

SOUTH GLOUCESTERSHIRE TEENAGE PREGNANCY PARTNERSHIP

TEENAGE PREGNANCY & PARENTHOOD IMPLEMENTATION PLAN 2009-10

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South Gloucestershire Teenage Pregnancy & Parenthood Implementation Plan 2009 - 2010

Introduction

Why teenage pregnancy matters

The reasons for tackling teenage pregnancy and supporting teenage mothers and young fathers are well documented and include health and wider inequalities issues¹. Babies born to teenage mothers have a 60% higher infant mortality rate and a 63% increased risk of being born into poverty compared to babies born to older mothers. Children born to teenage mothers do less well at school and disengage early from learning and sometimes well before they have finished compulsory education. Daughters of teenage mothers are twice as likely as daughters born to older mothers to become teenage mothers themselves. Similar disadvantages affect young fathers.

Measures to reduce teenage conceptions and reach local targets will therefore help to reduce the health inequalities and social exclusion impact of teenage parenthood. Efforts to improve outcomes for teenage mothers and young fathers will, in turn, reduce the chances that children born to teenage mothers and young fathers become teenage parents themselves, because they are less likely to experience some of the factors associated with teenage pregnancy. Supporting teenage mothers to access and use contraception effectively after the birth of their first child will also help prevent subsequent unplanned pregnancies.

In addition to helping achieve our teenage conception targets, programmes for teenage pregnancy and supporting teenage mothers and young fathers are part of a long-term effort to narrow social and health inequalities and tackle child poverty. Tackling the risk factors for teenage pregnancy can have an impact on a range of other local priorities. Diagram 1 on p3 shows some of the key priorities from the National Indicator Set (NIS), vital signs (VS) and world class commissioning (WCC) likely to be impacted on by effective teenage pregnancy programmes.

¹ For more information on why teenage pregnancy and supporting teenage mothers and young fathers matters, along with the risk factors and relevant outcomes, see [Teenage Pregnancy Next Steps \(2006\)](#) and [Teenage Parents Next Steps \(2007\)](#).

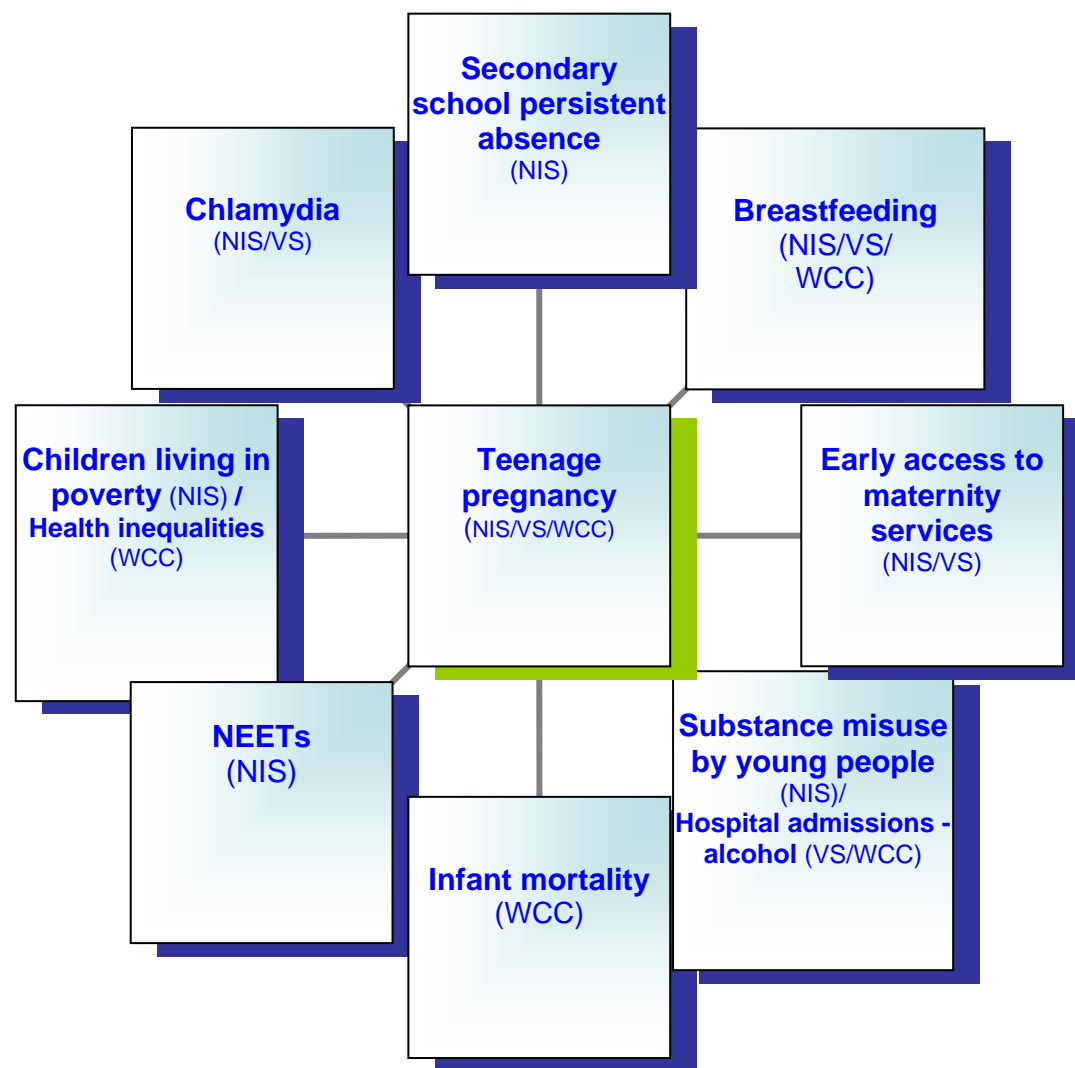


Diagram 1: Work on teenage pregnancy and supporting teenage mothers and young fathers can help local areas achieve national indicators (NIS), vital signs (VS) and world class commissioning (WCC)

Teenage Pregnancy & Parenthood Implementation Plan 2009-2010

The South Gloucestershire Teenage Pregnancy Partnership Implementation Plan 2009-10 has been informed by a range of feedback, evaluation, guidance, data and intelligence. The following information has contributed to the Teenage Pregnancy Board's priorities for the year ahead:

Findings of the Joint Area Review May 2008:

The quality of the partners' strategy for addressing high levels of teenage pregnancy is good.

Major strengths	Important weaknesses
<p><i>Comprehensive knowledge of vulnerable groups and geographical hot spots based on thorough area analysis.</i></p> <p><i>Effective partnership working between the council and its partners both at strategic and operational levels.</i></p> <p><i>Well coordinated teenage pregnancy strategy.</i></p> <p><i>Wide range of appropriately targeted preventative initiatives.</i></p> <p><i>Good involvement of young people in development and implementation of the strategy.</i></p>	<p><i>Not all targets within the action plan have specific measurable outcomes, making it difficult for the Teenage Pregnancy Strategy Board to effectively monitor impact.</i></p> <p>[This has been addressed through training in outcome-focussed commissioning, a new teenage pregnancy performance management framework and the departmental redesign of the service plan template]</p>

Achievements 2008/9

a) Strategic

- Terms of Reference was revised to improve performance management framework and address gaps in membership

b) Data

- Planning and development of services started to be informed by a more detailed six-monthly data report from the local Public Health Analyst working in partnership with the Local Authority Information Management team

c) Communications

- June 08 saw the launch of a South Gloucestershire youth website, youthunltd.com – this includes a lengthy *No Worries!* section offering information about relationships and sexual health and how to access local services

d) Improving Access to Young People-friendly Sexual Health Services

- New DH funding secured to expand the Brook *No Worries!* Outreach Service to a further 8 secondary education settings
- New DH funding secured to provide an on-site Brook *No Worries!* Outreach Service at Filton College
- New DH funding secured to provide post-abortion contraceptive counselling
- Launch of *No Worries!* Condom card scheme in May 08. By March 2009 there were about 25 separate youth settings with trained staff offering the C-card

e) Targeted work & raising aspiration

- A new support pathway for young people at risk of teenage pregnancy was developed through the Breakthrough mentoring programme.
- Secondary attendance has improved: South Gloucestershire is ranked 10 out of 149 LAs for Persistent Absence. This exceptional performance is due to a drive to address attendance matters for ALL schools with routine sharing of authority-wide comparative data.
- Secondary exclusions have reduced: There has been a continued reduction in permanent exclusions since 2006-07 as a result of LA-wide agreements including Pre-Exclusion Programme and Supported Transfer.

f) Sex and Relationships Education

Improving the quality of PSHE and SRE education in schools:

- Three Relationship and Sex Education (RSE) conferences were held in March 2009 with 60 schools attending. The key message was the change from SRE to RSE and that there needs to be a spiral curriculum of age appropriate content for all children and young people.
- 5 of the schools taking part in the phase 1 of Healthy Schools Plus are focussing on interventions that will contribute towards reducing teen conception rates
- Improving resources for schools: *Looking Ahead* puberty leaflets to all primary schools; *Protect yourself* STI resource and *Why Abortion?* DVD for all secondaries,

g) Workforce development

Improving CYP skills, knowledge and confidence in talking to young people about relationships and sex:

- Between April 08 and Mar 09 over 60 youth support workers from a wide range of agencies completed training to register young people onto the C-card Scheme.
- 5 professionals from Connexions, Youth Service, Drug & Alcohol Education, Learning Mentors and School nursing completed the 4-day 'Delay – training the trainers' course, and cascaded the training to their teams.

Improving CYP workforce understanding of risk-taking behaviour:

- Launch of new multi-agency training 'Up for it', covering adolescent development and risk taking, including drug and alcohol use and sexual activity.

h) Work with parents

Supporting parents to talk to their children:

- *Starting Year 7* Transition project DVD was disseminated to all year 6 families.
- Funding awarded for the Beacon Healthy Schools Parents Project, a project working with parents groups in three schools. After consulting with the parents a number of projects have been set up, these include a Streetwise course including sex and relationships.

Supporting young parents

- Four new young mothers groups were launched, in Filton, Staple Hill, Kingswood and Yate thanks to Sure Start funding. The groups are following best practice in being led by a senior youth worker and Sure Start workers working in partnership.

3. Identified local gaps

- An up-to-date Sexual Health Needs Assessment (last done in 2005)
- Improved data sharing to better understand local factors contributing to teenage pregnancy
- A coordinated media and communications campaign
- A coordinated campaign to support parents to talk to their children about relationships and sex

- Coordinated support for young fathers
- Early identification tools for those at risk of poor outcomes

The local **Joint Strategic Needs Analysis** has identified key high level themes: **early intervention, transition, inequalities and access to information and guidance.**

4. National Guidance

Local planning is informed by *Teenage Pregnancy Next Steps: Guidance for Local Authorities and Primary Care Trusts on Effective Delivery of Local Strategies*. This guidance was based on international evidence, as well as in-depth reviews in local areas that were carried out by the Teenage Pregnancy Unit and the Prime Minister's Delivery Unit, which identified factors that were evident in areas where rates had fallen, but were either absent or being delivered less intensively in similar areas where rates were static or increasing.

5. Regional Teenage Pregnancy priorities 2009/10:

- **Improving local data & performance management**
- **Improving access to contraception**
 - **Increasing uptake of long acting reversible contraception (LARC)**
 - **Improving Sexual Health services in FE**
 - **Increasing young people's involvement in service development and evaluation**
- **Improving Targeted Youth Support/ Early intervention & prevention**
- **Improving integration of Teenage Pregnancy & Alcohol Strategies**
- **Work with Schools**
 - **Preparing for statutory PSHE**
 - **Developing school-based drop-in services**

Outcome areas: Preventing Teenage Conception; Supporting Teenage Mothers & Young Fathers

Key Priority		Co-ordination of Strategy & Data Collection
Activity	What do we aim to achieve?	<p>Commissioning is based on local needs assessment and services are adequately resourced.</p> <p>There is strong joint working on data collation and analysis.</p> <p>All teenage pregnancy work has effective performance management.</p> <p>Mainstream funding is identified for areas of successful practice.</p>
	What does good look like?	<p>Champions: There are senior champions for teenage pregnancy in the LA and PCT, reflecting locality structures.</p> <p>Accountable strategic leads: There are high level accountable leads for commissioning and delivery in relation to teenage pregnancy.</p> <p>JSNA and planning: Findings from annual teenage pregnancy self assessment feed into the Joint Strategic Needs Assessment, the CYP Plan, the PCT local Operational Plan and the LSP</p> <p>Commissioning arrangements: Teenage pregnancy is integral to the children's joint² commissioning arrangements.</p> <p>Governance / performance management: There is systematic review of performance of the local TP strategy using the <i>Local Monitoring Dataset</i> and other appropriate data from all partners (and that local targets have been set), with results reported to the Children's Trust, which reports to the LSP.</p> <p>Accountable data lead: There is a senior accountable lead for teenage pregnancy data and intelligence</p> <p>Data collection: Protocols or agreements are in place for systematic collecting and sharing data and intelligence across sectors to contribute to planning and performance management.</p> <p>Provider data: Contracts with all health and local authority providers, especially abortion, STI/GUM services / contraceptive services, include requirements for collection and sharing of age, sex, ethnicity and postcode (while adhering to confidentiality guidelines) to target development of services and interventions</p>
	How will this activity be monitored and evaluated?	<p>Children and Young People Strategic Partnership Board</p> <p>Teenage Pregnancy Partnership Board</p>

² Local Authority and Local NHS (including sexual health)

Actions		How progress will be measured		Whom
1	Commission a local Sexual Health Needs Assessment to strengthen effective joint commissioning	Sexual Health Needs Assessment is completed	March 2010	NHS South Gloucestershire
2	Agreed local data monitoring set information is provided six-monthly to TP Board	Board minutes	Six-monthly	NHS South Gloucestershire
3	Develop comprehensive SLAs / Service specifications for all commissioned work to include performance management and success criteria expectations	Board minutes will include updates on all SLAs	Quarterly	South Gloucestershire Council
4	Develop new information-sharing protocols with Health to enable root cause analysis of local conceptions and target services accordingly	New information sharing protocol developed to enable identification of destinations of those experiencing teenage conceptions	March 2010	NHS South Gloucestershire
5	Strengthen links between drug and alcohol education and relationships and sex education	All training on RSE includes sections on drug and alcohol education and vice versa		South Gloucestershire Council

Outcome areas: Preventing Teenage Conception; Supporting Teenage Mothers & Young Fathers

Key Priority		Communications		
Activity	What do we aim to achieve?	<p>To make appropriate information on relationships and sexual health easily available to parents, carers, and young people.</p> <p>To ensure that the children and young people's workforce receive regular information about policy, good practice, training, resources, local activity and services relating to relationships and sexual health.</p>		
	What does good look like?	<ul style="list-style-type: none"> • Strategy: There is a communication strategy and action plan for the commissioning and coordination of an effective communications across the LA and PCT to tackle teenage pregnancy and support teenage parents • Effectiveness: Communications/media programmes are monitored consistently and evaluated regularly. Action plans are drawn up as a result of regular evaluations and agreed by the relevant accountable lead. • Partners and professionals are engaged and informed • Parents and communities are engaged and informed • Young people – including those most at risk – are involved and informed 		
	How will this activity be monitored and evaluated?	Children and Young People Strategic Partnership Board Teenage Pregnancy Partnership Board		
Actions		How progress will be measured	By when	Whom
1	Develop and implement a targeted Media & Communications Plan, with emphasis on preparation for Christmas, Easter and Summer holidays	Media & Communications Plan is presented to TP Board for approval	Jan 2010	South Gloucestershire Council
2	Carry out research with young women and men (including young parents) on information needs and preferred communication methods	Consultation with young people takes place. Actions are identified as a result and incorporated into the annual comms plan.	March 2010	South Gloucestershire Council

3	Develop a package of excellent relevant resources to promote to practitioners	Recommended resources list developed and disseminated to CYP	Mar 2010	South Gloucestershire Council
4	Involve young people, including young parents, in developing key messages about relationships and sex	Young people's No Worries! user group developed	Oct 09	South Gloucestershire Council
5	Launch a <i>No Worries!</i> newsletter for professionals	Newsletter launches with Issue 1	Oct 09	South Gloucestershire Council
6	One annual training event for professionals to update them about the needs of young parents	Training Event takes place for 50 delegates	March 2010	South Gloucestershire Council

Outcome area: Preventing Teenage Conception

Key Priority		Improved access to high quality young people-friendly sexual health services		
Activity	What do we aim to achieve?	<p>Accessible services are tailored for young people Full range of high quality services offered Services are visible and highly promoted Involvement by a range of knowledgeable service providers</p>		
	What does good look like?	<p>Accountable lead: There is an accountable commissioning lead for young people’s sexual health services Sexual Health Needs Assessment – is undertaken within the last three years, with involvement of YP (including those most at risk) and informs commissioning of CASH services Effectiveness: Young people’s CASH and abortion services are commissioned to address the relevant indicators and are in line with relevant guidance, including <i>You’re Welcome</i>, to ensure services for young people (inc. teenage mothers and young fathers):</p> <ul style="list-style-type: none"> • are sufficient and based on a local needs analysis, including access to services in hotspot areas • cover a range of integrated provision (including, for example, free pregnancy testing, unbiased advice on pregnancy options, condom distribution, the full range of contraceptive choices including long acting reversible contraception [LARC], emergency hormonal contraception [EHC], accessible information and sexual health promotion) • have clear patient pathways • enable swift referral as required (e.g. to antenatal care or NHS funded abortion services) • provide contraception with clear follow-up and support arrangements after abortion and maternity, including publicity to young people about the risk of repeat pregnancy <p>Services are monitored consistently and evaluated regularly, including by young people in line with You’re Welcome criteria. Action plans (including actions to address gaps included in service development plans) are drawn up as a result of regular evaluations, and agreed by the relevant accountable lead.</p>		
	How will this activity be monitored and evaluated?	<p>Quarterly BNSSG meetings (the sub-regional sexual health strategy group) Children and Young People Strategic Partnership Board Teenage Pregnancy Partnership Board</p>		
	Actions		How progress will be measured	By when
1	Expand the Brook <i>No Worries!</i> Outreach Service into secondary schools (including	Number of new contacts to Brook Schools Drop-ins service. Target 1000 in first	March 2010	NHS South Gloucestershire

	the PRUs).	academic year.		
2	Improve the quality of the Condom Card Scheme by increasing the length of staff training and conducting an evaluation with users. Continue to implement and expand the Condom Scheme with focus on partners providing targeted support to those vulnerable to TP/future pregnancies	All condom card scheme training to be one full day.	Sept 09	South Gloucestershire Council
3	Reduce repeat conceptions through implementation of a new DoH-funded service based at Pregnancy Advisory Service offering counselling and long-acting reversible contraception (LARC) to 18 and under girls at point of abortion	Launch of new service. Uptake of LARC through the service by March 2010. Targets to be agreed. Identification of future funding for service.	Launch by Sept 09 Funding identified by Dec 09	NHS South Gloucestershire
4	Increase the under 18 uptake of LARC (Long acting reversible contraception) by training more GPs to fit Implanon .	Increase in number of GPs trained to fit Implanon in South Glos. Increase in uptake of Implanon.	March 2010	NHS South Gloucestershire
5	Improve access to Emergency Hormonal Contraception (EHC) Scope current provision of EHC available in pharmacies Work with pharmacy managers to agree improvements to availability and access Work with young people to improve publicity	Scoping of current provision to be part of the Sexual Health Needs Assessment.	March 2010	NHS South Gloucestershire
6	Increase the involvement of children and young people in service development and evaluation through a <i>No Worries!</i> user group	Young People's User group developed	Oct 09	South Gloucestershire Council
7	Roll out the <i>You're Welcome</i> badging scheme, making links with the <i>No Worries!</i> scheme	<i>(Need to agree targets for roll-out)</i>	March 2010	NHS South Gloucestershire

Outcome area: Preventing Teenage Conception

Key Priority		Relationship & Sex Education & Personal, Social and Health Education in Schools		
Activity	What do we aim to achieve?	Improve the quality of delivery and evaluation of PSHE & RSE and ensure provision takes young people people's views into account		
	What does good look like?	<p>Accountable lead: There is an accountable strategic lead for SRE/PSHE.</p> <p>Policy: All schools have a SRE policy (statutory requirement) in place and in use which has been consulted upon with governors parents/carers and young people.</p> <p>Delivery and assessment: There is systematic delivery and assessment of learning, and programmes are planned against the QCA End of Key Stage Statements (2005) and post 16.</p> <p>Clear pathways: There is clear signposting from SRE to contraceptive and sexual health services (CASH).</p> <p>Alcohol risks: Schools address alcohol risks within SRE (as evidenced by schools' SRE policies)</p> <p>Effectiveness and engagement: Education providers monitor and evaluate the effectiveness of SRE and whether the provision meets young people's needs, in including using the SRE pupil audit toolkit. Programmes / services are monitored consistently and evaluated regularly. Action plans are drawn up as a result of regular evaluations, and agreed by the relevant accountable lead.</p>		
	How will this activity be monitored and evaluated?	Children and Young People Strategic Partnership Board Teenage Pregnancy Partnership Board		
Actions		How progress will be measured	By when	Whom
1	Schools address alcohol risks within their relationships and sex education	Secondary audit	March 2010	South Gloucestershire Council
2	All schools have an SRE/RSE policy in place	Proportion of schools with an SRE policy. Measured through annual audit.	March 2010	South Gloucestershire Council
3	Raise the profile of PSHE with Head Teachers and Deputy Heads as part of preparation for statutory PSHE, and alert them to the need for more time in the curriculum	One presentation to Head Teachers. One presentation to Deputy Heads. Measure through Secondary audit.	March 2010	South Gloucestershire Council
4	Maximise the opportunity provided by	Uptake of additional input, reported by Brook	March 2010	NHS South

Clinical Outreach Nurses and SRE Youth Workers to provide additional input into PSHE lessons and to parents evenings in schools who have taken up the new Brook drop-in service			Gloucestershire
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Outcome area: Preventing Teenage Conception

Key Priority		Workforce development: Workforce training on teenage pregnancy and sex and relationship issues in mainstream partner agencies		
Activity	What do we aim to achieve?	Provide Relationships and Sex Education training to key professionals in touch with young people to enable prevention work and proactive referrals to specialist CASH services as appropriate		
	What does good look like?	<p>Training Needs Assessment: A training needs assessment of the workforce – undertaken within the last two years – informs the commissioning of training on understanding teenage pregnancy, SRE, contraception and sexual health (CASH) and needs of teenage mothers and young fathers.</p> <p>Training delivery: A training programme is developed that provides an incremental approach to learning and skills. The programme is integrated into the local Children’s Workforce Development Strategy, including mandatory induction training, with recruitment targeted to:</p> <ul style="list-style-type: none"> • prioritised areas of teenage pregnancy hotspots • those working with YP identified as being most at risk: youth support workers, Connexions Pas, TYS Lead Professionals, IAG providers, social workers/foster carers/residential workers, YOTs, housing support workers, Learning Mentors, Parent Support Advisers and relevant VCS organisations <p>Training is part of service level agreements and specifications with service providers to enable practitioners to update knowledge and skills.</p> <p>Accountability for monitoring training provision and uptake is held by senior managers of each agency and reported to the Teenage Pregnancy Partnership Board.</p> <p>Monitoring: The impact of training is monitored consistently and evaluated regularly. Action plans are drawn up and agreed by the relevant accountable lead, with gaps addressed in the Children’s Workforce Development Strategy.</p>		
	How will this activity be monitored and evaluated?	Children and Young People Strategic Partnership Board Teenage Pregnancy Partnership Board		
Actions		How progress will be measured	By when	Whom
1	Undertake a Training Needs Assessment	Assessment completed and brought to TP Board	March 2010	South Gloucestershire Council
2	Offer a rolling programme of Level 1	New Level 1 training offered through CYP	March 2010	South

	Introduction to Relationship and Sexual Health education training	training		Gloucestershire Council
3	Establish delivery routes for Level 2 training	Agreement of route by TP Board	Dec 09	South Gloucestershire Council

Outcome area: Preventing Teenage Conception

Key Priority		Targeted work with at risk groups of young people		
Activity	What do we aim to achieve?	<p>Young people most at risk of teenage pregnancy are identified early and personalised support is put in place.</p> <p>Information, education and services are easily accessible to those most at risk of teenage pregnancy</p>		
	What does good look like?	<p>Accountable lead: There is an accountable lead (e.g. TYS lead) for commissioning and coordinating work for the early identification of young people at risk of teenage pregnancy.</p> <p>Early identification: A wide range of risk factors for early sex and teenage pregnancy (e.g. alcohol use, poor school attendance, low self esteem, etc) are systematically included in local TYS arrangements for early identification of young people with additional needs.</p> <p>Targeted support: Support for young people at risk to develop safe and healthy relationships, and prevent STIs and early pregnancy, is systematically included in TYS arrangements through CAF and the Lead Professional. Support includes a range of intensive interventions, and advice on contraception and sexual health as needed (e.g. an intensive SRE/PSHE module for young people at risk of disengaging from school).</p> <p>Supporting access to contraception: There are arrangements in place to ensure staff working with vulnerable young people proactively support young people to access local CASH services and are involved in local condom distribution schemes.</p> <p>Monitoring and evaluation: Targeted work is monitored consistently and evaluated regularly – including the meaningful participation of young people – to identify effective approaches. Action plans are drawn up as a result of regular evaluations and agreed by the relevant accountable lead.</p>		
	How will this activity be monitored and evaluated?	<p>Children and Young People Strategic Partnership Board</p> <p>Teenage Pregnancy Board Meetings</p>		
Actions		How progress will be measured	By when	Whom
1	Finalise early identification and support pathways for those most at risk of poor outcomes including teenage pregnancy	Pathways are identified as part of developments in Targeted Youth Support	March 2010	South Gloucestershire Council
2	Improve access to the Brook Outreach service for the most vulnerable, in	Mainstreaming of Brook Outreach Services in higher rate areas and for vulnerable	March 2010	NHS South Gloucestershire

	geographical 'hot spots' and in particular vulnerable groups (especially children in care/care leavers and young people in temporary accommodation)	groups. Uptake of Brook Outreach Services by those groups increases between April 09 and March 10		
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Outcome area: Preventing Teenage Conception

Key Priority		Work with parents/carers on preventing teenage pregnancy		
Activity	What do we aim to achieve?	<p>A comprehensive training and support programme on relationships and sexual health is available for professionals in partner agencies.</p> <p>Parents and carers have access to relevant tailored training and support on talking to children and young people about relationships and sexual health.</p>		
	What does good look like?	<p>Accountable lead: There is an accountable lead for coordinating and commissioning work for parents/carers on preventing teenage pregnancy.</p> <p>Parenting strategy: The parenting strategy includes</p> <ul style="list-style-type: none"> • information and advice for all parents on talking to their children about sex and relationships through family information services (FIS) and other health and community settings (e.g. GP practices, children's centres) • specific SRE programmes for parents (e.g. Speakeasy), prioritised to parents with children at risk of early pregnancy • SRE, included in parenting programmes, particularly intensive parenting programmes for families at risk (e.g. Family Intervention Programme [FIPs], Think Family projects). • Parent Support Advisors engage with parents about young people's risk taking behaviour in relation to teenage pregnancy. • Training for parenting practitioners/parent support workers on risks in relation to teenage pregnancy and SRE <p>Monitoring & evaluation: Progress is monitored consistently and evaluated regularly through the Parenting Strategy, using relevant TELLUS indicators of parents' views and any local surveys of parents. Action plans are drawn up as a result of regular evaluations, and agreed by the relevant accountable lead.</p>		
	How will this activity be monitored and evaluated?	Parenting Strategy Review Teenage Pregnancy Partnership Board		
Actions		How progress will be measured	By when	Whom
1	Train the Barnardos and Southern Brooks	All PSAs trained to level 2	March 2010	South

	parent support advisors to be able to work with families around relationships and sexual health issues			Gloucestershire Council
2	Offer parenting programmes in areas with higher rates of teenage pregnancy			South Gloucestershire Council
3	Develop a local leaflet for parents with basic tips for talking about relationships and sex and signposting to local services			South Gloucestershire Council

Outcome area: Supporting Teenage Mothers and Young Fathers

Key Priority		Improve outcomes for young parents and their children		
Activity	What do we aim to achieve?	Identify sustainable routes to support young mothers and fathers Increase the proportion of young mothers in EET Improve maternal and child health Reduce child poverty		
	What does good look like?	Commissioning: Antenatal and postnatal care is commissioned in line with NICE guidelines with a specific focus on meeting the needs of pregnant teenagers and young fathers. Flexible support arrangements: Teenage mothers and young fathers with parenting responsibilities who cannot live at home, are placed in either a dedicated housing project, or have an intensive floating support package informed by a CAF assessment and action plan Children have positive childhood attachments and emotional resilience More children of teenage mothers are breastfed Young parents achieve economic well-being Young fathers are well supported Young parents have a key worker		
	How will this activity be monitored and evaluated?	EET target: Connexions Board Breastfeeding: PCT PEC and Board;		
Actions		How progress will be measured	By when	Whom
1	Secure sustainable funding for young mums' groups	09/10 - 11/12 funding identified	Oct 09	South Gloucestershire Council
2	Involve young parents in a review of resources available to support them	Review takes place	Dec 09	South Gloucestershire Council
3	Undertake a needs assessment and ensure there is sufficient provision of accessible and flexible learning for teenage mothers and young fathers, including provision for			Connexions

	those with low attainment as well as part-time and taster courses at FE colleges to support decisions about courses of study with clear routes for progression.			
4	Identify funding/delivery routes for targeted boys and young men's work within the Youth Service, to include work with Young Fathers			South Gloucestershire Council
5	Update 'Guidance on school age pregnancies' to include good practice from East Sussex	Update takes place and new document disseminated	March 10	South Gloucestershire Council
6	Work with Jobcentre Plus to ensure staff have clear arrangements in place for dealing with claimants under 18 who are expecting a baby or who have responsibility for a child, including correct payment of benefits they are due (including if they live with their parents or are in learning) and speedy referral to Connexions for a learning focused interview and referral to a lead professional for ongoing, holistic support.			Connexions

ENDS