service to achieve emotional 	<ul style="list-style-type: none"> • Health services (CCG & specialist commissioned health services) to work with public health to complete a Health Needs Assessment of the Gateshead LAC population. • Improve the health offer to care leavers • Health information is available for every child and young person to ensure continuous engagement with the health services they require, particularly in times when there is a change in placement or changing circumstances. 	<ul style="list-style-type: none"> • Health needs assessment completed by April 2019 and any gaps in service provision and priorities identified • Timely access to mainstream and health services which meet their needs. • Timeframes for health assessments will be performance managed to achieve the national standard. • Actions on health plans are monitored within the care plan review process to ensure health outcomes are achieved.

<p>Community Learning Disability Adult health team for assessment, with their consent, via the Health/Transitions panel</p>	<p>smoking, sexual health and sexual exploitation. Those identified at risk will be offered support through specialist services.</p> <ul style="list-style-type: none"> • Health outcome targets will be met for Looked After Children • Looked After Children are consulted on evaluation and improvement plans for health services they are engaged with. 	<p>stability, resilience and self confidence</p>	<ul style="list-style-type: none"> • Identify additional support/interventions which help a child/young person's emotional wellbeing and promote resilience and give opportunities to facilitate this e.g. emotional health and wellbeing apps sport, hobby, musical instrument, guides, cadets etc • Promote understanding of the link between positive physical health and emotional wellbeing with stability in school, placement and family. • Ensure that we are building the skills and experiences within our own professional networks to support children/young people's emotional stability and identify the times and challenges when more support is needed i.e. anniversaries. • Responsive access to a range of counselling and therapies, if necessary, according to 	<ul style="list-style-type: none"> • Report on the views of young people relating to how their health needs are being met and their view of the services and the interventions they receive. • Score card to be developed to capture the key elements relating to the health of Looked After Children to allow identification of areas requiring strengthening and to track improvements.
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			<p>needs to ensure proactive support as opposed to 'reactive treatment'</p> <ul style="list-style-type: none"> Local CAMHS services have a pathway for looked after children to ensure they have their emotional health needs assessed and met with outcomes measured and reported. 	
Objective 5: Our children and young people are encouraged to reach their educational, employment and training potential				
Strategy	What we will do	How we will achieve this	What else we need to do	How will we measure progress and achievement
<p>We will support all Looked after children to attend an appropriate education resource that helps them achieve their potential</p> <p>We will support and encourage all care leavers to attend education, employment or training</p> <p>We will have high aspirations for all of our looked after children and care leavers</p>	<ul style="list-style-type: none"> Ensure that all children have an effective, high quality personal education plan (PEP) Monitor children's attainment and progress and respond according to individual or group need. REALAC support Year 9 and Year 11 transitions to ensure pupils have the ambition to access college places. Post 16-18 REALAC prioritise student reviews in college to 	<ul style="list-style-type: none"> The Virtual Head has effective monitoring and tracking systems to evaluate progress and achievement and plans interventions to address emerging themes Children and young people's academic progress and attainment is analysed and monitored via their looked after reviews and PEP meetings 	<ul style="list-style-type: none"> Continue the focus on improving the offer to looked after children and care leavers aged 16-25 Support the development of work experience and shadowing opportunities within the council Offer work experience placements specific to the young person's interests through Pathways to Work (is this right) REALAC and Voiceworks Project for 	<ul style="list-style-type: none"> There will be an increase in the number of Apprenticeships offered to LAC and Care Leavers There will be a reduction in the number of NEET Pathway plans will demonstrate the ambitions we have for our care leavers

	<p>ensure they are on track on their courses.</p> <ul style="list-style-type: none"> • Raise awareness and train partners on the unique needs of looked after children and care leavers • Ensure the multi agency education, employment and training panel (EET) brings together expertise and resources to support looked after children and care leavers • Keep school moves to a minimum and where moves are necessary they are carefully planned and the most appropriate education provision is secured 	<ul style="list-style-type: none"> • Training including statutory support to designated teachers is delivered to a range of partners including foster carers and social workers on what works to support children's education • Looked after children and care leavers will have access to work experience opportunities and shadowing days both within the council and with partner agencies • Looked after children will be prioritised for careers advice, training and apprenticeships and career opportunities • The EET panel will monitor the progress and create opportunities for young people entering further education, 	<p>those with additional needs</p> <ul style="list-style-type: none"> • Work with all directorates within the council to improve the apprenticeship offer for looked after young people and care leavers • Ensure 100% of our looked after young people have a high quality PEP • Ensure looked after children and care leavers are aware of their entitlements to financial support to promote their education, training and employment aspirations 	<ul style="list-style-type: none"> • The Education, Employment and Training panel will monitor progress of young people • All Lac and care leavers will be able to articulate what financial support they will receive in relation to further and higher education
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<p>Support LAC young people with additional needs to acquire paid employment and secure enterprise and volunteering opportunities</p>	<p>Identify those young people who are capable and wish to achieve paid employment and ensure they develop their employability skills</p>	<p>employment and training</p> <p>Young people will be given the opportunity to participate in social enterprises, work placements and conduct vocational profiling</p> <p>Gateshead Access to Employment Service (GATES) provides a supported employment programme to people with learning, physical disabilities, mental health or autism who have eligible needs under the Care Act 2014</p>		<p>ASCOF 1E indicator in Adult social care achieves employment target of 12% of service users in paid employment</p> <p>A strengthened pathway from education to work, with reduced reliance on social care services for young people with disabilities</p>
<p>Objective 6: Our young people moving into adulthood will be supported to achieve their full potential in life</p>				
<p>Strategy</p>	<p>What we will do</p>	<p>How we will achieve this</p>	<p>What else do we need to do</p>	<p>How will we measure progress and achievement</p>
<p>Our young people are supported into adulthood in a seamless manner and provided with</p>	<ul style="list-style-type: none"> Young people enter adulthood in a planned way, with a home to live in, the skills to look after themselves and the ability to earn a living 	<ul style="list-style-type: none"> A personal advisor will be allocated to eligible young people at the age of 16 who will work with the allocated social 	<ul style="list-style-type: none"> Begin preparation for independence at an earlier stage and for this to be built upon well before plans for moving are finalised 	<ul style="list-style-type: none"> Care leavers will all be provided with information booklet on support and entitlements prior to leaving care

<p>progressive and ongoing interventions</p> <p>We want our care leavers to be confident and be able to access support and ensure that young people are engaged in education, employment and training and have the opportunity to live successful adult lives</p>	<ul style="list-style-type: none"> • Ensure entitlements are made clear to care leavers 	<p>worker until the young person is 18. The personal advisor will remain involved until the young person reaches the age of 21 and continue to offer support until the age of 25</p> <ul style="list-style-type: none"> • The pathway plan will give clear expectations and identify people responsible to help young people prepare for adulthood and have the life skills to achieve a smooth transition into independence • Ensure all necessary information has been obtained for young people in a timely way e.g. birth certificate, NI number, bank account and health passport • Increase the accommodation offer and options for young people leaving care • Young people receive a health passport when they leave care. 	<ul style="list-style-type: none"> • Improve the quality of our pathway planning through having a quality assurance auditing process • Increase the contribution from our young people into their planning • Develop the multi-agency care leavers panel to monitor the progress of care leavers accommodation plans and identify any themes and gaps with the intention of improving service delivery and strengthening multi agency working • Improve the range and quality of placement provision for young people leaving care, including options for supported and semi-supported accommodation 	<ul style="list-style-type: none"> • Care leavers will participate in developing their pathway plans and pathway plan reviews • Supported accommodation model will be implemented and reviewed to ensure adequate and appropriate accommodation and support is available for all care leavers
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<p>Provide opportunities for a seamless transition for young children who have eligible needs under the Care Act 2014 to transfer to adult services and either remain with foster carers under a Shared Lives arrangement or have a clear pathway to</p>	<ul style="list-style-type: none"> • Utilise the Transitions team to support the planning for young people from the age of 16, who may be eligible for support from adult services • Transitions team to determine eligibility by the age of 17 to establish lead roles and responsibility • Transitions team assessment to 	<p>This is a comprehensive summary of their health history and identifies support and services for adulthood; it includes current registration i.e. with GP and additional health service details. Care leavers also continue to have access to the Platform substance misuse service with a planned transition to adult substance misuse services at an appropriate point if required.</p> <p>Complete an Assessment under the Care Act 2014 Share findings and work together with LAC and carers to agree a post 18 pathway</p>		
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alternative accommodation	determine accommodation pathway and ensure smooth transition from children to adult services			
Objective 7: Improve the role of the Corporate Parent				
Strategy	What we will do	How will we achieve this	What else do we need to do	How will we measure progress and achievement
Continue to improve outcomes for Looked After Children and care leavers via the further implementation of a corporate parenting and partnership approach to the development and delivery of services	<ul style="list-style-type: none"> • Ensure that at the core of everything we do is our understanding of our responsibility as a Corporate Parent • Elected members and council officers will take a lead role in raising awareness of the needs of children in care and care leavers with all council departments and partner agencies • Promote the role of elected members as corporate parents and ensure that appropriate mechanisms are in place by the Council to enable all members to fulfil their statutory responsibilities in this area 	<ul style="list-style-type: none"> • By attendance at the Quarterly meetings of the Overview and scrutiny committee • Training to be provided for elected members • Listen to what our young people are saying and use what we learn to improve services and outcomes • Regular updates to Senior officers within the council • Ensure senior officers act on their pledges 	<ul style="list-style-type: none"> • There needs to be an increase in the sense of corporate responsibility across all statutory agencies in the support for our looked after children and care leavers • Continue to develop the multi-agency approach to corporate parenting to become more effective in the delivery of the Corporate parenting plan • Raise awareness of all new staff employed by Gateshead with regard to their corporate parenting responsibilities 	<ul style="list-style-type: none"> • Evaluation from corporate parenting training events. • Minutes of Overview and Scrutiny Committees • Feedback from children in care and care leavers

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DRAFT

Gateshead Mini System Peer Review

Friday 11th May 2018

Are services well led? - shared clear vision, credible strategy, governance, workforce, commissioning

- People have described a single direction and therefore a shared vision and understanding across health and social care
- There could be a clearer understanding of where system leadership sits
- Strong, well chaired H&WBB and has potential to be stronger in it's role in system leadership
- Good opportunity to use the refresh of the H&WB strategy in confirming the vision and direction
- Growing confidence in system leaders and significant improvement in partnership working over the last 12 months

Maintaining people in their usual place of residence - Do services work together to keep people well and maintain them in their usual place of residence?

Page 61

- Huge commitment from frontline staff
- Range of preventative services with opportunities for better coordination
- Providers would welcome clarity on long term commitment to preventative services
- Service users reported some confusion in navigating the system
- Some evidence of really good outcomes

Crisis - Do services work together to manage people effectively at a time of crisis?

- There have been some good examples of dealing with those in crisis
- CHC involvement causes some confusion and difficulties
- We would support your understanding that sustainability in home care and care home markets is one of the biggest challenges
- Learning from Vanguard project

Return - Do services work together to return people to their usual place of residence, or a new place that meets their needs?

- Strong evidence that the system is committed to this and some positive feedback from service users
- Shortage of home care is impacting on patient flow
- Communication issues relating to discharge

Key Messages

Key Messages

- There could be a clearer understanding of where system leadership sits
- Frontline staff indicated that IT systems will be crucial going forward on integration
- Domiciliary care - rural issues – is an issue that we are aware of and seeking to address
- They were impressed that a care worker had taken the initiative to write to Norman Lamb MP to raise issues
- Market Position Statement – procurement/commissioning. We have a long term ambition and it will be important to communicate that ambition

Key Messages

- While there was reference to the financial gap/funding pressures of individual organisations within the local system, there was less reference to the financial picture/pressures for the Gateshead system as a whole
- Providers had a good relationship with the LA which was transparent and genuine. The level of joint commitment was visible
- While much progress has been made at a provider level, there is no room for complacency and we need to press on
- Noted that we are seeking to articulate joint outcomes for the local system to deliver and to move more towards transformational commissioning (rather than transactional)

Key Messages

- It was clear that we are proud of the success of the care homes vanguard work and shown that we are pro-active in building upon that
- We have shown a pragmatic approach – getting on with our own journey whilst things around us (e.g. at CNE level) still remain unclear/uncertain
- It was clear that the person is at the centre of our approach and that local partners share a common purpose
- The passion and commitment of front line staff was very clear from the session they had with staff

Key Messages

- Service users reported that the care they received was excellent, though there was a frustration around information available at the outset – leaflets etc. Also, some confusion about the ‘offer’ in some cases (which mirrored the findings from our own survey)
- Partners seem to understand the position of other partners, tough times are bringing people together
- Encouraged us to be ‘brave’ and to continue on the direction of travel that we have set for ourselves
- In conclusion, very impressed with what they heard during the day and will want to learn from us as well



HEALTH AND WELLBEING BOARD

15 June 2018

TITLE OF REPORT: Performance Report for the Health & Care System

Purpose of the Report

1. This paper provides an update on performance within health and social care to enable the Health and Wellbeing Board to gain an overview of the current system and to provide appropriate scrutiny.

Background

2. An initial Performance Report was considered by the Board on 17 July 2015. That report proposed a suite of indicators to form the basis for a Performance Management Framework for consideration by the Health and Wellbeing Board on a regular basis.
3. The report focused on metrics and did not consider other aspects such as financial performance or monitoring of action plans as these are addressed through other processes. The Health and Wellbeing Board considered the suggested indicators to be appropriate and a reporting schedule was agreed.

Update

4. Because of the diverse range of indicators included in the Framework, the frequency with which metrics are updated varies. The latest available data for each indicator is reported.
5. Agency performance leads have highlighted metrics that are worth further consideration by the Board. This could be because they represent a cross cutting issue or have been identified as an area of significant improvement or key risk.

Overview of Current performance

6. Tables providing fuller details of performance are provided as appendix 1 to 7. Indicators highlighted for this report are:

Gateshead Local Authority Public Health Strategic Indicators (appendix 1)

7. For most of the Public Health Strategic Indicators, Gateshead is currently considered to be significantly worse than the England averages. However, some improvements have been achieved.
8. Stabilising the rate of Hospital Admissions, per 100,000 for Alcohol related harm (LW13) has improved from 1015 per 100,000 in 2015/16 to 990 per 100,000 in 2016/17. Despite this improvement Gateshead is still significantly worse than the England and North-East rates. This is now confirmed as the final published rate for 2016/17, there are currently no 2017/18 figures available.
9. The Gap in employment rate between those with a learning disability and the overall employment rate (LW15) has improved from 62.9% in 2015/16 to 62.3% in 2016/17. As a result of this decrease Gateshead has continued to be considered significantly better than the England average of 68.7% and not significantly different to the North-East average of 64.5%.
10. The Gap in employment rate between those in contact with a secondary Mental health service and the overall employment rate (LW17) has improved from 69.2% in 2015/16 to 65.8% in 2016/17. As a result of this improvement, Gateshead is considered statistically similar to the England average of 67.4% (and is now actually lower than the England rate), however we are still significantly higher than the North-East average of 61.8% and have the third highest rate in the North East.
11. Hospital admissions for self-harm (LW16), as a rate per 100,000 for 10-24-year olds has decreased from 544.9 2015/16 to 422.7 in 2016/17. Gateshead is still considered to be significantly worse than both the England average of 404.6 per 100,000 and the North-East average of 425.3 per 100,000. This rate equates to 147 admissions for 2016/17 compared to 189 for 2015/16, it should be noted that this relates to episodes of admission and not individual persons.
12. Healthy Life expectancy at birth (Male & Female) have both improved since the previous report. LW20 (Male) has increased from 57.0 years in 2013-15 to 59.1 years in 2014-16. LW20 is still significantly worse than the England rate of 63.3 years but is not significantly different to the North-East rate of 59.7 years. LW21 (Female) has increased from 59.1 years in 2013-15 to 60.6 years 2014-16, this is also still significantly worse than the England rate (63.9 years) and not significantly different to the North-East rate of 60.6 years. Both indicators have seen the largest increases in Healthy Life expectancy for Gateshead in the last 6 periods of data.
13. The Gap in life expectancy at birth between Gateshead and England for females (LW23) has worsened from -1.7 years for the 2013-15 period to -1.9 years for the 2014-16 period. For the same period LW22 (Males) has also worsened from -1.8 years in 2013-15 to -2.0 in 2014-16.

14. LW24, Reduce the inequalities in life expectancy across Gateshead (a Slope Index of Inequality in Years for males) has improved going from 9.9 years for the 2013-15 period to 9.6 years for the 2014-16 period. Due to the calculation method for this indicator it is not directly comparable with either the North East or England rates. However, when compared to the values from the 16 comparable CIPFA local authorities Gateshead has the 5th lowest Slope Index of Inequality.
15. LW25, Reduce the inequalities in life expectancy across Gateshead (a Slope Index of Inequality in Years for females) has worsened from the previous period. This has increased from 8.7 years in 2013-15 to 8.8 years in 2014-16. Due to the calculation methods for this indicator it is not directly comparable with either the North East or England rates. When compared to the 16 CIPFA local authorities Gateshead has the 5th highest SII in years.
16. Reducing child poverty rates for those under 20 (PG20) has improved from 22.2% in 2014 to 19.4% in 2015. Gateshead is still significantly worse than the England rate of 16.6% but is considered significantly better than the North-East rate of 21.5% and we currently have the 4th lowest rate for child poverty under 20 when compared with the 16 other CIPFA LA's. (Please note 2015 is the latest published data)
17. Indicators LL4, LW2, LW4, LW18, and LW19 have not changed since the previous report. These will be updated as and when the new data sets are released.

Gateshead Better Care Fund (appendix 2)

18. Non Elective admissions year to date to Quarter 3 are circa 8.3% below planned levels. Combined with the latest January and February data, performance is expected to be maintained at circa 7% below target levels cumulatively to the end of Quarter 4.
19. During April 2017 to March 2018, there were 279 permanent admissions of older people to residential or nursing care (719.8 per 100k population) compared to a plan of 370 admissions (950.5 per 100k population) for all of 2017/18. Performance is below target and we have seen fewer admissions compared to the same period in 2016/17 (328 admissions).
20. 80.9% of older people were still at home 91 days after hospital discharge who received a reablement service. The value is based on people discharged from hospital during October to December 2017 and followed up 91 days later. Performance has remained the same compared to the same time last year (80.8%) but has not achieved the planned target of 85.6%.
21. The average number of delays per day, per 100,000 population for March 2018 is 6.59, for delays attributable to Social care and NHS. This works out at 11 people on average delayed per day. Gateshead has achieved the stretching target of 8.2 per 100k (13 people) and has shown a significant improvement compared to the same point last year, where the equivalent rate was 9.6 per 100k.
 - a. 3.9 per 100k population were delayed on average per day (6 people) where the NHS was attributable, which is better than the target of 5.5. This is also an improved position compared to the same time last year (4.2 per 100k).
 - b. The average number of social care delays per day for March 2018 was 2.7 per 100k (4 people). This is just outside of the target of 2.6 per 100k population but performance shows significant improvement compared to the same time last year (5.4 per 100k).
22. Gateshead have significantly reduced the number of delayed days throughout the 2017/18 period compared to the previous year (3949 compared to 6381) and have achieved the Q4 BCF planned trajectory. There were 926 delayed days in Q4 compared to a Q4 trajectory of 1016. Q4 performance represents a significant reduction from Q1 when there were 1376 delayed days. Q3 seen the best performance during the year, with only 568 delayed days.
23. DTOC expectations for the 2018/19 period have been set to very challenging level, with further improvements upon our already improved performance required. Targets have been set at a national level by NHS England and are based on 2017/18 Q3 performance (Gateshead's best performing quarter). The overall target is 6.2 per 100k, with the NHS target set at 4.4 and Social Care set at 1.8 per 100k.

CCG Assurance - CCG Improvement and Assessment Framework (appendix 3)

24. NHS England has introduced a new Improvement and Assessment Framework for CCGs (CCG IAF) from 2016/17 onwards. The *Five Year Forward View*, and the Sustainability and Transformation Plans (STPs) for each area, have the “triple aim”: (i) improving the health and wellbeing of the whole population; (ii) better quality for all patients; and (iii) better value in a financially sustainable system. The new framework aligns key objectives and priorities and has been designed to supply indicators for adoption in STPs as markers of success.
25. The Framework covers indicators in 4 domains: Better Health, Better Care, Sustainability and Leadership.
26. The Forward View and the planning guidance set out national ambitions for transformation in a number of vital clinical priorities such as mental health, dementia, learning disabilities, cancer, maternity and diabetes. CCGs are to be given annual “Ofsted style” ratings for each of these areas using a selection of indicators taken from the CCG IAF.
27. Ratings have been published for the dementia, diabetes, mental health and cancer clinical priorities, and Newcastle Gateshead CCG has maintained its “Outstanding” rating for dementia and Diabetes and improved to a “good” rating for both cancer and mental health, compared to the previous assessment. These ratings compare favourably to other local CCGs in the area. The indicators highlighted in red within appendix 3 are where the CCG falls below the national target. Appendix 3 compares the CCG (blue dot) to the national (red line). An action plan has been developed for all areas detailing, where appropriate, more up to date actions and data. The ratings for learning disabilities, diabetes and maternity have not yet been published in 2017/18.
28. Despite continued good quality services and leadership, the CCG has been awarded an overall rating of “Needs Improvement”, in 2016/17, a rating largely due to the financial performance where a surplus of £10.7m was delivered against an expectation of £15.2m. the publication of the 2017/18 overall rating is expected in July 2018

Newcastle Gateshead CCG Quality Premium (appendix 4)

29. The Newcastle Gateshead CCG quality premium (QP) is intended to reward CCGs for improvements in the quality of the services that they commission and for associated improvements in health outcomes and reductions in inequalities in access and in health outcomes.

30. The 2017/18 quality premium is based on a set of measures that cover a combination of national and local priorities as detailed in appendix 4. Areas which are currently at risk are as follows and appropriate actions are being implemented:

- IAPT Moving to recovery for BAME and IAPT access for 65+
- Gram negative Bloodstream infections reduction

NHS Constitution (appendix 5)

31. The NHS constitution establishes the principles and values of the NHS and sets out the rights for patients and the public including the rights patients have to access services.

Key constitution indicators have been outlined in appendix 5 and the risks at the end of 2017/18 Feb were as follows:

- Diagnostics has been a national pressure and from Q2 2017/18 onwards we have experienced pressures at Newcastle Upon Tyne Hospitals (NUTH) NUH FT (MRI and radiology). National workforce pressures are being experienced at NUTH in MRI and Radiology which have put CCG performance at risk. Recovery actions are in place.
- A&E performance was marginally below the 95% standard at Gateshead Health NHS FT for March year to date at 94%. A&E performance was marginally below the 95% standard at Newcastle upon Tyne Hospitals at 93.9% in the year to March 2018. The 95% standard was met for Q2 at both Trusts however moving into the winter period, pressures were being experienced and the A&E improvement plans continue to be implemented at both Trusts, along with the plans to reduce Delayed Transfers of Care (DToC).

Children's Strategic Outcome Indicators (appendix 6)

32. It is only possible to report updated performance across 5 of the 8 outcome indicators reported in appendix 6, however the information is provisional at this time pending submission of annual government returns. Indicators PG21 and PG23 are based on academic year with the latest available values being 2016/17, which were reported in the previous update. Indicator PG24 is no longer reported. Out of the 5 updated indicators 2 have shown an improvement on the same time last year.
33. The numbers of referrals received by Children Social Care has decreased compared to the previous year, but remains slightly higher than the target of 450 per 10k population. The numbers of children subject to a child protection plan and who are Looked After remain higher than national averages, however are more in line with statistical and regional neighbours.
34. At the end of March 2018, 295 children were the subject of a child protection plan (a rate of 73.8 per 10k population) - a reduction from 313 at the same time last year. While the number of children subject to a child protection plan has reduced the number of LAC has increased. At the end of March 2018 there were 391 looked after children in Gateshead (a rate of 97.8 per 10k), an increase from 375 last year. This is higher than the England (62), North East (92) and Statistical Neighbour (89.2) rates per 10,000.
35. The percentage of children who experienced becoming the subject of a second or subsequent child protection plan increased from 16.4% last year to 18.4%. This is outside of the target of less than or equal to 15%. The placement stability of LAC being in the same placement for 2 or more years was 82.5% has seen a slight reduction compared to the same time last year, however remains well above the current target of 78%.

Adult Social Care Strategic Outcome Indicators (appendix 7)

36. The adult social care indicators are provisional pending submission of annual government returns at the time of writing and have 4 out of 9 adult social care indicators have shown improvement compared to the same time last year. Please also see the Better Care Fund section which contains further ASC Outcome Indicators.
37. The proportion of Clients receiving self- directed support has achieved the 2017/18 target of 95%, with 95.3% and is an improvement on same time last year. The proportion of carers receiving self-directed support, however, has shown a slight decrease compared to the previous year.
38. The proportion of clients in receipt of Direct Payments has improved from 21% as at the end of March 2017 to 22.2%, and has also achieved the target of 22% for the period. For carers, 32.1% have received direct payments, which is an improvement in performance compared to 2016/17 (24.2%) and the yearend target of 25% has been achieved.
39. The proportion of adults with learning disabilities in paid employment has increased (10.8%) compared to the same time last year (9.1%). Whilst this is an improvement in performance, the challenging target of 12% has not been achieved. The proportion of adults with learning disabilities living in their own home (64.8%) is lower than the yearend target of 76% and lower than the same time in 2016/17 (73.3%).
40. There were 13.9 permanent admissions for people aged 18 to 64 per 100,000 population during April to March 2017 (17 people). This is significantly higher than the 6.5 reported in 2016/17 (8 people). The sharp increase can be attributed to several individuals recorded as Short-Term Care but should in fact have been recorded as permanent. Measures have been put in place to ensure that this does not happen in the future.
41. The latest data available for adults in touch with secondary mental health services in paid employment (ASCOF 1F) and living independently (ASCOF 1H) covers the period April to February 2017/18. The proportion in paid employment is 5.4% which is lower than February 2017 (6.5%), and lower than the target of 6.7%. For those in settled accommodation performance of 48.6% is also lower than February 2017 (49%), and is currently below target (50.0%).

Recommendations

42. The Health and Wellbeing Board is asked to consider current performance and comment on any amendments required for future reports.

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Appendix 1: Gateshead Local Authority Public Health Strategic Indicators (Compared to England Value)

Significantly better than the England Average ●
 Not significantly different to the England Average ●
 Significantly worse than the England Average ●
 Significance is not calculated for this ○
 North East Average ◆

Indicator	Data Period	Count	Gateshead Value	N/E Average	England Average	England Worst	England Range	England Best
LL4. Decrease the Percentage of People who are Dissatisfied with Life (%)	2016/17	-	4.9%	5.1%	4.5%	8.5%		2.8%
LW2. Prevention of ill Health: Prenatal Outcomes (% of mothers smoking at time of delivery)	2016/17	312	14.5%	16.1%	10.7%	28.1%		2.3%
LW4. Reduce Excess Weight in 4-5 and 10-11 year olds (4-5 yo) (%)	2016/17	435	22.0%	24.5%	22.6%	28.2%		15.0%
LW4. Reduce Excess Weight in 4-5 and 10-11 year olds (10-11 yo) (%)	2016/17	727	38.5%	37.3%	34.2%	43.9%		25.3%
LW13. Stabilise the Rate of Hospital Admissions, per 100,000 for Alcohol Related Harm	2016/17	1966	990	866	636	1151		388
LW15. Gap in the employment rate between those with a learning disability and the overall employment rate (% point)	2016/17	-	62.3 (% points)	64.5 (% points)	68.7 (% points)	81.3 (% points)		48.2 (% points)
LW16. Equalities Objective - Hospital Admissions for self harm, rate per 100,000 (10-24 yo)	2016/17	147	422.7		404.6	603.3		275.8
LW17. Gap in employment rate for those in contact with secondary mental health services and the overall employment rate (% point)	2016/17	-	65.8 (% points)	61.8 (% points)	67.4 (% points)	80.0 (% points)		53.4 (% points)
LW18. Excess under 75 mortality rate in adults with serious mental illness (Indirectly Standardised Ratio)	2016/17	-	397.3	461.2	370.0	570.4		164.8
LW19. Reduce Mortality From Causes Considered Preventable (Rate per 100,000)	2014-16	1386	239.1	228.3	182.8	330.0		129.7
LW20. Healthy Life Expectancy at Birth (Male) (Years)	2014-16	-	59.1 years	59.7 years	63.3 years	54.3 years		69.9 years
LW21. Healthy Life Expectancy at Birth (Female) (Years)	2014-16	-	60.6 years	60.6 years	63.9 years	54.6 years		71.1 years
(LW22. Gap in Life Expectancy at Birth Between each Local Authority and England as a whole (Male) (Years)	2014-16	-	-2.0 years	-1.7 years	0.0	-5.3 years		4.1 years
LW23. Gap in Life Expectancy at Birth Between each Local Authority and England as a whole (Female) (Years)	2014-16	-	-1.9 years	-1.6 years	0.0	-3.7 years		3.6 years
LW24 Health Inequalities - Reduce the Inequalities in Life Expectancy across Gateshead (Male) (SII Years)	2014-16	-	9.6 years	-	-	14.9 years		3.2 years
LW25 Health Inequalities - Reduce the Inequalities in Life Expectancy across Gateshead (Female) (SII Years)	2014-16	-	8.8 years	-	-	13.9 years		1.1 years
PG20. Reduce the % of children in low income families (formerly children in poverty) (2013)	2015	7720	19.4%	21.5%	16.6%	30.6%		6.0%

Appendix 2: Gateshead Better Care Fund National Metrics

Indicator	CCG / Provider / LA	Latest Data Period	Month Actual	Actual to Date	Target to Date	2017/18 Target	Risk to Year End
Non-Elective Admissions (average per month)	Gateshead Local Authority	2017/18 Q3	N/A	15655	17064	22561	No risk
Permanent admissions of older people (65+) to residential and nursing care homes, per 100,000 population	Gateshead Local Authority	2017/18 Q4	N/A	719.8	954.6	954.6	No risk
Proportion of older people (65+) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services	Gateshead Local Authority	2017/18 Q4	N/A	80.9%	85.6%	85.6%	Risk
Delayed transfers of care (delayed days) from hospital per 100,000 population (average per month) NHS and Social Care Attributed delays	Gateshead Local Authority	2017/18 Q4	N/A	926 days (Q4)	8.2 per 100k	6.6 / 1014 days (Q4)	No risk

Appendix 3: Improvement and Assessment Framework Clinical Priorities Ratings assessment 2017/18

Dementia	Outstanding	126a	Dementia diagnosis rate	76.0% ¹ 74.4% 73.5% ² ↑	↑ 2.5% 2015 08 2017 03	
		126b	Dementia post diagnostic support	80.7% ¹ 80.7% 80.7% ² ↓	↑ 0.0% 2014-15 2015-16	
Cancer	Good	122a	Cancers diagnosed at early stage	52.3% ¹ 49.4% 39.5% ² ↓	↑ 12.8% 2012 2015	
		122b	Cancer 62 days of referral to treatment (based on 16-17 Q1 to Q4)	90.5% ¹ 86.6% 80.5% ² ↓	↑ 10.0% 13-14 Q1 16-17 Q4	
		122c	One-year survival from all cancers	69.1% ¹ 69.1% 60.6% ² ↑	↑ 8.5% 1999 2014	
		122d	Cancer patient experience	8.9 ¹ 8.9 8.9 ² ○	↑ 0.0% 2015 2016	
Mental Health	Good	123a	IAPT recovery rate	52.7% ¹ 49.8% 45.5% ² ↑	↑ 7.2% 2015 03 2017 01	
		123b	EIP 2 week referral	75.1% ¹ 74.3% 70.0% ² ↓	↑ 5.1% 2016 11 2017 03	
		123c	MH - CYP mental health	95.0% ¹ 95.0% 40.0% ² ↑	↑ No calculation possible due to lack of z-scores 55.0% 16-17 Q1 16-17 Q4	
		123d	MH - Crisis care and liaison	85.0% ¹ 85.0% 60.0% ² ↑	↑ No calculation possible due to lack of z-scores 25.0% 16-17 Q1 16-17 Q4	
123e	MH - OAP	100% ¹ 100% 100% ² ↔	↑ No calculation possible due to lack of z-scores 0.0% 16-17 Q1 16-17 Q4			

Appendix 4: Newcastle Gateshead CCG Quality Premium 2017/18

Indicator	CCG / Provider / LA	Latest Data Period	Month Actual	2017/18 Target	Risk to Year End
Cancers diagnosed at early stage	NHS Newcastle Gateshead CCG	2015	49.4%	4% improvement on 2016	National data not yet available
Overall experience of making a GP appointment	NHS Newcastle Gateshead CCG	July 2017	74.4%	77.4%	National data not yet available
Continuing Health Care (80% of Cases with a positive checklists where the eligibility decision is made by the CCG within 28 days)	NHS Newcastle Gateshead CCG	Q4 2017	84.7%	80%	No Risk
IAPT Access for older people and Recovery rate for BME Community	NHS Newcastle Gateshead CCG	Sep 2017	No improvement	Improvement on 2016/17 level	Risk
Bloodstream infections reduction	NHS Newcastle Gateshead CCG	March 2018	486 (Ecoli infections)	376 (Ecoli infections)	Risk
65% applicable patients go to a stroke unit within 4 hours	NHS Newcastle Gateshead CCG	April 17 to July 17	77.1%	65%	No Risk

Appendix 5: NHS Constitution

Indicator	CCG / Provider / LA	Latest Data Period	Performance	2017/18 Target	Risk to Year End
18 Week Referral to Treatment (Incomplete Pathways)	Newcastle Gateshead CCG	Feb-18	93.9%	92%	No current risk
RTT 52 weeks for treatment	Newcastle Gateshead CCG	Feb-18	0	0	No current risk
A&E 4 Hour Waits	NuTH	March -18	93.9% (Mar YTD)	95%	Risk
	GHNT	March -18	94.6% (Mar YTD)	95%	Risk
62 days Referral to treatment for suspected Cancer	Newcastle Gateshead CCG	March 18	86.6%	85.0%	No current risk
Ambulance response times	<ul style="list-style-type: none"> July 2017 – New set of NHSE performance standards for the English ambulance services through the national Ambulance Response Programme (ARP). No national reporting of Ambulance response times until April 2018. 				
< 6 weeks for the 15 diagnostics tests	Newcastle Gateshead CCG	March 18	98.9%	99%	Risk
	GHNT	March-18	99.5%	99%	No current risk
	NuTH	March-18	98%	99%	Risk

Appendix 6: Children's Strategic Outcome Indicators

Indicator Description	Current month previous year (Apr-Mar 2016/17)	Performance Apr-Mar 2017/18	Year End Target	Traffic Light	Trend (Compared to same period last year)
PG21 - Readiness for school: Children achieving a good level of development at age 5 (Early Year Foundation Stage scores) – New Definition	69.9%	Not available	Awaiting government guidance on future of this indicator		-
PG23 - Increase the % of children attaining the expected standard at the end of KS2 (<i>New - used from summer 2016</i>)	68% (academic year 2016/17)	Not available	85% (2020 target)	-	-
PG24 - Achievement of 5 or more A*- C grades at GCSE or equivalent including English and Maths (<i>final year was 2016 with 2017 first year of the new 1-9 grade</i>)	N/A	N/A	This indicator is no longer reported or produced		-
Rate of children's services referrals per 10,000 (cumulative indicator)	462.3	455.8	450	Not met target	Improved
LW6 - Number of Children with a Child Protection Plan per 10,000	78.3 (313 CYP)	73.8 (295 CYP)	58 per 10,000	Not Met Target	Improved
Children who are subject to a second or subsequent child protection plan	16.4%	18.4%	Less than 15%	Not Met Target	Decreased
Number of looked after children per 10,000	93.3 (375 CYP)	97.8 (391 CYP)	Less than 84.9 per 10,000	Not Met Target	Decreased
% of Looked After Children living continuously in the same placement for 2 years	88.8%	82.5%	78%	Met Target	Decreased

Appendix 7: Adult Social Care Strategic Outcome Indicators

Indicator Description	Current month previous year (Apr-Mar 2016/17)	Performance Apr-Mar 2017/18	Year End Target	Traffic Light	Trend (Compared to same period last year)
ASCOF 1C (part 1A) Proportion of Clients receiving self-directed support	91.9%	95.3%	95.0%	Met target	Improved
ASCOF 1C (part 1B) Carers receiving self-directed support	87.4%	86.7%	95.0%	Not Met Target	Decreased
ASCOF 1C (part 2A) Proportion of clients receiving direct payments	21.0%	22.2%	22.0%	Met target	Improved
ASCOF 1C (part 2B) Proportion of carers receiving direct payments	24.2%	32.1%	25.0%	Met target	Improved
ASCOF 1E Proportion of adults with learning disabilities in paid employment	9.5%	10.8%	12%	Not Met Target	Improved
ASCOF 1F Proportion of adults in contact with secondary mental health services in paid employment	6.5% (Feb 2017)	5.4% (Feb 2018)	6.7%	Not Met Target	Decreased
ASCOF 1G Proportion of adults with learning disabilities living in their own home or family	73.3%	64.8%	76%	Not Met Target	Decreased
ASCOF 1H Proportion of adults in contact with secondary mental health services living independently, with or without support	49% (Feb 2017)	48.6% (Feb 2018)	50%	Not Met Target	Decreased
ASCOF 2A(i) 18-64 Permanent admissions to residential & nursing care homes (rate per 100,000 population)	6.5 per 100k	13.9 per 100k	4.1	Not Met Target	Decreased

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