

# **Service Specification**

## **Provision of Key Workers for the Young Persons Team**

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## **1. Introduction**

### **1.1 Background**

- 1.1.1 The Council is committed to putting in place a specialist multi-agency and multi-disciplinary team to work with vulnerable or at-risk young people across the different levels of need/ support from early help to children and young people in care.
- 1.1.2 In August 2017, the Council began a pilot of a “Young Person’s Team” within its Child Protection Service. The team comprised two social workers, who worked exclusively with young people aged 13 to 16, and are subject to Child in Need (CIN) or Child Protection (CP) planning.
- 1.1.3 The pilot of the Young Person’s Team was evaluated in March 2018. At that stage the team were working with 31 young people (16 female; 15 male), 28 of whom remained with their families, with the other three having become looked after (two having been remanded). The evaluation of the pilot identified that working with this specific age group enabled social workers to build effective relationships with young people and their parents through frequency of visits and the ability to respond to crises. Close working relationships had also been developed with agencies such as the Police. While the pilot identified significant benefits to the intervention in terms of relationships and outcomes, it also identified some areas for improvement and further development, specifically:
  - 1.1.4 the need to protect caseloads, as when these rise it makes it harder to ensure the consistency and flexibility that is crucial to building effective relationships;
  - 1.1.5 the need for increased skills and expertise in relation to gangs and child sexual exploitation;
  - 1.1.6 opportunities to implement planned group-work activities, as opposed to “fire-fighting”/ crisis intervention;
  - 1.1.7 mediation skills to respond to risks of placement breakdown;
  - 1.1.8 improving staff knowledge and skills in relation to self-harm, sexual health, legal rights and consent, and social media.
- 1.1.9 While the pilot was successful, it did not prove possible to maintain it without additional resources, as the social workers who worked in the Young Persons Team were taken from the existing establishment, creating a reduction of capacity elsewhere, and increasing demand meant that it was not possible to maintain low enough caseloads to facilitate the relationship-based approach.
- 1.1.10 The evidence of need, research evidence and the result of the evaluation process indicated that there was a need to develop more focused, integrated and flexible services to work with at-risk adolescents, in order to prevent negative outcomes such as engagement in risky behaviours, exposure to exploitation, and to help young people to remain safe with their families. As a result resources have been made available to put in place the Young Person’s Team for a two year period. The new service has been shaped by reference to the the identified need in Wolverhampton and the findings of research into effective interventions for adolescent young people.

## 1.2 Current Provision

- 1.2.1 There is currently no specific service provision. There are general services provided through mainstream services such as Strengthening Families Hubs.

## 1.3 General Aims and Objectives of Service

- 1.3.1 The City Of Wolverhampton Council Plan 2019-24 sets out six priorities. Priority 1 relates to Children and Young People and ensuring they get the best possible start in life, so that they have the opportunities to fulfil their potential. The stated objectives in terms of children, young people and families are:
- a) Opportunity for a great start in life;
  - b) Education that fulfils potential;
  - c) Strengthening families where children and young people are at risk.
- 1.3.2 Developing a strong foundation by which children and young people can succeed, is fundamental to the Council delivering its Council Plan 2019-2024. The plan seeks to build this aspiration and resilience early, by supporting families, children and young people to be ready for school and to grow up in a safe and secure home in a thriving community. The Council will work with all partners, including education providers across the city, to ensure children and young people have the opportunity to learn and realise their ambitions as well as supporting disadvantaged or vulnerable learners to grow their skills and aspirations.
- 1.3.3 The Council will lead work across the city to develop and embed a 'culture of belonging' where all children and young people feel a part of their school and local community. The Council sees belonging as the link that runs through and across its support for disadvantaged and vulnerable children and which places child centred educational and social inclusion at the heart of all its strategies.
- 1.3.4 At different times in their lives, children, young people and their families may need additional support and help. The Council will strive to help families as early as possible and provide targeted and/or specialist support at the right time to reduce the likelihood of problems escalating, to ensure children and young people are safeguarded and improve long term outcomes.
- 1.3.5 Opportunity for a great start in life: A resilient family, together with high quality education, is vital to improving outcomes for children and young people, to reduce the number of children growing up in poverty by reducing the number of low-income families. The Council will engage parents through universal, targeted and specialist support to develop good parenting skills and to help their children reach their full potential. It is also essential the Council promotes outstanding early years standards to ensure all children arrive at school ready and prepared to learn. This is crucial for development and determines a child's future outcomes. Promoting these skills as early as possible is the best way to ensure every child gets the support they need to succeed.
- 1.3.6 Education that fulfils potential: Wolverhampton has made fantastic progress on improving school performance, with 80% being rated as Good or Outstanding by Ofsted. The Council will continue to work closely with schools and other partners to prioritise investment in Wolverhampton's children and young people, particularly those who may be vulnerable or have special educational needs and/or disabilities. The Council will

support the emotional wellbeing of all learners, to ensure they have the opportunity to fulfil their potential and that no child in the city is left behind. The Council also wants to develop greater collaboration between local schools and businesses to improve the transition from education to work.

- 1.3.7 Strengthen families where children and young people are at risk: The Council will continue to work closely with families to ensure that children live in safe and supportive homes. Targeting effective early help and support will strengthen families, keep children and young people safe and improve their life chances. Moving forward, the Council's relationship-based approach to all children's services will empower families to remain together and achieve positive and sustained change.

## **1.4 Project aims and objectives**

- 1.4.1 The project aims to make a positive contribution to the Council's wider aims by helping to minimise and manage the risks posed by young people engaging in activities related to drugs, alcohol, child sexual exploitation, criminal behaviour, gangs, and radicalisation, and to keep young people from coming into care by supporting them to live safely with their families.
- 1.4.2 The primary aims of the team are to work with young people to help them to exert more positive control over their lives and to live safely as they progress towards adulthood. This will involve:
- a) building a trusting relationship with a worker who can offer the support that they need, when they need it, in the way that they need it;
  - b) providing consistency of support to the young person, even if their situation changes (e.g. by moving into/ out of care; changing accommodation), until stability or permanence is achieved;
  - c) work to build resilience, self-esteem and an understanding of their strengths and needs;
  - d) evidence-based intervention approaches, such as solution-focused approaches and motivational interviewing;
  - e) an over-arching approach informed by restorative practice;
  - f) work to identify previously unmet needs in young people who may have previously "slipped through the net" or who services have previously failed to reach;
  - g) work structured and underpinned by a trauma-informed practice (The Trauma Recovery Model);
  - h) interventions to promote positive engagement, positive peer relationships, and development of life skills.

## **1.5 Service aims and objectives**

- 1.5.1 The provision of key voluntary sector staff aims to support and enhance the multi-agency, multi-disciplinary elements of service delivery. The contribution which will be made by voluntary sector staff will help meet the objectives of cross fertilisation of ideas and practice development as well as building relationships which will ensure that interventions have the best chance of being successful.

## 1.6 Service Outcomes

- 1.6.1 The overall Young Person's Team will work with vulnerable young people and their families in order that they have the best possible outcomes, that there is a reduced likelihood that the young people worked with will enter care and where service users are in care, to reduce the need for them to be accommodated in residential settings.

## 1.7 Demography and Demand

- 1.7.1 The table below shows the number of young people, aged 13-16, who are subject to child in need (CIN) or child protection (CP) planning, and the numbers of young people who were taken into care during each year.

	Number of Wolverhampton young people (aged 13-16)...	
	With a CIN or CP plan	Taken into care (cumulative for year from April)
April 2016	279	36
April 2017	332	38
April 2018	333	33
Sept 2018	316	15

- 1.7.2 In September 2018, 316 young people aged 13-16 in Wolverhampton were subject to child in need (CIN) or child protection (CP) planning. This figure has remained relatively stable.
- 1.7.3 For the previous three years the number of young people aged 13-16 who have been taken into care has been between 33 and 38 per year. Over the first half of this year 15 young people have come into care.
- 1.7.4 The number of Wolverhampton children and young people in residential care settings has increased steadily from 30 in April 2017, to 41 in April 2018, and 46 at the end of September 2018. The vast majority of these are young people aged 13 or over, and we know that older children are likely to spend a longer time in residential placements. At September 2018, the average placement duration for 15 to 17 year-olds was 385 days, compared to 257 days for 0 to 14 year-olds.
- 1.7.5 The Urban Street Gangs (USGs) profile in Wolverhampton is currently being updated but the 2015 profile highlighted increasing offences of violence, identified a wide range of urban street gangs and escalating concerns over the carrying and use of weapons. Tensions are currently high between young people in USGs in different parts of the city and despite good partnership working arrangement, existing expertise and good working relationships there is little capacity to support young people at risk. This includes an increasing problem with County Lines and links to Child Sexual Exploitation.
- 1.7.6 Between September 2017 and August 2018 there were between 20 and 45 missing episodes involving 15 - 27 young people per month - 20% with three or more missing episodes. The city averages four new Multi-Agency Sexual Exploitation referrals each month.

- 1.7.7 The majority of missing episodes involve children and young people who are being supported by Children's Services. In August 2018, there were 40 missing episodes involving 24 children or young people. Of these, ten were children in need and 12 were children or young people in care.
- 1.7.8 Social worker practitioners usually refer to a set of behaviours and patterns of behaviour for children and young people who we worry most about as: children from families involved in gangs; children involved in gun crime; children involved in drug running; children exposed to Child Sexual Exploitation; children at risk of secure accommodation; fire setting; and children missing from home or missing from care homes, for days and/or weeks at a time often in other parts of the country.
- 1.7.9 Local practice experience describes this group as falling into two broad groups. Firstly, there are those that are 'late entrants' into the service or new to the care system - although not all - but typically 14 years of age and upwards. Secondly, there are those young people who may have been in the care system or known to the service, who become connected with - by various family and or community networks - the first group, typically by contact in residential care or by virtue of being a younger sibling. Almost all have a number of complex problems aggravated by loss, neglect, abuse and trauma - features which make work in this area particularly challenging.
- 1.7.10 The Council has recently undertaken in depth case studies of six 17-18-year-old young people who have entered either care or custody after the age of 13, and have often had multiple placements as well as being victims of exploitation. In each case there had been significant historical involvement from children's social care and other services. The young people's lives were characterised by high numbers of adverse childhood experiences (ACEs), such as experiences of abuse or neglect, domestic violence, bereavement, having adult responsibilities, or household adversity – many had experienced up to eight of these. Exclusion from school and inconsistent attendance were common features, as were referrals to Child and Mental Health Services that seldom led to meaningful engagement.
- 1.7.11 These case studies highlighted a number of features that were very similar to those identified by Tower Hamlets Safeguarding Children Board (*Troubled Lives, Tragic Consequences*: 2015) in its thematic review of six young people involved in incidents of serious peer to peer violence:
- 1.7.12 "A distinct pattern that can be seen for most of these children is a very troubled home environment, early behavioural issues, followed by associating outside of the home with delinquent peers, which in turn leads to them being victims of serious assaults and violence. They were also all excluded from school losing that key protective factor."
- 1.7.13 Research evidence suggests that people who have experienced four or more ACEs are:
- a) Eleven times more likely to have used illicit drugs
  - b) Five times more likely to have had underage sex
  - c) Eleven times more likely to have been incarcerated
  - d) Seven time more likely to have been involved in violence
  - e) Four times more likely to have low levels of mental wellbeing



## **2. Purpose**

### **2.1 Local Strategic Context / Local Commissioning Drivers**

- a) Council Plan 2019-24
- b) Transforming Children's Services Programme

### **2.2 Core Service Values and Principles**

#### **2.2.1 The Provider will ensure that:**

- a) Service delivery has a clear focus on practice excellence, using innovative approaches to achieve improvements;
- b) The staff it provides deliver high quality services with children's needs at the centre of decision making and practice;
- c) It is an organisation that retains, attracts and develops the people it needs to succeed;
- d) Children, young people, and families will be valued and respected;
- e) Safeguarding children and young people is paramount and the Provider will have rigorous policies to safeguard children's welfare which are positively implemented. The Provider will ensure that they comply with Council's safeguarding policies and procedures.
- f) The child's welfare, safety and needs are at the centre of service delivery and the services provided actively support families to prioritise children's needs, make a commitment, and persevere in difficult times
- g) Service planning and delivery is based on equal opportunities and values diversity and ensure that (support) services are accessible to service users from all ethnic, religious, language, racial and social backgrounds or family structure;
- h) The service recognises that a sense of identity is important to a child's well-being. To help children develop this, their ethnic origin, cultural background, religion, language and sexuality need to be properly recognised and positively valued and promoted.
- i) The particular needs of disabled children and children with complex needs will be fully recognised and taken into account.

## **3 Service Description**

### **3.1 Services to be provided**

- 3.1.1 The service relates to the provision of staff drawn from the voluntary and community sector who will work as part of a specialist multi-agency and multi-disciplinary team to work with at-risk adolescents, based on learning from the pilot of the young person's team and research evidence outlined above. The team will work with young people across the different levels of need/support from early help to young people in care.
- 3.1.2 The overall team will comprise staff from different agencies and would comprise the following roles: manager, social worker, key workers, psychologist, speech and language therapist. All but the key workers will be drawn from the Council and health services. The voluntary and community sector staff will fulfil the roles of key workers. The team will work in a partnership environment which will involve close contact and



collaborative working with a wide range of public (e.g. Police and health services), voluntary and community sector agencies.

- 3.1.3 The team will be located within the Council's Specialist Support Service. Operationally, it will be managed by a Social Work Team Manager, reporting to the Operations Manager (Youth Offending).
- 3.1.4 Staff will be able to access clinical/professional supervision from staff from their own profession/organisation where necessary in order to ensure safe and high quality practice. The Provider will be responsible for organising and funding any clinical/professional supervision.
- 3.1.5 There will be five key workers within the team. The appointed key workers are expected to come from differing backgrounds, so that the team has a balance of skills and expertise, including youth work, emotional wellbeing, and family support.
- 3.1.6 While the team will comprise a number of different professionals, it will be vital to successful service delivery that staff are prepared to accept flexibility about role boundaries and that all staff are sufficiently skilled, adaptable and motivated to provide support to young people that feels consistent in its approach.
- 3.1.7 Co-location will be crucial to establishing effective working relationships, a joined-up approach and information sharing. The social work team manager will co-ordinate the team, and directly supervise the social workers and the family support worker, with matrix management arrangements in place for supervision of staff from other disciplines. There will be weekly joint reflective supervision sessions to embed a culture of reflection and learning, and to help the team to develop a shared understanding of the young people, their situations, aspirations and their needs.
- 3.1.8 The Provider will provide suitably trained, skilled and experienced staff to make a full and positive contribution to the Young Person Team service and the achievement of its aims and objectives.
- 3.1.9 Staff provided need to be ready, willing and able to:
  - a) be a proactive member of the multi-disciplinary team and co-located team sharing best practice with other members of the team in relation to approaches and strategies to support and engage young people and their families to achieve best outcomes.
  - b) work as part of the multi-disciplinary team with young people and their families to develop plans of support and promote programmes of social education, activities, support, advice and information, using a range of multi-sensory methods.
  - c) contribute to group reflective practice, development of shared formulations and a joined-up multi-agency approach to support.
  - d) build positive relationships with young people and their families and work directly with them in order to promote positive change, build resilience, reduce risks and prevent young people from experiencing significant harm.
  - e) ensure that the "voice of the child and young person" remains central to their support and that they are proactively encouraged to build and contribute to their own programmes
  - f) contribute to multi-disciplinary assessments of children and families in need of help and support.

- g) provide both proactive planned programmes of support, and an intensive service to young people and their families in crisis.
- h) plan, deliver and support activities and approaches which may include (but not be limited to): youth work; interventions to support emotional wellbeing; family/parenting support; interventions to support health and substance misuse; creative arts activities; support responding risks of criminal, gang and/or sexual exploitation; mentoring; and, sports activities.
- i) support, coach and train young people in connecting with community resources and services
- j) work in a non-discriminatory and culturally sensitive way in the delivery of support to all children and families.
- k) adopt an approach based on restorative practice and trauma-informed practice for engaging and working with young people and their families.
- l) work flexibly at different times of the day in order to meet the needs of the young people and families. This may include early morning, early evening and weekend work which will be agreed with the Team Manager.
- m) maintain accurate records of support and interventions, using agreed information processing systems, and Council case management systems (e.g. CareFirst or Eclipse). Key Workers will be issued with the relevant Council ICT equipment.
- n) maintain effective records of work in order to assist in research, evaluation, monitoring and development of provision. All records relating to casework will be kept electronically on Council systems.
- o) strive to achieve all relevant benchmarks and standards agreed as part of the relevant quality assurance process.
- p) redcruitcipate in supervision and operational management arrangements as directed by the Team manager and quarterly 3-way supervision.
- q) engage in professional development activities as identified by the Team Manager. Any corporate or personal development requirements identified by the Team Manager will be funded by the Council. Any other professional development activities will be funded by the Provider.
- r) promote and adhere to the core values and behaviours expected of City of Wolverhampton Council Children's Services.

### **3.2 Eligible Service User Group(s)**

3.2.1 The team will work with young people, aged 11 to 16 (at point of referral – once referred, support will not stop simply because of age), who are identified through existing safeguarding pathways and processes, where the primary concerns relate to the young person's behaviour and risks arising from this. This may include the following:

- a) missing episodes
- b) risk of child sexual exploitation
- c) risk of gang exploitation
- d) substance misuse
- e) exclusion from school
- f) violence towards other people within the home
- g) criminal or antisocial behaviour

3.2.2 The team will be able to link with existing Council in-house residential provision to provide support to young people accessing those provisions and who meet the referral criteria. In addition, the team will develop close links with pupil referral units to identify young people who have been excluded from school and are in need of support.

### **3.3 Service Delivery Location**

- 3.3.1 The team will be co-located in a building that is accessible to young people, and where activities or interventions can take place, although it is envisaged that the majority of the work of the team will be working with young people in their communities.
- 3.3.2 The service will be delivered across the city of Wolverhampton at locations that are deemed most appropriate for the delivery of the different components of the service. The appropriateness of the locations should include an assessment of the accessibility in terms of travel and direct access in relation to the target groups for the service.

### **3.4 Service Availability (times)**

The Key Worker(s) will be expected to work flexibly to ensure that service delivery takes place at times which meet the needs of both the Young Person's Team and the Service Users to promote maximum accessibility.

### **3.5 Referrals and Workload**

- 3.5.1 It is expected that the majority of referrals to the service will be for children and young people supported with a child in need or child protection plan. However, referrals will also be accepted for young people with an early help plan, if specific criteria are met, or for children who are looked after if they are accessing the Council's residential assessment unit, experiencing placement instability, or it is part of a planned step down process towards independence.
- 3.5.2 It is anticipated that each Key Worker will have a caseload of approximately 10 young people, and that the typical length of involvement will be between 6 and 12 months. The allocation of cases to each Key Worker will be managed by the Young Persons Team Manager or via a system put in place by the Team Manager.

## **4 Policies and Procedures**

### **4.1 Staffing**

- 4.1.1 The Provider must ensure that the staff provided are suitably qualified and experienced staff to meet the requirements of the service specification and needs of the Service Users. The Provider must ensure that all relevant staff have been subject to checks by the Disclosure and Barring Service.
- 4.1.2 The Provider shall ensure that a representative of the Council's Young Persons Team is actively involved in the process of identifying, recruiting and appointing the Key Worker(s) from their organisation.

### **4.2 Management**

- 4.2.1 Management arrangements will be based on a matrix approach. The key worker(s) will be employed by the Provider who will have responsibility for the employee(s) in terms of:
- a) Personal and professional development

- b) Complaints and disciplinary procedures
- c) Sickness absence

4.2.2 Young Person's Team Manager (or their appointed deputy) will have responsibility for :

- a) Day to day management and supervision of the key worker(s)
- b) Workload allocation
- c) Leave requests

4.2.3 Performance review will take place at least quarterly in Year 1 of the contract and at least 6 monthly in subsequent years and any issues relating to poor or under performance will be the joint responsibility of the Young Persons Team Manager and the designated line manager in the employing body. Frequency of meetings may be more often if circumstances require it. Performance reviews will be carried out using the employing body's policies and procedures.

### **4.3 Training**

4.3.1 The Provider must ensure that all relevant staff are suitably qualified and have access to the training necessary to ensure that the services delivered are of a high quality. The Provider must make staff available for training that has been identified and agreed as necessary by the Council. Where a training need is identified by the Team Manager, the Young Persons Team will be responsible for organising and funding the training.

4.3.2 Key Workers will be expected to fully participate in any training designated by the Young Persons Team Manager as necessary to improving the range and quality of the services delivered by the Team. Based on evidence of the prevalence of childhood trauma and adverse childhood experiences among at-risk young people, the team will be trained in and adopt a trauma-informed approach to their work.

### **4.4 Equality**

4.4.1 The Provider must demonstrate that the legal obligations in the Public Sector Equality Duty and the Equality Act 2010 are met in the service delivery.

4.4.2 The Provider is required to foster good relations by tackling prejudice and promoting understanding between people who share a protected characteristic and others.

### **4.5 Private Arrangements by Staff**

4.5.1 The Provider shall use its reasonable endeavours at all times to ensure that none of its Staff enter into any private arrangement or agreement of any kind with any Service User.

### **4.6 Access to the Provider**

4.6.1 The Council's expectation is that the Provider will always have a named person with management responsibility for the Service to engage with proactively.

### **4.7 Complaints & Compliments**

4.7.1 The Provider is required to ensure that its Staff and Service Users are aware of how to report a complaint, comment or compliment. This procedure must include details on how

any complaints are investigated, how any remedial action will be instigated and the complainant notified, with a defined timescales for response.

- 4.7.2 If a Service User and/or their representative are not satisfied after following the Provider's procedure for dealing with complaints, the Provider shall refer the Service User/their representative to the Authorised Officer.
- 4.7.3 If a complaint alleges any criminal offence by any member of staff, the Provider shall immediately refer any complaint to the Police in the first instance, and to the Authorised Officer in writing.

## **5 Quality Assurance**

### **5.1 Systems & Processes**

- 5.1.1 The Provider must have a robust recruitment processes in order to provide suitably qualified/experienced/skilled key workers and staff management/development system/policies and procedures. In addition they must have a robust quality assurance system to ensure that it meets its obligations and delivers an acceptable level of service.
- 5.1.2 This system should give the Council and the people who use the Service confidence that the Provider has appropriate systems in place to deliver the service as agreed and in a safe and timely manner. It should address the arrangements for managing the delivery of the service, how it will ensure that staff understand what the people who use the service require, arrangements for monitoring service delivery and taking action where improvements are necessary or risks are identified.
- 5.1.3 The system must include how the Provider intends to seek the views of individuals who use the service and enables them to make comments about the service they receive.
- 5.1.4 The Provider must take account of the views of individuals who use the Service and be able to report on the key issues raised and how these will be addressed. Copies of written reports of this should be available to the Young Person's Team and sent to any designated Quality Assurance Service.

### **5.2 Information Sharing and Confidentiality**

- 5.2.1 The Provider must be prepared to agree to, sign and comply with an information sharing and data processing agreements as specified by the Council. These agreements will cover the processes and systems that will be in place to ensure there is appropriate information sharing/processing between the Council, the Provider and any other partner organisations relevant to this project/service.
- 5.2.2 In terms of contract delivery and performance management data, the Provider will need to make a commitment to, and have systems in place, to ensure that any requested data is supplied in a timely and efficient manner both on a planned basis as agreed with the Council and in response to data requests to meet the day-to-day needs of the Council.
- 5.2.3 Staff from Providers linked to this contract will be required to sign a City of Wolverhampton Council confidentiality statement.

## **6 Service Outcomes & Monitoring**

### **6.1 Contract Monitoring and Review**

- 6.1.1 The Contract with the Provider will be reviewed on a six monthly basis at contract monitoring meetings. The meeting will be attended by the Provider and representatives of the Council who have the relevant service oversight including Commissioning, Procurement and Quality Assurance & Compliance functions. The six monthly meetings will focus on performance monitoring and management and any pressing contractual and organisational issues. In addition there will be an annual review which will include, but not be limited to, the following agenda items:
- a) Contract Specific - This will involve a review of existing contract terms and conditions to ensure that the contract and service specification are fit for purpose in terms of delivering individual outcomes.
  - b) Organisation - This will involve identifying organisational issues that may act as barrier to effective and efficient service delivery and work in partnership to find solutions to overcome any barriers identified.

## **Appendix 1: Hierarchy of Outcomes**

The hierarchy of outcomes is as follows:

- 6.11.1.1.1 City of Wolverhampton Council/ Children and Young People Services Plans/Outcomes
- 6.11.1.1.2 Young Person's Team Ambition/Outcomes
- 6.11.1.1.3 Objectives relating to the delivery of this contract

### **Young Person's Team Ambition/Outcomes**

The ambition for the Young Person's Team is that it will:

- a) make a positive contribution to the Council's wider aims by helping to minimise and manage the risks posed by young people engaging in activities related to drugs, alcohol, child sexual exploitation, criminal behaviour, gangs, and radicalisation, and to keep young people from coming into care by supporting them to live safely with their families.
- b) work with young people to help them to exert more positive control over their lives and to live safely as they progress towards adulthood.

### **Objectives relating to the delivery of this contract**

The successful delivery of this contract will:

- a) support and enhance the multi-agency, multi-disciplinary elements of service delivery.
- b) make a proactive and positive contribution to the cross fertilisation of ideas and practice development as well as building relationships which will ensure that interventions have the best chance of being successful.



**Appendix 2: Contract Performance Monitoring Framework**

<b>Indicator Type</b>	<b>Indicator/ Measure</b>	<b>Data Source</b>	<b>Frequency of monitoring</b>	<b>Frequency of reporting</b>	<b>Target(s)</b>
Project Specific: •Output	Percentage of young people worked with that enter care of the local authority	YPT Management Records	Quarterly	Six monthly	To be agreed
Project Specific: •Output	Percentage of young people in care worked with that subsequently have a residential placement	YPT Management Records	Quarterly	Six monthly	To be agreed
Contract Specific: •Output	No. of cases worked on per year	YPT Management Records	Quarterly	Six monthly	To be agreed
Contract Specific: •Output	No. of young people worked with per year	YPT Management Records	Quarterly	Six monthly	To be agreed
Contract Specific: •Output	No. of assessments lead on	YPT Management Records	Quarterly	Six monthly	To be agreed
Contract Specific: •Output	No. of assessments actively supported	YPT Management Records	Quarterly	Six monthly	To be agreed
Contract Specific: •Output	Records updated within agreed timeframe	YPT Management Records	Quarterly	Six monthly	To be agreed

Indicator Type	Indicator/ Measure	Data Source	Frequency of monitoring	Frequency of reporting	Target(s)
Contract Specific: • Output	No. of activities where Key Worker has taken a lead	YPT Management Records	Quarterly	Six monthly	To be agreed
Contract Specific: • Output	No. of activities which Key Worker has actively supported	YPT Management Records	Quarterly	Six monthly	To be agreed
Contract Specific: • Output	Satisfactory completion of periodic performance assessment	YPT Management Records	Quarterly for first 6 months of contract then at least 6 monthly but may be more frequent if circumstances require it.	Quarterly for first 6 months of contract then at least 6 monthly but may be more frequent if circumstances require it.	To be agreed