# **HEADSTART KENT**

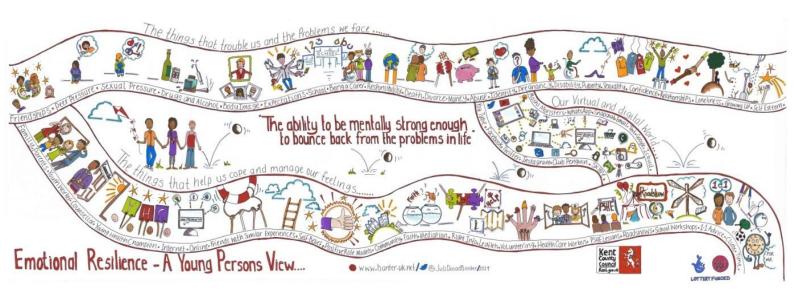
# **Phase 3: Case for Investment**

By 2020 Kent young people and their families will have improved resilience, by developing their knowledge and lifelong skills to maximise their own and their peers' emotional health and wellbeing; so to navigate their way to support when needed in ways which work for them.



There is always someone for me to talk to









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# **FOREWORD**

I am delighted to submit the HeadStart Kent Case for Investment. This sets out our proposals for the next five years, demonstrating how we and our partners in Kent will transform the emotional health and wellbeing of young people, specifically 10 to 16 year olds.

This is the result of work led by Kent County Council's HeadStart Kent Team which has involved Early Help and Preventative Services, Kent Public Health, Specialist Children's Services, Schools and Academies, District Councils, Police, Universities, the Voluntary Community Sector (VCS), Domestic Abuse Agencies and many others.

Above all, it has been developed through co-production with young people and their families. Young people in Kent have embraced HeadStart, making important contributions to the implementation, learning and success of the Phase 2 Programme; they have also been critical in shaping our ambitious proposals for Phase 3.

In addition to co-producing our Case for Investment, during the HeadStart Kent journey our young people have produced a number of films that they would like to share - the latest showing how they have summarised our Phase 3 proposals visually. This can be accessed directly through the following link: <a href="https://vimeo.com/156168943">https://vimeo.com/156168943</a>. The other young people's films are embedded in an interactive presentation that explores the HeadStart Kent co-production journey: <a href="https://sway.com/oOHvbVizlb1SPgiW">https://sway.com/oOHvbVizlb1SPgiW</a>.

The HeadStart Kent Mission is that in five years:

"Young people and their families will have improved resilience, by developing their knowledge and lifelong skills to maximise their own and their peers' emotional health and wellbeing; so to navigate their way to support when needed in ways which work for them."

To achieve this in an area as large, organisationally complex and diverse as Kent is a massive challenge. It can only be delivered through a permanent system-wide transformation of services, and our Case for Investment sets out how this will be achieved. The Big Lottery Fund has presented us with a unique and exciting opportunity to improve the lives of many vulnerable young people in Kent. We ask that our proposals are considered so we can generate the best possible outcomes for young people, their families and communities.

Florence Kroll

**Director of Early Help and Preventative Services** 

J. KAN.

# **EXECUTIVE SUMMARY**

The Joint Strategic Needs Assessment for Kent sets out a compelling case for HeadStart Kent, specifically recognising that everyone who works with children and young people has a role to play in early intervention, mental health prevention and promotion.<sup>1</sup>

In Kent, there are 125,300 young people aged 10 to 16. Of those, 18,795 will have mild to moderate emotional wellbeing and mental illness that would benefit from additional interventions alongside their parents and carers. The exciting opportunity to be part of HeadStart Kent Phase 3 will ensure these young people are well supported in their journey and helped to prevent the onset of mental illness.

Working with the Big Lottery Fund for the last two years and learning from the other eleven HeadStart programmes, Kent has focused on developing practical approaches to help young people build their resilience. These have enabled young people to better respond to the adversity they face, minimising any negative impact on their emotional and mental health.

Co-production and listening to young people has been inspirational, innovative and highly informative. A HeadStart Kent Shadow Board of young people meets regularly to develop and advise on the model; this has been an essential element of the Programme. Through this work and wider engagement, children and young people living in Kent, together with their parents, have told us what support they need to build their resilience:



By developing our HeadStart Kent Programme around these central core themes, evidence based practice and the learning through Phases 1 and 2, we are determined to achieve a demonstrable and sustainable improvement in the emotional health and wellbeing of young people at risk of mental illness. This Case for Investment focuses on:

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<sup>&</sup>lt;sup>1</sup> Kent Public Health Observatory "*Kent 'Children's Mental and Emotional Health' JSNA Chapter Summary Update '2014-15"*, <a href="http://www.kpho.org.uk/\_\_data/assets/pdf\_file/0005/45194/CAMHS-July-2015.pdf">http://www.kpho.org.uk/\_\_data/assets/pdf\_file/0005/45194/CAMHS-July-2015.pdf</a>, (Kent County Council, July 2015).

- \* Promoting the importance of resilience in young people, and providing early support to prevent problems getting worse;
- ★ Developing approaches that ensure timely and accessible support, including direct access in appropriate settings;
- Transforming the skills and understanding of the wider workforce so they better engage and respond to young people's emotional and health needs;
- \* Championing approaches that recognise and strengthen wider family relationships;
- \* Preparing children and young people so they have a positive transition between services including should they need them, adult services;
- \* Enabling young people to have the skills and confidence to better manage adversity and be able to access and negotiate support should they need it.

HeadStart Kent will work with young people, schools and the wider community to raise understanding and build awareness of how to recognise when a young person might have, or be at risk of, a mental health problem. We will specifically ensure that young people will:

- \* Know where and how to get help and how to help themselves;
- \* Have clarity about what help is available;
- \* Understand what might happen when they access support and know what to do while they are waiting.

We have developed a Programme which will require £10 million of investment from the Big Lottery Fund to fully deliver. This is a substantial investment and we recognise the need to ensure confidence in our Programme through:

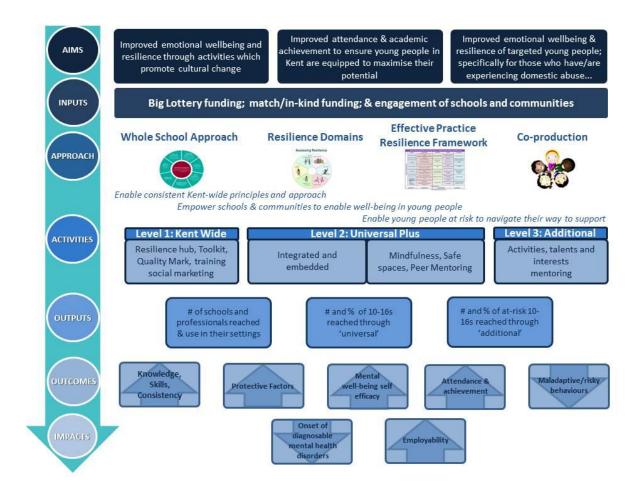
- \* A clear **Programme Strategy**, that provides clarity of our short, medium and longer term outcomes;
- \* Strong and accountable **leadership**, with clearly defined governance arrangements and strong day to day management;
- \* Strong proposals to ensure **sustainability** beyond the five years and demonstrating how this has been reflected in Programme design;
- \* Robust **implementation**, providing assurance and detail alongside the flexibility associated with a test and learn approach;
- Developing our mission, goals and approaches using a process of engagement and co-production with young people, and in partnership with key stakeholders.

# **Programme Strategy**

The HeadStart Kent Programme Board, through engagement with the Young People's Shadow Board and a wide range of partners, has agreed our local Mission as follows:

"By 2020 Kent young people and their families will have improved resilience, by developing their knowledge and lifelong skills to maximise their own and their peers' emotional health and wellbeing; so to navigate their way to support when needed in ways which work for them."

Using a Theory of Change methodology, our Programme Strategy is summarised below and sets the aims, inputs, approaches, activities and outputs which will achieve our short and longer term outcomes.



The HeadStart Kent Programme will operate at three distinct Levels. Each Level comprises specific activities, and interacts with the other Levels to create a whole system approach and longer term sustainability to improve the emotional wellbeing and resilience of children and young people in Kent.

### Level 1, Kent-wide activities

For the Kent-wide Universal Level accessible to all 584 schools and our communities, a "Resilience Hub" will be commissioned to lead a programme of work to increase knowledge and skills, promote evidence based best practice and provide a range of tools and training resources. It will manage a new Resilience Quality Mark for schools and communities.

The Resilience Hub is the collective name for combining resources, expertise, and learning in one shared universal platform. In addition, the Kent-wide activity through the Resilience Hub will also lay the foundations to roll out to priority Groupings of schools during and beyond the five year Programme.

## Level 2, Universal Plus

Working with priority Groupings of schools and their local communities, this Level will provide a number of developmental and training programmes for staff, activities for young people and their families, and community services.

The programmes will ensure that young people, the wider workforce, community and the voluntary community sector (VCS) understand the importance of developing resilience and engaging with and improving young people's emotional and mental wellbeing. The training will include Youth Mental Health First Aid, Mindfulness, coproduction methods, the Resilience Domains Model, trauma and domestic abuse.

The Universal Plus Level will bring together all agencies in a geographical grouping to collectively focus on transforming and improving all services that work with young people's emotional health and wellbeing. Where there are gaps, new services will be developed, embedded and made sustainable in the long term. Therefore the groups as they are rolled out will become the building blocks to achieve the systemic change across Kent.

# Level 3, Additional

Within the geographic areas covered by the Groupings of schools, this Level will systematically identify young people who are impacted by family domestic abuse, have experienced trauma or adversity and whose emotional wellbeing may be at risk. This Level will provide additional bespoke support to young people to build their resilience, recover from trauma or adversity and improve their emotional health and wellbeing.

The young people supported at this Level will be predominantly identified via those working with adults affected by domestic abuse. In additional they may also have experienced substance misuse or mental health services in their families. This Level will also include young people whose behaviour or emotional wellbeing may not yet appear problematic but issues in the family may impact on their wellbeing in the future.

Young people will receive one to one support from a professional, trained to help develop their resilience and support their recovery from trauma or adversity. The young person will benefit from systemic work with their family and may also benefit from a Mentor to help them develop their Resilience Domains including talents and interests.

All the interventions at the Additional Level are designed so that the young person increases their resilience and is helped to recover from trauma. Therefore additional support will be no longer needed, and support at the Kent-wide Universal Level will be effective in meeting their needs.

When a young person is identified, HeadStart Kent will work with the young person, their family and partner agencies, to agree on services to be provided. If a HeadStart Kent service is at full capacity, support will still be provided by the partner agency using its own staff trained by HeadStart Kent.

Partner agencies will also support those young people outside the priority Groupings of schools or those who are not suffering or at risk of trauma. Therefore no young person will be excluded from the support they need.

Level 3: Additional A targeted approach support focusing on the early identification of young people who, as a result of domestic abuse and trauma may benefit from additional early support to help retain and/or build their resilience and emotional wellbeing to prevent adverse outcomes.

Level 2: Universal Plus to support system change within discreet geographies based on Groupings of schools identified on the basis of need across Kent, providing a range of opportunities to achieve the threeyoung people's Goals to be resilient.

**Level 1: Kent-wide** activity to promote an understanding of the factors impacting on a young persons emotional and mental health wellbeing and the actions that can be taken to support them in building their resilience.

It is our view that this three Level approach with the emphasis on early preventative support will have a longer term impact on reducing the numbers of young people who may otherwise go on to develop mental illness.

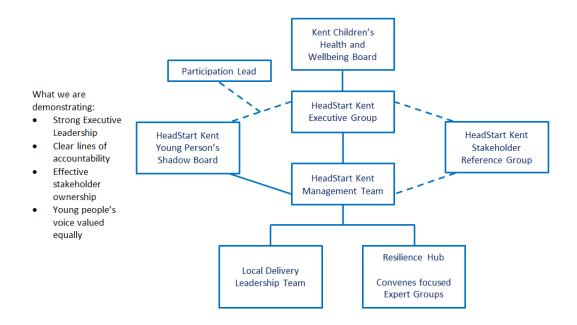
Young people in Kent have asked that we do not use the term "target population". Young people feel that to be singled out as a target when "you're feeling vulnerable" makes "you feel there is something wrong with you". Therefore the name Additional has been used to describe the Level as it captures both the additional needs and services that will be delivered.

The decision to provide additional support for young people who are or who may experience trauma or distress from domestic abuse has been informed by Kent's data evidence, local discussions with young people and professionals working with them, as well as advice from the Big Lottery Fund to identify a specific population with specific unmet needs.

The opportunity to focus on this cohort is embraced by all local stakeholders. We are committed to ensuring that we make a positive contribution to improving young people's life chances but that the approach leads to important learning at a national level in how services are best organised and delivered.

# **Local leadership**

The HeadStart Kent Programme is a key priority of Kent County Council and our stakeholders. This is demonstrated by robust governance and leadership arrangements. Kent County Council will be the lead organisation, with Florence Kroll, Director of Early Help and Preventative Services taking overall responsibility, reporting directly to the Kent Children's Health and Wellbeing Board.



The Terms of Reference and Membership have been developed for the core Programme groups and these are:

- \* Executive Group;
- Young People's Shadow Board;
- \* Kent Local Leadership Team;
- \* Stakeholder Reference Group.

# **Sustainability**

HeadStart Kent Phase 3 is dependent upon securing significant resources over five years, and using this as an investment fund to achieve systemic and lasting change for young people and communities in Kent. Given the scale and complexity of Kent we have designed a rolling programme of investment. This will enable testing and learning over the five years, building our understanding of the conditions for sustainable change and reflecting this in our approach.

The ambition of HeadStart Kent is that within families, schools and communities, resilience and improving young people's emotional health and wellbeing is "everybody's business".

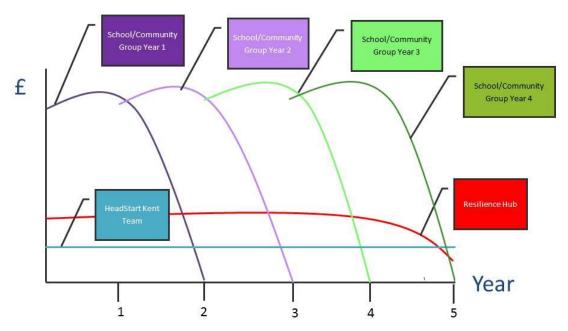
We are aware of the changing context of mental health and emotional wellbeing services, both within Kent and nationally. Until we have effective support embedded

at an early stage, we will continue to see specialist mental health services across the country overwhelmed by demand and children exposed to these poor outcomes.<sup>2</sup>

For Levels 2 and 3, HeadStart Kent will work intensively with Groupings of schools for an 18 month period. Across the five year Programme, nine priority Groupings of schools will be engaged. Part of this work will involve schools and communities identifying, negotiating and securing commitment from partners and funding from a range of sources to generate long term benefits. This will be informed by strong local evaluation aligned to the Big Lottery Fund Common Assessment Framework.

Following discussions with partners, including NHS commissioners, we are confident that the investment from the Big Lottery Fund will be sustained in the Kent-wide, Universal Plus and Additional Levels during and following the closure of the Programme.





# **Implementation**

The HeadStart Kent team has worked with partners such as Schools, Public Health, Early Help and Preventative Services, Specialist Children's Services, Clinical Commissioning Groups, Commissioners and young people to ensure that the systems and processes are in place for early mobilisation, ensuring investment can

<sup>&</sup>lt;sup>2</sup> Kent County Council "The Way Ahead Part 2 Delivery Plan; Kent's Emotional Wellbeing Strategy for Children, Young People and Young Adults", <a href="http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0004/46822/Emotional-Wellbeing-Strategy-part-2-delivery-plan.pdf">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0004/46822/Emotional-Wellbeing-Strategy-part-2-delivery-plan.pdf</a>, (Kent County Council on behalf of the Kent Health and Wellbeing Board, May 2015).

make a quick impact. The Kent-wide governance structures are already operating and the key managers and staff already in place.

A draft Service Specification has been developed for the commissioning of the Resilience Hub.<sup>3</sup> This will benefit the whole of Kent and will ensure a consistent approach to supporting young people's emotional health.

The proposed cohorts of school Groupings spanning the five years have been agreed in principle and embraced by school leaders in the first grouping. The Local Leadership Teams can be mobilised and the arrangements for the local implementation will be put in place in the shortest possible timeframe. This is set out in our Implementation Plan.<sup>4</sup>

# Engagement and co-production with young people, families and communities

A fundamental part of the HeadStart Kent journey has been effectively engaging young people to shape the design and delivery of the Programme. This will be continued into Phase 3, alongside ensuring families and communities are fully involved and can contribute effectively. The diagram below is an example of coproduction work:



proposals for Phase 3 have been developed in partnership with young people, including creative insight work with young people and families impacted by trauma, those living in refuges, those affected by domestic abuse and those whose parents are accessing mental health services.<sup>5</sup> Young people and families from these groups

<sup>&</sup>lt;sup>3</sup> Appendix 1 Service Specification for the purchase of HeadStart Kent Resilience Hub

<sup>&</sup>lt;sup>4</sup> Appendix 2 HeadStart Kent Detailed Implementation Plan for 18 Months Phase 3

<sup>&</sup>lt;sup>5</sup> Light Vessel 21, Spaghetti Weston and Kent County Council. "pARTicipate; Creative Insight for HeadStart Kent", <a href="https://vimeo.com/152922104">https://vimeo.com/152922104</a>, (2016).

have helped to design the Programme and support the three Levels, specifically around seamless and unseen support.

Central to our proposals has been the Young People's Shadow Board, who began the Phase 3 proposal by drafting the Mission, setting the Goals and identifying the activities. As we move to work with young people in new Groupings of schools, it is essential that the Programme continues to be open to new ideas and opportunities generated by them. Therefore our Participation Workers will work within the Groupings to identify and support those young people who have suffered from domestic abuse to be part of the local co-production groups. This will help ascertain whether our approaches are meeting their needs.

We will work to involve families and the community through schools, community events and the creative arts, and are committed to three key priorities:

- \* We will continually review our processes to ensure that co-production is an integral part of governance and decision making processes;
- ★ We will continually develop young people as leaders;
- \* We will have a trained wider workforce that is confident in how to coproduce with children, young people and their families.

This Case for Investment has also been shaped by a wide range of stakeholders across Kent and nationally. These stakeholders include representatives from emotional wellbeing and mental health services, Early Help and Preventative Services, Children's and Adult's Social Care Services, VCS providers, arts and culture organisations, universities, District Councils, Police and youth groups. These are reflected in the Programme governance arrangements.

## Our call to action

In Kent, we are currently responding to a real call to action from children, young people, families, professionals and politicians to focus our attention on securing a comprehensive emotional wellbeing offer for children, young people and their families. We have made significant progress in recent years, but we know that more is needed if we are to fully respond to the needs of families in Kent.

At Level 1, this Case for Investment will enable all Kent schools and communities to offer better support in emotional health and wellbeing. This will benefit 125,300 10 to 16 year olds and particularly those 18,795 young people with mild to moderate emotional wellbeing and mental illness.

By engaging the specific Groupings of schools in Level 2, we will provide enhanced support to 134 schools comprising a HeadStart Kent population of 76,938. A further 8,744 young people at HeadStart Level 3 will receive additional support. We expect the benefits to extend beyond this population as the learning and expertise developed will be shared widely across the county and beyond.

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<sup>&</sup>lt;sup>6</sup> Kent County Council, "The Way Ahead..." Ibid.

HeadStart Kent is therefore a crucial part of Kent's emotional health and wellbeing offer to children, young people and their families. We will strive to achieve a shift in culture, from grass-roots level upwards, ensuring resilience, emotional health and wellbeing, and mental health are prioritised and transformed for young people today and for future generations.

# **SECTION ONE**

# **HeadStart in Kent - a short history**

Partners in Kent have valued the opportunity to be part of the Big Lottery Fund HeadStart Programme since its launch in December 2013.

Our approach has been based on a principle of co-production, working together to explore and understand what young people, their families and communities need to help build and maintain their resilience, be mentally strong and how they can support each other to "bounce back".



Since the beginning of the Programme, HeadStart Kent has maintained an awareness of the wider context of emotional wellbeing and mental health services for children and young people. The recent release of a number of reports highlights the change in priority of young people's mental health and emotional wellbeing.

An example of this is the Emotional Wellbeing Strategy for Kent, "The Way Ahead" -HeadStart Kent was the catalyst within this plan.<sup>8</sup> This was initiated during a summit in June 2014 where young people in Kent expressed their experiences of the county's mental health services through a first film they produced called "Let it out".9

Messages are clear from young people in the "Let it out" film - they want:

- \* To know who to go to when they need support, and have a safe space to talk when they are ready:
- \* To be involved in decisions about them;
- \* To be able to deal with the cause of the problems not just the symptoms;

Appendix 3 HeadStart Kent Emotional Wellbeing and Mental Health Reports Briefing

Kent County Council, "The Way Ahead..." Ibid.

Animate Arts Company and Kent County Council "Let It Out; our experiences of emotional and mental health told by young people in Kent", <a href="https://www.youtube.com/watch?v="wZj1la5lVQ">https://www.youtube.com/watch?v="wZj1la5lVQ">wZj1la5lVQ</a> (July 2014).

- \* To get support early as possible especially at school, and get support tailored to them:
- \* To learn new skills to cope for themselves.

Furthermore, young people said support needs to be normalised and services do help support them.

This call for commissioners and providers to reconsider the way they approach the emotional wellbeing of young people precipitated the creation of the Emotional Wellbeing Task and Finish Group - set up to respond and develop "The Way Ahead Strategy" and enable young people to help shape services.

Key to this was a second film "This is what I want, this is how I want it" produced by HeadStart Kent young people. 10 Presented by the young people to 300 leaders across Kent including Cabinet Members, Corporate Directors, Chief Executives of District Councils and other organisations, Police and GPs, the film was used to shape the specification and procurement of the Kent Children and Adolescent Mental Health Service (CAMHS). It also informed the drafting of the Department of Health and the NHS England publication "Future in Mind". 11

Throughout HeadStart Kent Phase 2, young people continually shaped the Programme's goals through weekly meetings, events and workshops; and most recently, a Phase 3 drafting residential. Through this constant engagement the following actions were agreed:

- \* To work in partnership with schools, the community and practitioners working with families and young people to test new approaches and evidence based programmes to build the resilience of young people and their families;
- \* Supporting vulnerable groups to better cope with life's challenges including young offenders, Gypsy Roma Traveller young people, disabled young people, young people in care and young carers;<sup>12</sup>
- \* To embed HeadStart Kent within the Kent's Children and Young People's **Emotional Wellbeing Strategy**;
- \* To involve young people in every aspect of developing and delivering HeadStart Kent:
- \* To identify the main problems young people and their peer group face day-today, and to work with services to find solutions;
- \* To test solutions across the three pilot projects in Kent (Canterbury, Thanet and North West Kent);
- \* To ensure learning informs the best ways to help 10 to 14 year olds be more resilient.

Phase 2 of HeadStart Kent was mobilised in August 2014, with three different operational models agreed comprising many different activities (developed as part of

<sup>&</sup>lt;sup>10</sup> Campaignfilms.co.uk and Kent County Council "This is what I want, This is how I want it",

<sup>&</sup>lt;a href="https://vimeo.com/115969468">https://vimeo.com/115969468</a>, (December 2014).

11 The Department of Health "Future in Mind; Promoting, protecting and improving our children and young people's mental health and wellbeing"

<sup>&</sup>lt;a href="https://www.gov.uk/government/uploads/system/uploads/attachment\_data/file/414024/Childrens\_Mental\_Health">https://www.gov.uk/government/uploads/system/uploads/attachment\_data/file/414024/Childrens\_Mental\_Health</a> .pdf>, (Crown Copyright NHS England Publication, March 2015).

Kent County Council Equality Analysis Impact Assessment (EqIA)

the test and learn approach). This included Restorative Approaches in Thanet, the Penn State Resilience Programme in Canterbury and a Family Focus and Safe Space approach in North West Kent. Resilience Mentors, the Knowledge Seminars, the Digital World and Social Marketing have underpinned HeadStart across Kent during Phase 2. These are summarised in Section Three.

HeadStart Kent has worked with 26 primary and secondary schools. This has enabled us to better understand the conditions for success in working with young people and local communities (see Section Three and the HeadStart Kent Evaluation Document). Research carried out by the Local Authority Business Intelligence, Research and Evaluation department has demonstrated that the highest level of need in areas such as special educational needs (SEN), poor school attendance, school exclusions and SCS referrals are within the following Mosaic groups: K - Modest Tradition, L - Transient Renters, M - Family Basics, N - Vintage Values, O - Municipal Challenge.

Schools with a higher proportion of pupils within these Mosaic groups are likely to have the greatest need for programmes to promote resilience. A total of 10,974 young people attend the 13 HeadStart secondary schools; 4,629 (42.2%) are classed as being from households with K-O profiles. A total of 5,475 young people attend the 15 HeadStart primary schools; 2,682 (49%) are classed as being from households with K-O Mosaic profiles. This means that the HeadStart Kent secondary schools have a significantly increased proportion of young people with this profile.

From our learning through our HeadStart Kent journey throughout Phase 2, Kent is now in a strong position to successfully establish approaches to support system change and enable children and young people to build their resilience both as individuals and with their peers. This learning, with continued input from young people and professionals through our co-production channels, workshops, local project groups and Knowledge Seminars has informed our plans for Phase 3. Key features of our approach in Phase 3 are:

- \* Funding will be treated as an **investment** to support sustainable, systemic change across Kent **all** interaction with young people and families will be consistent in fostering resilience and supporting emotional wellbeing;
- \* A commitment to **making a real impact by targeting activity** to areas of greatest need, while in parallel championing whole system change across Kent:
- \* Continuing to champion co-production with young people and family engagement incorporated into all aspects of Programme design and delivery;
- \* Embedding an outcomes-focused culture in every aspect of the Programme;
- \* Ensuring the **highest standards of governance** to underpin the partnership and Programme.

The evolution of HeadStart Kent has been valuable in helping to shape our proposals for the future; the commitment from all our partners will ensure we face with confidence the exciting and challenging journey ahead.

own and peers' emotional health and wellbeing"

<sup>14</sup> HeadStart Kent Evaluation Document Phase 2

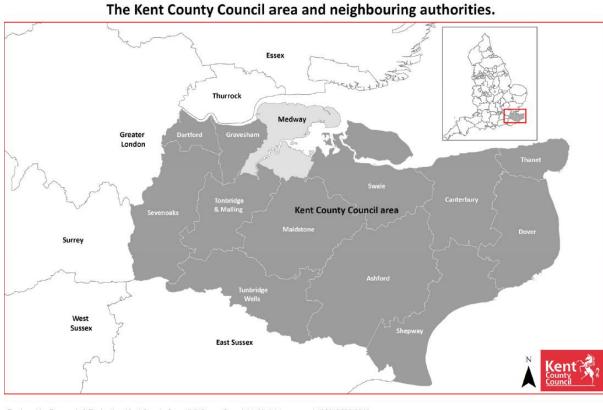
<sup>&</sup>lt;sup>13</sup> Appendix 4 List of HeadStart Kent Schools Phase 2

# **SECTION TWO**

# An introduction to Kent

#### Kent: An overview

Kent County Council (Kent County Council) is a geographically large authority located in the south east of England, with a growing population of just under 1.5 million people. Kent is a Two Tier Authority, with one County Council and 12 District Councils. It is often described as the "gateway to Europe", located immediately south of the City of London and bordering the English Channel, with the Channel Tunnel and high speed railways.



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While almost three-quarters of the county is rural, the majority of people live in Kent's towns; the largest of which is Maidstone.

Kent's unique geography has been a major strategic asset for economic development due to its location between London and Europe, whilst maintaining its reputation as "the Garden of England". In addition, it has a strong historical culture including the world heritage site Canterbury Cathedral, Cinque Ports, castles and areas of outstanding natural beauty. Despite this, many challenges remain and significant inequalities exist across the county. Kent's ten year plan focuses on

growing the economy, tackling disadvantage and putting Kent's citizens in control by 2020.<sup>15</sup>

In summary, while the quality of life in Kent is generally high, there is significant variation in life outcomes across the county related to where people live and their individual circumstances. There is a big gap in educational attainment for children who receive free school meals, are looked after or have migrated to Kent. Unemployment, low skills, low income and poor housing all contribute to inequality in health outcomes, with life expectancy varying by as much as 17 years depending upon the part of Kent residents inhabit. The highest areas of deprivation in Kent according to the January 2014 School Census and Indices of Deprivation Analysis are in the Districts of Swale, Thanet and Shepway, and the lowest areas are Tunbridge Wells, Tunbridge and Malling and Maidstone.

# Children and young people's mental wellbeing in Kent

Children and adolescents aged 0 to 18 in Kent make up nearly a quarter (24%) of the county's total population (365,200 in 2015). The Children and Adolescent Mental Health Services Needs Assessment for Kent outlines the key needs for young people living in Kent; the significant findings of which are summarised below:

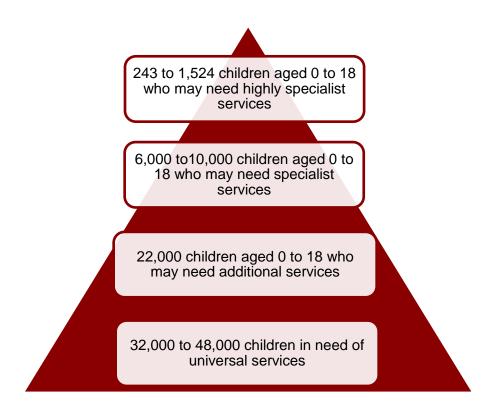
- \* While Kent County is ranked amongst England's least deprived third of local authorities at 102<sup>nd</sup> of 152 county and unitary authorities, 11% of Kent's 94 Lower Super Output Areas are amongst England's most deprived 20% in the Index of Multiple Deprivation 2010;
- \* Over 50,000 children aged 0 to 18 in Kent live in households with a benefit claimant out of work;
- ★ There are 125,300 young people aged 10 to 16 in Kent and there are 18,795 young people that will have mild to moderate emotional wellbeing and mental illness that would benefit from additional interventions alongside their parents/carers.

The Needs Assessment concludes that a broad, county-wide offer to support children, young people and families who are at risk of experiencing poor outcomes is required.

<sup>&</sup>lt;sup>15</sup> Kent Forum, "Vision for Kent 2012 – 2022", <a href="http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0003/5475/Vision-15">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0003/5475/Vision-15">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0003/5475/Vision-15">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0003/5475/Vision-15">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0003/5475/Vision-15">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0003/5475/Vision-15">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0003/5475/Vision-15">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0003/5475/Vision-15">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0003/5475/Vision-15">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0003/5475/Vision-15">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0003/5475/Vision-15">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0003/5475/Vision-15">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0003/5475/Vision-15">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0003/5475/Vision-15">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0003/5475/Vision-15">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0003/5475/Vision-15">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0003/5475/Vision-15">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0003/5475/Vision-15">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0003/5475/Vision-15">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0003/5475/Vision-15">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0003/5475/Vision-15">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0003/5475/Vision-15">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0003/5475/Vision-15">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0003/5475/Vision-15">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0003/5475/Vision-15">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0003/5475/Vision-15">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0003/5475/Vision-15">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0003/5475/Vision-15">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/00">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/00">http://www.ke for-Kent-2012-2022.pdf>, [Accessed February 2016].

16 Kehn-Alafun, D., and Kent County Council. "Children and Adolescent Mental Health Needs Assessment for

<sup>&</sup>lt;a href="http://www.kpho.org.uk/\_\_data/assets/pdf\_file/0004/44662/CAMHSNAforKent\_compressed.compressed.pdf">http://www.kpho.org.uk/\_\_data/assets/pdf\_file/0004/44662/CAMHSNAforKent\_compressed.compressed.pdf</a>, (QMonde and Kent County Council, February 2015).



Child and Adolescent Mental Health Services (CAMHS) service support is currently provided for children and young people with emotional and psychological problems and disorders through a network of health and early help services in Kent, which include:

- \* Universal health services such as early intervention and primary care;
- \* Additional services such as early help, youth offending teams, primary mental health workers, educational psychologists, school and voluntary/third sector provider counselling (including social care and education);
- \* Specialist community multidisciplinary teams:
- \* Highly specialist inpatient and outpatient services.

Particular challenges to services are posed by the rising prevalence (nationally) of developmental disorders, self-harm and suicide, and by emerging risks to child health, such as child sexual exploitation and cyber-bullying.<sup>17</sup> It is evident that children's mental and emotional wellbeing cannot be the preserve of CAMHS, but requires a multiagency approach involving all professionals and services responsible for the care of children, young people and their families.<sup>18</sup>

The Kent Joint Strategic Needs Assessment (Kent JSNA) further outlines particular challenges to services for young people in Kent, most notably:<sup>19</sup>

\* A young person's mental health is a product of their family and home environment, their friends and peers, the quality of their education, their

<sup>&</sup>lt;sup>17</sup> Kent Public Health Observatory, "Kent Children's Mental and Emotional Health", Ibid.

<sup>&</sup>lt;sup>18</sup> Ibid.

<sup>&</sup>lt;sup>19</sup> Ibid.

relationships with trusted adults and the ease and accessibility of supportive early help services - as well as a high quality and responsive specialist CAMHS service. With this in mind, HeadStart Kent is particularly concerned with the causes of emotional ill-being, and as domestic abuse is specifically identified in the Needs Assessment we would look to address this aspect in Phase 3:

\* Services that are provided universally for all young people should identify their role in enabling health and resilience. Waiting until a young person is so distressed, or has developed behaviours that are causing harm and distress, before referring to a specialist service will easily overwhelm resources.

The Joint Strategic Needs Assessment also provides insight on:

- \* The key factors required to be in place to ensure young people are supported effectively;
- ★ Which young people are at risk of mental ill-being and why;
- \* Risk factors to young people's mental health.

# Services and support for young people in Kent

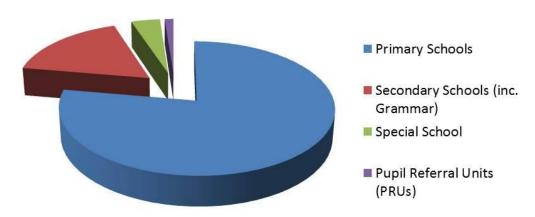
### **Schools**

There is a total of 584 schools in Kent, of which 453 are primary, 100 are secondary (including Grammar), 23 are Special and 7 are Pupil Referral Units (PRUs). Lent County Council actively promotes the Kent 'family of schools' which enables schools to understand how the performance of their pupils, particularly those who are disadvantaged, compares to other schools with similar characteristics. This approach facilitates collaboration between schools to ensure that those facing similar challenges can learn from each other.

Kent County Council supports collaboration between its 173 school Academies and maintained schools, and further supports the work of Academies by offering a range of services through EduKent (a broad range of educational support services such as Educational Psychology). The majority of Academies use this service to purchase a variety of Kent County Council support packages. The future of schools in Kent will be Academy focussed, with the aim that all schools in Kent have Academy status by 2020 in line with national policy.

<sup>&</sup>lt;sup>20</sup> Kent County Council, Management Information Data Request (Kent County Council, January 2016).

## **Kent Schools**



Total Number of Schools in Kent: 584

- 453 Primary Schools
- 100 Secondary Schools (inc. Grammar Schools)
- 23 Special Schools
- 7 Pupil Referral Units (PRUs)

Ref. KCC Management Information Data Request 25.01.16

## Pupil Referral Units (PRUs) and Alternative Provision (AP)

Within Kent there are local authority establishments, with delegated funding arrangements, providing education for children unable to attend a mainstream school.<sup>21</sup> Pupil Referral Units (PRUs) for young people who have been permanently excluded and Alternative Provision (AP) provide these learning settings. The aim of these establishments is to support young people and enable their reintegration back to mainstream schools.

# **Early Help and Preventative Services**

Early Help and Preventative Services (EHPS) and Specialist Children's Services (SCS) work with the most vulnerable children, young people and families with complex needs. They require additional, intensive support and specialist support, and all work has to focus on delivering better outcomes. Early Help includes over 200 unit workers who directly support young people and families, Youth Hubs and Children's Centres, Youth Offending Services, Attendance and Inclusion, Pupil Referral Units (PRU), Troubled Families and HeadStart Kent.

<sup>&</sup>lt;sup>21</sup> Kent County Council, "Pupil Referral Unit and Alternative Provision Prospectus, Effective from 1st September 2014"

<sup>&</sup>lt;a href="https://shareweb.kent.gov.uk/Documents/KELSI/Curriculum%20and%20pupil%20learning/Skills%20and%20employability/PRU%20and%20AC%20Prospectus%20Final.pdf">https://shareweb.kent.gov.uk/Documents/KELSI/Curriculum%20and%20pupil%20learning/Skills%20and%20employability/PRU%20and%20AC%20Prospectus%20Final.pdf</a>, (Kent County Council, 2014).

EHPS is underpinned by four principles:<sup>22</sup>

- \* To involve children, young people and families in decision making;
- \* To improve life chances and build family resilience by using the strengths of families:
- Decisions are informed by professional judgement and the working relationship with the child and family;
- \* To ensure that all service delivery and commissioned provision is outcomefocused and informed by evidence-based practice, performance data and evaluation.

Specialist Children's Services (SCS) is the statutory agency responsible for the safeguarding, health and wellbeing of children:

- \* Supporting children in need and their wider family, identifying children and families who are vulnerable and need more support by working closely with Education and Young People Services at children's centres and with our partners in health, the police and adult services;
- \* Providing protection for children at risk of abuse or neglect, safeguarding all children and young people at risk in their homes and community and those who are in local authority care; whilst working with adult social care services to ensure better continuity of support through transition.

HeadStart Kent has built strong relationships with schools, PRUs, EHPS and SCS throughout Phase 2:

- \* We have delivered a number of activities and programmes across Kent which have resulted in strong support from educational leaders for the HeadStart Kent Programme;
- \* We have worked with PRUs to help design resources for staff training, and Resilience Mentors have worked with young people from PRUs;
- \* The Family Focus programme was developed by the North West Kent Alternative Provision (AP);
- HeadStart Kent worked with young people over the summer 2015 at the start of the Phase 3 design;<sup>23</sup>
- \* The HeadStart Kent Programme has been deeply embedded within EHPS throughout Phase 2 through improving access to early support and has provided the catalyst for changing the approach to emotional health and wellbeing. For Phase 3, HeadStart Kent will be integrated within EHPS systems therefore allowing and influencing systemic change for Kent;
- \* We have shared learning throughout Phase 2, such as the Resilience Domains model with SCS, and have utilised expertise from them to inform the HeadStart Kent Programme.

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<sup>&</sup>lt;sup>22</sup> Kent County Council. "Early Help and Preventative Services Strategy and Three Year Plan", < http://knet/directorate/SiteAssets/Pages/Information-and-Intelligence/EHPS%20Three%20Year%20Plan.pdf> (Kent County Council Education and Young People's Services, Early Help and Preventative Services, 2015). <sup>23</sup> Campaignfilms.co.uk and Kent County Council, "*This is what I want, This is how I want it*", Ibid.

## The Voluntary and Community Sector (VCS) in Kent

There are approximately 4,658 active, registered charities in Kent, of which 3,631 operate at a local level.<sup>24</sup> Of these charities, 43% have an income of less than ten thousand pounds. In 2013/14, Kent County Council's total spend with Kent-based VCS organisations for the provision of services was £123 million.

Research by the National Council of Voluntary Organisations and the Big Society Web found that 3,330 charities in Kent have a total income of £416.7 million. In 2013/14, the largest charities in Kent (those with an income greater than £500,000) employed 6933 staff (FTE). In the same year these charities also had 14,127 volunteers within their organisations.

The role of the VCS in Kent is diverse and extends far beyond those organisations which have a direct relationship with the local authority. The majority of the VCS in Kent have no financial relationship with the local authority and are rooted in their local communities playing a vital role in the supporting and building capacity. Kent County Council and the VCS sector operate under the Kent Compact, which sets out a way of working to improve the relationship for mutual advantage.<sup>25</sup>

During Phase 2, HeadStart Kent has worked with the VCS through commissioned services such as Active Listening, Peer Mentoring, the Resilience Mentors and the Pay It Forward initiative. Most recently, insight work was undertaken by an arts and culture organisation with specifically vulnerable young people and families (parental substance misuse, mental ill-health and domestic abuse).<sup>26</sup>

There is a crucial opportunity for the VCS in supporting the delivery of HeadStart Kent in Phase 3 and in supporting the resilience and emotional wellbeing of young people, schools and local communities. When young people need additional support the resources and expertise of the VCS sector will be harnessed to develop and deliver the activities with individuals and families.

In part, this will be achieved through engaging young people and families in positive activities currently delivered by the VCS and in co-production with young people developing additional effective activities. This will be undertaken by the local Groupings and supported by local HeadStart Kent Senior Project Officer using Innovation Grants and Commissioning.<sup>27</sup>

Engaging the VCS sector will also be a vital part in building the resilience, strength and sustainability of support for young people. As the HeadStart Kent Groupings complete their additional activity in a local area and move on, remaining services and

<sup>&</sup>lt;sup>24</sup> Kent County Council, "*Kent County Council's Voluntary and Community Sector Policy*", <a href="http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0009/47889/Voluntary-and-community-sector-VCS-policy.pdf">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0009/47889/Voluntary-and-community-sector-VCS-policy.pdf</a>, (September 2015).

<sup>&</sup>lt;sup>25</sup> Kent County Council, "Kent Partners Compact 2012", <a href="http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0019/5536/Kent-Partners-Compact.pdf">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0019/5536/Kent-Partners-Compact.pdf</a>, (Kent County Council, 2012)

<sup>2012).</sup>Appendix 5 Creative Insight Report

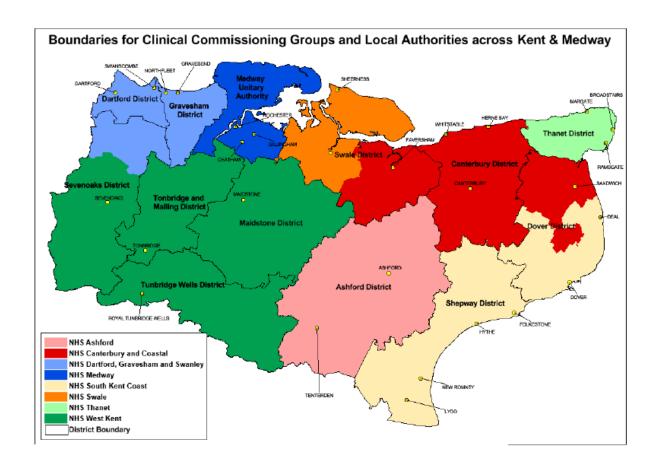
<sup>&</sup>lt;sup>27</sup> Kent County Council, "A Commissioning Framework for Kent County Council; Delivering better outcomes for Kent residents through improved commissioning",

<sup>&</sup>lt;a href="http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0012/24150/Commissioning-Framework.pdf">http://www.kent.gov.uk/\_\_data/assets/pdf\_file/0012/24150/Commissioning-Framework.pdf</a>, (Kent County Council, November 2014).

the VCS sector can ensure the systemic changes are maintained and further developed in the long term.

### **Health services in Kent**

There are seven Clinical Commissioning Groups (CCGs) in Kent organised into four health economies with pooled commissioning resources. They vary in scale; only Thanet CCG is coterminous with district authority boundaries.



\*Please note Medway is a unitary Authority and is not part of Kent County Council.

Kent County Council's Public Health department provides intelligence, leadership and technical skills, and commissions public health services for children and young people in Kent. This includes the Public Health School Service - school nursing and whole school health improvement, substance misuse, sexual health and emotional wellbeing services. The Kent Community Health Foundation Trust is currently the largest provider of these services.

There has been significant work to review and remodel Public Health School Services and emotional health services (see below) with a focus to better support the emotional health and resilience of children and young people. This includes the development of a model for an Adolescent Health and Emotional Health and Wellbeing Service incorporating emotional health interventions at Tiers 1 and 2, building health literacy and self-efficacy and whole school health improvement. Its

basis is Public Health England's Framework for Young People's Emotional Health and Wellbeing and the Healthy Child Programme for 11-19 year olds. Going forward, this service will embed and sustain the learning from the HeadStart Kent Programme.

CCGs and Kent County Council Public Health and District Authorities come together at local Health and Wellbeing Boards. They report to the Kent Health and Wellbeing Board. There is also a substructure at District Council level of Local Children's Partnerships led by Kent County Council. The governance of HeadStart Kent is a responsibility held by the Children's Health and Wellbeing Board. HeadStart Kent will be asked to present regular reports including a formal annual report and at a local level report to the Local Children's Partnerships.

A new model for responding to emotional wellbeing and mental health need has been designed, taking into account the views of children and young people and the learning from HeadStart Kent. The multi-agency Procurement Programme Board which will become Kent's Transformation Board has agreed an integrated intelligence approach. A systems wide outcomes framework has already been agreed, with the commitment to include the HeadStart single outcomes framework.

The Kent Public Health Department is working with the Children's Outcomes Research Consortium on a national feasibility project to bring together Education and CAMHS data until April. This has been facilitated by the significant work that Kent Public Health Observatory has already done to develop a person level pseudonymised dataset. Kent County Council is one of only two authorities (the other being Liverpool) involved in this project, judged to have the capability to link data in this way. This work has the potential, as a minimum, to deliver a baseline for the evaluation of HeadStart Kent Phase 3.

A final area of work is the development of a dataset that can be embedded across emotional and mental health services. This systemisation of data and the development of a person level linked dataset with a focus on adolescents and emotional heath has the potential to transform our ability to understand service use, system modelling and evaluation with the aim of ensuring the best possible outcomes for children and young people.

In addition to experience in developing integrated intelligence, Kent Public Health also has experience of working with providers to develop, deliver and evaluate multi component interventions which take an ecological approach to adolescent health. RisKit was developed by Kent County Council, Addaction and the University of Kent (2012). Its development included the participation of young people and a review of the evidence base; it is now part of the international evidence base for the prevention of substance misuse.<sup>28</sup>

RisKit is an early intervention programme for young people aged 10 to 14 aiming to reduce risk taking behaviour, and has had a positive impact on emotional health and wellbeing. This demonstrates that early interventions can help to prevent mental

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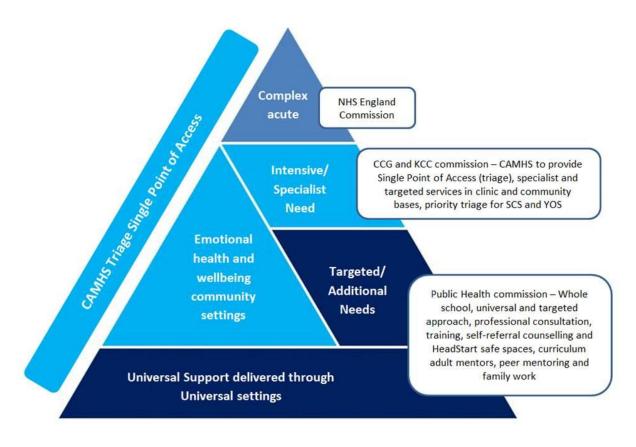
<sup>&</sup>lt;sup>28</sup> Public Health England, "The international evidence on the prevention of drug and alcohol use; Summary and examples of implementation in England", <a href="http://www.nta.nhs.uk/uploads/unodc-prevention-guide.pdf">http://www.nta.nhs.uk/uploads/unodc-prevention-guide.pdf</a>, (PHE Publications Crown Copyright, July 2015).

illness. It is now being funded by Kent CCGs through the Transformation Fund to prevent and reduce self-harm, and mobilise HeadStart Kent's goals utilising the Resilience Domains based approach and building emotional resilience in young people.

A key goal in Kent is to ensure that children, young people and their families have access to information and settings which promote emotional health and resilience; ensuring support at the earliest opportunity, preventing needs escalating and requiring the intervention of specialist mental health services.

The aim is also to develop and extend a universal approach to mental health promotion, emotional wellbeing and resilience largely delivered through classrooms and group interventions, interfacing with a continuum of more targeted support. The aim of this approach is ensure more staff, children and young people develop the core attributes that underpin mental health and resilience.

To enable clarity of systems and roles, Kent's emotional wellbeing system is now organised as follows:



# Summary - Why HeadStart is a priority for Kent

The Kent and Medway Joint Strategic Needs Assessment sets out a compelling case for HeadStart in Kent, specifically recognising:<sup>29</sup>

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<sup>&</sup>lt;sup>29</sup> Kent Public Health Observatory, "Kent Children's Mental and Emotional Health", Ibid.

- \* Everyone who works with children and young people has a role in early intervention, mental health prevention and promotion;
- \* There must be a focus on working to increase resilience in children and whole families and improve parenting skills;
- \* Understanding the risk taking behaviour of adolescents and linking it with wider public health services e.g. substance misuse and sexual health is important for practitioners;
- \* There is a need to promote evidence based cost effective interventions with clear consistent outcomes monitoring in place;
- \* There is a need to support those working with children and young people, to develop their ability to support and create a positive culture that extends to the wider community;
- \* Greater alignment with school-based provision can be beneficial in responding to established and emergent risk factors such as bullying, cyber-bullying and harms arising from websites or online forums that normalise anorexia and self-harm.

Children, young people and their families in Kent have told us what they need to support them to build their resilience:



To meet these needs, HeadStart in Kent has focused on:

- Promoting resilience and early support (from self-referral and direct access) to prevent problems getting worse;
- \* Developing approaches that ensure timely and accessible support, including direct access in appropriate settings wherever possible;
- \* Championing approaches that recognise and strengthen wider family relationships;
- \* Preparing children and young people to experience positive transitions between services (including transition to adult services).

The ambition is that young people have an increased awareness of how to recognise when they might have, or be at risk of having, a mental health problem - specifically that they:

- Know where and how to get help and help themselves;
- \* Have clarity about what help is available;
- \* Understand what might happen when they access support and know what to do while they are waiting.

# **SECTION THREE**

# HeadStart Phase 2 - What we have done and what we have learned

# Partnership composition

Kent County Council led the partnership to develop and deliver the Big Lottery Fund HeadStart Phase 2 Programme in Kent.<sup>30</sup>

- \* The Director of Early Help and Preventative Services, Florence Kroll, has been the Senior Officer responsible for Phase 2 and chaired an Executive Group that provided direction on strategy and delivery;
- \* A Programme Board has provided stakeholder involvement and included representation from local District Councils, schools, health, Police, the VCS and young people;
- \* A Young People's Shadow Board was developed which enabled young people to shape the Programme confidently and purposefully.

Phase 2 has been delivered through three local Project Groups in Thanet, Canterbury and North West Kent. These led the local design and delivery of projects. with Knowledge Seminars to support learning and development. At the strategic level HeadStart Kent has informed the NHS and Kent County Council's Kent Transformation Plan, which builds on the NHS England's report "Future in Mind".31 Key elements embraced locally are investment in early intervention and improved access to emotional and mental health services.

HeadStart Kent is represented within the governance structure of the Transformation Plan: Florence Kroll, Senior Responsible Officer (SRO) for HeadStart Kent sits on the Kent Children and Young People's Mental Health and Wellbeing Transformation Oversight Group and Angela Ford, HeadStart Kent Programme Manager, is involved in supporting the governance processes of the Transformation Local Delivery Groups.32

The profile associated with HeadStart Kent Phase 2 has also enabled the Programme to have a wider influence across the system strategically and operationally including:

\* Acting as a catalyst to drive the Kent Emotional and Mental Health Wellbeing Task and Finish Group;

 $<sup>^{\</sup>rm 30}$  Appendix 7 HeadStart Kent Partnership Agreement Phase 2  $^{\rm 31}$  The Department of Health, "Future in Mind", Ibid.

<sup>&</sup>lt;sup>32</sup> Kent Clinical Commissioning Groups, "Kent Transformation Plan for Children, Young People and Young Adults' Mental Health and Wellbeing", <a href="http://www.liveitwell.org.uk/wp-content/uploads/2015/12/Kent-tulental-tul Transformation-Plan-for-Children-FINAL-VERSION-22-12-15.pdf>, (Kent Clinical Commissioning Groups, November 2015).

- \* Contributing to the Kent Mental Health Commissioning Board, the Kent Drug and Alcohol Action Board, the Kent Reoffending Board, Domestic Abuse Board and the Kent Troubled Families Multiagency Steering Group
- ★ Working with the Personal Social Health Education (PSHE) forum
- \* Engagement with the Kent Youth County Council, local Youth Advisory Groups and the Local Children's Partnership Groups.
- \* Meeting with school aged children health forums

As a result of this, HeadStart Kent influenced the work undertaken across the system. For example, these partnerships now have an understanding of the importance of developing the resilience of young people. This gives a good base on which we can develop Phase 3.

## Phase 2 Programme engagement and delivery

During Phase 2, the Big Lottery Fund enabled participatory action research to test, learn, shape and share approaches to building resilience. The HeadStart Kent Evaluation Document sets out the specific elements, performance impact and case studies of each aspect of the Programme.<sup>33</sup>

Different approaches have been taken and tested in three areas: Thanet, Canterbury and North West Kent (Dartford, Gravesham and Swanley). These areas were selected based on young people's need (through Mosaic Mapping) and the potential to mobilise rapidly and enable a test and learn approach.<sup>34</sup>

A total of 10,974 young people attended the 13 HeadStart Kent secondary schools; 4,629 (42.2%) were classed as being from households with K-O profiles. Of the remaining 104,534 young people at secondary school in Kent, 27,173 (26%) were classed as being from households with K-O Mosaic profiles. This means that HeadStart Kent secondary schools have a significantly increased proportion of young people with this profile, and who are more vulnerable to adversity.

All three areas included the development of Resilience Mentors, a series of Knowledge Seminars, Digital and Social Marketing elements. The table below outlines the different elements of HeadStart Kent Phase 2, with activities in red demonstrating those that were developed from learning during the delivery.

<sup>&</sup>lt;sup>33</sup> Appendix 6 HeadStart Kent Evaluation Document Phase 2

<sup>&</sup>lt;sup>34</sup> Appendix 8 Mosaic Profile of HeadStart Schools September 2014

#### Kent's Programme Phase 2 Partnership Programme Board, Shadow Board, Knowledge Seminars academic resilience Coproduction throughout with Young people and Families young evaluators Restorative approaches in schools Penn State Resilience curriculum Safe Spaces in schools in secondary schools Restorative approaches in the Safe Spaces in community hubs Penn State Resilience curriculum community Coping packs in primary schools. Target Restorative approaches in Family Focus KS2 Penn State Resilience in schools community and target workers Restorative Ambassadors (setbacks Sorted) Active listening mentors Resilience Curriculum FRIENDS Training open access and Youth MH First Aid outdoor education CBT training for school staff Restorative approaches families through systemic work Developing mentoring toolkits Resilience Mentors: evidence based model of intensive support, FRIENDS Social Marketing: skills roadshows, coping packs, reflection days, Our Promise Digital World: full services directory, volunteering & mentoring opportunities, self-referral form and sign posting to social media

# **Activity in Thanet**

### What we have done?

Thanet partners expressed an interest in developing Restorative Approaches with the aim of ensuring a common language and consistency in approach across all adolescent settings - learning from experience in Scotland.<sup>35</sup> The project was able to support the development of Restorative Ambassadors in nine schools, train practitioners in restorative approaches and implement a Resilience Curriculum.

The outcomes for young people are set out in the Evaluation Document.<sup>36</sup> The Thanet approach had good mobilisation, and involved young people in its delivery as Ambassadors and young people leading the Social Marketing Thanet day event. The Thanet project reached 2493 beneficiaries.<sup>37</sup>

### What we have learned?

We have learned that strong senior school leaders were important in securing commitment and driving the Programme. They were able to mobilise quickly, training school staff and young people in Restorative Approaches. The leadership provided by the local Early Help manager enabled training for staff and activities to be undertaken within the community.

Using Restorative Approaches in family situations was slower to mobilise. However, the subsequent utilisation of expert Systemic Family Work shows signs of making a difference to young people, especially for those with fixed term exclusions.

<sup>&</sup>lt;sup>35</sup> Donnelley, RR., "Improving relationships and promoting positive behaviour in Scotland's schools", <a href="http://www.gov.scot/Resource/Doc/220068/0059110.pdf">http://www.gov.scot/Resource/Doc/220068/0059110.pdf</a>, (Crown Copyright Scottish Government, 2008). <sup>36</sup> Appendix 6 HeadStart Kent Evaluation Document.

<sup>&</sup>lt;sup>37</sup> Appendix 10 Summary of Lessons Learnt During HeadStart Kent Phase 2.

From the Thanet project we have learned that clarity across all approaches is critical. Thanet tested a new Resilience Curriculum which was well mobilised due to staff having access to resources immediately online and being able to use them within the classroom in a flexible way. For Phase 3, all resources will be online and evidence based.

# **Activity in Canterbury**

#### What have we done?

This project was built upon the established links with the Developing Healthy Minds in Teenagers National Research Project.<sup>38</sup> In year one this project focused on the Penn State Resilience Programme (PRP) approach through training teachers to deliver the curriculum. HeadStart Kent has invested in developing this approach in primary and Early Help services.<sup>39</sup>

Staff from three primary schools attended the five day PRP training to deliver in schools, a further 40 practitioners were trained in PRP approaches (through the "Setbacks Sorted" programme) to deliver to young people. This has been further developed with Early Help Open Access staff trained in the FRIENDS model of resilience and is currently being delivered in youth centres and outdoor centres. The Canterbury project has reached 714 beneficiaries. 41

#### What we have learned?

Schools that mobilised the PRP Curriculum have embraced it. Due to the training requirements of this curriculum (external to Kent and not offered frequently) accessibility for teachers is costly both in time and financially. The PRP is still building its evidence base and therefore will not be taken wider than its Canterbury remit. However Canterbury schools will continue with the national research programme.

"Setbacks Sorted" (a version of PRP) was not fully mobilised partly due to restructure of services. In addition, unlike Thanet, Canterbury did not have a local coordinator so the project was not consistently implemented. This illustrates that a local coordinator is vital for the success of the HeadStart Kent Programme and this issue has been addressed in Phase 3 design.

## **Activity in North West Kent (Dartford, Gravesham and Swanley)**

#### What we have done?

North West Kent was keen to explore a whole-school approach. This included training staff in Youth Mental Health First Aid (teaching, support staff and youth workers) and the development of Peer Mentoring. <sup>42</sup> Safe Spaces were also developed; 15 in primary and secondary schools, three in Youth Hubs and one in an

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<sup>&</sup>lt;sup>38</sup> Education Endowment Foundation, "Developing Healthy Minds in Teenagers",

<sup>&</sup>lt;a href="https://educationendowmentfoundation.org.uk/evaluation/projects/developing-healthy-minds-in-teenagers/">https://educationendowmentfoundation.org.uk/evaluation/projects/developing-healthy-minds-in-teenagers/</a>, [Accessed February 2016].

<sup>&</sup>lt;sup>39</sup> Appendix 6 HeadStart Kent Evaluation Document

<sup>&</sup>lt;sup>40</sup> Barrett, P., "FRIENDS Programmes", <a href="http://friendsprograms.com/">http://friendsprograms.com/</a>>, [Accessed February 2016].

<sup>&</sup>lt;sup>41</sup> Appendix 10 Summary of Lessons Learnt During HeadStart Kent Phase 2

<sup>&</sup>lt;sup>42</sup> Appendix 26 Peer Mentoring Toolkit Outline

Animal Sanctuary. 43 Coping packs were also developed and built by young people and mentoring and family work undertaken. 44 There was a specific focus on the transition from primary to secondary school. Details of those trained and specific usage levels can be found in the HeadStart Kent Evaluation Document. 45

The Family Focus programme has brought families together in groups who were in need of additional input as a result of their transition from primary to secondary education. It generated mutual support, and increased engagement in education, vocation and positive community activity. The North West Kent project reached 3944 young people.46

# Case Study: "John" – Family Focus

John was referred to Family Focus by his primary school teacher due to his disruptive behaviours in school.

At the first meeting it became clear that John's mum was concerned about John's transition to secondary school and expectations on her.

During Family Focus John was encouraged to share what he was worried about and with his mum, agree targets to work to. Over a period of weeks, John and his mum were following a plan and were engaging in group discussion with peers.

John continues to go to some of the group sessions and is helping others who are worried about transition. He is a founding member of "Student Focus" – a group which was set up by students who had completed Family Focus so that they could continue to meet and use the skills they had developed during the initial 10 week programme.

John's mum also has established a new network of other parents who are providing mutual support.

## What we have learned?

Through the evaluation of North West Kent we have learned that positive outcomes have been achieved across all the activities delivered. In particular, the Family Focus aspect of the Programme made a real difference to young people themselves, their family relationships and ability to attend and learn at school.<sup>47</sup>

<sup>&</sup>lt;sup>43</sup> Appendix 11 HeadStart Kent Safe Spaces Guidance

Appendix 13 HeadStart Kent Social Marketing Events Report

<sup>&</sup>lt;sup>45</sup> Appendix 6 HeadStart Kent Evaluation Document.
<sup>46</sup> Appendix 10 Summary of Lessons Learnt During HeadStart Kent Phase 2.

<sup>&</sup>lt;sup>47</sup> Appendix 6 HeadStart Kent Evaluation Document.

HeadStart in North West Kent has been a success due to local ownership and coproduction. Young people told us they wanted "a safe space to go" and access to "trained staff and young people available to talk with about their emotional health". Young people wanted support for their families, enabling families to support them in return, especially during transition.

For Phase 3, we propose to take the majority of work in North West Kent forward (systemic family work, Safe Spaces, coping packs, young people and staff training), as they have been key elements of HeadStart Kent's success for Phase 2.

# **Programme-wide projects**

## **Resilience mentors**

#### What we have done?

Resilience mentors are a commissioned targeted intervention supporting vulnerable voung people struggling with behaviour and/or emotional health. Workers used the Daniel and Wassell Resilience Domains with young people, and worked in groups or one to one settings to build their resilience. 48 Families of young people are also offered Emotional First Aid to complement this. One young person said:

"They were good because they helped me get new ways to deal with things and I have started to do a lot more things in school now, like joining the gardening club and canoeing club."

Resilience mentors have provided support to 113 young people. 49 During the HeadStart Kent Programme the Resilience Mentors provider secured Education Endowerment Fund (EEF) investment to expand the FRIENDS curriculum model to Year 5's in 80 schools across the county. 50

### What we have learned?

Originally, HeadStart Kent intended to use the "Rochester" Model of resilience. 51 However, the FRIENDS model was chosen for its asset focused programme which, through an intensive period of structured intervention, offers a suite of opportunities to improve the resilience of children.<sup>52</sup> It is an evidence based programme which has been shown to improve a participant's social skills, ability to focus, confidence and the ability to relax and regulate emotions.

We have learned that the FRIENDS Model is an effective way of supporting young people's ability to develop positive thinking skills when they are struggling for clarity due to anxiety.

<sup>&</sup>lt;sup>48</sup> Daniel B., and Wassell, S., "Assessing and Promoting Resilience in Vulnerable Children; Volume 1, The Early Years; Volume 2, The School Years; and Volume 3, Adolescence", Jessica Kingsley Publishers, July 2002). <sup>49</sup> Appendix 10 Summary of Lessons Learnt During HeadStart Kent Phase 2.
<sup>50</sup> Appendix 12 Project Salus Education Endowment Fund Resilience Mentors Proposal

<sup>&</sup>lt;sup>51</sup> National Institute of Justice, "Program Profile; Rochester Resilience Project (RRP)", < https://www.crimesolutions.gov/ProgramDetails.aspx?ID=371> [Accessed February 2016].

<sup>&</sup>lt;sup>52</sup> Barrett, P., "FRIENDS Programmes", <a href="http://friendsprograms.com/">http://friendsprograms.com/</a>, [Accessed February 2016].

# **Case Report - Resilience Mentors**

Referred to Resilience Mentors by the Pastoral Support Team at her school, Josie suffered from anxiety and struggled to form relationships with peers. Through the Resilience Domains risk factors identified were a recent family breakdown, lack of self-esteem and poor peer relationships. Some protective factors were also identified which were good communication skills and appropriate expression of feelings, and a positive attitude to learning.

Josie attended a group based programme of sessions and one-toones with a Resilience Mentor. After completion of the structured group sessions Josie was offered additional support through a weekly drop-in session at the school. Josie has also attended games sessions and day trips run by the Resilience Mentors outside of school.

**Outcomes**: Josie engaged well with the programme and the additional activities. Initially during group sessions she seemed more comfortable engaged in individual activities such as drawing, than in engaging directly with peers. However her social inaction developed.

**Feedback from Josie**: Josie reported that the sessions were fun and that it helped her to get to know people.

Feedback and data from schools: Improvements in emotional symptoms and peer problems were noted which resulted in an improvement in Josie's score on the Strengths and Difficulties Questionnaire. It was felt that Josie showed signs of improved confidence and self-esteem following the intervention.

## **Knowledge Seminars**

What we have done?

A series of Knowledge Seminars facilitated by Canterbury Christ Church University and the University of Kent have provided an opportunity for stakeholders to learn about the best approaches to support resilience.

The Knowledge Seminars were attended by the Police, District Councils, Early Help and Preventative Services, schools, private providers, the VCS and young people. They created an environment where knowledge could be shared, ideas developed

and challenges to the delivery of HeadStart Kent were identified. Ultimately, the learning generated from the Knowledge Seminars helped shape our Case for Investment for Phase 3.

The Daniel and Wassell Resilience Domains were a golden thread running through the Seminars. The attendance and focus at each Seminar is set out below:

	Attendance	Focus
Seminar 1	37	Conceptualising Resilience
Seminar 2	54	Measuring Outcomes
Seminar 3	34	Evidence Based Approaches
Seminar 4	26	What Have We Learned? Discussing a Theory of Change for Kent

#### What we have learned?

Through the Knowledge Seminars it was recognised that we were missing a clear logic model for the different elements of HeadStart Kent. We learned that using a logic model can improve the Programme design and build consensus around its objectives. A Theory of Change is a key element of our Phase 3 Case for Investment.<sup>53</sup>

# **Social Marketing**

## What we have done?

Social Marketing has been a county-wide initiative, drawing on learning from the initial engagement with young people.<sup>54</sup> The enthusiasm from young people led to this stream of work being designed, and in many cases delivering the project. The team delivered the following concepts: Coping packs, #DigitalDetox, Thanet Day, The School Tour and #OurPromise - The Pledge. 55 These different aspects of Social Marketing have reached 16,279 young people and their families. 56

The Thanet Day brought together 260 young people to learn about the Resilience Domains and how they could use these alongside Restorative Approaches for both themselves and in their relationships. The event was fully co-produced and activities facilitated by young people. The Schools Roadshow in North West Kent aimed to raise awareness of resilience and good mental health for young people. Peer mentors were fully involved and the events were successful, as young people could later reflect on the messaging.

<sup>&</sup>lt;sup>53</sup> Appendix 9 HeadStart Kent Detailed Theory of Change Phase 3

<sup>&</sup>lt;sup>54</sup> Nice Cat Media, Banter Ltd and Kent County Council, HeadStart Kent Video <a href="https://vimeo.com/119703207">https://vimeo.com/119703207</a>, [Accessed February 2016].

Appendix 13 HeadStart Kent Social Marketing Events Report

<sup>&</sup>lt;sup>56</sup> Appendix 10 Summary of Lessons Learnt During HeadStart Kent Phase 2.

#### What we have learned?

We have learned that young people taking ownership of Social Marketing yields strong results. The Thanet Day and the Schools Roadshow were successful because they were run by young people with strong buy in from the schools. Coping packs were designed to be a box of tricks; techniques and tips to support strategies for young people. Packs were received very positively by young people, and they would like to build their own in the future to meet their own bespoke needs.

The Social Marketing Project, due to the co-production element, took longer to mobilise than expected. The concepts, commissioning specifications and delivery were designed by young people and not purchased as a product. This enabled learning from the three project areas to be incorporated. Future Programme planning will ensure that key Social Marketing activities are consistent and delivered from the start.

# **Digital**

#### What we have done?

HeadStart Kent has supported the development of the young person's website and the 0-25 activities/services database. <sup>57</sup> In addition we have developed a repository for all documents and learning from HeadStart Kent on KELSI which is an online resource for education in Kent. <sup>58</sup>

We have interacted through Twitter @HeadStartKent with 300 followers, shared updates from the Programme and live tweets during events. We supported a young person's Facebook page (closed group) used for co-production purposes, tested the effectiveness of a blog, and explored the concept of #DigitalDetox as part of our social marketing.

The blog was designed to keep language simple and explain what we are doing, and why we are doing it. Young people were provided with blog writing workshops. In the time the blog was live, 22 posts were written achieving 411 views.

## What we have learned?

The KELSI page has been useful in communicating the Programme. Driven by the need to share updates with professionals, we used a platform that has proved very popular. The database for the 0-25 element has made progress. By using local staff to input, updates and amendments are made in real time. The Resilience Domains will also be added to the site as a searchable feature.

The Facebook and Twitter follower groups were created at the request of young people and have been useful. Twitter has been an easy platform to update and share information, yet yields little response from the wider cohort of young people across Kent. Nevertheless it does allow us to share our journey within HeadStart Kent and is a useful tool for reflection, especially for co-production.

<sup>&</sup>lt;sup>57</sup> Kent County Council, "Young People", <a href="http://www.kent.gov.uk/education-and-children/young-people">http://www.kent.gov.uk/education-and-children/young-people</a> [Accessed February 2016].

<sup>&</sup>lt;sup>58</sup> Kent County Council "HeadStart", <a href="http://www.kelsi.org.uk/support-for-children-and-young-people/health-and-wellbeing/headstart">http://www.kelsi.org.uk/support-for-children-and-young-people/health-and-wellbeing/headstart</a> [Accessed February 2016].

#### **Co-production**

#### What we have done?

In November 2014 a Young People's Shadow Board explored which elements of the HeadStart Programme young people wanted to lead and evaluate. A large training programme was delivered to young people, alongside graphic workshops.<sup>59</sup> Young people's activities throughout the HeadStart Kent Programme have varied depending on location, time commitments and interest levels. The Youth Engagement Appendix provides examples of their session plans, minutes, photos and Twitter feeds. 60

Within the HeadStart Kent Programme the co-production ambitions were to:

- \* Continually ensure co-production is an integral part of governance and decision making processes;
- \* Continually develop young people as leaders;
- \* Have a trained workforce able to co-produce with children, young people and their families.

Young people have been involved in:

- Young People's Shadow Board;
- \* The Programme Board;
- \* Social Marketing;
- \* Young Evaluators;61
- \* Local project groups in Thanet, Canterbury and North West Kent;
- \* Youth Health Champions;
- \* Knowledge Seminars:
- \* National HeadStarters:
- \* Restorative Ambassadors (Thanet);
- Peer Mentors (North West Kent);
- \* Active Listening (North West Kent);
- \* Pay It Forward;
- \* Commissioning;
- The recruitment of staff and selecting providers.

Our young people engaged in training workshops to develop their skills and abilities. In addition to the core group involved in the main Programme, a wider spectrum of young people have engaged, beyond the Programme deliverables, to gather views, assess our approaches and share the broader message of good resilience and emotional wellbeing.

Graphic recordings were a valuable tool. The HeadStart Kent team worked with the Year 11 West Kent Health Needs Alternative Provision to explore their journeys and how HeadStart Kent should approach Phase 3. The graphic below was produced

Appendix 14 HeadStart Kent Young Evaluators Handover Report
 Appendix 15 Youth Engagement Appendix

<sup>&</sup>lt;sup>61</sup> Appendix 16 HeadStart Kent Young Evaluators Pay It Forward Summary Report

and provides a constant reminder to partners of our priority - delivering the Programme in Kent in a way which works for young people:



#### What we have learned?

It is vital to involve young people in the design and delivery of service redesign at the very start, basing it on the experience and journeys of young people.

During HeadStart Kent co-production, young people said that they sometimes needed to be supported emotionally. This was addressed with two Participation Workers introduced to the team, providing young people with support both within the meetings and at other times when they needed it. In addition, co-production must be undertaken at a level that is agreeable to the young people involved.

The additional support has also enabled a broader understanding of new starters to co-production. They have told us a guide to the Programme so they know how they can best contribute would be of value.

It will be important to widen co-production to more young people who may be more vulnerable, require additional support and are from more diverse backgrounds. Young people in the core HeadStart Kent group have recognised that "their views may not always be representative of everyone", and want to recruit and co-produce with a more diverse group of young people - particularly those who are vulnerable, and therefore most likely to benefit from the transformation of services that HeadStart Kent is aiming to achieve.

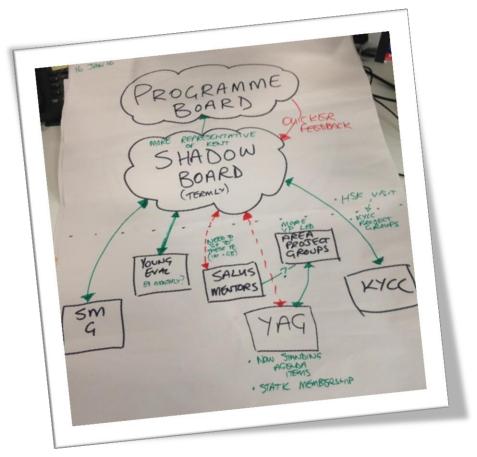
It is also important that co-production supports a clear progression pathway for young people. The responsibility they take on needs to be clearly structured, with the end result a potential volunteering role at the age of 18 - one that they have the confidence to fulfil, preparing them for further education or their future employment.

Communication has been key to successful co-production, finding ways to break down technical terms to develop young people's knowledge in a creative way. Young people have said the creative workshops to develop skills and co-produce for HeadStart Kent resources were more valuable than some of the meetings they have attended.

In summary, young people have identified support needs required for involvement in HeadStart Kent co-production:

- \* Adequate time to plan how it will be delivered and led;
- \* Emotional support (discussions, bring up emotional stuff), revisit this;
- \* Guides for new members, a chance to practice leading skills in real time;
- \* Widen participation in the group.

HeadStart Kent will ensure that co-production remains at the core - guaranteeing that it runs throughout, from Programme governance to individual experiences - enabling young people and families to play an active role in shaping the context of their experience.



#### The importance of local coordinators

#### What we have done?

There have been three different mechanisms for operationalising HeadStart within Kent in local project areas, which have proven to have made a real difference in its success:

- 1. Local coordinator to monitor interventions in North West Kent;
- 2. No local coordinator with oversight from the HeadStart operational team in Canterbury;
- 3. Local coordinator with devolved budget and decision making in Thanet.

#### What we have learned?

Where there was no local coordinator, the mobilisation of HeadStart Kent outside of the school sector was limited. Where there was a local coordinator in place with a devolved budget and decision making, this generated local ownership, leadership and real engagement, resulting in energy and goodwill for the HeadStart Kent Programme. The mobilisation outside the school sector came later on in the Programme.

Utilising this learning, there is now coordination across all areas to develop the Programme further. However, engagement with families and the community needs an enhanced approach; insight work for Phase 3 has explored this in more detail. The need for ownership is reflected in both the family work and co-production work through Pay it Forward and Social Marketing opportunities.

#### **Moving on from Phase 2**

In HeadStart Kent we have learned many lessons from the valuable experiences gained during Phase 2. This learning has been vital and has played the key role in shaping this Case for Investment and our proposals for the transformation of young people's emotional health and wellbeing services across Kent.

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<sup>&</sup>lt;sup>62</sup> Light Vessel 21, Spaghetti Weston and Kent County Council. "*pARTicipate; Creative Insight for HeadStart Kent*", <a href="https://vimeo.com/152922104">https://vimeo.com/152922104</a>, (2016).

## **SECTION FOUR**

# **Changing context**

There have been a number of developments in national and local policy since the start of the HeadStart Kent Phase 2 Programme. These have influenced the proposals for Phase 3.

#### Policy and plans

Kent Children's Health and Wellbeing Board published the new Emotional Wellbeing Strategy for Children, Young People and Young Adults.<sup>63</sup> This document sets out a framework of four key outcomes, Early Help, Access, Whole Family Approaches and Recovery and Transition.

These were based on national and local research and early consultation activity with families and professionals. The Strategy makes the commitment to develop a multiagency Transformation Plan. It recognises that promoting and protecting the emotional wellbeing of our children and young people is far bigger than any individual organisation. Improving emotional wellbeing is not only "everybody's business" but is the common ground at the heart of everything Kent does.

Kent's Clinical Commissioning Groups and Kent County Council published The Kent Transformation Plan for Children, Young People and Young Adults' Mental Health and Wellbeing. <sup>64</sup> This marks the beginning of distilling a range of short-term improvement actions, workforce development plans, and recommendations for longer-term future commissioning from the large amount of contributions from families and professionals, and the detailed needs analysis which has now been completed.

#### **Early Help transformation**

During 2015 Kent County Council integrated its Early Help and Preventative Services, which brought together all non-statutory social care services for children young people and families (Youth Offending, Early Intervention workers, Attendance and Inclusion services, Troubled Family, Children's Centres, Youth Work and Commissioned Providers in these areas) in one division. There is now a focus on high quality Early Help and Preventative Services for young people, through a whole family approach, so that resilience and self-efficacy can be developed.

<sup>&</sup>lt;sup>63</sup> Kent County Council, "The Way Ahead..." Ibid.

<sup>&</sup>lt;sup>64</sup> Kent Clinical Commissioning Groups, "Kent Transformation Plan for Children, Young People and Young Adults' Mental Health and Wellbeing", Ibid.

<sup>&</sup>lt;sup>65</sup> Kent County Council, "Early Help and Preventative Services Strategy and Three Year Plan", Ibid.

#### **Domestic Abuse Research**

The HeadStart Kent Programme has undertaken a review of secondary data in Kent including the CAMHS Health Needs Assessment, Toxic Trio Health Needs Assessment, diagnostic review for Early Help and Kent County Council Business Intelligence products. We have gathered stakeholders involved in domestic abuse and identified services on offer across the county. 66 We also considered the evidence base for interventions which build resilience in adolescents involved in domestic abuse including Emma Howarth's 'IMPRoving outcomes for child affected by domestic violencE study' (IMPROVE).67

HeadStart Kent has also undertaken insight work with young people and families affected by domestic abuse, parental mental health and substance misuse. These young people and families requested:<sup>68</sup>

- ★ Opportunities to develop self-efficacy and have access to awareness raising opportunities;
- \* Access to safe spaces and people:
- \* Community based opportunities to develop strengths including youth provision to foster talents and interests, for example through arts based work.

Our research has concluded that interventions which build resilience in young people exposed to domestic abuse are shallow. Therefore, HeadStart Kent will take a developmental action research approach, to learn what works best and developing it further. Our research which has shaped Phase 3 concluded that activities with this group of young people must:

- \* Be based on the needs and voice of the young person that must be prioritised, not be time limited;
- \* Include Cognitive Behavioural Approaches, psycho-education, parenting skills and advocacy, one to one and group working in local community settings;
- \* A resilience approach suggests an ongoing relationship with the young person, which is particularly important for young people exposed to domestic abuse.

#### **HeadStart Kent friendly context**

HeadStart Kent has been involved with, and influenced, the developments mentioned previously. We have learned and contributed towards the design of more effective services with young people and their families, through taking a whole school approach and focusing on direct services. The co-production element of HeadStart Kent has provided the leadership and role modelling in how to effectively involve young people in service design and delivery. The changes to the local context across strategic, policy, organisational and operational levels means that Kent is ready and eager for the impact HeadStart Phase 3 will have.

Appendix 17 Mapping Domestic Abuse Services for Young People in Kent and Medway
 Howarth, E., "IMPRoving Outcomes for children exposed to domestic Violence (IMPROVE): A scoping Study", Publication Pending.

<sup>&</sup>lt;sup>68</sup> Light Vessel 21, Spaghetti Weston and Kent County Council, Ibid.

## **SECTION FIVE**

## **HeadStart Kent Phase 3**

#### Mission and outcomes

We have developed a Mission Statement for HeadStart Kent Phase 3 through consultation with the Programme Board and Executive Group:

"By 2020 Kent young people and their families will have improved resilience, by developing their knowledge and lifelong skills to maximise their own and their peers' emotional health and wellbeing; so to navigate their way to support when needed in ways which work for them."

The HeadStart Kent Programme strategy is clear on the change we want to achieve for young people and how the investment we are proposing will help the long term outcomes. Our Programme has been developed through a process of co-production with young people, with local professionals who work with young people in Kent and with the guidance from the Big Lottery Fund support team.

Our young people have been clear on what they need to support their mental wellbeing, and HeadStart Kent will focus on building a sustainable system where every young person in Kent will be able to say with confidence:

- \* "People around me understand wellbeing and how to promote it";
- \* "My overall wellbeing is not impacted by the pressure to achieve and to 'be perfect";
- \* "There is always someone for me to talk to".

The key outcomes from this investment will be:

- \* Improved emotional wellbeing and resilience of our young people aged 10 to 16, reducing the incidence of mental ill health;
- \* Improved attendance and school academic achievement to ensure young people in Kent are given the opportunity for the best start in life.

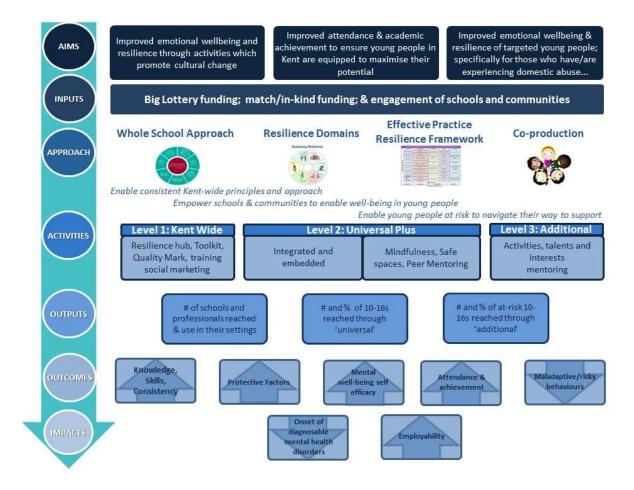
The Young People's Shadow Board has endorsed this approach and the Mission Statement, and has agreed an outcome for the Programme - that by 2020 young people in Kent will have the coping abilities to support their own and peers' emotional health and wellbeing together with community resources.

#### **Our HeadStart Kent Programme Strategy - Theory of Change**

Our Programme Strategy is summarised below, setting out the inputs and processes that will be required to achieve the outcomes defined through a Theory of Change. <sup>69</sup> Defining our aims, activities and outcomes via consultation with young people, this approach will ensure that the investment for HeadStart Kent Phase 3 supports the development of a system change across the county.

Our partners, including young people and families, are confident the Theory of Change will lead to systematic and long lasting change across Kent. This will promote a culture and set of behaviours throughout children and young people's ecology including homes, schools, communities (including online communities) which increase emotional wellbeing and promote resilience, with the aim of reducing the need for formal mental health services.

#### **High level Theory of Change**



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<sup>&</sup>lt;sup>69</sup> Appendix 9 HeadStart Kent Detailed Theory of Change Phase 3

#### The four approaches

The HeadStart Kent Programme is underpinned by four core evidence based approaches, running through every aspect of HeadStart Kent:

#### **Co-production**

The co-production ambitions for Phase 3 remain the same as Phase 2; however through our learning we are now able to enhance this process and provide clear guidance and strategies for a strengthened approach. This is illustrated within the interactive presentation young people led, which explores this journey and what young people have told us they need:<sup>70</sup>

- A clear strategy for engagement at all levels with an identified pathway;
- \* A clear and consistent approach for the flow of information across the whole Programme;
- \* Clear expectations and behaviours for young people, and HeadStart Kent meeting the core principles of Ownership, Respect and Communication;
- Transparent evaluation approach for co-production with annual review of Levels;
- \* Co-production training for staff developed by young people.

Young people will lead the following in Phase 3:

- \* Young People's Shadow Board;
- \* Social Marketing programme;
- \* Young people's Pay It Forward opportunity;
- ★ Development of the local implementation of the Department of Health "You're Welcome" as a quality criteria for young people services;<sup>71</sup>
- \* Co-production training design and delivery;
- \* Young people leading services through their journey and to support other young people;
- \* Co-production locally in Groupings, community groups and through peer mentoring schemes.

Young people will be involved in:

- \* All other governance processes;
- \* Designing the specifications for training and services;
- \* The peer review for the schools and Kent-based quality mark;
- ★ Be involved in all recruitment and consultation of services linked to HeadStart Kent:
- \* The infrastructure to support other services to engage.

<sup>&</sup>lt;sup>70</sup> HeadStart Kent, "HeadStart Kent Phase 3", <a href="https://sway.com/oOHvbVizlb1SPgiW">https://sway.com/oOHvbVizlb1SPgiW</a> (2016).

Department of Health, "Quality criteria for young people friendly health services", <a href="https://www.gov.uk/government/uploads/system/uploads/attachment\_data/file/216350/dh\_127632.pdf">https://www.gov.uk/government/uploads/system/uploads/attachment\_data/file/216350/dh\_127632.pdf</a>, (Crown Copyright Department of Health, April 2011).

#### Whole school approach to emotional health and wellbeing

A whole school approach means building a positive culture in school that proactively promotes wellbeing and resilience across the whole school community. As part of the Partnership agreement with schools, HeadStart Kent will promote this approach based on the eight key principles set out in the Public Health publication "Promoting Children and Young People's Health and Wellbeing: A Whole School and College approach": 72 This includes:

- Leadership and management support;
- \* A school ethos and environment which promotes and supports mental health;
- \* The embedding of emotional health and wellbeing within the school and college curriculum:
- \* Students have a voice:
- \* Staff are continually developed to support their own wellbeing as well as young people's mental health;
- \* Young people's needs are identified and the impact of interventions is monitored:
- \* Schools and colleges work with parents and carers;
- \* Targeted support and specialist provisions are provided.

HeadStart Kent will have a key role in championing the principles underpinning the whole school approach; these are crucial to the effective implementation of the Universal Plus and Additional Levels. HeadStart Kent will use local best practice examples of success to share, publicise and encourage other schools to learn from them in a collaborative way. Descriptions of what an effective whole school approach would look like will be included in the Kent Resilience Toolkit.<sup>73</sup>

#### **Resilience Domains**

HeadStart Kent has adopted the Resilience Domains model developed by Professors Brigid Daniel and Sally Wassell which recognises six key factors that impact on resilience and the ability of children and young people to deal with adversity.<sup>74</sup> All three Levels will continue to promote and utilise the domains.

#### The intrinsic factors are:

- A secure base the child feels a sense of belonging and security;
- \* A sense of self-efficacy a feeling of mastery and control, along with an accurate understanding of personal strengths and limitations;
- \* Good self-esteem a feeling of worth, importance and competence.

#### The extrinsic factors are:

- \* At least one secure attachment relationship;
- \* Access to wider supports such as extended family and friends;
- \* Positive school and/or community experiences.

<sup>&</sup>lt;sup>72</sup> Lavis, P., "Promoting Children and Young People's Health and Wellbeing; A Whole School and College Approach",

<sup>&</sup>lt;a href="https://www.gov.uk/government/uploads/system/uploads/attachment\_data/file/414908/Final\_EHWB\_draft\_20\_0">https://www.gov.uk/government/uploads/system/uploads/attachment\_data/file/414908/Final\_EHWB\_draft\_20\_0</a> 3\_15.pdf>, (Crown Copyright Public Health England, March 2015).

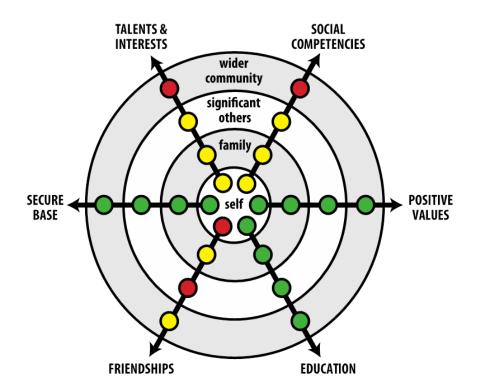
73
Appendix 18 and Appendix 18a HeadStart Kent Resilience Toolkit and Presentation

<sup>&</sup>lt;sup>74</sup> Daniel, and Wassell, Ibid.

The Domains based approach aims to increase the likelihood of positive outcomes for children by building a protective network around them. The framework is underpinned by six domains:

- \* Secure Base
- \* Education
- \* Friendships
- ★ Talents and interests<sup>75</sup>
- \* Positive values
- \* Social competencies

The domains are used to map an ecosystem with a young person, as set out in the diagram below, which enables practitioners and young people to map their assets and identify areas they would like to develop.



#### Resilience framework

HeadStart Kent will also utilise this Effective Practice Resilience Framework adapted and developed by Boing Boing.<sup>76</sup> We will use it to equip parents, practitioners and young people with mechanisms and practical opportunities that support young people through building their resilience strings (asset building).

Appendix 19 Rationale for using the Talents and Interests Resilience Domain
 Hart, A., Blincow, D., and Thomas, H., "What is Resilient Therapy", <a href="http://www.boingboing.org.uk/index.php/resilience-in-practice/what-is-resilient-therapy">http://www.boingboing.org.uk/index.php/resilience-in-practice/what-is-resilient-therapy</a>, [Accessed February 2016].

This approach will be used across all three Levels, enabling everyone supporting young people and families to explore practical tools and actions. Resilience is enhanced based on identified areas for practical action, and based on the principle that every young person needs at least one positive adult who can advocate for them. HeadStart Kent will promote this principle across the county and the importance of identifying and providing any support needed by the positive adult.

This Framework takes an ecological and universal approach to resilience and can be used by adults and children alike - resilient adults are better able to help children build resilience. Schools who consider resilience of staff as part of the whole school approach will be safer, happier places for children to thrive and support themselves and each other through adversity.

The Effective Practice Resilience Framework supports those working with young people and their families to help think strategically and practically about doing things resiliently. It uses five elements – Basics, Belonging, Learning, Coping and Core Self. Within each of these elements is a selection of evidenced based ideas or remedies, to draw on when trying to make a resilient move with a child or young person. HeadStart Kent will utilise these on a practical day to day basis with young people.

## **SECTION SIX**

# **HeadStart Kent Programme design for Phase 3**

HeadStart Kent will support both a Kent-wide and phased school Groupings approach to operationalise good resilience building practice. The approach will work on the principle that the Big Lottery Fund investment provides a unique opportunity for local communities to test, learn and embed approaches that will support long term effective system change, be sustained and shared. It will not duplicate any local services.

Over the five years of investment for HeadStart Kent Phase 3, Kent County Council will be the Accountable Authority for oversight of the Programme, ensuring it:

- \* Has a clear phased investment plan providing a balance between breadth and depth of work;
- \* Identifies the schools and community areas that will be prioritised over the five years;
- Maximises the learning from Phase 2 and the experience of the team to support local engagement and participation;
- \* Has secure strong partnership support for the approach from stakeholders, including Phase 2 and Phase 3 Groupings, which are clear on outcomes aims and the resources and actions required to achieve them;
- \* Has strong local political and executive leadership and support.

#### The three Level approach

HeadStart Kent will be the catalyst for wider system change as a vital element of Kent's Emotional Wellbeing Strategy for Children and Young People.<sup>77</sup> We will adopt a three Level approach to achieve our ambitions for young people in Kent. This will address the challenges of the size and organisational complexity of Kent, the needs of young people and families, and the ambition to make a real and lasting impact.

We know from the most recent Office of National Statistics survey of child and adolescent health in England that one in ten children need support or treatment for mental health problems. Half of all mental health problems have been established by age 14, rising to 75% by age 24. In an average class comprising 30 pupils aged 15, three could have a mental health disorder, ten are likely to have witnessed their parents separate, seven are likely to have been bullied and six may be self-harming.

<sup>77</sup> Kent County Council., "The Way Ahead..." Ibid.

<sup>&</sup>lt;sup>78</sup> Green, H., McGinnity, A., Meltzer, H., et al., "Mental health of children and young people in Great Britain 2004", <a href="http://www.hscic.gov.uk/catalogue/PUB06116/ment-heal-chil-youn-peop-gb-2004-rep2.pdf">http://www.hscic.gov.uk/catalogue/PUB06116/ment-heal-chil-youn-peop-gb-2004-rep2.pdf</a>, (Palgrave London, 2005).

Mental Health Taskforce, "The Five Year Forward View for Mental Health", <a href="https://www.england.nhs.uk/wp-content/uploads/2016/02/Mental-Health-Taskforce-FYFV-final.pdf">https://www.england.nhs.uk/wp-content/uploads/2016/02/Mental-Health-Taskforce-FYFV-final.pdf</a> (Mental Health taskforce to the NHS in England, February 2016).

Through investment, our three Level approach will generate benefits for all young people and schools in Kent. The Level 1, Kent-wide offer will provide the Kent Resilience Hub. In Level 2, Universal Plus more supportive activities will be carried out with a priority group of young people in schools and their local communities. In Level 3, Additional, we will develop a systematic way of identifying young people who are impacted by family domestic abuse and/or have experienced trauma including domestic abuse, parental mental health and substance misuse, who have suffered adversity and whose emotional wellbeing may be at risk. This Level will provide additional opportunities and activities to support resilience building and improve emotional health and wellbeing.

The HeadStart Kent three Level approach:

Level 3: Additional: A targeted approach aligned to Tier 2 support focusing on the early identification of young people who, as a result of domestic abuse and trauma may benefit from additional early support to help retain and/or build their resilience and emotional wellbeing to prevent adverse outcomes.

Level 2: Universal Plus to support system change within discreet geographies based on Groupings of schools identified on the basis of need across Kent, providing a range of opportunities to achieve the three conditions by young people to be resilient.

**Level 1: Kent-wide** activity to promote an understanding of the factors impacting on a young person's emotional and mental health wellbeing and the actions that can be taken to support them in building their resilience.

The case for establishing Level 2, Universal Plus and Level 3, Additional arises from analysis of young people in Kent impacted by trauma and specifically domestic abuse.<sup>80</sup> The national evidence and local data demonstrate that children and adolescents living with domestic abuse are at an increased risk of experiencing emotional, physical and sexual abuse, of developing emotional and behavioural problems and of increased exposure to the presence of other adversities in their lives such as bereavement; this risk persists even after the domestic violence has stopped.<sup>81</sup>

Domestic abuse is underreported in Kent; often, only when a family is in crisis or is engaged and trusts the person working with them the issue is disclosed. This has been verified by the Troubled Families programme. Where it is reported, there appears to be insufficient attention to the emotional needs of children and young

<sup>&</sup>lt;sup>80</sup> Appendix 20 HIGHLY CONFIDENTIAL HeadStart Supporting Document – Using the Vulnerable Children and Young People Model 2015

<sup>&</sup>lt;sup>81</sup> Holt S. et al., 'The impact of exposure to domestic violence on children and young people: A review of the literature' Child Abuse and Neglect 32( 2008) pp. 797-810.

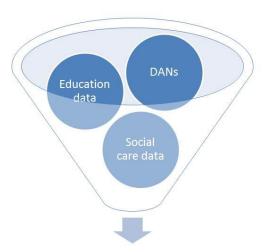
people impacted. Currently, 77% of Domestic Abuse Notifications (DANs) reported by the police to the local authority result in no further action. <sup>82</sup> Equally significant, there has been no protocol to share information about children and young people impacted by domestic abuse with universal services such as schools.

From service mapping across Kent, and work with young people affected by domestic abuse, we know that there is currently limited support available. <sup>83</sup> Where support is available, it is often not coordinated and is frequently focused on the needs of adults.

#### **How we Identified the Priority Schools**

The school Groupings have been identified through detailed analysis of Kent's integrated children's dataset, supplemented by local intelligence.<sup>84</sup> The steps included:

- \* Identifying secondary schools that had a high number of pupils with Domestic Abuse Notifications:
- \* Identifying secondary schools that had a many pupils with high risk ratings (score of four or more, in integrated dataset);
- \* From the above combined, a short list of secondary schools was produced therefore, this list is consistent with the Additional cohorts i) young people affected by DVA, and ii) young people who may be at-risk for other reasons;
  - Local intelligence was used to determine the feasibility this produced the final list of schools;
- \* Primary feeder schools, PRUs, and Grammar schools in the vicinity of the final list of schools, thus resulting in the school Groupings, based on Districts.



Integrated child-level dataset

From this list,

-

<sup>&</sup>lt;sup>82</sup> Kent County Council (September 2015), Quarterly Performance Report, Kent County Council Specialist Children's Services (Unpublished).

Appendix 17 Mapping Domestic Abuse Services for Young People in Kent

<sup>&</sup>lt;sup>84</sup> Appendix 21 HeadStart Kent School Grouping Detail Analysis for Phase 3 Spreadsheet

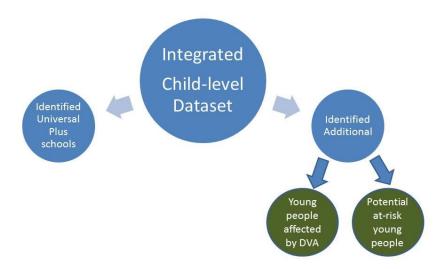
the 'local context' was assessed as the secondary school, known feeder primary schools, as well as the wider educational and local community contexts. The local PRU, local special school and local girl's Grammar school have been included within this local context, alongside identifying the communities in which the most vulnerable young people live.

The identified schools for year one of the HeadStart Kent Phase 3 Programme have been agreed with the Area Education Officers and the schools themselves. The remaining schools (from the original list of 25 schools) will be approached and worked with as part of nine school Groupings through the rolling Programme.

This analysis has informed where we need to focus Phase 3 activity and targeted support. As part of the development of the Phase 3 Programme, HeadStart Kent has worked with partners to develop systems and processes which enable the early identification of young people who are experiencing trauma, with particular reference to domestic abuse, and the sharing of information where appropriate. This will be set out in information sharing agreements and will ensure that concerns about a young person can be safely shared and acted upon.

From analysis of the services currently available, it is apparent that young people who have suffered trauma linked to domestic abuse have insufficient services to identify and support them. Where these services exist, they are not coordinated or are focused on the issues presented by the adult involved and not the young people.

HeadStart Kent will play a key role for system change at all levels to ensure young people are supported to build their resilience, and better cope in times of adversity, preventing the onset of behavioural and mental health problems. Where young people have suffered trauma they will be supported through the stages of their recovery.



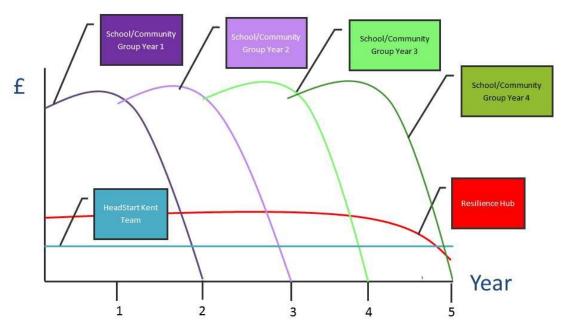
There will be sustained commitment within the Groupings locally, as after 18 months of initial investment from HeadStart Kent match funding will be provided for a half day post to continue the momentum thereafter.

The Groupings and potential young people benefitting are set out in the table below:

Tranche	Secondary school	Universal Plus	Special schools, PRUs and Grammars	Year 6	Minimum young people to have experienced DA	Maximum young people to have experienced DA and/or Trauma	Total
1	Swale	9720	4182	980	154	1368	16404
1	Gravesham	1805	3516	184	136	822	6463
2	Ashford	3197	3644	333	65	868	8107
2	Shepway	2264	3107	263	67	937	6638
2	Canterbury	1892	4094	205	62	830	7083
3	Thanet	5008	3081	644	102	1317	10152
3	Maidstone	2857	6069	345	55	780	10106
4	Tonbridge and Malling	1801	3607	246	29	511	6194
4	Dover	1993	2905	252	43	598	5791
		30537	34205	3452	713	8031	76938

The diagram below sets out how the school grouping element of the funding will be invested as each tranche is rolled out:

# Investment Fund Emerging Implementation Approach



#### Further details of the three Levels

#### Level 1: Kent-wide

The Kent-wide approach (Level 1) will ensure young people, families, practitioners and communities have an awareness of resilience, and possess the knowledge and skills to develop a positive culture where resilience and emotional wellbeing is strengthened within young people through their families, schools and local communities. This will be achieved across the whole of Kent by:

- Promoting the Public Health whole-school approach on emotional wellbeing and mental health;
- \* Introducing the Resilience Domains model as a way of mapping young people's resilience and establishing where they can be supported;
- \* Utilising the Kent Resilience Framework as a tool to empower schools and communities to make resilient moves, and assess how effectively the school or service promotes resilience and emotional wellbeing and the measures required to improve it;
- Underpinning the entire Kent-wide element of Phase 3 will be co-production with young people, parents, families and the community to ensure their voice is always listened to.

#### The Resilience Hub

HeadStart Kent will invest in a Resilience Hub to support schools and local community services responsible for raising awareness and promoting evidence

based practice to support children and young people's emotional wellbeing across Kent.

The Resilience Hub will be the mechanism through which all learning, sharing and refinement of HeadStart will be established across Kent. There is a specification for the Resilience Hub, and the benefits, which will include:<sup>85</sup>

- Developing, leading and quality-assuring the Resilience Toolkit and Quality Mark;
- Designing a HeadStart Kent catalogue a Kent-wide menu of support and awareness raising opportunities around existing resources to support wellbeing for both adults and young people;
- \* Developing, producing and rolling out the HeadStart Kent Training Programme (including Domains, Framework, Mindfulness, mental health awareness, recognising trauma and helping recovery);
- Developing and mobilising with young people the co-production training for adults:
- \* Developing a HeadStart Kent Best Practice Manual;
- \* Convening the expert group, when appropriate, to develop a robust evidence based Knowledge Repository of what works well for supporting resilience, mental and emotional wellbeing; developing and keeping the catalogue for schools updated emerging practice will also be referenced as we learn;
- \* The Resilience Hub will provide information, frameworks and tools to practitioners, VCS, schools and will be available to young people and parents.

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<sup>&</sup>lt;sup>85</sup> Appendix 1 Service Specification for the purchase of HeadStart Kent Resilience Hub

#### A HeadStart Kent Resilience Hub



Behaviour Change Campaigns: County-Wide, Social Marketing, Website, Social Media



Young People Delivering Coproduction Training



**Training:** Resilience Domains, Mindfulness, Mental Health, Recognising Trauma



An Expert Group



A **Resilience Toolkit** and Quality Mark



A **Catalogue** for Schools

The Kent Resilience Toolkit was developed from Phase 2. It will provide resources to all schools in Kent to explore a whole school approach to emotional wellbeing and resilience. 86 It will enable schools to:

- \* Assess their current climate with regard to emotional wellbeing and supporting resilience of the school community using an asset based approach:
- \* Develop an action plan with the wider school community (staff, pupils, parents and community groups);
- \* Navigate a menu of support to build a sustainable and effective suite of opportunities for young people and their wider community.

Embedding resilience into Personal, Social, Health Education (PSHE) curriculums will also be an important objective.

#### **Best Practice Manual**

HeadStart Kent will take a developmental action research approach, building on key learning captured from evidence and evaluation. One outcome will be the development of a HeadStart Kent Best Practice Manual. This will ensure that a comprehensive person-centred assessment and action plan tool (based on the Resilience Domains) is developed and can be rolled out consistently across Kent. It will be updated through the Resilience Hub as we learn from the Programme.

"By 2020 young people in Kent will have the coping abilities to support their own and peers' emotional health and wellbeing"

<sup>&</sup>lt;sup>86</sup> Appendix 18 and 18a HeadStart Kent Resilience Toolkit and Presentation

#### The Quality Mark

The HeadStart Kent Quality Mark will be awarded to schools who can demonstrate evidence of a robustly implemented whole school approach to resilience and emotional wellbeing. There will be three award categories for the Quality Mark - Emerged, Established and Advanced.

While the Resilience Toolkit and the Quality Mark will be managed by the Kent Resilience Hub there will also be support in schools to embed the Resilience Toolkit and achieve the Quality mark from the Kent County Council School Improvement Unit. This support consists of 2.5 days per HeadStart School, from the local School Improvement Officers over the period of the Programme.

As agreed in the Partnership Agreement with schools, HeadStart Kent will work to help them achieve the HeadStart Kent Resilience Quality Mark. This includes a requirement to extend the learning in schools to the wider communities of practice within and across all schools in Kent.<sup>87</sup>

#### **Expert Group**

The Expert Group will have expertise in young people's mental wellbeing and resilience and will be brought together when necessary from practice and academic settings. It will also include a young person who may have experienced trauma to include this perspective and knowledge. The group provide expertise on different development aspects of the Programme, such as the Resilience Domains approach, domestic abuse and Digital offer, and provide an external challenge to the Programme. They will be selected by the Executive Group and Young People's Shadow Board.

#### Training for schools and practitioners across Kent

All the training packages designed for Level 2 and Level 3 will be designed by the Resilience Hub in co-production with young people and practitioners, and delivered across different settings. It will also be available for all schools across Kent to purchase.

#### Level 2, Universal Plus

A dedicated project team will be established to work with each Grouping. Depending on the size of the Grouping, the team will consist of a Senior Project Officer, Early Help HeadStart unit worker, HeadStart Participation Workers and an apprentice. All Tranche 1 schools have confirmed their involvement in HeadStart Phase 3 if this Case for Investment is supported by the Big Lottery Fund.

Participating schools and community groups will enter in to a Partnership Agreement with HeadStart Kent. This ensures schools are fully aware of their commitment to HeadStart Kent, and the commitment expected from HeadStart Kent in return, and resources required (which HeadStart Kent will allocate to individual schools). Terms of reference will enable collaborative working to bring practice, learning and reflection to decide the way forward both during and after the Programme investment period. Schools in the first Groupings have embraced the proposal and given

<sup>&</sup>lt;sup>87</sup> Appendix 22 HeadStart Kent School Partnership Agreement for Phase 3

positive comment on the draft Partnership Agreement. The following table shows what HeadStart Kent and the schools in the Priority Groups will each offer in the Partnership Agreement:

HeadStart Kent Partnersh	ip Agreement with Schools		
HeadStart Kent Will Provide:	The HeadStart School Will:		
Kent's Resilience Approach and Quality Mark Resources and Support	Ensure Senior leadership is involved and a mental health lead allocated		
A Catalogue of Evidence Based Interventions	Implement a Kent Resilience Approach and Quality Mark		
Provide support to enable early identification	Ensure a systematic way of identifying young people: affected by adversity; accessing enhanced group work; accessing domains discussion; accessing one to one in school; accessing HeadStart Kent targeted intervention		
A Common Measurement Framework which is Accessible	Implement a Common Measurement Framework including obtaining parental consent		
Workforce Development: Youth Mental Health First Aid (2 day course, 3 hours light including course for parents in each Grouping x 2)	Implement HeadStart Kent CPD which includes an annual CPD through INSET for the whole school		
Domains Approach to building Resilience (Area Event learning the Domains, 2 day	Staff wellbeing: self-efficacy assertion, resilience, relaxation and Mindfulness		
training, ongoing support through the Resilience Hub).  Mindfulness Training (Introduction, Teach the Teacher and Train the Trainer courses)	Resilience training for the whole school: Youth Mental Health First Aid (YMHFA); Mindfulness; Co-production; In depth staff training on HeadStart approaches and programmes		
Provide: Family Work (for specific groups in school) Adult Mentoring Support into community assets Social marketing Co-production	Activities in school must include: Implement a HeadStart Kent pathway; Develop a Safe Space; Develop peer mentoring programmes; Student voice; Named pastoral support for every child; Family work		

HeadStart Kent Level 2 will provide a number of developmental and training programmes for staff, activities for young people and their families, and community services. This will ensure young people, the wider workforce, community and the VCS are aware of the importance of developing resilience. The training will include Youth Mental Health First Aid, Mindfulness, co-production methods, the Domains Resilience Model, trauma and domestic abuse.

These activities will play a key role in creating and sustaining the system change young people need. Embedded within the Groupings of schools identified on the basis of need, they will provide a range of opportunities to achieve the three goals young people told us helps them to be resilient. Staff will be more confident with improved knowledge, skills base and ability to use these approaches both within schools and in the wider community.

Where a pupil is identified as impacted by domestic abuse (from HeadStart Kent or internal staff) a trained member of school staff, who has a good relationship with the young person, will discuss and map their needs using the Resilience Domains. If appropriate this will enable schools to organise activities, encourage and facilitate young people to navigate their way to support. This will include safe spaces, online counselling, peer mentoring, group work, and enhanced Mindfulness.

Where the young person needs more intensive specialised support, the school will direct them to Additional support. There will be a Senior Project Officer coordinating activities to all schools and communities within the Grouping, quality assuring the work and ensuring the outcomes are delivered and evaluated.

#### Youth and parents: Mental Health First Aid

Youth Mental Health First Aid is an internationally recognised training course, designed specifically for those who teach, work and live with young people aged 8 to 18 years old. This course has been used during HeadStart Kent Phase 2 and from the evaluation - 78% of attendees have used the training to help or support young people.<sup>88</sup>

Youth Mental Health First Aid Training will also be organised for parents, delivered through a commissioned provider, and will take place in the appropriate local setting. <sup>89</sup> We will offer a three hour lite course, training for parents and two day comprehensive Youth Mental Health First Aid training.

#### Mindfulness training

For Phase 3 the HeadStart Kent Programme will introduce Mindfulness training into the school Groupings and the local community settings. There are different Mindfulness courses available; Introduction, Teach the Teacher and Train the Trainer. We will offer all three in the HeadStart Kent areas as well as practice supervision from the provider ensuring quality and sustainability.

Research into Mindfulness approaches with children and adolescents have reported improved focus and concentration and reduced stress. A recent non-systematic

<sup>&</sup>lt;sup>88</sup> Appendix 23 Youth Mental Health First Aid Evaluation Survey Spreadsheet

<sup>&</sup>lt;sup>89</sup> Appendix 24 Service Specification for the Purchase of Mental Health First Aid

<sup>&</sup>lt;sup>90</sup> Appendix 25 Cognitive Behavioural Approaches and Mindfulness Document

review of research in to Mindfulness for children and young people concluded interventions that nurture Mindfulness may be a feasible and effective method of building resilience in universal populations of children and youth and in the treatment of disorders in clinical populations.<sup>91</sup>

Mindfulness supports young people to:

- \* Understand the connections between thoughts, emotions and behaviours;
- Reflect on everyday challenging situations and some of the negative or selfdefeating thinking patterns that can emerge;
- Identify more helpful ways of thinking or alternative ways of viewing challenging situations.

Mindfulness can be implemented widely in the timeframe of HeadStart Kent, with strong evidence of its efficacy with the young people supported in Level 2. Training of staff will enable students to be introduced to Mindfulness to gain skills and use it daily. The aims will be:

- \* For all young people to know about Mindfulness;
- For most to have enjoyed it;
- \* For many to use it now and again;
- \* And some to practice daily;
- \* For as many as possible to remember it.

Young people find that Mindfulness helps them to more effectively achieve goals they have right now - such as focus in class, achieve in sport, enjoy a leisure activity, or get on with others. Therefore Mindfulness can become a lifeline to help pupils deal with difficulties. An example of a school in Kent currently using Mindfulness is demonstrated in a BBC news report. 92 Mindfulness will also be offered to parents and staff who need it, through our trained staff and community groups.

#### Resilience Domains Approach to building resilience

Each HeadStart Kent Grouping will run an event on learning about the Resilience Domains model and the benefits of this model. Staff will also be offered two days additional training on the Resilience Domains to use as an asset to map young people's resilience and support building their resilience in a focussed way. Staff will be offered ongoing support in using and utilising the Resilience Domains through the shared learning in the Resilience Hub.

#### Co-production training

Co-production is core to the HeadStart Kent Programme - young people's feedback has continually shaped the services available to them. From Phase 2 learning, we know that co-production is not well embedded across services in Kent. Therefore, young people have proposed that they will, in Phase 3, develop co-production

<sup>&</sup>lt;sup>91</sup> Kallapiran, K., Koo, S., Kirubakaran, R., and Hancock, K., "*Review: Effectiveness of Mindfulness in improving mental health symptoms of children and adolescents: a meta-analysis*", Child and Adolescent Mental Health, Vol 20, No 4, p182-194, 2015).

<sup>&</sup>lt;sup>92</sup> BBC Breakfast News, "*Teacher says relax*", <a href="http://www.bbc.co.uk/programmes/p016xnvb">http://www.bbc.co.uk/programmes/p016xnvb</a>, [Accessed February 2016].

training delivered by them to adults (also linking to the operationalisation of the You're Welcome Quality Standard for Kent's youth-friendly health services). 93

We endeavour to reach senior leaders within schools and communities, pastoral leads and all statutory and voluntary sector partners. Co-production will be a specific requirement within the HeadStart Kent Quality Mark for resilience and emotional wellbeing.

#### Trauma and domestic abuse training

As part of the training offer made by the Kent Children's Safeguarding Board, HeadStart Kent will, within the Partnership Agreement, make clear that an allocated member of staff, such as the designated child protection coordinator and mental health lead at each school attends domestic abuse and trauma awareness training.

#### **Social Marketing**

Social Marketing will be used across all three Levels but more intensively in the school Groupings. It will be a multi-faceted campaign, delivered through internal and external channels.

The campaign will utilise cognitive behavioural approaches language (Mindfulness), whilst conveying the message of "it's ok" to explore key themes such as self-esteem, mental and emotional wellbeing and domestic abuse. This will build into aspects of the HeadStart Kent Programme including the school PSHE programme, and HeadStart Kent peer mentoring programmes. An overarching campaign will be disseminated universally to the wider community through the use of traditional marketing approaches whilst signposting and aligning with existing campaigns. The whole campaign will retain simple, yet effective branding providing young people with a clear identity and providing the links across home, school, community and the digital world.

In the community and schools, posters will be disseminated with messaging such as "it's ok to speak up' or 'it's ok to be you', reinforced by Peer Mentors. This will be supported by social media campaigns and merchandise shared at engagement events; parent groups will be engaged to start conversations with children and young people. Finally the arts and culture sector will provide community events that are fun and engaging, to explore the community relationship.

#### Approach to parents

HeadStart Kent has already delivered a number of activities with parents and families, through targeted group work, Social Marketing and engagement events such as #DigitalDetox, insight work through creative arts organisations and a HeadStart outdoor activity day for families.

In Phase 3 HeadStart Kent will provide awareness raising opportunities for parents; further, through Social Marketing influence parents to better support their children's emotional wellbeing. Through schools, youth hubs, children's centres and VCS organisations HeadStart Kent will communicate and share the HeadStart four key approaches with parents.

<sup>&</sup>lt;sup>93</sup> Department of Health, (April 2011), "Quality criteria for young people friendly health services", Ibid.

From the insight work we have undertaken to develop Phase 3, parents have told us they would like opportunities to develop their self-efficacy skills so they can better support their children. <sup>94</sup> HeadStart Kent will take a community development and peer support approach in engaging those harder to reach families to have positive outcomes. We will enable parents to provide each other with support leading to sustained positive change.

When undertaking insight work in women's refuges, HeadStart Kent learned two key lessons:<sup>95</sup>

- Young people in the family often have to wait a while before a school place is available, and do not have any local networks. To address this, HeadStart Kent will work with schools and local youth hubs to provide mentoring and enable access to services;
- 2. Families often found themselves completely isolated with little financial or material support. Parents have asked for 'structured distraction' such as creative arts they find beneficial, both as an individual family and with other families. This is a platform to build local networks so they can feel supported.

HeadStart Kent will address these issues by bringing local infrastructure together, informing women's refuges about services available and providing a resource to support work with parents around involvement in local activities and developing new networks. Through co-production with parents and young people, HeadStart Kent will continue to support parents and in the Kent-wide, Universal Plus and Additional Levels to support the mental health and emotional wellbeing of young people.

#### Approach to communities

We know how important it is to promote asset-based practice within communities to strengthen factors which support good health and wellbeing, protect against poor health and foster communities and networks that sustain health. <sup>96</sup>

The links connecting people within their community provides a source of resilience, access to support, opportunities for participation and added control over people's lives - all of which contribute towards a higher level of wellbeing as a result, and therefore more positive health outcomes. <sup>97</sup> People with stronger community networks and relationship links are therefore more likely to nurture, sustain and protect the assets within their community, creating a sense of ownership and enhancing their wellbeing.

The recent Public Health report on community-centred approaches for health and wellbeing states that "community life, social connections and having a voice in local

<sup>&</sup>lt;sup>94</sup> Light Vessel 21, Spaghetti Weston and Kent County Council, (2016), "pARTicipate; Creative Insight for HeadStart Kent", (https://vimeo.com/152922104), Ibid.

<sup>&</sup>lt;sup>96</sup> The Health Foundation, "*Head, hands and heart: asset-based approaches in health care*", <http://www.health.org.uk/sites/default/files/HeadHandsAndHeartAssetBasedApproachesInHealthCare.pdf> (Health Foundation summary and analysis, April 2015).

<sup>97</sup> Ibid.

decisions are all factors that underpin good health". <sup>98</sup> Assets within communities, such as skills, knowledge, social networks and community organisations, are building blocks for good health. <sup>99</sup> Community-centred approaches mobilise assets within communities, increasing people's control over their health and wellbeing and lives. <sup>100</sup> There is a compelling case for focussing on person and community centred ways of working, encouraging strengthening communities, volunteer and peer roles, collaborations and partnerships and enabling access to community resources. <sup>101</sup>

International resilience expert Professor Michael Ungar has demonstrated in his research the need for resilience research and practice to be culturally relevant. Translating this into practice, HeadStart Kent believes the best people to champion and provide strong local leadership should be identified from the communities in which the children and young people live.

HeadStart Kent will promote Asset-Based Community Development (ABCD); a theoretical framework which drives a process for community building. <sup>103</sup> We will locate the assets, skills and capacity of the local community through the Local Project Officer, working with the local community and deploying Participation Workers, building links with local schools, VCS organisations and community members, working directly with young people and building strong relationships and networks, promoting the HeadStart Kent Mission and encouraging local coproduction of the HeadStart Kent Programme. HeadStart Kent's community approach will harness and develop local community assets so they can foster the resilience strings for our vulnerable young people including:

- \* Local voluntary sector partners to review their community offer, identify gaps and areas for development and take action;
- \* Existing community groups to establish their capacity e.g. arts organisations, and link with the vulnerable families and young people, through training and resource allocation:
- \* Alongside District Councils developing new community capacity offering support and training to deliver new community services in the voluntary sector:
- \* Alongside Kent Community Wardens and Police staff offering support and training to build young people's resilience through early identification and positive interaction;
- \* We will offer VCS organisations access to all the training and will provide resources to those community groups who are working alongside our vulnerable young people as volunteer mentors. The VCS will be identified through expressed needs and interests of young people. This may range from the local volunteer football coach, or specialised provider such as the

Public Health England, "A guide to community-centred approaches to health and wellbeing", <a href="https://www.gov.uk/government/uploads/system/uploads/attachment\_data/file/402889/A\_guide\_to\_community-centred\_approaches\_for\_health\_and\_wellbeing\_\_briefi\_\_\_.pdf">https://www.gov.uk/government/uploads/system/uploads/attachment\_data/file/402889/A\_guide\_to\_community-centred\_approaches\_for\_health\_and\_wellbeing\_\_briefi\_\_\_.pdf</a> (Public Health England Crown Copyright, 2015).
<sup>99</sup> Ibid.

<sup>100</sup> Ibid.

<sup>101</sup> lbid.

<sup>&</sup>lt;sup>102</sup> Ungar, M.; "Nurturing Hidden Resilience in At-Risk Youth in Different Cultures Journal of the Canadian Academy of Child and Adolescent Psychiatry", (2006, 15 (2): p53-58).

<sup>103</sup> The Health Foundation, Ibid.

- Asian women's mental health group, where insight work took place during Phase 2:
- \* HeadStart Kent is proposing to work closely with the local VCS to develop adult mentoring projects for young people, whose relationship is not time limited. This is to enable those community assets to be developed and sustained:
- \* We will establish the principle that every contact counts. When any service comes into contact with a family or young person with a need (even if their service does not particularly meet that need) they will foster the resilience through enabling that young person or family to navigate and negotiate the resources they require;
- ★ HeadStart Kent is now involved in the Task Group to explore the unmet needs of our Gypsy Roma Travellers, and will make sure that the provision which has been developed addresses their emotional wellbeing.

Assets within the community can work together to improve health and strengthen resilience. 104 Social networks can have a significant impact on health, and social support is particularly important in increasing resilience. <sup>105</sup> According to the recent King's Fund publication, "asset-based approaches seek to bolster wellbeing at individual and community levels, helping to increase resilience to the wider corrosive effects of the social determinants of health and risky behaviours." 106 To build social capital and utilise community-based assets to improve health and wellbeing, the publication recommends: 107

- \* Supporting volunteering which is beneficial for health and wellbeing through reducing social isolation and loneliness;
- \* Creating 'health champions' to reach community members through their work, achieving health outcomes and promoting health messages;
- \* Supporting social network interventions:
- \* Work with other public services to develop ABCD.

#### HeadStart Kent will therefore:

- \* Ensure the participation of young people and families through the Participation Workers to ensure their voice is heard and to encourage local leadership;
- \* Develop local volunteer mentoring schemes for young people through the local VCS and volunteer mentors;
- Develop appropriate family support focused on the young person's emotional and mental wellbeing.

HeadStart Kent's ambition is that resilience and wellbeing will become supported through ABCD, achieving change at a local community level which will enhance young people-centred approaches through the combined effort of people within the community. Instead of focusing services around deficit, asset-based approaches

<sup>&</sup>lt;sup>104</sup> Buck, D. and Gregory, S., "Improving the public's health; A resource for local authorities", <a href="http://www.kingsfund.org.uk/sites/files/kf/field/field\_publication\_file/improving-the-publics-health-kingsfund-">http://www.kingsfund.org.uk/sites/files/kf/field/field\_publication\_file/improving-the-publics-health-kingsfund-">http://www.kingsfund.org.uk/sites/files/kf/field/field\_publication\_file/improving-the-publics-health-kingsfund-">http://www.kingsfund.org.uk/sites/files/kf/field/field\_publication\_file/improving-the-publics-health-kingsfund-">http://www.kingsfund.org.uk/sites/files/kf/field/field\_publication\_file/improving-the-publics-health-kingsfund-">http://www.kingsfund-publics-health-kingsfund-</a> dec13.pdf> (The Kings Fund Publishers, 2013). <sup>105</sup> Ibid.

<sup>106</sup> Ibid. 107 Ibid.

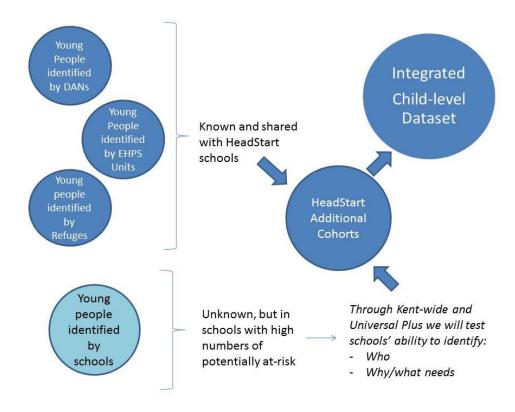
promote a sense of wellbeing which can support mental health through the quality of relationships within local communities. 108

Communities are vital building blocks for health and wellbeing; at an individual level joining social activities, connecting to others and making decisions helps keep us well, and on a collective level, confident and connected communities provide a social fabric enabling the conditions for people to flourish. A strong HeadStart Kent local community will result in young people, their peers, families and the community as a whole being confident in having the ability to tap into social support and networks, have a voice, shape services, take an active part in community life and sustain this into the future. 110

#### Level 3, Additional

During the Programme and additional to the DANs, young people receiving services through HeadStart Kent Level 3 will also be identified through:

- \* Information provided to schools and families
- \* Disclosure by young people in universal services;
- \* Young people's behaviours changing with a history of trauma;
- \* Young people living in refuges;
- Parents identified as being in abusive relationships;
- \* Those known to mental health and substance misuse services.



<sup>&</sup>lt;sup>108</sup> Health Foundation, Ibid.

<sup>110</sup> Ibid.

<sup>109</sup> Public Health England, "A guide to community-centred approaches to health and wellbeing", Ibid.

Once identified (as above graphic), schools will be informed by HeadStart Kent about the issues through information sharing protocols. If there is concern about a young person, a worker (such as a teacher) identifies a need for additional support, HeadStart Kent will organise domain-based discussions with young people and their families to identify this. It will be facilitated by either the school, or a practitioner who has a good relationship with the family and young person.

Young people and families will be offered support including:

- \* Systemic family work;
- \* Purposeful mentoring this includes Mindfulness approaches;
- Bespoke support around domestic abuse and/or access to activities which devleop their talents and interests.<sup>111</sup>

The support for a young person will be determined based on their bespoke needs and may include one to one support, one to one mentoring and group work with peers in the school or community setting.

#### **Purposeful Activity-based Mentoring and Intensive Support**

Mentoring has the potential to establish a set of relations between young people and their social world which enhances adolescent's life skills, provides opportunities for their making valued contributions to self and society and promotes positive youth development.<sup>112</sup>

There will be two approaches in Phase 3;

- \* Purposeful Mentoring (young people accessing talents and interests Domain
- Intensive Support (young people who have experienced trauma and/or domestic abuse).

The Purposeful Mentoring aims to support young people who have limited engagement from an appropriate adult to build their assets and aspirations. Mentoring is helpful when there is a clear purpose and action; volunteer mentors will undertake this role.

The Intensive Support approach builds on the programme the Resilience Mentors delivered through Phase 2, which has demonstrated a positive impact on young people's emotional wellbeing and positive behaviour. This will be available to children and young people (aged 10-16) who may have a high number of risk factors (specifically those impacted by Domestic Abuse) and a low number of protective factors (Resilience Domains) which will now, or in the future, impact upon their level of resilience.

The need for ongoing support following completion of intensive support and mentoring as emphasised in the HeadStart Kent Phase 2 Evaluation is a particular focus for HeadStart Phase 3. Whilst for the majority of children their home

<sup>&</sup>lt;sup>111</sup> Appendix 19 HeadStart Kent Rationale for Using Talents and Interests Resilience Domain

<sup>&</sup>lt;sup>112</sup> Dubois, D.L, "Handbook of Youth Mentoring," (University of Texas at San Antonio – Second edition, 2014).

environment is an opportunity which families actively promote and nurture talents and interests, some are denied this. A specific role of the Intensive Support and mentors will be to facilitate the young people's resilience strings by enabling them to access talents and interests. A handover process following completion of planned sessions to schools pastoral support, families, community groups and other services will take place so to ensure maintenance of these talents and interests.

HeadStart Kent will work with and provide support to the young person's broader network including their family, school, and community links, to identify and address underlying issues. At this Level, it is also likely to require close partnership working with a range of additional professionals including Social Workers, Youth Justice and Educational Psychology staff. These workers will have access to all the HeadStart Kent information and training.

We recognise that there are young people not engaged with any universal settings. Local HeadStart Kent project leads will work with communities to engage these young people and support access to opportunities available to them.

#### **Insight development**

Level 3 will primarily support the development and recovery of young people suffering from trauma. However this work will also enable further insight into:

- \* The profile of young people exposed to domestic abuse for whom there are negative emotional and behavioural consequences and who would benefit from intervention;
- \* How to support the development of an outcomes approach to interventions, to reduce the impact of exposure to domestic abuse, informed by the views of young people and building on the domains;
- \* How to evaluate the intervention in regard to trauma caused by domestic abuse.

This insight will be valuable in developing future approaches and services across Kent, and may be of interest nationally.

#### **The Digital World**

Through work with young people and subsequent discussions, HeadStart Kent will approach the digital world as an integral part of the Programme rather than a separate strand. A number of Digital opportunities will be considered as part of HeadStart Kent Phase 3, which will include:

#### Online support and Mindfulness counselling

Young people have been explicit in their need for choice in additional support. Online support and Mindfulness counselling can be offered to young people both with adverse childhood experiences, and those that have been identified by HeadStart Kent schools. It can also be offered as a series of sessions like traditional counselling, and can be supported by group work, face to face and peer ambassadors.

Online support and counselling can be offered at a time that suits individual young people, and for many, the online approach is preferable. For some who are not yet confident in discussing their feelings face to face, online support can be a bridge - and if appropriate, later engage in face to face counselling and therapies. Recent studies have shown that in the medium term online psychotherapy yields better results, and psychotherapeutic services on the internet are an effective supplement to therapeutic care. <sup>113</sup>

The online support and counselling element of the HeadStart Kent Programme will be subject to competitive commissioning. As such HeadStart Kent will set out its requirements based on the views and needs of young people, and learning gleaned from across the country. In addition, HeadStart Kent will signpost young people to services it is confident in - for example Get Connected and ChildLine for drop-in online support. These services will be reviewed and new options added based on feedback from young people and reviews of the outcomes they support.

Kent 0-25 website: Young people, families & community access to positive activities, advice information and support

The website is developed and already includes basic information. Our ambition is to develop it to a higher level to become the most comprehensive place to search for advice, useful links, activities and services for young people, families and local communities across Kent. The development will continue to be based on coproduction with young people and their families to ensure the website is meeting the needs of all, especially those in need of additional support.

#### Workforce training

One of the key ambitions of HeadStart Kent is for the wider workforce to be fully equipped with the knowledge and skills to provide high quality and consistent support to young people. The wider workforce comprises a variety of agencies, providers and organisations across schools, Early Help and Specialist Children's Services, youth clubs, health services, housing services, Police and many others.

It is important that staff from these services have a good level of awareness of the emotional and mental wellbeing of young people, that they are trained in identifying issues and the best ways in which to respond. Every contact with a young person is an opportunity to provide care and support to many young people. Part of the system change HeadStart Kent is determined to achieve is that all staff, when they have contact with a young person suffering anxiety, distress or trauma, make sure appropriate support is provided and that the response is timely and effective.

The number of staff who require training across different organisations in Kent is huge, and much can be delivered through e-learning. We will promote existing elearning programmes such as MindEd; further where HeadStart Kent identifies unmet training needs partner organisations will fund this using their own training budgets.

Many of the concerns raised by staff across Kent regarding young people relates to e-safety. Through providing good training to the wider workforce, staff will be

<sup>&</sup>lt;sup>113</sup> Wagner, B., Horn, B.A., Maercker, A., "Internet-based versus face-to-face cognitive-behavioural intervention for depression: A randomized controlled non-inferiority trial", (Journal of Affective Disorders, 2013).

empowered to work with young people around the digital world and other issues that can adversely affect young people. This includes support for families with access needs as well as those who would not traditionally access this type of support.

The wider workforce will also be trained in digital policies and procedures covering the use of staff personal online accounts, social media and electronic contact with young people. This will provide a clear and consistent approach by staff, recognised by young people.

#### Development of a 'mental health in the digital world' simulation

HeadStart Kent will support the development of a resource that explores the impact of the online world on mental health. The proposed simulation will explore cyberbullying, domestic abuse, self-harm, eating disorders and self-esteem. The product will be developed for use with young people in one to one settings and for groups from ten years and up, and in such a way that it can be made age appropriate for the audience. The resource will also be suitable for use with families, communities, by teachers and the wider workforce. Through the use of the simulation, discussion will be opened between professionals and young people, as well as peer to peer.

#### **Digital nutrition**

HeadStart Kent has learned from research into the impact of digital interaction and attachment disorder, exploring the benefits and negative outcomes on emotional wellbeing and secure base. Recent serious case reviews have cited the use of digital technology as a possible negative contributing factor.

Through our contact with young people and families, HeadStart Kent will promote the concept of developing a healthy balanced relationship with technology. HeadStart Kent will promote and support young people in seeking out activities that can restore a healthy balance and encourage them to enjoy fulfilled and active online and offline lives.

#### Digital champions and ChildNet digital leaders programmes

HeadStart Kent will strongly promote key digital programmes such as the development of digital champions and digital leaders as part of the Kent-wide offer. Digital champions raise awareness and teach skills about the digital world, from how to use technology, through to the latest developments including e-safety and digital citizenship. HeadStart Kent will promote opportunities for young people, families and practitioners to become digital champions in Kent enabling technology to be embraced and used positively.

HeadStart Kent will also support and encourage schools to join the ChildNet digital leaders programme, a pupil-led online safety programme. Schools will have the opportunity to access a new ChildNet online platform, giving young people opportunities to increase their knowledge, achieve recognition and collaborate with digital leaders in schools across the UK.

#### **Programme summary**

The HeadStart Kent Programme summary diagram below outlines the activities proposed. It builds on the core approaches for the Programme, and relates activities

directly to the outcomes they aim achieve. This can be cross referenced with the detailed Theory of Change. 114

	APPROACH TO DELIVERY								
OUTCOMES		Kent-wide work to support resilience	Universal Plus - around defined geography (school focus) maximising potential	Additional - Young people impacted by trauma (including domestic abuse)					
	"People around me understand wellbeing and how to promote it"	<ul> <li>Kent professionals resilience Hub focusing on:</li> <li>Workforce Development</li> <li>Delivery of training</li> <li>User-led design approaches</li> </ul>	<ul> <li>Resilience Toolkit and Quality Mark</li> <li>Training – young people, families, professionals</li> <li>Peer mentors</li> <li>Access to activities e.g. arts and culture</li> </ul>	<ul> <li>Resilience Toolkit and Quality Mark</li> <li>Awareness raising</li> <li>Enhanced training and mentoring</li> </ul>					
	"My wellbeing is not impacted by pressure to achieve and 'be perfect'"	<ul> <li>Behaviour change campaign</li> <li>Resilience 'everybody's business'</li> <li>Campaigns</li> <li>Promote opportunities to shape/influence services</li> </ul>	<ul> <li>The HeadStart catalogue:</li> <li>Peer mentors</li> <li>Safe spaces (school and community)</li> </ul>	<ul> <li>Additional offers to enable access to universal and bespoke support</li> <li>Youth led awareness raising</li> <li>Healthy relationships work</li> <li>Mindfulness</li> </ul>					
	"There is always someone for me to talk to"	<ul> <li>Tools to support own resilience</li> <li>"You're Welcome"</li> <li>Structured distraction</li> <li>Every conversation counts</li> </ul>	<ul> <li>Personal approaches including:</li> <li>Facilitated family</li> <li>Peer and adult mentors</li> <li>Online counselling</li> </ul>	<ul> <li>Domestic abuse and trauma training</li> <li>Family activities around talents and interests</li> <li>Systemic family work</li> <li>Volunteer/Adult mentors</li> <li>Youth Mental Health Training</li> </ul>					

<sup>114</sup> Appendix 9 HeadStart Kent Detailed Theory of Change Phase 3

## **SECTION SEVEN**

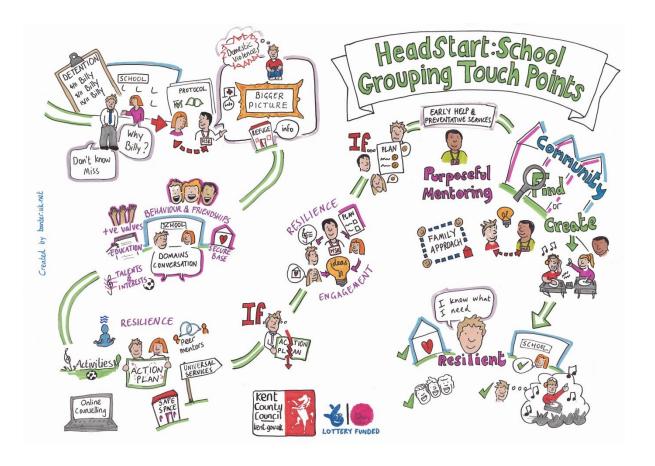
# **Programme Levels and the young person's journey**



The HeadStart Kent illustration above sets out the Programme Levels and activities which form the Phase 3 Programme proposal. Access points for young people in schools to engage with Universal Plus and Additional Levels are identified in the HeadStart school Grouping touch points (illustration below).

Young people will be identified through touch points - mainly through information given to schools, and through Domain-based conversations with young people and peers through their trusted adult. We also interface with other services supporting young people. For those young people not engaged in school, HeadStart Kent Early Help and Participation Workers will identify young people through existing community resources, and provide them with support to increase resilience and help improve their health and wellbeing.

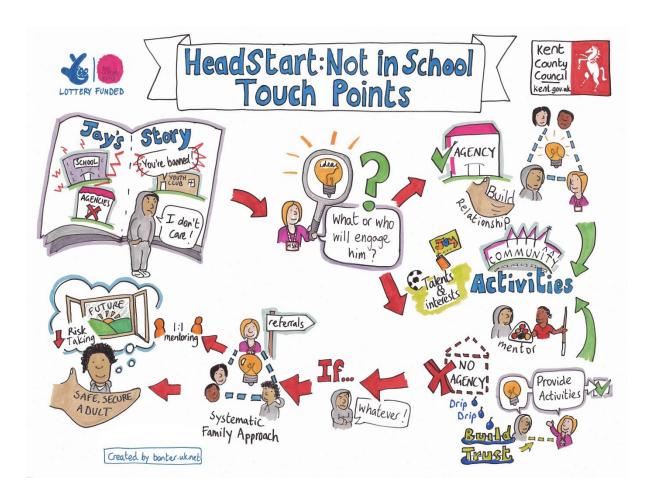
The graphic below illustrates how HeadStart Kent could make a difference for young people through these touch points in school. For more specific detail about the touch point process for HeadStart Kent schools, see Appendix 27.<sup>115</sup>



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<sup>&</sup>lt;sup>115</sup> Appendix 27 In School Pathway Diagram for Phase 3

The graphic below illustrates how HeadStart Kent could make a difference for young people not in school. For more specific detail to be used in non-school settings see the touch point process in Appendix 28.<sup>116</sup>



We will promote the principle that young people receive support in universal services and in the community. They would like to feel opportunities are "normalised" and access services appropriate to different levels of need, and more easily return to universal or as one young person described it "every day (ordinary) magic".

## The journeys

The following journeys are based on real families who were referred to a range of services in Kent. They have been adapted to demonstrate the new HeadStart Kent services families will receive at the three Levels, and the positive outcomes we are striving for. Beyond these detailed journeys, there is a selection of some additional journeys which young people have drawn through their exploration of the benefits of HeadStart.<sup>117</sup>

<sup>&</sup>lt;sup>116</sup> Appendix 28 Not in School Pathway Diagram for Phase 3

Appendix 39 HeadStart Kent Young People's Journey's Phase 3

Anne aged 1	5
Background	Anne had become isolated and withdrawn over recent months. Her attendance at school was poor and her predicted grades were C-D. Gemma, a classmate of Anne, told their teacher that she was worried about Anne but did not know what was wrong.
Kent Wide	The school had implemented the HeadStart Kent-wide approach to resilience and had been awarded a Quality Mark. The teacher used the Resilience Domains as a tool to map Anne's protective factors and identified that she felt lonely most of the time and thought nobody liked her. Although Anne said that Gemma was kind, she did not feel that they were really friends. The teacher spoke with Gemma and knowing she lived near Anne suggested they walked to school together. This worked well and they became friends.  The teacher also suggested Anne went to a Mindfulness group run in the school and Anne completed the course of five sessions. This helped her with self-esteem and made her feel more positive in and outside school.  Through the Kent-wide Resilience Toolkit the school established Peer Mentoring, and the teacher suggested that Anne and Gemma take up the training and become Peer Mentors.
Universal Plus	Not Needed
Additional	Not Needed
Outcomes	Anne is a more confident young woman who leads a more fulfilling and social life; she feels better about herself and more able to cope with difficulties. In addition she has improved her GCSE grades which are now predicted at B-C. By helping Anne, Gemma has learned lots of skills and enjoys using them to help others.
	Anne is a more confident young woman who leads a more fulfilling and social life; she feels better about herself and more able to cope with difficulties. In addition she has improved her GCSE grades which are now predicted at B-C. By helping Anne, Gemma has learned lot

## Anne's perspective

"I didn't think anybody wanted to know me, I didn't think they would notice if I wasn't there. I felt very lonely. I wasn't doing very well at school, it was just so difficult all the time, and I tried I really did, but it didn't make any difference so I just gave up. Gemma was in my class. We lived down the same road, just three doors apart and when we were younger we used to play together, it was really good fun. But Gemma had new friends, and she was really popular, so I didn't think she wanted to walk to school with me anymore. We stopped some time back, I would hang around at home a little longer so she wouldn't feel like had to walk with me."

"One day when I did go to school - I used to tell Mum that I had stomach ache so I wouldn't have to go - we had this class where we looked at our domains. I didn't know about it before but it was really easy, not like Maths, we just had to think about what our lives were like. It made me feel really sad though. I had to talk about friendships, and I marked it with a red sticky dot. I didn't have friends. Gemma was sat with Keelie and Jen and they were laughing together. Sir was looking at everyone's work and when he came to me he asked why I was red for friends, I didn't know it but Gemma had put me down with Keelie and Jen as one of her close

friends. I cried, right there in class. I don't know why, I should have felt happy about this."

"The next day, Gemma knocked for me on the way to school. I wasn't ready so I had to run around like mad to get everything together, but she waited. The next day I made sure I was ready, and every day since for the last six months."

"I went to a group at school to learn about Mindfulness. I enjoy this and they gave me a book to develop my skills in using it when I get worried about stuff. Gemma and I also signed up as Peer Mentors, it was Sir's idea. He said we were an example to the rest of the school and we could support other young people. I don't think I really knew what he meant, but when I attended the training, suddenly I did, by being a Peer Mentor I could help others that felt like I had."

"I am still not very good at Maths, but I'm getting there. Gemma, Keelie and Jen and I all meet up to do our homework now so that helps, especially as Keelie is really good at maths. We also go to town at the weekend and just hang out, and that's good."

## Anne 16

## How HeadStart Kent will make a difference

The school had recently completed an assessment, using the HeadStart Assessment Toolkit, and with the help of students had created an approach to ensure that emotional wellbeing and supporting resilience was part of their everyday work. It was this approach that had enabled Gemma to feel that she could raise her concerns, and know that action would be taken. The school had also accessed HeadStart Kent campaign resources, and promoted the message "It's ok" through posters, tutor time, and through a young person led campaign. The school had embraced Mindfulness and encouraged their pupils to use it.

Anne benefited from HeadStart by attending a school that had initiated the Kent Resilience Toolkit. Although not within a priority Grouping, the school had recognised the benefits of paying to train staff around the Domains, Mindfulness and Youth Mental Health First Aid so that they felt equipped to initiate conversations with students, with confidence.

## Luke aged 10

## Background

Since Luke was seven he often got into fights at school; after his best friend left the area he has no close friends.

Luke had two younger siblings a brother and sister, both of whom with severe autism. He helped his parents with looking after his siblings. He often got minor scratches from his three year old brother who lashes out at Luke and his parents.

Luke did not know how to make and maintain friendships so he did not try. He did not talk to others about how anxious and angry he often felt. Luke's school attendance and performance started to deteriorate.

## Kent Wide Luke attends a primary school in a HeadStart Kent school Grouping with a Quality Mark. The school had trained staff in the Resilience Domains. The school's Pastoral Lead used the Resilience Domains with Luke to find out why he getting into fights and this gave an opportunity to explore all aspects of Luke's ecology and the issues around Luke's siblings; his isolation at school and lack of interests were highlighted. When the school identified individuals that were getting into problems or appear isolated they set up positive activities to integrate them better. The children were encouraged at playtime to look out for others who were alone and asked them to join in their games. Staff members supported this at lunchtime by organising games in the playground. Luke joined in these games and started to have better interaction with other children. Luke was still getting into occasional fights. The Pastoral Lead in the Universal Plus school invited him to several Mindfulness sessions that Luke enjoyed and found useful in dealing with his anxiety and anger. The school had also established a Safe Space and the Pastoral Lead suggested that when Luke felt angry or upset he should use the room. Luke liked the room as it was peaceful and helps him to calm down. While Luke did not mind helping out at home, he did not have an activity outside of school. Since Luke didn't have an identified interest, after a discussion with Luke's parents the HeadStart Participation Worker took Luke to the local youth centre to attend a sports session for 8 to 12 year olds. The Participation Worker also spoke with Luke and his parents about him registering as a young carer or attending a group to meet other young people who help out their brothers, sisters and parents at home. While Luke did not want to do this it was left as an option that which may benefit him in the future if he changes his mind. Additional Not required **Outcomes** Luke is now in year six and has a group of close friends. Luke enjoys school, he no longer gets into fights and his attendance and performance has improved. Luke made new friends at the youth centre, is in their cricket team and through music activities has also discovered an interest in being a drummer.

## Luke's perspective

"My name is Luke, I am ten years old. I have a brother, Charlie and a sister, Caitlyn." Charlie and Caitlyn both have something called Autism. This means sometimes they can get a bit mean, and they scratch me and Mum as well, but mostly they are okay. I didn't used to have any friends. The boys and girls just didn't want to play with me. I don't know why, but I guess they just didn't. Actually, I am not sure I even asked them if they wanted to play with me. I just know it made me cross, and all I could think about was how cross I was."

"One day it changed. The teacher, I can't remember her name, told everyone that they had to play with everyone, but also, the teachers came out in the playground and played with us. It was really weird playing tag with a teacher but just playing was weird."

"I also had to go to these special lessons and it helped me to be less cross. I also went to a room a few days a week where I can calm down and it had nice music and cool coloured lights and big cushions."

"Toby came to our house one day and asked me if I wanted to go to the youth centre. I have friends at the youth centre and at school too. I was worried about them meeting Charlie and Caitlyn, but it was okay. I am in the cricket team and get to play the drums. I like it a lot."

#### Luke 10

## How HeadStart Kent will make a difference

Luke's school has completed the self-assessment of their approach to emotional wellbeing and resilience through the Resilience Toolkit and have been working on improving all aspects of their delivery.

The staff felt confident using the Resilience Domains with pupils and had set up a Safe Space in the school.

When the school identified several children who were not integrated well with other children, it was a seamless addition to introduce the concept of everyone playing together in the playground. The staff had received a variety of training which empowered them and encouraged by this, and feeling that they themselves could really make a difference, volunteered to implement the games approach at lunchtime.

The HeadStart Participation Worker engaged with Luke and his parents to discuss how his needs could be met. Together they identified local opportunities for developing Luke's talents and interests which was successful.

Good outcomes were achieved as a result of seamlessly combining approaches (school, community and home) and focusing on friendships, talents and interests.

## Jack aged 13

## Background

Jack was 13 years old, he had two older brothers who are no longer of school age and the family are members of the Gypsy and Roma Community who had lived in the UK for five years. The family moved twice between London and Kent because of work, accommodation and family issues so he has changed schools three times. In his latest school (that was in a Priority HeadStart Grouping) Jack struggled to gain friends, seemed upset in class but did not tell anyone the

	reasons. Recently he had been absent from his school for several weeks.
	Jack's school tried to contact the family but had no response. A Pastoral Lead visited the site where the family lived and talked to Jack and his mother. Jack said he felt stupid at school as he was behind his classmates who laughed at him. However he was usually bored at home during the day as his father and brothers are out working and did not want him coming with them. The Pastoral Lead persuaded Jack to return to school and they put together a plan for his return the following Monday.
Kent Wide	The school had embraced the Kent Resilience Toolkit and was working towards a Quality Mark. Staff felt more confident dealing with pupils suffering from anxiety. The Pastoral Lead briefed Jack's teachers who gave him additional support. The Pastoral Lead also introduced Jack to Peter, a Peer Mentor who was 15 and who met with him regularly.
Universal Plus	Jack's school was in a HeadStart school Grouping and he was encouraged to use its new Safe Space, where his Peer Mentor also helped Jack with his homework and went through the Resilience Domains with him. Jack said he was very interested in horses and was encouraged to use this in a story that was read out in class. With support from the HeadStart Participation Worker, this led to a class trip to a local stable. Jack and a class mate took up the chance to go to the stable on Saturdays to clear out the stables and get rewarded with a free ride.
	The teachers in the school also carried out Mindfulness lessons in class and the school became more inclusive, welcoming and supportive of all class members.
Additional	Not required
Outcomes	Jack's attendance and learning at school is improved and he now has a more positive outlook about his school life. He has a stronger support network around him at school, has lots more confidence and expresses his feelings more easily.
lack's navan	

## Jack's perspective

"I wasn't very popular, and I was stupid, everyone would laugh at me. It wasn't my fault, we were always moving around, and yeah that's how it is, but it meant I missed a lot of classes. Mum's not bothered so when that woman from school, Pat visited, Mum said yeah. I went back to school on Monday, mostly because Mum didn't want Pat visiting again, but it was ok."

"I met Pete in the Safe Space and he helped me to catch up on my school work and then we talked about domains. I had to write a story for English, Pete helped me to do this but we wrote about horses - I didn't know I could write about that, and then the teacher liked it so much she made me read it out in class. I wasn't happy but I was glad I did as we then got to go visit the stables. When we got there, they said I could go every Saturday to help with the horses. James, another lad in the class also comes along and we hang out afterwards. We do Mindfulness at school too. It's

alright. I don't see Pete so much anymore, but I know he's about."

#### Jack 13

## How HeadStart Kent will make a difference

Jack's school has changed its approaches using the Resilience Toolkit and is working towards achieving the Quality Mark. The staff received Resilience Domains, Mindfulness and Youth Mental Health First Aid training as part of their Continuing Professional Development. It established a school mentoring scheme which was tailored to the needs of the young person receiving it.

With the help of the Participation Worker, using school trips to link young people into activities in the community has proved extremely useful. The school and community found inventive ways to mutually support each other. Through the use of Mindfulness combined with the Social Marketing messages, the school has become more inclusive, welcoming and supportive of all class members.

Logan aged	12
Background	Linda self-referred to a domestic abuse service in 2012 after being physically attacked by her husband in front of Logan, her son (aged eight at the time) and his two younger siblings. Linda obtained some information from the service but decided she didn't need to work with them further at that time.
	Linda emailed a member of the team two years later to say that although she was now divorced but her former husband was still controlling her financially by refusing to pay his debts which were linked to her home. She was advised to attend the one stop shop to speak to a solicitor.
	A year later, Linda again self-referred through the one stop shop. The former husband had continued to control her through child contact and was speaking to her unacceptably in front of the children at contact hand overs. He had a high level of involvement with the children, having them for tea every Friday and all weekend every other week. He was aggressive and whenever they came back the children's behaviour was off the rails.
Kent Wide	By now Logan was 12. He attended a school in a Priority HeadStart Grouping, with a Quality Mark having applied the Resilience Toolkit. Logan was identified by the school at transition as someone who had been affected by domestic abuse, via a new Information Sharing Agreement with the Council. The school Pastoral Lead developed a good ongoing relationship with Logan.
Universal Plus	Logan's behaviour was worsening and in a temper he pushed over a desk in class. His Pastoral Lead had a conversation with him about his Resilience Domains. Logan identified that he often lost his temper these days and he did not have anything else going on outside of school apart from seeing his dad at the weekend. He said he would

like to play football.

The Pastoral Lead rang Linda for a conversation to see how Logan could be enabled to play football. She said she could not take him out of the village as she did not have transport and was isolated from friends and family. The Pastoral Lead spoke to the after-school club to explore if Logan could become involved, even though his behaviour in class had not improved. Logan attended the after-school football activity and enjoyed it.

Logan agreed to register for online support which he accessed at home on his phone.

At the same time the school Support Worker encouraged Logan to use its new Safe Space, where a staff member trained in Youth Mental Health First Aid could be accessed. Teaching Mindfulness had just begun in school and Logan received this and found it helpful.

## Additional

However Logan's behaviour continued to deteriorate and he struck Linda. Through discussion with him he said he was sorry and wanted to do something about it. The family were notified to Early Help Services and allocated to a HeadStart Worker as part of the Troubled Families programme.

Logan also agreed to use online support and when he was upset or down he could use a website and message a trained counsellor who helped him with advice about how to manage his feelings.

Logan also joined a newly established domestic abuse group for young people that the local HeadStart Kent Senior Project Officer helped to develop. Later Logan agreed to a Mentor funded by HeadStart Kent.

Linda received counselling and was invited to join the Freedom Programme for Domestic Abuse Victims.

## **Outcomes**

Logan's behaviour improved. It took a while for him to practice and use the Mindfulness exercises and he said it helped him not just in school, but at home with his family. Due to the local needs analysis the Early Help and Participation Worker arranged for CVS street based workers funded by Early Help to have weekly football sessions at the village.

Linda has completed a course of counselling and found the Freedom Programme very supportive.

## Logan's perspective

"Mum and dad split up when I was little. I can't really remember us all living together so it didn't really bother me. Mum got married to Keith, he was mostly okay, but sometimes he would get mad and hit Mum, then I would hide in my room. I could hear everything happening downstairs and I couldn't do anything about it. Eventually Keith left, that was better, but Mum got upset every week when Keith would pick up Freddy and DJ, my younger brothers."

"When Freddy and DJ came back they would call Mum names. Mum got upset, and I tried to help, but whatever I said didn't make any difference. School was okay. I had friends there but sometimes I just couldn't stop myself from being mean to them. I would start fights with everyone, and I would make a point of messing around in class."

"I had to have weekly meetings with Julie my Pastoral Lead. I didn't really see the point but it got me out of class. I wanted to play football and Julie said I could play football at the after school club."

"Mum had a counsellor which was good and things got better at home but then I don't know why, I got really cross and I hit Mum. I didn't want to, well I must have done, but I didn't mean to."

"I started going to this group with other people around my age that had experienced domestic abuse. I didn't know what this meant at first, but it was really good. I didn't want to be like Keith, so when they asked if wanted a mentor, I thought this would be a good idea. I also used a website that gave me advice evenings and weekends if I needed it."

"I now play football in my village, and I use Mindfulness exercises which they taught us at school. I don't get into so much trouble and I just feel happier."

## Logan 12

## How HeadStart Kent will make a difference

HeadStart Kent has led the conversations and information sharing between the community and schools in relation to domestic abuse. At the point of needing additional support, due to this relationship with the Pastoral Lead, moving the conversation to the Resilience Domains was seamless - as was accessing the Safe Space and speaking with a Peer Mentor.

When this progressed to the additional support of a HeadStart Early Help and Participation Worker to oversee the support, participation in a peer group and a Peer Mentor, it was a natural path. The relationship with the Pastoral Lead continued, and they kept in touch with Logan throughout.

Logan was able to use online support whenever he wanted some advice. The new young people's domestic abuse group was set up for local young people to feel they are not alone and learn from each other how to deal with adversity.

In response to a gap in local provision, identified by the HeadStart Kent needs analysis, the proposal from the HeadStart Early Help and Participation Worker for VCS street based workers to start village football activity met Logan's needs – as well as other young people in the local community.

It was important that support was arranged for both Logan and his mother and the case was dealt with using a whole family approach championed by the Troubled Families programme. The HeadStart Kent Programme and Troubled Families programme are closely aligned in Kent.

## Caleb aged 12 and Katherine aged 10

## Background

Diana has two children: Caleb has autism and was in a mainstream school within a Priority HeadStart Grouping. His sister Katherine was home schooled and due to start secondary school nearly a year later.

Diana self-referred to a domestic abuse service through visiting a local drop-in centre. She experienced domestic abuse from her ex-partner who wanted to get back in touch to see the children. She agreed to join the Freedom Programme for domestic abuse victims, and for the police to put a flag on their system should she call and need help. The Domestic Abuse Service called her once a fortnight to check on her welfare.

Two months later, Diana's ex-partner approached her and verbally abused her in the high street. He contacted Caleb and said he was going to come back and live with them. Caleb's behaviour was beginning to deteriorate; Katherine was also affected and sometimes physically assaulted during her brother's violent outbursts.

## Kent Wide

Caleb's school was in a Priority HeadStart Grouping and had a new Information Sharing Agreement with Kent County Council. This enabled Caleb to be identified by the school as someone who had been affected by domestic abuse. The school Pastoral Lead was asked to meet with Caleb to monitor his wellbeing.

Katherine attended a Guides Pack - her Pack Leader had accessed training in Resilience Domains and Mindfulness through HeadStart Kent. The Leader was also able to support Katherine and reassure her.

## Universal Plus

Despite support at school, Caleb's behaviour continued to deteriorate. The school is now in one of the HeadStart Kent Groupings so has access to Universal Plus services.

His pastoral lead informed Caleb that there was a Safe Space in school so when he needed to Caleb could go there and take 'time out'. Caleb visited the Safe Space and enjoyed having time to think. Caleb was provided with ideas for coping techniques.

Caleb's school also started to deliver Mindfulness during lesson time, and this supported Caleb to recognise the steps he needed to take to 'shut down'.

After several visits, Caleb developed a good relationship with a young person who was a HeadStart Peer Mentor and said he also wanted to help others with similar experiences and show them they were not alone. The Peer Mentor spoke with the HeadStart Participation Worker who met with Caleb and Diane. Diane was unsure if Caleb was ready for this but the Participation Worker reassured them that Caleb would be supported all the way and at any point he could step out.

	The Participation Worker also supported Caleb to attend the HeadStart local Social Marketing group meeting which enabled Caleb to build his confidence, through meeting new people and sharing his ideas. Caleb connected his own experiences with his learning at school that further helped to build his confidence.
	Despite family life becoming more settled Katherine was still feeling low. Caleb still had occasional outbursts and Katherine felt that he was getting everything his own way including being part of the Social Marketing group. Katherine did not want to be part of this group, but did not feel she had anything she 'owned'. Katherine mentioned this to the Guide Leader and the Guides ran several sessions for Guides on the Resilience Domains and self-efficacy that helped the pack to understand how to use their strengths to overcome difficulties.
Additional	The family was offered Systemic Family Group work funded by HeadStart Kent at the point of Katherine's transition to secondary school. This enabled Diana to understand the dynamics of the family, maintain a more positive environment at home, and better support Caleb and Katherine.
	Later Katherine took a place on a Positive Relationships Programme, and Caleb on a young people's programme for domestic abuse victims.
Outcomes	Diana feels more in control of what happens within her family life. She feels more confident and ultimately stronger in her capabilities and relationships.
	Katherine is planning to sign up as a young leader within the Guides, and is doing well in school. Caleb's behaviour has improved and he is a HeadStart Peer Mentor.

## Katherine's perspective

"My brother Caleb used to assault me. It wasn't his fault. Caleb has Autism, and mum used to be abused by her boyfriend Joe. It was a lot for Caleb to take. Joe tried to come back into our life. He tried to contact both mum and Caleb. He told Caleb he would come and live with us again, and Caleb really didn't like this idea."

"Caleb goes to school and he gets lots of help there. They have a Safe Space that Caleb can go to anytime he wants and it really helps to bring him back down. They have shown him things to do to help him, before he goes out of control. He also gets lessons in Mindfulness. I know a bit about this, as I have learnt about it at Guides."

"Caleb's had loads of help really, and he gets to do all of this fun stuff, like being a peer mentor, and he attends this group where they come up with ideas. He was really excited one day when he saw a poster he had designed on the wall at the doctors."

"Even with all this help, and I do know it's not his fault, Caleb can still get really mean. I was starting school, the same one as Caleb when Kerry started working with all of us. It really helped to keep everything calm at home, which was good as I was

nervous about school having always been taught by mum. My leader at Guides knew I was feeling really rubbish both about school and how Caleb could be, so we had some sessions where I was able to say what I have, who I am and what I can do. I have it written on post it notes on my mirror and I look at it every morning."

"Mum's much stronger for all of us now and Caleb's improving every day. I shall soon become a young leader at Guides and this is really exciting for me."

## Katherine 12

## How HeadStart will make a difference:

Caleb's school was able to provide HeadStart tools and techniques that helped him and established the Peer Mentoring he benefited from. Staff were fully trained and felt confident in their skills.

The HeadStart Participation Worker who met Caleb was also coordinating training for the community, and knew the Guides leader who had a good relationship with Katherine. This enabled clear links between the Guides and the school, which led to a better transition for Katherine, including the introduction of the systemic family work. Across all Levels, and with each member, messages were consistent, but layered to the need.

## **SECTION EIGHT**

# **Governance and Programme management**

## Overview of governance arrangements

The HeadStart Kent Governance Structure for Phase 3 has been agreed by the Kent Children's Health and Wellbeing Board.

The Kent Children's and Health and Wellbeing Board comprise Kent County Council members, senior directors and representatives for other key organisations such as CCGs and District Councils. This is the sponsoring group for the HeadStart Kent Programme and is chaired by Andrew Ireland - Corporate Director for Social Care, Health and Wellbeing.

The Kent Children's Health and Wellbeing Board meet every two months and will receive regular reports on the implementation of the HeadStart Kent Programme, its performance and outcomes.

The HeadStart Kent Executive Group is chaired by Florence Kroll, Kent County Council Director of Early Help and Preventative Services who is the Senior Responsible Officer (SRO) for HeadStart Kent. Also on the Executive Group, David Weiss, Head of HeadStart, Troubled Families and Special Projects. The Executive Group further includes representatives from Public Health, the VCS, Education and Social Care. Other organisations are invited as required.

A key body for HeadStart Kent is the Young People's Shadow Board. The HeadStart Kent young people informed us that they prefer having their own Board rather than attend the Executive Group. All key issues are considered by them to establish their views and recommendations, which are then fed to the Executive Group via the Participation Worker. The Shadow Board is made up of young people from all over Kent and representatives from Kent Youth County Council and Youth Advisory Groups. The HeadStart Kent Shadow Board governs the central coproduction group and the Social Marketing groups. If any young person would like to attend HeadStart Kent governance groups, there is an open door for all.

The Stakeholder Reference Group will be made up of representatives from a wide range of partners who support HeadStart Kent; this includes schools, District Councils, CCGs, Public Health, the Police, and the VCS. 121 It will provide essential input to guide the way HeadStart Kent is impacting on all services and how the Programme is generating systemic change.

<sup>&</sup>lt;sup>118</sup> Appendix 29 HeadStart Kent Executive Group Draft Terms of Reference for Phase 3

Appendix 30 HeadStart Kent Young People's Shadow Board Draft Terms of Reference for Phase 3

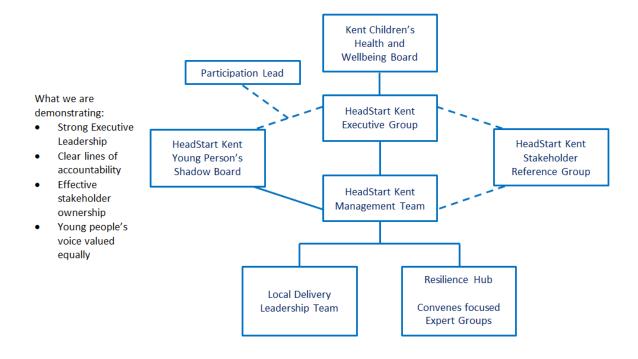
Appendix 31 HeadStart Kent Social Marketing Group and Coproduction Groups Arrangements for Phase 3

<sup>&</sup>lt;sup>121</sup> Appendix 32 HeadStart Kent Stakeholder Reference Group Draft Terms of Reference for Phase 3

The Expert Group will be made up of a range of experts in young people's mental wellbeing and resilience, providing external support and challenge to the Programme. It will meet twice a year and contain representatives from practice and academic settings. This may also include a young person who has experienced trauma to gain their perspective and knowledge. The Resilience Hub will convene this group for specific pieces of HeadStart work.

The Local Delivery Leadership Teams will take overall leadership, management and accountability for the delivery of the Programme where school Groupings are located. 122 It will meet monthly; learning for the Programme team will be driven by these groups.

#### **Governance structure**



<sup>122</sup> Appendix 33 HeadStart Local Delivery Leadership Teams Terms of Reference for Phase 3

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## HeadStart groups and roles

Group	Governance Role	Meeting Frequency	Chair	Core Membership
C&YP Health and Wellbeing Board	Strategic Oversight	Every 2 months	Lead Member (Andrew Ireland)	HeadStart Exec Lead, NHS, VCS
HeadStart Kent Executive Board	Executive Leadership with accountability for overall Programme.	Monthly	Executive Lead (Florence Kroll)	Participation Rep, BIG Lottery, Education x 1, Public Health x 1,SCS,VCS x 2, HeadStart Programme Manager
HeadStart Kent Young Person's Shadow Board	Oversight and insight to inform development of the Programme with delegated authority defined.	Every 2 months	TBC	Young people identified to represent
HeadStart Kent Management Team	Day to day oversight and accountability for Programme with delegated authority defined.	Fortnightly	HeadStart Programme Manager (Angela Ford)	HeadStart Team Leads
HeadStart Kent Reference Group	Advice and insight to champion and support programme development and delivery.	Every 2 years	Executive Lead (Florence Kroll)	Key stakeholders from health, schools, communities, police, youth offending, looked after children's teams, education
HeadStart Kent Resilience hub	Expertise and knowledge to create systems tools (quality mark, approaches, training) organises annual expert groups	Every 2 months (Expert Group quarterly)	Executive lead public health (Jo Tonkin)	Key experts, trainers and commissioners.
HeadStart Area Delivery Groups	In locality, operationalising HeadStart within local context	Monthly	School's executive lead	Schools, community, district local statutory and voluntary organisations, voice of young people and families.

## **Programme management arrangements**

## The HeadStart Kent Programme Team

The HeadStart Kent Programme Team and their roles are set out in the diagram below. The Programme will be managed in line with the Managing Successful Programmes (MSP) methodology. The Programme Manager will be Angela Ford, who delivered the HeadStart Programme during Phase 2 and has developed, with young people and partners, the proposals for Phase 3. Angela Ford will ensure all elements of the HeadStart Programme are delivered - the Kent-wide, Universal Plus and Additional Levels.

David Weiss, Head of HeadStart Kent, will line manage and provide direction and support to Angela Ford and will also provide strategic support to the Programme reporting to Florence Kroll. David Weiss will dedicate as much time to the HeadStart Programme as required; it is estimated to be approximately two days a week (Kent County Council contribution).

Florence Kroll is the senior responsible owner for HeadStart Kent and a senior member of the Sponsoring Group, The Children's Health and Wellbeing Board. HeadStart Kent officers will manage key elements of the Programme, such as:

<sup>123</sup> AXELOS Limited, (June 2013), "Managing Successful Programmes", Crown Copyright AXELOS Limited.

- The Kent-wide elements of the Resilience Hub will be contract-managed by Angela Ford;
- ★ The Social Marketing and Digital offer will be managed by Elena Ransley-Hoare;
- Programme support coordination will be managed by Grace Dennis, under Angela Ford's direction;
- \* Quality assurance and evaluation will be overseen by Eileen McKibbin, Research and Evaluation Manager, who will direct a monitoring and evaluation officer dedicated to the HeadStart Kent Programme;
- \* Participation lead (shared role currently) will be responsible for ensuring coproduction is adhered to throughout the entire Programme;
- In addition, Kent County Council will contribute expert and technical support to the HeadStart Programme team on financial management, human resources and digital.

## Key roles in HeadStart Kent:

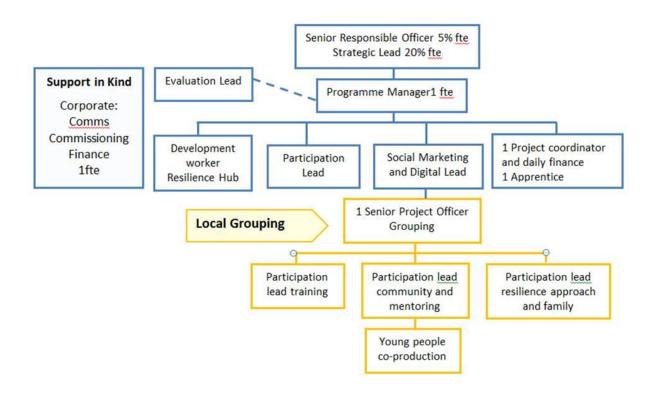
Florence Kroll Senior Responsible Officer	Florence is the Director of Early Help and Preventative Services. She will provide strategic oversight of the Programme and embed its learning throughout the system.
David Weiss Strategic Lead	David is the Strategic Lead. He will provide day to day oversight of the Programme Team, providing strategic direction and leading on the benefits realisation strategy. David is a Managing Successful Programme (MSP) Registered Practitioner.
Angela Ford Programme Manager	Angela will be responsible for the Programme management and delivery. She has successfully led the Phase 2 Programme. Angela has an MBA and currently studying for her MSP She will oversee all aspects of the Programme, with a specific focus on the deliverables of the Resilience Hub
Eileen McKibbin Research and Evaluation Manager	Eileen is the Research and Evaluation Manager for Kent County Council. She will be responsible for leading the common measurement Framework and evaluation of HeadStart Phase 3.

## **Tranches of school Groupings**

Each school Grouping will have a dedicated senior project officer. They will ensure local delivery in schools, services and communities. Once the HeadStart Kent work is complete and the tranches move on, the Senior Project Manager will ensure the HeadStart Kent ethos is embedded in "business as usual" for the area.

Participation officers will ensure the delivery of:

- \* Co-production with young people and families;
- \* Training across the school Grouping areas;
- \* Local community development;
- \* Support for young people and families.



## Implementation and communication plan

## Communication and engagement approach

This communications approach is designed to support the HeadStart Kent Programme and associated projects as they develop. <sup>124</sup> There are two distinct aspects:

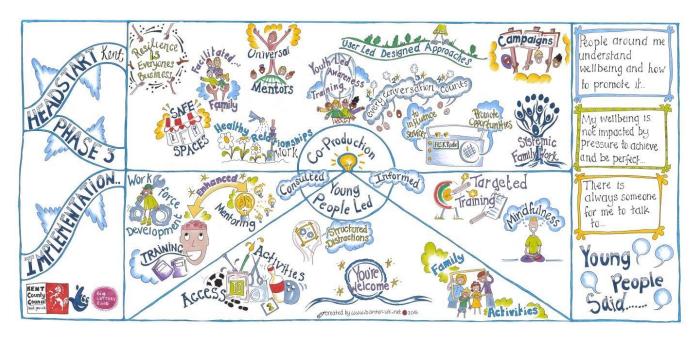
- Social Marketing: The behavioural change aspect and associated communication and engagement that sits at the heart of the Programme;
- \* Stakeholder Engagement: Communication relating to the project management of the Programme. This includes attracting additional contributors to deliver the Programme as well as ensuring an appropriate flow of information between stakeholders.

<sup>124</sup> Appendix 35 HeadStart Kent Phase 3 Communication Strategy

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## **Implementation Plan**

The implementation graphic below identifies the activities as described by young people that HeadStart Kent will undertake to support their emotional health and wellbeing.



The HeadStart Kent High Level Implementation Plan outlines the methodical approach which the Programme Team will undertake to mobilise the strands. 125 It sets out the deliverables and dependencies over five years and across the three Levels of the Programme. It includes the Kent-wide activity and the rolling out of the Groupings.

The Governance arrangements, Terms of Reference and Membership have been drafted, alongside the specifications of the Resilience Hub. There is a draft Partnership Agreement for the schools and the approaches have been tested in Phase 2. There are clear Tidier sheets available for all the Phase 3 activities so they can be mobilised and commissioned quickly. 126

The Implementation Plan includes:

- \* Deliverables for evaluation;
- \* Learning to be captured;
- \* Best practice shared;
- \* Plans supporting the long term sustainability of benefits.

#### Risks and assumptions

The HeadStart Kent Executive Group will be responsible for ensuring that there are strong mechanisms in place to identify and manage risks and issues associated with the Programme. Risks and issues are well managed at Kent County Council; the

 $<sup>^{125}\,\</sup>mathrm{Appendix}\,2$  HeadStart Kent Implementation Plan for Phase 3

<sup>&</sup>lt;sup>126</sup> Appendix 34 HeadStart Kent Tidier Sheets for Phase 3

Programme Lead is a Management of Risk Registered Practitioner. A detailed Issues Register and Risk Register will be maintained; key risks are summarised below with the proposed treatment.

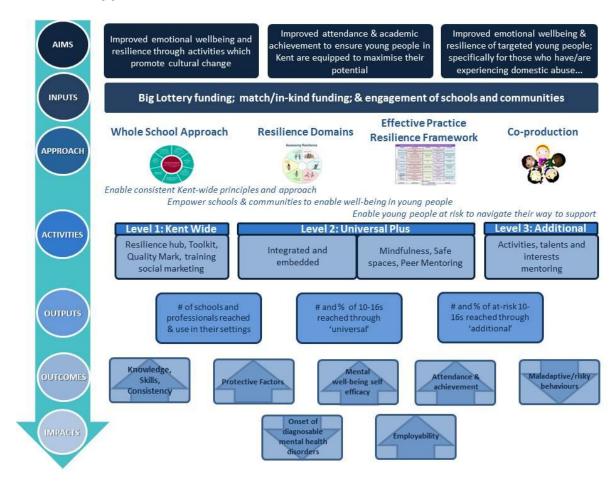
Category	Risk Description	Consequence	Likelihood	Impact	Treatment
Strategic/Financial	That the reductions in public sector funding may result in a decrease in the capacity of partners to engage in the HeadStart Kent Programme. Staff and commissioning reductions may lead to an increasingly narrow focus on statutory activity.	Mission, goals and sustainability of benefits are not achieved	M	M	Using the Health and Wellbeing Board as the Programme Governance, partners will ensure that HeadStart Kent is a key element of reducing the demand on statutory mental health and other services, so keeping it as a Kent priority as it is helping to achieve long term savings.
Strategic	Following the local elections in 2017, the priorities of partners may change, or changes in the leadership of partner organisations may adversely affect the excellent support to HeadStart Kent from all partners.	The loss of support from strategic leaders and partners may compromise the ability to deliver the Programme and achieve its goals.	L	М	Through the Stakeholder Engagement Strategy all Kent County Council parties will be engaged prior to the local election to demonstrate the benefits of HeadStart and there will be a wider engagement of leaders, managers, staff and other stakeholders of all partner organisations

Operational	That the commencement of the Programme and the delivery of Tranche 1 is delayed	This will result in delays in the completion of the work in Tranche 1 and potential delays or work overload later in the Programme	M	M	The Programme is designed with 6 month overlaps across tranches. These can be extended at nil or low cost if required.
Commissioning	That there may not be a sufficiently mature or stable market of providers that can deliver high quality and best value services.	This may lead to delays in the commencement of services or the procurement to a provider who underperforms.	M	M	There will be an intensive market engagement following consideration of the Case for Investment by The Big Lottery Fund and if there is insufficient confidence that the market will deliver good quality best value providers, in-house solutions will be quickly explored and mobilised.
Operational	Services new to Kent such as the online counselling may not be sufficiently used by young people or embraced by partners	It will mean for young people in school groups that an element of the Digital offer is not harnessed and resources have not generated sufficient benefits.	L	L	The detailed specification will be developed in coproduction with young people incorporating the learning from other local HeadStart programmes. Following the award of the contract there will be a high level of marketing of the service including presentations at schools and community settings. The use of the service will be closely monitored and action taken to increase the service profile.

## **SECTION NINE**

# **Evaluation and evidence based approach**

## **Evaluation approach**



The above is a summary of the Theory of Change; see Appendix 9 for a detailed version outlining the 'logic chain' for what we expect to happen. 127

The evaluation in Kent will be fully aligned with the Big Lottery Fund Common Measurement Framework (CMF), and embeds the core metrics of the CMF into the local programme's Theory of Change. The approach will be both a *formative* evaluation (to refine the theory of change / inform learning and development) and an *impact evaluation* (to demonstrate attribution of the HeadStart Kent Programme to measureable effects). In working with national evaluators, the evidence for 'impact' attribution will be further strengthened; at the same time, it is hoped that building a counterfactual into Kent's evaluation will inform the descriptive/formative learning nationally as well.

<sup>&</sup>lt;sup>127</sup> Appendix 9 Detailed Theory of Change Phase 3

## **Evaluation design and methods**

The phased roll-out of the Programme lends itself to a 'stepped wedge' evaluation design for impact (non-randomised). While such evaluations often have a timed intervention (that is, it ends) HeadStart Kent's aim is to be sustainable.

Therefore, the 'steps' and a stepped wedge design can assess the effect:

- \* From baseline/over time in an area;
- \* Through counterfactuals by cohort (for additional interventions);
- By area in Kent where HeadStart is implemented in later phases (for universal);
- Being sustained as the HeadStart Kent resources are withdrawn and move to new areas.

District	2016/	17	2017/18		2018/19		2019/20		2020/21
Swale									
Gravesham									
Ashford									
Shepway									
Canterbury									
Thanet									
Maidstone									
Tonbridge									
and Malling									
Dover									

Dark blue denotes 18 months of HeadStart funding active.

Light blue denotes expectation of sustainability.

White denotes pre-implementation.

Red line denotes start of measurement activity, particularly data capture, for evaluation. Retrospective measures from education administrative data can also be used.

From a measurement point of view, data capture in Ashford and Shepway will need to start from year one (as a minimum using educational administrative sets, and ideally locally captured data including CMF questionnaire). This would be replicated in all areas, with data collection *before* they receive HeadStart Kent.

To enable learning and development, Kent's evaluation activities will focus not only on outcomes, but on whether or not activities happened in the way we expected (including outputs such as getting the right number of the right people) and the mechanisms of change. This is the formative aspect of the evaluation, which will enable programme management to make adjustments as needed.

This will also enable us to understand whether or not the mechanisms we believe will make the difference, do in fact happen (e.g. staff confidence and behaviour; and, young people's experience of protective domains). To gather the depth of information for learning, a mixed methods approach will be undertaken, drawing on a

combination of quantitative and qualitative sources. Examples of qualitative sources to be included are:

- \* Embedding 'young evaluators' as purposive fact-finders, so young people can find out from young people about universal provision;
- \* Focus groups and interviews with staff and practitioners.

## **Evaluation Framework and Plan**

A detailed Evaluation Framework and Plan will be developed to underpin the Theory of Change. 128 HeadStart Kent will employ a skilled Monitoring and Evaluation Officer to lead this work in Kent and provide robust and timely insights for Programme management.

Kent County Council already benefits from a matched dataset of young people drawing across council-run services. There are a number of measures which will be fully explored and understood in more depth by analysing different HeadStart cohorts through this dataset/model. The evaluation will make use of existing/administrative datasets as much as possible to minimise additional data collection burden.

In supplement to the CMF questionnaire, there will be three primary additional collections of data so that cohorts/effect can be measured. The Monitoring and Evaluation Officer will access from sources and manage datasets on:

- \* Training records (names and schools, from training provider) in order to understand which staff, from which schools, have undertaken which HeadStart training. This is important to ascertain the effect the training has or does not have;
  - A skills/knowledge confidence scale will be identified and put into place to follow any training undertaken;
- \* Names of young people 'identified' for additional support by schools (from schools) to track pupils staff identify for support (and in completing more analysis, what we know about this cohort);
- \* Names of young people who take-up additional support (from providers) so we can discern who does, or does not, take up additional provision.

The brief table below, outlines the different cohorts:

You	ing people cohorts
1	Young people attending HeadStart schools (baseline and over time)
2	Young people not attending HeadStart schools (as rolling counterfactual, or not taking part)
3	Young people receiving 'additional' services in HeadStart schools (3.1 known subject to DAN; 3.2 known in refuge, 3.3 identified by schools)
4	Young people not receiving 'additional' services, AND in HeadStart schools (4.1 known subject to DAN; 4.2 known in refuge, 4.3 identified by schools)

<sup>128</sup> Appendix 36 Detailed Evaluation Framework and Plan Phase 3

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5 Young people not receiving 'additional' services, AND NOT in HeadStart schools (5.1 known subject to DAN)

Staff cohorts (primarily for effect of training

- A Staff working in HeadStart schools
- B Staff not working in HeadStart schools (but have taken training through Resilience Hub)

## Information governance

Kent will be collecting and using information for evaluative purposes. Linked data will not be used to identify/single-out individuals for intervention. Data captures through the CMF questionnaire will be held by Kent County Council, linked with other datasets held by Kent County Council, and analysed for the evaluation - individual pupil responses will not be shared with schools.

For accuracy, the evaluation will capture the information flow to schools through new protocols/pathways put into place for HeadStart Kent:

- Central Referral Unit alert to schools when there is a young person subject to a DAN - records of these will be captured from the school to know if these are occurring;
- Refuge alert to schools when there is a young person living in a refuge as above, records of these will be captured from the school to know if these are occurring.

Both these sources will form two strands of the 'known' DVA cohort for evaluation purposes. Also of interest to the evaluation will be the profile of previously 'unknown' at-risk young people that schools become better equipped to identify. With the additional metrics using the CMF questionnaire, there are very few other measures for which new methods will be developed in the next two months:

- \* Confidence scale to measure staff/practitioners confidence in their skills/knowledge in mental and emotional wellbeing, and how to use these;
- \* Data linkages to hospital admissions/A&E for self-harm to measure one of the maladaptive behaviour outcomes. Kent has pioneered work in data linkage with the NHS through the Year of Care programme for adult social care and health, led by Kent County Council Public Health (with Kent and Medway Health Informatics Service). Kent County Council is confident that a
- \* trial of pseudonymised data linkage will enable these metrics to be produced, without identifying individual young people.

## **SECTION TEN**

# **Financial plan**

The five year Financial Plan is a detailed proposal of how HeadStart Kent will mobilise resources to enable young people and the adults who support them to have an improved emotional wellbeing. 129

The total cost of the HeadStart Kent Programme is £10.7m. This requires £10m investment from the Big Lottery Fund with £700k of match funding in Kind from Kent County Council.

The costings have been developed from a zero based budget, utilising knowledge and costings from Phase 2, products available and from costs from similar programmes.

<sup>&</sup>lt;sup>129</sup> Appendix 37 HeadStart Kent Funding Proposal Phase 3

## **SECTION ELEVEN**

## **Sustainability**

There is a growing commitment to mental health and emotional wellbeing among communities, workplaces, schools, and within the government to change the way we think about it. 130 There is now a consensus that mental health and wellbeing needs to be treated with equal importance to physical wellbeing; "the human cost [of mental ill-being] is unacceptable and the financial cost to government and society is unsustainable". 131

The HeadStart Kent Programme is focused on using the opportunity of the Big Lottery Fund investment over five years to drive system change across emotional wellbeing and mental health services in the county. This is in line with the recently released Mental Health Taskforce Strategy and "Future in Mind" report; both outline priority actions to be taken within the next five years to drive improvements in children and young people's mental health and wellbeing and for their families and communities. We are determined the benefits realised will continue to be generated beyond the HeadStart Kent Programme's life span.

"The Way Ahead" Strategy for Kent emphasises the need to promote emotional health and wellbeing, to bring services into universal settings including schools, to intervene early and increase confidence in the workforce to build young people's resilience and support their emotional health. In order to succeed, and given the level of need articulated in the CAMHS Health Needs Assessment, system-wide transformational change needs to be delivered. "The Way Ahead" Strategy is explicit in the need to learn from HeadStart Kent, to provide the source of transformation within Universal services and Additional support in accessible settings.

The benefits delivered by HeadStart Kent Phase 3 will be sustained in the long term through:

- \* The Resilience Hub which will continue to be an accessible public repository for resources aimed at young people and parents, schools, professional practitioners and commissioners:
- \* The transformation of how staff across the system engage with young people's emotional health and resilience achieved through the approaches, framework, tools and training that HeadStart Kent will have delivered;
- Investment by the NHS, Early Help services, schools, Local Authorities and communities to continue the HeadStart Kent services in all three Levels (those proved to be effective) and implementing in further Groupings of schools across Kent.

<sup>&</sup>lt;sup>130</sup> Mental Health Taskforce Strategy, Ibid.

The Resilience Hub a will be an accessible repository for resources aimed at young people and parents, schools, professional practitioners and commissioners.

The development of the Resilience Hub will capture and communicate the learning across Children and Young People's Services in Kent. Critically it will make available and accessible the resources developed with the Big Lottery Fund funding across the network. The Resilience Hub will provide a legacy for HeadStart Kent and a resource that young people, professionals and commissioners will refer to after HeadStart Big Lottery Fund funding ceases.

The transformation of how staff across the system engage with young people's emotional health and resilience, achieved through the approaches, framework, tools and training that HeadStart Kent will have delivered.

Transformation will require leadership and influence across the children and young people's system, through the Transformation Board, Children and Young People's Health and Wellbeing Board, through Local Children's Partnership Groups and to Districts Councils and CCG Boards. HeadStart Kent works alongside the Kent Troubled Families programme and will influence practice to develop positive resilience building activities and good emotional wellbeing through a whole family approach.

Kent County Council, through HeadStart Kent's Executive Group, is equally represented at all of these structures providing intelligence and promoting evidence based preventative approaches. Early Help and Preventative Services, Specialist Children's Services and the Public Health department has prioritised the emotional health and resilience of children, young people and families and are increasingly building on an asset based health inequalities approach.

Investment by the NHS, Early Help services, schools, Local Authorities and communities in continuing the HeadStart Kent services at all three Levels that have been proved to be effective; implementing these in further Groupings of schools across Kent.

This will include aligning resources to ensure HeadStart Kent's approach to the delivery of emotional health and resilience approach can be sustained through the commissioning of whole school health improvement (and Tiers 1 and 2 emotional health and wellbeing). Transformation will not be achieved or sustained through access to resources alone. Funding will develop the capabilities of schools, and local leadership transferred to local partnerships.

School emotional health interventions are currently provided by the School Public Health Service, commissioned by Kent County Council Public Health Department. The current contract value for this service is £5.2 million across the school aged child population. It is proposed that this service is remodelled with the development of an adolescent health approach, comprising a strengthened role around emotional health

and wellbeing and a more visible presence in schools. The figure which contributes to HeadStart Kent Wide approach is estimated at £ 2,530,000 per year. 132

This service will also deliver Tier 2 emotional health services, working more closely with schools and reaching into primary school settings to support children with transition. The current contract value for this Level 2 service is £800,000. There has already been significant consultation around this model with support across the system from CCGs, Kent County Council, schools and young people.

The School Public Health Service already delivers approaches including the Enhanced Healthy Schools Model. It is involved in the development of the Kent Resilience Framework. The service also delivers training to schools and parents around emotional health and working toward ensuring the whole workforce is trained in Youth Mental Health First Aid.

This approach to adolescent health will work alongside the HeadStart Kent local workers to embed the Resilience Framework, building and sustaining the skills of the school staff and input into Safe Spaces. They will use and refer schools to the resources and training provided on the portal and will build their capability to involve young people in shaping services.

Through using the range of funding based on the business cases, the benefits of HeadStart Kent can be accessed and demonstrated. These will include funding provided by School Public Health Service and the Future in Mind Transformation Fund. Other funding which may be available based on the benefits generated by HeadStart Kent includes resources from Local Children's Partnerships Groups, and school budgets including Pupil Premium. There are a number of large charitable foundations based in Kent and HeadStart Kent will support local community groups to approach them based on the aims of the Programme.

The Grouping's Terms of Reference and individual Schools Partnership Agreements will set out clear deliverables to be achieved by the end of the HeadStart Kent Programme, requiring the school to plan for the sustainability of the Programme. During the 18 months of investment, schools will work with their partners to develop a robust plan and resources to sustain the services in order for benefits to be generated in the long term. There will be sustained commitment within the Groupings locally, as after 18 months of initial investment from HeadStart Kent match funding will be provided for a half day post to continue the momentum thereafter.

All commissioned interventions will have a specification which includes the development and delivery of an exit strategy. This will ensure that where contact or support is required for an individual or their family again in the future, this will be facilitated through the provider or local services that are sustained. The overarching governance through to the Children's Health and Wellbeing Board will ensure that

"By 2020 young people in Kent will have the coping abilities to support their own and peers' emotional health and wellbeing"

<sup>\*</sup>This figure is based on a percentage of the budget currently committed to Tier1 and 2 emotional health and wellbeing services for school aged children. The re procurement of Children's Public Health Services is currently under review. There is commitment to maintaining the level of investment in children and young people's emotional health. This budget and the performance of this service is and will, in the future, be monitored on a quarterly basis by Kent Public Health Departments Child Health Team.

senior systems leaders have ownership of the outcomes and impact of the Programme to integrate into the systems.

The sustainability of the HeadStart Kent mission will ensure that beyond 2020...

"Young people and their families will have improved resilience, by developing their knowledge and lifelong skills to maximise their own and their peers' emotional health and wellbeing; so to navigate their way to support when needed in ways which work for them."

We are determined to ensure resilience becomes "everybody's business" and that support for young people is effective, preventative and easily accessible. We will support vulnerable young people and ensure the HeadStart Kent message becomes Kent-wide. Our Programme will be accountable and transparent and we will develop the workforce to drive the system change within Kent. This will not just reduce demand on over-burdened mental health and other services; it will help deliver the best possible outcomes for our young people.

The Big Lottery Fund has provided us with the opportunity to generate permanent system-wide transformation of services across Kent and we embrace this challenge. Through this exciting opportunity of co-production with our young people, families, communities and our partners, we are committed to ensuring we realise the maximum benefits for our young people and for our future generations.