

# 'It's Everybody's Business'

## Lewisham's Children and Young People's Plan 2015 - 2018



# Introduction

This is Lewisham's fifth Children and Young People's Plan (CYPP). It sets out the strategic aims and priorities for all agencies working with children and young people across Lewisham from 2015 to 2018. The plan strengthens the foundations established by our previous plans for improving outcomes for children and young people in Lewisham and builds on what has been achieved over the lifetime of our 2012-2015 plan.

The plan reaffirms how partner agencies will work together to improve outcomes and make significant improvements to the lives and life-chances of our children and young people. It gives further emphasis to our commitment to joint commissioning of services to achieve better value for money and ensure our resources are aligned to achieve the greatest impact for our children and young people.

Lewisham has a strong history of partnership arrangements and these have led to significant improvements across every outcome area. This plan demonstrates the continued commitment of partners to work together to ensure our services are of the highest quality, continually improving to make more of a difference to our children, young people and their families. It focuses the Children and Young People's Strategic Partnership's future work on improving a number of key outcomes where our evidence shows we need to continue to improve and, in particular, where partnership action is required to improve the lives and life chances of our children and young people.

The need to work together to make every penny of public money work as hard as it possibly can for children and young people has never been more pressing. The government cuts to funding for public services have impacted greatly on the resources and capacity available across the partnership. The pressures resulting from reductions in resources are also matched by population growth and rising demand. In practical terms, to meet the needs of our growing population we will need to increase the number of school places during the life of this plan. We will also need to respond strategically to managing the rising demands across a range of areas, including increased numbers of children's social care referrals and child protection plans and by reducing the number of Accident and Emergency presentations.

Responding to growing demand and reducing budgets only increases the importance of collaboration. This means that across the partnership we will continue to seek out innovative ways of working together and ensuring that we are better at targeting support for the children, young people and families who need it most and working even more closely to look at how resources are used across the partnership to deliver more specialist support services. It also means ensuring that children, young people and their families receive the intervention they need early, to prevent their needs escalating and needing these specialist services.

This plan shares a number of themes in common with previous partnership plans. One particular area of development is the increased focus in this plan on building resilience and independence amongst children, young people and their families. The impact of the economic downturn has affected both public institutions and our residents. In order for our children and young people to thrive in this new climate they will need the tools to cope with change and respond proactively to adverse situations. It is the role of the partnership to equip families and children with the skills they need to do this.

*Partnership signatures*

## **Our partnership vision and values remain the same**

### **Vision**

**Together with families, we will improve the lives and life chances of the children and young people in Lewisham**

**We will**

**have the highest aspirations and ambition for all our children and young people**

**We will**

**put children and young people first every time**

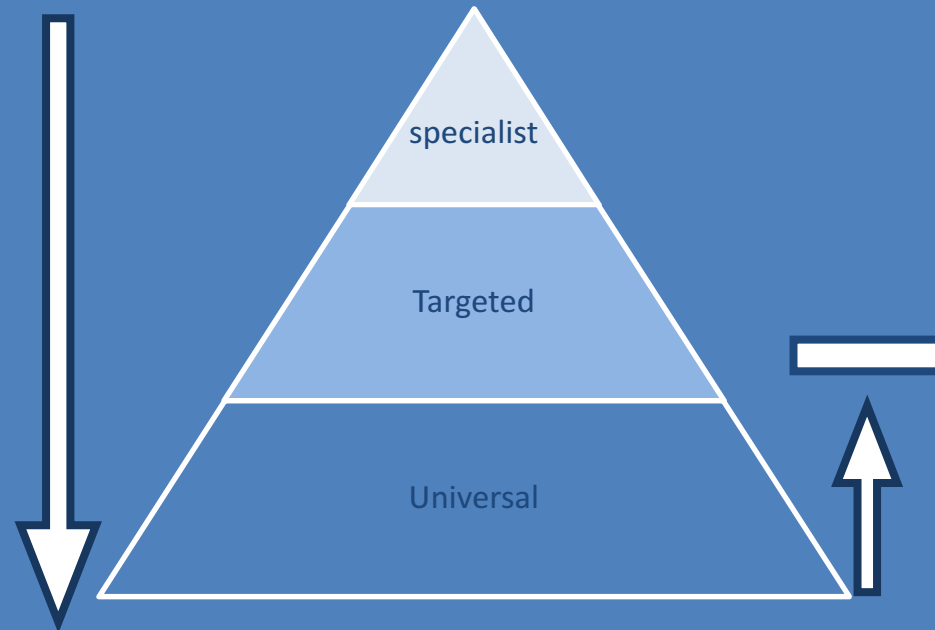
### **Values**

**We will**

**will make a positive difference to the lives of children and young people**

# The way we work

Lewisham has a strong history of partnership working and well embedded Children's Partnership arrangements. All partners have agreed to work against our three stage model: universal, targeted and specialist within a single framework in which services will deliver the vision for our children and young people.



All Lewisham children and young people must benefit from excellent universal services. Within those services we continue to embed high quality targeted services for those children and young people who may have additional needs, so that support can be provided quickly to ensure that these needs do not escalate and eventually require specialist services.

Our approach to early intervention – including through our Children's Centres and family support services – ensures that children, young people and their families needing targeted services are identified effectively and early and receive the co-ordinated support they need across all relevant agencies, and that we are therefore improving outcomes by making the best use of our resources.

## Our partnership culture

- ✓ We work as a team around Lewisham's children and we take individual responsibility for delivering the outcomes in this plan
- ✓ We work with whole families because strong and stable families are the foundation for achieving the outcomes we want for children and young people
- ✓ We identify and target children at risk of poor outcomes and intervene early to make a difference
- ✓ We involve and listen to children, young people and their families and work hard to ensure that our services are accessible to all our communities
- ✓ We use our funding collaboratively to make every penny work as hard as it possibly can for children and young people in Lewisham

# As before, we will continue to demonstrate across the partnership that we will:

1. **Be outcome focused** – We must be able to demonstrate that we are making a difference to outcomes for children. When services are designed and commissioned there is a clear understanding of what success will look like. That success is always in terms of improved outcomes for children and young people and their families.
1. **Collaborate** – There is a real effort made across all partners to ensure that services are seamless and that our children and young people receive tailored, evidence-based support to meet their needs regardless of which agency they have engaged with. The Common Assessment Framework is integral to ensuring children and young people are assessed correctly and that the right services are put into place through one contact or 'lead professional' instead of families trying to manage different agencies. The Team Around a Child approach is an important mechanism to ensure that all front line services work together to support the family.
2. **Be evidence based** – The work of the partnership is supported by a strong evidence base which is shared across all agencies. Each of the outcomes and actions outlined in this Plan are underpinned by detailed analysis of need, and the partnership works within a well established performance management framework which closely monitors activity, especially those outcomes where progress is not on track to meet targets. This enables the partnership to reviews its targets and where necessary take corrective action to improve outcomes. We will stop if something is not working.
3. **Be efficient** – The partnership's commitment to the delivery of improved outcomes includes a commitment to use all our resources efficiently and effectively, providing value for money. We are committed to using funding collaboratively to make every penny work as hard as it possibly can for children and young people in Lewisham.
4. **Be inclusive** - The partnership is committed to ensuring that every single one of Lewisham's children and young people is able to access those services that will improve their life chances and choices. Lewisham offers sustained support to those children who are vulnerable, particularly our Looked After Children, children and young people with learning difficulties and/or disabilities, young carers and those in the youth justice system. Equally, our attitude is always on closing the gaps where there are inequalities and we will work proactively with communities to target poor outcome areas.
5. **Listen** - The views of children and young people and their parent/ carers are vital to improved well-being. It is only by listening that services can understand how to meet the needs of the people we serve.
6. **Be innovative** – Lewisham's Children and Young People's Partnership has a good track record of developing innovative solutions to address complex and entrenched issues. Our young people have an annual budget to commission services through our Young Mayor Scheme as well as being actively involved in shaping commissioning priorities and the delivery of the actions set within this Plan.

## How we have developed this plan

This plan is a partnership plan. It has been informed by our work over many years with agencies supporting young people in the borough. It is influenced by the strategies and action plans we have developed together, the needs assessments underpinning each of these plans and our ongoing engagement with young people through forums such as the Children in Care Council and the Young Mayor and advisors.

The plan sets out the broad overarching objectives for the partnership and some of the high level performance indicators we will use to track progress strategically. The detailed action plans and strategies linked to delivery against each of the priority actions in this report are included on page 31 of this plan.

The remainder of the plan identifies four outcomes and the priority actions which support them. Against each action we summarise the needs we need to meet and our partnership commissioning intentions to delivering these. We also identify who will be responsible for holding the partnership to account over its progress towards achieving these outcomes.

At the end of this plan we describe how the partnership structure works as a whole and some of the wider enablers which will help us achieve our ambitions.

## Our priority outcome areas

### Build child and family resilience

- ❑ In order to maximise outcomes, we want all our children and young people to be resilient, knowing when and where to go for help and support when faced with challenges and adversities as they arise.
- ❑ Secondly, we want our parents/ carers and young people's workforce to be equipped to identify and respond to mental health emotional well-being needs amongst children and young people, intervening early and preventing needs from escalating.

### Be healthy and active

- ❑ We want our children, young people and their families to be healthy and active, confident and able to make healthy choices and to understand how this can improve their development and wellbeing.
- ❑ Through the delivery of our CYPP, we will improve and maintain the health and wellbeing of our children and young people, reducing health inequalities.

### Raise achievement and attainment

- ❑ We will promote the highest aspirations and ambition for all our children and young people across the partnership, particularly to close gaps and secure social mobility.
- ❑ We want all of our children and young people to achieve highly, supported by the best education, employment and training opportunities.

### Stay safe

- ❑ We will work across the partnership to ensure that the right of every child to live in a safe and secure environment, free from abuse, neglect and harm is protected.
- ❑ We will identify and protect children and young people at risk of harm and ensure that they feel safe.

# Our Priorities

Build Child and Family Resilience	Be Healthy and Active	Raise Achievement and Attainment	Stay Safe
<p><b>BR1:</b> Optimising the outcomes of pregnancy and the first 1001 days, including reducing toxic stress for children and securing attachment</p> <p><b>BR2:</b> Preventing poor outcomes and escalation of need, including for children in families at risk of crisis through early intervention</p> <p><b>BR3:</b> Promoting healthy relationships throughout childhood and adolescence</p> <p><b>BR4:</b> Mitigating the negative impact of insecure or unsuitable housing for children, young people and families</p>	<p><b>HA1:</b> Improving our rate of immunisations</p> <p><b>HA2:</b> Ensuring our children and young people are a healthy weight</p> <p><b>HA3:</b> Improving mental and emotional wellbeing</p> <p><b>HA4:</b> Improving sexual health</p> <p><b>HA5:</b> Reducing the prevalence and impact of alcohol, smoking and substance misuse</p> <p><b>HA6:</b> Encouraging access to and usage of culture, sport, leisure and play activities</p>	<p><b>AA1:</b> Ensuring there are sufficient school places for every Lewisham child</p> <p><b>AA2:</b> Ensuring all our children are ready to participate fully in school</p> <p><b>AA3:</b> Improving and maintaining attendance and engagement in school at all key stages, including at transition points</p> <p><b>AA4:</b> Raising participation in education and training, reducing the number of young people who are NEET at 16-19</p> <p><b>AA5:</b> Raising achievement and progress for all our children at key stages 1-4 and closing the gaps between under-achieving groups at primary and secondary school</p> <p><b>AA6:</b> Raising achievement and progress for all our children and closing the gaps between under-achieving groups at KS5 and post 16 so that all young people are well prepared for adulthood and able to access the best education and employment opportunities for them</p>	<p><b>SS1:</b> Identifying and protecting children and young people at risk of harm and ensure they feel safe, especially from:</p> <ul style="list-style-type: none"> <li>• SS1a: Domestic violence and abuse</li> <li>• SS1b: Child sexual exploitation</li> <li>• SS1c: Serious youth violence</li> <li>• SS1d: Child abuse and neglect</li> <li>• SS1e: Deliberate and accidental injury</li> </ul> <p><b>SS2:</b> Reducing anti-social behaviour and youth offending.</p>
<p><b>BR5:</b> Providing stable and consistent support for our Looked After Children</p>	<p><b>HA7:</b> Ensuring our Looked After Children are healthy</p>	<p><b>AA7:</b> Raising achievement and attainment for our Looked After Children at all key stages and Post 16</p>	<p><b>SS3:</b> Ensuring that our Looked After Children are safe</p>



## Partnership commissioning Intentions 2015-18

Outcome Area

Build child and family resilience

Priority Aim

BR1: Optimising the outcomes of pregnancy and the first 1001 days, including reducing toxic stress for children and securing attachment

- ❑ In order to maximise outcomes, we want all our children and young people to be resilient, knowing when and where to go for help and support when faced with challenges and adversities as they arise.
- ❑ Secondly, we want our parents/ carers and young people's workforce to be equipped to identify and respond to mental health emotional well-being needs amongst children and young people, intervening early and preventing needs from escalating.

### Why this is a priority

Deprivation is associated with increased rates of stillbirth, premature delivery, low birth weight babies, neonatal deaths and infant mortality. Lewisham is amongst the 20% of all local authority areas in England that are the most deprived. This means that, whilst improvements have been made in all of these areas, women in Lewisham are at a greater risk of these outcomes.

Perinatal and parental mental health are also a national and local priority. It is estimated that 20% of women in the UK develop a mental health problem in pregnancy or within a year of giving birth. In Lewisham this would equate to approx 1,019 affected women. Nationally it is estimated that perinatal mental health costs £8.1bn each year with 72% of those costs being related to the impact on children. The longer term impacts of prolonged adversity such as physical or emotional abuse, neglect or mental illness can create 'toxic' stress for children which can disrupt the architecture of the brain architecture well into the adult years.

The importance of addressing these risk factors during the first 1001 days from conception are now widely recognised for the achievement of longer term outcomes.

### What we are doing

- Prioritising the early take up of maternity services in our arrangements for maternity services to enable the early identification of child health issues and mothers at risk. Through our maternity and health visiting services, ensuring that targeted services via FNP and MECSH are available to support women at greatest risk of poor outcomes.
- Emphasising the importance of attachment and the health benefits associated with breastfeeding. The partnership will continue to support this objective in the delivery of maternity services.
- Delivering our mental health and emotional well-being strategy including using our CAMHS transformation funding to support the development of effective perinatal mental health support. We will promote high quality and integrated pathways in the community for maternity and health visiting services to deliver against our shared outcomes framework for the under 5's.
- Working across adult and children services to opportunities to co-commission provision for children and their parents.

### How we will know if we have been successful

Performance measure	Baseline	Comparator baseline	Target 2017/18	Desired direction of travel	Who is monitoring this?
% of women seen by 12 weeks and 6 days of pregnancy	92.8%	90%	96%	↑	Clinical Commissioning Group
% women booked for maternity appointments within 10 weeks	NEW	NEW	>50%	↑	Clinical Commissioning Group
% births where birth weight is less than 2500g	7.8%	7.9%	7.2%	↓	Clinical Commissioning Group
% breastfeeding initiated	86.5%	85.6%	89.3%	↑	Clinical Commissioning Group
% infants totally or partially breastfed at 6-8 weeks	73.9%	45.2%	80%	↑	0-5 Steering Group
% eligible women enrolled on FNP programme	TBC	N/A	75%	↑	0-5 Steering Group 9

## Partnership commissioning Intentions 2015-18

Outcome Area

Build child and family resilience

Priority Aim

BR2: Preventing poor outcomes and escalation of need, including for children in families at risk of crisis through early intervention

- In order to maximise outcomes, we want all our children and young people to be resilient, knowing when and where to go for help and support when faced with challenges and adversities as they arise.
- Secondly, we want our parents/ carers and young people's workforce to be equipped to identify and respond to mental health emotional well-being needs amongst children and young people, intervening early and preventing needs from escalating.

### Why this is a priority

A key overarching objective throughout this plan is that our partnership adopts an early intervention approach to meeting the needs of children, young people and their families. Some families who experience personal or social problems such as relationship breakdown, unemployment, ill health or homelessness may need access to other services and additional support to help them through a difficult time.

Although crisis can hit any family, poverty is a relevant predictor. Whilst the number of children living in poverty in Lewisham has decreased over recent years, a significantly greater population of Lewisham's children live in poverty than is the case in England as a whole. The government estimates that there are c. 900 troubled families living in Lewisham. The 2011 census identified that there were 7,599 families where no adult was in employment.

16.2% of the school aged population have a disability or learning need which means they need additional support from us, for 2.7% of children have needs so complex that they require individualised Education, Health and Care Plans to respond to their needs. Early intervention to manage these needs in universal settings and at home is critical to achieving our aims.

### What we are doing

- Continuing to embed Lewisham's early intervention approach ensuring that more families will receive timely and appropriate advice and support and to ensure faster and more efficient links between Early Intervention and Children's Social Care. We will build upon the work of phase one of the government's troubled families programme by implementing the second phase which covers a broader range of target areas including children who need help; families affected by domestic violence and abuse; and families with a range of health problems.
- Using our Big Lottery funded HeadStart project to ensure that professionals across our partnership are equipped to identify the signs of crisis and respond with a particular focus on building resilience in children and families so that they are better able to cope with adversity and take proactive steps to resolving issues.
- Through the delivery of our SEND strategy, ensuring that children with additional learning needs and disabilities receive support and school and in the home) to enable them to remain with their families and to achieve, where possible, within universal settings.

### How we will know if we have been successful

Performance measure	Baseline	Comparator baseline	Target 17/18	Desired direction of travel	Who is monitoring this?
% of families who access the MESCH programme and are satisfied with the outcomes at 24 months	NEW	N/A	100%	↑	0-5 Steering Group
Numbers of families receiving services via our Family Intervention Project following referral to social care	77	N/A	95 <small>*based on current operational model</small>	↑	Troubled Families Steering Group
% of target families worked with via government's troubled families programme with positive outcomes	100% of 910 families <small>(between 2012-2015)</small>	85.1%	100% of 1372 families	↑	Troubled Families Steering Group 10
Number of children with SEND who require a short break in order to meet their need outside universal settings	573 <small>(August 2015)</small>	N/A	N/A	→	SEND Board

## Partnership commissioning Intentions 2015-18

<b>Outcome Area</b>	<b>Build child and family resilience</b>	<b>Priority Aim</b>	<b>BR3: Promoting healthy and safe relationships throughout childhood and adolescence</b>	<input type="checkbox"/> In order to maximise outcomes, we want all our children and young people to be resilient, knowing when and where to go for help and support when faced with challenges and adversities as they arise. <input type="checkbox"/> Secondly, we want our parents/ carers and young people's workforce to be equipped to identify and respond to mental health emotional well-being needs amongst children and young people, intervening early and preventing needs from escalating.
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### Why this is a priority

The ability to develop and sustain healthy relationships is an important component of health and wellbeing for all children and young people. This begins from birth with the relationship between the child and caregiver and continues throughout childhood to relationships in the home to with peers in school and the wider community.

Domestic and sexual violence are key priorities for the partnership. Historically, Lewisham has one of the highest rates of reported domestic violence, 717 children in Lewisham were identified as being exposed to high risk domestic violence in the home in 2013-2014, with up to a third of all children in the borough exposed to any domestic violence in any one year. The Crime Survey England & Wales indicates females aged between 16 and 19 were at the highest risk of being a victim of a sexual offence (8.2 per cent). Since January 2013, there have been 37 identified cases of child sexual exploitation in Lewisham.

Alongside this, bullying continues to be a concern for children in Lewisham. It's impact can be significant affecting young people's wellbeing and social development into adulthood. Whilst young people are reporting increasingly positive attitudes to how schools deal with bullying, 29% of young people say they have been bullied in the last year (LSCB anti-bullying resource).

### What we are doing

- Ensuring that all professional, particularly in maternity and health visiting settings are equipped to identify risks to attachment and that more intensive support is available to children affected by this through our FNP and MECSH programmes.
- Continuing to implement the actions outlined in the Safer Lewisham Partnership's 'Reducing violence against women and girls plan'
- Ongoing implementation of the Safeguarding Children' Board's action plan arising from our Child Sexual Exploitation Strategy in relation to prevention, protection, support, enforcement and accountability.
- Working proactively with schools to continue to ensure that effective measures are put in place for identifying and dealing with bullying as outlined in the Safeguarding Children Board's Anti-bullying Resource.

### How we will know if we have been successful

Performance measure	Baseline	Comparator baseline	Target 17/18	Desired direction of travel	Who is monitoring this?
Number of victims identified and safeguarded through referrals to MARAC (single annual figure)	26 (2014/2015)	19 (2014/2015)	40	↑ (identification)	Safer Lewisham Partnership
Number of identified cases of cases of children identified as at risk of child sexual exploitation being managed by the partnership	28	N/A	N/A	↑ (identification)	Safeguarding Children Board
% schools receiving good of outstanding ratings from OFSTED for personal development, behaviour and welfare	90.7%	N/A	100%	↑	School Improvement Board

## Partnership commissioning Intentions 2015-18

Outcome Area

Build child and family resilience

Priority Aim

BR4: Mitigating the negative impact of insecure or unsuitable housing for children, young people and families

- ❑ In order to maximise outcomes, we want all our children and young people to be resilient, knowing when and where to go for help and support when faced with challenges and adversities as they arise.
- ❑ Secondly, we want our parents/ carers and young people's workforce to be equipped to identify and respond to mental health emotional well-being needs amongst children and young people, intervening early and preventing needs from escalating.

### Why this is a priority

Safe and suitable housing is an important foundation for the health and wellbeing of children. Lewisham, as with London as a whole, has been impacted greatly by the impact of welfare reform and the rising cost of renting in the private rented sector (PRS). Recent analysis of available properties in the PRS identified that approx. 5% of properties in Lewisham were within local housing allowance rates. Alongside this, a number of larger families have been impacted by the total cap on benefits as a result of the benefit cap which affected 825 Lewisham families when it was introduced in 2013.

The number of homelessness presentations to the council has increased significantly, there has been a 76% increase in the number of households in temporary accommodation in the last five years (now almost 1,800 people). At the same time the number of affordable properties to let has decreased by 44%. The Council has 8,500 individuals and families on the Housing Register and the average wait for a four bedroom property is 4 years.

In addition to homelessness, the quality of PRS housing is also a key concern. This is particularly relevant for houses in multiple occupation (HMO) which are often houses converted into flats with more than one family living in them. In Lewisham there are an estimated 13,410 HMOs.

### What we are doing

- Continue to implement our housing strategy focusing on:
  - Addressing the availability of homes in the longer term through maximising opportunities for building new homes
  - Prevention approaches to stop families from becoming homeless including:
    - supporting tenancy sustainment
    - working proactively with landlords
    - putting in place mediation between friends and family
  - Developing resettlement approaches to the private rented sector which enable families to have supported moves to affordable homes
  - Tackling poor quality PRS accommodation through HMO licensing and enforcement action
- Building the knowledge and capability of professionals across the children's partnership to respond appropriately to housing issues and give good quality advice on where and how to seek further support.

### How we will know if we have been successful

Performance measure	Baseline	Comparator baseline	Target 17/18	Desired direction of travel	Who is monitoring this?
Number homelessness applications	338	176*	176	↓	Strategic Housing
Number of families where homelessness is prevented	237	358*	358	↑	Strategic Housing
Numbers in B&B accommodation	460	214* *SE London region	214	↓	Strategic Housing
Number of licensed HMOs	200	363 *neighbouring borough	275	↑	Strategic Housing

## Partnership commissioning Intentions 2015-18

Outcome Area

Build child and family resilience

Priority Aim

BR5: Providing stable and consistent support for our Looked After Children

- ❑ In order to maximise outcomes, we want all our children and young people to be resilient, knowing when and where to go for help and support when faced with challenges and adversities as they arise.
- ❑ Secondly, we want our parents/ carers and young people's workforce to be equipped to identify and respond to mental health emotional well-being needs amongst children and young people, intervening early and preventing needs from escalating.

### Why this is a priority

In recent years, the number of looked after children in Lewisham has remained stable. At any one time, there are about 500 children in this group. The proportion of those under 18 in Lewisham who are looked after is about 77 in every 10,000, a rate higher than the national average and our statistical neighbours. It is estimated that 80% of children come into care because of abuse, neglect or family dysfunction.

Looked after children are cared for in a range of environments. More than 70% of them are cared for in foster placements. With approximately 16% in residential care settings, which is higher than our target of 10%.

Maintaining the stability of placements for looked after children is a key priority for the partnership. Stable placements enable continuity of positive relationships, community and education and provide the right conditions for maximising potential. Since our last children and young people plan, placement stability has improved, In March 2012 67.5% of children who had been looked after for more two and a half years had been in their placement for more than two years. In July 2015 this was 72%. However, there is still more to be done and we will continue to focus on increasing further the stability of placements for children.

### What we are doing

- Our Looked After Children Commissioning Plan sets out the actions we will take to support us to achieve better outcomes for children and young people by making sure that there are sufficient services available locally. This sets the following priorities:
  - Ensure that we have a high quality in-house fostering service
  - Maximising the involvement of LAC and Care Leavers in the commissioning process
  - Continue to improve our understanding of the need for LAC placements
  - Increased choice and focus on placement matching
- Implementing the action plan from this strategy will be a key priority for the partnership.

### How we will know if we have been successful

Performance measure	Baseline	Comparator baseline	Target 17/18	Desired direction of travel	Who is monitoring this?
Total numbers of looked after children	514	392 (national)	477	↓	Lewisham Safeguarding Children Board
% children who have had three or more placements within last 12 months	11.3%	11.0% (national)	9.0%	↓	Lewisham Safeguarding Children Board
% children aged under 16, who have been looked after for more than two and a half years and have been in their placement for more than 2 years	67.7%	67.0% (national)	74.0%	↑	Lewisham Safeguarding Children Board

## Partnership commissioning Intentions 2015-18

<b>Outcome Area</b>	<b>Be healthy and active</b>	<b>Priority Aim</b>	<b>HA1: Improving our rate of immunisations</b>	<p>☐ We want our children, young people and their families to be healthy and active, confident and able to make healthy choices and to understand how this can improve their development and wellbeing.</p> <p>☐ Through the delivery of our CYP, we will improve and maintain the health and wellbeing of our children and young people, reducing health inequalities.</p>
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Why this is a priority	What we are doing
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Active immunisation using modern vaccines remains one of the most cost effective healthcare interventions. This year sees some major changes to the national immunisation schedule. The Influenza immunisation programme is being extended to all children in Reception and in Years 1 & 2. This year also sees the introduction of a vaccine against group B meningococcal disease.

In Lewisham, uptake of immunisation has been poor in the past, but in recent years, increasing uptake has been secured by concerted local efforts. Lewisham, once the worst borough in London, is now at or above the London average uptake for all vaccines of childhood, except for the second dose of MMR at five years of age. Challenges remain; however, both in getting uptake to levels that are as good as possible, and high enough to ensure what is known as herd immunity – or the levels of uptake that will prevent significant spread of an organism within a population. Immunisation, therefore, remains a priority for the whole children's partnership.

- Implementing of the NHS England Action Plan for Immunisation in Lewisham.
- Improving uptake of MMR2 at five in Lewisham, with an emphasis on supporting and encouraging GP practices through new co-commissioning arrangements and commissioning on a population basis through the new care networks
- Increasing efforts to sustain and improve uptake of HPV vaccine
- Continuing efforts to improve uptake of all vaccines, again with an emphasis on utilising new commissioning opportunities. .
- Introducing vaccines against group B meningococcal disease and against group W disease.
- Introducing of a programme to immunise all children in Reception year and in Years 1 and 2 against influenza.
- Systems changes in relation to neonatal BCG programme

### How we will know if we have been successful

Performance measure	July 2014 baseline	Comparator baseline	Target 17/18	Desired direction of travel	Who is monitoring this?
% MMR 1 by 2 <sup>nd</sup> birthday	85.5%	92.4% (London)	92%	↑	Healthy Child Programme Board
% MMR 2 by 5 <sup>th</sup> birthday	70.8%	88.5% (London)	91%	↑	Healthy Child Programme Board
% Diphtheria (D3) at year 1	92.8%	95.8% (London)	95%	↑	Healthy Child Programme Board
%females aged 12-13 who have received all three doses of HPV Vaccine	82.9%	86.7% (London)	92%	↑	Healthy Child Programme Board



## Partnership commissioning Intentions 2015-18

Outcome Area

Be healthy and active

Priority Aim

HA2: Ensuring our children and young people are a healthy weight

- ☐ We want our children, young people and their families to be healthy and active, confident and able to make healthy choices and to understand how this can improve their development and wellbeing.
- ☐ Through the delivery of our CYPP, we will improve and maintain the health and wellbeing of our children and young people, reducing health inequalities.

### Why this is a priority

Overweight and obesity, lack of physical activity and poor nutrition present a major challenge to the current and future health and wellbeing of children and young people in Lewisham. Obese children are more likely to be ill, be absent from school due to illness, experience health-related limitations and require more medical care than normal weight children.

Maternal obesity increases the risk of poor pregnancy outcomes and is a risk factor for childhood obesity. Data obtained from Lewisham and Greenwich NHS Trust (LGT) for 2013 - 2014 indicates 43.5% of women at their booking appointment are overweight or obese.

Childhood obesity rates remain significantly higher than the average for England. In 2013/14 Lewisham was again in the top quintile of Local Authority obesity prevalence rates for Year 6. Rates in Reception have improved and Lewisham is now in the second quintile. As in previous years the proportion of obese children in Year 6 (24.3%) was more than double that of Reception year children (10.8%). This is similar to the national results. It is important that children have a healthy balanced diet. National surveys show that children's diets include a high level of added sugars and less than 20% eat the recommended five portions of fruit and vegetables per day.

Over the next five years Lewisham Children's Partnership seeks to achieve a sustained downward trend in the prevalence of unhealthy weight in children by taking a life course approach to prevention, early intervention and weight management.

### What we are doing

- Lewisham has a high number of children with excess weight. Prevention and early intervention is crucial. A partnership approach is necessary to minimise the impact of an obesogenic environment. Maintenance and development of the following elements are important in local strategy to address this issue:
  - Maternal Obesity Programme
  - Achievement and Maintenance of UNICEF Baby Friendly status
  - Improving uptake of School Meals
  - Continuing to implement a systematic programme of intervention and policies to help children and families tackle problems of overweight and obesity, and to reduce the impact of the obesogenic environment.

### How we will know if we have been successful

Performance measure	July 2014 baseline	Comparator baseline	Target 17/18	Desired direction of travel	Who is monitoring this?
% women who are obese or overweight at their maternity booking appointment	43.5%	N/A	40%	↓	Promoting Healthy Weight group
% infants totally or partially breastfed at 6-8 weeks	73.4%	51.6%	77%	↓	0-5 steering group
% children who are obese at reception	10.9%	9.3%	10.6%	↓	Promoting Healthy Weight group
% children who are obese at year 6	24.9%	18.9%	23.5%	↓	Promoting Healthy Weight group
Take up of school lunches at primary school	56.8%	N/A	68%	↑	Promoting Healthy Weight group
Take up of school lunches at secondary school	28.0%	N/A	44%	↑	Promoting Healthy Weight group

## Partnership commissioning Intentions 2015-18

<b>Outcome Area</b>	<b>Be healthy and active</b>	<b>Priority Aim</b>	<b>HA3: Improving mental and emotional wellbeing</b>	<input type="checkbox"/> We want our children, young people and their families to be healthy and active, confident and able to make healthy choices and to understand how this can improve their development and wellbeing. <input type="checkbox"/> Through the delivery of our CYPP, we will improve and maintain the health and wellbeing of our children and young people, reducing health inequalities.
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### Why this is a priority

According to previous British Child and Adolescent Mental Health Surveys, one in ten children under the age of 16 has a diagnosed mental health problem, the equivalent of three children in every school class. Lifelong mental health problems begin early. By 14 years old 50% of those who will have mental health problems in adulthood have already had problems.

Some groups of young people are at a higher risk: 72% of looked after children have behavioural or emotional problems and 95% of imprisoned young offenders have mental health problems. Poverty, exposure to trauma and insecure housing are also all contributing risk factors. Parental mental health or substance misuse also has an impact, in Lewisham 1.24% of people on Lewisham GPs registers have a serious mental health disorder compared to 0.84% for England as a whole. In every 1,000 people in Lewisham, 12.4 are opiate or crack cocaine users compared to 8.4 nationally and 9.55 in London.

In March 2015 Lewisham's Community Child and Adolescent Mental Health Service (CAHMS) had a caseload of 1,375 (approximately 2% of the young person population). In the first quarter of 2015/16 there were 345 referrals to CAMHS services, an increase on the previous quarter and 63% were accepted as requiring further intervention.

### What we are doing

- Lewisham's Mental Health and Emotional Wellbeing strategy outlines the priority areas of action for the partnership. Our approach is underpinned by our objective to ensure that mental health and emotional wellbeing can be better integrated into community and universal settings. Lewisham is one of 12 local authorities nationally delivering the Big Lottery's Head Start programme to support the mainstreaming of emotional wellbeing support for young people. Through HeadStart and the delivery of our mental health and emotional wellbeing strategy we will be focusing on:
  - Increasing support for perinatal and early years mental health support
  - Developing and implementing our transition curriculum and support to schools to enable better responses to emotional wellbeing
  - Harnessing opportunities to deliver mental health and emotional wellbeing support via our youth service provision
  - Developing online tools to enable young people to access mental health support
  - Improving pathways between acute and community mental health provision to ensure that access to clinic based case is timely and appropriately targeted.

### How we will know if we have been successful

Performance measure	Baseline	Comparator baseline	Target 17/18	Desired direction of travel	Who is monitoring this?
Number of mothers reporting post-natal depression at New Birth Visits	NEW	N/A	N/A	↓	Clinical Commissioning Group
Mean score for 'happiness with life as a whole' amongst CYP as part of Children's Society annual survey	7.6	7.9 (national)	7.9	↑	Mental Health and Emotional Wellbeing Steering Board
No CAMHS referrals received per quarter	345 (Q1 2015/16)	N/A	N/A	→	Mental Health and Emotional Wellbeing Steering Board
% CAMHS referrals accepted	63.4% (Q1 2015/16)	N/A	90%	↑	Mental Health and Emotional Wellbeing Steering Board



## Partnership commissioning Intentions 2015-18

<b>Outcome Area</b>	<b>Be healthy and active</b>	<b>Priority Aim</b>	<b>HA4: Improving sexual health</b>	<b>Why this is a priority</b>	<b>What we are doing</b>
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- We want our children, young people and their families to be healthy and active, confident and able to make healthy choices and to understand how this can improve their development and wellbeing.
- Through the delivery of our CYPP, we will improve and maintain the health and wellbeing of our children and young people, reducing health inequalities.

Lewisham has a young population experiencing high levels of sexual health need. In 2013 Lewisham had the second highest teenage pregnancy rate in London (152 conceptions in 15-17 year olds). Whilst rates have fallen this reflects a national trend, and Lewisham rates have not fallen as fast or as far as other similar boroughs. The under 16 conception rate is also second highest in London. In London, Lewisham has the highest under 18 years birth rate through a combination of a high teenage conception rate and lower than average abortion rate in this age group.

STI rates are highest amongst young people. In Lewisham in 2013, young people aged 15 to 24 accounted for 44% of all new STIs. Chlamydia, the most common STI is particularly prevalent with 10% of all Lewisham 15 to 25 year olds screened testing positive. Young people are also more likely to become re-infected with STIs. In Lewisham, an estimated 9.5% of 15-19 year old women and 12.5% of 15-19 year old men presenting with a new STI at a GUM clinic during the five year period from 2009 to 2013 became reinfected with an STI within twelve months.

There were 3,760 attendances by young people under 18 to Lewisham sexual health services in 2014/15. In addition to this a further 4,648 young people aged 18-19 attended local services. These figures are a reduction of 19% and 12% respectively on the previous year.

- Despite the significant gains made in improving access to services through the teenage pregnancy and Chlamydia screening programmes, these are now showing signs of stalling. Targeted sexual health promotion and SRE programmes will be vital to maintain and build on the success of these initiatives.
- Improved access and information about contraception, particularly for young women and women from BME groups is important to increase the number and proportion of planned pregnancies which can optimise outcomes for mother and child.
- Over the next few years sexual health services will be reconfigured to improve access. It is important that young people, especially the most vulnerable, receive specialist support to equip them to maintain and protect their own sexual health and develop healthy physical relationships.

### How we will know if we have been successful

Performance measure	July 2014 baseline	Comparator baseline	Target 17/18	Desired direction of travel	Who is monitoring this?
Quarterly conceptions amongst women aged 15-17 per 1,000 of the population	33.1	21.8 (London)	22	↓	Sexual health commissioning board
Under 16 conception rate per 1,000 of the population	7.2	4.3 (London)	4.8	↓	Sexual health commissioning board
% resident population 15-24 screened for Chlamydia and Gonorrhoea	34.6%	27.9% (London)	35%	↑	Sexual health commissioning board
Chlamydia diagnostic rate per 100,000	3504	2178 (London)	3500	→	Sexual health commissioning board

## Partnership commissioning Intentions 2015-18

<b>Outcome Area</b>	<b>Be healthy and active</b>	<b>Priority Aim</b>	<b>HA5: Reducing the prevalence and impact of alcohol, smoking and substance misuse</b>	<b>Why this is a priority</b>	<b>What we are doing</b>
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While most young people do not smoke and are not dependent on alcohol nor drugs, they have long been seen as key public health concerns.

Smoking, drinking alcohol and the misuse of drugs by parents and others caring for children can cause high levels of harm to children.

It is important to reduce the number of young people who start smoking, as it is an addiction largely taken up in childhood and adolescence. Most smokers start smoking before they are 18 and 50% of all smokers die prematurely. 7% of 15 year olds were smokers in Lewisham in 2014/15

Living with an adult smoker is the major influence on the uptake of smoking in young people. 43% of school aged children in Lewisham said an adult smoked in their home

Problematic parental substance misuse affects the emotional, physical, psychological and behavioural wellbeing of children, as it can adversely affect parenting capacity. In Lewisham in 2013/14, 58 of the 234 alcohol dependent drinkers in treatment reported living with children and 234 of the 1214 in treatment for drug use reported living with children.

In Lewisham it is estimated that we have 385 children under the age of 11 who have ever consumed alcohol, with 32 reporting use in the last week. Just over 200 young people under 18 receive specialist misuse services, many of whom have a range of complex.

□ We want our children, young people and their families to be healthy and active, confident and able to make healthy choices and to understand how this can improve their development and wellbeing.

□ Through the delivery of our CYPP, we will improve and maintain the health and wellbeing of our children and young people, reducing health inequalities.

- Continuing to protect children and young people by reducing the supply of cheap tobacco and preventing the illegal sale of cigarettes and alcohol through a sustained focus on the enforcement of statutory regulations
- Continuing to use evidence based interventions, such as peer education, in schools and other settings to reduce smoking and substance misuse
- Optimising the use of social media, working in partnership with young people, to get key messages across to young people about smoking, drinking alcohol and using drugs
- Continue a focus on addressing binge drinking and high alcohol consumption rates in young people, especially young women.
- Promoting smoke free homes, cars & playgrounds to protect children from second-hand smoke
- Ensuring that those who need it can access specialist substance misuse services early

### How we will know if we have been successful

Performance measure	2014/15 baseline	Comparator baseline	Target 17/18	Desired direction of travel	Who is monitoring this?
% Lewisham 15 year olds classified as smokers (regular & occasional)	8%	8% (national)	7%	↓	Smoke Free Future Delivery Group
No. of young people under 18 in substance misuse services	199	N/A	275	↑	Safer Lewisham Partnership Board
% of Lewisham young people under 18 accessing substance misuse services with positive outcomes	62%	80%	85%	↑	Safer Lewisham Partnership Board

## Partnership commissioning Intentions 2015-18

<b>Outcome Area</b>	<b>Be healthy and active</b>	<b>Priority Aim</b>	<p><b>HA6: Encouraging access to and usage of culture, sport, leisure and play activities</b></p>	<p><input type="checkbox"/> We want our children, young people and their families to be healthy and active, confident and able to make healthy choices and to understand how this can improve their development and wellbeing.</p> <p><input type="checkbox"/> Through the delivery of our CYPP, we will improve and maintain the health and wellbeing of our children and young people, reducing health inequalities.</p>
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Why this is a priority	What we are doing
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All children and young people deserve an enjoyable childhood – no matter what constraints they face. Research shows that play and access to the music and the arts has many benefits for children and young people in terms of social, cognitive and behavioural development. Advantages associated include the development of problem-solving skills, supporting their language development and literacy, developing their social skills, expressing emotions, developing imagination and creative interests and abilities.

It is known that physical activity is important for good health throughout life, and should be encouraged from birth. Inactivity contributes to obesity, long term health conditions and premature death. Local data is not available on activity patterns of children but national surveys show that only a small proportion (20%) of children aged 5 to 15 years meet the Government recommendation for physical activity. Children are leading increasingly sedentary lifestyles and low levels of physical activity in children are related to household income, with those in the lowest income bracket more likely to report low levels of activity.

- Supporting access to leisure facilities for young people including encouraging accessing swimming through the universal school offer.
- Working in partnership with providers to ensure access to a wide range of music services for all children aged 5-18 through our music hub.
- Continuing to promote take up of the arts and physical activity through creative programmes delivered via our youth provision across the borough.
- Encouraging use of library services through their design and our engagement with young people and schools.
- Working in partnership with the voluntary sector and the Lewisham Arts in Education Network (LEAN) to improve access to the arts via schools. Continuing to use arts tools to improve intergenerational communication and engagement with public sector agencies like the police.

### How we will know if we have been successful

Performance measure	Baseline	Comparator baseline	Target 17/18	Desired direction of travel	Who is monitoring this?
Number of CYP who have regular instrumental or vocal lessons in or out of school	7,692	N/A	9,500	↑	Music Hub
% of 5-12 year olds who have used their library card	66%	63.3%	69.5%	↑	Culture and Community Services
Number of young people regularly (3* or more) accessing council funded youth service provision	3,200	N/A	3,400	↑	Youth Service

## Partnership commissioning Intentions 2015-18

<b>Outcome Area</b>	<b>Be healthy and active</b>	<b>Priority Aim</b>	<b>HA7: Ensuring our looked after children are healthy</b>	<ul style="list-style-type: none"> <li>☐ We want our children, young people and their families to be healthy and active, confident and able to make healthy choices and to understand how this can improve their development and wellbeing.</li> <li>☐ Through the delivery of our CYPP, we will improve and maintain the health and wellbeing of our children and young people, reducing health inequalities.</li> </ul>
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### Why this is a priority

A detailed assessment of the healthcare needs of Lewisham's looked after children was conducted in 2013. Amongst the key findings were: the following is a summary of its findings:

- The burden of physical ill health in looked after children in Lewisham was not large, but was greater than would be expected in a cohort of children in Lewisham.
- The burden of mental health problems appeared as bad, but not worse than in looked after children in neighbouring boroughs, and in London and the country as a whole.
- The needs assessment revealed a substantial burden of potential and/or actual emotional and behavioural morbidity.
- Lewisham reported numbers of looked after children who had substance misuse problems that were double that of Southwark and Lambeth, but fewer than the London average. Small numbers complicate this picture, but given the issues around detection of substance misuse, high levels are not necessarily indicative of poor processes, instead they may reflect better detection.
- Uptake of immunisation and the dental health of Lewisham's looked after children can be favourably compared to regional and national averages. Performance is, however, below target, and there is room for improvement.

### What we are doing

Lewisham's Children and Young People's Strategic Partnership will continue its focus on meeting the healthcare needs of this vulnerable group of children and young people. Statutory Health Assessments are valuable in ensuring the health of individual children and the focus on improving coverage and timeliness of these assessments is justified and will continue. This will include:

- Progress on the 2014 Health Care Needs Assessment, which examined related needs of looked after children and young people will now be reviewed.
- Ongoing monitoring of our performance against key statutory health checks to ensure that our Looked After Children receive the services they need.
- Working proactively with social care and health colleagues to improve joint working processes and ensure that timeframes for health checks are met.

### How we will know if we have been successful

Performance measure	Baseline	Comparator baseline	Target 17/18	Desired direction of travel	Who is monitoring this?
% LAC who have had an initial health assessment within 28 days	100%	N/A	98%	↑	Lewisham Safeguarding Children Board
% LAC who have had an annual health assessment in the last 12 months	92.6%	88.4% (national)	97.5%	↑	Lewisham Safeguarding Children Board
% LAC who have had a teeth check in the last 12 months	90.0%	84.4% (national)	93.5%	↑	Lewisham Safeguarding Children Board
% LAC who have had routine immunisations	91.4%	87.1% (national)	95.2%	↑	Lewisham Safeguarding Children Board

## Partnership commissioning Intentions 2015-18

<b>Outcome Area</b>	<b>Raise Achievement and Attainment</b>	<b>Priority Aim</b>	AA1: Ensuring there are sufficient school places for every Lewisham child	<ul style="list-style-type: none"> <li><input type="checkbox"/> We will promote the highest aspirations and ambition for all our children and young people across the partnership, particularly to close gaps and secure social mobility.</li> <li><input type="checkbox"/> We want all of our children and young people to achieve highly, supported by the best education, employment and training opportunities.</li> </ul>
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### Why this is a priority

The council is responsible for ensuring that the right numbers of school places are in the right areas at the right time in order to meet changing demand. It is also responsible for ensuring that there is sufficient finance is available to secure school places in high quality environments.

This continues to be a challenging area for the authority. Demand has exceeded supply since 2009/10 and is forecast to continue at this higher level until at least the end of this decade. This includes demand for places for children with disabilities and special educational needs (SEND).

Alongside ensuring that there are sufficient places overall, the council is responsible for ensuring that there is an accessible and fair admissions system in place to place children in schools. As overall demand for school places increases, meeting parental preference for schools also becomes more challenging. In 2015 92.8% of parents were allocated their first school preference at primary and secondary school. This is below national and London averages.

### What we are doing

Putting in place a mixed programme of temporary additional classes to ensure that additional needs can be met in the short-term and implementing long term enlargement plans in our existing schools estate. To date 2 secondary schools have become "all through" each opening 2 form entry primary provision, 17 primary schools have been permanently enlarged by between 0.5 and 1.5 form entry.

The borough has undertaken a further study of all school sites to identify those which can be expanded further to meet future demand. It is also working to identify sites for future new provision and this will be underpinned by a capital financing plan to facilitate the building of a new secondary school and special school by the end of the decade.

We will continue to work with boroughs across London to ensure that systems for the administration of school admissions are seamless and timely and increase the take up of electronic applications.

We will continue to publish annual policies built on good practice and engagement with parents and schools which set out how admissions decisions and establish clear and fair guidelines for appeals enabling parents to make informed choices during the admissions process.

### How we will know if we have been successful

Performance measure	Baseline	Comparator baseline	Target 17/18	Desired direction of travel	Who is monitoring this?
Number of additional school places created	645 (in 2014)	N/A	120	↑	Pupil Places Strategic Board
% parents allocated a preferred school at reception	92.8%	96.5%		↑	Pupil Places Strategic Board
% parents allocated a preferred school at secondary transfer	92.8%	96.4%		↑	Pupil Places Strategic Board

## Partnership commissioning Intentions 2015-18

<b>Outcome Area</b>	<b>Raise Achievement and Attainment</b>	<b>Priority Aim</b>	<b>AA2: Ensuring all our children are ready to participate fully in school</b>
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- We will promote the highest aspirations and ambition for all our children and young people across the partnership, particularly to close gaps and secure social mobility.
- We want all of our children and young people to achieve highly, supported by the best education, employment and training opportunities.

### Why this is a priority

Every child deserves the best possible start in life and the support that enables them to fulfil their potential. Children develop quickly in the early years and a child's experiences between birth and age five have a major impact on their future life chances.

A growing body of evidence shows that high quality early years provision is the key to improving life-long outcomes for children and their families. Research shows that those children from the most deprived families who access high quality early years provision, combined with a good home learning environment, see real developmental benefits.

Lewisham's Early Years Foundation Stage (EYFS) partners have a strong track record of excellence, with performance for children achieving a good level of development at this age the highest in the whole country for the last two years. Fundamental to these achievements to date is the strong partnership between, schools, children's centres and early years providers and the Council. Our commitment to sustaining this excellence will continue and our partnerships will be critical to achieving this so that expertise can be shared, leadership embedded and professional development for all practitioners supported.

### What we are doing

- We will continue to work with children's centres, schools and all other registered Early Years providers to ensure that the EYFS framework is embedded into practice. This will focus on ensuring that children are ready for school through the delivery of varied and evidence based programmes covering the core development areas:
  - Communication and language development
  - Physical development
  - Personal, social and emotional development
  - Literacy development
  - Mathematics
  - Understanding the world
  - Expressive arts and design
- We will explore opportunities to maximise the impact of our Early Years provision through further integration of service models and co-location of services across the partnership.
- We will ensure that early intervention approaches are embedded into our early years provision so that young children at risk of poor outcomes receive the targeted interventions they need, for example through the delivery of our Maternal Early Childhood Sustained Home-Visiting programme.

### How we will know if we have been successful

Performance measure	Baseline	Comparator baseline	Target 17/18	Desired direction of travel	Who is monitoring this?
% of children achieving a good level of development at EYFS	77.5%	66.3%	83%	↑	School Improvement Board
EYFS Free School Meals gap	8.7%	N/A	5.2%	↓	School Improvement Board
% of children who have attended children centres 6 or more times with good level of development at EYFS	70.1%	N/A	75%	↑	0-5 Steering Group



## Partnership commissioning Intentions 2015-18

Outcome Area	Raise Achievement and Attainment	Priority Aim	AA3: Improving and maintaining attendance and engagement in school at all key stages, including at transition points	<input type="checkbox"/> We will promote the highest aspirations and ambition for all our children and young people across the partnership, particularly to close gaps and secure social mobility. <input type="checkbox"/> We want all of our children and young people to achieve highly, supported by the best education, employment and training opportunities.
			Why this is a priority	What we are doing

School absence is a major factor in low attainment, poor wellbeing and lack of progression. Research indicates that low attendance in early years frequently leads to poor school attendance later on. Persistence absence, defined as 15% or more absenteeism during an academic year, is a particular concern for ongoing attainment.

Primary school attendance in Lewisham continues to improve, the persistent absence rate was 2.6% in 2013/14, up 0.1% from 2012/13 and down to 2.0% in 2014 which is better than the national average. The focus remains on reducing secondary school absence, particularly persistent absence. Our persistent absence rate in secondary schools has reduced from 6.3% 2012/13 to 6% in 2013/14, and although improving, it is 1.1% worse than both statistical neighbours and national in 2014.

Although we had a reducing trend for exclusions, this has recently become more variable, with recent increases in fixed and permanent exclusions. Permanent exclusions from all Lewisham schools in 2013/14 was 0.15%, up from 0.07% in 2012/13 and above the 0.05% target.

- All Lewisham schools are working hard to improve attendance and engagement in school. The authority will continue to work proactively with schools to support and monitor attendance levels and through working across the range of agencies ensure that vulnerable children and young people with entrenched poor attendance are supported are barriers are removed to improve their overall attendance so they can achieve.
- We will ensure that a range of statutory and non-statutory interventions are used to support and challenge entrenched poor attendance. This will include taking a holistic approach to issues of poor attendance and those associated factors impacting on children and young people.
- The Attendance, Welfare and Inclusion Team has undergone significant changes in the way they provide support to schools. This includes a targeted approach to tackling poor attendance across primary and secondary schools, particularly those with higher levels of persistent absence.

### How we will know if we have been successful

Performance measure	Baseline	Comparator baseline	Target 17/18	Desired direction of travel	Who is monitoring this?
Overall attendance – primary schools in Lewisham	96%	96% (national)	97%	↑	School Improvement Board
Persistent Absence – primary schools in Lewisham	3.2%	2.7% (national)	2.6%	↓	School Improvement Board
Overall attendance – secondary schools in Lewisham	94.7%	94% (national)	95%	↑	School Improvement Board
Persistent Absence – secondary school in Lewisham	6.2%	5.5%	5.4%	↓	School Improvement Board
% pupils permanently excluded from primary and secondary school	0.15%	N/A		↓	School Improvement Board

## Partnership commissioning Intentions 2015-18

<b>Outcome Area</b>	<b>Raise Achievement and Attainment</b>	<b>Priority Aim</b>	<b>AA4: Raise participation in education and training, reducing the number of young people who are NEET at 16-19</b>
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- We will promote the highest aspirations and ambition for all our children and young people across the partnership, particularly to close gaps and secure social mobility.
- We want all of our children and young people to achieve highly, supported by the best education, employment and training opportunities.

### Why this is a priority

Young people who remain in education and training until at least 18 are more likely to improve their qualifications and skills with resulting enhanced employment prospects along with social and economic rewards. Lewisham young people who are NEET, at 4.3% (at the end of May 2015), is relatively low compared with national benchmarks but above London benchmarks: London NEET 3.8%, young people nationally who are NEET 4.6%. Since December 2011 the number of 16-18 year olds who are NEET has consistently fallen. For most young people, being NEET is temporary as they move between different education and training options.

Current Lewisham 16 to 18-year-olds who were 'unknown' (i.e. we do not know whether they are in education or training) are 8.1%. Rates vary considerably with age – 0.5% of 16-year-olds, 1.5% of 17-year-olds and 6.1% of 18-year-olds. This is compared to national and local benchmarks: statistical neighbours 'unknowns' 11.1%, London 'unknown' 7.5% and young people who are 'unknown' nationally 7.1%.

In 2013/14, Lewisham had 76.3% of care leavers in education, employment or training, up 6.3% from March 2010 but down from 80% in 2012/13. In addition, Lewisham had 82% of its young offenders in education, employment or training in March 2011 but given that the number of young offenders classified as NEET is 19.2% it would be reasonable to estimate this figure is closer to 80% now. This is also better than the national average of 73% and better than our statistical neighbours at 76%.

### What we are doing

Our strategies to reduce the number of 'unknowns' are under constant review and proposals are in place to consider other strategies to reduce the number of 'unknowns' and these include:

- Working with Lewisham Electoral Services to canvas young people through existing communication methods.
- Formalising data sharing agreements with various national agencies including Job Centre Plus and other Department for Work and Pensions agencies and the Probation Service for example.
- Being involved in LGA and ADCS sector-led action learning sets to reduce 'unknown' rates.

We will work collaboratively across the partnership to support the ongoing engagement of 16-24 year olds in education, employment and training for example by introducing or further embedding the following interventions:

- 14-19 Team resource to track and monitor NEET young people and their outcomes and destinations.
- A Youth Support Service keyworker support offer
- Get Young People Working – The Youth Offer: Application for funding to City Bridge Trust to support NEET young carers, teenage parents and looked after children (LAC).
- Job Centre Plus – Work Coach support.

### How we will know if we have been successful

Performance measure	Baseline	Comparator baseline	Target 17/18	Desired direction of travel	Who is monitoring this?
% 16-18 years old not in employment/Edu/Training (NEET) – end Jan 15)	4.6%	4.7% (national)	>5%	➔	Participation and Engagement Strategy Group & 14-19 Forum
% 16-18 year old unknowns – Quarter (end Jan 15)	9.5%	7.2%	>10%	➔	Participation and Engagement Strategy Group & 14-19 Forum



## Partnership commissioning Intentions 2015-18

<b>Outcome Area</b>	<b>Raise Achievement and Attainment</b>	<b>Priority Aim</b>	<b>AA5: Raising achievement and progress for all our children at key stages 1-4 and closing the gaps between under-achieving groups at primary and secondary school</b>	<input type="checkbox"/> We will promote the highest aspirations and ambition for all our children and young people across the partnership, particularly to close gaps and secure social mobility. <input type="checkbox"/> We want all of our children and young people to achieve highly, supported by the best education, employment and training opportunities.
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### Why this is a priority

Education is one of the key factors in determining and transforming young people's life chances. By raising standards in our primary and secondary schools, more of our children and young people can reach their full potential.

In 2012, the number of children achieving results at KS2 in line or above age related expected attainment was 85%, this rose slightly in 2013 to 86% but has since reduced and for 2014, the number of children achieving at least age related expected attainment was 83.4%. In 2014, 51.3% of our young people achieved five A\*-C including maths and English. The Lewisham average was 2% below the national average of 53.0%, although six out of 14 schools were above this figure. Provisional 2015 outcomes suggest the gap to national has remained at a similar level, but with eight schools now above the provisional national average.

In 2014, two major GCSE reforms were introduced following Professor Alison Wolf's Review and an early entry policy to only count a pupils first attempt at a GCSE examination. Comparisons between outcomes after 2014 and those before 2014 should not be made. In 2014, although Lewisham showed a gap of 21% on the 5 A\*-C including English and maths measure at GCSE between the achievement of disadvantaged pupils and the wider population, this gap was less than the equivalent national gap of 27% (2014 DfE Performance Tables). From 2016 onwards, the threshold measure at GCSE of 5 or more A\*-C including English and maths will be replaced by two new measures, Attainment 8 and progress 8.

### What we are doing

To secure school improvement and school effectiveness we have the following principles:

- Taking a holistic and evidence based approach to school improvement
- Demonstrating equity and a targeted approach – meaning that we target the limited school improvement resources to meet need
- Being inclusive through championing the most vulnerable and disadvantaged children and young people including: looked after children (LAC); young carers; those with special educational needs and disability (SEND); those who are underperforming; those at risk of child sexual exploitation (CSE); those at risk of becoming a young offender, those at risk of witnessing or being a victim of domestic violence, children missing education (CME), those at risk of exclusion and those at risk of becoming not in education, employment or training (NEET)
- Being accountable and transparent by focusing on school leadership, management and governance
- Collaborating and working towards a school-led system of self-improvement which is based on peer to peer support, partnership working and school autonomy

### How we will know if we have been successful

Performance measure	Baseline	Comparator baseline	Target 17/18	Desired direction of travel	Who is monitoring this?
KS2 In line or above age related expected attainment	83.4% level 4+ combined reading, writing and maths	82.0%	89.0%	↑	School Improvement Board
KS2 FSM in line or above age related attainment	76.8% level 4+ combined reading writing and maths	64.0%	86.0%	↑	School Improvement Board
Gap between FSM at KS2 and non FSM for reading, writing and maths combined at the national expectation	6%	19%	3%	↓	School Improvement Board
Progress 8 Score	0 (2014)	0 (All Years)	At or above national avg & closing the gap with London avg	NEW	School Improvement Board
Attainment 8	46.4 (2014), 46.6 (provisional 2015)	47 (2015)	Exceeds zero and closing the gap with the local non-disadvantaged average	NEW	School Improvement Board
Progress 8 for Disadvantaged Pupils	New	New		NEW	School Improvement Board
KS4 FSM gap (5A*-C including English and maths)	27%	14%	15.0%	↓	School Improvement Board

## Partnership commissioning Intentions 2015-18

<b>Outcome Area</b>	<b>Raise Achievement and Attainment</b>	<b>Priority Aim</b>	AA6: Raising achievement and progress for all our children and closing the gaps between under-achieving groups at KS5 and post 16 so that all young people are well prepared for adulthood and able to access the best education and employment opportunities for them	<input type="checkbox"/> We will promote the highest aspirations and ambition for all our children and young people across the partnership, particularly to close gaps and secure social mobility. <input type="checkbox"/> We want all of our children and young people to achieve highly, supported by the best education, employment and training opportunities.
<b>Why this is a priority</b>			<b>What we are doing</b>	

We need to make sure that all young people start adult life with the skills, qualities and attributes they will need to access the best employment opportunities. Ensuring that young people are prepared for work relies upon good quality education opportunities for children beyond age 16. The council has a statutory obligation to ensure there are sufficient school places, promote the participation of young people in education and training and track those who are not participating.

The vast majority of 16-19 year olds in Lewisham are participating 'in learning' (84.6%) and 42.1% of our young people study in borough. For those who study out of borough, significant numbers travel to Bromley, Greenwich and Southwark. The percentage of young people educated in Lewisham post-16 institutions, who achieve Level 3 by 19 was at 56% in 2014.

Based on Lewisham residents (aged 16-19) who currently stay in borough for post-16 study (3085) and imported learners (2195) there are sufficient places in Lewisham institutions to meet these learner needs (5260 against 7523 places). This spare capacity could absorb growth in the 16-19 population, changes in travel to study patterns and any in or out of borough changes to the post-16 landscape.

Of the 11 current post-16 providers, eight are graded by Ofsted as good and better.

- The Local Authority will continue to support and monitor Lewisham schools and colleges to deliver the duty and will work with school to focus on the transitions throughout secondary education and into post-16 education to ensure informed choices for Lewisham young people and prevent the risk of becoming NEET or dropping out.
- In addition to our work with schools we will continue to collaborate with professionals across our partnership who interact with young people who will be making choices about ongoing education and skills (i.e. Youth Service/ JobCentre Plus) to ensure that we have a coherent and joined up message and approach to encouraging participation.
- The local authority monitors closely attainment of those pupils eligible for Pupil Premium to ensure that their aspirations are high and that they follow pathways that are commensurate with their potential.

### How we will know if we have been successful

Performance measure	Baseline	Comparator Baseline	Target 17/18	Desired direction of travel	Who is monitoring this?
A Level grades A*-E	98%	98.5%	Above national avg	↑	14-19 Strategic Forum
A Level grades A*-B	36.9%	52.2%	51.9%	↑	14-19 Strategic Forum
% young people educated in post-16 institutions achieving level 3 by 19	56%	57% (national)	59%	↑	14-19 Strategic Forum
% of post 16 providers graded as good/outstanding by OFSTED	73%	N/A	81%	↑	14-19 Strategic Forum

## Partnership commissioning Intentions 2015-18

Outcome Area	Raise Achievement and Attainment	Priority Aim	AA7: Raising achievement and attainment for our Looked After Children at all key stages and Post 16	<input type="checkbox"/> We will promote the highest aspirations and ambition for all our children and young people across the partnership, particularly to close gaps and secure social mobility. <input type="checkbox"/> We want all of our children and young people to achieve highly, supported by the best education, employment and training opportunities.
	Why this is a priority		What we are doing	

Looked After Children (LAC) have a right to expect the outcomes we want for every child. To achieve these five outcomes for looked after children, local authorities as their 'corporate parents' must demonstrate the strongest commitment to helping every child they look after, wherever the child is placed, to achieve the highest educational standards he or she possibly can.

Ensuring that Looked After Children are actively engaged in school and supporting good attendance is critical for their achievement. Currently, the overall % of school sessions lost due to absence for our LAC is 7% which is in line with the national average.

At a national level, there is a significant gap between the educational achievement of looked after children and the young person population as a whole. The current data on GCSE results for our virtual school provisionally shows that 19% of our LAC achieved 5 A\*-C at GCSE. Whilst this is a 58% increase on the previous year and above the national average, it is still significantly lower than the school population as a whole which was 56.2%.

In 2015, 6.6% of our care leavers were NEET, this is a significant reduction on previous years but still higher than the figure for the young person population as a whole which is 3.5%. A key priority for us will be ensuring that we work proactively with young people, not only to enrol them into education but also to support the ongoing retention in further education.

Our Virtual School for Looked After Children has the responsibility for supporting the overall educational development and achievement of our Looked After Children. We will continue to work proactively across all settings to drive the commitment to educational outcomes for our LAC. As part of this, some specific areas of improvement have also been identified including:

- Ensuring that schools supporting our LAC across the country comply with their duties in relation to LAC and develop inclusive school communities in which they can thrive.
- Improving the quality of our Personal Education Plans so that they are more easily accessible to young people and the professionals that support them
- Supporting our LAC to be more work ready through our education provision as well as through work experience programmes
- Building the capacity of our workforce to identify and respond to the needs of Looked After Children in education.
- Embedding a dedicated CAMHS worker to provide bespoke and targeted support for our LAC to ensure that they can access targeted support quickly if it is needed.

### How we will know if we have been successful

Performance measure	Baseline	Comparator Baseline	Target 17/18	Desired direction of travel	Who is monitoring this?
% LAC school sessions lost to overall absence	7%	3.9% (national)	6%	↓	LAC Virtual School Governing Board
% LAC achieving A*-C (inc. Eng & Maths)	19% (provisional)	N/A	20%	↑	LAC Virtual School Governing Board
% Care Leavers age 19 in Employment/Edu/Training	66.7%	66%	80%	↑	LAC Virtual School Governing Board

## Partnership commissioning Intentions 2015-18

<b>Outcome Area</b>	<b>Stay Safe</b>	<b>Priority Aim</b>	<p>SS1: Identifying and protecting children and young people at risk of harm and ensure they feel safe, especially from: domestic violence, child sexual exploitation, radicalisation and extremism, serious youth violence, child abuse and neglect and deliberate and accidental injury.</p>	<p><input type="checkbox"/> We will work across the partnership to ensure that the right of every child to live in a safe and secure environment, free from abuse, neglect and harm is protected.</p> <p><input type="checkbox"/> We will identify and protect children and young people at risk of harm and ensure that they feel safe.</p>
<b>Why this is a priority</b>			<b>What we are doing</b>	

Ensuring children are safe from all types of abuse, neglect and injury is a key priority for the partnership.

Lewisham has one of the highest rates of reported domestic violence, 555 children in Lewisham were identified as being exposed to high risk domestic violence in the home in 2013-2014, with up to a third of all children in the borough exposed to any domestic violence in any one year. Since January 2013, there have been 37 identified cases of child sexual exploitation in Lewisham and it is a key priority for the partnership to intervene early and take decisive action on these cases. In common with other local authorities, Lewisham has seen an increasing demand for Children's Social Care Services. The number of contacts in March 2015 was 2257 which is 15% higher than the same point the previous year. In March 2015, there were 377 children subject to a child protection plan an increase of 73 cases on the previous year.

In general rates of accidents and injuries in children in Lewisham are lower than is the case for the country as a whole. Hospital admissions rates caused by injuries in children up to the age of 15 and in young people aged between 15 and 24 are lower than average. Road traffic accidents have been the focus of particular attention in Lewisham. The numbers of children killed or seriously injured in road traffic accidents is significantly lower than the national average as a result.

The Counter-Terrorism and Security Act 2015 placed a duty on specified authorities including implementing the Prevent Strategy in educational establishments. While individual instances of radicalisation remain relatively low in Lewisham, this remains an area of concern for the partnership.

- Delivering our Violence Against Women and Girls Action Plan which sets out a series of approaches the partnership will take towards reducing incidences of domestic violence and supporting women who experience domestic violence.
- Ongoing implementation of the Safeguarding Children' Board's action plan arising from our Child Sexual Exploitation Strategy in relation to prevention, protection, support, enforcement and accountability
- Adopting early intervention approaches to reduce the number of children suffering abuse and neglect and continuing to provide timely assessment of children in need of services and those services being provided.
- Working proactively across the partnership to ensure information sharing on all cases of children at risk of harm continues to be shared and acted upon.
- Keeping children safe from accidental injury including through work on promoting road safety.
- Embedding an extensive training programme for teaching staff and frontline professionals from various sectors is in progress raising awareness of the Prevent strategy and safeguarding approaches.

### How we will know if we have been successful

Performance measure	Baseline	Comparator baseline	Target 17/18	Desired direction of travel	Who is monitoring this?
Number of children on CPP per 10,000 Lewisham population under 18	61.4	41.8	40	↓	Safeguarding Children Board
% children subject to a CPP for a second or subsequent time	13.5%	13.9%	9%	↓	Safeguarding Children Board
Number of victims identified and safeguarded through referrals to MARAC (single annual figure)	26 (2014/2015)	19 (London avg 2014/2015)	40	↑ (identification)	Safer Lewisham Partnership
Number of cases of cases of children identified as at risk of child sexual exploitation being managed by the partnership	28	N/A	N/A	↑ (identification)	Safeguarding Children Board
Hospital admissions caused by unintentional and deliberate injuries in children aged 0-14 years. Rate/10,000	101.6	84.6	84.6	↓	Clinical Commissioning Group

## Partnership commissioning Intentions 2015-18

<b>Outcome Area</b>	<b>Stay Safe</b>	<b>Priority Aim</b>	<p>SS2: Reducing anti-social behaviour and youth offending.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> We will work across the partnership to ensure that the right of every child to live in a safe and secure environment, free from abuse, neglect and harm is protected.</li> <li><input type="checkbox"/> We will identify and protect children and young people at risk of harm and ensure that they feel safe.</li> </ul>
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### Why this is a priority

Youth offending and serious youth violence are important issues to address in the borough. For the 12 months to September 2015 there were 255 incidents of Serious Youth Violence and 81 incidents of knife crime with injury for individuals under the age of 25. In the case of the latter offence this is a significant rise from 62 counts in the previous year.

Lewisham experienced a sharp decline in the number of First Time Entrants (FTE) to the Youth Justice System prior to 2012 when a range of alternative options to formal disposals were introduced. First time entrants (aged 10-17) to the youth justice system dropped from 2,601 (per 100,000) in March 2009 to 968 in March 2011 which compared favourably to the national rate. The rate at which this decline was experienced reduced and we are now seeing an increase in FTE rates. There is a mixed pattern emerging across London and Lewisham has in place an action plan to address this increase, underpinned by a strong partnership with the Police and prevention and early intervention services.

Lewisham's reoffending rate has varied across the last year with a low number of young people committing crime but a high number reoffending. Lewisham's reducing reoffending strategy aims to target the most prolific offenders and provide them with intensive programmes that will address reoffending while managing them in the community.

### What we are doing

The Lewisham Youth Justice Strategic Plan sets out the partnership approaches which will be taken to addressing youth crime in Lewisham. These include:

- Ensuring compliance with National Standards and meeting the actions as set out in the Lewisham YOS National Standards Audit Action Plan
- Improving sentence planning, risk management and safeguarding practices when young people are placed in any secure setting
- Improving the timeliness and quality of assessments and intervention plans, using the Integrated Assessment Plan (IAP) tool
- Ensuring that appropriate plans are put in place to safeguard young people at the start of their Order and that approaches are made in partnership with other relevant agencies, responding to new information as it emerges
- Increasing the range of alternative education provision available for young people to access as an alternative to custody or post custody
- Further developing the out of court disposal interventions that are provided and to link this to a systemic family approach.

### How we will know if we have been successful

Performance measure	Baseline	Comparator baseline	Target 17/18	Desired direction of travel	Who is monitoring this?
First time entrants to the Youth Justice System (per 100,000 age 10-17)	636	550	550	↓	Safer Lewisham Partnership
Proportion of offenders who re-offend after 12 months	1.24	1.29	>1.24	↓	Safer Lewisham Partnership
No. of young people receiving a custodial sentence (per 1,000 sentenced)	1.64	0.96	0.96	↓	Safer Lewisham Partnership



# Partnership commissioning Intentions 2015-18

Outcome Area

Stay Safe

Priority Aim

SS3: Ensuring our Looked After Children are safe

- We will work across the partnership to ensure that the right of every child to live in a safe and secure environment, free from abuse, neglect and harm is protected.
- We will identify and protect children and young people at risk of harm and ensure that they feel safe.

## Why this is a priority

Children entering care have often experienced difficult childhoods, some will have been victims of crime themselves. Ensuring their safety whilst they are in our care and enabling them to transition safely into adulthood are key priorities for the partnership.

To do this, we need to ensure that all our looked after children are in high quality stable placements and that we carefully monitor the outcomes of these placements for their overall achievement and wellbeing. We also need to work proactively with young people in care to reduce the number of missing or unauthorised absence episodes which are associated nationally with a greater risk for children of becoming victims of sexual exploitation or other crimes. There are no exact figures nationally for the number of children who run away, but estimates suggest that the figure is in the region of 100,000 missing per year. Nationally, there are particular concerns about the links between children running away and the risks of sexual exploitation.

In 2014/15 there were 71 recorded episodes of a child being missing from care. Although most of the majority of these children (66%) were returned to care within 5 days of going missing (83% within 10 days), every absence from care is a concern for the authority and we will work towards reducing both the number of missing episodes and the duration of these.

Currently Lewisham's single list of children at risk of sexual exploitation includes 28 children. However, this is a dynamic list which is active managed by our Children's Social Care. Identifying children at risk is also a complex issue and requires the active engagement of all partners to ensure that we can effectively prevent crime, keep young people safe and prioritise criminal justice processes. This is a priority for our partnership.

## What we are doing

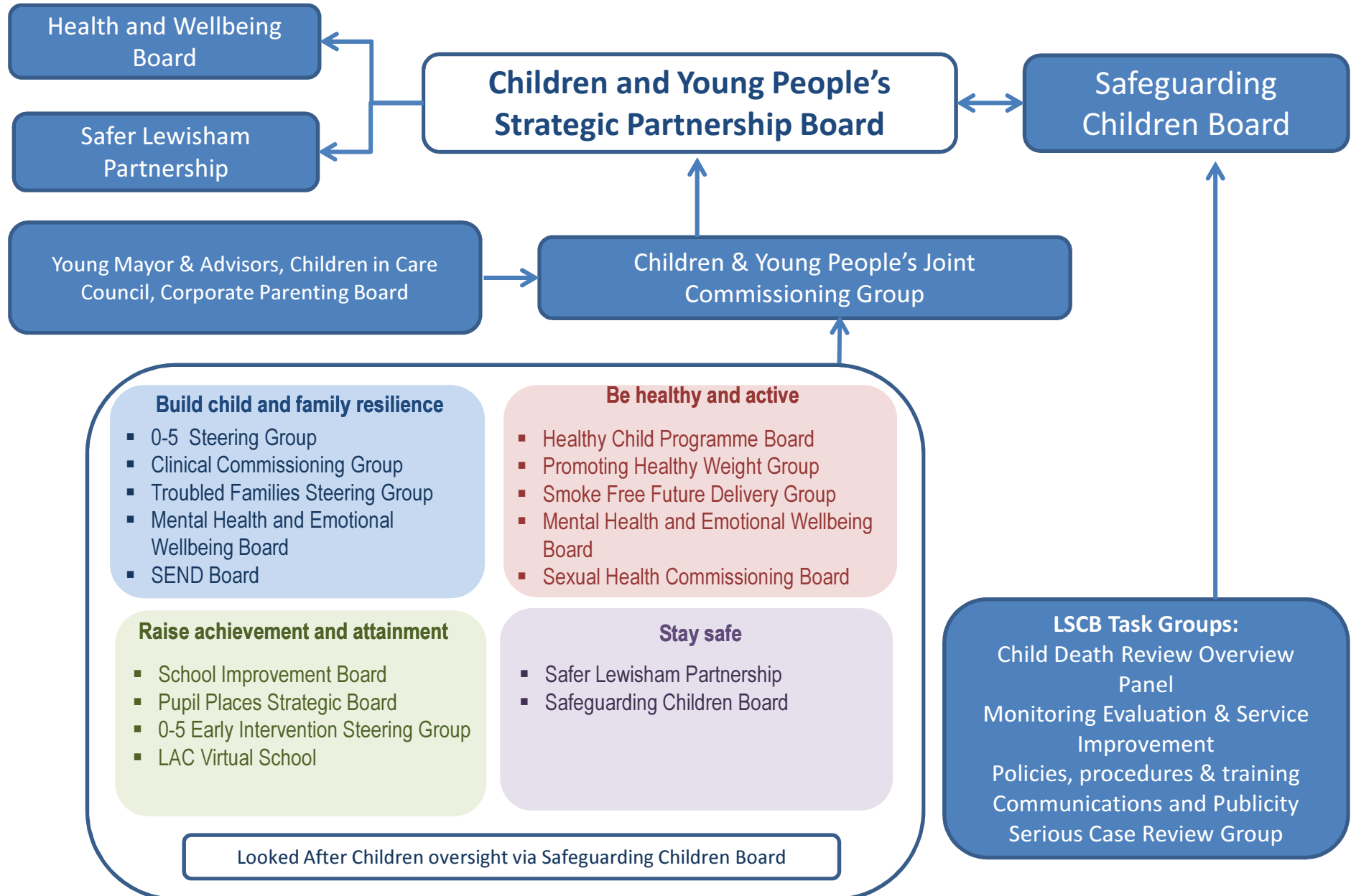
- A Missing from Care Protocol is in place between Lewisham and agencies with processes in place to ensure that there is active oversight of children missing from care to ensure that all actions are being taken to find and safeguard the child.
- Lewisham's Safeguarding Children Board has developed a Child Sexual Exploitation (CSE) Strategy, action plan and operating protocol which is accepted by all partners. As part of this strategy Children's Social Care compiles a single list of children missing from home or care; or school or at risk of sexual exploitation. This single list is reviewed and refreshed each week to ensure that appropriate action has been taken.
- We have developed robust sexual exploitation procedures so that all our social workers and managers are aware of how to respond in light of concerns.
- The council have appointed a specialist CSE social worker and a Missing Children liaison officer. Working jointly across the partnership, they deliver a proactive service for children and young people at risk of being missing or sexually exploited.
- Our Safeguarding Children Board is also responsible for identifying trends and themes arising from individual cases and developing borough wide approaches for tackling the factors contributing to risk for our looked after children.

## How we will know if we have been successful

Performance measure	Baseline	Comparator baseline	Target 17/18	Desired direction of travel	Who is monitoring this?
Number of episodes of unauthorised absence/ missing from care for more than 24 hours	71	N/A	Pending (December performance release)	↓	Safeguarding Children Board
Number of cases of cases of children identified as at risk of child sexual exploitation being managed by the partnership	28	N/A	N/A	↑ (identification)	Safeguarding Children Board

# Our partnership are responsible for overseeing the plan

## Democratic oversight and Partnership Governance Structures



## Needs analysis and strategies underpinning this plan

- Lewisham Sustainable Community Strategy 2008-2020
- Violence Against Women and Girls Plan
- Youth Justice Plan
- Anti-bullying Resource
- Mental Health and Emotional Wellbeing Strategy
- Children's Social Care Placements & Procurement Strategy
- Lewisham Participation Strategy
- Annual Public Health Report 2015-16
- Lewisham Safeguarding Children Board Annual Reports
- Safer Lewisham Strategy and annual plan
- Lewisham Child Sexual Exploitation Strategy