



Rochdale Borough Children's Trust Board

# Children and Young People's Strategic Plan 2011-14

Enabling all children  
and young people to  
achieve their full potential



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## Rochdale Children's Trust Board

There is a strong commitment to partnership working across the borough and a Children and Young People's Strategic Partnership has been in place since 2004. There is an assurance from all partners to maintain and further develop the work of Rochdale Children's Trust Board.

The reporting and monitoring structure of the Children's Trust Board is provided on page 3 and the membership of the Board as at April 2011 is shown in Appendix 1.

The Board is supported by the Children Schools & Families (CSF) Joint Strategic Commissioning Group (JSCG) and five lead groups, each of which focuses on monitoring the progress of the key priorities.

### Our Vision

To enable all children and young people to achieve their full potential.

### Our Purpose

The Children's Trust Board brings together all agencies working with children and young people and their families to:

- provide leadership and direction to improve outcomes for children and young people
- lead integrated service delivery and effective use of resources
- agree, monitor and evaluate a strategic plan to drive forward the work that partners deliver together
- hold each other to account for the actions they have agreed

## Statement from the Chair

This plan sets out the work we are prioritising for children and young people and their families in the Rochdale borough. It explains the priorities and why they are important.

To achieve the outcomes in this plan, we will need to be determined to work in particular ways and to keep some additional imperatives in our minds. Integrated ways of working and the Children's Needs and Response Framework underpin the whole of this document. At times when resources are reducing and precious, we must work closely together; partly to avoid duplication and unnecessary overlap, but also to pool our considerable skills, talent and knowledge.

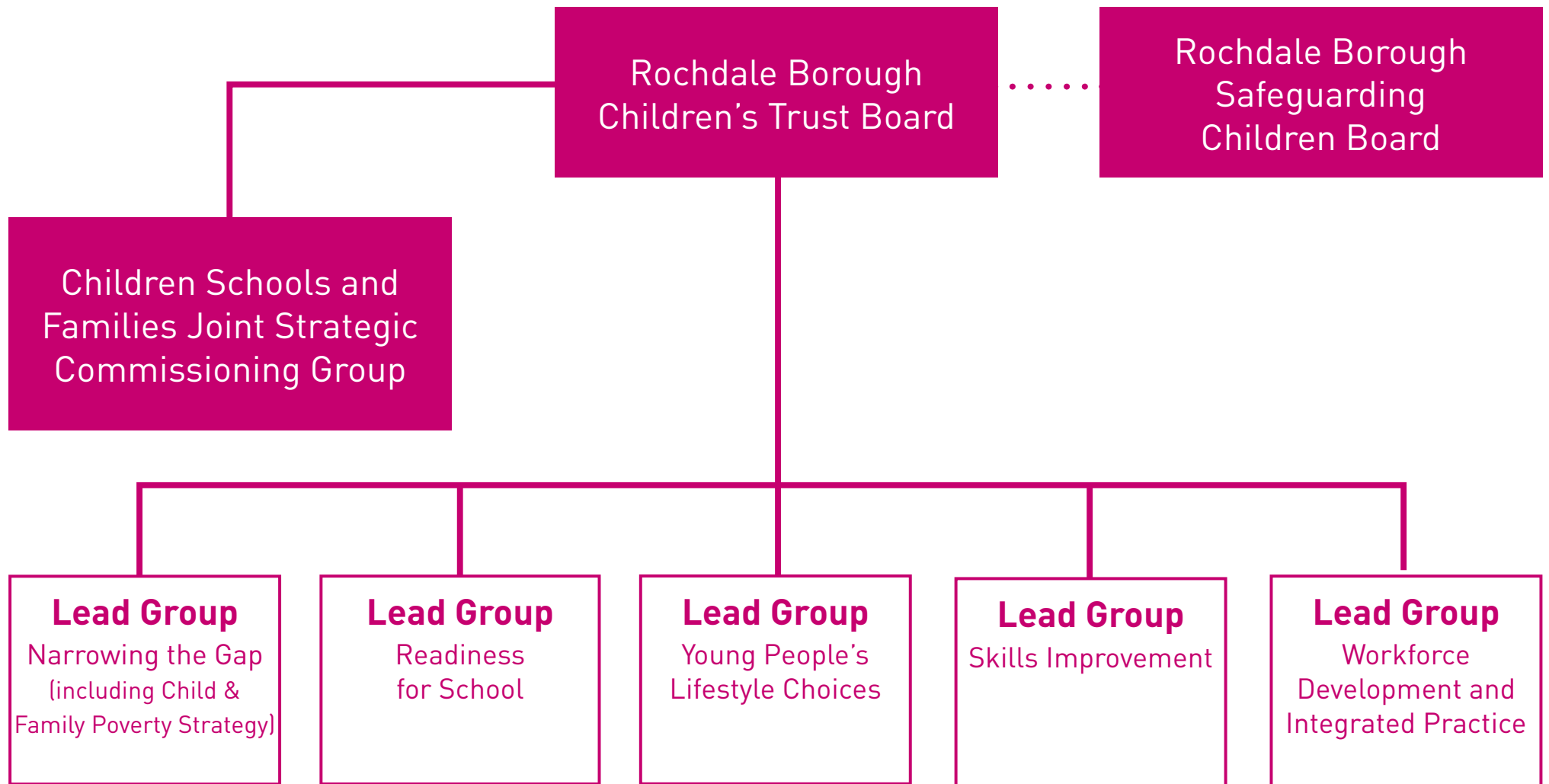
Information Sharing, the Common Assessment Framework (CAF), Lead Professionals and the Team around the Child will be key tools. These are vital if we are to ensure we give the best support to our children and young people. For those who need our help, we will need as much relevant knowledge and data as it is possible to gain, and to share that knowledge with others who are also involved in that help.

Finally I would urge all partners in this plan to stay focussed on actions and the outcomes they seek to attain. Prioritising actions against the identified key outcomes will be important if we are to make best use of our resources. We face some major challenges but together we will be able to achieve everything set out in this document.

*Malcolm R. Allan*

Chair of Rochdale Borough Children's Trust Board

# Rochdale Borough Children's Trust - reporting structure



## Key Priorities

The Children and Young People's Joint Strategic Needs Assessment (2010) pulled together the key available information in relation to the health and well-being of all children and young people in the borough. The findings have enabled the Board to agree the key areas whereby working together, we can make a difference.

Five key priorities have been identified:

- **Narrowing the Gap**
- **Improving Readiness for School**
- **Enabling Young People to Make Positive Lifestyle Choices**
- **Skills Improvement**
- **Workforce Development and Integrated Practice**

These are the key areas of work for the Board over the life of this Children and Young People's Plan.

### 1. Narrowing the Gap

Mitigating the effects of poverty is central to our work on closing the gap in achievement at all levels. This will involve overcoming the barriers those most vulnerable and disadvantaged children and young people face and providing wider experiences so that they do not fall behind in achieving their full potential.

The aim for this priority is that resources and support are effectively targeted to the most vulnerable children and young people and their families to ensure that their health and well being needs are met and the achievement gap is reduced at all ages.

The Child & Family Poverty Strategy will be a key element of Narrowing the Gap.

### 2. Improving Readiness for School

We need to ensure that children enter school with sufficient language and communication skills to enable them to access learning and that their parents engage in supporting their children's learning. This will ensure that more children have a good level of development at the Early Years Foundation Stage and the gap is reduced.

The aim for this key priority is to ensure that babies and young children have a healthy start in life. Services need to identify needs, focus on those children and families at risk and intervene effectively at an early stage as soon as difficulties begin.

### 3. Young People's Lifestyle Choices

The aim for this key priority is that young people are less likely to take part in risky behaviour. To support this there needs to be a varied menu of high quality, easily accessible services on offer and all children and young people need an understanding of health/lifestyle issues and how/where to seek help.

### 4. Skills Improvement

The Rochdale All Age Skills Strategy aims to raise the skill levels of our residents by integrating all the work that partners do in Rochdale; from early years to business support, from back-to-work activity to housing strategy, schools, colleges and beyond. The responsibility for achieving this strategy will be a huge challenge for partners and employers – not all of whom will be used to thinking of skills as part of their day job.

### 5. Workforce Development and Integrated Practice

In order to deliver progress on these key priorities, there needs to be in place a number of enablers. Essentially this is about how all agencies at all levels work together and about embedding systems and processes that make possible integrated working such as sharing information and data analysis.

In particular the Children's Trust Board is responsible for the implementation of the Children's Needs and Response Framework. This framework is central to how we work together and Rochdale Borough Safeguarding Children Board (RBSCB) will hold the Children's Trust Board to account for ensuring it is understood and embedded by all those working with children and young people in the borough.

The development of commissioning specifications that include clear expectations of outcomes for vulnerable families, a complete needs assessment for specific groups, and the use of this analysis to provide the evidence for targeted provision are also essential aspects of this plan.

## Cross Cutting Themes

The cross cutting themes are fundamental to this plan and its aim to improve outcomes for children and young people. As such, these are integral to the action plans for each priority and are monitored and reported on regularly.

These are:

### Keeping Children Safe

Safeguarding the borough's children and young people is a top priority for all agencies and the Children's Trust Board is responsible for ensuring that children are safe and their welfare is secured through the commissioning and delivery of effective services.

Rochdale Borough Safeguarding Children Board is consulted on the Children and Young People's Plan (CYPP) and the Lead Groups are responsible for making sure that safeguarding is part of the monitoring process.

The Children's Trust Board is also responsible for the wider safety issues including bullying, road safety and accidents in the home and these are also reflected through each key priority.

### Equality and Diversity

The Children's Trust Board is committed to achieving equality of opportunity, access and outcomes for all through:

- recognising and seeking to reduce or remove the barriers faced by under-represented, vulnerable and excluded groups in Rochdale borough
- countering deprivation and narrowing the gap between the most disadvantaged and others
- combating discrimination in all its forms, and working actively to ensure fair access to services, employment and active citizenship

## Working with Families

The scope of working with families is huge as all families have different needs. Across the borough there is a range of initiatives which support families. This includes several pilots and there is the potential to add value to these.

Improving co-ordination and service delivery with a focus on families is a 'big ticket' issue for the Local Public Service Board and actions identified within this plan will contribute to this.

## Monitoring and Reporting

The role of the Lead Groups is to monitor performance and report each quarter to the Board on progress relating to outcomes and actions in the agreed action plans. A Lead Group is in place for each of the five key priorities.



## Action Plans 2011-12

All key services contribute to each of the Key Priorities. The action plans which follow identify common outcomes and actions from all the relevant agencies.

These action plans set the context for more detailed service/agency plans and these in turn determine team plans and individual work plans.

The action plans cover the period 1st April 2011 to 31st March 2012. Quarterly progress reports will be presented at each meeting of the Children's Trust Board.

KEY PRIORITY 1	NARROWING THE GAP (INCLUDING CHILD & FAMILY POVERTY STRATEGY)
<p>WHY IS THIS A PRIORITY?</p>	<p>Nearly a third of children in the borough under 15 years of age and a quarter of those under the age of 19 live in poverty. The distribution of deprivation across the borough means that many neighbourhoods rank amongst the poorest in the country and children are less likely to achieve their full potential from this position.</p> <p>There are gaps in attainment between those who qualify for school meals and those who don't and this increases with age. Our Not in Education, Employment or Training (NEET) figures are higher within vulnerable groups and educational attainment figures are not comparable between different groups. We need to increase educational achievement at all key stages in preparation for good outcomes in adult life. Achievement should not be seen solely as educational attainment. The term relates to our vision statement "To enable all children and young people to achieve their full potential".</p> <p>Every team, service and agency can contribute to this whether it is through ensuring a healthy start is made; supporting young people to have healthy life styles or good parenting skills; developing confident individuals with good self esteem; removing barriers to enable children and young people to achieve their potential and ensuring equitable access and uptake of services.</p>
<p>OUTCOMES</p> <p>WHAT WILL BE DIFFERENT IN THE NEXT 12 MONTHS?</p>	<ul style="list-style-type: none"> <li>• Agencies understand and take action to meet the needs of our most vulnerable families and communities</li> <li>• The attainment gap is reduced at all key stages</li> <li>• Reduction in the numbers of children and families living in poverty</li> <li>• Improve attainment for our known vulnerable groups</li> </ul>

ACTIONS	WHAT ARE WE GOING TO DO?	BY WHEN	LEAD
	<ul style="list-style-type: none"> <li>All agencies embed and effectively use the Children's Needs and Response Framework to identify the additional needs of vulnerable children and young people</li> </ul>	March 2011	Malcolm Allan
	<ul style="list-style-type: none"> <li>All services ensure that commissioning specifications include clear expectations of outcomes and key performance indicators are set across key organisations for vulnerable groups</li> </ul>	March 2012	Cheryl Eastwood
	<ul style="list-style-type: none"> <li>All schools and early years providers put strategies in place to ensure that children and young people from disadvantaged backgrounds achieve their full potential</li> </ul>	December 2012	Tony Lasan
	<ul style="list-style-type: none"> <li>All agencies working with children and young people contribute to initiatives to tackle deprivation in specific geographical areas</li> </ul>	March 2012	Laura Beesley
	<ul style="list-style-type: none"> <li>All services put effective transition arrangements in place at key points, focussing on the most vulnerable groups</li> </ul>	March 2012	Gillian Barratt
	<ul style="list-style-type: none"> <li>All actions in the Child and Family Poverty Strategy are implemented</li> </ul>	March 2012	Laura Beesley
	<ul style="list-style-type: none"> <li>Develop and implement action plans to deliver Tier 1 and 2 of the Child and Adolescent Mental Health Services (CAMHS) strategy</li> </ul>	March 2012	Karen Kenton
	<ul style="list-style-type: none"> <li>Complete the Disabilities Strategy and action plan for children and young people</li> </ul>	December 2011	Maria Boyle



## HOW WILL WE KNOW WE HAVE BEEN SUCCESSFUL?

ID	Measure	Baseline	Target (2012 unless stated)
NG1	The gap in attainment at all Key Stages (KS) between free school meal (FSM) pupils and non FSM pupils		
	• Achievement gap between pupils eligible for free school meals and their peers achieving the expected level at KS2	18% (2010)	14%
	• Achievement gap between pupils eligible for free school meals and their peers achieving the expected level at KS4	25.2% (2010)	21%
	• Special Educational Needs (SEN)/non-SEN gap – achieving KS2 English and Maths threshold	59.5% (2010)	55%
NG2	Not in Education Employment or Training (NEET)		
	• Local data based on residency method of counting	6.9% (Jan 2011)	6.8%
	• Care leavers at 19 in education, employment and training	47.8% (2010)	68%
	• Young offenders engagement in suitable education, employment or training	71.6% (2010)	76%
NG3	Secondary school persistent absence rate (%)	6.7% (2010)	4.7%
NG4	Progression levels at Key Stages are achieved		
	• Progression by 2 levels in English between KS1 and KS2	89% (2010)	91%
	• Progression by 2 levels in Maths between KS1 and KS2	85% (2010)	88%
	• Between KS2 and KS4 pupils are expected to make 3 levels of progress in English	65.8% (2010)	68%
	• Between KS2 and KS4 pupils are expected to make 3 levels of progress in Maths	63.1% (2010)	65%

ID	Measure	Baseline	Target (2012 unless stated)
NG5	<p>Increase in the number and percentage of young people who have documented transition plans in place</p> <ul style="list-style-type: none"> <li>• There is evidence of clearly documented transition planning for Looked After Children (LAC); <ul style="list-style-type: none"> <li>- Key Stage 2 to 3</li> <li>- Key Stage 4 – post 16 to include further education/employment</li> </ul> </li> </ul> <p>This will include the transition to a new school placement</p> <hr/> <ul style="list-style-type: none"> <li>• Children with statements of SEN and/or a disability have formally documented transition plans which relate to their provision from age 14 onwards (including into Adult Services, if appropriate)</li> </ul> <hr/> <ul style="list-style-type: none"> <li>• Children with statements of SEN and/or a disability entering year 5 in September 2011 have a formally documented transition plan from the age of 10</li> </ul>	<p>N/A</p> <hr/> <p>N/A</p> <hr/> <p>N/A</p>	<p>100%</p> <hr/> <p>100%</p> <hr/> <p>50%</p>
NG6	Number of targets achieved in the Child & Family Poverty Strategy	N/A	53% (8 out of 15)
NG7	<p>Delivery of Tiers 1 and 2 of the Child and Adolescent Mental Health Services (CAMHS) action plan</p> <ul style="list-style-type: none"> <li>• Effectiveness of CAMHS</li> </ul>	15 (out of 16) (2010)	16

<b>KEY PRIORITY 2</b>	<b>IMPROVING READINESS FOR SCHOOL</b>
<b>WHY IS THIS A PRIORITY?</b>	<p>Research confirms that early intervention is vital in setting the foundations for future learning and life chances. The Borough's high deprivation rates and large early achievement gap measured at Early Years makes the focus on improving the readiness for learning imperative.</p> <p>When they enter school, children from more disadvantaged backgrounds have less well developed range of skills, for example speech, language and communication skills, and limited experience in terms of diet, exercise, availability of books and activity outside the home. This negatively impacts on their ability to learn and to achieve.</p>
<b>OUTCOMES</b>  <b>WHAT WILL BE DIFFERENT IN THE NEXT 12 MONTHS?</b>	<ul style="list-style-type: none"> <li>• All children and families have access to high quality integrated and co-ordinated services</li> <li>• An increased number of children enter school with the relevant skills, e.g. language and communication skills, to enable them to learn</li> <li>• An increased number of families access the services they need at the right time</li> </ul>

<b>ACTIONS</b>	<b>WHAT ARE WE GOING TO DO?</b>	<b>BY WHEN</b>	<b>LEAD</b>
• Embed effective links between early years settings and schools		March 2012	Trevor Fox
• Target families eligible for the 2 year old pilot and 3-4 year old flexible entitlement to ensure take up		March 2012	Bob Adams
• Deliver the joint commissioning project to implement an integrated service delivery model for speech, language and communication across the borough		March 2012	Karen Kenton
• Roll out and implement the learning from the City Region Pilot		September 2011	Emma Metcalfe
• Extend the Healthy Child Programme for all 0-5 year olds		December 2011	Karen Kenton
• Develop Health Visiting Strategy (Call for Action) and implementation plans to strengthen Health Visiting Services		March 2012	Karen Kenton
• Provide high quality parenting support programmes		March 2012	Julie Hayes
• Support families to learn together by delivering 'Family Learning' programmes		March 2012	Cindy Drinkwater

## HOW WILL WE KNOW WE HAVE BEEN SUCCESSFUL?

ID	Measure	Baseline	Target (2012 unless stated)
RS1	Early Years Profile		
	<ul style="list-style-type: none"> <li>Narrowing the gap between the lowest achieving 20% in the Early Years Foundation Stage Profile and the rest</li> <li>Early Years foundation stage attainment (%)</li> </ul>	34.8% (2010) 53% (2010)	32% 55%
RS2	Increased uptake of flexible entitlement	93% (2010)	95%
RS3	Number of families receiving 5 core contacts as part of Healthy Child Programme	N/A	98%
RS4	The prevalence of breast feeding at 6-8 weeks	28.7% (2009)	40%
RS5	Levels of childhood obesity at reception <ul style="list-style-type: none"> <li>Obesity among primary school age children in reception year</li> </ul>	9.1% (2010)	9.0%
RS6	Levels of smoking during pregnancy <ul style="list-style-type: none"> <li>Smoking at the time of delivery</li> </ul>	22.09% (2010)	19.63%
RS7	A service delivery model for Speech, Language and Communication is in place and joint commissioning plans are implemented	N/A	95% actions for 11/12 implemented
RS8	Increased percentage of early years settings achieve Outstanding or Good report from Ofsted	78.6% (22 out of 28) (2010)	% increase year on year
RS9	Service delivery model for health visiting in place, including a trajectory to increase the number of Health Visitors by 2015	N/A	Trajectory in place

KEY PRIORITY 3	ENABLING YOUNG PEOPLE TO MAKE POSITIVE LIFESTYLE CHOICES
WHY IS THIS A PRIORITY?	<p>There is a wide range of well developed opportunities for participation and volunteering. There is also a wide range of activities available for young people although these are not always sufficiently well advertised.</p> <p>The under-18 conception rate has reduced slightly but within some of our most deprived communities the rate is double the national average. There is also a steady rise in indicators relating to problem drinking amongst our young people with one of the highest hospital admission rates linked to alcohol in the country. The impact of alcohol misuse directly links to other risk taking behaviours. Levels of tobacco and drug use are also a concern.</p>
<p>OUTCOMES</p> <p>WHAT WILL BE DIFFERENT IN THE NEXT 12 MONTHS?</p>	<ul style="list-style-type: none"> <li>• Young people have a range of opportunities to contribute to their communities and to influence decision making</li> <li>• Uptake of sexual health services is increased and improved</li> <li>• Teenage pregnancy figures continue to reduce</li> <li>• Levels of under-age drinking and the numbers of hospital admissions for alcohol related issues are reduced</li> <li>• Numbers of first time entrants into the Criminal Justice System are reduced</li> <li>• Numbers of young people participating in positive activities continues to increase</li> <li>• Young people have access to health services in relevant venues and at a relevant time</li> <li>• Obesity levels for children in year 6 will have reduced</li> </ul>



ACTIONS	WHAT ARE WE GOING TO DO?	BY WHEN	LEAD
<ul style="list-style-type: none"> <li>Implement the teenage pregnancy and sexual health plans and increase the number of young people that use sexual health services</li> </ul>	March 2012	Andrea Dutton	
<ul style="list-style-type: none"> <li>Improve the promotion of positive activities for young people</li> </ul>	March 2012	Ed Kelly	
<ul style="list-style-type: none"> <li>Schools deliver effective Personal Social Health and Education (PSHE) for all young people</li> </ul>	March 2012	Sue Hackett	
<ul style="list-style-type: none"> <li>Children's Trust Board will ensure that the borough-wide tobacco strategy details and implements actions focussing on children and young people</li> </ul>	March 2012	Lisa Barker Michelle Loughlin	
<ul style="list-style-type: none"> <li>All services implement the Anti-Bullying strategy</li> </ul>	March 2012	Sue Hackett	
<ul style="list-style-type: none"> <li>The Lead Group will receive quarterly progress reports on actions to reduce tobacco, alcohol and drug use from relevant Partnerships and ensure appropriate actions are taken</li> </ul>	March 2012	Tracy Ginnever Michelle Loughlin	
<ul style="list-style-type: none"> <li>The Lead Groups will receive quarterly reports on accidents to children and young people and road accidents involving children and young people and ensure appropriate actions are taken</li> </ul>	March 2012	Malcolm Allan	
<ul style="list-style-type: none"> <li>Implement a recovery plan for childhood obesity to reduce levels measured at year 6</li> </ul>	March 2012	Andrea Dutton	
<ul style="list-style-type: none"> <li>Action plans within the Skills Strategy are implemented</li> </ul>	March 2014	Gary Kelly	

## HOW WILL WE KNOW WE HAVE BEEN SUCCESSFUL?

ID	Measure	Baseline	Target (2012 unless stated)
PL1	Numbers of young people involved in positive activities (Youth Service, Link4Life and School Council)		
	• Number of young people in 13-19 cohort contacted compared to borough 13-19 population	3,967 (25%) (2011)	3,885 (20%)
	• Volume of young people contacted who became a participant	2,380 (15%) (2011)	2,331 (12%)
	• Effective School Council Status	20% (2011)	40%
	• SHOKK gym visits (aged 8-16 yrs)	22,877 (2010)	23,646
	• Holiday at Home programme - percentage take up of activities	65% (2010)	70%
	• Numbers of attendees on SUNSPORT programme	48 (2010)	48
	• Number of attendees at Saturday Klubs	23 (2010)	46
PL2	Number of children and young people having an emergency admission to hospital as a result of unintentional and deliberate injury	151.5 (2010)	145
PL3	Reduction in Teenage Conception rates	47.7 per 1000 (2009)	30.7 per 1000
PL4	Chlamydia screening • Prevalence of chlamydia in under 25 year olds (Screening)	16.1% (4649 screened) (2010)	35% uptake - (10,925)
PL5	Numbers of first time entrants to the Youth Justice System • Reduce the number of first time entrants to Youth Justice System aged 10-17	342 (2010)	335
PL6	Level of childhood obesity at year 6	19.24% (2010)	16.02%
PL7	Number of hospital admissions for alcohol related incidents • Rate of hospital admissions per 100,000 for alcohol related harm	2040.67 (2010)	1836.60

KEY PRIORITY 4	SKILLS IMPROVEMENT	
WHY IS THIS A PRIORITY?	<p>Raising the skill levels of our residents has the potential to transform our borough. The key challenge facing Rochdale's economy and people is its low skills base. Despite improvements in skills at all levels for adults, the borough is still home to a high proportion of residents with no qualifications and low qualifications, reflected in lower performance against Greater Manchester and national averages at every level. The proportion of the population with higher-level qualifications is significantly lower than Greater Manchester and national averages. Both these areas are considered high priorities within this strategy.</p> <p>Despite our best efforts we are not closing the gap in improving attainment for those from vulnerable groups pre-16 and this remains a high priority. There is a clear need to intensify and accelerate efforts to address the skills gap.</p>	
<p>OUTCOMES</p> <p>WHAT WILL BE DIFFERENT IN THE NEXT 12 MONTHS?</p>	<ul style="list-style-type: none"> <li>• Raise employment levels</li> <li>• Raise the income levels of Rochdale's residents</li> <li>• Increase the productivity of Rochdale's businesses</li> <li>• Attract new employers to the borough</li> <li>• Improve the health and well-being of our residents</li> <li>• Improve how our families function and reduce child poverty</li> </ul>	

ACTIONS	WHAT ARE WE GOING TO DO?	BY WHEN	LEAD
<ul style="list-style-type: none"> <li>• Implement and deliver the All Age Skills Strategy and action plan</li> </ul>		Review by March 2012	Sandra Bowness

KEY PRIORITY 5	WORKFORCE DEVELOPMENT AND INTEGRATED PRACTICE
WHY IS THIS A PRIORITY?	<p>Empowered and skilled people working together in supportive, responsive and well-managed organisations are key to making sure children, young people and their families are safeguarded and have the services and support they need to achieve their full potential.</p> <p>Effective integrated working is fundamental to improving outcomes for children and young people who have additional needs. Effective prevention, early recognition of difficulties and intervention are essential. Evidence shows that the most effective way of affecting change and supporting children and young people and their families is by establishing relationships with families and that the fewer professionals involved, the more positive the outcomes.</p>
<p>OUTCOMES</p> <p>WHAT WILL BE DIFFERENT IN THE NEXT 12 MONTHS?</p>	<ul style="list-style-type: none"> <li>• The Children’s Needs and Response Framework is embedded in practice</li> <li>• There is evidence of improved integrated working where fewer people work directly with the family</li> <li>• Safeguarding is a priority in all services working with children and young people</li> <li>• There is evidence of improved induction processes</li> </ul>



ACTIONS	WHAT ARE WE GOING TO DO?	BY WHEN	LEAD
<ul style="list-style-type: none"> <li>Implement and embed the Children's Needs and Response Framework and monitor governance arrangements of each agency</li> </ul>		March 2012	Malcolm Allan
<ul style="list-style-type: none"> <li>Build confidence of front line workers to broaden their role where appropriate</li> </ul>		March 2012	Janet Ainscow
<ul style="list-style-type: none"> <li>Refresh and re-launch the Information Sharing Protocols and encourage the breakdown of professional barriers</li> </ul>		December 2012	Chris Kelly
<ul style="list-style-type: none"> <li>Increase the use of CAFs</li> </ul>		March 2012	Malcolm Allan
<ul style="list-style-type: none"> <li>Review and implement the Workforce Strategy with particular emphasis on induction, integrated working and delivery</li> </ul>		Review by July 2011. Implement by March 2012	Chris McClelland
<ul style="list-style-type: none"> <li>Develop effective integrated working practices with agencies working with adults/families</li> </ul>		March 2012	Emma Metcalfe
<ul style="list-style-type: none"> <li>Ensure front line workers are able to demonstrate the core competencies and are able to respond effectively at Tier 1 and 2, for example in relation to CAMHS and Speech, Language and Communications</li> </ul>		March 2012	Janet Ainscow
<ul style="list-style-type: none"> <li>The Children's Trust Board will work closely with Rochdale Borough Safeguarding Children Board and the Partnership Agreement between the two Boards will be monitored</li> </ul>		March 2012	Malcolm Allan
<ul style="list-style-type: none"> <li>All adults working with children and young people will be CRB checked in line with government guidelines and will have access to the appropriate levels of Safeguarding training</li> </ul>		March 2012	Chris McClelland
<ul style="list-style-type: none"> <li>Skills and competency frameworks for specific areas such as speech, language and communication, mental health are in place</li> </ul>		March 2012	Karen Kenton

HOW WILL WE KNOW WE HAVE BEEN SUCCESSFUL?			
ID	Measure	Baseline	Target (2012 unless stated)
WD1	Numbers of CAFs	375 (2010)	750
WD2	Numbers of people who have accessed the Children's Needs and Response Framework course	1250 (2011)	2000
WD3	Use of induction framework <ul style="list-style-type: none"> <li>Number of childrens services/agencies who are using the Children's Workforce Development Council (CWDC) Induction Standards</li> </ul>	3 areas (2011)	7 areas
WD4	Numbers attending multi-agency safeguarding training	921 participants (2010)	1013 participants



## Appendix 1 Membership of Rochdale Borough Children's Trust Board

Independent Chair

Executive Director Children's Services (RMBC)

Executive Director Integrated Commissioning (PCT)

Chief Superintendent (GMP)

Chief Executive Officer (CVS)

Chief Executive Officer (Rochdale Connections Trust)

Director of Operations (RBH)

Managing Director (Link4Life)

Associate Director Children and Young People (PCT)

Deputy Director Public Health (PCT)

Service Director HMR CHC (Pennine Care NHS Foundation Trust)

Service Directors Children, Schools and Families (RMBC)

Senior External Relations Manager (JobCentre Plus)

Connexions Service Manager

CAMHS Directorate Manager

Non Executive Director (PCT)

Headteacher Secondary Schools

Headteacher Primary Schools

Headteacher Special Schools

Principal Sixth Form College

Principal Hopwood Hall College

Lead Member Children's Services

Opposition Spokesperson

Chair Rochdale Borough Safeguarding Children Board

## Appendix 2 Relationship with Rochdale Safeguarding Children Board

Rochdale Safeguarding Children Board holds Rochdale Children's Trust Board to account for their role in safeguarding and promoting the welfare of children as demonstrated by their commissioning and service planning activities.

Rochdale Children's Trust Board should be consulted by the Rochdale Safeguarding Children Board on issues which affect how children are safeguarded and their welfare promoted.

Rochdale Children's Trust Board is committed to developing commissioning processes and delivering effective services that ensure children and young people are safe and their welfare is secured. Rochdale Children's Trust Board will ensure that the Rochdale Safeguarding Children Board is formally consulted during the development of the Children and Young People's Plan. The work of the Lead Groups takes into account the safeguarding needs of children and young people.

The Independent Chair of the Rochdale Safeguarding Children Board is a participant observer on the Rochdale Children's Trust Board. The Chair reports on those areas identified by the Rochdale Safeguarding Children Board as requiring remedial action or intervention.

The Executive Director for Children's Services is a member of both Boards.



## Appendix 3 Lead Officers and Organisations

Name	Title	Organisation
Malcolm Allan	Chair	Children's Trust Board
Bob Adams	Childcare Development Manager	Rochdale Borough Council
Janet Ainscow	Learning and Development Manager, Performance and Transformation	Rochdale Borough Council
Lisa Barker	Health Improvement Team Leader	Rochdale Borough Council
Gillian Barratt	School Improvement Officer	Rochdale Borough Council
Laura Beesley	Sure Start Manager	Rochdale Borough Council
Sandra Bowness	Service Director, Learners and Young People	Rochdale Borough Council
Sue Brown	Service Director Schools	Rochdale Borough Council
Kate Chambers	CAF Co-ordinator	Rochdale Borough Council
Mike Cross	Youth Offending Team Manager	Rochdale Borough Council
Cindy Drinkwater	Family Learning Strategic Lead Officer	Rochdale Borough Council
Andrea Dutton	Public Health Programme Manager	Primary Care Trust
Cheryl Eastwood	Executive Director, Children's Services	Rochdale Borough Council
Trevor Fox	School Improvement Officer	Rochdale Borough Council
Sue Hackett	PSHCE Healthy Schools Manager	Rochdale Borough Council
Julie Hayes	Parenting Support Manager	Rochdale Borough Council
Tony Hilton	Performance and Strategy Manager Link4Life	Link4Life
Chris Kelly	Information Team Manager, Performance and Transformation	Rochdale Borough Council
Gary Kelly	Skills Transformation Lead	Rochdale Borough Council
Karen Kenton	Associate Director Integrated Commissioning - Children & Young People	Primary Care Trust
Peter Kilkenny	Deputy Managing Director Link4Life	Link4Life
Tony Lasan	Principal School Improvement Officer	Rochdale Borough Council
Michelle Loughlin	Public Health Consultant	Primary Care Trust
Chris McClelland	Connexions Manager	Rochdale Connexions
Emma Metcalfe	Extended Schools Programme Manager	Rochdale Borough Council



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April 2011