

HEALTH AND SOCIAL SERVICES DEPARTMENT

CHILDREN AND YOUNG PEOPLE'S PLAN 2016-2022

The Chief Minister
Policy Council
Sir Charles Frossard House
La Charroterie
St Peter Port

18th November 2015

Dear Sir

1. Executive Summary

- 1.1 On 4th January 2010, the Children (Guernsey and Alderney) Law, 2008 (referred to herein as “the Children Law”) came into force. Amongst other things, it put a duty on the Health and Social Services Department (“HSSD”) to prepare a Children and Young People’s Plan (referred to herein as “the Plan”) at least every three years.
- 1.2 The first Children and Young People’s Plan was approved by the States on 24th November, 2010 (Billet d’État XXIII). This was extended for three years by Resolution of the States on 11th December 2013 (Billet d’État XXIV). It is, therefore, due to expire on 31st December, 2016.
- 1.3 The new Plan proposed in this Policy Letter is attached at Appendix 1. In summary, it contains six Key Commitments supporting four Priority Outcomes for children and young people:
 - To ensure that they are included and respected;
 - To achieve individual and economic potential;
 - To be healthy and active; and
 - To be safe and nurtured.

The Plan identifies 33 actions over the next six years to deliver the Key Commitments and Priority Outcomes. The overarching vision is that implementing the Plan will create an integrated system providing the right help at the right time with the right outcomes for all children and young people.

- 1.4 In recognition that the principles underpinning the Children Law are those of collaborative and integrated working across agencies and with families, this new iteration of the Plan has been developed using just such an approach. Indeed, it has at its heart the transformation of service delivery so that the welfare of the Islands’ children is more effectively promoted in partnership with their family and

community. This has been reflected in a partnership approach at both political and agency level in the preparation of the Plan. Most crucially, the Plan has been developed in consultation with children and young people, their families, service providers and the wider community.

- 1.5 The new Plan is a six-year document that needs to be regularly reviewed and revised; it is intended to be a ‘living document’ that is subject to continuous engagement with children and young people and their families, and an annual review and consultation process. In accordance with the Children Law, it will be presented to the States for approval at least every three years.
- 1.6 The appended Plan sets out a strategic framework – or road map - for the provision of all services to children and young people, whether they are delivered by the public, private or third sector. In practical terms, the Plan guides all service providers to a vision for how services need to be transformed to a new model of delivery that has service users at its heart, and which is designed to meet their needs in both the short and longer term. If approved by the States, the Plan’s Priority Outcomes and Commitments will serve as a tool for setting criteria for the prioritisation of public resources.
- 1.7 The Plan sets out 33 actions to be undertaken over its six-year life. This Policy Letter does not seek to describe each of these in detail, but rather it identifies the key projects for implementation in 2016.
- 1.8 The HSSD was mindful that it did not wish to propose in this Policy Letter anything that would restrict or bind the new committees post-May 2016 to a particular governance structure. The Plan sets out **what** needs to be achieved, but **how** it should be achieved and **by whom** has to be determined in the context of the new governmental system. Nevertheless, the HSSD considered that it would be helpful to set out some principles and outline proposals for a governance structure, as guidance to the Policy and Resources Committee, as and when it comes to review its arrangements in this area.
- 1.9 While the States of Deliberation are the ultimate decision-maker on legislation, policy direction and resource allocation relating to the Plan, the HSSD endorses the recommendation of the Partnership Board (see paragraph 3.2 below) that the Plan is of such significance that it requires three things:
 - (i) prioritisation for resourcing by the new States as part of the new Policy & Resource Plan;
 - (ii) a dedicated political champion, who could be one of the members of the new Policy and Resources Committee;
 - (iii) the creation of a cross-committee, cross-sector governance structure.
- 1.10 This Policy Letter puts forward a possible governance structure, which proposes a new body that has been termed a ‘Children’s Executive’.

- 1.11 This Plan is one of the first strategies/plans to come forward after the States' agreement to adopt Public Service Reform (Billet d'État XVI September 2015) and it sits firmly within that context. The Public Service Reform Framework puts the emphasis on the delivery of desired outcomes through various programmes of service transformation and is a key enabler to achieving the Priority Outcomes and Commitments in this Plan.
- 1.12 There is an opportunity to use this Plan not only to create sustainable change in this generation, but also to establish a system that promotes best outcomes for the Islands' children that is affordable. Failure to grasp this opportunity will mean repeating the mistakes of the previous Plan and achieving no discernible or long-term change for children's outcomes.
- 1.13 The Plan, therefore, focuses on structural changes to realise its key objectives, and the cross-sector and multi-agency projects that will create transformation of children and young people's services in that context.
- 1.14 The Plan also focuses on those approaches that have a strong evidence base internationally, and which lend themselves to adaptation for the Islands' communities.
- 1.15 Fundamentally, over its proposed six-year life, the Plan is concerned with a 'whole system' transformational change to enable all children and young people to access the help they need to be able to enjoy the advantages of island life to the full. To achieve this will require not only changes in working practice, but also an investment of resources to support transformation, and to enable services to work more effectively and efficiently. This will deliver better outcomes for children, young people and families, and address the future negative financial and human costs that will be incurred without such transformational change.
- 1.16 The HSSD is grateful to the multi-agency Partnership Board, and the wider advisory group that has supported it, for producing this iteration of the Plan. Letters of support are also appended from the Education Department and Home Department, which have been represented on the Partnership Board.
- 1.17 The HSSD fully endorses the Plan and commends it to the States for their approval.

2. Introduction

- 2.1 On 4th January 2010 the Children (Guernsey and Alderney) Law, 2008 ("the Children Law") came into force. Amongst other things, it put a duty on the HSSD to prepare a Children and Young People's Plan ("the Plan") at least every three years. The primary objective of the Plan is to put in place a strategy for the provision of services to promote and safeguard the welfare of the children of Guernsey and Alderney and the families of those children.

- 2.2 The first Children and Young People's Plan was approved by the States on 24th November, 2010 (Billet d'État XXIII). This was extended for three years by Resolution of the States on 11th December 2013 (Billet d'État XXIV). It is, therefore, due to expire on 31st December, 2016.
- 2.3 The new Plan proposed in this Policy Letter is attached at Appendix 1. In summary, it contains six Key Commitments supporting four Priority Outcomes for children and young people, to ensure that they are included and respected; achieve individual and economic potential; are healthy and active; and are safe and nurtured. The Plan identifies 33 actions over the next six years to deliver the Key Commitments and Priority Outcomes. The overarching vision is that implementing the Plan will create an integrated system providing the right help at the right time with the right outcomes for all children and young people.

Consultation and Engagement

- 3.1 In recognition that the principles underpinning the Children Law are those of collaborative and integrated working across agencies and with families, this new iteration of the Plan has been developed using just such an approach. Indeed, it has at its heart the transformation of service delivery so that the welfare of the Islands' children is more effectively promoted in partnership with their family and community.
- 3.2 This has been reflected in a partnership approach at both political and agency level in the preparation of the Plan. Although the political responsibility for the preparation of the Plan rests with HSSD, it was decided from the outset that its development would be overseen by a Children and Young People's Partnership Board, comprising political members and the chief officers from HSSD, the Education and Home Departments, and the Youth Commission. (Letters of support from the Education and Home Departments for the Plan and for the proposals in this Policy Letter can be viewed at Appendix 2.)
- 3.3 In turn, the Partnership Board has been advised by practitioners from key services in the States and the third sector, led by a senior officer of the Policy Council and including HSSD, the Education Department, the Home Department, the Medical Specialist Group's Paediatric Services, the Office of the Children's Convenor, the Islands' Child Protection Committee and the Youth Commission, .
- 3.4 Most crucially, the Plan has been developed in consultation with children and young people, their families, service providers and the wider community. There were 334 responses to a public consultation; the 'Speak Up campaign generated the views of 373 Primary School children and 313 Secondary School children; Barnados was commissioned to obtain the views of those children and young people whose voice would otherwise have been hard to obtain; a Crowdcity platform provided a closed crowd website for professionals to generate and debate ideas for the Plan; and all stakeholders were given opportunities to input into the Plan and to refine its contents through workshops and presentations held in July and October 2015.

3.5 This unprecedented level of consultation and engagement has been key to the development of the Plan and will be a core element in how it will develop in future. The new Plan is a six-year document that needs to be regularly reviewed and revised; it is intended to be a ‘living document’ that is subject to continuous engagement with children and young people and their families, and an annual review and consultation process. In accordance with the Children Law, it will be presented to the States for approval at least every three years.

4. Legislative Context - The Children Law (2008)

4.1 Implementation of the Plan’s vision for all children will embed in working practices the intent of the Children Law, which came into force in 2010. The Children Law introduced the idea of a welfare-based, integrated model for responding to children in need, including children at risk of significant harm. The Children Law is based on a set of key principles which are reflected in the Priority Outcomes in the draft Plan, and which have at their core the idea that the welfare of the child is the *paramount* consideration – that is, that the welfare of our children and young people must be central to everything that the States does in planning and delivering services to support them into adulthood.

4.2 Section 28 of the Children Law provides that the Plan should set out a strategy for the provision of services to promote and safeguard the welfare of the children of Guernsey and Alderney (aged under 18 years), together with their families. The Law sets out that this should relate to specific matters, as set out below and cross-referenced with the Plan’s Priority Outcomes:

- | | |
|---|---|
| (i) physical, emotional and mental health | (Healthy and Active; Safe and Nurtured) |
| (ii) protection from harm and neglect | (Safe and Nurtured) |
| (iii) education, training and recreation | (Achieve) |
| (iv) contribution to society | (Included and Respected) |
| (v) social and economic well-being | (Achieve; Included and Respected) |

4.3 The Children Law establishes the principle of providing integrated help and support at the earliest possible point for children and their families to prevent their problems from worsening and, therefore, seriously affecting the life chances of those children in the future. This is sometimes referred to as early intervention and prevention and is encompassed by the term ‘early help’ for the purposes of the new Plan. Early help is embedded into the Plan’s Key Commitments.

4.4 The Children Law applies to all children in Guernsey and Alderney, its principal purpose being to ensure suitable provision is made to protect children from harm but also to “*promote their proper and adequate health, welfare and*

development.” Consequently the Plan covers the generality of this provision for all children and young people irrespective of their level of need, while also providing a framework for those requiring additional support. The Plan also includes within its scope those vulnerable young people who require additional support beyond age 18 to ensure a smooth transition into adulthood; in particular, for care leavers and young people up to age 25, who have complex educational, health and social care needs.

- 4.5 At the time of writing, an independent review of the implementation of the Children Law, commissioned by the Scrutiny Committee had just been published¹. As it is intended that the Plan will be a ‘living document’, kept under regular review, any response that may be required to the review findings can be incorporated for implementation within the next iteration of the Plan.

5. Policy & Strategic Context

- 5.1 The appended Plan sets out a strategic framework – or road map - for the provision of all services to children and young people, whether they are delivered by the public, private or third sector. In practical terms, the Plan guides all service providers to a vision for how services need to be transformed to a new model of delivery that has service users at its heart, and which is designed to meet their needs in both the short and longer term.
- 5.2 If approved by the States, the Plan’s Priority Outcomes and Commitments (reproduced in Figure 1 below) will serve as a tool for setting criteria for the prioritisation of public resources. These outcomes are underpinned by performance targets against which success can be then measured for any provider of services to children and young people seeking public funding.

Six Key Commitments:

1. We will ensure that the voices of children and young people are at the heart of everything we do.
2. We will focus resources on early help and preventing problems getting worse for children, therefore reducing the numbers who then have high levels of need.
3. We will tackle inequality of access to help and support, including the impact of low income that disadvantages some of our children and young people and their families.
4. We will get better at sharing information and working more closely in partnership with each other and with children and families.

¹ Please see <http://www.gov.gg/article/135203/Children-Law-Report-Released> for information about this review.

5. We will improve our data collection and IT systems so that we have an evidence base about the nature and level of need, and can use our resources wisely.
6. We will improve communication to make the Plan more relevant - a living document – and resource it properly.

Four Priority Outcomes:

Be Safe and Nurtured: *We want to ensure all children and young people are protected from abuse, neglect or harm at home and in the community, have nurturing relationships that build their emotional resilience and engage in safe behaviour.*

Be Healthy and Active: *We want all children and young people to have the highest possible standards of physical and emotional health and to lead active lives that promote their long term health.*

Achieve individual and economic potential: *We want all children and young people to achieve their full potential and to be supported in the development of their skills, confidence and self-esteem to enable them to achieve as much independence and financial security as possible.*

Be Included and Respected: *We want to ensure that all children and young people have help to overcome inequalities and are valued members of their communities. This means having a voice in decisions that affect them and being supported to play an active and responsible role in all aspects of their lives.*

Figure 1: Key Commitments and Priority Outcomes

States' Strategic Plan

- 5.3 The Plan is consistent with the strategic aims of the current 2013-2017 States Strategic Plan (Billet d'État VI, March 2013), in particular relating to the aim to protect and improve “*the quality of life of Islanders*” and the stated requirement for “*all people having opportunities and support where needed, to enable them to reach their full potential.*” The Plan further supports the objectives in the States Strategic Plan (developed in the Social Policy Plan which forms part of the States Strategic Plan) for an “*...active and engaged citizenship*”; and for “*equality of opportunity, social inclusion and social justice*”; and the key themes of “*Working with the third sector*” and “*Focusing on prevention rather than reactive crisis management.*”
- 5.4 The key policies and strategies that are most relevant to the Children and Young People’s Plan are detailed below.

Disability & Inclusion Strategy

- 5.5 There is a clear relationship between the Plan and the aims of the Disability and Inclusion Strategy (Billet d'État XXII, November 2013) to improve the quality of life of Islanders with disabilities and their carers through improving opportunities for participation; promoting more positive and inclusive attitudes towards disability in the community; and challenging instances of disadvantage facing those with disabilities and their carers.
- 5.6 The Disability and Inclusion Strategy specifically charged the Children and Young People's Plan with the review and development of services for disabled children and their carers; and, through the consultation processes, groups such as the Guernsey Disability Alliance and Wigwam have been effective advocates for families with disabled children. In particular, the consultation highlighted the difficulties in disabled children transitioning from childhood into adulthood; a theme that also came through strongly in the consultation on the Supported Living and Ageing Well Strategy ("SLAWS") (see paragraphs 5.9 - 5.10 below).
- 5.7 Within the Plan there are four specific action areas targeted at improving inclusion and participation of disabled children and young people; and one for providing support to carers. In addition, children with additional support needs will be able to access a 'one stop shop' for referrals and coordinated planning to meet their support needs through the Multi-Agency Support Hub (MASH) (see paragraphs 6.5- 6.9 for a full description.)
- 5.8 The creation of the lead professional and 'team around the child' initiative/ approach (see paragraph 6.8) means that all children with disabilities and enduring support needs will also have a multi-disciplinary plan that is adapted as they grow older to reflect their changing needs, and to manage key points of transition in their lives.

Supported Living and Ageing Well Strategy (SLAWS)

- 5.9 The SLAWS has been developed concurrently with the Children and Young People's Plan and considers how the Islands must transform health and social care provision in response to *inter alia* an ageing population, increasing complexity of needs, and rising public expenditure on long-term care and support services. Just as the Children and Young People's Plan sets the agenda for service transformation for children and young people, so the SLAWS will set the direction for the transformation of adult health and social care services. Both are underpinned by a focus on the reform of the current models of health and social care so that they become more responsive to service user needs, deliver better outcomes for service users and are financially sustainable.
- 5.10 Both the Children and Young People's Plan and the SLAWS share a commitment to a person-centred approach to service development and delivery, including

effective transition from childhood to adulthood for those individuals with enduring health and social support needs. The Plan is also foundational in seeking to address at an early stage those poor lifestyle choices and social behaviours that, left unaddressed, can lead children, later in life, to become adults with long-term care needs, e.g. smoking, unhealthy eating and drug and alcohol abuse. As the effectiveness of the Plan will be reflected in the future demands placed on the education, health and social care systems, there are considerable incentives to ensure that investment is made in the right services for children and young people to avoid significant costs being incurred later in their lives.

Mental Health & Well-being Strategy

- 5.11 This comprehensive research document published in 2012 (Billet d'État III, February 2013) set the direction for delivery of mental health services with a three strand approach of promoting mental health and wellbeing; supporting people to access information and support about mental wellbeing and emotional resilience so that they can manage their lives better; and providing accessible, appropriate and multi-agency intervention support services where required.
- 5.12 The priorities for implementation are currently being reviewed and an action plan is being developed to take this further forward.
- 5.13 The Plan responds to the clear message from children and young people in the consultation that they want early counselling and emotional support at school. Young people expressed how difficult it can be to be different and that they were worried about bullying. The Plan has an action to make sure that children and young people can easily access emotional health and wellbeing services in schools and other youth settings of their choice to promote their coping skills (resilience).
- 5.14 As another of the actions identified in the Plan, the Education Department is developing an Emotional Wellbeing and Mental Health in Schools Strategy.
- 5.15 A further action is to build on the work being undertaken in schools and in the community to engage children and young people in addressing bullying and celebrating difference.

Drug & Alcohol Strategy

- 5.16 The Bailiwick's Drug and Alcohol Strategy (2015 – 2020) (Billet d'État I, January 2015) focuses the efforts of the States and its community partners on tackling drug and alcohol misuse. This includes a commitment to reducing the number of adults and children that are using drugs and/or alcohol at levels that are damaging to themselves and others.
- 5.17 The Children and Young People's Plan echoes this with a commitment to tackle the consequences of under-age drinking and drug misuse by, for example, promoting an integrated, multi-agency response focusing on early help.

- 5.18 In particular, the Plan identifies the negative impact of drugs and alcohol on the lives of many of our children, both in terms of the impact on the quality of family life for children whose parents are misusing substances, but also on children and young people who are themselves accessing alcohol and drugs at an early age. This is acknowledged in both the ‘Safe and Nurtured’ and the ‘Healthy and Active’ Outcomes and their underpinning action plans, although the impact of alcohol and drug dependency can be seen to impact on every aspect of some children’s lives.
- 5.19 There is a clear relationship between the Drug and Alcohol Strategy and the actions and outcome measures driven by it. These have not been repeated in the Plan, but will inform its work streams and its success criteria². For example, the Multi-Agency Support Hub now links directly with the Drug and Alcohol Service, as will the ‘Strengthening Families’ and the ‘1001 Days’ projects (see paragraphs 6.5 - 6.21.)

Domestic Abuse Strategy

- 5.20 The Domestic Abuse Strategy (Billet d’État XXIII, December 2015) focuses on the fundamental principle that all people living within our community have a right to be safe from domestic abuse in the Bailiwick of Guernsey. The Strategy and underlying Action Plan have four strands – Prevention; Protection and Justice; Provision of Support; and Partnerships.
- 5.21 Of particular relevance to the Plan is that the Strategy seeks: *“To put in place protocols to identify and address the needs of families/individuals who are experiencing a combination of domestic abuse, mental ill health and drug/ alcohol misuse. These issues when found together present a particular safeguarding risk for children and young people living within these households.”* Actions to implement the Strategy include preventative measures in schools through domestic abuse education at four key points in the curriculum and community settings, plus early intervention in relation to teenagers who may be experiencing abuse in their own intimate relationships.
- 5.22 This work is entirely consistent with the Plan, which recognises that children living with domestic abuse are likely to be very vulnerable and in need of particular support and protection.
- 5.23 The Plan seeks to provide targeted support for such children through the Multi-Agency Support Hub and early help provision through family support programmes.

² For example, a reduction in unintended teenage pregnancies and admissions to A&E related to preventable injuries in young people.

Sexual Health Strategy

- 5.24 The Sexual Health Strategy has yet to be considered by the States, but it will recommend a holistic approach to the provision of sexual health services where education and health promotion programmes take an equal footing with the provision of clinical services. With relevance to the Plan, the Strategy will focus on reducing unintended teenage pregnancies with the provision of a full range of contraceptive services, free at the point of access, to young people. A reduction in undiagnosed chlamydial infections, with the aim of preventing the long-term complications of these undiagnosed infections, is also a key strategic aim.
- 5.25 The Sexual Health Strategy will require resourcing, but its outcomes are closely aligned to those of the Plan and will focus on improving the health and wellbeing of young people.

Healthy Weight Strategy

- 5.26 The Healthy Weight Strategy and associated action plan has yet to be considered by the States and at the time of writing was subject to a public consultation process. The long-term vision is for Guernsey and Alderney to be environments where healthy eating and physical activity are accessible, affordable and a part of everyday life.
- 5.27 It is known that obesity is an issue for our population and that this starts in childhood. Excess weight (overweight and obesity) in children often leads to excess weight in adults, and this is recognised as a major determinant of premature mortality and avoidable ill-health. There is a need to encourage our children and young people to lead more active lifestyles and to encourage healthy eating.
- 5.28 The Plan includes support for increasing the number of schools achieving the Guernsey Healthy School awards; and for increasing activities available to children and young people, particularly in winter months. These actions will require resourcing as and when they are prioritised for action following future review of the Plan priorities.

Child Health Strategy

- 5.29 The Plan identifies a need for the development of a Child Health Strategy, which will focus on identifying the priorities for the implementation of an integrated and accessible physical health and wellbeing service.
- 5.30 A key priority for the Plan will be to explore any inequalities of access to Primary Care and Dental Care and rebalance any inequities.
- 5.31 Injuries are a leading cause of hospitalisation and are linked to premature mortality for children and young people. The Plan contains an action to explore reasons for A&E admissions relating to unintentional or preventable injuries locally and to develop plans to address these.

- 5.32 Ensuring the health of our children and young people should also include a strategy to protect them from the consequences of vaccine preventable diseases.

Tackling Inequality of Access to Services

- 5.33 Although there is no longer an established States Anti-Poverty Strategy, each of the strategies referenced above will, in some way, be seeking to address issues that can be either the causes or the symptoms of families struggling with low incomes. The Plan is no different; and it was striking how often, through the consultation process, issues associated with poverty arose.

- 5.34 The Social Welfare and Benefits Implementation Committee (“SWIBIC”) is seeking to develop a single, comprehensive social welfare benefits model with an objective rationale for the determination of assistance that is both socially just and financially sustainable, with particular consideration of groups including families on low incomes and those with disabilities.

- 5.35 For its part, the Plan contains a commitment to tackle inequality of access to services, including the inequality caused by the impact of low income. Specific actions relating to this are: to address the educational attainment gap for children living in low income families; children not being able to access school activities or dental care; and to investigate and subsequently seek to address the impact of charging policies on the equality of access to children’s healthcare services. There is also an action to target delivery of effective information, advice and guidance to those who are not in education, employment or training (NEETs).

Pre-school Education

- 5.36 The provision of entitlement to free pre-school education is a priority action identified in the Plan. High quality early education sits alongside health as an important determinant of children’s life chances. Emotional health, behavioural health and conduct problems, hyperactivity, peer relationships and positive behaviour (in young children) are all, according to the Foundation Year Information and Research, some of the key indicators that affect a child’s lifelong learning. Unless parents have the opportunity to socialise their children with peers at a very young age, some of these behaviours go unnoticed or unmanaged until they start school, by which time the gap in learning is only increasing.

- 5.37 Guernsey is currently lagging behind other jurisdictions in not providing a universal entitlement to pre-school education. England is looking to increase its entitlement from 15 hours a week to 30 hours; Scotland’s entitlement is 475-600 hours a year (approximately 12-15 hours a week over 38 weeks); and entitlement in Northern Ireland is between 12.5 and 20 hours a week.

- 5.38 In May 2014 (Billet d’État X), the States agreed, in principle, that from September 2016, there should be a universal entitlement to 15 hours pre-school education for all the Islands’ 3-4 year olds, based on the international evidence demonstrating better educational, social and economic outcomes arising from such an investment.

- 5.39 This evidence has established that effective pre-school education shows lasting beneficial effects. There are continuing effects of pre-school attendance and also of pre-school quality and effectiveness, particularly for later attainment in maths and science. Pre-school quality is also a significant predictor for all four social-behavioural outcomes at age 14 (two positive social behaviours: self-regulation and pro-social behaviour; and two negative behaviours: hyperactivity and anti-social behaviour)³.
- 5.40 In December 2015 (Billet d'État XX), the States agreed to introduce States-funded pre-school education from 1 January 2017, to be paid for from a combination of sources⁴.

6. Implementation - 2016 Priorities

- 6.1 As noted previously, the successful delivery of the Plan will be contingent on effective coordination of all services supporting children and young people and their families in the islands. The intent is that the Plan will be a 'living document', with an established governance process to ensure that it is championed both politically and professionally, can be integrated into business as usual operations, with regular performance reporting and scrutiny of success factors.

³ *Effective pre-school, primary and secondary education project (EPPSE 3-16+) How pre-school influences children and young people's attainment and developmental outcomes over time* Research brief June 2015 Department for Education DFE-RB455

⁴ Specifically the States resolved:

1. Notwithstanding their Resolutions on Article 15 of Billet d'État X of 2014, to direct that the introduction of States-funded pre-school education shall be deferred until the 1st of January, 2017 and further to direct that it shall be funded by a combination of:

- a) reprioritising the revenue expenditure of the Committee *for* Education, Sport & Culture; and
- b) reducing family allowance by £2.40 per child per week with effect from the 1st of January, 2017, in order to reduce States' expenditure by £1,264,000, and increasing the cash limit of the Committee *for* Education, Sport & Culture by £1,264,000 from 2017 onwards; and
- c) increasing the cash limit of the Committee *for* Education, Sport & Culture by not more than £192,000 in 2017 only and by not more than £187,000 in 2018 only; and
- d) restricting entitlement to States' funded pre-school education as far as is necessary in order not to exceed the revised cash limits of the Committee *for* Education, Sport & Culture provided that such restrictions should be based on the joint, rather than the individual, income of those with parental responsibility for a child;

and to direct the Committee *for* Education, Sport and Culture to publish no later than 30 September 2016 details of: the quality assurance framework to be applied to the provision of Pre-School Education; the targeted outcomes and benefits from the introduction of States-funded Pre-School Education; and the key performance indicators to be monitored demonstrating delivery of those targeted outcomes and benefits.

- 6.2 The Plan sets out 33 actions to be undertaken over its six-year life. This Policy Letter does not seek to describe each of these in detail, but rather it identifies below the key projects for implementation in 2016.

Participation and Advocacy

- 6.3 It has been a core principle of all of the work on the Plan that the voices of children and young people are heard in shaping the services provided to them and this remains one of the key commitments in the Plan and a key theme running through everything that we do.
- 6.4 As a priority in 2016, this includes developing increased participation of children and young people in shaping services for the future and providing advocacy to enable children to have a voice and to understand their options in the specific decisions affecting them, starting with children and young people who are subject to proceedings through a Child Youth and Community Tribunal.

Multi-Agency Support Hub (MASH)

- 6.5 The Multi-Agency Support Hub (“MASH”) provides a vehicle for operational coordination of services for children in need of additional support. This is currently a daily meeting of professionals from across health, social care, education, criminal justice and the voluntary sector, to share information about children where there are concerns about their welfare, and to agree how best to help. Although it is in its operational infancy, the MASH is already helping to reduce the numbers of children assessed as being at risk of significant harm because all agencies are working together more effectively in responding to children in need.
- 6.6 Without this coordinated approach to service delivery, the work of both States’ departments and the third sector has been disjointed, leading to duplication in some areas and gaps in others. The MASH needs to be developed to provide the operational hub through which services relating to children and young people with additional needs can be coordinated, as well as providing a focal point for data collection about the nature of child need across the Bailiwick to inform future provision, and the impact that early help and support has on children’s lives.
- 6.7 This presents a significant and important opportunity to ensure that services are joined-up and person-centred, providing value for money through both cost efficiencies and improved outcomes for service users, with a focus on providing early help.
- 6.8 The Plan includes an action to make the MASH a permanent feature, and to build the lead professional and ‘team around the child’ process to support it, based on a common approach to assessment, and the development of one single child plan. The child plan brings together an individual child’s health, education and social care needs into a single, coherent plan that all agencies defer and work to with the child and their family. This is a vital part of integrating services and building the

‘team around the child’ instead of disparate interventions, with the family having to access separate services and tell their story more than once. As noted previously, it will also ensure that children with disabilities have a clear plan for transition into adult services where this is required.

- 6.9 There will be a need for investment to implement the MASH to greater effect and to deliver better outcomes providing value for money. Additional staffing resources will be required for education, police and health services, as well as a ‘team around the child’ co-ordinator post. This latter role is to coordinate and review the child plans, embed new ways of working, produce activity and outcome performance information, and to support professionals. A business case will need to be developed to secure the funds to establish the MASH more fully.
- 6.10 A further related identified action is to ensure that child-focussed and partnership working are better embedded across all training and development offered to services that are in contact with children. Lead professional training can start in the MASH using existing budgets, but this needs to be further expanded to have a wider reach and to include much more of the workforce, with a view to developing a culture change in ways of working and ensuring this is embedded in practice.
- 6.11 A one-off cost of £20,000 has been identified to successfully deliver a training and development programme to support this aspect of the Plan. Future resourcing requirements would have to be scoped and identified after first having explored avenues for greater efficiencies and coordination to meet these costs from existing budgets.

Family Support – Parenting Programmes

‘Strengthening Families’

- 6.12 Following approval of an amendment from Deputies Brouard and Le Lievre when the current Plan was extended, the Children and Young People’s Partnership Board has researched and implemented measures adopted from United Kingdom programmes aimed at helping ‘troubled families’.
- 6.13 This is being called the ‘Strengthening Families’ initiative and involves identifying those families (containing children) with the most chronic and complex issues: invariably a mixture of intergenerational abuse and neglect, criminality, domestic abuse, unemployment, poor mental health and substance abuse. There will a history of different generations of children coming into care and poor educational outcomes.
- 6.14 Adapted from the evidence-based “Troubled Families” programme in England, the ‘Strengthening Families’ project is intended to provide intensive hands on intervention day after day – providing role models, problem solving, coaching, challenging and believing in the family’s ability to change over time – lasting for as long as three or more years. The project requires well-trained, supported and resilient staff; and current thinking is that this service will be commissioned from

the voluntary sector, with whom the States will work in partnership to co-produce long-term and sustainable change.

- 6.15 At the time of writing, proposals to that end were being worked upon.

'1001 Days'

- 6.16 The '1001 Days' programme focuses on the period of time between conception and the child reaching two years of age. Underpinned by a sound international evidence base, the '1001 Days' programme can be implemented as a universal service that aims for all babies to have the best start in life. Equally, it can be implemented as a targeted programme, identifying those parents to be and those babies most at risk of poor outcomes, focussed on offsetting the negative impact of known stressors such as domestic abuse or parental mental ill-health.
- 6.17 There is a significant amount of evidence about the negative impact of parental stress on the neurological development of babies in the womb, and during the first months of life. Physiological development at this stage can influence a child's whole life outcomes. Targeted intervention through the '1001 Days' programme is intended to result in improved life chances for those children, a reduction in the numbers of children removed from parental care, as well as in the numbers of children and young people presenting with severe mental health issues in the future.
- 6.18 The project links into the current provision of support to parents and draws together all of the existing provision sitting in different departments into one coherent offer linked to the development of targeted Family Centre support for children who are the most vulnerable to poor social, emotional and behavioural outcomes.
- 6.19 The project also targets young parents and those who have had children removed, to seek to prevent future family breakdown and to reduce the number of children who come into care as a result of abuse and neglect.
- 6.20 One child *not* taken into care as a result of successful family change, represents a minimum saving of approximately £120,000 in court and professional costs, and between £50,000 - £150,000 *per year* in care costs depending on needs. For children who are placed off-island, the cost of a residential placement can be as much as £285,000 per year.
- 6.21 A business case identifying the costs and benefits of this project is currently being prepared.

Emotional Health & Wellbeing

- 6.22 The Plan supports making emotional health and wellbeing services easier to access by integrating them in schools to promote children and young people's coping skills and resilience. Children and young people were very clear in the

consultation that they prefer to access early help and advice at school rather than anywhere else in the first instance.

- 6.23 A Mental Health and Wellbeing Coordinator has been appointed on a pilot scheme basis at The Grammar and Sixth Form Centre. The early indications are that this adds much needed focus, coordination and impetus to the raising of the whole-school's health and wellbeing outcomes.
- 6.24 There is a wide evidence base supporting this concept as a means of providing early intervention, promoting resilience, preventing emotional issues from escalating and thereby improving outcomes for young people, with consequent cost savings for all services. Pupil wellbeing support is not always widely available, meaningful or coordinated so that well-intentioned initiatives are not having the reach or impact that they could have under a coordinated and focussed approach. Similar schemes in the United Kingdom provide evidence that a Mental Health and Wellbeing Coordinator post is an integral part of secondary school infrastructure, improving both attendance and attainment for students.⁵
- 6.25 It is vital to stress that the further development of the mental health and wellbeing agenda is in no way a distraction from academic targets; it is rather a central component to achieving them. An increase of curricular and non-curricular physical activity, for example, is likely to raise academic results⁶. Thus a key objective remains to promote better the understanding that as academic attainment benefits wellbeing, so wellbeing benefits academic attainment: it is a virtuous circle.
- 6.26 This is a 'spend to save' initiative with expected reduction in referrals to services including the Child and Adolescent Mental Health Service (CAMHS), Occupational Health and the MASH, in addition to enhanced outcomes for children and young people across a range of indicators including academic achievement.
- 6.27 A business case will be prepared identifying the costs and benefits of this project.

Child Health Intelligence

- 6.28 The development of a Child Health Strategy, which focuses on the implementation of an integrated and accessible physical health and wellbeing service, forms an important part of the Plan. In order to deliver this, there is a need for much improved intelligence about children's health in order to identify key priorities.
- 6.29 It is important to stress that implementation of this part of the Plan will require appropriate resources focusing, in the first year, on ensuring there is the appropriate health intelligence and reliable data to distinguish between causes and

⁵ www.2020health.org Discussion Paper Jan 2015, *Head of Wellbeing: An essential post for secondary schools?*

⁶ (US DHHS, 2010)

symptoms. This can then be related to key success factors and an implementation plan developed, clearly linked into measurable improvements in child health and wellbeing.

- 6.30 This is the responsibility of HSSD. However, as with other aspects of the Plan it does have cross-sector and cross-departmental impact. The research planned for 2016 that will support the development of the Child Health Strategy include to investigate the level and reasons for hospital admissions and to analyse the accessibility of healthcare, including the cost of health and dental care.

7. Future Governance

- 7.1 Under the current arrangements, there is a statutory obligation in the Children Law for HSSD to present the Children and Young People's Plan to the States for approval at least every three years. This obligation will transfer to the new Committee *for* Health and Social Care from May 2016.
- 7.2 The provision of States' operational services relating to children and young people are likely to be predominantly delivered by departments that will have separate political oversight from at least three of the six proposed Principal Committees. This may introduce the potential for, as is the case now, divided responsibilities and difficulties in coordinating effort across organisational boundaries.
- 7.3 However, via the Policy and Resources Committee's mandate to coordinate States' activities, this Plan and the change in governmental structure provides the opportunity to ensure that, in the future, there is coordination and a simplified governance structure.
- 7.4 The HSSD was mindful that it did not wish to propose in this Policy Letter anything that would restrict or bind the new committees post-May 2016 to a particular governance structure. The Plan sets out **what** needs to be achieved, but **how** it should be achieved and **by whom** has to be determined in the context of the new governmental system. Nevertheless, the HSSD considered that it would be helpful to set out some principles and outline proposals for a governance structure, as guidance to the Policy and Resources Committee, as and when it comes to review its arrangements in this area.

Governance Principles

- 7.5 Governance is what enables organisations to stay focused on the right issues, ensuring that all their resources are focused on achieving their core purpose and that the right decisions are taken in the right way at the right time.
- 7.6 HSSD endorses the recommendation of the Partnership Board that the following principles provide the basis of what governance arrangements of services with children and young people should demonstrate, in line with the key commitments made in the draft Plan (see Figure 1) and the Six Core Principles of Good Governance adopted by the States in 2011 (Billet d'État IV, March 2011):

- **Child focussed:** The voice of the child must be heard and hardwired into the governance structure and process. The governance structure should be designed bottom-up; starting with the ‘team around the child’ so that ‘form follows function’.
- **Outcome focused and measured:** Governance structures must be designed around improving outcomes for children and young people. There has to be evidence-based reporting using the right metrics.
- **Learning:** Governance processes must be in place to ensure continuous learning and improvement.
- **Leadership:** There has to be visible leadership and a clear and transparent definition of role and responsibilities for both politicians and professional staff;
- **Ownership and accountability:** There has to be clearly delegated authority that empowers the right decisions to be made by the right people at the right time. There has to be ownership at all levels – it is never somebody else’s problem or responsibility.
- **Scrutiny and challenge:** There has to be mechanisms for appropriate scrutiny and challenge;
- **Engaged and engaging:** The ‘system’ must be inclusive, participatory and engage with children, families and the community. Communication must be EAST - Easy to understand, Accessible, Social, and Timely.
- **Working together:** Public, private and 3rd sector bodies must operate according to one purpose and with shared values.
- **Fit for purpose:** Governance needs to be simple, avoid bureaucracy, duplication and over-complication. It needs to be agile, flexible and proportionate to the Guernsey and Alderney context.

Recommended structure

- 7.7 While the States of Deliberation is the ultimate decision-maker on legislation, policy direction and resource allocation relating to the Plan, the Partnership Board has recommended that the Plan is of such significance that it requires three things:
- (i) prioritisation for resourcing by the new States as part of the new Policy & Resource Plan;
 - (ii) a dedicated political champion, who could be one of the members of the new Policy and Resources Committee;
 - (iii) the creation of a cross-committee, cross-sector governance structure.

7.8 Figure 2 puts forward a possible governance structure, which proposes a new body that has been termed a 'Children's Executive'.

Children's Executive

7.9 The Partnership Board advocates the creation of a Children's Executive, responsible for:

- leadership, coordination and monitoring of the delivery of the Plan's commitments and outcomes;
- commissioning delivery of the Plan actions;
- pooling resources for coordinated delivery and managing any pooled budget against agreed outcomes and success criteria (see Section 10);
- reporting on performance to the relevant political committees;
- holding partners to account for delivering outcomes and meeting targets;
- maximising opportunities for cross-agency working and sharing knowledge;
- maintaining the Plan as a living document and coordinating the review process;
- ensuring that the voices of children and young people are heard, including supporting, and meeting on a regular basis with a Children's Forum (or forums) (paragraph 7.16 refers).

7.10 A Children's Executive would likely comprise:

- an independent chair;
- a political lead member;
- a coordinating director of services;
- the lead officers for children's health and social care services, education and home affairs (police and youth justice);
- lead officers for each of the four priority outcomes of the Plan;
- a third sector representative.

7.11 The Children's Executive would need to be supported by a coordinating officer with the appropriate authority to work across departmental boundaries and to drive progress.

Corporate Parenting Board

7.12 There is a need for a Corporate Parenting Board to secure engagement across agencies regarding the issues affecting those children who are in care; to champion their rights and needs; and to make sure that the States fulfils its obligations as a parent to these children.

7.13 On an interim basis, this role has been performed by the Partnership Board but, in the future, it could be managed through the Children's Executive.

Islands Child Protection Committee (ICPC)

- 7.14 As defined in the Children Law, the Islands Child Protection Committee (“ICPC”) has a role to coordinate what is done by each person or agency in relation to safeguarding and promoting the welfare of the children of Guernsey and Alderney. It provides inter-agency guidance and considers undertaking reviews of serious cases.
- 7.15 In practice, in addition to these functions, the ICPC has, over time, adopted more of a scrutiny role to hold services to account for delivery of improved outcomes for children in keeping them safe. HSSD considers that a formal scrutiny role to bolster accountability is essential and should be the proposed focus of the ICPC moving forward.

Children’s Forum(s)

- 7.16 As noted earlier in this report, there are commitments in the Plan routinely to seek feedback on how services are working, to have ongoing consultation with children, young people and with the wider Island communities, as well as annual formal consultation on the progress and impact of the Plan. Within service areas, there will be re-designed processes to incorporate better participation and advocacy, as described in paragraphs 6.3 – 6.4.
- 7.17 The Partnership Board has recommended to the HSSD that there should be formalised mechanisms within the governance structure to ensure that children and young people have a clear voice; co-create the Plan in the future and are involved in decision-making. There needs to be clear mechanisms in place for children and young people to hold the Children’s Executive to account – through review of the Plan as it evolves, monitoring its outcomes, and challenging decision-makers on progress, ensuring that the Plan is a ‘living document’ and responding to needs. The HSSD fully commends this approach.

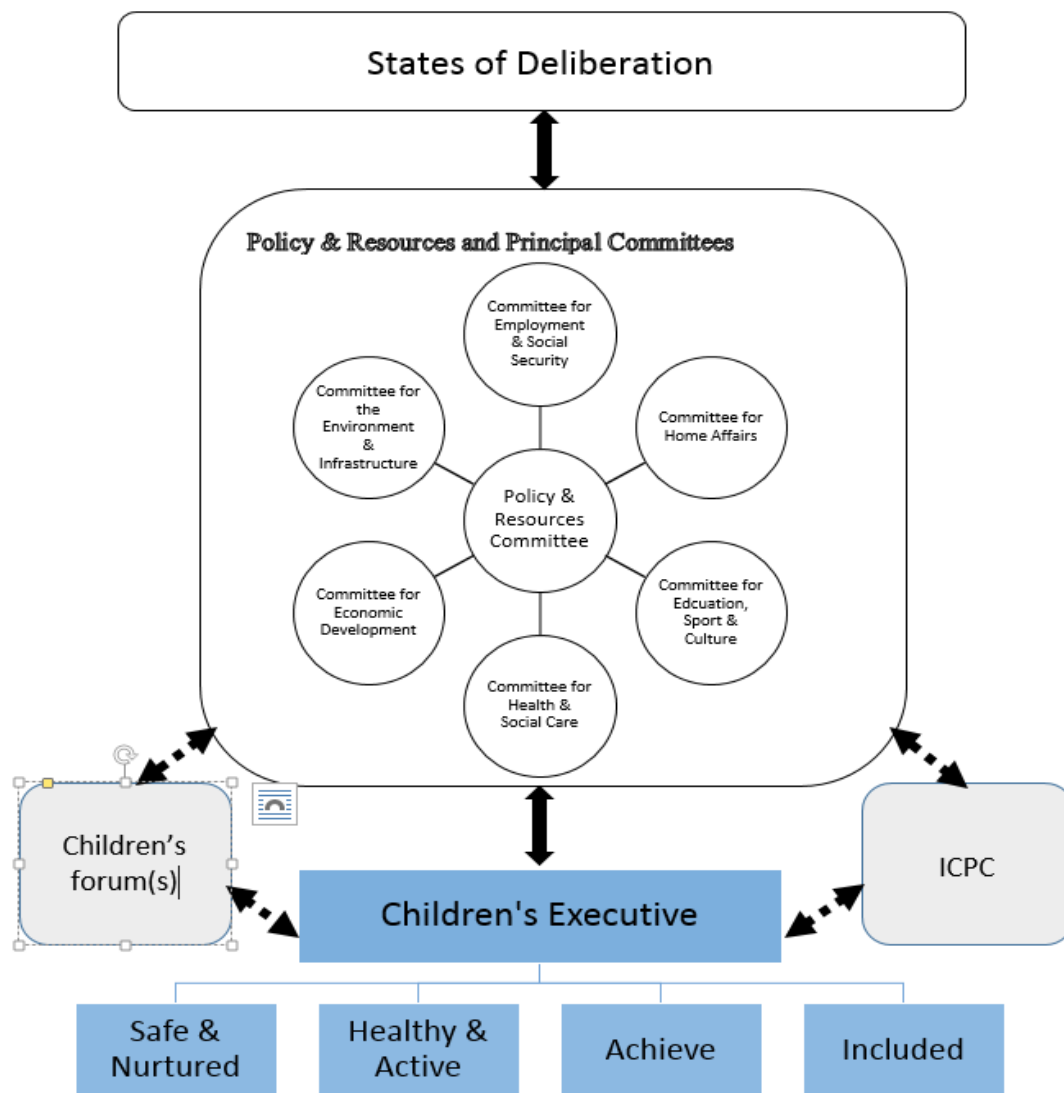


Figure 2: Suggested governance structure

8. Revisions to the Children Law

- 8.1 Although enacted in 2010, HSSD is conscious that there are parts of the Children Law that still remain to be brought into force, plus other amendments that have been identified in the light of operational experience.
- 8.2 HSSD will address these following receipt of the Scrutiny review mentioned previously (paragraph 4.5 refers). The future Committee *for* Health and Social Care will also need to give further consideration as to whether the Law should be amended once the governance arrangements referred to in Section 7 have been finalised.

9. United Nations Convention on the Rights of the Child 1989 (UNCRC)

- 9.1 The Plan has a commitment to work towards signing up to the United Nations Convention on the Rights of the Child 1989 (“UNCRC”) and reflecting these principles in everything that is done. The UNCRC is one of the world’s most widely recognised and adopted human rights conventions. Its basic principle is that children (everyone below the age of 18) are born with fundamental freedoms and inherent rights, but have specific additional needs because of their vulnerability. The Convention applies to all children, whatever their race, religion, ability; whatever their opinions and views; whatever their family make-up.
- 9.2 This will give the States an international framework for children’s rights that can be used as a benchmark for laws, policies and service provision in the Islands. Secondly it helps adults to see children and young people as individuals who have rights; rights to be protected, rights to be nurtured and to thrive, rights to engage in play and to participate, and rights to have a say in things that affect them.
- 9.3 The Children Law 2008 embodies a number of the rights from the UNCRC, including the following which are particularly relevant for this Plan:
- Children have the right to say what they think should happen, when adults are making decisions that affect them, and to have their opinions taken into account irrespective of their age or ability.
 - Governments should ensure that children are properly cared for, and protected from violence, abuse and neglect.
 - Children who cannot be looked after by their own family must be looked after properly, by people who respect their backgrounds.
 - Children who have a disability should have special care and support, so that they can lead full and independent lives.
 - Children who are accused of breaking the law should be dealt with wherever possible without the need to resort to court proceedings. Prison sentences for children should only be used for the most serious offences.
- 9.4 Work is already underway and nearing completion to submit the application for signing up to the Convention.

10. Delivering the Plan - Public Service Reform

- 10.1 This Plan is one of the first strategies/plans to come forward after the States’ agreement to adopt Public Service Reform (Billet d’État XVI, September 2015) and it sits firmly within that context. The Public Service Reform agenda seeks to ensure that public services are focused on customer needs; act in partnership as one organisation with common purpose; demonstrate that they represent value for money; and improve the measurement and management of performance.

- 10.2 Historically, a strategy/plan such as this would have been presented to the States identifying the resource implications for its implementation. Monies would be requested to fund its individual projects and to ensure that implementation of the strategy/plan was appropriately coordinated, but this has not delivered sustainable change.
- 10.3 For example, in 2011, the States agreed to provide £615,000 of annual funding to assist with the implementation of the current Plan. This was used to provide additional residential capacity for older children in care, and to support the delivery of the Secure and Flexible Outreach service in HSSD, to prevent children from coming into care. Whilst this investment has enabled children to be safely accommodated, it has not resulted in improved outcomes for those children and young people. This is because this intervention addresses only one part of the child welfare system, and one department's response to it – that is, the HSSD response to children in crisis.
- 10.4 What is clear from research evidence internationally is that improving children's life chances and long- term outcomes requires effective cross-agency working, and the type of whole system transformation that this Plan sets out. Historical approaches to funding within individual departments are not, therefore, appropriate.
- 10.5 By contrast, the Public Service Reform Framework puts the emphasis on the delivery of desired outcomes through various programmes of service transformation and is a key enabler to achieving the Priority Outcomes and Key Commitments in this Plan.
- 10.6 In the case of the Children and Young People's Plan, the Outcomes identified need to be delivered through several transformational programmes; namely:
- Transforming Education and Training Services
 - Transforming Health and Social Care Services
 - Transforming Justice and Equality Services
- 10.7 These programmes are truly cross-cutting and cannot – and should not be - identified with either an individual department/committee or an individual strategy. Rather these programmes are the means to deliver the policies and outcomes agreed upon through *multiple* strategies, as illustrated by Figure 3.

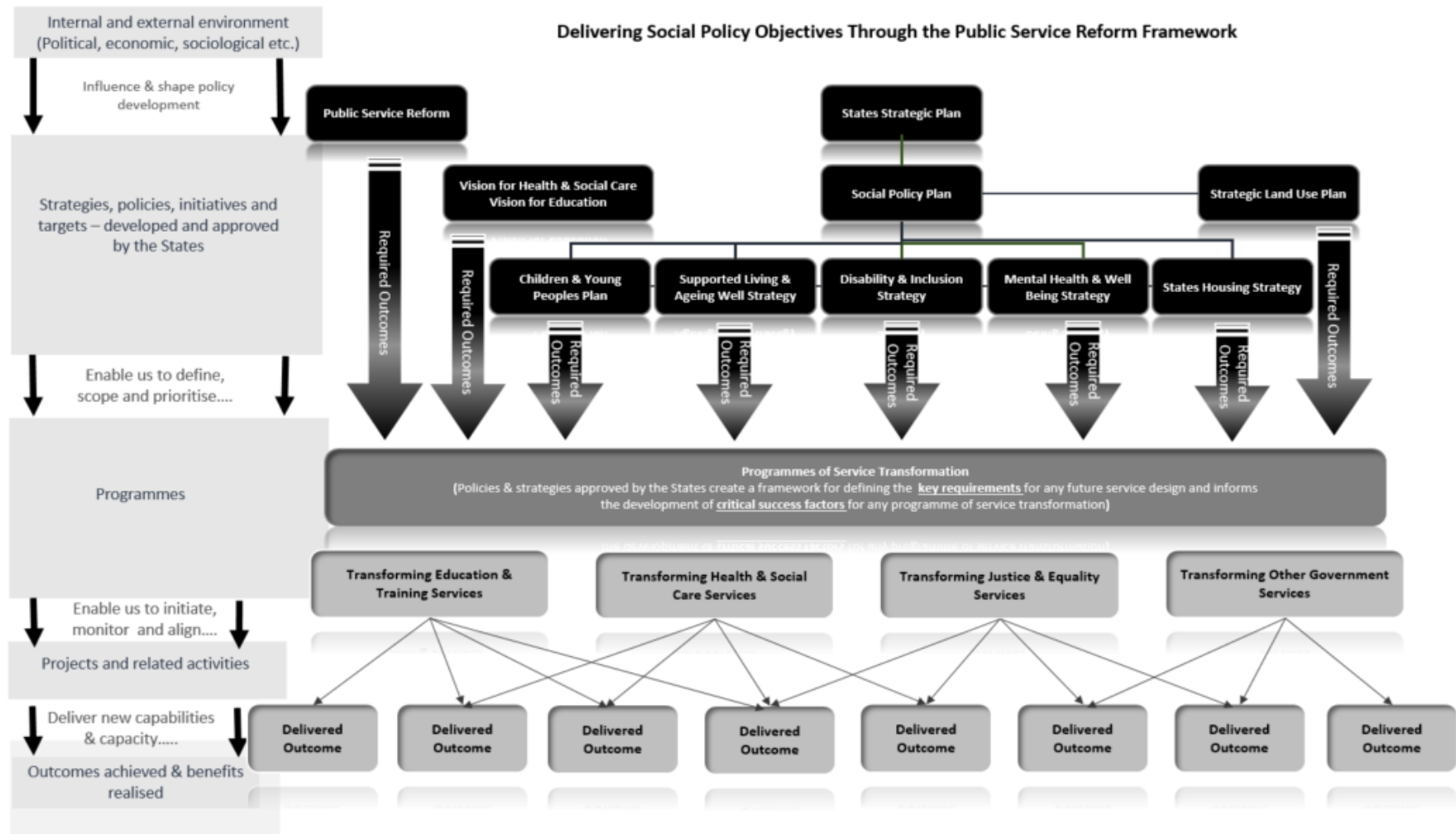


Figure 3 Delivering Social Policy Objectives through the Public Service Reform Framework

Funding

- 10.8 Some of the Plan's implementation costs will need to be met through reorganisation of existing budget allocations in 2016 and absorbed into general revenue budgets for future years, as Departments/Committees will seek to reflect the vision represented by the Plan in their own operational arrangements and future budget planning.
- 10.9 However, it is not possible to create transformational change without some investment in the resources required to deliver it. This means investing resources in commissioning from the voluntary sector, supporting the development of skills and knowledge in the wider children's services workforce, and providing some additional resources for 'double running', i.e. enabling new services to be set up and established whilst 'business as usual' is delivered (until existing service models can be moved to the new way of working and costs absorbed into those service budgets).

The Transformation and Transition Fund

- 10.10 The Transformation and Transition Fund has been created to support the type of transformational change outlined in the Plan. The establishment of this Fund recognised *"the significant investment required to deliver the public services of the future and the substantial policy agenda for the States."*⁷
- 10.11 To access the Fund, programmes and projects are required to demonstrate:
- Significant long-term transformation in the delivery of services;
 - Evidenced and measurable benefits; and
 - A return on investment (a 'reform dividend').
- 10.12 In the 2016 Budget Report (Billet d'État XIX, 2015), it was reported that the Policy Council and the Treasury and Resources Department considered that *"given the level of bids [for use of the Fund] and the uncoordinated nature of the proposals received, investment at this stage should be restricted in order to ensure that plans are properly developed and benefits considered"* before approval to proceed with individual initiatives was sought.
- 10.13 However, with relevance to the Plan, the States agreed to prioritise for funding from Transformation and Transition Fund:
- social policy development (to ensure it was appropriately resourced to initiate and coordinate corporate change);
 - the programme for transforming health and social care services.

⁷ 2016 Budget Report, Billet d'État XIX, 2015

- 10.14 In addition, the Policy Council and the Treasury and Resources Department also indicated that they would support limited investment in relation to the programmes to transform education and training services, and justice and equality services.
- 10.15 These programmes will now be developed in more detail, before they are presented to the States for its approval of specific projects. Therefore, for each of the initiatives set out in the Plan, there will need to be a clear articulation of the problem/issue to be resolved, the options considered for its resolution, the benefits of change (both financial and non-financial), the size of the ‘reform dividend’, how benefits will be measured, the cost of the change (including the cost of transition) and what the risks are to successful delivery.
- 10.16 The Treasury and Resources Department has been given delegated authority to approve funding of up to £750,000 for any one programme, or £1 million in respect of Transforming Health and Social Care Services. Upon receipt of an appropriately detailed business case or resource request, these monies will be released to enable suitably defined project proposals to be drawn up.

Social Finance

- 10.17 The ‘Framework for Public Service Reform’, highlighted innovation and continuous improvement as key enablers in helping the States address the provision of public services over the coming years. Innovation in the public service is about the creation and implementation of new processes, products, services and methods of delivery which result in significant improvements in efficiency and effectiveness. The States has committed actively to seek ideas and inputs from the wider community and further afield, as well adapting our organisational rules and processes to foster innovation.
- 10.18 One of the key means of increasing the availability of the fundamental underpinning capabilities that can sustainably influence innovation activity is in relation to its funding. Recognising the constraints of the States’ finances and the States’ commitment to innovation, the Children and Young People’s Partnership Board believes that it is appropriate to consider how various social finance models could assist with the implementation of certain aspects of the Plan.
- 10.19 Accordingly, the States will be asked to direct the Policy and Resources Committee, working with the Committee *for* Health and Social Care and other relevant committees, to oversee and coordinate an investigation into the use of alternative sources of social finance and to report back to the States as soon as possible with its findings.

Pooled budgeting

- 10.20 The greatest opportunity represented by the Plan is its focus on cross-departmental and cross-sector working in order to deliver transformed and more effective and efficient services – and thereby improved outcomes for children. This is a significant challenge.
- 10.21 Experience elsewhere, for instance from Children’s Trusts in the United Kingdom, shows that the most effective way in which to deliver a cross-sector transformation is through a pooled budget arrangement where services are commissioned against clear measurable outcomes for which providers are held to account by an overarching body with commissioning responsibility.
- 10.22 In Guernsey, the situation is different, in that while budgets are held by individual departments, they are all allocated from General Revenue rather than from disparate sources.
- 10.23 Nonetheless, the principles of Public Sector Reform infer major change to current, departmentally separate, approaches to budgeting; and given that this Plan is focussed on securing outcomes for children and young people that rely upon cross-departmental and multi-sectoral approaches to the development and delivery of services, it may be that budgeting needs to be tackled in a similar manner. This will be investigated further.

11. Conclusions

- 11.1 Public Service Reform is a ten-year plan for change, while this Plan has a six-year lifespan. During the Plan’s six-year lifecycle, detailed work will need to be undertaken to reshape existing services so that they work efficiently within the available funding and to reduce the pressures on the public purse.
- 11.2 There is an opportunity to use this Plan not only to create sustainable change in this generation, but also to establish a system that promotes best outcomes for the Islands’ children that is affordable. Failure to grasp this opportunity will mean repeating the mistakes of the previous Plan and achieving no discernible or long-term change for children’s outcomes.
- 11.3 The Plan, therefore, focuses on structural changes to realise its key objectives, and the cross-sector and multi-agency projects that will create transformation of children and young people’s services in that context.
- 11.4 The Plan also focuses on those approaches that have a strong evidence base internationally, and which lend themselves to adaptation for the Islands’ communities.

- 11.5 Fundamentally, over its proposed six-year life, the Plan is concerned with a ‘whole system’ transformational change to enable all children and young people to access the help they need to be able to enjoy the advantages of island life to the full. To achieve this will require not only changes in working practice, but also an investment of resources to support transformation, and to enable services to work more effectively and efficiently. This will deliver better outcomes for children, young people and families, and address the future negative financial and human costs that will be incurred without such transformational change.
- 11.6 The HSSD is grateful to the multi-agency Partnership Board, and the wider advisory group that has supported it, for producing this iteration of the Plan. Letters of support are also appended from the Education Department and Home Department, which have been represented on the Partnership Board.
- 11.7 The HSSD fully endorses the Plan and commends it to the States for their approval.

12. Recommendations

12.1 The States is recommended:

- (i) to approve the Children and Young People’s Plan 2016-2022, as set out in Appendix 1 of this Policy Letter;
- (ii) to note that, to deliver the Plan’s Priority Outcomes, where actions cannot be taken forward using existing resources, the resource requirements of the Plan will need to be considered as part of the development of the programmes of transformational change referred to in Section 10;
- (iii) to direct the Policy and Resources Committee, working with the Committee *for* Health and Social Care and other relevant committees, to oversee and coordinate an investigation into the use of pooled budgets and alternative sources of social finance and to report back to the States as soon as possible with its findings;
- (iv) to direct the Committee *for* Health and Social Care, working with the Policy and Resources Committee, to have regard to the suggested governance arrangements in Section 7 of this Policy Letter when determining how the Children and Young People’s Plan should be implemented and funded;
- (v) to direct all relevant committees, as part of the Children and Young People’s Plan, to identify the need for early intervention and early years’ services for children under the age of three, the consequential resource implications and the links between any such new services with those provided by the Committee *for* Education, Sport and Culture, including States-funded Pre-School Education;

- (vi) to direct the Committee *for* Health and Social Care to report back to the States on the results of those investigations in due course.

Yours faithfully

P A Luxon
Minister

H J R Soulsby, Deputy Minister
M P J Hadley
M K Le Clerc
S A James MBE
R H Allsopp OBE, Non-States Member
A Christou, Non-States Member