

COMMUNITIES POLICY OVERVIEW COMMITTEE

Wednesday, 25th March, 2009

10.00 am

**The Village Hall - Kent Life (Formally the Museum
of Kent Life), Lock Lane, Sandling, Maidstone ,
ME14 3AU**





AGENDA

COMMUNITIES POLICY OVERVIEW COMMITTEE

Wednesday, 25 March 2009 at 10.00 am
The Village Hall - Kent Life (Formally the
Museum of Kent Life), Lock Lane,
Sandling, Maidstone , ME14 3AU

Ask for: Denise Fitch
Telephone: 01622 694269

Tea/Coffee will be available 15 minutes before the meeting

Membership (14)

- Conservative (9): Mrs S V Hohler (Chairman), Mr R H C Bliss, Mr D L Brazier,
Mr A R Chell, Mr D A Hirst, Mr R E King, Mr R L H Long, TD,
Mr M J Northey and Mr C T Wells
- Labour (3): Mr T J Birkett (Vice-Chairman), Mr G Cowan and
Mrs E D Rowbotham
- Liberal Democrat (1): Mr G Rowe
- Independent (1) Mr B P Wood

UNRESTRICTED ITEMS

(During these items the meeting is likely to be open to the public)

Item No

A. COMMITTEE BUSINESS

- A1 Membership
To note that Mr D Brazier has replaced Mrs E Tweed as a member of this
Committee.
- A2 Substitutes
- A3 Declarations of Interests by Members in items on the Agenda for this meeting
- A4 Minutes - 13 January 2009 (Pages 1 - 8)

B. ITEMS FOR CONSIDERATION

- B1 Portfolio Holder and Managing Director's Update (Pages 9 - 10)
- B2 Financial Monitoring Report : Community Services 2008/09 (to follow)

- B3 An Alcohol Strategy for Kent (Pages 11 - 30)
- B4 Draft Hidden Harm Strategy (Pages 31 - 52)
- B5 Integrated Youth Support Strategy (Pages 53 - 90)
- B6 National Year of Reading (NYR): a Legacy beyond 2008 (Pages 91 - 98)
- B7 Museum of Kent Life (Pages 99 - 102)
- B8 Equalities and Diversity (Pages 103 - 108)

C. SELECT COMMITTEE WORK

- C1 Select Committees - update (Pages 109 - 110)

EXEMPT ITEMS

(At the time of preparing the agenda there were no exempt items. During any such items which may arise the meeting is likely NOT to be open to the public)

Peter Sass
Head of Democratic Services and Local Leadership
(01622) 694002

Tuesday, 17 March 2009

Please note that any background documents referred to in the accompanying papers maybe inspected by arrangement with the officer responsible for preparing the relevant report.

KENT COUNTY COUNCIL

COMMUNITIES POLICY OVERVIEW COMMITTEE

MINUTES of a meeting of the Communities Policy Overview Committee held in the Archbishop's Palace, Palace Gardens, Mill Street, Maidstone ME15 6YE on Tuesday, 13 January 2009.

PRESENT: Mrs S V Hohler (Chairman), Mr T J Birkett (Vice-Chairman), Mr G Cowan, Mr A R Chell, Mr D A Hirst, Mr R E King, Mr R L H Long, TD, Mr M J Northey, Mrs E D Rowbotham, Mr G Rowe and Mrs E M Tweed

ALSO PRESENT: Mr P M Hill, OBE

IN ATTENDANCE: Mr C Bainbridge (Director Of Community Safety & Regulatory Services), Mr D Cloake (Head of Emergency Planning), Mr D Crilley (Director of Community Cultural Services), Ms J Edwards (Director of Policy and Resources), Ms D Fitch (Assistant Democratic Service Manager (Policy Overview)), Ms A Honey (Managing Director Communities), Mr D Shipton (Head of Finance and Asset Management) and Ms A Slaven (Director Youth Services and KDAAT)

UNRESTRICTED ITEMS

109. Minutes - 12 November 2008

(Item A3)

RESOLVED that the Minutes of the meeting held on 12 November 2008 are correctly recorded and that they be signed by the Chairman.

110. Portfolio Holder and Managing Director's Update

(Item B1)

(1) Mr Hill and Ms Honey gave an update based on the list of topics that they had circulated with the papers for the meeting this included :-

- Turner Contemporary
- KDAAT and Trading Standards
- Libraries
- Youth Services
- Apprenticeships
- Volunteers
- Kent History Centre
- Sub National Review
- Staff Changes

(2) Ms Honey stated that Mr Shipton would be leaving the Directorate to take up a post in Corporate finance, the Chairman thanked Mr Shipton for the excellent service and support that he had given to the Committee.

(3) RESOLVED that the update be noted and an update paper on Supporting Independence Programme be submitted to a future meeting of the Committee.

111. Turner Contemporary Update

(Item B2)

(1) Mr Hill presented a report which updated the Committee on the latest position regarding the construction of the gallery, the latest plans for the revenue running costs and funding of the operation of the gallery, and regeneration impact of the Turner Gallery and the Rendezvous site.

(2) Mr Birkett, whilst emphasising his support for the project, highlighted the importance of ensuring that adequate parking provision was provided for the numbers of visitors expected. Mr Hill explained that there would not be dedicated parking for Turner Contemporary but the needs of visitors to the gallery were being considered as part of a review by Thanet District Council of parking for the whole of Margate. Members also mentioned the importance of making use of public transport to the gallery as accessible as possible for visitors.

(3) Mr Rowe also expressed his support for the gallery and was pleased that a Kent firm had won the tender to build it. Mr Hill stated this company were committed to providing apprenticeship on the project and working with the local colleges.

(4) In response to a question from Mr Northey, Mr Hill stated that the new Chairman of the Trust and other board members came from a media background and understood the need to effectively promote Turner Contemporary and build its profile on a national and international level.

(5) In response to a question from Mr Long, Mr Hill clarified that KCC were responsible for the external maintenance costs for the gallery and the Trust were responsible for the internal running costs. In relation to the length of the lease and rent reviews, Mr Shipton explained that this was still to be negotiated with the trust but it would be based on a peppercorn rent.

(6) Members mentioned the importance of including Turner Contemporary in publicity, both in the UK and on the continent, as another good quality attraction for tourists to Kent. It was also suggested that Network Rail could be approached to make Turner Contemporary part of a "smart ticket" along with other Kent attractions.

(7) RESOLVED that the latest developments on the Turner Contemporary project and an update be submitted to the Committee twice a year.

112. Financial Monitoring 2008/09

(Item B3)

(1) Mr Shipton presented the regular report to this Committee on the forecast outturn against budget for the Communities portfolio based on the second quarterly monitoring report and subsequent exception report to Cabinet.

(2) In relation to the overspend on the Coroners' Service, Mr Bainbridge explained that part of the increase cost was due to our society becoming more litigious, which was having an impact on the decisions made by the service in relation to holding post mortems followed by an inquest. Mr Bainbridge confirmed that regular meetings were held with colleagues in the Coroners' Service and suggestions

made for looking at practices to take account of the county councils view on the cost of the service. Mr Hill confirmed that he was discussing this matter with officials in the Ministry.

(3) In response to a question on the difficulty in recruiting qualified Trading Standards officers, Mr Bainbridge explained that it was a national issue arising from additional funding being given to councils in relation to intellectual property crime, which had increased the demand for qualified staff. He confirmed that the service had not been compromised by not being able to recruit staff of suitable calibre, but with additional staff more work could be carried out.

(4) In relation to a question from Mr Birkett on Adult Education, Mr Hill reaffirmed his commitment to retaining a good quality service and acknowledged that in future years it may be necessary to review the policy to keep it cost neutral, in the light of the demise of the Learning & Skills Council.

RESOLVED that the projected outturn figures for the directorate for 2008/09 based on the second quarterly monitoring report to Cabinet be noted.

113. Performance Monitoring 2008/09

(Item B4)

(1) Ms Edwards introduced a report which summarised 'in-year' performance of the service units in Communities in advance of the annual report on performance in July 2009. The report also provided an update on the new set of National Indicators.

(2) In response to a question from Mr Northey Mr Crilley undertook to supply Mr Northey with details of how the price of books was impacting on the library service.

(3) In response to a request from Mr Hirst for a definition of "effective treatment, Ms Slaven explained that for the previous target had simply measured numbers in treatment including those who did not complete the treatment. The new target which measures "effective treatment" only counted the number of people who complete a treatment cycle of 12 weeks and therefore this was a significant change.

(4) Following a question from Mr Rowe, Ms Slaven explained the Positive Action for Young People funding stream. Mr Chell confirmed that the Select Committee on Provision of Activities for Young People had received information about this scheme.

(5) RESOLVED that the report be noted and that the November meeting of the POC receive a report on the National Indicator Set as it relates to the Communities Directorate.

114. Budget 2009/10 and Medium Term Financial Plan (MTP) 2009/12

(Item B5)

(1) The Committee considered the Communities Directorate's Draft Budget proposals set out in the Draft Budget 2009-10 and the Draft Medium Term Financial Plan 2009-2012 and also the report which was circulated specifically relating to the key areas of these documents for Communities.

(2) Mr Hill, Ms Honey and Mr Shipton introduced the MTP, the Revenue Budget and Capital Budget for the Communities Directorate. Mr Hill and officers answered questions from members about the following issues:-

(a) *Inflation*

(3) In response to a question from Mr Northey on how far the inflation figures had been built into the budget and what strategies there were to deal with variations in the rate of inflation, Mr Shipton explained that contracts for rent, cleaning etc relating to the cost of running buildings include an annual indexation and therefore it was easier to predict the rate of inflation on the contracts. However, the area of greatest risk was the cost of electricity, as the Council had not entered into any long term contracts for energy provision, and a figure of 20% for inflation had been built into the budget for this. This represents prudent provision for what was the most volatile cost in recent months (with estimated increases in excess of 40% earlier in the year) and he was confident that they would be able to cope with any other variables.

(b) *Contact Centre re-charges*

(4) In response to a question from Mr Chell, Mr Shipton confirmed that there would not be any charge to the Directorate for the services provided by the Contact Centre as these costs were covered corporately and have not been included in the corporate budget delegated to service Directorates.

(c) *Personnel Services – charges*

(5) In response to a question from Mr Chell, Mr Shipton explained that the cost to the Directorate for Personnel Services would be based on the number of requests that the Directorate made to them and the support given.

(d) *Use of kent.gov to advertise vacancies*

(6) Mr Shipton confirmed that KCC only used kent.gov to advertise its vacancies. Evidence had shown that this was the most effective way of recruiting staff.

(e) *Adult Education - income*

(7) In response to a question regarding the vulnerability of the market- related income from Adult Education, Mr Shipton explained that there was a contingency plan that identified potential risks and action which could be taken in the event of these risks coming to fruition. Adult Education had a very detailed financial plan.

(f) *Staff reductions*

(8) In response to a question from Mrs Rowbotham, Mr Shipton stated that regarding the management restructuring and staff efficiency savings, one post had been identified in the MTP, which was subject to consultation, and a reduction of one post in the central support team. He explained that if an officer took early retirement then the portfolio would pick up the retirement cost until the officer reached normal retirement age. This might be an issue with the proposed restructuring of Registration Services. Ms Honey confirmed that there would be a confidential update on this restructuring at the next briefing for Dr Eddy and Mrs Dean.

(g) Vacancy Management

(9) Mr Shipton explained that a flexible approach was taken to vacancy management, there was local discretion and that savings were adjusted according to actual turnover of staff during the year.

(h) Homesafe Van funding

(10) In response to a question from Mrs Rowbotham, Mr Shipton explained that the funding for the Homesafe Van, which had previously come out of the Communities Directorate budget would now be funded from the Supporting People programme within the Adult Social Services budget as this was more appropriate. He confirmed that the Directorate would continue to look at all possible sources of government funding for their services but it was important to have an exit strategy for any such funding should it come to an end.

(i) Review of essential user's car allowance.

(11) In response to a question from Mr Rowe, Mr Shipton explained that officers were contracted as car users but whether they were an essential or casual car user would depend on the number of miles travelled in a year and was not a contractual condition. Where staff were not going to reach the required mileage to qualify as an essential user it was important to give them adequate notice that they would be re-classified as a casual user.

(j) Grants to village halls

(12) Mr King emphasised the importance of investing in community infrastructure, i.e. village halls, which were a good way of stimulating community activities and stated that he would like to see more flexibility in this budget in future.

(13) Officers and the Cabinet Member were congratulated by members on the budget that had been produced for Community Services, which safeguarded frontline services and achieved savings and were in line with the Committee's views, as expressed at the last POC.

RESOLVED that that the Budget 2009-10 and Medium Term Plan 2009 to 2012 for the Community Services Portfolio, along with the responses made to the questions from members, be noted.

115. Emergency Planning

(Item B6)

(1) Mr Cloake presented a report which summarised developments in emergency planning in the past year and noted three incidents which had occurred or been anticipated. The report also highlighted the attention being given to resilience issues in Kent that may be associated with the 2012 Olympic Games. Mr Cloake gave further information on the work of the Severe Weather Planning Group which was a working group of the Kent Resilience Group.

(2) In relation to a question on the budget implications for emergency planning for the Olympics, Mr Cloake confirmed that this could substantially be incorporated in the

current Emergency Planning and Sports Development budgets. Mr Hill raised the concerns of the Police regarding the number of officers, including specialist officers, that they would be required to provide to support colleagues in London.

(3) RESOLVED that the report be noted.

116. Equality Standard for Local Government (ESLG) – KCC assessment and action plan

(Item B7)

(1) Ms Edwards introduced a report which formally confirmed KCC's successful achievement of Level 3 against the existing Equality Standard, making it one of only 12 County Councils to do so (with none at Level 4).

(2) In response to a question from Mr Long, Ms Edwards confirmed that officers believed that the recommendations could reasonably be delivered within existing resources. The major cost was officer time and therefore did not have a direct impact on the budget.

RESOLVED that: - (a) the actions at paragraphs 2 i to 2 viii in the report be noted; (b) the Committee agreed with proposals at paragraphs 3.1 to 3.5; and (c) it be noted that there would be a report to a future meeting setting out how the Directorate were addressing the proposals and the resource implications.

117. Draft Communities Risk Register 2009/10

(Item B8)

(1) Ms Edwards presented a report which identified the strategic risks that were managed and controlled within the Communities Directorate. The report also set out the main changes from the 2008/09 register.

(2) In response to a question from Mrs Rowbotham on the difficulties with recruitment and retention of qualified youth workers, Ms Slaven explained that this was not a problem solely for Kent but reflected a national picture. However in the north of the country the London wage factor also played a part.

(3) Ms Edwards explained that the scoring was based on officers' views on the order of risk. It was confirmed that where a high level of risk had been identified, contingency plans were in place.

(4) RESOLVED that the draft Communities Directorate Risk Register 2009/10 be endorsed for recommendation to the Governance and Audit Committee for approval.

118. Select Committees - update

(Item C1)

(1) The Committee received a report which updated Members on the work of the Select Committee on Provision of Activities for Young People and invited suggestions for future topic reviews. Mr Chell, Chairman of the Select Committee stated that they would be meeting to discuss areas of recommendation later that week.

(2) RESOLVED that (a) the update on the Select Committee on Provision of Activities for Young People be noted; and (b) Members email suggestions for potential Select Committee Topic Reviews, to the Democratic Services officer for consideration by the Policy Overview Co-ordinating Committee at its meeting on 28 April 2009.

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Communities Policy Overview Committee
Update by Mike Hill and Amanda Honey
25th March 2009

1. Turner Contemporary

- Durtnell's continue to make good progress on site
- MH and AH visit to Kunsthaus Bregenz – Austria - 24 February
- Turner Contemporary staff restructure commenced 11 February, ends 12 March.
- SEEDA Board approval of the Business Plan on 25 February, enabling completion of funding agreements

2. Libraries

- Ramsgate Library opened on the 20 February.
- East Peckham Library launch – 21 March
- Ashford Library update
- Beaney Library update
- Envision - Libraries and Archives IT project
- Reading and Literacy Legacy of National Year of Reading conference – 10 March

3. Adult Education

- Presentation to staff at Dover Immigration Detention Centre- 29 January
- Opening Dartford Adult Education Centre – 12 February
- Launch of Skills Plus Adult Education Centre in Folkestone.

4. Cultural development

- Cultural Summit – A listening conference – 17 February
- Opening of Quarterhouse – Creative Foundation – 5 March
- Youth Theatre Festival – 22 March

5. Sport, Leisure and Olympics

- Beacon Award – 3 March
- Big Screen update

6. Youth Services

- Opening of Hadlow Youth Centre – 5 February

7. Community Safety and Regulatory Services

- Young Consumer of the Year Competition - 23 January
- Emergency Planning - wood cargo (winter gritting?).

5. Apprenticeships

MH / AH will give a verbal update.

6. Quality Service Awards

Awards for teams and individuals who contributed towards outstanding high quality activities within the Communities Directorate.

7. County Council budget

MH / AH will give a verbal update.

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By: Mike Hill, Cabinet Member, Amanda Honey, Managing Director,
Communities

To: Communities Policy Overview Committee, 25th March 2009

Subject: An Alcohol Strategy for Kent

Classification: Unrestricted

Summary: The Alcohol Strategy for Kent sets out the way forward for agencies across Kent to work in partnership to prevent the harm caused by alcohol misuse. It aims to provide a structure for the development of treatment programmes, a preventative strategy for adults and young people and a community approach to issues such as policing, licensing and trading standards. It sets in context the current resource allocation and the improvements necessary to ensure that the County of Kent has in place an effective and responsive system.

Recommendations:

- This strategy is presented as a framework for consultation and Members are asked to note the contents of this report and comment on the content and direction of the strategy
- Members are asked to support the progress of the strategy to broader consultation with partners and communities.

FOR INFORMATION & CONSULTATION

1. Introduction

- 1.1 The National Treatment Agency was established in 1988 and the principal focus of its work has been tackling drug misuse. In 2007 the Government published "Safe, Sensible, Social" to address alcohol misuse, an update of the 2004 National Harm Reduction Strategy. This is supplemented by a series of other strategies including those within the Public Health realm and, significantly, the Licensing Act of 2003. All the strategies bring alcohol misuse into much sharper focus, and identify a requirement for the public sector to work in partnership with the alcohol industry, at both production and retail levels.
- 1.2 In 2007 Kent County Council convened a Select Committee to review the health aspects of alcohol misuse. This focussed upon treatment provision, preventative services and in particular the impact of patterns of alcohol consumption by young people. The Committee received evidence from a wide body, including treatment providers, the health service, young people and the police. The review concluded with a report detailing some 28 recommendations and this report provided a very useful foundation for the development of an alcohol strategy for Kent. A report back to the Select Committee will be undertaken in the forthcoming months.

2. An Alcohol Strategy for Kent

- 2.1 The Strategy has been developed using the framework recommended by the National Treatment Agency and has been supported by Alcohol Concern, agencies from across Kent County Council, Police and Health Services. It reflects the national evidence base of the harm caused by alcohol to health, employment/industry and criminal justice and makes local comparators from which to build and develop service responses.
- 2.2 The Strategy sets out Kent's position in respect of treatment for young people and adults and the activity being undertaken to address the community safety concerns and the mechanisms for managing the impact of alcohol misuse within the public realm.
- 2.3 In 2008, an increasing focus on what is referred to as Hidden Harm¹ has emerged. This has been brought into significant attention following the tragic death of Baby P, and issues of safeguarding practice. The Alcohol Strategy will incorporate work which addresses issues relating to families, linking in with the Hidden Harm Strategy.
- 2.4 The strategy identifies the priorities for action which include:
 - a. Communication: how to convey important public health messages without alienating the general public, ensuring that key professionals have an understanding of alcohol misuse, its symptoms and outcomes, and seeking to have an informed employer group that can support and manage workplace issues
 - b. Treatment: improving the current level of treatment provision across a range of needs from prevention, early diagnosis to acute care
 - c. Community Safety: working with the Police and other Criminal Justice agencies to develop responses that minimise the impact of alcohol misuse and that, for example within the prison system, education programmes are developed alongside treatment
 - d. Licensing: working within a partnership arrangement to ensure the intentions of the Licensing Act 2003 are achieved and fulfilling the 2010 Strategy to work with off-licenses and other trade organisations
 - e. Children & Young People: working with education, schools and colleges to provide evidence based programmes about alcohol and where necessary providing the appropriate level of treatment interventions
 - f. Hidden Harm: as outlined above

3. Financial Implications

- 3.1 The Strategy highlights the need for a coherent and rigorous analysis of expenditure relating to alcohol. Kent has used national data to achieve an estimate of the impact of alcohol misuse across the county and we are currently commissioning the Public Health Resource Unit (PHRU) to give a more in depth assessment of investment against outcomes.

¹ The effect that parental alcohol and drug misuse has on their children – Item B4 on this agenda looks at this in detail.

- 3.2 The key funding providers will remain Health and Social Care in particular for those people where alcohol misuse has reached a chronic state. The Police and other emergency services make a considerable investment when responding to disorder, road accidents and injury and fires within the home, all of which will continue to arise unless the messages contained within this strategy are achieved.
- 3.3 Through the KDAAT partnership some £1,772k is currently invested in treatment, KCC £121k, PCT £1,622, and Probation £29k. Supporting People funding supports a wide range of client needs, including problems associated with alcohol misuse. Within the annual funding of £542k, £95k is specifically allocated for the provision of a floating alcohol support service.
- 3.4 Investment in 2009/10 will increase by a further £390k, with much of this coming from Health, Supporting People, and Probation to support improved and targeted community alcohol service provision.

4. Consultation

- 4.1 The consultation period will last for approximately 12 weeks, and will include the following bodies:
- KDAAT
 - Kent Criminal Justice Board
 - Safer Stronger Communities Group
 - Children's Trust Board
 - Provider services
 - PCTs
 - Kent Youth Council
 - Borough and districts (including Licensing)
 - CDRPs
 - MPs
 - Service users
 - Carers
 - Kent Police Authority

The draft strategy will be presented to CFE, CMY and CED Policy Overview Committees in the March/April cycle, and the ASS Policy Overview Committee in July.

5. Conclusions

- 5.1 The Alcohol Strategy for Kent is a partnership strategy that aims to address alcohol misuse, provide improved information, advice and guidance and combat the negative outcomes within our communities when the consumption of alcohol leads to disorder or other injury. It is a strategy that will be progressed as new information comes forward, treatment services improve and our response via policing or other emergency services are developed. The Strategy is a significant Partnership agreement that will lead to enhanced service provision and a better understanding of the impact of

alcohol misuse in our communities and how best to promote safe, sensible and social drinking.

6. Recommendations:

- 6.1 This strategy is presented as a framework for consultation and Members are asked to note the contents of this report and comment on the content and direction of the strategy
- 6.2 Members are asked to support the progress of the strategy to broader consultation with partners and communities.

Contact officer:

Angela Slaven,
Director, Youth Services and KDAAT
01622 221696

An Alcohol Strategy for Kent

DRAFT v4

Executive Summary

To be completed once strategy agreed

1. Foreword

Alcohol within our society is seen by many people as a source of pleasure and enjoyment and a part of social gatherings such as weddings, birthdays or other celebratory events. Many of us will share stories about fun and occasionally bad times that have involved the consumption of alcohol. Some sections of our society, be it for religious or other belief systems, exclude alcohol from their daily life. This statement I trust paints a picture of our varying and sometimes problematic relationship to alcohol. For some people alcohol misuse becomes a significant problem and this is demonstrated through increasing difficulties within families, at work, and their own relationship with the world.

This alcohol strategy aims to set out our response to the management of alcohol by promoting attitudes and behaviours that allow the majority of people, for whom alcohol does not present a problem, to continue to enjoy the benefits of social drinking and associated pleasures while ensuring that if necessary, others can access advice, help and support if required. The strategy recognises that access to information for individuals in difficulty is important and where the problems are chronic, access to treatment services should be made available.

The alcohol trade works within a regulated framework and the strategy seeks opportunities to improve and support the responsibilities of those working within the license trade. This includes areas such as underage sales, alcohol sales promotions, and the responsibility for managing licensed premises in cooperation with the police and local authorities.

To deliver the strategy effectively we must continue to work in partnership with a range of organisations and agencies. These include the police and emergency services, mental and public health sectors, voluntary agencies and other excellent treatment programmes that currently contribute substantially to our aims and objectives. As a County Council we have a responsibility to work and support the efforts of all those engaged in this work. This strategy sets out the principles we aim to implement and we trust that it provides a backdrop for Kent's residents to enjoy life to the full and adopt a relationship to alcohol that avoids harm and promotes safe, sensible and social living conditions.

2. Aim

Excessive consumption of alcohol is a growing problem in both Kent and the UK. Yet, alcohol also gives much pleasure and is a significant and traditional part of the local economy. Kent is a safe place in which to live and socialise but it is important to address the problems which inevitably arise from alcohol misuse. The intention of this strategy is to attempt to balance these costs and benefits. This strategy is not trying to "ban" alcohol, instead its aim is:

- "To reduce the harms associated with alcohol, in order to ensure that alcohol can be enjoyed safely and responsibly, as part of a vibrant and inclusive community".

3. Objectives

The objectives of this strategy are:

- To prevent alcohol related harm by increasing public awareness and understanding of the impact of alcohol misuse;
- To promote community safety and create a safer environment by reducing alcohol-related violent crime, criminal damage and anti-social behaviour and by enabling offenders to access appropriate interventions and treatment throughout the criminal justice system;

- To ensure swift and easy access to services for individuals seeking information, guidance and treatment;
- To encourage responsible practices in the licensed trade by ensuring that those involved in the production and sale of alcoholic drinks act within the law and with an appropriate sense of social responsibility;
- To prevent children and young people developing alcohol related problems through a programme of education and, where necessary, law enforcement; and
- To set a robust strategic framework which is based on partnership working.

4. A Partnership Approach

A partnership approach is essential to ensure an effective response to alcohol. This strategy will engage a range of organisations so that there is:

- A shared understanding of the issues to be addressed and the outcomes achieved;
- Appropriate sharing of information;
- Cooperation and coordination between statutory, voluntary and community organisations as well as the licensed trade;
- A consistent approach to reducing the harm caused by alcohol;
- Consistent messages to the public and to people needing or seeking help;
- Appropriate arrangements to ensure that any work on alcohol links in to the plans of the Local Strategic Partnership and the Local Area Agreement.

Service users and carers, voluntary and community organisations will be involved and consulted at every level of the strategic process.

5. Key Strategic Links

This strategy must link with other national and local strategies. At the national level it links to the following:

- *Safe Sensible Social* - the 2007 update on the National Alcohol Harm Reduction Strategy originally published in 2004.¹
- *Choosing Health* - the public health strategy - which has alcohol harm reduction as a major theme and identifies a number of 'big wins' related to combating alcohol misuse^{2,3}.
- *Models of Care for Alcohol Misuse* – which sets the framework for the development and delivery of alcohol treatment services
- Legislation linked to alcohol enforcement such as the *Licensing Act 2003* which governs the management and control of licensed premises and the *Violent Crime Reduction Act 2006*
- *New GP contract 2004* – which identifies a Nationally Enhanced Service for alcohol
- *Alcohol Misusing Offenders – A Strategy for Delivery 2006* - National Probation Service – a strategy for addressing alcohol misuse for offenders.
- *Youth Alcohol Action Plan 2008* – which set out particular steps to tackle alcohol misuse among young people.

¹ Safe.Sensible. Social: The next steps in the National Alcohol Strategy, Department of Health, Home Office, Department for Education and Skills, Department for Culture, Media and Sport, 2007.

² Choosing Health: making healthier choices easier. 2004, Department of Health.

³ Delivering Choosing Health: making healthier choices easier. 2005, Department of Health.

- *Youth Matters* – A Government White Paper which sets out the vision for empowering young people, giving them somewhere to go, something to do and someone to talk to.

A particular priority is to ensure that the delivery plan links to the Home Office's Public Service Agreement (PSA) priorities as set out in the new National Indicator Set. The Kent Local Area Agreement (LAA) already includes targets and objectives aimed at dealing with alcohol-related problems. For example, it endeavours to reduce alcohol abuse (Outcome 16), to reduce the overall level of crime (Outcome 10), and to increase the proportion of people who believe Kent is a Safer County (Outcome 9).

In addition PSA 25: "Reduce the harm caused by alcohol and drugs" sets a target of reducing *Alcohol-harm related hospital admission rates*. PSA 14 refers to the need to reduce the proportion of young people frequently using illicit drugs, alcohol or volatile substances. These targets are mirrored in *Vital Signs* the indicator set for the NHS.

This strategy also links to other local strategies, of which the key ones are:

- Borough and District Crime and Disorder Reduction Partnerships' (CDRPs) Community Safety Strategies
- Primary Care Trust (PCT) Delivery Plans
- Borough and District Council Statements of Licensing Policy 2008-2011
- Domestic violence strategies.
- Kent Police's Drug and Alcohol Strategy
- Children and Young People's Plan (outcome 2 - reducing risk taking behaviour)

6. Stakeholder Consultation

This strategy builds on the Report of Kent County Council's (KCC) Select Committee on Alcohol Misuse. That report was built on an extensive consultation with key stakeholders including service user representation, local councils, service providers and national experts.

In July 2008 the county launched the Select Committee report with an event which included an opportunity to propose ideas for further developing the response to alcohol misuse.

7. The Impact of Alcohol: National Evidence

Nationally, the annual human and financial costs of alcohol misuse include:

- 22,000 preventable deaths per year which are associated in some way with alcohol misuse.
- Around half of all violent crimes (1.2 million) and a third of all reported incidents of domestic abuse (360,000)
- £7.3 billion spent tackling alcohol related crime and public disorder.
- Up to 70% of A&E admissions at peak times.
- £95 million spent each year on specialist alcohol treatment.
- Over 126,000 admissions to hospital for mental and behavioural disorders resulting from alcohol misuse – a rise of 75% over the past ten years.
- Up to 1.3 million children affected by parental alcohol problems.
- More than one in five men, one in six women and one in seven 16-24 year olds have admitted to having had unsafe sex after drinking too much alcohol, increasing their risk of pregnancy and disease.

8. The Impact of Alcohol: Local Evidence

The majority of Kent's population are either low risk or non-drinkers. However, patterns of problematic drinking are emerging in Kent, especially among women and young people. The proportion of adults in the South East binge drinking at least one day a week has reached about 20% for men and about 9% for women. In Kent 11% of males and 5.5% of females exceed the weekly recommended amounts. These rates are lower than in most other regions, but are higher than those of London and the East of England.

These drinkers can be divided into three categories⁴:

- Hazardous drinkers - women drinking more than 14 units and up to 35 units of alcohol per week and men drinking more than 21 units and up to 50 units of alcohol per week, These drinkers may have avoided significant alcohol-related problems so far but they will still benefit from brief advice about their alcohol use.
- Harmful drinkers - women drinking over 35 units and men drinking over 50 units of alcohol per week who show clear evidence of some alcohol-related harm, which may be physical or mental.
- Dependent drinkers - have a definite problem with drinking and in severe cases may be physically dependent.

In Kent there are about 200,000 hazardous and harmful drinkers and 30,000 dependent drinkers.⁵

Sir Liam Donaldson, the Chief Medical Officer for England and the UK Chief Medical Advisor released guidance on young people's alcohol for consultation in January 2009⁶. The consultation focuses on how the information is communicated to children, young people and their parents and whether the advice provided is practical.

The guidance states that a childhood free from alcohol is the healthiest and best option. It acknowledges that some parents may choose to allow their children alcohol. In those cases, it alcohol should never be consumed by those under 15. It goes on to say that those aged 15 – 17 should never exceed 2-3 units for young women and 3-4 units for young men. Also, 15-17 year olds should not consume alcohol more than once a week and their consumption should be supervised. The guidance emphasises the role of parents in influencing and educating their children on the use of alcohol.

The Government sponsored North West Public Health Observatory⁷ provides seventeen statistical indicators of alcohol related harm broken down by local authority area. Most areas of Kent are around the national average for the health indicators with the exception of Thanet which has above average levels of alcohol related hospital admissions for both adults and young people. Shepway has above average levels of alcohol related hospital admissions for young people.

⁴ Drummond et al, Alcohol Needs Assessment Research Project (ANARP): the 2004 National Alcohol Needs Assessment for England, Department of Health, 2005.

⁵ Drummond et al, Alcohol Needs Assessment Research Project (ANARP): the 2004 National Alcohol Needs Assessment for England, Department of Health, 2005.

⁶ Young People and Alcohol Guidance Consultation 2009: www.dcsf.gov.uk/consultations

⁷ www.nwpho.org

Other data indicates that

- In 2005 about 4,400 people in Kent, diagnosed with “alcoholism”, claimed incapacity benefits or severe disablement allowances.
- Alcohol-related crime and violent crime in Kent is below the national average. However, the level of crime attributable to alcohol is above average in three Kent districts (Dartford, Gravesham and Thanet) and higher than the South East average in four districts (Dartford, Gravesham, Swale and Thanet).
- Alcohol-related violent crime is higher than the national average in three districts (Dartford, Gravesham and Thanet) and is higher than the South East average in five districts (Dartford, Gravesham, Shepway, Swale and Thanet).
- The rate of sexual offences attributable to alcohol is the same as, or higher than, both the national and regional average in seven districts (Ashford, Dartford, Gravesham, Maidstone, Shepway, Swale and Thanet).
- The number of adults in Kent undergoing treatment for alcohol misuse more than doubled from 2005-6 to 2006-7. In the same period the number of young people in treatment increased from 115 to 271.
- The number of alcohol-specific hospital admissions in Kent has almost doubled from 885 admissions in 1997-8 to 1,454 in 2006-7.
- In Kent, the number of adult arrests for drink offences increased from 5,732 in 2005-6 to 5,950 in 2006-7. The number of young people arrested has increased, from 278 in 2005-2006 to 403 in 2006-7.
- In Kent, it has been estimated that substance misuse (both for alcohol and drugs misuse) is a parental characteristic of over half the approximately 800 children (56.1%) on the child protection register.
- In Kent the number of young people arrested for alcohol related offences increased from 278 in 2005/6 to 403 in 2005/6.
- It is estimated that the number of children with alcohol dependent parents in Kent could be in the region of 23,000.

It is also known that, although overall fewer young people are drinking alcohol, those who do are using more and those who do are starting alcohol use at an earlier stage. These trajectories are of great concern.

9. What Is Currently Happening

Much work has been undertaken in Kent to tackle alcohol misuse, but more needs to be done. This section sets out what is already happening and section 10 identifies key gaps and how they will be tackled.

9.1 What Is Currently Happening – Communication

Target 50 of *Towards 2010* recommends the introduction of a hard-hitting public health campaign targeted at young people in order to increase their awareness of, amongst other things, the effects of alcohol misuse. One example of this is the House campaign that moves round the districts month by month providing a centrally located meeting place for young people combined with public health messages. It targets young people who may be outside mainstream provision and potentially most vulnerable to substance misuse. House is supported by the Youth Service and will be evaluated during 2009. Consideration will be given towards the development of a model of Youth Service provision to reflect young people’s interest and needs, and expand upon the concept of town centre locations and multi disciplinary support teams.

The Kent Healthy Schools Programme promotes the health and well being of children and young people through a well planned school curriculum that encourages learning and healthy lifestyles choices. In order to gain healthy school status, schools have to

demonstrate, amongst other objectives, that they are delivering effective Personal, Social and Health Education (PSHE), alcohol education is one of the subjects of the PSHE programme

9.2 What Is Currently Happening – Adult Treatment Services

The Kent Drug and Alcohol Action Team (KDAAT) is the agency responsible for the specific management and commissioning of alcohol and drug-related treatment services across the County.

KDAAT commissions a variety of statutory and voluntary organisations to provide a range of treatment services across the whole of Kent. Agencies include: KCA, Turning Point, Action for Change, The Kenward Trust and The East Kent Community Alcohol Service.

One of the strands of the KCC Supporting Independence Programme is dedicated to helping people with alcohol or substance addiction to move out of dependency and achieve greater independence.

9.4 What Is Currently Happening – Community Safety

The commitment of Kent County Council to deal with alcohol-fuelled offences is reflected in the *Towards 2010* strategy. Target 57 aims to support Kent Police and to work with CDRPs to strengthen the police presence in problem areas. Target 60 requires the council to support young people in order to reduce the risk of them offending. The county also has the Kent Community Alcohol Partnership: a multi-agency initiative to reduce under age sales and offending (see box below).

A number of specific initiatives reflect the commitment of local partner agencies such as Trading Standards and Kent Police to reducing alcohol related harm. These include:

- The use of Penalty Notices for Disorder (PNDs) to individuals exhibiting disruptive behaviour.
- The use of alcohol enforcement areas which have been adopted by most CDRPs in Kent.
- “Conditional Cautioning” referral schemes which aim to provide an alternative to prosecution where offenders must attend sessions to learn about the consequences of alcohol misuse.
- “Meet and greet” tactics in which officers patrol targeted night-time “hot spots” to provide reassurance for the public and to deter crime.
- The “Three Strikes” scheme in Dover which involves penalties such as issuing Anti-Social Behaviour Orders (ASBOs) after a third arrest for alcohol-related offences.
- Anti-Social Behaviour Act (2003) powers which enable local authorities and the police to disperse disruptive individuals and send home young people under the age of 16.
- The designation of anti-social behaviour areas.
- Establishing alcohol free areas in Broadstairs Harbour and Canterbury.

9.5 What Is Currently Happening – Licensing

Kent has approximately 6,500 premises licensed to sell or supply alcohol. 57 of these open 24 hours a day, comprising 35 supermarkets and stores, 14 hotels and 8 late night venues. A number of initiatives are in place to promote responsible trading:

- Last year Kent Trading Standards performed 151 test purchases, and found that in about a third of them alcohol was sold to underage people.

- Many licensed premises in Kent have joined the “Safer Socialising” scheme which awards certificates to those businesses selling alcohol in the night-time economy that demonstrate high standards of management and operation.
- Both the Kent-based company Shepherd Neame and the Wetherspoon pub chain, amongst other schemes aimed at promoting sensible drinking, make use of mystery shoppers to test socially responsible behaviour of the staff in its pubs.
- “Pub Watch” schemes have been developed which involve the exchange of intelligence between businesses, the police and other agencies in order to identify “hot spots”.

Example of action - Kent Community Alcohol Partnership

KCAP is based on a project first run in St Neots which engaged the licensed trade. There was a press launch by the Chief Executive, Chief Constable and licensed trade in November 2008 at Sainsbury’s Maidstone.

On the ground it consists of a host of small initiatives, e.g. supporting shops not to be intimidated, dealing with proxy purchasing in a better fashion and multi-agency patrols. There will be three 6 month pilot sites in Canterbury, Thanet and Edenbridge to see how it operates in different environments.

9.6 What Is Currently Happening – Young People

Kent schools have a programme of Personal, Social and Health Education (PSHE) which includes education about alcohol misuse. It has been announced recently that PSHE will become part of the National Curriculum. A number of other initiatives target young people. These include:

- A strategy on PSHE for all Kent schools produced in 2008 – this aims for uniform practice with sufficient resources and support to deliver high quality PSHE to all young people.
- In West Kent, Targeted Prevention services are working with partners in education and health to understand substance misuse needs among school populations and to develop an integrated and coordinated approach to meeting those needs.
- The Alcohol Intervention Support Programme (delivered by the Kenward Trust), aims to divert young people from substance misuse through education and awareness. This programme will be rolled out across all of Kent from March 2009.
- A Hidden Harm working group has been established to look at the needs of young people with substance misusing parents.
- Kent Safeguarding Children Board provides multi agency training to raise awareness and improve responses to parental alcohol misuse
- The substance misusing parents project in Thanet and Dover fast tracks substance misusing parents – drugs and alcohol – into treatment and ensure joint work between Children and Families teams and the drug and alcohol service.
- The Sunlight Project (run by KCA) in Thanet, Canterbury, Dover and Swale provides group work for children 7-13 whose parents abuse drugs and/or alcohol.
- Early Intervention which targets vulnerable groups of young people and focuses on making contact with young offenders, looked after young people,

those young people who are not in mainstream schools, refugees and asylum seekers.

- An intensive multi component intervention is being developed which is working to reduce alcohol and drug use in addition to other risky behaviours with a view to building young people's resilience.
- DUST training is a programme of training for the children and young people's workforce in drugs and alcohol awareness, assessing problematic use and interventions for those who are not problematic.
- Specialist young people's community treatment provides one to one interventions for young people who are assessed as problem users. This includes specific drug and alcohol work with young offenders to impact positively on offending.⁸

A booklet has been published by the Kent Children's Safeguarding Board for parents of teenaged children that provides helpful advice and guidance as well as contact numbers. Further information can be found on the Kent Resource Directory website.

9.7 What Is Currently Happening – Hidden Harm

Alcohol misuse affects not just the drinker, but the family around them. Many children can just about cope, but for others, a parent's drinking can lead to feelings of isolation, guilt and poor performance at school. Children of problem drinkers can experience long-term psychological damage into adulthood. Services to support both young carers and chronic-drinking parents are too scarce.

In some cases where a parent's drinking has become so debilitating, their children have been forced into caring roles. This group of young carers looking after a parent with an alcohol problem is both hidden and particularly vulnerable. Most young carers in this situation simply never get support, with too many ending up in care when families reach crisis point.

10 Priorities for Action

10.1 Priorities for Action - Strategy

A strategic priority will be to collect and share data about alcohol misuse. This will ensure that there is robust baseline data available for planning. Information is needed from A&E to pinpoint problems with licensed premises. Better data on alcohol related offending will also be important.

10.2 Priorities for Action - Communication

A co-ordinated approach is required to improve education and communications on alcohol related issues, by ensuring consistent methods and messages are used to create maximum impact. Campaigns should adopt a social marketing approach to achieving positive behavioural goals in the target audience.

Communications activities will be developed to support all the strategic objectives set out elsewhere in this Strategy, as well as to deliver the following specific objectives:

- To prevent alcohol related harm by increasing public awareness and understanding of the impact of alcohol misuse;
- To prevent children and young people developing alcohol related problems through a programme of targeted interventions including social marketing.

Communications will adopt the partnership approach underpinning an effective response to alcohol in Kent. A Communications Sub-Group (of the Kent Action on Alcohol Steering Group) will co-ordinate communications activity across the county and also commission research, campaigns and other related activity needed to help fulfil the strategy's objectives.

The sub-group will:

- Develop a Kent Action on Alcohol Communications Strategy and Action plan, drawing on partners' work as well as its own commissioned activities, to include all relevant activities, campaigns and social marketing interventions;
- Ensure that young people and their families are being targeted with appropriate educational information;
- Establish an annual county budget to support alcohol communications work with contributions from a range of agencies and sectors;
- Continuously monitor and evaluate the impact of activity across the county.

Other related communications work will also take place including the development and updating of content on partners' websites, the creation of an "alcohol services" directory and working with local employers to encourage the adoption of workplace alcohol policies and employee access to information and treatment services.

10.3 Priorities for Action - Adult Treatment

It is recognised that there is an under-provision of treatment services in the county. It is estimated that if a minimal level of access was provided (10%) 18,000 individuals would be helped each year. A good level of service (20%) would provide treatment to 36,000 people. Government data suggests that the level of access in the region is currently only 5%. A sustained programme of increasing the resources going into alcohol services will be put in place.

A key priority is the introduction of screening and brief interventions for hazardous and harmful drinkers in non-alcohol-specialist setting e.g. primary care, A & E and criminal justice settings.

At the other end of the process there is an identified need for better aftercare, including wraparound services such as employment and training support or financial advice. A specific route into treatment is needed for people with a dual diagnosis of alcohol misuse and mental disorder. Clarity is required on who is responsible for people who have alcohol-related brain-damage.

Services also need to be developed for particular groups. Appropriate services will need to be offered to people who are homeless or require better housing. Additional temporary sheltered housing will be facilitated by KCC for individuals recovering from alcohol addiction, particularly those discharged from hospitals, prisons and residential alcohol treatment, in order to prevent relapse.

Approximately 40-60% of clients who enter alcohol treatment services will drop out within after as few as a couple of sessions. These difficult to engage clients may be far riskier and more vulnerable than those in treatment. This is an important group of clients and a care pathway will be developed to address their needs.

Treatment services will need to be developed within the context of a system of outcome measures and with the application of a performance management system.

10.4 Priorities for Action - Community Safety

It is a priority to tackle crime and anti-social behaviour linked to alcohol. This will require a number of developments.

A priority is a focus on ensuring that there are pathways from the criminal justice system to treatment services for both persistent drunken offenders and those who are first experiencing problems due to alcohol. This will include the use of Alcohol Treatment Requirements, Conditional Cautioning, Arrest Referral and the provision of alcohol interventions to people in the Multi-Agency Public Protection Arrangements and Prolific and Priority Offender systems or on Acceptable Behaviour Contracts or Anti-Social Behaviour Orders.

Local people with alcohol problems who are in the prison system will be targeted with advice and interventions and must be able to move into treatment immediately on leaving prison. Peer education in prisons will be considered as an approach.

Alcohol is a contributory factor to a significant proportion of domestic violence: however, local data on this is poor and will be improved. Those working with problem drinkers will be made aware of domestic violence and, where appropriate, alcohol interventions will be part of any programme targeting perpetrators and possibly victims of domestic violence. The alcohol strategy will link in to the local domestic violence strategies.

An ongoing priority will be to manage alcohol misuse effectively within the night time economy (NTE) and to ensure the development of a planned and balanced NTE.

10.5 Priorities for Action - Licensing

The application of the Licensing Act 2003 should be monitored. In particular are members of the public being encouraged to make representations and seek reviews of problem premises and are more socially deprived communities making as much use of these rights as more affluent communities?

The *Towards 2010* strategy requires the County Council to work with off-licences, pubs and clubs to reduce alcohol-related crime and antisocial behaviour. A key element will be to seek to discourage the practice of discounting alcoholic drinks, charging high prices for soft drinks and other strategies that could promote irresponsible drinking.

Where necessary, use of appropriate legislation will be considered to reduce alcohol-related crime and disorder, for example licence reviews, dispersal powers and designated public place orders.

As a last resort, when all other practical attempts have been unsuccessful, consideration can be given to the establishment of alcohol free areas and Alcohol Disorder Zones, which can require premises failing to implement actions to reduce alcohol-related anti-social behaviour in their vicinity to contribute towards the cost of necessary additional policing.

Trading Standards and partner agencies should increase their efforts to identify retailers who supply alcohol to under age persons and ensure that penalties are applied.

10.6 Priorities for Action - Children and Young People

Ensuring that all young people receive appropriate, evidence based, education about alcohol is vital. In particular, awareness will be raised about safe and sensible alcohol consumption. Personal Social and Health Education (PSHE) lessons in school are the core of this and it is important to ensure that these inputs are fit for purpose. PSHE accreditation for both teachers and school nurses will be supported. Peer education will also be considered as an approach.

Such work also needs to focus attention on young people living in deprived communities who have particular risk factors. However such interventions should not be offered in isolation and should be offered at universal, targeted and specialist level. The national Every Child Matters Change process requires health and wellbeing issues to be tackled in an holistic manner,

Specialist treatment interventions will recognise that such young people often have multiple needs which require ongoing support and coordination in their communities. As a result effective Youth Inclusion and Support Panels are key to success.

The national Common Assessment Framework (CAF) will provide an assessment tool for all young people with identified needs. It will be necessary to ensure that the CAF identifies difficulties related to alcohol and leads to appropriate responses such as Targeted Youth Support.

It is important to tackle underage sales through regular campaigns of test purchasing and to tackle underage drinking in public places. This will be accompanied by efforts to provide alternative activities to divert young people from drinking on the streets, as well as efforts to prevent the parental supply of alcohol or young people taking drink from home.

Systems will be in place to identify children and young people at risk of harm from alcohol misuse and refer them to relevant bodies which will provide support and treatment. Services will also target parents whose drinking is putting the wellbeing of children at risk.

These activities require that staff working with children and young people are educated about alcohol interventions and can refer to services or seek other help to safeguard child health and wellbeing.

The Youth Alcohol Action Plan refers to a range of criminal justice interventions designed to stop young people from using alcohol in public places. This provides an opportunity for interventions to be provided to young people and it is important to ensure that young people do not enter the criminal justice system as a result of this. The aim is to complement this activity with a health based intervention and work is underway to develop this.

Successful initiatives dealing with other related health issues, such as drug misuse, drink driving and sexual health, will be explored for adaptation to the theme of alcohol misuse.

Help also needs to be offered to parents in Kent. Local research indicates that parents want more information about alcohol. Parents need to be able to give their children and young people good information and be good role models. It will be important to draw in both parents and those professionals who work with parents.

A particular concern is the transition from young people's services to adult services. Although 11-18 year olds are identified as being in contact with drug and alcohol

services, there is a dip in the numbers attending adult treatment services in their early twenties. This gap will have to be addressed by further research into the blockages and gaps in the system and the best ways of addressing them.

10.7 Priorities for Action - Hidden Harm

In Kent, it has been estimated that substance misuse (both alcohol and drug misuse) is a parental characteristic of over half the approximately 800 children (56.1%) on the child protection register. Nationally, alcohol policies have barely begun to address this issue and treatment services must now have better support and funding to help both parents and their children recover from alcohol problems. There is also a real need to ensure that those working in the wider social care and education system are equipped to identify cases where parental misuse is affecting the quality of family life and that there are clearer protocols in place to help them co-ordinate support with the alcohol treatment sector where that is appropriate.

The young carers' services need the training and resources to reach these families while every adult alcohol service should routinely ask clients "Are you a parent? Can we help you in your parenting role?"

A new Public Service Agreement could be established to increase the health and wellbeing of children affected by parental alcohol misuse. There could be a target to reduce the number of children placed in care as a result of their parents' drinking.

The Local Safeguarding Children Board could identify an 'Alcohol Champion' to lead locally on family alcohol misuse issues and link alcohol and families targets into other local plans, such as Local Strategic Plans, Local Area Agreements and Alcohol and Drug Treatment Plans. Joint Strategic Needs Assessments could include an audit of parental alcohol misuse and services for both alcohol misusing parents and their children.

Links between domestic violence services and children's and young people's support services could also be strengthened.

11. Governance Arrangements

The delivery plan identifies how each target will be managed: the actions to be achieved, the agency responsible and the timescale. However, all these actions will be overseen and coordinated in a wider framework.

Several forms of multi-component collaboration aimed at dealing with alcohol misuse in Kent already exist. For example, Crime and Disorder Reduction Partnerships, including members from the Police, local authorities, the Probation Service, health authorities and the voluntary sector, are already working to deal with, amongst other aspects, alcohol-related crime and anti-social behaviour.

A multi-agency Kent Action on Alcohol Steering Group has been established which will meet on a bi-monthly basis and will receive progress reports on the action plan targets, identify resources and help overcome problems in meeting the targets.

This group will have membership from:

• Kent DAAT	• Kent County Council
• The county's two PCTs	• HM Prison Service
• Kent Police	• Kent Probation

This group will report to the Kent Public Health Board and the KDAAT Board.

12. Outcome measures

This strategy recognises the need to develop good indicators of its success. This will require outcome measures e.g. is there less crime, is health improving or are children safer? At the moment the baseline data does not exist on which to build such measures. Nor is it clear which indicators are the most effective measures of the impact of alcohol.

One of the key processes for the ongoing alcohol strategy group will be to develop a set of outcome measures across health, community well-being, child safety and licensing which will enable the impact of this strategy to be measured effectively. These will include tools such as TellUs and the Kent Pupil Survey which will be used to measure PSA 14.

13. Resources

This strategy has been developed to reflect growing national and local concerns of the harm caused by alcohol misuse. Alcohol has been the hidden relative within the substance misuse agenda for many years and gaining an accurate picture of the cost of services that either directly supports individuals or the consequences of alcohol misuse such as anti-social or violent behaviour provided via policing and health, or the hidden cost arising from absenteeism from work, is problematic. This strategy recognises the complexity of the cost analysis that is needed and pinpoints this as a critical area for development.

In 2008/09 Kent's Health services made substantial new investment into services that support prevention measures and treatment facilities. This has contributed to better assessment, access to information and the coordination of services within communities that offer opportunities for support at the preventative end and also serves to meet the need at the "chronic" end where for some people their life has become chaotic and destructive. In 2009/10 direct investment in these services will equal £2,027k.

As this strategy develops the recognition of the contributing role of wrap around services to support alcohol interventions will be essential to sustain change in behaviour and improve outcomes. Further investment will be necessary but this is likely to be achieved within the existing main stream budgets and delivered by a reshaping of the services as an extension of their roles and responsibilities. The principle support for housing is delivered via Supporting People and the current investment in "floating support" is £95k.

The strategy will contribute to the effort to counter the extreme levels of anti social behaviour and criminal damage associated within the night time economy. A reduction in ambulance responses, demands upon Accident and Emergency and hospital alcohol related admissions should follow.

What lies at the root of the strategy is a coordinated partnership approach building on existing investment and sharing the benefits of reductions elsewhere in the system. Kent Action on Alcohol will work to support the health, community and personal safety and education agenda.

TO ADD

DELIVERY PLAN presumably drawing on the existing action plan

To: Communities Policy Overview Committee, 25 March 2009

By: Mike Hill, Cabinet Member, and Amanda Honey,
Managing Director, Communities

Subject: Draft Hidden Harm Strategy

Classification: Unrestricted

Summary

This report introduces a draft Hidden Harm Strategy for Kent which focuses on delivering improvements in outcomes for children and young people who are affected by drug and alcohol misuse by their parent or carers

Recommendations

Members are asked to

- (i) COMMENT on the priorities within the draft Hidden Harm Strategy and on its overall structure
- ii) NOTE that this Committee will receive a final version of the Strategy, and consequent action plan, together with periodic reports on progress.

FOR CONSULTATION

Introduction

1. Improving the outcomes for children and young people affected by drug and alcohol use by their parents or carers requires a strategic response that translates into coordinated interagency partnerships and effective, joined up frontline service delivery.
2. Compelled by the '2008 Drug Strategy for England: protecting Families and Children', the Director of KDAAT and Youth Services convened a Hidden Harm working group in June 2008 and following agreement from the group, engaged a nationally recognised expert, Wendy Robinson to progress the agenda.
3. The working group drew attention to action that is required in a number of areas in order to improve outcomes for children and young people where substance misuse is present within the family. These include strategic developments; data and identification; workforce development; and integration with Local Childrens' Services Partnerships (LCSPs)

4. The draft Strategy will be considered by the Safeguarding Board on 29 April 2009 and a subsequent meeting of the Kent Children Trust. It will then be issued for wider consultation.

The Hidden Harm Strategy

5. The draft Strategy, attached at Appendix 1, reflects the findings of the working group, some initial consultation with key stakeholders and national evidence. It presents a vision for 2011 and a definition of Hidden Harm, it refers to the local and national policy framework, provides an indication of need, identifies services already in place, and presents challenges and developments. It identifies six potential priorities for action on which members views are sought and from which a delivery plan will flow

6. Suggestions have been made as to how the format of the Strategy could be changed to reflect the need of different audiences and members views on this will also be welcomed.

Financial implications and action in hand

7. The financial implications of the strategy will be examined during the consultation process. At this stage it can be confirmed that the KDAAT Young People's service will contribute funding for a Hidden Harm Coordinator post from 2009-2011 and that the foundations of the delivery mechanism for this Strategy are already in development. These foundations include:

8. Priority 1: The needs of children and young people affected by parental substance misuse are already written into the Kent Children and Young People's Plan, The Parent Support Strategy and the Carers Strategy. A Hidden Harm working group has been established and Drug and alcohol treatment services are developing family based services. Domestic violence responses through MARAC are in development and KDAAT has the opportunity to influence these developments. Funding is emerging for parenting workers with a substance misuse focus through the Parent Support Strategy.

9. Priority 2: Data systems are improving through the working group and commitment of the CFE Management Information Team and this will contribute to building a more accurate demography of the children and young people to whom this Strategy refers. This will lead to a better assessment of where the gaps in services exist. Commissioning the reorientation of existing or the financial implications of providing new services will be considered after this stage.

10. Priority 3: Skills in working with children and young people affected by substance misuse already exist within the County but do not necessarily cross service boundaries and exchanging and cascading training may prove to be a lower cost approach to improving outcomes for these children and young people. At the same time additional training will be necessary and work will need to be undertaken to integrate this work into existing workforce development plans.

11. Priority 4 and Priority 5 may have the most significant financial impact if fully adopted. Clarity will follow wider consultation, greater awareness of funded developments which are already in the planning stages and a greater understanding of demography in Kent. The rate and extent of change will shape the financial implications of these priorities.

12. Priority 6: Existing resources within the DAAT and within drug and alcohol service providers will be directed towards involving children, young people and their families in service developments.

Equalities Implications

13. Children and young people who are affected by their parent/carers drug or alcohol use are understood to be among the most vulnerable and they are disproportionately represented within those with the lowest life chances. Their outcomes are poor and this Strategy specifically aims to address some of those inequalities.

Conclusion

14. The Hidden Harm Strategy sets out a vision for improving outcomes for children and young people affected by their parents and carers drug and alcohol misuse. It presents six key priority actions from which a delivery plan will flow. Consultation will be undertaken on how these actions can be progressed. At this stage it is possible to identify key elements of the priority actions which are already in development and for which resources are already committed. The financial implications of this Strategy will be staged and determined by the rate and extent of change.

Recommendations

15. Members are asked to

(i) COMMENT on the six priorities in the draft Strategy attached at Appendix One and on its overall structure

(ii) NOTE that this Committee will receive a final version of the Strategy, and consequent action plan, together with periodic reports on progress.

Contact Officer:

Jo Tonkin,
Interim Manager, KDAAT Young People's Services
01227 280358

KENT HIDDEN HARM STRATEGY

2009 -2011

Executive Summary

Second Draft: January 2009

wendyrobinsonconsultancy@hotmail.co.uk

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Vision

This strategy provides a timely multi-agency cross sector aspirational vision for improving the lives and futures of all children affected by parental drug and alcohol misuse in Kent.

The strategy makes a commitment to work with others to ensure that by 2011, children in Kent whose parents/carers misuse substances (alcohol and/or drugs) can expect to be:

- Seen and heard
- Safe and secure at home
- Cared for and encouraged
- Supported to be healthy and do well
- Provided with extra help when needed

The defining principle underpinning the strategy focuses on the importance of bringing universal and specialist agencies and services together across adult and children's sectors to identify and address children's individual needs via multi-disciplinary working in integrated settings.

Kent Children and Young People's Plan has prioritised the need to:

Priority 1: Reduce impact of poverty on children's lives by tackling underlying causes and mitigating the effects

Priority 2: To draw on and improve resilience in children and young people to help them make informed and healthy/safe choices and develop coping strategies. To focus on children and young people with emotional and /or mental health problems

Priority 3: To improve parenting by developing more effective multi-agency support and early intervention for families experiencing problems.

Outcome 3c: To include reducing the incidence and impact of domestic violence and substance misuse on families and children.

Priority 5: Supporting vulnerable children to improve their life chances including improving the achievements and quality of life for young carers by implementing Kent Young Carer's strategy.

What is Hidden Harm?

“Hidden Harm” vividly describes the situation of many children and young people living in substance misusing households. They often suffer in silence, are not known to services and either do not know who to turn to for help or fear telling anyone about what goes on at home.

Parental substance misuse is characterised by the use of either illicit drugs and/or alcohol to a degree where the physical, emotional, psychological and behavioural well-being and care-taking capacity of the parent is compromised. It is associated with socio-economic deprivation and other environmental factors that co-exist (e.g. domestic violence) and may affect parenting capacity, which is typically unpredictable and chaotic.

The adverse consequences for children are typically multiple and cumulative and will vary according to the child's age, stage of development and any protective factors in the wider environment.

This is a situation which has developed in the space of a generation. It is clearly not a static situation. If the numbers of problem drug users continues to grow, so will the number of children adversely affected.

Effective treatment of the parents' substance problem is one of the most likely ways to enhance their parenting capacity, but this is not enough. The children must be seen and their needs responded to.

ACMD Hidden Harm

Children's Voices

I feel angry because my mum chooses drugs over me

I am scared because strange scary men come to the house to get money from mum's boyfriend.

When she buys drugs she goes to some scary places that scare me

I feel left out and on my own

***Dad doesn't want to be with us, I don't think he likes us
I don't want anyone to know, I feel embarrassed¹***

¹ Quotes from children attending the KCA Sunlight Project

Policy and Practice Framework

There have been a number of key developments in Government strategies and policies over the last five years that either directly aim to tackle drug and alcohol misuse, include parental substance misuse within a wider agenda or aim for improvements in child wellbeing across all spectrums. Those that support the development and delivery of a national and regional Hidden Harm agenda are detailed here. They are also included so as to challenge the idea that the needs of children of substance misusers are not being addressed strategically, and support a steer towards acting on directives about how this should be done.

National Policy

The two key policy drivers that can be used to promote, develop and improve the response to children within the Hidden Harm agenda are Every Child Matters and the National Drugs Strategy.

The local implementation of these two policies are via Children and Young People's Plans and Local Drugs Strategies, delivered through Kent Children's Trust and Kent Drug and Alcohol Action Team. It is essential that the Hidden Harm strategy sits within all commissioning and delivery plans associated with each.

Every Child Matters: Change for Children

Every Child Matters sets out the national framework for local change programmes to build services around the needs of children and young people so that throughout the course of a child's life opportunities are maximised and risks are minimised. The emphasis is on improving the quality, accessibility and coherence of services so that every child is able to fulfil their full potential and those facing difficulties are supported to overcome them. Improved outcomes for children are identified as:

- Be healthy
- Stay Safe
- Enjoy and Achieve
- Make a positive contribution
- Achieve economic well-being

Children affected by parental alcohol/drug problems may experience their lives being compromised in all five areas; it may be most

noticeable within Be Healthy and Stay Safe, which are detailed as follows:

Be Healthy means: Physically healthy, mentally and emotionally healthy, sexually healthy, healthy lifestyles, choose not to take illegal drugs – parents and carers and families promote healthy choices

Stay Safe means: Safe from maltreatment (neglect, violence and sexual exploitation), safe from accidental injury and death, safe from bullying and discrimination, safe from crime and anti-social behaviour, have security and stability and are cared for – parents, carers and families provide safe homes and stability.

Every Child Matters: Next steps recognised that the realisation of this ambition for improved outcomes for children required a radical change in the whole system of children's services including:

- Improvement and integration of services
- More specialised help to promote opportunity, prevent problems and act early and effectively when problems do arise
- Reconfiguration of services around the child and family in one place e.g. children's centres, extended schools, multi-disciplinary team
- Dedicated and enterprising leadership at all levels of the system
- The development of a shared sense of responsibility across all agencies for safeguarding all children and protecting them from harm
- Listening to children, young people and their families when assessing, planning and delivering services

National Drugs Strategy 2007-2010

Drugs: Protecting Families and Communities

The current drug strategy has a focus on families as never before, pledging to address the needs of parents and children as individuals, as well as working with whole families to prevent drug use, reduce risk and get people into treatment. Throughout the whole strategy covering treatment, enforcement, campaigning and community engagement, families are specifically referenced. Key strategy actions include:

Family focused treatment:

- taking a whole-family approach
- ensure all assessments take into account the needs of the family

- ensuring prompt access to treatment for all drug-misusing parents
- encouraging the provision of more family friendly drug treatment services
- deliver packages of interventions for families at risk, to improve parenting skills & reduce risk factors to children
- supporting families to stay together and break the cycle of problems being transferred between generations
- support parents with substance misuse problems so that children do not fall into excessive or inappropriate caring roles
- support kin carers, such as grandparents caring for the children of substance-misusing parents
- Prioritising the protection of children through early identification and improved information sharing between children and adult services
- Mainstream prevention:
 - reinforcing the role of schools in delivering effective substance misuse education and in identifying young people at risk
 - ensuring the National Service Framework standards for children, young people and maternity services are applied by health service providers to families affected by substance misuse
- Working together:
 - ensure working sectors and agencies work together on shared problems across institutional boundaries
 - ensuring that children's social services know about drugs using parents where
 - Children are at risk

Other Key National Policy which promotes positive outcomes for children of substance misusing parents are:

- **Children's Plan: Building Brighter Futures**
- **Every Child Matters: Change for children, young people and drugs**
- **The National Service Framework for children, young people and Maternity services**
- **The Schools' White Paper and subsequent Education and Inspections Bill 2006**
- **Think Family: Improving the Life Chance of Families at Risk – Cabinet Office 2008**

Working Together to Safeguard Children

The guidance that sets out how individuals and organisations should work together to safeguard and promote the welfare of children was updated in 2006 and now recognises the ACMD Hidden Harm report, recommending that:

11.52 It is the responsibility of LSCB's to take full account of the particular challenges and complexities of work in this area by ensuring that there are:

- LSCB policies and procedure in place
- Inter-agency protocols in place for the co-ordination of assessment and support, particularly across adult drug services and children's services
- Close collaboration with local Drug Action Teams, Crime Disorder Reduction Partnerships and local drug services, as well as a number of other agencies including health, maternity services, adult and children's social care, courts, prisons and probation services.

Common Assessment Framework

The Common Assessment Framework (CAF) for children and young people is a standardised approach for carrying out an assessment of a child's needs that cannot be met within universal services. It is a key part of ensuring that the delivery of frontline services are integrated and focused around the needs of children and young people. It has been designed to help practitioners assess needs at an earlier stage and then work with families, other professionals and agencies to meet them.

The CAF acknowledges that all children require access to high quality universal services, and children with additional needs will require targeted support from education, health, and social services amongst others. Substance misuse is named as one factor that might contribute to a child having such additional needs.

Other guidance which refers more specifically to substance misuse treatment are:

- **Models of Care for Treatment of Adult Drug Misusers** (1)
- **Models of Care for Alcohol Misusers** (2)
- **National Institute for Clinical Excellence - Drug Misuse: Psychosocial Interventions 2007**

- **NHS National Treatment Agency: Supporting and Involving Carers: A guide for commissioners and providers 2008**

Kent Policy and Practice

Sectors and services in Kent have a duty to adhere to national policies and practice guidance, and well as, in some cases, developing their own that mirror the key messages of national directives. These regional plans distill the national drivers and translate them into strategies to meet known local need. Those helpful to promote a Hidden Harm strategy are:

- **Kent Children and Young People's Plan**
- **Local Children's Services Partnership Agreements**
- **Kent Strategy for Supporting Parents: Think Family**
- **Eastern and Coastal PCT Strategic Commissioning Plan**
- **West Kent PCT Commissioning Plan**
- **Invisible People- Kent Young Carers Strategy 2007-2010**
- **Kent and Medway Safeguarding Children Procedures 2007**

Hidden Harm in Kent

In order to respond to the needs of children affected by parental substance misuse across Kent, it is important to understand who these children are, where they are and the reality of the context within which they live.

There is no reliable, current, collated data specific to this groups which in itself poses a real challenge for the development of an improved response. However Hidden Harm report estimates:

- around 3% of all children under 16 are affected by parental drug misuse

2004 Alcohol Harm Reduction Strategy for England estimates:

- 10% of all children are affected by parental alcohol misuse

Safeguarding and Child Protection:

It is estimated that substance misuse is a parental characteristic for over half of children within the child protection system across Kent **(56.1%)** Parental drug use has also been shown to be a highly prevalent reason for children being Looked After.

In a review of cases in Thanet 2006, a search was undertaken to identify substance misuse themes, issues and available services. Although the analysis is limited, this review of Child Protection (CP) plans showed **60% of families** had concerns linked to substance misuse, with just under half of these citing the need for adults to attend drug and/or alcohol services as part of Child Protection Plans. In cases where there was de-registration, there was no mention of on-going input from drug or alcohol services as part of the Child in Need plan, even though on-going/long term treatment is universally accepted as a key part in achieving sustained changes in parental substance misuse.

Looked After Children and Young People:

Kent has the highest number of looked after children in the South East and one of the highest in the country. On 31st January 2008, Kent had 1170 'looked after children' and 951 children on the Child Protection Register.

Adult Problem Drug Use:

It is currently impossible to accurately represent the actual number of adults in Kent who misuse drugs. It is only possible to reflect the number of problem drug users in treatment and estimate how many of these individual adults may be parents.

Adult Drug users accessing treatment

The Kent Drug and Alcohol Action Team (KDAAT) Needs Assessment 2008/2009 states that within 2008 there were 3,202 Kent residents accessing tier 3 and 4 adult treatment services which indicates that 0.3% of Kent residents are accessing treatment. 73% of these were male and 23% female. It is unclear if this disparity is due to there being a greater number of male drug users in Kent than females, or due to male drug users being more likely to access treatment services. Anecdotal evidence suggests that female drug users who are also parents may avoid voluntarily seeking treatment for fear of statutory involvement leading to the removal of their children. The age profile of the majority of adults accessing treatment is 25-34 year olds (45%) followed by those aged between 35-64 years (40%), and over half were unemployed.

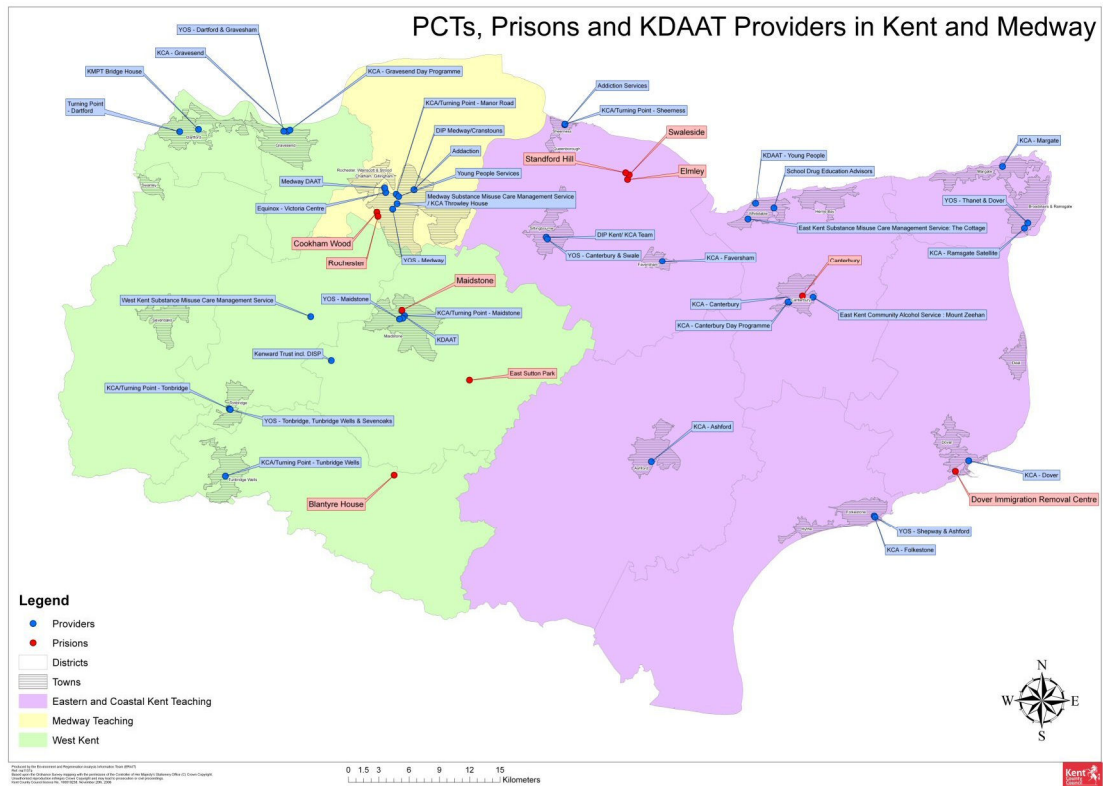
Total number of adult drug users

The Needs Assessment further estimates that during 2007/2008 there were likely to be around 2,182 problem drug users not accessing treatment, which when combined with the treatment population would give a total of 5,384 problem drug users across Kent.

Number of parental problem drug users

No data exists to state the actual numbers of problem drug users in Kent who are parents of dependent children. The KDAAT Needs Assessment makes no reference to parental status of problem drug users. There is a requirement from the National Treatment Agency for all regions in England to collect data on the children of problem drug users, but these data sets are, at present not routinely collected or collated.

Current Service Delivery



Across Kent there are a range of providers who offer treatment services to meet the needs of the adult problem alcohol and drug using population across Tiers 1, 2, 3, and 4. These include Care Management teams, Specialist Prescribing Services, Structured Psychosocial Interventions and Structured Day Programmes. The geographical location of these services can be seen in the map above (in blue). Although appearing widespread there is an imbalance in local provision in some areas, and there is little evidence that these services are identifying, assessing and treating adult substance misusers in a way that includes a focus on childcare and parenting.

A notable exception exist as part of KCA provision:

KCA's **Substance Misusing Parent's Service** is a joint initiative with Thanet and Dover Social Services Children and Families Teams. The project works with families in which there are substance misuse issues which put the children at risk of harm. The aim of the work is to support parents so that risk can be reduced and families can be kept together with the benefit of reducing the number of Looked After children and the numbers of children on the Child Protection Register. The project is targeted at four main groups of parents:

- Parents with a child or children on the CP register where parental substance misuse is a factor

- Parents with a child at risk of becoming looked after, where substance misuse is a characteristic
- Parents who are using drugs or alcohol in a way that is affecting their ability to parent adequately
- Women who are pregnant and whose substance misuse may be harmful to the unborn child.

Longer term benefits for children include improved developmental progress for pre-school children and improved educational outcomes through attendance, behaviour and achievement for older children.

Service Provision for Children

There is only one service in the whole of Kent specifically designed to meet the need of children affected by parental alcohol and drug misuse

KCA Sunlight Project is based within Young Person's Service and works across the districts of Swale, Dover and Canterbury. Originally funded by Kent Children's Fund and then Thanet Consortia, the bulk of funding now comes via the Big Lottery. The aim of the project is to work with children 7-13yrs and provide support via groupwork delivered locally either in schools or community spaces. The aims of the project are to offer children:

- An opportunity to develop their coping skills
- The chance to have some fun and express themselves
- Some understanding of parents behaviour and impact of drugs/alcohol
- Generally help improve their emotional and psychological well-being
- Identify and develop adult and peer support networks.

Children of substance misusers may also fit within the remit of Young Carer's support services across Kent, located in Sevenoaks, Tonbridge, Snodland, Sheerness, Ashford and Herne Bay.

Challenges

Challenges in Kent, as perceived by those who took part in the consultation process for the strategy include:

- Fracture between adult and children's services that is never fully addressed
- Lack of targets and indicators specific to Hidden Harm ensures it is no-one's responsibility
- Commissioning does not allow for expanding adult treatment into family focused work
- Not enough accurate data specific to Kent so easy to ignore issue
- Professionals own attitude towards and use of alcohol gets in the way of identifying the need to advance the agenda
- Protocols that are not translated into practice
- Professionals taking sides – either there for the child or the adult, not enough family focus
- Action only taken at crisis point- needs to be a wider issue than safeguarding
- Normalisation of alcohol and drugs in society use reduces ability to acknowledge risk

Hidden Harm: Three Years on recognised some progress in advancing the agenda as set out in the original ACMD report. However some key concerns and challenges remained. These included:

- A lack of routine recording and monitoring of children affected by parental substance misuse.
- Implementation of the recommendations around service delivery is complex as partnership working is required both within children's services and also with adult services. The need for a coherent and joined-up approach is still largely unrealised.

One of the key challenges is around the division between adult and children's services. Adult treatment services need to understand the complex relationship between drug dependency and parenthood, and develop responses on the basis of this. Treatment services have a key role in providing both treatment programmes and packages of care tailored to parents and in working collaboratively with children's services to enhance assessments, care planning and interventions with parents so that parenting capacity is improved and children are enabled to be safe and well. At the same time, children's services, and in particular children's social care are in need of increased awareness around drug/alcohol use and enhanced skills for engaging with parents who misuse substances, together with an on-the-ground

commitment to work more closely with adult treatment services at all stages of intervention.

Developments

Progress can be seen via the raft of policies and practice guidance as detailed here in this strategy document. Key messages from practice about the most effective ways of responding are summarised as;

- Whole-family approach where substance misuse is seen within a wider context
- Promoting Hidden Harm not as a single issue but being clear about wider agenda
- Providing support services before safeguarding threshold is reached
- Proactive ways of working across children and adult services, and social care
- Importance of working flexibly and creatively with children and families
- Providing options and choices for families, parents and children
- Shift away from negative risk factors towards identifying factors which promote resilience
- Utilising crisis point reached when Child Protection and Care Planning processes begin

Each sector needs to develop its own practice responses specific to Hidden Harm

Developments in Kent : To be added via further consultation

- **East Kent Local Safeguarding Children Board – Learning and Development Subgroup**

Parental Substance Misuse as current topic of focus

- **KCA Sunlight Project**

Funding via Big Lottery has enabled the service to employ three additional project workers to facilitate groups for children in East Kent

- **Identification of a LCSP Lead for Substance Misuse across all 23 partnerships**

- **Intensive Parenting Assessment Team in West Kent in response to Public Law Outline requirements – likely to be rolled out across Kent**

Outcomes

Outcomes for children affected by parental substance misuse are the same as for all children, identified by Every Child Matters as:

- Be healthy
- Stay Safe
- Enjoy and Achieve
- Make a positive contribution
- Achieve economic well-being

In order to enhance the possibility of Hidden Harm children achieving in these areas it is essential that support is targeted and delivered by parents, carers and the wider family, with universal and specialist services providing additional help in line with assessed need.

Growing up in a family where parents misuse substances can reduce the likelihood of universal outcomes being realised. If children are living at home with parents, then the parent/family unit is key to ensuring that outcomes for children are achieved. In relation to Hidden Harm, parents may need intervention to ensure they achieve their own outcomes, for the benefit of children:

Outcomes for Parents:

- Able to take care of self and others in positive and healthy ways
- Capacity to recognise and meet children/young people's developmental needs
- Respond to children/young people's needs as a priority
- Able to utilise universal and addition support services for self and children across lifespan
- Value, promote and seek education, training and employment for self and children

Joint Strategic Model for Hidden Harm

This table shows the shared-leadership process required to advance Hidden Harm strategically, highlights the role of LSCB and LCSP, and proposes workforce and service developments required to support the work in each sector.

Local Safeguarding Children Board	Local Children Service Partnerships
Lead on: Child Protection	Lead on: Early Intervention
Method of assessment: Assessment of Children in Need and their Families	Method of assessment: CAF
Partnership Process: Allocated Social Worker : Multi-agency case conference	Partnership Process: Lead Professional: Single Point Access
Workforce Developments: Shared polices, procedures, information sharing agreements, joint assessment and planning, joint review. Drug Misuse and Parental Substance Misuse training.	Workforce Developments: CAF Training, Early identification & screening, Drug Misuse and Parental Substance Misuse Training
Service Developments: Substance Misuse Social Worker Posts, Parenting Project in integrated settings, Substance Misuse MARAC, Family Drug & alcohol Courts	Service Developments: Support services for children, substance misuse specific parenting and family support, training for work, respite and activities, mentoring

A multi-agency training programme and a staged intervention response based on Every Child Matters Triangle of Need contribute to a comprehensive cross-sector practice response.

Strategic Priorities

This strategy is a tool to assist in the delivery of a comprehensive and innovative response to meet the needs of children affected by parental alcohol and drug misuse in a timely, relevant and accessible way. Priority actions have been identified to specify the steps required to turn vision into reality.

Priority Action 1:

A joint-strategic lead and cross sector markers to ensure that all relevant agencies are enabled and encouraged to share responsibility for furthering the Hidden Harm agenda in a co-ordinated and integrated way.

Priority Action 2:

Develop an accurate up-to-date demography of children in Kent affected by parental substance misuse to ensure that their needs can be accurately assessed and services developed/re-configured in line with specific identified need.

Priority Action 3:

Increase awareness of Hidden Harm issues across local children's partnerships and adult treatment systems and equip practitioners with skills for early identification, assessment and intervention.

Priority Action 4:

Increase the range and effectiveness of multi-agency partnership working arrangements sustained by shared language, common practices and shared processes/protocols, and jointly-commissioned holistic services to ensure an effective joined-up response.

Priority Action 5:

Ensure that safeguarding and child protection processes are actively prioritising the needs of children of substance misusers and developing effective approaches to meet their needs in timely, appropriate and family-focused ways.

Priority Action 6:

Ensure the development of service user involvement in the implementation of the Hidden Harm strategy and to involve children, parents and families in the commissioning system:

A delivery plan that details how these priority actions can be realised is designed to guide and influence cross-sector operational plans of commissioners and service providers within adult and children's services and all Local Children's Service Partnerships .

Governance: To be agreed

Monitoring and Evaluation: To be agreed

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By: Cabinet Member for Communities (Mike Hill)
 Managing Director for Communities (Amanda Honey)

To: Communities Policy Overview Committee, 25th March 2009

Subject: Integrated Youth Support Strategy

Classification: Unrestricted

Summary: This report summarises the content and progress of the Integrated Youth Support Strategy and accompanying Implementation Plan. The strategy and implementation plan are subject to formal consultation through the Kent Children's Trust Partnership. Both documents are appended to this report.

Recommendation:

Members are asked to note the progress of this strategy and implementation plan and to comment as part of the consultation process.

FOR INFORMATION & CONSULTATION

1. Introduction

- 1.1 The concept of Integrated Youth Support Services (IYSS) originated with the Youth Matters green paper in 2005. IYSS is about providing access to services for all young people according to their needs.
- 1.2 The Youth Matters green paper proposed four key elements deemed crucial in improving outcomes for young people:
 - **Positive activities:** more things to do and places to go
 - **Making a contribution:** More opportunities to contribute to their local community through personal development opportunities such as volunteering.
 - **Information, Advice and Guidance:** better quality and appropriately delivered.
 - **Reformed targeted youth support:** better support when needed to deal with specific problems.

2. Process

2.1 An early draft Integrated Youth Support Strategy was considered and approved by the Kent Children's Trust Board on January 31st 2008, after consultation with this Committee and the CFE Policy Overview Committee

2.2 Subsequently, further work has been done to produce the draft implementation plan. This work has been done a multi-agency working group, chaired by the Director of Youth Services and KDAAT (KCC Communities Directorate).

2.3 The Kent Children's Trust Board has now agreed that the latest version of the strategy and implementation plan should be consulted on together. The consultation period commenced on March 12th 2009 and will run for three months until the end of June 2009. This will ensure that all partners have time to respond in accordance with the Kent Partners Compact. It will include a series of consultation events with young people and will include work with those young people for whom there exist significant barriers to access.

2.4 The implementation plan is essentially a detailed action plan accompanied by a discussion of the structural, governance and resourcing arrangements for taking this work forward. Within the Kent Children's Trust structure this work will be taken forward by a dedicated, multi-agency board, chaired by the Director of Youth Services and KDAAT.

3. Recommendations

Members are asked to:

(i) NOTE the development of the Integrated Youth Support Strategy and Implementation Plan

(ii) COMMENT on the strategy and implementation plan.

Angela Slaven, Director of Youth Services and KDAAT, Communities Directorate

01622 221696

Angela.Slaven@kent.gov.uk

*Contact officer: Judy Doherty, Policy Manager, Communities Directorate
01622 221327*

Integrated Youth Support Strategy

Foreword

The years from 13-19 are some of the most exciting and challenging of our lives, during which we have some of our most formative experiences. This is the period when relationships with families change and our friends, our communities and the adults we admire take an increasingly important role in helping us understand who we are and what we want for ourselves.

Young people attract attention and censure at the very time in their lives when they face difficult challenges relating to education, money, health, employment, ambition, self-esteem and relationships. They are often judged negatively and superficially on the basis of what they chose to wear and the music to which they listen. In transition between their families and settled homes of their own, they occupy public space and socialise in groups which can be perceived as threatening. One third of stories in the media are about youth crime and 71% of stories about young people are negative¹.

Many of the challenges and experiences facing young people today are very different from those faced by previous generations and practical advice and guidance is not always readily available from traditional sources. Current societal changes on a trans-national level have been identified² including:

- Extended adolescence prolonging the period in education and delaying entry into the labour market;
- The development of the knowledge based economy and the accompanying demand for new skills for work;
- Widening inequality and the potential exclusion of particular groups;
- Changes in family and community life characterised by greater access to goods and services but also by fragmented families and new models of family and extended family care;
- Demographic and population change. In Kent the population is growing but with a heavy skew towards older and retired people. This is to some extent offset by migration but the settlement patterns are not yet clear.

In spite of the challenges and negative media images, the vast majority of young people simply get on with life, contributing to their school and family, working towards their goals and developing their interests in a way that attracts attention only from those closest to them. Among our own families and friends it will be easy to find truly inspiring examples of young people

¹ Positive Images Campaign

² OECD

who excel in academic work, sport and music; who believe passionately in causes and who give their time generously to help care for family and friends. They are not remarkable for the way they look: some of them even wear hooded tops!

In Kent, we want the achievements of our young people to be recognised and we are determined to work with young people to harness available resources to improve opportunities and outcomes for all.

This means making sure that we work together to improve the range, quality, accessibility and promotion of positive activities for all young people. In particular, there will be very special opportunities coming from the 2012 Olympics and Cultural Olympiad and we will ensure that young people can be involved in the preparations, the events and the legacy.

We have asked young people about the advice and guidance they need and will work with them to ensure that this is available, understandable, reliable and easy to find.

Young people have told us that most will still turn to their parents and family members in the first instance and so we will ensure that, through our Parenting Strategy, parents have access to the same quality of information.

Where young people are vulnerable and have needs that are complex or are particularly likely to put them at risk, we will target personalised, efficient support services co-ordinated by a lead professional and drawing on the resources of agencies and organisations in the community.

Integrated services put simply, means that there are no wrong doors. Wherever or from whomever a young person seeks help, they should receive the same access to helpful services, based, where possible, near to where they live. This is a guiding principle of the Children's Trust in Kent and has been furthered by the work between the County Council and district and borough councils which aims to improve integrated youth work at the local level.

Mike Hill
Cabinet Member
Community Services

Amanda Honey
Managing Director
Communities Directorate

Integrated Youth Support Strategy

Part 1: Context and strategic overview

Purpose and status

The Integrated Youth Support Strategy is part of the development of integrated children and young people's services in Kent. This process is overseen by the Kent Children's Trust Board.

In 2008, The Kent Children's Trust approved and published its second Children and Young People's Plan (CYPP). The Plan explains the processes and actions by which outcomes for children and young people will be improved in line with the national Every Child Matters framework.

Specifically, one of the priorities in the CYPP is to:

“ Ensure more young people have things to do and safe places to go in their leisure time and improve outcomes for adolescents at risk to themselves and potentially others, through, for example, implementation of the Integrated Youth Support Services Strategy.

(Positive about our future: Kent Children and Young People's Plan 2008-2011. Priority 6)

This strategy takes forward the priorities and actions within the plan designed to help young people at risk or with specific needs. It has been developed within the context of current national requirements, encompassing within it the Kent approach to developing:

- Positive Activities
- Targeted youth support
- Information Advice and Guidance.

The Integrated Youth Support Strategy (IYSS) has been commissioned by the Kent Children's Trust and developed by a working group on behalf of the Trust. The elements of the strategy have, to some extent been defined by national directive, but they accord with the approach to services for children and young people in Kent which is encapsulated within the CYPP vision:

In Kent's successful communities, achievement exceeds aspiration, diversity is valued and every child and family is supported. Children and young people are positive about their future and are at the heart of joined up service planning. They are:

- Nurtured and encouraged at home**
- Inspired and motivated by school**
- Safe and secure in the community**
- Living healthy and fulfilled lives**

Source: Vision Statement, Kent Children and Young People's Plan 2008-2011

There are many services for young people in Kent. Some are open to all young people; others are specifically targeted to meet defined needs. Some services have been commissioned or developed in response to the needs and experiences of young people in particular localities. This reflects the fact that Kent is a large and diverse county. The aim of this strategy is to ensure that young people can influence and have access to opportunities and services that will support them in becoming excellent young citizens, contributing to the energy, development and diversity of the county.

How have young people been involved in developing this strategy?

The involvement of children and young people is central to the work of the Children's Trust in Kent. One of the first policy initiatives undertaken by the Trust was to commission a strategy for participation. Young people have been asked to participate in the following ways:

- Consultation with young people has helped define the key priorities within the CYPP.
- We have acted upon some key messages from consultations with children and young people. We know, for instance, that for many young people safe places to socialise and access to reliable and affordable transport are really important. This is reflected with the CYPP key actions.
- We have listened to the findings of district consultations with young people, and have been guided by the priorities raised in district youth strategies.
- We have undertaken a comprehensive survey of children and young people through their schools (National Foundation for Educational Research survey) and we believe that this gives us very valuable messages while recognising that some young people's voices are less likely to be heard through traditional routes.
- "Tell Us" is a national study of young people's views. This provides information about young people in Kent and also enables comparisons with other parts of the country.
- A major demographic study "The Children and Young People of Kent" was commissioned and is used as part of the planning and commissioning process.
- The Children's Trust in Kent is working at county and locality level to develop reliable data and information products that are based on population data, young people's views, local intelligence and attitudinal studies. At locality level, commissioners are working directly with young people, parents and other stakeholders so that we begin to move away from traditional service provision models to encompass co-commissioned approaches.

How are our services changing?

Kent is a large and diverse county and some facilities and services will reflect local knowledge and need. Nevertheless, the need to develop a "core offer" or minimum common level of service across the county is recognised. The way that this is managed is through our Children's Trust commissioning arrangements. As a direct outcome of the Children Act 2004 and Every Child Matters, Kent's Children's Trust is tasked with ensuring integrated, child and young person-centred approaches to delivering children and young people's services, including the key elements of youth support services. The Children's Trust brings together social care, health, police, education, district councils and other organisations and services in the voluntary, community and public sectors.

The Kent Children and Young People's Plan, which incorporates the earlier Kent Preventative Strategy, forms a key element of the over-arching strategic framework for Children and Young People's services and for commissioning by the Kent Children's Trust. The CYPP was developed through partnership working and through consultation with children and young people. Identifying priorities for action and developmental priorities, this, in its turn, has influenced the county Local Area Agreement.

Kent County Council with its partners in the county Local Strategic Partnership (The Kent Partnership) has negotiated its second-round Local Area Agreement (LAA). Some outcomes relating to young people are emerging strongly as shared priorities. These include child poverty, up-skilling the workforce, economic development and civic participation. A summary of indicators which the Kent Partnership has agreed for inclusion in the LAA is attached (Appendix 1).

The Kent Children's Trust recognises that, for a county the size of Kent, the planning and commissioning of services will be more effective when devolved to local levels where possible. Our services will then respond to specific area needs, and will depend on significant relationships with universal providers, such as schools. This is why we have established Local Children's Services Partnerships as part of the Children's Trust arrangements in Kent.

Working in localities based on the geography of school clusters, Local Children's Services Partnerships (LCSP's) will be expected to:

- Build on the extended schools agenda
- Engage with local voluntary and community organisations
- Explore approaches for 'integrated' teams and processes, such as information sharing;
- Establish models of participation of children, young people and parents;

- Establish joint planning and commissioning for services such as youth provision and children's health.

LCSP's, in their commissioning role, will be key to ensuring that there is a range of locally sensitive, accessible and effective services for young people.

Not all service developments included within the purview of the IYSS will be commissioned and delivered within Local Children's Services Partnerships arrangements. Existing partnerships and services, such as district Crime and Disorder Reduction Partnerships, Teenage Pregnancy strategy boards, voluntary youth services, leisure and sports providers operate within different geographies. Integration of youth support services will need to ensure that these various facilities and services are networked for planning and commissioning purposes and that complications of geography do not form a barrier to information, access and referral routes.

The Kent Children's Trust will oversee the rich economy of young people's services to ensure that they are promoted, supported and, where necessary, aligned to meet the needs of young people. This will be achieved by carefully examining what is working, what kinds of provision should be commissioned or expanded, and identifying the areas where provision no longer matches young people's needs.

There are already many excellent examples of partners working together to provide a seamless service for young people, such as:

- Youth Strategies delivered at local level with close collaboration between Districts and Kent Youth Service.
- Rainer Kent 16plus Service for young people who are leaving care.
- A youth worker deployed to work alongside the Crime and Disorder Reduction Partnership in Shepway.
- 20 Community Youth Tutors seconded from Kent Youth Service to work in identified schools across the county.

Supporting Young People with Disabilities and learning difficulties: 'Me2'

The benefits of strong partnership in widening access to youth services are clearly demonstrated by *Me 2*, a charity working across Kent to help young people with disabilities or learning difficulties to access mainstream youth clubs and services.

Young people are matched with a peer mentor who accompanies them to youth activities and supports them until

What else needs to happen?

What else needs to happen?

Service improvement is only part of the story. Young people will not be able to make the best use of their own resources and the opportunities offered to them if what they do is judged through the lens of negative stereotypes and public mistrust. Through this Integrated Youth Support Strategy, Kent County Council and its partners in the Children's Trust seek to bring about a real change in attitudes on two fronts.

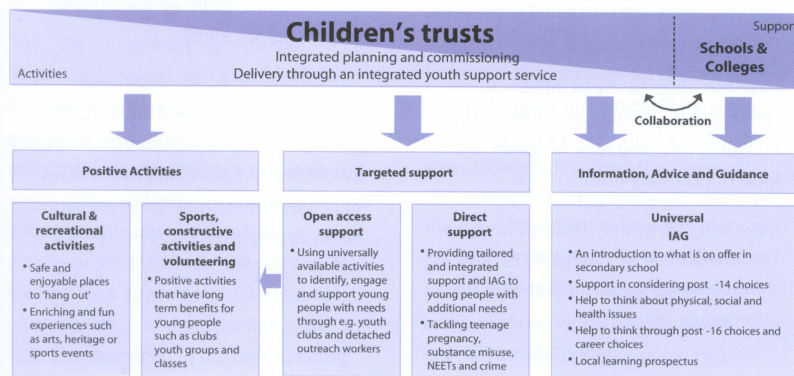
Simply put, young people are not just our future - they are valued members of our present-day society, and as such they need to believe in their own ability to make a contribution. In order to stimulate this confidence, we must capture their enthusiasm and energy, and capitalise on their desire to make a difference. We want to encourage their ideals and aspirations, and their willingness to help other people, but importantly, we need to give them the space to do this. Public authorities must demonstrate how they are listening to young people's needs, in order to convey that society as a whole recognises the challenges they face and will support them as they aspire to fulfil their potential.

Secondly, stereotypical representations and poor perceptions need to be challenged and counter-balanced. Young people have an important role to play: their contribution can make a difference, whether it is through wider community activities such as volunteering or participating in youth forums, or by personal actions such as taking steps to improve their own health or education, and so improving their life chances. Therefore perceptions must be reinforced that young people out and about with their friends are not out to cause trouble and that it is the responsibility of all of society to support young people in the transition to adulthood.

When young people feel that they are misjudged and mistrusted they are more likely to form strong allegiances to friends and to places they regard as safe. Young people have told us that sometimes they congregate in public places so that they feel safer. Further, their need to be and to feel safe and their strong identification with neighbourhoods can sometimes limit their choice of services and activities.

Part 2: The Elements of the strategy:

The Government's Green Paper *Youth Matters (2005)* identified 4 key areas where public authorities need to support young people through closer integrated planning, commissioning and delivery of services. Schematically, the range of services that fall within the remit of this strategy is represented by the diagram below:



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The elements within the IYSS have a relationship with each other and one measure of effective targeted support is to help young people meet their needs through

engagement with a range of positive activities within their communities.

Whilst the purpose of this strategy is to take this forward, it also recognises that many services across Kent are already working together effectively to improve outcomes for young people and examples of this can be seen below:

- **Positive activities:** more things to do and places to go

Young people who engage in positive leisure time activities have an opportunity to make new friends, develop extra-curricular skills, and enjoy themselves within a safe environment. They also have the chance to build self-esteem and through this, raised aspirations for their future. Young people have told us that they are particularly keen to engage in sports and cultural activities in their communities.

Improving positive activities for young people means working together to ensure that young people in Kent can enjoy the social and personal benefits of positive leisure-time activities in safe environments. District and borough council youth strategies have been developed with young people and are key to this priority; providing important information about what young people want and about what prevents some young people from having the opportunities they seek. Voluntary and community organisations often staffed and run by dedicated adult and young volunteers; provide a wealth of activities enjoyed by young people. Integration means working with these organisations and with the associated infra-structure bodies to support staff and volunteers and to promote the activities

Providing and promoting a wide range of positive activities for young people in Kent is therefore one of the key commitments within the Children and Young People's Plan 2008-11, and is supported by national policy directives such as the Youth Matters Green Paper, and the Education and Inspections Act 2006.

Kent has a rich diversity of youth groups and activities, but many young people have reported that there needs to be better communication of the opportunities available to them.

In response, partners have worked together with young people to produce Togogo. This is a bespoke web-site for young people to advertise positive activities. This should increase young people's awareness of and participation in a range of educational and recreational activities and events taking place within their local area. Young people will be able to search for activities in their local area from a county-wide database, retrieving details about cost, timings and age-ranges as well as travel directions.

The information available to young people through Togogo is complemented by the Kent Resource Directory which provides information for staff and volunteers working with children, young people and their families.

Successive consultations suggest that accessibility continues to be highlighted as an issue for many young people. The Kent Freedom (travel) Pass, Leisure Passes, Aiming High for Disabled Young People, the Kent Pledge to Looked After children and young people, the Cultural Access pilot in Shepway all contribute to improving access.

The Voluntary youth sector is a major and valued partner in the provision and promotion of positive activities for young people. The supply of volunteers needed to maintain the numerous clubs and societies that offer positive opportunities to young people can not be taken for granted. Building capacity in the sector through the Kent Partners Compact and by other means should be kept under review.

Kent Youth Service commissions and delivers targeted positive activities for young people aged 13-19 resourced by PAYP funding and commissioned through the KCTB. The aim is to engage vulnerable young people in positive activities with a specific preventative and diversionary effect. A service specification has been developed which ensures that targeted positive activities have the characteristics which research shows are effective for vulnerable young people. The outcomes of targeted positive activities are measured and monitored.

Kent County Council members are currently considering positive activities for young people in Select Committee. Recommendations from the Select Committee should be considered by the IYSS Board.

Riverside Youth Centre, Canterbury

An excellent example of centre-based youth provision, Riverside offers a wide range of positive activities to young people throughout the year, prioritising enjoyment, challenge and learning for its members. Recently refurbished in 2006, the centre is now fully accessible for disabled users.

- **Making a Contribution:**

Strong, friendly, welcoming communities are characterised by positive relationships, appreciation of the experiences and feelings of others and a range of community-based activities. This includes activities that bring people together, regardless of age, to learn from and help each other.

It is a key part of this strategy to promote activities that give young people the opportunity to contribute to community life. This includes but is not limited to volunteering and peer mentoring. A range of vibrant and stimulating activities in any community (school, college, workplace and locality) contribute to the overall quality of life and cohesion of that community.

The contribution made by young people to their communities is not always recognised. For many years, the achievements of young people in Kent have been recognised through events such as the Try Angle Awards. More can be done to systematically communicate and recognise young people's contribution. In particular, we will work with vulnerable young people whose achievements are less likely to be recognised and applauded.

Kent Youth County Council

There are excellent opportunities for young people in Kent to actively engage in democratic and decision-making structures. Supported by the Youth Service's Participation Team, Kent Youth

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- **Information, Advice and Guidance:**

This is about access to high quality, comprehensive and impartial advice, which is appropriately delivered.

IAG refers to the full range of information, support and guidance to young people. Young people's concerns and worries cross service boundaries. We know that these include relationships with family and friends, health and personal safety as well as hopes and fears for their own future in a changing

world. We also know that young people are more receptive to advice that is delivered frankly, respects their individuality and does not patronise. This means that IAG delivery will include the staff in a range of services and settings. New models of delivering information, advice and guidance are also being developed. The House project, funded and managed by public health, employs some aspects of the one-stop-shop combined with word-of-mouth marketing.

The Connexions service which includes careers guidance IAG and broader support services to teenagers to minimize NEETS (young people not in education, employment or training) is currently commissioned and will go out to competitive tender for April 2010.

The Gr@nd, Gravesend

This project was originally established as a Healthy Living Centre in 2001 with a grant from the New Opportunities Fund, and is a partnership between Kent Youth Service, Gravesham Borough Council and the Dartford, Gravesham and Swanley Primary Care Trust. Established as a one-stop-shop in the town centre of Gravesend, the project incorporates a multi-agency staff team to offer information, advice and guidance to the community and acts as a conduit for other services to access hard to reach communities. A full-time youth worker from the youth service is deployed in the project and contributes to the delivery of a wide-ranging programme of structured information, advice and guidance sessions. The centre also makes use of IT to enable young people to access information around health and well-being.

• **Reformed targeted youth support:**

Targeted youth support (TYS) means ensuring that young people who are in difficulty are identified and able to benefit from personalised and effective support

Commissioning arrangements have been developed and piloted in preparation for county-wide implementation by December 2008. The model for YYS employs a Single Point of Access (triage) approach. Most young people offered help through YYS will have been assessed using the Common Assessment Framework. The CAF identifies young people with additional

needs at an early stage and, through the Single Point of Access and Lead Professional, promotes swift and easy access to advice and support. Targeted Youth Support forms a continuum with universal services: responding to the identification of vulnerability by universal services, but not replacing the importance of universal services to the young person. For most young people targeted Youth Support will be accompanied or followed by use of universal services.

ARC: The Adolescent Resource Centre, Canterbury

ARCs aim to provide an early intervention service (tiers 2 .5 and above) that will support, advise and empower young citizens who face difficult times of challenge and transition during adolescence. This is achieved through providing a single point of service for young people where they can access a range of educational, health and social supports.³ One of seven ARCs established around the county, Canterbury offers services such as Alternative Curriculum provision and specialist support by Social Workers for adolescents and their carers who may be experiencing significant difficulties in their relationships at home and are at serious risk of family breakdown and accommodation. The ARC will also link young people and families with support available from other agencies.

ARC Triage - a Multi-Agency Approach:

The ARC Triage multi-agency meeting was developed from an already existing multi-agency consultation group,

The elements of integrated youth support services in Kent will work closely with education and training services to help young people mature into adulthood. Personal and economic well-being form part of the Every Child Matters framework for children and young people and, in Kent, we are working to ensure that every young person can develop the skills necessary for economic independence.

Key Training Services: Kent Success Apprenticeship Programme

Aaron's story

I first found out about the apprenticeship programme when I went into Connexions looking for a full time job. I didn't just want any old job; I wanted a job that would form the basis of my career with opportunities to move forward a progress with the experiences I've gained.

Connexions then referred me to Key Training Services at KCC where I completed an open door programme. The open door programme is a three week programme where several team building activities are completed. After the open door programme I began e2e which stands for entry to employment where I learnt about key skills in communication and numeracy.

After completing the e2e programme I became a Kent Success Apprentice and applied for a job at session's house as an information assistant, with the property group.

On my first day I was overwhelmed by the size of the organisation and the amount of people working there. Everything was really new to me and I soon realised that there was going to be a lot for me to take in.

My main job roles are, office administration, answering the telephone, opening the post, dealing with queries from colleagues throughout the organisation and external businesses. The most important part of my role is processing invoices for large construction projects and maintenance work. This requires me to keep accurate records and stay within both contract terms and internal targets for time scales. As you can see I have a lot of responsibility, and I love it!

I receive a lot of support from my line manger Emma and other members of my team. I also get support from KEY training services, my tutor Sheryl that comes to visit me once a month. I am working on collecting evidence for my NVQ; a lot of which I have been able to find myself, however I am also helped by my team and other members of the property group who have given me new experiences like visiting a project on site.

I originally intended to fit my NVQ work in with my job role, but as I started to gain more responsibility, I realised that this wouldn't always be possible. I worked with my manager to prioritise my duties and blocked time out in my diary to show to other people and myself that I will be using this allocated time each week for working on my NVQ.

What Do We Mean by Integrated?

When we are talking about integrated services, it is important to understand that we have particular models in mind. They will all contribute to effective integrated youth support services, which will in turn lead to improved outcomes for young people. These include:

- *Services and partners working together to provide a team around the young person:*

'Changes' Dual Diagnosis Project, Thanet

The Changes Dual Diagnosis Project, currently being piloted in Thanet, identifies and delivers intensive support to young offenders who have both substance misuse and mental health needs.

The project is operated by a multi-agency team, comprising professionals from specialist substance misuse services, the Youth Offending Service and Mental Health services. Through multi-agency assessment and case-working, practitioners are able to combine their specialist knowledge and tailor interventions to meet the young person's needs and individual capabilities.

Critical to the success of this project has been the engagement with the families and carers of young people receiving interventions. This is essential both to understand

- *One partner commissioning another partner to provide a service:*

Kent 16plus Service is a partnership between Kent County Council and Rainer.

The service helps young people aged 16 and over, living in foster or residential care, to make the most of opportunities available to them and to support them through the transition to a more independent life.

- *Partners commissioning services from the community:*

Rhythmix

Funded by Youth Music and Kent County Council, Rhythmix has been successfully delivering programmes to young people since 2000; one of the key elements of its success is the use of tutors - 'jobbing' musicians who are able to communicate, inspire and gain the respect of young people interested in music.

Using additional financial support from Kent County Council, Rhythmix has provided a series of music programmes specifically aimed at 'excluded' and other vulnerable young people. Skilled tutors specialise in engaging these notoriously hard to reach and hard to engage groups. They offer a contemporary, informal and thought-provoking approach to music development, which enables the young person to focus on themselves, their surroundings, their interaction with peers and, in some cases, to serve as a self-reflective reparation for

- *Partners co-commissioning services and activities with young people:*

The Youth Capital Fund and Youth Opportunities Fund

The Youth Capital Fund and the Youth Opportunities Fund represent a new approach to traditional commissioning models, by offering young people the chance to exert far greater choice and influence over the development of services that affect them.

Groups of young people and youth organisations are invited to bid for funding to develop new projects that will improve the range of things to do and places to go in the local area

- *Budget pooling: In order to achieve better service outcomes for young people through joint commissioning, services may benefit from pooling their budgets.*

Young Persons' Substance Misuse Partnership Grant

Substance misuse services for young people are structured to provide universal education, targeted prevention and specialist treatment. The provision has historically been funded by the Young Persons' Substance Misuse Partnership Grant, which is a pooled budget comprising funding streams from the Department of Health, the Home Office, the Department for Education and Skills, the Youth Justice Board and Connexions.

An operational substance misuse commissioning team report quarterly activity to a multi-agency Young People's Joint Commissioning Group. This group has representation from all partners of the main funding sources. Partners ratify the annual substance misuse plan for young people.

Whichever model of commissioning is used, we need to ensure that services and activities are attractive to young people. Some young people do not find it easy to access the services they might need, nor do they find them appealing.

Projects that are designed by young people are often better used, more culturally relevant and engage young people from a range of backgrounds and experience.

'Blingin' Arts' – Tonbridge & Malling

Devised by the West Kent Arts Partnership, the 'Blingin' project offers young people between 12 and 17 the opportunity to participate in creative activities that reflect their own lifestyles, ideas, and experiences. Activities range from DJ-ing to break dancing and urban art, with an emphasis on exploring street culture through new art forms.

The programme has been devised in collaboration with young people, and has encouraged many teenagers who would not normally engage in cultural activities to experiment, have fun, and learn new skills. The project has been hugely popular across West Kent, with young people reporting that they have developed new confidence and self-esteem, and several stating that participation in the group influenced their GCSE choices and career aspirations.

Pie Factory Music – Thanet

Pie Factory Music is a local charity offering music and urban arts workshops for young people, to give them a chance to experiment with new techniques and have fun within an informal setting.

Firm believers in the power of music to motivate, include and inspire, Pie Factory Music run a wide range of activities to engage young people from all backgrounds, including a rock academy, steel drum group, street art youth group and advanced DJ workshops. Through the Friday 'jam nights' for under 18s, and the free taster sessions, many disadvantaged young people have been encouraged to take part who would otherwise never have accessed the scheme.

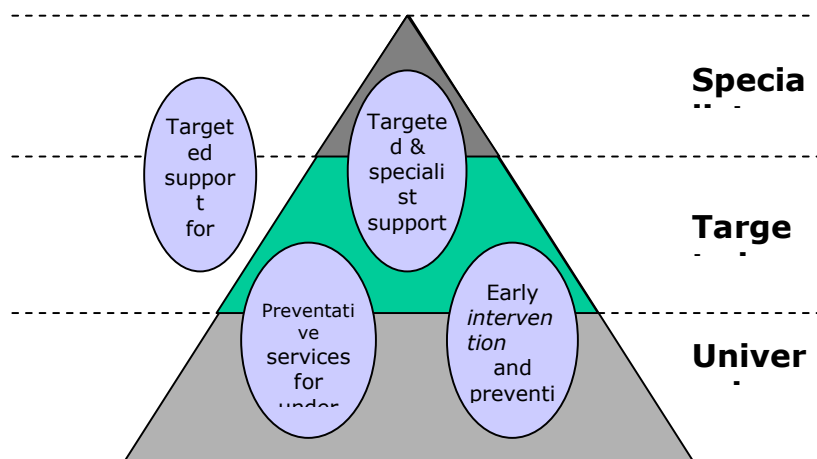
For many young people, it can be the beginning of a new ambition to enter the music business. In response to this, The Pie Factory are always ready to help those with a talent or passion for music to take their skills further. They run a variety of progression workshops, and even offer a formal one-year teaching programme covering all aspects of the music business, from production to sound engineering.

Integrated planning and Commissioning: the spectrum of need

An added challenge to delivering an effective Integrated Youth Support Service will be to provide a range of services to meet the needs of a range of young people, from universal services available to all, through targeted services, to specialist services where the numbers of young people involved

may be very small. An integrated approach to planning and commissioning across partners' services will be essential to make sure that the most effective use of resources is made, right across this spectrum of need.

The level and type of support available to children and young people is illustrated in the diagram below:



Drawn from the Targeted Youth Support Toolkit, V 2.1, TDA Development

Universal Services

These services are available to all young people and many are free at the point of entry. Access is not referral based, and some universal services are provided by the voluntary and community sector, which can greatly aid promoting access to universal public sector services.

Examples/agencies involved: Schools, primary health care, and Connexions.

Targeted Services

These services are focused either by geographical area or utilise preventative approaches based on specific individual needs of vulnerable young people. Access is through referral or self-referral. The voluntary and community sector often offers provision that is perceived to be less stigmatised and therefore more accessible to vulnerable young people.

Examples/agencies involved: services for teenage parent support and Traveller young people, the Youth Service and Rainer 16plus service for young people in or leaving care.

Specialist Services

Services provided at this level are for young people with acute or chronic needs. They are available through agency referral via a managed route into the service by the referring agent and service provider.

Examples/agencies involved: services for young people with a disability, specialist Child and Adolescent Mental Health Services (CAMHS), Pupil Referral Units, Youth Offending Service, residential services.

Integrated planning and commissioning: Engaging with Young People

In order to ensure provision within Kent is in tune with what young people actually need, real engagement with young people is crucial. The first piece of work commissioned by the Kent Children's Trust was a framework for participation by children and young people. This is being used within the locality Children's Trusts arrangements. The approach to young people's participation has been heavily influenced by the long-standing use of the "Hear by Right" framework within Kent Youth Services.

This Strategy has been developed in consultation with young people, who will continue to be central to shaping the development of future services. We have listened to their views about local services, expressed through district youth consultations, and have referred closely to the priorities identified in local youth action plans (See Appendix 2) to ensure that this Strategy reflects current needs and is aligned with district-led initiatives.

Kent is already engaged in actively involving young people with their services. The Kent Youth County Council has played a prominent role in youth participation since 2002, and the Connexions Young People's Board has helped shape Information, Advice & Guidance provision for 13 to 19 year olds. Looked After Children are involved with service development and staff recruitment, and young people with severe learning and physical disabilities and their parents are represented on management boards for Resource Centres. However, this engagement must be evolved further, to create greater opportunity for wider participation of young people from different backgrounds and situations – not just those with an interest in local politics.

We recognise that engaging with young people is an active process and that some young people are less likely to be heard. This might include young carers, young people in, or leaving, local authority care, young people from

black and minority ethnic communities, young people with disabilities as well as those who experience the cumulative effects of poverty and disadvantage. As the demography of Kent changes the young people served by this strategy are changing. Migration and housing growth will bring new communities to Kent. Regeneration and new labour markets will offer new opportunities. Engaging effectively with the most vulnerable individuals and communities will be critical to ensuring that these opportunities benefit all young people.

Integrated planning and commissioning: Identifying and Responding to Risk:

If youth support services are truly integrated then the whole system should be effective in engaging and helping young people who are vulnerable or at risk. If our approach is to have a demonstrable preventative effect, it needs to be underpinned with an evidence led approach to risk assessment, which can form the basis of work across and beyond the Children's Trust environment.

Integrated Youth Support Services will not operate in isolation. Joint work within and beyond the Children's Trust agenda will be enriched by a sophisticated understanding of risk and policy focus on prevention, diversion and reintegration.

There are many situations and events that can contribute to young people's vulnerability. Commissioning preventative services and interventions will be an important element in the strategy. Equally important will be the training, support and development that all staff working in youth services receive. Young people will benefit from contact from staff who understand how to recognise risk and respond in a way that is timely, helpful and which uses informal and formal networks to build young people's resilience.

This means that anyone who works with young people, in whatever setting or sector, should have access to support and professional development as part of the young people's workforce.

How we will measure success

We are interested in improving opportunities and outcomes for all young people. Every Child Matters provides the outcome framework for children and young people.

➤ Outcomes for young people in Kent

The contents within the case studies are correct at the time of publishing this strategy.

APPENDIX 1: KENT AGREEMENT 2 AGREED INDICATORS RELATING TO IYSS (RELATED INDICATORS IN BOLD)

Theme	Headline Priorities	National indicators
Economic Success – Opportunities For All	Improving enterprise, competitiveness and productivity	NI163 Working age population qualified to at least level 2 or higher NI171 VAT registration rate
	Promoting pathways to economic independence	<i>NI152 Working age people on out of work benefits</i>
	Creating a low carbon and climate change resilient economy	NI 188 Adapting to climate change
Learning For Everyone	Raising aspirations and transforming skills for young people and adults	NI161 Learners achieving an Entry Level 3 qualification in literacy NI162 Learners achieving an Entry Level 3 qualification in numeracy
	Enhancing education, employment and training opportunities	NI117 16-18 year olds who are not in education, training or employment (NEET)
	16 Statutory DCSF Indicators	NI72, NI73 or 76, NI74 or 77, NI75 or 78, NI83, NI87, NI92, NI93, NI94, NI95, NI96, NI97, NI98, NI99, NI100, NI101
Improved Health, Care & Wellbeing	Reduce inequalities in health and wellbeing	NI120 All-age all cause mortality rate NI55 Obesity among primary school children in reception year
	Reducing drug and alcohol misuse and the harm it causes	NI39 Alcohol-harm related hospital admission rates NI40 Drug users in effective treatment
	Helping people live life independently	NI125 Achieving independence for older people through rehabilitation/intermediate care
	Improve mental health, care and wellbeing	NI51 Effectiveness of child and adolescent mental health (CAMHs) services
Environmental Excellence	Sustainable water and flood risk management	NI189 Flood and coastal erosion risk management
	Reducing Kent's carbon footprint	NI186 Per capita CO2 emissions in the LA area
	Sustainable management of waste	NI191 Residual household waste per head
	Protecting and enhancing biodiversity and landscape in Kent	NI197 Improved local biodiversity – active management of local sites
Stronger & Safer Communities	Improving the quality and appearance of the street scene and open spaces	NI195 Improved street and environmental cleanliness (levels of graffiti, litter, detritus and fly posting)
	Reducing crime and the perception of crime	NI15 Serious Violent Crime Rate NI21 Dealing with local concerns about anti-social behaviour and crime by the local council and police
	Reducing the levels of offending	NI111 First time entrants to the Youth Justice System aged 10-17
	Reducing domestic abuse	NI32 Repeat incidents of domestic abuse
	Increasing community cohesion, participation and shared sense of belonging	NI3 Civic participation in the local area NI6 Participation in regular volunteering
Enjoying Life	Improving play, cultural, arts, learning and leisure opportunities for all people in Kent	NI11 Engagement in the arts
	Increasing involvement in active lifestyles, participation in sport for all ages and maximising the legacy of the 2012 Olympic and Paralympic Games	NI8 Adult participation in sport
	Improving the participation and engagement of all children and young people in community activities	NI110 Young people's participation in positive activities
Keeping Kent Moving	Reducing the need to travel and making better use of existing strategic transport infrastructure and reducing the impact of international traffic on Kent and its communities	NI198 Children travelling to school – mode of travel usually used
	Improving accessibility to jobs and essential services by sustainable modes of travel	NI175 Access to services and facilities by public transport, walking and cycling
	Saving lives and reducing injuries on the roads and pavements	NI47 People killed or seriously injured in road traffic accidents
High Quality Homes	Creating sustainable communities/ Promoting social and physical regeneration	NI170 Previously developed land that has been vacant or derelict for more than 5 years
	Delivering sustainable homes incorporating high quality design	NI187 Tackling fuel poverty – people receiving income based benefits living in homes with a low energy efficiency rating
	Increasing the supply of housing of all types and tenures	NI154 Net additional homes provided NI155 Number of affordable homes delivered (gross)
	Improving access to high quality housing for all	NI141 Number of vulnerable people achieving independent living

APPENDIX 2: SUMMARY OF PRIORITIES IDENTIFIED BY YOUNG PEOPLE IN DISTRICT CONSULTATIONS

District	Most recent consultation	Youth Strategy status	Main priorities identified by young people
Ashford	2005	2006-9	<ul style="list-style-type: none"> • More low-cost leisure and sports activities with free 'taster' sessions • Safer, cleaner streets and parks • Improvements in transport cost and accessibility • More opportunities to contribute to decision-making
Canterbury	On-going	In draft stages	<ul style="list-style-type: none"> • More informal youth spaces and adventure activities • More affordable transport • More volunteering opportunities and chances to contribute to decisions • Better communication of available services • IAG services need to be accessible out-of-hours
Dartford & Gravesham	2006	2007-10	
Dover	2006	2005-8	<ul style="list-style-type: none"> • Need for better communication of local services • Concerns about crime/bullying • Better IAG • Increased youth activities
Maidstone	2007	In draft stages	<ul style="list-style-type: none"> • Better youth activities/youth café • Cheaper, safer public transport with more accessible routes • Concerns about safety – call for more police on streets
Sevenoaks	2006	2006-9	<ul style="list-style-type: none"> • More evening youth activities • Concerns about bullying, drugs and safety
Shepway	In progress	In development	
Swale	On-going	2006-9	<ul style="list-style-type: none"> • Cheaper, more accessible transport • Cheaper sports facilities • Better communication of local activities
Thanet	In progress	In development	
Tonbridge & Malling	2005	2006-8	<ul style="list-style-type: none"> • Expanded, more varied youth activities and informal spaces • Careers mentors for Year 11 and more work experience opportunities • Cheaper transport • More health advice tailored for young people
Tunbridge Wells	On-going	In development	

APPENDIX 2: SUMMARY OF COMMON PRIORITIES IDENTIFIED BY DISTRICT YOUTH STRATEGIES

Area of development:	Priority Needs:
Transport	<ul style="list-style-type: none"> • Need for cheaper services / discount cards • Need for more routes/better timetabling to improve access to facilities and activities • Improvements in public transport safety
Positive Activities	<ul style="list-style-type: none"> • Need for more provision, and more varied recreational activities, especially in the evenings (until 10pm) and weekends • Reduced cost sports activities • Suggestion for free trial sessions of new activities • Better communication of activities on offer • Health promotion: calls for 'teenage gyms' / gym discounts
Making a Contribution/ Promoting Respect	<ul style="list-style-type: none"> • Improved communication with councillors, with the suggestion that councillors spend more time visiting schools, and that consultation work provides feedback to respondents • Improving the perception of young people through positive media stories • Increased YP participation in planning
Information, Advice & Guidance	<ul style="list-style-type: none"> • Better signposting of services • Particular need for improved provision and signposting to bullying support services
Youth Crime	<ul style="list-style-type: none"> • Better support for the victims of youth crime, by more clearly promoting 'what to do' if you are a victim of crime. • Provision of safer places to hang out
Careers advice and work experience	<ul style="list-style-type: none"> • Improved careers advice in schools and mentoring for school-leavers • Expansion of peer mentoring services across the county

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Implementing the Integrated Youth Support Strategy

1. Introduction

1.1 The Integrated Youth Support Strategy identifies where we want to be in Kent in our commitment to young people. This paper takes forward the policy priorities identified in the strategy.

2. Assumptions:

2.1 This plan assumes that:

- Integrated youth support in Kent will not be delivered through a new integrated youth support service. Rather, we will concentrate on integrating planning and commissioning processes, performance management, and referral pathways.
- There will be a sub-group of the Kent Children's Trust Board which owns and manages the outcome framework and performance management of the strategy.
- The focus of delivery will be local and that Local Children's Services Partnerships will be key agents.
- The plan is based on an assumption that there will be no new money or resources to support delivery. Delivery will focus on the improved outcomes that can be delivered from integrated planning and commissioning. It is expected that integrated working at local level will also reduce duplication and promote new ways of working which will release existing resources to be used differently.

3. Structure, Governance and Accountability

3.1 The integrated youth support strategy is located within the overall framework of the Kent Children's Trust arrangements. A highly strategic but broadly constituted Kent Children's Trust Board (KCTB) oversees the development of the county Children and Young People's Plan (CYPP). At the local level 23 Local Children's Services Partnerships have been formed as the key delivery agents of the CYPP priorities. A range of working groups at county level completes the sub-structure of the KCTB. These sub-groups will lead on the design, planning and commissioning of priority services for children and young people; acting as technical advisors to the Local Children's Services Partnerships (LCSPs) where a local component to commissioning is agreed.

Appendix 1 shows the current structure and sub-structure of the KCTB

3.2 Oversight of the integrated youth support strategy will be the responsibility of a Kent Children's Trust core sub-group. This is currently represented on the

KCT sub-structure as the IYSS/TYS group. Over a period of 12 months, IYSS/TYS group will merge with the existing 14-19 Strategic Forum. This will ensure that the planning and commissioning agenda for young people is integrated and that there is a collaborative approach to delivering better outcomes for young people.

3.3 Nationally, government expectation is that Integrated Youth Support Strategies will deliver the outcomes of National Public Service Agreement 14: Increase the number of young people on the path to success.

3.4 PSA 14 aims to tackle a range of poor outcomes for young people where research suggests that there is some commonality of risk factors. Targeted youth support is critical to this and the TYS operational group will report to the IYSS/TYS sub-group.

3.5 A key element of delivering integrated youth support services is the activities, events and interventions delivered at a local level and overseen by district and borough councils through the youth strategies. District and borough councils collectively lead on the CYPP priority to “Ensure there is equality of access to recreational activities, in particular in areas of deprivation or for those with few economic resources” (CYPP 1B/4). This is not a relationship of accountability but ensuring strong and purposeful relationships between the tiers of local government will be an important task for the IYSS/TYS group.

4. Resources

The Integrated Youth Support Strategy (IYSS) represents the co-ordination and delivery of services to young people across the county of Kent from a range of sectors and organisations. This strategy builds upon existing arrangements, opportunities and facilities for young people and the investment is in principal within existing structures and resources and does not identify any immediate funding gaps.

The Kent Youth Service delivers one aspect of a universal youth service provision to young people in Kent aged 13 – 19 years. IYSS is however much broader than this universal offer and as a strategy it sets out and highlights key aspects of the delivery of children and young people’s services including; information, advice and guidance (IAG), targeted support and positive activities for young people. The range of services and funding sources is significant involving funding from the County Council, district councils, the voluntary sector and private sector. In addition, many partner organisations and agencies, including the PCT’s in Kent and Kent Police invest in services for young people.

The youth service provision is set to increase in the next few years with a commitment from central government towards Positive Activities for Young People (PAYP) programme to increase in the next 3 years.

Information, Advice and Guidance covers a many aspects of young people's lives. The Connexions service is commissioned to provide IAG with specific regard to Education, Training and Employment. In addition services to young people within schemes such as "House", Teenage Pregnancy and Young People's KDAAT amount to a significant additional investment.

In future years the investment in youth services' provision and support will, and should, grow in recognition that the modernisation of some aspects of service needs to be undertaken and a recognition that provision is not longer "fit for purpose". All the indicators suggest that investment in young people services leads to young people contributing and participating in a constructive lifestyle and one that leads to benefits both for themselves and their community.

The successful implementation of the strategy requires quantitative and qualitative evaluation of service provision and a correlation with the Children and Young People's Plan and outcome measures. Investment and development should follow this assessment and analysis and delivery will continue to be across a range of settings. The strategy aims to work with young people and to support investment in services that reflect both the universal need and when and if required more targeted investment.

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5. Terms of Reference and Membership of the IYSS/TYS group

The Board is a multi-agency, cross sector sub-group of and accountable to the Kent Children's Trust Board.

The Board will exist for 12 months during which period its agenda and terms of reference will be merged with that of the 14-19 strategic forum.

The Board will oversee the implementation of the Integrated Youth Support Strategy in Kent, working across the KCTB structures to ensure that all required elements of IYSS are implemented.

The Board will report to the Safer and Stronger Communities sub-group of the Kent Partnership on those aspects of its work that contribute to public safety and community cohesion.

The Board will be strategically aligned with PSA 14 to promote better outcomes for young people across the ECM outcomes framework.

The Board will work with young people in accordance with the KCTB participation strategy to ensure that their views sought and acted upon.

Responsibilities:

- (i) To assess need and develop strategies to ensure equality of access and improved outcomes for young people.
- (ii) To work collaboratively with district and borough councils to monitor and improve coverage, quality and accessibility of community based services for young people in Kent.
- (iii) To ensure the active participation of young people in planning, commissioning, service design and evaluation.
- (iv) To act as a commissioning reference group for the commissioner for IAG, PAYP and TYS and to other commissioners of services and projects for young people.
- (v) To champion the needs of vulnerable young people and develop strategies to "narrow the gap".
- (vi) To oversee the targets and indicators outlined in the performance framework and act as agent for the KCTB Performance Management group in driving improvement;
- (vii) To link with the Children and Young People's Health Board, the 8-13 group, and the County Youth Justice Board to identify shared tactical approaches in preventative work;
- (viii) To act as technical advisor to LCSP's in planning, commissioning and delivering local services for young people, particularly where the services are targeted and preventative;
- (ix) To develop and keep under review a communications strategy which will promote the positive contribution made by young people in Kent and help young people to speak and act for themselves.
- (x) Promote and develop a more integrated young people's work force

6. Monitoring and Performance Management

5.1 A proposed performance monitoring framework is attached at *appendix 2*. The performance framework is based on high level outcome indicators related to PSA14 and cross referenced with Kent’s Local Area Agreement and Children and Young People’s Plan.

5.2 High level indicators are useful at population level. The performance monitoring framework is supplemented by young people’s feedback measures (sources to be identified but include NFER and Tell Us data) and quality and equality measures. Equality measures tell us how we are providing opportunities and services to young people who are vulnerable to exclusion. This includes young people with disabilities, young carers, young migrants, young people from ethnic minority groups, young people in or leaving care and lesbian, gay, bisexual young people.

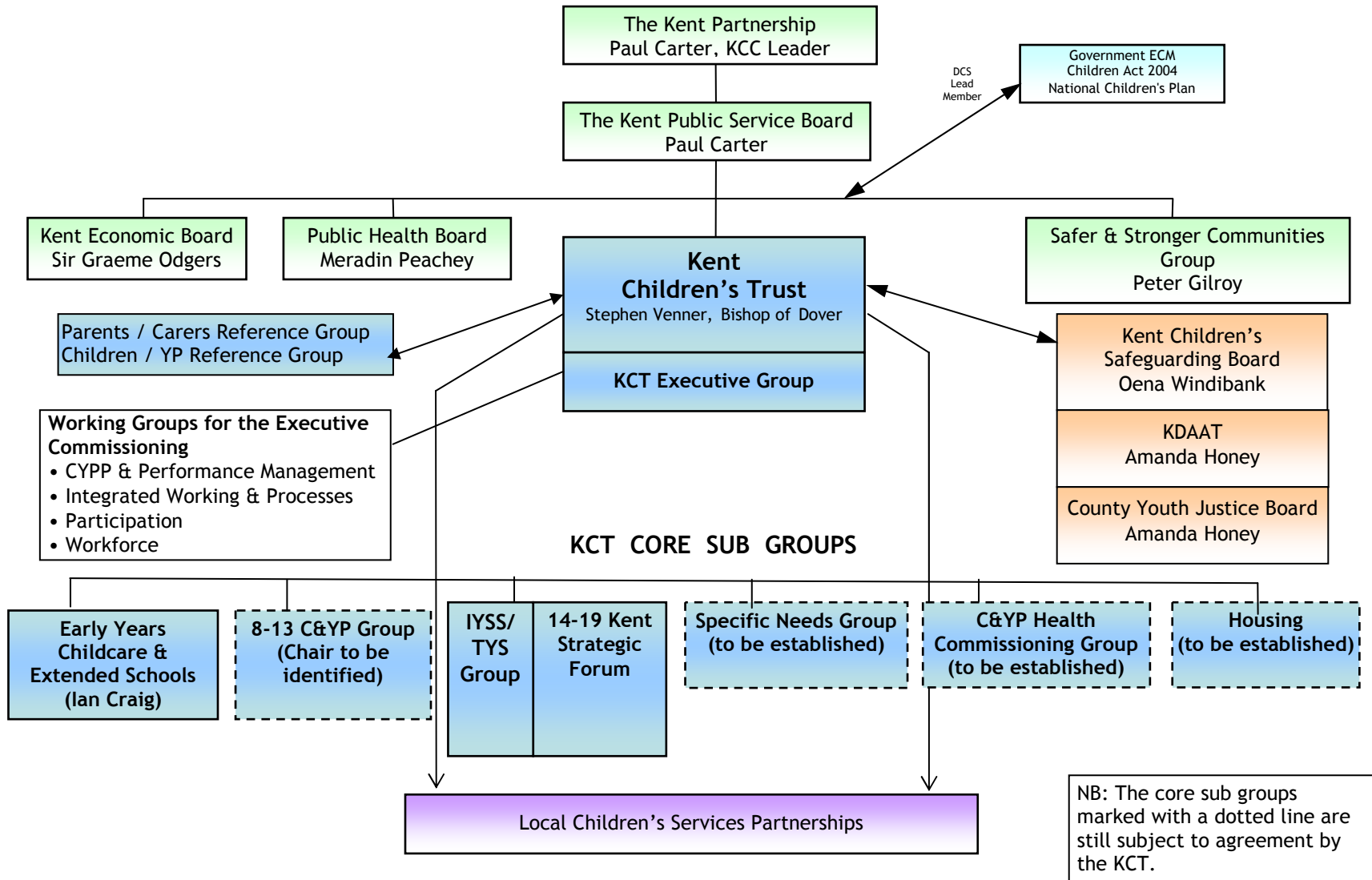
7. Action Plan

Action	Lead	Time scale
1.Establishing the KCT sub-group		
1.1 Obtain approval for the Board Terms of Reference and proposed membership at KCTB 1.2 Establish Board 1.3 Communicate Board Terms of Reference to LCSPs 1.4 Ensure that there is clarity for all partners about where the strategic leads for service elements of the IYSS are placed. 1.5 Agree process for involving young people at all stages 1.6 Agree process for merger with 14-19 strategic board	Angela Slaven	March 2009
2. Agreeing the strategy		
2.1 Manage the consultation on the IYSS strategy in accordance with the Kent Partners Compact	Angela Slaven	June 2009
2.2 Ensure that young people’s views are sought and heard during the consultation period.	Service heads	June 2009
3. Assessing needs and gaps		
3.1 Work with LCSPs, district and boroughs and KCT data group on needs analysis model. 3.2 Develop a methodology for on-going gap analysis 3.3 Develop a deeper understanding of the	IYSS Board and KCT commissioning group	Work has commenced

barriers to access		
4. Service Standards		
<p>4.1 Implement quality standards for in-house youth provision (Aiming High for Young People)</p> <p>4.2 Include standards within the commissioning specification for youth provision</p> <p>4.3 Investigate models for volunteering standards for youth volunteering</p>	Nigel Baker	On-going
5. PAYP		
<p>5.1 Monitor the effectiveness of PAYP funded positive activities against service specification and outcomes</p> <p>5.2 Agree referral routes to PAYP for young people released from custody</p> <p>5.3 Implement approved actions from the Select Committee into positive activities</p>	Helen Jones	
6. Targeted Youth Support		
<p>6.1 Support the roll-out of TYS</p> <p>6.2 Develop processes for early identification of vulnerable young people</p> <p>6.3 Ensure young people are able to access early support in universal settings.</p> <p>6.4 Develop protocols for supporting young people across transitions</p>	With TYS operational group	
7. Making a Positive Contribution		
<p>7.1 Ensure opportunities for youth volunteering are available on Togogo and the Resource Directory</p> <p>7.2 Link young people’s contribution to work on community cohesion</p> <p>7.3 Develop a media communications strategy to highlight the achievements of young people</p>	IYSS Board	
8. Equality and access		
<p>8.1 Work with partners to ensure that integrated youth support services are developed in a way that excludes no young people. With particular reference to: Looked after young people; Young Carers; Young migrants Young people from BME groups Young people with disabilities Lesbian, gay and bisexual young people</p>	IYSS Board	
9 Advocacy for young people		
<p>9.1 Build relationships and networks with services and organisations so that members</p>	IYSS Board	

<p>of the board can act as advocates for young people and can respond to policy challenges and developments 9.2 Keep KCT informed of emerging policy areas</p>		
<p>10. Workforce development 10.1 Engage with the KCT Executive Workforce group to ensure that the needs of the young people’s workforce are met 10.2 Ensure that staff and volunteers in the young people’s workforce are able to access appropriate training and development opportunities</p>	<p>IYSS Board and KCT Workforce group</p>	
<p>11. Involvement and Participation of young people 11.1 Develop a model of involvement and participation of young people in all aspects of the Integrated Youth Support Strategy</p>	<p>IYSS Board, LCSPs and District and Borough Councils</p>	
<p>12. Monitoring Outcomes 12.1 Agree monitoring framework (see appendix 2) 12.2 Work with KCT performance monitoring group to agree data and metrics for measuring outcomes 12.3 Use feedback from young people as part of the monitoring framework 12.4 Work with 14-19 Strategic Board to agree joint monitoring framework</p>	<p>IYSS Board</p>	

Appendix 1



Appendix 2

IYSS Performance Framework

High level indicators PSA14	% 16-18 NEET	Participation in Positive Activities	% young people frequently using illicit drugs, alcohol or volatile substances	Under-18 conception rate	First time entrants YJS 10-17	Outcomes
National Indicators included in Kent LAA		NI 110 Young people's participation in positive activities			NI 111 First time entrants to the Youth Justice System	
CYPP priorities	7d 66 Provide impartial, up-to-date and personalised IAG for all young people and ensure their parents or carers have access to support their child's decision making: input	6a 48 Ensure that young people have safe places to meet and things to do that they want to do. input 6a 51 Support, encourage and promote opportunities for children and young people to engage in volunteering output	8b 71 Reduce alcohol and drug related anti-social behaviour involving young people outcome	2b 13 Ensure young people have access to high quality sex and relationships education and to confidential services delivered by trained professionals input	6b 53 Extend existing youth offending prevention and diversion schemes in targeted neighbourhoods to increase engagement with young people at risk of offending input	
CYPP Metrics	To be determined: Action plans to be agreed at KCTB December 2008					
Feedback from young people						
Quality and equality measures						

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To: Communities Policy Overview Committee – 25 March 2009

By: Mike Hill, Cabinet Member, Amanda Honey, Managing Director

Subject: National Year of Reading (NYR): a Legacy beyond 2008

Classification: Unrestricted

Summary

This report highlights achievements and activity in Kent during of the National Year of Reading (NYR) with a particular focus on the contribution made by services in Communities. It also confirms proposals to develop and implement a Reading and Literacy Strategy in order to maintain the momentum that has been developed.

Recommendations

Members are asked to

- (i) NOTE the activity that has taken place in Kent during the National Year of Reading and the continuing momentum of this work
- (ii) ADVISE on ways in which KCC elected Members might act as ambassadors for literacy and reading in their local communities

FOR INFORMATION AND CONSULTATION

Background

1. In April 2008 the National Year of Reading was launched, in Kent, under the banner *Kent: a Great Place to Read* and an evaluation of the national programme has been taking place in 30 local authorities, including Kent, as the year draws to a close. The local campaign has been led jointly by the Communities and Children, Families and Education (CFE) Directorates, with the lead in Communities being taken by Libraries and Archives, working closely with Kent Adult Education.
2. The campaign has centred around the four themes listed below and examples of the action that has been taking place under each is described in more detail in Appendix 1.
 - (i) Developing new and imaginative ways of encouraging reading;
 - (ii) Building partnerships (for example with the NHS, the BBC and Probation Service)
 - (iii) Developing new audiences (for example amongst adults with learning disabilities) and
 - (iv) Giving new momentum to existing well tested literacy programmes such “*Reach out and Read*”, “*6 Book Challenge*”, “*Time2Give*”.

3. There has already been national recognition of Kent's work and the final evaluation report will be brought to this Committee in due course. In the meantime, given the links between reading, literacy and the achievement of other goals, and the evidence in Kent of 'need' and of successful initiatives, there is a commitment within both Directorates and amongst partners, to continue the momentum that has been achieved. This rationale is outlined in the following sections.

A National Legacy

4. The DCSF has always expected that NYR would be the catalyst for a longer-term legacy and the on-going commitment and campaign will be called *Reading for Life*. It will be led by the Literacy Trust and The Reading Agency and some of the drivers highlighted in *Literacy Changes Lives* (www.literacytrust.org.uk/research/Literacy_changes_lives.pdf) include the facts that:

- 95% of jobs require literacy skills;
- 70% of pupils permanently excluded from school have difficulties in basic literacy skills;
- 25% of young offenders have reading skills below those of the average seven year old;
- 60% of the prison population has difficulties in basic literacy skills and one in six of adults cannot read at the level expected on an eleven year old.

Research into attitudes towards reading commissioned by DCSF has also highlighted that only 24% of C2DE parents see the link between reading and success in life. [www.yearofreading.org.uk/wikireadia/index.php?title=Attitudes to Reading in England](http://www.yearofreading.org.uk/wikireadia/index.php?title=Attitudes_to_Reading_in_England)

A Local Legacy – Reading for Success

5. There are a number of other drivers for continuing the momentum in Kent, not least the economic benefits of having a fully literate population. This is especially important in the current economic climate, and will complement the long-term need to up-skill the workforce of Kent. Improving literacy will also underpin *Kent Regeneration Framework, Unlocking Kent's Potential and Backing Kent's Business*. To exemplify this point, the Kent and Medway workforce has the lowest qualification level of any area within the South East Region. (source: LSC Kent and Medway Annual Plan 2007-08) and the overall percentage of adults in Kent and Medway who have skill levels below level 1 in literacy and numeracy across Kent is 47%, rising to over 50% in Gravesham, Swale and Thanet.

6. There is also evidence that literacy and reading contribute to individual confidence, effective parenting and child development as well as to wider aspirations such as community cohesion and integration. Elements of this include:

Bonding: sharing a book is one of the most intimate and rewarding activities for a parent and child. It contributes to good parenting and it fosters a love of books from the earliest age.

Social skills: attending a Baby Rhyme Time or any reading activity with other families encourages listening and communication skills.

Readiness for school: a child who loves books will have developed some key skills including manual dexterity, an understanding of story, and confidence to take part and share with others.

Skills for work: literacy builds confidence and enables people to apply for jobs and work effectively.

Involvement: a comprehensive reading strategy will enable more opportunities for people to get involved through volunteering to help us reach our target audiences.

Health and wellbeing: reading can provide an escape from loneliness, isolation and depression. It will make a vital contribution to an ageing population.

Giving reading and literacy continued priority will consequently contribute to the achievement of nine of the National Targets by which Kent will be assessed in future, as well as to the Children and Young People's Plan.

7.. The campaign in Kent has also been a powerful catalyst for new partnerships to develop and test new approaches and this is further good reason for continuing momentum. For example:

(i) Developing literacy skills to support people who are homeless or in danger of losing their homes due to the recession has been a partnership project with Ashford Borough Council, a national trailblazer in this field;

(ii) Supporting the Public Health-led *House* initiative which provides an access point for teenagers to activities, information and services that relate to their wellbeing;

(iii) Developing a Text Reading Group for teenagers through a partnership between Swale Borough Council

(iv) Supporting new reading groups and reading activities for people with mental health conditions and other special needs and continuing to grow the number and range of volunteering opportunities we offer through Libraries and Archives Time2Give.

Next steps

8. A recent conference, on 10 March 2009, jointly hosted by Communities and CFE, brought together 130 of Kent's leaders and partners from across all sectors to mark the end of the National Year of Reading and build on its momentum. Feedback about the conference has been very positive and there was enthusiasm amongst those attending for the development of a Reading and Literacy Strategy to drive continued action, with the long term aspiration of achieving 100% literacy in Kent.

9. Many Members have supported the National Year of Reading at local level by attending events and providing grants. Seven Local Boards have also considered it on their agendas where direct connection could be made between reading skills, crime and safety, active ageing and urban deprivation. Continued advocacy by members within their local communities to promote literacy and reading would be very much welcomed as will the involvement of this Committee in shaping the strategy, and in monitoring progress.

Resource implications

10. Momentum will be continued within existing resources. The Strategic Manager (Innovation) in Libraries and Archives has been nominated to take the lead on developing the Strategy working closely with other colleagues in the Authority.

Recommendations

11. Members are asked to

(i) NOTE the activity that has taken place in Kent during the National Year of Reading and the continuing momentum of this work

(ii) ADVISE on how KCC elected Members might act as ambassadors for literacy and reading in their local communities

Gill Bromley

Strategic Manager Libraries and Archives/ NYR Coordinator

01622 696480

Kent: a Great Place to Read

Examples of projects and action undertaken during the National Year of Reading, presented under the 4 priority themes, with a particular focus on activity led within Communities

1. New approaches

- **Outdoor venues to promote reading and literacy:** our Library in the Park in Dartford sought to attract more people to use a rather intimidating and seriously underused Victorian library. It attracted over 1000 visitors and ran regular activities to encourage families to take the first steps on the path to literacy.

'My children and I have found it a fantastic introduction to using the library' (a parent visiting Dartford Library in the Park).
- **A Doorstep Library in Sheerness** where volunteers from Seashells Children's Centre read stories to children in streets and in their homes. The project aims to reach families in our most deprived communities who do not use public services. There is growing interest in developing Doorstep Libraries beyond this pilot in Folkestone and Thanet.
- **The Kent Story:** 12 books with the opening paragraphs of a story, written by the leader of KCC, have circulated around schools enabling the children to continue the tale before passing it on to the next school
- Renowned children's writer Nigel Hinton wrote a new short story ***Beaver Towers Mission to Kent*** which was read simultaneously in our primary schools in October. Feedback has been positive including *'we asked the parents to take part, regardless of their ability to read/read aloud..... the whole session was a complete success, and the children were full of ideas and suggestions as to further adventures and possibilities for Flipip and Baby B!'*
- **Guys grab a Grown up** was a Family Learning Treasure Hunt in all four Playing for Success centres where children searched for sections of a story.

2. New partners

- **The NHS** has supported Read Yourself Well and Recovery through Reading, library-led projects with mental health patients at 2 Kent hospitals.
- **The British Dyslexia Association's** Best Practice Guide for Libraries will help us support adults and children with dyslexia, their carers and their families.
- **The BBC** worked with Adult Education and Libraries and Archives, developing a joint offer to support Kent's businesses to develop employee literacy skills. Our offer was distributed by the Kent and Medway Local Skills for Productivity Alliance. BBC Radio Kent ran a monthly Book Club supported by Libraries and Archives.

- **The Probation Service** is piloting a programme of visits to Gravesend and Sheerness Libraries with trained mentors to support and promote library use.

3. New audiences

- **Adults with learning disabilities:** Sevenoaks Library won an award for its work to support the District Partnership. Benefits include special Makaton signage in libraries, the use of libraries as meeting spaces, weekly Biblio Hour, and books specially selected by and for this audience. We are also using Bag Books, multi-sensory story-packs which offer accessible stories for adults and children with learning disabilities.
- **Reading Groups for people with special needs** include new groups for visually impaired people, a telephone reading group for Home Library Service users, and MIND Reading Groups for mental health patients in Maidstone, Gravesend and Tunbridge Wells.

'Wish you could be a fly on the wall at our group.when I asked them if they would like to carry on for another year, the positive impact of the group was overwhelming. The carers' responsibilities vary from one who looks after a severely autistic son in his 20's to our oldest....., now in his late 80's, who looks after his 50-something daughter with learning disabilities..... Several have husbands with dementiaunanimously; they said how much they value the group and the opportunity it provides to escape their caring responsibilities, just for an hour or two' (Maidstone Carers' Group).

4. A renewed focus for existing programmes

- Achievement of the **GO Award** (Get On in Local Government), a national initiative led by our Adult Education service, will lead by example by raising standards of literacy and numeracy of our workforce
- Adult Education is also leading on the national **Skills Pledge** initiative, which will support Kent's businesses by providing the opportunity for staff to work towards or obtain their first full Level 2 qualification
- **Family Language Literacy and Numeracy** programmes enable adults to achieve Skills for Life qualifications and support the achievement of their children
- **Reach out and Read:** a partnership between Looked After Children Advisers Team, the Fostering and Volunteering Team and Volunteer Reading Help used the ROAR scheme to monitor training for 48 carers and provided volunteers to work with 42 LACs outside school hours for one week.
- The **Teachers as Readers** national pilot encouraged teachers to act as role models for reading e.g. Games Teachers, Science teachers etc (not just the English Dept who are always seen reading). We are continuing to roll out the scheme.
- **Week 53** has provided a list of reading activities for participating schools who each received £250 to support their work

- Bookstart and other DCSF funded initiatives are achieving significant results in Kent by promoting literacy and library use to children from birth
- **Test the Organisation sessions:** Adult Education tutors have worked with employers to improve workforce literacy skills including Eurostar, B.T., Kent police, Boots Distribution Centre, school catering staff, P&O ferries, a paper mill and a Jobcentre.
- **6 Book Challenge** helped adults on Sheppey to build reading confidence in partnership with SkillsPlus, the Prison Service and Libraries and Archives.
- **Time2Give:** Libraries and Archives' award-winning volunteering programme managed by CSV has attracted new volunteers to support NYR activities.

'it's given me a real opportunity to use the skills that I developed during my degree in a real world context - writing a play from some source material with a specific audience in mind.the link with the adult literacy learners is also quite appropriate as I'm just about to start a PGCE in English' (a volunteer at the Canterbury Cathedral Archives).

- **Kent Sport, Leisure and Olympics** were the major partner for the Summer Reading Challenge *Team Read*. 7537 children completed the challenge to read 6 books during the school holiday; an increase of 6% over 2007-08.
- **Kent's prisons** have taken an active part in NYR. Activities have included Story Book Dads/ Mums which has enabled prisoners to develop their reading skills to enable them to record a story to be sent home to their child.

'It has encouraged me to read books again... I think I may be hooked!' (A prisoner at HMP Sutton Park).

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To: Communities Policy Overview Committee – 25 March 2009

By: Mike Hill, Cabinet Member, and Amanda Honey, Managing Director, Communities

Subject: Museum of Kent Life

Classification: Unrestricted

Summary: This report provides an update on the transfer of the Museum of Kent Life to a commercial operating company (Continuum).

Recommendation: Members are asked to note and comment on the information included in this paper

FOR INFORMATION & COMMENT

1. Introduction and context

1.1 Kent County Council (KCC) founded the Museum of Kent Life with Maidstone Borough Council (MBC) in 1983. In 1992 MBC withdrew support leaving KCC as sole operator of the museum. In 1993 KCC transferred the collection to the Museum of Kent Life Trust which was established to run the museum. KCC has provided an annual revenue grant to the Trust since its launch which currently stands at £61,500. The grant is governed by a three year Service Level Agreement which ends in March 2010.

1.2 The Museum of Kent Life Trust is an incorporated company limited by guarantee and is a registered charity. It is managed by a Board which fluctuates between 11 and 16 members. It is a requirement of the constitution that the Board must always include one Elected Member of KCC and a nominee of the Cobtree Charitable Trust.

1.3 The Accreditation of the Museum under the national Museums, Libraries and Archives Council (MLA) Scheme has been put on hold until April 2009 whilst changes in governance resulting from the partnership with Continuum are implemented.

1.4 The museum is set on a 461 acre estate along with a country park and a golf course. The museum tells the story of the people who lived and worked in the Garden of England over the past 150 years. The museum is also the setting for a number of buildings from around the county, which have been saved from destruction, rebuilt and restored as part of the museum display. (See Appendix 1 for details of the 2009 programme of events and admission charges.)

1.5 In financial year 2006/7 the museum entered a period of financial instability. KCC agreed to contribute a total revenue grant sum amounting to £151,500 and £111,500 in 2007/8. This was to enable the museum to remain solvent while it sought a long term solution to its problems. KCC also

provided financial advice, and a report on the museum was commissioned from a leading expert in museum governance, Adrian Babbidge, in January 2007. The report, 'Governance Review of the Museum of Kent Life' advised that the Trust should review its list of trustees and they subsequently invited new people to fill strategic posts and took further advice from Mr. Babbidge.

2. Transfer to Continuum and current position

2.1 KCC Cabinet Member for Communities Mike Hill commissioned a report to look at the running and marketing of the museum and this report recommended the possible transfer of the management and staff of the Museum to a commercial operating company. Subsequently, a stakeholders' meeting was organised at the museum in April 2007 to consider the funding needs of the museum and to seek input from agencies and organisations such as SEEDA. It was decided that the best option would be to explore the possibility of commercial involvement. This option was further developed by the Director of Community Cultural Services and contact made with Continuum Group Ltd., a private company.

2.2 Continuum Group Ltd manages 5 visitor attractions in the UK, including the Canterbury Tales, and also provide various services to the cultural sector including design and delivery of services to visitor attractions. They were invited to visit the Museum of Kent Life and subsequently entered into discussions with the museum throughout 2007/8 exploring options for a possible future working relationship. A new company called Continuum (Kent Life) Ltd was formed in 2008 to assume the management of the museum. Work to put in place new leases, which remove the restrictions on the land use of the site, has now been completed, and the transfer of management and staff to the new company was formerly announced at an official launch on the 13th November 2008.

2.3 The museum is currently being advised by KCC's Museum Development Manager and MLA's Museum Development Manager about the appointment of a Curatorial Advisor, better display of the collection and training for volunteers. The museum may seek additional advice in the future from KCC's Museum Development Manager, in keeping with the advisory role this post provides to independent museums in Kent.

2.4 The shared aim is to establish a secure financial bedrock both for survival and to allow the museum to develop its cultural aspirations. Continuum have a target to increase visitor figures by between 30 and 60%, particularly aiming to increase family visits and thus increase revenue. KCC revenue support will cease after 2009/2010. (See Appendix 1 for visitor figures.)

2.5 It has been necessary to revisit the leases for the Museum as part of the process for enabling the shift to Continuum management. The interlocking leases are complex and the position is set out below.

2.6 The Museum of Kent Life (MOKL) was granted a sub-lease by KCC in 1994. This sub-lease was created out of a lease granted by Maidstone

Borough Council with Cobtree Charity Trust Limited being a party to that lease. This lease to KCC was created out of a lease by the Cobtree Charity Trust Limited to Maidstone Borough Council dated 1971 and contained various covenants concerning use of the land subject to the Edna Mary Tyrwhitt-Drake's interest. In order to underlet the lease to the new trading company, Continuum (Kent) Limited, all three head leases were reviewed and the three organisations agreed to the change. Five sets of solicitors were involved in interpreting the wording of the existing leases and all issues were satisfactorily resolved with new agreements now in place with the trading element of MOKL passing to Continuum (Kent) Ltd.

3 Risk implications of the Continuum Partnership

3.1 The Continuum Partnership will run for 2 years with the parent Continuum Company agreeing to cover any additional financial revenue costs during this two year period. As indicated earlier in this report, Continuum has a sound track record in leisure services and management. Early discussions did take place around what would happen if financial circumstances external to the museum affected the running cost of MOKL and Continuum confirmed that the company would transfer additional funds to cover the cost by transferring funds from their more profitable venues. KCC will therefore have no further revenue obligations when the annual grant ends.

3.2 The partnership will be reviewed after 2 years. At this stage it is impossible to assess the likelihood of Continuum wishing to continue the partnership at the end of this initial period, this will depend on the commercial success of the operation during the 2 years and the market conditions applying at the time. If Continuum decides not to enter into a longer term arrangement at that time, the future of the museum would be uncertain. If this were to happen then the Trust would have to review its options and consider whether the museum was financially viable and could continue to operate. If the Trust decided to cease museum operation:

- Objects which were transferred to the museum when the Trust was established would be automatically offered back to KCC and MBC by the Trust as required by their Acquisition & Disposal Policy.
- KCC could offer to provide advice and guidance to the museum regarding dispersal of the remaining collections. Collections include both movable and static artefacts (e.g. buildings)
- KCC could offer to provide legal advice regarding winding down the Trust.

3.3 In the recent period with support from Continuum, the museum has improved the numbers of visitors and its financial bottom line. We are optimistic that this provides a good platform for the future success of the partnership.

4. Resource Implications

4.1 There are no revenue resource implications of the transfer for 2009/10 and we will continue to provide the annual grant of £61,500 to the Museum of Kent Life Trust. Thereafter we are envisaging that KCC revenue support would cease and the annual grant would be available as a saving in 2010/11 budget. As part of the agreement we are intending to give a grant of £100,000 towards essential capital improvements.

5. Recommendation

i) Members are asked to note and comment on the information included in this paper.

*Contact Officer:
Sue Sparks, Libraries and Archives
01622 696446*

To: Communities Policy Overview Committee – 25 March 2009

From: Mike Hill, Cabinet Member and Amanda Honey, Managing Director, Communities

Subject: Equalities and Diversity

Classification: Unrestricted

Summary

The Directorate's priorities for action relating to Equality and Diversity in 2009/11 are presented in the context of national and corporate changes.

Recommendation

Members are asked to NOTE this report.

FOR INFORMATION

Introduction

1. A corporate report arising from the external assessment against the Equality Standard for Local Government was received at the January meeting of this Committee and Members sought clarity on the impact of the proposed actions on the Communities Directorate. In answering this point, the opportunity has been taken to confirm the new national assessment framework; to advise members on the Member and officer management arrangements for equalities and diversity; and to note CMY priorities for action in 2009/11.

New National Assessment Framework

2. In 2008 KCC was assessed against the Equality Standard for Local Government and achieved level 3 out of a possible 5. Of the 388 authorities assessed, 25% achieved level 3, whilst the majority (54%) achieved level 2. 6% of the authorities assessed were rated above a level 3. .

3. The Equality Standard for Local Government will be replaced from April 2009 by the Equalities Framework for Local Government. It will be welcomed as a simpler, less process orientated judgement and will also broaden the definition of equality to cover not just those areas where there is legal protection against discrimination – race, gender, disability, religion or belief, sexual orientation and age – but also other groups who may face disadvantage and discrimination, such as white working class boys, looked after children and Gypsies and Travellers.

4. The new Framework is constructed around five areas of change management, namely:

- (i) Knowing your community
- (ii) Place shaping, leadership, partnership and organisational commitment
- (iii) Community engagement and satisfaction
- (iv) Responsive services and customer care
- (v) A modern and diverse workforce

5. The corporate report, received at the 13 January 2009 meeting of this Committee, identified the work which is required under each of these headings and Appendix A outlines this Directorate's priorities in each of these areas. Given the outward facing nature of services in Communities, and the large number of staff employed, particular attention will be given to points (iv) and (v) and an additional heading has been introduced relating to capacity building.

Management arrangements

6. There are two dimensions to ensuring that equality and diversity legislation and aspirations are integrated into service planning and delivery. These relate, with equal importance, to KCC's own workforce and to users of services,.

7. New corporate management arrangements are now in place to ensure that both elements have strong leadership. The recently appointed Improvement and Engagement Manager, based in the Corporate Policy Unit, leads on the service delivery aspects of Equality and Diversity (E&D) whilst the Personnel and Development function leads on E&D issues relating to employment. These strands come together at the Strategic Equalities Group, chaired by the Managing Director of Adult Social Services, at which all parties are also represented at Member level.

7. Within Communities, oversight is maintained by the Directorate Equality Group (DEG), chaired by a member of the senior management team and including a representative from each service unit. The DEG has a particular responsibility to build capacity in expertise across the Directorate, champion issues at Unit level, promote the take-up of training, and work with Service Unit managers to ensure Corporate and Directorate priorities are implemented at the front line.

Priorities for 2009/10

8. A significant recommendation in the inspection report was that the Equalities Impact Assessment process needed to be strengthened. In response to this, the Corporate Diversity Team has developed a new tool and set of procedures which are currently being piloted. The new process will be described as 'Customer Impact Assessment' to reflect the mainstreaming of equalities and diversity into everyday thinking about service users and how their needs can best be met. Communities Directorate staff will be participating in the first training session in this new approach and the Cultural Strategy, which is currently under development, will be the first piece of work within the Directorate to go through the new process. This recommendation is explicit within the Directorate priorities for 2009/10 which are attached at Appendix A.

9. A number of the rest of the actions arising from the inspection, as listed in the report to this Committee in January (paras 3.1-3.5), do not require separate action from Service Directorates. Those that do have been reflected in Appendix A or will be incorporated directly into mainstream business. .

Resource implications

10. Action to deliver the priorities for 2009/11 can be delivered within existing resources.

Recommendations

11. Members are asked to NOTE this report

Contact officer:

*Ruth Armstrong-Thompson
Senior Policy Officer*

ruth.armstrong-thompson@kent.gov.uk

01622 694079

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Appendix A

EQUALITIES AND DIVERSITY . PRIORITIES IN 2009-11

Based on a review of the priorities and experience within CMY during 2008/09, the recommendations of the independent inspection of KCC in 2008 against the former Equalities Standard for Local Government (ESLG), and the expectations of the new Equalities Framework in Local Government (EFLG) the following priorities for action have been identified.

EFLG THEME	PRIORITY	ACC
<i>Knowing your Community</i>	Complete the picture of current service users and non-users of Communities Services in terms of all equalities strands	Service managers
<i>Community Engagement</i>	Contribute to corporate developments in community engagement	Director P&R
<i>Responsive Services and Customer Care</i>	Ensure that consultation for planning and decision making involves all sections of the community	Service managers
“”	Develop a better understanding of the groups of people whose views are seldom heard and find ways of engaging with them	Service managers
“”	Embed the Directorate system for equalities monitoring relating to complaints	Service managers
“”	Lead on 5 Customer Impact Assessments (CIAs) using the new corporate methodology and then mainstream	Senior Policy Officer Service managers
“”	Review contracts and SLAs with external providers and vol. orgs to ensure E&D requirements are embedded and a monitoring system in place	P&R division
<i>Modern and Diverse workforce</i>	Promote better understanding of the diversity profile of the community of Kent in order to contribute to corporate targets on employment	P&R division
“”	Fully implement standards relating to equalities recruitment training	Service managers
<i>Capacity Building in CMY</i>	Develop and consolidate the role of DEG and Champions	DEG
“”	Induction; and general awareness raising	DEG
“”	Promote Specialist training in CIAs	DEG

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By: Overview, Scrutiny and Localism Manager
To: Communities Policy Overview Committee –25 March 2009
Subject: **SELECT COMMITTEE - UPDATE**
Classification: Unrestricted

Summary: This report updates Members on the work of the Select Committee on Provision of Activities for Young People and invites suggestions for future topic reviews .

Provision of Activities for Young People

1. (1) This Select Committee, under the chairmanship of Mr A Chell, have produced their final report which has been shared with Mr Hill, as Cabinet Member, Directorate representatives and other stakeholders. This report will be considered at the meeting of the Cabinet 30 March prior to it being received at County Council on 30 April. A copy of the executive summary of the report will be sent to Members by 20 March and the full version will be available on Kent.gov (<http://www.kent.gov.uk/council-and-democracy/democracy-and-elections/overview-and-scrutiny/select-committee-reports.htm>) from 20 March 2009 or by contacting Sue Frampton (sue.frampton@kent.gov.uk or 01622 694993).

(2) In accordance with the monitoring process for Select Committee reports, as set out in the Constitution, once this report has been considered at Cabinet an action plan should be submitted to the POC in July 2009 setting out how the recommendations are going to be taken forward, The Select Committee will be reconvened in March 2010 to receive a report on progress made with the recommendations which will be reported to the POC.

Suggestions for future Select Committee topic reviews

2. (1) The current Select Committee topic review programme is coming to an end and there is not sufficient time to commence any more reviews prior to the Elections in June 2009. However, it is important that topics are available to be considered early in the new Council so that a work programme can be approved and reviews started as soon as possible. No topics have so far been put forward from within this Committee's subject area, and any that Members may wish to suggest will need to be submitted very soon.

(2) Members are therefore requested to consider whether there are any potential topics that fall within the remit of this Policy Overview Committee, which they would like to put forward for consideration by the Policy Overview Co-ordinating Committee (POCC).

(3) The Committee are reminded of the recent decision of the County Council that once a Topic Review has been included in the Work Programme as agreed by the POCC the detailed terms of reference each review will be developed by a cross party Member Group (one from each Group) for approval by the Select Committee.

(4) The POC will be kept informed of potential topics which are within its remit.

Recommendation

3. The Committee are asked to :-

- (a) Note the update on the Select Committee on Provision of Activities for Young People and endorse the recommendations as set out in the executive summary; and
- (b) suggest subjects for potential Select Committee Topic reviews for consideration by the Policy Overview Co-ordinating Committee.

Denise Fitch

Assistant Democratic Services Manager (Policy Overview)

01622 694269

Denise.fitch@kent.gov.uk

Background Information: *Nil*