

NOTICE OF MEETING

HEALTH AND WELLBEING BOARD MEETING IN COMMON WITH THE COMMUNITY SAFETY PARTNERSHIP

Monday, 12th June, 2017, 10.00 am - Civic Centre, High Road, Wood Green, N22 8LE

Please see attached membership list.

1. FILMING AT MEETINGS

Please note this meeting may be filmed or recorded by the Council for live or subsequent broadcast via the Council's internet site or by anyone attending the meeting using any communication method. Although we ask members of the public recording, filming or reporting on the meeting not to include the public seating areas, members of the public attending the meeting should be aware that we cannot guarantee that they will not be filmed or recorded by others attending the meeting. Members of the public participating in the meeting (e.g. making deputations, asking questions, making oral protests) should be aware that they are likely to be filmed, recorded or reported on. By entering the meeting room and using the public seating area, you are consenting to being filmed and to the possible use of those images and sound recordings.

The Chair of the meeting has the discretion to terminate or suspend filming or recording, if in his or her opinion continuation of the filming, recording or reporting would disrupt or prejudice the proceedings, infringe the rights of any individual, or may lead to the breach of a legal obligation by the Council.

2. WELCOME AND INTRODUCTIONS (PAGES 1 - 4)

The Co-Chairs will welcome those present to the meeting and introductions will be given.

3. APOLOGIES

To receive any apologies for absence.

4. URGENT BUSINESS

The Chair will consider the admission of any late items of urgent business. (Late items will be considered under the agenda item where they appear. New items will be dealt with at agenda item).

5. DECLARATIONS OF INTEREST

A member with a disclosable pecuniary interest or a prejudicial interest in a matter who attends a meeting of the authority at which the matter is considered:

- (i) must disclose the interest at the start of the meeting or when the interest becomes apparent, and
- (ii) may not participate in any discussion or vote on the matter and must withdraw from the meeting room.

A member who discloses at a meeting a disclosable pecuniary interest which is not registered in the Register of Members' Interests or the subject of a pending notification must notify the Monitoring Officer of the interest within 28 days of the disclosure.

Disclosable pecuniary interests, personal interests and prejudicial interests are defined at Paragraphs 5-7 and Appendix A of the Members' Code of Conduct.

6. QUESTIONS, DEPUTATIONS, PETITIONS

To consider any requests received in accordance with Part 4, Section B, Paragraph 29 of the Council's Constitution.

7. THE EMOTIONAL HEALTH AND WELLBEING OF YOUNG PEOPLE AND THEIR FAMILIES (PAGES 5 - 74)

This meeting in common of Haringey's Health and Wellbeing Board and Community Safety Partnership, is an opportunity to bring together system leaders to think collectively about a common and shared priority: improving the mental health and wellbeing of young people and their families, with a focus on vulnerable young people .

The focus of the meeting will be on vulnerable young people and will aim to :

- develop a better and shared understanding between partners /agencies of a range of local approaches, as well as the complexities and challenges of these.
- Focus partners' thinking about solutions that aim to increase strengthening co-ordinated approaches in local provision that focus on prevention and early intervention in order to reduce risks to vulnerable young people.

8. NEW ITEMS OF URGENT BUSINESS

To consider any new items of urgent business admitted at item 3 above.

9. FUTURE AGENDA ITEMS AND DATES OF FUTURE MEETINGS

Members of the Board are invited to suggest future agenda items.

Ayshe Simsek
Committees Manager
Haringey Council
Level 5 River Park House
225 High Road
London N22 8LE
0208 489 2929

This page is intentionally left blank

Membership of the Health and Wellbeing Board

* Denotes voting Member of the Board

Organisation		Representation	Role	Name
Local Authority	Elected Representatives	3	*Leader of the Council	Cllr Claire Kober
			*Cabinet Member for Children and Young People	Cllr Elin Weston
			*Cabinet Member for Finance and Health	Cllr Jason Arthur
	Officers' Representatives	3	Director of Adult Social Services	Beverly Tarka
			Director of Children's Services	Jon Abbey
			Director of Public Health	Dr Jeanelle de Gruchy
NHS	Haringey Clinical Commissioning Group (CCG)	4	*Chair	Dr Peter Christian
			Vice Chair	Dr Dina Dhorajiwala
			Chief Officer	Alison Blair
			*Lay Member (confirmed as voting member by Full Council 23/02/15)	Cathy Herman
Patient and Service User Representative	Healthwatch Haringey	1	* Chair	Sharon Grant
Voluntary Sector Representative	Bridge Renewal Trust	1	Chief Executive	Geoffrey Ocen
Haringey Local Safeguarding Board		1	Chair	Geraldine Gavin

This page is intentionally left blank

Community Safety Partnership - Membership List

	NAME OF REPRESENTATIVE
Statutory partners/CSP members	<p>Cllr Eugene Ayisi, Cabinet Member for Communities (Co-chair)</p> <p>Helen Millichap, Borough Commander (Co-chair), Haringey Metropolitan Police</p> <p>Cllr Martin Newton, Opposition representative</p> <p>Cllr Elin Weston, Cabinet Member for Children and Families</p> <p>Zina Etheridge, Interim Chief Executive, Haringey Council</p> <p>Andrew Blight, Assistant Chief Officer, National Probation Service - London for Haringey, Redbridge and Waltham Forest</p> <p>Douglas Charlton Assistant Chief Officer, London Community Rehabilitation Company, Enfield and Haringey</p> <p>Simon Amos, Borough Fire Commander, Haringey Fire Service</p> <p>Jill Shattock, Director of Commissioning, Haringey Clinical Commissioning Group</p> <p>Mark Landy, Community Forensic Services Manager, BEH Mental Health Trust</p> <p>Geoffrey Ocen, Chief Executive, Bridge Renewal Trust</p> <p>Joanne McCartney, MPA, London Assembly</p> <p>Stephen McDonnell, AD Environmental Services and Community Safety</p> <p>Dr. Jeanelle de Gruchy, Director Public Health, Haringey Council</p> <p>Jon Abbey, Director of Children Services, Haringey Council</p> <p>Beverley Tarka, Director Adult & Community Services, Haringey Council</p> <p>Andrew Billany, Managing Director, Homes for Haringey</p> <p>Helen Twigg, Victim Support</p> <p>Tony Hartney, Safer Neighbourhood Board Chair</p>
Supporting advisors	<p>Nigel Brookes, Superintendent, Haringey Metropolitan Police</p> <p>Eubert Malcolm, Head of Community Safety &</p>

	<p>Regulatory Services Sarah Hart, Commissioning Manager, Public Health Susan John Committee Secretariat</p>
--	------------------------------------------------------------------------------------------------------------------------------------

Report for: Health and Wellbeing Board and Community Safety Partnership joint meeting - 12 June 2017

Title: Young People in Haringey – Safety, Resilience and Wellbeing

Report authorised by : Dr Jeanelle de Gruchy – Director of Public Health

Lead Officer: Jennifer Sergeant - Head of Targeted Response and Youth Justice

1. Describe the issue under consideration

This joint meeting of Haringey's Health and Wellbeing Board and Community Safety Partnership is an opportunity to bring together system leaders to think collectively about a common and shared priority: improving the mental health and wellbeing of young people and their families, with a focus on vulnerable young people .

The focus on vulnerable young people is to:

- develop a better and shared understanding between partners /agencies of a range of local approaches, as well as the complexities and challenges of these.
- Focus partners' thinking about solutions that aim to strengthen co-ordinated approaches in local provision that focus on prevention and early intervention in order to reduce risks to vulnerable young people.

2 Recommendations

Board members are requested to agree a set of principles and actions to improve existing strategic alignments aimed at strengthening prevention and early intervention across the system through:

- Commit to the adoption of a set of Early Help principles across both partnerships and within their organisations;
- Commit to participate and engage in the development and implementation of integrated work arrangements led by the multi-agency Early Help Partnership Board;
- Commit to the alignment of funding, commissioning and workforce development to strengthen the system response in providing Early Help;
- Agree that the actions to deliver these improvements will be led by the Early Help Partnership Board.

3 Background information

- 3.1 Improving the emotional health and wellbeing of young people is a priority across the system in Haringey. The strategies listed below all include a focus on young people:

Health and wellbeing strategy 2015 - 2018

Priority 3: Improving the mental health of children, young people and adults for early help and prevention

The strategy specifies targeting the needs of those most at risk, linking strategic outcomes to work streams focusing on violence against women and girls, gangs and serious youth violence.

<http://www.haringey.gov.uk/social-care-and-health/health/health-and-wellbeing-strategy>

Haringey Council's Young people's strategy 2015-2018

Priority 4: Co-ordinate engagement to reach vulnerable young people and intervene to ensure their safety and wellbeing.

The strategy is Haringey's strategic framework for improving outcomes for young people so that all achieve their full potential and thrive within their communities.

Emerging issues for young people, such as "running county lines", child sexual exploitation (CSE) and missing from home and education add further complexity to the needs of young people.

http://www.haringey.gov.uk/sites/haringeygovuk/files/young_peoples_strategy_2015-18.pdf

Haringey's Early Help strategy 2015-2018

Priority one: Delivering prevention and early intervention to reduce escalation of need. Underpinning the strategy is early help service provision with access for all to high quality information, advice and guidance.

This includes opportunities for improving parental knowledge and the understanding of children and young people's development, learning, health and wellbeing throughout their lives.

http://www.haringey.gov.uk/sites/haringeygovuk/files/2799_101_early_help_strategy_final.pdf

Haringey's community safety strategy 2018- 2022

The strategy is scheduled for completion in the latter part of 2017. It will be informed by a comprehensive strategic assessment. Initial analysis identifies that a key focus should be on tackling violence, vulnerability and exploitation, with an underpinning theme of community confidence.

http://www.haringey.gov.uk/sites/haringeygovuk/files/community_safety_strategy_2013-2017.pdf

Haringey's local children's safeguarding board strategy 2015-2021 Sets out a number of priorities:

- Priority One: Overhaul the ways in which agencies tackle chronic neglect
- Priority Two: Improve outcomes for children with particular vulnerabilities and those subject to particular risks
- Priority Three: Strengthen cross-borough partnership (including those at risk of CSE, gang activity, trafficking, forced marriage, missing or running away, domestic abuse, radicalisation, serious youth violence, harmful sexual behaviour)
- Priority Four: Develop high quality partnership working at all levels between our agencies

It also has two enabling priorities which are to enable meaningful engagement with children and young people, and promote and develop the children's workforce.

http://www.haringeylscb.org/sites/haringeylscb/files/hscb_annual_report_ar2015-16_final.pdf

NHS North Central London Sustainable Transformation Plan

There are a number of work streams focusing on emotional health and wellbeing including CAMHS transformation plans and prevention. The importance of prevention and earlier intervention in promoting and supporting good mental health and emotional wellbeing of young people and adults is well evidenced and documented in research and this is the approach taken within the work streams.

<http://www.candi.nhs.uk/about-us/north-central-london-sustainability-and-transformation-plan>

3.4 Young people in Haringey – safety, resilience and wellbeing

Appendix 1 provides key information about young people in Haringey.

Appendix 2 summarises the key needs of particularly vulnerable young people in Haringey. It highlights learning from recent Serious Case Reviews (SCRs) and the findings from an analysis of a cohort of young people in Haringey.

This recent analysis looked at the life history of a sample of young people involved in the most prolific youth offending in the borough. This local analysis illustrates well the frequent encounters the young people and their families had with all our agencies from early childhood.

Each individual case study details the concerns expressed by organisations and agencies about the young people and their families . Each case study highlights the many opportunities for early intervention and support from different agencies. The case studies demonstrate:

- a lack of co-ordinated provision from agencies;
- a focus on agency task;
- a lack of grip by any agency taking responsibility in co-ordinating help;
- limited consideration by those helping of the negative impact the issues in the family circumstances might be having on their life chances of the young person.

The impact of the life crises experienced by these young people is captured in the case studies and sets the background for better understanding of the resultant poor outcomes of this vulnerable group of young people.

Appendix 2 also highlights two best practice examples of interventions to tackle some of these issues – Team Around the School (see Appendix 3 for further information) and Project Future (see Appendix 4 for father information). Finally, it details our emerging system approach and Early Help principles.

This first joint meeting of the Community Safety Partnership and Health and Wellbeing Board is an opportunity for system leaders to explore together the complex area of young people’s safety, resilience and wellbeing in Haringey and consider committing to actions to strengthen our systems for prevention and early intervention.

4 Statutory Officers comments (Chief Finance Officer (including procurement), Assistant Director of Corporate Governance, Equalities

Finance

At this present time there are no financial implications to be considered. However, if at a later stage there are proposals to commit funds in support of actions, there would be a need for finance to review and provide an opinion.

Procurement (CPAH25)

The content of the report has been noted; there are no procurement implications at this stage.

Legal

There are no legal implications arising from the recommendations in the report.

Equalities

When considering solutions that aim to increase, strengthen and co-ordinate approaches in local provision to focus on prevention and early intervention, in order to reduce risks to vulnerable adolescents; the Council and partners will need to make due regard to their public sector equality duty under the

Equalities Act (2010) to tackle discrimination and victimisation of persons that share the characteristics protected under S4 of the Act. These include the characteristics of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex (formerly gender) and sexual orientation; advance equality of opportunity between people who share those protected characteristics and people who do not; foster good relations between people who share those characteristics and people who do not.

6 Use of Appendices

Appendix 1: Key Information on Young People in Haringey

Appendix 2: Summary of the key needs of particularly vulnerable young people in Haringey

Appendix 3: Team Around the School

Appendix 4: Project Future

7 Local Government (Access to Information) Act 1985

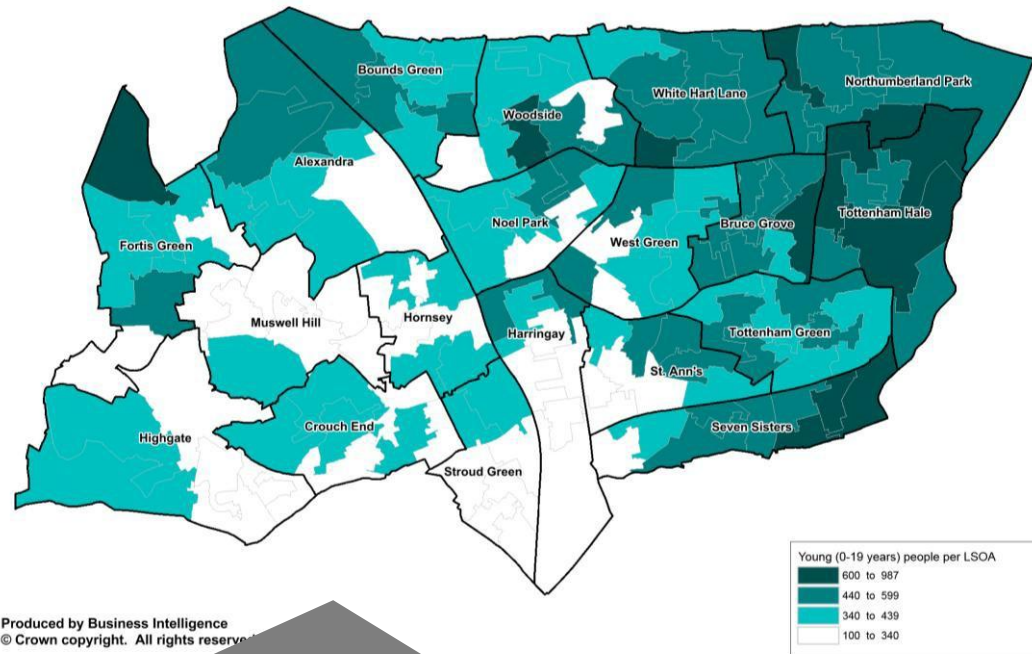
N/A

This page is intentionally left blank

Young people in Haringey: safety, resilience and wellbeing. Data pack

Haringey's young population

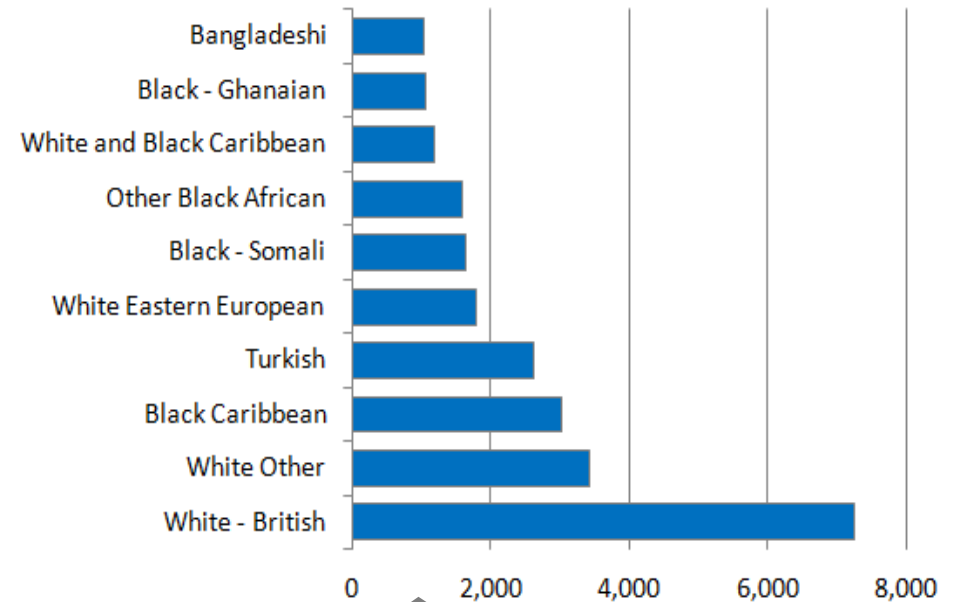
Number of 0-19 year olds living in area



Produced by Business Intelligence
© Crown copyright. All rights reserved.

- Most children live in the east of the borough
- Over 30% of the population in Northumberland Park, Seven Sisters and White Hart Lane is aged under 19

10 biggest ethnic groups of school pupils

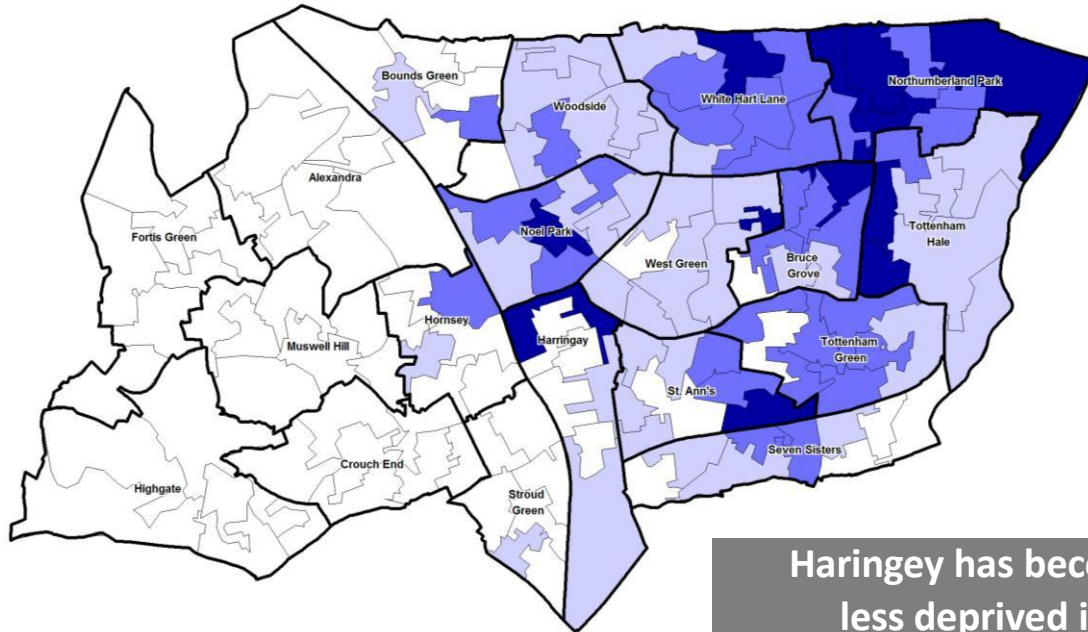


The 10 largest ethnic groups among pupils in Haringey only account for 65% of the total

Source: Mid-year population estimates 2014, ONS & School Census Jan 2016

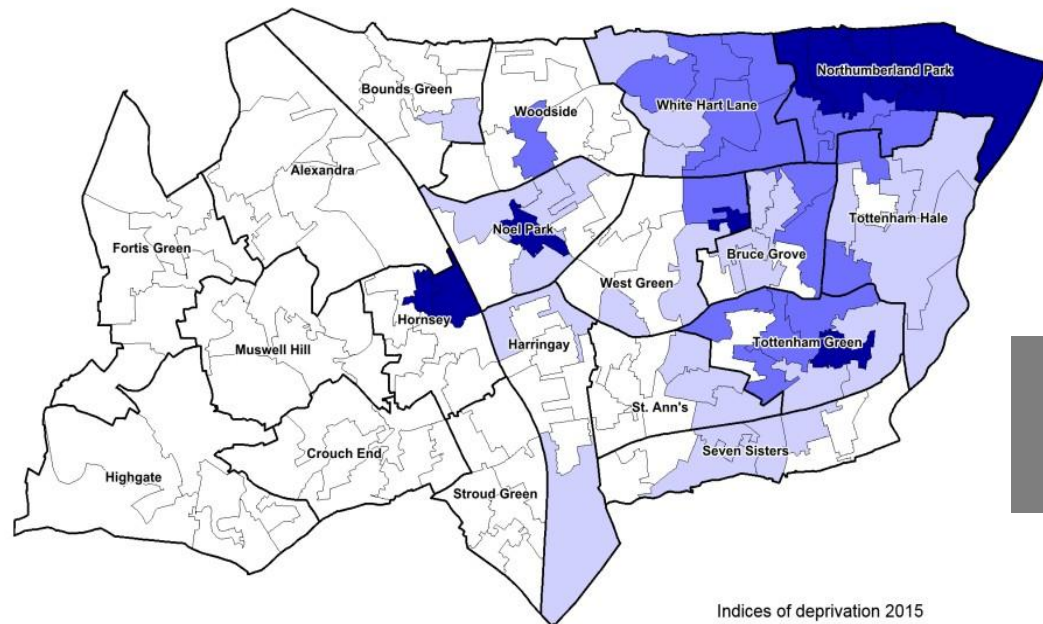
Multiple deprivation

2010



Haringey has become relatively less deprived in recent years

2015



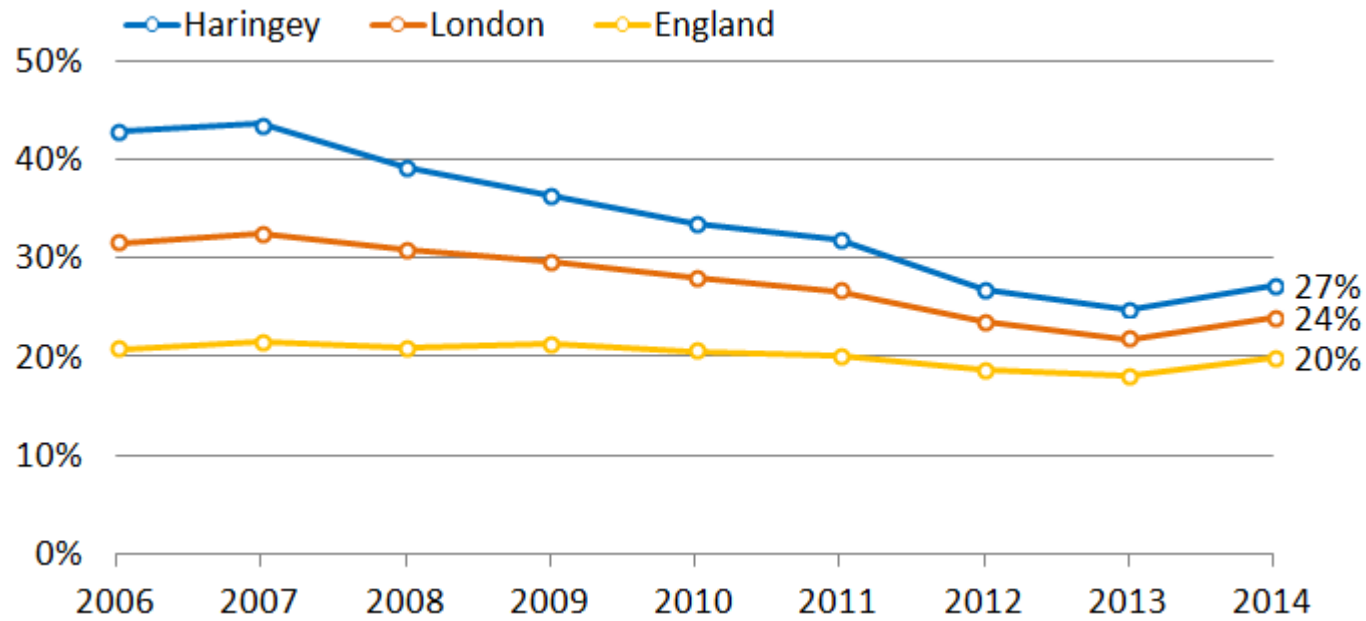
But is the 6th most deprived London borough

Indices of deprivation 2015
IMD rank

- Amongst 5% most deprived SOAs in England
- 5-10% most deprived
- 10-20% most deprived
- 20% + most deprived

Child poverty

Proportion of children in poverty (before housing costs measure)



- Child poverty in Haringey was the 5th highest in London in 2006, by 2014 it was 11th
- In 2014 child poverty rose everywhere

Source: London Datastore, GLA

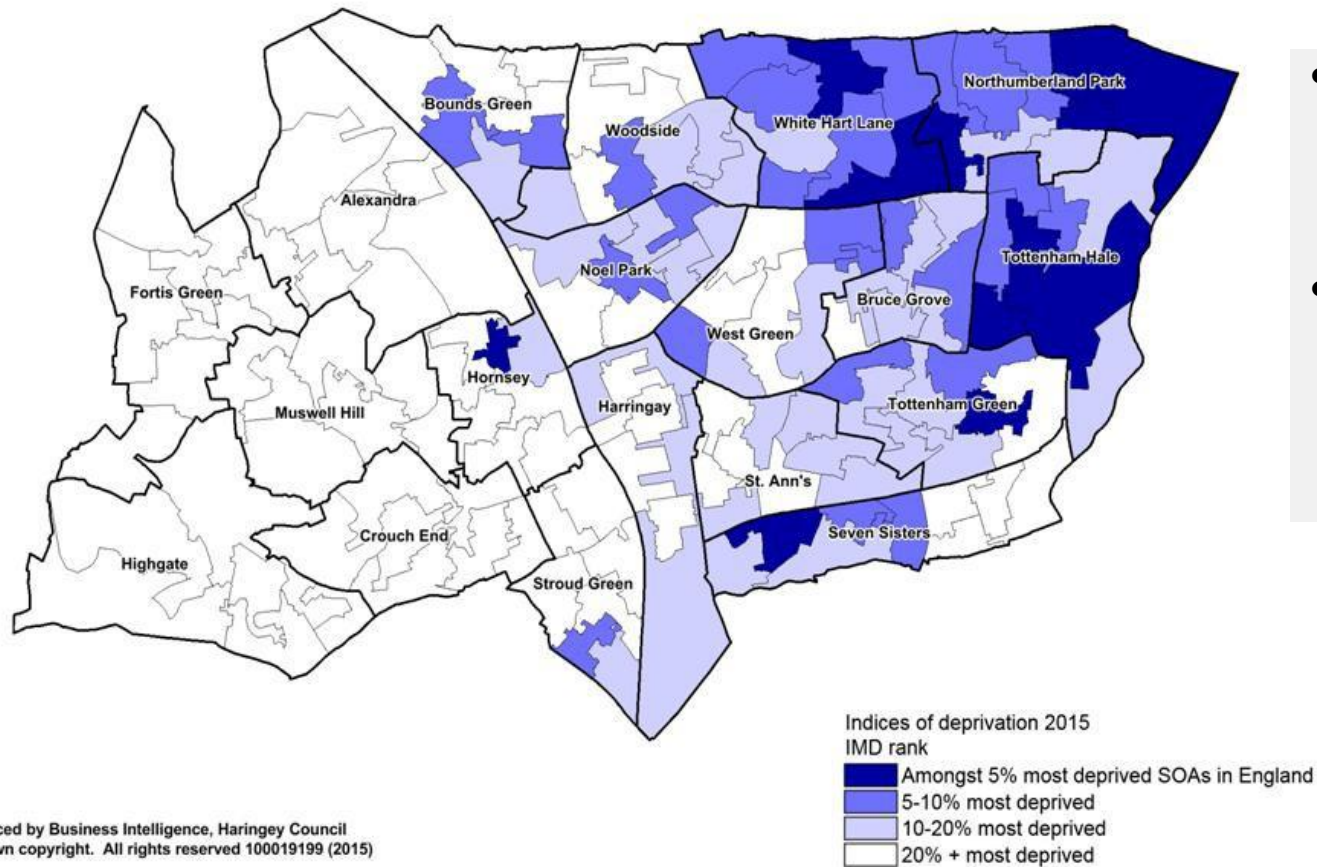
Child poverty

Proportion of children in poverty (after housing costs measure)



Child poverty

Levels of income deprivation among children



Produced by Business Intelligence, Haringey Council
© Crown copyright. All rights reserved 100019199 (2015)

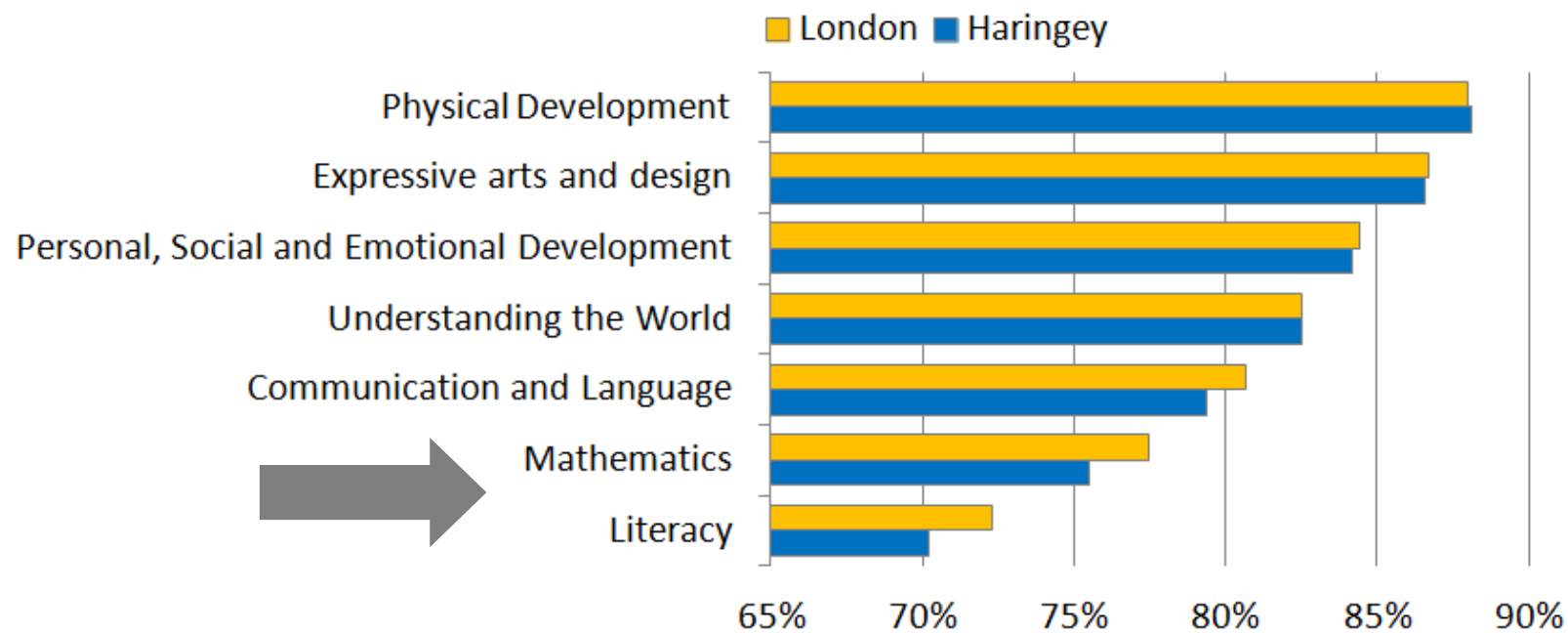
- Only 4 areas in the West of Haringey have high levels of child poverty
- Every area within Tottenham Hale, Northumberland Park and White Hart Lane has very high levels of child poverty

Source: Indices of Multiple Deprivation, DCLG

Educational attainment and inequalities

Early years

Proportion of children achieving expected standard across all learning areas, 2014-2015

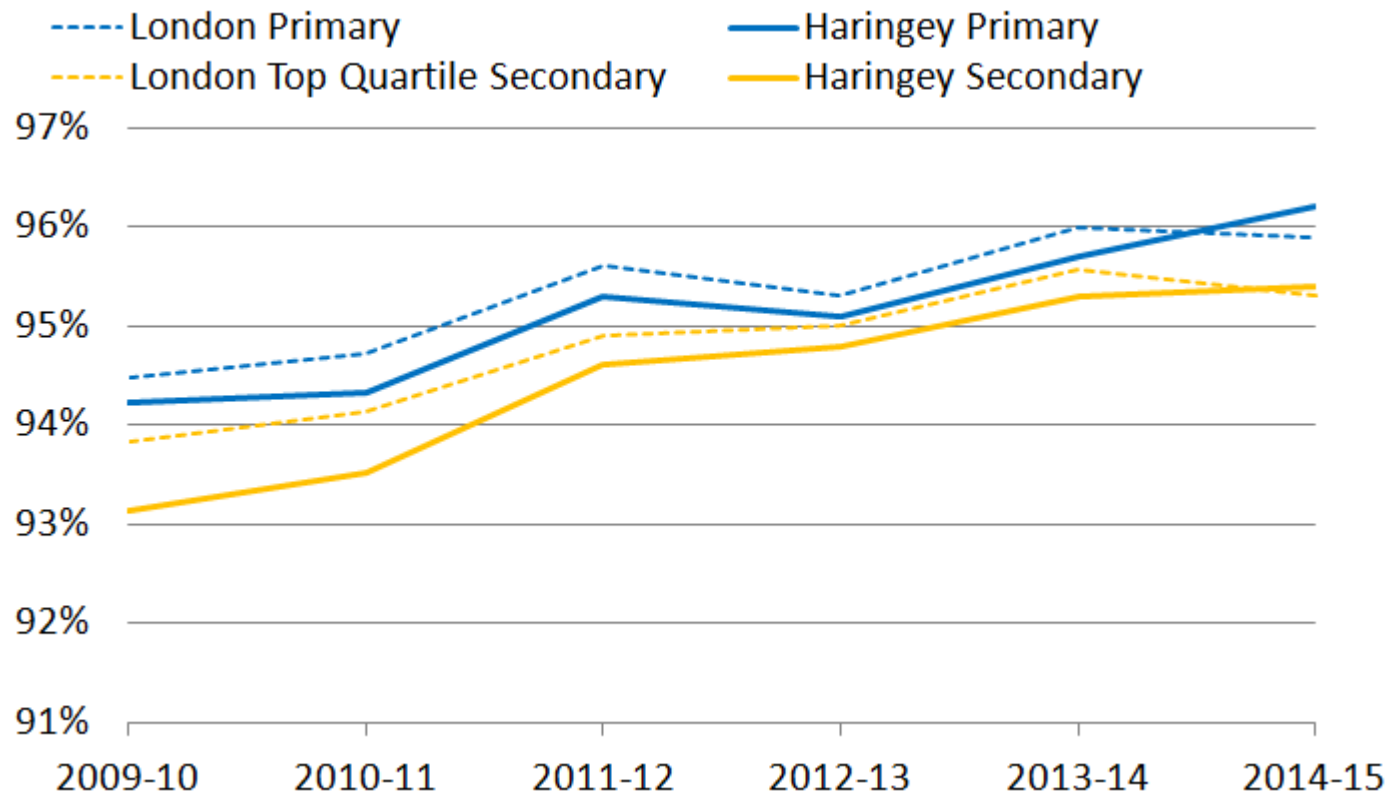


- Early Year's development is close to the London average
- But notably behind for literacy and mathematics

Source: Department for Education

Classroom Attendance

Levels of pupil attendance

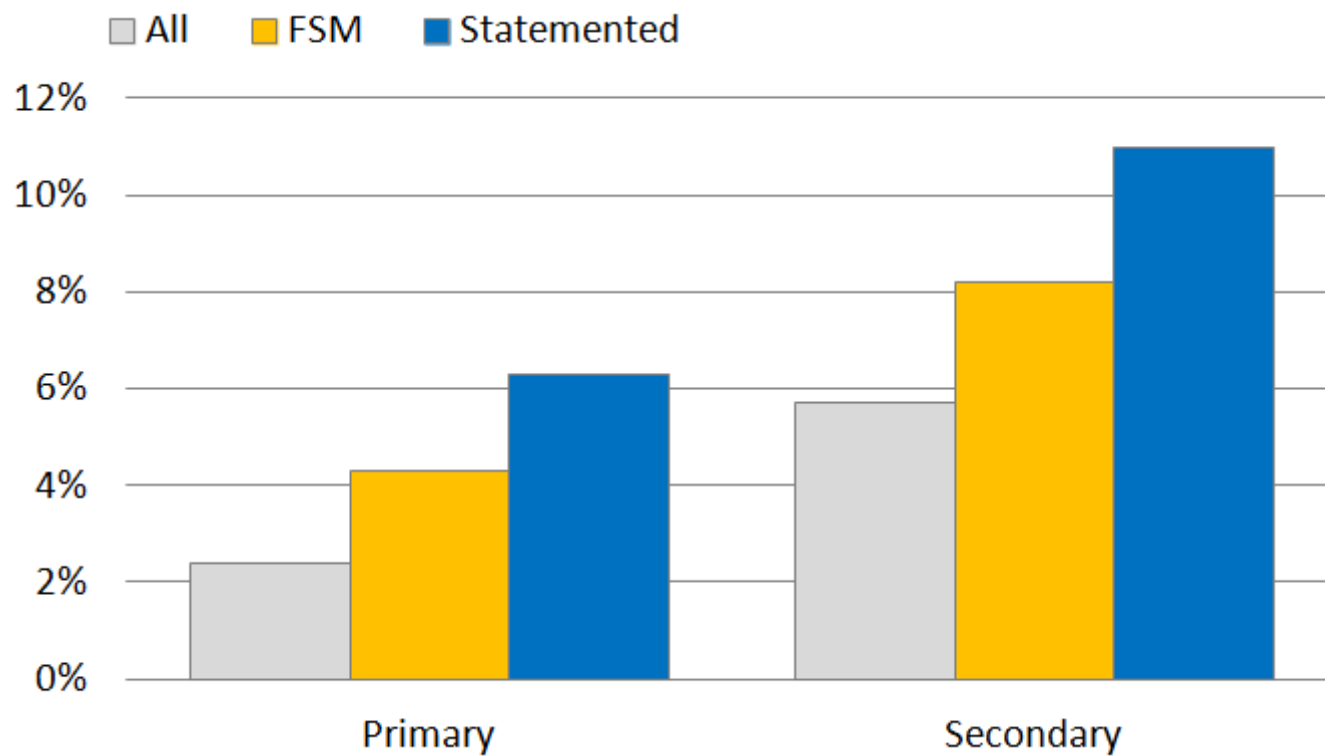


- Classroom attendance in Haringey has **improved faster than the London average**
- It is already higher than the 2017-18 target

Source: Business Intelligence, Haringey Council and Department for Education

Persistent absentees

Persistent absentee rate by pupil characteristic



Pupils on free-school meals or with a special educational need are more likely than average to be persistent absentees

Source: Business Intelligence, Haringey Council

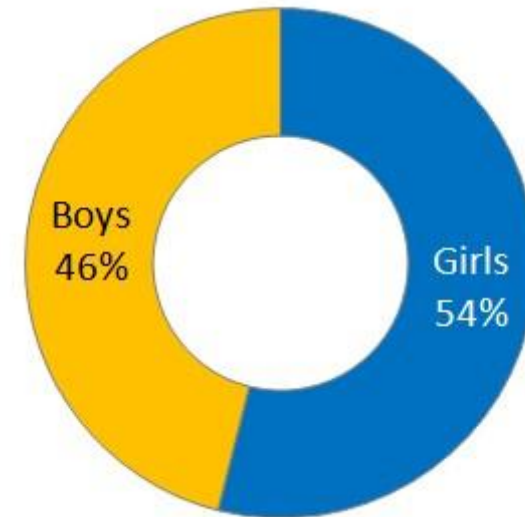
Persistent absentees

Highest persistent absentee rate by ethnicity

1	White-Gypsy/Roma	32%
2	Black-African	17%
3	Mixed-White & Black Caribbean	11%
4	Black-Caribbean	8%
5	White British	7%

Almost a third of Gypsy/Roma secondary pupils and a fifth of Black African pupils are persistent absentees

Persistent absentee by gender

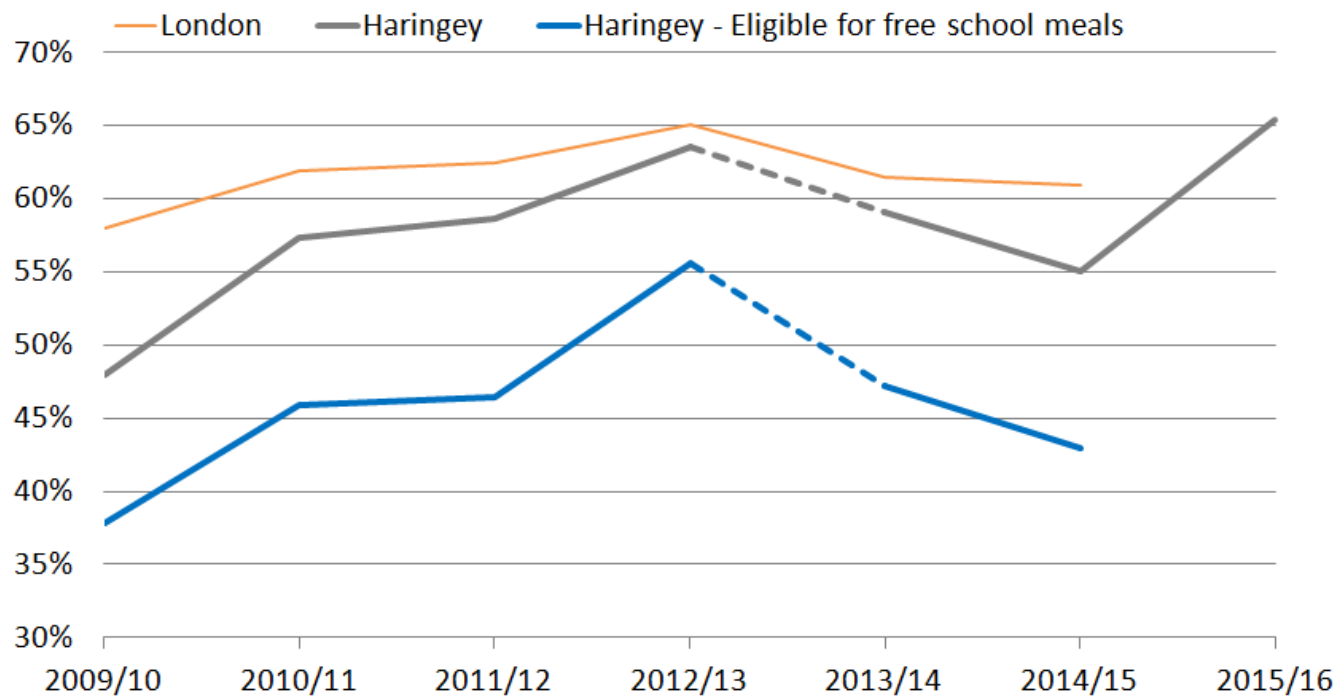


More than half of persistent absentees are girls

Source: Department for Education

GCSEs

Proportion of pupils achieving 5 A*-Cs including English and Maths



- 65% of pupils in Haringey achieved 5 A*C GCSEs in 2015/16 the highest ever.
- The sharp improvement in attainment in Haringey last year *may* push it above the London average.
- The attainment gap between free school meals and non-free school meals has widened in recent years

Source: Business Intelligence, Haringey Council

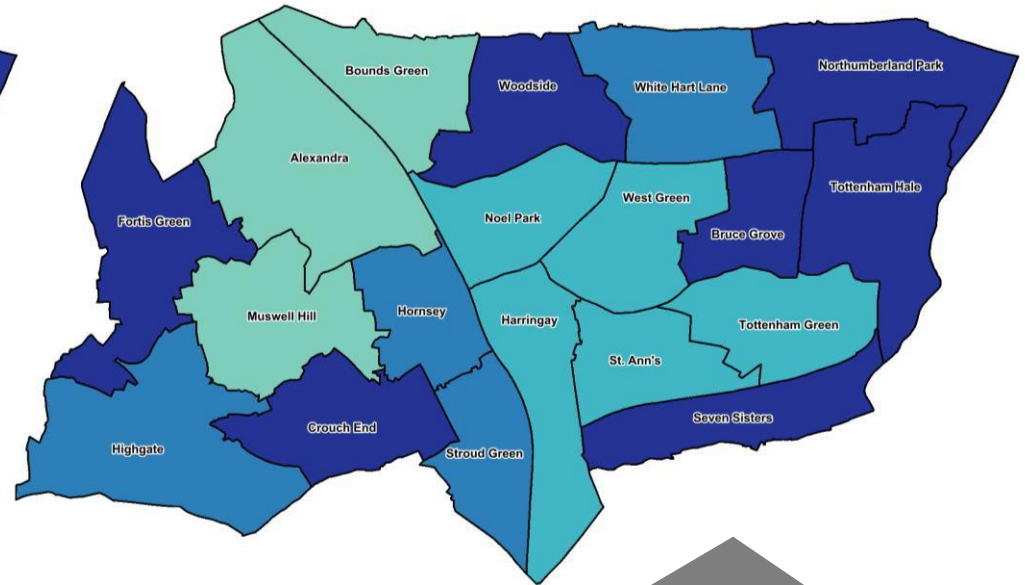
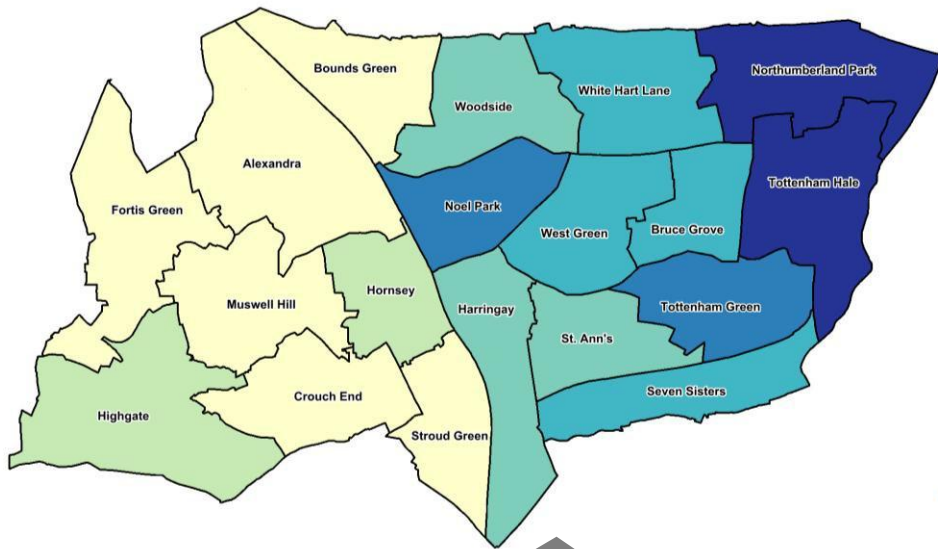
GCSEs

Proportion of pupils achieving 5 A*-Cs including English and Maths



Non-free school meals

Free school meals



Attainment of non-free school meal pupils follows the usual East-West divide

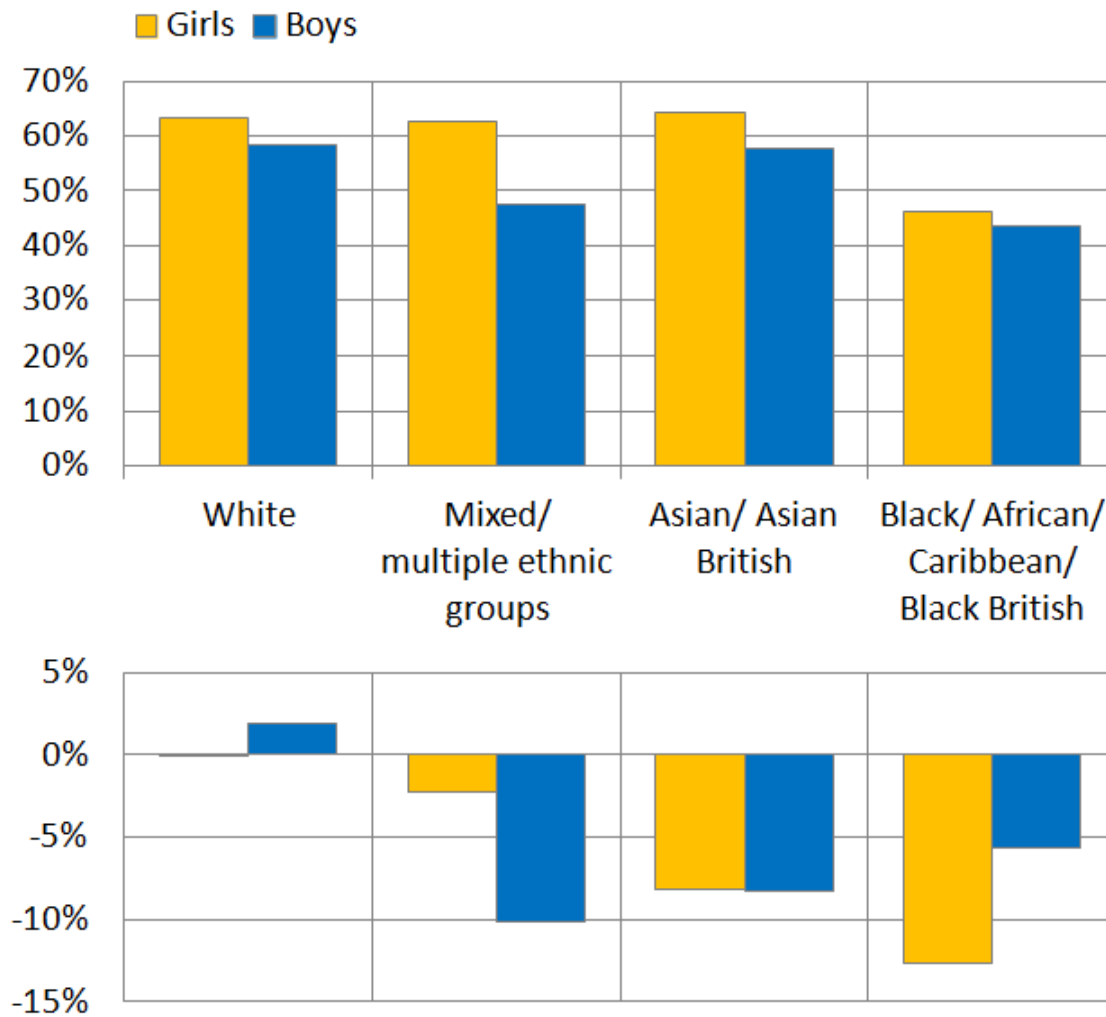
But for pupils on free-school meals GCSE attainment is low across the borough

Source: Business Intelligence, Haringey Council

GCSEs

- Girls are more likely to achieve the target standard than boys
- Pupils of black ethnicity are less likely than average to achieve the expected standard

Proportion of pupils achieving 5 A*-C at GCSE including English and Maths

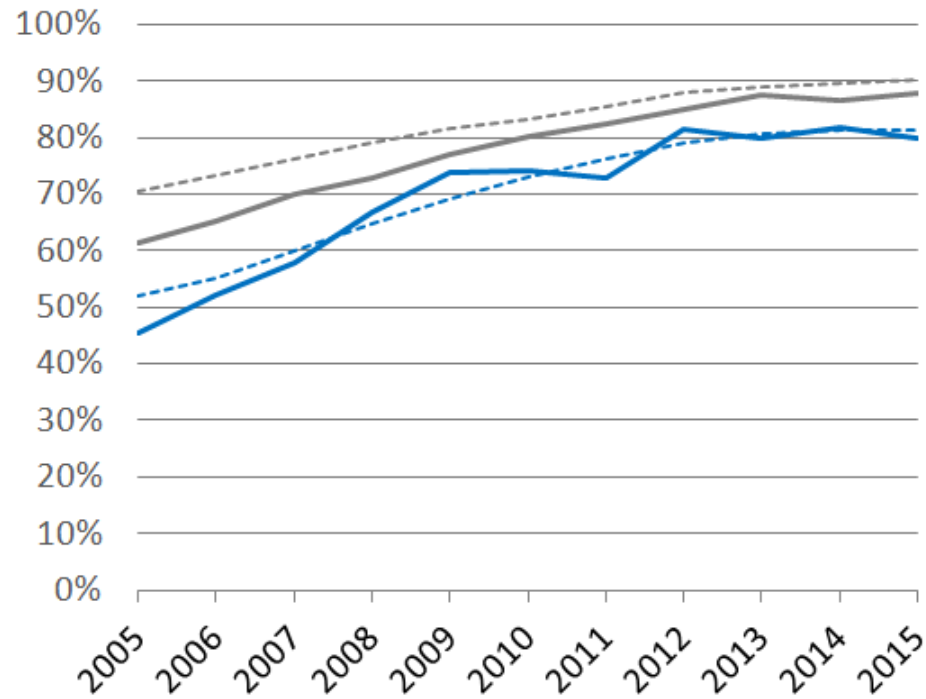


The gap with London average

Attainment of girls of black ethnicity and boys of mixed ethnicity in Haringey is considerably below the London average

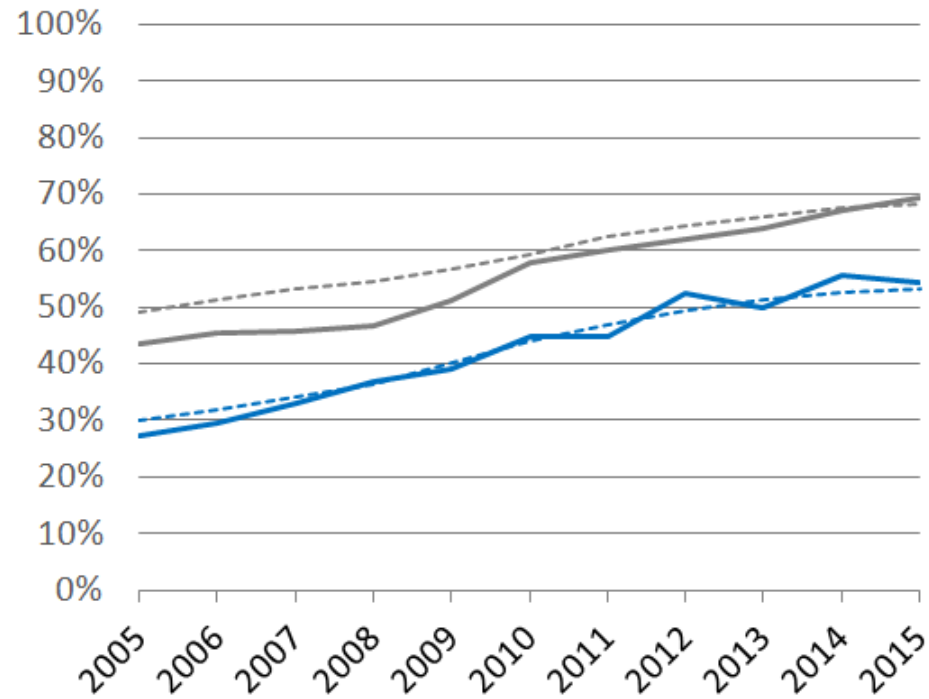
Post-16 outcomes

Proportion of 19 year olds with a:
Level 2 qualification



The qualification level of 19 year olds in Haringey has been rising in line with the London average

Level 3 qualification



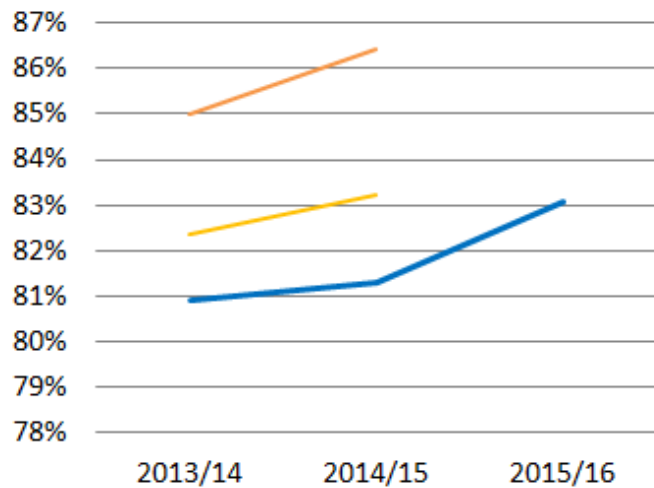
Free school meals pupils were less likely to have formal qualifications at age 19 – the gap is wider for more advanced qualifications

Source: Department for Education

Post-16 outcomes

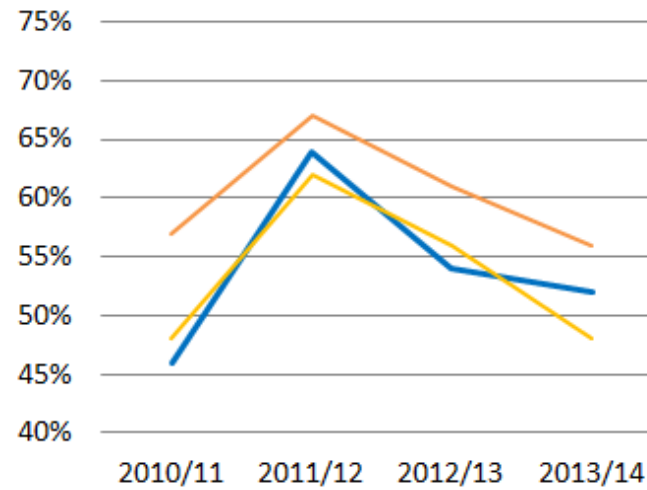
— Haringey — London — England

16-19 year olds in education and training



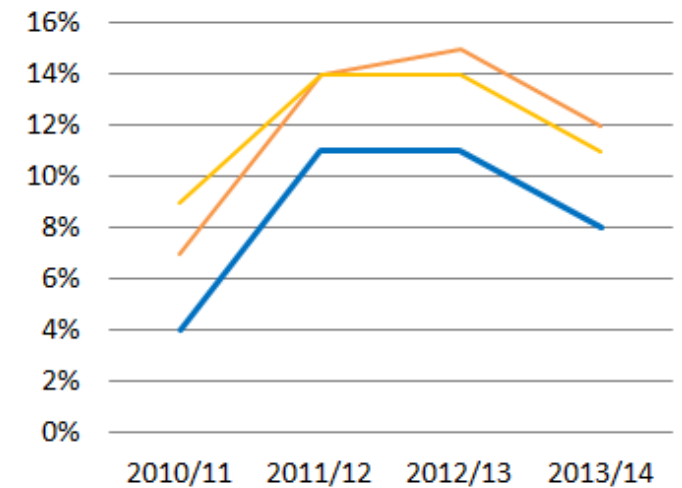
83% of 16-19 year olds were in education and training in 2015/16, a bigger increase than year before

Young people entering Higher Education



Higher education entry fell following the tuition fee increase, though it fell less in Haringey than the England average

Young people entering top universities

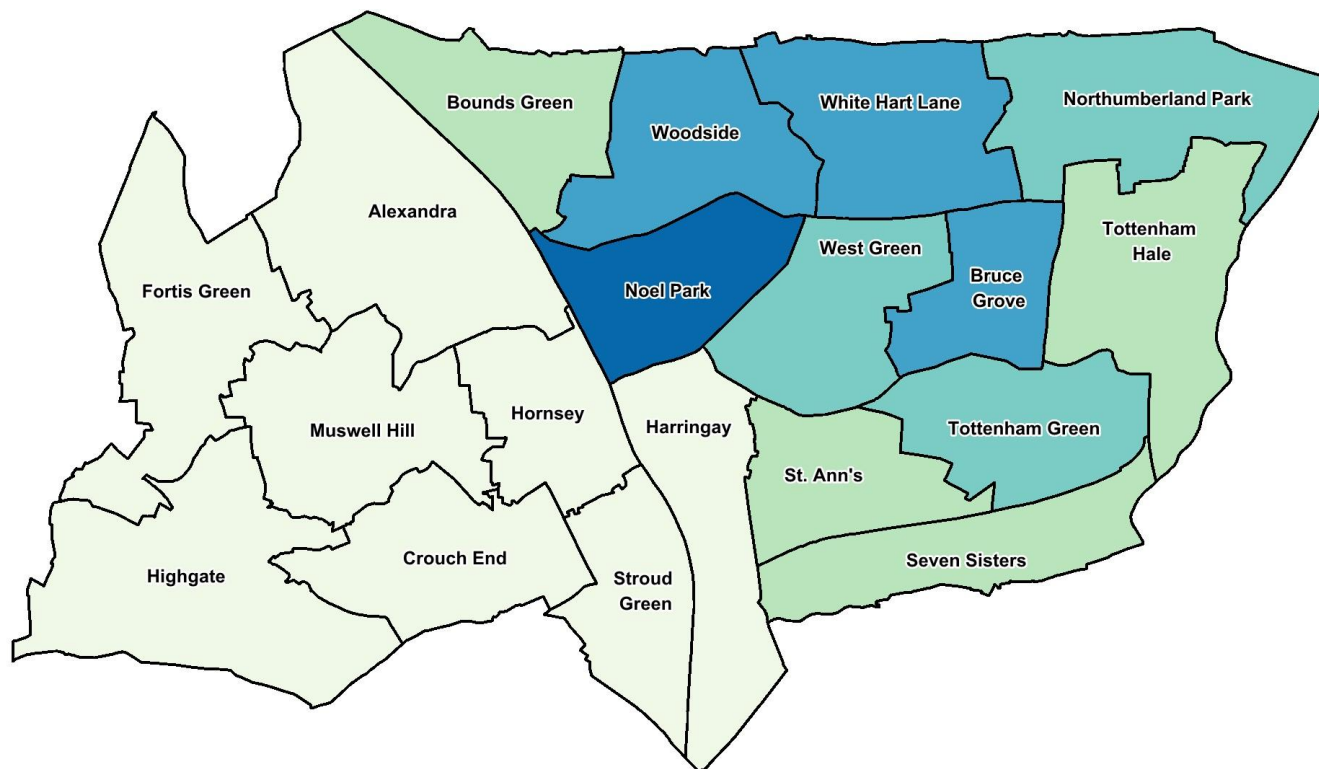


But proportion going to Russell Group universities remains very low (1% in Tottenham)

Source: Business Intelligence, Haringey Council

NEETS

People aged 17-20 not in Employment Education and Training



- Of the 319 known NEETs in June aged 17-20 in June 2016 **64% were men**
- Only 20% of known NEETS lived in the West of the borough

Source: Business Intelligence, Haringey Council

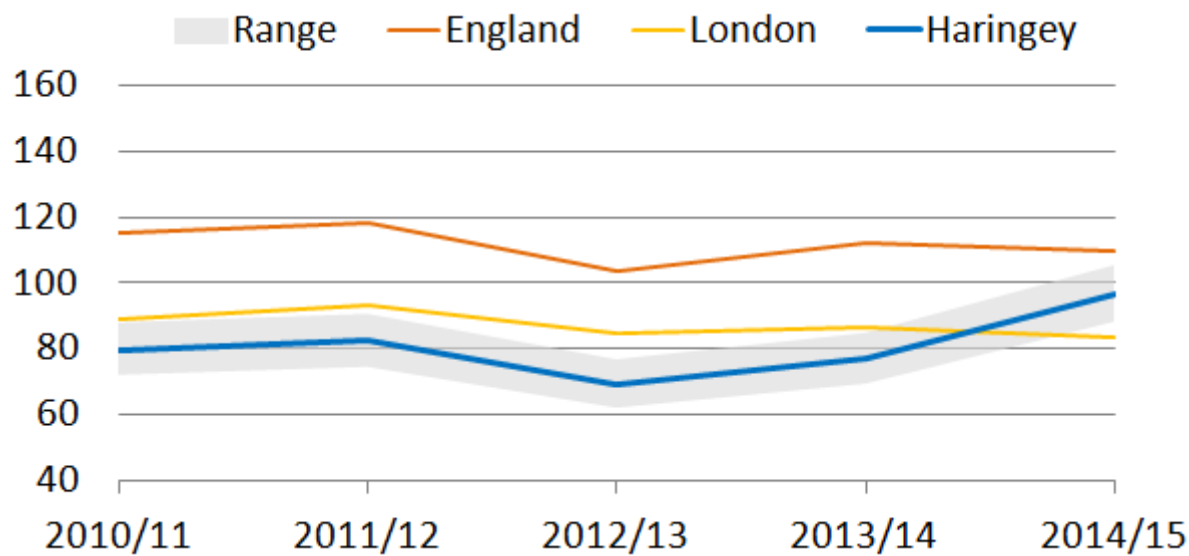
Hospital admissions and Mental Health

Hospital admissions for injury

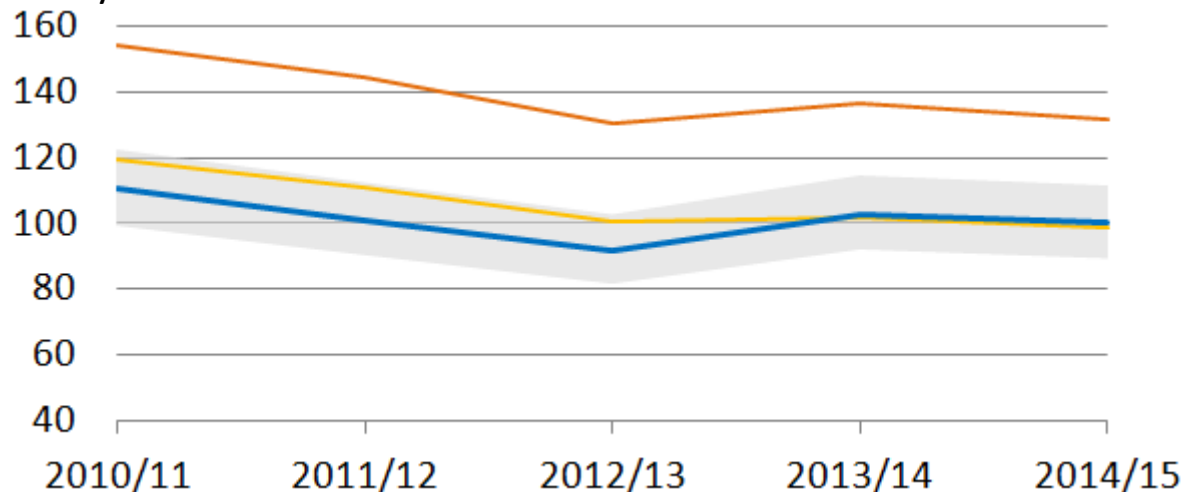
Hospital admissions caused by unintentional and deliberate injuries per 1,000 people in age group

The rate injury caused hospital admissions among children has remained has risen in recent years

0-14 year olds:



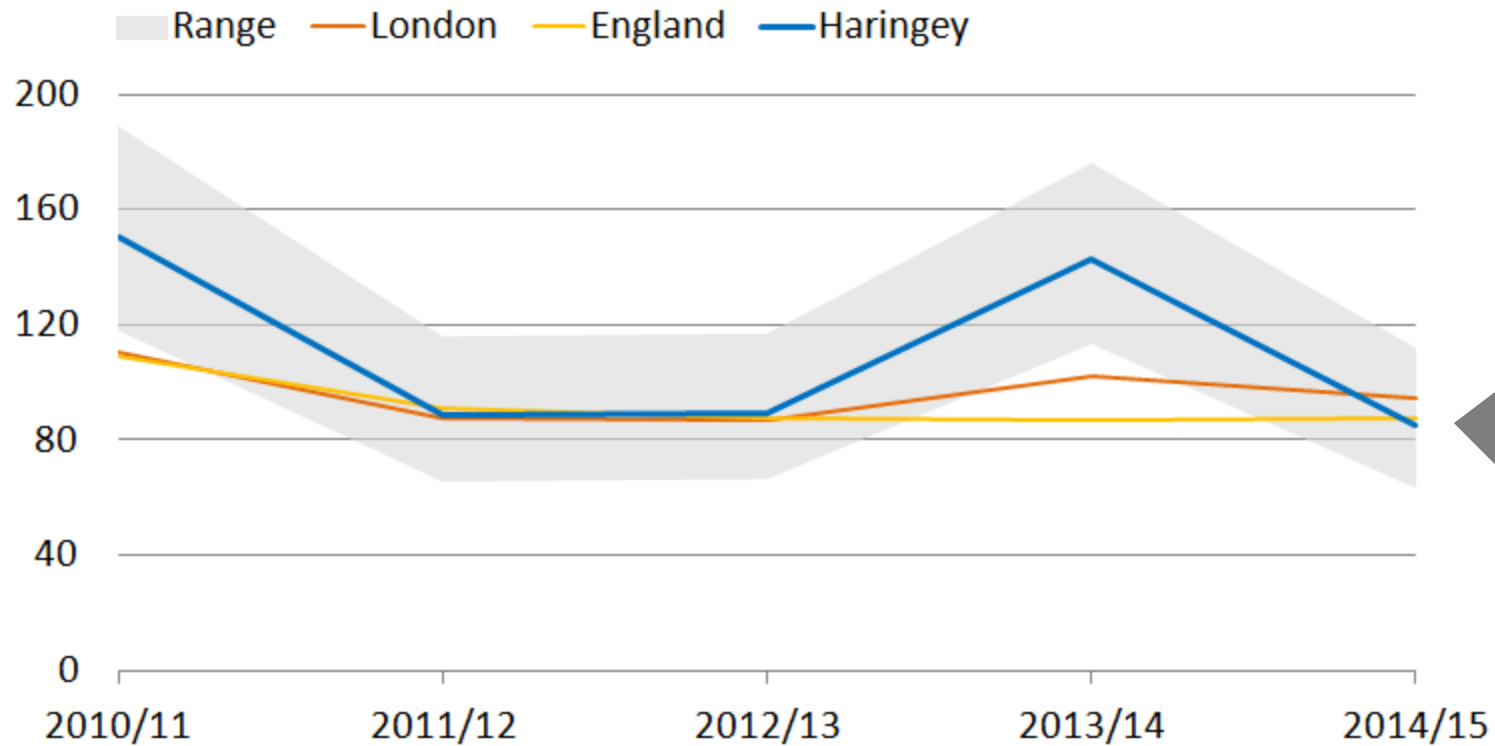
15-24 year olds:



For 15-24 year olds injury caused hospital admissions have remained quite low

Child mental Health

Child admissions for mental health: (rate per 100,000 aged 0 -17 years)

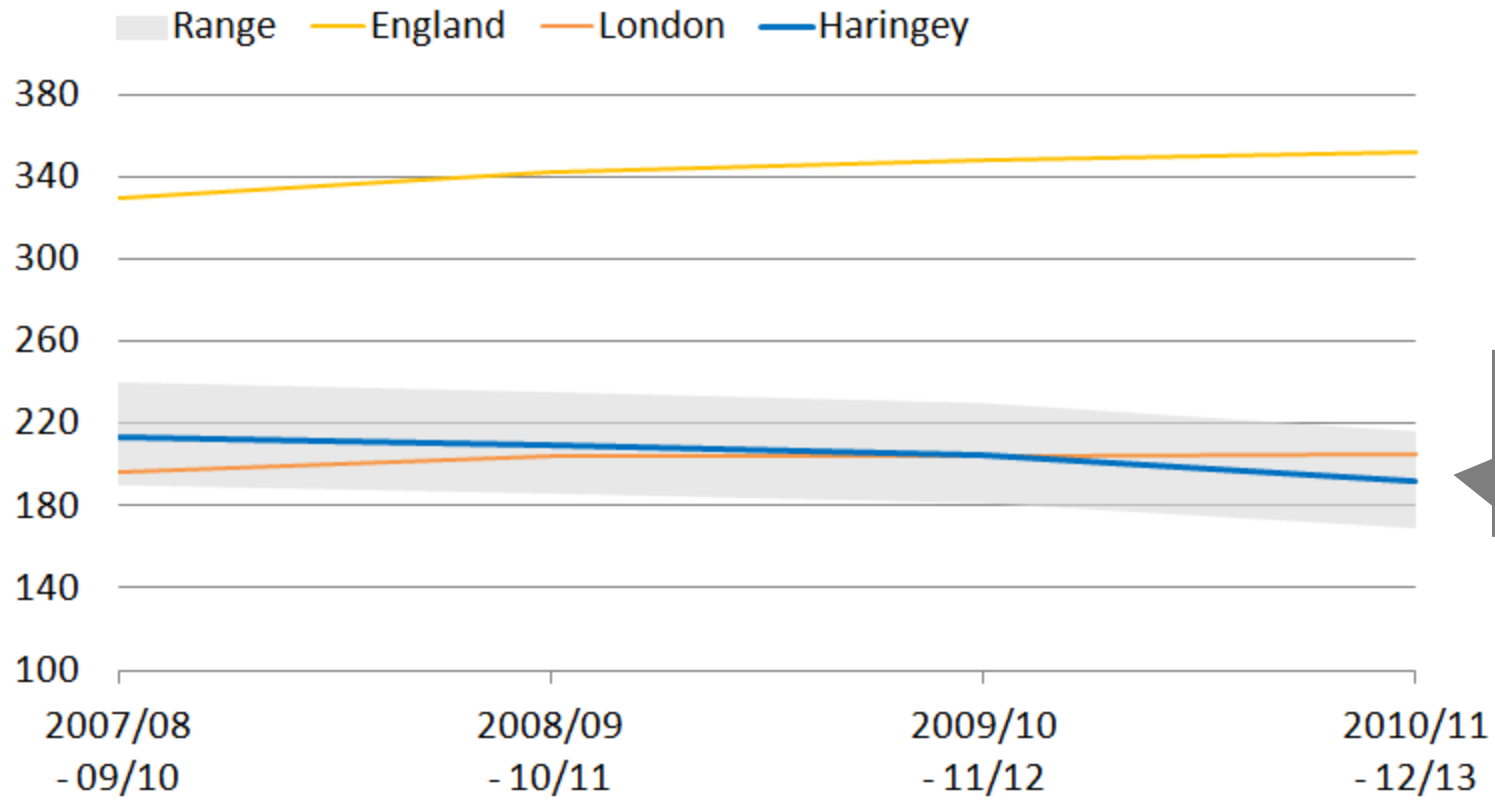


- Child mental health admissions have fluctuated in recent years
- But in 2014/15 Haringey with a rate of 85 aligned to the London

Source: Public Health England

Self Harm

Young people hospital admissions for self-harm: (rate per 100,000 aged 10–24)



Haringey's low levels of hospital admissions for self-harm continue to fall

Source: Public Health England

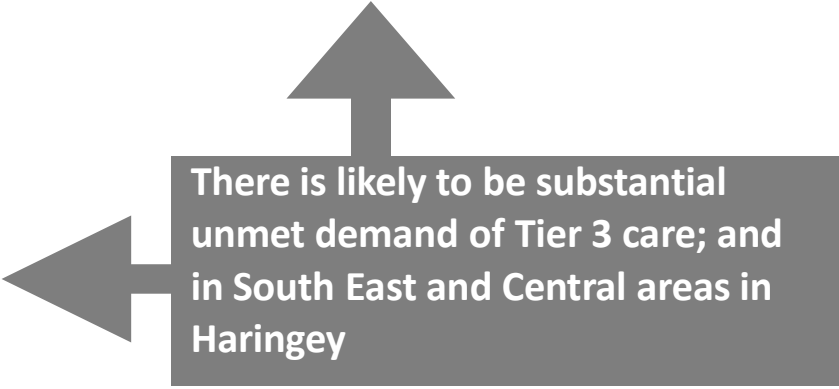
www.haringey.gov.uk

Child and Adolescent Mental Health Services

Type of care	Estimated need*	Approximate delivery**
Tier 1: Primary level care	50	17
Tier 2: Services provided by specialist individual professionals relating to primary care	1,150	1,238
Tier 3: Specialised multi-disciplinary service for more severe, complex or persistent disorders.	4,345	272
Tier 4: Essential tertiary level services (e.g. day units, in-patient units)	9,305	Unknown

Caseloads per 10,000 in population***

North East: 41.9
 West: 41.0
 South East: 37.3
 Central: 35.8



There is likely to be substantial unmet demand of Tier 3 care; and in South East and Central areas in Haringey

* Number of children and young people requiring a response

** Number of children and young people receiving a commissioned response in 2014/15

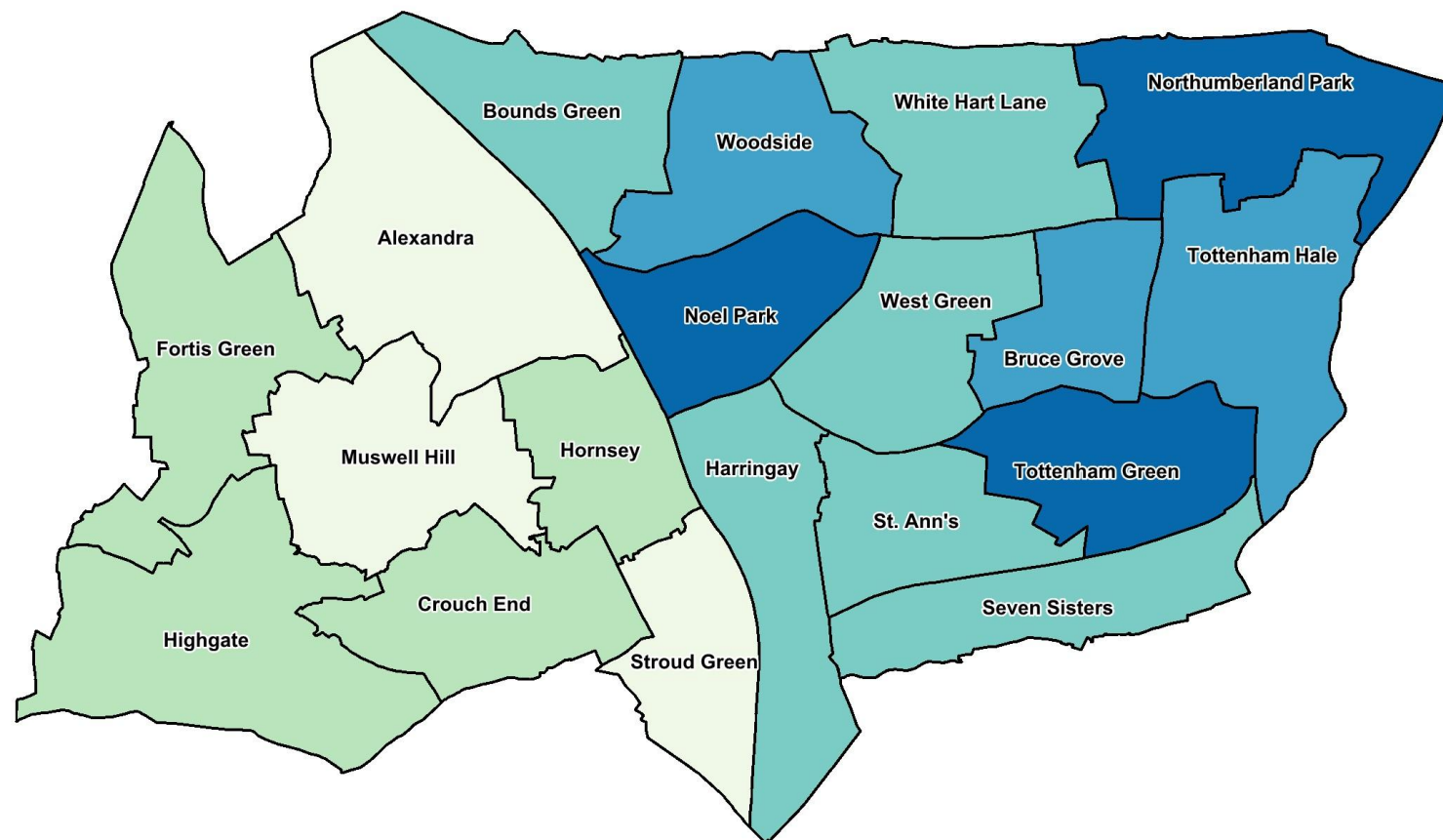
***Caseloads for Barnet, Enfield and Haringey Mental Health Trust and Open Door in Haringey

Source: Business Intelligence. Haringey

Crime and Gangs

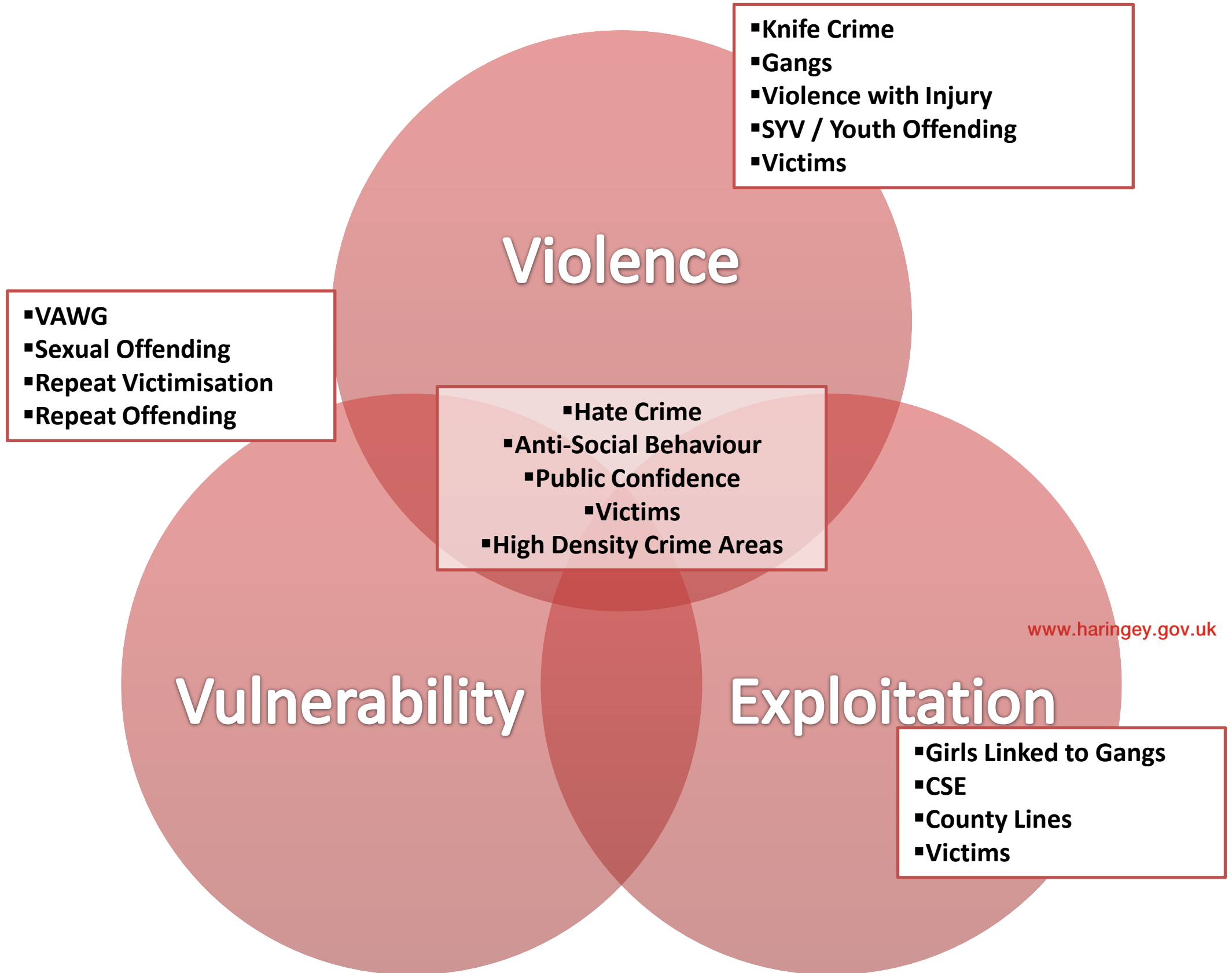
Violent crimes

Number of violent crimes in last year per 1,000 people



The level of violent crime in Northumberland Park, and Tottenham Green in the East is **three times higher** than in Alexandra, and Muswell Hill in the West

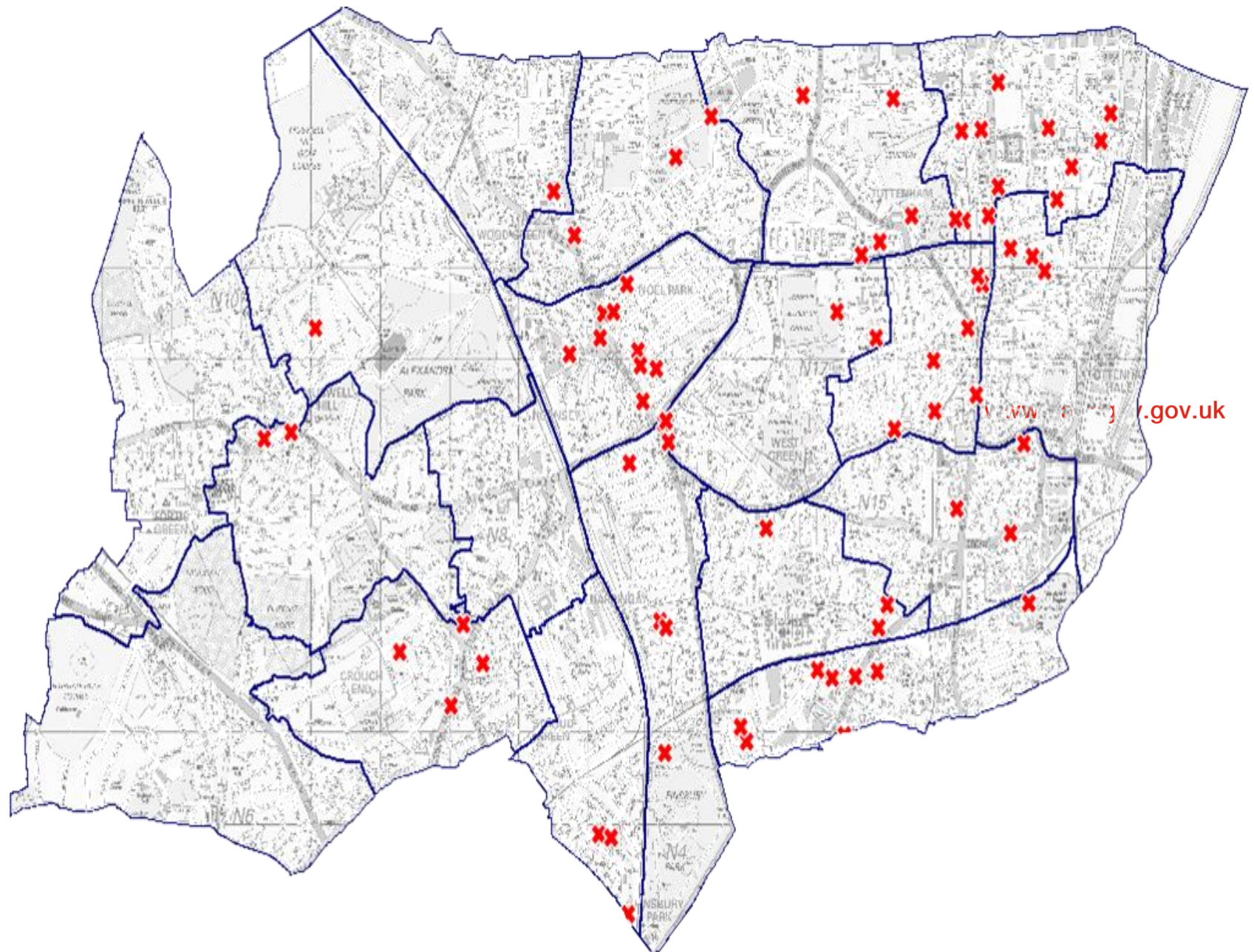
Source: Crime Figures, Metropolitan Police



- Violent crime is increasing in Haringey.
- Young people and women are the groups most affected by this.
- Violence is concentrated in areas of borough with multiple socio-economic challenges, including higher levels of deprivation.
- Violence affects all communities, but serious youth violence victims and perpetrators are disproportionately from black and minority ethnic communities.

- Total knife crime has reduced by **5%** in the past year (29 fewer offences)
- However, there has been an **increase of 4%** in knife injury victims aged under 25, with **87** victims in Haringey - **5th** highest volume in London
- **80%** of offences are classified in the most serious categories of GBH or Murder, slightly above the London average (77%)

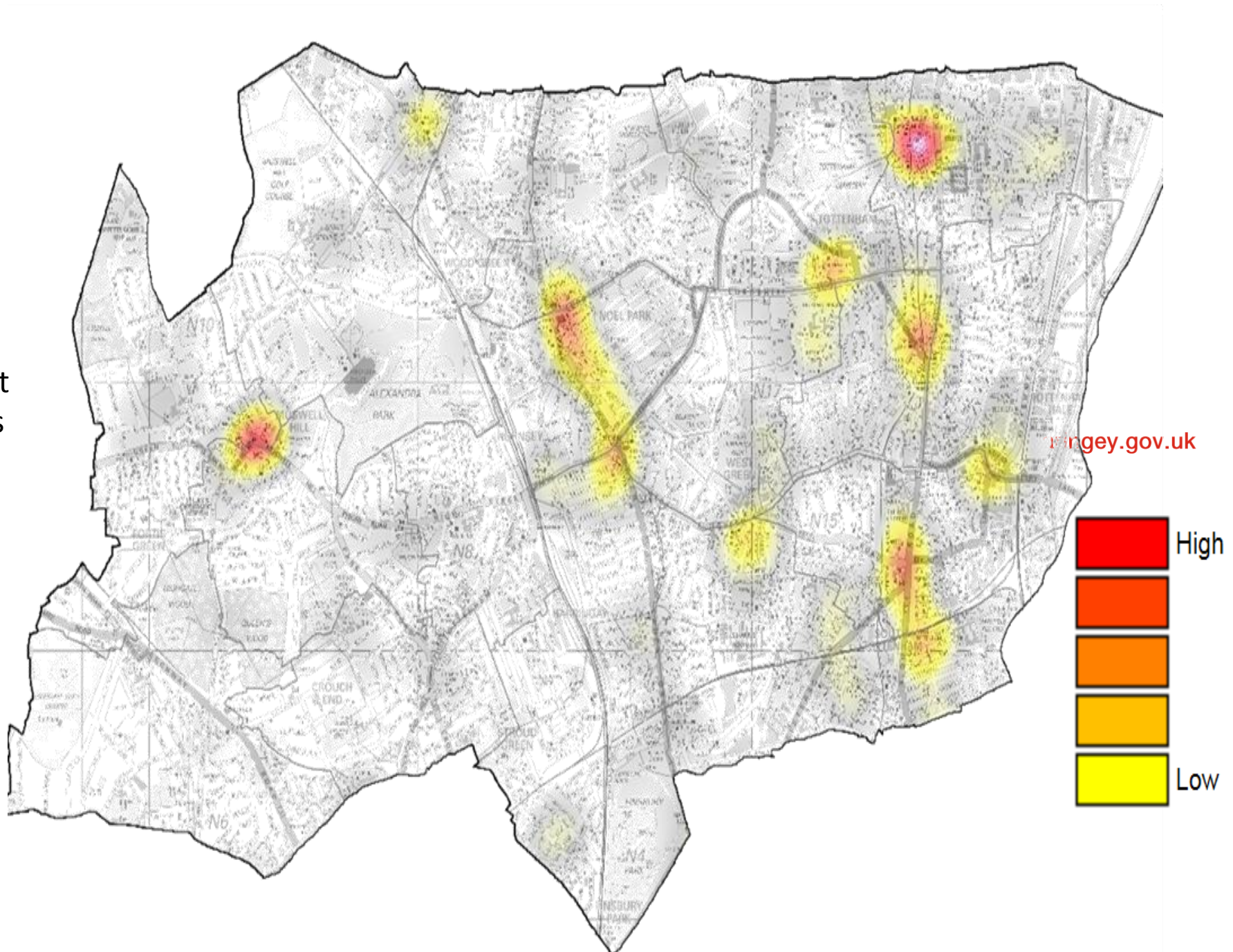
- Highest volume wards are **Northumberland Park, Noel Park and West Green**



Gangs and Serious Youth Violence

- **319** victims of serious youth violence (SYV) in the past 12-months, an increase of **5%**. London has experienced a similar increase over this period.
- Haringey has the **5th** highest volume of all London boroughs
- SYV in Haringey consists of a combination of robbery and violence, with victims aged 10 to 19.
- Gang members becoming progressively younger, some now becoming involved between the ages of 10 to 13.

▪ Gang and youth violence has become more widely spread across the borough in recent months, with less clustering.

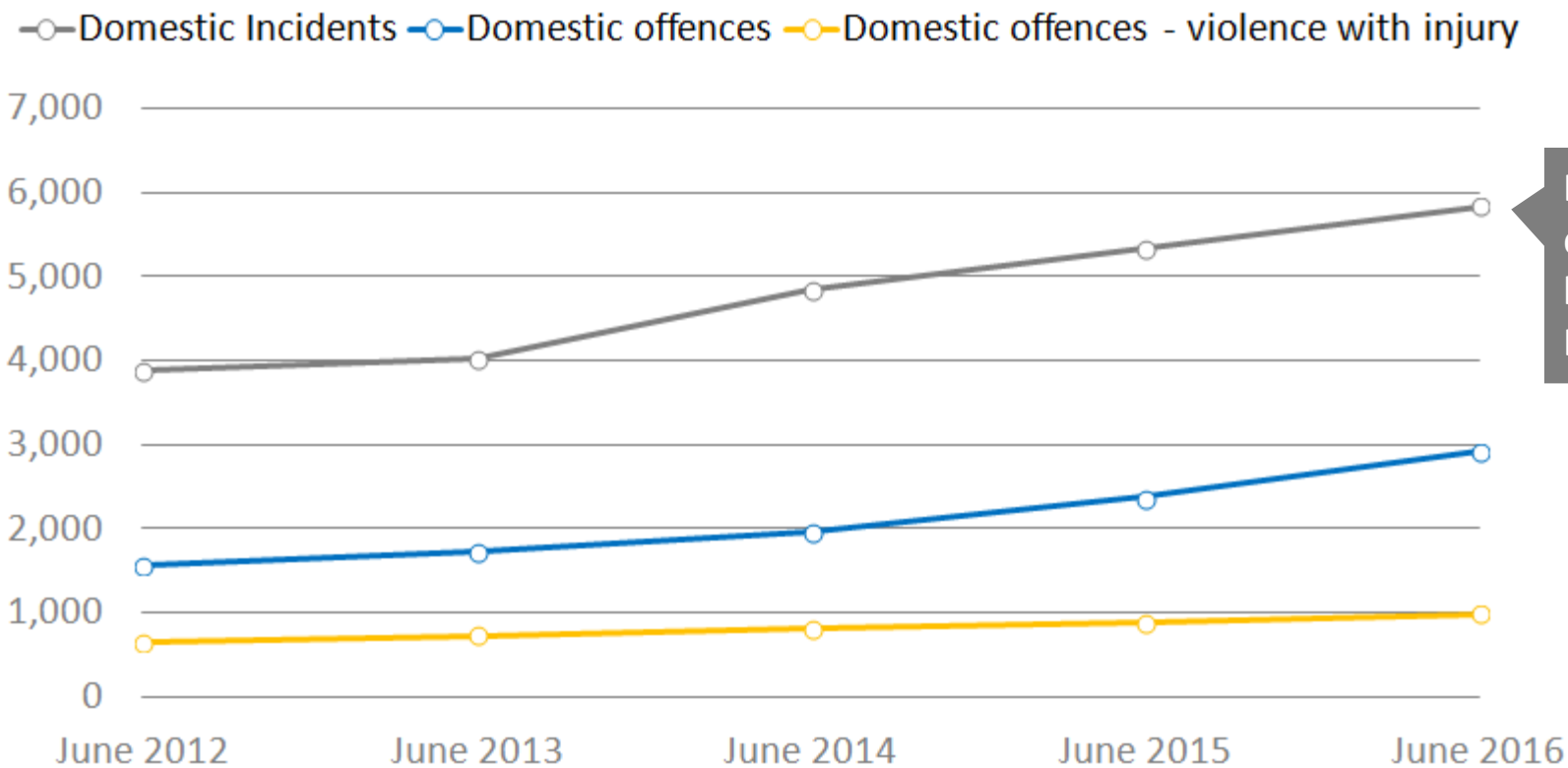


haringey.gov.uk

Domestic Abuse

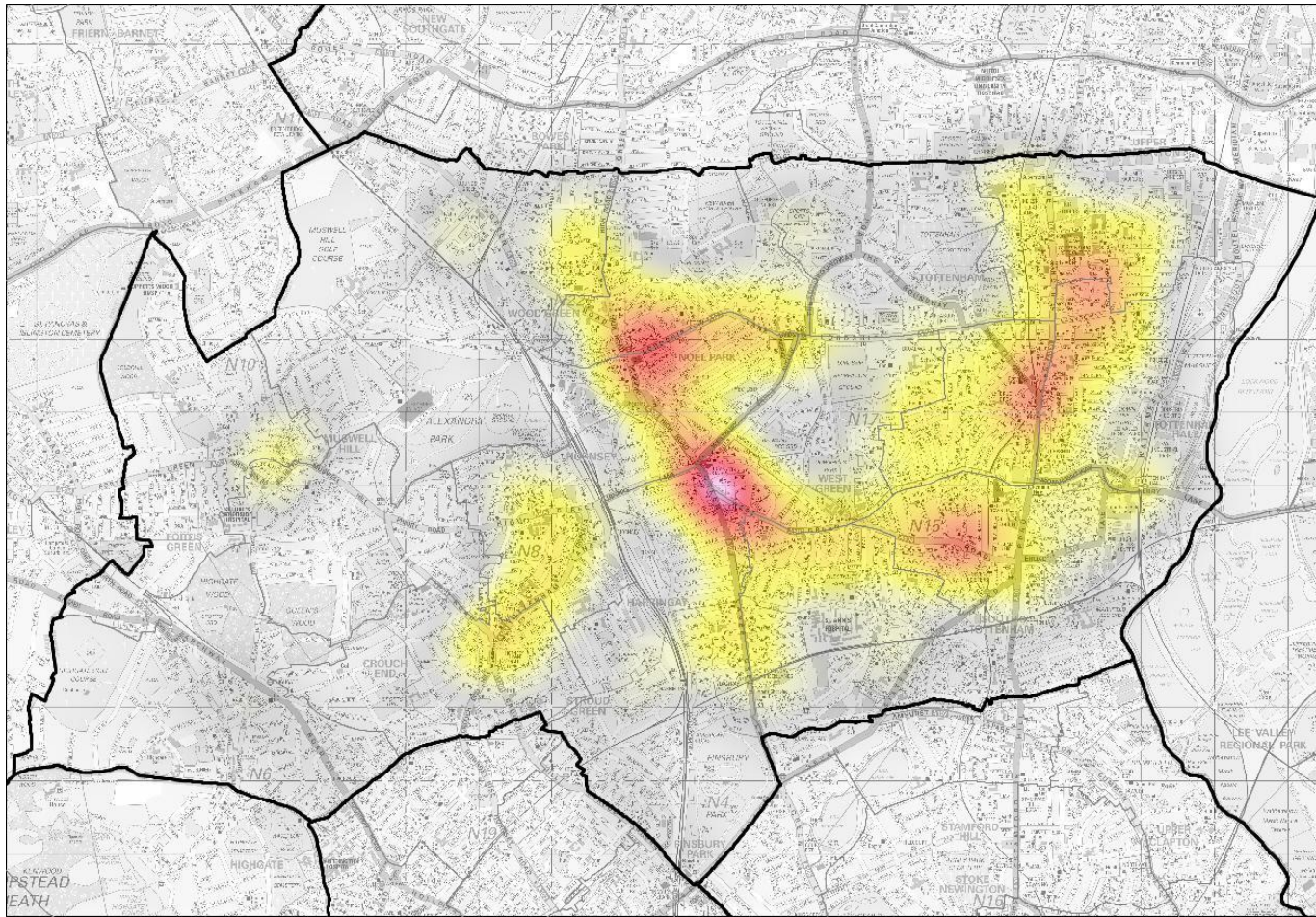
In the 12 months to June 2016; there were 22 domestic abuse incidents per 1,000 people, **joint second highest London**

In June 2016 **31% of victims in Haringey were repeat victims**; on average they had experienced 3 incidents in the past 12 months



Source: Domestic Violence dashboard, London Assembly

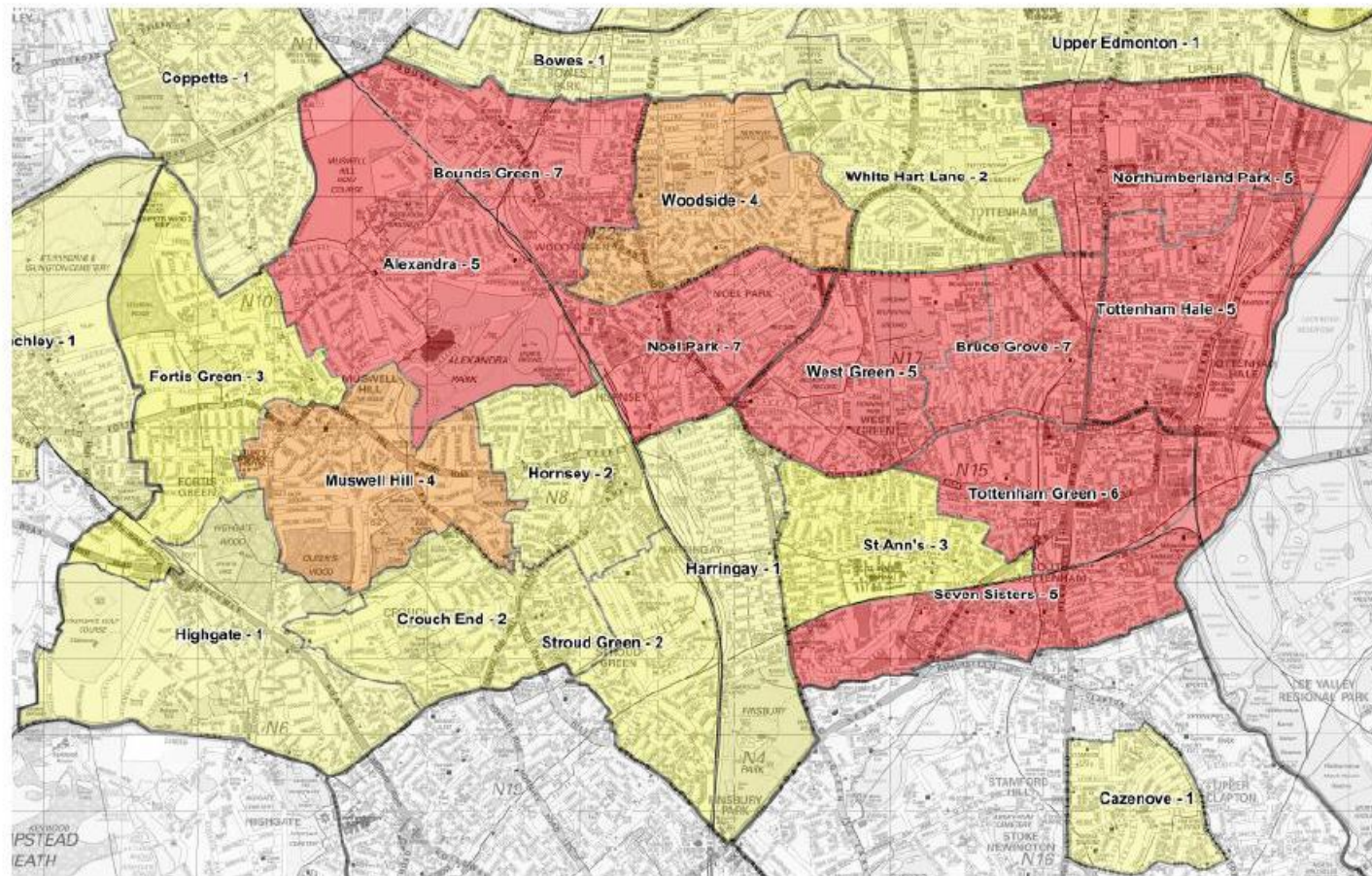
Domestic Abuse – violence with injury



- **18% increase in Domestic Abuse VWI offences** in the past 12 months in Haringey, compared to a 4% increase for London.
- Offending takes place primarily in residential locations, with hotspots in Turnpike Lane, Wood Green and Bruce Grove.
- Almost **75%** of all Domestic Abuse VWI **occurs to the East** of the borough.

Source: Scrutiny Performance Overview, Haringey Council

Child Sexual Exploitation

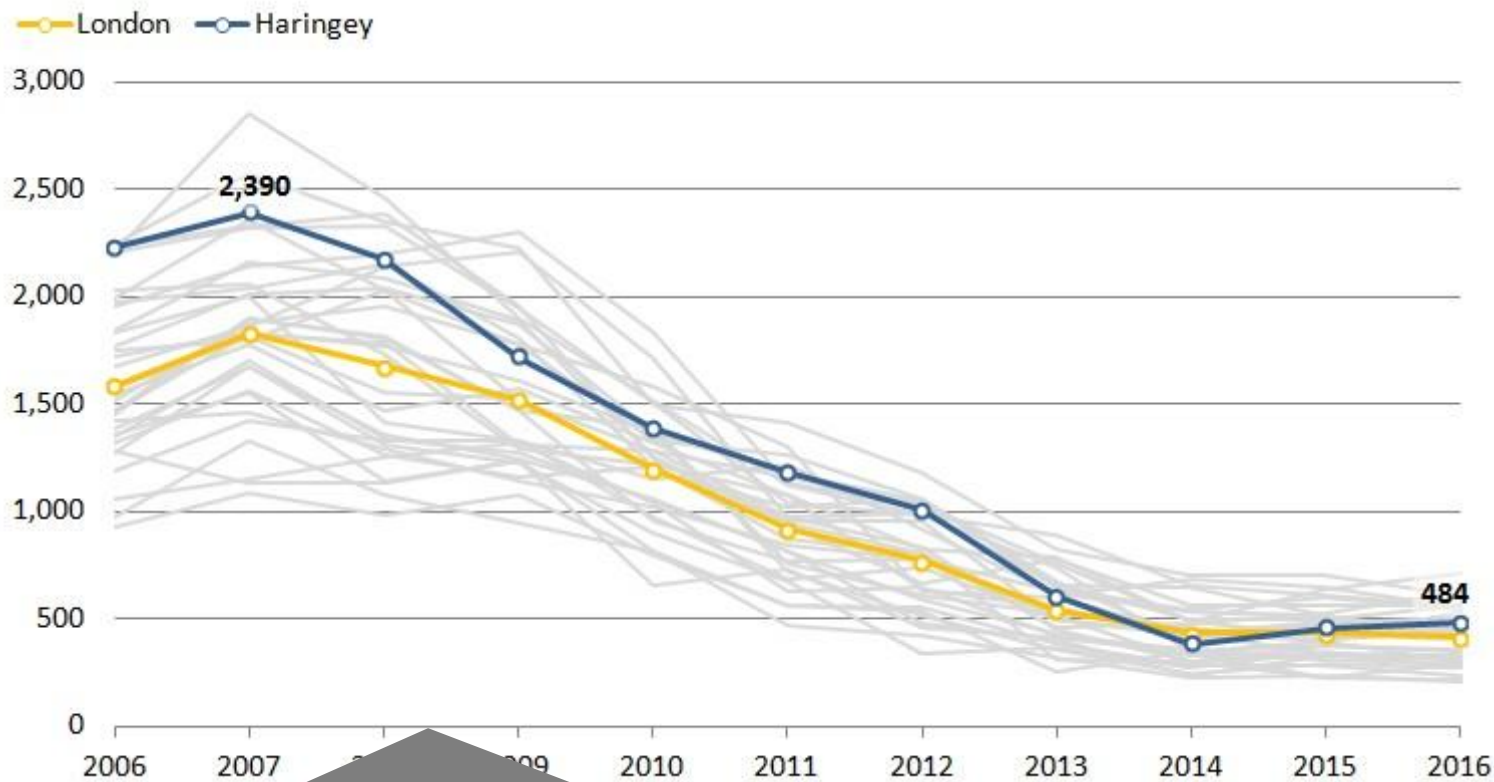


Numbers are low but there are more cases of CSE in the East of the borough

Source: Scrutiny Performance Overview, Haringey Council

Young entrants to criminal justice system

Juvenile first time entrants to the criminal justice system, per 100,000 10-17 year olds



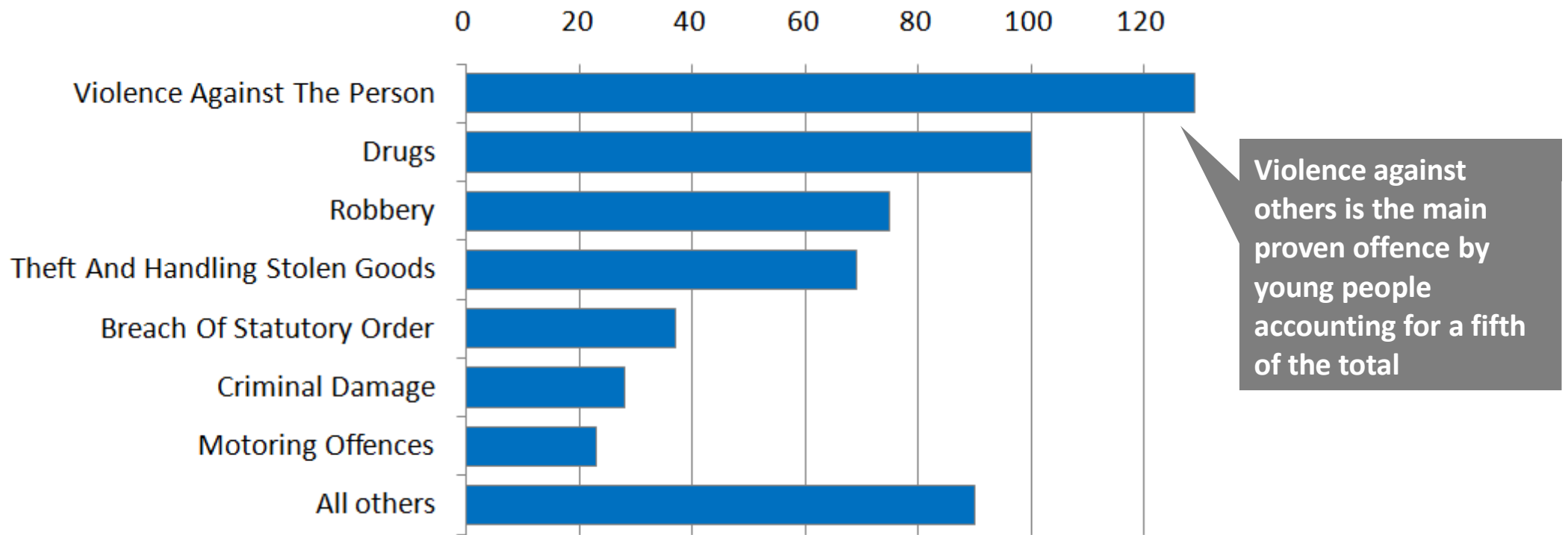
Following a sharp fall, since 2014 the rate of first time young offenders has fluctuated

The first time young offending rate more than quartered in the decade to 2014 linked to increased usage of Triage, change in Police Processing and change in Magistrates

Source: Ministry of Justice

Young offenders

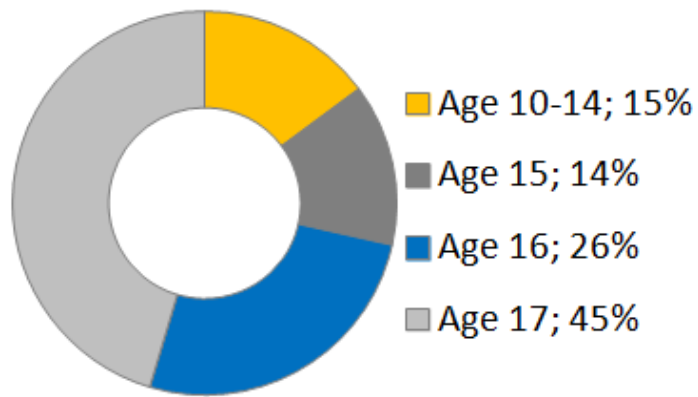
Proven offences by young people in 2014/15



Source: Ministry of Justice

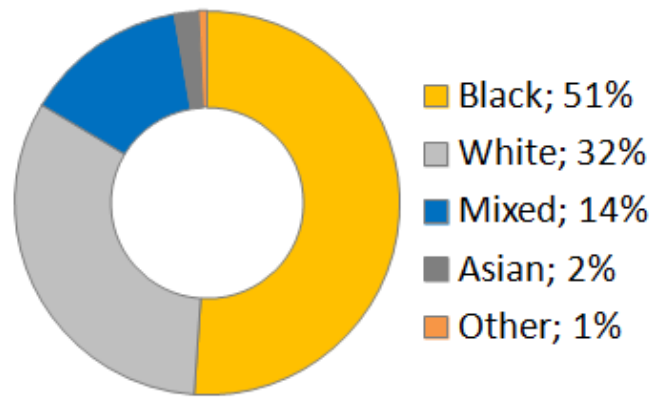
Young offenders

Age



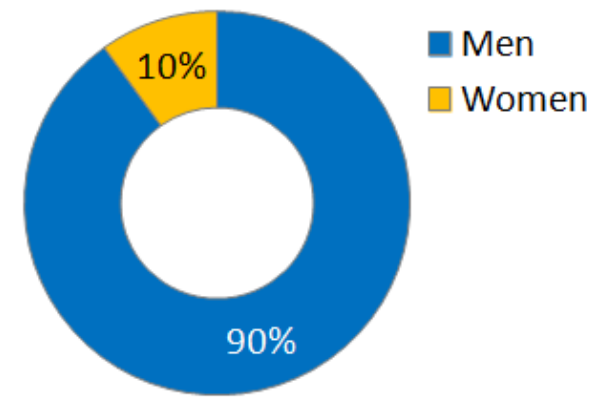
45% are aged 17

Ethnicity



51% are Black

Gender



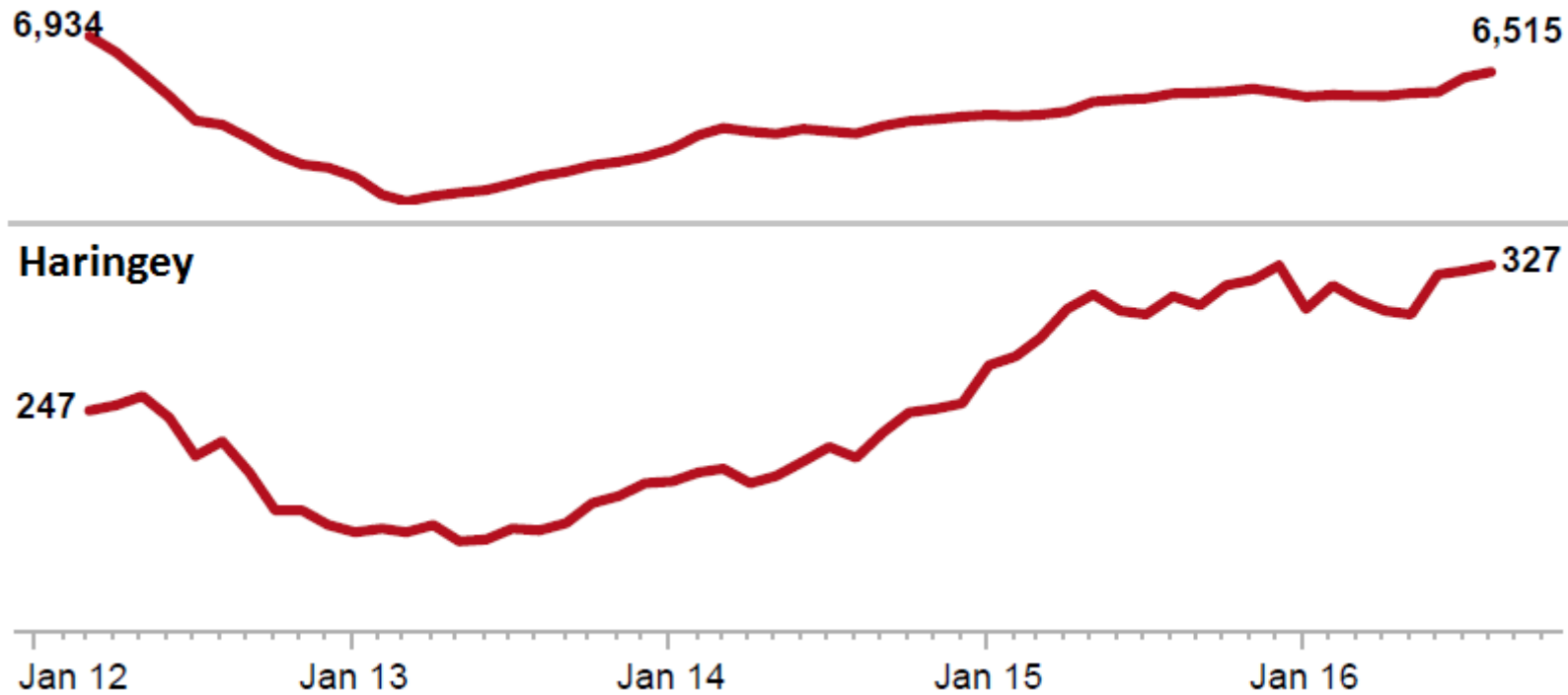
90% are men

Source: Ministry of Justice

Youth Violence

Victims of serious youth violence

London



- Serious Youth Violence in Haringey has been steadily rising since 2014, faster than the London average
- In the last 12 months there were 327 serious youth violence victims in Haringey, the **5th highest in London**

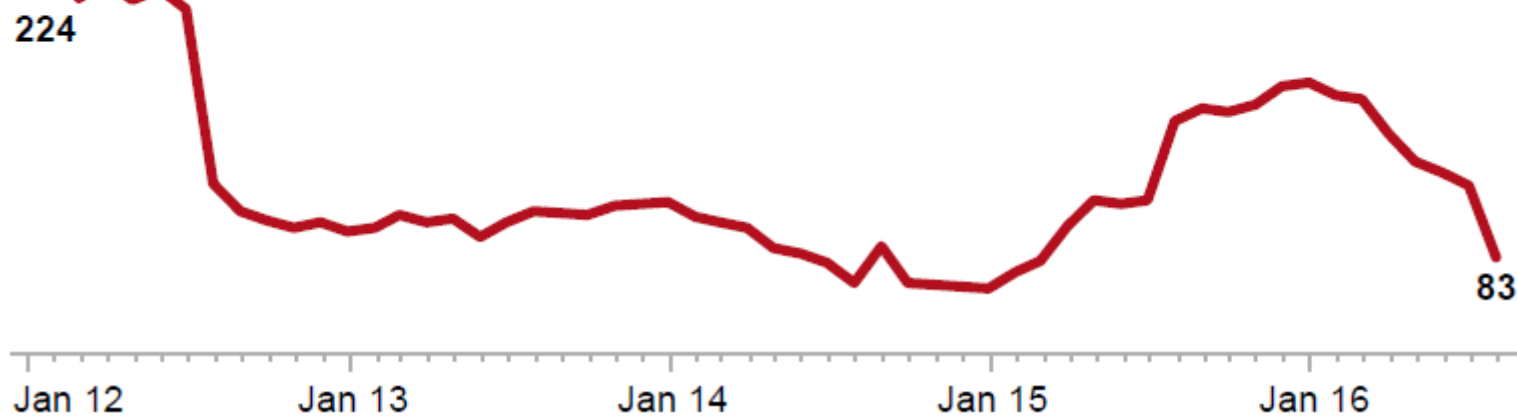
Source: Gangs dashboard, London Assembly

Gang flagged offences

London



Haringey



- In the 12 months to July 2016 there were 122 gang flagged offences in Haringey, the 3rd highest in London
- There was a marked rise in Gang related offences during 2015/16 but has fallen back

** **Gang Flagged Offences:** Any crime or crime-related incident where any individual believes that there is a link to the activities of a gang or gangs
 Source: Gangs dashboard, London Assembly

Gang and youth violence

- 327 victims of Serious Youth Violence (SYV) across Haringey in the 12 months to August 2016. This represents an **increase of 5%** as compared to the previous year.
- 83 of these offences have been classified as 'Gang Related'.
- Gang and youth violence has **become more widely spread** across the borough in recent months, with less clustering.

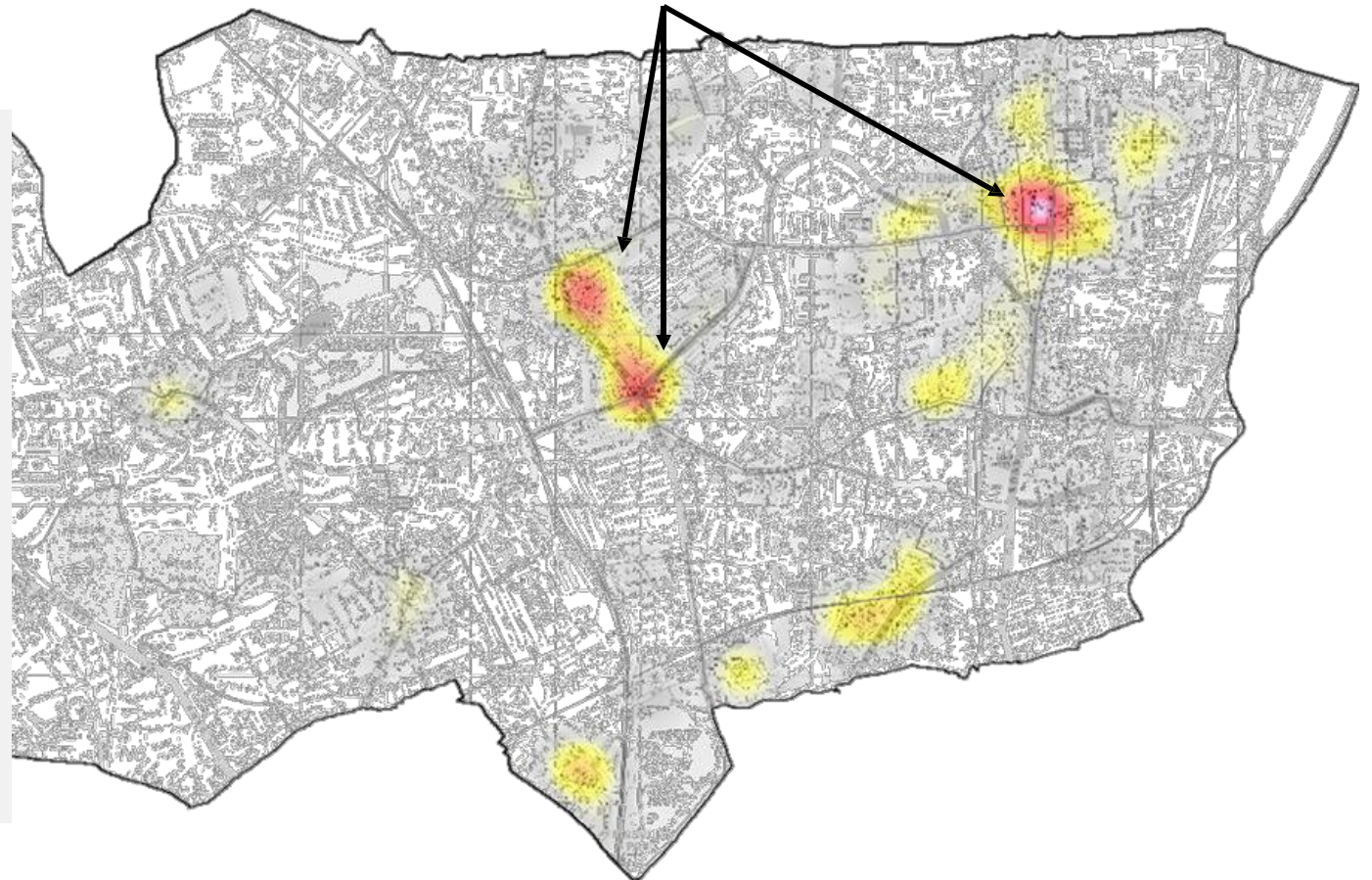


Source: Scrutiny Performance Overview, Haringey Council

Knife injury victims

- Key locations are Wood Green High Street, Turnpike Lane and Bruce Grove / Lansdowne Road
- Hotspots have recently shifted, following targeted partnership work in long standing high volume locations

- Knife-enabled offending has experienced an increase across Haringey in recent months and is a contributor to both Violence and Robbery.
- Of particular note, knife injury victims aged under 25 (excluding domestic offences) have increased in the past 12 months by +15.2% (12 more offences) compared to +4.3% for London



Source: Scrutiny Performance Overview, Haringey Council

Gang trends in Haringey

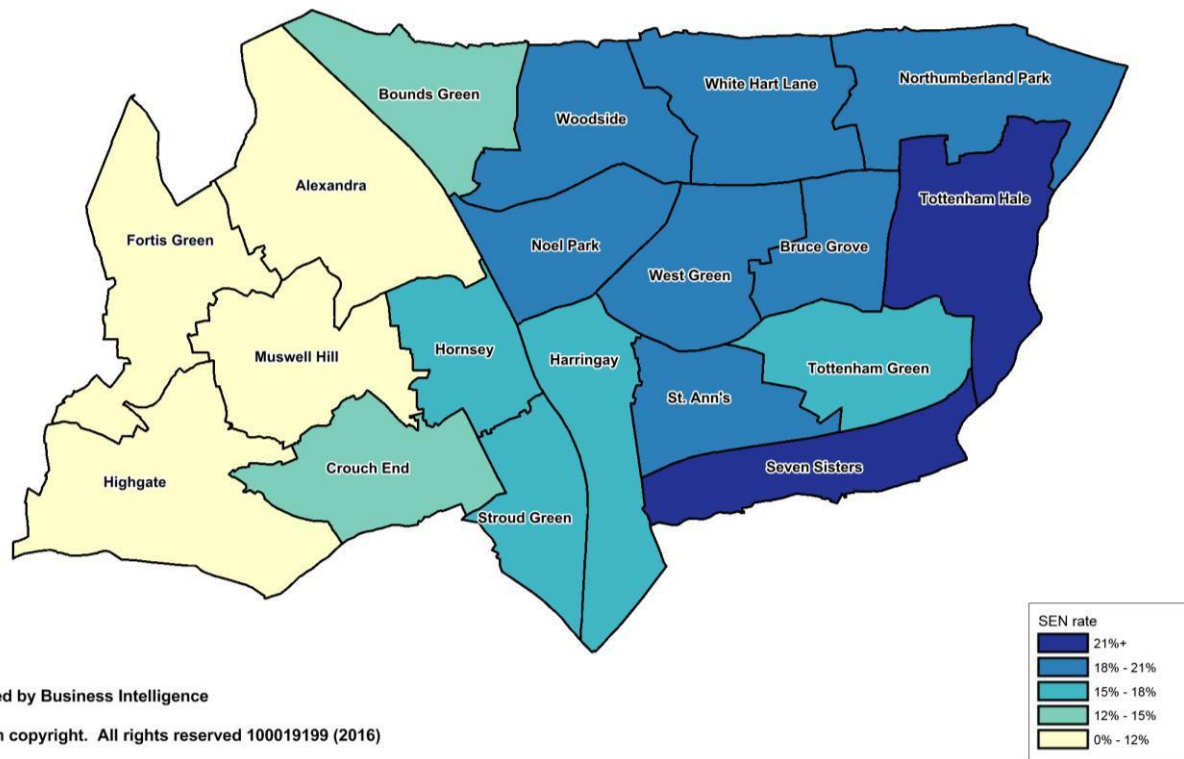
- Large number of gangs operate in the East of the borough. There is a high density of gangs in the Wood Green area.
- **Highest concentration of gang linked activity takes place around Northumberland Park, Noel Park and Tottenham Green.** Almost no incidents take place to the West of the borough.
- **Gangs in Haringey have strong links with gangs in Enfield** (tensions and alliances). There is a clustering of offending on Enfield/Haringey border, particularly around Upper Edmonton / Northumberland Park wards.
- **Increase in knife enabled offending** – more knives are now being used, rather than just intimidated.
- Serious Youth Violence continues to increase in the short and medium term, but at a slower rate than in recent months.

Source: Scrutiny Performance Overview, Haringey Council

SEND & LAC

Special Educational Needs

Proportion of pupils with SEN



Produced by Business Intelligence

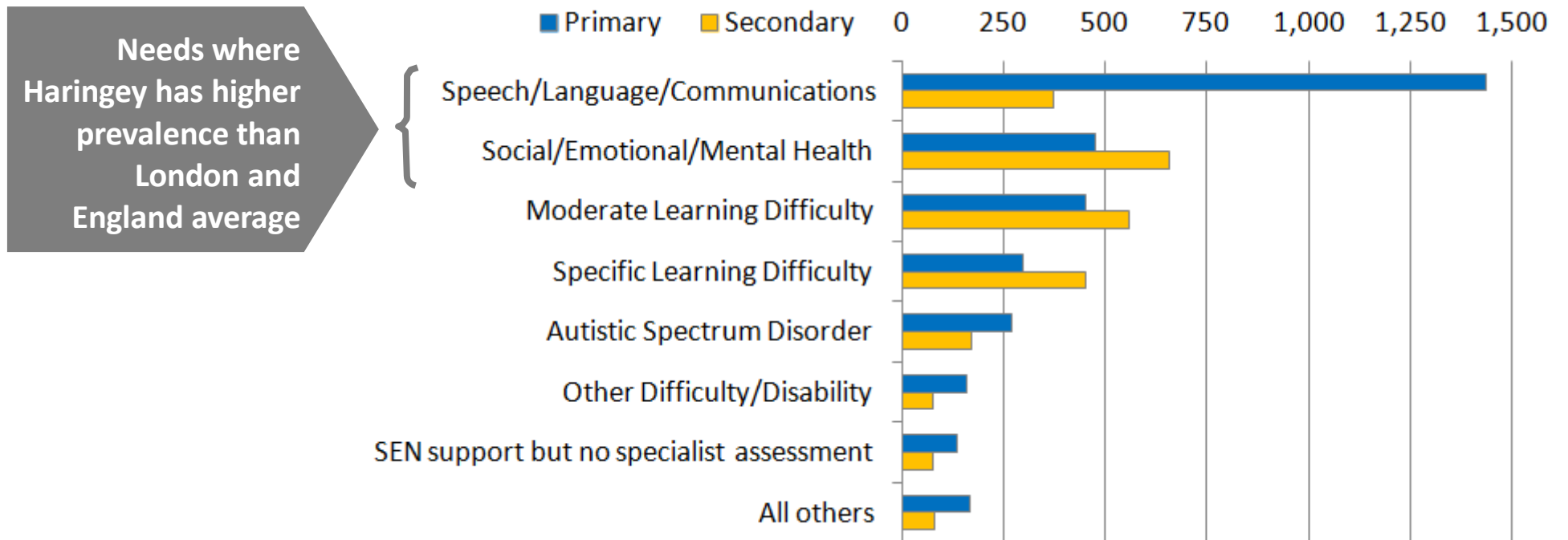
© Crown copyright. All rights reserved 100019199 (2016)

- 16.5% of pupils in Haringey have a SEN, the 10th highest in London
- 6,800 pupils in Haringey have a SEN statement or EHC plan. Most (5,500) have a statement or EHC plan, a fifth (1,300) do not.
- A higher proportion of pupils in the east of the borough have a SEN, particularly in **Tottenham Hale and Seven Sisters**

Source: Business Intelligence, Haringey Council and Department for Education

Special Educational Needs

Number of pupils with SEN

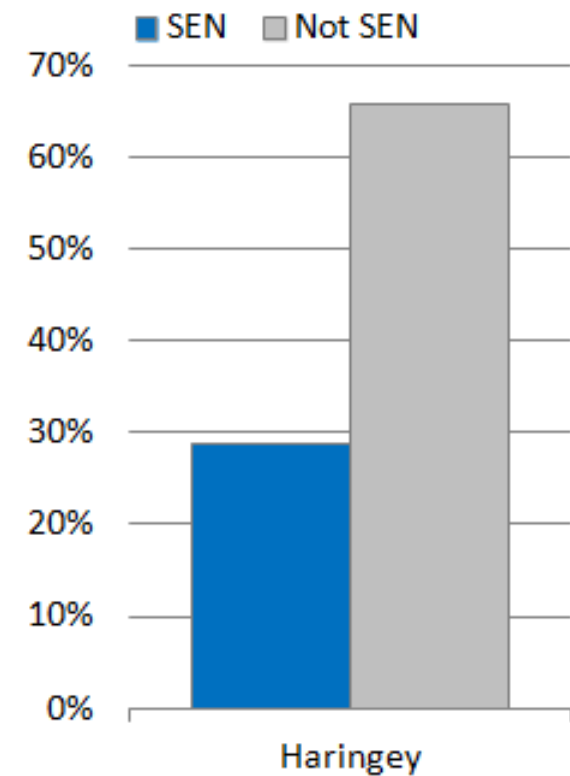
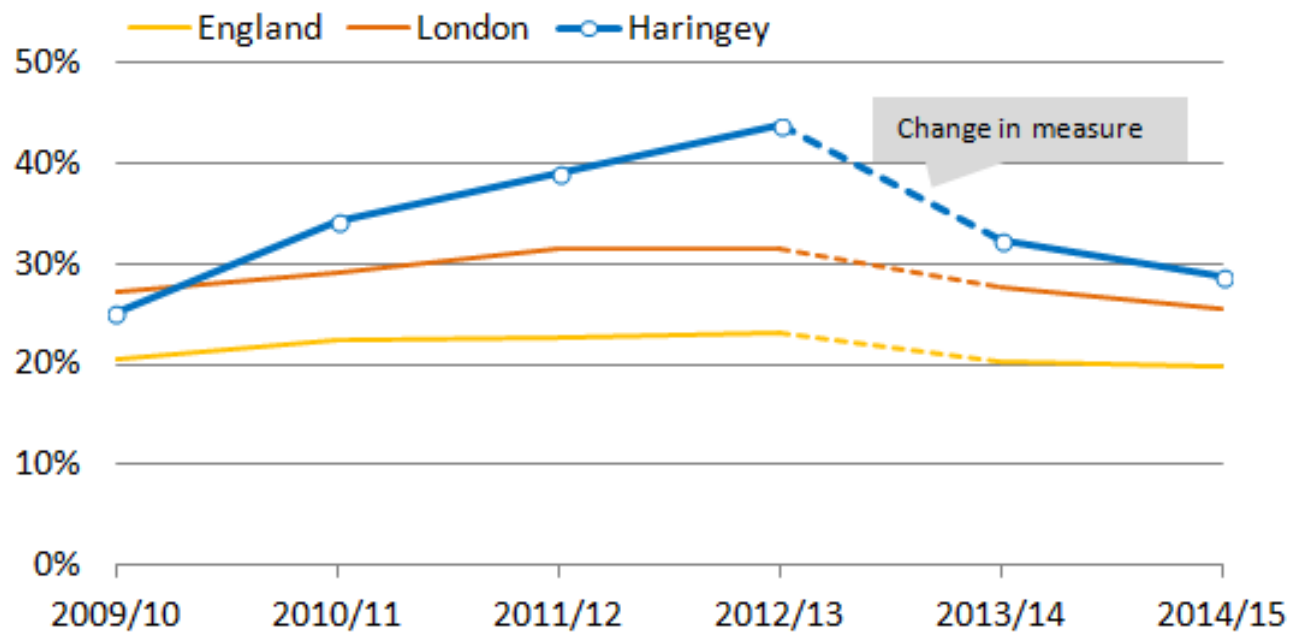


- Most common Primary Need among SEN pupils in Haringey are Speech, Language and Communication Needs, (30% of SEN pupils)
- But among Secondary school pupils Social/Emotional/Mental Health difficulties, Moderate and Specific learning difficulties were more common

Source: Business Intelligence, Haringey Council

SEN at GCSE

SEN pupils achieving 5 A*-C GCSE (incl Eng&Math)

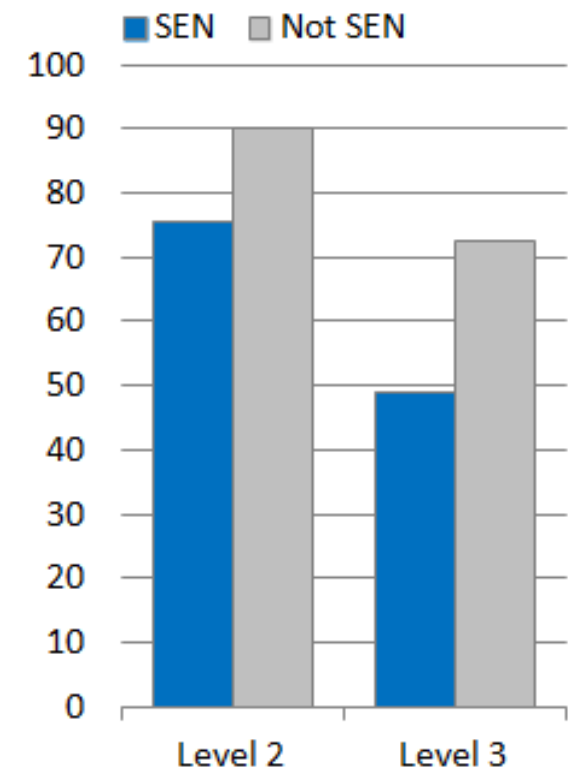
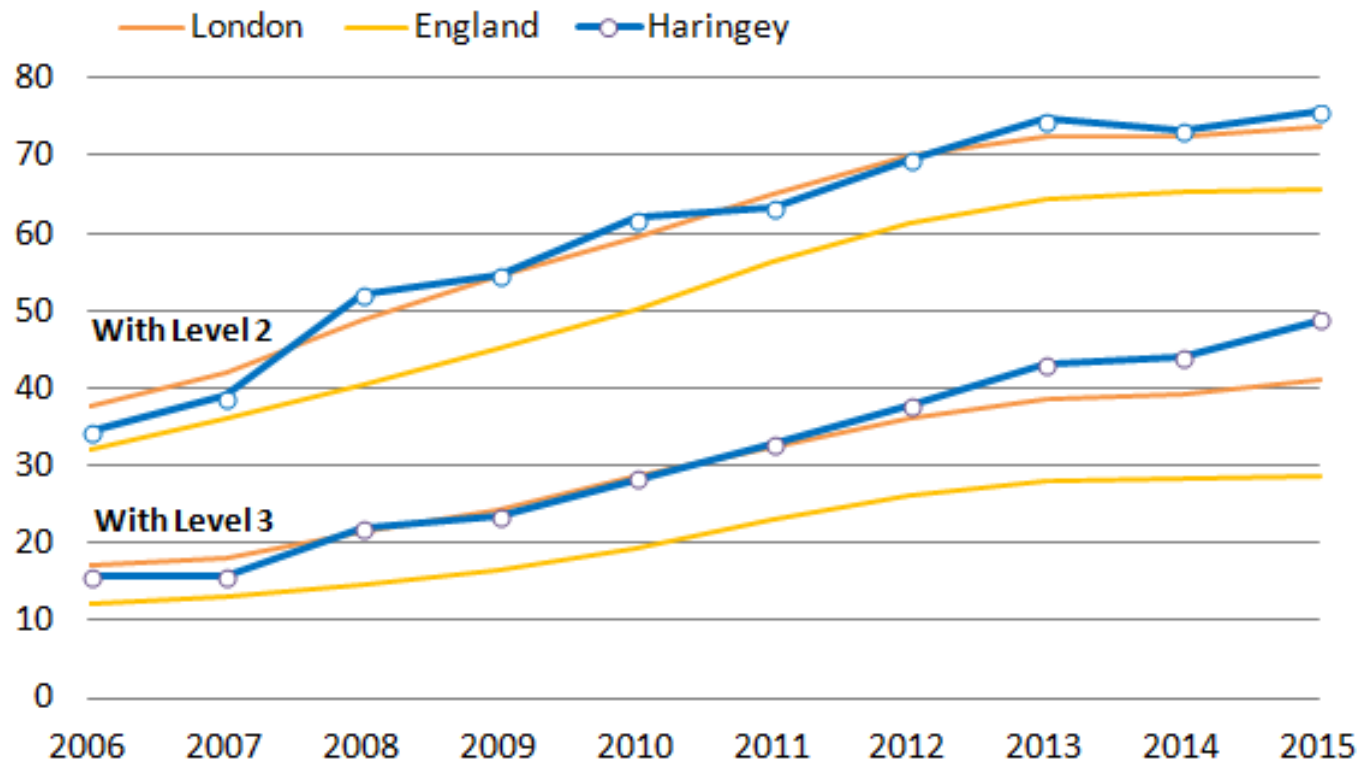


- SEN attainment at GCSE in Haringey is consistently above the England and London average but fell in the last year
- The proportion of SEN pupils achieving the target standard at GCSE is half that of other pupils

Source: Department for Education

SEN at age 19

SEN pupils achieving 5 A*-C GCSE (incl Eng&Math)



SEN attainment at age 19 continues to improve in Haringey, at Level 3 it 4th highest rate in London

SEN gap” gets wider between Level 2 and 3

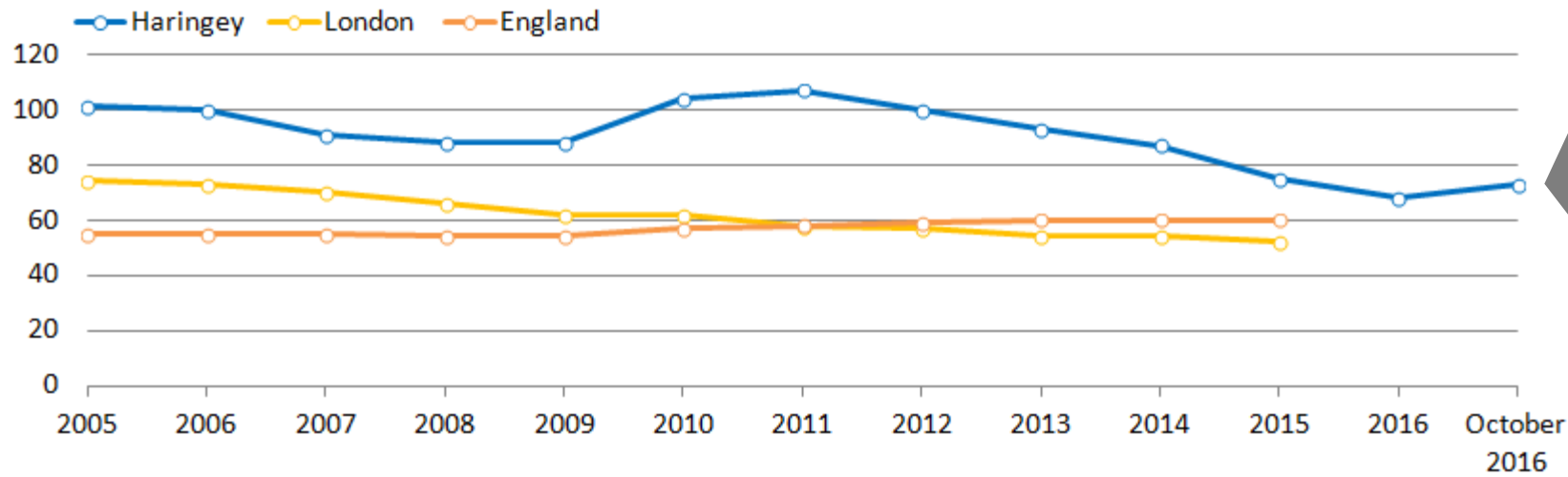
Source: Department for Education

LAC – National Trends

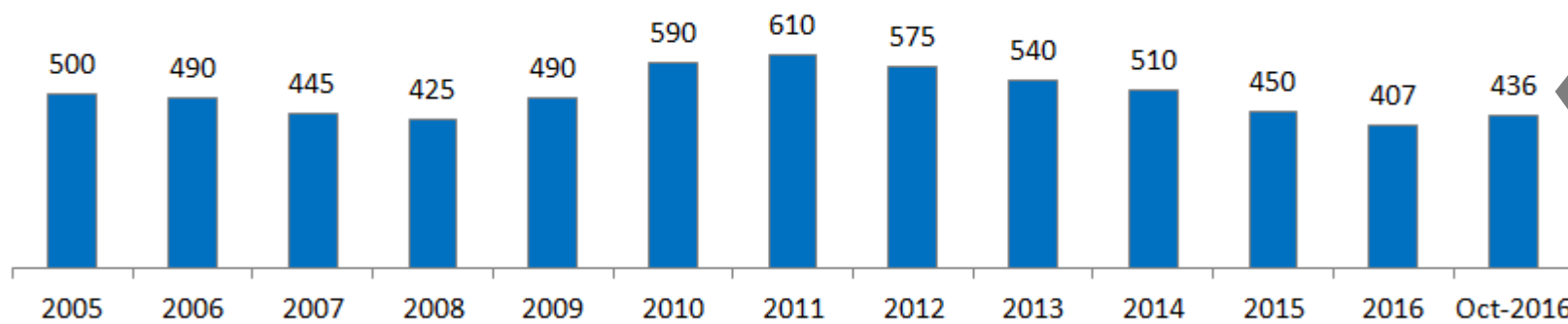
- **23% of the adult prison population has been in care**
- Almost 40% of prisoners under the age of 21 had been in care as children (only 2% of the general population spend time in prison)
- An estimated 11% of care leavers have problematic alcohol use and **21% of care leavers have problematic drug use**
- Children who have been in care are four times more likely to commit suicide than the general population
- Looked after children are 5 times more likely to have mental or behavioural problems (Any Disorder) compared to the non-disadvantaged.
- **46% of LAC have a mental or behavioural problem**

LAC – Haringey Trends

Rate and number of LAC in Haringey



In 2016 LAC in Haringey it reached a 10+ year low. But the LAC rate is consistently above London and England



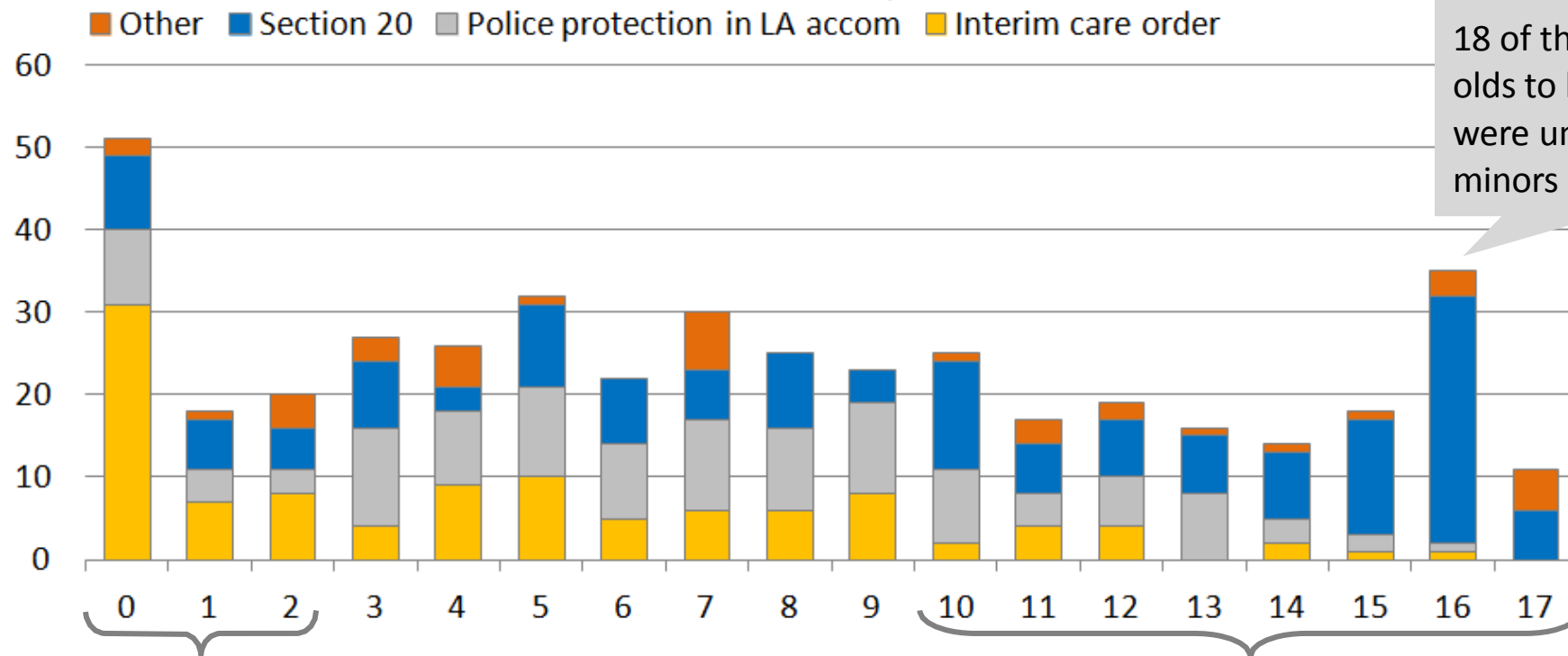
Following consistent decline – LAC numbers increased recently

Source: Business Intelligence, Haringey Council

LAC – Age and Reason

LAC children in September 2016 by age of

Police protection common from age 3



18 of the 35 16 year olds to become LAC were unaccompanied minors

Care orders are the main reason among youngest LAC

Section 20 is the most common reason among older LAC

Source: Business Intelligence, Haringey Council

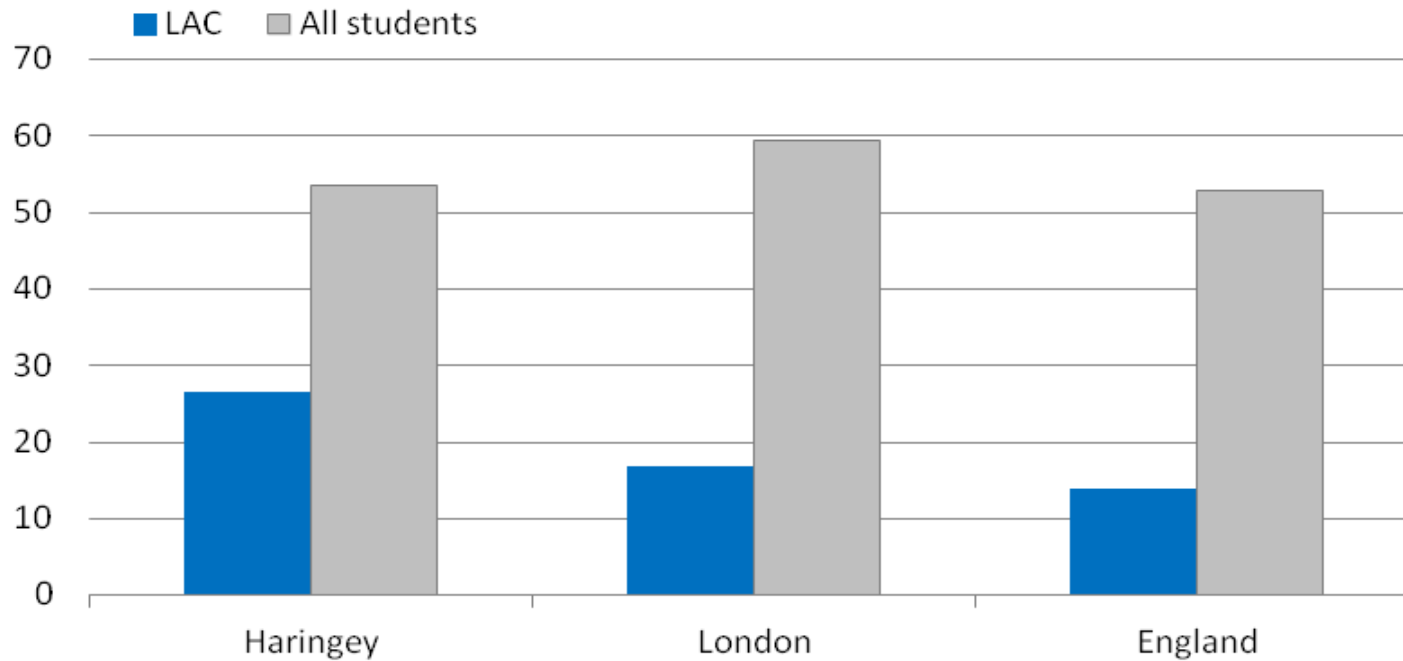
LAC – Multiple Disadvantages

- 20 LAC aged 10+ in Haringey were convicted or subject to a final warning in 2015; at 8% this is above the London average of 6%
- 30 LAC in Haringey had a missing incident in 2015; at 4% this is below the London average of 6%
- 55% of LAC in Haringey have a SEN (31% have a SEN but no statement or education/health/care plan)
- 5.4% of LAC were persistent absentees (the average for London was 5.2%)
- 5 LAC in Haringey were identified as having a substance misuse problem during 2015 (2% compared to 6% in London)
- 8% of Haringey's LAC cohort were convicted or subject to a final warning; above the London average of 6%

Source: Business Intelligence, Haringey Council and Department for Education

LAC – GCSE attainment

Proportion of pupils getting 5*A-C GCSEs including English and Maths



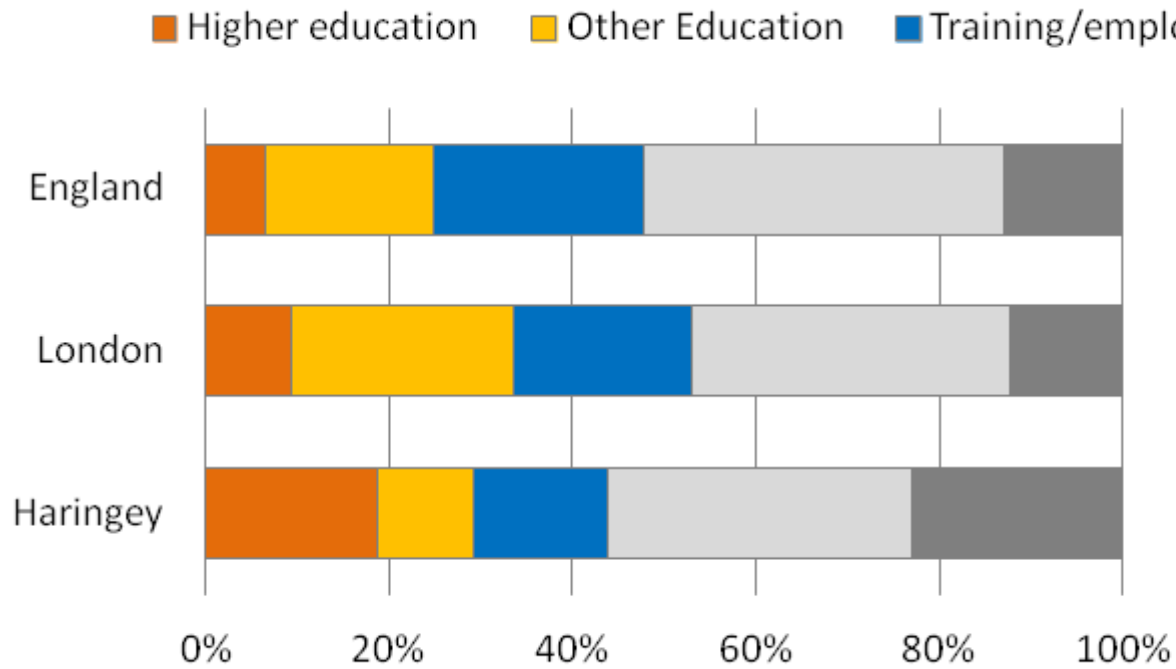
2016 Update:
40% of Haringey LAC achieved the target standard. up from

- Haringey's LAC cohort outperform the London and England average for GCSE attainment
- There is still a significant attainment gap between LAC students and non-LAC students

Source: Business Intelligence, Haringey Council and Department for Education

LAC – aged 19-21

Occupation of care leavers aged 19-12



	Haringey	LB rank
Higher education	19%	1
Other education	11%	30
Training/Emp	15%	18
NEET	34%	25
Unknown	23%	1

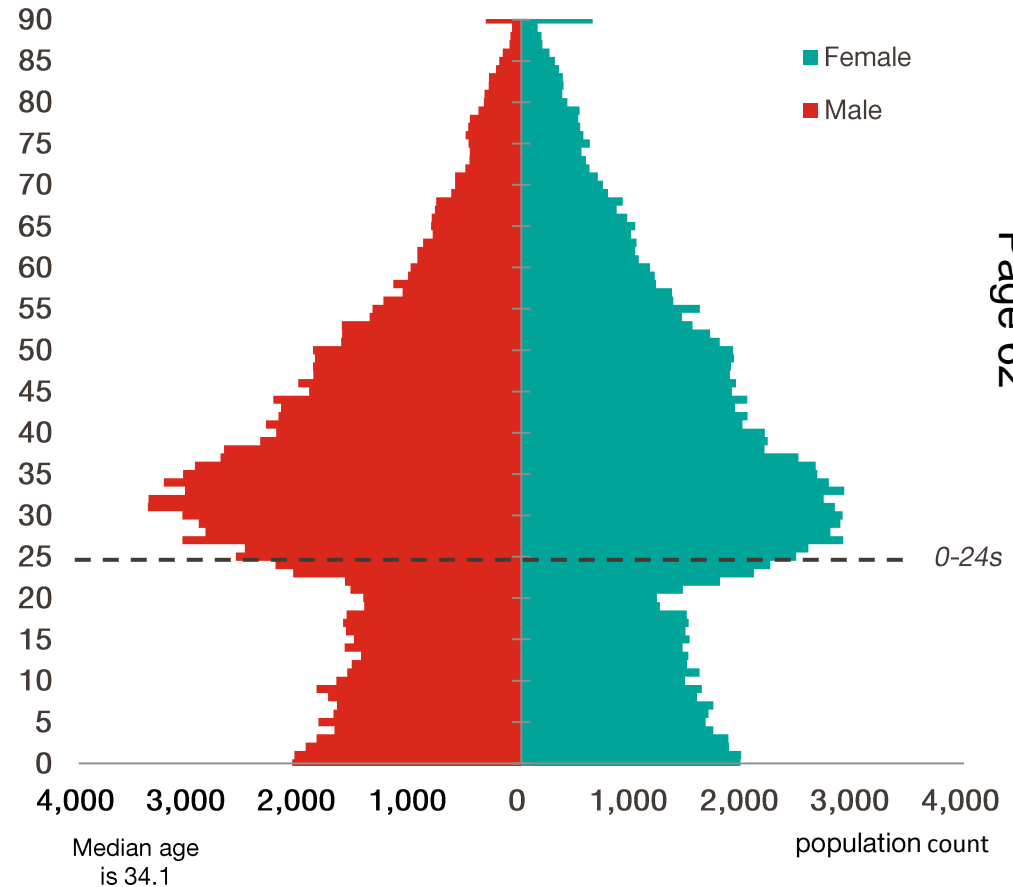
Haringey has a high level of LAC in Higher Education and low levels of NEET; but high level not known to services

Young people in Haringey – safety, resilience and wellbeing

Population

- 84,000 0-24 year olds in Haringey, 31% of total population
- 5,000 increase in 0-24 year olds by 2030. Largest projected increases in the east e.g. 2700 increase in Noel Park ward alone
- 26.1% of children are from lower income families -12th in London. Above the national average of 20.1% and London average of 23.4%.
- It is estimated that over 11,000 children in Haringey live with some form of long-standing disability
- Over 9,000 have special educational needs in primary and secondary schools.

Haringey population pyramid 2015



Identified needs

- **Education** - approximately 1,200 children have a statement; of those, 35% had autism followed by moderate learning difficulties (21%) and emotional, behavioural and social difficulties (12%)
- **Mental health** - estimated 9.9% of 5-16 year olds have a mental health disorder, compared to London and England average of 9.3%
- **Substance misuse** - In 2014/15, 200 children and young people were using services for alcohol and cannabis misuse; 11% of these young people were looked after children, whilst 15% were not in education, employment or training. Use of new psychoactive substances (or 'legal highs') is on the increase.

Vulnerabilities

Looked after children

- 2016 - 67 per 10,000 children aged under 18 (London, 51 per 10,000, England, 60 per 10,000)
- 2015 – 55% have SEN (31% have a SEN but no statement or education/health/care plan). 5% identified as having a substance misuse problem. 5.4% persistent absentees

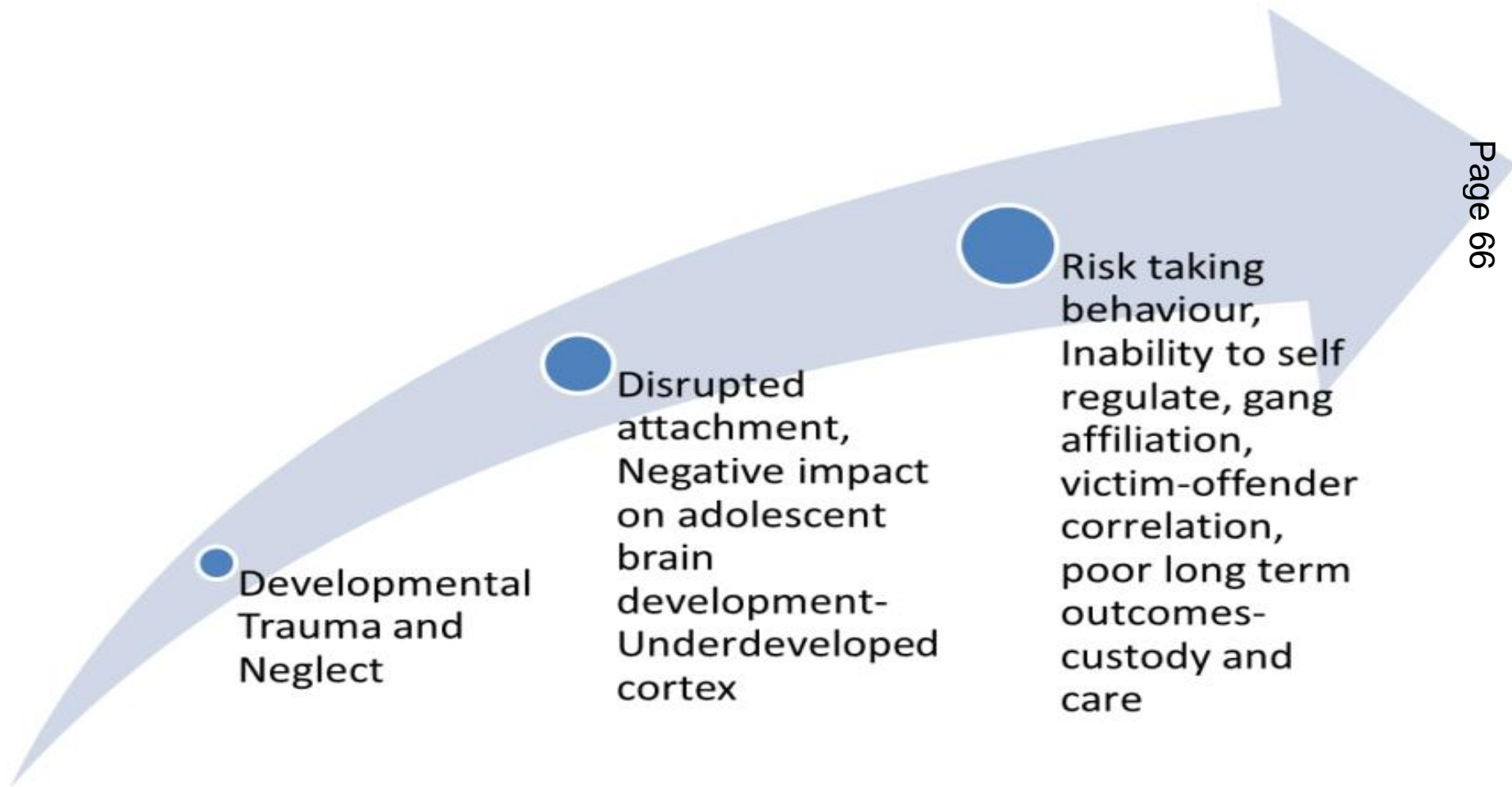
Violence, vulnerability and exploitation

- Young people, especially black and minority ethnic males disproportionately represented as victims and offenders
- 5th highest serious youth violence volume of all London boroughs.
- 18% increase in knife injury victims aged under 25, - 5th highest volume in London

Learning from serious case reviews

- Issues: domestic abuse, neglect, harmful sexual behaviour, mental health, offending, violence, gangs
- Emerging safeguarding adolescents agenda
- Stop ‘building brains’ for prisons
- Ensuring safeguarding responses to offenders
- Addressing male violence; e.g harmful sexual behaviour
- Understanding children’s experiences

Care and Custody Trajectory



Financial impact of one case (illustrative figures)

• Looked After Children	£607k
• Offending Institutions	£540k
• Police	£35k
• Court Costs	£32k
• Other (Health, Education, etc.)	£6k
Total	£1.22m

Emerging system approach

- Prevention and early help
- Integrated working arrangements
- Workforce development:
 - trauma informed practice,
 - restorative justice approaches
- Intervention
 - family group conferencing
- Identification of speech and language deficit at early age
- Addressing poor attainment, school readiness, poor attendance and disruptive behaviour
- Parenting support and programmes e.g video interaction guidance

Early Help Principles

- Think “Family”
- One lead professional
- A team around the family
- Focus on improving outcomes
- Intervening as problems arise
- Use of evidence based practice/approaches of “what works”

Discussion

Team Around Parkview School: An Innovative Partnership to keep young people safe

The Early Help Service has piloted a new way of working with schools which is being well received by all involved. In response to growing concerns about the risks associated with gangs and child sexual exploitation (CSE) in the local area, the staff at Parkview School have taken an assertive and proactive approach to seeking partnership support to reduce the impact of these risks for their students. To support the school to achieve this, the Early Help Service have led on and customised a 'Team Around the School', offering interventions tailored to meet their specific needs.

The partnerships that have been developed through this strategy include:

- Community Safety Team
- Targeted Response and Youth Justice Service
- Safer London
- Victim Support
- A Single Point of Contact (SPOC) in the Anti-Social Behaviour Team

The project began in May 2016 and with the strong support of the partners identified, the partnership has been able to successfully deliver the following activities:

- CSE Awareness workshops delivered to all Year Groups
- A 2 day CSE Awareness course targeted at Year 9 students
- A 10 week intensive CSE programme for their highest risk students, funded by the Healthy Schools Programme
- CSE and Gang Awareness workshop delivered to staff at their Inset day

Further work in development includes:

- A Young Men's group
- Bitesize sessions to staff to develop their resilience with responding to risk of Gangs and CSE;
- Parent Workshops covering risk of Gangs, CSE and Cyber Safety;
- A Parent's Forum to identify what they feel the most concerning issues are that their children face;
- Parkview School hold weekly meetings to review their vulnerable children's list and the Early Help Service will now attend these;
- The school hold fortnightly Safeguarding meetings for their highest risk students; Community Safety and Safer London will be represented at these meetings.

We are continually reviewing the impact of these work strands and expect to achieve specific outcomes that demonstrate clear evidence of:

1. A reduction in risk of Gangs and CSE amongst students defined by how confident they feel to make better, more informed choices;
2. Improved awareness and confidence amongst staff to respond to risks of Gangs and CSE;
3. Improved awareness and confidence of parents to respond to risks of Gangs and CSE.

Monitoring & Evaluation Plan

School have asked for Team Around the School meetings to be convened 3 times a year to review progress made and evaluate impact. If we can't fit one in before the end of term it will be in early Sept – depends on school's availability.

Potential outcome measures (to be finalised) are:

- Have any of the young people identified on the school's target list escalated through the CYPS/YJ system?
- Has the school identified any more young people at risk?
- Has there been a change in the need for Police attendance to the school site?
- Do school staff report feeling more confident in addressing CSE/Gang concerns?
- Do parents report feeling more confident in supporting their child with CSE/Gang concerns?
- Do young people report feeling informed to make better choices around CSE/Gang issues?

MAC UK – Project Future Information pack summary

Aims:

Project Future is a community based, youth led mental health project that seeks to transform mental health delivery for socially excluded young men aged 16-25 years involved in gangs, offending and serious youth violence in Haringey. In partnership with BEH Mental Health Trust, Haringey Council, Mac-UK and Metropolitan Police the objectives are to improve well-being, reduce offending, increase access to education, employment, training, and bridge young people into local services. A long term objective of the project is reduce the economic impact of gang related offending to society.

Underpinned by evidence based psychological models and enablement models the young men co-produce with staff and lead on activities that promote psychological and physical well-being. An innovative peer referral system is used to generate more sustainable progress and change at a group and community level. The project seeks at local and national levels to design and deliver services that are more accessible for this group.

Objectives:

The work of project Future is hugely varied ranging from supporting young people with basic life skills such as preparing toast and hot chocolate, attending job interviews, mediating relationships with probation, help with signing up to GP practices, learning how to use the tube, supporting with music recordings to complex mental health interventions related to early life traumas.

The team objective is to provide a holistic package of care that is efficient, user led and addresses multiple levels of need, not only improve the overall well-being of gang affected youth and reduce social exclusion, but also reduce the economic impact of gangs to society (e.g. reduced arrests, incarceration and presentation in acute care services).

The team work to support young people to access relevant services, and to feel included in their community, and wider society. The project seeks to also create change at a systems level specifically in the services that surround the young people (i.e. probation, prisons, etc). The project achieves this by providing a platform for young people to address issues directly, and share its psychologically informed approach with service providers and policy makers.

Outcomes:

The finding from the most recent report in October 2016 showed that 133 young people are attending the project, of which 96 (72%) have sought support from Project Future across multiple areas of their life as follows:

Mental health and well-being

- 86 young people have accessed some form of mental health support at Project Future (65%).

- Routine outcome measures show a significant marked reduction in mental well-being needs.

Education, Employment and Training (EET)

- 82 out of 133 young people (62%) have accessed employability support at Project Future.
- 47 are currently in education, employment and training (35%).
- EET support has included the following: applying for college, university, apprenticeships and work, support with setting up and managing businesses, support with music production and engineering careers, support with youth work careers, support accessing prison education, literacy at Project Future, job-seeking, accessing volunteering opportunities and support with getting a job. Project Future have been supporting young people whilst they are in work by regularly checking in with them.

Offending

- 71 young people have accessed some form of offending support at Project Future (53%).
- This has ranged from discussions around what drives offending behaviour, how to minimise these, guidance around legal aid to active case management.
- Young people and stakeholders report a qualitative reduction in offending

Access to services

- Out of the 133, 70 young people have accessed another service via Project Future (53%).
- These services include the JobCentre, social services, sexual health, housing charities, solicitors, dentist through Project Future.

Quotes from young people accessing Project Future:

“Right now people would be in the streets getting into trouble but here people come to do their theory, music, English, maths, do something productive instead of standing out, making trouble find them...”

“It is 100% making a difference. Not as antisocial I don’t hear them pop up anymore its not this group anymore ”