



Executive Board

**Thursday, 11 September 2008 2.00 p.m.
Marketing Suite, Municipal Building**

A handwritten signature in black ink, appearing to read 'David W R'.

Chief Executive

**ITEMS TO BE DEALT WITH
IN THE PRESENCE OF THE PRESS AND PUBLIC**

PART 1

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1. MINUTES	
2. DECLARATIONS OF INTEREST	
Members are reminded of their responsibility to declare any personal or personal and prejudicial interest which they have in any item of business on the agenda no later than when that item is reached and, with personal and prejudicial interests (subject to certain exceptions in the Code of Conduct for Members), to leave the meeting prior to discussion and voting on the item.	
3. CHILDREN AND YOUNG PEOPLE PORTFOLIO	
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*Please contact Lynn Cairns on 0151 471 7529 or e-mail lynn.cairns@halton.gov.uk for further information.
The next meeting of the Committee is on Thursday, 25 September 2008*

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ITEMS CONTAINING "EXEMPT" INFORMATION FALLING WITHIN SCHEDULE 12A OF THE LOCAL GOVERNMENT ACT 1972 AND THE LOCAL GOVERNMENT (ACCESS TO INFORMATION) ACT 1985	
<p>In this case the Board has a discretion to exclude the press and public but, in view of the nature of the business to be transacted, it is RECOMMENDED that under Section 100(A)(4) of the Local Government Act 1972, having been satisfied that in all the circumstances of the case the public interest in maintaining the exemption outweighs the public interest in disclosing the information, the press and public be excluded from the meeting for the following item of business on the grounds that it involves the likely disclosure of exempt information as defined in paragraphs 1, 2 and 3 of Part 1 of Schedule 12A to the Act.</p>	
8. LEADER'S PORTFOLIO	
(A) VIKINGS	171 - 175

In accordance with the Health and Safety at Work Act the Council is required to notify those attending meetings of the fire evacuation procedures. A copy has previously been circulated to Members and instructions are located in all rooms within the Civic block.

REPORT TO: Executive Board

DATE: 11th September 2008

REPORTING OFFICER: Strategic Director – Children and Young People

SUBJECT: Summary of Educational Attainment 2008

1.0 PURPOSE OF THE REPORT

To report on 2008 performance data for Foundation Stage Profile and Key Stages 1 to 4. This is an initial report referring to currently available data. It reports attainment only and does not indicate the effectiveness of service delivery. A more detailed report covering locality, comparator and school interventions will be produced when reliable pupil level data is available.

2.0 RECOMMENDATION: That

2.1 The Board consider the attainment of children in Halton schools for the 2007-08 academic year and how they can assist in building on the achievements outlined.

3.0 SUMMARY

As Members may be aware from national media reports there have been a number of problems with the marking of KS2 and KS3 papers. This has led to delays in the release of the results and at the current stage data is still incomplete for KS3 and therefore cannot be reported at present. A detailed data report for Foundation Stage, KS1, KS2, GCSE and A-Level is included in Appendix 1. There has been tremendous progress again at both KS2 and GCSE, which are the key results in terms of an indicator of future outcomes for children and young people in Halton.

3.1 Foundation Stage Profile

Foundation Stage Profile is a continual assessment of a child's ability undertaken throughout the reception year and then reported on at the end of the year. The main headlines for Halton are summarised as follows;

- Average scores at all six summary aspects dipping compared to the previous year. This may be due to improved moderation and will be considered in more detail when comparator data is available
- Improvement in linking sounds and letters from 5.9 to 6.1 following targeted interventions.
- Average FSP score for children in lowest performing 20% increased to 60.6% up from 58.1% in 2006.
- Girls outperforming boys across all individual aspects with significant differences particularly in % gaining Level 6+ in PSED and CLL

3.2 Key Stage 1

At Key Stage 1 a child's attainment in Reading, Writing, and Maths is assessed during Year 2. The main headlines for Halton are summarised as follows;

- Results at Level 2+ are roughly in line with last year with a 0.5% increase in Reading, a 0.3% decrease in Writing, and a 0.8% increase in Maths.
- Performance at Level 2b+ was mixed with a 1.2% increase in Reading, a 1.4% decrease in Writing, and a 0.1% decrease in Maths.
- Level 3+ results were disappointing with declining performance in all subjects of 1.6% in Reading, 2.2% in Writing, and 2.5% in Maths.
- Halton is below the national average by 4.2% in Reading, 3.1% in Writing, and 3.3% in Maths

3.3 Key Stage 2

At Key Stage 2 a child's attainment is assessed in English, Reading, Writing, Maths, and Science during Year 6. Current data should be treated with caution due to the problems in marking and returning papers. The main headlines for Halton are summarised as follows;

- Excellent progress has been made again following the major improvements in results last year.
- % achieving Level 4+ in English improved from 81.3% to 83.7%, well in excess of the national average of 81%.
- % achieving Level 4+ in Maths improved from 77% to 81.1%, again well in excess of the national average of 78%.
- Science results also showed a significant improvement from 87.4% to 91.2% at Level 4
- Further reduction in the number of schools below floor target with 5 in both English and Maths compared to 2006 when there were 12 in English and 11 in Maths.

3.4 Key Stage 3

At Key Stage 3 a child's attainment in English, Maths, and Science is measured during Year 9. Performance cannot be reported at present due to the high number of missing results at some schools.

3.5 Key Stage 4

Key Stage 4 attainment measures a child's GCSE results in Year 11. The main headlines for Halton are summarised as follows;

- Further excellent progress has been made again following the major improvements in results last year.
- % achieving 5 A*-C improved from 61.9% to 71.3% which means there has been a huge rise of 18.7% over the last two years.
- % achieving 5 A*-C including English and Maths increased from 40.7% to 49.2% which means there has been a major rise of 15.9% over the last two years.
- Number of schools below the national floor target for 5 A*-C including English and Maths has reduced from 3 in 2006 to 1 in 2008.

3.6 Key Stage 5

Key Stage 5 results include 2 School Sixth Forms and Riverside College. The main headlines for Halton are summarised as follows;

- % of 'A' grades remained the same as 2007 at 5%.
- Progress from last year with improvements in % young people achieving A-C grades from 51% to 54% and A-E grades from 97% to 98%.

4.0 FINANCIAL IMPLICATIONS

None

5.0 OTHER IMPLICATIONS

No other implications have been identified.

6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

6.1 Children and Young People in Halton

Educational attainment is key to the future life chances of children and young people in Halton. It also provides a proxy to the work being done with vulnerable children in the borough and the critical priority areas of narrowing the gap.

6.2 Employment, Learning and Skills in Halton

Educational attainment of children and young people will have a significant impact on future employment, learning and skills of Halton's population.

6.3 A Healthy Halton

Not applicable.

6.4 A Safer Halton

Not applicable.

6.5 Halton's Urban Renewal

Not applicable.

7.0 RISK ANALYSIS

A risk analysis will be completed as part of the review of the Directorate Risk Register.

8.0 EQUALITY AND DIVERSITY ISSUES

Educational attainment is central to reducing inequalities and ensuring the best outcomes for all children and young people in Halton with a particular focus on vulnerable groups.

9.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

None.

Data Summary of Results (KS3 excluded due to incomplete data)

FOUNDATION STAGE PROFILE RESULTS**Trends Over Time 2004-2008****Summary Aspects 2004-2008****Average Scores**

	Personal Social and Emotional Development	Communication Language and Literacy	Mathematical Development	Knowledge and Understanding of the World	Physical Development	Creative Development
2004	7.3	6.4	7.1	7.2	7.6	7.1
2005	7.2	6.3	6.9	7.1	7.6	7.0
2006	7.1	6.1	6.8	6.9	7.3	6.8
2007	7.0	6.2	6.8	6.9	7.2	6.8
2008	6.8	6.1	6.5	6.6	7.1	6.4

Individual Aspects 2004-2008**Average Scores**

	Personal, Social and Emotional Development			Communication, Language and Literacy				Mathematical Development		
	Disposition and Attitude	Social Development	Emotional Development	Language for Communication and Thinking	Linking Sounds and Letters	Reading	Writing	Numbers as Labels and for Counting	Calculating	Shape, Space and Measurements
2004	7.5	7.2	7.2	7.1	5.9	6.7	6.0	7.4	6.6	7.2
2005	7.5	7.1	7.1	7.0	5.8	6.5	5.7	7.3	6.3	7.1
2006	7.4	6.9	7.0	6.8	5.7	6.4	5.6	7.3	6.2	6.9
2007	7.2	6.9	6.9	6.7	5.9	6.4	5.6	7.2	6.3	6.8
2008	7.1	6.6	6.7	6.5	6.1	6.2	5.6	6.9	6.1	6.5

Gender Analysis 2008**Individual Aspects – Gender Analysis 2008****Attainment at 6+ and 8+**

		Personal, Social and Emotional Development			Communication, Language and Literacy				Mathematical Development		
		Disposition and Attitude	Social Development	Emotional Development	Language for Communication and Thinking	Linking Sounds and Letters	Reading	Writing	Numbers as Labels and for Counting	Calculating	Shape, Space and Measurements
% Gaining 6+	All	89.7	82.1	80.3	79.2	69.0	70.0	54.7	86.9	68.2	83.6
	Girls	93.0	88.4	87.6	85.8	75.2	76.3	63.6	89.1	70.9	86.5
	Boys	86.5	76.0	73.2	72.8	62.9	63.9	46.1	84.7	65.6	80.7
% Gaining 8+	All	46.8	32.6	36.5	28.8	21.9	22.0	16.4	29.7	19.5	17.9
	Girls	53.1	37.4	43.2	33.1	25.6	23.1	20.5	29.7	18.5	18.4
	Boys	40.6	27.8	29.9	24.7	18.3	20.8	12.3	29.6	20.5	17.4

Individual Aspects – Gender Analysis 2008**Average Scores**

	Personal, Social and Emotional Development			Communication, Language and Literacy				Mathematical Development		
	Disposition and Attitude	Social Development	Emotional Development	Language for Communication and Thinking	Linking Sounds and Letters	Reading	Writing	Numbers as Labels and for Counting	Calculating	Shape, Space and Measurements
All	7.2	6.9	6.9	6.7	5.8	6.4	5.6	7.2	6.3	6.7
Boys	7.1	6.6	6.6	6.5	5.5	6.2	5.2	7.1	6.2	6.6
Girls	7.4	7.1	7.2	7.0	6.2	6.7	6.1	7.3	6.4	6.9

Halton FSP Target Areas 2006 – 2008

% Attainment at 6+ compared to 30% deprived SOAs in Halton

		% Achieving 6+ in Personal, Social and Emotional Development			% Achieving 6+ in Communication, Language and Literacy			% Achieving 6+ in Personal, Social and Emotional Development AND Communication, Language and Literacy		
		All	Non 30% SOAs	30% SOAs	All	Non 30% SOAs	30% SOAs	All	Non 30% SOAs	30% SOAs
2006	All	75.9	84.1	72.3	44.3	58.5	38.1	42.0	56.4	35.8
	Boys	68.8	79.1	64.5	35.0	46.3	30.4	32.4	43.8	27.7
	Girls	82.8	88.7	80.1	53.2	69.7	45.7	51.3	67.9	43.9
2007	All	75.8	82.8	72.9	47.0	57.5	42.8	73.6	84.5	69.0
	Boys	68.6	77.5	64.7	37.6	47.4	33.2	32.7	44.0	27.7
	Girls	83.8	89.4	81.1	57.0	70.0	52.3	55.8	68.2	51.3
2008	All	73.6	84.5	69.0	48.4	63.1	42.1	45.4	59.3	39.5
	Boys	65.7	77.6	60.5	40.7	56.1	33.9	38.0	51.7	32.0
	Girls	81.6	92.0	77.4	56.2	70.7	50.3	53.0	67.6	47.1

KEY STAGE 1 RESULTS

Analysis based on validated data as submitted to DCSF
 Special Schools included (Note. Special Schools excluded in APA/JAR data sets)

Reading 2006 - 2008

	2006	2007	2008
Halton average level 2+	82.9%	79.3%	79.8%
National average level 2+	84.0%	84.0%	84.0%
Halton average level 2b+	67.9%	65.7%	66.9%
National average level 2b+	71.0%	71.0%	71.0%
Halton average level 3+	24.9%	25.4%	23.8%
National average level 3+	26.0%	26.0%	25.0%

Writing 2006 - 2008

	2006	2007	2008
Halton average level 2+	79.4%	77.2%	76.9%
National average level 2+	81.0%	80.0%	80.0%
Halton average level 2b+	58.3%	57.1%	55.7%
National average level 2b+	60.0%	59.0%	58.0%
Halton average level 3+	12.1%	11.8%	9.6%
National average level 3+	14.0%	13.0%	12.0%

Maths 2006 - 2008

	2006	2007	2008
Halton average level 2+	89.4%	85.9%	86.7%
National average level 2+	90.0%	90.0%	90.0%
Halton average level 2b+	72.2%	69.4%	69.3%
National average level 2b+	73.0%	74.0%	74.0%
Halton average level 3+	21.2%	22.0%	19.5%
National average level 3+	21.0%	22.0%	21.0%

KEY STAGE 2 RESULTS

Analysis based on summary data received from schools. Detailed analysis will be undertaken as soon as the authority has received the individual pupil data from the DCSF. Special Schools included (Note. Special Schools excluded in APA/JAR data sets)

English 2006-2008

	2006	2007	2008
Halton average level 4+	76.2%	81.3%	83.7%
National average level 4+	79.0%	80.0%	81.0%
Halton average level 5+	27.4%	31.2%	30.2%
National average level 5+	32.0%	33.0%	29.0%

Maths 2006-2008

	2006	2007	2008
Halton average level 4+	75.1%	77.0%	81.1%
National average level 4+	79.0%	77.0%	78.0%
Halton average level 5+	30.5%	30.1%	32.1%
National average level 5+	32.0%	33.0%	31.0%

Science 2006-2008

	2006	2007	2008
Halton average level 4+	87.4%	87.4%	91.2%
National average level 4+	87.0%	88.0%	88.0%
Halton average level 5+	47.7%	49.4%	49.2%
National average level 5+	46.0%	46.0%	44.0%

**Number of Primary Schools
Below Floor Targets (< 65%)**

	2006	2007	2008
English	11	7	5
Maths	11	11	5

**Number of Primary Schools
Below %L4 Targets**

	2006	2007	2008
English	25	14	12
Maths	21	24	20

Key Stage 4 - GCSE RESULTS 2006 – 2008

Analysis based on summary data received from schools. Detailed analysis will be undertaken as soon as the authority has received the individual pupil data NCER.

Special Schools included (Note. Special Schools excluded in APA/JAR data sets)
National results include Independent Schools.

	2006	2007	2008
Halton 5 A* to C	52.6%	61.9%	71.3%
National 5 A* to C	59.2%	62.0%	TBC
Halton 5 A* to C inc. Eng & Maths	33.3%	40.7%	49.2%
National 5 A* to C inc. Eng & Maths	45.8%	45.5%	TBC
Halton 1 A* to G	96.5%	98.1%	97.2%
National 1 A* to G	97.8%	98.9%	TBC

**Number of Secondary Schools
Below Floor Targets at KS4**

	2006	2007	2008
<30% 5+ A*-C inc.E&M	3	2	1

**Number of Secondary Schools
Below Targets at KS4**

	2006	2007	2008
5+ A*-C	0	0	1*

2008 Targets changed to 5+A-C inc. E&M*

Key Stage 5 – A Level Results 2006 – 2008

Key Stage 5 results include 2 School Sixth Forms and Riverside College

	2006	2007	2008
% 'A' Grades	10%	5%	5%
% A – C Grades	57%	51%	54%
% A – E Grades	97%	97%	98%

REPORT TO: Executive Board

DATE: 11th September 2008

REPORTING OFFICER: Strategic Director – Children & Young People

SUBJECT: Joint Area Review

1.0 PURPOSE OF THE REPORT:

To summarise the key findings of the recent Joint Area Review in Halton.

2.0 RECOMMENDATION: That

- (i) the report be noted; and
- (ii) the improvement plan be endorsed.

3.0 BACKGROUND:

Halton's Joint Area Review was undertaken against a change of methodology from April 2007. This change resulted in a 'harder test' in which the emphasis was upon vulnerable groups. This coupled with two additional investigations that concentrated on under performance meant that Halton was inspected upon.

- Children in need of safeguarding
- Children in Care
- Children with learning difficulties and disabilities
- The impact of the partners' strategy on improving infant mortality, breastfeeding and obesity rates
- The impact of integrated youth support provision on young people's involvement in planning and delivery of local services, their engagement in youth work and in addressing the level of young people not in education, or training.
- Investigations also took place around service management and capacity to improve.

4.0 FINDINGS:

4.1 The result of the investigations were as follows:

Safeguarding	Outstanding
Children in Care	Good
Learning Difficulties and Disabilities	Good
Service Management	Good
Capacity to Improve	Outstanding
Health	Adequate
Youth Support	Good

The main findings were summarised as follows:

- Safeguarding is outstanding. The quality of early intervention is excellent and there is a wide range of responsive and locally-based services for children and families. Sustained high performance, including child protection, is underpinned by very strong joint working, robust policies and procedures. The safeguarding board provides very effective leadership.
- Local services for looked after children are good. Multi-agency strategic planning is good. Care planning and review are effective, including well-targeted health and educational support. Children live in safe, stable placements and receive good care. Care leavers are well supported but there are low numbers in education, employment or training or in permanent accommodation.
- The contribution of local services to improving outcomes for children and young people with learning difficulties and/or disabilities is good. The council and its partners have made rapid progress over the last three years in developing a well-planned strategy for inclusion. The partnership gives a very strong strategic lead for driving improvement, which is supported by a wide range of agencies. Provision for children with complex needs, especially young children, is good and very well coordinated but support for those with lower level needs is not always as easily accessible.
- The impact of the partners' strategy on infant mortality, breastfeeding and obesity outcomes is adequate. Effective strategic action has been taken by the PCT, the council and partners to increase resources and prioritise improvement. Staff at all levels are well motivated to make improvements. An appropriate range of inter-agency activities has recently been put in place resulting in some early signs of improvement.
- The impact of the evolving integrated youth support structure on young people's engagement is good. There have been sustained improvements in provision over time. The local authority and its partners are very responsive to young people's views and opinions. The integrated youth structure is enabling more effective joint work and planning but some key management decisions necessary to embed the strategy have yet to be made.
- Service management is good, with outstanding capacity to drive further improvement. Highly effective leadership provides clear direction, and good systems, processes and plans are in place to support front-line delivery by committed and capable staff. Achievement is being embedded and built upon and ambitions for further development are challenging. The partnership is self-aware about areas for improvement and can show a track record of successfully responding to underperformance. More integrated, medium-term financial planning across the partnership is an area for development.

4.2 In general terms this meant that:

- The combined score of the 'core' investigation makes Halton the most successful JAR in the North West to date (only Lancashire, Tameside and Blackburn left to report).
- Halton is the only North West authority to secure outstanding for safeguarding (one of only six nationally).

- Halton's successful JAR puts it in the top 4 nationally.

4.3 However a number of key improvements were highlighted. These could be categorised under two sections. The first is improvement in outcomes and secondly an improvement in processes.

Outcome Improvements

- Improve attendance, attainment, and achievement of young people not in education, employment or training
- Improve health outcomes for childhood obesity, breastfeeding and reduce infant mortality.
- Improve numbers and attainment of Care Leavers in Education, Employment or Training
- Increase numbers of young people in Permanent Accommodation

Process Improvements

- Approach to Equality and Diversity to be more robust and address the needs of all communities in Halton
- Further embed safeguarding principles in the Borough
- Improve placement options for children in care to ensure their wishes and needs are comprehensively addressed.
- Improve Support, Education and Transition Arrangements for Children and Young People with LDD.
- Improve SEN process and SEN Reviews
- Improve Transition Planning and Reviews as a means of promoting better outcomes for children and young people with LDD
- Improve Medium and Long Term Financial Planning
- Improve Data Collection and Intelligence Systems
- Improve Accountability Arrangements in Children's Trust

5.0 NEXT STEPS:

In light of the recommendations for improvement a multi-agency improvement plan has been established. See appendix 2.

6.0 POLICY IMPLICATIONS

The JAR focused upon a number of specific areas as part of the corporate priorities.

7.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

The inspectors looked at a number of council specific themes including capacity to improve and service management.

8.0 RISK MANAGEMENT

The lack of progress in improving outcomes for children and young people in Halton is the principal risk of not implementing the recommendations from the inspection.

Joint area review

Halton Children's Services Authority Area

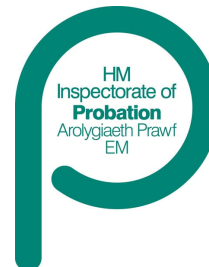
Review of services for children and young people

Audit Commission
Healthcare Commission
HM Crown Prosecution Service Inspectorate
HM Inspectorate of Constabulary
HM Inspectorate of Prisons
HM Inspectorate of Probation
Ofsted

Age group: All

Published: 22 July 2008

Reference no: 876



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Introduction

1. The most recent annual performance assessment (APA) for Halton judged the council's children's services as good and its capacity to improve as good.
2. This report assesses the contribution of local services in ensuring that children and young people:
 - at risk, or requiring safeguarding are effectively cared for
 - who are looked after achieve the best possible outcomes
 - with learning difficulties and/or disabilities achieve the best possible outcomes.
3. The following investigations were also carried out:
 - the impact of the partners' strategy on improving infant mortality, breastfeeding and obesity rates
 - the impact of integrated youth support provision on young people's involvement in planning and delivery of local services, their engagement in youth work and in addressing the level of young people not in education, employment or training.

Context

4. Halton is a small unitary authority, located between Cheshire and Merseyside and includes two main towns, Runcorn and Widnes, on either side of the Mersey estuary. The borough covers an area of 31 square miles with 28% of the area designated as green belt and has the smallest population of any area in the north-west region. Halton's identity has been shaped by chemical and manufacturing industry and recent investment is improving the environment and air quality. Newer industries are based on science and information technology, for example the Daresbury Enterprise Park, and regeneration activity is developing Widnes town centre and housing stock in parts of Runcorn.
5. Halton is ranked the 30th most deprived borough in England (Index of Multiple Deprivation 2007), with 49% of the population living in the most deprived wards in the country. The overall population is 118,000. The proportion of the population from Black and minority ethnic groups is very low. Latest estimates (2007), which include recent East European migrant workers, place this at 3%. Twenty-seven percent, or approximately 31,700, of the population are aged 19 and under, with 494 (2.8%) of these from a Black and minority ethnic group.

6. The integration and strategic development of children's services is overseen by the Children and Young People's Alliance Board, which moved to Children's Trust status in April 2008 and includes 18 representatives from the voluntary and community sector.
7. Pre-16 education is provided through 130 childminders, 11 maintained nursery classes and four nursery schools. All children have access to an early years education place. Schooling is provided through 51 primary schools, eight high schools, four special schools and two pupil referral units. There are 12 designated children's centres, of which nine are fully operational, and 64% of schools deliver extended services. The Building Schools for the Future Programme will include the development of an all-through Trust school and a shared faith school. One existing school will become an academy.
8. Post-16 learning is available through Riverside College and two of the high schools. The Learning and Skills Council has secured six projects across the borough which provides Entry to Employment training from a total of 13 work-based learning providers. Adult and community learning is provided by Riverside College, with family learning delivered through children's centres.
9. There are 152 looked after children and young people who are predominantly cared for by 86 registered foster carers and two children's homes. There is a range of short break provision for children with learning difficulties and/or disabilities, including a residential unit. Child protection plans are in place for 62 children and young people.
10. Primary care for the borough is provided by the Halton and St Helens Primary Care Trust (PCT). Acute health services are provided through the North Cheshire Hospitals NHS Trust (Halton General Hospital and Warrington General Hospital), St Helens and Knowsley Hospital NHS Trust (Whiston Hospital) and the West Cheshire NHS Trust (Countess of Chester Hospital). Child and Adolescent Mental Health Services (CAMHS) are provided by the Five Boroughs Partnership NHS Trust.
11. The Youth Offending Service is provided in a partnership arrangement with Warrington. There is no young offender institution in Halton.

Main findings

12. The main findings of this joint area review are as follows:
- Safeguarding is outstanding. The quality of early intervention is excellent and there is a wide range of responsive and locally-based services for children and families. Sustained high performance, including child protection, is underpinned by very strong joint working, robust policies and procedures. The safeguarding board provides very effective leadership.

- Local services for looked after children are good. Multi-agency strategic planning is good. Care planning and review are effective, including well-targeted health and educational support. Children live in safe, stable placements and receive good care. Care leavers are well supported but there are low numbers in education, employment or training or in permanent accommodation.
- The contribution of local services to improving outcomes for children and young people with learning difficulties and/or disabilities is good. The council and its partners have made rapid progress over the last three years in developing a well-planned strategy for inclusion. The partnership gives a very strong strategic lead for driving improvement, which is supported by a wide range of agencies. Provision for children with complex needs, especially young children, is good and very well coordinated but support for those with lower level needs is not always as easily accessible.
- The impact of the partners' strategy on infant mortality, breastfeeding and obesity outcomes is adequate. Effective strategic action has been taken by the PCT, the council and partners to increase resources and prioritise improvement. Staff at all levels are well motivated to make improvements. An appropriate range of inter-agency activities has recently been put in place resulting in some early signs of improvement.
- The impact of the evolving integrated youth support structure on young people's engagement is good. There have been sustained improvements in provision over time. The local authority and its partners are very responsive to young people's views and opinions. The integrated youth structure is enabling more effective joint work and planning but some key management decisions necessary to embed the strategy have yet to be made.
- Service management is good, with outstanding capacity to drive further improvement. Highly effective leadership provides clear direction, and good systems, processes and plans are in place to support front-line delivery by committed and capable staff. Achievement is being embedded and built upon and ambitions for further development are challenging. The partnership is self-aware about areas for improvement and can show a track record of successfully responding to underperformance. More integrated, medium-term financial planning across the partnership is an area for development.

Grades

4: outstanding; 3: good; 2: adequate; 1: inadequate

	Local services overall
Safeguarding	4
Looked after children	3
Learning difficulties and/or disabilities	3
Service management	3
Capacity to improve	4

Recommendations

For immediate action

The local partnership should:

- ensure that an appropriate way is found for the successful dissemination of the findings of this report to children and young people in the area
- increase numbers of care leavers engaged in education, employment or training.

For action over the next six months

The local partnership should:

- ensure that the quality and consistency of annual review reports for children with learning difficulties and/or disabilities improves and schools are challenged where practice is not good enough
- ensure that transition plans are prepared for all young people with learning difficulties and/or disabilities who should have one and that these are of good quality and reviewed annually to monitor progress against the actions agreed
- agree, communicate and implement the detail of integrated youth support and development arrangements
- develop a medium-term financial strategy that encompasses the contribution of all relevant partners.

The PCT, the council and partners should:

- improve the evaluation of health outcomes by introducing local sub-targets and improving the coordination, monitoring and analysis of performance.

Equality and diversity

13. The council and its partners demonstrate a strong commitment to equality and diversity which is well articulated in the Children and Young People's Plan (CYPP). There is a clear priority to improve outcomes and remove barriers to achievement. Equality target groups are clearly identified and data is used effectively to monitor their performance. However, the recently introduced equality strategy does not fully identify clear actions for improvement and some equality and some diversity impact assessments lack rigour. The council has made appropriate progress to improve their Local Government Equality Standards grade. The target to achieve Level 3, had been missed in 2007 and was achieved in 2008.

14. Consultation has effectively shaped services and has led to improvements. The council has made a positive response to the needs of community groups, for example quickly providing language support for the children of new arrivals. Effective work with the Traveller communities has engaged more children in school. The Free 2 Be Me project enables young people with learning difficulties and/or disabilities to understand their rights and actively participate in day-to-day activities. The provision of inter-generational services through the co-location of community centres and children's centres helps to promote community cohesion.

15. Work with schools in the most deprived areas has raised attainment at Key Stage 2 in all subjects and Key Stage 3 in mathematics and science. Outstanding progress has been made in improving outcomes at Key Stage 4. However, the attainment of White working class boys remains a challenge. Youth service projects on anti-racism, and attitudes to gay and lesbian young people have had a positive impact and the Positive Futures project is effective in re-engaging socially excluded young people in positive activities.

Safeguarding

Inadequate Adequate Good Outstanding

16. **The contribution of local services to improving outcomes for children and young people at risk or requiring safeguarding is outstanding.**

Major strengths	Important weaknesses
<p>Safeguarding provided within a framework of strong scrutiny and quality assurance in which high performance has been sustained.</p> <p>Very robust partnership working effectively underpinned by up-to-date policies, procedures and guidance.</p> <p>Excellent progress to implement the Common Assessment Framework (CAF), which is having a good impact.</p> <p>The very strong leadership provided by the safeguarding board on all safeguarding matters, with clear accountabilities.</p> <p>Services have been refocused to provide a wide range of family support and prevention whilst maintaining a clear focus on children who are most at risk.</p>	

17. Safeguarding in Halton is seen as 'everyone's business'. The 2007 APA judged safeguarding arrangements to be outstanding, a position maintained from 2006. Sustained progress has continued to ensure a well-balanced range of services with increasing access by children and families in need. Nine children's centres are fully operational across the borough and are linked well to local schools and other community resources. They provide high quality multi-agency preventative support, such as the recent Easter school holiday programme in Runcorn which provided positive activities for 607 children and parents.

18. Excellent progress has been made to develop the use of the CAF. To date, over 400 CAFs have been completed and another 602 are in progress. Training for all partners on its use has been of very good quality and over 700 practitioners are now trained as assessors. There is a good distribution of lead professional roles across all the partners. Families are now receiving high-quality services at an early stage and referrals to specialist services for neglect have reduced by 16% in 2007–08. Specialist services are now very sharply focused on the needs of the most vulnerable children, including the 25 young people aged over 16 who are subject to "child in need" plans.

19. Action to reduce bullying is very well coordinated. Children, young people and their carers have been consulted very well in developing the strategy. The anti-bullying coordination group offers excellent leadership and provides comprehensive guidance and training for professionals. As a result of this action, links between schools and the police are improved and peer mentoring is developing well. Complaints about bullying are also reducing.

20. Policies and procedures for safeguarding are clear, up-to-date and fully reflect government guidance. Routes for referral both in respect of children in need and children at risk of harm are robust and fully understood by all agencies. A contact centre is operating well to process incoming work and this is suitably connected to clear duty arrangements. Levels of provision are well defined and supported by good quality information on the levels of intervention and arrangements for access at different stages.

21. Duty arrangements are strong, well resourced and effectively managed. Processes for tracking incoming work, gathering and sharing information and agreeing actions are very good. Initial and core assessments are completed to a high standard and are very timely. Re-referral rates at 11.9% are significantly lower than those of similar authorities (22.3%), demonstrating the effectiveness of initial assessments and the quality of services provided. Management oversight of work is effective. All case records seen during this review were of a good standard and many were excellent. A recent review by the Department of Children, Schools and Families evaluated Halton's use of the Integrated Children's System and judged it to be good. Case chronologies are used well to evaluate the impact of services over time and the trends and patterns in relation to ongoing risk. The emergency duty team, also covering St Helens, is well managed, has experienced staff and is fully integrated with contact and day duty arrangements.

22. Processes for assessing and planning for children at risk are robust with good performance in holding case conferences, reviewing protection plans and in the production of records of meetings. Very good progress has been made in the engagement of parents and carers in planning and suitable attention has been paid to the involvement and participation of children and young people. Independent Reviewing Officers provide a very efficient service and play an important quality assurance role in respect of protection planning. There is effective tracking of adults who may pose a serious risk to children through robust Multi-Agency Public Protection Arrangements.

23. The Halton Safeguarding Children Board (HSCB) offers strong leadership and is well attended with very good representation at all levels. Accountabilities are very clear with good lines of communication, through representatives, to all partner organisations. The chairperson, Chief Executive, Director of Children's Services and lead member meet regularly to agree safeguarding business and priorities and ensure appropriate accountability. The board provides a comprehensive training programme for all partners including the voluntary sector. The quality and range of this training has been consistently praised by

local agencies. Business planning is well advanced and the board is well resourced to deliver its priorities and maintain impetus. The HSCB provides guidance to all sectors through a good range of printed material. Good work is being done to raise awareness about private fostering and the need for registration.

24. The number of serious case reviews has been low and arrangements for conducting them have been good. Reports have been produced to a high standard. There is good evidence of learning from reviews and swift translation into day-to-day practice. The child death sub-group now monitors all child deaths in the area. The work of this group is outstanding and the chairperson is assisting the development of other similar groups in the region.

25. The HSCB is forward looking and focused on improvement. It recognised the high proportion of children and young people on the child protection register due to neglect and developed a clear strategy to address these needs. The strategy is seen as being a positive driver to the delivery of improved services and has been reflected in the commissioning of new targeted services from three voluntary sector agencies to reduce the incidence of neglect. This project, along with other activity, is having considerable impact and there are good examples where parenting has been significantly improved. Similar, targeted work has been undertaken through Arch Initiatives, a voluntary organisation based in Widnes, aimed at children, young people and their families who misuse drugs and alcohol. This project is also able to demonstrate good impact.

26. Effective leadership in the council and PCT to promote healthy lifestyles is suitably integrated and prioritised. The provision of services to promote the emotional well-being of children and young people is very good. Specialist CAMHS workers offer advice to schools and other settings and, combined with a range of other services, are suitably identifying children and young people at early stages to assess needs and provide relevant services. Progress on the delivery of a comprehensive CAMHS is good.

27. The council and partners give high priority to safe recruitment practice and there is compliance with minimum legal standards. However, a recent internal audit highlighted the need to strengthen whistle-blowing arrangements and to ensure that school governors are fully aware of their responsibilities in respect of the consistent application of vetting procedures. Immediate action is being taken and the safer employment group has already commenced work to strengthen these areas. Voluntary sector providers confirm that there is appropriate and rigorous attention to safeguarding in the monitoring of contracts. The HSCB provides good guidance on safe recruitment to all partners.

28. Arrangements to monitor the whereabouts of children and young people are good. They are underpinned by up-to-date policies, procedures and effective joint working between the HSCB, council, schools and the police.

Police and children's social care services collaborate well to monitor children and young people deemed to be at particular risk, with good information exchange between the agencies. Further joint work is being undertaken to strengthen the arrangements for monitoring looked after children who may go missing.

29. Levels of domestic violence in the area have been historically high. Joint work to respond to domestic violence is very good and this has led to an increase in detection rates with 97 high priority cases, involving 150 children, discussed at Multi-Agency Risk Assessment Conferences in the last year. Police and social care notification systems work well leading to good assessment and planning. Women's Aid is a well organised and valued service which also provides excellent outreach support to enable victims of domestic violence to remain living in their homes with their children.

30. A comprehensive strategy to tackle anti-social behaviour has been developed, based on effective diversion, education and building community relations. The council and its partners take a holistic view of anti-social behaviour and tackle it at several levels. A good example is a diversionary activity named 'On the Streets' where the Fire Service, youth service and Connexions work together in areas where arson had been increasing. Effective action is in place to reduce re-offending; in the 12 months from April 2005 this was 27.2%, which is better than the national average of 35.5%.

Looked after children and young people



31. The contribution of local services to improving outcomes for looked after children and young people is good.

Major strengths	Important weaknesses
<p>Strong multi-agency commitment through the Children in Care mini-trust.</p> <p>Excellent work by the Intensive Support Team to reduce the need for children to be looked after and to prevent placement breakdown.</p> <p>Effective multi-agency care planning, review and service provision, including health.</p>	<p>High numbers of care leavers not in education, employment or training.</p> <p>Insufficient permanent accommodation for all care leavers.</p>

<p>Very good quality assurance of care planning.</p> <p>Good quality care from committed and well-supported local carers.</p> <p>Targeted educational support and monitoring leading to improving outcomes.</p>	
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32. Partner agencies have a strong shared commitment to improve outcomes for looked after children. This was described in the 2007 APA letter as 'impressive'. The Children in Care Partnership Board oversees a comprehensive and well-focused three-year strategy which is having a positive impact on placement stability, health and educational outcomes.

33. Well-focused preventative resources for children on the edge of care result in consistently low numbers of looked after children. In 2006–07 there were 57 per 10,000 of the under-18 population looked after compared to 69.1 in similar areas. The Intensive Support Team works very effectively to support families and to avoid placements ending prematurely. In 2007–08 the team worked with 288 children and only two of these became looked after.

34. Agencies, including the voluntary sector, work effectively to provide a good range of universal and targeted support. Care planning is robust and generally well recorded for all children and care leavers including those with plans for permanence. All looked after children and care leavers are appropriately allocated to a qualified social worker and receive regular visits. Co-location of social care, health and education staff brings clear benefits, for example earlier and improved access to CAMHS provision. The conference and reviewing unit provides very effective monitoring and quality assurance and contributes well to practice developments. Almost all participate in their reviews and the independent advocacy service is viewed favourably by those young people who use it. Appropriate attention is paid to reducing offending and this is now in line with similar areas.

35. Health services for looked after children are good. An audit of health needs has been effectively undertaken. In 2007–08, 95% received a health assessment, which is better than the national average of 84%. Almost all are up-to-date with their immunisations. Earlier difficulties over access to dental services have been overcome and most children now benefit from the fast-track service. Foster carers receive good support and training in relation to health matters. Recent action has been taken to improve access to health support for care leavers. On becoming looked after, all children have their emotional and mental health needs appropriately assessed and they are well supported by CAMHS who offer highly valued consultation to staff and carers.

36. Most looked after children live in stable placements. In-year placement stability is very good at 9% and is in line with similar areas. Numbers living in long-term placements are, at 78.3%, higher than in similar authorities (66.6%). The two children's homes and the fostering service have been judged to be good in regulatory inspections. There is a very committed and well-trained pool of local carers who report that they are well supported, including through the peer support provided by the Halton Fostering Family. Good use is made of friends and family carers, who are offered the same levels of support and training as mainstream carers.

37. The 16% of children living in purchased placements are almost all placed within 20 miles and their placements are carefully planned, managed and effectively monitored. A sound targeted strategy to increase the number of local foster carers has already recruited five additional carers. However, it is not yet clear that this will be sufficient to reduce the use of purchased placements for some children. Considerable improvements have been made to the adoption service, which was judged as good in a very recent monitoring visit. There is very good performance in relation to adoption: 12 children were adopted in 2006–07 and 12 more are currently placed. Some children in stable permanent placements are likely to benefit from special guardianship arrangements; however the current scheme of allowances makes these arrangements unattractive to carers.

38. The education of looked after children is well prioritised in the CYPP. There are low numbers becoming looked after and a large majority of these already have significant attainment issues and 31% compared to 27.7% nationally have a statement of special educational need or receive additional help at school. The Educational Support Service offers a good range of additional support and undertakes rigorous monitoring of progress. Schools prioritise needs well and most looked after children seen during this review enjoy school. One commented, 'I can't wait for the new term to start'.

39. Outcomes at Key Stages 1 and 2 are improving. In 2006, about half the children assessed reached the required level in English, whilst in 2007 all those assessed achieved this level. Although there are fluctuations in attainment due to the very small numbers involved, performance at GCSE in 2007 is good. All those who took examinations obtained at least five A*–G grades, which is significantly better than the national average of 63.7% for looked after children and is in line with all children locally and nationally.¹ Attendance is well monitored. The council's latest data shows that this has improved from 89% to 93% over the last two years. No young people are permanently excluded from school and in the last two years fixed-term exclusions have reduced from 18 to nine. Looked after children are increasingly engaged in positive activities, for example an increasing number undertake voluntary work through the Duke of Edinburgh scheme and all are offered the opportunity to participate in youth work.

¹ Performance in relation to five A*–C grades is not reported due to the very small numbers involved.

40. Corporate parenting is taken seriously and the council's Chief Executive takes a personal interest in the progress of looked after children. A committed lead member ensures that all elected members are well informed. They meet children through the recently developed children in care council and in regular visits to children's homes. However, the policy to give care leavers priority for jobs with the council is yet to be successfully implemented. There are very good examples of involving children and young people in service development and staff appointments. Recent improvements have been made to arrangements for completion of Personal Education Plans as a result of feedback from young people.

41. The council has firmly prioritised actions to improve outcomes for care leavers as nearly half of older care leavers are not in education, employment or training. For those over 16 and who have recently benefited from support at school, it is a more positive picture. A recently developed programme provides supported work placements and a new project, Inspire to Success, aims to raise aspirations and there are now two care leavers in higher education. There is also determined action to increase the range of permanent accommodation. Additional resources have been allocated and the Director of Children's Services has become personally involved in resolving issues. However, initiatives are yet to show sufficient impact and 44% of care leavers remain in temporary accommodation. Pathway planning is of a good standard and young people benefit from high levels of committed multi-agency support, including the voluntary sector. Hope Inclusion Time Success provides a much valued support programme and, in partnership with the Young Men's Christian Association (YMCA), operates an emergency bed scheme.

Children and young people with learning difficulties and/or disabilities

Inadequate Adequate Good Outstanding

42. **The contribution of local services to improving outcomes for children and young people with learning difficulties and/or disabilities is good.**

Major strengths	Important weaknesses
<p>Very strong strategic lead on developing inclusive provision.</p> <p>Strong commitment of staff across all agencies to remove barriers to achievement.</p>	<p>Inconsistency in the quality and recording of annual reviews with insufficient challenge to schools where practice is not good enough.</p>

<p>Very good multi-agency support for children with complex needs.</p> <p>Good range and quality of short-breaks care.</p> <p>Good and improving outcomes in attainment and reduction in days lost to exclusion.</p> <p>No appeals taken to the Special Educational Needs and Disability Tribunal in the last two years.</p> <p>Genuine and well-founded consultation with children and young people.</p>	<p>Inconsistency in the quality, recording and review of transition plans.</p>
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43. The council and its partners have given a strong strategic lead and have made rapid progress over the last three years in developing a well-planned strategy for inclusion. There is evident commitment by staff across all agencies to improve outcomes by putting the child at the centre of planning and removing barriers to their achievement. The strategy is clearly focused on building the capacity of mainstream services to meet a wider range of needs. The recent introduction of enhanced funding is beginning to provide earlier support and intervention for children with significant needs.

44. Good multi-agency working through the 'Team Around the Child' is ensuring that the needs of young children with complex needs are being swiftly identified. Parents report that they receive very good support from early years services to help plan for entry to mainstream settings. Children are very well integrated into inclusive settings with a wide range of support tailored to their individual needs. Their move from early years settings to school is well planned. However, some parents of children with less complex needs do not feel as well supported.

45. Special schools are playing an increasingly significant role in providing high-quality support, advice and training for mainstream settings and schools. This is resulting in more flexibility between placements and more children being supported in mainstream schools without the need for a statement of special educational need. Despite this, some parents feel that not all schools are as welcoming to children with learning difficulties and/or disabilities as they should be.

46. The Children with Disabilities mini-trust is having a positive impact on removing barriers to inclusion through creative use of joint commissioning, shared funding and expertise. Very good advice and training on meeting complex medical and health needs is provided by an specialist inclusion nurse, school nurses, Chestnut Lodge School and the Inclusive Learning Division. Children receive the special equipment they need, but arrangements for the

purchase, maintenance and insurance of this equipment are not well coordinated.

47. The PCT has rightly recognised that therapy services needed to be reshaped to support inclusive provision. Speech and language therapists, working closely with schools and settings, now provide a more equitable service to 0–19 year olds. At the time of the inspection a similar review of physiotherapy and occupational therapy services was underway. Access to Tiers 1 and 2 CAMHS has been improved through primary mental health workers within the PCT, close working with the Behaviour Improvement Team and training for mainstream schools in the social and emotional aspects of the learning programme. There are good links between the Key Stage 3 Pupil Referral Unit and CAMHS. The council and its partners are working to improve the range of provision for children and young people with Autistic Spectrum Disorders. To accelerate progress they have initiated a review and are working closely with the National Autistic Society to help ensure this is robust

48. Outcomes for children and young people with learning difficulties and/or disabilities are generally good and are improving. The local authority presents strong challenge to schools on the quality of provision and outcomes, through school improvement discussions. School inspection reports indicate that these children and young people make good progress in school. Local analysis of achievement shows that at each key stage there are fewer pupils achieving at levels below those measured by national curriculum tests or assessment. Using these data, the local authority has made a good start in analysing the progress of particular groups of pupils. However, the monitoring of small step progress of pupils working below national curriculum levels is not yet effectively used by all schools.

49. There are low numbers of permanent exclusions from mainstream schools and fixed-term exclusions have reduced well from 49 in 2004/05 to 17 in 2006/07. The number of new statements issued has declined year-on-year from 103 in 2004 to 12 in 2007. All staff work hard to maintain good communications and relationships with parents. As a result, no cases have gone to the Special Educational Needs and Disability Tribunal in the last two years, which is a significant achievement in a period of considerable change.

50. Schools are provided with very clear guidance on applications to the Statutory Assessment Monitoring Panel. Timescales for issuing statements have improved dramatically from 56% in 2003–04 to 100% in 2005–06 and they are generally of good quality. However, the quality of annual review reports is inconsistent. Insufficient focus is given to reporting educational progress and the views of parents and young people are not well recorded. The local authority is not monitoring annual reviews sufficiently nor is it challenging schools where practice is not good enough.

51. A good range of short break provision is available from statutory and voluntary agencies. This includes overnight, daytime and activity-based breaks and support in the home. The residential short break provision at Inglefield was judged as outstanding in a recent Ofsted inspection and parents regard the care provided by Clare House Hospice as 'fantastic'.

52. There is good practice in safeguarding these children and young people. All staff in residential settings receive additional training in ensuring the safety of children with disabilities. This is available to staff from other services and agencies, but take-up to date has been relatively low. Reviews of children receiving residential short break care are carried out regularly by an Independent Reviewing Officer and they can raise concerns in monthly meetings with a Children's Rights Officer. Good practice in the planning and provision of short break care has resulted in Halton being identified as a pathfinder for the national project on extending short break opportunities.

53. A wide range of sports and leisure activities are offered by special schools which are open to local communities after school, at weekends and holidays. These are well publicised but in many cases are not taken up other than by pupils from the school. The Youth Service runs a good range of inclusive activities, including a successful Duke of Edinburgh Award programme. The voluntary and community sector provide some support to enable young people with learning difficulties and/or disabilities to access mainstream leisure activities. However, young people say they would like more activities which reflect their interests and are in line with what other teenagers do.

54. Transition planning for those aged 14 and over is inconsistent. Person-centred planning for young people with more complex needs is beginning to have a positive impact on outcomes for some individuals, for example in supporting the transfer from out-of-borough placements and in enabling young people with medical needs to attend college. Planning for those with less complex needs is not sufficiently robust and does not ensure all their needs for adult life have been identified. These plans are not clearly recorded or reviewed annually to ensure agreed actions are taking place.

55. Analysis of outcomes for students by the local college indicates they generally make the same or better progress than those without learning difficulties and/or disabilities. However, the perception amongst some young people, parents and schools remains that the range of courses is still limited and not always sufficiently differentiated. Some good work is taking place through the 14–19 strategy to expand the range of provision. Supported work-based learning placements and vocational pathways are being developed through providers commissioned and monitored by the local authority. 'Kid's First' provides good support for pupils returning from out-of-borough placements and Taste for Work helps to re-engage young people not in education, employment or training.

56. Consultation and engagement of children and young people with learning difficulties and/or disabilities in school councils and local decision-making is genuine and well founded. They are supported well in making their views known and Halton Speak Out provides a valuable advocacy service.

Other issues identified for further investigation

The impact of the partners' strategy on improving infant mortality, breastfeeding and obesity rates

57. **The impact of the partners' strategy on improving infant mortality, breastfeeding and obesity rates is adequate.**

Major strengths	Important weaknesses
<p>High level of strategic commitment and leadership across all partners.</p> <p>Focused and motivated staff well placed to drive forward improvements.</p> <p>A good range of imaginative, multi-agency activities that are clearly focused and targeted.</p> <p>The views of children, young people and their families are used effectively to shape provision.</p>	<p>Breastfeeding and obesity outcomes that are worse than in similar areas.</p> <p>An insufficiently developed and coordinated system to monitor and evaluate outcomes.</p>

58. Health outcomes in relation to infant mortality, breastfeeding and obesity are worse in Halton than in similar areas. The PCT, council and the partnership have recognised these areas as strategic priorities in the CYPP and this investigation considers the impact of actions taken to tackle these challenges.

59. Services, including those for young parents, are beginning to have a positive impact on the delivery of outcomes in two of the three areas of investigation. There is evidence of creative local initiatives that are focused on making a tangible difference with regard to infant mortality and breastfeeding. Some initiatives, however, are very recent and have not yet had an impact on outcomes particularly in relation to obesity.

60. The effective partnership between the PCT and the Children and Young People Directorate (CYPD) has resulted in a much sharper focus to tackle these longstanding and challenging health inequalities. The recent integration of health services for 'well' and 'vulnerable' children is evidence of this high level of strategic commitment and drive across all partners. There is good multi-agency working by focused and well-motivated staff who are well placed to drive forward improvements. Agencies work closely with children, young people

and parents to identify their needs and to include their views in developing new provision. Parents seen during this review clearly value the support and information they receive.

61. Outcomes for infant mortality are adequate. There are 6.2 children per 1,000 live births who die before their first birthday in Halton compared to 5.1 nationally. Very good action has been taken by the child death sub-group which investigates the cause of death for each infant. The sub-group produces robust action plans and recommendations which are well monitored. This information is appropriately shared with the HSCB and front line staff. This approach has a high profile in the region and the PCT is assisting other areas in establishing similar groups. Additionally, there are good links to national research being undertaken by the Confidential Enquiry into Maternal and Child Health.

62. Appropriate health promotion activities are being taken to tackle the factors that contribute to death in infancy. Well-targeted multi-agency strategies are showing early signs of reducing the numbers of conceptions for young women aged under 18, particularly in 'hot-spot' areas. A dedicated midwife for teenagers works well with other agencies to offer individual and group support to young parents to keep their children healthy and safe. In the last year, 70 young people have been effectively engaged with this provision. Antenatal services have been improved and services are delivered from well-regarded children's centres. The borough-wide 'Early Bird' project has been in place since 2006 and provides more timely appointments, and group and individual support, including smoking cessation and breastfeeding, shortly after a pregnancy is confirmed. Feedback from the 178 mothers attending indicates that almost half had a better understanding of healthy eating and one-third had stopped smoking following these sessions.

63. Accident prevention in the home is promoted well through the Home Equipment at Low Price scheme and infant and child safety training has contributed to a reduction in the numbers of children presenting at accident and emergency departments.

64. The proportion of mothers initiating breastfeeding in Halton at 37.1% in 2006–07 is well below the national average (69%). A range of imaginative actions are being taken to tackle deep-seated cultural and generational issues and local analysis of data indicates that in the first six months of 2007–08 rates increased to 41.7%.

65. A very innovative and holistic campaign, involving all family members, to improve awareness of breastfeeding has been launched and is in place. The 'Get Closer' campaign has been marketed widely throughout Widnes. The plan suitably challenges local businesses to demonstrate that they provide an appropriate environment and welcoming culture to all mothers wishing to breastfeed in order to receive an award. Although the initiative is still in its early stages, work with a local breastfeeding group has empowered mothers to challenge businesses about their negative stance towards breastfeeding.

66. Action to enable young mothers to breastfeed is well integrated within provision for teenage parents. In one group of 12 young mothers, four began to breastfeed as a result of this support. The experience of local parents is beginning to be used effectively, and during 2007, 12 parents with an interest in breastfeeding were trained to become 'buddies'. They provide advice and support to new mothers. The consistent attention given to breastfeeding from motivated and knowledgeable staff and parents also enables the early identification of any emerging concerns about the health of young babies.

67. Halton has higher rates of obesity, especially at age five, than regionally. In relation to children aged two to 10 years, rates increased from 17.3% in 2005–06 to 17.86% in 2006–07, compared to the regional average of 14.43%. A sound range of initiatives to tackle obesity are in place and these are appropriately focused on children of all ages. However, these have not yet led to the desired change in outcomes, which remain inadequate. In response to this the PCT and its partners have taken action to commission additional weight management services.

68. The decision to pilot the early years standard in some nurseries, even though this scheme has not been adopted nationally is sound and is well linked to the Healthy Schools programme. The 'Ready, Steady, Eat' weaning training programme effectively helps young parents understand the impact of healthy lifestyles on reducing obesity. Positive action is taken to strengthen local communities' understanding about healthy eating. For example, dieticians work closely with children's centres to offer support and advice to young people and their parents, and to offer multi-disciplinary training to health visitors, midwives, schools and others.

69. Healthy lifestyles for school children are well promoted. All schools are involved in the Healthy Schools Standards; 88% have already achieved this, which is better than the national target of 50%. Schools are directing their energy into the particular issues that most affect them, such as the numbers of children who have school meals or promoting the healthy school lunch box scheme.

70. Action is also appropriately targeted to providing an accessible range of community support tailored to the needs of children and young people who are overweight. Three sports development officers have been appointed and there are 150 sports clubs catering for all ages. Halton has exceeded by 4% the 2006 national target of 75% for the number of children taking part in more than two hours of sports per week.

71. Effective examination of local issues and inter-agency planning has strengthened and shaped the vision for the future. There is also an increased focus on evaluation. Front line staff are developing tools to evaluate the impact of recent actions, for example the family assessment tool used by health visitors in conjunction with the CAF, to identify vulnerability. Although improvements are being made, coordinated data systems to collect and analyse

relevant health information across the partnership are not yet in place. Agencies do not therefore have sufficient access to robust information to inform planning, and monitor progress and the effectiveness of current initiatives.

The impact of integrated youth support provision on young people's involvement in planning and delivery of local services, their engagement in youth work and in addressing the level of young people not in education, training or employment

72. The impact of integrated youth support provision on young people's involvement in planning and delivery of local services, their engagement in youth work and in addressing the level of young people not in education, training or employment is good.

Major strengths	Important weaknesses
<p>Good and improving engagement by young people in youth support services.</p> <p>Commitment and action among partners to integrate key aspects of youth support and development.</p> <p>Continued improvement in the performance of the youth service.</p> <p>Very responsive approaches to young people's involvement in relevant decision making.</p> <p>Good early identification and intensive support for young people at risk of not progressing into education, employment or training.</p>	<p>Some important strategic and operational planning issues yet to be resolved.</p> <p>A small but significant proportion of young people fail to sustain their involvement in education, employment or training.</p>

73. Halton Borough Council is currently introducing an integrated youth support strategy in line with government expectations. This investigation considers the impact of that strategy on young people's involvement in the planning and delivery of local services and of their engagement in youth work and post-16 opportunities. The investigation follows weaknesses in youth work highlighted by Ofsted previously and, more recently, the APA which identified a higher than average proportion of young people not engaged in education, employment or learning post-16.

74. Integrated youth support provision is enabling more effective youth engagement in those aspects investigated and its impact is good. The local authority, Greater Merseyside Connexions Partnership and their partners have a

good strategic grasp of what needs to be done to further increase young people's engagement in youth support and development activity. Front line workers, officers and elected members have been responsive to young people's needs and aspirations.

75. The approach taken has built on the strengths of the core services of Connexions and youth work to develop an integrated structure. Health professionals are scheduled to be co-located within the core services shortly and other youth-related agencies, including the voluntary and community sector, are positioned to link more effectively within the overall strategy. Integration is overseen by a unified Youth Matters group, which sits within the 14-19 partnership. The model for integration enjoys good support and consent among partner organisations and, although slower than envisaged in its introduction, is working well and having a positive impact. There is good and improving inter-agency understanding about respective functions and gaps in provision. Issues such as teenage pregnancy, post-16 support, volunteering and 'youth voice' are being considered collectively. Preventative, longer-term considerations feature highly in joint planning. For example, work in schools has improved engagement, attainment and progression. Referral systems and multi-agency tracking of young people deemed at risk have been strengthened. The youth service element of the integrated structure is sensitively managed and focuses well on informal learning. It displays the necessary flexibility to work well with partners.

76. The partnership has taken a measured approach to planning the integrated youth support strategy. However, there are some key and increasingly pressing issues yet to be resolved which will have a bearing on the effectiveness and longer-term security of integrated services. These include determining a single management structure, ensuring that all partners, particularly post-16 providers and extended and secondary schools, are able to contribute fully to strategic planning, devising appropriate local targets and benchmarks, and workforce development. Integration proposals do not include a longer-term accommodation strategy.

77. Operationally, youth workers and Connexions staff work together in a supportive manner with information about individual young people helpfully shared. Young people speak well of the support provided by such practitioners. There are however weaknesses in some practice which have the potential to impinge upon the effectiveness of integration if not tackled. For example, workers and managers do not always apply sufficient critical analysis to managing young people's learning or to staff deployment. In the latter case there has, thus far, been insufficient detailed work on reviewing job tasks and identifying and modelling best practice in order that the skills and experiences of both personal advisors and youth workers operating in a broader range of settings can be more effectively utilised.

78. User participation and voice is good with some aspects outstanding. Services, projects and units seek users' views as a matter of course. Some systems are informal and increasingly inherent in the way staff work. Workers are confident in their approaches to young people's participation, receptive to their views and able to draw on different techniques to engage them. Other systems are more formal and these also work well. Young people with learning difficulties and/or disabilities are able to express their views to decision makers. Participation structures extend for example to area youth forums, children in care council and the Youth Bank. The nature of the Youth Bank is such that it is quickly collecting the views and opinions of young people as they express them through Youth Opportunity Fund bids. Young people are effectively engaged in the 'Involve' project which has enabled them to have a say in how Connexions is run. The council and its partners support various celebratory events which attract a large and diverse collection of youth groups. Young people learn much from their involvement in these various opportunities. Many gain knowledge about democratic structures and their part in them. They have raised expectations and a more optimistic outlook on what can be achieved in life.

79. Creative approaches are taken to engage looked after young people and those with a learning difficulty and/or disability in youth work opportunities. A cornerstone to this work has been the integration of these young people with their peers in day-to-day open access projects. Well conceived work with young gay and lesbian people has generated for them a good sense of community and affiliation to the youth services. Such work has also had a good impact on young people's attitudes towards minority groups more generally. Workers also promote anti-racist approaches. Borough-wide work to expand and publicise a range of sporting, cultural and diversionary activities is ongoing but existing users argue that opening times of youth centres and projects could be improved.

80. The integration strategy, underpinned by 14-19 policy developments, has also acted as a catalyst in tackling the local areas longstanding concern for those young people not in education, employment or training. Individually and collectively partners have taken systematic action to improve opportunities for often the most vulnerable 16-19 year olds. Connexions have developed effective tracking systems which have helped bring about a good reduction in the proportion of those whose situation is unknown. Pupils who are at risk of not progressing at 16 are now identified in Year 9 in school and are provided with intensive support. Many take individualised programmes on the Key Stage 4 re-engagement initiative. The post-16 gateway plus programme is being developed to ensure that transition is completed successfully for these young people.

81. Whilst obvious preventative measures have been taken pre-16 and the proportion of 16 year olds moving into education, employment or training is improving, some stubborn issues remain. Post-16 provision is failing to engage some learners, including care leavers, and too many 17 and 18 year olds are still dropping out of learning. Some young people report a poor initial

experience at the outset of a course and the evidence suggests that such experiences negatively shape their attitudes and motivation. Attracting them back proves difficult and a minority of providers are insufficiently addressing such weaknesses. The strategy remains sound however and the 14-19 group is taking account of these longer-term issues within its planning.

82. There are significant and well-considered responses to the needs of young people post-16. Partners recognise the critical need to counter previous examples of where young people simply move from course to course to a position where such activities are tailored to young people's interest and are flexible in their approach. For example, the Youth Service, Connexions, YMCA and other commissioned partners have developed a range of projects which engage hard-to-reach young people. Most courses combine personal development and basic skills together with vocational training. The Activity Agreement pilot ensures that there is immediate and regular contact with young people at 16 not otherwise engaged in learning or employment and the learning opportunities provided by the YMCA form part of a young person's accommodation agreement. There is an increase in the number of teenage mothers in education, employment or training as a result of good one-to-one support and subsidised public transport and child care.

Service management



Capacity to improve



83. **The management of services for children and young people is good. Capacity to improve further is outstanding.**

Major strengths	Important weaknesses
<p>Clear ambition underpinned by challenging targets.</p> <p>Highly effective management and leadership.</p> <p>The high degree of cooperation between partners and stakeholders.</p>	<p>Underdeveloped medium-term financial plan across the partnership.</p>

<p>Strong involvement of the voluntary and community sector.</p> <p>Track record of achievement being sustained.</p> <p>Very strong engagement with children and young people.</p> <p>Effective integrated working through children's centres.</p> <p>Performance management of commissioned activity.</p>	
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84. The contribution service management makes to delivering the ambition of the partnership is outstanding. The Alliance Board has significantly developed commitment to cooperative and collaborative partnership working and has thoroughly embedded a common agenda for children's services. The corporate understanding of children's services is excellent, as is the level of support and challenge, led by the Chief Executive and senior members. Objectives and targets are shared, challenging, and are aimed at reducing inequality whilst maintaining good services for those young people who do well. These shared objectives, contained in the CYPP, are well integrated with other strategic plans, including the Community Strategy, the new local area agreement and business plans. Strong inclusion of children and young people and other stakeholders has meant that there is a wide understanding of the ambition of the Alliance Board.

85. Objectives are based on strong self-evaluation and intelligent use of data to identify needs, with very good involvement of the voluntary, community and faith sectors. For example, the voluntary and community sector take a leading role within the CAF and use their intelligence to identify gaps in provision. Local dioceses are fully engaged in Building Schools for the Future to ensure the school estate meets the needs of parents and young people from the Roman Catholic and Anglican faiths. External review has highlighted the strong inclusive nature of consultation on plans for Building Schools for the Future overall. The 2007 review of the CYPP was rigorous and is clear on impact and what is working well. This enables the partnership to share learning on good practice. Strong commitment to equality and diversity is supported by good leadership from the Alliance Board and senior managers. There is a very determined attitude that none of Halton's young people deserve 'second best', with evidence that this belief is grounded in action.

86. Prioritisation is good. Priorities flow logically from the objectives identified in the review of the CYPP and include both national and local issues. Needs of vulnerable children are covered well and integrated throughout the plan. Involvement of children and young people in the review was strong. Priorities also reflect the diversity and equality issues within the borough. There is a good approach to target setting which in the main is challenging, for example schools

are using benchmarks that aim to match the top 25% of performance nationally.

87. Service review and redesign is freeing up resources to direct to priorities. The review of inclusion resulted in reduced spend on out-of-borough placements with the savings reinvested in schools. Redesign of the school effectiveness service is already showing impact in improved attendance, reduced exclusion and significant improvement at GCSE and at Key Stage 2. The Alliance Board has been successful in securing increased investment to improve performance, for example in youth services.

88. There has been very good progress in developing preventative services and targeted intervention is successfully and appropriately preventing children and young people becoming looked after. Integration is working well across the partnership, particularly in the 'mini-trusts', the nine fully operational children's centres and the children and young people area networks. Priority has also been given to improvements in the adoption service, which is now assessed as good having been previously judged as poor in 2006. Following the inspection of social services in 2002–03, improvements in children's social care have been prioritised and this has led to sustained performance at outstanding levels for the last two years, as reported in the APA.

89. Medium-term financial planning across the partnership is underdeveloped. Budgets have been pooled in some areas, for example the learning difficulty and/or disability mini-trust, but otherwise most budgets are still held by individual agencies. Much of this is tied up in existing establishment posts. The council has identified core budgets and grants supporting each of the five outcome areas, but this excludes health and some Learning and Skills Council funding. Work on further alignment is planned; with health care for well and vulnerable children the next stage, followed by family support services. The council has a good track record of delivering a balanced budget for children's services. However, at this stage most partnership budgets are only for one year, which means ambition in the longer term is not securely supported.

90. Capacity is good. The leadership team for the CYPSP is highly effective, committed and passionate about improvement for all children and young people in Halton. They demonstrate good analytical and planning skills, but are also adept at managing the relationships within partnership working. Risks are managed well. Partnerships with schools and the voluntary, community and faith sectors are vastly improved and are very good. Further integration with the health leadership team has been achieved. Together, the leadership team, Alliance Board, Chief Executive and lead members show outstanding capacity to drive forward further improvements.

91. Good progress has been made on workforce integration, with co-location in many settings. The number of assessments being completed using the CAF is excellent. A coordinated approach is in place to progress integrated workforce development, both within Halton and across other Merseyside councils. Some

aspects of this are well advanced, including joint training of the children's workforce, for example child protection and common induction. Planning for future workforce needs is at an early stage, with lack of data an area for improvement.

92. Joint commissioning is well established in Halton and is led by a strategic commissioning group which reports to the Alliance Board. Innovative use has been made of joint commissioning, including a shared emergency duty arrangement with St Helens. A new child-focused model is being piloted and an enhanced framework has been recently published after a year of consultation. To date, approximately £3.5 million of work has been commissioned using the new approach, including all preventative services and those funded through the new Working Neighbourhoods Fund.

93. Value for money is good and improving. Service review is leading to better outcomes at the same or reduced cost, for example in inclusion, transport, adoption and school effectiveness. Schools are appropriately challenged on surpluses being held, and these have been reducing, including £100,000 in the last year. Surplus school places are being tackled through reorganisation and the 'fund to place' initiative. Where costs are comparatively high, such as strategic management costs, the reasons are well understood and not the result of unintended expenditure.

94. Performance management is good. There are some very good systems in place for recording, monitoring and reporting performance. These systems are well supported by competent staff who understand the important contribution of performance management to successful outcomes. The majority of performance is managed well, and benchmarking is used to good effect. Very good arrangements are in place to manage the performance of commissioned services, with a strong focus on outcomes and achievement in priority areas. Tough decisions have been taken in decommissioning services that did not deliver the desired outcomes. The results of performance review clearly link into revisions to objectives and targets for the CYPP. However, there are a minority of areas where outcomes have not improved significantly in a timely way, for example young people not in education, employment and training. Issues with community health data collection have been identified and systems are being developed to rectify this.

95. Children and young people are very effectively engaged in service and case review where appropriate, and this is being extended through implementation of the 'Hear by Rights' standards.

96. Overall, there is effective scrutiny of the performance of children's services, with some good work undertaken by the Policy and Performance Boards (PPB). The Leader of the council, the Chief Executive and the lead cabinet member all demonstrate understanding and rigour in their challenge to performance of the directorate. The Alliance Board is appropriately strengthening its governance and scrutiny role after a period of working as an

enabling and executive board. Performance information is generally used well to support decision-making, which is transparent. However, members of some boards (Alliance, PPB and Cabinet) express a desire for more intelligence and less data. Accountability in a few areas is not clear for example for taking corrective action where performance is adrift of target or for dispute resolution within the Children's Trust arrangements.

97. The approach to learning from experience and sharing this across the partnership is sound. The leadership team takes a measured and thoughtful approach to understanding what is working well and applies this knowledge to future developments.

98. The capacity to improve further is outstanding. Significant improvements in outcomes for children and young people have already been made, including some since the 2007 APA. These are set against a challenging background of deprivation and deep-rooted cultural attitudes. Inclusion, safeguarding provision for all children including the most vulnerable, the quality of the adoption service, attainment, attendance and exclusions, together with youth service provision, have all sustained improvements. Actions to reduce teenage pregnancy are also effective. The local authority and the Learning and Skills Council recognise that the numbers of young people in education, employment or training have not improved quickly enough, and remain an area for improvement. New leadership and governance arrangements, a new 14–19 strategy and increased investment show that this area is being appropriately prioritised. The leadership team has outstanding capacity to drive improvement further and has the respect of all partners, stakeholders and staff. This is evidenced through a more timely intervention in underperforming services, and considerably improved relationships with partners including schools and the voluntary and community sector. In turn, the sector is highly effective in contributing to capacity both in strategic planning and delivery. Financial management is good, with a track record of delivering a balanced budget. Support from other partners and the rest of the council is exemplary.

Annex A

MOST RECENTLY PUBLISHED ANNUAL PERFORMANCE ASSESSMENT OF SERVICES FOR CHILDREN AND YOUNG PEOPLE IN HALTON

Summary

Halton Borough Council delivers good services for children and young people. It is responsive to external advice and scrutiny, has a clear focus on outcomes for children and young people and is striving to improve services year on year. In all but one respect, a good or better contribution is made by services towards improving outcomes. Together, children's services are making a number of significant contributions to improving the achievement and well-being of children and young people within an area that faces significant social and economic challenges. The council successfully ensures that services and departments work well together and have ambitious plans for the future. The council has correctly identified that its contribution to young people's economic well-being is adequate and has initiated robust action to tackle this issue.

The full annual performance assessment can be found at:

http://www.ofsted.gov.uk/reports/pdf/?inspectionNumber=3140&providerCategoryID=0&fileName=\\APA\\apa_2007_876.pdf

Annex B

CORPORATE ASSESSMENT ACHIEVEMENT - CHILDREN AND YOUNG PEOPLE

1. Outcomes for children and young people in Halton are good overall. Arrangements to ensure that children in need of safeguarding are identified and supported are outstanding. Outcomes for looked after children and those with learning difficulties and/or disabilities are good. Children and young people are generally healthy and determined action is being taken to tackle longstanding health inequalities. Educational outcomes are good and there has been good or better recent progress at Key Stages 2 and 4 so that outcomes are now generally in line with the national average. The council's engagement of children and young people in local decision-making is outstanding. Outcomes for young people to achieve economic well-being are adequate.
2. Service management in Halton is good. Ambition is outstanding. The agenda for children is strongly embedded and owned by all stakeholders. Children and young people are very well engaged in service development. Political and officer leadership is impressive and highly committed and management at all levels is very effective. There is a good level of integration with health. Priorities are underpinned by good needs analysis, targets are challenging. Service review is used well to provide value for money and to redirect efficiencies to priorities. However, medium-term financial planning across the partnership is underdeveloped. Joint commissioning is well established and increasingly child-centred. Performance is managed well and effectively supports transparent decision-making. The voluntary and community sector contribute effectively to strategic planning and delivery.
3. The combined work of all local services in securing the health of children and young people is good. Multi-agency working is strong. Since the 2007 APA, good progress has been made to improve waiting times for CAMHS. Healthy lifestyles are being promoted very well by children's centres and schools and 62% of schools have already achieved the Healthy Schools Standard. There is a well-developed schools sports strategy and 79% have achieved the recommended hours of sport per week. Targeted multi-agency work in relation to teenage pregnancy is having an impact and the council's analysis of the nine year rolling average shows that the under-18 conception rate is now 5.4% below the 1998 baseline. Looked after children benefit from good quality health and dental care, and very good numbers receive annual health assessments. Children with learning difficulties and/or disabilities are supported well by a range of healthcare professionals working closely with early years settings, schools and other agencies. There is strong strategic commitment and a range of imaginative activity in place to improve outcomes in relation to breastfeeding and obesity, which are worse than in similar areas.

4. Children and young people appear safe and arrangements to ensure this are outstanding. Safeguarding in Halton is seen as everyone's responsibility. There has been excellent progress to extend access to services and re-balance provision. Children, including those on the edge of care and those experiencing domestic violence, benefit from a wide range of high-quality and effective multi-agency preventative support. Action to implement the CAF is excellent and is having a good impact. Policies and systems to safeguard children are very good and routes for referral are robust. Assessments and reports are completed to a high standard with high-quality and timely work overseen by competent managers. Multi-agency planning for children at risk and who are looked after is strong and their cases are very well reviewed. Looked after children live in safe, stable placements where they receive good quality care. The HSCB offers excellent leadership, comprehensive training and guidance and has developed an effective strategy to tackle the numbers of children experiencing neglect.

5. The impact of all local services in helping children and young people to enjoy their education and to achieve well is good. A steady year-on-year improvement in Key Stage 2 results has brought attainment in line with similar areas and the national average. Key Stage 3 English and mathematics results are in line with similar areas but remain below the national average, whereas science results are below both. Progress at Key Stage 4 has been outstanding and the percentage achieving five A*–C grades at GCSE is now higher than found in similar authorities and is in line with the national picture. Attainment for looked after children has improved; in 2007, all those entered for examinations achieved five A*–G grades at GCSE. Attendance, including that of looked after children, has also improved. Fewer children and young people are now excluded from school, either permanently or for fixed periods. The gap in achievement between children with learning difficulties and/or disabilities and children of similar age is narrowing and more are being successfully educated in mainstream schools. The youth service provides some good quality opportunities for young people to engage in informal learning.

6. The impact of all local services in helping children and young people to contribute to society is outstanding. The participation of children and young people is firmly embedded and contributes well to raising their expectations. Young people, including the most vulnerable, are becoming increasingly well informed and engaged in the local democratic process through a number of good mechanisms such as area youth forums and the highly effective Youth Bank. Those looked after and with learning difficulties and/or disabilities, contribute routinely to their reviews and their views on service developments are regularly sought and acted upon. The 2007 APA identified the need to improve support given to birth parents. Considerable improvements have been made and the adoption service was judged as good in a recent monitoring visit. Excellent multi-agency initiatives assist in diverting young people from anti-social behaviour and help them engage well with mainstream services. The council's performance on youth offending is good overall. First time offending is reducing, although still higher than in similar areas. Re-offending is reducing well and is lower than in similar areas and nationally.

7. The impact of all local services in helping children and young people achieve economic well-being is adequate. Good progress is being made in developing integrated youth provision and the quality of young people's engagement with the youth service is good. The council and partners have significantly reduced numbers of young people whose destinations on leaving school were unknown. More strongly coordinated and focused action is in place since the 2007 APA to reduce numbers of young people, including care leavers, not in education, employment or training. However, this has not yet had an impact and numbers remain high. Progress in improving Level 2 achievement by 19 in 2005–06 exceeded the national rate of improvement and the partnership's own target. Good steps are being taken to improve the range of options for young people with learning difficulties and/or disabilities.

8. The capacity of council services to improve is outstanding. Set against a challenging background of deprivation there is a substantial track record of making and sustaining improvements in many priority areas. Strategic planning is strong and integration is well advanced. The current leadership team has excellent capacity to drive improvement further and support from partners and the rest of the council is exemplary.

Annex C

SUMMARY OF JOINT AREA REVIEW AND ANNUAL PERFORMANCE ASSESSMENT ARRANGEMENTS

1. This joint area review was conducted using the arrangements required under Section 20 of the Children Act 2004. It was carried out by a multi-disciplinary team of inspectors from Ofsted, the Healthcare Commission and the Audit Commission. The review was undertaken according to the requirements of the *Framework for the Inspection of Children's Services*.
2. The review was linked to the contemporaneous corporate assessment of the local council by the Audit Commission and these findings plus aspects of the most recent annual performance assessment are represented in the relevant part of the corporate assessment report.
3. This review describes the outcomes achieved by children and young people growing up in Halton and evaluates the way local services, taken together, contribute to their well-being. Together with the annual performance assessment of children's services, joint area reviews focus on the extent to which children and young people are healthy, safe, enjoy and achieve, make a positive contribution, and are well prepared to secure economic well-being. This review explores these issues by focusing on children with learning difficulties and/or disabilities, children who are looked after and children at risk or requiring safeguarding and a few additional investigations. It evaluates the collective contribution made by all relevant children's services to outcomes for these children and young people.
4. The review took place in two stages consisting of an analysis stage (where recorded evidence was scrutinised) and a two week fieldwork stage (where inspectors met children and young people and those who deliver services for them).

HALTON JOINT AREA REVIEW

Improvement Plan

September 2008 – March 2009

Halton's Joint Area Review (JAR) was highly successful, as it has judged us to be one of the top performers in the country using the new tougher inspection framework. A number of strengths, across the range of services visited, were recognised in the JAR final report, with a final assessment that Halton's Capacity to Improve further is Excellent. This judgement is based on Halton's ability to assess its performance and develop challenging actions and milestones to bring about significant improvements in outcomes for children and young people in Halton.

However there were some areas for improvement noted in the JAR report. In particular these relate to the difficulties faced by specific groups of children and young people in Halton such as young people not in education, employment or training, outcomes for our children leaving care and transition planning for young people with complex needs. These issues are well known to the Children's Trust locally and each continues to offer significant challenge for us working together and as individual agencies and organisations to bring about positive change in the future.

The JAR Improvement Plan offers the opportunity to reflect on JAR and our journey to date in tackling these complex issues for children and young people locally. When doing so we almost immediately begin to observe that the solution now lies beyond the traditional hub of children's services or more recently in the children's trust arrangements. It is in fact about how we join up across the partnerships locally to develop a shared understanding of roles and responsibilities to our children and young people in order to bring about coherent and effective services that can sustain children into adolescence as well as support them into adulthood.

A key goal for the plan therefore is to detail how securing improvements will be enabled by a number of external forces that require the input of aspects outside the hub of children's services and children's trust arrangements. Moreover joining up processes not traditionally within the context of children's services is an opportunity to engage with a wider agenda in the borough that will assist in improving outcomes for children, young people and their families in Halton.

The design of the plan therefore simply describes the identified area of improvement, the actions required to address it and who is responsible for leading on actions and what mechanisms we believe will help us achieve our goals. Some of these enablers are already available, some may not yet be developed, however each is key to delivering on the actions noted in the JAR Improvement Plan but perhaps more importantly are key to improving outcomes for children and young people in Halton. .

Improvement Area	Lead	Actions/ Milestones	By When	Overarching Strategy/Links to Other Strategies	Process Enablers
Increase numbers of Care Leavers in Education, Employment or Training	HBC CYPD OD Preventative Services OD Specialist Services	<p>All CiC at year 10 and above will have a personal action plan to ensure they are all EET</p> <p>A fully funded Directorate and Council wide work experience scheme will be agreed and in place offering sufficient placements and jobs to meet demand.</p> <p>Strengthen partnerships with private enterprise in order to secure similar opportunities for CiC at yr 10 e.g. traineeships, mentoring, shadowing etc</p> <p>Every CiC at year 10 and above will, should they need one, have a named mentor who will be responsible for ensuring the Council and Children's Trust deliver on their commitment to support the Young Person into EET</p>	December 2008	<p>Children in Care Strategy</p> <p>NEET Strategy and Action Plan:</p> <p>Recruitment and Retention Strategies in Health and Community and Children and Young People</p> <p>Corporate 'People' Strategy (tbc)</p> <p>Supporting People Strategy</p>	<p>Detailed approach to E&D Strategy which includes actions on all vulnerable groups</p> <p>Improve Data Collection and Analysis</p> <p>Use of intelligence to inform decision and direction of strategy and action</p> <p>Improve medium term financial planning to ensure longer term plans and aims can be planned for and achieved</p>

Improvement Area	Lead	Actions/ Milestones	By When	Overarching Strategies/ Links to other strategies	Process Enablers
		<p>Review relevant strategies to ensure the EET needs of this population are fully addressed and based on best evidence.</p> <p>Increase numbers of CiC supported to engage in informal learning and achievement in Youth Service (including Duke of Edinburgh Awards and Youth Volunteering) as a state of readiness indicator for more formal EET</p>			
Increase permanent accommodation for all care leavers	HBC DM Children in Care	<p>Conduct review of current accommodation and support provision for care leavers in Halton.</p> <p>Additional support workers in place CSW (EET) and Support Assistants.</p>	December 2008	<p>Children in Care Strategy</p> <p>Joint Planning and Commissioning Framework</p> <p>Supporting People Strategy</p> <p>Homelessness Strategy</p>	<p>Use of intelligence to inform decision and direction of strategy and action</p> <p>Accommodation Commissioning Plan in order to increase options for care leavers</p>

Improvement Area	Lead	Actions/ Milestones	By When	Overarching Strategies/ Links to other strategies	Process Enablers
<p>Improve quality and consistency of annual review reports for children and young people with LDD and that schools are challenged where practice is not good enough</p>	<p>HBC DM SEN DM Complex Needs</p>	<p>Improve recording of the views of parents, carers, children and young people across the SEN process</p> <p>Improve monitoring arrangements for annual reviews to ensure progress is routinely charted and to ensure any practice within schools and across any other professionals involved in the care plan is challenged.</p> <p>Develop role of Independent Reviewing Officers in this area as a means of monitoring reviews and offering challenge to ensure processes robust and appropriate to meet the needs of the children and young people.</p>	<p>March 2009</p>	<p>Strategy for the Inclusion of Pupils with LDD</p> <p>Building Bridges Strategy</p> <p>Multi Agency Transition Strategy for Young People with Complex Needs</p> <p>NEET Action Plan</p> <p>Children's Integrated Workforce Strategy</p>	<p>Development of Integrated Commissioning and Business Unit to bring together information and analysis that can inform best practice</p>

Improvement Area	Lead	Actions/ Milestones	By When	Overarching Strategies/ Links to other strategies	Process Enablers
Ensure all eligible children and young people with LDD have a transition plan and that this transition plan is of good quality and reviewed regularly	DM Children with Complex Needs	<p>Develop recording and reviewing standards for transition planning processes to ensure that all transition plans are robust, challenging and meet the needs for each child</p> <p>Develop comprehensive approach to meeting needs and wishes of young people incorporating person centred planning/ transition reviews and SEN Reviews.</p> <p>All young people with complex needs aged 14-17 who move into adult services will have a person centred plan.</p>	March 2009	<p>Multi Agency Transition Strategy for Young People with Complex Needs</p> <p>Strategy for the Inclusion of Pupils with LDD</p> <p>Building Bridges Strategy</p> <p>NEET Strategy and Action Plan</p> <p>Building Schools for the Future</p>	Use of intelligence to inform decision and direction of strategy and action

Improvement Area	Lead	Actions/ Milestones	By When	Overarching Strategy/ Links to Other Strategies	Process Enablers
<p>Agree, communicate and Implement the detail of Integrated Youth Support and Development Arrangements</p>	<p>HBC OD Preventative Services</p>	<p>Implement a single management structure to deliver effective integrated services to ensure all parties are involved and able to contribute fully to strategic planning, devising local targets and developing the workforce</p> <p>Ensure skills and experience across youth workers and PA's across settings are effectively utilised to ensure value for money and that needs can be met in a broad range of settings in order to improve the management of young people's learning and staff development.</p> <p>Improve opening times of youth centres/projects across the range of provision available to meet needs/wishes of young people.</p>	<p>March 2009</p>	<p>Integrated Youth Support Strategy</p> <p>Preventative Services Strategy</p> <p>Integrated Children's Workforce Strategy</p> <p>Supporting People Strategy</p>	<p>Use of intelligence to inform decision and direction of strategy and action</p> <p>Improve medium term financial planning to ensure longer term plans and aims can be planned for and achieved</p> <p>Develop Integrated Commissioning and Business Unit to coordinate data collection, analysis and strategy development that focuses on addressing identified priorities across the Council and it's partners. Unit to include integrated children's workforce development across the children's trust</p> <p>Use existing ideas of good planning and develop across structures</p>

Improvement Area	Lead	Actions/ Milestones	By When	Overarching Strategy/ Links to Other Strategies	Process Enablers
Increase the number of young people in education, employment or training	HBC CYPD OD Preventative Services Area Manager Connexions	<p>Develop support services to improve motivation and attitudes of young people and strengthen how current provision engages with young people</p> <p>Improve data collection and analysis systems to inform future planning decisions in a comprehensive way</p> <p>Improve challenge given to contracted providers through commissioning arrangements, contract monitoring and improved SLAs.</p> <p>Understand using best evidence and consultation why 17-18 years olds drop out of learning and how young people can be lost in the system and develop strategies to prevent this loss.</p> <p>Increase numbers of NEET supported to engage in informal learning and achievement in Youth Service</p>	March 2009	<p>NEET Strategy and Action Plan</p> <p>Children in Care Strategy</p> <p>Joint Planning and Commissioning Framework</p> <p>Supporting People Strategy</p> <p>Preventative Services Strategy</p> <p>IYS Strategy</p> <p>Building Bridges Strategy</p> <p>Multi Agency Transition Strategy for Young People with Complex Needs</p> <p>Building Schools for the Future</p> <p>H&C – Joint working</p>	Develop Integrated Commissioning and Business Unit to coordinate data collection, analysis and strategy development that focuses on addressing identified priorities across the Council and it's partners.

		(including Duke of Edinburgh Awards and Youth Volunteering) as a state of readiness indicator for more formal EET		with the Enterprise and Employment team Recruitment and Retention Strategies across all Directorates Environment	
Improvement Area	Lead	Actions/ Milestones	By When	Overarching Strategy/ Links to Other Strategies	Process Enablers
Breastfeeding and obesity outcomes that are worse than in similar areas	Assistant Director Child and Family Health Services	Review the tracking, accountability and review arrangements of the current initiatives in relation to breastfeeding, infant mortality and childhood obesity to ensure they take into account short, medium and long term targets as a means of enabling improved performance managements	March 2009	Ambition for Health Preventative Services Strategy	Youth Service to contribute to a 'Healthy Youth Setting' standards being developed to mirror Healthy Schools Initiative. Integrated service delivery through Children's Centres Child Health Promotion Programme

Improvement Area	Lead	Actions/ Milestones	By When	Overarching Strategy/ Links to Other Strategies	Process Enablers
Further develop, improve and coordinate systems to monitor and evaluate health outcomes.	Assistant Director Child and Family Health Services Chair - Halton Safeguarding Children Board	Develop systems of information gathering, which can work better together to track progress and report small steps improvement and benchmark against statistical neighbours. Ensure relevant strategies are linked in order to ensure joined up thinking and best use of resources Further embed the learning taken from serious case reviews across the partnership to ensure best practice is shared and owned	March 2009	Ambition for Health Weight Management Strategy	Develop Integrated Commissioning and Business Unit to coordinate data collection, analysis and strategy development that focuses on addressing identified priorities across the Council and it's partners. HSCB to ensure best practice is shared across the partnership.

Improvement Area	Lead	Actions/ Milestones	By When	Overarching Strategy/ Links to Other Strategies	Process Enablers
Develop a medium term financial strategy that encompasses the contribution of all relevant partners	HBC OD Business Planning and Commissioning	<p>Develop integrated medium term financial planning across the Partnership</p> <p>Identify within each agency all funding spent on children's services and then to use this information to develop services together.</p> <p>Ensure all funding streams are identified including Health and LSC</p> <p>Secure longer-term ambitions by extending partnership budgets beyond one year.</p>	March 2009		<p>Develop system to enable medium term financial planning, based on information coming through partnership boards and Integrated Commissioning and Business Unit</p> <p>Review Council's medium term financial planning arrangements</p>

Improvement Area	Lead	Actions/ Milestones	By When	Overarching Strategy/ Links to Other Strategies	Process Enablers
Improve Accountability Arrangements in Children's Trust	HBC OD Business Planning and Commissioning	Develop protocols to address dispute resolution within the Trust Develop strategies and processes to address how corrective action can be taken should performance drift off target.	March 2009	Terms of Reference for Children's Trust and Business Plan s.75 Agreement/Memorandum of Understanding	Review LSP performance arrangements
Improvement Area	Lead	Actions/ Milestones	By When	Overarching Strategy/Links to Other Strategies	Process Enablers
Approach to Equality and Diversity to be more robust and address the needs of all communities in Halton	HBC Strategic Director Health and Community as Chair of Corporate Equality and Diversity Group	Ensure actions for improvement in Equality and Diversity Strategy and Action Plan are clear, challenging and meet the needs of the community Improve quality of EIA's to ensure they are robust and congruent with the aims of the E&D Strategy Review approach to attainment of all vulnerable groups and consider need for specific priority and/or strategy to address e.g attainment of white working class boys	March 2009	HBC Equality and Diversity Strategy and Action Plan Directorate's own Equality and Diversity Strategy and Action Plan Corporate EIA Policy All strategies to comply with messages and actions contained in E&D Strategy	Data Collection and Analysis Use of intelligence to inform decision and direction of strategy and action

Improvement Area	Lead	Actions/ Milestones	By When	Overarching Strategy/ Links to other strategies	Process Enablers
Improve Data Collection and Intelligence Systems	HBC OD Business Planning and Commissioning	<p>Develop data analysis systems to promote workforce planning. Identify area responsible for development and coordination across Council, Partners and Partner Organisations to ensure future workforce needs are identified and addressed systematically</p> <p>Develop better data collection and analysis systems that deliver the intelligence required to improve outcomes</p> <p>Develop Integrated Commissioning and Business Unit to coordinate data collection, analysis and strategy development that focuses on addressing identified priorities across the Council and it's partners.</p>	March 2009	Relevant to all strategies	<p>Identify workforce to develop systems</p> <p>Develop structures within organisations able to bring together the required information</p> <p>Use existing ideas of good planning and develop across structures</p>

REPORT TO: Executive Board
DATE: 11 September 2008
REPORTING OFFICER: Strategic Director – Health & Community
SUBJECT: Government Policy for Free Swimming
WARD(S) Borough-wide

1.0 PURPOSE OF THE REPORT

1.1 To consider the Governments proposal to offer free swimming to all people over 60 and to all those aged 16 and under at public swimming pools.

2.0 RECOMMENDATION: That:

- i) The Council confirms its participation in the proposal to offer free swimming to the over 60's in Halton. That the scheme is reviewed in two years time when the funding ceases.**
- ii) The Council submits an expression of interest in participating in the scheme to offer free swimming to those aged 16 and under, but that the council's participation in this scheme is conditional on the terms and financial offer yet to be made by Government.**
- iii) Subject to satisfactory grant terms and conditions The Strategic Director, Health and Community and Portfolio holder for Environment, Leisure and Sports are granted delegated authority to determine and submit applications for capital monies as defined in the proposals.**

3.0 SUPPORTING INFORMATION

3.1 The Government is promoting a policy of free swimming to the over 60's and to those aged 16 and under. The policy is to promote recreational swimming, address health issues and meet its "Olympic" pledge to get more people engaged in sport and recreation. The Government has set a deadline of 15th September 2008 by which the council must respond if it wishes to participate in the scheme.

3.2 The council received a letter and outline details of the proposal on 31st July 2008. The proposals offer financial support from four different "pots" of money. This funding is available for two years only: -

3.2.1 Free swimming for those aged over 60.

This is a £15M p.a. fund spread across the whole country. Halton's allocation has been set at £31,299 p.a. Swimming is already offered at half price to all those over 60 through the Halton Leisure Card. On current levels of casual use the fund will cover the additional subsidy. It is also sufficient to fund the anticipated increase in usage the scheme is designed to produce.

DC Leisure offer membership packages that include swimming in the overall price. Currently there are only 24 people over 60 who have purchased one of these packages. This will need to be negotiated with the company but is unlikely to have a significant financial impact.

If the allocation is taken up the over 60's may be drawn to the council's facilities from other pools operated by private companies or community groups. These will include operators such as JJB and Chestnut Lodge School. This is the main risk associated with this scheme.

3.2.2 Free swimming for those aged 16 or under

This pot is £25M spread over two years. Grant allocations to Local Authorities and the terms of grant have not yet been published. However it is understood that The Government is waiting to gauge the level of interest before providing further details. The fund is designed to provide free casual swimming within the centres existing programmes of use.

Halton already provides half price swimming for all under 18 year olds and free swimming for juniors during the school holidays through the SPLASH scheme.

Registering an expression of interest will not commit the council if the terms of the grant are ultimately less than favourable.

3.2.3 Capital reward fund

This is a fund of £10M that will be available in 2008/09. It is available only to authorities who sign up to both of the above schemes for over 60's and under 16's free swimming. The fund is designed to modernise pool provision and will be allocated to authorities on a per capita basis. Expenditure and participation in this fund is conditional and subject to the terms and conditions of the grant.

3.2.4 Capital challenge fund

This is a fund of £25M available in 2009/10 and 2010/11. The fund is

for swimming pool improvements and development. It will be administered by Sport England who will produce a prospectus for funding applications. The closing date for fully worked up and costed applications is **15th October 2008**.

4.0 POLICY IMPLICATIONS

4.1 The proposed scheme is consistent with the council's policies on health, safer Halton, anti poverty and sport.

5.0 FINANCIAL IMPLICATIONS

5.1 It should be noted that the funding is for two years only. At the end of this period the council will be faced with the prospect of either funding the scheme if it is to continue or reverting back to existing charging policies.

5.2 From the information currently available it is clear that if council's pursue these schemes and incur a financial shortfall then it is a the council's own risk. However if the level of grant exceeds the cost of providing the set schemes the council's will be able to use the money to promote swimming initiatives in the community.

6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

6.1 Children & Young People in Halton

Children under 17 will be major beneficiaries of the proposal.

6.2 Employment, Learning & Skills in Halton

The proposal is consistent with the sports strategy and PI's to increase participation in sport and recreation.

6.3 A Healthy Halton

The proposals are consistent with improving physical activity to reduce the incidence of obesity and conditions resulting from sedentary life styles.

6.4 A Safer Halton

Halton already offers free swimming to children as part of its school holiday SPLASH scheme to reduce youth nuisance and anti social behaviour.

6.5 Halton's Urban Renewal

Any capital funding utilised would improve the physical facilities and

fabric of the buildings.

7.0 **RISK ANALYSIS**

7.1 The risks are mainly financial and are outlined in 5 above. If the scheme is withdrawn in two years time public reaction may be poor.

7.2 The financial implications of the over 60's scheme can be estimated by analysing the council's current usage figures. However the number of people who will leave private or other community swimming pools to take advantage of this offer is unknown.

7.3 Other private operators or community groups may loose income as they are drawn to Council operated or contracted services.

8.0 **EQUALITY AND DIVERSITY ISSUES**

8.1 The scheme as proposed will help to address health, financial and access inequalities.

12.0 **LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

Document	Place of Inspection	Contact Officer
Government proposal letter	Runcorn Town Hall	John Hatton Divisional Manager

REPORT TO: Executive Board

DATE: 11 September 2008

REPORTING OFFICER: Strategic Director
Health & Community

SUBJECT: Carers Strategy 2008/09

1.0 **PURPOSE OF REPORT**

1.1 To present the review of the current Carers Strategy and the resultant revised Strategy and Action Plan.

2.0 **RECOMMENDATION**

That the Executive Board:

- i) **Comment on the Carers Strategy 2008/09;**
- ii) **Endorse the Carers Strategy.**

3.0 **SUPPORTING INFORMATION**

3.1 The draft Carers Strategy 2008/09 (attached) builds upon the aims, objectives and activities outlined in the 2006 - 2008 Carers Strategy and includes an action plan for the continued development of services for carers in Halton over the next 12 months.

3.2 The Strategy covers the next 18 months only as the Department of Health are currently consulting over a range of carers issues, including the strategic approach.

3.3 It has been developed as a result of ongoing consultations and contributions from all stakeholders, including: -

- Healthy Halton Policy & Performance Board (10/06/08)
- Local Implementation Team (LIT) Carer Sub Groups
- Carers via a consultation event
- Halton & St Helens PCT
- Halton Carers Forum
- Staff and managers from the Health & Community and Children & Young People's Directorate

3.4 The format of the strategy follows a similar one adopted within the 2006 – 2008 Strategy and outlines recent activity and proposed actions within the following areas: -

- Recognition – identifying carers
- Information
- Emotional support and support services
- Assessment and assessing carers needs
- Having a voice
- Providing a break
- Support that helps carers care and maintain their own health
- Young carers
- Parent of children with a disability
- Financial Security/Carers in employment

3.5 The main objectives of this Strategy include the need to identify hidden carers, recognise and respond to carers needs, and improve information and access to support services.

3.6 The LIT Carer Sub Groups and the multi agency Carers Strategy Group will undertake monitoring of the implementation of the Strategy and associated action plan.

4.0 **POLICY IMPLICATIONS**

4.1 Halton & St. Helens PCT have endorsed the Strategy.

5.0 **FINANCIAL IMPLICATIONS**

5.1 All services are funded through the Carers Grant and the Council receives £605,000 per annum.

5.2 Halton & St. Helens PCT contribute £20,000 per annum. This is invested in the Carers Centre.

6.0 **IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

6.1 **Children and Young People in Halton**

The strategy in relation to the future provision of Carers Services would benefit children and young people under 18 who have caring responsibilities, whose lives are often restricted in some way because they are supporting or taking responsibility for the care of a person who is ill or who has a disability etc.

6.2 **Employment, Learning and Skills in Halton**

The strategy would ensure opportunities for work, education and learning for Carers are maximised to their full potential.

6.3 **A Healthy Halton**

The strategy clearly demonstrates the Council's commitment, as a major stakeholder, in recognising the needs of Carers and in promoting their health and wellbeing within the Community.

6.4 **A Safer Halton**

None identified.

6.5 **Halton's Urban Renewal**

None identified.

7.0 **RISK ANALYSIS**

7.1 There continues to be an increase in the national and local agenda around carers. The draft Carers Strategy and associated action plan aims to address issues for carers in Halton in a structured way thus ensuring that, through working in partnership with Health, Voluntary Agencies and Carers that carer's needs can continue to be met.

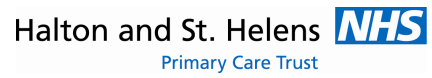
7.2 The Council and its partners recognise and value the essential role that carers play in supporting some of the most vulnerable people in our community. We believe that in adopting this Strategy it will demonstrate our commitment to recognising, valuing and working with local carers in delivering effective services.

8.0 **EQUALITY AND DIVERSITY ISSUES**

8.1 An Equality Impact Assessment (EIA) has been completed on the draft Strategy and no issues have been identified.

9.0 **LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

9.1 There are no background documents under the meaning of this Act.



CARERS STRATEGY 2008 – 2009

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FOREWORD

This 2008 – 2009 Carers Strategy is as a result of on-going consultations and contributions from all stakeholders, including Carers, Health Authority and Service Providers.

The Carers Strategy includes an Action Plan for the continued development of services for carers in Halton over the next 12 months.

The main objectives of this strategy include the need to identify hidden carers, recognise and respond to carers needs, and improve information and access to support services.

On the 3rd March 2008, we held an event at Halton Stadium; where it provided an opportunity for Carers, to contribute to the development of the services that we provide for Carers. At the event, Carers had the opportunity to review services that have been provided over the last two years.

We have listened to what carers have told us about the help and support they need and responded by addressing the issues throughout the Strategy.

We are proud of what we have achieved for carers since the production of the last Carers Strategy. The Carers' Centres in Widnes and Runcorn have continued to provide a wide range of services including counselling, complementary therapies and a place for support groups to meet. There has been a considerable increase in the number of individual carers registering and receiving breaks from the Centres.

There are as many as 13,500 carers in the Borough who provide help and support for their partners, children, relatives and friends. We know that many carers are not in touch with services that could improve the quality of their lives and have specifically begun to target hidden carers. We recognise that Halton has a high percentage of people who are unable to read or write and have previously been unable to access help and support within their caring roles, with this in mind; we have provided face to face presentations and outreach sessions where our staff can offer information and signpost Carers to available services.

We recognise and value the essential role that carers play in supporting some of the most vulnerable people in our community. We believe that this strategy demonstrates our commitment to recognising, valuing and working with local carers.

Audrey Williamson
Operational Director (Adults of Working Age)
Chair of Carers Strategy Group

1.0 INTRODUCTION

Over the last nine years Halton Borough Council (HBC) has been working with stakeholders to develop and improve the Carers Strategy year on year. During the last nine years many of the actions in these strategies have been implemented and has led to significant improvements in services for carers.

More recently HBC's Carers Development Team, in consultation with the Carers Strategy Group and local carers, produced a three-year Carers Strategy for 2006 –2008. The Carers Strategy Group includes members of staff from the Health and Community, and Children and Young People Directorate's, the Primary Care Trust, local voluntary organisations and members of Halton Carers Forum. This document focuses on building on the firm foundations of the former Carers Strategy and responds to the increased local and national priorities for carers.

1.1 Who is a carer?

A carer is someone who cares, unpaid, for a relative or friend who is unable to manage on his or her own because of illness, disability or frailty. The majority are unpaid **family carers**. Carers can be any age and come from all walks of life and backgrounds. More women are carers than men and they are more likely than male carers to care for someone with very demanding care needs and to care for a wider range of relatives.

A parent carer is a parent or guardian who is likely to provide more support than other parents because their child is ill or disabled. Parent carers will probably support their child for many months or years and this is likely to have a significant affect on the other children in the family.

A young carer is someone under the age of 18 years who looks after another member of the family or close friend who is ill or disabled. They may be taking on the kind of responsibility that an adult would usually have. This may affect their education or social opportunities.

Caring relationships can be complex and family members may provide different types of care for each other in order to live independently in the community.

1.2 What do carers do?

- Carers give practical, physical and emotional support to vulnerable people. They help the person they care for to deal with problems caused by short term or long-term illness or disability, mental distress or problems resulting from alcohol or substance misuse.
- Where the person being cared for no longer has the mental capacity to make a decision, the carer may be required to make decisions on their behalf.
- Carers may supervise someone to keep him or her safe.
- Caring responsibilities may vary over time and may be difficult to predict from day to day.
- Anybody can become a carer, as a result of a sudden event such as an accident or this may be a gradual process when someone's physical or mental health slowly deteriorates.

2.0 NATIONAL AND LOCAL CONTENT INFLUENCING THE CARERS STRATEGY

2.1 Carers in Britain

Carer UK statistics show that:

- 6 million carers. 1 in 10 adults are carers
- 724,802 in the North-West are carers
- 3 million people juggle work with caring responsibilities for a disabled, ill, frail relative or friend
- The main carers' benefit-Carers Allowance- is £50.55 for a minimum of 35 hours, equivalent to £1.34 per hour
- People providing high levels of care are twice as likely to be permanently sick or disabled
- Every year 2 million people take on new caring responsibilities
- 1.25 million people provide over 50 hours a week on their caring responsibilities
- 58% of carers are women, 42% are men
- 1.3 million carers are over the age of 65
- 27% of carers questioned said they had been offered a health check; 88% believed that carers should receive annual health checks
- Carers save the country/Government £87 billion each year
- In 2001 11.44% of the population of Halton were carers.

2.2 Profile of carers in Halton

Census 2001 found there were 13,528 carers in Halton.

- 7,942 individuals provide unpaid care for 1 -19 hours per week
- 1,887 individuals in Halton provide unpaid care for 20-49 hours per week
- 3,699 individuals provide unpaid care for 50 or more hours per week
- It also showed that 3,083 unpaid carers were aged 60 and over
- It is estimated that there are between 900 parent carers of children with a disability
- It is estimated there are 474 young carers in Halton

2.3 The Carers (Recognition and Services) Act 1995

The Carers (Recognition and Services) Act 1995 was implemented in April 1995. Under this legislation:

- All carers of any age are given the right to request their own carers assessment
- The carers assessment looks at the ways in which the carer can be supported in their caring role
- The information from the carers assessment can be used to increase the services to the cared for person

2.4 The National Strategy for Carers 1999

In February 1999, the Government released the national strategy for carers 'Caring for Carers'. The strategy recognised the important role that carers play in supporting the people they care for. It emphasised that all social and health care organisations must focus not only on the client, patient or service user, but also the carer.

The National Carers Strategy has three key messages:

- Carers should be informed and supported, and receive better care to improve their health and well - being.
- Carers should be involved at local level in policy and service development.
- Carers should be treated as partners by all agencies.

It also emphasised the need for local authorities to develop their own local carers strategy.

From late summer the National Strategy for Carers 2008 will supersede the current 1999 strategy as soon as such this strategy will be received and updated to take into account any changes.

2.5 The Carers and Disabled Children's Act 2000

The Carers and Disabled Children's Act 2000 was introduced in April 2001. Under this legislation:

- Unpaid carers over the age of 16 years who are caring for an adult have the right to request a separate assessment of their own needs. A carer may request his or her own carers assessment, even when the person they care for refuses their own assessment or support services
- People with parental responsibility for disabled children may also request a carers assessment
- Children's views are taken into account with the provision of service
- Local authorities have the power to provide services directly to carers to help maintain their health and safety and support them in their caring role
- Services to carers may be provided in a variety of ways, such as Direct Payments to carers

2.6 The Carers Equal Opportunities Act 2004

This Act became law from 1st April 2005. The new law has numerous positive effects for carers in Halton. It means that carers will:

- Be told about their rights to their own carers assessment
- Have their wishes to remain in, or return to work and education, taken into account when decisions are made about support given to the person they care for
- Have better information about opportunities for work, education, training and leisure
- Benefit from more emphasis on joint working between statutory services such Halton Social Services, the Primary Care Trusts and 5 Boroughs Partnership NHS Trust
- Carers will have equal access to services, advice and information and support regardless of gender, age, race, disability, religious beliefs and sexual orientation.

Benefits of the new legislation include:

- More carers being able to continue in work or study whilst caring
- Increase the employability of carers who wish to return to work or study
- More opportunities for carers to have access to education, training and leisure services and lead to a more fulfilled life

2.7 The Mental Capacity Act (2005)

The Mental Capacity Act applies to all individuals in England and Wales who are aged 16 and above and who lack capacity to make decisions. Hence everyone directly involved in the care of such individuals or employed in health and social care will be subject to the Act.

An individual demonstrably lacking capacity will need someone (often their carer) to make decisions on their behalf. The more important the decision the greater the likelihood that more people will be involved. An assessment must be made for each decision.

Useful sources of expert help or information can be obtained from advice agencies such as the National Autistic Society and The Alzheimer's Society. In Halton, the following sub groups are an important source of information for carers: Older People Carers LIT, Adult Learning Difficulties Carers LIT, Physical and Sensory Disabilities Carers LIT. HBC has also produced a set of 'Guidance Notes For Assessing Mental Capacity.'

If an individual is shown to lack capacity then those acting on their behalf must do so in the 'best interests' of the person. It is important to ensure that 'best interests' actually represents the person's true wishes. Carers are often best placed to provide such information.

Benefits of the Act:

- The Act serves to protect individuals who for whatever reason are unable to make a decision that has consequences for their finances, health care and quality of life.
- Individuals are assumed to have capacity unless assessment evidence is provided to the contrary.
- Any decisions made by a carer must be demonstrably in the individual's 'best interests.'
- The terms of the Act provide protection for both the carer (as decision-maker) and the individual being cared for.
- All possible means of communicating with a person must first be explored and documented before any decision is made on their behalf.

2.8 Quality Standards

The King's Fund, after extensive consultation with voluntary organisations, statutory bodies, social service departments and health authorities, published **Quality Standards for Local Carer Support Services** in 2002. There are five quality standards, which include:

- Information
- Providing a break
- Emotional support
- Support that helps carers to care and maintain their own health
- Having a voice

2.9 White Paper: Our Health, Our Care, Our Say

The White Paper, published in January 2006, sets out the reforms intended to develop modern and convenient health and social care services. The White Paper acknowledges the vital role carers play. They provide a valued preventative service and it is imperative they and their families receive good quality, flexible and tailored support services in order to work and live their lives.

The White Paper recommends;

- Establishing an information service/helpline for carers
- Establishing short-term, home – based respite support to carers in crisis or emergency in each area
- Allocating funding to train carers
- Encouraging councils and Primary Care Trusts to nominate leads for carers services.

The local authority will be working with the Primary Care Trust to implement the recommendations related to establishing a short term, home based respite service; providing more training for carers and collaborating with local health care services.

3.0 CARERS GRANT

3.1 Funding support for carers

Each Local Authority receives Carers Grant to primarily fund carers breaks and implement legislation, such as the Carers (Equal Opportunities) Act 2004. Halton Borough Council uses this grant in accordance with guidance provided by the Department of Health. The main use of the grant is to provide breaks available to carers who are providing regular and substantial amounts of care, also employment support for those carers who would like to pursue work/career outside of their caring responsibilities. The Department of Health has notified each local authority that Carers Grant will continue until 31st March 2011.

Many local organisations have received Carers Grant funding to provide carers breaks to carers during 2007/08. These were:

- Halton Young Carers Project (HITS)
- Halton Crossroads
- Barnardo's Wider Horizons Project
- Halton Autistic Family Support Group
- PSS Ltd
- Alzheimer's Society
- Halton Healthy Living Programme
- Halton Haven
- The Lets Go Club
- Halton Happy Hearts
- Mencap
- Halton Independent Living Trust (HILT)
- Widnes and Runcorn Cancer Support Group
- Parkinson Society
- Halton Disability Service and Shop mobility
- Bridgewater and Astmoor Day Centres
- Employment Support (Halton People Into Jobs)*

Funding is provided to two Directorates in Halton Borough Council to provide additional support and carer's breaks. These are;

- The Children and Young People's Directorate – specifically to provide services to parent carers of children with a disability.
- The Health and Community Directorate who provide services to carers who support Adults with a Learning Disability, Adults with a Physical or Sensory Disability, Carers of people with Mental Health Needs and Carers of Older People.

* The employment support service is offered to carers up to 12 months after the cared for person has either moved on into community based services/residential or has died.

4.0 HALTON CARERS STRATEGY GROUP

This is a multi agency partnership group who meet every three months to monitor and oversee the Carers Strategy in Halton. Since the group was first established there have been many changes in legislation and Government service directives aimed at improving the lives of vulnerable people and their carers.

Membership of the Carers Strategy Group consists of representatives from;

- Social Care (Health and Community Directorate and Children and Young People Directorate)
- Halton & St Helens Primary Care Trust
- Other voluntary sector providers
- The Chair of Halton Carers Forum
- Carers
- Halton Children with Disabilities Partnership Board
- Adult Learning Team
- Employment Services
- 5 Borough's Partnership NHS Trust

The group discusses matters such as the issues related to implementation of Government legislation relating to carers, matters discussed in carers forums, information relating to changes in service delivery and the use of Carers Grant to meet the diverse needs of carers.

4.1 Monitoring the Carers Strategy 2008 - 2009

The Carers Strategy Group will monitor the implementation of the Carers Strategy for 2008 – 2009 to ensure the targets and priorities have been achieved.

Consultation takes place at the Local Implementation Team Carer Sub groups (LIT) with all stakeholders who contribute to delivering the Carers Strategy. This involves talking to Halton Carers Forum, to monitor the delivery of the targets within this carer's strategy. The feedback provided will help with directing future developments and commissioning intentions of Children and Young People Directorate and Health and Community Directorate, the local Primary Care Trust and 5 Borough's Partnership NHS Trust.

5.0 CARER CENTRES

Since the opening of the Carers Centres in 2004, it has been the intention that the management of the Centres by the Local Authority would only be a temporary arrangement, until a voluntary sector organisation could be identified to undertake it. One of the main reasons for this was to ensure that Carers would be able to maximise their access to funding streams e.g. Lottery funding, that otherwise would not have been able to be accessed by the Centres under Local Authority control. As such within Halton Borough Council's Carers strategy (2006-2008), the intention to transfer the management of the Centres to the voluntary sector was stated as an objective, and in particular with acceptance into the Princes Royal Trust (PRTC) network. Acceptance of the Halton Carers Centre into the PRTC would mean being part of a long established and respected network offering expertise in responding to Carers needs.

During the last 12 months a number of activities, including meetings and consultation events, have taken place to identify the options and their associated advantages and disadvantages, for the future provision of Carers Services within Halton. During this time it has been highlighted that whatever approach was adopted it would need to safeguard the financial future of Halton Carers Centre, improve and expand the services provided, and be acceptable to Halton and St Helens Primary Care Trust, to Halton Borough Council, and to local carers.

As such the work is being progressed to establish a Halton based charity to run the Carers Centre. A Centre within the voluntary sector will have access to new funding streams and most importantly will be able to offer an independent service to carers, which may enable the Centre to be more effective in reaching carers who are at present 'hidden'. The voluntary sector may also provide the Carers Centre with the opportunity to develop more innovative and tailored provisions allowing them to reach out to a wider range of carers. In selecting this option for the future of Carers Services, the Council recognises the importance of Carers issues and ensuring that the services provided to them are maximised.

As part of this work, it has been decided to deliver services from one site in Runcorn but to ensure that services are still provided to carers within Widnes and as such it is planned to close the Widnes Centre during 2008. It is recognised that Carers would prefer to see two centres within Halton, one in Runcorn and one in Widnes and this aspiration will be incorporated into the Carer Centre 3 year business plan to be prepared in conjunction with the Princess Royal Trust.

Halton Borough Council and Halton & St Helens PCT have given a 3-year financial commitment to initially support the Carers Centre thus ensuring continued funding of the Centres until such time as the Centres are sufficiently established to ensure that it can access appropriate funds itself.

In summary the changes in the provision of Carer Services within Halton demonstrates that the council recognises the importance of Carers issues and ensures that the services provided to them will be maximised.

An independent Princess Royal Trust for Carers Centre in Halton will be able to access new funding streams and most importantly will be able to offer an independent service to carers and provide an opportunity to develop more innovative and tailored provision allowing them to reach out to a wider range of carers.

The centre will also be in a strong position to effectively respond to the increased national agenda around Carers culminating in the publication of the new National Carers Strategy during 2008.

6.0 VISION, VALUES AND AIMS

This strategy builds on the vision, values and aims of the Carers Strategy 2007/08

6.1 Vision

- Carers will be recognised and valued
- Carers will be supported and enabled to care as long as they wish to do so
- Carers will be enabled to have some regular time for themselves, free of their caring duties
- All agencies will work in partnership with carers to provide the help and services carers need
- All agencies will work together to plan and develop services for, and with, carers
- Information on issues of relevance to carers will be made available to carers, Statutory and voluntary agencies, and the wider community.

6.2 Values

The Local Authority, the Primary Care Trust, local health trusts, voluntary and independent sector agencies will work in partnership to improve support for carers as part of mainstream community care and children's services. Positive steps will be taken to identify, accommodate and support diverse needs.

- The major role played by carers in supporting people in the community who are frail, ill or disabled is recognised and valued
- Carers will be encouraged to identify themselves at the earliest possible stage, and will be empowered to ask for the service they require
- Carers will be involved in decision making about their needs and consulted about their preferences for services
- No carer will be compelled to care or to continue caring if they no longer feel able to do so
- Former carers will be helped to access support to enable them to adjust to their new circumstances
- Service providers will ensure equity in the provision of support to carers, whatever the illness or disability of the person they are caring for
- Carers will be involved in planning and determining the types of services available
- Carers will be invited to take part in the evaluation of services.

6.3 Aims

The strategic aims of this strategy are:

1. **Recognition** – to identify carers and encourage them to identify themselves.
2. **Information** - to ensure that carers are provided with the information they need, in an appropriate and accessible form, to enable them to function as carers.
3. **Emotional support and support services** – to ensure a full range of co-ordinated and flexible services and support are provided for, and planned, with carers in Halton.
4. **Assessment and assessing carers needs** – to ensure that carers are fully involved as partners in the assessment of the person for whom they care and are always offered their own assessment where appropriate.
5. **Having voice** – to ensure that carers are actively involved in the planning, development and evaluation of services.
6. **Provide a break** – develop services that offer a break to local carers.
7. **Support that helps carers care and maintain their own health** – support carers to care and to maintain their own health and well being by offering training, health promotion and personal development opportunities and is responsive to individual needs.
8. **Young Carers** – develop ways of identifying and meeting the needs of young carers.
9. **Parents of children with a disability** – to ensure parents of children with a disability are aware of their rights as carers and are receiving appropriate services.
10. **Financial support/carers in employment** – provide welfare benefit advice to carers that request it. Employees who are carers will have access to support to help them at times of crisis/emergency. HPIJ offer support and access to a range of opportunities for carers to develop personal learning and skills initiatives which includes specific employment training.

7.0 CONSULTATION ABOUT THE CARERS STRATEGY

A Consultation Event took place on Monday 3rd March 2008 at Halton Stadium and was designed to seek the views of local carers on Halton's Carers Strategy. Carers were consulted about the 2006 – 2008 Carers Strategy.

The main aims of the day were;

- A) To review the current Carers Strategy document, running from 2006-8
- B) To propose ideas for incorporation into the new Carers Strategy for 2008-09.

172 Carers attended the Consultation Event. There were in addition 2 cared for people and 16 staff working closely with Carers in the Borough.

The feedback from the event about what Carers felt was needed to improve performance has been incorporated into the Halton Carers Strategy and Action Plan 2008 - 2009.

A consultation event will be held in March 2009 to review progress of the 2008/2009 Carers Strategy.

Attached at appendix 2 are details of the feedback received from carers on the 3rd March.

7.1 Recognition - Identifying Carers

Many individuals who are carers do not recognise themselves as carers. They are usually family members or close friends. Many carers, including those from ethnic minorities, remain 'hidden' to statutory services. These carers may not be accessing services or receive support from the many local agencies that can assist them. It is important for all agencies to identify carers including parents of disabled children who are required to provide a level of care above what is expected with a child without a disability. This will ensure;

- They can be provided with information about carer support services
- Ensure carers needs are assessed and appropriate action taken
- They can be consulted about services designed to help them
- Carers receive training, practical support and a break from caring
- A rigorous analysis of the numbers of carers and their needs is undertaken

What has been provided so far

- Outreach services in health centres in Widnes and Runcorn
- Outreach presentations at faith and community groups across the borough.
- Liaison with Halton & St Helens Primary Care Trust resulted in initiatives to access hard to reach carers
- Information giving events such as Carers Week and Carers Rights Day. These were attended by over 165 carers
- Events and activities specifically designed to reach hidden carers and carers from ethnic minorities
- Parent support groups, e.g. Halton Autistic Family Support Group (not funded by Halton Borough Council), Parent Partnership
- Drop in session and events for carers of disabled children.

7.2 Information

Carers can access information in a number of ways. They can telephone or drop into the Widnes Carers' Centre and Runcorn Carers' Centre. They can contact Customer Services at the Halton Borough Council call centre or Direct Link offices based at Halton Lea, Runcorn and Halton Direct Link, Widnes (near Widnes Market), Carers can use the Council's web site or Halton Information Exchange will provide information to parents of disabled children. Carers can go to other specialist organisations in the borough with a special interest and expertise in dealing with carers. The contact details of these organisations can be found at the back of this strategy.

Information is one of the main needs of carers. Carers need good information to help them carry out their caring role and to have their own support needs met. Carers require information that is:

- Tailored to their needs
- Clear
- Comprehensive
- User friendly
- Up to date
- Accessible
- Age appropriate
- In the carers preferred language
- In a range of formats including the Internet and telephone to signpost them to support and services

The information provided should cover access to services, assessment, the illness/disability/condition of the person they care for, their rights as carers, charges for services, the roles of different agencies and professionals, what to do when things go wrong and how to complain. In addition it should provide details of where carers can access independent support and advocacy services.

What has been provided so far

- Carers Information Packs containing information about local services for carers including information about their right to an assessment. This publication has been revised and updated in 2003, 2004, 2005 and 2007.
- Halton Information Exchange (children) provides information to carers of disabled children through an information pack and regular newsletter.
- Children's Information Service provides a range of information to all parents including parents of disabled children regarding childcare
- A Quick Guide to Services for Carers leaflet, distributed at carers events
- A Young Carers Information Pack
- Explaining Carers Assessment leaflet
- Two Carers' Centres providing a drop in information service in Widnes and Runcorn
- A database to identify carers and inform them of carers day trips, pamper sessions, training courses and services available to help them as carers
- Two Carer Information Officers

7.3 Emotional support and support services

Providing care to another individual can be lonely and demanding. Sometimes carers can become socially isolated. Also a carer may find that when their caring role ends (for example when the person they are caring for dies), they find it difficult to adjust to the change in their life.

Different kinds of emotional support may be necessary. Widnes and Runcorn Carers' Centres provide access to appropriate counselling services. Other voluntary organisations including Age Concern Halton, Kings Cross Project, Barnardo's, Scope, HAFS, Halton Young Carers Project and Widnes and Runcorn Cancer Support Group are available to provide emotional support to carers.

Carers want co-ordinated and flexible services that will assist them in their role as carers. They want to be recognised, respected and listened to. They want services, provided by the Primary Care Trust, Social Services, Children & Young People Directorate and voluntary agencies to meet their needs as carers. They want to be able to access an independent advocacy service and dedicated services that are flexible, accessible and meets their needs.

Services for the cared for person have substantial impact on their carer. It is important they receive good quality, reliable and efficient services to enable them to take a break from caring. All agencies in the statutory and voluntary sector need to ensure they employ well-trained, well-informed individuals who have had a criminal record bureau check. Carers want access to Direct Payments to provide them with choice about service they can access.

What has been provided so far

- Access to counselling services at Widnes and Runcorn Carers' Centre provided by two voluntary agencies
- Confidential advice service to carers on a drop in basis at Widnes and Runcorn Carers' Centre and provided by other local voluntary sector organisations
- Referral to social workers and other local agencies providing advice and support
- A range of short breaks services for families of children with disabilities
- Sibling support group for siblings of disabled children
- Specialist support service for children with severe learning difficulties and challenging behaviour
- Key workers to provide a co-ordinated package of services to families of disabled children
- A meeting place Runcorn Carers' Centre for carer support groups.
- Complementary therapies specifically for carers
- Pamper sessions for carers
- Use of carers grant to provide carers respite services

7.4 Assessment and assessing carers needs

In Halton there are various agencies that collect information about carers. Halton Borough Council's Health and Community Directorate and Children and Young People Directorate and Widnes and Runcorn Carers' Centres are all in contact with carers. The Primary Care Trust and 5 Boroughs Partnership NHS Trust also have contact with large numbers of carers. Numerous voluntary organisations including Age Concern Halton, Kings Cross Project, Barnardo's, Scope, Halton Young Carers Project, Halton Autistic Families Support Group and Widnes and Runcorn Cancer Support Group work with and provide services that support carers.

Carers can register their details at both Carers' Centres in Halton and can obtain help and support and be referred to have their needs assessed. Carers needs differ in a number of ways depending on factors such as:

- The level of support or personal care they provide to the person they care for
- The relationship to the person they care for
- The illness or disability of the person they care for

- Their cultural needs or those of the person they care for
- Whether the carer is in employment
- If the carer lives a distance from the person they care for.

What is a carer's assessment?

If the carer looks after someone regularly they can have a carers assessment. This assessment looks at the care or support they provide and how it affects their life. The assessment is for the carer, not for the person who needs support or care.

Carers of disabled children should provide 'regular and substantial' care in line with the provisions of the Carers Disabled Children's Act 2000.

Who can have a carer's assessment?

Carers of adults

Under the Carers and Disabled Children's Act 2000, a carer over 16 years of age can request an assessment of her/his needs if:

1. The person being cared for is over the age of 18 years and is eligible for, or has had, a community care needs assessment
and
2. The carer is not providing personal assistance for payment in cash or in kind or is a volunteer or working for a voluntary organisation
and
3. The carer provides, or intends to provide, regular and substantial care

People who are about to take on a caring role are eligible for assessment as long as the above criteria are met and the care they intend to provide to someone looks likely to be regular and substantial.

A carer has a right to an assessment as long as the person they care for is, or would be, eligible for a community care assessment, even if they have refused to have one or have refused any services offered.

Carers of disabled children will have a right to an assessment if the child being cared for is eligible for a child in need assessment.

'Regular and Substantial' care is not defined within the Act. It is the 'impact' of caring on a person's life that is important not necessarily the nature of the caring tasks or how often or how much time is spent caring.

Halton has agreed to a Local Public Service Agreement (LPSA) to increase the number of carer's assessment it provides for carers. It was agreed that in 2008/09 600 carers will receive a carers assessment.

What is available

- Under the Carers (Recognition and Services) Act 1995 and the Carers and Disabled Children's Act 2000, all carers providing regular and substantial care have the right to request an assessment of their own needs from Halton Social Services
- All carers on the care programme approach (mental health and learning disability) should be offered a carers assessment

- Since April 2005 the Carers (Equal Opportunities) Act means that identified carers will be told about their right to a carers assessment and have their wishes to remain in or return to work and education taken into account during the assessment.
- New carers assessment forms have been produced to comply with the changes made by the Carers (Equal Opportunities) Act 2004
- New carers assessment forms have been produced to assess the needs of carers of disabled children.

7.5 Having a voice

In 2006 Halton Carers Forum was established. The Carers Forum hold regular meetings with carers. The Carers Forum is currently made up of an elected Chairperson, an Executive Board and registered carers

Other people who may attend the forum are:

- Representatives from Health and Community Directorate
- Representatives from Children and Young People Directorate
- Representatives from Primary Care Trusts
- Representatives from other organisations who help carers

Carers are already involved in commenting on services provided by the local authority and the Primary Care Trust.

The Children Act 2004 required local authorities to lead on the development of Children's Trust. In Halton the Children's Trust is known as the Children's Alliance to reflect the spirit of partnership. The Halton Children and Young People's Alliance Board will provide the appropriate vehicle for the development of the Trust. The development of the Alliance will be informed by the needs of the carers and young people and parent and carer forum has been established that will allow all parents and carers, including those of disabled children, to influence developments. Carers are also represented within the Children's Disability Mini Trust

The Patient Advice Service (known as) PALS is part of the Government's commitment to ensuring that the NHS listens to patients, resolves their immediate concerns and then uses their views to develop services so they continue to meet the needs of patients, carers and relatives.

PALS officers are based in every Primary Care Trust, in Halton, Warrington and Whist on Hospital and 5 Boroughs Partnership NHS Trust.

What has been provided so far

- Financial assistance for the Halton Carers Forum in order to enable them to meet regularly
- Carer representation on Mental Health Carers LIT Sub Group, Older People Carers LIT Sub group, Adult Learning Difficulties Carers LIT Sub Group, Physical and Sensory Disabilities Carers LIT Sub Group, Valuing People Carers Implementation Group, Partnership Boards and LITS.
- Consultation about services and training for carers provided by the Carers' Centres
- Participation in Halton Carers Forum meetings
- Carers representation within all levels of Halton Children with Disabilities Partnership Board

7.6 Providing a break

The 2001 Census showed that 3,699 carers in Halton are looking after someone with an illness or disability for more than 50 hours per week. This may be providing help with personal care such as:

- Washing/bathing
- Dressing
- Walking around the house
- Getting in and out of bed
- Cooking and keeping the house clean
- Communication because of sight or hearing difficulties or difficulty understanding
- Helping with finances or paying bills
- Collecting medication or making sure someone takes prescribed medication

Being a carer can be emotionally and physically very tiring. Carers often do not think enough about their own health and well-being, and find they suffer from exhaustion and stress.

Taking a break from caring is essential for most carers, even if it's only a few hours. It allows them to see friends, relax, sleep, join classes, and meet other people – to do all the things that most people take for granted.

Some carers feel guilty about taking time for themselves. They see it as a sign of failure. However, without regular breaks, carers are putting their own health at risk. Everyone needs time to recharge his or her batteries.

Ideally, breaks from caring should be planned breaks so that both the carer and the person looked after are happy with the arrangements.

What has been provided so far

- Day trips to Llandudno, Bolton Market, Trafford Centre, Southport, Botany Bay, Salford Quays, Chester, Blakemere, Blackpool, Antony Cotton Show, Widnes v Castleford Rugby, Widnes v Blackpool Rugby, Everton Reserves v Man Utd Reserves, Everton v Wigan Athletic Reserves.
- Funding to local voluntary organisations and charities to arrange carers breaks for their members
- Increased the number of carers receiving a break each year since 2003.
- A range of carer short breaks for carers of disabled children
- Carers of adults and older people were provided with over 19,000 breaks in 2007/2008.

7.7 Support that helps carers care and maintain their own health

Caring can be physically and emotionally exhausting. As a result, many carers suffer from physical injury or need treatment for stress related problems.

Carers UK research has found

- Carers are twice as likely to have mental health problems if they provide substantial care
- 316,000 people in the UK who provide care describe themselves as 'permanently sick or disabled'
- Seven out of 10 carers worry about their finances and six out 10 believe this has an effect on their health

(Source: www.carersuk.org.uk)

Some studies show that 52% of carers need treatment for stress related problems and 51% of carers have a physical injury as a result of caring.

Many carers have to give up work and caring because of the effect caring has on their own health. However, with the right information and support, many of the health problems affecting carers are preventable.

Carers should be able to:

- Get enough sleep and rest
- Get regular and planned breaks from caring
- Have time for themselves
- Get enough information about services that could help
- Feel free from financial worry because they have access to financial information on benefits or debt
- Receive advice and training on aspects of caring.

Carers need to:

- Make sure their GP knows they are a carer
- Ask social services for a carers assessment to find out about breaks from caring, receive services to support the carer with caring or get advice on health awareness courses
- Contact Widnes or Runcorn Carers' Centre to ask about complementary therapies, counselling and health awareness courses
- Get financial advice on benefits or debt
- Find out about training courses that can help the carer

What has been provided so far

- A comprehensive complementary therapy service for carers
- A training programme for carers
- Pamper sessions, at various locations including the Widnes and Runcorn Carers' Centres and Riverside College.
- Support groups use, free of charge, the Runcorn Carers' Centre to meet and support their members
- Kings Cross Project provide a counselling service at both Carers' Centres
- Drop in information and advice and referral of carers to the Welfare Benefits Service and Citizen Advice Bureau
- Reduced rates at many indoor and outdoor leisure and recreational activities via the Halton Leisure Card.

7.8 Young carers

The government document 'Caring about Carers' states: 'the experience of growing up in a family where a parent, relative or sibling is ill or disabled can bring both rewards and difficulties'.

Children and young people under 18 who have caring responsibilities are often referred to as 'young carers'. These are young people whose lives are restricted in some way because they are supporting or taking responsibility for care of a person who is ill, has a disability or mental illness or misuses a substance.

Not every young person who has a parent, sibling or grandparent who is ill or disabled is a young carer, but of those young people who are taking on extra

responsibilities, recent research has shown that;

- One quarter are missing school or have difficulties with lateness, no time to do homework or have other problems
- 12% cent of young carers are caring for more than one person
- More than half are providing care for their mother and one third for their brother or sisters

Halton's Children and Young People Directorate fund the Halton Young Carers Project through their mainstream budgets and additional funding is provided from Carers Grant for support, activities and short breaks for Young Carers.

What has been provided so far

- A Young Carers Information Pack has been produced, in conjunction with young carers
- Additional funding to identify 16 –17 year old young carers
- Support for Halton Young Carers Project to provide additional carers breaks for young carers

7.9 Parents of children with a disability

Social Services have the responsibility for assessing the needs of disabled children and their carers, and for co-ordinating services to meet those needs. They will arrange an assessment, a process to identify all the needs of the child and the family. A worker from the team will visit the family and provide them with a 'Care Plan'. This will show the needs of the child and family and the services, which will be provided. Carers will also be entitled to a carer's assessment that will provide them with a Carer's Action Plan. Services offered by Children and Young People Directorate may include a home from home family based short break, advice and support to families, after school clubs, Direct Payments, outreach support and a range of social and leisure opportunities.

What has been provided so far

- Crossroads support services for carers
- Saturday and after school clubs
- Inclusive play and leisure groups
- Sibling support group
- Parent Partnership
- Early Support programme
- Halton Information Exchange
- Children's Information Service
- Youth Clubs
- One to one volunteer links
- School holiday play schemes
- Direct Payments
- Carers Assessment

7.10 Financial Security/Carers in employment

Carers and working

Many carers find they are unable to work because of the amount time they spend caring. Other carers try to 'juggle' work with caring and find themselves doing two jobs, one paid and one unpaid.

Problems faced by carers who are working include:

- Stress and anxiety from constantly juggling work and care
- Tiredness and having to cope with little or broken sleep
- Isolation because they have no time to go out and socialise
- Feeling that their colleagues think they are not committed to their paid work

The support the carer needs to keep working may be very simple. For example, a carer might need to be able to use a telephone and check the person they care for is all right. Sometimes carers do need to take leave to help them through difficult times.

Financial security

Money matters more than ever when caring for someone. Carers may find they are:

- Unable to work
- Living on less money
- Faced with decisions that will affect money in the future, for example in the area of pensions
- Experiencing poverty because of being a long-term carer
- Needing to sort out debt problems

Many carers do not claim enough benefits or discounts for themselves because the benefit system is complex and they do not know what to claim.

Carers UK research has shown

- One in five carers has to cut back on food
- One in three have trouble paying utility bills
- Four out of ten find the level of charges for services cause financial difficulties
- One in three carers have no savings at all

(Source: www.carersuk.org)

Many carers experience debt and the financial stress affects their health.

What has been provided

- Many carers requesting benefit advice have been referred to Halton Borough Council's Welfare Rights Service
- General advice service and debt counselling is available through the Citizen Advice Bureau
- Information for working carers and benefit advice is included in the Carers Information Pack and A Quick Guide to Carer Services leaflet.
- Return to work information is available in the Carers Information Pack. It is provided to each carer when they receive a carer's assessment.
- Information about carer's rights and their benefit entitlement was available at Carers Week and Carers Rights Day events and other community events for carers.

- Carer Awareness training provided within all staff teams at Halton Borough Council in order to identify employees who are carers.
- Flexible working conditions at Halton Borough Council
- Funding provided at Halton People into Jobs to support and train Carers wanting to return to work.

8.0 CARERS STRATEGY ACTION PLAN 2008-09

AIM 1 : RECOGNITION

Ref.	Objective	Action	People Responsible	Timescales		Progress to date/Outcome
				Start Date	End Date	
1.1	Develop a strategy to publicise and promote issues concerning carers	Develop and publicise the Carer Promotion Strategy and implement aims/objectives	CDO	Ongoing	Ongoing	Increase new carers – registering @ CC and accessing information & full assessment
1.2	Raise awareness of carers needs with health & social care staff and in the community	Briefing sessions for health & social care staff to be held	Carer Development Team	April '08	Ongoing	
		Induction pack to include a specific section on Carer recognition (inc. Young Carers)	HBC Training Team	April '08	Ongoing	CIO distributes packs request
		Annual File audit to take place to ensure that carers are recognised by professional staff and that they are offered an assessment	SDO	April '08	Ongoing	Attendance and contribution at LITS. Increased understand of carer issues by staff
		Action provision of training to call centre staff. CDO to deliver awareness raising training to call centre staff	Team Managers	April '08	Ongoing	CDO to deliver awareness. Raising training - increases
1.3	Identify 'hidden carers' to make their lives better	Maintain and regularly update Carers Databases	All Agencies	Ongoing	Ongoing	Carers Centres database has 890 carers MH Team database has 404 carers recorded
		All teams to produce plans which show how they will identify hidden carers and set targets for referrals for assessment	LIT/ALD Partnership Sub Group Chairs	April 2008	March 2009	LIT/ALD Sub Groups Implement Action Plans
		Develop and implement action plan @ Equal Opportunities Sub Group	SDO (Carers)	Ongoing	Ongoing	Increased presentations to faith/community groups – increased number of carers registering at CC.

AIM 2 : INFORMATION

Ref.	Objective	Action	People Responsible	Timescales		Progress to date/Outcome
				Start Date	End Date	
2.1	Keep Carers up to date with current information and carers legislation to help make informed choices about their caring role	Quick Guides to be widely distributed in the community	Carer Information Officers	Ongoing	Ongoing	5,000 Newsletters & Quick Guides distributed throughout 07/08.
		Carers Web page to be regularly updated	Carer Development Team	Ongoing	Ongoing	Up to date information inputted regularly
		Continue to provide a service via the Runcorn and Widnes Carers Centre (drop in & telephone). Information library to be available at Carer Centres	Carer Development Team	Ongoing	Ongoing	Service available Monday – Friday 10.00am – 4.00pm
		Plan carers events and review publicity materials etc in liaison with carers via HCF & LIT Sub Groups	Carer Development Team Chairs of LITs/ALD Partnership Sub Groups	April 08	Ongoing	Meet needs of carers.
2.2	Ensure information is accessible and easy to understand and available, on request to carers with a disability and to carers from ethnic minorities, where English is not their first language	See 2.1	See 2.1			
		Ensure all new service developments and local changes made are widely know to carers via briefings, newsletters etc	LITs/ALD and Equal Opportunities Sub Group	April '08	Ongoing	Leaflets and the Carer Information Pack can be produced in different languages and formats on request.
		Develop/produce DVD raising carer issues etc publicising available services within Halton	PSD LIT Sub Group – Melanie Giannasi	April 08	Ongoing	Currently a national DVD available
2.3	Quick Guides for carers in GP practices, libraries and made available.	CIO distribute literature on bi-monthly basis	Carer Development Team	April '08	Ongoing	New carers receiving service & information

2.4	Carers accessing services and requiring support to be recorded on Care First	Statistics/activity reported on 1/4 basis @ Carers Strategy Group & LIT Sub Groups	All Agencies monitored via the LITs	Ongoing	Ongoing	Increased transparency in working
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AIM 3 : EMOTIONAL SUPPORT AND SUPPORT SERVICES

Ref.	Objective	Action	People Responsible	Timescales		Progress to date/Outcome
				Start Date	End Date	
3.1	Recognise the emotional needs of all carers especially those hard to reach	See 2.1	See 2.1	See 2.1	See 2.1	
		Carer assessors pro-actively provide assessments and record client need	Carers Assessment Group	April 2008	March 2009	Provide 600 assessments for carers by end of March 2009
3.2	Continue to provide complementary therapy sessions for carers	Commission a complementary therapy service from Riverside College	Carer Development Team	April 2008	March 2009	Riverside College to continue to provide 1000 therapy sessions to 250 carers '08-'09
3.3	Carers Centres to continue to provide a signposting service providing advice, support and information for carers	See 2.1	See 2.1	April 2008	March 2009	Telephone support is available Monday – Friday 10.00am – 4.00pm
3.4	More carers to be provided with control and choice using Direct Payments and IB agenda	Promote the use of Direct Payments and monitor the carer's opinion of the service	Direct Payments Team	April 2008	March 2009	In 07/08 440 individuals received a direct payment; 285 of those people were new Carers

AIM 4 : ASSESSMENT AND ASSESSING CARERS NEEDS

Ref.	Objective	Action	People Responsible	Timescales		Progress to date/Outcome
				Start Date	End Date	
4.1	Carers to be offered an individual assessment of their own needs in accordance with the Carer Act 1995/2000 and Carers (Equal Opportunity) Act 2004	Strategy implemented	Carer Assessment Group/LIT & ALD Sub Groups	April 2008	March 2009	LPSA target of 600 carers receiving an assessment by end of March 2009
		Carers Awareness Training	Training Manager, Health & Com. Directorate	Ongoing	Ongoing	
		Establish a system to record number of carers assessments offered, refused and completed	Carer Assessment Group. LIT/ALD Sub Groups			Outcome reports to be provided to Carer Strategy Group/LIT Subs & Assessment Groups
4.2	Promote carers right to an assessment	See 2.1	See 2.1	See 2.1	See 2.1	
		Inform carers of their rights to an assessment during advice sessions	Care Managers	Ongoing	Ongoing	Carers Quick Guides and News Letters distributed to libraries, health centres and social work teams
4.3	Carers to be consulted about the level of care they are able to offer	To be undertaken via the carers assessments	Care Managers	Ongoing	Ongoing	

4.4	Provide access to an independent advocacy service	Ensure contact details are updated on regular basis	Care Managers	Ongoing	Ongoing	Advocacy Services available Halton Borough Council website under Social Services
4.5	Carers issues are identified during the review of the Choice Based Lettings Policy	Ensure that the allocation of 'Social Points' for being a Carer is addressed within the Policy	Housing Strategy/Halton Housing Trust	Ongoing	Ongoing to March 2010	

AIM 5 : HAVING A VOICE

Ref.	Objective	Action	People Responsible	Timescales		Progress to date/Outcome
				Start Date	End Date	
5.1	Ensure Carers are represented on relevant committee's, boards with agreed support both practical and financial, to enable carers to attend	All LITs/ALD Partnership and associated sub groups, committees etc to have at least one carer representative	LIT/ALD Chairs & LIT/ALD Sub Group chairs	April '08	March '09	Evidence via group minutes
5.2	Carers are to be provided with training to help them effectively contribute to meetings	Chair of Halton Carers Forum to organise and deliver influencing skills training in partnership with Halton Voluntary Action	SDO	April '08	March '09	Increased confidence and effectiveness of carers in groups
5.3	Carers to be involved in the Carers Grant Allocation	Carers to be involved in LIT/ALD Sub Groups	SDO/Chairs of LITs/ALD sub group	April '08	March '09	
5.4	Carers encouraged to give their views on services	Carers Assessments and Events/Activities Questionnaire and evaluations provided	Carer Development Team			Outcome report produced – services developed as a result
5.5	Support the development of the Halton Carers Forum	Continue to provide support to the Forum	Carer Development Team			Carers Grant and staff support has been provided to Halton Carers Forum to convene regular meetings
5.6	Carers involvement in planning and monitoring of services	See 5.1	See 5.1	See 5.1	See 5.1	

AIM 6 : PROVIDING A BREAK

Ref.	Objective	Action	Lead Responsibility	Timescales		Progress to date/Outcome
				Start Date	End Date	
6.1	Carers of people who are assessed as being in need of community care services will have the opportunity for a break	Respective LITs/ALD Sub Groups to assume responsibility for the management of the Grant	LITs/ALD Sub group	January 2008	March 2009	Greater partnership working with carers
		Audit of needs identified in carers assessments to be carried out to help inform grant allocations	LITs/ALD Sub group	Ongoing	Ongoing	
		Formal Evaluation process to be devised for carers breaks, event etc to help inform future service development	Carers Development Team			Requesting events planned – client satisfaction forms recorded
6.2	Continue to develop a range of opportunities for carers to have a break	Halton Carers Forum to feed in their views to the LITs	LITs/ALD Sub Groups	April 2008	March 2009	Forum members involved in Carers Strategy Group and other decision making groups
6.3	Promote and raise awareness of Direct Payments amongst Carers as per Carers and Disabled Children Act 2000	See 3.6	See 3.6	See 3.6	See 3.6	
		Publicise in the Carer information pack and at Carers events and forums	Carer Development Team	Ongoing	Ongoing	Highlighted in Carers Information Pack and promoted within social work teams

6.4	Continue developing respite services and monitor and evaluate existing services	LITs to report back to the Carer Grant Accountability Committee on a quarterly basis	LITs/ALD Sub Groups	Ongoing	Ongoing	
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AIM 7 : SUPPORT THAT HELPS CARERS CARE AND MAINTAIN THEIR OWN HEALTH

Ref.	Objective	Action	People Responsible	Timescales		Progress to date/Outcome
				Start Date	End Date	
7.1	Provide training course for carers to help them maintain their health & respond to carers requests for training to help them in their caring role		Carer Development Team	April 2008	March 2009	A training programme for 2008/09 will be agreed and publicised in newsletter.
		Training Needs etc to be addressed via Carers Assessments and appropriate information provided to Carer Development Team	Carer Assessors	April 2008	March 2009	Raise Awareness of Carers
7.2	Promote caring issues in GP practices throughout the PCT and 5 Boroughs Partnership	Produce and implement Information Strategy that addresses the health needs of Carers	Primary Care Trust 5 Boroughs Partnership	April 2008	March 2009	Carer Development Team provide outreach sessions in GP Practices in Widnes and Runcorn.
7.3	Implement the new Halton & St Helens PCT GP Enhanced Service For Carers	Carers receiving a more flexible and responsive service at GP surgeries, encouraging and promoting Carers to take care of their own health care issues.	PCT	Dec 2007	On going	Carer receiving a more flexible service from GP surgeries.

AIM 8 : YOUNG CARERS

Ref.	Objective	Action	People Responsible	Timescales		Progress to date/Outcome
				Start Date	End Date	
8.1	Support Halton Young Carers Project to identify and work with Young Carers as covered by; The Carers (Recognition and Services) Act 1995, The Children's Act 1989 The Carers (Equal Opportunities) Act 2004	Information about project to be distributed and promoted in Carers Information Pack	Carer Development Team	April 2008	March 2009	Carers Pack includes information to all Y.C. and is widely distributed across Borough.
	Steering Group – Ensure focus for development of protocols & services for carers	Develop protocol for the transfer of young carers from children services to adult services when they reach 18 years	Jane Bennett Sue Rothwell	On going	On going	Ensure smooth transition for young people into adult services
	To provide an arena where Young Carers can access support and information	HYAC to set up peer support group, identifying the most appropriate way of providing information to Young Carers and offer on-going support	Sue Rothwell	On going	On going	Young People receive appropriate information, which may include DVD
		Continue to deliver a programme of training for young carers including Halton FM – media (5-11 years), Duke of Edinburgh Award – Older (12-18 years), Drama & Art (5-11 years)	Jane Bennett	On going	On going	Young Carers receiving training

8.2	Provide Young Carers with carers breaks and activities they want	Deliver support sessions for young people after school, along with up to 3 x residential programmes and weekly day activities – sports after school Monday (Council Widnes Sport Development Group). Residential programmes. Young Carers Festival (10M)	Halton Young Carers Project - HITS CYP Directorate	3 x per year	On going	11 Young Carers received breaks
8.3	Ensure that the views of young carers are heard and considered when planning services	Provide age appropriate opportunities for young people to express their views	Halton Young Carers Project	On going	On going	HITS have “Hear My Rights Award” for work undertaken to provide Y.P. opportunities to express views and influence services
8.4	Strengthen links with other agencies that may be aware of and/or provide support for young carers	Relevant signposting to relevant support services to be made	Halton Young Carers Project	On going	On going	Young Carers have increased knowledge of services and more support and information
8.5	Increase numbers of Young Carers and enable them to access support	HAFS to undertake an analysis of children and young people in its group to identify: Total number of sibling young carers Those that provide significant support to their siblings	HAFS HBC	April 08	March 09	
8.6	The nationally recognised definition of Young Carers as used by CYP and HITS to be adopted by all agencies	Young Persons Steering group to drive forward	Sue Rothwell	April 08	March 09	All Agencies to share a common understanding of the definition of Young Carers

8.5	Recognise the emotional and physical impact that a caring role may have on a young person	Appropriate Carers Assessment to be carried out and signposting to relevant support services	Care Managers	Ongoing	Ongoing	Young Carers to access appropriate services
	Increase health awareness of Young Carers Pilot School Nurse attending a Young Carers activity	100 % of Young Carers attending the pilot activity would have access to health information	PCT	May 2008	March 2009	

AIM 9: PARENTS OF CHILDREN WITH A DISABILITY

Ref.	Objective	Action	People Responsible	Timescales		Progress to date/Outcome
				Start Date	End Date	
9.1	Raise the profile of the needs of carers of disabled children	Deliver information sessions in schools, children's centres and other child centred venues	Children's Carers Development Officer	On going	On going	Increase numbers of Young Carers accessing services
9.2	Keep carers of disabled children updated on new information	Provide information packs and regular newsletters to carers of disabled children	Halton Information exchange Co-ordinator and Children's Development Officer	On going	On going	Develop new information leaflet aimed at parents of children with disability
9.3	Promote the use of Direct payments	Provide support to access Direct Payments	Children's Disability Team Direct Payments Team	On going	On going	Increase choice for Carers
9.4	Continue to provide support/carers in relation to Special Educational Needs	Provide independent support and advice to parents	Parent Partnership Co-ordinator	On going	On going	
9.5	Provide Carer Breaks	Commission a range of short break services	Strategic Manager – Children with Disabilities	On going	On going	Increase numbers of carers accessing a break

AIM 10 : FINANCIAL SECURITY/CARERS IN EMPLOYMENT

Ref.	Objective	Action	People Responsible	Timescales		Progress to date/Outcome
				Start Date	End Date	
10.1	Provide access to information on benefits and finance	Carers to be referred to HBC's Welfare Rights Team or Halton Citizen Advice Bureau for welfare benefit advice	All Agencies	On going	On going	Carers Centres continue to signpost carers to Welfare Rights Team
10.2	Carers provided with the opportunity to enter training or employment	Issues to be addressed via the Carers Assessment and appropriate advice given to support carers into employment or education Fund HPIJ to provide training and support	Carers Centres HBC Adult Learning Team	On going	On going	Briefings given to Adult Learning Team and Halton People into Jobs
10.3	Provide support working carers	All employers to identify working carers and made aware of the need to adopt carer friendly employment policies	All Agencies	On going	On going	Carer Development Team to identify carers employed by HBC
		Working Carers to receive advice and support to help remain in employment	Job Centre Plus Carer Development Team	On going	On going	Provided at Carers Centres on request

9.0 Comments and Complaints

Your comments, compliments and complaints are important as they help us to improve and develop the services we provide.

Sometimes decisions are made or things may happen that you are unhappy about or disagree with. If this happens we want you to tell us – but we also want you to tell us when you are pleased with the help you have received.

Sometimes it is not possible to resolve a complaint about a service. In these circumstances, when all stages of the procedure have been completed, an individual complainant should contact the Commissioner for Local Administration (York Office).

If you want to write, our Freepost address is: -

Complaints, Freepost (CS/3)
Customer Care Officer
Health and Community Directorate
Halton Borough council
Grosvenor House
Halton Lea
Runcorn
WA7 2ED

Mr Les Platt
Customer Care Officer
Children and Young People Directorate
Halton Borough Council
Grosvenor House
Halton Lea
Runcorn
WA7 2ED

Email: ssdcomplaint@halton.gov.uk

If you require more information about how to make a complaint, you can contact Customer Services Advisor Tel; 01928 704406 or visit Halton Direct Link, Halton Lea, Runcorn and Halton Direct Link, 7 Brook Street, Widnes

Useful addresses and telephone numbers

Health & Community/Children and Young People Directorate Customer Services		01928 704406
Halton Borough Council Welfare Rights Team	Halton Direct Link 7 Brook Street, Widnes, WA8 6NE	0151 471 7448
Halton Crossroads Caring for Crossroads	18 Waterside Court, St Helens, WA9 1AU	01744 612499
Advocate	Kipling House, 2 Kipling Crescent, Widnes, WA8 7BT	0151 257 9663
Runcorn Carers Centre	62 Church Street, Runcorn, WA7 1LD	01928 580182
Halton Carers Forum	C/o Runcorn Carers Centre, 62 Church Street, Runcorn, WA7 1LD	01928 580182
Widnes Carers' Centre	C/o Age Concern Halton, 106 Albert Road, Widnes, WA8 6LG	0151 257 7767
Halton Young Carers Project	C/o HITS 84 Grangeway, Halton Lodge, Runcorn, WA7 5HZ	01928 564663
Halton & St Helens Primary Care Trust	Victoria House, Holloway, Runcorn, WA7	01928 593672
Halton Information Exchange	Woodview CDC, Crow Wood Lane, Widnes, WA8 3L2	0151 424 4454
Halton Direct Link	7 Brook Street, Widnes, WA8 6NE	0151 907 8300

Age Concern Halton	44 Church Street, Runcorn, WA7	01928 590600
Halton Direct Link	Halton Lea, Runcorn, WA7 2ES	0151 907 8300
Halton Citizen Advice Bureau	Lugsdale Road, Widnes, WA8 6DJ	0845 1304055
5 Boroughs Partnership NHS Trust	Hollings Park House, Hollins Lane, Winwick, Warrington, WA2 8WA	01928 664000
Age Concern Halton	106 Albert Road, Widnes, WA8 6LG	0151 424 9000
Widnes & Runcorn Cancer Support Group	21-23 Alforde Street, Widnes, WA8 7TR	0151 423 5730
Barnardo's Wider Horizons Project	Grosvenor House, Halton Lea, Runcorn, WA7 2HF	01928 719031
MIND	Mental Health Resource, 30A Widnes Road, Widnes, WA8 6AD	0151 422 1714
Scope Family Link Scheme	Old Police Station, Mersey Road, Runcorn, WA7 1DF	01928 588516
Making Space	C/o Mental Health Resource, 30A Widnes Road, Widnes, Wa8 6AD	0151 422 1714
PSS Ltd	18 Seel Street, Liverpool, L1 4BE	0151 702 5555
Halton Happy Hearts	56 Oxford Road, Widnes, WA8 6DE	0151 420 5432
Alzheimer's Society	C/o Runcorn Carers Centre, 62 Church Street, Runcorn, WA7 1LD	01928 580182
Let's Go Club	46 Thirlmere Close, Frodsham, WA7 7LZ	01928 731165

Halton Shopmobility & Disability	87 Albert Road, Widnes, WA8	0151 424 8080
Halton Shopmobility & Disability	102 River Walk, Halton Lea, Runcorn, WA7 2BX	01928 717445
Mencap	Acorn Club, Laburnham Grove, Runcorn, WA7	01928 574867
Halton Healthy Living Programme	Suite 1E, Midwood House, Midwood Street, Widnes, WA8 6BH	0151 495 3293
Halton Autistic Families Support Group (HAFS)	Trinity House, 78-80 Victoria Road, Widnes, WA8 7RA	0151495 3540
Kings Cross Project	C/o Trinity Methodist Church, Peelhouse Lane, Widnes, WA8 6TJ	0151 420 4905
Halton Healthy Living Trust	C/o 1 Henley Court, Runcorn, WA7 5QL	01928 580987
Stroke Association	Halton General Hospital, Hospital Way, Runcorn, WA7 2DA	01928 790372
Halton Voluntary Action	Sefton House, Public Hall Street, Runcorn, WA7 1NG	01928 592405
The United Carers of Halton (TUCH)	C/o 11 Tennyson Road, Widnes, WA8 7DA	0151 424 8502
Halton Parkinson's Disease Support Group	23 Park Road, Runcorn, WA7 4SS	01928 580015
Halton People Into Jobs (HPIJ)	Rutland House Halton Lea Runcorn WA7 2GW	01928 759090

**Carers Consultation Feedback
3rd March 2008 – Halton Stadium**

Recognition (1)

What Carers Say

- Carers need to be INVOLVED in plans made by professionals for the cared for person
- Doctors need to be persuaded to point carers in the right direction
- Should be put on people's medical records at their GP
- Work on raising carers' needs with health and social care staff and the community
- Look for hidden carers
- Needs communication with groups and regular meetings
- Ensure carers' needs are assessed and appropriate action taken quickly
- Receiving help and information from the Carers Centre
- When trips are organised for carers, if there is no provision for the person being cared for the CARER CANNOT GO
- Yet respite for carers is apparently closing
- Agencies need to communicate with each other and the carer
- Young carers – provide information at school, recognition for teachers and other staff. Use assemblies and inset days. Why not have a play about being a young carer?
- Elderly carers aged over 65 – perhaps a separate Focus Group is required to discuss older carers and how their needs could be met?
- There could be a national publicity campaign.
- Other ideas for identifying carers through:
 - GP surgeries
 - Asda
 - Hospitals
 - Carers' stand during Disability Day
 - Carers' Bus
 - Leaflet drop
 - Advert/information in paper
 - Road shows
 - Library
 - Websites
- Need to increase the availability of counselling services and support for carers
- Professionals working with carers need to understand how they can work together.

“If there is no provision for the person being cared for the carer cannot go on trips.”

What do carers want from the new Strategy?

- More funding right across the board
- More relevant information at the right time
- More facilities with a central drop-in centre
- Consistency in assessment

What more could be done to support carers?

- More money may open up the right to choose what carers need and want

- Complimentary therapies and breaks – services that provide mental, emotional, physical and social uplift
- Awareness events
- Promote carers' groups
- Better awareness at school through video/play and literature
- Use libraries and shops to promote carers and give advice and guidance
- Use local press/TV/ Radio/ Internet
- Questionnaire across the borough

What might stand in the way?

- Lack of funding
- Pride, not wanting to ask
- Not knowing how to tap into what is available through lack of information
- Fear
- Lack of confidence in our own ability – e.g. to fill in forms
- Lack of trust of people in authority
- Dignity/family ties/assumptions
- Not realising “I am a carer”
- Benefits/income impacting on services
- Just want to be left alone
- Resources from agencies are limited

Information (2)

What Carers say

- Information is important, as many people do not realise they are carers
- Registered carers will receive more information than others
- Some GPs have information about carers, some haven't
- If there was a document with all the services on, coloured sections would designate different services for carers
- Information around discounts for carers
- First information should come from GPs
- Information for carers in surgeries needs to stand out, not leaflets hidden behind other leaflets
- There should be more information broadcasts for carers on television and radio
- Social services should be able to give carers the information they require or put them onto the right people
- Benefits helpline? Carers may not know where the first port of call is, or even know if they are entitled to Carer's Allowance
- Do databases cross-reference?
- There needs to be information when you lose a cared for person
- Carers Centres need to be able to point carers towards more specialised services, such as groups for disabled people
- Around Carers Centre their whereabouts, some publicity of the work they do

“If carers don't get the information we don't know what's there! Information is the key.”

- The GP is responsible for referring people to where help is really needed – they should have a sheet of all the relevant organisations
- Getting the message across through supermarkets and pharmacies
- Everyone should have had a copy of the Carers Strategy.
- Only one person had read it, two had heard of it, and others were not aware.
- A lot of carers still not on database.
- Carers feel there is not enough information on benefits such as Carers Allowance.
- There is a need for Citizen Advocacy for carers.
- Widnes and Runcorn need a Carers Centre on both sides of the river which is a 'one stop shop'
- "If we don't get the information we don't know what's there. Information is the key."
- Outreach is needed
- We need to be proactive
- Staff need to be properly trained to help get the message across to carers.
- People should join up to the Carers Forum and try to get the right information.
- Some carers have never had a social worker
- Assessment should be done every 12 months to look at the carer's health needs as well as the person who has the service
- Information on benefits
- All information under one roof
- More money invested towards information
- To follow alongside the pathways with carers and their changing roles whatever they may be
- Pharmacists may be important in providing information
- Finding hidden carers so that they can be given the information they need#
- One database only please!
- Carers' Information Packs need to be more widely available in pharmacies and surgeries
- Why not distribute a carers' leaflet in the free newspaper?
- A family scene around the table: mum cooking with a caption above her head saying 'mum' and a child with a caption saying 'carer'...
- To take the age limit off the Carers' Allowance
- Why do carers have to jump through hoops to get their entitlement?
- Carers must be listened to by the council and their officers
- Carers need to get together and be a voice
- Carers' grant money has to be scrutinised in-depth
- Carers should not be made to feel grateful for services
- What information you get depends on what database you're on!

Emotional Support and support services (3)

What carers say

What has been achieved?

- Complementary therapies and pamper sessions – achieved!
- Outreach groups
- Coping with stress sessions
- Carer assessments
- Direct Payments
- Carer Groups
- Carer Trips – achieved!

“Services need to LISTEN to the carer – at the end of the day they know the person they are caring for better than anybody else”

- Counselling sessions (these need to be publicised/advertised more)
- Carer Newsletter – achieved!
- Carer-designated building – achieved!
- Coordinated assessment package has been achieved
- More recognition of carers' emotional needs
- Continuation of therapies and pamper sessions
- Direct payments from Carer Break Budgets
- Carer Assessors in each team
- Implementation of Community Bridge Builders

What has worked well?

- Newsletter
- Day trips for carers
- Pamper sessions and complimentary therapies
- Direct Payments (for those who know about them)
- Therapies and pamper sessions
- Direct Payments for things needed rather than being told what we want
- Carers Assessments

What could have been done better?

- A lot of people don't about them
- Some coping with stress sessions
- Lifting & handling workshops – keeping the carer safe
- Carer assessment – need for lot more information
- Direct payments – need for lot more information
- Taster sessions for complimentary therapies – need to explain what each therapy is in straightforward terms
- More Carers Groups/ support groups around disabilities and health issue
- The new Carers Centre must be wheelchair-friendly, have plenty of disabled access, parking facilities, disabled toilets
- Life planning sessions – e.g. when people with learning disabilities move out of family home – and emotional support especially for older family carers.
- More partnership working between carers and professionals
- Crisis intervention – need to know who to contact
- First aid training is needed for carers – straightforward instructions
- Information on different aspects, should be able to get more information from GP
- Emergency service – if something happens to the person you care for and they need to go to hospital, people need someone to stay with other disabled family member or children
- Need a lot more services for young carers
- Information and how it's given
- Night services
- All carers need to be linked with a carer assessor
- Ongoing therapy and pamper sessions
- Communication
- Referrals to appropriate services
- More support when carers are ill.
- More time for carer's breaks – allocated out of carers breaks budget.
- More professional support – carers feel that social workers do not provide enough support
- Lack of information about available support
- Not being kept up to date

- Need to reach hidden carers
- Would like outreach – at GPs and community centres
- More newsletters and presentations to groups
- More involvement in assessment process
- More information about benefits – expert help

What do carers want from the new Strategy?

- More understanding – about the physical and mental conditions of the person being cared for and for carer themselves
- Services need to LISTEN to the carer – at the end of the day they know the person they are caring for better than anybody else
- Listen to and act on what the carer actually says and wants
- Continuity of care is essential, it is very stressful to keep repeating the same story to so many different people (professionals should look at the past history file prior to conducting new assessments)
- Log to be kept on each person so information is contained within, any assessments all need to refer to one set of notes
- A correct assessment by a social worker should be open for other healthcare professionals to read and a copy sent to the carer to keep to prevent duplication at any other meeting
- More joint assessments between health and social care teams to avoid duplication
- GP to make more of a stand to identify carers and their needs and treat their needs accordingly
- Health checks for carers (e.g. stress etc) and emotional support should be forthcoming
- Better communication
- We need a 24-hour contact number in case of crisis, even if it is somebody just to listen to the carer's thoughts and fears

What more could be done to support carers?

- INFORMATION INFORMATION INFORMATION the beginning middle and the end!
- Suggest comprehensive DVD about services available
- Tailor-made person-centred approaches to meet the needs of the individual and carer instead of just what is available
- Identified key worker to work with carers and have consistency
- More of what we have already got – information, training and support, more understanding from professionals, better communication
- More choice about the type of service they receive
- Support for former carers

What might stand in the way?

- Main problem is that carers do not always recognise themselves as carers
- What is the definition of a carer? We need a specific definition so that carers recognise themselves as carers
- Carers not feeling able to admit they cannot cope
- Don't feel as if somebody else could care for their relative, partner etc as well as they can themselves
- Lack of funding to offer enhanced support services for carers
- Non-accessible information
- Carers need to keep asking for what they want and if this is not available for this to be logged as a deficit in the service. This will help inform and direct future Carers Strategies

Assessment and assessing carers (4)

What carers say

What has been achieved?

- We have been successful in identifying hidden carers
- We have identified the need for support groups – now we need to support them
- We have achieved 600 carer assessments in 2007/2008

What has worked well?

- Self assessments – but these must be followed up

“We have achieved 600 carer assessments in 2007/2008.”

What could be done better?

- Need to consider the carer when carrying out assessments for the cared for person
- Need more information leaflets at the assessment stage
- Would like assessments to lead onto more training opportunities to help carers cope on a day-to-day basis.
- Finding hidden carers. Are people afraid to ask?
- Promoting carers’ services at GP surgeries, having information tables and having advertisements
- Need for better communication between agencies so all are aware of services, including carer assessments
- Need to overcome carers’ fear of being dependent on other people
- Need for good diagnosis by GP of the cared for person – this can be key to accessing assessment and getting services
- One carer present was caring for two people and had no help whatsoever

What do carers want from the new Strategy?

- Better communication between agencies working with carers, so that all relevant information is offered at assessment
- Accountability – carers want to know who is accountable for each service
- A complaints procedure
- Not too much signposting so it does not appear to be ‘passing the buck’
- Full publicity – forums, local TV, radio, papers, internet and chat rooms, GP surgeries, pharmacies, schools, libraries
- Timescale of 4-6 weeks maximum between referral and assessment with assured reviews annually
- For carers to be involved in all stages of the cared for person’s review
- For GPs to be sent copies of reviews and/or care plans to promote carers’ problems and to educate GPs
- For there to be an identified carers’ assessor and a Carers Team of all assessors for consistency of approach and service and quality, trained staff all working together
- Need for out of hours support/ help-lines

What more could be done to support carers?

- Stigma/ pride issues tackled in publicity (e.g. £4 billion unclaimed benefits 2006-7)
- More information in newsletters to include practical articles about caring such as:
 - Different guest professionals to write an article once per month
 - New legislation
 - First aid ‘tip of the month’

- Points of safe handling etc
- Not everyone can go on training courses but some points should be included to educate everyone through the newsletter
- Communicate that carers' right to support is not begging!
- Pathway information for older carers – knowing what will happen to the person they care for long term
- Assessor to determine confidentiality preference over the phone before
- Through carer assessments identify training needs for the individual carer such as;
 - Coping strategies
 - To stop feeling guilty when you cannot do things
 - Awareness about carers' mental and physical well-being
 - Schizophrenia etc
 - Stress management
 - Medication and side effects
 - Covert medication within care plan

What might stand in the way?

- Dispersal of services
 - Concerns that lack of finances/ carers' budget/ carers' grant and its effect on all service provision (assessment of needs, but no money to provide services)

Having a voice (5)

What carers say

What has been achieved?

- There is better representation and access to carers support officers and assessors
- Halton Carers Forum exists for you to pass on complaints and comments and requests
- Having a voice is about full participation and being actively involved in designing policy and services not just being informed of what they are going to be.
- We have more informed choices and we are encouraged to give feedback on the quality of service providers
- Mental health LIT
- Focus groups
- Support groups
- Some training has taken place
- Good involvement and decisions made by carers in support for allocation of carers grant
- Opportunities to express views

“There are barriers to having a voice – for example, there will be people who have not come along today because they have no one to look after the cared for person.”

What has worked well?

- Involvement with links for health service feedback
- Being made aware of standards for services
- Better feedback mechanisms
- Carers Grant Allocation
- HVA newsletter

What could be done better?

- “There are barriers to having a voice – there will be people who have not come along today because they have no one to look after the cared for person.”
- Need for a well-resourced advocacy service for people who don't know where to go and what their entitlement is
- Would like more surveys/questionnaires for carers – verbal or written
- We would like any help available
- Need for more training
- Need for better financial support
- Not enough carer involvement – it's alright if you are already in a group
- Need for more focus on transport
- Planners should listen more to carers
- It sometimes feels as if the decision has already been made
- No feedback on performance of services

What do carers want from the new Strategy?

- More and better quality information
- Jargon-free, plain English
- More financial support
- Need to cover crisis as well as routine
- Need to be clear about how the Strategy covers out-of-hours and weekends

What more could be done to support carers?

- More clarity and expertise in the assessment of need
- Full resourced advocacy service with specialist knowledge
- Use the experience and expertise of carers and former carers
- Support to allow carers to have a voice and fully participate
- Strong Carers Forum and Carers Centre
- Empowered/ assertive
- Training and support for escorts
- Reduce uncertainty
- Keep promises
- Counselling for carers
- Financial support around areas such as transport – perhaps a Carers' Bus Pass?
- Clarity about what carers are entitled to
- Support workshops (similar to Making Space 2006)
- Funding to keep support groups going
- GPs more aware of carer' responsibilities and health
- Carers 'buddy' service
- More days like today!
- Carer involvement on assessment and care plan
- More supported housing
- Invest in today's cares as that will make things better for carers of tomorrow
- More home visits/ support/ counselling
- 'Can do' attitude from the Council and PCT

What might stand in the way?

- Barriers such as bureaucracy/ red tape/ procedures used as excuses for poor service
- Criteria level set too high, more common sense/ compassion needed
- Negative attitudes to carers – not listening/acting, not responsive
- Money, money, money

- People can't be bothered (some)
- Attitude of professionals (some)
- Staff training
- Bureaucracy – departments not talking to each other
- To quote Captain Kirk, the Strategy needs to boldly go where no one has gone before

Provide a break (6)

What carers say

What has been achieved?

- Carers' breaks such as trips and pampering have been very enjoyable
- Carers are being offered a carer assessment
- Carers are being offered a break
- Someone is able to listen and offer advice and support
- Having your voice heard
- The Carers Information Pack quick guide

“Carers’ breaks such as trips and pampering have been very enjoyable.”

What has worked well?

- Direct payments seem to work well
- Services from the Carers Centres
- The efficiency of carers care team within Halton GPs, district nurses etc

What could be done better?

- Encourage take-up of carer assessments
- Clarify information and make it simpler
- Make direct payments to family members in the same household (carers feel more confident if a relative is giving care)
- What happens when a carer is tired or ill and no longer able to care? There is a need for specialist care whilst the carer has a break
- Utilise former carers – some are prepared to volunteer, e.g. at the Carers Centre
- Advocacy is needed
- Boundary difficulties need to be clearer – e.g. carer and cared for person living in different areas
- More information for carers in all age groups, for example from hospitals and GPs
- The carer's whole needs should be taken into account, which may involve support to the whole family to allow the carer to have a break
- Some carers are not aware they may be entitled to a carer assessment
- Carers' breaks – more than one allocation of funding should be applied for annually
- More short breaks – for example someone coming in for just one day
- Carers should have more choice and flexibility on how they spend the funding and should be able to use some of the funding to pay family members who the cared for person is familiar with

What do carers want from the new Strategy?

- Accessible to ALL carers
- Flexibility
- Social life

- Be aware carers' roles mean they can't always attend meetings
- Drop-in – place to meet and talk and have a cup of tea

What more could be done to support carers?

- Look holistically at the impact of caring (especially in the family)
- Something more for men/ partners/ husbands – the forgotten ones
- Think long term for carers who are concerned that as they get older who will continue to care?
- Consultation before the event/ issue changes
- Consider how carer and cared for might lead a 'normal life' with access to places in the same way as mainstream society
- More information and better publicity about breaks
- Surgeries should give information and guidance following initial visit to GP
- Better communication between all professional bodies – and passed out to carers and third party groups
- Coordinator to gather information, put together and distribute to GPs, hospitals etc
- More information on planning for the future
- It is important to know that someone is there to listen when you need them
- More flexibility of breaks and sitting services

What might stand in the way?

- Money/funding
- Growing population of older carers and limited resources
- Perception of caring (why not shadow a carer for the day?)
- Dysfunctional organisation/ structure – involve corporate businesses to advise/support and develop services
- Continuity of worker involvement – often have several workers involved through assessment and review

Support that helps carers care and maintain their own health (7)

What carers say

- Information is the key to all this
- GPs and health professionals should be able to provide more information and refer carers once they are identified – it should not be left to the carers to find out what's available
- The present strategy is not being implemented
- Carers should have an independent benefits check, e.g. through CAB
- If carers are not registered how do we give them support?
- Why not send out a letter to every household in Halton asking if there is a carer in the household (this could go out with the council newsletter)
- We need carers and cared for persons to have a chance to go on holiday together, as some carers won't want to leave the person they care for
- Not everyone has access to Crossroads (respite) so they can't go to the therapies on offer – the same goes for carers' support groups
- We need an emergency service to provide cover for carers when they are unwell.
- Important to relieve stress to maintain carers' health

“Carers need to keep asking for what they want and if this is not available for this to be logged as a deficit in the service. This will help inform and direct future Carers Strategies”

- A back-up service to aid in emergencies
- A list of volunteers who could come out at short notice
- More courses to train carers
- More alternative therapies
- Listeners who could discuss problems and point carers in the right direction for help
- Holidays with paid carers to take care of the sick person whilst the carer goes out alone
- Sort finances with expert help

Young Carers (8)

What Carers Say

- More resources for HITS
- Publicise the young carers' pack better, e.g. in schools
- Better awareness amongst professionals of what's available for young carers
- Are there meetings for young carers?
- Have a session with young carers and get their views – we are not qualified to answer on their behalf
- Very important that support is at hand for bereavement (the Butterfly Project is available)
- Identify very young carers and be aware of their situations
- Ask young carers what they want
- Good relationships with schools
- Not having to constantly campaign for publicity
- More information available at schools
- More funds for young carers
- Advertise in public places such as surgeries, baths, etc
- Provide young carers with carers' breaks and activities they want
- Newsletters monthly to schools and highlighted questionnaires asking, are you a carer?
- Stronger links with adult mental health services
- It would have been useful to have had more young carers involved with this consultation process

Parents of children with a disability (9)

What Carers Say

- There is a lack of information
- Battle for everything
- Carers' assessment – length of time this takes when this involves children, length of forms
- Transition between children and adults relating to benefits payments and services
- Respite breaks – for children with disabilities there are four beds in Runcorn and two in Widnes
- For children with mental health problems you have to go to Chester for an assessment and even that has limited resources
- There is a lack of social workers and continuity with the same worker
- Replace day centres that have been closed?
- Speed to offer a service for both parent and cared for child
- To meet with other carers as a social group at a community centre
- Internet chat room for the children
- Halton information exchange

- Improve profile of the caring side of social services

What Carers Want;

- Must have schools for children with disabilities with expertise and resources under one roof, with health expert on board
- Council agencies to become more involved with schools
- Direct payments – can it be confirmed that these can be paid to a family member who does not live with the cared for person?
- Support carers with specific forms of counselling service
- Council to incorporate educational views from health and work together more
- Parents to be invited to take part in current schools review
- The transition at ages 16-18 is often a limbo area, often the child is forgotten about and this needs addressing.
- Social services should not discharge cases because you may not have had any contact for months
- Promote social care (social services)
- To access individualised help
- All GP practices have generalised information for carers
- Ongoing support
- Finance might stand in the way
- Simplification of information

Financial support/carers in employment (10)

What carers say

- More publicity
- Funding to be less complex
- Halton Borough Council's Direct Link does not link fast enough
- No personal contact appears to be allowed with the Benefits Section, which drives stress levels up
- Carers Allowance is so little, yet carers save the country so much
- Carers want more benefits, not means-tested
- Carers are limited in the number of hours they can work
- Carers shouldn't be taxed – maybe even working carers should be taxed less
- Health professionals need to be informed about carers' benefits
- It is not a choice to care for someone, it is something one must do, and money can be missed out on
- More opportunities for working from home
- The state pension should not interfere with getting Carers Allowance
- Carers in work should be made aware of opportunities for flexible working through promotion and advertising
- Working of the benefit system is confusing and not explained
- More flexible respite helps working carers and can help carers return to work
- If you can only work part time you lose benefits

“Carers Allowance is so little, yet carers save the country so much.”

What Carers want;

- More access to crisis care (without affecting respite beds etc) Short term support – e. g. someone to sit in whilst carer tends to shopping etc

REPORT TO: Executive Board
DATE: 11th September 2008
REPORTING OFFICER: Chief Executive
SUBJECT: CPA Corporate Assessment Report
WARDS: Boroughwide

1.0 PURPOSE OF THE REPORT

- 1.1 The Corporate Assessment conducted by the Audit Commission in April 2008 found that the Council is “performing strongly” and this report summarises key findings and considers the action required to ensure continued improvement.

2.0 RECOMMENDATIONS

- (1) **To welcome the findings of the Corporate Assessment.**
- (2) **That the Chief Executive prepares an Organisational Development Plan to ensure further improvement in Council services.**

3.0 BACKGROUND

The Corporate Assessment is an in-depth inspection of the Council’s services. It looks at:

- What is the Council, together with its partners, trying to achieve?
- What is the capacity of the Council including its work with partners to deliver what it is trying to achieve?
- What has been achieved?

The assessment forms part of the overall Comprehensive Performance Assessment and has a major influence on the annual star rating. It was conducted simultaneously with the Joint Area Review (JAR) of services for Children and Young People.

4.0 FINDINGS

- 4.1 The Corporate Assessment report was published on 22nd July 2008. It is available on both the Audit Commission and the Council websites.
([Link to Audit Commission Corporate Assessment report](#))

Overall the assessment found that **the Council is performing strongly** (this is the highest of the four possible scores).

The scores (from 1 to 4 where 4 is best) for individual themes were:

Ambition	4
Prioritisation	4
Capacity	3
Performance Management	3
Achievement	3
OVERALL	<hr/> 4

The report found that:

“Halton Borough Council is performing strongly in tackling the Borough’s significant local challenges. Visionary leadership, strong partnership working and a track record of delivering major projects has led to good outcomes for local people.”

- The Council has provided strong community leadership and effective leadership to the Halton Strategic Partnership.
- User and community engagement is good and there is a robust framework to support equality and diversity.
- Political and managerial leadership is strong and inspiring.
- There is good overall capacity to meet the Council's ambitions.
- Performance management within the Council is good.
- Together with partners, the Council is achieving real outcomes for local people.

The assessment also identified areas for improvement. It recommends that the Council:

- Ensure a co-ordinated Council wide approach to human resource management, asset management, and procurement.
- Improve the performance management arrangements of the Halton Strategic Partnership, clarifying key accountabilities and responsibilities and action being taken to manage under-performance.
- Review formal scrutiny arrangements. Consideration should be given to greater consistency of scrutiny’s role in the development of policy and forward planning, and to support in challenging under-performance more robustly.

- Develop a co-ordinated approach to services for older people to help over 50's to stay healthy and active.
- With our partners, concentrate efforts on narrowing health inequalities, targeting the most disadvantaged.

5.0 NEXT STEPS

5.1 The Comprehensive Assessment and JAR reports, together with the findings of other inspections, provide a platform for developing improvement priorities for the Council. A number of other changes need to be made arising from recent legislation and government guidance. It is therefore recommended that a Single Organisational Development Plan be prepared to address all these issues, taking into account existing commitments and future resources.

6.0 FUTURE INSPECTIONS

6.1 This is the last year of the CPA regime and the last corporate assessment of this type. From April 2009, the CPA will be replaced by a Comprehensive Area Assessment (CAA) which will look at public services in Halton as a whole. The CAA is likely to comprise an annual area assessment (progress in delivering our community strategy and LAA targets); and organisational assessments of the Council, PCT, Fire and Police. The Council's annual organisational assessment will consist of a performance assessment of Council services and a use of resources assessment.

7.0 POLICY IMPLICATIONS

7.1 The Corporate Assessment considered arrangements to deliver all six of the corporate plan priorities.

8.0 OTHER IMPLICATIONS

Implementing the improvement recommendations will have resource implications (financial and human) but should lead to improved outcomes (improved value for money). This will be given further consideration as the organisational development plan is prepared.

9.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

The assessment looks at plans capacity and achievements in respect of all of the Council's priority areas. The recommendations for improvement make particular reference to aspects of the Health priority.

10.0 RISK ANALYSIS

The principal risk is that if the Council does not continue to deliver excellent services, and does not improve efficiency, it will be unable to meet its objectives. Establishing an organisational development programme and monitoring its progress will provide a suitable risk control measure.

11.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

Document	Place of Inspection	Contact Officer
Corporate Assessment Report July 2008)) 2 nd Floor) Municipal Building	Rob MacKenzie 0151 471 7416
Consultation on Comprehensive Area Assessment proposals Summer 2008))	

REPORT TO: Executive Board

DATE: 11th September 2008

REPORTING OFFICER: Strategic Director Corporate and Policy

SUBJECT: Liverpool City Region Governance Model and Multi-Area Agreement

WARDS: Boroughwide

1.0 PURPOSE OF THE REPORT

1.1 The purpose of this report is to:

- a) Advise Members on the proposed governance arrangements and next steps in the development of the Liverpool City Region Governance Model; and
- b) provide an update on the development of a Liverpool City Region Multi Area Agreement.

2.0 RECOMMENDATION: That

- (1) Members note the development of the Liverpool City Region governance model; and
- (2) Members note the draft Multi Area Agreement (MAA) for the Liverpool City Region.

3.0 SUPPORTING INFORMATION

3.1 Following the publication of the Local Government White Paper, Government commissioned a Sub-National Economic Development and Regeneration Review, (SNR). The SNR set out proposals for how existing sub-national structures in England could be improved, in order to strengthen economic performance in regions, cities and local areas throughout the country. It made recommendations on the most appropriate geographical levels of governance and decision-making for activities directly linked to successful economic development and regeneration of deprived areas.

The SNR stated that there would be certain issues that can best be tackled at a regional, sub-regional and local level.

In regard to sub-regional working, the ensuing SNR consultation document (reported to Executive Board on 19th June 2008) outlined options to establish permanent sub-regional structures, through, for

example, the introduction of a City Region Cabinet. It also encouraged the adoption of more formal arrangements for collaborative working between neighbouring Local Authorities and partners, in the form of multi-area agreements (MAAs).

This report provides further information on progress on these initiatives in the Liverpool City Region. The term Liverpool City region is used to describe the six Greater Merseyside districts, but also recognises the economic ties with the adjoining areas of West Lancashire, Chester, Cheshire West and Warrington

Liverpool City Region Governance Model

Leaders and Chief Executives of the six Greater Merseyside Authorities have been working together to agree a new governance model for the Liverpool City Region.

From the outset it has been made clear that it is not the intention to create a separate Local Authority and that each of the six individual Authorities would remain as a 'sovereign bodies'. Existing structures and geographical administrative boundaries would remain.

Further work is also being undertaken to prepare a constitution for the Liverpool City Region and this constitution would need to be ratified by each Local Authority.

It is proposed that these new governance arrangements will enable Local Authorities in Greater Merseyside to operate together more formally, and will enhance the way in which they collaborate with partners, both within the Liverpool City Region and how they contribute to the regional agenda.

This is particularly important in light of the launch of the successor body to the NWRA, 4NW in July 2008 and the need to ensure that Greater Merseyside's priorities are reflected in regional policies and strategies. Three Merseyside Leaders represent the Liverpool City Region on the 4NW Regional Leaders' Forum, which is a multi-sectoral group of leaders established to gain agreement and consensus on regional issues. This consensus approach will be used to influence Government policy and spend in the North West.)

Leaders in Greater Merseyside are progressing the development of a Liverpool City Region Cabinet. The cabinet will comprise the Leaders of the six Local Authorities and the Chairman of The Mersey Partnership, as the representative from the Private Sector.

It is intended that a series of Strategic Boards would report to the Cabinet. Boards would include Economy, Employment and Skills, Transport, Planning and Housing, Environment/Waste and Safer, Healthier Communities.

The role of the Cabinet is likely to include:

- Overall responsibility for developing and agreeing an Integrated Strategy for the Liverpool City Region;
- Creating the above Boards with delegated responsibility from the Cabinet for overseeing delivery and the development of more specific work against the aims and objectives set out in the Integrated Strategy, where this has been identified as an appropriate function at a sub-regional level;
- Monitoring the performance of these Boards and other partners in delivery of the strategy; using, where appropriate, any Multi-Area Agreement (MAA) negotiated between partners;
- undertaking the accountable body role within the city region for the MAA;
- Overall budgetary and policy responsibility where devolution/delegation of functions within the SNR take place at a sub-regional level.

It is envisaged that the City Region Cabinet will operate in Shadow form from May 2009 and as a fully incorporated structure by May 2010.

The City Region Cabinet is developing a work programme and further work over the coming months will focus on:

- Defining city region based programmes and projects;
- Developing a gateway system for assessing what is kite marked as a City Region programme or project;
- Constitutional issues, for example, dispute resolution, the role of "Associate" Local Authorities; Terms of Reference for the Boards
- Establishment of a Scrutiny Board;
- Liaison with Greater Manchester and Lancashire County Council

The Liverpool City Region (LCR) Multi Area Agreement

There is a strong interrelationship between the introduction of City Region Governance Model and the development of the MAA. A significant proportion of the MAA document highlights current and future governance structures proposing that through the introduction of effective governance and strong leadership in the Liverpool City Region, this will have a positive impact on the successful operation of an MAA.

The LCR MAA aims to enhance the contribution of the City Region to meeting regional and national economic growth targets and involves the

six Greater Merseyside Authorities coming together on a voluntary basis to agree collective targets and performance indicators. Overall the MAA is focusing on key priorities for the City Region in terms of economic development, employment and skills and housing and transport. Following advice from Government, specific information is provided in respect of skills and employment and enterprise and growth, with opportunities to pick up housing and transport in future submissions to Government.

The MAA in its draft format sets out the current position relating to City Region priorities and communicates our collective ambitions for the area. Importantly, the document explains the barriers to achieving economic growth and prosperity in the Liverpool City Region but outlines the positive steps we are taking to address these problems and barriers. A draft document is appended to this report.

Where such barriers and problems persist, the document sets out key asks of Government whether this is in the form of financial, fiscal or legislative support to enable partners in the City Region to deliver on its economic development and regeneration targets.

A submission to Government is expected to be submitted in late September/October 2008.

4.0 POLICY IMPLICATIONS

The White Paper states that a new organisational framework is needed to support regional and sub-regional improvements and places emphasis on the development of strong cities. However, it needs to be acknowledged that many economic development and regeneration issues are best tackled at a local level and the assessment and kite marking work proposed in the LCR Cabinet's work programme should address this issue as quickly as possible.

Multi Area Agreements have the potential to bring together key players in the Liverpool City Region to tackle issues that are best addressed in partnership. They could give support to the City Region agenda by providing a framework for developing stronger and more effective leadership both across sectors and geographic boundaries.

5.0 OTHER IMPLICATIONS

None.

6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

The Liverpool City Region Governance Model and Multi Area Agreement have implications for all the Council's priorities; not least in the need to clarify accountability and responsibilities at a sub-regional level. Better performance at a sub-regional level could potentially lead to better local outcomes through

synergy and economies of scale gains, stronger partnerships and greater flexibilities.

Children and Young People in Halton

Employment, Learning and Skills in Halton

A Healthy Halton

A Safer Halton

Halton's Urban Renewal

7.0 RISK ANALYSIS

No immediate risks to the Council envisaged.

8.0 EQUALITY AND DIVERSITY ISSUES

None.

9.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

Document	Place of Inspection	Contact Officer
None.		

Liverpool City Region

Multi-Area Agreement

Working draft

22nd August 2008

1. Economic Overview

Section to be aligned with the new publication of the Merseyside Economic Review 2008 (our annual review of economic data due to be published in early October 2008)

1.1 A Recent Renaissance

The Liverpool City Region is in a period of renewed optimism and opportunity:

- Significant private and public investment in physical regeneration is bringing a lasting transformation to the look, image and business confidence in the City Region.
- Between the years 2000 and 2005 the City Region (excluding Halton) grew by 25% to an economy worth £17.3bn. Gross Value-Added (GVA) per person stood at £12,748 in 2005 and had grown by around 62% over the previous ten years. This is above the national average, and one of the highest growth rates in the UK for comparator urban areas.
- Between 1995 and 2006 growth in the City Region's business density (VAT-registered businesses per 1,000) was significantly higher than across the rest of the UK at around 20%, compared to the national rate of 13%. The City Region had 27,960 VAT-registered businesses in 2006.
- Liverpool European Capital of Culture 2008, along with the area's unique portfolio of cultural, leisure and sporting assets, makes the City Region a destination of choice for tourists, with 4.2 million overnight stays in 2006 contributing around £1.2bn to the sub-region's economy. The city region's combined cultural assets are unique and distinctive and the strongest package outside London which presents a major opportunity for future economic growth
- Since 2003, almost 7,000 homes have been refurbished, more than 2,000 new homes have been built and a similar number of older homes have been cleared by the NewHeartlands Housing Market Renewal Pathfinder.

1.2 Significant Challenges

Despite this recent renaissance there are continuing challenges in the Liverpool City Region, brought about by a legacy of industrial decline and restructuring. We are still in a position where:

- There is a long-term widening in the productivity gap (measured as GVA per job-filled) between the City Region and the UK. In 2000 the productivity gap stood at 11%. In 2005, the gap had grown to around 16%. Forecasts show that even with the range of programmes in the pipeline over the next 15 years, this productivity gap will not close.
- Entrepreneurial activity in the City Region is demonstrably lower than elsewhere. The City Region has a self-employment rate of 6.8%, compared to the UK average of 9.4%. In addition, gross VAT-registrations in 2006 stood at only 23 per 10,000 compared to a UK average of 37 per 10,000. At current growth rates, it would take over 30 years to reach current UK business VAT registration rates.
- Current economic growth will not meet the needs of people within particularly deprived communities. Over 240,000 people in the Liverpool City Region are economically inactive and 24.5% of super output areas in Merseyside appear in the top 5 percent of the IMD 2007 most deprived SOAs. To meet the Government's aspiration of an 80% employment rate an additional 108,780 people need to move into employment.
- Some 20% of working age people in Merseyside have no NVQ qualifications, compared to 13.6% for the UK. The overall skill profile of the city region compared to the UK as a whole shows a propensity towards low-level qualifications with a deficit of higher-level qualifications (NVQ Level 4+) and a particular excess of individuals with no skills, as

shown. Across all skills levels the Liverpool City Region is lagging 4 – 6 % behind the UK average.

- Poor national image and perception – Liverpool city region is still seen as a region that has been defined by its problems rather than its successes.
- Housing quality, choice and range remain an issue for parts of the city-region – low-quality stock is an important constraint on the regeneration and renewal of deprived areas, restricting mobility and constraining the efficient functioning of the labour market. In addition, high concentrations of vacant properties in parts of the city region continue to blight neighbourhoods, restrict housing choice and send out a negative message about the quality of place and quality of life in the sub-region.
- Compared to the UK, the Liverpool City Region has considerable issues surrounding population health, with air quality and inactive travel behaviour being significant contributors to poor health. 28% of the UK's 1% most health deprived SOAs are in the City Region.
- Despite much progress in improving the sub-region's economy, there are still too many places with concentrations of worklessness and patterns of endemic deprivation have remained largely the same. Tackling these issues therefore needs careful, integrated planning, with linkages and shared priorities between the economic growth, employment and skills, housing, and transport.

1.3 A Unique Opportunity

There is real excitement about the scale of the opportunity to be realised within the Liverpool City Region, recognition that the City region can achieve more and a belief that we can deliver.

- Ambitious plans have been released for £10 billion worth of investment in Liverpool and Wirral Waters that will transform the Mersey Waterfront, deliver 44,000 jobs and be nationally significant in scale.
- A successful Liverpool European Capital of Culture 2008 programme, strong investment in key visitor assets including Liverpool City Centre, a vibrant creative, cultural and visitor sector across the City Region and large increases in visitor numbers provide a distinctive competitive advantage for the City Region on which to base economic growth.
- The City Region's internationally significant knowledge-base, underpinned by three Universities and boosted by recent investments in the Daresbury Science and Innovation Campus, National Bio-manufacturing Centre, Liverpool Science Park and Liverpool School of Tropical Medicine currently contributes around £1 billion to the economy, but has the potential to act as a driver for business productivity and a magnet to attract key talent to the North West.
- The Mersey Gateway, a second Mersey river crossing- will be delivered by 2014.
- The planned expansion of the Mersey Ports and Liverpool John Lennon Airport present an opportunity for an internationally significant Superport.
- Our natural resources, combined with the potential \$500bn growth in global environmental technology by 2050, provide substantial scope for inward investment whilst making a significant contribution to the UK's combined climate change effort.
- The projection for economic growth between 2006 and 2020 sees GVA within Merseyside increasing by £8.5 billion. In this scenario, annual growth in GVA exceeds the UK and the North West. Our strategic ambition, delivered in part through partnerships fostered through this MAA is to accelerate this growth and substantially close the gap with the rest of the UK.
- In summer 2008, the government announced that two Growth Point expressions of interest from the sub-region – from Liverpool and Wirral, and Halton, St Helens and Warrington – had been successful and those places would be invited to work up detailed proposals for

housing growth. This represents a real opportunity to improve the housing offer across the Liverpool City Region, and in part to help capture economic growth for the sub-region.

1.4 The rationale for collaborating across Liverpool City Region

The City Region's leadership recognises that meeting the substantial challenges that the City Region faces and making the most of the opportunities that present themselves requires a new way of working:

- Administrative boundaries of the City Region are now 34 years old. This period has seen significant changes to the way the economy operates and Local Authorities functional spatially; people and businesses are not confined to these political boundaries and the Liverpool City Region reflects a more realistic economic and spatial geography with regard to travel to work areas and housing supply and demand.
- The scale of the challenges that the City Region faces cannot be met by individual local authorities and will require the alignment of assets and resources across the City Region.
- Similarly, the potential impact of opportunities is enhanced by working together across the City region boundaries. Delivering potential transformational activities such as SuperPort requires a joint vision, the utilisation of a wider set of assets, the alignment of private sector investment and the channelling of public sector investment into strategic priorities.
- The high levels of public sector resource used to pump-prime key infrastructure investments in the past 15 years is declining, requiring a more mature approach, particularly with business, to understand what is required and to ensure investment is delivered accordingly.

1.5 The added value of a Multi-Area Agreement

Development of the Multi-Area Agreement will provide significant added value for the Liverpool City Region. Specifically it will

- Formalise relationships and responsibilities within the City Region, and provide a clear framework for agreeing priorities.
- Provide a framework for us to deliver more – either in-terms of additional outcomes, accelerated progress or better quality provision.
- Ensure that there is alignment of response to key priorities, and importantly alignment across priorities, including economic development, housing, transport and employment and skills
- Provides a new partnership with Government, impacting in the following ways
 - Aligning national, regional and City-Regional priorities
 - Tailoring responses to address the unique needs and opportunities of the City Region, and freedoms and flexibilities where needed.
 - Helping Government to deliver PSA targets (we are currently working to align our intended MAA outcomes with PSA targets)

2. The Liverpool City Region MAA in context

The Liverpool City Region MAA is not a stand-alone document. It builds on a much wider set of strategies, action plans and institutional arrangements that have underpinned recent successes in the Liverpool City Region. This section will not review this work in detail. However, references and resources are available in Annex A. (*Annex A to be developed*)

2.1 Vision and Strategy

The Liverpool City Region Development Programme (2005) - produced as part of the Northern Way initiative - provided a strong, evidence-based rationale for City Region working and a collective vision of the City Region:

“The Liverpool City Region regains its status as a premier European city region by 2025. We will secure an internationally competitive economy and cultural offer; an outstanding quality of life; and vibrant communities contributing to and sharing in sustainable wealth creation”.

The LCRDP recognises both the challenges and the opportunities facing the City Region, and lays out a strategy to tackle this over a 20 year period which still provides the framework for economic development activities across the City Region.

This MAA will contribute to delivering the vision by formalising and clarifying governance and delivery arrangements and by working with Government to overcome key barriers to growth.

2.2 Evidence Base

A range of analysis has been undertaken to underpin this Multi-Area Agreement.

- The Merseyside Economic Review is a comprehensive and authoritative report on the current economic situation in the City Region. It provides detailed statistics and policy implications for the City Region across a wide and varied set of indicators and commissions specific pieces of additional evidence where appropriate. MER 2008 is currently under production, and will be delivered in early October 2008.
- “Economic Forecasts for the Liverpool City Region” was originally produced to underpin forecasts in the Liverpool City Region Development Programme, and was updated in 2007. This work, produced on behalf of the Liverpool City Region, analyses historical and current performance and makes projections of future performance based on planned investments in the City Region. The report provides the basis for plans developed around the economy, housing and transport.
- The Liverpool City Region Housing Strategy (2007) and its related documents provide a framework for improving the city region’s housing offer; set out the context against which joint priorities and actions have been identified, and provide a range of information which will support the development of local strategies and policies as well as this MAA.
- **Local Transport Plan evidence base – narrative outstanding**
- A range of special reports and commissions supplement this basic understanding of the way that the City Region functions. A list of these, with sources, can be found in annex A of this document.

2.3 Investment Planning

The Action Plan for the Liverpool City Region is a rolling investment plan that gives details of key programmes and projects to be delivered over the next three-year period. The document provides the important functions of identifying investment priorities, and mapping how investment will flow into these priorities. The latest iteration of the Action Plan was published in November 2008, and identifies over £1bn of pipeline projects to be delivered by the public, private and voluntary sectors in the next three years.

2.4 Partnership and Delivery

The Liverpool City Region has an increasingly strong history of cooperation and partnership working in achieving economic growth:

- The Mersey Partnership - the economic partnership for the City-Region. TMP also delivers the Liverpool City Region Inward Investment Agency, and is the Tourist Board for the Liverpool City Region.
- The Merseyside Local Transport Plan (LTP) Partnership - consists of Merseytravel and the five district councils of Merseyside, with Halton Council represented on strategic City Region transport groups. Both the Merseyside LTP Partnership and Halton were awarded 'excellent status' for their current LTPs 2006-2011 and successful delivery of LTP 2001-2006. The joint authorities have also been awarded Beacon status for their approach to improving accessibility to disadvantaged areas; they were particularly commended for the level of partnership working and joined up approach.
- NewHeartlands Housing Market Renewal Pathfinder – a combined regeneration effort to tackle failing housing markets in some of the City Region's most deprived neighbourhoods across three local authorities.
- Two joint growth points – covering Liverpool/Wirral and Halton/St Helens/Warrington – have recently been announced; detailed proposals for these are still being developed but will require joint management governance between the districts involved.
- The Mersey Waterfront Regional Park – A strategic investment framework for the Mersey Waterfront, that extends across four Local Authority areas.

This MAA builds on these collaborative arrangements in proposing formal governance arrangements to enhance responsibility, accountability and effectiveness of delivery.

2.5 Geography

The city region has the City of Liverpool at its centre, surrounded by St Helens, Wirral, Knowsley, Sefton, and Halton; a travel-to-work area of around 2 million people.



However, the City Region's markets interact with a much wider catchment area; 6.75 million people live within 60 minutes drive time of Liverpool City Centre; 40% of the 219,558 (2004) jobs within the Liverpool local authority boundary are filled by workers from the wider city region; and 40,000 Liverpool residents commute out of the city to work.

This MAA document initially contains proposals that cover the six Local Authority Areas listed above. However, this is part of a process that will, in time, examine the possibility of a City Region that takes account of the strong relationships that already exist with the adjacent areas of Warrington, Chester, Ellesmere Port and Neston, Vale Royal (West Cheshire) and further afield to North Wales and West Lancashire.

3. The Liverpool City Region MAA

3.1 Our economic aspirations.

The Multi-Area Agreement will allow the Liverpool City Region to deliver more than the sum of its constituent parts. In some cases this will mean creating more stretching targets than those to which individual Local Authorities are currently committed. In other cases this will mean new targets that individual authorities would otherwise be unable to meet. The following table shows the scale and extend of our ambition (*to be completed September 2008 as part of Action Plan monitoring*).

Priority	Measure	Target 2011	2007/08 Datasets	Progress to target
Enterprise Development	VAT business density per 1000 people	23.1	23.0	↑
	Net VAT registrations per annum	1000	610	↑
Business Infrastructure	Commercial A-grade property value	Maintain current growth rate.	??	
	Industrial property value		??	
High Growth Bus. Development	New jobs from inward investment	1400 (pa)	1200	↑
	% employed in high growth sectors	44%	??	
Skilled Workforce & Communities	% of working-age population at NVQ Level 4+	24.2%	23.1%	↑
	% of working-age population at NVQ Level 2+	65.0%	62.1%	↑
	Employment rate	70.6%	67.7%	↓
Environmental Performance	Municipal recycling and composting rate	33%	25.5%	↑
	Carbon emissions (CO2) per capita	6.6 tonnes	??	
Sustainable Communities	No. and proportion of the SOAs in the worst 5% nationally	Improvement	??	
	Net growth in housing stock (pa)	4,470	??	
	% inactivity rates for women, BME, disabled.	30% (women)	31% (women)	↓
Premier Destination	Revenue generated from Tourism	£1.362 million	£1,208 million	↑
	Overnight stays by visitors	11 million	10.41 million	↑

3.2 Governance

At the core of these aspirations is a new set of Governance arrangements. The Liverpool City Region - through this agreement - presents its proposals for increased collaboration, stronger partnership and more robust leadership to deliver a step-change in the way that the City Region goes about its business. The commitment to partnership working exists within the Liverpool City Region, across the public, private and voluntary sectors, but also within Government and the North West Development Agency in a combined effort to ensure sustainable, accelerated economic growth. Details on new Governance arrangements are found in Section 3.

3.3 Drivers of growth

The delivery of our aspirations will focus around a renewed effort on three key drivers of the economy. In each case the MAA will demonstrate the arrangements in place to deliver progress made to date, plans for future development in each of these areas, and any potential barriers to growth. These drivers are:

- Employment and Skills – tackling worklessness, meeting the productivity gap and proposals for the future delivery of adult skills, and transport's role in supporting and enabling these priorities. Further details can be found in section 4.

- Enterprise and Business Growth - Growing the size of the existing business base through increased business starts and improved survival rates, supporting the creation of added-value through business growth and expansion, and delivering competitiveness by increasing business productivity. Further details are found in section 5.
- Investment – Ensuring key physical infrastructure is in place to underpin strong inward investment and deliver growth in both jobs and value in the economy. Further details can be found in section 6

The MAA identifies specific ways that Government can support the Liverpool City Region in meeting its economic aspirations in these areas.

3.4 Transformational Ideas

Meeting our economic aspirations will not be achievable by ‘continuing business-as-usual’. To really accelerate economic growth, the Liverpool City Region will need to have stronger alignment with growth sectors within the UK economy, and make the most of its own comparative advantages in the global economy. To this end, the Liverpool City Region has identified three transformational actions that have the potential to deliver a step-change in economic performance over the next 15 years. These are

- Liverpool SuperPort
- Energy and the Environment Economy
- Knowledge Economy

The evidence base and precise nature of the opportunity in each action is currently under development. *The Liverpool City Region asks Government to recognise the potential in these actions and work with the City Region to develop these actions further.*

4. Governance

<p>Progress made to date</p>	<p>City-Region Leadership and Governance</p> <p>Greater Merseyside local authorities have a long history of working in partnership amongst the six local authorities of Halton, Knowsley, Liverpool, Sefton, St Helens and Wirral as well as with the Joint Boards for Transport, Fire, Police and Waste. In recent years this partnership working has extended to working with private, voluntary and education sector partners through a number of mechanisms including the sub regional partnership.</p> <p>The Merseyside Leaders Group meets on a monthly basis to steer the development of city region strategy and identify key activities.</p> <p>City region partners have worked collectively on economic planning since 1995 with the onset of European regional funding (Objective 1). In recent years a common approach to inward investment, waste planning, transport priorities, a city region housing strategy and a city region employment strategy have all contributed to stronger and more collaborative partnership arrangements working on behalf of the city region.</p>
<p>Proposed new arrangements</p>	<p>In order to address key issues and drive forward the Liverpool City region economy, these partnership arrangements are being formalised to create a new city region governance and delivery model.</p> <p>A new City Region Cabinet (made up of the Leaders of the 6 local authorities and private sector representation through the Chair of The Mersey Partnership) will be supported by six Boards for:</p> <ul style="list-style-type: none"> • Economic Development • Employment and Skills • Environment and Waste • Transport • Spatial Planning and Housing • Safer, Healthier Communities <p>Two further Boards for Improvement and Efficiency and Research and Information will provide supporting activities for the Cabinet and the six Boards and a Leader of each authority will play a key role in championing the issues and activities to be addressed by each Board. The Joint Boards and neighbouring authorities will be invited to become Associate Members of the Cabinet.</p> <p>The City Region Cabinet will be established in shadow form from May 2009 and will:</p> <ul style="list-style-type: none"> • agree city region strategy • oversee the development and delivery of an annual Work programme identifying key projects and programmes to be identified as city region cabinet initiatives • ensure effective delivery of such programmes through one of the city region Boards or other appropriate delivery mechanisms • the Cabinet will own and oversee delivery of the MAA and • monitor performance of city region strategy <p>A City Region Scrutiny Panel is being established to scrutinise the work of the Cabinet and its Boards.</p>

<p>Progress made to date</p>	<p>Economic Partnership and Economy Board</p> <p>The Mersey Partnership is the Liverpool City Region’s sub-regional partnership, inward investment agency and Tourist Board. It is a unique public / private partnership organisation with nearly 500 members, including 109 corporate members, and all major public sector organisations. It has direct private sector engagement on its board, and this is further strengthened by representation from organisations such as the Chambers of Commerce.</p> <p>Recently, this level of collaboration has led to:</p> <ul style="list-style-type: none"> • Substantial progress on joint evidence base development – Annual publication of the Merseyside Economic Review, and alignment via the Sub-regional partnership that has commissioned specific pieces of evidence to underpin economic programmes (such as additional forecasting work). • Joint identification of the long-term vision – Liverpool City Region Development Programme which sets out key transformational activities, and has an evidence base founded on wider City Region co-operation. • Joint prioritisation and identification of response – Action Plan for the Liverpool City Region is the investment plan that draws together funding sources, including ERDF, NWDA Strategic Investment Programme and private sector and other public sector funding. • Successful delivery of thematic programmes – This section will point to a number of successful mechanisms for joining up delivery across a range of priority areas. <ul style="list-style-type: none"> • Tourism – collaboration via a public / private tourism board and successful implementation of Destination Management Plan and Capital of Culture 2008 • Enterprise – Evidence base development by Merseyside Enterprise Commission with follow up pilot programmes and the development of a joint Enterprise strategy. • Liverpool City Centre – Identified priority for investment and a strong example of public and private complementarity – delivery underpinned by Liverpool Vision URC programme facilitating high levels of private investment. <p>Progress in delivering a co-ordinated economic development programme is also demonstrated in 15 years of delivering joint economic programmes via Objective 1, and the strong nature of the public, private and third sector partnerships developed in this area.</p> <p>New governance arrangements recognise the progress made on economic development and will build on these. Proposals currently envisage The Mersey Partnership Board, as the existing SRP, become the City Region Economy Board.</p> <p>The Economy Board will oversee delivery of the economic development elements of the MAA.</p>
<p>Proposed new arrangements</p>	<p>Employment and Skills Board</p> <p>Current alignment of skills and employment priorities with the rest of the wider economic agenda achieved through the SRP – HEIs, LSC, JCP, and Local Authorities all key members. City Employment Strategy has been developed, setting out a continuum model for tackling worklessness, and meeting employer skill demands. This includes the development of a joint commissioning framework to which relevant sources of funding align.</p> <p>It is proposed that Liverpool City region establish an Employment and Skills Board</p>
<p>History of Co-operation</p>	<p>Proposed</p>

<p>new arrangements</p>	<p>(ESB), based on governance arrangements integrated with the Leaders Cabinet and the other sub-regional boards. We will aim to secure high level representation from elected members and a strong employer presence in order to secure greater devolution.</p> <p>The ESB will be the decision making body for employment and skills strategy and funding at the sub-regional labour market level. Roles and responsibilities of the Board will include:</p> <ul style="list-style-type: none"> • To oversee the development and delivery of an Employment and Skills strategy and commissioning plan which defines local training priorities in response to needs and gaps; • Joint target setting in line with local priorities; • Co-commissioning mainstream employment and skills provision with flexible contracts to suit local conditions and the needs of local people; • Pooling and aligning of funding streams (DWP, ESF, WNF) to support shared priorities; • Performance management of national DWP and DIUS contracts; • Raising demand for services from employers and individuals; • Simplifying the offer to local employers and developing package of support to meet their specific recruitment and workforce development needs; • Managing relationships with regional and national agencies – DWP, new Skills Funding Agency etc; • Testing new and innovative approaches to service delivery <p>The Employment and Skills Board oversee delivery of the employments and skills elements of the MAA.</p>
<p>History of Co-operation</p>	<p>Transport</p> <p>The Merseyside Local Transport Plan (LTP) Partnership consists of Merseytravel and the five district councils of Merseyside - Knowsley, Liverpool, Sefton, St Helens, and Wirral. Halton Council are responsible for the development and implementation of a Local Transport Plan for the Unitary Authority, however key strategic groups, including the Merseyside Strategic Transportation and Engineers Group and the Liverpool City Region Transport Working Group, include all of the Merseyside Authorities and Halton. This ensures that development, implementation and monitoring of transport strategies and plans are integrated across the City Region.</p> <p>At the political level, Merseyside Strategic Transport and Planning Committee, (MSTPC) has for many years allowed Merseyside and Halton Members to steer and advise on a range of transport and planning issues.</p> <p>Excellence in Planning and Delivery</p> <p>Merseyside and Halton were awarded 'Excellent' status by the Department for Transport (DfT) for both the excellent quality of their current LTPs 2006-2011, and their successful delivery of LTP 2001-2006. Merseyside were the only Metropolitan area in the country to be so accredited. This status brings recognition their overall approach to improving transport.</p> <p>Identification and prioritisation of major transport priorities via RFA advice</p> <p>All six local authorities and Merseytravel have been responsible for the identification of major transport scheme priorities as part of the Regional Funding Allocation Advice for the North West. Partners currently have six major schemes in the current RFA Transport programme. Partners have developed a prioritisation methodology that will allow emerging major schemes to be prioritised for inclusion in the second RFA prioritisation exercise in 2009. An agreed list of prioritised schemes will be available from September 2008.</p>

<p>Proposed new arrangements</p>	<p>Partners are committed to a review of the governance and delivery arrangements for transport, as part of the developing city region governance and delivery model. The review will include the determination of the preferred model for an Integrated Transport Authority and Transport Board for the City Region.</p> <p>The City Region has a draft working transport vision and strategy. The Planning for the Future programme and action plan for the City Region is already underway, The City Region transport model will enable options and preferred interventions to be tested that will support the defined regeneration and sustainable economic development priorities. The Planning for the Future model and the vision and strategy will provide the evidence base and policy direction for the development of a single LTP for Merseyside and Halton.</p> <p>The Transport Board/ITA will oversee delivery of the transport elements of the MAA.</p>
<p>History of Co-operation</p> <p>Proposed new arrangements</p>	<p>Housing</p> <p>There is a history of joint working to support housing work across the sub-region, through the Merseyside Housing Forum and the development of the Liverpool City Region Housing Strategy and Action Plan. This will be built on through new city region governance arrangements and support delivery of the MAA.</p> <p>Since 2003, the New Heartlands Housing Market Renewal Pathfinder has delivered major investment and renewal to deprived neighbourhoods across Liverpool, Sefton and Wirral, led by a board including representatives of the three districts.</p> <p>The Liverpool City Region Housing Strategy (2007) has been produced to provide an investment and planning framework for housing development and regeneration across the wider sub-region (covering 13 local authorities in all), and represented a significant commitment to joint working by a group of districts including the six signatories to the MAA.</p> <p>Generally, housing work has been coordinated through the Merseyside Housing Forum, which brings together elected members and officers from the six districts, NewHeartlands, Merseyside Policy Unit and other partners such as the Housing Corporation and GONW. This has allowed us to speak with one voice on such issues as the Regional Housing Strategy, Regional Funding Allocations and so on.</p> <p>A City Region Housing and Spatial Planning Board will be established (in shadow form in the autumn of 2008). It will make recommendations to the Cabinet on Housing and Spatial Planning matters, may take decisions on such matters as delegated by the Cabinet, and will oversee (and commission where necessary) work to support and inform the development and implementation of sub-regional housing and planning policies.</p> <p>The Board will comprise members with responsibility for housing and planning at executive or similar level - two per district - and will be chaired by the Liverpool City Region Leader with responsibility for housing and spatial planning (currently Cllr Brian Spencer, Leader of St Helens MBC). It will be supported by a Housing and Spatial Planning Coordinating Group, drawn from senior officers with responsibility for housing and planning. As well as the six local authorities, this group will include NewHeartlands and Merseyside Policy Unit. It will advise and report to the Board, and will manage the work carried out by (and for) the housing and planning advisory groups.</p> <p>It may be that a wider membership than the local government family is invited into this set up (either as part of the board or in an advisory capacity) - for example, GONW,</p>

	<p>the NWDA, 4NW and the Homes and Communities Agency - but this is still to be debated at a Liverpool City Region level and will need to be agreed by Leaders.</p> <p>The Housing and Spatial Planning Board will oversee delivery of the housing elements of the MAA.</p>

5. Skills and employment

Where is the Liverpool City Region currently?

Greater Merseyside's economy has the recent performance needed to make a significant contribution to accelerating the achievement of the Government's priorities and targets. However, at the same time, such issues as persistently high levels of worklessness, concentrations of deprivation and low skills attainment present the Liverpool City Region (LCR) with some significant challenges and barriers to closing the productivity gap and delivering social justice for all communities.

There is a large degree of variation within the City Region. The central urban district of Liverpool has witnessed the fastest growing employment in the North West while nearby areas such as Wirral and Sefton have suffered falling employment. Given the sub-region's history of relatively low labour demand, the overall economic performance has been strong and the number of benefit claimants has been reduced.

The skills profile in the sub-region is improving, but is still poor compared to other parts of the North West and the UK average. Large parts of the workforce lack the lowest skill levels, one in three (34.8%) working age adults are without an NVQ2 qualification, compared to 38% in England. This is due largely to particularly high levels of economic inactivity in certain areas. Many of these areas are close to major or future employment growth centres, raising the question of how skill needs will be addressed. The solution is likely to be a combination of drawing people out of worklessness, and attracting migrants and workers from neighbouring sub-regions. However, this raises additional questions about the ability to provide the right mix of skills in the right place, and at the higher skill level, the ability of the sub-region to provide the housing and quality of place offer to attract graduate level workers in what is a national labour market. The proportion of residents with at least an NVQ4 stands at 21.6% (compared to an England average of 27.1%) and in recent years this gap has increased.

Greater Merseyside underperforms in the North West in terms of young people's educational performance and a lower proportion of adults are qualified at higher levels. The occupational shift towards a large proportion of employment in higher-level jobs has been present elsewhere but is not being replicated in the sub-region on the same scale.

A key issue for the sub-region is its high level of worklessness. Therefore a priority for sub-regional partners is to improve the skills base of the local population by prioritising Skills for Life delivery to target groups, increasing the numbers working towards their first Level 2 qualification, and creating opportunities for progressive learning. There is also a higher number of young people that are not in education or employment (NEET) which can be disproportionate in some Boroughs due partially to the relative levels of deprivation, and again the reduction of NEET numbers remains a sub-regional priority.

The employment rate has been growing over the past decade, especially since 2001, when it has grown by 2.6% points. However, the rate remains some way below the regional average, and is currently estimated at 68%, compared to 72.5% in the North West (figures for June 2007). To reach the Government's 80% employment target, 106,830 additional people would have to move into employment. There remain particular concentrations of worklessness, especially in Liverpool, Knowsley and Halton. This is a concern given the high levels of workplace job growth in Liverpool especially, and is reflected in high levels of benefit claiming, especially of Incapacity Benefits. The LSC, Jobcentre Plus and Local Authorities have engaged in the development of the City Employment Strategy (CES) and this is a major framework for addressing employment issues in the sub-region.

The CES has sought to support the growth sectors identified in the City Region Development Plan and the key regeneration projects that have created substantial job opportunities within the City Region including the Liverpool one retail development, tourism growth linked to Capital of Culture 2008 and the extension of John Lennon

Airport among others.

The overall level of workforce development training provision in Merseyside appears to be high. An estimated 69% of establishments provide some form of training for their employees, compared to 68% in the North West as a whole. The percentage of establishments with a dedicated training budget is the highest of all the sub-regions at 40%, with the regional average only 36%. This may well reflect the role of the public sector and a range of UK and EU economic development programmes in supporting workforce development within the sub-region, for example, the SkillWorks programme and LSC initiatives to encourage employer investment in workforce development.

There are four key ambitions within this theme:

What are our ambitions?

- 1) The introduction of a City Region strategy and planning framework integrating employment, skills and learning against which policy and commissioning priorities will be determined and delivery and performance will be managed across the Liverpool City Region.
- 2) Establishing a radically new relationship across the key funding agencies of DWP, LSC/Skills Funding Agency, North West Development Agency and Local Authorities leading to co-commissioning and joint management of employment and skills services.
- 3) Reforming delivery services to ensure a truly integrated employment and skills offer to individuals and employers that provide choice and opportunity for both adults and young people and drives forward the local economy and increases the GVA of the conurbation.
- 4) Giving employers a greater say in shaping and influencing the co-ordination and accessibility of learning and skills provision, this includes the establishment of an Employment and Skills Board with Section 4 powers.

The ambitions within this theme are part of the wider context for the MAA, and in particular the economic development and enterprise platform. To meet the ambitions of creating value through business growth and expansion, and increasing business productivity employers need to have greater influence over learning and skills provision to reflect their business needs. Equally, increasing entrepreneurial levels in particular cohorts will only come about by increasing the levels of basic skills that people have within our most deprived communities.

The housing and transport platforms will also be key elements of the MAA and while they are still in the early stages of development there are already clear links between skills and employment and some of the themes that will emerge in these platforms. The City region Housing Strategy aims to improve the mix of housing so that there are fewer neighbourhoods with a high proportion of workless residents. In addition we are seeking to improve the quality and range of housing across neighbourhoods so that people with a choice will choose to live in the City Region, thereby creating an upward spiral in neighbourhoods and over time increasing the range of skills within neighbourhoods and available to local businesses.

In addition we are seeking to improve sustainable transport links and accessibility so that people living in all of our communities are better able to travel around the city region and have greater access to employment opportunities across the city region.

What are the barriers?

Although local partners are working together through the City Employment Strategy to better join up the commissioning of employment and skills interventions as referenced by the "Work Skills" paper, it is felt that maximum integration can only be achieved if the decision-making responsibility for planning and commissioning for all employment and skills activity is discharged at the Liverpool City Region level.

Responsibility for the planning of employment and skills investments are currently discharged at a national and regional level either by DWP and the LSC. Indeed plans proposed for the Skills Funding Agency operating at a national level means it will inevitably operate remote from local labour market intelligence, and will not be able to plan a skills system that is responsible to the changing needs of local employers.

Alongside this the planning and investment of ESF resources is made at a regional level. Again, this one size fits all approach does not promote innovation and the testing of new approaches based on local needs.

Through the City Employment Strategy (CES) partners have collaborated on the development of a Single Investment Framework, this work has enabled partners to align discretionary funds, for example, ESF, NWDA, ERDF, WNF, which has enabled partners to jointly create a continuum approach to employment and skills interventions.

Greater Merseyside partners believe that to ensure the particular employment and skills challenges are met for the Liverpool City Region, responsibilities for planning and investment in skills and employment services are better discharged at a sub regional level rather than under the current national/regional system. The Employment and Skills Board is proposed as the appropriate governance structure to undertake this responsibility.

Since April 2006 the City Employment Strategy pathfinder has been in place. The CES has three key strategic objectives:-

- To increase the supply of suitably skilled labour to meet demand from growth and for replacement labour across the whole travel to work area;
- To build skilled, working communities, eliminating child poverty and increasing opportunity and social mobility;
- To make a real difference to businesses and communities around the opportunities of European Capital of Culture 2008 and related economic growth;

Alongside the two main co-financing organisations of LSC and DWP/JCP, there is the complementary strand of ESF, dedicated specifically to support the CES priorities and higher level skills, and managed by the CES Board.

A new Greater Merseyside commissioning framework will be established to provide a more robust way of integrating services, enhancing the targeting of both mainstream and discretionary support, and reducing duplication and bureaucracy.

It is proposed that Liverpool City region establish an Employment and Skills Board (ESB), based on governance arrangements integrated with the Leaders Cabinet and the other sub-regional boards. We will aim to secure high level representation from elected members and a strong employer presence in order to secure greater devolution.

The ESB will be the decision making body for employment and skills strategy and funding at the sub-regional labour market level. Roles and responsibilities of the Board will include:

- Provide leadership on employment and skills to the City Region, including the Economy Board, City Employment Strategy, Directors of Children's Services and higher education
- Approve and take decisions to secure the delivery of the Liverpool City Region Employment and Skills Strategy;
- Set the priorities for City Region Commissioning Plans for both pre-19 and post-19 employment, skills development and learning;
- Oversee major capital investment related to skills and specialisms;
- Review and endorse 14-19 Local Authority Plans;
- Commission from training providers and general further education colleges to

**Progress
that we are
making**

- deliver 14-19 entitlements;
- Co-commission DWP, DIUS, NWDA post-19 employment and skills provision and review performance;
 - Review the performance of national and regional employment and skills contracts being delivered in the sub-region;
 - Take decisions to pool and align funding streams (including DWP, European Social Fund, North West Development Agency, Working Neighbourhoods Fund) to support shared priorities;
 - Continuously ensure alignment with emerging policies and initiatives and review and approve changes to the Employment and Skills Strategy as necessary; and
 - Manage relationships with regional and national agencies, including DWP, Jobcentre Plus, the new Skills Funding Agency, Young People's Learning Agency, National Apprenticeship Service, NWDA etc.

What can Government do?

The LCR Strategic Employment and Skills Plan is accepted by the relevant Government Departments as the overarching vehicle for the agreement of employment and skills priorities and targets and for the investment and alignment of core funds from DWP/JCP, NWDA and DIUS/LSC (SFA post 2010).

Grant Section 4 status of the Further Education and Training Act to allow for the establishment of a statutory ESB so that DWP, DIUS and CLG together with City Employment Strategy partners agree to a governance structure which will facilitate the adoption of shared targets and align reporting hierarchies through a duty to cooperate.

That Government recognises the challenges facing the Liverpool City Region and seeks to give early commencement to new initiatives that will help to tackle the issues highlighted, for example, early start of the Flexible New Deal Programme and the early roll out of "Skills Accounts" for our area from autumn 2009.

How will we measure success?

6. Enterprise and Business Growth

Where is the Liverpool City Region currently?

Increasing the size of the Merseyside 'business base' has long been cited as a key objective in achieving the City Region's targets for economic growth, and substantial progress has been made.

The Liverpool City Region now has 27,960 VAT registered businesses following ten consecutive years of business stock growth. The growth rate has been marked, with an 18.3% increase since 1997, in excess of all of the City Region's comparator areas. Further growth is also recorded in smaller businesses, with a 26% increase in the number of businesses who are not VAT-registered over the period 2002 to 2007.

Growth has also been strong in terms of value in the economy, with GVA growth of 25.9% between 2000 and 2005, ahead of growth experienced in the West Midlands, and comparable with that seen in much larger regional economies such as West Yorkshire and Greater Manchester.

Productivity has also started to move in the right direction, with 2005's data measures Merseyside GVA per job as £28,920, against £31,697 in the North West and £34,225 nationally. In Merseyside, this represents an annual increase of 2.5%, ahead of the UK rate of 2.4%. Growth in the Liverpool City Region's priority sectors is also vitally important and evidence shows that there has been significant employment growth in some of the key sectors over recent years – in particular, life sciences and the banking, finance and insurance sectors.

However significant challenges exist. The table below is drawn from the Enterprise and Business Growth Strategy. The table shows the deficits for five measures which exist between the City Region and the Northwest and UK average. Also shown (as 'impacts') are the additional amounts for each measure needed to close the deficit. Important points to note are:

- That ceterus paribus, the economy would need to grow by approximately 8% and 20% against the Northwest and UK respectively to close the gap in GVA per employee. This would increase to approximately 21% and 40% if we consider the gap in GVA per capita. The five-year annual average change in GVA for Merseyside is 5%.
- In terms of VAT-registrations (per 10,000 working age people), the number of registrations would need to grow by approximately 33% and 50% in order close the gap with the Northwest and UK, respectively. The five-year annual average change in VAT-registrations for Merseyside is 0.8%.
- In terms of total VAT-registered stock (per 10,000 working age people), the stock would need to grow by approximately 40% and 65% in order to close the gap with the Northwest and UK, respectively. The five-year annual average change in VAT-stock for Merseyside is approximately 2%.

	Figure	Compared to the North West		Compared to the UK	
		Deficit	Impact needed	Deficit	Impact needed
GVA per employee, 2004					
United Kingdom	£33,717				
North West	£30,492				
Merseyside	£28,448	-£2,044	£1,337 million	-£5,270	£3,448 million
Deficits table for GVA per capita, 2004					
United Kingdom	£17,149				
North West	£15,080				
Merseyside	£12,594	-£2,487	£3,676 million	-£4,556	£6,733 million
Deficits table for VAT registrations per 10,000 working age people, 2006					
Great Britain	50				
North West	43.7				
Merseyside	31.6	-12	1,060	-18.4	1,620
Deficits table for VAT registered-stocks per 10,000 working age people, 2006					
Great Britain	532				
North West	453				
Merseyside	317	-136	12,000	-215	18,900
Deficits table for self-employment rates, 2006					
Great Britain	9.3				
North West	8.2				
Merseyside	6.8	-1.4	12,200	-2.5	21,800

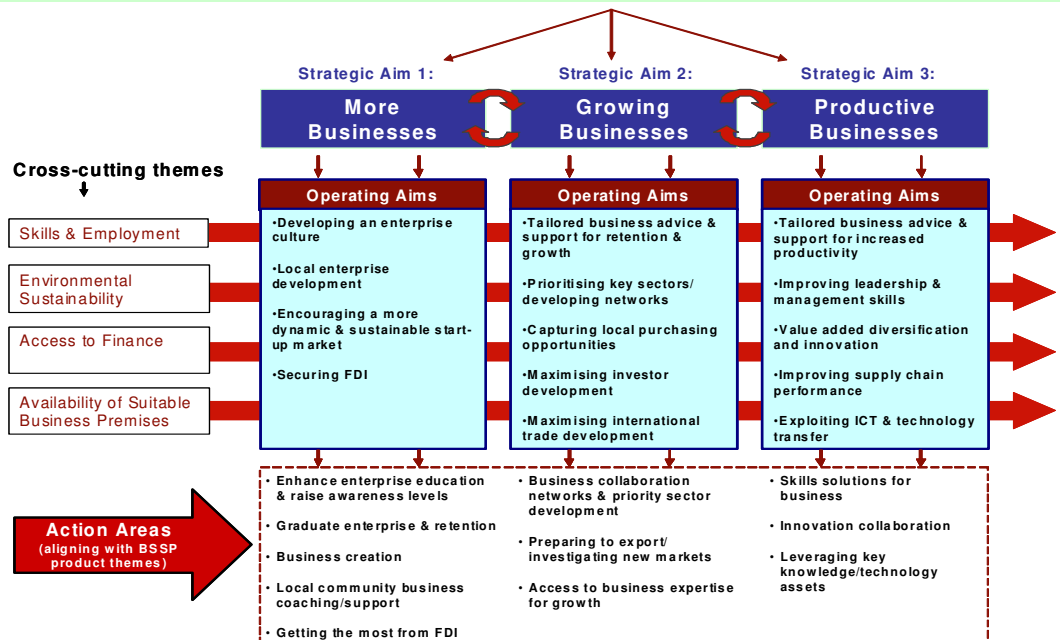
What are our strategic ambitions?

In response to these challenges, the City Region has developed an Enterprise and Business Growth Strategy. The Strategy has set itself three over-arching imperatives:

1. Grow the scale of the existing business base through increased business starts and improved survival rates, including making self-employment an attractive option for workless people.
2. Support the creation of value through business growth and expansion
3. Deliver competitiveness by increasing business productivity.

The diagram below goes further, identifying the range of activities required to meet these aims, and the inter-relationships between enterprise and business growth and other drivers such as skills and investment.

By 2013, the Liverpool City Region economy will be recognised for its diverse portfolio of competitive knowledge-based business assets. Additionally, it will be equally well known for its highly skilled, innovative, flexible and enterprising workforce, and inward investment success.



Progress that the Liverpool

Alignment of effort and reduction of duplication is critical to deliver the Enterprise and Business Growth strategy, and to tackle the deficits the Liverpool City Region faces.

City Region is making

Responsibility for the delivery of the Enterprise and Business Strategy is currently overseen by the sub-regional partnership. In new City Region Governance arrangements this responsibility will lie with the Economy Board

The City Region recognises the challenges laid out in the Business Support Simplification Process, to simplify and streamline the delivery model. To this end the City Region is working closely with NWDA in developing regional programmes that meet the City Regions needs.

Similarly, innovative procurement solutions are being developed to ensure that investment from local (including Working Neighbourhoods Funding), regional (NWDA Strategic Investment and ERDF) and national (LEGI) sources are aligned to jointly identified priorities.

Specific activities will be delivered against 11 actions areas. Further detail on these action areas can be found in the Enterprise and Business Growth Strategy, but they are:

- Enhance enterprise education and raise awareness levels.
- Graduate enterprise and retention.
- Business creation.
- Local community business coaching/support.
- Getting the most from FDI.
- Business collaboration networks and priority sector development.
- Preparing to export/investigating new markets.
- Access to business expertise for growth.
- Skills solution for business.
- Innovation collaboration.
- Leveraging key knowledge/technology assets.

In addition, the City Region is also making strong progress in the following areas:

- Intensive and detailed dialogue with Business Link – to ensure that products are fit for purpose.
- Completion and follow up of pilot programmes established as part of the Merseyside Entrepreneurship Commission - and any subsequent role out of new innovative actions.
- Linkage of the enterprise agenda to other agencies – Schools, Health services, HE & FE, and the Third Sector.
- Development of specialist support for those target geographies / individuals not catered for by generically procured products.
- A coordinated approach to developing key transformational actions to drive up value in the economy, including maximising the City Regions science and research assets.

Links with other priorities

There is a clear linkage between this priority and those found elsewhere in this MAA document.

Employment and Skills initiatives are a theme that runs throughout the Enterprise and Business Growth strategy: Self-employment is a key route out of worklessness, higher business number drives up overall levels of employment, and skills are integral to productivity levels.

Infrastructure is identified as a key cross cutting theme of the enterprise and business growth strategy due to the impact that it has at all points on the business growth cycle. The strategy provides intelligence regarding the levels of incubator space needed for new business, grow-on space for business within high growth sectors and premises

requirements of new inward investors.

What are the barriers to success?

Alignment of effort and reduction of duplication is critical to deliver the Enterprise and Business Growth strategy, and to tackle the deficits the Liverpool City Region faces. The City Region recognises the challenges laid out in the Business Support Simplification Process, to simplify and streamline the delivery model. This will include a significant shift in business support culture towards the regional procurement model.

However the scale of the challenge is so large that **a distinctive approach to growing enterprise in deprived areas is needed, including innovative delivery mechanisms** to be developed alongside generic products across the rest of the North West.

A particular barrier identified to enterprise and business growth is how to maximise the underlying entrepreneurial culture in the City Region, and in particular to minimise risk in particular cohorts:

- a) individuals within deprived areas on particular types of benefit, where this safety net is withdrawn upon starting an business
- b) In the 25-40 age group, where evidence shows us that business starts in this cohort can be the most scaleable.

How can Government help?

Further work and negotiation is required to sharpen the 'asks' in this area.

Work with the City Region to identify innovative, distinctive solutions to tackle enterprise and business growth deficits. Options may include

- i) The need to extend eligibility to access for and referral to self-employment provision.
- ii) Lift restrictions on sole trading – i.e. enable claimants to employ others whilst test trading.
- iii) Address implications of anomalies with Working Tax Credit.
- iv) Consideration should be given to extending the Test Trading period beyond 26 weeks.
- vi) Iron out the anomaly relating to **IB customers** who are currently ineligible to access test trading but partners can through the ND for partners route.

How will we measure success?

Over the five year lifetime of the Strategy, we will have closed our GVA per employee gap with the North West completely, and reduced by 50%, our GVA per capita deficit with the region.

Further, over the same timeframe and using the same comparator benchmark geography (the North West region), we will have reduced our new VAT registration rate and VAT registered stock deficits by at least 33% and all of the following deficits by more than 50%: self-employment rate; proportion of employment in knowledge intensive businesses; proportion of our working age population possessing NVQ Level 4+ and proportion of employment in the top three occupations of the SOC.

Need to develop specific evidence to demonstrate the impact that ask may have on number of businesses started

7. Investment and Infrastructure

Where is the Liverpool City Region currently?

The Liverpool City Region is undergoing a significant transformation in terms of its image, infrastructure and private sector investment confidence. Evidence for the transformation is tangible to any of the 10.4 million visitors who stayed in the City Region over the past year.

Liverpool City Centre is the principal investment driver for the City Region conurbation, generating benefits in terms of employment, leisure, transportation and culture for the whole sub-region. The £1bn investment by Grosvenor in Liverpool City Centre was the biggest retail development in the UK and phase-one successfully opened in May 2008.

Insert figures from evaluation of City Centre programmes

2007 saw a significant amount of office space take-up in Liverpool. Over half a million sq ft was let to business clients, a 14% increase on the five-year average. New developments and refurbishments contributed 680,000 sq ft of grade-A office space, of which 40% was pre-let. The volume of new supply is set to peak this year, and by 2010, over 1 million sq ft of new space will have been completed.

Over the next two years an extensive package of existing developments will come on stream including:

- New high-quality commercial office space. Approximately 35,000 sq m of Grade A office space is planned over the next two years.
- The further development of the Liverpool waterfront as an international visitor destination, including the new Museum of Liverpool, the new cruise liner terminal and public realm improvements along the Mersey Waterfront Regional Park.
- The City Region's significant knowledge-base, underpinned by three Universities has been boosted by recent investments in the Daresbury Science and Innovation Campus, National Bio-manufacturing Centre, Liverpool Science Park and Liverpool School of Tropical Medicine currently contributes around £1 billion to the economy.
- A City Centre Movement Strategy to strengthen Liverpool's offer as both a premier destination and a compelling proposition for inward investment.

But the physical transformation and investment in the City Region is not limited to Liverpool City Centre. Across the City Region a combination of public sector pump-priming and private investment is providing further investment, employment and business growth opportunities. The following diagram provides some spatial context to the Liverpool City Region and some of the major physical infrastructure investment that has occurred since 2000.

INSERT MAP WITH KEY INVESTMENTS

The role of public sector investment should not be under-estimated in the renaissance of the Liverpool City Region. In the period 2000 – 2006 some £x amount of Objective 1 resource has levered in a further £x private sector investment. The successful delivery of this programme is underpinned by a mature approach to joint investment planning and decision-making and strong relationships with the private sector.

Whilst recent success is impressive, there is still much to do. The story of the Liverpool City Region is not complete without reflecting on the potential capacity that remains latent and the level of deprivation caused by long-term under-investment that remains unsolved.

- Benchmarking with other major European City Regions shows that Liverpool City Region is still constrained (**need to insert BAK Basel findings**)
- Relationships with key local business and inward investors show that links to the rest of UK and internationally are a barrier to further investment, particularly in some value sectors (**need to insert evidence over the anecdotal**).
- Over 240,000 people in the Liverpool City Region are economically inactive and

	<p>24.5% of super output areas in Merseyside appear in the top 5 percent of the IMD 2007 most deprived SOAs.</p> <ul style="list-style-type: none"> • Key brownfield strategic and employment sites are not ready to bring to market due to contamination or poor infrastructure • In spite of extensive effort and investment, concentrations of disadvantage, both in social indicators and quality-of- place. (Need evidence to support this from regeneration framework, HMR work and housing strategy) • Worklessness is particularly acute in particular communities, and this is closely correlated with other deprivation indicators <p>Insert housing strategy map showing most vulnerable areas</p>	
<p>What are our strategic ambitions?</p>	<p>The scale of the investment opportunities identified by the private sector in the Liverpool City Region is nationally significant.</p> <ul style="list-style-type: none"> • Masterplans for Liverpool and Wirral waters present a radical vision of a £10bn investment opportunity over the next 30 years with the potential to deliver 44,000 new jobs. • The development of a Superport to rival New York or Dubai. • The City Region’s knowledge-base has the potential to act as a driver for business productivity and a magnet to attract key talent to the North West by developing global competitive advantage in key sectors. • Continue to develop the City Region as a premier destination and cultural capital of international standing <p>The Liverpool City Region recognise that to deliver these visions will present challenges Consequently our ambition is, through this MAA, to</p> <ul style="list-style-type: none"> • Identify clear priorities for infrastructure investment across the City Region • Be more demand-led in identifying these investment priorities, working closely with the private sector. • Continue to work with the private sector to foster a delivery partnership that instills confidence in order to realise the scale of the opportunities presenting the City Region • To drive-up inward investment levels, linking people with job growth, in particular high growth activities. This will include supporting existing investors to remain competitive. • Underpin economic performance with a strong supporting offer in housing, transport, health and education. <p>Current economic forecasts show that the City Region has the prospect of strong employment growth based on past performance, but this is not matched by productivity gains to close the gap with the rest of the UK. Our strategic ambition is to realise this potential while improving the productivity levels of the economy as a whole.</p>	
<p>Progress that we are making</p>	<p style="text-align: center;">Objective</p> <p>Growing our knowledge and sector assets.</p>	<p style="text-align: center;">Collaboration and Progress</p> <p>Together we are:</p> <ul style="list-style-type: none"> • Investing in the Universities as drivers of business growth, attractors of talent and knowledge and to underpin existing sector strengths. • Investing in Daresbury and Liverpool Science Parks. • Ensuring the provision appropriate grow-on and incubation space for high value business.

	<p>Increase the level of inward investment into the Liverpool City Region</p> <p>Grow the port to handle x number of tonnes of cargo per year</p> <p>Growing the airport to cater for 12m passengers by 2015</p> <p>Develop a Premier Destination, achieving x number of visitor night stays by 2020</p> <p>Capitalise on our world-class waterfront as a location for visitor growth, quality of life and for investment.</p> <p>Regenerating our deprived communities.</p> <p>Link people to jobs better, with investment into public transport</p>	<ul style="list-style-type: none"> • We are jointly funding a Single Inward Investment Agency to lead on the attraction and location of new investment into the City Region • We have developed a prospectus for the development of a SuperPort – engaging with the private sector to maximise synergies between Port, Airport and the Freight and Logistics sector. • We are participating the in the delivery of investment plans for our Ports and Airport, including the delivery of a deep sea container berth at Seaforth. • We are significantly enhancing multi-modal freight hubs at key strategic sites in St Helens, Knowsley and Widnes • Joining up our tourism and culture programmes through our Tourist Board and the delivery of a City Region-wide Destination Management Plan • Delivering the attack brand products of Liverpool One, Museum of Liverpool, International Slavery Museum, Arena and Conference Centre Liverpool (and its associated business tourism opportunities). • Working collectively to deliver a lasting legacy for the Liverpool European Capital of Culture 2008 year. • Recent strong ‘product’ investment in hotels, bars and restaurants • Collaborating to deliver the Mersey Waterfront Regional Park, a long term strategic framework for the 120 mile waterfront • Delivering a Housing Market Renewal Pathfinder (need to add in values and targets) • Implementing the Liverpool City Region Housing Strategy to meet housing demands, including numbers, affordability and choice. • Through the excellent rated delivery of Local Transport Plans
<p>What are the barriers?</p>	<p>Recent investment in strategic and employment sites has taken care of easier propositions. The City Region is now primarily left with the “difficult to do” brownfield sites. These are made difficult by the restrictions caused by contamination or lack of basic infrastructure. In particular, the development of some strategic sites in hampered by the lack of available power supply. Outdated utilities infrastructure and lack of competition in the market place has led to long development times for key infrastructure projects. This</p>	

	<p>problem is compounded by the fact that some of the City-Region’s target industries, such as digital and creative industries, have particular requirements such as high power demands.</p> <p>Pan-Northern rail links are currently constrained by capacity and rolling stock issues, and the Manchester Rail Hub is currently a key barrier to delivering rail improvements across the North and with links to other City Regions and London.</p> <p>The second Mersey Crossing ‘Mersey Gateway’ is vital to the productivity, competitiveness and employment opportunities of the City Region. The new crossing will address congestion, unreliable and increasing journey times, and provide a range of benefits: creation of new and permanent jobs; new business opportunities; improved public transport links across the river; increased economic performance across the City Region and Region; creation of additional new commercial floorspace; catalyst for new homes, shops, offices and leisure facilities; improved intra and inter regional link.</p> <p>Parts of the Merseyrail network are at or exceeding capacity at, peak travel times in particular. Existing rolling stock and park and ride availability are barriers to increasing the use of rail for business trips. Due to a lack of full local decision making of the Merseyrail network, Merseytravel are unable to effectively manage and enhance the network, so restricting the contribution that rail can make to business productivity, competitiveness and improving accessibility for all.</p> <p>Significant progress has been made on the West Coast Mainline (WCML), but even with all maintenance works complete and resolution of outstanding bottlenecks, the WCML will be capacity by 2016. The need for High Speed Lines between London and Scotland and across the North of England is crucial to the City Regions long term economic and climate change priorities. An air link to London Heathrow is needed, but the development of High Speed Rail would remove the need for this link and make significant contributions to reducing the transport sectors carbon demands</p> <p>Access to the Mersey Ports is currently constrained by the existing highway network and the competing use of the network by freight, business and local transport. Gauge restrictions on the rail network are also restricting rail freight movements and future opportunities and demand.</p> <p>Increasing traffic growth will start to affect business productivity and future investment due to congestion, unreliable and delayed journeys. In addition, negative environmental impacts (air and noise pollution and green house gas emissions) will impact on the health and quality of life for those that live, work and wish to invest in the City Region.</p>
	<p>In addition to these programmes, we are working to develop greater collaboration and partnership working across the City Region in order to:</p> <ul style="list-style-type: none"> • Develop closer linkage of investment priorities with wider economic growth strategy. <ul style="list-style-type: none"> • Property development that supports key sector strengths, knowledge assets but also employment drivers. • LTP fit with local employment and enterprise initiatives and also key inward investor needs. • Extend programme funding for key strategic infrastructure projects in collaboration with NWDA – this is something that we can do ourselves in collaboration with NWDA. • Deliver the Single Inward Investment Agency – aligning NWDA, Local Authority and partner promotion, lead generation and image campaigns to promote the attack brand Liverpool City Region. To be done ourselves. • Examine options for transport links to the rest of the UK to discuss with Government. Joined up approaches in tackling the issues of housing, transport and skills
<p>What can</p>	<p><i>Further work to shape asks in the area is underway, with a view for delivery in April 2009..</i></p>

<p>Government do?</p>	<p><i>Brief notes on current thinking is</i></p> <p>Work with the Liverpool City Region, and NWDA to overcome power supply issues affecting the City Region. We believe these to be regulatory issues between current power providers and Offgen.</p> <p>Support the Mersey Gateway scheme through the major schemes process to full approval.</p> <p>Recognise the economic and productivity value of Superport with support for strategic rail and road access improvements through the RFA and national investment programmes, including Productivity TIF, Highways Agency and Network Rail. Asks within the SuperPort concept may also examine existing planning and policy constraints.</p> <p>Ensure that UKTI is aligned with Liverpool City Region internationalisation and inward investment drives</p> <p>To explore the possibility of implementing Accelerated Development Zone Status for selected areas of the Merseyside waterfront</p>
<p>How will we measure success?</p>	<p>Deliver key targets are set out in our ambitions.</p> <p>Additional benefit of interventions in power are will be £x m of additional investment in key named sites. Overall GVA growth of those projects.</p>

8. Developing Transformational Ideas

These activities are currently under-development, with extensive dialogue between partners on the scale of the opportunity presenting the Liverpool City Region, and the evidence base development to under-pin it. It is our intention to develop these proposals to include key barriers to delivery, and proposals for Government to support the City Region in delivering these actions.

Concept 1: SuperPort

SuperPort physically comprises the core assets of port, airport, logistics and transportation infrastructure but conceptually it can be much more by integrating these attributes together to provide a cohesive cost efficient entity.

In addition, the City Region has a world-class freight community able to make best use of these physical assets. Indeed, SuperPort has the potential to become a genuine unique selling proposition for the Liverpool City Region and the North West by seizing competitive advantages in a global industry with an assured, long-term future.

By learning, and applying, best practice from across the world Liverpool SuperPort can become a leading example of technical and service innovation, harnessing the potential of its supply chains and ensuring that not only does it become a global destination and transshipment hub of choice but becomes a pioneer in the field of sustainability.

SuperPort also has the potential to provide a key driver in the development of inward investment as external parties are made aware of the opportunities opening up in the City Region through the inward investment activity of the Mersey Partnership.

Concept 3: Knowledge Economy

The strong and developing knowledge economy in the Liverpool City Region includes biosciences, life sciences and a general science base. It encompasses outstanding existing assets such as the Liverpool School of Tropical Medicine, Science Park, Daresbury and the three City Region's Universities.

The scaled impact of these assets are substantial drivers for future economic growth and include £1bn income to the City Region economy, 15% of the City Region's total GVA and over 14,000 jobs.

With this unique range of strengths and assets the Liverpool City Region is well placed to improve its economic performance and productivity based on science, research and knowledge; through increased inward investment, increasing R&D in both the HEI and private sectors, enterprise start-up and growth, and improved skill levels.

Concept 2: Low Carbon Economy

The environmental economy is one of the UK's fastest growing markets. Over the next 10 years, the market is expected to expand by £30bn across the UK. The Stern Review of 2007 clearly equated inaction to climate change with costs to economic growth. The cost of not acting is estimated to be as much as 20% of global GDP, but that the cost of reducing carbon dioxide to safe levels would be between 1-3%. Together with these costs, there will be a significant restructuring of the economy towards low-carbon industries. The precise nature of the opportunity within the Liverpool City Region is not yet quantified, this work is underway and a key part of the early stages of our strategy development.

The Liverpool City Region is uniquely positioned to contribute to the growth of this market, and to grow its own economy as a result. It has a range of assets that make it well suited to further investment:

- Strong natural resources (harnessing the power of the Mersey and the wind capability of the Mersey estuary)
- Strong existing business base in related industries. The City Region is currently home to large industries that are influential in the low carbon market (Pilkington and their obvious links to solar energy would be a good example, but there are range of other. There are also a number of high-energy users, whose proposed investments will have positive and negative impacts to the environment.
- Existing barriers to infrastructure include the lack of supply of energy to key sites. The opportunity exists to increase supply using renewable sources, including on-site generation or the creation of enhancements to the existing grid based on renewable investment
- Some strong flagship projects in which demonstrator technologies are proving a return on investment (e.g. ACCL, Liverpool South Parkway rail station), and this can be replicated successfully given the extent of planned investment in the City Region over the next three years.

REPORT TO: Executive Board

DATE: 11 September, 2008

REPORTING OFFICER: Strategic Director Environment

SUBJECT: Scrutiny Panel Recommendations – The Role of the Council’s Procurement Policy in Developing Local Employment Opportunities

WARDS: All Wards

1.0 PURPOSE OF THE REPORT

- 1.1 A Scrutiny Panel Topic Group report, that explored the role of the Council’s procurement policy in developing local employment opportunities, was considered by the Employment Learning and Skills (ELS) Policy and Performance Board on 23 June, 2008. This followed an earlier Topic Group update report to the Board on 10 March, 2008.
- 1.2 The Board resolved that the recommendations of the Topic Group be forwarded for consideration and comment by the Executive Board at the earliest opportunity and that the ELS Policy and Performance Board consider this issue further, including any comments which the Executive Board make, at the next available meeting of the Board.

2.0 RECOMMENDATION: That

- (1) The Board considers and accepts the recommendations of the Procurement Scrutiny Panel Topic Group, listed in paragraph 3.2 of this report, subject to consideration of the budget implications as part of the 2009/10 budget setting process, and forwards any comments to the ELS Policy and Performance Board.**

3.0 PROCUREMENT SCRUTINY PANEL TOPIC GROUP RECOMMENDATIONS

- 3.1 To provide the necessary background, the Topic Group update report of the 10 March, 2008 is included at appendix A.
- 3.2 At the meeting of the ELS Policy and Performance Board on 23 June, 2008, it was requested that the following recommendations, arising from the Scrutiny Panel Topic Group work programme, be considered by this Board:-

- a) A meet the buyer event be convened to provide businesses with an opportunity to meet key buyers from the public services based in Halton
[Proposed Lead - Local Strategic Partnership/Environment]
- b) A workshop/s be convened for small businesses to advise them on the Council's pre qualification questionnaire (PQQ) requirements and tendering arrangements
[Proposed Lead – Corporate and Policy/Environment]
- c) A review of the Council's term contract conditions be undertaken with a view to identifying ways in which they can be amended to benefit local businesses in order that they seek a commitment from council contractors, prior to being appointed, to consider using local suppliers as part of their supply chain to deliver the service they are being contracted to provide
[Proposed Lead – Corporate and Policy]
- d) Explore the potential for establishing an email tender alert system, to advise businesses when Council tenders above £1m are being let
[Proposed Lead – Corporate and Policy]
- e) Produce a printed/electronic leaflet on 'how to do business with Council.' The printed leaflet to be distributed to Halton businesses
[Proposed Lead – Corporate and Policy/Environment]
- f) Training at a professional level be undertaken for officers engaged in letting and managing contracts valued over £1m
[Proposed Lead – Corporate and Policy]
- g) A pre-tendering review system be established to ensure that policies and procedures, relating to procurement, are being followed
[Proposed Lead - Corporate and Policy]
- h) Where there is a Halton based dealership, the dealership be used for the servicing and repair of Council lease cars and leasing contracts be amended accordingly
[Proposed Lead – Environment]
- i) Measures be taken to ensure that local businesses benefit from the Mersey Gateway project and other major capital works to be undertaken in the Borough in Halton during the coming years
[Proposed Lead – Environment]
- j) A study be undertaken to determine the skills and training needs and measures taken to address them, in respect of the Mersey Gateway and associated capital works programme, to ensure that Halton's residents are able to take full advantage of the employment opportunities that the programme of works will offer

[Proposed Lead – Environment]

- k) Progress on issues relating to employment in respect of the Mersey Gateway and other related capital projects be reported to the Employment Learning and Skills Policy and Performance Board on a half yearly basis

[Proposed Lead – Environment]

- l) Explore ways in which the Council's procurement policies can be used as a vehicle for generating apprenticeship opportunities with council contractors

[Proposed Lead – Environment/Corporate and Policy]

4.0 FINANCIAL IMPLICATIONS

- 4.1 Table A illustrates indicative costs in respect of each recommendation. A more detailed estimate will, however, need to be undertaken by the lead Directorates in the light of staffing and financial resources.

Table A

Recommendation	Proposed Lead	Cost Estimate
a) Meet the buyer event	Local Strategic Partnership/Environment	£3k
b) Workshop/s for small businesses	Corporate and Policy/Environment	£3k
c) Review of the Council's term contract conditions	Corporate and Policy	Existing budgets
d) Potential for establishing an email tender alert system	Corporate and Policy	Existing budgets
e) Printed/electronic leaflet on 'how to do business with Council.'	Corporate and Policy/Environment	£5k
f) Training at a professional level eg Chartered Institute of Purchasing and Supply (CIPS) Foundation Diploma Level 4.	Corporate and Policy	Unit cost: 5 x modules @ £370 per module.
g) Establish pre-tendering review system	Corporate and Policy	Existing budgets
h) Local servicing and repairs of Council lease cars	Environment	Existing budgets
i) Ensure local businesses benefit from the Mersey Gateway project	Environment	Existing budgets
j) Study be undertaken to determine the skills and training needs in respect of the Mersey Gateway etc	Environment	£10k

k) Half yearly reports to ELS PPB on progress re employment issues in respect of the Mersey Gateway and other related capital projects	Environment	Existing budgets
l) Explore ways in which the Council's procurement policies can be used as a vehicle for generating apprenticeship opportunities with council contractors	Environment/Corporate and Policy	Existing budgets

5.0 POLICY IMPLICATIONS

5.1 The aims of Council's Procurement Strategy (2006-09) include a commitment to promote procurement practices and techniques that can contribute to the Council's priorities on equality, sustainability and regeneration. The Strategy also includes an objective to focus on the objectives that support the National Procurement Strategy for Local Government and the council's strategic priorities, to realise economic, social and environmental benefits for Halton.

5.2 The Mersey Partnership 'Enterprise and Business Growth Strategy for the Liverpool City Region 2008 – 2013' recognises the importance of the public sector within the City Region, as a key target for the Strategy. It states that 'at present the requirement that public sector procurement teams achieve Value for Money has led to them granting a small number of contracts to large contractors. A key priority therefore will be to work with these teams (such as the NHS Purchasing and Supply Agency and the Local Authority Procurement departments) to look at ways that existing SME's can be included in the supply chain through an arrangement that does not adversely affect the cost effectiveness of the provision.'

6.0 OTHER IMPLICATIONS

6.1 There are no other implications arising from this report.

7.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

7.1 Children and Young People in Halton

The government proposal to extend the participation age would be well complemented in Halton through the introduction of apprenticeship clauses within its main construction and maintenance contracts.

7.2 Employment, Learning and Skills in Halton

A key part of the employment, learning and skills agenda is the development of an enterprise culture and the provision of support to enable new businesses to start up. Enhancing the reputation of the Council as a good organisation for local businesses to work for would aid in the development of the local enterprise culture.

7.3 A Healthy Halton

There are no implications for a Healthy Halton arising from this report

7.4 A Safer Halton

There are no implications for a Safer Halton arising from this report

7.5 Halton's Urban Renewal

A key element of the Urban Renewal Agenda is the attraction of new businesses to Halton. A key feature of this in the future could be the further development of the procurement initiative so that the Council is seen as very welcoming and supportive to local businesses.

8.0 RISK ANALYSIS

8.1 A significant number of local small and medium size businesses will continue to feel disenfranchised and excluded from opportunities to bid for work with the Council if it decides not implement the recommendations. This will have an overall negative impact on the perceptions of the Council, by local businesses, and its apparent unwillingness to support them.

8.2 Failing to capitalise on the employment opportunities for local people, that the Mersey Gateway and related capital projects will offer, will result in a missed opportunity to address a lack of work related skills and the resultant unemployment it causes for disadvantaged residents in the borough.

9.0 EQUALITY AND DIVERSITY ISSUES

9.1 There are no equality and diversity issues arising from this report.

10.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

10.1 None.

APPENDIX I

REPORT TO: Employment Learning and Skills Policy and Performance Board

DATE: 10 March, 2008

REPORTING OFFICER: Strategic Director Environment

SUBJECT: Scrutiny Panel Update– The Role of the Council’s Procurement Policy in Developing Local Employment Opportunities

WARDS: All Wards

1.0 PURPOSE OF THE REPORT

1.1 To report on the progress of the programme of work being undertaken as part of the Policy Board’s scrutiny programme, which explores the Council’s Procurement policy and its role in developing local employment opportunities.

2.0 RECOMMENDATION: That

- (1) The Board comments on the progress of the Procurement Scrutiny Panel programme of work to date**
- (2) A further report be brought before the Board, at the earliest opportunity, setting out the Panel’s recommendations**

3.0 BACKGROUND

Context

3.1 The programme of work seeks to address the role that the Council’s procurement policies can play in promoting local regeneration and the creation of employment opportunities. It was prompted, in part, by initial investigations into the economic benefits of local procurement, undertaken by the Employment Learning and Skills PPB “Halton People into Jobs” Scrutiny Panel in 2006/07, and a growing recognition that the significant purchasing power of the public sector and specifically, the amount of money spent locally by public bodies, can have a major impact on local economies.

4.0 METHODOLOGY

4.1 The Panel is utilising a range of techniques to undertake the work, including:

- Interviews and study groups with a selection of officers responsible for procurement.
- Interviews with local businesses that have been involved in the Council's procurement, tendering and commissioning procedures.
- Desk research and analysis of relevant Web based data to identify best practice from other local authority areas that could be adapted for use in Halton
- Analysis of the local business study findings published in July 2007, to address concerns raised by businesses about contracting for work with council

5.0 INTERVIEWS AND STUDY GROUPS

5.1 The interviews and study groups were designed to assist members of the Panel acquire a better understanding of how the Council's procurement systems and procedures are carried out and some of the legal constraints under which officers have to operate when purchasing goods and services.

5.2 They comprised a number of informal fact finding meetings with officers that have responsibility for purchasing/commissioning at varying levels of authorisation, ranging from up to £10,000 to over £1 million. The one to one interviews were focused primarily on higher value contracts, i.e. greater than £100,000 involving formal tendering and the study groups on lower value contracts, less than £100,000, that require a minimum of three written quotations.

5.3 In addition to the interviews with officers responsible for letting contracts, the Council's Procurement and Legal Services departments were consulted, to consolidate the Panel's understanding of procurement policy and how it is applied in the Council.

Summary of Findings - Interviews and Study Groups

5.4 The interviews and study group discussions essentially focused on procurement processes including the selection of potential suppliers; advertising of contracts; the scoring tenders and the legal aspects of tendering, that have to be taken into account, when preparing tender briefs and awarding tenders.

5.5 In addition, there were wide ranging discussions and views expressed about the Council's procurement policies and the impact and benefits they bring to the local economy. A body of evidence was presented that suggests that local businesses are benefiting from the Council's procurement policies, although in some cases, it tends to be indirectly via third party term contractors that have been awarded contracts and who then sub contract work to their suppliers, some of whom are based

in Halton. This leads to confusion, as it's not always apparent, when a supplier is undertaking work for the Council via a term contractor, who initiated the work.

- 5.6 Several officers suggested that the Council's tendering arrangements, i.e. the pre qualification questionnaire (PQQ) and the tender documents for contracts over £100,000, may discourage smaller firms from tendering for work, given the time and resources required to prepare and submit tenders. Larger companies are, generally, well versed in procurement and tendering procedures, whereas smaller companies are not and this gives larger companies an advantage when tendering for large contracts.
- 5.7 There was little evidence that officers responsible for letting contracts are professionally qualified in procurement. They rely instead on their professional knowledge of their respective areas of responsibility, to ensure the Council achieves value for money from its suppliers.

6.0 INTERVIEWS WITH BUSINESSES

- 6.1 Three local businesses were interviewed – a current supplier; a business that bid for, but failed to be awarded a contract and a business seeking clarification about how to go about being selected for inclusion on a Council supplier list. The interviews provided an opportunity for businesses to provide feedback on their individual experiences of bidding for work with Council and to express their views on the Council's procurement processes from a business perspective.

Summary of Findings - Interviews with Businesses

- 6.2 The feedback from two of the businesses that were interviewed suggest they are satisfied with the procurement arrangements, however, one business expressed concern about the Council's ad hoc supplier arrangements and their frustration at their inability to get their company included on the list. Subsequent investigation, however, revealed that the service they offer is currently provided by a term contractor and they have in fact undertaken work for the Council as a sub contractor to the term contractor. They have also, on occasion, been contracted by the Council directly to undertake work.

7.0 DESK RESEARCH

- 7.1 A review of local authority Websites was undertaken to identify initiatives that other Council's have introduced to assist businesses when bidding for work, particularly local, small and medium enterprises (SME's) and the Voluntary Sector. One of the themes of The National Procurement Strategy is to stimulate markets and achieve community benefits via procurement and it is under this obligation on Council's that the analysis was undertaken.

Summary of Findings – Desk Research

- 7.2 The review of other local authority Web sites didn't reveal anything substantively different from Halton's approach to procurement, albeit each authority presents its procurement policies in different ways.
- 7.3 Like Halton, many local authorities have signed up to the government's Small Business Friendly Concordat, which demonstrates a Council's commitment to make its purchasing decisions as transparent as possible. The Small Business Friendly Concordat is a voluntary code of practice, developed by the Department for Communities and Local Government, the Local Government Association and the Small Business Service, to make it easier for SME's to do business with local authorities.
- 7.4 Local authorities tend to place a lot of reliance on their respective Web sites for disseminating details of tendering opportunities; how to do business with Council; approved and select lists etc and yet, the survey undertaken last year of local businesses in Halton suggests that a Council Website isn't necessarily the first choice for SME's when seeking information about procurement opportunities.

8.0 PROCUREMENT SURVEY 2007

- 8.1 Early in 2007 a joint procurement survey was commissioned by the Council's Business Development Division and the E - Procurement and Financial Support Services Division. Nearly 200 businesses responded to the survey. The survey sought the views of local businesses to address concerns over the ability to access business opportunities with the Council.
- 8.2 The survey focused on three areas. Part I asked for businesses experiences/views on the Council's procurement/tendering policies and procedures. Part II asked for their views on the procurement content of Council's Website and Part III invited comments on what improvements/additional measures businesses would like to see introduced that would help them when bidding for work with the Council.

Summary of Findings – Procurement Survey 2007

- 8.3 The survey:-
- Generated 93 (47%) responses from Widnes businesses and 105 (53%) from Runcorn.
 - 167 of the businesses (over 80%) employed between 1 – 50 staff
 - 61 (30%) of businesses had quoted/tendered for work previously

- 66% found the process either very or fairly easy
- Of those businesses that were unsuccessful and requested feedback, 69% were satisfied with the feedback they received
- 37% indicated they would choose the Council's Website if they were looking for tendering opportunities
- 21% of businesses had visited the Council's procurement pages on the Website
- 86% found the information on the Website either very or fairly useful
- 88% indicated that briefing sessions for businesses on the Council's tendering process would be either very or fairly helpful
- 93% indicated that a printed guide on how to do business with the Council would be either very or fairly helpful
- 99% indicated that an email alert system advising them of tender opportunities would be either very or fairly helpful
- 87% indicated that tender opportunities posted on the Council's Website would be either very or fairly helpful
- 51% indicated that tenders advertised in newspapers were either very or fairly helpful
- 86% indicated that 'meet the buyer' style events would be either very or fairly helpful

8.4 The high response rate to the survey would suggest that local businesses view the Council as a potential customer for their goods and services, particularly small businesses, employing up to 50 staff. Whilst the Council's Website was rated well by those business that had used it as a source of procurement information, the relatively low number of businesses suggests that the Website is only part of the solution when communicating tendering opportunities effectively to small businesses. Producing a printed guide to procurement and developing an email alert system received most support, but clearly there implementation would have financial and resource implications for the Council.

9.0 POLICY IMPLICATIONS

9.1 The Council, in signing up to the Small Business Concordat has committed itself to delivering locally the National Procurement Strategy for Local Government. The strategy asks local authorities to adopt a small and medium sized enterprise (SME) friendly procurement concordat and to encourage a mixed range of suppliers in order to help develop and stimulate a varied and competitive marketplace. The concordat sets out the actions that local authorities will take to make their contracts more accessible to SME's. Although the principles relate to all SME's, the concordat is particularly focused on small businesses of less than 50 employees. The Council, therefore, recognises the important contribution that small businesses can make to the delivery of public services and the vital role these businesses play in the national and local economy.

10.0 OTHER IMPLICATIONS

10.1 There are no other implications arising from this report.

11.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

11.1 Children and Young People in Halton

There are no implications for Children and Young People in Halton arising from this report

11.2 Employment, Learning and Skills in Halton

A key part of the employment, learning and skills agenda is the development of an enterprise culture and the provision of support to enable new businesses to start up. Enhancing the reputation of the Council as a good organisation for local businesses to work for would aid in the development of the local enterprise culture.

11.3 A Healthy Halton

There are no implications for a Healthy Halton arising from this report

11.4 A Safer Halton

There are no implications for a Safer Halton arising from this report

11.5 Halton's Urban Renewal

A key element of the Urban Renewal Agenda is the attraction of new businesses to Halton. A key feature of this in the future could be the further development of the procurement initiative so that the Council is seen as very welcoming and supportive to local businesses.

12.0 RISK ANALYSIS

12.1 There are no risks associated with this report as it is a progress report only on the work of the Procurement Scrutiny Panel.

13.0 EQUALITY AND DIVERSITY ISSUES

13.1 There are no equality and diversity issues arising from this report.

14.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

14.1 None.

By virtue of paragraph(s) 1, 2, 3 of Part 1 of Schedule 12A
of the Local Government Act 1972.

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