

# Youth Partnership Report

September 2016

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## Executive summary

In 2015, the London Borough of Hammersmith and Fulham (LBHF) identified the creation of opportunities for young people as a key manifesto commitment, pledging to engage young people in service development and to ensure the borough service offer for young people encouraged opportunity, good citizenship, learning and development.

As part of that commitment, the council commissioned Sobus to deliver the co-production of a Youth Partnership for Hammersmith and Fulham. A partnership was established with participation from over 50 people from over 30 different organisations, which engaged young people and providers. The purpose was to develop a shared vision and service model for young people's services in Hammersmith and Fulham, establishing ways of working in partnership to deliver this vision and ensure sustainability for the future.

Evidence is emerging nationally that the changes to youth services are having a detrimental impact on young people.

*The Unison research (2016) asked survey respondents how they felt changes in youth services and other relevant services were having an impact on young people:*

- **71% said it was now harder for young people to stay in formal education**
- **65% said young people were finding it harder to get jobs**
- **83% reported increased crime and anti-social behaviour**

The vision of what we want to achieve is that:

Young people in Hammersmith and Fulham will be in a place where they have a say on how they become the healthiest, happiest, safest, most successful and resilient young adults in the country.

Research on need highlighted six priority themes:

1. Employment

Young people are concerned that it is difficult to get a good job locally even with good qualifications because the employment market is so competitive.

2. Crime and Safety

17% of males and 23.1% of females aged 18-25 years old were victims of crime in 2015.

3. Health and Wellbeing

The hospital admissions for mental health conditions at 124.3 per 100,000 is higher than the England average at 87.4 per 100,000 <sup>3</sup> which, is statistically significant.

4. Housing

The number of families who are homeless in the borough is significantly worse at 4.3 per 1,000 households than the England average of 1.8 per 1,000 households <sup>1</sup>.

5. Training and Education

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<sup>1</sup> Hammersmith and Fulham Child Health Profile March 2016

The data shows that young people are doing well in training and education with GCSE's achieved (A\*-C inc English and maths) with local value of 58.7% compared to the England average of 57.3%

#### 6. Positive Activities

There are no specific statistics recorded about positive activities. However youth services and positive activities are evidenced in the mapping information as part of this report.

Based on the work of the partnership, research and mapping recommendations have been formulated that include the Youth Partnership being developed and empowered so that it can be sustainable and deliver its vision. Key recommendations are:

- Further develop a broad group needs to 'own' the needs and opportunities of young people in H&F and ensure they are addressed holistically and be a reference point for commissioners and researchers such as public health.
- Establish a system that all providers use and young people refer, to ensure clear communications between partners and with service users.
- Groups work together to apply for large funding pots and commissioning opportunities to deliver work.
- Work with a range of partners including businesses, to create opportunities for partners and young people.
- The Youth Partnership should apply for funding from John Lyons and apply for funding matched from LBHF to become a Young Hammersmith and Fulham Foundation. The Foundation would make the work of the Youth Partnership sustainable in the long term and take forward key parts of the recommendations of this report.

## Background

In 2015, the London Borough of Hammersmith and Fulham (LBHF) identified the creation of opportunities for young people as a key manifesto commitment, pledging to engage young people in service development and to ensure the borough service offer for young people encouraged opportunity, good citizenship, learning and development.

Hammersmith and Fulham is well served with sports and leisure facilities, three professional football clubs, a thriving arts scene including theatres and live venues, and a vibrant community and voluntary sector offering services to young people. The borough is also home to 17,000 businesses of all shapes and sizes with large clusters of creative, retail and hospitality businesses.

The idea of a new Partnership for Young People in Hammersmith and Fulham was launched in February 2016. The aim is to connect the broad range of organisations and individuals that are committed to the future of young people in the borough. Together, the Partnership will shape, build and develop an integrated, wide-ranging, and inclusive youth offer for the borough.



Picture from Youth Partnership Launch

The national picture is that youth services have seen a reduction at a time when those services are most needed. *The risk of child poverty and material deprivation in the UK has risen in recent years, and as children become young people, thousands fail to receive any kind of economic support to get into the labour market. By 2015, almost a third of people (32.6%) in the UK aged under 18 were at*

risk of poverty or social exclusion, while 10.5% were experiencing material deprivation. By contrast, the corresponding figures for older people were 18.1% and 1.9% <sup>2</sup>.

The Unison research also asked survey respondents how they felt changes in youth services and other relevant services were having an impact on young people:

- **80% said they thought young people feel less empowered**
- **71% said it was now harder for young people to stay in formal education**
- **65% said young people were finding it harder to get jobs**
- **77% reported increased mental health issues among young people, and 70% a rise in increased alcohol and substance abuse**
- **83% reported increased crime and anti-social behaviour.**

Most strikingly, the overwhelming majority (91%) said the changes were having a particular impact on young people from poorer backgrounds. More than half said there were particular problems for young black people, young LGBT people, and young women. So it appears that the cuts have hit precisely those who often need youth services the most <sup>3</sup>.

The national picture is being repeated across London boroughs to varying degrees, although there has been a commitment from London Borough of Hammersmith and Fulham to protect funding for youth services.

As part of that commitment, the council commissioned Sobus to deliver the co-production of a Youth Partnership for Hammersmith and Fulham. The partnership engaged young people, businesses, funders, and providers to develop a shared vision and service model for young people's services in Hammersmith and Fulham and ways of working in partnership to deliver this vision and ensure sustainability for the future.

Sobus was appointed as it has significant experience of working with a range of partners including the Voluntary and Community Sector (VCS), service users, residents, funders and commissioners in Hammersmith and Fulham and the surrounding boroughs. Sobus has delivered focus groups on behalf of Care Quality Commission (CQC), Housing Department including engaging with young people and attended the Youth Forum. Sobus runs the Supplementary Schools Network which, engages with very diverse communities and organisations. In total Sobus has contact with over 500 voluntary and community sector organisations based or delivering services in Hammersmith and Fulham. Of those 500 organisations over 200 have young people as beneficiaries. Sobus has been working with a range of partners including H&F Mind, Desta, H&F CAB, a local resident, H&F CCG and LBHF Adult Social Care Commissioner to pilot co-production in Careers Services and Supported Employment Service. Feedback from the co-production work so far has been

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<sup>2</sup> Young People at Risk: Challenges and Policy Options for the UK, Sage, 2016

<sup>3</sup> The Damage, Unison, 2016

very positive with services users, providers and commissioners expressing that the co-production work has enabled fresh thinking on how to address the needs of local residents.

The New Economics Foundation's working definition of co-production is *"a relationship where professionals and citizens share power to plan and deliver support together, recognising that both partners have vital contributions to make in order to improve quality of life for people and communities"*.

There are six principles, which are the foundation stones of co-production. Co-production in practice will involve alignment with all of these principles, and they are all underpinned by similar values.

1. Taking an assets-based approach
2. Building on people's existing capabilities
3. Reciprocity and mutuality
4. Peer support networks
5. Blurring distinctions
6. Facilitating rather than delivering

In this context, co-production is a framework for design and delivery of services for stakeholders, which is person centred and therefore starts with young people, not services or departments. Co-production is a way of fully involving young people in decision making and a way of devolving power, which enables the council to fulfil its manifesto commitments.

This report and the co-production work has been co-produced and had input from young people, local organisations, council officers and CCG officers.

## Process and who was involved

### Youth Partnership providers group

An event was held on the 9<sup>th</sup> February. All providers that were invited to attend the event we invited to be part of the Youth Partnership meetings between March 2016 and July 2016. The meetings were facilitated and administered by Sobus, with a range of providers making their venues available for the meetings at no cost.

#### *Youth Partnership Attendee List appendix 1*

Sobus facilitated the group through a process of

- drafting the vision for the future,
- reimagining services design, funding and delivery
- research best practice
- considering consultation findings on existing services
- consulting on the new model(s)
- ensuring buy in from the range of partners

#### *Youth Partnership Co-production Process appendix 2*

There was a broad range of organisations attending from faith based, charities, colleges and social enterprises and statutory organisations such as police, council and clinical commissioning group. Those organisations provided or commissioned a range of different types of services such as arts, confidence building, education and training, employment support, holiday clubs, inclusive sports and activities, mental health, physical health, positive activities, self advocacy, youth centres and youth offending.

In the first few meetings a draft vision and values were developed. The groups' vision of where we want to be is:

Young people in Hammersmith and Fulham will be in a place that means they have a say on how they become the healthiest, happiest, safest, most successful and resilient young adults in the country.

The groups' values for how we want to achieve our vision are:

**Empowerment** - we empower our talented young people to take the initiative and make things happen

**Quality & impact** - everything we do with and for young people, we will do well and ensure it makes a difference



**Inclusive** - we include everyone and young people are at the heart of everything we do

**Working together** - to do our absolute best for young people

Based on our value of being inclusive, working together and the recommendation of the LBHF Youth Council it was agreed to set up a youth panel that could work alongside the Youth Partnership. This meant that young people could contribute and influence the work of the youth partnership around their school commitments.



Picture of Youth Partnership Meeting

## Youth engagement

A youth panel was recruited; from LBHF Youth Council, providers including H&F Mencap, QPR Foundation and made up of passionate young people who care about their borough and the young people. The panel were tasked with designing new ways for young people to have their say on the future of young people's services in the borough.

The panel was supported to develop different ways of getting feedback from young people on what is important to them in Hammersmith and Fulham. This included the use of social media, production of a short film and associated questionnaire and focus groups. Seeking to understand what activities and support services are important to young people, which need improving and what support might be missing. The survey also captures feedback on communication channels favoured by young people.

For young people taking part in the panel it was an opportunity to:

- Work towards a recognised certificate of accreditation (ASDAN Youth Voice Award).
- Influence how young people in their borough are involved in decisions that affect them.

- Learn new skills, understand how decisions are made and build on their CV.

Young people on the panel are aged 11–19 years (up to 25 for young people with disabilities), and live or go to school in Hammersmith & Fulham. Twenty-nine young people were involved in the panel.

In addition to the vision and values the youth partnership and the youth panel agreed priority themes and age range for working with young people.

## **Priority themes**

Research from youth council, Make Your Mark Survey 2015, providers and stats on need highlighted six priority themes:

1. Health and Wellbeing
2. Training and Education
3. Positive Activities
4. Housing
5. Employment
6. Crime and Safety

And three cross cutting themes:

1. Communications
2. Empowerment & Voice
3. Equality and inclusivity

## **Age range**

The youth partnership will focus on providing services to young people who are between the ages of 5 – 19. To ensure a holistic approach, the partnership will look to work closely with midwives, health visitors, nurseries, children's centres and care givers to ensure that young people get the best start in life (0 – 5).

Similarly the partnership will work with a range of partners working with people who are 19 – 25. This will include VCS, colleges, universities and employers.

By focusing on a broad age range it will ensure that young people are appropriately supported at all ages, resources are prioritised and that there is joined up transition planning. Transitioning at key stages of life and at specific ages can be very hard for young people and their families. The youth partnership brings key partners together so that any transition for a young person is as smooth as possible. Whether that is ensuring language development is right for starting primary school, leaving care to live independently or getting the best out of education and the experience to find meaningful well paid employment. The Youth Partnership is made up of a broad range of people and organisations that can ensure that these transitions are improved and do not feel like falling off a cliff as identified in the Labour manifesto.

## Summary of the evidence for the priority themes

Where possible statistics have been provided for either the 5-19 age range of the partnership or 0-25 age range and where this has not been possible the available data source has been used.

### *Needs and Statistics Data appendix 3*

#### 1. Housing

For the large section of the age group that the partnership is looking at housing is not a primary concern as they are under 16 and therefore, housing issues are the responsibility

of a parent, carer or guardian. For that reason it is also difficult to get data specifically about young people and housing. The number of families who are homeless in the borough is a significantly worse 4.3 per 1,000 households than the England average 1.8 per 1,000 households<sup>1</sup>. There is also anecdotal evidence that lack of affordable housing is a barrier to aspiration, with young people saying that there is no point doing well at school as they will not be able to afford to live in the borough even if they get a job.

#### 2. Employment

Good quality, well paid employment is a big issue for young people in the borough. The number of young people not in employment, training or education is a significantly better 2.5% than the England average of 4.7%<sup>3</sup>. Young people are concerned that it is difficult to get a good job locally even with good qualifications because the employment market is so competitive.

#### 3. Crime and Safety

Crime and safety is an important issue for young people in the borough with 17% of males and 23.1% of females aged 18-25 years old of all crime victims in 2015. The top four most common types of crime are other theft, theft person, common assault and actual bodily harm. 21.6% of males and 18.5% of females aged 18-25 were suspects of all crimes in 2015<sup>4</sup>.

#### 4. Health and Wellbeing

The child population in this area			
	Local	London	England
<b>Live births in 2014</b>			
	2,440	127,399	661,496
<b>Children (age 0 to 4 years), 2014</b>			
	11,800 (6.6%)	628,600 (7.4%)	3,431,000 (6.3%)
<b>Children (age 0 to 19 years), 2014</b>			
	36,700 (20.6%)	2,103,800 (24.6%)	12,907,300 (23.8%)
<b>Children (age 0 to 19 years) in 2025 (projected)</b>			
	38,400 (20.7%)	2,392,900 (24.7%)	13,865,500 (23.7%)
<b>School children from minority ethnic groups, 2015</b>			
	11,873 (73.0%)	731,710 (71.3%)	1,931,855 (28.9%)
<b>Children living in poverty (age under 16 years), 2013</b>			
	23.8%	21.8%	18.6%
<b>Life expectancy at birth, 2012-2014</b>			
Boys	79.7	80.3	79.5
Girls	84.1	84.2	83.2

<sup>4</sup> Met Police; crime safety teams

Young people's health and wellbeing in Hammersmith and Fulham is mixed compared with the England average. Obesity levels for children aged 4-5 years in the borough is in line with the England average, however obesity in children aged 10-11 is significantly worse at 23.1% compared to the England average of 19.1%<sup>1</sup>. Hospital admissions due to substance misuse in 15-24 year olds is lower than the England average at 84.5% compared to 88.8%<sup>1</sup> however, this is not statistically significant. The hospital admissions for mental health conditions at 124.3 per 100,000 is higher than the England average at 87.4 per 100,000<sup>1</sup> which is statistically significant. Of those aged 18-24, 4100.56 per 100,000 are predicted to have a moderate physical disability and 2703.91 per 100,000 are predicated to have a learning disability<sup>5</sup>.

## 5. Training and Education

The data shows that young people are doing well in training and education with GCSE's achieved (A\*-C inc English and maths) with 58.7% of young people in H&F getting those grades compared to the England average of 57.3%<sup>1</sup>. There is a concern amongst some of the youth partnership members that this statistic is impacted by the success of private schools in the borough and masks inequalities for some of the young people who do not attend private school. Even those that do well in training and education report that it is difficult to get good quality and well paid employment in the borough as noted above. There is also concern that there may be a hidden group of young people who are Not in Education, Employment or Training.

## 6. Positive Activities

There are no specific statistics recorded about positive activities, however it is well documented that the borough is well served by youth services and facilities compared to other boroughs. Further information about youth services and positive activities are outlined below under mapping information.

### *Thematic Session Discussion Notes appendix 4*

## **Holistic needs assessment and service delivery**

At present the amount of joined up working between young people, the VCS, LBHF, H&F CCG, police and other stakeholders such as schools, uniformed groups and businesses is very limited. There is no one group or organisation that has a complete understanding of the needs of young people in the borough. This means that the issues are not always understood very well by all stakeholders and responses to the needs are fragmented with gaps, for example a young person whose needs are higher than a tier one service, not higher enough for tier three and inappropriate level two services, which means that young person's needs have to get worse before they get the support they need. By having a single point where all stakeholders can look at the needs, the range of support offered and the impact of that support over years, it will ensure that gaps are filled, duplication removed and needs of young people are met in the most suitable, timely and cost effective way.

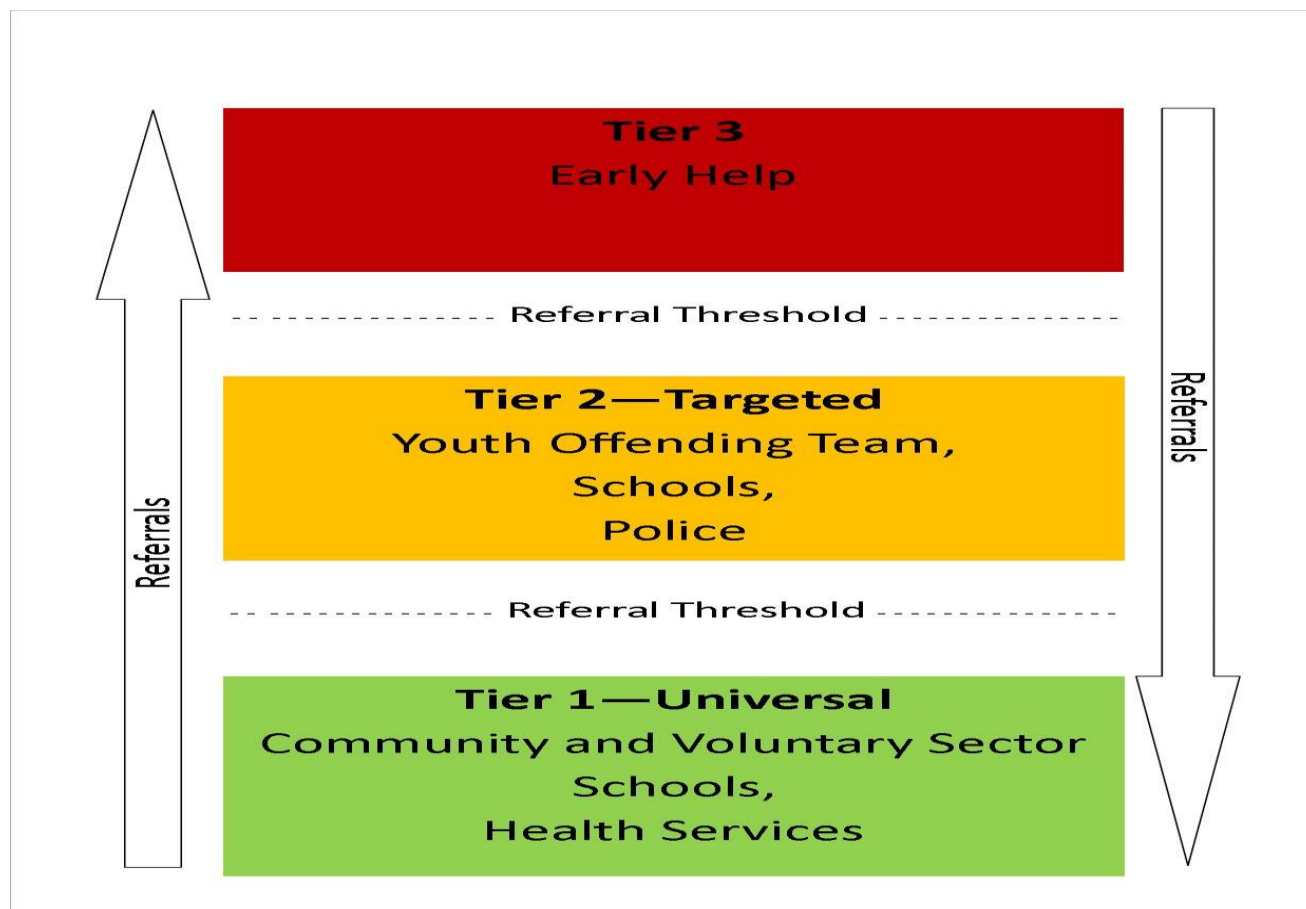
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<sup>5</sup> PANSI March 2016

## Service Tiers

There are three tiers of service provision and young people should be able to be referred between the different services within a tier and between the tiers without noticing. Providers state that their awareness of different services means it is difficult to refer young people into other services. Young people state that it is difficult to find out about the range of different services. In addition to both of these communication issues there is also case study evidence that young people are falling through the gaps.

Case Study: A youth centre providing tier one positive activities had to ban a group of young people from their centre because their anti-social behaviour was out of control and having a negative impact on other young people. The centre tried to ensure that the young people were able to get support through tier 2 and 3, however they did not meet the thresholds for the higher tier services. In the end some of the young people were involved in a serious crime which will have a lasting impact on the young people and the community.





## Mapping information

In total, thirty two youth service providers were invited to complete a service mapping survey developed by Sobus, between July and August 2016. The same survey was also promoted via Sobus' newsletter, website and social media to reach groups that might not have been involved in the partnership meetings.

The survey collected information about the organisations providing services in the borough, the services those organisations provided in the borough, what themes the service addressed, where the service is delivered, a service description, if the service is delivered in partnership, who the funder was, how long the funding was for and how much funding. The two aims of the survey were to;

1. gather information to promote the services available in the borough to young people via the geo mapping
2. provide a clear picture of the services being provided in the borough to providers, commissioners and interested parties to enable a strategic approach to future development and delivery

Information was collected on funding and funding amounts. However this was used for the purpose of this report and will only be shared as cumulative data. *Mapping Survey Form appendix 5*

### Survey Results

Of the thirty two sent a survey, twenty-one organisations responded with a completed survey within the timeframe of this report. Those surveys completed outside of the timeframe of this report will not influence the report but will influence work going forward. Of the twenty-one organisations that responded, they are delivering sixty-four services, with value of over £1,650,000 at thirty-six different locations across the borough.

### Themes

As well as organisational information the providers were asked to identify a primary and secondary theme that the service delivered against. See Figure 1 below. The majority of services have a Positive Activity as their primary theme and Health and Wellbeing and Education and Training second. The main secondary theme is Health and Wellbeing and then Positive Activities. Positive Activities are an important way of engaging young people and then working holistically with the young person on a number of other areas of their lives.

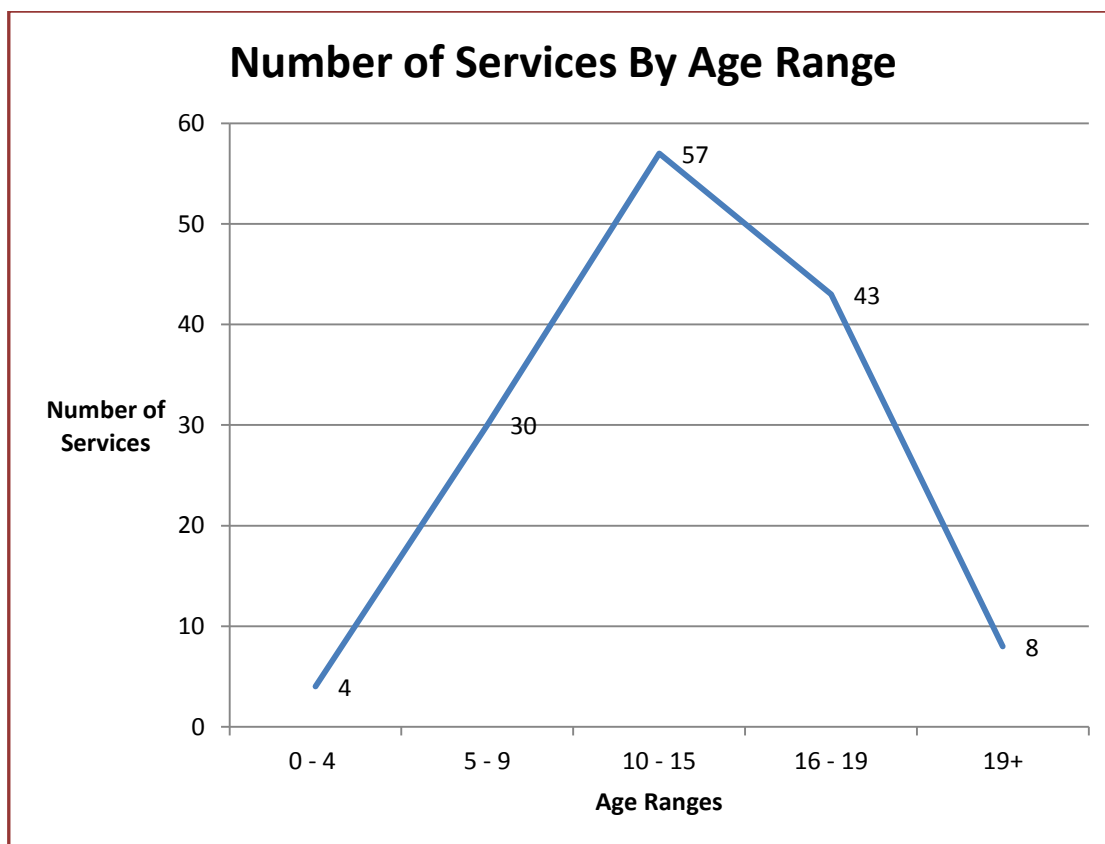
Figure 1:

Theme	Primary Theme of Service	Secondary Theme of Service
Crime and Safety	2	1
Education and Training	16	4
Employability	3	3
Health and Wellbeing	3	37
Housing	0	0
Positive Activities	30	6

### Age

The spread of services across the various age ranges is in line with the main focus of the partnership of 5 -19 years old with the bulk of services in that age range. Most services are open to the 10-15 years range which is an important time for young people as it marks the transition from primary school to secondary school and into the start of GCSE's.

Figure 2:



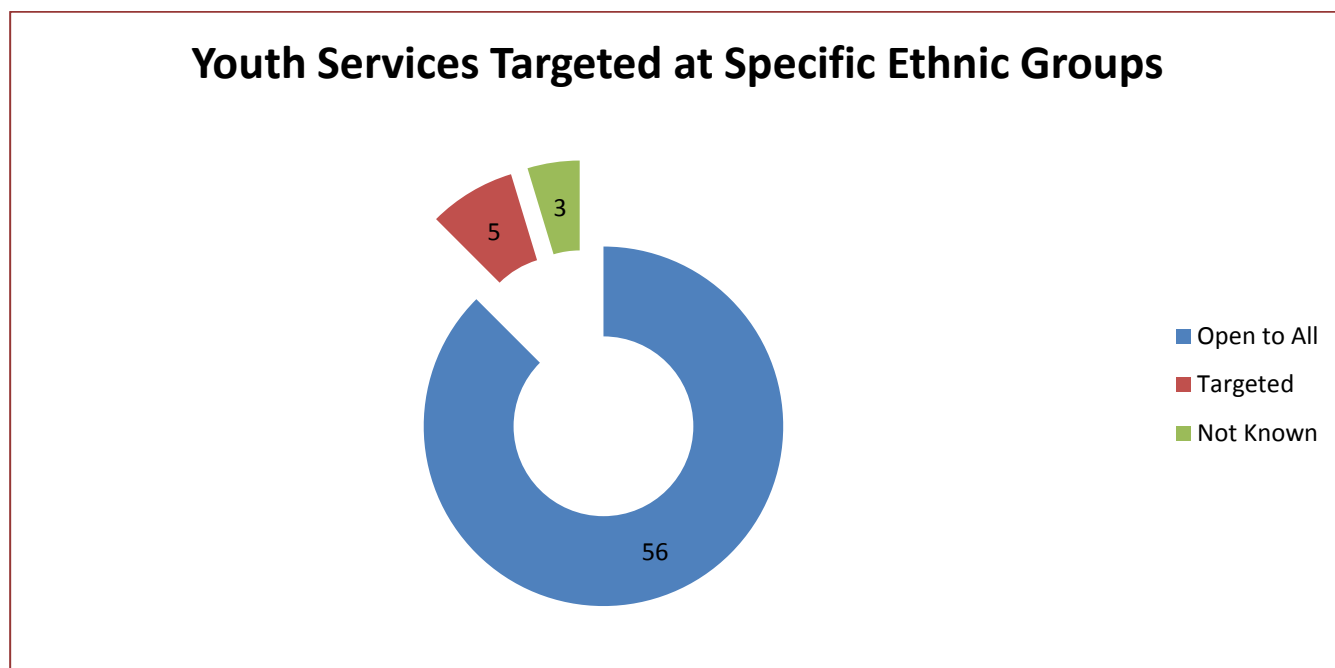
## Gender

All of the services were open to both males and females which is likely to be driven by equality requirements of society and funders. This does highlight that none of the services provided are targeted due to gender reasons such as Female Genital Mutilation and this is likely to be down to the fact that most organisations are providing early intervention or prevention services and may work in partnership to refer young people to specific services that are gender specific, however this would need further investigation in the future.

## Ethnicity

Fifty-six of the sixty-four services were open to all, with only five stating that they target their services at specific ethnic groups. It is important that services are inclusive and that there are opportunities for different ethnic groups to integrate through accessing services of common interest, however, it is also important that young people that need to access services do so. Services should remain inclusive and open to all as long as the needs of young people are being fully met. Targeted services should be considered where there is a specific requirement due to cultural reasons or the high level of need and poor of take up of existing services.

Figure 3:





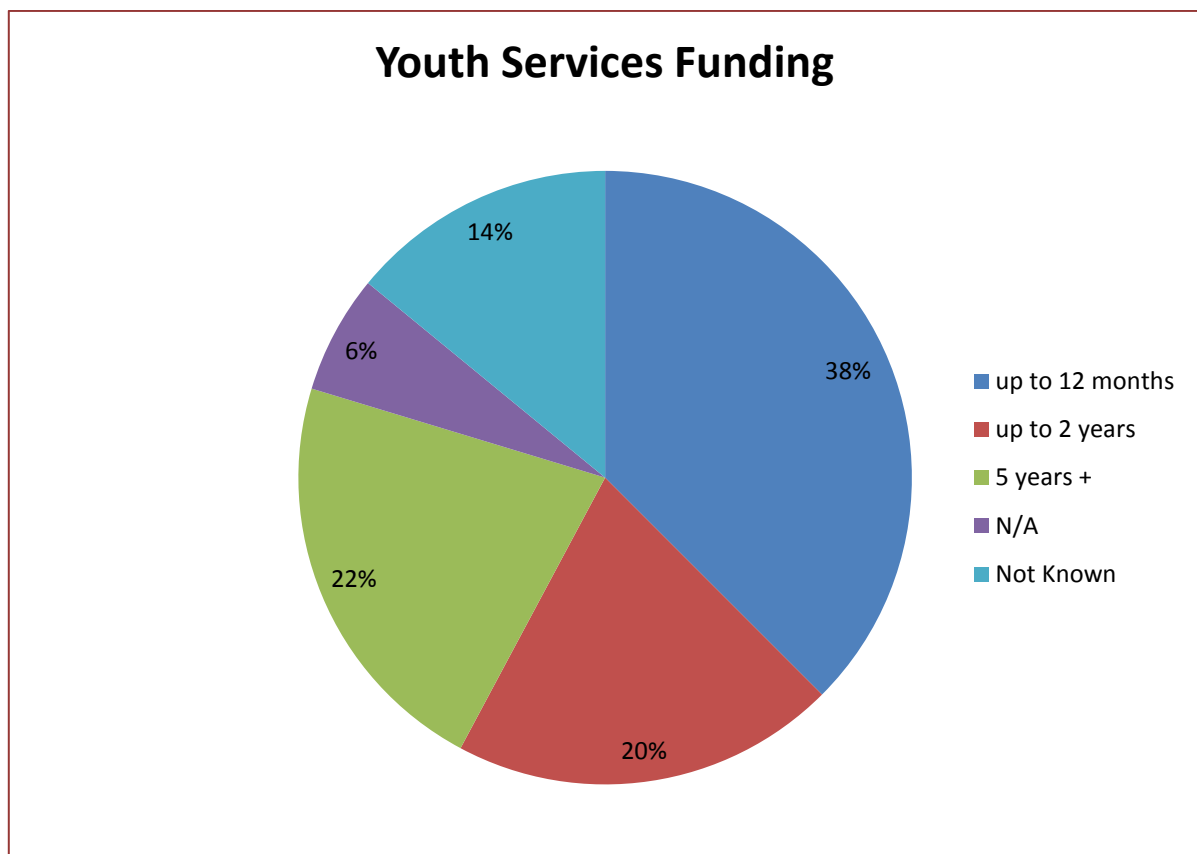
### Disability

14% of services are targeted at people with a disability and 86% are open to all which is important, however from anecdotal evidence through the partnership meetings, even though services say they are open to all it does not always translate into equal access.

### Funding Duration

Youth services require building awareness and trust with young people to help ensure that the impact is maximised. Funding continuation is an issue within the voluntary sector as a whole, however the impact of services stopping and starting can be greater for young people. Therefore the continuation of funding is essential for the sustainability and continuity of services that are high quality and have a meaningful impact with young people. Figure 4 below shows funding for 38% of youth services in the borough is due to end within 12 months and a further 20% had funding for up to 2 years. This means that a large percentage of youth services are in a precarious state in terms of funding.

Figure 4:



### Funding Continuation

In addition to the information on when funding is due to come to an end the services mapping information was also able to identify how likely it was that continuation funding was going to be secured. Of those that responded, 21% of services were not sure if they would get continuation funding, however for 55% of services it was possible or likely. Interestingly, 7% of services had

guaranteed funding and this tended to be faith based services or where a provider had a long standing relationship with a trust funder. 16% of services require fees and or volunteers to run them as there was no specific funding covering the cost of providing the service.

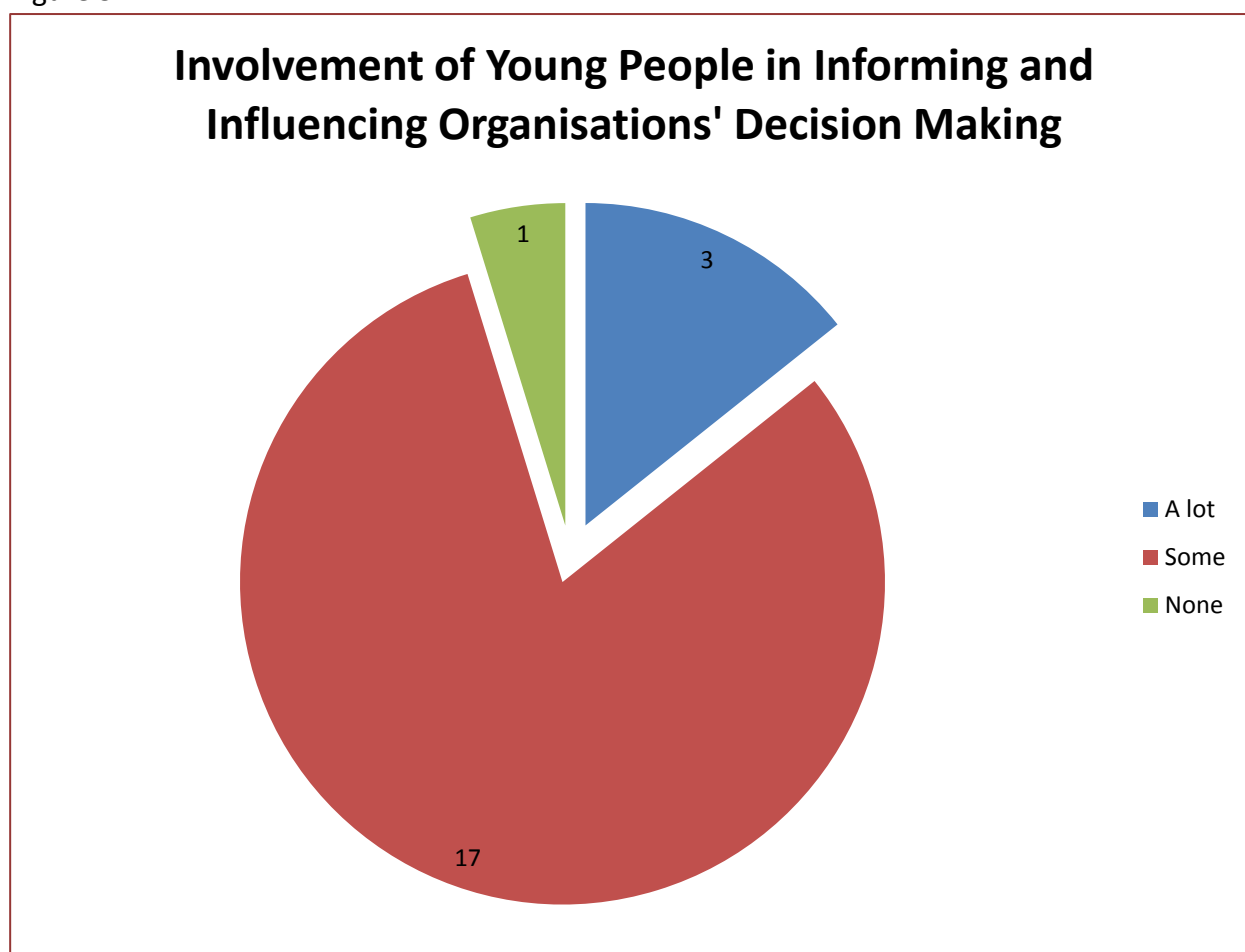
### Partnerships

The amount of services delivered in partnership is very important as it means that the services can have a greater impact, be more sustainable and reach a wider audience. In the borough 53% of the youth services are delivered in partnership with at least one other organisation and another 8% are looking for partners.

### Young People Informing Services

All VCS providers enable young people to inform and influence decision making within their organisations. Figure 5 below shows this does vary with 14% saying that young people inform a lot of the decision making and the remaining 81% saying that young people inform some of their decision making. There are a number of reasons this can vary from size of organisation, capacity of staff and volunteers to type of service and experience. As all partners have agreed to the values which include young people being at the heart of everything we do, there is an opportunity to share learning, good practice and resources to increase the percentage of organisations that have a lot of involvement of young people in decision making.

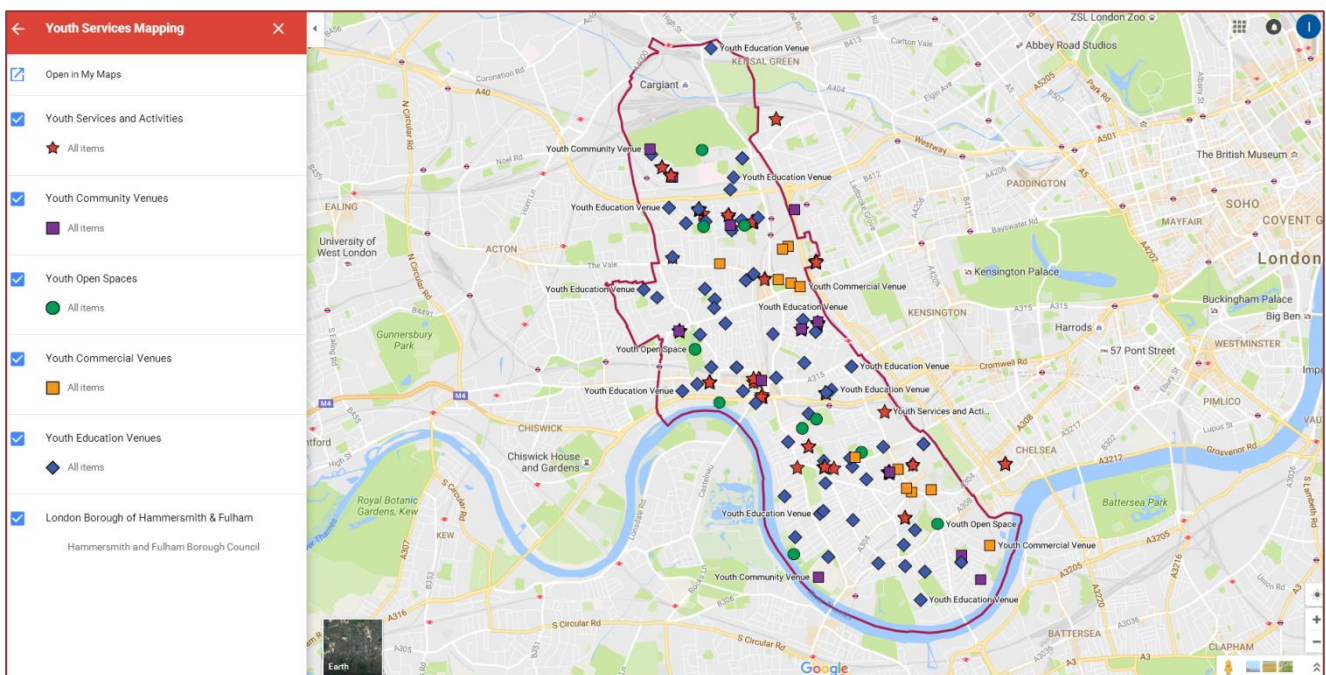
Figure 5:



## Geographic mapping information

From the surveys and other public data such as schools' information, a map of has been compiled of; education venues, youth community venues, youth commercial venues , open spaces with facilities for young people, youth service delivery locations and youth hang out spaces eg places where young people congregate, but there are no specific activities or facilities. A version of the map in figure 6 below can be made publically available via a website and additional information can easily be added or updated in the future where there are gaps in the information, such as uniformed groups or where services change.

Figure 6:



The map clearly demonstrates that there is an even distribution of youth community venues across the borough, represented by purple squares. Venues include Fulham Palace in the south, Lyric in the middle of the borough and Harrow Club in the North. There are more youth community venues in the north of the borough than the south, however the wards of Wormholt and White City and College Park and Old Oak have the first and second highest percentage of young people in the borough respectively.

This is the first geographical mapping exercise that brings together such a broad range of youth services, activities and venues in the borough. The information will be made available to all stakeholders via google maps and it can be embedded into any website including Sobus'. Although this data is very broad and will be useful to a range of stakeholders including commissioners,

providers and young people, there are some gaps including faith groups, uniformed groups and commercial services. It is easy to add more data in the future, however this will require an ongoing resource to both collect new data and upload but also check the existing data to make sure that it remains up to date.

## **Broadening involvement**

The partnership has been very well attended by a range of providers, including those funded by LBHF, those that get do not receive any funding from LBHF, two of the football foundations, the police and LBHF. However for the vision to be achieved the involvement of groups and organisations needs to be broadened including businesses, regeneration initiatives, uniformed groups, faith groups, health providers and H&F Clinical Commissioning.

Businesses could be involved to provide work placements and apprenticeships, mentoring, sponsorship, use of facilities and skills and knowledge. In return the business would increase their profile in the borough, help to develop a bigger pool of talented young people to recruit from locally and contribute to their local community. There will be lots of regeneration of the northern part of Hammersmith and Fulham over the next 20 – 30 years which will be overseen by the Old Oak and Park Royal Development Corporation (OPDC) and this is on the doorstep to two of the wards with the highest number of young people in the borough. The OPDC are interested in engaging with a young people focused partnership and this needs further work in the future to build those links and secure the benefits for local young people. Uniformed groups and faith groups will benefit from being part of a wider network and what that network can offer, but also be able to develop their services in line with the strategy for young people in the borough. Health providers and H&F CCG need to address the health and wellbeing issues for the borough and if they can be engaged in the youth partnership, it will enable them to not only look at health issues for young people but also to develop improved preventative and early intervention health services so that young people grow into adults with healthy lifestyles.

## Key challenges

### Strategy:

The needs of young people are complex and inter-related. The borough is changing rapidly and there is increasingly, wider groups of organisations that need to work together but do not or not at the level they need to. There is a massive need for the various groups and organisations that have an interest in the success and wellbeing of young people to work strategically together. Currently there is not a broad group of stakeholders that 'owns' the needs and opportunities of young people. The partnership work that currently takes place by providers is more operational than strategic and although the LBHF has invested resources in initiating the partnership, this needs to be maintained and developed further to have a long term and strategic approach to addressing the priority themes.

### Communication:

A number of key stakeholders say there is a problem with communication that needs to be addressed so that services are more effective, accessed more easily and there is a better and more joined up approach to meeting the needs and aspirations of young people in the borough.

Young people say they struggle to find out information about the range of services that are available as there is no single point for all services which is up to date and promotes the information through the social media that they use. Some providers have said they are concerned about using social media because of negative experiences and not having the skills or experience, but also that they would benefit by being able to access a central point of information when referring clients.

Commissioners want a single point where they can engage with a range of stakeholders to ensure that their strategies are well informed and effective.

### Fragmentation:

Lots of the service providers have the same or similar issues. However, in many cases they are working on their own or in small groups which means their impact is more limited than if they had been working in a bigger group, or that they are duplicating work. More people are looking to engage with businesses for fundraising, corporate volunteering or creating opportunities for young people. However some groups do not have the resources to even start the process, while others are duplicating the work of others and this makes it harder for businesses to know who to work with and how.

## Funding:

Fundraising is an issue for all VCS organisations and this is no different in the youth sector. Smaller organisations have very limited resources to fundraise or engage in bigger bids and organisations with fundraising capacity obviously focus this on fundraising for their own organisation. The main issue for young people and organisations that want to refer into services is continuity of service provision. Services that start and stop mean that young people find it harder to engage and referring organisations struggle to keep up with what services are still available. There is a need for a central fundraising resource that can support groups with fundraising and lead on larger partnership bids so that the maximum amount of resources are brought into the area.

## Barriers to Aspiration:

There are two main points that need to be addressed for young people to thrive in the borough and those are housing and meaningful employment. These have both been identified as barriers to aspiration which means that long before young people need to find a job or a house they have a barrier on their thinking and decision making. If young people in the borough do not believe that there will be the opportunity to get meaningful employment which means they can live in the borough or where they would like to live, then this becomes a barrier to aspiration. Some young people have said 'what's the point in getting good grades, work experience or volunteering if it still means we won't have the life choices that we would want'. If young people are to thrive in the borough then these two key barriers to aspiration must be addressed by working in partnership with statutory and private sector.

## Training and Learning:

A number of organisations said that it would be useful to have shared training and learning opportunities and the first area that was raised was Cyberbullying and Safety Online. A short course was organised by Sobus in June 2016, delivered by the Police and attended by eight organisations. The feedback was that the content was very useful and that there was a need for more of this type of training as well as other standard and bespoke training. Shared training is one example of where duplication could be reduced and the impact could be increased so that everyone was working to a shared standard. The standard training included safeguarding, risk assessments, first aid and dealing with challenging behaviour. Some of the standard training such as first aid is already provided locally by H&F Volunteer Centre and this could be promoted to the youth organisations and other training could be organised so that it is delivered locally for providers. The bespoke training could include; How to make your service more accessible to young people with disabilities, Holistic assessments and referring to local services, Increasing the voice and influence of young people in your organisation and Marketing masterclass. These courses would need to be organised and could be delivered by partners or an external provider.

### Inclusivity:

People with disabilities will have specific needs and there is a need to work with providers that want their services to be open to all to be able to make that happen. Staff may need mentoring and training on how to ensure young people with disabilities are enabled to access services and equally supported in the service. This might also include supporting the rest of the group to be open and inclusive. There will also be practical considerations such as accessible venues, transport, and equipment or training materials.

### Client Information Sharing:

Due to data protection and building trust with young people there are lots of barriers to client information sharing. Both these issues are important as young people do not want their information shared widely in a way that might be detrimental to themselves and their privacy. In some cases it does mean that young people are not made aware of services that might be of real benefit to them and therefore this lack of information sharing is detrimental in itself. Client information sharing is a challenging issue. West London Zone has made progress in this area and the learning could be shared and replicated where appropriate and with the consent of young people and providers.

### Priority Themes:

From the mapping there are one or two priority themes that have more services provision than others. It has been hard to identify if the level of services provision in the priority themes with less provision is adequate and this does require more investigation. There should be clear links between positive activities and the other priority themes to ensure young people have access to support that meets their range of needs and that the positive activities enable this.



## Recommendations

The Youth Partnership is developed and empowered so that it can be sustainable and deliver its vision.

- 1. Further develop a broad group to 'own' the needs and opportunities of young people in H&F, ensuring they are addressed holistically and be a reference point for commissioners and researchers such as public health.**
- 2. The Youth Partnership is seeking to apply for funding from John Lyons and wishes to pursue match funding from LBHF to become the Young Hammersmith and Fulham Foundation. The Foundation would make the work of the Youth Partnership sustainable in the long term and take forward key parts of the recommendations of this report.**

*John Lyons Foundations Information Sheet appendix 6*

- 3. Establish a system that all providers use and young people refer to ensure clear communications between partners and with service users. This can include tools such as:**
  - a. Online mapping
  - b. Central social media channel
  - c. Emails and forum
- 4. Groups work together to apply for large funding pots and commissioning opportunities to deliver work. Due to limited existing resources in the sector this will require:**
  - a. employing a CEO and a fundraiser or development manager
  - b. pull together partnership bids
  - c. act as a lead partner and accountable body
- 5. Work with a range of partners including businesses, to create opportunities for partners and young people.**
  - a. Engage business to offer a single point to link with all youth organisations working with young people that has complete oversight of the needs and opportunities for young people in the borough and co-ordinating services to ensure it is joined up and has maximum impact, where the businesses can contribute to the vision by:
  - b. Donating staff time to the foundation by joining the board of trustees or providing professional advice in finance, marketing and networks

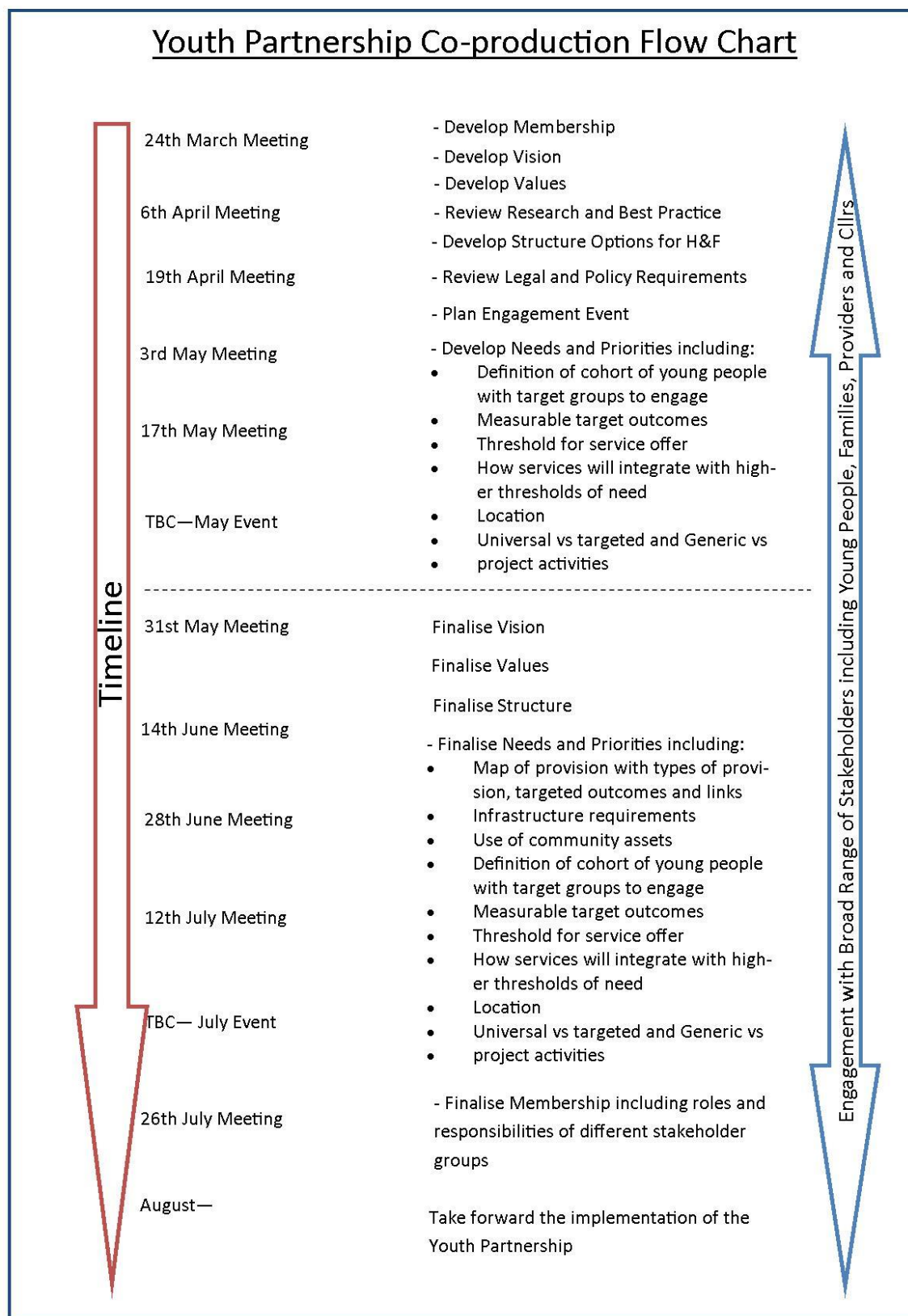


- c. Offering work placements / internships and apprenticeships to local young people
  - d. Offering mentoring to young people
  - e. Giving use of company facilities for meetings, events and training
  - f. Donating money or in kind goods or services
- 6. Membership rules to be established ensuring that the partnership has representation from young people, VCS providers, social enterprise, faith organisations, statutory sector and private business.**
- 7. Work to broaden direct involvement from uniformed groups and faith organisations and indirect involvement from schools, health visitors etc to ensure all partners working towards shared aims and objectives.**
- 8. All stakeholders work together to share learning, training, skills and knowledge. This sharing of learning could include; establishing a system for client information sharing, developing services to be truly inclusive and general peer support.**
- 9. Partners work together to ensure the council early help services are aligned to flow into and from commissioned targeted services and then into and out of universal services that are commissioned and fundraised for by the VCS.**

## Supporting documents

### Youth Partnership Attendee List appendix 1

Organisation	Role		Organisation	Role
LBHF	Youth Offending Service		Street Games	Partnership Manager
Bush Theatre	Community Producer		LBHF	Sports Development Manager
LBHF	Youth Mayor		LBHF	Public Health Manager
Let Me Play	Director		Action On Disability	Youth service Manager
LBHF	Childrens Commissioning		St Pauls Church Hammersmith	Youth and Students Pastor
Ambition UK	Director of Strategy & Membership		LBHF	Deputy Youth Mayor
Lyric	Producer		LBHF	Priority Crimes Officer
H&F Mind	Education Services		Masbro Centre	Senior Youth Worker
H&F Mind	Business Development Manager		Action On Disability	Youth Inclusion Coordinator
H&F Mind	Learn Well Advisor		LBHF	Commissioning Officer
John Lyons Trust	Grants Assistant		Parents Active	
Let Me Play	Sports and Activities Manager		Fulham Police Station	Schools / Youth Office
West London College	Head of Student Services		Harrow Club	Director
MET Police	PC		LBHF	Community Sports Coordinator
West London College	Community Engagement Manager		Fulham FC Foundation	Youth and Communities Officer
West London Zone	Partnerships Manager		Brunswick Club	Senior Youth & Development Worker
John Lyons Trust	Grants and Public Policy Manager		Citywest Leisure	CEO
MET Police	Youth Partnership		Desta Consortium	CEO
West London Action for Children	Assistant Fundraiser and Finance Officer		LBHF	Practice Manager - Education
H&F Mencap	Self Advocacy Manager		Play Association	CEO
West London Action for Children	Chief Executive		Harrow Club	Youth and Community Manager
Lyric	Producer		LBHF	Contracts & Performance Officer - CIT
QPR FC Foundation	Youth and Communities Manager		H&F CCG	Youth Commissioner
QPR FC Foundation	Education and Employability Officer			





Public Health  
England

## Child Health Profile

March 2016

### Hammersmith and Fulham

This profile provides a snapshot of child health in this area. It is designed to help the local authority and health services improve the health and wellbeing of children and tackle health inequalities.

#### The child population in this area

	Local	London	England
<b>Live births in 2014</b>			
	2,440	127,399	661,496
<b>Children (age 0 to 4 years), 2014</b>			
	11,800 (6.6%)	628,600 (7.4%)	3,431,000 (6.3%)
<b>Children (age 0 to 19 years), 2014</b>			
	36,700 (20.6%)	2,103,800 (24.6%)	12,907,300 (23.8%)
<b>Children (age 0 to 19 years) in 2025 (projected)</b>			
	38,400 (20.7%)	2,392,900 (24.7%)	13,865,500 (23.7%)
<b>School children from minority ethnic groups, 2015</b>			
	11,873 (73.0%)	731,710 (71.3%)	1,931,855 (28.9%)
<b>Children living in poverty (age under 16 years), 2013</b>			
	23.8%	21.8%	18.6%
<b>Life expectancy at birth, 2012-2014</b>			
Boys	79.7	80.3	79.5
Girls	84.1	84.2	83.2

#### Children living in poverty

Map of London, with Hammersmith and Fulham outlined, showing the relative levels of children living in poverty.



Contains Ordnance Survey data

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Data sources: Live births, Office for National Statistics (ONS); population estimates, ONS mid-year estimates; population projections, ONS interim 2012-based subnational population projections; black/ethnic minority maintained school population, Department for Education; children living in poverty, HM Revenue & Customs (HMRC); life expectancy, ONS.

#### Key findings

Children and young people under the age of 20 years make up 20.6% of the population of Hammersmith and Fulham. 73.0% of school children are from a minority ethnic group.

The health and wellbeing of children in Hammersmith and Fulham is mixed compared with the England average. Infant and child mortality rates are similar to the England average.

The level of child poverty is worse than the England average with 23.8% of children aged under 16 years living in poverty. The rate of family homelessness is worse than the England average.

9.6% of children aged 4-5 years and 23.1% of children aged 10-11 years are classified as obese.

Local areas should aim to have at least 90% of children immunised in order to give protection both to the individual child and the overall population. The MMR immunisation rate is lower than 90%. The immunisation rate for diphtheria, tetanus, polio, pertussis and Hib in children aged two is lower than 90%.

Nationally, asthma is the most common long-term condition in childhood. Locally there were 40 emergency admissions of children because of asthma in 2014/15. This gives a rate which is lower than the average for England.

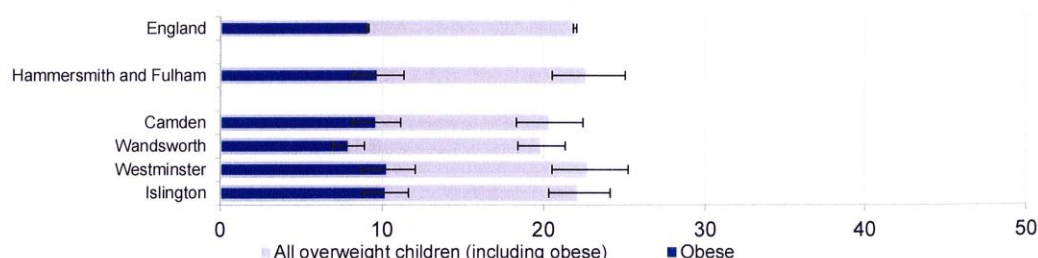
Any enquiries regarding this publication should be sent to [info@chimat.org.uk](mailto:info@chimat.org.uk).



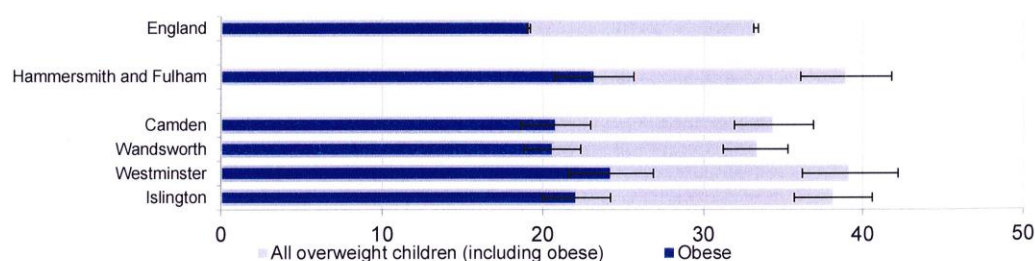
## Childhood obesity

These charts show the percentage of children classified as obese or overweight in Reception (aged 4-5 years) and Year 6 (aged 10-11 years) by local authority compared with their statistical neighbours. Compared with the England average, this area has a similar percentage in Reception and a worse percentage in Year 6 classified as obese or overweight.

### Children aged 4-5 years classified as obese or overweight, 2014/15 (percentage)



### Children aged 10-11 years classified as obese or overweight, 2014/15 (percentage)

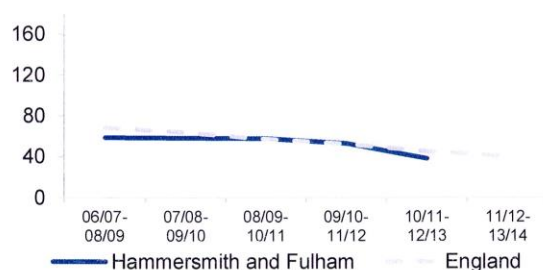


Note: This analysis uses the 85th and 95th centiles of the British 1990 growth reference (UK90) for BMI to classify children as overweight and obese. I indicates 95% confidence interval. Data source: Public Health Outcomes Framework

## Young people and alcohol

Data on admissions of children and young people who are admitted to hospital because they have a condition wholly related to alcohol is not available for every year. Trend analysis is therefore limited.

### Young people aged under 18 admitted to hospital with alcohol specific conditions (rate per 100,000 population aged 0-17 years)

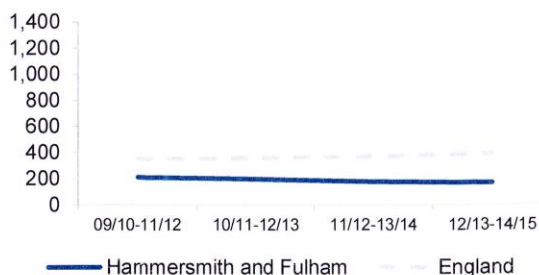


Data source: Public Health England (PHE)

## Young people's mental health

In comparison with the 2009/10-2011/12 period, the rate of young people aged 10 to 24 years who are admitted to hospital as a result of self-harm is similar in the 2012/13-2014/15 period. The admission rate in the 2012/13-2014/15 period is lower than the England average\*. Nationally, levels of self-harm are higher among young women than young men.

### Young people aged 10 to 24 years admitted to hospital as a result of self-harm (rate per 100,000 population aged 10 to 24 years)

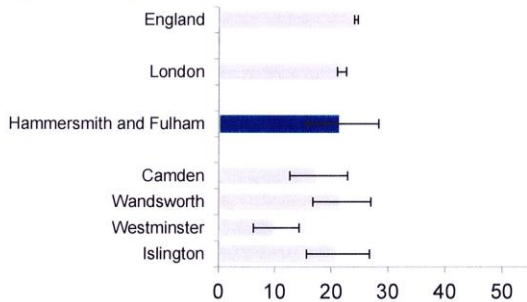


\*Information about admissions in the single year 2014/15 can be found on page 4

Data source: Hospital Episode Statistics, Health and Social Care Information Centre

These charts compare Hammersmith and Fulham with its statistical neighbours, the England and regional average and, where available, the European average.

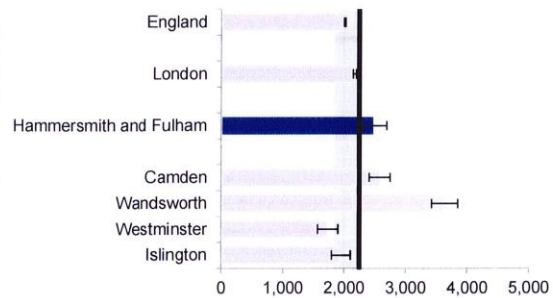
### Teenage conceptions in girls aged under 18 years, 2013 (rate per 1,000 female population aged 15-17 years)



In 2013, approximately 21 girls aged under 18 conceived for every 1,000 females aged 15-17 years in this area. This is similar to the regional average. The area has a similar teenage conception rate compared with the England average.

Source: Conceptions in England and Wales, ONS

### Chlamydia detection, 2014 (rate per 100,000 young people aged 15 - 24 years)



Chlamydia screening is recommended for all sexually active 15-24 year olds. Increasing detection rates indicates better targeting of screening activity; it is not a measure of prevalence. Areas should work towards a detection rate of at least 2,300 per 100,000 population. In 2014, the detection rate in this area was 2,473 which is better than the minimum recommended rate.

Source: Public Health Outcomes Framework. The shaded area from 1,900 shows the range of values approaching the minimum recommended rate of 2,300 (the black line).

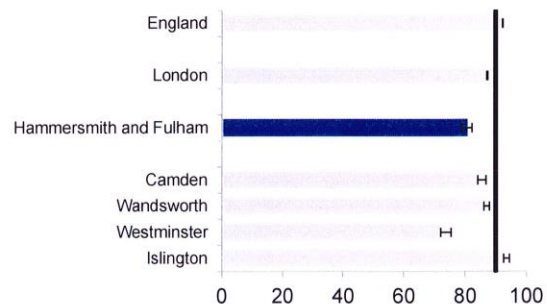
### Breastfeeding at 6 to 8 weeks, 2014/15 (percentage of infants due 6 to 8 week checks)



86.6% of mothers in this area initiate breastfeeding when their baby is born. This area has a lower percentage of babies who have ever been breastfed compared with the European average of 89.1%\*. There is no data for breastfeeding at six to eight weeks.

\* European Union 21 average, 2005. Source: Organisation for Economic Co-operation and Development (OECD) Social Policy Division  
Source: Public Health Outcomes Framework

### Measles, mumps and rubella (MMR) immunisation by age 2 years, 2014/15 (percentage of children age 2 years)



Less than 90% (the minimum recommended coverage level, shown as a vertical black line on the chart above) of children have received their first dose of immunisation by the age of two in this area (80.8%). By the age of five, only 70.8% of children have received their second dose of MMR immunisation. In London, there were 32 laboratory confirmed cases of measles in young people aged 19 and under in the past year.

Sources: Public Health Outcomes Framework; Public Health England

Note: Where data is not available or figures have been suppressed, no bar will appear in the chart for that area.



The chart below shows how children's health and wellbeing in this area compares with the rest of England. The local result for each indicator is shown as a circle, against the range of results for England which are shown as a grey bar. The red line indicates the England average. The key to the colour of the circles is shown below.

- Significantly worse than England average    ● Not significantly different  
● Significantly better than England average    ◆ Regional average

25th percentile    England average    75th percentile

	Indicator	Local no.	Local value	Eng. ave.	Eng. Worst		Eng. Best
Premature mortality	1 Infant mortality	12	4.7	4.0	7.2		1.6
	2 Child mortality rate (1-17 years)	3	7.1	12.0	19.3		5.0
Health protection	3 MMR vaccination for one dose (2 years)    ● >=90%    ● <90%	2,014	80.8	92.3	73.8		98.1
	4 Dtap / IPV / Hib vaccination (2 years)    ● >=90%    ● <90%	2,133	85.6	95.7	79.2		99.2
	5 Children in care immunisations	120	96.0	87.8	64.9		100.0
Wider determinants of ill health	6 Children achieving a good level of development at the end of reception	1,135	68.6	66.3	50.7		77.5
	7 GCSEs achieved (5 A*-C inc. English and maths)	580	58.7	57.3	42.0		71.4
	8 GCSEs achieved (5 A*-C inc. English and maths) for children in care	-	-	12.0	8.0		42.9
	9 16-18 year olds not in education, employment or training	90	2.5	4.7	9.0		1.5
	10 First time entrants to the youth justice system	63	529.3	409.1	808.6		132.9
	11 Children in poverty (under 16 years)	6,775	23.8	18.6	34.4		6.1
	12 Family homelessness	347	4.3	1.8	8.9		0.2
	13 Children in care	185	55	60	158		20
Health improvement	14 Children killed or seriously injured in road traffic accidents	3	8.8	17.9	51.5		5.5
	15 Low birthweight of term babies	71	3.2	2.9	5.8		1.6
	16 Obese children (4-5 years)	127	9.6	9.1	13.6		4.2
	17 Obese children (10-11 years)	263	23.1	19.1	27.8		10.5
	18 Children with one or more decayed, missing or filled teeth	-	28.4	27.9	53.2		12.5
	19 Hospital admissions for dental caries (1-4 years)	67	718.4	322.0	1,406.8		11.7
	20 Under 18 conceptions	47	21.3	24.3	43.9		9.2
	21 Teenage mothers	12	0.5	0.9	2.2		0.2
Prevention of ill health	22 Hospital admissions due to alcohol specific conditions	-	-	40.1	100.0		13.7
	23 Hospital admissions due to substance misuse (15-24 years)	19	84.5	88.8	278.2		24.7
	24 Smoking status at time of delivery	52	2.4	11.4	27.2		2.1
	25 Breastfeeding initiation	1,966	86.6	74.3	47.2		92.9
	26 Breastfeeding prevalence at 6-8 weeks after birth	-	-	43.8	19.1		81.5
	27 A&E attendances (0-4 years)	9,754	826.1	540.5	1,761.8		263.6
	28 Hospital admissions caused by injuries in children (0-14 years)	251	85.2	109.6	199.7		61.3
	29 Hospital admissions caused by injuries in young people (15-24 years)	243	119.1	131.7	287.1		67.1
	30 Hospital admissions for asthma (under 19 years)	40	113.3	216.1	553.2		73.4
	31 Hospital admissions for mental health conditions	42	124.3	87.4	226.5		28.5
	32 Hospital admissions as a result of self-harm (10-24 years)	46	157.5	398.8	1,388.4		105.2

**Notes and definitions** - Where data is not available or figures have been suppressed, this is indicated by a dash in the appropriate box.

1 Mortality rate per 1,000 live births (age under 1 year), 2012-2014

2 Directly standardised rate per 100,000 children age 1-17 years, 2012-2014

3 % children immunised against measles, mumps and rubella (first dose by age 2 years), 2014/15

4 % children completing a course of immunisation against diphtheria, tetanus, polio, pertussis and Hib by age 2 years, 2014/15

5 % children in care with up-to-date immunisations, 2015

6 % children achieving a good level of development within Early Years Foundation Stage Profile, 2014/15

7 % pupils achieving 5 or more GCSEs or equivalent including maths and English, 2014/15

8 % children looked after achieving 5 or more GCSEs or equivalent including maths and English, 2014 (provisional)

9 % not in education, employment or training as a proportion of total age 16-18 year olds known to local authority, 2014

10 Rate per 100,000 of 10-17 year olds receiving their first reprimand, warning or conviction, 2014

11 % of children aged under 16 living in families in receipt of out of work benefits or tax credits where their reported income is less than 60% median income, 2013

12 Statutory homeless households with dependent children or pregnant women per 1,000 households, 2014/15

13 Rate of children looked after at 31 March per 10,000 population aged under 18, 2015

14 Crude rate of children age 0-15 years who were killed or seriously injured in road traffic accidents per 100,000 population, 2012-2014

15 Percentage of live-born babies, born at term, weighing less than 2,500 grams, 2014

16 % school children in Reception year classified as obese, 2014/15

17 % school children in Year 6 classified as obese, 2014/15

18 % children aged 5 years with one or more decayed, missing or filled teeth, 2011/12

19 Crude rate per 100,000 (age 1-4 years) for hospital admissions for dental caries, 2012/13-2014/15

20 Under 18 conception rate per 1,000 females age 15-17 years, 2013

21 % of delivery episodes where the mother is aged less than 18 years, 2014/15

22 Crude rate per 100,000 under 18 year olds for alcohol specific hospital admissions, 2011/12-2013/14

23 Directly standardised rate per 100,000 (age 15-24 years) for hospital admissions for substance misuse, 2012/13-2014/15

24 % of mothers smoking at time of delivery, 2014/15

25 % of mothers initiating breastfeeding, 2014/15

26 % of mothers breastfeeding at 6-8 weeks, 2014/15

27 Crude rate per 1,000 (age 0-4 years) of A&E attendances, 2014/15

28 Crude rate per 10,000 (age 0-14 years) for emergency hospital admissions following injury, 2014/15

29 Crude rate per 10,000 (age 15-24 years) for emergency hospital admissions following injury, 2014/15

30 Crude rate per 100,000 (age 0-18 years) for emergency hospital admissions for asthma, 2014/15

31 Crude rate per 100,000 (age 0-17 years) for hospital admissions for mental health, 2014/15

32 Directly standardised rate per 100,000 (age 10-24 years) for emergency hospital admissions for self-harm, 2014/15

# Crime – victims

**Crime victims aged 18-25 as a percentage of all crime victims, 2015**



*Data source: Met Police; Crime and safety teams*



# Most common crime types

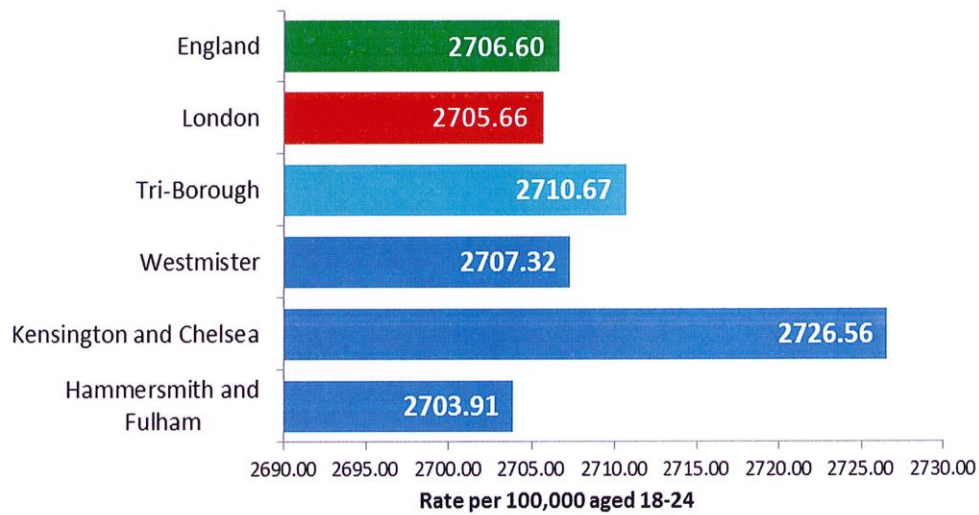
They make more than 80% of all crimes

Crime type	Number	Percentage
Other theft	4693	30.42%
Theft Person	2840	18.41%
Common Assault	1150	7.45%
ABH	904	5.86%
Burglary Dwelling	613	3.97%
Robbery person	601	3.90%
GBH/Wound	578	3.75%
Theft from MV	555	3.60%
Theft of cycle	487	3.16%
Burglary Non Dwelling	327	2.12%

*Data source: Met Police; Crime and safety teams*

# Learning disabilities

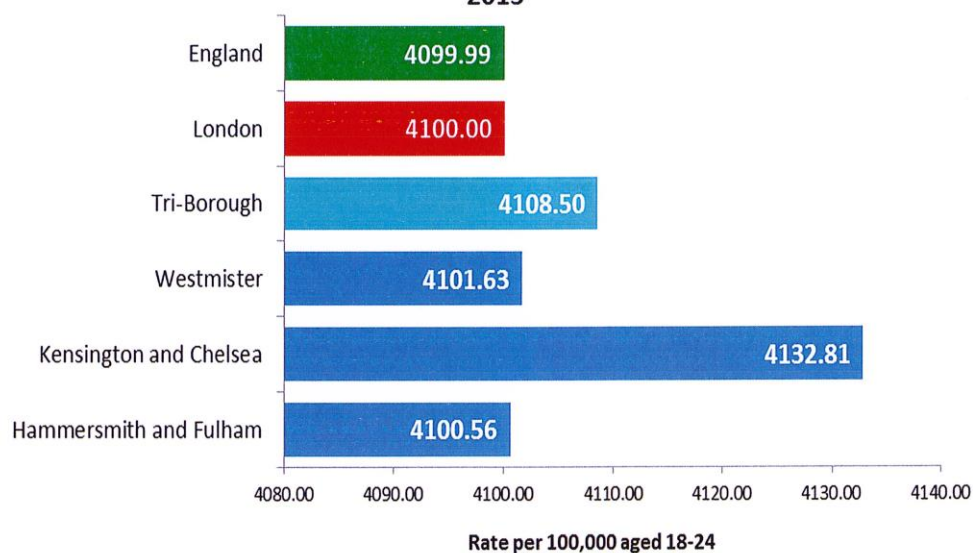
People aged 18-24 predicted to have a learning disability, 2015



Data source: PANSI March 2016

# Physical disability

People aged 18-24 predicted to have a moderate physical disability,  
2015



Data source: PANSI March 2016

## Key Issues

### H & W (1.)

- Reattending
- Housing & homelessness + LAC
- Mental Health
- Money Management. + employment.
- Childhood Obesity + access to food
- Complex + multiple issues - poverty.
- Staff capacity to facilitate diversion + activity.
- More outreach to engage challenging YP.  
- targeted - access

## HEALTH & WELL-BEING. (2)

- NEEDS: • Positive engagement, building self-esteem, role models, engaging with youth clubs.
  - ↳ focus on challenging areas
  - Social Inclusion
  - Raising Awareness.
- Engagement - Street Outreach with YOT & GAMCS.
  - ↳ help with housing & NEET.
  - Issue of re-offending; coming up with new ideas
  - Working with whole families
  - Issue: Housing + Homelessness. referral center
    - ↳ LAC.
    - ↳ + YOT
    - ↳ + virtual school.
- LYRIC - (0-25yrs) - Arts based classes, working with schools
  - Targeted programmes for at risk/vulnerable group
  - Rewind - working with those at risk of exclusion
  - Drop-in for new group. - (free)
  - Issue: Mental Health provision and access
  - Issue: Money management & employment

- Children's Commissioning - Youth Clubs - <sup>H&W(3.)</sup>
  - Brommick
  - Sudgrave
  - Let me Play.
- Issue: Collating all these services  
↳ (this partnership)

- Public Health: Childhood Obesity Issue
  - ↳ deprivation ↳ access
  - ↳ joined up multi-agency response needed.

- VAWG / GANGS.

- Counselling & Therapy - U19 yrs. <sup>with schools</sup>
  - Dad's Groups
  - Parent's groups
- Issue: Access; child-care when accessing services  
esp. low income families.
- Issue: Complex/multiple issues in one case - <sup>poverty</sup>
  - DV
  - bullying.

- YOT: <sup>- DV</sup> <sup>- Mental Health</sup> <sup>- PTSD</sup>
  - ⇒ appropriate referrals / <sup>eg mechanism</sup> provision
  - ⇒ getting YP to engage → issue
    - ↳ outreach
    - ↳ having access, accompanying.
    - ↳ needs to be directly tailored
    - ↳ part of conditions on orders (positive requirements)
- e.g. - THE BIKE PROJECT
  - ↳ all equipment stolen!!!
- Issue: facilitating diversion with limited staff capacity! (YOT)

• LINKS: → LYRIC <sup>H&W (4.)</sup> and SafeCamp - Kevin  
to attract YP to these available services.

→ SafeCamp - lunches an issue - child hood obesity  
↳ decent food at right price - access.  
↳ clothes. ↳ providing fruit in place of biscuit

## TRAINING & EDUCATION

- LOCAL OFFER INFO - WHO IS ORGANISING IT? ACTION PLAN (CONTACT)
- WEST LONDON ZONE MODEL FOR 16+ TO COORDINATE + LINK TOGETHER SUPPORT IN EET.
  - IS NEET DATA CORRECT?
- HARD TO REACH YP'S?
- TARGET THOSE OUT OF THE SYSTEM. MIND, CAMS ETC..., HOMELESS CHARITIES, LOCAL ESTATES, YOUTH CLUBS, SCHOOLS + UNITS (PRO'S).
- SPORT, MUSIC, ARTS + SKILLS MAIN ACTIVITIES THAT YOUNG PEOPLE WANT TO PARTICIPATE IN.
- COMBINED APPROACH TO SUPPORT YP'S GETTING JOBS WITH CORPORATES; SUPPORT FROM COUNCIL



- Education ⇒ they feel they can't achieve so turn to 'achieving' in crime instead.
  - ⇒ Self-esteem, drawing on their skills, access to EET that they'll engage in.
    - e.g. - Jamie Oliver Foundation
    - St George - construction ⇒ limited uptake
    - ↳ needs to be on orders and easily accessible ⇒ need resource to assist YP to get there on time & engaged/supported
      - (- travel costs - appropriate clothing)
      - ↳ spend to save.
- Direct support workers needed like Family Support.
  - ↳ 1:1 mentoring. ↳ taking them to the activity/school etc.
  - ↳ shows we actually care about their success
- Prison isn't a deterrent ⇒ it's safe, warm, food, bed.
- Improving home-life. - improving knowledge & safe-guarding online and in relationships, cyber-bullying.
  - ← gangs + street
    - SREs x2 (through early help)
    - revenge porn
- Consequences of crime - lack of understanding
  - joint enterprise

LBHF = low NEET cohort.

= 79% young people are NEET.

- question is that figure correct

ONS = new NEET figures

= ~~15%~~ = Why would be NEET

- 0 hours contract.

- low paid employment don't stay in jobs.

- Why do yp become NEET

= Recurring factors.

= key areas in the borough.

- Change of culture

- What it means to get employed.

- Can we get in down.

Generation Y = multiple job roles

Z = one thing well = online generation.

Future NEET cohort who has access to technology.

- Captive audience through accessible.

\* Working with men = connecting yp to Edu & Employment.

- Connect to Corporates.

- Job fairs.

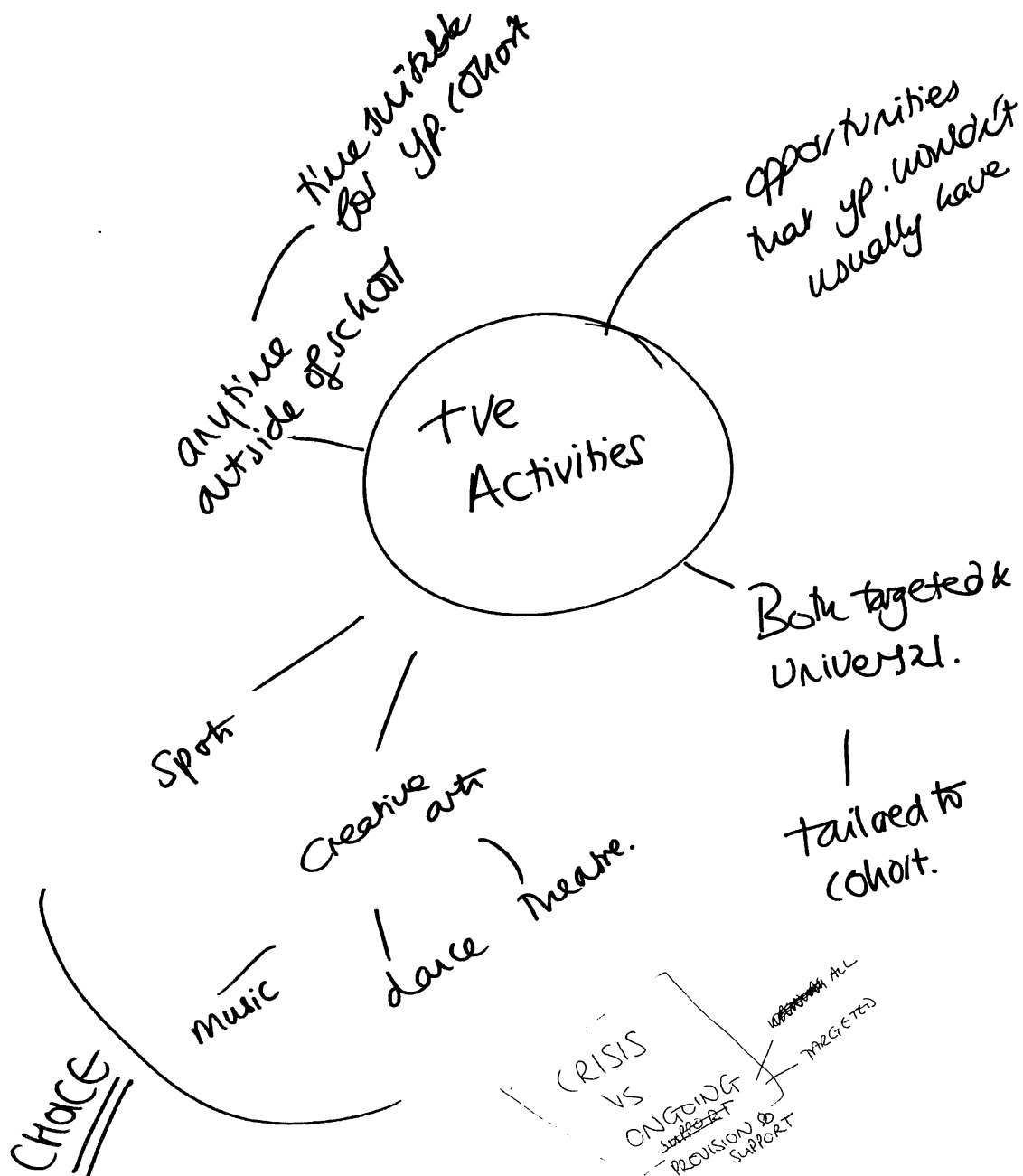
-

\* Albena = contra contracting = Earls Court.

- NEET education links to crimes.

- Get a job = how do we support them beyond the first job into a career.

- Access professional network.





What works? - Activities responsive to local need. - understanding local need / presence  
- local relationship (traveller community)

- Location - where yp. live / congregate. - areas of deprivation.

[Schools / community links / familial links] A40 boundary. East Acton Boundary.

- Different levels of engagement - open access show-up.  
- meeting yp. @ their point of need. - intensive targeted.  
- Good coaches - integration. (girls only have their place)  
- Choice / Variety. - Relationships - developing the network.  
- Role models. - yp doing things for themselves.

What doesn't work?

- GAA  
- Boxing.  
- translating yp into leaders / women mentors  
- Communicating with young people.  
- Co-ordinating offer → referral pathway

- Young women of particularly travelling community / young women.  
- Ability to access opportunities for offers.

Challenges

- Transition (primary - secondary)  
- Schools.

Ages:

upto 10 yrs - not a problem  
10/11 yrs +  
L 4r. 6.

## CRIME & SAFETY : (KENN SMITH - POLICE) (YOUTH) + DORIS

- Young females committing crime
- MOPED related crime
- Ways to tackle issue through youth clubs etc.

DJ role  $\Rightarrow$  YOT Police officer (10-18), particularly gangs/knife crime

- Issue of 18 yrs age limit
- Engaging in the activity, support + housing.
- Types of crime j - reoffending MV crime (Tomv)
  - $\hookrightarrow$  even 10 year olds  $\hookrightarrow$  crime on a moped
  - $\hookrightarrow$  older people are recruiting them.
  - $\hookrightarrow$  moving across boroughs to avoid detection through officers recognizing
- Live reoffending tracker.

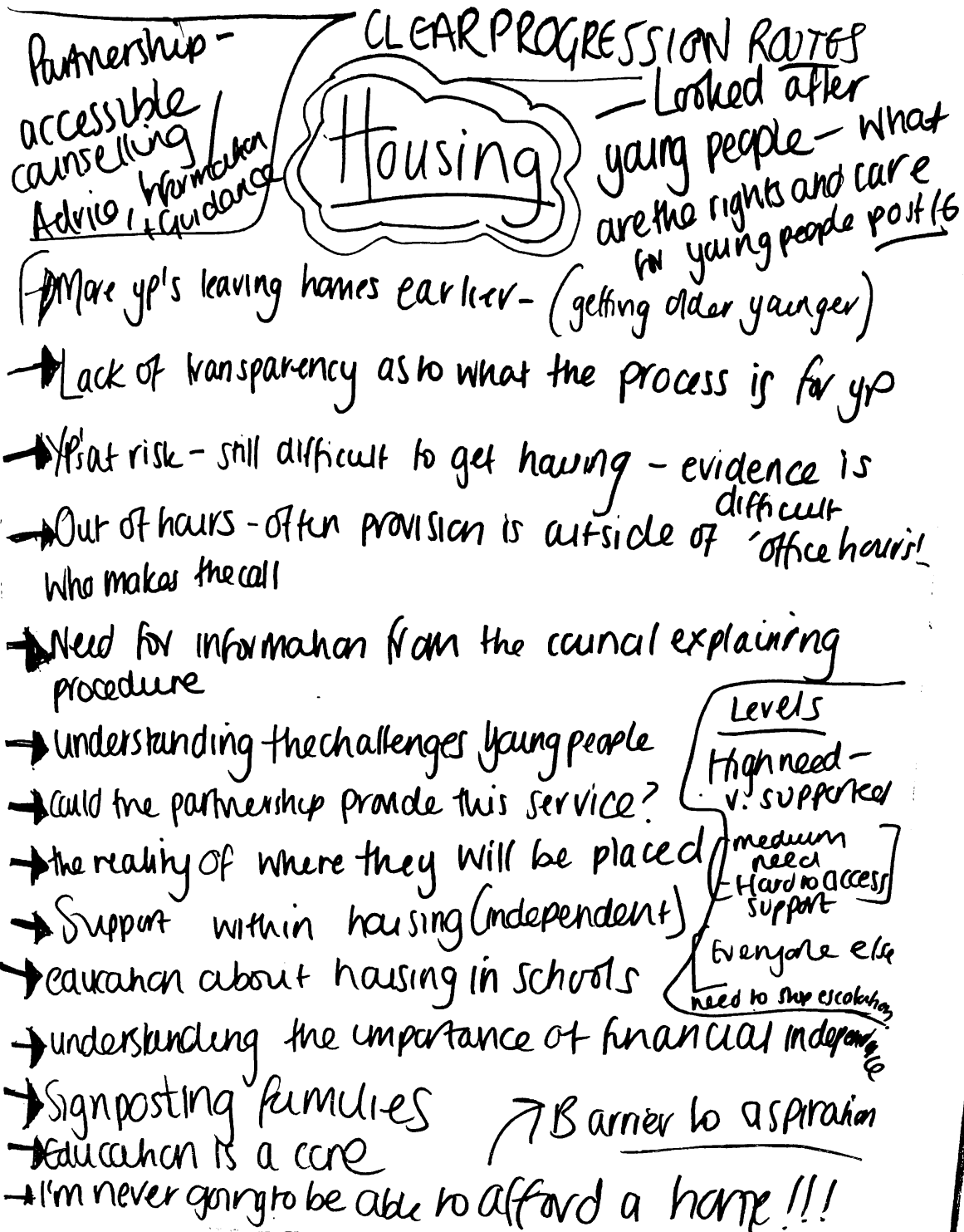
YOT  $\Rightarrow$  work with YP on orders so time limited - hard when they have complex issues.

$\Rightarrow$  PRUs just bring these YP together!

$\Rightarrow$  Staff capacity issue - reduced levels of staff.

How TO TACKLE THIS? ...

- Enforcement? Diversion? Prev?
- AS a group? Individual?
  - $\hookrightarrow$  will they be bad influence on each other?
- Reoffending reduced lately due to Police provision but this isn't tackling the root causes/issues.
  - $\hookrightarrow$  schools: purposefully getting excluded.





# Hammersmith and Fulham Youth Services Mapping



## **Introduction:**

Sobus is undertaking a mapping exercise of youth services and activities on behalf of Hammersmith and Fulham Youth Partnership. The youth partnership is made up of service providers, young people, statutory organisations and a range of other stakeholders.

The vision of the partnership is “Young people in Hammersmith and Fulham will be in a place that means they have a say on how they become the healthiest, happiest, safest, most successful and resilient young adults in the country.” To do this the partnership needs a clear picture of services currently meeting those needs and any gaps that may exist.

## **Instructions:**

Thank you for agreeing to take part in this survey which is split into two sections. Section 1 is about you and your organisation and only needs to be completed once. Section 2 is about each of the services or activities your organisation delivers for young people in Hammersmith and Fulham.

Section 2 has been duplicated six times in the form below, however if you only have two different services or activities then you only need to complete section 2 twice. If you have more than six services or activities please copy and paste section 2 and complete for each additional service or activity. The more information you provide the better the partnership will be able to support your organisation and the young people you work with.

Please complete section 2 for each different type of activity e.g. complete section 2 once for Group Based Employment Support and complete section 2 once for One to One Interview Skills Training. You should also complete Section 2 for each target group if you deliver the same service at different sessions because you have identified a specific need or barrier to accessing the provision of the service. You do not have to complete section 2 multiple times if you run the same activity at different times of the week.

The partnership has agreed our primary target group is 5 – 19 year olds, however we recognise the need to have a clear understanding of what support is available to young people in the 0 – 5 years old and 19 – 25 year old ranges. If your organisation provides services in these age ranges we would like to know about them, if possible.

If you have received this survey and a colleague is responsible for other services please complete the information you know and pass the survey to a colleague to complete the information they are aware of or responsible for.

All financial or funding information will not be shared with anyone else and is only requested so that we can identify the most significant funders of youth services and where services and activities are at risk of stopping.

Thank you for taking the time to complete this survey. Please can you return the completed to survey to [ian.lawry@sobus.org.uk](mailto:ian.lawry@sobus.org.uk) by **Friday 29<sup>th</sup> July 2016**.

### **Section 1:**

**Q1. What is your name?**

**Q2. What is your email address?**

**Q3. What your organisations name?**

**Q4. What area does your organisations services and activities cover?**

☐ Local (H&F)

☐ Other areas of London

☐ National

**Q5. How much do Young People actively inform and influence decision making in your organisation? e.g. place on management committee, steering group and regular surveys.**

☐ A lot

☐ Some

☐ None

**Q6. What are the 3 most effective ways you currently promote your services to Young People, Carers and Partners?**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Website        | <input type="checkbox"/> Twitter       | <input type="checkbox"/> Facebook              |
| <input type="checkbox"/> Instagram      | <input type="checkbox"/> Text message  | <input type="checkbox"/> Email                 |
| <input type="checkbox"/> Flyer / Poster | <input type="checkbox"/> Word of Mouth | <input type="checkbox"/> Other please specify: |

**Section 2:**

For each service your organisation offers to young people please complete the following information. By service we mean a different type of activity eg group based employment support or one to one interview skills or aimed at a different target group men or women.

**Q7. Name of service or activity 1:**

**Q8. What is the primary theme?**

- ☐ Crime & Safety
- ☐ Education & Training
- ☐ Employability
- ☐ Health & Wellbeing
- ☐ Housing
- ☐ Positive Activities

**Q9. What is the secondary theme?**

- ☐ Crime & Safety
- ☐ Education & Training
- ☐ Employability
- ☐ Health & Wellbeing
- ☐ Housing
- ☐ Positive Activities

**Q10. Please can you briefly describe service or activity 1?**

**Q11. Is this service or activity targeted at a specific age group?**

- ☐ 0 - 4      ☐ 5 – 9      ☐ 10 – 15      ☐ 16 – 19      ☐ 19+

**Q12. Is the service or activity targeted at a specific gender?**

☐ Female ☐ Male ☐ Both

**Q13. Which area is this service or activity delivered, please put postcode in the box below?**

☐ Hammersmith ☐ Fulham ☐ H&F wide ☐ Other please specify:

**Q14. Is the service targeted at a specific Black, Asian, Minority Ethnic or Refugee group?**

Asian or Asian British: ☐ Indian ☐ Pakistani ☐ Bangladeshi

Black or Black British: ☐ Caribbean ☐ African

Chinese ☐ Chinese

Mixed: ☐ White/Black Caribbean  
☐ White/Black African  
☐ White/Asian

White: ☐ British ☐ Irish

Other:

**Q15. Is the service targeted at young people with a disability?**

☐ Yes ☐ No

**Q16. Is the service targeted at young people with specific sexual orientation?**

☐ Heterosexual ☐ Gay woman/lesbian ☐ Gay man ☐ Bisexual

☐ Transsexual ☐ No, open to all

**Q17. Who is the main funder(s) for service or activity 1, please put amount in box below?**

**Please note financial information will not be shared with other organisations.**

☐ London Borough of Hammersmith & Fulham ☐ Big Lottery: Reaching Communities

- ☐ Big Lottery: Awards for All
- ☐ Dr Edwards and Bishop Kings
- ☐ Hammersmith United Charities
- ☐ Trust for London
- ☐ London Community Foundation
- ☐ Big Local
- ☐ Family Fund

- ☐ John Lyons
- ☐ Tudor Trust
- ☐ City Bridge
- ☐ Henry Smith
- ☐ Buttle UK
- ☐ Lloyds Foundation
- ☐ Other please specify:

**Q18. How much longer is service or activity 1 funded for?**

- |  |  |
|--|--|
| <input type="checkbox"/> up to 3 months  | <input type="checkbox"/> up to 6 months  |
| <input type="checkbox"/> up to 12 months | <input type="checkbox"/> up to 18 months |
| <input type="checkbox"/> up to 2 years   | <input type="checkbox"/> up to 3 years   |
| <input type="checkbox"/> up to 4 years   | <input type="checkbox"/> 5 years +       |

**Q19. What is the likelihood of getting continuation funding for service or activity 1?**

- |   |  |
|---|--|
| <input type="checkbox"/> Guaranteed – funding secured | <input type="checkbox"/> Likely – waiting on outcome funding bid |
| <input type="checkbox"/> Possible – writing bids      | <input type="checkbox"/> Unlikely – bids rejected                |
| <input type="checkbox"/> Not sure                     |  |

**Q20. Is service or activity 1 delivered in partnership?**

- ☐ Yes      ☐ No

If yes, who with:

If no, would you like to and who with:

**Q21. Is there anything else that you would like to say about service or activity 1? If so use the comment box below**



## JOHN LYON'S CHARITY

### Young People's Foundations

The Young People's Foundation (YPF) model is the response of John Lyon's Charity to the current pressures on the Children and Young People (CYP) sector, which are significant and varied. Cuts to youth service and related budgets, such as play services, have been decimated, with further reductions on the horizon. As a result, funding for play, youth and parenting services is difficult to come by. The low level of funding is making local authority run youth services unsustainable and as a result there is a necessity for change and new models of delivery.

The cuts in funding in the Charity's Beneficial Area have revealed a number of other pressures faced by voluntary organisations working with children and young people – the 'CYP voluntary sector'. These include:

- **The dependency of the CYP voluntary sector on public sector funding** - unlike other parts of the voluntary sector the CYP sector has been less successful in securing funding through revenue generating services, such as charity shops
- **The structure of the CYP voluntary sector** - the sector is extremely diverse, frequently fragmented and small, often finding it difficult to compete against larger contract seeking charities in competing for commissions and bids
- **Lack of fundraising expertise** – smaller community groups often lack the kind of fundraising expertise increasingly required
- **Lack of community spaces** - local authorities are continuing to sell assets, which is leading to the voluntary sector being unable to deliver place-based services.

### The Young People's Foundation Model

Following consultation with the CYP voluntary sector in the Charity's Beneficial Area, local authorities, Scouts, faith groups, Housing Associations, trusts & foundations and other funders, the model of the Young People's Foundation has developed.

#### Essential Components

In order to be recognised as a 'Young People's Foundation' an organisation will meet certain criteria and be quality assured by London Youth and will adopt the following essential core components, which are fundamental to the model. They will:

- **be a newly registered charity**
- **be a membership organisations** for any group that works with Children and Young People in the relevant area
- **have a Trustee Board and wider steering group** that will include representation from relevant organisations in each local area. It will likely include the local voluntary sector, the local authority, police, Clinical Commissioning Groups, Housing Associations, local schools, faith groups, uniformed groups, football clubs and sports organisations, the corporate sector and funder representation.

#### Values

These Foundations seek to mitigate the impact of the current challenges facing the CYP voluntary sector on a local basis and whilst it is expected that each Foundation will develop to meet the needs of its own locality, they will all share common values and four core principles:

- **Inclusivity** – membership is open to any group working with children and young people and as many groups as possible should be encouraged to join. An equal voice is given to all organisations, no matter their size
- **Diversity** - YPFs value the multitude of organisations that deliver youth and children's work. There is a need for variety in order to meet the needs of as many young people as possible
- **Collaboration** - YPFs are non-competitive and encourage collaboration between members. The YPFs will work to fundraise, coordinate and network to benefit their whole membership, neither will they compete against their members. They will not develop a large central workforce and will remain outward facing for the benefit of its members
- **Cross sector** - the needs of children and young people should be addressed by the public, voluntary and private sectors as a group rather than individually
- **Grassroots** – the YPFs will work for, and with, small local organisations and will retain their local focus.

### The purpose of Young People's Foundations

Young People's Foundations will work to safeguard existing CYP provision work to grow the sector in their local area. To do this, they will all concentrate on four main strands of work:





## JOHN LYON'S CHARITY

- work as a strong consortium to fundraise *collectively* to
  - secure funding from *new* sources (e.g. Big Lottery and European Social Fund) into the local area
  - successfully secure commissions from the local authority
  - attract corporate and individual funding streams. The YPFs should be a practical and simple way for the corporate sector to engage with CYP organisations
- organise sector (and location) specific capacity building including training events, advice sessions and a forum for organisations to share ideas and best practice
- share venue spaces and develop a 'venue bank'
- coordinate sector networking opportunities and support services.

Once they have established their four key strands of work, Young People's Foundations could develop to provide other services to the CYP sector, including:

- the distribution of small grants to member groups (where funds allow)
- developing local giving programmes
- centralised accountancy and pension services for member organisations

These three areas of work are desirable for YPFs but are not essential components of the YPF Model.

### Young People's Foundations established so far

Three YPFs have been created to date: Young Barnet Foundation, Young Brent Foundation and Young Harrow Foundation. These three initial Foundations will, together with John Lyon's Charity and London Youth, work to develop the detailed blueprint of the Young People's Foundation Model and how it can be replicated elsewhere.

Four other YPFs are being developed in the Charity's Beneficial Area: Camden, Ealing, Hammersmith & Fulham and Westminster. There is considerable interest from other funders and local authorities to examine the model and to see if it could work outside the Charity's Beneficial Area. Discussions have been held with representatives from Enfield, Islington, Merton, Waltham Forest and North West England.

### Funding

The three initial YPFs have each been awarded grants by John Lyon's Charity and City Bridge Trust for core funding of £200,000 per annum (£100,000 from City Bridge Trust and £100,000 from John Lyon's Charity).

**The budget of £200,000 is typically being deployed on:**

CEO's salary (£50,000 with costs)  
Development Director/ Chief Fundraiser salary (£40,000 with costs)  
Administrator salary (£30,000 with costs)  
Small Grants allocation (£40,000)  
Office accommodation; set up costs; training, IT and publicity (£40,000)

There is a network funders interested in the development of the model including Big Lottery, Paul Hamlyn Foundation, BBC Children in Need, Cabinet Office, Locality, Cripplegate Foundation, K&C Foundation, GMSP Foundation, Wembley National Stadium Trust and Lloyds Bank Foundation. YPFs will also seek funding from Section 106 and CIL funds.

### Partners

The YPF model has been developed in partnership with a variety of local interested parties as well as broader CYP sector organisations with specific expertise including London Youth, Partnership for Young London, National Resource Centre for Supplementary Education, Youthnet, Scout Association and London Funders.

### Communication

Communication will be through social media, an interactive website (currently being developed), apps, events and a venue booking calendar.

