

Birmingham Children and Young People's Plan

2008 – 2011

Appendices

April 2008



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Appendix 1: needs assessment

Our original Children and Young People's plan committed partners to in-depth analysis of need to help us secure better outcomes. Since that plan, and as part of our Brighter Futures outcome-based planning developments, we have significantly enhanced our needs assessment through a rigorous process of analysis.

This has involved a detailed analysis of needs assessments carried out across partners and the findings of two major epidemiological surveys carried out across the city. The first survey was with about 500 families with children aged 0-6. This was a household survey with parents using a self-completion questionnaire. It used, amongst other instruments, the Preschool Children Quality of Life (TAPQOL) questionnaire and the Strengths and Difficulties Questionnaire (SDQ). This took place in January and February 2007.

The other was a survey involving nearly 6,000 7-18 year olds in schools. This took place between January and March 2007. It took the form of a self-completion questionnaire, again, using a variety of instruments including KIDSCREEN, SDQ and the Personal Lifestyles Questionnaire (PLQ).

The scale of these surveys – which have not been undertaken elsewhere - is unique and the quality of data from them robust.

We intend to use both surveys annually so that we can measure the impact of our work.

This needs analysis has also informed the development of the city's Joint Strategic Needs Assessment as required by the Local Government and Health Act 2007.

The Birmingham context

Birmingham is a richly diverse city of a million people. About 30% are from Black and minority ethnic communities. Indeed, Birmingham ranks second in the country, after London, in terms of the diversity of its population. It is also a city with areas of significant deprivation.

People from Black and minority ethnic groups are not evenly spread across the city. For example, 64% of Ladywood's population is from BME groups but only 6% of Sutton Coldfield's. In terms of people born outside the UK:

- Sparkbrook, Handsworth and Ladywood are amongst the areas with the highest proportions nationally of people born outside the UK. In both Handsworth and Sparkbrook, more than a third of residents were born overseas.
- Sparkbrook and Ladywood are in the top ten areas nationally for people born in Bangladesh.
- Handsworth and Ladywood are in the top ten areas for people born in the Caribbean.
- Edgbaston is in the top ten for people born in China.
- Sparkbrook, Ladywood, Fox Hollies and Hodge Hill are in the top ten for people born in Pakistan.
- Handsworth is in the top ten for people born in India.

About 70% of Birmingham's BME population lives in the ten most deprived wards of the city. Inequality is socially patterned according to ethnicity, with people from particular BME groups experiencing persistent disadvantage, for example in relation to employment rates and health.

Birmingham has the youngest population of any European city. According to the latest 2006 population estimates over 28% (285,000) are under 19 and over 37% (373,000) are under 25. By 2029 there are expected to be nearly 300,000 under 19 year olds and 383,000 under 25 year olds. More than half the BME population in Birmingham is between 0 and 24.

At the time of the 2001 Census:

- 30% of those under 15 were in lone parent families.
- 22% of those under 15 were in houses without central heating.
- 30% of those under 15 were in households in which no adults were in work.

Of these children and young people, about 2200 are looked after children and young people, of whom over 100 are unaccompanied asylum seeking minors. Over 8000 are children in need. There are about 1000 children and young people on the Child Protection Register. Even on a conservative estimate, over 90,000 of our children and young people are likely to be vulnerable. Our school-age population is about 180,000.

By the term vulnerable children and young people we mean, here and elsewhere in the plan, those children and young people whose life chances will be jeopardised unless action is taken to meet their needs better, and reduce the risk of social exclusion. Most children and young people will not be 'vulnerable' throughout their whole childhoods, but will go through periods of vulnerability. Children in need, for example, are a subset of this wider group, which also includes children and young people with statements of special educational need. It also includes children and young people who are underachieving at school and those who need other support such as mentoring services.

In this sense, Black Caribbean pupils and white boys eligible for free school meals, to name but two groups, are vulnerable as a group. However, this should not be taken to imply that individual children and young people within such groups do not or cannot achieve positive outcomes and fulfil their potential. Other particularly vulnerable groups include refugees and asylum seekers, especially unaccompanied asylum seeking minors.

47% of children and young people come from minority ethnic backgrounds. More than 50 home and community languages are spoken. The largest minority ethnic communities are Pakistani (18%), African Caribbean (9%), Indian (6%) and Bangladeshi (4%). Children and young people of mixed heritage form 6% of the school-age population.

It is difficult to determine exactly how many disabled children and young people there are in the city. When a young child's development is impaired, it is not always possible to know if this represents a delay that can be overcome or whether development may remain impaired. However, amongst the population of older children and young

people, estimates of disability vary between 3 and 5 per cent. Some causes of disability only emerge over the first few years while other children who show developmental delay in early childhood overcome their difficulties. In addition, incidence of disability is considerably higher in areas of deprivation and some causes of disability are particularly prevalent in some majority ethnic groups. We estimate that there are about 10,500 disabled children and young people in the City and about 7,000 with statements of special educational need.

Given the government's recent data that 6% of the population are gay or lesbian, this means that there are about 15,000 children and young people in the city who will at some point in their lives identify themselves as lesbian or gay and may have particular needs as a result.

This diversity of population also means that Birmingham is a diverse city in terms of faith. Information is available from the 2001 Census for six religious groups defined by the Census: Christian, Buddhist, Hindu, Jewish, Muslim and Sikh.

In the Census, 59.1%, (577,783) said that their religion was Christian, followed by Muslim (14.3%) and those having no religion (12.4%). There were only 21 out of 354 local authorities in England where the percentage who said their religion was Christian was lower than Birmingham's. In contrast, there were only six authorities with a higher percentage stating they were Muslim. At 140,033, Birmingham had more Muslims than any other local authority area.

Most people classifying themselves in one of the white or black ethnic groups said that they were Christian. However 1,840 (29.6%) Black Africans and 1,581 (10.8%) people from the white 'other' ethnic group said they were Muslim. Over 90% of people in the Bangladeshi and Pakistani groups said they were Muslim. Indian people, in the main, said they were Hindu (32.7%) or Sikh (47.9%). Over 50% of Chinese people said that they had no religion and 18.3% were Buddhist.

Within many localities, especially those with a significant proportion of people from ethnic minority communities, faith is a key organising principle within the lives of those communities. This is illustrated by the Moslem mosques/masjids, Jewish synagogues, Sikh gurdwaras, Hindu and Jang temples, Buddhist Viharas and Christian churches. These are sites of worship but also locations for such matters as education, recreation, support and welfare. Current estimates put the number of faith-based community organisations at some 800.

The city has some areas of affluence, but many of considerable poverty. Indices of disadvantage are much higher than those found nationally. For example, the percentage of children and young people eligible for free schools meals is 35%, nearly twice the national average. Using the 2004 index of multiple deprivation, 51 of Birmingham's 76 secondary schools have more than 50% of their pupils living in the most deprived areas nationally.

Overall, Birmingham is one of the most deprived 5% of districts in the country and the most deprived in the region. It ranks highest of all districts on deprivation scales relating to income and to employment. More than a quarter of the population are income deprived and about 11% are deprived on the employment scale. The latest figures suggest, for example, an unemployment rate of 13.5% for 18-24 year olds in

the city. Overall worklessness was 22% in May 2007, higher than all other major cities expect for Liverpool and Manchester.

This means that there is a local dimension to many of the issues identified later in this plan. In many cases, our work will focus on specific areas of the city or particular groups of children and young people and closing the gap with the rest of the city. These are identified in the appended performance management schedule.

Birmingham's economy has undergone a significant change over the past three decades with the service sector replacing manufacturing as the principal source of employment. This restructuring has inevitably had an impact on employment and resulted in a mismatch of skills and labour force needs. However, forecasts suggest that output and productivity are set to grow over the next five years with the service sector and the visitor economy creating up to 50,000 additional jobs in the city in the next 10 years. Nevertheless, manufacturing – currently accounting for about 12% of employment in the city - will continue to be a key element of Birmingham's economy, with an increasing focus on high-technology production.

In addition, the creative and cultural industries are a fast growing area of economic activity at around twice the national average rate of expansion. There is strong potential for young people in Birmingham to find employment or self-employment in the creative sector, especially in the jewellery, music or media sub-sectors. Appropriate support to develop entrepreneurial skills and to start up and sustain new small and medium sized enterprises will be required to realise this.

Be healthy

- Rates of infant mortality are falling in Birmingham, although they are still high compared to national averages. Rates are significantly higher in the Pakistani, Bangladeshi and African Caribbean communities and in some parts of the city.
- The area is a 'high risk area' for intrauterine growth restriction and prematurity, the two main factors associated with perinatal mortality. Both rates are almost 50% higher in the area than nationally.
- Breastfeeding varies with ethnicity, with best rates in African Caribbean mothers and worst in Europeans. Teenagers and smokers are less likely to breastfeed. Our survey of 0-6 year olds showed that 59% of children were breast-fed. 24% were under 6 months old when breast-feeding stopped.
- The percentage of low birth weight babies varies by ward from 7% to 13% and reaches as high as 29% in some super output areas. Survey findings suggested that 11% of our 0-6 population had been low birth weight babies and 12% had been born prematurely.
- About 14% of year 6 children in the city are overweight. A further 22% are obese. 19% of year 6 girls and 25% of year 6 boys are obese.
- Nearly 30% of Black Caribbean pupils in year 6 are obese – 27% of girls and 32% of boys. Although only 19% of Indian girls are obese, this rises to 31% of Indian boys
- The under-18 conception rate rose in the last year for which figures are available (2006) from 50.7 per 1000 per 1000 female population aged 15-17 in 2005 to 53.2 in 2006. The rate for England as a whole is 40.4. In Birmingham, there has been a reduction in the rate of 8.9% since 1998, compared to a national reduction of

13.3%.

- Figures for the under-16 population show a small but concerning rise in the number and rate of conceptions in the younger age group in Birmingham since 2001, at a time when the England rate is declining.
- It is estimated that around 20% of births conceived to under 18s are to young women who are already teenage mothers.
- Data at ward level shows that under-18 conceptions in Birmingham are more concentrated in particular areas. There is some correlation between wards with low educational attainment, high deprivation and under 18 conceptions. However, two of the most deprived wards, Small Heath and Sparkhill have under-18 conception rates below the national average. This might be explained by the ethnic make up of the population in those areas, with a high proportion of young people from South Asian backgrounds.
- Young women who are Black or have mixed parentage are over-represented amongst young women under-18 who conceive in Birmingham, whereas South Asian groups are under-represented.
- There is a relationship between teenage conceptions and infant mortality. Mothers under 20 have a 26% greater risk of increased stillbirth. For infant deaths, the risk is increased by 47% for mothers under 20.
- Our survey of 0-6 year olds revealed concerns about the liveliness of 0-6 year olds, with 18% identified as having liveliness problems. 22% of 0-6 year olds were never or only occasionally active in the last three months.
- In our survey, 21% of 12-18 year olds said they ate junk food every day.
- MMR vaccination rates vary across the city with low take up in east Birmingham and high take up in the Heart of Birmingham tPCT area. There appears to be a positive correlation between deprivation and higher levels of take up. Take up of all immunisations is low in the Black/Black British/African community.
- Our survey suggests only low levels of depression (1%) amongst 0-6 year olds but higher levels (19%) of children with anxiety problems. On the other hand, depression was an issue for 8% of 7-16 year olds, compared to 5% of 11-15 year olds nationally. 17% of 7-18 year olds said they worried a lot and 10% were often downhearted, unhappy or tearful.
- OfSTED's Tellus2 survey suggests that the thing children and young people worry about most is examinations, followed by friendship, their future, and schoolwork
- 7% of 0-6 year olds were hyperactive, rather lower than might have been expected given the figure for Britain for 5-10 year olds is 16%. 10% of 7-18 year olds were identified as hyperactive, again below national figures for 11-15 year olds. Nevertheless, 23% of 7-18 year olds said they were restless and could not sit still for long and 22% are easily distracted and find it difficult to concentrate.
- 8% of 0-6 year olds were identified as having a potential conduct disorder, with 10% often having temper tantrums or hot tempers. 12% of 0-6 year olds were identified as having problem behaviour.
- Our survey of 7-18 year olds identified 17% with a potential conduct disorder compared to 12% of 11-15 year olds across the country as a whole. 27% said they get very angry and often lose their temper. 9% said they often fight with other children and young people or bully them.
- Birmingham has relatively few services to address the mental health needs of the city's children and young people from different ethnic backgrounds.
- Specialist CAMHS are not distributed according to need. The most deprived area, Heart of Birmingham, has the fewest trained staff.

- Patterns of demand for specialist CAMHS do not reflect need. There are significant barriers to access in the City's more deprived areas and among its minority ethnic communities.
- Birmingham's specialist CAMHS teams have a professional skill mix that is strong in psychology and social work, but is short of consultant psychiatrists and most significantly lacking in the therapy professions.
- Our survey of 7-18 year olds suggests that 5% of children and young people consider their physical health to be poor. 2% had an accident in the last year that meant they had to go to hospital. OfSTED's Tellus2 survey found that 13% of Birmingham children and young people in years 6, 8 and 10 thought they were unhealthy compared to 9% nationally.
- The same survey also showed that 6% of 12-18 year olds smoke, 80% drink alcohol a few times a week. Nationally, in 2006, 1% of 11 year olds smoked at least once a week, as did 20% of 15 year olds and 21% of 11-15 years olds had drunk alcohol in the previous week. The Tellus2 survey of Birmingham young people in years 8 and 10 found that 59% of children and young people had never had an alcoholic drink compared to 42% national, a statistically significant difference. 80% had never smoked a cigarette compared to 73% nationally.
- In our survey, only 7% of 12-16 year olds said they had used illegal drugs in the last 12 months, compared to 17% of 11-15 year olds nationally. The Tellus2 survey found that 84% had not taken drugs in the last 4 weeks compared to 80% nationally, although OfSTED does not regard this as a statistically significant difference.

Stay safe

- Children and young people need to feel safe from bullying. 40% of primary school pupils and 33% of secondary school students in Birmingham report having been bullied once or twice, or more. The most commonly experienced forms of bullying are being given dirty looks (38%) and being lied about (30%). Girls are much more likely to experience indirect forms of bullying and boys more likely to experience physical forms. Most bullying is reported to take place on the playground or school field.
- In the Tellus2 survey, 71% of children and young people said they thought Birmingham schools deal quite or very well with bullying, compared to only 57% nationally.
- In our survey of 0-6 years, only 2% of parents said their children had peer problems and only 3% of children were picked on or bullied by others. In our survey of 7-18 year olds, bullying was an issue for 16% of children and young people. 8% said they had been in trouble with the police in the last year
- Children and young people need to be protected from the effects of living in households where there is domestic violence. About 33,000 are estimated to be living in a household where there is domestic violence. There is a strong association between domestic violence and child maltreatment. In our survey, 8% of 12-18 year olds said they had seen grown-ups in their home hit each other, 33% had heard them yell at each other. 81% felt safe in their home all the time.
- According to OfSTED's Tellus2 survey, 5% of Birmingham children and young people feel a bit or very unsafe at home
- Children and young people need to feel safer in their communities. They report being concerned about racism, violence, dangerous roads, drug misuse and a

range of other issues. However, their perceptions of danger should be considered alongside actual falling crime figures. In contrast, the proportion of children and young people feeling very safe in Birmingham schools is high compared to national averages. The Tellus2 survey does not suggest any significant differences between Birmingham children and young people and the national picture but does suggest that they feel less safe on public transport.

- In our survey, 52% of 12-18 year olds said they had seen gangs in their neighbourhood. Risks to safety were an issue for 16% of 12-18 year olds and 15% did not feel safe outside their neighbourhood.
- The number of children and young people on the Child Protection Register (CPR) is around 50 per 10,000. Of those, over 80% are first time registrations. The city compares favourably with elsewhere, with 4.8% of children and young people having been on the CPR for more than 2 years compared to the metropolitan authority average of 6.5 %.

Enjoy and achieve

- Overall, younger children in Birmingham do less well than their peers in statistical neighbour authorities and the national average. However, at each key stage the picture improves until at Key Stage 3 achievement is better than statistical neighbours in the four core subjects and by Key Stage 4 achievement significantly exceeds statistical neighbours and the national average. In particular, in 2007:
 - By the end of reception, 66% of Birmingham children, compared with 71% nationally, attained scores of at least 6 in each of the scales for Personal, Social and Emotional Development, with 43% attaining this for the scales in Communication, Language and Literacy, compared with 49% nationally.
 - At Key Stage 1, 79% of children scored 2 or above in Reading, 74% scored 2 or above in Writing, and 85% scored 2 or above in Maths.
 - At Key Stage 2, 76% of children scored 4 or above in English and 73% scored 4 or above in KS2 Maths.
 - At Key Stage 3, 69% of young people scored 5 or above in English and 70% scored 5 or above in Maths.
 - The percentage of students achieving 5 A*-C at Key Stage 4 is now 61.8%. Birmingham's performance is the highest of the core city and statistical neighbour authorities. Results are above the England average for maintained schools.
- There are however significant disparities between the achievement of children and young people from different ethnic groups in the city. Groups at particular risk of underachieving include African/Caribbean, Bangladeshi and Pakistani pupils, white disadvantaged boys, children and young people in care, and pupils with special educational needs. There is some evidence to show that the gap is narrowing for some groups for some Key Stages. This is particularly evident at Key Stage 4 where rates of improvement for Black Caribbean boys, Bangladeshi and Pakistani boys are above the Birmingham average with at least 50% in each group now achieving 5A*-C.
- Following a 4% fall last year, the percentage of white disadvantaged boys achieving 5A*-C improved by 11% this year from 27% to 38%, although they remain the lowest performing group.
- While the percentage of pupils achieving 5A*-C including GCSE English & maths has also improved to 42%, significant gaps remain for Black Caribbean boys

(26%), White/Black Caribbean boys (26%), Somali boys and girls (22%), Arab/Yemeni boys (27%), Pakistani boys (33%) and White disadvantaged boys (18%). In terms of achieving 5 or more GCSEs at grades A*-G there are no differences across ethnic groups.

- Children and young people in care also do not achieve as well as we want them to. This can be exacerbated by disruptions to schooling resulting from placement moves. Birmingham has a high proportion of care leavers who leave without having sat an examination.
- Achievement is also correlated with deprivation and in some areas of the city achievement is poor after controlling for deprivation.
- Absences from school are close to the national average (slightly above for primary school age children and slightly below at secondary school). Over a ten-year period, Birmingham has seen year on year improvements in absences starting from a point where absence was a significant problem in the city.
- 12% of parents of 4-6 year olds report that someone outside the family has suggested that their child has a special need, usually relating to speech, language or reading. 15% of school pupils are on school action, 5% on school action plus and 2% are statemented.
- 85% of primary pupils and 75% of secondary told us that they like going to school. Our survey of 7-18 year olds suggests that enjoyment of school is higher than nationally. 85% of 7-18 year olds told us they were at least moderately happy at school. This picture is confirmed by OfSTED's Tellus2 survey: 94% of children and young people said they enjoyed going to school at least some of the time and 68% said they enjoyed going always or most of the time.
- There is a high level of consensus among children, young people, parents and community members that the educational needs of children and young people are generally well met by educational services in Birmingham and this accords with objective measures of attainment.
- Activities for teenagers rank second in citizens' perceptions of priorities for improvement across the city. Facilities for young children rank sixth.
- Both parents and children and young people identify a need for better play and recreational provision that is safe and accessible. Young people tell us they want better facilities and a bigger say in how they are organised
- Library facilities need to be child friendly and accessible

Make a positive contribution

- Children and young people tell us they want a community-wide approach to the management of anti-social behaviour and bullying, with a wider focus than just schools. They have particular concerns about the transition from primary to secondary schools, as well as support for their transition to adulthood, and want interventions to happen earlier in the development of problems.
- Children and young people want to have greater involvement in policy-making in addition to being consulted on local issues. This is a particular issue for disabled children and young people.
- The OfSTED Tellus2 survey found that 58% of young people in years 8 and 10 thought their views were listened to in the running of their school compared to 52% nationally.
- There has been a reduction in first time offending and in rates of recidivism, although Black young people are over-represented within the criminal justice

system compared to their percentage within the general population.

- Children and young people tell us that they want to be presented in a more positive light. However, citizens of the city perceive teenagers hanging about the streets (35%) and a lack of parental responsibility (25%) as significant problems. There are significant variations across constituencies.
- Our survey of 0-6 year olds revealed significant concerns about the level of poor pro-social skills – 10% of the survey – and social functioning – 13% of the survey. Poor pro-social skills were also an issue for 8% of 7-16 year olds. 12% did not readily share with others and 8% said they were not helpful if someone was hurt, upset or feeling ill.
- 7% of 7-16 year olds in our survey had problems with peer relations. 7% said they did not have at least one good friend, 11% said they were picked on or bullied by other children and young people.
- 22% of 7-11 year olds are concerned about the way they look. When asked to rate how happy they were with their life overall on a scale from 0-10, 0 being 'very sad' and 10 'very happy', 15% of 7-18 year olds gave a score of 5 or less.
- 20% of 12-18 year olds agree that their parent/carer hardly ever praises them for doing well, 15% disagree that their parent/carer spends time just talking to them, and 14% disagree that their parent/carer expects them to follow family rules.

Achieve economic wellbeing

- Care leavers are particularly vulnerable to poor economic wellbeing because of poor take up of educational and training opportunities, limited housing options and the expectation to be independent at a young age.
- The number of young people not in education, employment or training (NEET) was 7.34% in November 2007, significantly down on previous years. The percentage of those categorised as "not known" also fell to 3.07% against a target of 8.5%.
- The scale of the NEET issue varies across the city and is concentrated in certain wards and among particular groups of young people. For example, children and young people in and leaving care, young offenders and teenage parents form a high proportion of the group. In addition, about 15% of the NEET group are characterised as having some form of learning difficulty or disability.
- Half of Birmingham people lack basic level 2 skills in numeracy and higher level skills are also low. Rates of achievement at level 2 by age 19 are below the national average but continue to increase at a faster rate.
- The proportion of young people who have achieved level 3 by the age of 19 is also rising – 40% in 2006/07 compared with 36.6% in 2004/05. However, the local rate of increase does not match the rate of increase either nationally or regionally.
- 22% of dependent children and young people between 0 and 15 in Birmingham live in accommodation without central heating, compared with 6% across England. The main concentrations are in the areas immediately surrounding the city centre. According to our survey, 26% of 7-11 year olds live in overcrowded housing.
- 30% of dependent children and young people between 0 and 15 in Birmingham are in households with no adults in employment, compared with 18% in England.
- 30% of parents of 0-6 year olds report lacking 3 or more of the socially perceived necessities of life, compared to 20% across Britain as a whole. 35% say they cannot afford a holiday, 23% cannot afford regular savings of £10 a month and 9% cannot afford to keep their home adequately warm in winter.

- Children and young people have concerns for their own and their families' financial security. Our survey of 7-11 year olds suggests that 25% do not have enough money to do the same things as their friends.
- Our survey of 0-6 year olds suggests that parents think that problems with drugs, vandalism, property crime and violent crime are each rather lower in their neighbourhood than might be expected from figures for Britain as a whole.
- The same survey shows that 96% of parents enjoy spending time with their children although 28% say they find it difficult to balance different responsibilities because of their children and 31% feel overwhelmed at the responsibility of being a parent. 22% of parents of 0-6 year olds say that their children are the major source of stress in their lives and 54% sometimes worry that they are not doing enough for their children.
- 74% of 7-11 year olds think it is very important to get a sixth form qualification

Cross-cutting themes

- In all areas, there is a contrast between the ethnic profile of service users and their profile in the ordinary population. In some circumstances, ethnic groups are over-represented, for example African Caribbean boys in the youth justice system. In others, they are under-represented.
- In all areas, there are significant disparities between sub-groups of the child population, often by ethnic group but also by neighbourhood and social class.
- Children, young people and their families express a need for accessible and inclusive services. This includes consideration of the location of provision, opening hours, cultural sensitivity, degree of stigmatisation, general awareness of what is available and a broader range of activities tailored to meet the needs of individual children, young people and families.
- For some groups of children and young people the chance of better outcomes is greatly reduced. These include children and young people with disabilities, children and young people in care, care leavers, young carers, traveller children and young people, refugees and asylum seekers.

Appendix 2: glossary

Academies	An Academy is a publicly funded school, which is all ability and established by sponsors from business, local organisations or voluntary groups working in partnership with both central government and the local authority. An Academy provides free education for every pupil: http://ebriefing.bgfl.org/content/resources/resource.cfm?id=4459
Brighter Futures transformation programme	Birmingham City Council has a range of Business Transformation programmes, one of which focuses on services for children, young people and families. The work of this transformation programme represents the City Council's commitment to the Brighter Futures Strategy and the implementation of this plan.
CAMHS	Child and Adolescent Mental Health Services. www.everychildmatters.gov.uk/health/camhs
Children in need	A child or young person is deemed to be 'in need': <ul style="list-style-type: none"> • If he or she is unlikely, or does not have the opportunity, to achieve or maintain a reasonable standard of health or development without provision made by the local authority • If his or her health and development are likely to be significantly impaired, or further impaired, without the provision of services by the local authority • If he or she is disabled.
Children's Trust	Children's trusts bring together all services for children and young people in an area, underpinned by the Children Act 2004 duty to cooperate, to focus on improving outcomes for all children and young people. www.everychildmatters.gov.uk/aims/childrenstrusts
Commissioning	Commissioning is the process of specifying, securing and monitoring services to meet individual needs both in the short and long term. As such, it covers what might be viewed as the purchasing process as well as a more strategic approach to shaping the market to meet future needs. www.everychildmatters.gov.uk/strategy/planningandcommissioning
Common Assessment Framework	The Common Assessment Framework (CAF) is a key part of delivering frontline services that are integrated and focused around the needs of children and young people. The CAF is a framework and processes that cover integrated assessment of a child's additional needs and decisions about how those needs should be met. www.everychildmatters.gov.uk/deliveringservices/caf
Connexions	Connexions offers advice on education, careers, housing, money, health and relationships for 13-19 year olds.

ContactPoint	<p>ContactPoint will be a quick way for a practitioner to find out who else is working with the same child or young person, making it easier to deliver more coordinated support. It will be a basic online directory, available to authorised staff who need it to do their jobs. It is a key part of the Every Child Matters programme to improve outcomes for children and young people.</p> <p>www.everychildmatters.gov.uk/delivering/services/contactpoint</p>
Core offer for disabled children, young people and families	<p>A national statement of expectations for how disabled children and young people and their parents will be informed and involved as their needs are assessed and the necessary services provided. It covers standards on five elements: information, transparency, participation, assessment and feedback.</p> <p>www.dh.gov.uk/en/Publicationsandstatistics/Lettersandcirculars/De arcolleagueletters/DH_082966</p>
Diplomas	<p>Diplomas will be a blend of general education and applied work-related learning. They are intended to offer an exciting, aspirational and stretching programme of learning for all young people. They will incorporate:</p> <ul style="list-style-type: none"> • Principal Learning: to develop knowledge, understanding and skills relevant to a broad economic sector. • Additional/specialist learning: to allow learners to tailor their programme according to interests and aspirations. • Generic learning: to make sure that all Diploma students cover common generic skills that are relevant to successful learning and future employment. <p>www.dcsf.gov.uk/14-19/index.cfm?sid=3&pid=224&ctype=None&ptype=Contents</p>
Early intervention	<p>Early intervention is aimed at stopping those children and young people at highest risk of developing problems, or those who show the first signs of difficulty, from displaying unnecessarily long or serious symptoms. The purpose of early intervention is to do something in the first stages of the development of an impairment, which may not necessarily occur early in the child's life.</p>
Epidemiology	<p>The study of populations to determine the frequency and distribution of conditions, such as diseases, mental health problems and other disorders.</p>
Every Child Matters	<p>The Government green paper that led to the Children Act 2004. The green paper identified five outcomes for children and young people: be healthy, stay safe, enjoy and achieve, make a positive contribution, and achieve economic wellbeing.</p> <p>www.everychildmatters.gov.uk</p>
Extended services clusters	<p>Birmingham has 41 extended services clusters of schools and other partners working to achieve the Government's core offer for extended schools.</p>

Hear by Right Hear by Right is a set of standards for the active involvement of children and young people. <http://hbr.nya.org.uk/>

Incredible Years The Incredible Years programme promotes positive parenting through:

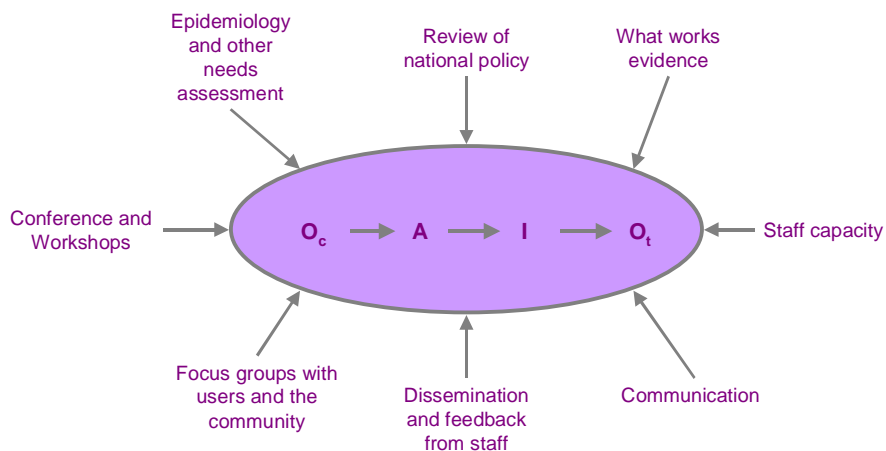
- Increasing positive child behaviour through praise and incentives.
- Improving parent-child interaction and relationships.
- Setting clear expectations.
- Applying consistent gentle consequences for problem behaviour.

It uses a collaborative approach with methods such as role-play, acting out certain situations as parent or child, and analysis of videos. www.incredibleyears.com

Leadership/reference group A group set up by the Children and Young People's Board to develop the Brighter Futures strategy for Birmingham. The group was made up of leaders of services for children, young people and families across the city.

Learning and Skills Council The Learning and Skills Council is a national post-16 planning and funding agency that aims to improve the skills of England's Young people and adults to make sure we have a world-class workforce. The Birmingham and Solihull office is one of five in the West Midlands and works with local education and training providers.

Logic model The logic model used to develop this plan focuses on agreeing **outcomes** (O_c), deciding **activities** to address those outcomes (A), making decision about **investments** (I), and deciding the **outputs** used to measure progress (O_t):



MAPPA Multi-Agency Public Protection Arrangements (MAPPA) support the assessment and management of the most serious sexual and violent offenders. The aim of MAPPA is to ensure that a risk management plan drawn up for the most serious offenders benefits

	<p>from the information, skills and resources provided by the individual agencies being co-ordinated through MAPPA. MAPPA were introduced in 2001 and bring together the Police, Probation and Prison Services into what is known as the MAPPA Responsible Authority. Other agencies are under a duty to co-operate, including social care, health, housing and education services.</p> <p>www.noms.justice.gov.uk/protecting-the-public/Supervision/mappa</p>
Need	<p>Need refers to the requirements for healthy development. The concept of need connects the gap between a person's current and desired state. Need is concerned with the whole child and covers all aspects of development and risks to healthy development.</p>
Nurse Family Partnership	<p>Nurse Family Partnership is an intensive preventive home visiting programme delivered by specially trained nurses and midwives with experience of working with families in the community. It is a structured programme for at risk, first time young parents from early pregnancy until the child is 2 years old. Each site has a supervisor and a team of up to 6 Family Nurses. Each nurse is expected to recruit a caseload of approximately 25 mothers. This team would have additional skills and knowledge in areas such as building a therapeutic relationship, motivational interviewing, attachment, behaviour change and using the programme's guidelines and materials. www.nursefamilypartnership.org</p>
Outcome	<p>An outcome is the impact of activities (such as a service) on children and young people's health and development.</p>
Output	<p>An output is the measure of activities that are intended to lead to an outcome. It is the effect of a process (such as a service) on an administrative indicator. Examples include the number of children and young people in care, the number of arrests and convictions and whether or not a child or young person received special educational help.</p>
Prevention	<p>Prevention refers to activity designed to stop predicted impairment to children and young people's health or development. The purpose of preventive services is to stop impairments before they occur. They can involve public health style or targeted approaches but they focus on children and young people who might be expected to develop an impairment.</p>
Practice-based commissioning	<p>Practice-based commissioning is a policy intended to give more decision-making power over NHS resources to general practitioners (GPs), and allow them to design and deliver completely new services or commission others to do so. It has a number of underlying policy objectives including delivering more cost effective and convenient forms of treatment outside hospital. Practice-based commissioning is a key strand of recent NHS reforms.</p>

Primary care trusts	Primary care trusts (PCTs) cover all parts of England and receive budgets directly from the Department of Health. Since April 2002, PCTs controlled local health care while strategic Health Authorities monitor performance and standards.
Public health strategy	Public health prevention strategies target the cases at the mean of the distribution (the average child) of an aspect of children and young people's health or development, with the goal of dragging the cases at the tail of the distribution (children and young people with serious problems) towards the mean in future years. A public health approach focuses on all children and young people in a particular geographical area, such as a country, region, community or school.
Restorative justice	The term "restorative justice" has been applied to a wide range of programmes, with one common element: offenders doing something constructive to make the world a better place, rather than just being punished. Essentially, restorative justice is a conflict resolution technique but is not confined to incidents defined by law as criminal. www.restorativejustice.org.uk
Safeguarding	Section 11 of the Children Act 2004 places a statutory duty on key people and bodies to make arrangements to safeguard and promote the welfare of children and young people. www.everychildmatters.gov.uk/socialcare/safeguarding
Social prevention	Social prevention seeks to reduce the damage that those who have developed a disorder can inflict on others in a community and/or on themselves. Not to be confused with the prevention of social problems
Statement of special educational needs	A school or parent can ask a local authority to carry out a Statutory Assessment of special educational needs. If, through the assessment, the local authority decides that a child or young person needs more help, it will write a Statement of Special Educational Needs. This describes all the child's needs and special help requirements.
Strengthening Families, Strengthening Communities	Strengthening Families, Strengthening Communities is a parenting programme that aims to raise the consciousness of parents. In addition, the curriculum aims to help families develop or promote: strong ethnic and cultural roots; positive parent-child relationships; a range of life skills; self esteem, self-discipline and social competence; and an ability to access community resources. It is the UK version of the US programme "Strengthening Multi-Ethnic Families". www.raceequalityfoundation.org.uk/sfsc
Triple P	Triple P (Positive Parenting Programme) seeks to prevent severe behavioural, emotional and developmental problems in children and young people by improving the knowledge, skills and confidence of parents. The programme has five levels of increasing

intervention, ranging from media initiatives through tip sheets and parenting skills training to intensive, tailored sessions for families with complex problems. It works with the parents of children and young people aged 0-16 years. www.triplep.net

Universal services

Universal services are designed to contribute to all children and young people's development, often with the underlying goal of reducing social and health inequalities. Freely available education and health care are examples of universal services.

VCS Matters

VCS Matters supports voluntary and community sector organisations to work within the Every Child Matters framework in Birmingham. Established in spring 2007 after a year-long consultation process, it is led by a Strategy Group open to all VCS organisations working with children and young people in Birmingham. VCS Matters is working towards:

- Stronger representation in the new Children's Trust arrangements
- Closer co-operation in the design, delivery and evaluation of services
- Better outcomes for children and young people.

<http://www.vcsmatters.org>

Appendix 3: consultation

The Brighter Futures strategic statement on which this plan is based, and the review of the Children and Young People's Plan 2006-2009 that preceded it, have been the subject of extensive consultation.

We consulted publicly on the review of the last plan from 27 March until 11 May 2007. All partner agencies contributed responses to the review. In addition, we consulted with appropriate scrutiny committees and representatives of equalities and diversity groups across the city. We also consulted with the Schools Forum, the Admissions Forum, Primary Forum and Secondary Forum, as well as all schools through our eBriefing system.

In addition, the two surveys that informed our needs analysis and subsequent selection of priorities, provided us with the views of a representative sample of children and young people aged 7-18 and of parents of 0-6 year olds.

The work of the Leadership Group that developed the priorities was tested with agencies that plan, commission and deliver services for children and young people and with local communities, including voluntary and community sector organisations.

The plan's development has also been informed by other consultation exercises, such as that carried out in relation to Building Schools for the Future.

The draft version of this plan was shared again with the above groups. Specific questions asked in the consultation on the draft version of this plan were:

1. Does this plan convey our vision for services for children and young people and explicitly articulate how we intend to move towards prevention and early intervention?
2. Are there any significant omissions or errors in our needs analysis?
3. Have the appropriate conclusions been drawn from the needs analysis?
4. Does the plan adequately explain arrangements for performance management and review of services?
5. Are the arrangements for co-operation clear?

Consultation responses were frequently about terminology used in the plan and in particular the use of the term "treatment" which has since been replaced by the term "specialist intervention". Other comments related to the importance of the family and parents in addressing the priority outcomes and to specific initiatives. These were sometimes deemed too specific to be mentioned in an overarching strategic plan.

Concerns were also raised about the level of priority given to safeguarding and to health in both the Brighter Futures strategy and this plan. This plan has therefore been revised to put a greater emphasis on both. Other responses questioned how the plan would support meeting the needs of specific groups, such as lesbian, gay, bisexual or transgender young people, and so the plan is clearer about the need for particular programmes to be based on strong evidence of individual need. In addition, sections relating to disabled children and young people were further developed.

Other comments significantly strengthened sections of the plan relating to achieving economic wellbeing and helped to clarify which terms used in the plan should be explained in further detail in the glossary.

Many responses commented on the structure of the document and its length. The overall structure of the document has been significantly revised and the appendices to the plan are now a separate document. This significantly reduces the size of the plan itself, making it more accessible to a wider audience, while still offering access to more detailed information, such as the needs assessment that underpins the plan.

Appendix 4: reference material

Local reference documents

Birmingham Brighter Futures for Children and Young People strategy:

www.birmingham.gov.uk/brighterfutures

Council Plan: www.birmingham.gov.uk/councilplan

Local Area Agreement: www.bebirmingham.org.uk/?mod=page&p_id=162

Local web sites

Birmingham City Council services for children, young people and families:

www.birmingham.gov.uk/childrenservices

Online directory of local activities, information and services for children, young people, their families and for professionals who work with them: www.ineed2know.org.uk

Birmingham Grid for Learning: www.bgfl.org

South Birmingham PCT: www.southbirminghampct.nhs.uk

Heart of Birmingham Teaching PCT: www.hobtpct.nhs.uk

Birmingham East and North PCT: www.benpct.nhs.uk

Learning and Skills Council: <http://www.lsc.gov.uk/regions/WestMidlands>

Connexions: www.connexions-bs.co.uk

Birmingham Strategic Partnership (Be Birmingham): www.bebirmingham.org.uk

Birmingham Community Safety Partnership: www.birmingham-csp.org.uk

Birmingham Health and Wellbeing Partnership:

www.bhampsp.org.uk/html/healthandwellbeingpartnership.php

West Midlands Probation Area: www.westmidlands-probation.gov.uk

West Midlands Strategic Health Authority: www.westmidlands.nhs.uk

VCS Matters: www.vcsmatters.org

Birmingham Voluntary and Community Sector organisations: www.bvsc.org

National reference documents

Every Child Matters: In 2003, the Government published a green paper called Every Child Matters. This was published alongside the formal response to the report into the death of Victoria Climbié. After consultation, the Government published Every Child Matters: the Next Steps, and passed the Children Act 2004, providing the legislative basis for developing more effective and accessible services focused around the needs of children, young people and families.

The Children's Plan: building brighter futures: the Government wants to make this country the best place in the world for children and young people to grow up. The Children's Plan sets out how the Department for Children, Schools and Families is going to achieve that by putting the needs of families, children and young people at the centre of everything it does.

Children and young people today: evidence to support the Children's Plan: this report draws together facts and figures about children and young people today, and analyses the challenges the government faces in helping them all to lead fulfilling lives.

Care Matters: Time for Change: this White Paper sets out the steps that will be taken to improve the outcomes of children and young people in care. It builds on responses to an earlier Green Paper and the conclusions of four working groups established to investigate best practice in supporting those in care.

[Joint planning and commissioning framework for children, young people and maternity services](#): this framework aims to help local planners and commissioners design a unified system in each local area, creating a clear picture of what children and young people need. It also covers how to make the best use of resources and join up services so they provide better outcomes than they can individually.

[National Indicator set](#): this is a single set of indicators announced as part of the government's Comprehensive Spending Review 2007. There are 198 indicators, many of which relate to children, young people and families plus a range of statutory education indicators

Most government documents relating to services for children, young people and families are available from publications.everychildmatters.gov.uk and publications.teachernet.gov.uk.