CABINET AGENDA



Monday 14th April 2008

at 9.00 am

in

Committee Room B, Civic Centre, Hartlepool

MEMBERS: CABINET:

The Mayor, Stuart Drummond

Councillors Hall, Hargreaves, Hill, Jackson, Payne and Tumilty

1. APOLOGIES FOR ABSENCE

2. TO RECEIVE ANY DECLARATIONS OF INTEREST BY MEMBERS

3. MINUTES

To receive the Record of Decision in respect of the meeting held on 31st March 2008 (previously circulated)

4. BUDG ET AND POLICY FRAMEWORK No items

5. KEY DECISIONS

- 5.1 Carers' Emergency Respite Care Scheme (*Director of Adult and Community Services*)
- 5.2 Building Schools for the Future and Special Educational Needs: Proposed Designation for Catcote School to admit pupils with Behavioural, Emotional and Social Difficulties (BESD) – Representations made to published Statutory Notices (Director of Children's Services)

6. OTHERITEMS REQUIRING DECISION

6.1 Young People Specialist Substance Misuse Plan 2008/09 (*Director of Children's Services and Director of Regeneration & Planning Services*)



Report of: Director of Adult & Community Services

Subject: CARERS' EMERGENCY RESPITE CARE SCHEME

SUMMARY

1. PURPOSE OF REPORT

To seek approval from Cabinet to tender for a Carers' Emergency Respite Care Scheme to support Carers of vulnerable adults in Hartlepool.

2. SUM MARY OF CONTENTS

The report details the proposed scheme and how carers within Hartlepool can gain access to the service.

The report also outlines the changes to assessment and care management processes within Adult Social Care services and the financial implications for the council by adopting the scheme.

3. RELEVANCE TO CABINET

This service will be available to all carers living in any ward within Hartlepool.

4. TYPE OF DECISION

Key (Test ii)

5. DECISION MAKING ROUTE

Cabinet - 14 April 2008

6. DECISION(S) REQUIRED

To give approval for the implementation of a Carers' Emergency Respite Scheme in Hartlepool.

Report of: Director of Adult & Community Services

Subject: CARERS' EMERGENCY RESPITE CARE SCHEME

1. PURPOSE OF REPORT

1.1 To seek approval from Cabinet to implement a Carers' Emergency Respite Care Scheme to support carers of vulnerable adults in Hartlepool.

2. BACKGROUND

- 2.1 A Carers' Emergency Respite Care Scheme (CERCS) is designed to provide piece of mind to carers of adults who provide a substantial amount of care on a regular basis.
- 2.2 This service would be in addition to existing emergency care provision and forms part of central governments New Deal for Carers Strategy. New Deal for Carers aims to raise the profile of unpaid carers and recognise and support the contribution they make to the wider community.
- 2.3 Access to the service would be via an assessment of need known as a 'Carers Assessment' and upon completion of an 'Emergency Care Plan'. The 'Emergency Care Plan' would detail the wishes of the carer and take into account the wishes and needs of the adult who is cared for. The completed plan would then be shared with the provider of the service. All data protection requirements would be fully adhered to.
- 2.4 This service aims to provide up to 72 hours of support to carers who find themselves unable to provide care due to an emergency or unexpected situation arising. All care provided under this scheme would be in the home environment. Where an emergency situation arises that would leave the carer unable to provide care for periods in excess of 72 hours then the 'Emergency Care Plan' would detail what mainstream provision would be implemented for the person who is cared for.
- 2.5 Carers who register for this service would be provided with an Emergency Carer Card. This card would be the same size as a credit card and have a contact number to access the emergency service. A key ring would also be issued to the carer also detailing the contact number. All emergency contact numbers for this service will be free of charge to the carer calling. This service will be operational 24 hours a day, 365 days a year.

- 2.6 Consultation undertaken with Carers in Hartlepool has made us aw are that some Carers may be deterred from accessing this service as it is accessed by a statutory agency such as adult social care services. In order to overcome this we propose to develop contracts with third sector agencies to undertake 'Carers Assessments' and complete 'Emergency Care Plans', on behalf of the department. Third sector agencies are already contracted by the department in this way to support and undertake 'Carers Assessments' at present, so this would complement the work required to implement the Carers Emergency Respite Scheme.
- 2.7 The Carers Emergency Respite Scheme is a free to access service and will not be means tested in any way. The service will be available on a borough wide basis and is in addition to any existing provision available.

3 FINANCIAL IMPLICATIONS

- 3.1 The government have provided extra funding for this scheme as part of a 'top up' to the existing Carers Grant. Funding allocation for the Carers Grant has been identified for the next three years as part of the Comprehensive Spending Review 2008-11.
- 3.2 Whilst extra funding for this scheme has been made available funds are finite. It is believed that in order to achieve best value for this scheme a three-year contract should be issued in this instance. This would allow any successful provider to have longer-term confidence in the contract and enable the council to have a comprehensive scheme available from day one.

4. **RECOMMENDATIONS**

Cabinet are recommended to approve the introduction of the scheme as detailed in this report.

CONTACT OFFICER: Dale Owens, Project Officer (Carers / Telecare)

CABINET REPORT

14th April 2008



- **Report of:** Director of Children's Services
- Subject: BUILDING SCHOOLS FOR THE FUTURE AND SPECIAL EDUCATIONAL NEEDS: PROPOSED DESIGNATION FOR CATCO TE SCHOOL TO ADMIT PUPILS WITH BEHAVIOURAL, EMOTIONAL AND SOCIAL DIFFICULTIES (BESD) – REPRESENTATIONS MADE TO PUBLISHED STATUTORY NOTICES

SUMMARY

1. PURP OS E OF REPORT

To request Cabinet to note the outcomes of the statutory notice period regarding the proposal to designate Catcote School to admit up to 30 pupils with statements of special educational needs for behavioural, emotional and social difficulties (BESD) within the age range 10 years to 17 years and to determine the next stage of action.

2. SUMMARY OF CONTENTS

The report provides a summary of the representations made during the statutory notice period relating to the proposal to designate Catcote School to admit pupils with BESD.

3. RELEVANCE TO CABINET

The designation of Catcote to admit pupils with BESD is part of the change process associated with Building Schools for the Future which will have a significant impact on the future provision of education in Hartlepool.

4. TYPE OF DECISION

Key decision.

5. DECISION MAKING ROUTE

Cabinet 14th April 2008.

6. DECISION(S) REQUIRED

It is recommended that Members:

- Note the outcomes of the statutory notice period relating to the proposal to designate Catcote School to admit pupils with statements of special educational needs for behavioural, emotional and social difficulties.
- Approve the designation of Catcote Special School to admit up to 30 pupils with statements of special educational needs for behavioural, emotional and social difficulties (BES D) within the age range 10 years to 17 years.

Report of: Director of Children's Services

Subject: BUILDING SCHOOLS FOR THE FUTURE AND SPECIAL EDUCATIONAL NEEDS: PROPOSED DESIGNATION FOR CATCOTE SCHOOL TO ADMIT PUPILS WITH BEHAVIOURAL, EMOTIONAL AND SOCIAL DIFFICULTIES (BESD) – REPRESENTATIONS MADE TO PUBLISHED STATUTORY NOTICES

1. PURPOSE OF REPORT

To request Cabinet to note the outcomes of the statutory notice period regarding the proposal to designate Catcote School to admit up to 30 pupils with statements of special educational needs for behavioural, emotional and social difficulties (BESD) within the age range 10 years to 17 years and to determine the next stage of action.

2. BACKGROUND

Hartlepool Borough Council has been admitted to the BSF (Building Schools for the Future) programme as a Wave 5 authority. The funding available to Hartlepool secondary schools is approximately £90 million of which almost £9 million will be earmarked for spending on Information and Communication Technology (ICT) equipment and infrastructure.

Catcote School is eligible for BSF funding and must be included in the authority's Strategy for Change. The Strategy for Change also requires the local authority to demonstrate how its plans will improve provision for pupils with special educational needs (SEN).

Catcote School is a special school for pupils in the age range 11 – 19 years. It currently has 78 pupils on roll. In addition it is making provision under a service level agreement with the local authority for up to 30 secondary aged pupils with behavioural, emotional and social difficulties (BESD). These pupils have statements of special educational needs as they have long term learning needs associated with their emotional and social vulnerabilities. The school supports provision for a significant number of other students through outreach support by teaching assistants and by access for Key Stage 4 pupils from mainstream secondary schools across the town to its vocational courses. Catcote also makes provision for young people over 19 years of age under a franchise agreement with Hartlepool College of Further Education.

3. THE STAGE ONE CONSULTATION PROCESS

Stage 1 was the first, formative stage of consultation which brought facts about the BSF programme and the context of Hartlepool secondary education to the attention of as many people as possible. Issues relating to special educational needs were included from the very beginning in the BSF consultation. Stage 1 noted the Council's vision and aim for inclusive education and Hartlepool's special schools' role within this.

4. THE STAGE TWO CONSULTATION PROCESS

The Stage 2 consultation process included a range of options for 11-16 mainstream schools in Hartlepool. It also put forward 2 options for special educational needs. These were:

- Option 1 Catcote Secondary Special School and Springwell Primary Special School to remain on their present separate sites.
- Option 2 Catcote Secondary Special School and Springwell Primary Special School to come together on a single site, with shared facilities designed to meet the needs for a wide range of special needs.

A report on the Stage 2 consultation was presented to Members on 19th March 2007. Members authorised further exploration of the possible colocation of Catcote and Springwell Site with shared facilities, during the period of preparation of the BSF Strategy for Change. This was taken forward as Stage 4 consultation.

5. THE STAGE THREE CONSULTATION PROCESS

The Stage 3 consultation process was focused on a proposal to close Brierton Community School. It included one specific issue in relation to special educational needs as Brierton Community School has additionally resourced facilities for pupils with autistic spectrum disorders (ASD).

6. THE STAGE FOUR CONSULTATION PROCESS

The Stage 4 consultation process was focused on meeting the needs of children and young people who have a range of special educational and additional needs. It looked at the possible co-location of Catcote and Springwell schools, as authorised by Cabinet on 19th March 2007 and in view of the inter related nature of other issues concerning special education needs also consulted on a number of these other SEN issues. The key issues covered in Stage 4 consultation can be summarised as:

 Special schools – the possible co-location of Catcote and Springwell schools.

- Provision for behavioural, emotional and social difficulties (BESD) at Catcote School.
- o Provision for excluded pupils.
- Support in mainstream schools.

The outcomes of Stage 4 consultation were considered by Cabinet on 12^{th} November 2007. Cabinet authorised the publication of a formal statutory notice to designate Catcote School to admit up to 30 pupils with statements of special educational needs for behavioural, emotional and social difficulties (BESD) within the age range 10 years to 17 years.

7. THE STATUTORY NOTICE PERIOD

The Statutory Notice is attached as **Appendix 2**. The key issues covered in the notice are:

- Designation of Catcote School to additionally admit up to 30 pupils in the age range 10 years to 17 years with statements of special educational needs with learning difficulties associated with behavioural, emotional and social difficulties (BESD) from 1st May 2008.
- BESD pupils are currently educated at the Access to Learning site, Brierton Lane and that they would be accommodated on the Catcote site no later than 1st September 2008.

The statutory notice was posted on 12th February 2008 at Catcote School, English Martyrs School, the adjacent community building of West Hartlepool Rugby Club and Summerhill Lane. Copies of the complete proposal were also forwarded to the Governors of Catcote School, the Diocesan Directors for the Church of England and Roman Catholic Diocese, the Learning & Skills Council and the Department for Children, Schools and Families. A public notice was also published in the Hartlepool Mail. The publication date of the notice was 12th February 2008. Consultations ended on 25th March 2008.

8. **RESPONSES TO THE STATUTORY NOTICE**

During the 6 week notice period, 11 responses were received.

- 1) letters received that were signed by parents 5 individual copies (contained in **Appendix 1**)
- letters received that were signed by staff at Catcote school 4 copies (contained in Appendix 1)
- 3) a letter signed by a foster carer (contained in **Appendix 1**)
- 4) one email received, signatory did not specify her relationship to the school (contained in **Appendix 1**)

5

9. ANALYSIS OF RESPONSES RECEIVED

Of the 11 responses received, 8 were objecting to the proposal and 3 were giving positive support.

From the analysis of the letters of objection, 2 main issues were raised:

- That the proposal to designate Catcote School to admit pupils with BESD was hidden in the BSF consultation process.
- That Catcote School has vulnerable pupils who would be at risk by the inclusion of BESD pupils on to the school roll.

A more detailed summary of the views expressed and copies of the letters are attached at **Appendix 1**.

The consultation process

The Stage 4 consultation process specifically considered provision for special educational needs. Families of school age children received copies of a summary leaflet which gave information about public meetings and where to get further information. Provision for pupils with behavioural, emotional and social difficulties was identified as a key issue about which views were being sought. Over 10,600 copies of the summary were distributed. The full consultation document was entitled 'Buildings Schools for the Future and Provision for Special Educational Needs in Hartlepool'. The full consultation document w as targeted specially at staff, governors and parents of pupils at schools named within the consultation. It went to the headteacher, staff, governors and parents of all pupils at Catcote School. The full consultation document was also sent to a range of other stakeholders.

The Stage 4 consultation document was laid out in 5 main sections:

- Section 1 Special Schools possible co-location of Catcote and Springwell Schools.
- Section 2 Provision for behavioural, emotional and social difficulties at Catcote School.
- Section 3 Provision for excluded pupils.
- Section 4 Support in mainstream schools (outreach support, provision for pupils with physical and/or medical difficulties, special support at Key Stage 1).
- Section 5 provided appendices for each of the sections above, which gave greater detail about the issues.

Section 2 noted that temporary arrangements had already been made for Catcote School to take responsibility for 20 plus secondary aged children with BESD and asked for views on a proposal for Catcote School to be approved to take up to 30 children and young people aged 10 -17 with BESD. The relevant appendix gave further background to the proposal

noting that a service level agreement had been drawn up involving Access to Learning and Catcote and that at the time of the consultation this appeared to be working well. It specifically stated 'already there have been some small steps taken towards the integration of staff and pupils, where this has been appropriate, but progress in this direction has to be made cautiously, informed by the judgment of those responsible'.

The Pow erpoint presentation delivered at Stage 4 consultation meetings included a specific slide in relation to behavioural, emotional and social difficulties with bullet points in relation to the fact that these were pupils with statements, the current arrangements between Catcote and Access to Learning and the legal requirement to seek formal designation for Catcote for pupils with BESD.

Vulnerability of existing Catcote pupils

There were some understandable concerns raised by parents during the consultation process about the implications for other pupils for the inclusion of BESD pupils on the roll of Catcote and how this could be managed. Catcote School has been meeting the needs of pupils with statements for behavioural, emotional and social difficulties since April 2007 under a service level agreement with the local authority. Whilst the pupils have been on a separate site at Brierton Lane, individual pupils, as part of their curriculum package have been accessing activities on the main Catcote site. The current proposal involves the location of mobile classrooms on the Catcote site to provide dedicated space for the pupils with BESD. Whilst this will provide separate accommodation it will also allow Catcote staff to continue with the successful management that they have already demonstrated in providing appropriate education for this particular group of pupils with special educational needs while safeguarding the needs of the school's most vulnerable pupils. Catcote School already caters for a diverse range of pupils, some of whom have challenging behaviour associated with severe learning difficulties.

Positive Support for the proposal

Three letters have been received from Catcote staff, one of whom is also parent of a post 19 student at Catcote, stating their positive support for the proposal. Their responses point to the success of the integration of pupils with BESD in to the school thus far. The deputy headteacher comments specifically on the lunch time arrangements and notes that there have been no incidents between the BESD and Catcote students. The staff responses refer to the strong management structure within the school and express confidence in the school's ability to manage change and meet the needs of the BESD students alongside the other students already at the school.

10. CONCLUSION

In conclusion, having examined and considered all of the issues raised by respondents, it is felt that the proposal set out in the statutory notice should be approved as published. On 12th November 2007 Cabinet considered the responses to the Stage 4 consultation in relation to BESD provision which dealt with some of the same issues which have been raised again in relation to statutory proposals. Members felt it was appropriate to move to the formal proposal. In addition, members of Catcote staff have written positively to express their support for the proposal. It is therefore recommended that the proposal is implemented.

11. NEXT STEPS

Having published its statutory proposal on 12th February 2008 and having considered representations received within the consultation timescale, Cabinet is under a legal obligation to decide these proposals within 2 months after the end of the consultation period. In considering the proposal in relation to the designation of Catcote School to admit pupils with statements of special educational needs for behavioural, emotional and social difficulties, Cabinet can decide to:

- a) Reject the proposals set out in the statutory notice
- b) Approve the proposals set out in the statutory notice
- c) Approve the proposal with a modification e.g. implementation date.

12. DECISION REQUIRED

It is recommended that Members:

- Note the outcomes of the statutory notice period relating to the proposal to designate Catcote School to admit pupils with statements of special educational needs for behavioural, emotional and social difficulties.
- Approve the designation of Catcote Special School to admit up to 30 pupils with statements of special educational needs for behavioural, emotional and social difficulties (BESD) within the age range 10 year to 17 years from 1st May 2008.

13. CONTACT OFFICER

Sue Johnson, Assistant Director, Children's Services (telephone 523773).

APPENDIX 1

Catcote School

Responses to Statutory Responses (BESD Pupils)

Total number of responses received during six week consultation period ending 25^{th} March 2008 was 11.

Breakdown of respondents who raised objection:

| Objector: | Parent / Foster parent | 6 |
|-------------------------------------|------------------------|---|
| | Other (notspecified) | 1 |
| | Teacher - Catcote | 1 |
| Total | | 8 |
| (Summary of Objections – Section 1) | | |

Breakdown of respondents who supported proposal:

| Deputy Headteacher - Catcote | 1 | |
|--|---|--|
| Teacher – Catcote | 1 | |
| Business Manager – Catcote | 1 | |
| Total | 3 | |
| (Summary of supportive comments – Section 2) | | |

Section 1

SUMMARY OF OBJECTIONS

BESD pupils are disruptive and do not want to be in any school.

Existing Catcote pupils are not used to experiencing bad behaviour, swearing or violence, and progress will therefore be hindered. All existing Catcote pupils are used to having free access around the school. BESD pupils will prevent this from happening.

Parents are proud to be associated with Catcote because of the progress it has made. The proposals will undo much of the good work done.

The school is a happy and safe place for pupils. This will all change with the inclusion of BESD pupils.

BESD pupils should best be accommodated in the mainstream secondary sector where there are better facilities for them. It was never made clear in the BSF consultation that this proposal was as imminent as published. The consultations indicated that the inclusion of the pupils would not happen until facilities to suit their particular needs were built. It does not make sense to accommodate pupils who need to be kept separate in the same area as Hartlepool's most vulnerable children.

BESD have the most appropriate environment for their needs at the moment. It is not fair on them to integrate now.

There are very few examples of this approach elsewhere which suggests this proposal is experimental and not based on success experiences of others.

The Catcote Headteacher is proposing to abolish morning breaks to avoid confrontation. This is unfair and unreasonable and shows how the two groups of children are not compatible.

Parents feel that Catcote School provides the correct setting for a certain group of special needs pupils as it is currently established. If this proposal were to proceed then parental choice will in effect be removed as the council will be providing a new setting that parents feel is inappropriate. A similar experiment w as undertaken at High Tunstall School and appears to have failed. Catcote School is being held to ransom through the threat of BSF funding being withdraw nif this proposal does not proceed.

The volatility of BESD pupils is well known and for health and safety reason the proposal should not proceed.

Staff and parents have not been properly consulted on the proposal.

Moving pupils from their existing facilities into temporary arrangements is a retrograde step. Catcote buildings and site will have difficulty in accommodating additional pupils as it is already over-stretched. The Council has not made its intentions clear towards pupils in the PRU category.

Consultations on this issue were carried out on a hypothetical basis and on the basis of co-location of a new site, not Catcote.

Parents have never been informed about the leadership arrangements between Catcote School and Access to Learning. New security arrangements will have to be introduced into Catcote School. This will alter the philosophy, culture and practices in the school.

The proposals should be postponed until a real consultation process has been undertaken.

Section 2

Summary of Supportive Responses

The key issue is how the move and co-location will be managed. Catcote is in a much stronger management position to cope well with BESD pupils because it is not the school it was a few years ago.

BESD already visit Catcote School and the (limited) integration experiences to date have been very successful. Both groups of pupils can co-exist very well and there are existing models of teaching and learning in discrete classrooms that work.

Working with BESD pupils in the school is part of the Catcote school vision, draw nup in readiness for the BSF project.

The school has learned lessons in the past about including specific groups of pupils and that experience will be invaluable in the integration of the BESD students.

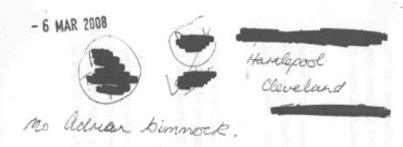
BESD pupils will become part of the caring, supportive Catcote Community. This will improve their self esteem and confidence

Catcote School has come a long way in recent years and it is inconceivable that the school leadership will allow the standards of quality education to slide.

The needs of the BESD pupils should not be dismissed because of unfair comments made by a small number of Catcote parents.

There is a strongly held view by the majority of people interested in the success of Catcote School, that the proposed represents the way forward for all SEN students.

Catcote is the right place for BESD pupils and provides access to the level of education and care they need and are fully entitled to.



With regard to the Public notice in the Hartlepool mail about the children being included into Catote Bolool. A few years ago, Catote Bohool had a really bad eputation for disruptue behaviourmongst children / young adults with behavioural problems, while I can inderstand that some of the future whate of Catoole bohool do have problems, e.g. bocial, home problems, some of these hildren, will have already been included from other schools in the town because they just dont want to be in

any school, therefore causing disruptive behaviour. my daughter has severe learning disabilities, and to protect her when she went into Catote school, she was placed is a unit next to the P. M. L D classroom. It worked well and we, as parents, were pleased about the progress she made. She has never seen any disruptive behaviour, never heard swearing, on seen volence in Cateote School, and that all down to the present teaching staff and Head teacher, I do worry about the large what of these new students, I would like my daughter to have free access in Catole school, as she does now, but feel that this may Nop, because of behaviour problems coursed by these new students

yours surcerely

Hartlepool Cleveland

5th March 2008

Dear Sirs,

PROPOSAL TO DESIGNATE CATCOTE COMMUNITY SPECIAL SCHOOL AS A SCHOOL ADDITIONALLY CATERING FOR PUPILS WITH BEHAVIOURAL, EMOTIONAL AND SOCIAL DIFFICULTIES.

3 1 MAR 2008

As a parent of a pupil currently in the Post 19 Group and formerly in the PMLD Unit, I am writing to voice my concerns regarding the above proposal.

Our children are very, very vulnerable and not able to understand or defend themselves in times of danger. As problems can arise very quickly concerning children with BESD with temper tantrums and sometimes violent and inappropriate behaviour, my son would not be able to react appropriately with any outbursts that may occur.

I have spoken to staff and parents and understand that this unit will be part of the school no matter what, despite this move <u>never</u> having been mentioned in any BSF Consultation Meetings that I attended.

At no point were parents aware that Mr Campbell had taken over as Headteacher of the A2L Unit or that there was a Service Level Agreement with the unit and we were very surprised to learn this in a parents' meeting held to discuss the proposed inclusion of BESD pupils.

I strongly object to the additional cost of having to purchase new portakabins to house these pupils. With the BSF site decision imminent, why build new portakabins now when they could be housed on the new proposed site in the next few months. What is the urgency?

Why does Hartlepool L.A. think that the inclusion of BESD pupils on the Catcote Site will work. If the authority look at the list of schools provided with all Statements of Special Educational Needs they will see that this has only happened in less than 10 schools out of the hundreds listed. Surely this is an indication that it is unlikely to work.

The school has proposed taking up to 30 pupils into the BESD unit. I understand that these children will have access to many areas of the main school. Will they be escorted 1:1 throughout the school? What happens if a child runs away or causes a commotion and there are not enough adults in the group to adequately guarantee the safety of others in the vicinity of any such incident.

The BESD children deserve and have a right to the best education possible, as do our children. However, I do not feel this has been looked at in adequate detail or with sufficient consultation with parents of children already attending the school.

Why has this unit not been attached to a mainstream secondary school. With so many complex needs of children in Catcote, surely these pupils could be encouraged to integrate much better within a mainstream school using those pupils as mentors.

I feel as a parent we would also need reassurances on a number of points:

The BESD pupils will not disrupt the day to day running of school, dominating any classes they are included in with current pupils at the school. If their behaviour takes up the majority of time of the class teacher, will they be removed or dealt with separately to allow the continuation of lessons.

The school will not be expected to take pupils excluded from mainstream schools due to behaviour problems, at a later date.

Staff will have assurances of support from the L.A. and parents will be kept fully informed.

As a parent I feel we have been let down by the L.A. and Catcote School. We do not want the school to recede to the point where 'if in doubt, send them to Catcote and they will cope'.

Yours faithfully,



| Adrienne Simcock Children's Services | 1 1 MAR 2008 | | |
|---|--------------|------------|--|
| Civic Centre Victoria Road | | Hartlepool | |
| Hartlepool | | 10/03/08 | |

Dear Ms Simcock

I would like to register my objections to the proposals listed in the public notice in Hartlepool Mail.

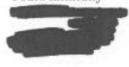
My Son has been a student at Catcote School for several years and we have seen the school go from having a terrible reputation with many problem pupils, to one with which we are proud to be associated.

If these proposals are allowed to go ahead a lot of hard work done by the present Head teacher and staff will have been wasted.

Catcote School is now a happy, safe place for students to be, but I am worried that if SEBD pupils come into school they will quickly be followed by PRU pupils and this will drag Catcote back a good 10 yrs.

In defence of these youngsters, do they really want to be part of a 'Special School'? Would it not be better for them to be catered for within mainstream secondary schools where all facilities ie; sports hall, science labs etc are available instead of transporting pupils around?

Yours faithfully









Ms Adrienne Simcock Director of Children's Services Civic Centre Hartlepool TS24 8AY E

1 7 MAR 2008

March 5th, 2008

Dear Ms Simcock

Having seen the Public Notice that was issued with regard to incorporating 30 children with BESD into Catcote School in September 2008 1 felt compelled to present my objection and reasons of great concern to you.

Firstly, in my opinion, the unexpectedness of; timing of; and the low-key way in which the Public Notice was issued was unacceptable. It would seem that the Public Notice was issued in such a way that it would come to the attention of as few people as possible. My own son is due to start at Catcote School this September and I had no idea that such a proposal was being made to come into effect so soon. If I had been aware of the imminence of the inclusion of the children with BESD in to Catcote School, this would have influenced my choice of Secondary School for my son. During the Building Schools for the Future consultation I saw the proposal that children with BESD may be accommodated on the same site as the children who attend Catcote School. I voiced my concerns about the proposal then. However in this scenario, which would happen 3 or 4 years in the future, the BESD children would have purpose built accommodation which would suit their particular needs, with (hopefully) their own play areas, dinner hall, gym, science labs etc. to ensure their separation from the very vulnerable children who attend Catcote School.

This brings me to my second concern. As these children with BESD need to be kept as separate as possible from other groups of children for everyone's safety, why on earth has it been decided to accommodate them on the same site as the most vulnerable children in Hartlepool? This defies logic. Obviously the children with BESD deserve the best possible schooling in the best possible environment for them (as well as every other child in Hartlepool). At present the children with BESD badly need new classrooms. Why build them temporary classrooms at Catcote School? These children will be housed in the classrooms for a number of years. Why can't suitable permanent classrooms be built on the site at which they are presently accommodated? There are various facilities, notably a Sports Hall, for their use already on this site. Alternatively, for the children with BESD to prepare for life after school, surely they would be better housed within and integrated into a mainstream school. Catcote School is a small, protective community for children with very severe and complex learning disabilities. It is far removed from the reality of the outside world and I don't see that much would be achieved by integrating the children with BESD into such a site.

Thirdly, as far as I am aware there are very few examples of schools that accommodate both children with complex needs and learning disabilities with children with BESD on the same site. It would appear that this is either because other schools have tried and failed to integrate the two groups or that we are going to have an experimental situation at Catcote School that I am extremely unhappy about my son taking part in. Mr Campbell of Catcote School has suggested abolishing morning break in September in order to keep the two groups of children separate. This indicates how incompatible he feels both groups of children to be. I feel that abolishment of break will be detrimental to the well being of both sets of children. A whole morning is a very long time for any child to work through and I would expect to see loss of concentration, tiredness and irritability if they are deprived of 10 minutes of fresh air and freedom from the classroom.

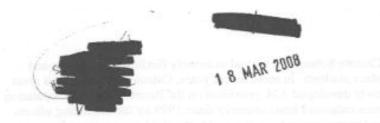
Fourthly, I am concerned about the very little choice I have about which Secondary School to send my son. My local school is High Tunstall and having visited I was really appalled by the attitude of . She made it clear that my son would have to fit in with the way the school ran, there would be no concessions because of his extreme learning disability, autism and physical disabilities. She told me High Tunstall was an "academic institution not a baby sitting service"; that he wouldn't get adequate supervision "because they couldn't afford it"; and didn't believe me at first when I told her he had no speech and extremely limited communication skills. obviously had no idea what a severe learning disability was or that "inclusion" means everyone. This makes me wonder if the people who have made the decision to accommodate Catcote and BESD students on the same site have even met any of the children concerned. There will always be a number of children like my son who need to access schools like Springwell and Catcote, who can't cope with a mainstream setting. We need a local school in Hartlepool ie. Catcote that such children can attend without fear of physical, emotional or verbal abuse by other children. I know adverse events such as chair throwing, bullying and extreme levels of swearing can happen in children with BESD and I think mainstream children would better deal with this unsavoury behaviour (although they shouldn't have to, but let's be realistic) than the children who currently attend Catcote. (I have also visited St. Hild's and was much more impressed with the attitude of the staff towards children with learning disabilities but still found it inappropiate for my son).

High Tunstall School currently has a unit purposely built to accommodate children with SEN. This was supposed to facilitate the inclusion of SEN children into mainstream education. As far as I am aware this has not been a success for children with complex needs. (Could these rooms be used to house children with BESD?) After the failure of this experimental setup I am very wary of your current proposal to integrate children with BESD into the Catcote site. I don't think there was enough understanding, forsight and planning at High Tunstall and I'm very much afraid more mistakes will be made at Catcote.

Finally, I am appalled that Catcote School appears to be being held to ransome with the threat of receiving none of the money from BSF unless it accommodates the children with BESD immediately from September. I oppose the Public Notice and do not want to see children with BESD on the Catcote site now and will oppose similar proposals in the future unless I am convinced that these children are kept isolated from children with complex needs and severe learning disabilities.

Yours sincerely,





Sedgefield. Co. Durham

15 March 2008

Dear Adrienne,

I wish to express my strong disapproval of plans to relocate BESD provision in Hartlepool to the Catcote School site by September 2008. I have grave concerns and offer the following points for your consideration.

Students currently educated at Catcote are there because of learning difficulties rather than behavioural problems. Many of them also have physical disabilities, making them very frail and vulnerable. Many students move around school in wheelchairs or with other aids to mobility, such as walking frames. We also have large numbers of autistic students, for whom stability and a peaceful environment are paramount.

Adding students with behavioural difficulties to this mix would seem to be asking for accidents to happen. The volatility of BESD students is well known and their ability to empathise with students with learning difficulties is not always very marked. From a Health and Safety point of view, therefore, this proposition seems to be a non-starter.

Furthermore, there has been very little consultation with any of the people who will be affected by these plans. The notification certainly came as a surprise to the staff at Catcote and the students remain unaware as yet that changes may be coming about. Moreover, parents of current and future Catcote students have not been properly consulted and there has been a complete lack of information to individual homes in the borough. As I understand it, every householder should have been notified. This cannot be the case if the information is merely published in the local press and around the school premises. The authority seems to be in default, therefore, as far as **public consultation** is concerned.

The proposed relocation of BESD provision from the Brierton site to Catcote seems to have been placed under the Building Schools for the Future banner. However, moving students from a perfectly serviceable building to a series of Portacabins can hardly be seen as looking to the future. Such provision would be **unfit for purpose**. Apart from being, by its very nature, a temporary measure, the lack of robust security in such buildings would mean those students would be deprived of access to the modern technology their education deserves.

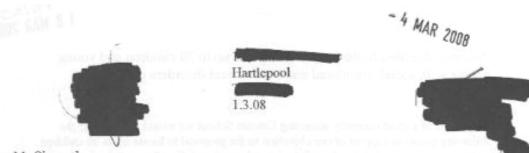
Catcote's buildings and grounds are stretched to the limit as it is, providing as it does a secure and stimulating environment for students from the age of 11 to adulthood with a very wide range of physical and educational needs. Additional students and their staff will place extra burdens on areas such as the dinner hall, sports facilities and car parking. Surely the authority should be looking to provide appropriate, modern accommodation for its BESD students rather than forcing them to become a less than welcome addition to an already over-stretched site.

Over the last 10 years, Catcote School has proved extremely flexible in accepting and supporting difficult-to-place students. In more recent years, Catcote has provided a great deal of support to the newly developed A2L provision on the Brierton site. The reputation of Catcote School has been enhanced immeasurably since 1999 by the unstinting efforts of the staff, governors and management team to provide the right environment for our students. We were proud and delighted to secure specialist status in 2007 as a Business and Enterprise College. We do not want Catcote School to move back to a situation where our intake is so diverse that we are criticised as we were by Ofsted in 1999 for not having a clear **admissions policy**. Bringing students with BESD into a school whose primary purpose is to cater for students with learning difficulties would cause just that situation to arise. In addition, no mention has been made of those students in the PRU category. Members of the public are entitled to know what provision will be made for those young people, too.

Your notification, coming as it did towards the half-term boliday with a very short period for response, has left many of us concerned at the proposal, puzzled by the logic behind it and angry at the lack of consultation about an issue which is fundamental to the lives and futures of so many. Let us hope that our voices will be heard in time to prevent a situation which will be beneficial to no-one concerned and that a more sensible, forward-looking solution will be found to providing education for all Hartlepool students, whatever their needs.

Yours sincerely,

Catcote School)

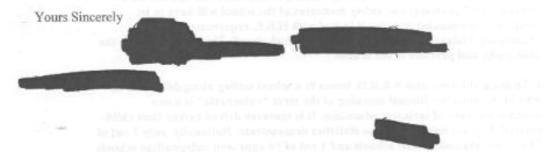


Dear Ms.Simcock

I refer to your letter dated 29th February in which you informed us that the consultation process into radical changes to the student population of Catcote School was in its final stages.

To suggest that the Building Schools for the future meetings constituted a clearly defined and transparent consultation process into specific proposals for Catcote School is grossly disingenuous. I attended all consultation meetings at Catcote School and was already in possession of the consultation document. During these meetings the current scenario of housing up to thirty children with SEBD at the Catcote site as it stands, was **never** discussed. Hypothetical descriptions of a 'Learning Village' which could include provision for children with SEBD, were explored. During these discussions I and other parents voiced concerns about this possibility. We were informed clearly and memorably by Sue Johnson that this group of children would be located in a separate building on the intended site. This point was reiterated several times by Ms Johnson. On Friday 19th October I met with Margaret Holdforth and Denise Sutton from 'Parent Works' where I clearly identified my concerns regarding these proposals. Again the current scenario was not acknowledged. I am not sure which I am more perturbed by: the proposal itself or the way it has been hidden inside the "Trojan Horse" of Building schools for the Future.

We will be placing our concerns in writing in due course and would very much appreciate the opportunity for a public debate on the issues surrounding this matter.



1 8 MAR 2008

Parental objection to the proposal to place up to 30 children and young people with social, emotional and behavioural disorders at Catcote School.

As parents of a child currently attending Catcote School we would like to raise the following points in support of our objection to the proposal to locate up to 30 children and young people with behavioural, social and emotional disorders at the school.

1. The way in which this potential radical change to the school was disclosed gives no confidence that the change process itself would be managed in a transparent way. At Building Schools for the Future consultations this proposal was not discussed. Only the hypothetical possibility of children with S.E.B.D. being co-located onto a new site in a separate building was considered. At these meetings myself and other parents voiced our concerns at this, only to be reassured by Mr.Paul Briggs and Ms.Sue Johnson that this group of pupils would have totally independent provision. The current proposal to locate the pupils at Catcote School was never discussed at this or any other time with parents. I feel that the opportunity to involve parents in a real debate was deliberately ignored. It has also now come to light that the Headmaster of Catcote School, Mr Campbell, is also the Headmaster of Access to Learning and has been for some time. Indeed, parents had no idea that Catcote school had any affiliation to Access to Learning. This is yet another crucial piece of information those in authority have denied to parents. The public notice was published in the Hartlepool Mail one day before the half term holiday and within the six week period given is the Easter holiday. This means that effectively the time for response was reduced significantly.

2. Placing these two groups of children with such diverse needs is highly inappropriate. School discipline will require new measures to deal with the different challenges that staff (and indeed other children) will have to face. This in turn may mean that security (many S.E.B.D. establishments operate on a "locked door" protocol) and safety measures at the school will have to be completely overhauled to bring it in line with H.S.E. requirements for "Managing Violence and Aggression in the Workplace". This will alter both the philosophy and practice of the school.

3. To place children with S.E.B.D. issues in a school setting alongside children who fit the more traditional meaning of the term "vulnerable" is a one dimensional view of inclusive education. It is resource driven rather than childcentred. It is not best practice as statistics demonstrate: Nationally, only 2 out of 73 non-maintained special schools and 1 out of 96 approved independent schools have an arrangement such as the proposal in Hartlepool. Initiatives such as this are fraught with problems, both educationally and socially. Some local authorities have found themselves having to reverse such decisions because of negative outcomes e.g. City of Aberdeen 2004.

The community of the school will be irrevocably altered-it will effectively become a new school with a totally different culture and ethos. Christine Lowson

From: Sent: To: Subject:

22 March 2008 10:03 pcp Catcote School

Dear Christine Lowson

I wish to object to the children excluded from mainstream schools being sent to Catcote School.

The children attending this school are the most vulnerable children in the town, and the least able to cope with changes.

I think that the slogan "Every Child Matters" is excellent, and I believe it should especially include those with special needs.

Regards



It is important to stress that these objections are not based on exclusivity or demonising children with S.E.B.D. This attempt to bring together children of very different needs and propel them into a single, catch-all setting takes no account of the difficulties involved in managing such an environment. It is a bargain-basement version of inclusive education and is without respect for either the children who currently attend Catcote School or those whom the Children's Services Department would place there.

We are weary of the empty rhetoric that has accompanied much of our daughter's experience of secondary education in Hartlepool and are not prepared to let her suffer because of an ill-conceived scheme being forced through by local authority officers who are dismissive and patronising when forced to confront the concerns of parents whose children will be directly affected by their actions.

If this proposal becomes reality we will be left with no choice but to seek different provision for our daughter.

Yours Sincerely,

| Hartlepool | |
|------------|--|



Objection to the proposal to place up to 30 children and young people with social, emotional and behavioural disorders at Catcote School.

I am sure that other parents who have contacted the Children's Services Department to register their objections to the proposed changes to Catcote School will have all brought up similar reasons why this scheme should not take place:

The consultation exercise that was buried so deep in the Building Schools for the Future project that <u>not one</u> parent from Catcote School knew that it was taking place, on this particular site.

The haste with which this huge change has been timetabled (Sept.2008).

The security and safety problems, that will result from placing B.S.E.D. children in the same environment as children with multiple and complex difficulties, many with physical disabilities.

The inappropriateness of accommodating young people in make shift buildings prior to the building schools for the future, which as we know is approximately 2012.

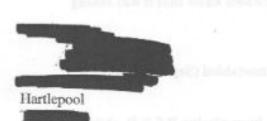
If this change takes place Catcote School will no longer exist: it will, to all intents and purposes, be a different school.

From this list it is obvious why parents have no trust in those who are proposing this change as every attempt has been made to allow this to happen without an open and honest debate.

I have an extra, more personal reason for objecting to this proposal. I am the foster carer for a boy aged 17 years who has Duchene Muscular Dystrophy and who currently attends Catcote School. My foster child was removed from his birth family and at present is under a full care order. At least one of siblings is affected with behavioural, social and emotional disorders. He has witnessed first hand some of the behaviours that can be displayed by these young people. Despite his many negative life experiences, he is a very sensitive, kind and gentle young man, who is easily upset by the actions of others even when they are not directed at him.

Given his background and the already frailty of his progressive condition I am not prepared to allow my foster child to be part of what is, at best, an educational experiment. When High Tunstall school was no longer able to meet physical and medical needs, a necessary but reluctant move to Catcote was made. Not without prior in depth discussions on how best to meet his future needs. I feel Catcote School will not be the same school I carefully chose for this young person. If this proposal becomes reality I may have to look closely at alterative suitable provision for him. I hope that Hartlepool Borough Council and the Children's Services Department will take this opportunity to rebuild the trust that has been lost because of the way that this proposal has been made public and at least postpone the project until a <u>real</u> consultation process has been undertaken.

Yours truly,



as the product produces, that will result from planting B.S.B.R. cl



I am writing in response to the proposal to relocate the current provision for BESD students in Hartlepool from the Brierton site to the Catcote School site.

Having worked at Catcote School for the past thirteen years as a teacher and member of the senior leadership team, I am currently deputy head teacher. I consider it a privilege to have been part of the workforce that has transformed Catcote, from being in 'special measures', into what is now considered to be an outstanding school. It is with this background that I would, wholeheartedly, support the proposal.

I have listened to the concerns, surrounding the move, that have been expressed at public meetings and from speaking to carers, and many have been satisfied with assurances that I have given. The fundamental issue surrounding the move is how the move and co-location would be managed. I feel able to give these assurances since it is my belief that, given the current management situation at Catcote, it would be carried out sensitively and effectively. We should not be preoccupied on how things used to be at Catcote, when EBD students were on our role, or how carers felt let down with the provision at High Tunstall. No-one can disagree that Catcote is a very different school to what it used to be, and I would argue that it is in its present situation due to the way that it has managed change.

Last academic year, 87 mainstream students accessed learning at Catcote. The number this year has increased and includes BESD students. All students are given the opportunity to succeed, are treated with respect and given the support and a learning environment that is not always available in their own school. We have not discriminated against those at A2L and they are making excellent progress.

BESD students have lunch at Catcote everyday. They arrive after our students have been served but leave while our students are still eating. I supervise the dining hall and report that there have been no incidents between BESD and Catcote students.

PMLD and some ASD students are currently taught in discreet classrooms but do access other areas of the school. This model, it is believed, best meets the needs of those particular students. It is proposed that the BESD provision should be seen as a school within a school with separate classrooms and entrance etc., not dissimilar to the current PMLD and ASD provision!

Co-location with BESD, Springwell School and other community groups, form our vision for Building Schools for the Future. To have the opportunity to work alongside BESD in September would give us the opportunity to create a period of transition before BSF plans are finalised.

It is my belief that the proposal will not have an effect on the learning or safety of our students. I have illustrated that BESD students already access learning, have lunch and regularly visit our Coffee Shop. I do, however, understand the concerns that carers may have. However, having experienced the unacceptable manner in which the EBD students were included in the past, I could never support the proposal if I thought that the same scenario would be repeated.

We have had your assurance that the move will be supported financially and that the accommodation will meet the needs of the students in question. Given this assurance, I would like to give my own assurance that the impact on our students will be minimal, and that the BESD students will become part of the caring, supportive community of which we are so proud. This will lead to improving their self esteem and confidence.

The overall effect of these changes will be to create a coherent learning environment for all statemented students, in which teachers can meet the needs of all students as individuals.

To conclude, in my professional opinion, following careful and detailed planning, the proposed move should take place at the earliest opportunity. Please contact me if you would like me to expand on or clarify any of the points that I have made.

Yours sincerely



Peter McIntosh From: Christine Lowson Sent: 25 March 2008 15:15 To: Peter McIntosh Subject: FW: Response to public notice regarding redesignation of Catcote School

Importance: High

From: Liz Eddy On Behalf Of Adrienne Simcock Sent: 25 March 2008 15:13 To: Christine Lowson Subject: FW: Response to public notice regarding redesignation of Catcote School Importance: High

Liz Eddy Directorate Support Officer Children's Services Department Hartlepool Borough Council

Telephone 01429 523733

From:

Sent: 25 March 2008 08:16 To: Adrienne Simcock Subject: Response to public notice regarding redesignation of Catcote School Importance: High

Dear Mrs Simcock,

I am writing as a teacher at Catcote School to express my support for the proposal to redesignate Catcote School and to bring the BESD students currently at A2L to the main Catcote site. As was made clear at the consultation meetings these students are those with SEN statements, and by all accounts they have received a bad deal in the Hartlepool system thus far.

I believe the management structure at Catcote is extremely strong, as borne out by the 2006 OFSTED report, and during his time as head teacher at Catcote Mr Campbell has fought hard for the standards and quality of education that the current Catcote students now enjoy, and it is inconceivable that he would allow these high standards to slide again. With the support of Mr Bloomfield I have every confidence that the Catcote system will be able to deal with these students.

I got the feeling at the recent meeting attended by Sue Johnson and Paul Briggs that parents who attended the meeting were impervious to any reasoning and that any response to their questions was dismissed out of hand. It was perhaps a pity that no parents of the BESD students were present at this meeting. It would be a great shame if the BESD students were to be once again moved to a another unsuitable site because a small number of vociferous Catcote parents had succumbed to NIMBYism and narrow mindedness, and who clearly demonstrate a lack of confidence in the Head teacher and management of Catcote School.

BESD students currently come to Catcote for lunch, several students are in classes supporting the teacher, and a number attend trampoline lessons on a weekly basis, and problems are no more than encountered by Catcote teachers from some current Catcote students. Indeed there are a handful of Catcote students who are worse than those who have left Catcote for A2L in the past, and the integration of the BESD students into a "Greater Catcote" will provide the head teacher and management with a greater flexibility in placing the students into the most appropriate group and enable students to access a wider range of activities.

25/03/2008

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rage 2 of 2

I sincerely hope that the narrow, almost selfish views of a few parents are not enough to sway the overall view which I believe is strongly held by a majority of people who have an interest in the success of Catcote School and the provision of an excellent education for all students with Special Educational Needs in Hartlepool.

Kind Regards,

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Please consider the environment before printing this e-mail.

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25/03/2008

Peter McIntosh

 From:
 Christine Lowson

 Sent:
 25 March 2008 15:14

 To:
 Peter McIntosh

Subject: FW: Catcote School Re-designation (BESD)

From: Liz Eddy On Behalf Of Adrienne Simcock Sent: 25 March 2008 15:13 To: Christine Lowson Subject: FW: Catcote School Re-designation (BESD)

Liz Eddy Directorate Support Officer Children's Services Department Hartlepool Borough Council

Telephone 01429 523733

From: a Sent: 25 March 2008 13:51 To: Adrienne Simcock Subject: Catcote School Re-designation (BESD)

Dear Adrienne

As a member of the Leadership Team I would like to formally offer my full support to the redesignation of Catcote School to incorporate students with BESD.

Having worked with these students and supported them both at Catcote and A2L I feel very strongly that this is the right place for them to access the level of education and care that they need and are fully entitled to.

As a parent of a Post 19 student here at Catcote I have no worries whatsoever about the safety of my son as the level of classroom management I have witnessed is superb and the behaviour of the students is very good and improving considering the challenges they encounter in every day life as a student experiencing difficulties with BESD.

I will continue to support these students to the best of my ability.

Best regards

School Business Manager

Catcote School Catcote Road Hartlepool

25/03/2008

5.2 APPENDIX 2



PUBLIC NOTICE

PROPOSAL TO DESIGNATE CATCOTE COMMUNITY SPECIAL SCHOOL AS A SCHOOL ADDITIONALLY CATERING FOR PUPILS WITH BEHAVIOURAL, EMOTIONAL AND SOCIAL DIFFICULTIES

Notice is given in accordance with section 19(1) of the Education and Inspections Act 2006 that Hartlepool Borough Council intends to make a prescribed alteration to Catcote Community Special School, Catcote Road, Hartlepool, TS25 4EZ from 01 May 2008.

Catcote school is currently designated as a secondary school for pupils with moderate, severe and complex learning difficulties. The Council is proposing to designate the school to additionally admit up to 30 pupils in the age range 10 years to 17 years who have statements of special educational needs with learning difficulties associated with behavioural, emotional and social difficulties (BESD).

BESD pupils are currently educated at the Access to Learning site, located at Brierton Lane, Hartlepool TS25 4AG. The Council proposes to accommodate these pupils on the Catcote site by no later than 01 September 2008.

This Notice is an extract from the complete proposal. Copies of the complete proposal including those required in another language or format, can be obtained by contacting Christine Lowson, BSF Project Administrator, on (01429) 523754 or by writing to the address below. Information relating to these proposals can also be found on the Council's website at: www.hartlepool.gov.uk/schoolscapital/bsf

Within six weeks from the date of publication of this proposal i.e. by no later than 25th March 2008, any person may object to or make comments on the proposal by sending them to The Director of Children's Services (ref CL/BSF), Hartlepool Borough Council, Civic Centre, Victoria Road, Hartlepool, TS24 8AY.

Signed: Adrienne Simcock, Director of Children's Services, Hartlepool Borough Council

Publication Date: 12th February 2008

CABINET

14th April 2008



Report of: Joint report of Director of Children's Services and Director of Regeneration & Planning Services

Subject: Young People Specialist Substance Misuse Plan 2008/09

SUMMARY

1. PURPOSE OF REPORT

The report outlines the detail and content of the Young People Specialist Substance Misuse Plan 2008/09 and seeks the support of Cabinet to the activity and performance management framew ork.

2. SUMMARY OF CONTENTS

The report outlines the requirements to produce an annual Plan and the performance arrangements locally and regionally. It also provides details of the priorities for 2008/09 to deliver an effective treatment service for young people.

3. RELEVANCE TO CABINET

The Young People Specialist Substance Misuse Plan is a cross-cutting plan covering health, children's services and community safety issues.

4. TYPE OF DECISION

Non-key

5. DECISION MAKING ROUTE

Cabinet 14th April 2008

6. DECISION(S) REQUIRED

To support the activity and performance management framew ork of the Young People Specialist Substance Misuse Plan 2008/09.

Report of: Joint report of:Director of Children's Services and Director of Regeneration & Planning Services

Subject: Young People Specialist Substance Misuse Plan 2008/09

1. PURPOSE OF REPORT

1.1 The report outlines the detail and content of the Young People Specialist Substance Misuse Plan 2008/09 and seeks the support of Cabinet to the activity and performance management framew ork

2. BACKGROUND

- 2.1 Nationally, the Department for Children, Schools and Families (DCSF) has expressed concern about the provision of substance misuse services for young people and has agreed that the National Treatment Agency (NTA) should assume responsibility for setting standards and monitoring performance, utilising methods similar to those for adult services.
- 2.2 Each Children's Trust (i.e. Children & Young People's Strategic Partnership in Hartlepool) is therefore required to submit an annual substance misuse needs assessment and annual plan, which will be review ed by a Regional Panel and monitored quarterly by the NTA, who will report back to the DCSF.
- 2.3 This year in Hartlepool, an expert group, comprising staff from Children's Services and led by the Safer Hartlepool Partnership's drugs lead officer has been established. Until now, the Safer Hartlepool Partnership has been responsible for both adult and young people's substance misuse services.

3. YOUNG PEOPLE SPECIALIST SUBSTANCE MISUSE PLAN 2008/09

- 3.1 The Young People Specialist Substance Misuse Plan 2008/09 attached at **Appendix 1** consists of a summary of the needs assessment, a treatment map and specific planning grids.
- 3.2 An early submission of the Plan has been reviewed by the NTA and feedback provided. The attached Plan has subsequently been updated.

- 3.3 The current young people's specialist substance misuse service is delivered by HYPED, an integrated service covering all tiers of intervention and operating for over 6 years in Hartlepool. The service is achieving all of its national performance indicators and is rated green by NTA. On this basis, there is no immediate need to change the model of delivery.
- 3.4 The priorities for 2008/09 are contained in the planning grids included within Appendix 1. These include additional activity required to integrate HYPED with other Children's Services programmes and initiatives, such as Parenting, Targeted Youth Support and family support. There is also a need to improve joint working through integrated care planning arrangements; increased staff training on pathways, referrals and protocols; improved data sharing and monitoring to ensure effective and successful support is provided to the individual young person and their family.
- 3.5 The other main priority is to determine the governance arrangements for future planning and delivery of the specialist substance misuse service for young people. This will involve consideration of the transfer of responsibility for planning and commissioning services from the Safer Hartlepool Partnership to the CYPSP.
- 3.6 Performance will be monitored by the CYPSP Performance Management Group.
- 3.7 The Plan was considered by the Children & Young People's Strategic Partnership (CYPSP) at its meeting on 26th February 2008 and the Safer Hartlepool Partnership at it's meeting on 12th March 2008. Both Partnerships approved the Plan.
- 3.8 The responsibility for the Plan and associated services, lies with the Children's Trust (CYPSP) and Director of Children's Services, so the Chair of the Trust, Director of Children's Services and chair of Safer Hartlepool Partnership have signed the Plan and submitted it to the NTA on 31st March 2008, as required.
- 3.9 Between now and September 2008, there is an expectation that the needs assessment will be refreshed, with specialist substance misuse treatment embedded in the Children and Young People's Plan by September 2008.

4. **RECOMMENDATIONS**

4.1 Members are asked to confirm their support for the Young People Specialist Substance Misuse Plan 2008/09.

Contact officer: Chris Hart Planning and Commissioning Manager

Background Papers National drug strategy NTA guidance

APPENDIX 1

Partnership name – HARTLEPOOL

Young People Specialist Substance Misuse Plan 2008/09

1. Introduction

- 1.1 An expert group of Children Services officers assisted by Safer Hartlepool Partnership (SHP) officers have met regularly to produce the needs assessment and Plan for 2008/09
- 1.2 This group have considered information provided through the national data base (ndtms), local data from POPPIE, Children's Services and Health data and there has been additional research, questionnaires and focus groups
- 1.3 Local consultation and participation involving young people, service users parents and substance misuser's will be included in the regular programme of interaction through BIG Voice, Youth Parliament, HBC Diversity Challenge Group etc.
- 1.4 The YP Treatment Plan was considered by Safer Hartlepool Partnership, the Children and Young People's Strategic Partnership (CYPSP)/Children's Trust and the Performance Management Group. They will take operational responsibility for appropriate actions planned, with joint reporting to the CYPSP and SHP until any new governance arrangement is agreed.
- 1.5 Needs assessment will continue through the expert group and ensure that substance misuse is further detailed and embedded into the current review and update of the Children and Young People Plan.

2. Needs Assessment

- 2.1.Hartlepool substance misuse provision was assessed against the NTA Essential Elements framework to ensure there is comprehensive provision as follows:
 - <u>Tier 1</u>- Locally all schools have policies in place, and a mechanism for responding to drug related incidents that potentially triggers a CAF referral. There is regular training for school staff, front line workers and voluntary sector. The Healthy School targets are being met, substance misuse is delivered through PSHE, in youth and targeted settings. In addition through the Drug Education Team, Drug Prevention and HYPED there are regular campaigns, events and information activities. Programmes are in place to offer advice and information to all children and young people. Schools are now able to refer into the Straightline programme and have mechanisms for
 - <u>Tier 2</u> This level of activity takes place through a number of agencies including Straightline (an alcohol initiative). To ensure skilled staff are able to work effectively to advise and offer brief interventions there is an annual programme of multi disciplinary training. Through a variety of programmes, drop in and campaigns Hartlepool agencies offer advice, screening and brief support for to over 800 young people and some of their families.
 - <u>Tier 3</u> The specialist service for substance misuse (HYPED) is a multi-agency team with specific link workers into YOS and SSD. At the moment HYPED can

support 200 individuals at Tier 3. Protocols are in place for drug prescribing through the Substance Misuse Service and have been tested with small numbers usually only one under 18 years Class A drug users per year, sometimes none. Alcohol misuse is of increasing concern. With limited treatment options available in Hartlepool for adults or young people it has restricted the demand for support. Alcohol treatment will be available from April 2008.

Recently there has been new clinical governance guidance from NICE for substance misuse and as a priority all services are required to audit current practice and respond as appropriate to new guidance.

<u>Tier 4</u> – Hartlepool has also been fortunate in having very few young people needing this level of intervention for drug use. Residential and Inpatient services for drugs have not been utilised often but there are arrangements and resources available to spot purchase in accordance with individual need rather than block booking a facility.

- 2.2 In addition the following are also in place, Needle Exchange via Addaction; Family support through HYPED Family Worker, comprehensive healthcare from a dedicated nurse within HYPED who links with School nurses, Health Promotion initiatives, GUM and Teenage Pregnancy Project.
- 2.3 Specialist Substance M isuse services for young people in Hartlepool are delivered via HYPED, who were established over sic years ago, as an integrated team offering the widest range of services across Tier 1 4. They submit data through ndtms and have been assessed on an annual and quarterly basis by GONE against Every Child M atters substance misuse framework. HYPED are rated green, are delivering against all their key performance indicators.
- 2.4 Using the Treatment map 2006/07 ndtms data confirms that 99% of all under 18's entering treatment are dealt with in the HYPED dedicated young people service as required. Numbers into HYPED are steadily increasing at December 2007 caseload stands 108
- 2.5 The map illustrates that the HYPED model of a specific and integrated service operates well. Access is speedy waiting times are well within the national target of 3 weeks. Whilst the rate for planned discharges is acceptable at 79% a priority is to increase that level and ensure that planned discharge also ensures positive outcome for the individual.
- 2.6 One of the performance indicators requires 20% of referrals to come from agencies supporting vulnerable groups i.e. YOS, LAC, SSD. This is exceeded with YOS including RAP make the majority of referrals (56%). They have particularly strong links through a second e into HYPED Team. This member of the Team participates

fully in YOS case management, determining statutory and RAP interventions, plans, reviews and ensures an effective exit strategy back from HYPED.

- 2.7 There are positive levels of self referrals and from other sectors across the system but none directly from GP's referrals. This will be addressed through changes in PCT commissioning for April 2008.
- 2.8 There is an anomaly in regard to referrals from Children's Social Care. National data indicates in 2006/07 10 young people in the care system were assessed as needing a substance misuse intervention but there is no detail of them receiving support. This will be further examined in regard to data recording and consideration given to a dedicated worker similar to the YOS link worker.
- 2.9 The 2007/08 performance returns from NTA confirms that HYPED is meeting all the assessment indicators bar the percentage of referrals from Children Services:
 - Comprehensive range of service all modalities used
 - Care Planning and overall waiting times 100%
 - Planned discharges 79%
 - Referral pathways Referred by children and families, LAC and education is only 2% but needs to be over 20%. This may be a data coding issue for referrals as YOS accounts for 56% of referrals to HYPED. It is also evidence that the Children Social Care link into HYPED needs strengthening again.
 - Injecting BBV and health care assessment -100%.
- 2.10 Analysis through the expert group highlighted HYPED contact with 12 Families and the potential for integrating HYPED family work with other programmes such as FIP is a priority. The FIP project is using CAF as an assessment tool for those children and young people in the FIP families who have additional need but don't currently get access to services. Using the CAF can facilitate the sharing of appropriate information across all agencies involved with these families to ensure that relevant services respond, any gaps in service are closed and duplication of effort is reduced. It also supports the instigation and maintenance of effective communication channels between all concerned (including the family). It is of local interest to strengthen information sharing, establish monitoring systems and integrate the various family support initiatives to be more effective and better use expertise and resources.
- 2.11 The improved care coordination and development of family projects around substance misuse is an opportunity to ensure that the young substance misuse retains or can be reintegrated into the additional support network that a family can bring. This has a greater significance in Hartlepool where wide extended family links remain.
- 2.12 The planning associated with the implementation of the Common Assessment Framework (CAF), Information Sharing in Practice (ISP, Lead Practitioner (LP) role

and Team Around the Child (TAC) processes in Hartlepool were facilitated by a multi agency group which included representation from HYPED. This group has now been disbanded and will be rep[laced with time limited task groups that will look at the monitoring and evaluation associated with the implementation of the new processes, quality assurance, the impact of lead professional budget holder, CAF, etc.

2.13 The focus of CAF implementation in Hartlepool has been very much about using the windscreen approach promoted within the CWDC guidance. Hartlepool began the roll out of CAF in November 2007 and to date 90 CAFs have been completed. CAF has been promoted locally as the low level assessment tool to fill a gap that exists in terms of access to service for some vulnerable children and young people to ensure they are identified and receive early intervention from low level preventative services and experience better outcomes longer term than those whose situations become crisis led.

Hartlepool has chosen to adopt the TAC approach developed by ISA trailblazers, to respond quickly, provide an effective communication channel for all concerned and to keep the individuals situation from deteriorating.

There is acknowledgement that some children and young people may end up requiring a higher level of support from specialist service i.e. CAMHS, HYPED, Youth Offending or Social Care. The assessment used in these situations which may be statutory instruments e.g. ONSET and ASSET are not replaced by CAF. However CAF and the LP can support the seamless transition into these services and work is ongoing to determine where CAF fits with these specialist assessments.

CAF is acknowledged across the Children and Young People's workforce as being the main vehicle/mechanism for supporting children and young people with additional needs as well as the link between CAF and specialist assessments. Hartlepool Intervention Project are replacing their existing referral forms with CAF as are other initiatives such as Swift and Easy Access and targeted Youth Support.

2.14 Hartlepool has a robust Integrated Working and Information Sharing (IWIS) training programme in place to cover the whole change management process involved with CAF and the Lead Practitioner role (lead professional). The training is delivered on a modular basis and to date has delivered 4 modules; Integrated Working, Information Sharing in Practice, The Common Assessment Framework and Lead Practitioner/Team Around the Childe. The training is delivered on a multi agency basis and open to all children and young people workforce. HYPED workers have accessed the training with more planned for April/May 2008. Children's Services are in the process of identifying how many workers are still to receive training on each of the modules.

Hartlepool are also considering the procurement of an e-learning package for the purposes of raising awareness of the above developments and facilitate induction and refresher training. Access to the programme will compliment the existing multi agency training plan and reach practitioners who otherwise would find it difficult to attend sessions.

2.15 Gainford House has increased accommodation options for young people. Investment has been increased to ensure higher levels of support and additional drug specific workers have been introduced into the facility to offer specialist drug advice, to increase the skill base and strengthen the conduit into treatment. There is however a waiting list and 'move on' with associated floating support is an issue.

3. Profile of Hartlepool young drug user

- 3.1 Using HYPED Tier 3 data to ndtms the main drug of use is alcohol (62%), followed by Cannabis (30%) with only 2% using Heroin. Even when considering second and third choice drug Hartlepool is fortunate that there does not appear to be a large number of under 18's using heroin, cocaine, crack.
- 3.2 There are however increasing numbers of 18 year olds presenting to adult treatment services addicted to opiates. The initial findings of research to investigate further has indicated that young people from 15 or 16 years are experimenting with heroin but management of the issue is not a cause for concern until they are over 18 years of age.
- 3.3 There were 89 individuals in specialist treatment 2006/07. More males (75%) in treatment than females (25%) all are White British.
- 3.4 There is a representative gender and age balance similar to national profiles and in line with other children focussed services. In 2006/07 14% of the caseload were 12, 13, or 14 years the majority 15 and 16 years (50%), 24% aged 17 years and 9% aged 18 years.
- 3.5 There do not appear to be any geographical barriers with service data illustrating access from across the town. Individuals are from all wards in the town predominantly from the centre of the town in the Stranton, Grange, Jackson and the Owton area.
- 3.6 In common with other Hartlepool services there are few service users from diverse ethnic backgrounds(in previous years less than 1% of caseload) but HYPED do maintain regular contact with the Salaam Centre, Hart Gables, disability groups, Centre for Blind and Deaf Centre in Stockton Road to ensure awareness and knowledge of services within those communities. HYPED have staff who can sign, and there are arrangements for immediate telephone interpretation though HBC.

3.7 In addition HYPED activities include gender and age specific peer education, mentoring programmes and service delivery from their base and other community venues as well as participating in numerous community events and forum

4. Capacity and demand

- 4.1 There is not the evidence and robust data for young people as there is for adults and prevalence forecasts can be crude. Using the software programme provided by NTA Consultant it was possible to extrapolate ballpark indications, which framed local debate however the data was not considered as appropriately reflecting the Hartlepool situation.
- 4.2 Using the prevalence tool and local knowledge there are approximately 10,000 young people between 10 and 18 years in Hartlepool, of which over 1000 will be using drugs of some sort. The tool suggests 100 will be using drugs weekly but local estimates exceed that figure suggesting that 200+ are likely to be using cannabis especially in the 15 18 age group and 400+ from as early as 11years are regularly using alcohol. All these young people need to be able to access as a minimum general information, and harm reduction support advice through an informal open access service.
- 4.3 As stated previously the main substance abused is alcohol with some incidents of children drinking from at least 10 years of age. There are projects such as Straightline targeting those on the street and in public places. This project deals with initial interventions at a rate of 200 per year with structured intervention capacity recently increased to 150.
- 4.4 Of significant concern are the numbers of young girls who are regularly binge drinking and then from approximately 15 years can be invisible using pubs and clubs with older boy friends. The additional risks associated with safeguarding this group include sexual health and teenage pregnancy leading to the need to prioritise this group with targeted initiatives.
- 4.5 In regard to other substances there is a reduction in the use of volatile substances, in previous years it was the drug of choice for 10 14 year olds using drugs.
- 4.6 Accepting that without a means to cross reference all the data there will be overestimates, the figures within the prevalence tool were too high and if there was Class A drug use as extrapolated many more youngsters would be visible in the system and making demands on services.
- 4.7 The tool also suggested young people using cocaine and/or crack however in Hartlepool the primary Class A drug of use is heroin with far less cocaine/crack than our neighbours and counterparts.

4.8 What is increasingly apparent is that some of those presenting at adult services have had contact with young people treatment services but for cannabis/alcohol. This is major issue with need to ensure on going contact as appropriate to encourage return in care of relapse or escalation of drug use.

5. Conclusion

- 5.1 Hartlepool has a young people substance misuse service HYPED which is a multiagency integrated response delivering specialist support for young people and families where there are substance misuse issues and treatment needs. The service is rated as green through monitoring by both NTA and GONE against national drug indicators and Every Child Matters substance misuse framework and is achieving all targets.
- 5.2 The treatment and service requirements of Essential Elements are being delivered. There is wide access to the service with no apparent barriers and regular contact with diversity leads. There are referrals from a variety of sources, Children and Young People are being supported in this service rather than adult treatment services with positive planned discharge rates.
- 5.3 Changes to assessment and new support mechanisms are being developed supported by comprehensive training programmes. There will be increased integration that includes HYPED thereby strengthening the service available to substance misuse young people and their families.
- 5.4 On this basis there is no immediate need to significantly change or modify the service delivery or capacity, though reviews and monitoring will be ongoing to maintain the current performance and standard.

6. Priorities for Young People Specialist Substance Misuse Plan.

- 6.1 A key priority is to determine and progress the integration of SHP and CYPSP structures for the governance and delivery of Young People Specialist Substance Misuse Services. This will include joint needs assessment, planning and commissioning arrangements.
- 6.2 In addition work is needed to improve and strengthen the coordination of strategies, services, programmes and initiatives. This entails further integration of HYPED within other Children Services/CYPSP frameworks such as Parenting Strategy, Family work, participation in development of Targeted Youth Support, Hidden Harm Network, etc.
- 6.3 Activity includes raising awareness, strengthening pathways and joint working, and detached work with colleagues to make contact and engage with specific young people. Multi agency training and professional development programmes are required

to increase the skills and ability of colleagues across the service to deliver preventative measures as well as identify, screen and offer brief interventions

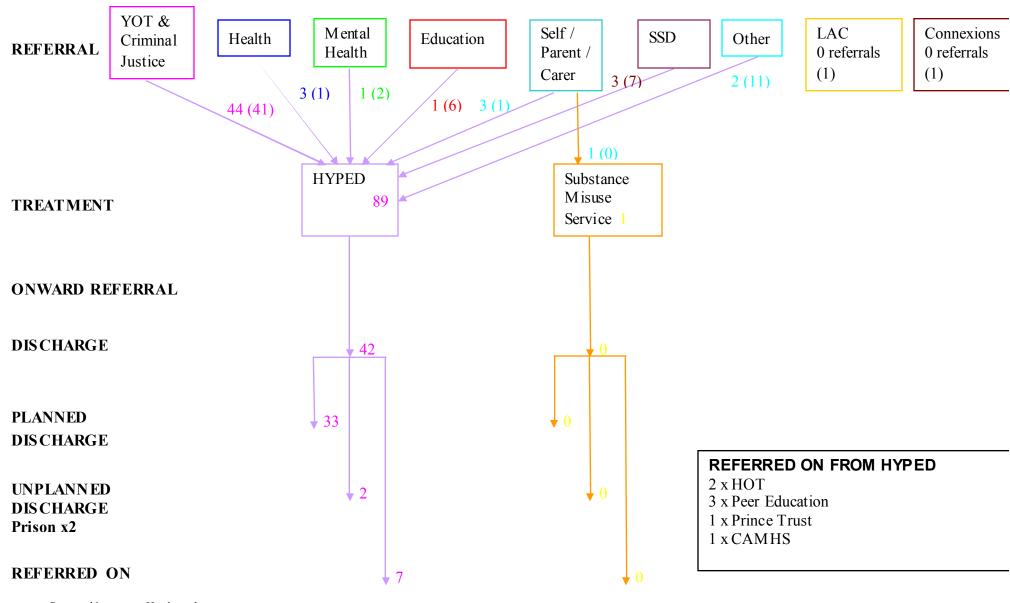
- 6.4 To increase access to treatment particularly for vulnerable groups, there needs to be targeted work and increased open access work to reduce harm associated with substance misuse and also make contact and engage with those most vulnerable.
- 6.5 The treatment service and system delivery will be improved by some of the above joint working plus increased family support and HYPED activity integrated and coordinated with similar family and parenting programmes.
- 6.6 CAF will form an additional effective pathway of care and support for substance misusing children and young people. The extension of CAF linked to other screening tools for substance misuse (e.g. ASSET) coupled with increased drug skills and expertise will be incorporated into workforce development, competency strategies, assessment tools and care planning arrangements through appropriate practice development forums.
- 6.7 The other key priority is the improvement of outcomes for those leaving specialist treatment. HYPED aims to offer a rapid short specialist intervention appropriate to the individual need but to return the individual back into mainstream services as quickly as possible. There needs to be further analysis into the outcomes for those completing HYPED programmes, ensuring relevant tracking and monitoring, information sharing and speedy re-referrals in cases of relapse or changed substance misuse issues

7. Planning and Commissioning arrangements

- 7.1 Prior to the requirement to produce a Young People Specialist Substance Misuse Plan 08/09 the Safer Hartlepool Partnership assumed responsibility for planning and commissioning substance misuse services through the Joint Commissioning Group.
- 7.2 The JCG is informed through a number of routes and specific exercises but in the main through a multi agency SHP Young People Task Group whose membership includes Children's Services, CAMHS, Prevention/YOS, the substance misuse service HYPED and Voluntary and Community sector along side specific needs assessment and consultation exercises.
- 7.3 To ensure links with the evolving Children's Trust, SHP is represented by a number of officers at various levels. These include: the CYP SP Performance Management Group: Social Inclusion Coordinating Group: Parenting Strategy development Targeted Youth Support development and Hidden Harm Group.
- 7.4 Through a three day workshop facilitated by the Office for Public Management at the beginning of February 2008, the CYPSP has developed a draft Integrated Commissioning Framework and draft new Terms of Reference which includes the

governance standards expected of this theme partnership of the Hartlepool Partnership. Partners have been asked to consider these documents within their organisations and return comments by June 2008. The draft Integrated Commissioning Framework sets out: a shared Policy; Values and Commissioning Standards; an agreed Definition of Commissioning and Commissioning Cycle.

- 7.5 The draft Terms of Reference make a number of proposals including a restructure of the CYPSP. The present structure consists of the main Partnership supported by a Performance management Group and several operational working groups. The proposed structure provides for a slimmed down CYPSP (presently the membership is 38), removal of the Performance Management Group and the establishment of three commissioning groups that reflect the 'windscreen model' of Universal, Targeted, Specialist services.
- 7.6 The Hartlepool Children and Young People's Strategic Partnership (CYPSP) would delegate the responsibility for commissioning and reconfiguring of services, to the commissioning groups for universal, targeted and specialist services. The groups would have a key role in delivering the priorities and outcomes set out in the Children and Young People's Plan (CYPP). SHP will participate once that framework is agreed.
- 7.7 HYPED are currently funded by Safer Hartlepool Partnership from the Young People Substance Misuse Grant (including Department of Health and Youth Justice Board monies), the Pooled Treatment Budget (allocated annually from NTA) and YOS Prevention monies. Some allocations have been subject to reductions or pressures and the implications will need to be considered by CYPSP and SHP further. This will need to be reflected in the revision of the Children and Young People's Plan for 2009-2012.
- 7.8 Whilst there has been confirmation of continued funding albeit directed through three different routes the level of allocation has not been confirmed but services have been maintained on the assumption of at least same level of funding. Future commissioning will need to be considered further by the CYPSP within its commissioning framework.
- 7.9 HYPED offer a good service and appear cost effective however SHP were considering testing the market through a competitive tender process. Following advice from NTA there is agreement that it would be more appropriate if this was delayed until integration/alignment with CYPSP is in place in order that it is not a SHP/DAT led process



Partnership name Hartlepool

DRAFT Young people's specialist substance misuse treatment plan 2008/09 Planning grids

Planning Grid 1: Commissioning and system management

Identification of key priorities following needs assessment relating to commissioning and system management:

- Determine whether align or integrate Safer Hartlepool and Children and Young People Strategic Partnership structures for delivery of Young People Specialist Substance Misuse Services
- Strengthen and develop joint planning and commissioning arrangements
- Improve and strengthen coordination of services, programmes and initiatives
- Improve needs assessment and analysis

Objective 1 - Align or Integrate SHP and CYPSP governance structures for delivery of Young People Specialist Substance Misuse Services

| Actions and milestones | By when | By whom |
|---|--------------|---------------|
| Agree responsibility and decision lines CYPSP & SHP | September 08 | AM/AS |
| SHP involved in CYPSP | Ongoing | AM + Officers |
| Monitoring and joint work between CYPSP and SHP | April 08 | IM/CH |
| Review structures, roles of responsibilities of SHP Task groups and CYPSP groups, merge/transfer as appropriate | September 08 | AM/AS |
| Audit and darification of relevant Strategies, Plans and programmes, projects | June 08 | Expert group |

Objective 2 Strengthen and develop joint planning and commissioning arrangements

| Actions and milestones | By when | By whom |
|---|----------|---------|
| Facilitate wider consultation on the Joint Commissioning Framework with relevant partners | April 08 | FM |
| Revise Joint Commissioning Framework following consultation | April 08 | FM |
| Submit revised Joint Commissioning framework to Cabinet, PCT Board and CYPSP | June 08 | IM |
| Agree joint priorities, targets and performance monitoring systems | June 08 | IM/CH |

| Develop Performance Management Framework and reporting that incorporates substance misuse | June 08 | СН |
|---|------------------|--------------------------|
| Regular joint performance monitoring reports to SHP and CYPSP | April /quarterly | Data Manager |
| Objective 3 Improve and strengthen coordination of services, programmes and initiative | | |
| Actions and milestones | By when | By whom |
| Identification of relevant Strategies, programmes Plans | June 08 | Expert group |
| A multi-agency working group (expert group) to develop practice in regard to multi agency planning, joint working and information sharing | Sept 08 | Expert group |
| Revise and extend Inter agency Guidance and protocols to incorporate wider multi agency working | Sept 08 | Expert group |
| Integrate substance misuse with FIP and other family based support programmes | Pre Dec 08 | Expert group Managers |
| Integrate HYPED services into HIP referral structure | July 08 | LM |
| Establish feedback and outcome monitoring process for HIP referrals | August 08 | LM |
| Establish mechanisms to share knowledge, practice and expertise | Sept 08 | Expert group |
| Objective 4 Improve needs assessment, analysis and planning | | |
| Actions and milestones | By when | By whom |
| Review data sources and establish baseline | June 08 | Data Manager |
| Ensure all service completing ndtms and TOPs as appropriate | June 08 | Data Manager |
| Establish common and robust data collection | Sept 08 | Data Manager |
| Increase training of analytical skills of work force and Partnerships for joint needs assessment and planning | Sept 08 | Trainers |
| Review and extend information sharing protocols as required | Sept 08 – | Data Manager |

| Produce joint needs assessment across Partnerships to better inform planning and commissioning | Sept – Oct 08 | Expert group |
|--|---------------|----------------|
| Identi fy compatible software | March 09 | HBC IT Partner |

Planning grid 2: Access to treatment

Identification of key priorities following needs assessment relating to access and engagement with young people's specialist substance misuse treatment services:

- Strengthen pathways, referrals and joint working links with CYPSP
- Extend experience and knowledge to ensure broad professional field
- Increase awareness of services, system, pathways and referral routes
- Increase contact and referrals from vulnerable and disaffected YP Treatment naïve
- Extend Open access & Harm Reduction services

Objective 1 Strengthen pathways, referrals and joint working links with CYPSP

| Actions and milestones | By when | By whom |
|--|----------|---------|
| Strengthen links to between Children's Services and HYPED team with dedicated link worker | April 08 | СН |
| Re-introduce weekly attendance by HYPED Children's Services link worker in specific Social care venues to offer expertise, encourage referrals and act as liaison into specialist service. | June 08 | LM |
| HYPED activity linked into HIP, and similar Children's Services operational groups and frameworks as appropriate | June 08 | LM |

Objective 2 Extend experience and know ledge to ensure broad professional field

| Actions and milestones | By when | By whom |
|---|----------|---------|
| Ensure that drug workers continue to receive information about training | Ongoing | FM |
| Increase skills base by providing annual multi agency programme of drug awareness, professional development, available to front line staff, voluntary sector, community and similar | April 08 | SR |
| Broaden peer education, mentoring, volunteer and work experience programme across services | Sept 08 | LM |
| Extend competencies through training to increase identification, screening and assessment opportunities | July 08 | SR |

| Develop secondments and operational links with youth, health and voluntary sector | Sept 08 | СН |
|--|----------------|---------|
| Objective 3 Increase awareness and knowledge of services, systems, pathways and re | ferral routes | |
| Actions and milestones | By when | By whom |
| Review and strengthen publicity, pathways awareness of service. | June 08 | NF |
| 2 x Open days at HYPED for professionals – Quality practice and professional development circles | June 08/Nov 08 | NF |
| Establish quality practice and professional development circles x 2 per year | July 08/Dec08 | LM/NF |
| Develop and publicise programme of Campaigns, Promotional events and Road shows | May 08 | LM/NF |
| Develop target ed events geographic or issue based for those supporting vulnerable priority groups | July 08 | NF |
| Objective 4 Increase contact and referrals from vulnerable and disaffected YP/Treatme | nt naive | |
| Actions and milestones | By when | By whom |
| Participate in Targeted Youth development and initiatives | June 08 | СН |
| Detached work from HYPED with Youth Services and voluntary sector utilise mobile unit | May 08 | NF/SS |
| Specific sessions within LAC, Carers, Children's Centres, Youth facilities community venues | July 08 | NF |
| Consider YP Arrest referral system from custody and police | April/May 08 | СН |
| Strengthen pathway and in reach service with YOI linked to YOS system | May 08 | NF |
| Develop multi agency behavioural therapy/interventions for children assessed at high risk of substance | August 08 | SR |
| Objective 5 Extend Open Access & Harm Reduction services | | |
| Actions and milestones | By when | By whom |
| Increase drop in and open access services from HYPED | April 08 | LM |
| increase drop in and open access services non intrinely | | |

| Review and re-establish protocols and service delivery with new treatment and health provider | April 08 | СН |
|---|----------|----|
| Integrate family planning, general healthcare into outreach provision | June 08 | LM |
| Increase testing and vaccinations | June 08 | СН |
| | • | • |

Planning Grid 3: Treatment System Delivery

Identification of key priorities following needs assessment relating delivery of young people's specialist substance misuse treatment services:

- To further analyse Treatment Outcomes to identify 'success' and improve as relevant
- Increase Family Interventions and support that allows reintegration and retention within family
- Strengthen clinical governance and best practice

| Objective 1: Improve Treatment Outcomes | | |
|---|----------|--------------------------|
| Actions and milestones | By when | By whom |
| Establish mechanism to report outcome to referral agency. | May 08 | NF |
| Analyse case studies in regard to planned and unplanned discharges | May 08 | NF |
| Improve service and or structures to reflect opportunities for planned or success ful outcome | Sept 08 | LM |
| Develop a mechanism with colleagues to monitor success over longer period | Sept 08 | Expert group |
| Monitor, identify lessons learnt, share and cascade | March 09 | Expert group/agencies |

Objective 2 Increase Family Interventions and support that allows reintegration and retention within family

| Actions and milestones | By when | By whom |
|---|-----------------|---------|
| Support and commit to Strengthening Families, Triple P and Incredible Years training and programmes | July 08/ongoing | LM |
| Negotiate and provide substance misuse expertise to FIP and similar family based support programmes | May 08 | СН |

| Inclusion of HYPED in development of Parenting Support Strategy and integrated training opportunities. | | | | LM/JR |
|--|---|------------|----|----------------|
| Develop services within the Parent Support Strategy that ensure non-stigmatizing access for all parents and carers | | | | LM/JR |
| Working with specialist stakeholders including parents and carers to enhance referral routes and pathways | | | | LM |
| Develop shared practices based on CAF and supported by clear partnership protocols | | Sept/Dec | 08 | Expert group + |
| Work with adult services and treatment providers as an advocate for YP within family programmes to ensure reintegration and retention of family support networks | | | | LM |
| Explore accommodation options for family respite as part of a structured programme of supporting both family and aim of returning to family | ns for family respite as part of a structured programme of supporting both family and YP with | | | |
| Objective 3 Strengthen clinical governance and best practice | | | | |
| Peer quality circle to review HYPED against similar services | July 08 | | | |
| Audit and develop improvement plan against recent NTA/NICE clinical guidelines | June 08 | June 08 LM | | |
| Audit services further against best practice including other services and Partnerships performing better | Sept 08 LM | | LM | |
| Use the CAF process to improve access to services across the Tees Valley. | Sept 08 | Sept 08 LM | | |
| Ensure all trained and competent in Child Protection and safeguarding practice and protocols. | Ongoing LM | | LM | |

6.1

Planning grid 4: Leaving specialist treatment

Identification of key priorities following needs assessment relating to young people leaving specialist substance misuse treatment services:

- Ensure specialist intervention delivered as appropriate and effectively as possible
- Develop and strengthen Housing and Accommodation opportunities to ensure secure tenancies

| Objective 1 Ensure short specialist interventions | | |
|--|---------|---------|
| Actions and milestones | By when | By whom |
| Establish regular analysis and review of case studies within practice quality circles | Ongoing | LM |
| Ensure effective care coordination and delivery of mainten ance/ongoing support delivered by or in mainstream settings | Oct 08 | NF |
| Introduce further relapse prevention programmes | Sept 08 | CH/LM |
| Establish system for rapid response in case of relapse | Nov 08 | LM |

Objective 2 Increase Relapse Prevention support

| Actions and milestones | By when | By whom |
|--|-----------|---------|
| Extend structured Peer Education/ Peer mentoring programmes | August 08 | NF |
| Encourage and support self help groups following treatment and for ongoing motivation | Sept 08 | СН |
| Increase and/or link to aftercare programmes for wide range of issues but particularly education, training and employment | Sept 08 | СН |
| Encourage service user, carer and family involvement in reviews of all aspects of HYPED service, pathways and performance. Include training and support as appropriate and linked to wider CYPSP Strategy e.g. Big Voice | Ongoing | LM |

| Objective 3 Develop and strengthen Housing and Accommodation opportunities to ensure secure tenancies | | | |
|---|---------|---------|--|
| Actions and milestones | By when | By whom | |

| END | | |
|--|----------|----|
| Review and consider future of Drug workers appointed short term into Gainford House | Sept 08 | СН |
| HYPED to provide in reach support to Stonham/Gainford House and similar projects as required | April 08 | LM |
| Support Vulnerable Panel activity. Integrate floating support programmes from HYPED with similar. | Ongoing | СН |
| Improve independent living skill programmes at all levels but as key element of discharge from service | July 08 | LM |