CHILDREN AND YOUNG PEOPLE’S PROGRAMME:
INTERIM EVALUATION REPORT

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Allister Butler, Sheena Asthana and Joyce Halliday

Department of Social Policy and Social Work,
University of Plymouth,
Drake Circus,
Plymouth, PL4 8AA.
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Appendix 1
CHILDREN AND YOUNG PEOPLE’S PROGRAMME: INTERIM EVALUATION REPORT

EXECUTIVE SUMMARY
This interim report on the Children and Young People’s Programme (CYPP) of Cornwall and Isles of Scilly Health Action Zone (CiOS HAZ) is, following an introduction, structured around eight broad themes and focuses down in scale from the wider contextual factors that influence CYPP to an evaluation of some of the Programme’s key processes and outcomes.

Introduction (section 1)
- Decisions concerning the structure and content of CYPP were tightly managed by the Children’s Services Planning Group (CSPG) at its outset. Some of the initiatives with the most challenging aims were earmarked for support during this phase, perhaps because HAZ, with its early emphasis on innovation, provided an opportunity to support ideas that carried some risk.
- In response to perceptions that CYPP was driven by the main statutory agencies, efforts were subsequently made to encourage funding applications from smaller partnerships. As a result, CYPP is now extremely diverse, projects ranging in type of activity, level of funding client group and geographical scope.
- Although all ages of children and young people are represented, there is a relative lack of project activity focusing on very young children. This has limited the opportunity for establishing stronger links with other local initiatives that target young children such as Sure Start. In light of growing evidence about the role of early years intervention in breaking cycles of disadvantage, there is scope for more emphasis on this age group in an initiative that is designed to tackle health inequalities. HAZ representation in the recently established Children’s Fund goes some way towards addressing this.

Contextual Factors (section 2)
- There have been national changes in the role envisaged for HAZs. Following funding cuts, the future of HAZs is now uncertain. This can work against the building up of sustainable local initiatives. Against this, the announcement of Local Strategic Partnerships gives HAZ a meaningful role as a testing ground for developing partnership working.
- In addition to national HAZ policy, many key partner organisations have experienced changes in political steer. Some (e.g. the 1999 Health Act) are supportive of HAZ activity. In other cases, political turbulence is a potentially destabilising force. For example, the announcement of new strategic health authorities as already led to changes in personnel who have played an important role in developing networks with partner organisations.

Strategic and Managerial Support (section 3)
- Individual projects have perceived shortcomings in strategic and managerial support suggesting that a multi-agency CYPP steering committee with access to executive decision-making powers could have been created from the Programme’s outset. CSPG is now reviewing its structure with a view to strengthening support of project level activity. The difficulties of achieving ‘joined-up’ strategic support reflect part of a broader problem of how inter-agency initiatives can fit into bureaucratic frameworks that are largely structured around individual agencies.
- Support for CYPP projects has also been provided by the HAZ-funded Programme Lead and Programme Evaluator. They have contributed significantly to the development of a Programme identity and to the establishment of networks across CYPP.
Measuring Progress and Understanding Change (section 4)

- Individual CYPP projects have demonstrated considerable willingness and ability to engage in formative evaluation and the quality of project planning is high. This not only increases the likelihood of success. It may have increased the confidence and ability of individual projects to communicate about their activities and experiences with others.
- As a result of service planning and review, projects have begun to break down barriers to the sharing of information and to develop consensus between various statutory and voluntary agencies. The establishment of multi-agency baseline information and the extensive consultation that has taken place are good achievements for the Programme.
- Opportunities to network with other projects within the Programme have supported the HAZ commitment to fostering reflection and learning.

Inter-agency Collaboration and Partnership Working (section 5)

- Considerable progress has been made in defining common goals and evolving systems for joint consultation and planning at the strategic level. Problems remain, however, in translating objectives into concrete reality. Concerns about loss of sovereignty and a reluctance to assume control of particular functions if this implies ownership and financial commitment beyond the lifetime of HAZ may be significant.
- Some of the obstacles to effecting the transition from strategic planning to joint commissioning and service provision lie within the tier of operational management. Systems for sharing client information are poorly developed, financial accounting systems differ and concerns remain about breaking confidentiality protocols.
- Better vertical communication between strategic and project levels is evolving. However, projects may not fully appreciate the difficulties of securing decisions about critical implementation issues in complex, hierarchical public sector organisations.
- At project level, significant progress has been made in building partnerships within specific service areas and across the Programme. This owes much to the ‘HAZ way of thinking’ as projects have been given scope to determine their own ways of achieving objectives.

Community and User Involvement (section 6)

- Community involvement has been built into the goal statements and evaluation plans of all CYPP projects. However, community/user involvement has a more obvious role to play in some projects than in others. In those projects concerned with improving the way in which statutory services are delivered, community involvement tends to be limited to a consultative role. Other projects have offered greater scope for involvement and have captured considerable enthusiasm and commitment.
- Problems of gaining access to affordable transport have been raised as a potential obstacle to achieving the involvement of young people. This may result in a social bias in user representation.

Supporting Innovation and Risk (section 7)

- CYPP projects have been given considerable scope to develop services that are different, creative and innovative. However, it is important to consider how genuinely innovative approaches (that are unlikely to be mainstreamed as a result of government guidance) can be maintained when the legitimising presence of HAZ will no longer exist.

Developing Cost-Effective Services (section 8)

- Cost-effectiveness has been identified as a potential benefit by those projects that are seeking to develop more streamlined provision. There are cases, however, where cost savings in the long-term can only be achieved by significant investment at the outset.
Systems need to be developed in which cost-effectiveness issues for short-term projects can be considered within longer funding cycles.

- As a part of this, there is a case for capturing how the development of human resources within HAZ represents a significant input to service developments. Many project leads have evolved knowledge, skills and contacts that could provide a firm springboard from which to take developments forward. This should be recognised as a ‘resource’ in itself.

Mainstreaming CYPP Services (section 9)

- In those areas where HAZ has been at the forefront of developments that are being taken forward nationally, key statutory agencies are poised to mainstream projects. However, sustainability is about more than just financial responsibility and steps need to be taken to protect the collaborative investment that has been made to joint-agency ventures.

- Sustainability is clearly an issue for projects that do not fit easily into new government guidance. Concerns have been expressed that there does not appear to be a structure and clearly defined criteria in place to mainstream projects. There are also reservations about raising the expectations of young people without being able to deliver in the longer term.

- There are elements of CYPP that transcend the boundaries of individual projects that can be taken forward into future service developments. These include the progress that has been made in evolving structures of vertical communication between strategic decision-makers and individual projects; the gradual removal of barriers to the sharing of information; the growing cultural ethos of building consensus and working in partnership between agencies; and the promotion of user involvement.
CHILDREN AND YOUNG PEOPLE’S PROGRAMME: INTERIM EVALUATION REPORT

1. Introduction

1.1. Background to the Children and Young People’s Programme

The Children and Young People’s Programme (CYPP) is one of five work programmes within Cornwall and Isles of Scilly Health Action Zone (CiOS HAZ). In common with the Eldercare Programme considerable thought was given to the structure and content of this Programme as a preliminary to applying for HAZ status, with the Children’s Services Planning Group (CSPG), a pre-existing multi-agency group charged with statutory responsibility for the Children’s Services Plan, playing a strategic role from the outset. This pre-planning meant that a large proportion of the Programme’s money was able to be allocated right at the outset in a decision-making process that was tightly managed; though representative of the main statutory agencies involved in the provision of children’s services. Wider consultation around the Programme’s design did take place through a Stakeholder Workshop in which participants agreed what were to become the five main objectives of the CYPP. Nevertheless, key actors within HAZ were aware of an early perception that the Programme was driven by the main statutory agencies. In response to this perception, efforts were made to achieve wider participation through a second Stakeholder Workshop early in the life of HAZ (September 1999) and a smaller, second funding round which encouraged funding applications from smaller partnerships and aimed to capitalise on initiatives that had emerged from the first stakeholder event.

1.2. Overview of Programme Activities

Perhaps as a result of the way in which this process has evolved, CYPP is extremely diverse, projects ranging in type of activity, level of funding, client group, and geographical scope (see Appendix 1). Some of the larger CYPP projects (e.g. the Joint Agency Strategy, Designated Services for Young People, Inter-agency Support Unit for Young People, Specialised Equipment for Children with Complex Needs) are concerned with service reconfiguration and planning, much project activity being devoted to conducting reviews of existing service arrangements, consulting with stakeholders and developing plans for more streamlined provision. Others (e.g. Young People Cornwall, RAPIDLY, Young Carers) are more directly involved in service delivery and implementation but range in their level of funding from over £100,000 dedicated to Scallywags to under £3,000 for the Breakfast Bar. In addition to formal projects, CYPP also funds a series of fellowships (e.g. ACHÉ, Nutrition in Schools) in which front-line staff are seconded on a part-time basis to support innovative activities. As Health Action Zones have been provided with modest resources and many have chosen to focus more on developing the infrastructure for service delivery rather than delivery per se, the range of activities supported by CYPP is impressive.

CYPP projects also vary with regard to targeted client groups, some focusing primarily on youth, others on younger children, whilst others target very specific populations (e.g. children with complex needs). Despite representation across all ages of children and young people, there is a relative lack of project activity focusing on very young (e.g. pre-school and primary school) children. This has limited the opportunity of establishing stronger links with other local initiatives targeted at children, such as Sure Start. In light of growing evidence about the role of early years intervention in breaking cycles of disadvantage, there is scope for more emphasis on this age group in an initiative that is designed to tackle health inequalities. The recently established Children’s Fund (an initiative that targets children aged 5 to 13 who are at risk of social exclusion) provides an opportunity to this end and, encouragingly, HAZ was invited to nominate a representative (in addition to the Health Authority representative)
to the Children’s Fund partnership board. CYPP projects have also been involved in consultations about the use of the Children’s Fund.

Finally, CYPP Projects are diverse with regard to geographical scope. Some, particularly the large service planning projects, have been countywide from the outset. Others such as Scallywags, began in more local contexts but are now rolling out project activities to have an impact on a countywide level. Young People Cornwall comprises both local (TRIBE, Zebedees) and countywide (Young Fathers, Health Our Voice) components, whilst other projects (e.g. Newquay One-Stop Shop) are geographically specific.

1.3. Scope of this Report

The diversity of projects funded by CYPP demonstrates the extent to which early fears of status quo due to statutory control have proved unfounded. There has been a clear willingness to fund projects that aim to ‘do things differently’. Indeed, some of the initiatives with the most challenging aims were earmarked for support in the earliest phase of the Programme, perhaps because HAZ, with its early emphasis on innovation, was seen as an opportunity to support ideas that had been on the table for sometime but which carried some risk. The complex nature of CYPP nevertheless makes the task of evaluating the Programme less than straightforward. Thus, whilst the following report attempts to highlight generic themes, some of our observations will inevitably have greater salience for some projects than for others.

The report is structured around 8 broad themes, and focuses down in scale from the wider contextual factors that influence CYPP to an evaluation of some of the Programme’s key processes and outcomes. It is important to emphasise that this is an interim report and that the issues of greatest significance for the CYPP at the end of the Programme may take a different form to those that we highlight now.

2. Contextual Factors

Within the short life span of CIoS HAZ, there has already been significant political turbulence. The initial emphasis on the need for HAZs to harness local energy, promote innovation and accept risk-taking has given way to an emphasis on the need to achieve national priorities. The requirement to show ‘early wins’ can counterbalance any impetus to take risks. Funding has been cut (although it is important to note that, compared to other CIoS HAZ Programmes, CYPP has been relatively protected from cuts because its money was early allocated). The future of HAZ is uncertain but seems likely to be closely aligned to the new initiative of Local Strategic Partnerships. On the one hand, the announcement of LSPs places local organisations under even greater pressure to institutionalise partnership working and stakeholder involvement, giving the HAZ a meaningful role as a testing ground and springboard for developing new arrangements. On the other, the uncertainties created by national government, together with the top-down, political imperative for partnership working can conflict with the building up of (arguably more) sustainable relationships from the bottom-up.

National HAZ policy is not the only area in which changes in political steers impact on the ability of the local HAZ to nurture organisational change. Whilst the rhetoric of partnership working encourages managers of local organisations to work horizontally with their public, private and voluntary counterparts, it sometimes overlooks the fact that they must also relate vertically within their own institutions. Like the HAZ itself, many of the key partner organisations have had to respond to changes in political steer. Sometimes this has been supportive of HAZ activity. For example, the statutory requirement that Children’s Service Plans are produced on a joint-agency basis encourages Social Services to collaborate strategically in this area. The introduction by the 1999 Health Act of the opportunity for health authorities and local authorities to share budgets has the potential to overcome a
fundamental barrier to joint working. Similarly, the publication in March 2001 of the Department of Health’s guidelines on integrated community equipment services provides extra weight to local attempts to achieve better streamlining between health, social services and education departments. In other cases, however, political turbulence is a potentially destabilising force. For example, the Health Authority ultimately holds accountability for the success or failure of the Health Action Zone. Yet, this tier of the health service will no longer be in existence from April 2002. This has already led to changes in personnel who have played an important role in developing networks with and the trust of partner organisations.

3. Strategic and Managerial Support

3.1. Strategic level support

Support for CYPP projects is provided on both a strategic and programme level. The countywide Children’s Services Planning Group (CSPG) played a pivotal role in shaping the original focus of the Programme and it was perhaps envisaged that this body would continue to provide strategic direction and support. However, the CSPG agenda has become increasingly complex and diverse. As a result, HAZ is just one of a number of initiatives (which include the Education Action Zone, Sure Start, On Track and Connexions) that the Group considers. It is thus hardly surprising that both Project leads and members of the CSPG itself have expressed reservations about the ability of this body to provide meaningful support for CYPP projects.

In response to perceived limitations of the CSPG, a CYPP steering group has gradually emerged in the course of the HAZ initiative. At first, the remit of this four member group (representing the Health Authority, Education Department and CHT and chaired by the Deputy Director of Social Services) was to offer support and guidance to just two HAZ projects: the Joint Agency Strategy and the Inter-Agency Child and Young Person’s Support Unit. With time, this remit expanded to include Specialised Equipment for Children with Complex Needs. Insofar as the more complex projects have been accountable to and supported by this group, something approaching a Programme-level managerial layer has been gradually evolving. However, this body does not constitute a formal steering group for the CYP Programme as a whole.

Whilst the development of the CYPP steering group demonstrates flexibility and responsiveness to the needs of key CYPP projects, the fact that the steering group has evolved in a rather ad-hoc manner has led to a perception that strategic decision-makers have tended to be reactive rather than proactive when it comes to actual implementation. Doubts have been expressed by project leads about whether the group is sufficiently representative of all of the relevant agencies and changes in what is already a small membership raise concerns about continuity of support. The steering group lacks the authority to make formal decisions about the key inter-agency issues in service reconfiguration (e.g. financial commitment, pooled budgets, shared records, and shared service delivery). This has perhaps not been fully understood by project leads who have approached the group expecting to be given a clearer mandate or to have their concerns referred to the countywide CSPG. At the same time, members of the group may be too senior to offer advice about operational issues.

The perception that there is not a clearly defined pathway for individual projects to access a multi-agency management forum has been a source of real frustration which suggests that a representative steering committee with meaningful access to executive decision-making powers should have been created from the outset of the CYPP. However, from adversity has come strength insofar as project leads themselves have started to play a more proactive role in influencing strategic level decision-making. CSPG has also begun to review its structure and remit with a view to strengthening support of project level activity. To this end, smaller task orientated groups, some geographically focused are emerging. This is a very positive
development given the frustrations expressed by individual projects. Indeed, there is now a sense that the terms of reference are changing from a tendency of strategic managers to inform and commission the middle and operational levels to ‘perform tasks’ to a more informed and democratic process in which input from the project level in programme design, planning and decision making is encouraged and respected.

3.2. Programme level support

In addition to the two multi-agency groups, support for CYPP projects has been provided by HAZ itself, through the appointment of a programme lead and the funding, as part of the overall CIoS HAZ evaluation, of an evaluator dedicated to CYPP. Given the size of the Programme and its complexity, it should perhaps have been supported by a full-time programme manager rather than a part-time lead whose remit has been more narrowly focused on performance management. However, the Evaluator has also functioned as a Programme-level resource, facilitating projects in their design and implementation more than was at first envisaged. The Programme Lead and Evaluator were appointed to their posts a good year after CYPP was first initiated. Slippage in the appointment of individual project leads also led to some delays in the development of a programme identity. As the Programme has developed, however, there has been significant progress in this respect.

This is partly an outcome of the establishment of quarterly reportage meetings in which CYPP projects have been brought together by the Programme Lead and Evaluator to discuss emergent themes relating to service planning and delivery and to identify common problem-solving strategies. Having previously worked in isolation, project leads have begun to develop networking relationships and groups of projects are emerging around common focus areas (e.g. children with complex needs; youth-related projects; joint agency collaboration). Many have proposed that the building of networks has been a critical factor in the successful implementation of project activities and the achievement of interim goals. The transition from working in isolation to networking is an important ‘early win’ for the Programme and one that demonstrates the difference that the HAZ has made.

Against this, programme-level managerial infrastructure has its shortcomings. There is an expectation from HAZ that individual projects are managed by the main partner organisation (although, in the case of the large multi-agency projects, HAZ has facilitated the appointment of a line manager). From the point of view of many projects themselves, however, lines of managerial and financial accountability are unclear. Apart from providing very general information on project progress, leads are given considerable autonomy in the running of their projects. At the same time, they are not the automatic recipients of project budget statements and they have limited access to the strategic-level bodies who may ultimately determine whether their activities are feasible or not. The length of time between the original funding bids and the subsequent appointment of project leads also had implications for project- and programme level coherence. In many cases, the person who wrote the initial bid has not maintained contact with the project during its implementation. Until the Programme lead was appointed, this left a managerial vacuum for many projects struggling to get off the ground.

4. Measuring Progress and Understanding Change

4.1. The development of formative evaluation

One of the hallmarks of the HAZ is its emphasis on being a learning organisation. CIoS HAZ has dedicated significant resources to the evaluation of its activities. It has also supported an innovative approach to evaluation, in which a key function of the evaluation staff is to act in a facilitative capacity. The HAZ Team has repeatedly reinforced the need to learn from mistakes as well as successes. Despite this, it is taking time to counter the perception that the Team is not very receptive to failure. Front-line staff are fully aware of political
expectations that Health Action Zones will demonstrate ‘early wins’ (usually through crude
service output measures). The pressure placed on the HAZ Team by national and regional
managers inevitably filters down to the project level leading to perceptions that monitoring
and evaluation are synonymous with performance monitoring.

In fact, individual CYPP projects have demonstrated considerable willingness and ability to
engage in a wider range of evaluation activities, revisiting their aims, activities and
assumption bases in order to identify what is realistic and achievable and what strategies
need to be further improved. Building formative evaluation capacity into everyday practice
has enabled project leads to identify problem areas and make necessary modifications to
service planning prior to delivery, an achievement which in itself is likely to increase the
success of attempts to effect service change. Efforts have also been made to develop
monitoring assessment tools that can capture data on a regular basis and thus feed into
formal performance monitoring systems.

4.2. The establishment of baseline information

A second key achievement relating to evaluation has been the establishment by projects of
good baseline information. One of the earliest lessons to emerge from CYPP was the role
played by inadequate information systems in delaying the planning and implementation of
projects. Existing data from various statutory agencies were found to be poorly recorded and
subject to duplication (and triplication). Without reliable information about, for example,
which agency is providing what equipment to which client, the planning of more streamlined
service provision was hindered. Thus, as part of a preliminary review of service
arrangements, many projects have conducted comprehensive assessments of existing
information databases. As a result of these efforts, the CYPP has access to up-to-date multi-
agency baseline information which it can use to readily assess and track project progress. A
secondary benefit is that the information has been fed back into various agencies (Health,
Education, Social Services, and Housing) and has encouraged better appreciation of the
need for more robust information systems.

4.3. Consultation

In addition to the extensive collection of baseline information, one successful outcome of
many of the CYPP projects is the extensive and collaborative manner in which they have
consulted with stakeholders, both in the statutory and voluntary sectors. For example, the
consultation exercise implemented by the Specialised Equipment Provision for Children with
Complex Needs Project enabled providers not only to articulate concerns but also to obtain a
consensus across agencies. The Joint Agency Strategy Project has similarly involved
extensive consultation with executive decision-makers as well as operational managers,
service practitioners and service users. Because effective partnership building and
community involvement have been built into evaluation plans and goal statements, there are
many examples of good practice in terms of collaborative consultation with stakeholders.
Indeed, there is now a sense that, due to the comprehensive consultation process adopted
by many projects, the reference point has changed from statutory-specific statements that
relate to bureaucratic obligations and tend to preserve the status quo to a more inclusive,
participatory and shared approach to joint agency protocols.

4.4. Quarterly proforma meetings

Whilst much formative evaluation has taken place on an individual project basis, quarterly
proforma reportage structures have been established by the CYPP in which projects are
brought around the table to share their experiences of project implementation. As suggested
in Section 3.2. this has provided valuable opportunities for projects to build networks, identify
common problems and develop collective solutions. Project leads have proposed that the
meetings have revealed how much could be gained from peers in terms of experience,
expertise and partnership opportunities. In this sense, the quarterly meetings appear to support the HAZ commitment to fostering reflection and learning.

4.5. Evaluating the evaluators

The above observations imply that, as part of their facilitative role, evaluation staff have been influential in fostering opportunities for learning, developing better ways of doing things and for networking. However, the evaluators have a complex remit and their close personal involvement with project facilitation will potentially create difficulties in stepping back in order to provide more 'objective', external evaluation of project and programme level activity, particularly when it comes to assessing their own role.

A piece of work ‘evaluating the role of the evaluators’ is planned in the near future in which programme and project managers who have worked closely with members of the evaluation team will be asked to comment upon their perceptions of the team’s role in project facilitation and evaluation capacity building. In the meantime, it may be fruitful to reflect upon views expressed in workshops held at the beginning of the evaluation programme in which participants were asked to outline what they expected of evaluation. Responses included: discussion from the outset, ongoing communication, an understanding of the problems facing the evaluation of short-term projects which may only have real effects in the longer term, an acknowledgement of the importance of soft outcomes, practical help in terms of how projects are to meet their objectives and demonstrate to others that they have fulfilled their tasks, help in developing project credibility and honesty (taking on board what doesn’t work). Insofar as intensive one-to-one support, an emphasis on process, partnership and community involvement, and assistance in developing formal monitoring tools have been features of the evaluation support provided to CYPP, we believe that there has been a real effort to meet these expectations.

However, more work may need to be done to meet other expectations that were raised such as a flexibility in response. There may be a perception that the emphasis in capacity building on reporting against key milestones (particularly in the form of proforma reportage) has led to an overly mechanistic approach to evaluation. Due to the focus to date on formative evaluation, more work may also need to be done in helping projects develop the more traditional evaluation skills that contribute to summative reports.

5. Inter-agency Collaboration and Partnership Working

5.1. Historical antecedents

There is a longstanding recognition that fragmentation of service provision between different agencies, particularly social services and health, is not only problematic in terms of cost-effectiveness, but undermines attempts to deliver services in a seamless manner. Despite various policy initiatives such as the 1990 NHS and Community Care Act and the publication by the Department of Health of several practical guidance and consultation documents about joint working, real progress in breaking down organisational boundaries has been slow.

Health Action Zones were specifically designed to provide a fresh impetus for joint working. CYPP has responded well to this political steer and inter-agency collaboration is a primary aim of several CYPP projects, particularly the larger service reconfiguration projects. However, CloS HAZ partners have been working in a difficult geographical context. There is considerable complexity with regard to organisational boundaries, Cornwall comprising one county council (of which the Local Education Authority and Social Services Department are part) and one health authority, but six district councils and five Primary Care Organisations (PCOs). Due to the urban bias in earlier community development investment, Cornwall may also have inherited less mature partnership infrastructures than urban Health Action Zones. A key question, therefore, is whether HAZ funding has provided a sufficient catalyst for closer harmonisation between different statutory agencies.
5.2. Partnership working at the strategic level

Senior representatives of partner organisations do state that the HAZ has made a significant
difference to partnership working in Cornwall and the Isles of Scilly. Contact points between
the major statutory agencies have been consolidated, key personalities are well known to
each other and joint consultation (formal and informal) now takes place on a regular basis.
Organisational readiness for joint working may have pre-dated HAZ (for example, in earlier
interest in establishing a Children’s Action Zone). However, the progress that has been
made in developing practical strategies for joint consultation and planning owes much to the
Health Action Zone. This is in part because of the nature of the projects that CYPP has
funded - the success of the larger service reconfiguration projects depends upon strategic
level support. Thus, senior level managers have had to evolve systems for collaboration.

HAZ has also provided an opportunity for the major agencies to test out their partnership
credentials in service areas where all partners can perceive tangible gains (this may be an
outcome of the tightly managed first funding round). The recognition of mutual benefit is
important in determining commitment to the process of partnership building. Where the
predicted loss to an agency outweighs any gains, it is extremely difficult to obtain meaningful
support.

Although the Social Services Department (SSD) has committed funding and senior
managerial support to HAZ projects, it is also within this sector that difficulties in securing the
necessary level of trust and commitment are perceived to be most pronounced. The fact that
barriers to joint working are not encountered throughout the SSD suggests, however, that
other factors may be at work. Personality may be a key factor here. Within Children’s
Services, the senior SSD representative has taken an active and positive role in driving
partnerships forward. Given the organisational changes affecting the health authority, Social
Services now provides a main source of stability and leadership in this area. Personality,
however, is a difficult area to evaluate due to the problem of disentangling its role from other
factors such as differences in the political steer given to Children’s Services and to
Community Services. There is nevertheless sufficient evidence from CYPP of the impact of
personal leadership and this raises a number of questions for future planning. The first is
how the vacuum left by the recent departure of key strategic actors (from health) within
CYPP will be filled. The second is how the potential power of the Director of SSD in driving
forward CYPP partnerships can be most effectively harnessed. It also may be fruitful to
encourage strategic leads to engage in franker discussions about tensions and implicit
conflicts of interest, particularly those surrounding sovereignty.

5.3. Partnership working at the operational level

Whilst considerable progress has been made in defining common goals and evolving
systems for joint consultation and planning, problems remain in translating objectives into
concrete reality. Some of the obstacles to effecting the transition from joint strategic planning
to joint commissioning and service provision lie within the tier of operational management.
For example, systems for sharing client information are poorly developed and concerns
remain about breaking confidentiality protocols. This has presented problems for the projects
concerned with identifying ways of streamlining provision between different agencies. Even
when initial resistance has been overcome, these projects have had to deal with the lack of a
common inter-agency database by manually tracking records of service uptake and
expenditure. Service delivery projects have also been affected by difficulties of accessing
relevant information. For example, RAPIDLY, a project designed to provide an assessment
and referral system for young offenders who are substance misusers, was initially unable to
access statutory information about its own clients.

There are several areas of operational management where there is a need for more clarity
about how systems and functions can be better aligned to support joint working. The
difficulties encountered in establishing pooled budgets probably owe more to the reluctance
of strategic managers to ‘let go’ of areas for which they have traditionally held responsibility than to differences in financial accounting systems. However, the latter do contribute to resistance to align budgets across organisational boundaries. Middle-level managers thus require clear mandates from their own senior managers to develop operational systems for collaborative working. They also need opportunities to get together with peers from partner organisations to discuss operational issues.

5.3. Partnership working between strategic and project levels

The difficulties of providing ‘joined-up’ strategic support for ground level activity have been referred to in Section 3.1. Better vertical communication is evolving, as projects become more proactive in seeking strategic direction. Interestingly, it is often the smaller projects focusing on service delivery that report the development of very positive working relationships between strategic planners and practitioners. For example, RAPIDLY has recently conducted a survey in which practitioners working in the juvenile justice system rated partnership working very highly. Meanwhile, as a result of the multi-agency commitment that has been secured for the Voice Output Devices Project, this initiative has gone on to secure a partnership with a national agency (Access to Computers in Education). Zebedees has similarly developed positive and effective working relationships. Indeed, this project has established a lengthy list of partner agencies, which range from the major statutory agencies and voluntary organisations to other projects focusing on young people, practitioners groups and young people themselves.

It is perhaps because the service delivery projects are more contained that strategic support in project implementation has been forthcoming. A contrast can be drawn with two of the larger service configuration projects (the Joint Agency Strategy and the Inter-Agency Child and Young Person’s Support Unit) which have completed review and planning activities and are poised to move towards addressing implementation issues. Despite longstanding statements of support from strategic decision-makers, it is taking considerable time for these projects to secure decisions about critical implementation issues (e.g. pooled budget arrangements, funding and procuring a building to house the Support Unit).

Sometimes, difficulties in securing strategic level commitments stem from the fact that representatives on inter-agency steering groups lack seniority with respect to decision-making. However, one cannot assume that even senior managers have greater power and autonomy than is realistically possible within complex, hierarchical, public sector organisations. Often, ratification of the ‘big’ decisions can only come from the directors or chief executives of statutory agencies. For example, the impasse reached by the Inter-Agency Child and Young Person’s Support Unit as it has moved into its implementation phase may now have been broken, due to recent proactive support from the Director of SSD. The critical role played by such individuals can be at odds with the understanding that partnership working is about inclusion and power sharing. However, the reality for many inter-agency projects is that their future success requires financial commitment beyond the lifetime of HAZ and that this will often depend upon a single statutory agency taking a lead role.

5.4. Partnership working at the project level

All CYPP projects have identified partnership working as an important component. However, amongst the larger service reconfiguration projects, the building of partnerships is a primary goal in its own right. In order to develop inter-agency consensus about current problems of service provision and potential strategies for achieving better services, project leads have consulted extensively with partners. Consultation has taken various forms, such as stakeholder seminars, individual consultation, focus groups and reference groups. The aim of this activity has not only been to obtain commitment from different statutory and voluntary
agencies and service users, but also to ensure that relevant partners feel a sense of ownership.

Consultation is a labour-intensive process, which, for some projects, has been the main focus of activity for over a year. The building of consensus around joint agency provision is, however, a major achievement for many CYPP projects (e.g. the Joint Agency Strategy, the Inter-Agency Child and Young Person’s Support Unit, Joint Protocols for Homeless Youth, Specialised Equipment for Children with Complex Needs). Indeed, in several cases, CYPP projects have provided the first opportunity to get all service managers into one room. Consultation is also seen as one vehicle for ‘mainstreaming’ partnership working at this level. For example, one of the conclusions drawn by the Joint Homelessness Protocol Project was that districts should initiate regular multi-agency Joint Protocol meetings, with a view to addressing historically poor communication between partner agencies. According to the Project’s final report,

‘This group would serve various purposes, providing a forum for frontline staff to discuss individual cases and to collectively find solutions. It would also give workers a greater insight into the roles of partner agencies, allowing discussion around the limitations, constraints and the culture of other organisations. This would also arm frontline staff with more information to establish realistic expectations from young people’ (Centrepoint: Housing Young People at Risk in Cornwall, March 2001, p.32).

In addition to building partnerships within specific service areas, CYPP projects have developed networks across the Programme. As suggested in Section 3.2, this is partly an outcome of the establishment of the Programme’s quarterly reportage meetings. This forum has provided project leads with an opportunity to map where projects overlap, establish common themes and experiences, share problem-solving strategies and obtain support from others. There are a number of positive outcomes of this growing partnership, such as the decision to co-ordinate approaches to primary schools with a view to offering a single menu of services for young people rather than a series of separate service descriptions, and the proposal by five projects working in the area of children with complex needs to convene a seminar in order to collectively inform strategic planners of progress, needs and sustainability issues.

The progress made at project level in partnership development is one of the key achievements of the CYPP and owes much to the ‘HAZ way of thinking’. HAZ has granted individual projects considerable scope in determining their own ways of achieving their objectives. This ability to take risks has allowed them to confront and challenge historic resistance to inter-agency collaboration. This has at times been a slow and incremental process, often thwarted by difficulties. However, Project leads have been encouraged to provide a fresh perspective and this in itself has made a significant difference.

6. Community and User Involvement

6.1. Diversity of approaches

Community and/or user involvement has been promoted as one of the cornerstones of the Health Action Zone initiative and, within CloS HAZ, the need to promote local involvement and a sense of local ownership and control has been emphasised since the outset. Community involvement has been built into the goal statements and evaluation plans of all CYPP projects. However, in such a diverse programme, it is inevitable that the level and breadth of involvement will be variable. This partly reflects the fact that community/user involvement has a more obvious role to play in some areas than in others. As a result, in some projects, involvement has been largely restricted to consultation, whilst in others, active involvement has been sought in all stages of the project cycle.
6.2. **User consultation**

As outlined above, consultation has been a feature of many CYPP projects. Some (e.g. Specialised Equipment for Children with Complex Needs) have sought to obtain the views of service users and/or carers through formal means such as a questionnaire survey. While this can yield useful information about how service delivery can be improved from a user/carer perspective, it does tend to result in ‘one-off’ involvement. This is not necessarily a bad thing. In projects targeting very specific populations, there is danger of overloading clients who are repeatedly approached for consultation.

Against this, clients who have serious reservations about the current system of service delivery may wish to keep channels of communication open until real service improvements have been achieved. To address this, the Joint Agency Strategy has established a Parent Advisory Group that now comprises 36 parents of children with complex needs. Parents are seen as equal partners in the process of improving the way in which assessment and care planning is carried out. In addition to having meaningful input into the identification of project strategies, individual members of the group have contributed to the piloting of joint agency assessment and care planning. Thus, the involvement of parents has been carried through from consultation during the planning phase to actual implementation.

The literature on community involvement emphasises the role of consultation in enhancing the relevance of project activities. All too often, however, lip service is paid to this concept, communities effectively rubber-stamping decisions made by service planners. CYPP provides a number of examples where project activities have changed in response to user involvement. This is no small achievement. For instance, the Young Fathers support group initially focused on providing a place where young men could meet to explore issues of masculinity and fatherhood. In response to the project’s users, the focus has changed to offering more activities aimed at building confidence, communication and co-operation, as well as offering opportunities for training and accreditation.

6.3. **User involvement in the implementation and management of project activities**

In those projects concerned with improving the way in which statutory services are delivered, community involvement tends to be limited to a consultative role (though this does not mean that user involvement cannot have play a significant role in bringing about service improvements). Other projects within CYPP have offered greater scope for involvement. For example, the Zebedees Café is run and managed in partnership by its users (i.e. young people). Hear Our Voice is concerned with developing mechanisms through which young people’s views and experiences about mental health provision can be directly channelled to service planners and practitioners. In order to ensure that youth participation occurs throughout the project cycle, six young people are represented on the project’s committee. The Youth Participation and Advocacy Project also aims to ensure that young people have a voice in the planning and delivery of youth services through the establishment of youth forums. Members of the Youth Forum in Truro were solely responsible for its countywide launch, from the organisation of formal presentations and small group discussions to coordinating with media. ‘In Touch’ Seminars have also been organised by young people as part of this project. In these, service providers were placed in a context of listening to young people who were providing the forum and setting the agenda themselves.

6.4. **Obstacles to achieving community and user involvement**

CYPP clearly provides a number of very positive examples with regard to the involvement of communities and users. It is nevertheless important to acknowledge the obstacles to involving vulnerable groups in a rural county such as Cornwall. Young people involved in the youth forums established as part of the Youth Participation and Advocacy project have suggested that gaining access to affordable transport does limit their ability to attend and
actively participate in youth forums and related youth initiatives. This raises the question of the costs of participation to young people. Some of the members of TRIBE (a support programme for young gay men) are making round trips of up to 120 miles to attend the group. Without cheaper travel networks in Cornwall, young people who have little or no money will be denied access to projects. This in turn result in a social bias in user representation. This is an issue that has been raised by project leads themselves who note that there is a tendency for the same parents and young people to become the ‘active voices’.

7. Supporting Innovation and Risk

From the outset, HAZ has been presented as an initiative that would encourage and test out new ways of working in order to reduce health inequalities. One of the benefits of this philosophy is that individual projects within CYPP have been given considerable scope to develop services that are different, creative and innovative. The larger service reconfiguration projects have been given latitude to take risks in order to develop new and improved models of good practice. The extent to which these projects have been able to capture broad stakeholder consensus demonstrates the positive benefits of this approach. CIoS HAZ is also to be commended for supporting innovative initiatives such as the Young Fathers Project, TRIBE and ACHE (Advice, Care, Help, and Empathy). The latter, for example, has trained over 500 young people as youth counsellors and provides a good example of how user involvement can be harnessed as a central component of innovative programme development.

Whilst these are positive achievements for the Health Action Zone, it is important to consider how genuinely innovative approaches can be maintained in the future, when the legitimising presence of CIoS HAZ will no longer exist. Future funding will be an issue for smaller projects that are housed within voluntary agencies. For the larger service reconfiguration projects, those seeking to be innovative are located in a political and hierarchical system that stretches across the county via the Region through to the Department of Health. In such a very real world, the capacity for innovative thinking and implementation on the ground is vulnerable to the numerous and possibly changing prescriptions, limitations and requirements established by those with more power and influence.

8. Developing Cost Effective Services

Cost-effectiveness is often identified as a potential benefit of partnership working. This is certainly the case for two of the largest CYPP projects (the Joint Agency Strategy and Specialised Equipment for Children with Complex Needs), a key assumption of which is that, by developing more streamlined service provision, efficiency and cost-effectiveness will be improved. Both projects have found financial tracking systems to be very poor in the partner agencies (and non-existent on a multi-agency basis), a factor that itself works against the development of more cost-effective practice. In addition, the confusion (or duplication) that exists in roles and responsibilities regarding assessment, funding and provision results in significant staff time wastage and administrative cost. Both projects therefore address areas where, with improved co-ordination in order to achieve a more streamlined service, cost savings could be made.

A third project, the Inter-Agency Child and Young Person’s Support Unit, also identifies cost-savings as an outcome, proposing that the provision of in-county resources for young people who are experiencing emotional and behavioural difficulties will ultimately be more cost-effective than sending them out of county. However, the project makes explicit the fact that cost savings in the long-term can only be achieved through significant investment at the outset. This is an issue of relevance for many CYPP projects (indeed for projects across HAZ as a whole) and the Inter-Agency Child and Young Person’s Support Unit Project is to be commended for tackling it head-on. In a political environment where agencies are under
significant pressure to demonstrate ‘value for money’, systems need to be developed in which cost-effectiveness issues for short-term projects can be considered within longer funding cycles.

As part of this, there is a case for ‘capturing’ how the development of human resources within the Health Action Zone represents a significant input to service developments. Many of the CYPP project leads have evolved knowledge, skills and contacts that could provide a firm springboard from which to take developments forward. Given the difficulties of securing multi-agency commitment and action at all levels, the progress that leads have made in consulting and networking across agencies should be recognised as a ‘resource’ in itself. One example of this provided by HAZ is the appointment of the project lead of the Specialised Equipment for Children with Complex Needs project to the team responsible for taking the Government’s guidance for integrating community equipment services forward locally.

9. Mainstreaming CYPP Services

As no central commitment to HAZ funding has been made beyond March 2002, the question of what happens beyond the lifetime of funded-HAZ is uppermost in many minds. At a project level, concerns have been expressed that there does not appear to be a clear structure in place to mainstream projects. Indeed, criteria have not been identified with which to assess which projects will be mainstreamed. There is an ethical dimension to the issue of sustainability in an initiative that focuses on the vulnerable and excluded. Several projects have expressed concerns about raising the expectations of young people without being able to deliver in the longer term. This is a particular problem for projects that have achieved a significant level of user involvement. For example, young people who have participated in Youth Forums have already expressed disappointment in the lack of representation at these meetings of important strategic players. Given clear evidence that this project’s users have a sense of ownership in its activities, they may feel let down if the mechanisms that have been developed to ensure that young people have a voice are not sustained.

In addition to a lack of information about which projects will - and will not be sustained, there is uncertainty about where the funding will come from to mainstream innovative developments. The success of the Designated Services for Young People project in obtaining Objective One funding is encouraging. However, few HAZ projects are eligible to apply for support from Objective One. Thus, as noted in section 5.5. the future of many projects will rest upon the willingness of a single agency to take a lead role. There are fears that this could undermine the progress that has been made in developing inter-agency partnerships. Having worked hard to build up commitments amongst agencies to ‘let go’, project leads may soon find themselves in the unenviable position of having to persuade the very same agencies to ‘hold on’. Decisions taken by statutory agencies to mainstream projects will also be strongly influenced by policy developments within central government. However, if sustainability is dependent upon national political steer, questions must be raised about the place of local innovation.

If the shifting national political agenda creates uncertainties for the mainstreaming process, there are elements of the CYPP that transcend the boundaries of individual projects and that can be taken forward into future service developments. These include the progress that has been made in evolving structures of vertical communication between strategic decision-makers and individual projects; the willingness to embed project activities within a framework of formative evaluation; the gradual removal of barriers to the sharing of information; the growing cultural ethos of building consensus and working in partnerships between and across various statutory and voluntary agencies; and the promotion of user involvement. These are positive achievements for the Children and Young People’s Programme and it will be interesting to explore whether they are taken forward in ways that positively shape the
ability of local planners and service providers to develop more innovative, responsive, accessible and cost-effective services for children and young people in Cornwall.

10. Recommendations and Conclusions

As an initiative in which partnership working is a central component, and one that comprises a number of developments that are at the forefront of national policy, the Children and Young People’s Programme provides lessons that are likely to be of interest beyond CloS HAZ. These pertain to the way in which local initiatives of this type can be most optimally structured and supported, the processes by which innovative service projects evolve, and the type of outcomes that can be achieved through a ‘HAZ way of doing things’.

10.1. Supporting innovative service developments

It is significant that decisions concerning the content of CYPP were tightly managed at its outset. Challenging the conventional wisdom that such a ‘top-down’ steer works against innovation, the early allocation of funds meant that the structure of the Programme attempted to capture the HAZ philosophy of trying to do things differently and that the HAZ was then forced in many ways (but was also prepared) to defend this conceptualisation against a changing national agenda. At the same time, this early allocation has meant projects have faced considerable pressure - as this Programme was expected to deliver early wins - and it has also limited the ability of CYPP to respond (at least financially) to emerging partnerships and new area based initiatives.

CYPP has not been as tightly managed during implementation as in its planning phase. Individual projects have been given considerable scope to determine their own ways of achieving objectives. There are many positive outcomes of this approach, not least the growing sense that project level staff and the wide range of stakeholder groups that they have consulted are having a meaningful input into broader decisions relating to the design and implementation of children and young people’s services. Against this, projects have expressed a need for more ‘joined-up’ strategic support. A multi-agency CYPP steering committee with meaningful access to executive decision-making powers should have been created from the outset of the Programme. However, the current review of the Children’s Service Planning Group may address some of the perceived gaps in strategic level support.

The fact that individual projects have perceived shortcomings in strategic and managerial support reflects part of a broader problem of how inter-agency initiatives fit into bureaucratic frameworks that are largely structured around individual agencies. Thus, whilst the senior representatives of agencies have demonstrated a willingness and ability to establish strategy on a joint basis, structures also need to be established at lower levels of the bureaucratic hierarchy if the implementation of joint working is to be adequately supported. Areas where support could be strengthened include the sharing of information, and the identification of clear lines of financial and managerial accountability. However, unless they are given a strong political steer from the Centre, agencies may be reluctant to assume control of particular managerial functions if this implies ownership and financial commitment beyond the lifetime of HAZ.

10.2. Key processes and outcomes in CYPP projects

In their design and implementation, CYPP projects provide a number of examples of ‘good practice’. Formative evaluation has been embedded into everyday practice. Considerable efforts have been made in conducting sound reviews of existing service arrangements, establishing baseline information and developing monitoring tools. There has been extensive consultation with a wide range of stakeholders, an activity that has not only helped to improve the relevance and acceptability of proposals, but that has contributed to the building of partnerships. Opportunities have been provided for CYPP projects to build networks and
There have also been meaningful attempts to promote user involvement. There are a number of positive outcomes of this activity. Project planning is of very high quality, project leads having clearly set out their aims, related their activities to expected results and set performance indicators. Fundamental questions have been asked about what is and is not realistic and weaknesses in project design have been analysed. This not only strengthens the likelihood of success. It may have increased the confidence and ability of individual projects to communicate about their activities and experiences with others. There is growing evidence of dialogue between project level staff, local strategic planners and, in some cases, regional and national representatives.

As a result of service planning and review, projects have also begun to break down barriers to the sharing of information and to develop consensus between and across various statutory and voluntary agencies. The networks that have been forged as part of this activity should provide a useful springboard from which to effect the transition from planning to integrated service provision in the case of the larger service reconfiguration projects. Many of the service delivery projects already report the development of positive working relationships between strategic planners and practitioners. The establishment of Programme-level networks also has had positive outcomes. For example the five projects that work specifically in the area of children with complex needs are developing their own professionally-based steering group which focuses on issues pertaining to children with complex needs, and how to take this work forward.

Finally, the diversity of approaches used in CYPP to promote user involvement has been highlighted in this report. It is clear that lip service has not been paid to the role of user consultation in enhancing the relevance of project activities as CYPP provides a number of examples where project activities have changed as a result of the input of users. Where projects have offered greater scope for involvement than consultation, the enthusiasm and commitment of young people and their carers that has been captured is no small achievement.

10.3. The Future of CYPP Projects

As discussed above, the question of what happens beyond the lifetime of HAZ is uppermost in many minds. Due to the difficulties of situating inter-agency initiatives into current bureaucratic structures, this is a particular issue for the larger service reconfiguration projects. In those areas where HAZ has been at the forefront of developments that are being taken forward nationally, key statutory agencies are poised to mainstream projects. However, sustainability is about more than just financial responsibility and steps need to be taken to protect the collaborative investment that has been made to joint-agency ventures. Experience to date suggests that one approach to this would be the development of facilitating inter-agency structures - at strategic, operational and project levels.

The fact that policy developments within central government may be a key determinant of sustainability raises difficulties for projects that do not fit easily into new government guidance. Projects themselves have expressed concerns about the lack of criteria to assess eligibility for mainstreaming. In response to this, HAZ and related agencies could usefully begin to focus on the process by which projects will be identified for mainstreaming and to develop better methods of communicating about mainstreaming decisions with projects and with children and young people. It is nevertheless important to acknowledge the work that is being done ‘behind the scenes’ to identify who can pick up responsibility for projects. This may work against the expressed desire of projects for transparency. However, without informal networking (and bargaining) between key strategic actors, such decisions might never be made at all.
## Appendix 1

### CYPP Main Projects

<table>
<thead>
<tr>
<th>Project Title</th>
<th>Project Lead</th>
<th>HAZ Funding Cycle</th>
<th>Target Population</th>
<th>Focus of Work</th>
</tr>
</thead>
<tbody>
<tr>
<td>Joint Agency Strategy</td>
<td>Alison Gardner</td>
<td>£75 000</td>
<td>Children with Complex Needs</td>
<td>Aims at improving services for children with complex needs, and their families, by developing and implementing a joint multi-agency assessment and care plan.</td>
</tr>
<tr>
<td>Interagency Child and Young Person’s Support Unit</td>
<td>Beth Mottart</td>
<td>£210 000</td>
<td>Youth</td>
<td>Aims at developing a resource within Cornwall for young people who are experiencing emotional and behavioural difficulties.</td>
</tr>
<tr>
<td>Designated Services for Young People</td>
<td>Leah Parker</td>
<td>£126 421</td>
<td>Youth</td>
<td>An initiative to create a healthy young Cornwall, and to work in partnership with young people, to build a range of accessible health services which support healthy living.</td>
</tr>
<tr>
<td>Specialist Equipment for Children with Complex Needs</td>
<td>Kirsty Clapperton</td>
<td>£84 500</td>
<td>Children with Complex Needs</td>
<td>Aims at providing a more streamlined and flexible support network to families and their children with complex physical needs and life threatening or life limiting illnesses by co-ordinating specialised equipment provision.</td>
</tr>
<tr>
<td>Special Schools Initiative</td>
<td>Chris Millard</td>
<td>£68 000</td>
<td>Children with Complex Needs</td>
<td>Aims at co-ordinating nursing services in three special schools (Doubletrees, Curnow and Nanalvearne) and clarification of various professional roles.</td>
</tr>
<tr>
<td>Young People Cornwall:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hear our Voice/LsaD</td>
<td>David Clements</td>
<td>£107 160</td>
<td>Youth</td>
<td>Young People Cornwall focuses on four primary projects, listed below:</td>
</tr>
<tr>
<td></td>
<td>Mandy Lancaster</td>
<td></td>
<td>Youth</td>
<td>A countywide young people’s mental health forum with a goal of getting young people’s views and experiences of mental health plugged into making positive changes into local services. Furthermore, LsaD provides lifeskills and drugs training in schools.</td>
</tr>
<tr>
<td>TRIBE</td>
<td>Ryan Johnson</td>
<td></td>
<td>Youth</td>
<td>A support, advice and information service for young gay men between the age of 16 and 25.</td>
</tr>
<tr>
<td>Zebedees</td>
<td>Kate Smith</td>
<td></td>
<td>Youth</td>
<td>A drop-in youth centre and café that services young people and provides a multiplicity of programmes.</td>
</tr>
<tr>
<td>Young fathers</td>
<td>Nick Smith</td>
<td></td>
<td>Youth</td>
<td>An advice, information and support group for young fathers aged between 18 and 28.</td>
</tr>
<tr>
<td>Scallywags</td>
<td>Moira Broadhead Katheryn Lovering</td>
<td>£125 000</td>
<td>Children aged 3-7</td>
<td>An early intervention behavioural management project used early on with young children aged from 3 to 7 years, whose behaviour is such that they are unlikely to retain a place in pre and primary school.</td>
</tr>
<tr>
<td>Young Carers Project</td>
<td>Amanda Stevens and Pam Rabett</td>
<td>£76 419</td>
<td>Youth</td>
<td>Aims at encouraging statutory and voluntary agencies to recognise the needs of young carers, and to support networks to work more effectively on behalf of young carers.</td>
</tr>
<tr>
<td>Project</td>
<td>Responsible Party</td>
<td>Budget</td>
<td>Population</td>
<td>Description</td>
</tr>
<tr>
<td>---------------------------------------------</td>
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</tr>
<tr>
<td>Breakfast Bar</td>
<td>Stephanie Thomas</td>
<td>£2 658</td>
<td>Youth</td>
<td>The premise behind this project is that skipping breakfast effects children’s ability to learn and may lead to health problems. Thus project provides breakfast to between 20 and 30 young children in a special school in Redruth/Camborne.</td>
</tr>
<tr>
<td>Voice Output Devices</td>
<td>John Mitchell, Celia Todd</td>
<td>£30 200 (an additional £2 000 from Specialised Equipment budget)</td>
<td>Children with Complex Needs</td>
<td>A multi-disciplinary group has been established to create an assessment of individual needs. VOD targets children with complex needs, who have little or no speech skills. Also aims at providing multi-agency training.</td>
</tr>
<tr>
<td>Family Care</td>
<td>Rita Campbell</td>
<td>£5 070</td>
<td>Children with Complex Needs</td>
<td>Provides flexible respite care to children and families within their homes. Aims at supporting 15 families.</td>
</tr>
<tr>
<td>Newquay One Stop Shop</td>
<td>Gill Moore</td>
<td>£43 126</td>
<td>Youth</td>
<td>Multi-agency partnership organisation which attempts to provide a gateway for young people in Newquay and surrounding areas to access all services that impact on their social and mental health.</td>
</tr>
<tr>
<td>RAPIDLY</td>
<td>Tony North</td>
<td>£52 000</td>
<td>Youth</td>
<td>Provides an assessment and referral service for young offenders who have been referred through the Drug Action Team as substance misusers.</td>
</tr>
<tr>
<td>Joint Homelessness Protocol</td>
<td>Richard Cowen</td>
<td>£26 677</td>
<td>Youth</td>
<td>Aims at providing a critical assessment of the joint protocol in working with homeless youth and rough sleepers. This includes a review of all statutory and voluntary agencies working with this population in Cornwall.</td>
</tr>
<tr>
<td>Neonatal and Respite Care</td>
<td>Hilary Clarke</td>
<td>Neonatal (£14 000) and Respite (£25 300)</td>
<td>Children with Complex Needs</td>
<td>Provides neo-natal and respite care for children with complex needs, aged between 0 and 2, within their homes. This serves as an outreach component of Treliske Hospital.</td>
</tr>
<tr>
<td>Rehabilitation Project</td>
<td>Lucinda Bhattacharya</td>
<td>£7 500 (from Joint Agency Strategy budget)</td>
<td>Children with Complex Needs</td>
<td>This project is serviced out of West Cornwall Hospital and provides in-patient and outreach occupational therapy services to children with complex needs.</td>
</tr>
<tr>
<td>Participation and Advocacy</td>
<td>Nicky Davey</td>
<td>£30 000 (from Designated Services for Young People budget)</td>
<td>Youth</td>
<td>This project has been set up to facilitate young people having access to services via the development of five district Youth Forums as well as the development of a countywide youth forum. This serves to ensure that young people have a voice in the planning and delivery of youth services.</td>
</tr>
</tbody>
</table>

1. Projects focused primarily on service reconfiguration at a strategic level
2. Projects focused primarily on service delivery and implementation
3. Projects which are countywide
4. Projects which are geographically specific
## Local CYPP Fellowships

<table>
<thead>
<tr>
<th>Project Title</th>
<th>Project Lead</th>
<th>HAZ Funding Cycle</th>
<th>Target Population</th>
<th>Focus of Work</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACHE&lt;sup&gt;2,3&lt;/sup&gt;</td>
<td>Liz Rudling</td>
<td>£1 500</td>
<td>Youth</td>
<td>Advice, Care, Help, Empathy: young people listening to young people.</td>
</tr>
<tr>
<td>Nutrition in Schools&lt;sup&gt;2,3&lt;/sup&gt;</td>
<td>Felicity Wakefield</td>
<td>£1 500</td>
<td>Youth</td>
<td>Using different forms of media to meaningfully convey healthy eating messages in schools.</td>
</tr>
<tr>
<td>Education Pack / Resource&lt;sup&gt;2,3&lt;/sup&gt;</td>
<td>Felicity Holt</td>
<td>£1 500</td>
<td>Youth</td>
<td>The development of a comprehensive, substance misuse teaching package for 4 – 16 year olds, within their schools.</td>
</tr>
<tr>
<td>Early Psychosis&lt;sup&gt;2,3&lt;/sup&gt;</td>
<td>Angela Hawke</td>
<td>£1 500</td>
<td>Youth</td>
<td>Enabling professionals to better identify and refer young people who show signs of early psychosis.</td>
</tr>
<tr>
<td>Young Carers of Parents with Mental Health Problems&lt;sup&gt;2,3&lt;/sup&gt;</td>
<td>Ann Savage</td>
<td>£750</td>
<td>Youth</td>
<td>Looking at ways of supporting children and young people who help to care for their parents who are experiencing mental health problems.</td>
</tr>
</tbody>
</table>

<sup>1</sup> Projects focused primarily on service reconfiguration at a strategic level  
<sup>2</sup> Projects focused primarily on service delivery and implementation  
<sup>3</sup> Projects which are countywide  
<sup>4</sup> Projects which are geographically specific