

To Cabinet – 12 July 2010

By: Mr Hill, Cabinet Member for Community Services  
Amanda Honey, Managing Director Communities

Subject: A Hidden Harm Strategy for Kent

Classification: Unrestricted

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**Summary:** This paper presents a Hidden Harm Strategy with a focus on delivering improvements in outcomes for children and young people who are affected by their parent or carers drug and alcohol misuse. The Strategy has been developed by the multi agency Hidden Harm Working Group and has been subject to extensive consultation. The Hidden Harm Strategy will impact positively on outcomes for children and families through coordinated interagency partnerships and joined up front line delivery as required by the National Drugs Strategy and Think Family approach. The full Strategy is provided in Appendix 1 of this document.

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## **1.0 Introduction**

- 1.1 Improving the outcomes for children and young people affected by drug and alcohol use requires a strategic response that translates into coordinated interagency partnerships and effective, joined up frontline service delivery.
- 1.2 The Strategy has been developed and driven through a multi agency Hidden Harm Working Group which feeds into the Kent Safeguarding Board through its Chair Angela Slaven.
- 1.3 The draft strategy has been presented to CFE SMT (January 2009) Communities SMT (Jan 2009), Kent Safeguarding Children's Board (February 2009), has been noted by the Kent Children's Trust and has been out for consultation to a wide range of professionals in children/, young people and adult services as well as service users. The Final Strategy will be presented at Kent Children's Trust Board and Cabinet in July.

## **2.0 Implementation:**

### **2.1 Launch:**

Once agreement from Cabinet has been achieved, the Strategy will be launched. Three launches are planned which will mirror the structure of Local Safeguarding Boards in Kent and will bring together practitioners and managers from adult treatment services, children young people's and family

services , service users and academics to build their knowledge and identify how their practice can improved.

## **2.2 Action Plan:**

An action plan has been developed and progress has already been achieved through the Hidden Harm Working Group and the Family Services Development Officer in KDAAT.

## **2.3 Needs Assessment:**

A needs assessment has been undertaken and demonstrates the poor quality of recording around this issue. Improvements are being made. The needs assessment will be fed to Safeguarding Board and into the Children and Young People's Needs Assessment process.

## **2.4 Information Sharing Protocol:**

Information sharing agreements already exist between children and adult mental health services. We aim to build on this protocol to ensure a universal response to ensuring joined up services for children and young people's and adult services.

## **3.0 Resource Implications**

3.1 Services relating to Young People's Drug and Alcohol commissioning will be subject to review within the emerging financial frameworks and options are being considered with a planning process for implementation to manage and mitigate the impact on service delivery should there be a reduction in funding levels.

## **4.0 Recommendations**

4.1 Cabinet Members are asked to approve the attached Kent Hidden Harm Strategy

## **Background Documents:**

### **Hidden Harm Strategy**

*Name of Officer:* Jo Tonkin  
*Title of Officer:* KDAAT Young Persons Manager  
*Date of Report:* 04.06.10