Preventing Youth Offending

An Overview and Scrutiny Task Group Report

May 2011

Membership

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Chair's Foreword

"Many of the costly and damaging social problems in society are created because we are not giving children the right type of support in their earliest years… There are still too many children with inadequate social and emotional capabilities, and… this affects how they develop through all the stages of their lives, including mental well-being, education, employment and family. Such problems are not confined to individuals and their families; they may have devastating effects on the wider society in terms of crime and social disruption and fragmentation generally."

These quotes, taken from the Graham Allen Review of Early Intervention, form the central challenge to all in this task group report.

Several areas in Brent have recently been declared dispersal zones following complaints by residents and traders about anti-social behaviour by young people. The negative impact and stereotype of such behaviour and criminal activity is disproportional to the number of young people involved. It is costly to deal with and especially regrettable in human terms.

The task group was mindful of Frank Field's independent Review on Poverty and Life Chances, linking poverty to a range of negative outcomes for children and young people, including anti-social behaviour and criminal activity. Brent's own Early Intervention Locality Team identified low income, poor housing and financial issues as significant risk factors for the behaviour of young people. Other factors are mobility, family situations and school experiences. More than 11,000 children are thought to be living in poverty in Brent and 19,600 children are living in families on benefits, according to the Greater London Authority.

The task group has made a number of recommendations based on interviews with Brent staff and external agencies to test the availability and effectiveness of support to prevent youth offending. We hope that these are seen as constructive feedback. We have also consulted a range of young people on the topic and their responses are included as appendices. I would urge you to read their insightful and intelligent observations.

One constant stream of comment voiced by the adult population is the lack of activities available for children and young people. Young people share this perception. Against the background of shrinking resources, I believe that a closer partnership between the Sports Service and the Youth Service and the many voluntary organisations such as the Scouts, Sea Cadets and others should provide and showcase a comprehensive offer of exciting, challenging and confidence-building activities.

I thank Cllr Patricia Harrison and Cllr Ann Hunter for their enthusiastic and unstinting contributions and comments towards the completion of this report. I also thank Mark Cairns from the Corporate Policy Team for his patient support to the members of the task group. Finally, I thank all the young people we talked to for their responses and I wish to finish with the motto of Brent Youth Parliament: "Break the Stereotype, Fix the Impression."

Cllr Helga Gladbaum

Executive Summary

This task group's remit was originally envisaged as encompassing mainly services for young people which can prevent them from falling into offending behaviour. However, the course of its investigation and evidence-gathering led it to focus on the decisive factors much earlier in a child's life which influence many important outcomes, including whether or not they become an offender. This in turn led the task group to look at the services which aim to affect those factors, and which interact not just with the child but with its family as well, often before there is any contact with the justice system.

There are six main parts to the task group's findings, as set out below.

A Change in Emphasis to Effective Early Intervention

The future direction of preventing youth offending lies in focusing intervention earlier in the life of a child than is currently the case, as raising the quality of upbringing, education and support for children and their parents, from pregnancy onwards, can reduce criminal behaviour. While much of the responsibility for such a shift lies with central Government, local areas clearly have a role to play as well.

Potentially insufficient focus has been devoted to detecting and intervening in developmental issues early in the life of a child. Intensive tailored support to children and their families intended to address risk factors and problems at the root of offending behaviour is offered only after offending begins. Evidence gave varying impressions as to the extent to which family-based interventions and prevention of offending are integrated on the ground. The task group believes that a dedicated Prevention Strategy should be in place to address all of these issues.

Transition stages in a child's life are also formative due to their increased vulnerability at these points, and primary and secondary schools should work together and share useful information about pupils' needs to enable early intervention where necessary.

There is an imbalance in the allocation of resources for services for children with additional needs, and those for children with complex needs. For early intervention to adequately prevent the escalation of issues in children there should be greater parity, and the council and its partners face difficult strategic decisions in directing the right level of ever-scarcer resources towards early intervention, whilst maintaining sufficient provision for those whose needs are already complex. In the meantime, equipping Early Years practitioners at the universal level with additional skills could help to filter out some lower-level demand, and obviate the need for escalation.

However, the Prevention Strategy should contain an explicit commitment to prevention as a cost-effective approach to managing demand on services. Options for joint investment by local strategic partners in early intervention services should also be investigated.

Changes in Practice

The Graham Allen Review of Early Intervention and the Independent Commission on Youth Crime and Antisocial Behaviour provide persuasive evidence as to how early intervention can most effectively be practised. Allen uses strength of evidence and other criteria to recommend 72 intervention programmes which warrant investment from any available funding, with 19 programmes having the very best evidence, set out in Appendices A and B. These provide a sound basis for decisions on funding and commissioning of provision to reduce youth offending.

This outcome can be maximised if each of the eight categories of effective interventions identified by the Independent Commission is implemented:

• Parenting support

• Pre-school education

• School tutoring

• Behaviour and 'life skills' strategies

• Family therapy

• Treatment foster care

• Constructive leisure opportunities

• Mentoring programmes.

The recommended interventions of the Allen review and the Independent Commission represent the best investment to prevent both offending and other poor outcomes, and the council's spending decisions going forward should reflect this.

However, the right types of intervention alone are not sufficient – they must also be properly implemented in order to be effective. Key ingredients include an appropriate evidence base for the Prevention Strategy showing the prevalence of all relevant risk factors, such as poverty.

Collaboration Between Agencies

While there are examples of positive working relationships with key partners, these could be improved, especially with the health sector. The Prevention Strategy will provide a good opportunity to address high-level coordination of partners, and for this reason it should be overseen by the Children's Partnership Board, including representatives of services from outside of Children and Families whose input is vital.

There are inconsistencies in adoption of the Common Assessment Framework (CAF) across agencies. With the major reduction in the support available from the Early Intervention Locality Team, there is a real need for genuine cross-agency buy-in to better implement the CAF and ensure whole-family support for those who need it. The task group would like to see the Strategic Implementation Group – a group of senior managers whose role is to champion integrated working and monitor its effectiveness - act on this.

The Crucial Role of Schools

Opportunities to intervene effectively persist into secondary education, and academic failure and low commitment to education are risk factors for later crime. Evidence suggests a strong association between exclusion and offending, with recorded offending almost doubling when a pupil is excluded. Likewise, reintegration into mainstream provision is of fundamental importance.

Brent has comparatively high permanent exclusion rates, though these have fallen in recent years. However, there is no comparative information available to benchmark the reintegration of Brent's excluded pupils into mainstream education against that of other authorities. This must be gathered for Brent to be confident that our approach results in a better "net" result of young people with challenging behaviour remaining in full-time education.

Young people consulted by the group identify frustration and lack of success at school as a cause of disruptive behaviour and offending, and the need of some pupils for help with schoolwork. They suggest providing more intensive time and attention for such pupils, supporting one of the task group's recommended interventions of school tutoring.

Proven programmes should be used in schools to improve outcomes in relation to both education and offending. However, the council's ability to influence this will likely be affected by the provisions of the Education Bill 2011, which radically reduces the reliance of schools with "academy" status upon council-provided services.

Both professionals and young people feel that the need persists for further flexibility in the curriculum to allow greater opportunities for vocational achievement and work-related learning. At present, limited availability and high costs of places present a real barrier to this.

The Crucial Role of Parents

Parenting exerts the definitive influence on a child's development, and its support is a key service in preventing offending.

Brent's Parenting Strategy 2010-11 was valuable, with evidence from a variety of sources, a commitment to early identification and intervention, and priorities based on the needs identified. However, its Action Plan left the task group unclear about the current status of some key priorities, and with the impression of gaps in relation to others. With the Parenting Strategy at the end of its term, no replacement in place, and the loss of key central posts,

the task group is keen for Brent to build upon its original, positive vision for parenting in the new Prevention Strategy. This includes facilitating networks of parents to support each other, providing a channel for parents' views to be represented to the council on an ongoing basis, and expanding outreach to hard-to-reach groups in the most effective way.

It is likely that detailed research on families' experiences of services would give valuable insight into issues of which the council and its partners are unaware, in relation to awareness and accessibility of preventative services amongst families. This should be undertaken, and the findings incorporated into the Prevention Strategy's needs assessment. Following this research and analysis, the findings of the Task and Finish Group on Complex Families should be integrated with it when they become available.

Other Organisational Issues

Data monitoring must focus on outcomes, and the task group came across several examples where this was the case, but some data currently collected should be supplemented to enable overall, longer-term outcomes to be monitored. This will enable managers to make informed decisions to achieve improvement.

It is also vital to equip staff with the necessary skills. At every stage of the evidence-gathering process, the task group's confidence in the capability and commitment of Brent's frontline practitioners was affirmed. Nonetheless, development could help professionals improve their understanding of emotional development in young children, interpersonal skills in dealing directly with families, attitudes to change, and working with colleagues in different teams and agencies. While many of these needs are recognised by managers and already being acted upon, they remain a concern, especially in a climate where training budgets are under pressure.

Recommendations

The task group recommends that:

1. Brent should develop a comprehensive Prevention Strategy, joining up and coordinating the prevention of all negative outcomes for children and young people including poor educational achievement, poor mental, emotional and physical health, teenage pregnancy, drug and alcohol misuse and offending and antisocial behaviour. The Strategy should:

   a) include an explicit commitment to prevention as a cost-effective long term approach to managing demand on services, which is embedded in practice amongst the council and its partners;

   b) set out the joint commitment of all partners to working together at all levels to prevent and intervene early against poor outcomes, based on "Think Family";

   c) revise the existing data-sharing protocol to address issues preventing the quick and convenient sharing of secure data electronically by the NHS with relevant teams in the council;

   d) explore options for embedded working across disciplines, such as virtual teams or co-location;

   e) feature supporting parenting as a major component, including any unmet objectives from the Parenting Strategy 2010-11; and

   f) be implemented with specific, measurable, time limited actions; individual accountability; and regular and rigorous monitoring by the Children's Partnership Board's Executive.

2. Early Years settings, primary and secondary schools, and other relevant institutions should cooperate to enable early intervention in relation to needs arising from transitions.

3. Universal Early Years practitioners, such as health visitors, child minders, and nursery nurses, should be equipped to identify additional needs early and encouraged to provide support to children and families where possible, to reduce demand for Tier 2 services. This should focus in particular on social and emotional development and parenting support, and should include appropriate professional supervision.

4. The Task and Finish Group on Complex Families should consider opportunities for pooling resources to enhance the effectiveness of early intervention, for the purposes of realising longer-term savings for all public service providers.

5. Preventative work by the Council and its partners should address each of the eight categories set out by the Independent Commission; and that any new programmes funded in future should be selected from those approved by the Graham Allen review.

6. A regularly-updated needs assessment should be undertaken to inform the Prevention Strategy, including:

a) a profile of relevant risk factors, protective factors and outcomes for children;

b) an audit of existing services and programmes for their effectiveness and supporting evidence;

c) the findings of the final report on the Parenting Strategy 2010-11; and

d) in-depth research and analysis regarding families' experiences of preventative and early intervention services.

7. The tools used to assess risks in young people include all risk factors identified by the Independent Commission.

8. Future Child Poverty Needs Assessments and Strategies take into account the findings of this report.

9. The needs assessment and Prevention Strategy are overseen by the Children's Partnership Board.

10. The Strategic Implementation Group acts to address weaknesses and inconsistencies in Team Around the Child meetings, including non-attendance by professionals, unwillingness to take on the Lead Professional role, and perceptions of meetings' ineffectiveness amongst participants.

11. Work is undertaken to benchmark reintegration rates of excluded pupils in Brent against peer authorities. This should take into account reintegrated pupils who are subsequently permanently excluded again.

12. The School Improvement Service prioritises and advocates programmes on the Allen list intended for educational settings, and focuses on increased support for Early Years providers.

13. The availability of opportunities for young people in Brent to engage in alternative and vocational forms of learning is expanded where possible; and takeup is encouraged where appropriate to pupils' aptitudes and abilities.

14. Croydon's Peer2Peer Support measures are examined and evaluated, and effective elements replicated in Brent to support networks for vulnerable and isolated parents.

15. Options are examined for the views of parents to be represented on an ongoing basis, such as via a Parents' Council.

16. With the support of the Corporate Policy Team, Mosaic Public Sector is used to analyse and determine the most effective methods of promoting parenting support, and determining the best access channels for different groups of parents.

17. Strategic objectives and measures of success for preventative services should focus on achievement of sustained outcomes beyond the lifetime of specific interventions.

18. Professionals from the relevant teams and agencies are trained jointly, to ensure consistent understanding of obligations, and to build relationships. The benefits of working together and complementing each others' services should be a core learning point.

19. Learning and development for all professionals incorporates opportunities to reflect and learn about emerging practice, and fosters innovation, eg time away from the day-to-day working environment and learning from peers.

1. Introduction – Scope of the task group's work

In late 2009, a task group reported to the Children and Families Overview and Scrutiny Committee on the safety of pupils travelling to and from school. Within its report, it found that a small number of young people committed a disproportionate amount of crime, and suggested that another task group explore this issue in further detail. In response, a task group to review the prevention of youth offending was convened early in 2010. However, it was unable to complete its work before the council elections that year, following which the committee became the Children and Young People Overview and Scrutiny Committee, with a new membership.

The task group was revived in October 2010 with a new membership and a revised scope, placing greater emphasis upon the prevention agenda and diversionary projects, and upon actively seeking the input of local young people (both those with experience of offending and antisocial behaviour, and others) as an integral part of the evidence it took. In particular, the task group was keen to take a holistic approach to the problem of youth offending and its causes, and to avoid simply reviewing the work of a specific service, such as the Youth Offending Team.

As is evident within the body of the report and its recommendations, evidence which came to the notice of the task group early in its life persuaded it that it should shift its preventative focus from purely diversionary services, to the decisive factors much earlier in a child's life which influence important outcomes, including whether or not they become offenders. This in turn led the task group to look at the services which aim to reduce those factors where they are harmful or promote them where they are helpful; and which interact not just with the child but with its family as well, often before there is any contact with the justice system.

This change in emphasis did not change the task group's determination to engage directly with young people to benefit from their views, although it did mean that original plans for structured interviews and case studies of individual young people became unrealistic. This was because many factors and services which were central to the task group's investigation were those involved when children were too young to be aware of them.

Instead, the task group utilised resources, research and analysis previously carried out and endorsed at national level (including case studies by the Audit Commission, and Croydon's local authority and Primary Care Trust); and engaged with and took evidence from groups of young people, including participants in local voluntary sector youth projects, pupils temporarily excluded from school, dedicated forums for young people, and Youth Offending Team clients.

2. Task Group Membership

- Cllr Helga Gladbaum (Chair)
- Cllr Patricia Harrison
- Cllr Ann Hunter

Policy support was provided by Mark Cairns, in the Corporate Policy Team.

3. Methodology

The task group reviewed a range of literature in the course of their research, and drew in particular on the following:

- Youth Justice 2004 (a report by the Audit Commission)
- Time For a Fresh Start (the final report of the Independent Commission on Youth Crime and Antisocial Behaviour, 2010)
- Preventing youth crime: evidence and opportunities (a chapter in the book A New Response to Youth Crime, which forms the background evidence to the Independent Commission's report)
- The Independent Commission's evidence to the Graham Allen Review
- Early Intervention: The Next Steps (the first part of the final report of the Graham Allen Review of Early Intervention, 2011)
- Breaking the Cycle: Effective Punishment, Rehabilitation and Sentencing of Offenders (the Ministry of Justice Green Paper, 2010)
- Child:Family:Place: Radical efficiency to improve outcomes for young children (Croydon's Total Place Review, 2009)
- At A Glance 32 (a briefing by the Social Care Institute for Excellence)
- Brent Integrated Working Guidance for Practitioners and Managers
- The report of the Early Intervention Locality Team Manager to the Schools Forum (December 2010)
- The Parenting Strategy 2010-11, and the updated version of its Action Plan as at February 2011
- Impact of termination of Brent Council funding to The Place2Be - Brent Hub (from 31st March 2011) (a report by The Place2Be)
- Ofsted unannounced inspection (findings published December 2010)
- Brent's Children and Young People's Plan 2009-11
- Brent's Children and Young People's Needs Assessment 2010 (draft)
- Youth Crime Prevention: the work of the Youth Offending Service (a report to the Children and Families Overview and Scrutiny Committee, December 2009)
- The Youth Offending Service service plan for 2010/11 to 2011/12 (early draft)
- Education Standards in Brent 2010, (a report by the School Improvement Service to the Children and Young People Overview and Scrutiny Committee, March 2011)

In addition, the task group took evidence directly from the following individuals:

- James Salter (Youth Offending Service)
- Paul Roper (Head of Alternative Education Service)

- Anita Dickinson (Head of Youth Offending Team) and Graham Genoni (Asst Director for Social Care, Children and Families)
- Susannah Jordan (Interim Joint Commissioning Manager and Parenting Commissioner, Children and Families)
- Sue Gates (Head of Integrated and Extended Services)
- Jo Brider (Manager, Early Intervention Locality Team)
- Abdi Farah, Ahmed Farah and Wilbert Finikin from Hornstars (a voluntary sector project for young people)
- Maxim De Sauma, Sarah Fielding and Jeremy Bard from Brent Centre for Young People
- Anthony Felsenstein (Coordinator for Attendance and Behaviour)
- Aisha Bello (Parenting Coordinator)
- Angela Chiswell (Head of Youth and Connexions Service) and Eve Baker (Team Manager, Youth Service)
- Ravina Kotecha (Strategic Joint Commissioning Manager, Children and Families)
- Anna Myers (Social Inclusion Programme, Tricycle Theatre)
- Colleen Howard (Regional Manager, The Place2Be) and Jean Gibb (Brent Hub Manager, The Place2Be)
- Elzanne Smit (Head of Care Planning and Children in Care)
- Sharon Stockman (Head of Localities Service, Children and Families)
- Priti Patel (Primary Mental Health Worker, Youth Offending Team and CAMHS)
- Ronald Amanze and Flex (Brent Youth Radio)

Members of the task group also attended a seminar held by the Independent Commission on Youth Crime and Antisocial Behaviour.

In addition, the task group members consulted young people at Hornstars, Brent Youth Matters 2, the Right Track (a Youth Service project promoting education for pupils with fixed-term exclusions), Brent Care In Action (the forum for looked-after children in Brent), Brent Youth Parliament, and young people known to the Youth Offending Team. The members were also guests on Brent Youth Radio, where they publicised their remit and were interviewed on-air by Jacqueline Sutherland, one of the station's young presenters.

4. Context

National and Regional

The benefit of early intervention in the lives of young people coming into contact with Youth Offending Teams (YOTs) has been clearly established and acknowledged at national level

for some time. In 2004, an Audit Commission report[1] found that many young people in custody had a history of professionals failing to listen, assessments not being followed by action and nobody being in charge. This estimated that effective early intervention in the lives of just 10% of young offenders could save £100 million each year, and used a case study to demonstrate how missed opportunities to intervene at the first warning signs led to much higher expense overall to the public purse, as well as costs and inconvenience to the community and poorer outcomes for the young offender and his family.

An Independent Commission on Youth Crime and Antisocial Behaviour was established in the autumn of 2008. One of the Commission's objectives was to produce proposals to minimise the harm that the antisocial and criminal behaviour of young people causes to themselves and to society, including the sustainable reform of relevant services. It was organised by the Police Foundation and included amongst its membership an Assistant Commissioner of the Metropolitan Police, the Chief Executive of Lambeth LBC, a former Director of Public Prosecutions, the Head of West Sussex Council's Youth Offending Service, and the Director of Children and Young People at Stockport Council.

Prevention is one of three key principles identified by the Commission to better protect against youth crime and antisocial behaviour. Drawing on unpublished research by the Home Office, it notes that around 15% of five year-olds exhibit unusually oppositional or defiant behaviour, and that while this percentage drops as children get older, the manifestations become more severe for those whose behaviour persists. By the age of 17 the remaining 6% will have graduated to drug misuse, physical violence or crime, for example. The Commission then draws upon the collective intelligence built up internationally over the past 30 years to highlight the most effective types of intervention, and recommends using these to reduce risk factors and enhance protective factors, similar to public health programmes. Its final report published in 2010 states:

"The conclusion we draw is that crucial and underexploited opportunities exist to prevent potentially prolific, serious and violent offending careers by making early help available for children with severe behaviour problems and their families. We are supported in this view by calculations which show the huge costs to public services of dealing with chronically antisocial adolescents and young adults. Calculated at 2009 prices these are in the region of £85,900 by the time a conduct disordered ten-year old who has not received help reaches the age of 27, compared with £9,100 for others without childhood behaviour problems.

…It may never be too late to intervene, but we are in no doubt that intervening early is a more cost-effective option."[2]

More details of the Commission's findings are drawn upon later in this report.

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1 Youth Justice 2004: A review of the reformed youth justice system (p92), http://www.audit-commission.gov.uk/SiteCollectionDocuments/AuditCommissionReports/NationalStudies/Youth%20Justice_report_web.pdf

2 Time For a Fresh Start: The report of the Independent Commission on Youth Crime and Antisocial Behaviour (p41), http://www.youthcrimecommission.org.uk/attachments/076_FreshStart.pdf

In January 2011, Graham Allen MP published the first of part of his Review of Early Intervention commissioned by the Government in 2010. This set out the rationale for early intervention to give young children a strong social and emotional bedrock: that adverse experiences in the early years influence the crucial brain development taking place during that period, profoundly affecting an individual for life. Thus, "many of the costly and damaging social problems in society are created because we are not giving children the right type of support in their earliest years"[3], and the outcomes which can follow from this in adulthood include poorer educational achievement, unemployment, poor mental and emotional health, teenage pregnancy, drug and alcohol misuse and, crucially, criminal behaviour (especially violent behaviour).

Allen finds that early intervention can help to prevent these outcomes, and emphasises that parenting is a bigger influence on a child's future than any other common social factor. Presenting a range of evidence from well-regarded studies, he also asserts early intervention policies generate excellent returns on investment – in particular, that individuals with conduct disorder cost ten times as much in public services as those with no problems.

In 2010, Croydon Council and NHS Croydon used their Total Place pilot to lead their local strategic partnership in a deep dive review into the journey from conception to age seven both from the perspective of their services and from that of families. They followed families' journeys through the system, and also mapped the money and activity in that system. Amongst other findings, this review identified that single services were being delivered which did not meet all-around needs and did not fit well together. It also found isolation common in the most vulnerable families, inadequate focus and tenacity with families with the most need, and a significant gap in early and preventative services for children up to the age of three. This learning was felt to be applicable across the whole of the public sector, and indeed was drawn upon by Graham Allen in his review.

Local

The local context in relation to services is included within the key findings below. These make reference to the four tiers of service used by the Child and Adolescent Mental Health Service (CAMHS), which is used to determine the intensity of a child's need of a service. This is explained in the following extract provided by Brent Council's Children and Families service:

"Tier 1: Universal – Generic and Primary Services (including prevention):
The front-line of service delivery for children, young people or their families, as this is where they have direct access and often receive the first response to their needs. Practitioners may not be CAMHS trained, but by virtue of their contact with the child and parents in their own environment, they are best placed to recognise difficulties. In addition, with support and training they are able to provide screening and some simple interventions with the young

3 Early Intervention: The Next Steps (pxiii), http://offlinehbpl.hbpl.co.uk/NewsAttachments/PYC/early-intervention-7th1.pdf

person and their families. This tier includes a wide range of practitioners, including teachers, voluntary agency workers, general field social work, police, school medical services, general practitioners, nurses in primary care and workers within a paediatric setting (doctors, nurses and allied health professionals). Some will have received specialist CAMHS training and might have skills/qualifications to function at Tier 2, many will not. Young people themselves can function within Tier 1, perhaps as the first point of contact for friends or acting as mentors/peer educators.

Tier 2: Targeted Input (prevention – intervention) Locality based CAMHS across agencies:

This is the first point of access to specialist and non-specialist CAMHS. This usually takes place through uni-professional groups, which relate to each other through networks, rather than a formal multi-disciplinary CAMHS team structure. It is critical for the identification of vulnerable children and early intervention. Practitioners will have a common understanding of the developmental needs of the child, together with an understanding of CAMHS issues. The range of practitioners is wide and will include Health CAMHS, specialised voluntary youth services (e.g. one-stop shops and generic counselling services), paediatric and psychology staff, some specialist primary care and social workers, youth justice teams, drug workers, personal advisers in the Connexions service and Educational Psychologists. It will also include providers of universal young people's services who have a specific specialist remit, e.g. special needs teachers, specialist-generalist GPs, school or other community nurses with mental health training.

Tier 3: Specialist Services (Locality based CAMHS Specialists)

This Tier is distinguished by its multi-disciplinary team structure, even though not all members of this team will always act as Tier 3 workers, as they may function for most of their time as Tier 2 workers irrespective of their specialist knowledge and skills. The essence of this tier is multi-disciplinary working, with more than one CAMHS specialist working together as part of a treatment package around the needs of the child/family. There should be demonstrable evidence of expertise and competence, providing comprehensive assessment and the formulation of an overall care plan for children and young people with mental health problems. It will also be concerned with outcomes across all domains of functioning (education, offending, drug misuse, those looked after) not simply mental health. Practitioners will be able to access all of the resources that stand behind each individual professional, rather than function solely as individual practitioners. Work within this tier includes highly developed skills and knowledge concerning child and adolescent mental health, child development, youth offending and drug and alcohol misuse. The Tier 3 team could consist of a contracted collaboration of mental health workers, operating within Health, YOT, DAT, and Social Care and with Education. Teams should contain a high degree of aggregate competence, capable of responding to highly complex problems. Teams should effectively coalesce and gather the appropriate skills around the particular young person and the problems with which they present.

Tier 4: Specialised Services (Client Specific)

This tier provides more highly specialised services for those young people who have need for particular interventions or focused work. This may include the provision of complex packages of care involving inpatient child and adolescent facilities, complemented by other specialist teams such as addiction teams, adolescent paediatric beds or specialised crisis placements. Tier 4 provisions can also offer tertiary paediatric liaison (working with specialist paediatric inpatient services), Specialist Child Psychotherapy services and specialist Family Therapy services including Child Sexual Abuse services; all of which may provide expertise to a wider geographical area either through direct contact, consultation or education. Teams may be multi-disciplinary or uni-disciplinary, but will work closely with colleagues from Tiers 2 and 3 CAMHS, Community Health services, Social Care and Housing, and Education."

The below table summarises the structure.

Brent Levels of Need Framework	Tier	Services/Interventions Provided
Universal Services	1	• assessment and diagnosis • advice • mental health promotion • prevention of mental health problems • referral to tiers 2/3 services as appropriate
Children and young people with additional needs	2	• training and consultation to other professionals • consultation to professionals and families • outreach • assessment and treatment • referral to tier 3 services as appropriate
Children and young people with complex needs	3	• assessment and treatment • referral to tier 4 services as appropriate • contributions to consultation and training for practitioners working at tiers 1 and 2
Children and young people requiring a specialist intervention	4	• child and adolescent in-patient units • secure units • eating disorders units • specialist teams • forensic assessments

5. Key Findings and Recommendations

<u>A Change in Emphasis to Effective Early Intervention</u>

Early on in its life, the task group became familiar with several high-profile reviews and reports (such as those referred to earlier) which convinced it of two key points:

- that the future direction of preventing youth offending lay in focusing intervention earlier in the life of a child than is currently the case; and

- that raising the quality of upbringing, education and support for children and their parents, from pregnancy onwards, can reduce criminal behaviour.

These crucial discoveries prompted the task group to consider the broader prevention agenda, and how offending fits into this. This resulted in the scope having to be reconsidered and widened slightly, to focus on services and factors early in the lives of children and at key transition stages; as well as on the overlaps with other poor outcomes, and the importance of services which do not necessarily have preventing offending as their primary purpose, for example parenting and educational programmes.

Some outcomes, such as sexual health and teenage pregnancy, overlap less heavily with the task group's remit and feature only in passing, although services to address them such as Teens and Toddlers were highly regarded by the group.

A New Focus

The task group found the arguments made in support of early intervention by the Audit Commission, the Independent Commission on Youth Crime and Antisocial Behaviour, and the Graham Allen Review very persuasive. Unfortunately, one of the recurring themes was that government at all levels had proven slow or reluctant to fully embrace and apply these principles. Allen states that "public sector investments tend to be skewed to a time when it is too late to have much hope of success"[4] and that local areas should work together to "endorse, plan and fund an organisational and cultural shift towards Early Intervention from all those engaged in local service provision"[5].

While much of the responsibility for such a shift lies with central Government (eg in allocating funding, and setting spending requirements and statutory duties), nonetheless local areas clearly have a role to play as well, and Brent does have some important elements in place. The Children and Young People's Plan 2009-11 states:

"Our objectives emphasise the shift in focus to strengthening the capacity of universal services to be the front end of a preventative system... Over time, it is hoped that our early

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intervention and preventative support services will reduce the demand for more specialist and complex services. It is unlikely that the full impact of this will be felt in the lifetime of this plan, which means that the partnership must balance the allocation of resources to early intervention and prevention services whilst maintaining our capacity to provide specialist or statutory services where these are needed."[6]

Brent's Youth Offending Team (YOT) sits within the Social Care unit of Children and Families, alongside other services whose focus is on supporting the welfare of children, and the Head of the YOT has a positive working relationship with her fellow Heads of Service there. The YOT's multidisciplinary staff includes a parenting worker, along with other child-focused practitioners, although the status of these posts (other than the loss of the Primary Mental Health Worker) is unknown following the restructure in Children and Families.

However, although these show recognition of the significance of prevention in Brent, the Graham Allen review is clear that "the importance of the early years… is still not fully appreciated", and that "any additional investment should be concentrated on Early Intervention in the early years and … at all prior states of child development – before birth, before primary school, before secondary school and before higher education and work". Similarly, the Independent Commission on Youth Crime and Antisocial Behaviour wants "to see money currently wasted on interventions and sanctions that are ineffective, or applied too late, being reinvested in cost-effective services".

There is evidence to support an argument for change in Brent. For example, the Early Intervention Locality Team (EILT) manages the Common Assessment Framework (CAF) within Brent, and carries out the assessment function on behalf of schools. Although the EILT received 562 CAF referrals in 2010, support to early years settings has been "sporadic"[7]. Also, although the YOT engages with families via the Children's Support Panel to improve educational outcomes as a route to reducing offending, the main focus of this work is young people referred via the Triage programme, and who have therefore already been arrested for an offence (albeit minor, and for only the first or second occasion).

These two local examples can be taken to indicate both that potentially insufficient focus has thus far been devoted to detecting and intervening in developmental issues early in the life of a child; and that intensive tailored support to children and their families to address risk factors and problems at the root of offending behaviour is offered only after offending begins. In the Children and Young People's Plan, family-based early intervention actions and offending outcomes fall under the same strategic heading, but no explicit relationship is established between them. The CYPP is also no longer in force, having expired this year, and there is thus no current strategy linking the prevention of offending and other outcomes. Evidence to the task group also gave varying impressions as to the extent to which these are integrated on the ground.

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7 Report to Schools Forum, December 2010, para 6.5

The task group believes that a dedicated strategy should be in place. Some specific components required for it to be effective are included in the following recommendation, although the need for them is illustrated at various points later in this report.

1. The task group recommends that Brent should develop a comprehensive Prevention Strategy, joining up and coordinating the prevention of all negative outcomes for children and young people including poor educational achievement, poor mental, emotional and physical health, teenage pregnancy, drug and alcohol misuse and offending and antisocial behaviour. The Strategy should:

> **a) include an explicit commitment to prevention as a cost-effective long term approach to managing demand on services, which is embedded in practice amongst the council and its partners;**

> **b) set out the joint commitment of all partners to working together at all levels to prevent and intervene early against poor outcomes, based on "Think Family";**

> **c) revise the existing data-sharing protocol to address issues preventing the quick and convenient sharing of secure data electronically by the NHS with relevant teams in the council;**

> **d) explore options for embedded working across disciplines, such as virtual teams or co-location;**

> **e) feature supporting parenting as a major component, including any unmet objectives from the Parenting Strategy 2010-11; and**

> **f) be implemented with specific, measurable, time limited actions; individual accountability; and regular and rigorous monitoring by the Children's Partnership Board's Executive.**

Effective early intervention is not confined to the early years, crucial though these are. Transition stages in a child's life such as from home to pre-school provision, from pre-school to primary school, from primary to secondary, and from secondary to the next stage (work or education) are also formative due to the young person's increased vulnerability at these points. These transitions can cause considerable disruption to the lives of some children, and can trigger problems in their behaviour. The transition can also be difficult for parents, who typically experience far less involvement and contact from secondary schools than has previously been the case with the primary school.

There is specialised support in Brent for children with Special Educational Needs (SEN) statements at the transition from primary to secondary, with facilitators ensuring that the two schools liaise and work together. The task group believes that the principle of primaries and secondaries working together and sharing useful information about pupils' needs is a good one, and should not be limited to just those with SEN. A primary school should let the relevant secondary know, in advance of a pupil's first term there, of risks for that pupil. The

secondary, thus informed, could monitor these risks for that pupil and intervene early where symptoms become apparent.

2. The task group recommends that Early Years settings, primary and secondary schools, and other relevant institutions should cooperate to enable early intervention in relation to needs arising from transitions.

Resourcing to Prevent Escalation of Need

Children's needs, as detailed earlier, are classified in tiers indicating the degrees of difficulty and support available. Early intervention targets young people whose needs are "additional" (Tier 2), to prevent their needs escalating to the point of needing more intensive Tier 3 support. However, at the time of gathering evidence the task group was informed that only 18.7% of resources were directed to Tier 2 provision, with 55% being devoted to Tier 3. For early intervention work to adequately perform its role in preventing the escalation of issues in children (to Tier 3 and above), there should be greater parity. However, it was clearly communicated to the group that with the pressure on Tier 3 services, resource could not be spared from these services to reallocate to Tier 2.

The council and its partners therefore face difficult strategic decisions, in directing the right level of ever-scarcer resources towards early intervention whilst maintaining adequate provision for those whose needs are already complex. The task group felt in the meantime that, by equipping practitioners at this level with additional skills, it may be possible to use those at Tier 1 to filter out some lower-level demand at the Early Years stage, and obviate the need for some referrals to Tier 2. Indeed, the task group was told that this is done by CAMHS in other boroughs; for example, Croydon's Find Me Early initiative equips such practitioners to identify very early signs of need (in parents as well as children) in the pre-school years, and "long before it is necessary for a Common Assessment Framework approach"[8]

The Head of Integrated and Extended Services did mention that Children's Centre workers are receiving training on children's emotional development, which is in line with the task group's thinking. It should also be noted here that the Place 2Be has, until recently, been part-funded by the council to work in 13 primary schools, providing one-to-one and group therapeutic support by teacher referral for young pupils, as well as a drop-in service. Evidence (using the Goodman Strengths and Difficulties Questionnaire) appears to support the effectiveness of this service, and the organisation sees its services as preventing pupils escalating to CAMHS, as well as meeting the need of clients unlikely to attend a CAMHS appointment. The Place 2Be's work was highly regarded by several witnesses.

The task group was told, however, that Brent has had only one CAMHS worker training others, and this had been limited to training YOT staff only. This post was removed in March due to funding cuts, resulting in no CAMHS training for Tier 1 professionals in Brent.

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3. The task group recommends that universal Early Years practitioners, such as health visitors, child minders, and nursery nurses, should be equipped to identify additional needs early and encouraged to provide support to children and families where possible, to reduce demand for Tier 2 services. This should focus in particular on social and emotional development and parenting support, and should include appropriate professional supervision.

Nonetheless, the issue remains of allocating an appropriate proportion of available resource to early intervention services. A recurring theme in evidence was that in times of financial pressure such as the present, non-statutory services which are preventative in nature, rather than being invested in to reap greater rewards over the longer term, are the first targets to be cut. Some examples were given, including the Crisis Intervention and Support Team within the Social Care Localities Service and the Early Intervention Locality Team, which has been reduced considerably in size. Whilst the imperative to protect stretched services meeting existing need is understandable, short-termism will only maintain or intensify the demand on services in the future. Thus, part a) of Recommendation 1 suggests that the Prevention Strategy sets out an explicit commitment to prevention as a cost-effective approach to managing demand on services. In particular, assessing the implications of reallocating resources between the different tiers should form part of the One Council Children's Services Transformation project.

Effective early intervention should result in savings for the council's local partners, and so options for joint investment by local strategic partners in relevant services should be investigated. It is hoped that the Community-based Budgeting Task and Finish Group on Complex Families will consider this in the course of their project over the next year.

4. The task group recommends that the Task and Finish Group on Complex Families should consider opportunities for pooling resources to enhance the effectiveness of early intervention, for the purposes of realising longer-term savings for all public service providers.

The task group noted the observation of the Independent Commission that, while looked-after children (LAC) are over-represented in the youth justice system, most do not get into trouble with the law. In Brent, only 10 of our 371 LAC aged under 18 are known to the Youth Offending Team (2.7% of the total). This number has remained roughly consistent over the years, and the Head of the YOT confirmed that the crossover between young people known to her service and those looked-after was very limited. The task group was also informed that only one of 47 permanently-excluded children for 2009-10 was looked-after (2.1%).

Indeed, the Commission states that many outcomes for LAC have improved nationally in recent years, as these have become a greater priority for government at all levels. Nonetheless, it suggests that children in care be treated as a priority group for preventative services, and greater consistency in applying best practice in areas such as placement, foster care, mentoring and support for care leavers. The task group is aware that a range of

partners have been developing a Corporate Looked-after Children Strategy and anticipates that this, along with the proposed Prevention Strategy, will achieve these.

<u>Changes in Practice</u>

Proven Effective Interventions

In addition to informing the task group's views on the strategic direction of early intervention, the Allen Review and the Independent Commission also provided persuasive evidence as to how early intervention can most effectively be practised.

Both reports emphasised the importance of a robust evidence base for interventions. The background evidence to the Independent Commission's report "focuses on the highest quality research studies"[9], enabling it to recommend with confidence the types of programmes which are proven to be cost-effective, and also dismiss those which are ineffective or harmful. Similarly, the Allen Review rated interventions on the strength of their evidence, but also on other important factors including whether or not there were any unintended negative effects, and how cost-effectively they could be applied by public services.

Allen has used these criteria to recommend 72 intervention programmes which have been evaluated as being sufficiently proven to warrant further investment from any available funding, with 19 in the top category with the very best evidence. These programmes are categorised by three broad age groups (0-5 years, 5-11 years, and 11-18 years), as well as by whether their application is at the universal level or targeted. The overall list is included as Appendix A of this report, and summaries of the top programmes are included in Appendix B.

Allen makes clear that his list is not final, and that other programmes can be added if they meet the criteria. However, it provides a very sound basis for decisions on funding and commissioning of provision aiming to address children's social and emotional development, and achieve the outcomes which flow from it, including reduced youth offending. This particular outcome can be maximised if each of the eight categories of effective interventions identified by the Independent Commission is implemented:

• Parenting support

• Pre-school education

• School tutoring

• Behaviour and 'life skills' strategies

• Family therapy

• Treatment foster care

9 A New Response to Youth Crime, David J Smith (editor) (p212)

• Constructive leisure opportunities

• Mentoring programmes.

Brent's Early Intervention Locality Team recognises the importance of evidence-based interventions and, in its report to the Schools Forum in December 2010, seeks a greater awareness of those available, as well as their cost-effectiveness. However, of the 72 programmes listed by Allen, the task group was only able to confirm two (the Triple P and Incredible Years parenting programmes) currently being utilised fully in Brent. In contrast, a number of services currently provided in Brent are trialled and evaluated during their lifetime, rather than being funded on the basis of robust, existing scientific evidence.

The task group is of the opinion that, given the quality of the evidence supporting the interventions recommended by Allen and the Independent Commission, these represent the best value for money in funding services to prevent both offending and other poor outcomes, and the council's spending decisions going forward should reflect this. This includes the funding allocated by the YOT to prevention, the majority of which should be spent on such services.

5. The task group recommends that preventative work by the Council and its partners should address each of the eight categories set out by the Independent Commission; and that any new programmes funded in future should be selected from those approved by the Graham Allen review.

The task group noted that there were many examples in Brent of services which fall into the categories of effective intervention identified by the Independent Commission mentioned above, albeit not rated as "proven to be effective" by Allen, as they have not been subjected to randomised, controlled trials. For example, information on the YOT's Children's Support Panel touched on behavioural strategies, parenting support, and constructive leisure opportunities. The Youth and Connexions Service has an extensive range of constructive leisure provision as well, including free activities, specialist workshops on crime awareness, creative arts programmes, diversionary activities, workshops to develop skills, curriculum learning activities and the Brent Youth Matters 2 forum. These are based in various centres in Brent, but supplemented by an Outreach and Detached team.

Parenting support is also provided for in Brent's Parenting Strategy, which was developed by the Children and Families service and set out objectives for parenting support from April 2010 to March 2011. This is considered in more detail in a later section of this report.

There were examples of intervention from the voluntary and community sector which also touched on the categories of service identified by the Commission. Examples included peer mentoring carried out by Hornstars, a local organisation which also uses sport, development opportunities and discussion groups to engage young people at risk of or having exhibited antisocial behaviour. As the Breaking Barriers report by the Active Communities Network

details[10], Hornstars also uses constructive leisure opportunities such as football training, and routes into coaching and refereeing qualifications.

The task group also saw first-hand constructive leisure opportunities provided by Brent Youth Radio, where the members visited and found out about the opportunities to perform and produce radio broadcasts and music tracks. The station, which broadcasts online at brentyouthradio.com, prides itself on being able to reach and positively influence local young people who are not receptive to messages from "official" channels and sources. A further example of constructive leisure was the Tricycle Theatre's Social Inclusion Programme, offering young people in selected areas the chance to be involved in productions.

Projects such as these are obviously highly regarded by their participants, and many fill gaps that public bodies often cannot. The value of these services, and those provided by the statutory sector up to this point, cannot be discounted. Nonetheless, the task group felt that going forward, with pressure and scrutiny on public spending like never before, it is essential to direct funds towards interventions with the highest standards of evidence to back them up.

Additionally, for programmes not included in Allen's list, Chapter 6 and Annex G of his report give information on how the requisite standards of evidence can be met.

However, the right types of intervention alone are not sufficient - they must also be properly implemented in order to be effective. The Independent Commission identifies "key ingredients" to achieve this[11], some of which require development and focus in Brent. For example, contracts for commissioned services sometimes omit the prevention of offending as a specified outcome, even though it is expected and informally agreed with the provider. These could lack adequate specificity of outcomes, something that Allen also stresses[12]

A Sound Evidence Base

One important ingredient in effective implementation is an appropriate evidence base showing the prevalence of risk factors in the borough, and how this varies across neighbourhoods. There are several detailed data sets already collated by the Council and its partners, such as those used to plan children's services, health services and parenting support, and to tackle child poverty. The YOT has used data such as this in the past, as the basis for locating the Youth Inclusion Programme in Church End.

The data from these sources should be used, and supplemented if necessary, as an evidence base for the Prevention Strategy. To do this, the data should be analysed to

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10 Pp 28-36, http://activecommunities.org.uk/wp-content/uploads/0212ACN_A4_Report_Web_use.pdf

11 Evidence to the Graham Allen Review on Early Intervention Delivery (p11), http://www.youthcrimecommission.org.uk/index.php?option=com_content&view=category&layout=blog&id=36&Itemid=88. These include a specific theory of change, and outcomes; measurable reduction in exposure to risk factors, on the way to long-term outcomes; community buy-in; baseline trend data on risk factors and outcomes; area profiling of children's circumstances; a local strategy; implementation and programme fidelity; and monitoring and evaluation.

12 Eg p77.

determine the presence of the risk and protective factors identified by the Independent Commission set out in the table below. Together with an audit of existing services to check that they meet the criteria for evidence and effectiveness set out in this report, as well as other useful data outlined later in this report, this will form a needs assessment on which the Prevention Strategy can be based.

Risk Factors	Protective Factors
Poor parental supervision, neglect and abuse	Warm, affectionate relationships between children and their parents
Harsh, inconsistent discipline	Family, teachers and friends who set positive expectations and standards for behaviour
Parental conflict	Skills to feel involved and valued at home and in the community
Individual and parental attitudes that condone law-breaking	
Low family income	
Educational under-achievement from an early age	
Bullying and aggressive behaviour in primary school	
Neighbourhood lacking a sense of community and with high population turnover	

6. The task group recommends that a regularly-updated needs assessment should be undertaken to inform the Prevention Strategy, including:

a) profile of relevant risk factors, protective factors and outcomes for children;

b) an audit of existing services and programmes for their effectiveness and supporting evidence;

c) the findings of the final report on the Parenting Strategy 2010-11; and

d) in-depth research and analysis regarding families' experiences of preventative and early intervention services.

The task group found that some of these risk factors may not be fully weighed in some services' assessments of young people at present. For example, the Common Assessment Framework (CAF) does not seem to assess the risk associated with living in a high-turnover neighbourhood with little sense of community, nor harsh and inconsistent discipline. Neither the CAF nor the YOT's Onset tool assesses attitudes condoning offending (by parents or child), and Onset does not assess low family income.

7. The task group recommends that the tools used to assess risks in young people include all risk factors identified by the Independent Commission.

The task group wished to emphasise that the influence of low family income, poverty and housing as a risk factor. Chapter 2 of Frank Field's Independent Review on Poverty and Life Chances[13] draws upon evidence linking poverty to a range of outcomes for children and young people, including antisocial behaviour and criminal activity, and the significance of this factor was reinforced by Brent's Head of Integrated and Extended Services. Indeed, in 2010 low income and housing and financial issues were two significant risk factors identified by the Early Intervention Locality Team in their analysis of CAF cases.

Beyond the implications of poverty for children's development identified by Field, many of the young people that the task group engaged with were conscious of a basic link with offending. Poverty and lack of prospects for the future were major causes of youth offending identified by Brent's looked-after children, and by the Brent Youth Matters 2 forum. Both groups believed that poverty was a barrier to young people fulfilling their potential, with BYM2 also noting that this can limit the enrichment opportunities open to some young people. In a survey of 75 young people - who were either clients of the YOT or attendees of the Hornstars project targeting antisocial behaviour - desire for money or lack of a job was the most commonly-identified cause of criminal activity and antisocial behaviour.

In the same survey, careers advice was the service identified most often as having been needed by respondents at some point, but not accessible. A deficit in useful careers advice (including a lack of variety) was also identified by some older members of Brent Youth Parliament as a barrier to young people fulfilling their true potential; and the careers support provided by Connexions was criticised at the Brent Youth Matters 2 forum as being inadequate. The view was further expressed by the leaders of Hornstars that some large employers in the borough, such as Asda, could do more to contribute to their local areas by providing job opportunities to young people living nearby, particularly those in deprived neighbourhoods. This group felt that these businesses should be encouraged to disregard previous disputes with local young people where necessary, and play a part in improving local circumstances for the whole community.

Clearly, therefore, economic background and prospects for the future are important risk factors. The task group is aware that Brent is developing a Child Poverty Needs Assessment and Strategy, and hopes that the influence of poverty on youth offending will be acknowledged.

8. The task group recommends that future Child Poverty Needs Assessments and Strategies take into account the findings of this report.

A truly useful evidence base should include effective screening and diagnosis. Allen, drawing upon the Field review, recommends regular assessments of various aspects of development up to the age of five, to complement the Early Years Foundation Stage; while the Independent Commission recommends a "stronger commitment" from local services to screening and assessment for chronic behaviour problems. The task group supports the

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13 http://www.frankfield.com/review-on-poverty-and-life-chances

regular assessment of early years stages. However, as was put by one witness, some professionals can be reluctant to commit to a diagnosis with pre-school children. Also, assessment processes intended to identify and address issues in children do not always achieve this – notably, too many pupils with SEN only have this assessed and statemented in Pupil Referral Units, by which point they have already been permanently excluded (although this is a national problem, and the Government's new SEN Strategy aims to address this). These issues must be overcome for general screening to have the intended effect.

It was suggested that better communication and collaboration between agencies can help solve some of these issues, and this is the theme of the next section.

Collaboration Between Agencies

Think Family

The "Think Family" principle which governs services for children entails seeing the needs of the child within the context of broader family circumstances and needs. This requires complementary working between child-focused service providers and others. Some working relationships were seen to work very well, and there were examples of close integration amongst services. Multi-disciplinary teams like the YOT, which has included parenting, substance misuse, mental health and education workers, show the value of collaboration amongst professionals with different specialisms.

However, it was indicated to the task group that, in common with many other areas, the whole-family approach envisaged for "Think Family" is not fully realised in Brent. Issues with children which indicate a family's need for support from relevant adult services (such as mental health, substance misuse and housing issues) do not necessarily result in prompt intervention by those services. While there may be reasons for this, such as higher thresholds for intervention for these services, the effects on a child in the family must be a primary concern for all . It was, in fact, asserted to the group that service providers commissioned by the Council set better examples of holistic approaches to issues, referrals to other providers, and continuity of contact with clients, than do Brent's public sector organisations.

Virtually all professionals referred at some point in their evidence to other teams or agencies with which they interacted, and while there were examples of positive working relationships with key partners, many felt they could be improved, especially with the health sector. There were various reasons given for this. For example, health partners can have pressures at the national level which are difficult to reconcile with the Council's priorities; and the NHS IT infrastructure's safeguards can prevent the simple electronic transfer of confidential data to council practitioners, despite an agreed data-sharing protocol. In addition, personal relationships can also be strained at times, at all levels.

The Prevention Strategy will provide a good opportunity to address these issues amongst partners, and so the task group has suggested, in Recommendation 1 parts b) and c) on p20, that the strategy sets out a joint commitment by relevant partners to work together at all

levels to intervene early; and to revise the data-sharing protocol between the council and NHS to work more effectively together.

The Prevention Strategy could examine Croydon's approach to some of the issues common to both areas in their Total Place review. This confronted some systemic weaknesses and resolved to create joined-up solutions and work together, without reinforcing boundaries and barriers. It recognised that day-to-day joining up could only follow if it was visible at the highest level, and this resulted in cross-agency, virtual Family Partnership Teams based on geographical localities, including professionals in the health, family and social care, housing, employment support and benefits fields. Recommendation 1d) on p20 suggests that this approach is reviewed in the development of Brent's strategy.

Clearly, the variety of agencies and teams whose input is required warrants high-level coordination in their preventative activity to ensure the greatest impact. For this reason, the Prevention Strategy should be overseen by the Children's Partnership Board. In order to do this, the membership of its Strategic Forum must include representatives of services from outside of Children and Families whose input will be vital, such as Community Care and the Sports Service.

9. The task group recommends that the needs assessment and Prevention Strategy are overseen by the Children's Partnership Board.

The Common Assessment Framework

The Common Assessment Framework (CAF) was specifically designed by the government to require relevant agencies to work together, either via single-agency referrals or as a "Team Around the Child" (TAC), in individual cases where need is identified. In Brent, the CAF is supported by the Early Intervention Locality Team (EILT), and decisions on Tier 3 multi-agency CAF assessments are taken by an Integrated Services Coordination Group. These decisions include determining the agency or team with the Lead Professional role, and a specified package of support. This panel, composed of representatives of the agencies who would form a TAC, provides the mandate for the commissioned services and for TAC meetings.

The CAF is a central plank of partnership working in early intervention and is, for example, relied upon to help achieve many of the actions in the Brent Parenting Strategy[14]. There are many positives to the CAF's implementation in Brent - in particular, the task group was impressed with Brent's excellent Integrated Working Guidance for professionals on using the CAF, which led an Ofsted unannounced inspection in November 2010 to report that the CAF was "well-embedded". The EILT also noted improved outcomes in education settings in its report to the Schools Forum in December 2010.

Nonetheless, the same report acknowledges inconsistencies in adoption of the CAF across other agencies, and this was echoed in evidence given by witnesses. The task group heard

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14 See "Performance measures" column of Action Plan, pp27-28

that some organisations or individuals do not attend TAC meetings, and will not take on the "Lead Professional" role of coordinating the TAC even where they are best-placed to do so. When TAC meetings take place, they can be seen by some to have little value, since they may not lead to useful action or outcomes.

With the major reduction in the support available from the EILT, there is a real need for genuine cross-agency buy-in to better implement the CAF and ensure whole-family support for those who need it. The Integrated Services Coordination Group does not appear to have been able to consistently ensure implementation of and compliance with its decisions. However a Strategic Implementation Group, consisting of senior managers from key agencies, is charged with championing integrated working within each agency and giving it direction, and is in a position to address these issues. The task group would like to see this group act upon the issues identified above.

10. The task group recommends that the Strategic Implementation Group acts to address weaknesses and inconsistencies in Team Around the Child meetings, including non-attendance by professionals, unwillingness to take on the Lead Professional role, and perceptions of meetings' ineffectiveness amongst participants.

Enabling better collaboration amongst agencies on the ground also requires frontline staff to be equipped and encouraged to work together across organisational boundaries, and an appropriate culture to be embedded. This requires relevant training and professional development, and is dealt with later in this report.

The Crucial Role of Schools

Educational Outcomes and Exclusion

The research and recommendations presented in this report are intended to enable the potential for offending behaviour to be identified and effectively addressed early in the life of a child, where possible. However as the Allen Review points out, opportunities to effectively intervene persist into secondary education and even in the years leading up to adulthood, which is why several of his recommended programmes take the form of additions or amendments to the school curriculum. For this reason – though not central to its remit – the task group wishes to note its regret that some single-sex and faith schools in Brent have refused to allow sexual health services, including Chlamydia screening, to be provided to their pupils on-site.

The Independent Commission also identifies academic failure and low commitment to education as risk factors for later crime. With these factors in mind, the task group took particular interest in evidence regarding education in Brent. There is a mixed picture of academic attainment, according to the Education Standards in Brent 2010 Report by the School Improvement Service. This shows consistently high standards at Key Stage 2, with attainment exceeding the national average; and at Key Stage 4, with Brent in the top 20% of local authorities for the proportion of pupils achieving five good GCSEs including English and

mathematics. At Key Stage 5, there has been a significant improvement in results for A-Level and equivalent qualifications, following a strong focus by the Brent 14-19 Partnership.

On the other hand, achievement at the crucial earlier stages of a child's life is below the national average. At Key Stage 1, this is the case at all levels and in all subjects, though reading and writing has improved. At the Early Years Foundation Stage, where five year-olds are scored across a range of assessment areas, attainment has fallen in all areas and Brent has fallen further below the national level than previously. The gap between the lowest achievers and the rest is narrowing, but remains wider than is the case nationally.

Chapter 4 of the 2004 Audit Commission report notes a "strong association" between exclusion and offending, with recorded offending almost doubling when a pupil is excluded. Likewise, reintegration into mainstream provision is of fundamental importance. For these reasons, Local Education Authorities should try to prevent exclusions.

The task group was informed that Brent has comparatively high permanent exclusion rates, though these have fallen in recent years, which gave it cause for concern given the link with offending. There was a perception that Brent also has high rates of excluded pupils reintegrated into mainstream education (45% of excluded Key Stage 3 pupils), which on the face of it would allay these fears. However, the group learned that there was no comparative information available to benchmark this against other authorities, and that about a third of reintegrated pupils return to a Pupil Referral Unit. Again, this was presented as a good rate, but without comparative statistical evidence. Therefore, there was no conclusive information to assure the task group that Brent's approach results in a better "net" result of young people with challenging behaviour remaining in mainstream education and therefore at less risk of offending.

11. The task group recommends that work is undertaken to benchmark reintegration rates of excluded pupils in Brent against peer authorities. This should take into account reintegrated pupils who are subsequently permanently excluded again.

Views of Pupils and Former Pupils

Whilst the group heard that most schools genuinely and rigorously try to avoid having to exclude pupils, some schools may be more ready to exclude than others. Many of the views expressed by pupils spending fixed-term exclusions at the Right Track project, and by looked-after children at Brent Care In Action, were characterised by a sense that some teachers resorted to harsh disciplinary measures unnecessarily; that there were better methods of addressing disruptive behaviour which would be less damaging to the child's education than exclusion; and that teachers should be capable of deploying these where appropriate.

Some teachers were also perceived as being unwilling or unable to empathise with, listen to, and engage with their pupils, and this view was shared by members of the Brent Youth Matters 2 forum and the Youth Parliament. Notably, the suggestion of professional development to help address these perceived issues was made by young people across the

different consulted groups; and one professional noted that ideally it would be better for teachers to have more opportunities to reflect on classroom management.

It was put to the task group that schools take the development of pupils' emotional literacy very seriously. The use and success of the Social and Emotional Aspects of Learning (SEAL) curriculum in many primary schools was commended, as was that of Personal, Social and Health Education (PSHE) in secondary schools. The group acknowledges the value of these initiatives and others, working either with individual pupils or across schools, in building positive relationships between teachers and pupils. However, it is important that the views expressed by young people on exclusion and responses to disruptive behaviour are presented here.

Beyond the administration of discipline, some young people questioned the commitment of teachers to all pupils. Some, both from the Right Track project but also from the BYM2 forum, felt that the potential of pupils who misbehave can be neglected by teachers who perceive them as being not worth the effort. On the other hand, 56% of respondents to the questionnaire (who generally had a record of misbehaviour or offending) answered that school staff had definitely tried to help them do well at school; only 21% answered that they had not.

With academic failure and low commitment to education a risk factor for crime, giving up on difficult pupils would likely increase this risk for them. In 2004 the Audit Commission commented that "the lack of incentives for schools to invest in those who are failing academically, especially if they are disruptive, is a major obstacle to inclusion"[15]. BYM2 and the Brent Youth Parliament both agreed with this; each suggested frustration and lack of success at school as a cause of disruptive behaviour and offending, and each also suggested countering these with more intensive time for these pupils with teachers, to provide the attention and contact that was hard to receive in a full class. The desire for help with schoolwork was echoed amongst Brent Care in Action and questionnaire respondents.

This supports the Independent Commission's emphasis on school tutoring as an effective intervention. The Allen Review's list of evidence-based programmes in Annex B of its report divides these by educational stage, and the task group would like to see proven programmes used in schools to improve outcomes in relation to both education and offending.

The task group recognises that achieving this will be affected by the provisions of the Education Bill 2011. The Bill radically reduces the reliance of schools with "academy" status upon council-provided services, as they will be free to buy these from other providers. This could have ramifications for not just the School Improvement Service, but also the Early Intervention Locality Team and Children's Centres. Additionally, with the council's share of Dedicated Schools Grant funding decreasing with every school that chooses to become an academy, the overall financial viability of providing support services for the remaining maintained schools could be compromised if enough take that option. Subject to these considerations, the following recommendation should be implemented as fully as possible.

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15 P84

12. The task group recommends that the School Improvement Service prioritises and advocates programmes on the Allen list intended for educational settings, and focuses on increased support for Early Years providers.

The Audit Commission's 2004 report identified the need for flexibility in the curriculum to combine academic and vocational achievement, including work-related learning, according equal status to each. This observation was made in 2004, but there continues to be a gap, according to both professionals and young people. It was widely recognised that traditional academic settings are not suitable for all, and can lead to disengagement and frustration with education, which as we have seen are identified risk factors for offending. However, the task group was told that, although schools seek places for pupils with alternative education providers and employers, these are expensive and in short supply.

13. The availability of opportunities for young people in Brent to engage in alternative and vocational forms of learning is expanded where possible; and takeup is encouraged where appropriate to pupils' aptitudes and abilities.

The Crucial Role of Parents

The Allen review emphasises that parenting exerts the definitive influence on a child's development: "that the quality of a child's relationships and learning experiences in the family have more influence on future achievement than innate ability, material circumstances or the quality of pre-school and school provision, and that what parents do is more important than who they are"[16]. Similarly, as detailed earlier, parenting support is one of the key categories of service identified by the Independent Commission as being effective in preventing offending.

Brent's Parenting Strategy

The task group consulted Brent's Parenting Strategy 2010-2011, which also recognised the difference parenting makes to a child's wellbeing and future, and featured clear links to the Children and Young People's Plan 2009-2011. This Strategy acknowledged that identifying families needing parenting support is a "fundamental aspect of core service delivery rather than an additional responsibility", and aimed "to promote sensitive parenting during the first months and years of life through early assessment of parenting ability and early identification of need and risk"[17]. The task group found this strategy very impressive, as it was based on evidence from a variety of sources, including the views of statutory and community sector stakeholders, service providers and parents. It also drew on progress against the national parenting standards and other local data, including an audit of existing provision. The

16 P23

17 P2

Strategy affirmed a commitment to early identification and intervention, and set out priorities based on the needs identified.

On the other hand, viewing the February 2011 update on the Strategy's Action Plan – the most recent available – left the task group unclear about the status of some key priorities, and with the impression of gaps in relation to others. For example, it was not clear if the planned increase in parents voluntarily accessing and remaining with a parenting programme was achieved by the target date of December 2010. Information was also lacking in respect of the aims to provide childcare to allow parents to attend programmes, and reducing specialist referrals by the promotion of early intervention.

There was further uncertainty as to the status of plans to address the needs of the culturally diverse population in Brent, such as analyses of provision of English courses for parents and parenting programmes for different communities. Demographic data on attendees of parenting programmes was missing, as was data to determine if more from culturally vulnerable groups were accessing support (though practitioners are being supported to develop the delivery of the Strengthening Families, Strengthening Communities course in other languages). The task group was pleased that the Action Plan was intended to monitor these factors, which are essential to ensure fair provision in a the diverse borough where over 130 languages are spoken, but felt that reporting on these needed to be more rigorous.

Evidence considered by the task group seemed to indicate that some of these issues may stem from a break in continuity of ownership, direction and accountability in respect of the Strategy. Functional responsibility for managing and reporting on the Strategy and Action Plan appeared to have transferred part-way through the year, due to the anticipated effects of the department's restructuring. Following this, reporting on some elements of the Strategy dwindled. This seemed to weaken accountability for commitments in the Action Plan.

With the Strategy coming to the end of its term, and no replacement in place, along with the loss of key central posts, the task group was not clear how improved parenting provision is intended to be achieved in the future. To build upon the original, positive vision for parenting entailed by the Strategy, Recommendation 1 e) suggests that parenting support should form a fundamental component of the new Prevention Strategy. Recommendation 1 f) suggests good practice in relation to the implementation and monitoring of the new strategy, putting into practice lessons learned with the Parenting Strategy. Both of these recommendations are found on p20. Also, to ensure that the good work of the original Strategy is not lost, recommendation 6 c) on p26 advises that the needs assessment for the Prevention Strategy incorporates the findings of the final report on the Parenting Strategy.

Cultural Diversity

Overall, issues posed by the degree of cultural diversity of Brent, in terms of communication and representativeness, were acknowledged as a principal challenge in providing support to parents. This is the case for any service provision in this borough, where ethnicity often adds a complex dimension. For example, Black African, Somali and Caribbean groups (particularly boys) tend to be over-represented amongst CAF referrals, permanent

exclusions from school and young offenders, while Asian Indian groups are under-represented. While this data was not broken down for the group geographically below locality level, it seems likely that these statistics reflect the areas of poverty, and associated poor outcomes, identified in the draft Brent Child Poverty Needs Assessment[18], which include areas in the south of the borough such as Stonebridge, Harlesden, areas bordering the North Circular and south Kilburn, along with isolated pockets in other parts.

The task group was informed that funding changes were likely to affect the "Strengthening Families, Strengthening Communities" parenting programme – which focuses on specific communities - as the required childcare and refreshments could not be funded. The task group is clear that any decisions to alter the level of funding available should be based on an assessment of impact. As the Strengthening Families, Strengthening Communities programme is not included amongst proven effective programmes according to the stringent Allen criteria, this may therefore provide an appropriate opportunity to review Brent's commitment to this programme.

Mutual Support Networks

Networks of parents providing mutual support and advice are universally recognised as a valuable resource. Croydon's approach is to invest in opportunities for these parents to make connections at the pre-natal stage, train parents to be peer mentors to others, and develop networks of older, experienced parents who are well-informed about accessing services to provide advice to younger parents. These make use of the borough's existing faith and BME forums and its voluntary and community sector. In Brent, the community development workers for Children's Centres would be well-equipped to undertake this work.

Brent's Parenting Strategy acknowledges the value of support networks, and reports parent feedback of strong friendships and informal meetings following the end of courses. 61% of children responding to the task group's questionnaire also reported that their parents had family or friends they could turn to for help if necessary, showing that some degree of informal support is available. However, the Parenting Strategy Action Plan contained no specific plans for how formal networks would be helped to get off the ground; and no examples were reported of dedicated groups having been set up.

14. The task group recommends that Croydon's Peer2Peer Support measures are examined and evaluated, and effective elements replicated in Brent to support networks for vulnerable and isolated parents.

The task group regrets that it was unable within its allotted term to take direct evidence from parents, to hear their views on provision. However, it noted that the Parenting Strategy drew on these using a Parent Talk Group in 2009, and that this involved struggling parents in particular. A similar channel should be available on an ongoing basis.

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18 P9

15. The task group recommends that options are examined for the views of parents to be represented on an ongoing basis, such as via a Parents' Council.

Service Awareness and Access

The Parenting Strategy includes an aim to expand outreach to convey service information to hard-to-reach groups[19]. The importance of taking the initiative with those not accessing services was reiterated in the Children and Young People's Plan 2009-11[20], and by the Head of Integrated and Extended Services in evidence to the task group. However, other evidence to the group suggested that some Brent services still expected families to come to them, when this was not always possible.

In seeking to ensure availability of and accessibility to information about parenting support, Brent does utilise children's centres and schools, but the Parenting Strategy places great emphasis on the Family Information Service (FIS) on the council's website. The Mosaic Public Sector customer insight tool used in Brent indicates that over-reliance on the FIS to promote information to parents may not be the solution. For example, the largest segment of the Harlesden locality's population (who are more likely than average to form single parent households) do not tend to use the internet to access information or services. Text message is the best method to pass local information to them, and those who are not comfortable speaking English tend to prefer to access our services face to face. As one witness to the task group stated, "there is no central place to find information on all services available, which means that often families are not aware of the services they can access".

The methods used to achieve the universal objective of access to parenting support should be differentiated to meet the varied needs of localities and their different communities, including tailoring methods of communication and promotion of services, particularly hard-to-reach groups.

16. The task group recommends that, with the support of the Corporate Policy Team, Mosaic Public Sector is used to analyse and determine the most effective methods of promoting parenting support, and determining the best access channels for different groups of parents.

Tools such as Mosaic may be useful in further analysis of service need and uptake, and differentiating provision across localities. In-depth customer journey-mapping is a technique which could help teams and agencies understand how much awareness there is of their preventative services, and how accessible families find them. It could also help them to see how joined-up they are for families using them, how long families wait between first reporting an issue and receiving a successful intervention, and how well our services persist with families who do not engage.

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19 P11

20 P27

Allen cites a survey of two London boroughs in 2009 showing that 80% of referrals to children's services were not even investigated, claiming that this is "probably not untypical of many local authorities"[21], and other areas for development have been highlighted in the body of this report. Indeed, the task group learned that the Parenting Steering Group which owns the Strategy did discuss researching user views, but that this was not pursued due to a lack of resources.

It is likely that detailed research on families' experiences of services would shed light on issues of which the council and its partners are unaware, and should be undertaken. The insight that this could provide, both qualitative and quantitative, would be invaluable, and this should be incorporated into the Prevention Strategy's needs assessment, as per Recommendation 6 d) on p26. Following this research and analysis, the findings of the Task and Finish Group on Complex Families should be integrated with it when they become available.

Other Organisational Issues

The preceding sections demonstrate a need for gathering information which is not presently held. The task group also came across other gaps in management information which it believed could be filled to better inform decisions on provision.

Outcome-focused Monitoring

For performance data to be useful, there must be a primary focus on outcomes, with process-oriented information used only to supplement this or as a proxy where outcomes cannot be measured at present. The task group came across several examples where this was the case, including data provided by The Place 2Be (which measures the impact of interventions using the Goodman's SDQ as mentioned previously). The YOT's Senior Youth Inclusion Programme (YIP) measures the reduction in offences committed by participants since joining, while the Junior YIP reports the number of participants who have entered the criminal justice system since following the participation (three out of 150 since 2004). These too are outcome-focused, and the task group was also pleased that the Attendance and Behaviour Coordinator considers exclusion figures as a key indicator of performance.

However, it may be that some data currently drawn upon should be supplemented to enable overall, longer-term outcomes to be monitored. For example, some services score clients using an assessment tool at the beginning and end of a programme, which is a useful and immediate measurement, but does not track outcomes after participation in that programme. The task group found less focus on monitoring client outcomes over the longer term than on service activity, in relation to services funded by the Commissioning team, young people transitioning from a PRU to Connexions, the YOT's Children's Support Panel, and the Parenting Strategy and Action Plan.

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21 P25

The Early Intervention Locality Team's report to the Schools Forum also lacks evidence of "improved outcomes in the education setting"[22] and its "positive impact on short term outcomes"[23], and it is not clear if measurement goes beyond feedback from schools and meeting records. However, the EILT recognises in that report the need to analyse long-term impact, and Integrated and Extended Services provided training on data quality and recording in early April.

The net effect was that it was difficult for the task group to obtain a clear picture of the overall benefit being achieved as a result of the service provision in Brent. Presuming that this is representative of the performance data available to service managers, it will make it difficult for them to make informed decisions to achieve improvement.

17. The task group recommends that strategic objectives and measures of success for preventative services should focus on achievement of sustained outcomes beyond the lifetime of specific interventions.

Staff Skills

It is also vital to equip staff with the necessary skills. Allen identifies a long-term, nation-wide need for better-qualified Early Years practitioners, including leaders at graduate level, and holders of Early Years Professional Status on all sites. In the interim, as noted earlier in this report, he emphasises training and development in relation to both the social and emotional capabilities of babies and children, and parenting.

From a local perspective, Croydon's Total Place review identified core skills for staff which require development, both in relation to direct client-facing duties and others. An overall suite of training and development measures (the Early Years Academy) aims to embed these.

At every stage of the evidence-gathering process, the Task Group's confidence in the capability and commitment of Brent's frontline practitioners was affirmed, with each manager and member of staff rightfully proud of their team's valuable contributions to the wellbeing of children, young people and their families. Where difficulties between agencies came to light, it was clear that this was mainly due to different perspectives of the needs of clients, and the perceived requirements of their agencies or professions.

Nonetheless, several witnesses' observations confirmed that some of the development gaps identified by the Allen and Croydon reviews also pertain to Brent, including better understanding of emotional development in young children to be able to identify warning signs. In some areas, greater confidence and interpersonal skills for practitioners dealing directly with families are needed, and attitudes towards change can also be improved.

The task group is aware that multi-agency working and sharing information are two areas of the Common Core skills and knowledge which formed the basis of training for Brent

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22 Para 6.6

23 Para 6.7

practitioners at the launch of the CAF. However, as has been detailed in this report, full implementation of the CAF is not uniform across agencies, and further development is required to better embed these practices in staff. Furthermore, there may be a need to develop Early Intervention Locality Team workers as positive ambassadors for their team and the CAF, particularly in relation to some schools.

18. The task group recommends that professionals from the relevant teams and agencies are trained jointly, to ensure consistent understanding of obligations, and to build relationships. The benefits of working together and complementing each others' services should be a core learning point.

In addition, opportunities for practitioners to reflect are recognised as important, for example in the Parenting Strategy. However, the task group learned that there are areas where these opportunities are not consistently available, particularly for teachers to reflect on classroom management.

19. The task group recommends that learning and development for all professionals incorporates opportunities to reflect and learn about emerging practice, and fosters innovation, eg time away from the day-to-day working environment and learning from peers.

Many of the learning and development needs are recognised and were brought to the task group's attention by managers, with commitments to addressing these already made. The group was very encouraged by this forward-looking approach. Further training needs may also arise from other recommendations made above, for example equipping Tier 1 to better manage demand on Tier 2 services.

Conclusion

The task group believes that this report provides a range of important and useful recommendations which, when implemented, will lead to improved outcomes for children, young people, their families and the people of Brent, including preventing many being lost to offending. The steps to achieving this are genuine commitment by the council and its partners to early intervention, utilising programmes which are proven to be effective, planning and delivering services in partnership with our colleagues, supporting schools and parents, and ensuring that our services are resourced and monitored appropriately.

The context within which these recommendations will be implemented remains uncertain as, for example, the implications of the Education Bill and the number of schools becoming academies are not yet known. However, with the futures of our children and young people at stake, the council and its partners cannot afford not to act. The task group hopes that the views of young people included in Appendices C to F – some of whom have themselves been involved in offending – will inspire and challenge us to do just that.

Appendix A

Programmes selected as proven by the Graham Allen Review (by level of evidence standard):

Level 1 (19 interventions)

– Curiosity Corner (as part of Success for All)

– Early Literacy and Learning Model (ELLM)

– Functional Family Therapy (FFT)

– Incredible Years

– Let's Begin with the Letter People

– Life Skills Training (LST)

– Lions Quest Skills for Adolescence

– Multidimensional Treatment Foster Care (MTFC)

– Multisystemic Therapy (MST)

– Nurse Family Partnership (NFP)

– Parent–Child Home Program

– Project Towards No Drug Abuse (Project TND)

– Promoting Alternative Thinking Strategies

(PATHS)

– Reading Recovery

– Ready, Set, Leap!

– Safe Dates

– Safer Choices

– Start Taking Alcohol Risks Seriously (STARS)

for Families

– Success for All

Level 2 (3 interventions)

– Bright Beginnings

– Parent–Child Interaction Therapy (PCIT)

– Schools and Families Educating Children (SAFE

Children)

<u>Level 3 (50 interventions)</u>

– Adolescent Transitions Program

– Adolescents Coping with Depression

– All Stars

– Al's Pals

– Brain Power

– Breakthrough to Literacy

– Brief Strategic Family Therapy

– Bright Bodies

– Career Beginnings

– Caring Schools Communities

– Carrera Pregnancy Prevention (effect on girls

only)1

– CASASTART

– CATCH

– Community Mothers

– Cooperative Integrated Reading and

Composition

– Coping Power

– Dare to be You

– Direct Instruction

– Even Start

– First Step to Success

– Good Behavior Game

– Guiding Good Choices

– Healthy Families America

– Healthy Families New York

– High/Scope Perry Pre-School

– Homebuilders

– I Can Problem Solve

– Olweus Bullying Program

– PALS

– Parenting Wisely

– Parents as Teachers

– Planet Health

– Positive Action

– Power Teaching Mathematics

– Power Teaching Mathematics (STAD)

– Project SPARK

– Quick Reads

– Read 180

– Reducing the Risk

– Roots of Empathy

– Shapedown

– Stop Now and Plan (SNAP)

– TAI Math

– Targeted Reading Intervention

– Teen Outreach

– The Reading Edge

– Together Learning Choices (TLC)

– Triple P

– Varying Maternal Involvement in a Weight Loss

Program

– Youth AIDS Prevention Project

Appendix B

<u>Summaries of programmes listed by the Allen Review as Level 1 (with the highest standard of evidence)</u>

Early Literacy and Learning Model (ELLM)

www.unf.edu/dept/fie/ellm-plus-home.html

ELLM is a US literacy-focused curriculum and support system designed for young children from low-income families. The ELLM programme includes curriculum and literacy building blocks, assessment for instructional improvement, professional development for literacy coaches and teachers, family involvement, and collaborative partnerships. The ELLM curriculum and support system is designed to enhance existing classroom curricula by specifically focusing on children's early literacy skills and knowledge. The ELLM curriculum materials include: a set of literacy performance standards; monthly literacy packets; targeted instructional strategies; resource guides for teachers; a book-lending library; and literacy calendars. ELLM requires a two-hour block of daily literacy and language instruction. Trained literacy coaches provide instructional support to pre-school teachers who use the curriculum.

Functional Family Therapy (FFT)

www.fftinc.com/

FFT is a structured family-based intervention that works to enhance protective factors and reduce risk factors in the family. FFT has three phases. The first phase is designed to motivate the family towards change; the second phase teaches the family how to change a specific critical problem identified in the first phase; and the final phase helps the family to generalise their problem-solving skills. A randomised controlled trial of Functional Family Therapy is currently under way in Brighton as part of the SAFE Project.

Incredible Years

www.incredibleyears.com/Program/incredibleyears-series-overview.pdf

The Incredible Years parent-training intervention is a series of programmes focused on strengthening parenting competences (monitoring, positive discipline, confidence) and fostering parents' involvement in children's school experiences in order to promote children's academic, social and emotional competences and reduce conduct problems. The parent programmes are grouped according to age: Babies & Toddlers (0–3 years); BASIC Early Childhood (3–6 years); BASIC School-Age (6–12 years); and ADVANCED (6–12 years). Incredible Years has been widely delivered across the UK, including delivery with a focus on the disadvantaged through Welsh Early Years Services and a 0–12 programme being delivered through Manchester's Children and Parents Service.

Let's Begin with the Letter People

www.abramslearningtrends.com/lets_begin_with_letter_people.aspx

Let's Begin with the Letter People is designed to enhance early language and literacy skills. The programme targets many areas of language development, including building letter knowledge, phonological awareness, language and motivation to read, development of vocabulary, and receptive and expressive language development.

Life Skills Training (LST)

www.lifeskillstraining.com/

LST is a school-based classroom intervention to prevent and reduce the use of tobacco, alcohol and marijuana. Teachers deliver the programme to middle/junior high school students in 30 sessions over three years. Students in the programme are taught general self-management and social skills and skills related to avoiding drug use.

Lions Quest Skills for Adolescence

www.lions-quest.org/

Lions Quest Skills for Adolescence is a school-wide programme designed for middle school students (grades 6–8). It was designed to promote good citizenship skills, core character values and social emotional skills and to discourage the use of drugs, alcohol and violence. The programme includes a classroom curriculum, school-wide practices to create a positive school climate, parent and family involvement, and community involvement. The curriculum may vary in scope and intensity, lasting from nine weeks to three years. The lessons use co-operative group learning exercises and classroom management techniques to improve classroom climate.

Multidimensional Treatment Foster Care (MTFC)

www.mtfc.com/index.html

MTFC (versus regular group care) is an alternative to group or residential treatment, incarceration and hospitalisation for adolescents exhibiting chronic antisocial behaviour, emotional disturbance and delinquency. Community families are recruited, trained and closely supervised to provide MTFC-placed adolescents with treatment and intensive supervision at home, in school and in the community. MTFC emphasises clear and consistent limits with follow-through on consequences, positive reinforcement for appropriate behaviour, a relationship with a mentoring adult, and separation from delinquent peers. MTFC is being trialled by randomised controlled trial and quasi-experimental study in the UK as part of the Care Placements Evaluation.

Multisystemic Therapy (MST)

www.mstservices.com/

MST is an intervention for young people that focuses on improving the family's capacity to overcome the known causes of delinquency. Its goals are to promote parents' ability to monitor and discipline their children and replace deviant peer relationships with pro-social friendships. Trained MST therapists, working in teams consisting of one PhD clinician and three or four clinicians with master's degrees, have a caseload of four to six families. The intervention typically lasts between three and six months. The first randomised controlled trial of MST in the UK, run by the Brandon Centre in partnership with Camden and Haringey Youth Offending Services.

Nurse Family Partnership/Family Nurse Partnership

www.nursefamilypartnership.org/

www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/

DH_118530

Nurse Family Partnership provides intensive visitation by nurses during a woman's pregnancy and the first two years after birth. The programme was developed by Dr David Olds. The goal is to promote the child's development and provide support and instructive parenting skills to the parents. The programme is designed to serve low-income, at-risk pregnant women bearing their first child. It is being delivered in the UK as Family Nurse Partnership. The Department of Health is currently undertaking a number of randomised controlled trials across the UK.

Parent–Child Home Program

www.parent-child.org/

The Parent–Child Home Program promotes parent–child interaction and positive parenting to enhance children's cognitive and social-emotional development. It prepares children for academic success and strengthens families through intensive home visiting. Twice-weekly home visits are designed to stimulate the parent–child verbal interaction, reading and educational play critical to early childhood brain development. Each week the home visitors bring a new book or educational toy that remains with the families permanently. Using the book or toy, home visitors model for parents and children reading, conversation and play activities that stimulate quality verbal interaction and age-appropriate developmental expectations. The Parent–Child Home Program has been implemented in Ireland, Bermuda, Canada and the US.

Promoting Alternative Thinking Strategies

(PATHS)

www.channing-bete.com/prevention-programs/paths/

The PATHS curriculum facilitates the development of self-control, self-esteem, emotional awareness and interpersonal problem-solving skills, with an increased vocabulary and understanding of emotions. The programme also focuses on improving empathy and promoting an understanding of attributional processes and a better understanding of the effects of behaviours. It links with the current PSHE curriculum and works positively to promote whole-school behaviour policies.

Project Towards No Drug Abuse (Project TND)

tnd.usc.edu/

Project TND is funded by the US National Institute on Drug Abuse as a drug misuse intervention and prevention programme for high school-age young people. This school-based programme: teaches skills, such as healthy coping and self-control; educates students about myths and misleading information that encourage drug misuse, and motivates change; warns of chemical dependency and other negative consequences; and provides cessation strategies for those already using drugs. Finally, it encourages young people to use positive decision-making skills, to continue to discuss drug misuse with peers, and to commit to not using drugs.

Reading Recovery

readingrecovery.ioe.ac.uk/

Reading Recovery is an early intervention tutoring programme for pupils aged 6 and 7 who are experiencing difficulty in their beginning reading instruction. The programme provides the lowest achieving readers (lowest 20 per cent) with supplemental tutoring in addition to their normal reading classes. Pupils participating in Reading Recovery receive daily 30-minute one-to-one lessons for 12–20 weeks with a specially trained teacher. The lessons include assessment, reading known stories, reading a story that was read once the day before, writing a story, working with a cut-up sentence, and reading a new book. Reading recovery is a key plank of 'Every Child a Reader'.

Ready, Set, Leap!

www.leapfrog.com/school/

Ready, Set, Leap! is a pre-school curriculum that focuses on early reading skills, such as phonemic awareness, letter knowledge and letter–sound correspondence, using multi-sensory technology that incorporates touch, sight and sound. Teachers may adopt either a theme-based or a literature based teaching approach, and for each approach, the curriculum provides lesson plans, learning objectives and assessment tools.

Safe Dates

www.hazelden.org/web/public/safedates.page

Safe Dates is designed to stop or prevent the initiation of emotional, physical and sexual abuse on dates or between individuals involved in a dating relationship. Intended for male and female eighth- and ninth-grade students, the goals of the programme include: changing adolescent dating violence and gender-role norms; improving peer help-giving and dating conflict-resolution skills; promoting victim and perpetrator beliefs in the need for help and seeking help through the community resources that provide it; and decreasing dating abuse victimisation and perpetration. Safe Dates consists of five components: a nine-session curriculum, a play script, a poster contest, parent materials, and a teacher training outline.

Safer Choices

www.advocatesforyouth.org/index.php?option=com_content&task=view&id=1128&I

temid=177

Safer Choices is a two-year, school-based, HIV/STI and teen pregnancy prevention programme with the primary goal of reducing unprotected sexual intercourse by encouraging abstinence and, among students who report having sex, encouraging condom use. Based on social cognitive theory, social influences theory, and models of social change, Safer Choices is a high school programme that includes: a school health protection council; the curriculum; peer club or team to sponsor school-wide activities; parenting education; and links between schools and community based services. In some schools, programmes also incorporate an HIV-positive speaker. The programme is delivered in 20 sequential sessions. Parents receive a newsletter and participate in some student–parent homework assignments. School–community links centre on activities to enhance students' familiarity with and access to support services in the community. Each year of the programme, schools implement activities across all five components.

Start Taking Alcohol Risks Seriously (STARS) for Families

wch.uhs.wisc.edu/13-Eval/Tools/Resources/Model%20Programs/STARs.pdf

Start Taking Alcohol Risks Seriously (STARS) for Families is a health promotion programme for preventing alcohol use among at-risk middle and junior high school young people (11–14

years old). The goal of STARS for Families is to have all young people postpone alcohol use until adulthood. STARS for Families matches media-related, interpersonal and environmental prevention strategies to each child's specific stages of alcohol specific risk and protective factors. This innovative programme has been shown to result in avoidance of, or reductions in, alcohol use among participating young people.

Success for all (including Curiosity Corner)

www.successforall.net/index.htm

www.successforall.org.uk/

Success for All is a school reform programme that focuses on promoting early reading success among educationally at-risk students. It was developed by Robert Slavin, Nancy Madden and colleagues at the request of the Baltimore City Public School System, and was piloted in one Baltimore elementary school during the 1987–88 school year. The programme is currently working with over 200 schools in the UK.

Appendix C

Questionnaire and responses from clients of the Youth Offending Team, and participants at Hornstars

1. Which community do you feel part of (if any)? *(Tick all that apply)*

   [22] School community   [15] Religious community

   [10] Ethnic community   [19] Neighbourhood or ward

   [9] None   [3] Online community

   [4] Other (please specify below)

2. If none, why? *(Tick all that apply)*

   [10]   I'm not interested in anyone else

   [1]   No-one is interested in me

   [4]   Other (please specify below):

   - "Just me"
   - "Don't treat me right"

3. In your opinion, what leads young people into disruptive behaviour or offend-ing?

Friends or people around them	10
Drugs	4
Money/no job	20
Lack of things to do/boredom	19
Environment/neighbourhood/streets	2
Upbringing/home life/lack of love	11
Being excluded from school	1
Getting guns	1
Stress	1
Anger	1
Provoked by police	2
Bullying	1
Government	1
Negative things	1
No role models	3
Rude people	1
Lack of resources	1

4. Do you feel like school staff try to help you do well at school? (If you have already left school, answer how you felt before you left.) *(Tick one answer only)*

   [41]   Definitely   56%

   [17]   Not sure   23%

   [15]   Definitely not 21%

5. What (if anything) could school staff do better to help you do well at school?

Know how to talk to/listen to/deal with kids	8
Not persecute, just exclude/discipline immediately	4
Monitor kids out of school	1
Help with schoolwork, especially those who need it	6
Try to push kids more	2
Prepare them for the real world	1
Get jobs	1
Fun learning	1
Counselling	1

6. Other than teachers, from which of these workers have you received advice or support (if any)? *(Tick all that apply)*

[31] Connexions Personal Advisers   [5] Housing officers

[15] Social workers   [19] Brent Youth Service (youth workers)

[2] Mental Health workers   [ ] Common Assessment Framework (CAF) workers

[36] Youth Offending Service   [10] None

[2] Other (please specify below)

- "Foster carers"
- "Family"

7. Overall, how helpful has this advice and support been? *(Tick one answer only)*

[19]   Very helpful   28%

[31]   Helpful   46%

[9]   Neither helpful nor unhelpful 13%

[6]   Unhelpful   9%

[3]   Very unhelpful   4%

8. If it was unhelpful, why not?

Not needed	1
No-one helped me	3
There is no work	1

9. If you need support or advice from someone other than friends and family, do you know where to get it? *(Tick one answer only)*

[56]   Yes 81%

[13]   No 19%

10. Have you ever needed any of the following services, but couldn't access them? *(Tick all that apply)*

[5] Counselling or therapy   [8] Leisure activities

[11] Mentoring   [0] Help with drugs

[10] Help with school work   [1] Sexual health

[16] Careers or job advice   [ ] Bereavement

[5] Life and social skills   [9] Housing

[2] Conflict with family   [24] No, never needed any services

[1] Other (please specify below)

11. As far as you know, do your parents or carers have friends or family they can turn to for help when they need it?

[41]   Yes   61%

[9]   No   13%

[17]   Don't know 25%

12. What are your ambitions for the future?

Specific jobs	23
Wealth	3
Job, house	7
Education options	12
Don't know	6
Nothing	1
Do well	2
Be left alone	1

13. Are you confident of achieving your ambitions?

[61]   Yes   94%

[4]   No   6%

14. If not, why not?

Don't know	1
Haven't achieved goals in school, but want to work harder to achieve them	1
No jobs	1

(NB – The following questions were asked in error to 19 respondents instead of questions 1 and 2 above.)

1. Do you feel part of your local community?

[13] Yes   68%

[6] No   32%

2. If not, why not? *(Tick all that apply)*

       [2]   I'm not interested in my community
       [2]   My community isn't interested in me
       [4]   Other (please specify below):

- "Haven't heard about my community"
- "Not much involvement"
- "Community is rubbish
- "No-one will employ me"

Appendix D

Discussion with Care in Action on 14 March 2011

1. What leads young people to disruptive behaviour or offending?
   - Boredom – nothing to do
   - Lack of money
   - Peer pressure
   - Poverty whilst growing up
   - Bad parenting
   - Divorce
   - Lack of resources for young people in the country
     o Play areas
     o Youth clubs
   - Crime is FREE
   - Families on benefits because they suffer the most, which can lead to crime because they have limited support and income

2. What can schools and teachers do better to help young people avoid disruptive behaviour and offending?
   - Provide counselling
   - To LISTEN (for teachers/principal to listen)
   - Mentoring – intervention classes in all schools
   - Talk to the YP causing the disruptive behaviour before kicking them out of school
   - Teachers that can explain the work rather than order around
   - The consistency of supply teachers
   - Treat all pupils the same
   - Students/teachers not to say "Speak English" if they have another accent. Raising awareness in this area

3. How can we help young people who may offend to feel included and involved in society?
   - Specific youth groups for young offenders in different areas, by no means to mix areas due to postcode wars
   - Get them to spend a day with the prisoners
   - Send them to team building courses/days like boot camp or paint balling

4. What are the barriers that stop young people at risk from fulfilling their potential?
   - Stereotypical comments
   - In some cases racial barriers
   - Poverty
   - School life experience
   - Drugs and weed smoking

5. What is needed to help them overcome those barriers?
   - Better CAMHS service – current place looks like a prison, move to somewhere else
   - Better lighting and police patrol
   - More black teachers in secondary schools

- Put the YP causing trouble/offending in a secure unit for three to four weeks
- Brent Council needs more money
- Nothing can be done about the drugs
- Decent resources for education e.g. Laptops

6. Are young people aware of services that could help prevent them offending, and able to access them?
    - Probation service – yes they are aware of this service and it is accessible
    - Right track – not aware of this service unless they have been expelled from school
    - Youth forums that are constructive like CIA
    - Advertise services on T.V and the radio (BANG radio because YP listen to this station)
    - Police to monitor YP who are disruptive

Appendix E

Notes from Brent Youth Matters 2 Forum
1st March 2011

1. *What leads young people to disruptive behaviour or offending?*

Causes and factors suggested by the group included:

- Peer pressure, and lacking the confidence to resist this pressure and be different
- Problems in the family, eg violence, drug and alcohol abuse
- Negative influences at home, and other family problems
- Not receiving sufficient attention (eg from teachers and adults), leading to seeking attention - even if the wrong type of attention
- Boredom, and not having enough to do with their free time, especially activities that are affordable
- Disorders
- Bullying which goes unaddressed, and taking matters into their own hands
- The influence of gangs or the "ghetto" mentality (both in their everyday life and in the media), which can glamorise crime
- Not achieving success at school – leads to disillusionment with education and removes incentive to further themselves in constructive ways
- Poverty, concern about prospects for the future, and desire to make money quickly
- Drug use

2. *What can schools and teachers do better to help young people avoid disruptive behaviour and offending?*

- "Enrichment" activities that are apart from normal school classes, such as art, outings, retreats and camps, or special classes or courses (eg vocational) – things that young people want to do. The reason is that these can encourage and engage those young people who find traditional schoolwork difficult, preventing the frustration which can lead to disengagement and disruptive behaviour
- There should be ways of making these accessible to young people from families which struggle financially, or young people who don't have financial independence
- Therapy, eg anger management
- Breaking up groups which misbehave and cause disruption
- One-to-one teaching, to provide pupils with the attention that they need, and also help them to speak up and communicate in a way that many don't feel comfortable doing in front of a full class. This might require more resources for schools, eg teaching assistants
- Attention for the victims of bullying
- Teachers being better educated in the emotional and psychological development of children, and therefore better equipped to deal effectively with them
- Tackling issues earlier than is currently done, eg in Year 7 or 8 rather than Year 10
- Mentoring, to help young people decide on aspirations and goals, for outside of school as well as in school

- Where there are already useful services or opportunities available to young people outside of school, then schools should be more proactive in bringing these to the attention of pupils, eg showcasing them during a school day. Simply informing pupils that a service exists does little to encourage them to take it up, even if it is one from which they could benefit
- Encourage young people to see first-hand the potential benefits and rewards of activities which are constructive (eg volunteering), and to open their minds to alternatives to their usual environment. Even where this is done, it is usually in 6th Form, for the purpose of getting into university. Instead, it should be done at a younger age

3. *How can we help young people at risk feel part of mainstream society?*

- Through volunteer work which gives them something constructive to do, and a break in what could be a negative routine
- Being made to feel "wanted"
- Mentoring of young offenders by reformed older offenders
- Helping make them suitable for employment, eg learning skills and CV-writing courses; and assistance for young offenders to get a job who are old enough and have completed their sentence
- Schools genuinely trying to help new pupils who they perceive as being likely behave disruptively, by placing them in classes where they are surrounded by peers who set a positive example
- Organised activities which help them mix with other young people, of different ages, and similarly enable them to be surrounded by peers setting a good example, with whom who they can bond
- Activities which particularly suit their interests and needs
- Enable them to feel that their opinions are listened to
- Involve them in organising major events, and give them credit for their role
- Give them incentives to attend or participate in activities

4. *What is needed to help young people at risk fulfil their potential (particularly in relation to education and employment)?*

- Schools should "glorify" and emphasise the value of achieving at school, going to college, and working – much more than they do at the moment
- Free opportunities and work experience opportunities, and incentives
- Direct young people towards opportunities which truly suit their aptitudes and interests
- Awards for achievements
- Assess young people's potential, and help them plot a path that they can complete, starting at a younger age than is presently the case
- The service from Connexions should be improved: at present, they simply provide some literature on a particular job that is identified, when what is needed is more interaction and advice

5. *What are the barriers that stop them from achieving this?*

- Stress and pressure brought on by bullying

- A lack of flexibility in choosing GCSE subjects can mean that pupils are prevented from studying subjects that they are interested in (due to timetable clashes), which will naturally diminish engagement in studying
- School staff and teachers can "write off" young people that they perceive to be not worth helping to focus on others, when such young people could achieve more if given the right support by staff who genuinely want to help them
- Lack of knowledge about the opportunities to work, gain experience and skills, etc, which are actually available – these need to be promoted better
- Low self-esteem, and a lack of motivation and encouragement from others
- Bad influences in young people's lives (eg friends) discouraging them from pursuing and accessing opportunities
- Low income
- Schools not encouraging young people to take their education seriously

6. *Are young people able to access services that can help prevent them offending?*

- Outreach is key for services, as young people don't know what is out there to help them, and who they can go and speak to, eg Connexions
- The B My Voice website, which is one place where young people should be able to find out about services for them, is not widely used

Appendix F

**Notes from Brent Youth Parliament session
19th March 2011**

(Responses by age group)

1. *What leads young people to disruptive behaviour or offending?*

10-11 years

- Perception of "coolness"
- Initiation into gangs
- Desire for respect
- Problems at home
- Anger
- Desire for help
- Desire for material things, eg phone
- Exposure to material not appropriate for their age, eg games with guns
- Jealousy
- Area
- The need for security and protection
- Desire for excitement
- Bad role models

12-13 years

- Peer pressure
- Bullies
- Family and issues at home
- Inability to manage anger
- Lack of awareness of consequences
- Having nothing better to do

14-15 years

- Lack of access to
    - youth clubs
    - Motivation and positive role models
    - Counselling

16+ years

- Trouble in household/family problems
- Peer pressure
- Not having anywhere to go in the evenings
- Not living in a nuclear family and lack of role models
- Lack of discipline

2. What can schools and teachers do better to help young people avoid disruptive behaviour and offending?

10-11 years

- Provide counselling
- Provide places to allow young people to relieve anger and express themselves, with youth workers
- Provide cool clubs eg boxing
- Provide community services for minor offenders
- Arrange talks by those affected by offending, eg victims
- Enable more pupils to have access to The Place 2Be

12-13 years

- Be approachable (similar to form tutors and pastoral heads)
- Provide sessions to for young people to talk about problems
- Give more help and support
- Provide mentoring

15-16 years

- Better training for teachers
- Listen
- Allow more interactive lessons
- Achieve greater equality

16+ years

- Lead focus groups within schools
- Provide peer mentoring
- Provide support for students, eg on-site psychologists
- Work with role models from the community
- Devote more attention to those pupils who need it
- Praise pupils except those with disruptive behaviour

3. How can we help young people who may offend to feel included and involved in society?

10-11 years

- Provide clubs young people want, which foster responsibility as they progress, eg and enable them to feel valued. Examples include boxing, karate, kayaking, and fencing
- Advertising Brent Youth Matters 2 via B My Voice and The Place 2Be

12-13 years

- Provide more youth opportunities, such as Brent Youth Parliament and youth forums

- Advertise these in schools
- Provide activities such as sports clubs and talent shows
- Provide clubs in schools

15-16 years

- Abolish criminal records for young offenders
- Achieve greater equality
- Greater awareness and warnings of the consequences
- Enable police officers to interact with youths

16+ years

- Provide and promote:
  - Local youth clubs which are within easy reach
  - Mentors before young people become offenders
  - Events to exhibit talent
  - Open workshops

4. What are the barriers that stop young people at risk from fulfilling their potential?

10-11 years

- The area they live and go to school in
- Parents not encouraging children
- Lack of confidence (due to SATs)

12-13 years

- Lack of confidence and self-esteem
- Struggling in education, leads to rejection of it
- Peer pressure
- Family problems
- Stereotypes

15-16 years

- Labelling them as criminals
- Pressure in education
- Influence of and images in the media

16+ years

- Fear
- Lack of self-belief, motivation and direction
- Insufficient information from schools
- Inadequate careers advice, including insufficient variety

5. What is needed to help young people overcome those barriers?

10-11 years

- Advertising relevant provision through schools, B My Voice and The Place 2Be
- Share success stories so they have role models
- Parent-teacher meetings to emphasise the importance of encouraging children
- Provision of non-academic learning, and teachers encouraging children to take up opportunities

12-13 years

- Support and encouragement, from family, friends, teachers etc
- Looking at domestic issues
- Education should appeal more, and allow balance – eg one-to-one tuition and provision for vocational qualifications like engineering
- Showing them the consequences of committing crimes

15-16 years

- Less prejudice

16+ years

- Communication from those [whom] young people can relate to
- Survey of young people's ambitions
- Breaking down information for young people

6. Are young people aware of services that could help prevent them offending, and able to access them?

12-13 years

- The following methods should be employed to maximise awareness:
  - advertising in schools
  - discussing in personal, social, health and economic education classes and pastoral time
  - advertising on social networks, eg Facebook and Twitter, and on local radio, eg Brent Youth Radio
  - Communication with parents and youth workers to gain trust
  - Recruit more diverse youth workers and teachers, to enable learning of more vocational subjects, eg engineering

15-16 years

- No, due to a lack of advertising. The following methods should be employed:
  - YouTube
  - Facebook
  - workshops

16+ years

- They are not aware and not interested
- Youth clubs not are not promoted enough