

FAMILIES OVERVIEW AND SCRUTINY COMMITTEE AGENDA

Thursday, 7 March 2019 at 1.30 pm in the Bridges Room - Civic Centre

From the Chief Executive, Sheena Ramsey

Item	Business
1	Apologies for absence
2	Minutes of last meeting (Pages 3 - 10) The Committee is asked to approve as a correct record the minutes of the last meeting held on 31 January 2019.
3	Review of Obesity (across the life course) - Interim Report (Pages 11 - 30) Report of the Director of Public Health
4	Annual Conversation with the Head Teachers of Special Schools (Pages 31 - 36) Report of the Strategic Director of Care, Wellbeing and Learning.
5	Recruitment & Retention of Social Workers (Pages 37 - 48) Report of the Strategic Director of Care, Wellbeing and Learning
6	School Exclusions - Performance Update (Pages 49 - 74) Report of the Strategic Director of Care, Wellbeing and Learning
7	Best Start in Life - Outcome of Pilot Self-Assessment (Pages 75 - 82) Report of the Director of Public Health
8	Work Programme (Pages 83 - 86) Joint report of the Chief Executive and the Strategic Director of Corporate Services and Governance

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GATESHEAD METROPOLITAN BOROUGH COUNCIL FAMILIES OVERVIEW AND SCRUTINY COMMITTEE MEETING

Thursday, 31 January 2019

PRESENT: Councillor B Oliphant (Chair)

Councillor(s): M Hall, L Caffrey, S Craig, L Kirton,
E McMaster, S Ronchetti, D Bradford, P Craig, M Ord,
C McHugh, R Oxberry, C Buckley and N Weatherley

F91 APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor Clelland, Councillor Davison, Maveen Pereira and Jill Burrell.

F92 MINUTES OF LAST MEETING

RESOLVED:

- (i) The minutes of the last meeting held on 6 December 2018 were agreed as a correct record.

F93 REVIEW OF HEALTHY WEIGHT (ACROSS THE LIFE COURSE)

The Committee received a report and presentation providing further detail of the review of healthy weight across the life course. The presentation focussed on 'Obesity and the built environment' and was delivered by Professor Tim Townshend of Newcastle University.

It was highlighted from the presentation that there are a multitude of determinants of health and wellbeing in our neighbourhoods, these included the natural environment, local economy and people.

It was noted that health inequality also influences the life expectancy of individuals; it was stated that life expectancy amongst the most deprived is lower than that of the least deprived. It was emphasised that obesity is a complex issue with varying factors and influences on society that can impact on weight.

The Committee were provided with an overview of such factors which included:

- The Obesogenic Environment
- Neighbourhood Food Environments
- 'Toxic High Streets'
- Planning and Fast Food Takeaways

The presentation also highlighted that there is also evidence relating to physical environments and the influence over healthy weight and wellbeing. These included:

- Green and blue spaces
- Greenspace and physical activity
- Walkable neighbourhoods
- Urban Greenways
- Cycle Infrastructure
- Garden Allotments & Community Gardens

It was noted that evidence around fast food takeaways and planning has a role, Gateshead was highlighted as a good example of this regarding it's planning rules around hot food takeaways.

A comment was made noting that Gateshead is proud of the impact that the planning rules have had on reducing the number of hot food takeaways in the borough; however, it was acknowledged that there is still work to be done. A further comment was made noting that not enough children in the borough are walking to school, it was stated that there is too much reliance on parents driving children to and from school which discourages physical activity and causes a nuisance at school entrances. It was also stated that school drop offs and pickups are having a negative impact on air quality around schools.

The Committee noted that the presentation was excellent and provided a lot of 'food for thought'. It was also stated that whilst Gateshead has a lot of green space, it does not yet have the infrastructure to improve cycle ways in rural areas.

It was suggested that there are an increased number of hot food takeaways in deprived areas due to cheaper business rents. It was also stated that to many, particularly those who lack the skills and knowledge to cook for themselves, that venues such as McDonalds can provide a low cost source of protein to individuals.

Concerns were raised over the sale of sugary cereals, particularly those targeted at children. It was also noted that whilst planning departments have role to play, there is a wider agenda to be met with regard to sugar use in food products which needs to be approached from a national level.

The recent report presented at Council by the Director of Public Health was discussed. The Committee also noted that the report was well received by Councillors and made comment that information and education around food choices should start at home and be reinforced in schools.

RESOLVED:

- (i) The Committee noted the contents of the report and presentation.
- (ii) The Committee agreed to receive additional updates at the next meeting.

F94 OFSTED - INSPECTION OF LOCAL AUTHORITY CHILDREN'S SERVICES (ILAC): SELF-EVALUATION AND ANNUAL CONVERSATION UPDATE

The Committee received a report and presentation to update on the outcome of the annual conversation held with Ofsted on 5 December 218. It was noted that the conversation was held under the Inspection of Local Authority Children's Services (ILACS) framework.

An overview of the Gateshead Local Area Context was provided. It was highlighted that Gateshead has a total population of around 202, 419 living in 90, 500 households and that socio-economic inequalities exist. The following was also noted from the presentation:

- **Around 1604 children (CIN) are open to Children Social Care (end Dec 18)**, which is CIN rate per 10,000 of 403, lower than both our statistical neighbours and North East neighbour average.
- **Around 299 Children are subject to a Child Protection Plan (end Dec 18)**, which is a rate per 10,000 of 75.1, higher than north east and statistical neighbours.
- **Around 404 children are Looked After (end Dec 18)**, which is a rate per 10,000 of 101 again higher than north east and statistical neighbours.

The Committee were provided with an update in progress made from the last annual conversation. This included the appointment of a Strategic Director for Care, Wellbeing and Learning and the new domestic abuse service. It was also highlighted that there has been active engagement with the Jewish community in Gateshead.

From the report some headline data was summarised. From this information the following was presented:

- 1,430 CAF assessments completed with 1,691 children and young people receiving an early help intervention
- 1828 referrals received by Children Social Care, with a re-referral rate of 18.4% (lower than latest SN and England average)
- Per 10,000 81.9 children subject to CP (326) and 102.3 LAC (407) (higher than England and SN averages)
- CIN assessment timescales 87.1% (higher than latest SN and England average) only 13% resulting in NFA
- 96% of ICPCs within 15 working days of strategy discussion and 100% child protection reviews held in timescale (better than latest SN and England average). 85.5% of ICPCs result in a CP plan.
- 1.3% of CP plans ended after 2 years or more (lower than England and SN average)
- 18.8% of CP plans are second or subsequent (lower than England and SN average)
- 16% of LAC admitted to care previously in care, only 3% in the previous 12

months

The Committee were also provided with a breakdown of key service strengths and priority areas for development. It was highlighted that in terms of development the following are planned:

1. Further strengthen Child in Need service delivery offer.
2. Improve quality and consistency of children's plans - as a mature learning organisation we partner other local authorities as part of our improvement journey to assess and develop practice. Strengthen the voice of children and young people to improve and impact on the focus of plans.
3. Improve impact of feedback from children and young people-capture and evidence voice of the child to improve the quality of all elements of frontline social work.
4. Improve impact of feedback from children and young people-capture and evidence voice of the child to improve the quality of all elements of frontline social work.
5. Strengthen permanence planning through Early Permanence Group (EPG) reviewing admissions into care, long term matches, and all children with exit order plans. Regional Adoption Agency-established December 2018.
6. Strengthen performance management further develop data and performance tools to provide accurate, real time information to support management oversight of frontline practice, enable robust self-challenge and target quality assurance work.
7. Improve quality of frontline supervision predicated on well-embedded and understood expectations and practices in accordance with revised core practice standards.

In summarising the results of the recent annual conversation, the Committee were advised that the outcome was 'good' and that there are no current identifiable risks.

It was asked what the focus of services was in regard to looked after children; it was noted that a key focus was to keep children in the community where it is safe to do so. The Committee were also provided with a verbal update on the newly established regional adoption agency 'Adopt North East'.

A comment was made stating that it was a positive thing to have an external party come to 'hold a mirror' to services to see whether improvements should be made. It was further stated that the Committee look forward to having an update on the new children's 5-bed accommodation Longside House.

The Committee passed on their thanks to officers for the work done to continually improve services.

RESOLVED:

- (i) The Committee noted the contents of the report and presentation.

F95 ANALYSIS OF SCHOOL INSPECTIONS AUTUMN TERM 2018

The Committee received a report detailing the position of Gateshead schools in relation to Ofsted Inspection findings for the autumn term 2018.

It was noted from the report that each school was given an overall effectiveness grade based upon the following areas:

- Effectiveness of leadership and management
- Quality of teaching, learning and assessment
- Personal development, behaviour and welfare
- Outcomes for pupils

It was also advised that the quality of Early Years and 6th Forms were also assessed.

Within the report a breakdown of results was provided from three schools inspected in the autumn term. Two schools were judged as good, one school received a more negative grade and one school received the same grade as the previous inspection.

In summarising secondary school assessments, it was highlighted that one school judged to require improvement and one school improved on the previous grade.

RESOLVED:

- (i) The Committee noted the contents of the report.

F96 PROMOTING INDEPENDENCE - JOANNE WATERS REPORT

The Committee received a report to provide an update on the home to school and college budget, the range of reforms as part of the wider Travel Care project, savings and outcomes as a result of the Council's investment into Independent Travel Training.

From the report a summary of budget challenges was provided which included an explanation of statutory walking distance eligibility and extended rights eligibility. A further breakdown of discretionary arrangement options was also supplied noting that there are several discretionary allowances available for children including an individual taxi or minibus.

It was highlighted from the report that there is not a statutory duty to provide free home to school transport (taxis) for under 5's however legal advice states that if SEND panel are agreeing placements in specialist nurseries the Council needs to

consider how the child will get there. It was also noted that there are currently 26 children under 5 being transported at a cost of £146,148 for the academic year 2018/19.

The Committee were also advised that there are currently 5 children being educated out of borough due to no SEMH provision being available in Gateshead. Within the report a full breakdown of costs and budgets were detailed showing the differences between budgets and actual spend.

An overview of independent travel training was provided in addition to a summary of service feedback received illustrating the benefits of this training for children and their families.

It was asked what the circumstances were of the families who had appealed decisions after not being deemed eligible for home to school transport. It was noted that each appeal is different, and the outcome is decided by an independent panel.

RESOLVED:

- (i) The Committee accepted and noted the contents of the report.

F97 HOW GATESHEAD IS MEETING THE NEEDS OF CHILDREN AND YOUNG PEOPLE WITH SPECIAL EDUCATIONAL NEEDS AND DISABILITIES (SEND)

The Committee received a report providing an update regarding progress being made in relation to ensuring the needs of children and young people with SEND are being met.

It was noted from the report that the Council has a statutory duty to promote high educational standard, ensure fair access, promote diversity and ensure education is appropriate to meet the different age aptitudes and abilities of pupils in its area and make efficient use of its resources.

It was further stated that the Children and Families Act and the guidance in the SEND Code of Practise 2014 places a number of statutory duties on local authorities in relation to identification, assessment and provision for children and young people with special educational needs (SEN) for whom is responsible.

From the report a summary of the numbers of children and young people with Education, Health and Care Plans was provided. It was highlighted that there has been a 57% increase in the number of children and young people with such plans since 2014. It was noted that neighbouring authorities have also seen a rise in such figures.

The report detailed SEN support within mainstream schools and highlighted that the greatest areas of need within Gateshead are amongst school-aged children and young people include those with speech, language and communication needs and autism spectrum disorders.

It was requested that a further report be provided to the Committee on the work being done in Gateshead to support children with SEND. A comment was also made noting that the cost of out of borough provision could be removed if facilities were developed in Gateshead to support these young people.

RESOLVED:

- (i) The Committee noted the contents of the report and agreed to receive an additional update in the next municipal year.

F98 WORK PROGRAMME

The Committee received the Work Programme report which sets out the provisional programme for the Committee for the year 2018/19.

RESOLVED:

- (i) The Committee noted the contents of the Work Programme report and appendix.

Chair.....

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7 March 2019

TITLE OF REPORT: **Review of healthy weight across the life course
(Interim Report)**

REPORT OF: **Alice Wiseman, Director of Public Health**

Summary

Obesity is described as one of the most serious public health challenges in the 21st Century. It is recognised as a complex problem and the causes are affected by many factors including our behaviours, environment, biology, society and culture.

A simple and frequent stance is to focus on individual lifestyle choice, but this is only one small part of the picture. The complexity demands a whole system approach if we are to reduce prevalence and tackle the agenda effectively, with action at an individual, environmental and societal level.

The evidence is very clear that policies aimed solely at individuals will be inadequate and will not be sufficient to reverse this trend. Significant effective action to prevent obesity at a population level is required.

Background

- Families Overview and Scrutiny Committee have agreed that the focus of its review in 2018-9 will be obesity across the life course. The review has been carried out over a six month period and a draft interim report has been prepared on behalf of the Committee setting out key findings and suggested recommendations.

Report Structure

1. This interim report sets out the findings of the Families Overview and Scrutiny Committee in relation to the review of the healthy weight agenda across the life course and the impact of this agenda on Gateshead communities.
2. The report includes:
 - The scope and aim of the review
 - How the review was undertaken
 - Summaries of key points from evidence gathering sessions
 - Analysis – issues and challenges
 - Emerging recommendations

Scope and aims of the review

3. The scope of the review was to identify and examine:
 - The complexity of the obesity agenda. The Foresight obesity report (2007) identified over 100 factors that contribute to the prevalence of obesity. These can be broadly clustered into groups of influences including societal, media related, food industry, biological, environmental and psychological factors.
 - The current picture in Gateshead, in terms of prevalence of excess weight, the costs and the impact to society, communities, families and individuals.
 - The current evidence base as part of a 'whole system approach' including a focus on legislation, regulations, advertising control and the environment which people live, play and work
 - Identifying challenges and opportunities going forward, to maximise impact across the life course.

Responsibilities and Policy Context

4. Statutory duties for public health were conferred on local authorities by the Health and Social Care Act 2012. Local authorities have, since 1 April 2013, been responsible for improving the health of their local population. Section 12 of the Act lists some of the steps to improve public health that local authorities and the Secretary of State are able to take, which includes providing facilities for the prevention or treatment of illness, such as action on the healthy weight agenda. The National Child Measurement Programme (NCMP), also known as the School Height and Weight Checks, is a mandated annual programme delivered by local authorities.
5. In June 2018 'The Government' published Childhood Obesity: a plan for action chapter 2, with the ambition to halve childhood obesity rates by 2030 and significantly reduce the health inequalities that persist. The plan details that the Government has set a national ambition to halve childhood obesity and significantly reduce the gap in obesity between children from the most and least deprived areas/regions by 2030. There are clear priorities outlined for local authorities and schools to implement within the plan.
6. The whole systems approach to obesity is being introduced to help local authorities deliver co-ordinated actions involving partners across the system. This is an emerging programme of work and is being led by the Local Government Association (LGA) and Association of Directors of Public Health (ADPH) to develop the programme. Developed and tested with 11 local authorities, a whole systems approach guide is being developed for local authorities to implement from Spring 2019.
7. The Director of Public Health Annual Report (2018) for Gateshead is focused on obesity and highlights how societal changes over recent decades have exacerbated our risk of obesity. The report recognises the complexity of the issue, and that it is important that we move away from the idea that obesity

is caused by 'lifestyle choices' and instead recognise that the true causes of obesity are often a result of environmental, social, political and economic pressures. A whole systems approach for Gateshead is underpinned by the following aspirations.

- Ensure Gateshead is a place where everyone thrives.
- In Gateshead everyone is able to achieve and maintain a healthy weight.
- Promote an environment that supports healthy weight and wellbeing as the norm.
- Supporting our communities and families to become healthier and more resilient, which includes addressing the wider determinants of health.

Review Methodology

8. The review comprised three evidence gathering sessions. Evidence was sought from Gateshead Public Health Team, Public Health England (Regional and National Leads) and Newcastle University. The sessions were designed to examine the evidence base and current practice around the following areas:

- The current picture in terms of prevalence of obesity across the life course in Gateshead and the impact on socioeconomic inequalities in obesity and associated risk factors.
- A complex system and the underpinning factors shaping and influencing obesity e.g. obesogenic environment, food production, food consumption, societal influences, psychological influences, activity environment and biology.
- The commissioning responsibilities across the system for the healthy weight agenda.
- Overview of a whole systems approach and the role of the local authority.
- Learning from national and international good practice and research to inform the next steps for implementation.

First evidence gathering summary

Presentation by Andy Graham, Consultant in Public Health and Emma Gibson, Programme Lead, Public Health.

9. This first evidence gathering session provided an overview of the current picture in Gateshead across the life course, an introduction to the whole system approach being implemented by Public Health England and the proposed outline for future evidence gathering sessions.
10. An overview of the 'Whole System approach' was given which provides a different view to tackling obesity. A system approach to obesity moves away from silo working on short term interventions to working with partners across the system to review a range of actions to tackle obesity in the short, medium and long term.
11. The complexity of the healthy weight agenda was introduced and it was highlighted that tackling obesity is a long term, large scale commitment. The current prevalence of obesity in the population has been at least 30 years in the making. This will take time to reverse and it is reported that it will be at least 30 years before reductions in the associated diseases are seen. The evidence is very clear that policies aimed solely at individuals will be inadequate and will not be sufficient to reverse this trend.
12. Gateshead Council's has made a commitment to 'Making Gateshead a place where everyone thrives' In terms of the healthy weight agenda, we are beginning to better understand what works to reduce levels of obesity overall, however there is very little accessible evidence available on what works to reduce inequalities or differences in obesity levels between social groups. A Gateshead healthy weight health needs assessment was undertaken in June 2018 by Public Health and data shows:

- Maternal obesity is linked to an increased risk of pregnancy related complications and children becoming obese in later life. Data on the prevalence of maternal obesity are not collected routinely in the UK. In England it is reported that 27% of women are overweight and 21% of women are obese at the start of pregnancy.
- Local data shows that 20% of women have a BMI of over 30 (obese) on antenatal booking (the caveat for the data is that not all women attending a booking appointment at Gateshead Health NHS Trust will be Gateshead residents).
- Modelling indicates that by 2050 nationally 60% of adult men, and 50% of adult women could be obese.
- Data at a local level shows that 69% of adults in Gateshead are classed as overweight or obese, this compares to 66% of adults in the North East 66% and 61% in England. Almost two in every three adults in Gateshead have excess weight and around one in four are obese.
- Obesity rates are highest for children from the most deprived areas. Children aged 5 and from the poorest income groups are twice as likely to be obese compared to their most well-off counterparts, and by the age of 11 they are three times as likely.
- Over one in five children in Gateshead start school overweight or obese. By Year 6, in Gateshead over 1 in three children are overweight or obese
- Of those children who are obese at preschool age, research suggests that between 26% and 41% will go on to be obese in adulthood.
- Nationally, only 66% of adults self report that they undertake the recommended 150+ minutes of physical activity each week. In the North East this is even lower at 64% and for Gateshead 63.2%.
- It is estimated that by 2050, obesity and overweight will cost the NHS almost £10 billion a year, and the full economic cost will rise from around £27 billion today to £50 billion by 2050.
- NHS costs attributed to overweight and obesity in Gateshead are estimated to be £68.7 million per annum for 2015.

- Approximately a third of fast food outlets in England are found in the most deprived communities. Fast food outlets account for more than a quarter (26%) of all places to eat in England.

Gateshead has the fifth highest rate of fast food outlets per 100,000 population in the North East (160.5 per 100,000), and is above the England value. The presence of fast food outlets in the Metro centre is the highest (29 fast food outlets), followed by the Bridges ward (26 fast food outlets) and Birtley, with 21 fast food outlets. (Please note the fast food outlet is different to the hot food takeaway data used in Gateshead and in this instance 'fast food' refers to covers a range of outlets that include, but are not limited to, burger bars, kebab and chicken shops, chip shops and pizza outlets.

13. The Evidence Base

- The evidence base on effective action to tackle obesity remains weak, and skewed towards individual level downstream approaches (trying to manage the consequences of obesity rather than more upstream approaches, which attempt to solve the real problems underpinning obesity).
- Currently there are very few examples around the world of successfully reversing the trend of 'obesity' despite over a decade of interventions.
- Tighter legislation on tobacco, has led to significant reductions in smoking and changed attitudes towards tobacco. However, the introduction of this legislation would not have been possible without many years spent building public acceptance of the case for Government intervention. The healthy weight agenda is not yet at the point where the case for change has been made.
- There is some notable evidence in terms of the Amsterdam model. This approach succeeded by hitting multiple targets at the same time – from promoting tap water to after-school activities to the city refusing sponsorship. From 2012 to 2015, the number of overweight and obese children has dropped by 12%. Amsterdam has achieved what no other country has managed to do, the biggest fall in obesity rates has been amongst the lowest socio-economic groups and there is much learning from this approach.

Second evidence gathering summary

Presentation by Beverly Oliver, Health and Wellbeing Lead, Public Health England.

14. The second evidence gathering session heard evidence on the current national approach to the healthy weight agenda from 'Health and Wellbeing Lead' from Public Health England, Beverly Oliver.

- An update on the Childhood Obesity: a plan for action chapter 2, which outlines the actions the Government will take towards its goal of halving childhood obesity and reducing the gap in obesity between children from the most and least deprived areas by 2030.
- There has been progress nationally in the two years since the 'Childhood Obesity Plan', particularly in reformulation of the products children eat and drink most. Actions include taking out 20% of sugar in certain products, achieving 2017 salt targets, updating the nutrient profiling model and revised menus for early years settings.
- However, it has been acknowledged nationally that this action is not sufficient. The continuing magnitude of the challenge of obesity requires that the next steps to tackle obesity need to be implemented and have been outlined in the 'Second chapter of the childhood obesity plan,' these include:
 - Enforcing calorie labelling for food consumed 'out of home' (including online food delivery).
 - Intention to ban price promotions of high fat, salt and sugar food and drink (HFSS), such as buy one get one free and multi-buy offers or unlimited refills of sugary drinks.
 - Intention to ban the promotion of high fat, high salt and high sugar food and drinks (HFSS) food and drink by location (at checkouts, end of aisles and store entrance).
 - Consider extending the soft drinks industry levy (SDIL) to milk-based drinks if they fail to reduce sugar by 2020.
 - Consulted on introducing a ban to end the sale of energy drinks to children and results will be shared in early 2019.

- Review how the least active children are being engaged in physical activity in schools to ensure that our investment helps all children lead active lives
- A national ambition for every primary school to adopt an active mile initiative, such as The Daily Mile.
- At a place-based level, influence the way places are designed to ensure greater active travel or safe physical activity, and how many fast food outlets can operate near schools.

Local authorities have a range of powers to find local solutions however further national support is needed to empower organisations going forward, this includes:

- Development of a trailblazer programme with local authority partners to show what can be achieved within existing powers and understand “what works” in different communities.
 - PHE to develop resources that support local authorities who want to use their powers and set out the economic business case for a healthy food environment.
- There was an update on the main areas of progress from the childhood obesity plan since the original plan was published in 2016:
 - Voluntary sugar reduction programme -Companies were challenged to reduce sugar in foods children consume most by 20% by 2020 and 5% by March 2018.–
 - **Some good progress by the large companies in the market. Achieved 2% overall, not the 5% target set.**
 - Soft Drinks Industry levy introduced in April 2018 to drive reformulation of soft drinks.
 - **Good progress has been made with 49% of products in scope have been reformulated since the levy has been announced with a total reduction of 11%.**
 - Revenue from soft drinks levy invested into school PE and sport, facilities and breakfast clubs.

- **There has been over £600m invested in schools to date.**

15. An overview of the 'whole system obesity' programme outlined that the aim is 'to provide a tried and tested approach and tools, so that within 5 years every local authority can create a local whole systems approach to tackling obesity'
16. The whole systems approach to obesity was introduced to help local authorities deliver co-ordinated actions involving partners across the system. This is an emerging programme of work and is being led by the Local Government Association (LGA) and Association of Directors of Public Health (ADPH) to develop the programme.
17. Learning from the pilot sites was outlined - Lewisham, Gloucestershire, North Kesteven and Durham that could be implemented in Gateshead:
 - Support from elected members and senior leadership team is vital to spearhead the approach, change mind set and give permission to teams to allocate time to the approach.
 - Expectations need to be set and managed – this is a long- term approach; it will not deliver a short term solution to obesity.
 - Tackling obesity needs to be linked to meeting Local Authority priorities – the Thrive agenda, prosperity; regeneration; local economy; social care etc.
 - Need sustained buy in and commitment from stakeholders with competing priorities – many of the actions sit outside public health.
 - Time needed to plan, implement and sustain.
 - Need to embed a clear understanding of what systems working involves and associated behaviours.
18. Gateshead Public Health Lead, outlined current local action that is being implemented in terms of the healthy weight agenda.
 - A recognition of the importance of this issue, means that the Council has also been making progress in taking forward the whole systems learning.
 - Gateshead was selected by PHE to review the whole system material and resources developed by pilot sites. The materials are to be finalised and rolled out in 2019 to Local Authorities.

- An application has been submitted from Gateshead to apply for trailblazer funding to tackle childhood obesity at a place-based level (100k per year over 3 years), Edberts House, Newcastle Gateshead CCG are key partners of the whole system place-based approach to childhood obesity.
- Gateshead public health are working with PHE to develop a 'Healthy Weight Declaration'. This will be the first in the region and will support the commitment and sign up from partners to a system approach and the need for all policy areas to address healthy weight. The DPH report focused on 'healthy weight' for 2018 and this was presented to Cabinet in January 2019.
- Initial work has started looking at restrictions on advertising and promotion of high salt, sugar and fat food and drink on the local transport system. This builds on the work currently being implemented on the London Transport System.
- The 0-19 years 'Growing Health Team' (health visitors and school nursing services) provided by Harrogate NHS, has now a dedicated infant feeding and nutrition lead. This provides a key focus for breastfeeding, weaning and nutrition for the crucial early years period and also supports healthy weight agenda for school children.
- Work has progressed with the 'Regional Local Maternity Systems Co-ordinator' following the Obesity in Pregnancy Self-Assessment Tool to focus action on key areas of improvements.
- Newcastle Gateshead CCG and Public Health are working together to review current services and approaches to healthy weight being delivered across the system and looking at areas for improvements.
- Gateshead provided an extensive response on the consultation to end their sale of 'Energy drinks' supporting the ban. We are awaiting a national response on the consultation. The next stages are being reviewed in terms of how this can be implemented nationally.
- A healthy weight workshop will be held in March 2019, focused on a system approach and utilises the pilot whole system materials. The aim is to identify opportunities to alter the existing system.

Third evidence gathering summary

Presentation by Professor Tim Townsend, Professor of Urban Design for Health. School of Architecture, Planning and Design, Newcastle University

19. The third evidence gathering session focused on obesity and the built environment and obesogenic environment - “an environment which promotes weight gain, and which is not conducive to weight loss.

Key points of the presentation include:

- There is a complex web of societal, behavioural and environmental factors that make it increasingly difficult for most of us to maintain a healthy weight. People in deprived neighbourhoods live shorter and healthier lives than those in less deprived ones. Socio-economic status alone does not explain the difference and there is increasing evidence that the physical environments in which people spend their lives are implicated in health disparities.
- The linkages between health and the built and natural environment have long been established and the role of the environment in shaping the social, economic and environmental circumstances that determine health is increasingly recognised. For example, the built and natural environment of our neighbourhoods can influence physical activity levels, travel patterns, social connectivity, mental and physical health and wellbeing outcomes.
- Residents of walkable neighbourhoods who have good access to recreation facilities are more likely to be physically active and less likely to be overweight or obese. Research shows residents of communities with ready access to healthy foods also tend to have more healthful diets.
- Convenient lifestyles, technology to perform our work and play functions enables us to move less, and the growing reliance on cars to get about have resulted in a decline in walking and cycling as modes of travel. Nationally, over 50% of journeys made by car equate to five miles or less and 20% are one mile or under which is equivalent to a 20-minute walk! The influence of greenspaces, such as urban parks, has also been a focus of interest.

- Evidence suggests that participating in physical activity in a natural setting is associated with improved mental health outcomes than participation in indoor setting. Overall, however, studies associating greenspaces and physical activity have produced positive results, however there is conflicting findings. In terms of green spaces and health inequalities there is emerging evidence as outlined below:
- Those living in the most deprived areas are less likely to live in the greenest areas.
- Those living closer to green spaces tend to live longer than those with no green space.
- Children who live close to green spaces have higher levels of physical activity,
- The growing evidence base that suggests our high streets are bad for our health and for the obesity epidemic – “toxic high street”. Are some shopping streets in poorer neighbourhoods harmful to physical and mental health, including obesity? There is a growing body of research, which suggests that many contemporary urban environments do not support healthy lifestyle choices and are implicated in the obesity pandemic. This presentation provided detail on the evidence around exposure to unhealthy shops and services and how this may impact on communities e.g. betting shops, money lenders and hot food take aways. Research has established links between the proliferation of fast food takeaways and obesity in older children.
- The effect of our environment on what we eat is particularly strong when we are in stressful situations and this is particularly true of people living in deprived areas and on low incomes who are facing challenging times. For instance, the stress of wanting to plan and provide healthy meals is heightened when you are unable to do this realistically due to financial pressure. This leads to extra stress and a likely reliance on the convenient, unhealthy food outlets right on the door step with cheap, accessible unhealthy foods.

Good practice in Gateshead

20. Five-years on since public health responsibilities moved back into local government and the first significant planning reforms in England, the Town and Country Planning Agency (TCPA) re-examined the challenges experienced by councils in 2018 and beyond in integrating health and planning settings in localities.

21. Gateshead's role in this project was to host a workshop in September 2018 on health and planning, in looking at how to influence creating healthy places where people thrive. Work has started within the council and with partners looking at new innovative ways of integrating health and wellbeing through planning sector and development processes, through the green infrastructure environment. An action that emerged, which is not current practice, is to map Gateshead's green infrastructure layered upon Gateshead's obesity levels by location and establish 'hot spots' where more immediate action could be taken in a specified location. This would take a holistic approach, across the specialisms and sectors to ensure real change happens on the ground.

Gateshead Supplementary planning Document

24. In Gateshead, a Supplementary Planning Document (SPD), supported by an integrated public health policy, has been used successfully to control the proliferation of hot food takeaways in areas with high levels of child obesity. The conditions set out in the SPD mean that there are currently no locations where opening a new hot food takeaway would be suitable. Since the SPD was adopted, no new planning applications for hot food takeaways have been approved. The number of applications has also dropped.

25. The planning system alone cannot solve the problem of obesity whose causes are many and complex. One obvious obstacle is that councils' planning powers can do nothing to address the clustering of fast food outlets that are already in place. Planning experts highlight that the planning system is not designed to deal with the detail of how a business is operated, but rather with how land is used: the licensing system if it were strengthened might be a

more effective route for looking at issues of quality. The food environment is one aspect; however, it is important to recognise that there are also links with the built environment and its impact on health. There are still challenges for the future:

- This SPD applies only to Hot Food Takeaway's (A5 use), not fast food outlets (A3 restaurant use).
- There are issues controlling mixed use developments /ancillary use.
- It doesn't impact on existing premises – the public don't see much change.
- Many other initiatives across the system are needed to tackle obesity - one initiative alone won't work.

26. A further complexity is that many local shopping streets in deprived areas are already a 'toxic' mix of takeaways and other unhealthy businesses (payday loan, betting shops, etc.). The supplementary impact of issues such as depression, due to indebtedness, or addictive behaviours associated with gambling on obesity levels in poorer communities, encouraged by the access and availability of these shops and services, is yet to be unravelled, but again further research is urgently needed.

Issues/challenges emerging from the review

27. During the course of the evidence gathering sessions a number of key issues and challenges were identified:

- **Complexity**- Obesity is a complex issue with many drivers, meaning efforts at prevention are particularly challenging. According to the UK national obesity strategy, long term sustainable change will only be achieved through the active engagement of schools, communities, families and individuals with action required across government, industry and the Public Sector. There is no single intervention which can resolve this issue due to the complexity involved and in order to address this challenge it is clear that a response by the whole Gateshead system is required.

- **Long term commitment-** Successfully tackling obesity will be a large-scale commitment and will take time to reverse - it is reported that it will take at least 30 years before significant impacts are achieved on the diseases associated with obesity. Just as obesity develops slowly, both within individuals and populations, it will take time to establish new habits and build new structures to support healthy diets and enhanced physical activity.
- **Whole system approach** - No single measure is likely to be effective on its own in tackling obesity. This is difficult to accept because our ways of working are based on identifying feasible solutions to tangible problems. With obesity this simple linear assumption (do A and B will occur) is not realistic. A different approach is required which recognises complexity and brings together a range of organisations and individuals to consider how society can respond – a whole-system approach. The challenge is to identify the components in the system and the connections between them, understand the behaviour of the system, and identify where to intervene to drive change.
- **The Evidence base** -The evidence base on effective action to tackle obesity remains weak and skewed towards an individual downstream approach, trying to manage the consequences of obesity rather than upstream approaches, which attempt to solve the problems underpinning obesity. The evidence is very clear that policies aimed solely at individuals will be inadequate and that simply increasing the number or type of small scale interventions will not be sufficient to reverse this trend. Significant effective action to prevent obesity at a population level is required. Much of the existing evidence base on obesity fails to take adequate account of the complex nature of the obesity system.
- **How do we challenge the Food Industry?**- The obesogenic environment is powered by widespread availability and the food industry's multi million-pound promotion of high fat, high sugar and high salt food and drinks. How do we challenge and influence the Food Industry to make a sustained change?

- **Weight bias and stigma.** Considerable work is still required to re-frame the focus on healthy weight, to move away from the continued focus on personal shortcomings, individual blame and individual behaviour change interventions. There is extensive research highlighting the bias and stigma and personal blame, people who are overweight and obese may experience. A recognition of the role and impact of societal changes needs to be acknowledged.
- **Inequalities.** Obesity is usually treated as a problem and responsibility of individuals or families – not as a social problem. Action needs to be taken to collectively tackle obesity which impacts on stressed communities characterised by insecure and often erratic employment, stress, depression and often a lack of social cohesion. For example despite spending less on food in real terms than more affluent families, the amount these parents spend is double the percentage of their income compared to parents with more disposable income

Draft Recommendations for the Review

Recommendation 1: A whole system approach -The Council is in an influential position to help lead transformational change in how obesity is tackled. A whole system approach to obesity provides the process to do this and demonstrates a genuine 'health and wellbeing in all policies' approach. Gateshead council will work with stakeholders and communities to develop an ambition for a healthy weight generation in Gateshead. **Action-The first in a series of whole system healthy weight workshops, utilising tried and tested material will be starting in March 2019.**

Recommendation 2: Clear Leadership-This approach to the obesity problem supports the Council's Thrive strategy and the pledges which underpin this. The Council has the opportunity to be a lead organisation in this whole-system approach. The first step to this will be to develop a vision for a healthy weight generation and engage with key system stakeholders to gain buy-in. This leadership role is crucial in

developing a workable whole systems approach. **Action- Gateshead will have a shared vision and commitment to the Healthy weight agenda, with medium and short term actions that work towards that end vision: 20 year vision, 5-year strategy and a 1 year plan.**

Recommendation 3: Strategic and Operational group-Creation of a strategic steering group to consider the vision for a healthy weight generation for Gateshead and to decide priorities. **Action- A planning event to consult with a wide range of stakeholders to inform this and the creation of an inclusive 'Healthy Weight Alliance' to tackle operational aspects**

Recommendation 4: Health in all policies approach (HiAP)- Promotion of a health and wellbeing in all policies approach to ensure that the Council gives due consideration to the impact of its decisions on obesity. **Action- Develop a framework for taking this work forward and to support whole systems working.**

Recommendation 5: Focus on inequalities- A focus on strategies to address the healthy weight agenda across the social gradient. **Action to focus efforts on those facing greatest challenge alongside a focus on high risk groups e.g. learning disabilities, pre-pregnancy, pregnancy, infancy and early childhood are critical periods for interventions to reduce obesity and inequalities.**

Recommendation 6- Long Term Commitment- The need for long-term strategies spanning several generations and beyond traditional planning cycles. Longer term commitment is needed from all partners in Gateshead and lessons learnt from tackling smoking, is that it takes longer than 5 years for the impact of public health work to come to fruition. **Action-The development of a joint: 20 year vision, 5-year strategy and a 1 year plan for Gateshead's healthy weight ambitions.**

Recommendation 7- Healthy Weight Declaration- To establish a healthy weight declaration for Gateshead working with partners to understand the contribution of each partner and ensure commitment to action through a multi agency partnership.

Action-Local declaration developed for Gateshead, in recognising the need to implement and promote policies which promote healthy weight.

Recommendation 8- Community led interventions- Tackling obesity as part of a placed-based, approach driven by the community. Work with and enhance the assets that already exist within in the community so that interventions to tackle obesity are co-produced as part of a placed-based approach. **Action-Build on the 'Fit for the Future' work which is a good example of a community centred approach to address health inequalities and to promote healthy weight to children and families.**

Recommendation 9-Tackling food advertising/promotion (HFSS)- Support advocacy for policy changes at a national level by lobbying efforts to prevent and reduce obesity to encourage national policymakers to devise effective public health policy interventions across the system e.g. advertising and promotions. **Action-Lobbying for local government to be given more powers to impose restrictions to meet local priorities.**

Recommendation 10: A balance between population and targeted approach- Achieving a balance between population level measures and more targeted interventions. **Action-Gateshead is committed to a population approach which includes a focus on the design of the built environment to promote walking and active transport, building health into infrastructure through careful investment and seeking to reduce exposure to the obesogenic diet by focusing on energy density of foods and sugar-rich drinks. Gateshead is also committed to develop approaches to help those who are already obese or considered to be at high risk of becoming obese, with a clear focus on children and young people.**

Next steps

1. The committee are asked to note the contents of this report and comment and agree the draft recommendations.

Contact: Alice Wiseman Ext. 2777

TITLE OF REPORT: Special School Provision and Developments

REPORT OF: Strategic Director of Care Wellbeing & Learning

EXECUTIVE SUMMARY

This report is an annual update relating to the changes and developments to special school provision.

1. Background

Special school provision is constantly changing and evolving because it is affected by changes in mainstream provision, nature and complexities of special educational needs and disabilities, local and national policy. This report will outline the amount of provision available, future needs and new developments across the schools.

2. Current Context

There are 6 special schools in Gateshead, Dryden and Hill Top schools are a hard federation, though they continue to function as separate schools with a single governing body. They have now individual headteachers where previously they had an executive headteacher and heads of school. The previous heads of school have been appointed to headteachers following interviews by the governing body. Dawn Winter is now headteacher of Dryden school and Louise Coulson Hill Top school. Furrowfield and Eslington schools are also a hard federation and the Executive Headteacher is Michelle Richards. Gibside school's headteacher is Judith Donovan and The Cedars headteacher is Martin Flowers.

All of the schools have been rated by Ofsted as at least good with Dryden, Eslington and Gibside schools deemed outstanding schools. This supports the view that Gateshead is maintaining high quality special school provision.

This report acknowledges that the special schools in Gateshead have exceptional governing bodies who bring strong support, challenge and commitment to the schools. Governors have a high level of skill and experience. They include previous senior colleagues in the LA, current councillors, leaders in industry and business and highly committed parents.

3. Current developments

3.1 Hilltop

Hill Top school was inspected June 2018. The findings of the inspection acknowledged that the school prepared pupils for adulthood well. It was evident that the school also promotes independence in pupils well. Although most pupils travel to and from school on school transport, some pupils have learned to travel to school independently. It was also commented that the school provides well-considered accreditation and courses in key stage 4 and post 16 that enables them to develop skills and experience for college and work.

There are 123 pupils in total in school, an increase of 7 pupils on the previous year. The school have projections that numbers will continue to increase particularly for those pupils with autism. The impact of this may be the need for further classroom accommodation as all 19 classrooms are currently used.

Also because of the increase in the number of pupils with autism, school are currently reviewing the curriculum and assessment arrangements for complex autism.

The governing body at this inspection was acknowledged for the good support it gives the school. The school are about to replace their Chair of governors, Alan Sergison who has recently passed away. Ofsted rightly recognised his contribution to the school. *'The work of the experienced chair of the governing body is highly valued and he is ably supported by governors with a wide range of experience.'*

3.2 Gibside

Numbers on roll are currently 163 which supports the council's decision for a new school. The predictions of ongoing increasing numbers have been realised. This new building is due to be opened September 2020. There remains a continued increase in autism for the school. Excitement is palatable in the staff and leaders for the new opportunities the new school will bring and the opportunities it will have situated in central Gateshead. The school are now considering the staffing they will need and the funding required to set the school up for its move.

Gibside school maintained its outstanding Ofsted judgment at its inspection March 2017. Ofsted said, *'Superb relationships between staff and pupils pervade the school's work. Staff work skilfully together to tackle pupils' individual barriers to learning. Pupils benefit from the highly individualised activities provided to meet their needs.'* Current observations of teaching show that this remains the same. There is a broad range of needs from profound multiple learning difficulties to those pupils who have more moderate learning difficulties. The school are focusing on their practice to increase challenge further for those pupils who are more academically able in school. The school has also national involvement with assessment.

Other school priorities cover - embedding a new assessment in school and offering other curriculums that meet individual pupil needs.

3.3 The Cedars Academy

There are currently 182 pupils on roll, an increase of 7 pupils on the previous year. Pupil numbers continue to be high and remain the highest seen in the school's history.

The school has built a new primary provision. The new classrooms are large and well presented. The school has also created other unique areas so that children can experience forest school experiences, a secret garden and outside classrooms. The school is very focused on enrichment activities after school and has regular residential for pupils to develop their social and personal skills.

The school was last inspected September 2017 and received a good rating overall. It achieved an outstanding rating for personal development, behaviour and welfare. The school continues to strengthen particularly in leadership since this inspection. There is an enthusiasm in the leadership team and leaders at all levels are confident in their practice. Leaders have provided valuable contributions to the local authority in assessment, post 16 and sports education.

The school are currently preparing their offer at post 16 in consideration of the future funding they will have available at post 16 and pupil needs they will be able to support.

3.4 Eslington

Eslington Primary School has 66 pupils on roll. In March 2017 it maintained its outstanding judgement. Ofsted said, *'Determined, visionary leadership has sustained the strengths noted at the time of the previous inspection and driven further improvement in all aspects of the school's work. Consequently, pupils thrive and make great progress in their learning, behaviour and in their social and emotional development. Highly analytical and reflective leaders leave no stone unturned in identifying and then tackling things that are not as strong as they should be.'*

The school continues to maintain a high quality of provision for its pupils because of the strong leadership in place and practice that is consistently applied.

The mental health of pupils and staff has been a strong focus for the school. The executive headteacher and Heads of Eslington and Furrowfield schools have strong professional expertise they share beyond the schools.

There are high numbers in the school on child protection plans and/or involvement with social care. This involves a large number of meetings with other professionals and managing the emotions and behaviours of pupils who are experiencing quite challenging circumstances. The staff are excellent in their work in this area.

3.5 Furrowfield

Furrowfield School has 73 pupils and 14 currently in residential provision attending for four nights.

The school is now providing a curriculum which provides a primary nurture approach for those pupils in years 7 and 8 who are academically less ready for a secondary curriculum and need to remain in one class. As the pupils learn academically and socially they develop confidence, become responsive to others, learn self-respect and take pride in behaving well and in achieving.

The school funds a psychotherapist who works with individual pupils. This provides highly specialist provision for the most vulnerable pupils in the school. These pupils may have bizzare behaviours, complex needs or significant mental health needs. Though this is an excellent support to individual pupils the school feel they need greater access to Children and Young People Service (CYPS) to address the needs of many others in school.

The school was inspected February 2017 and judged good. It remains a strong school. It was described as *'a haven of care and support for pupils who have had previous unsatisfactory experiences of school. The management of behaviour and support for pupils' social, emotional and personal development, alongside the development of the skills they will need to be successful adults, stands out in all the school's work.*

Crossfield House, the residential provision was inspected in February 2017 and was judged as 'good' in all areas. A dedicated pastoral team or House Parents support pupils in both the residential and in the school.

Furrowfield, since the last report, has a new Head of school, Rachel Jukes, working with Michelle Richards the executive headteacher. They, and other leaders, continue to drive this school forward very successfully.

Strong governance for Eslington and Furrowfield schools supports them well with an exceptional level of experience brought to the school. Their knowledge of the schools is sound and they have high expectations for the quality of information they receive.

3.6 Dryden

The school currently has 47 pupils on roll. This is made up of 35 in key stage 3 and key stage 4 and 11 pupils in post 16. Although post 16 is full there are fewer pupils in key stage 3 and 4 than previous years. This is 10 pupils less than 2018. This has impacted on a significantly reduced school budget and the need to reduce staffing. There is potential for more pupils in the school which needs to be considered alongside the growing numbers in other special schools.

The school is waiting for an inspection which is overdue. It is currently outstanding and the headteacher and governors have high expectations for the school and that it will remain outstanding.

The school's key priorities are:

- sustain outstanding at the next imminent Ofsted inspection
- sustain numbers and staffing for this specialist provision
- maintain amount and quality of provision needed for medical/ health needs across school

3.8 Current considerations and discussions

- 1 Currently we have 614 pupils in special schools. There are currently 12 children and young people with an EHC Plan with Social, Emotional and Mental Health (SEMH) as their primary need being educated outside of Gateshead. We have 29 pupils across the schools from other local authorities. The highest number is 12 in The Cedars. All but Dryden school are above their commissioned numbers.

Top 5 SEN Categories - Gateshead special school pupils

	2019
Autism Spectrum Disorder	188
Moderate Learning Needs	127
Social, Emotional and Mental Health	88
Speech, Language and Communication Needs	56
Severe Learning Difficulty	47

This is putting pressure on the amount of provision we have available and tension on using provision outside of Gateshead. At this moment we have increased numbers particularly in Autistic Spectrum Disorder and Social Emotional Mental Health. We will have to consider how we continue to accommodate this growth in demand for special school places.

- 2 The local authority has a consultation out on post 16 provision and changes to provision in special schools. The outcome of this consultation will inform the future provision available and curriculum offer schools will be able to make at post 16.

4. Recommendation

It is requested that the Overview and Scrutiny Committee continue to receive this annual report on Special schools and provision.

Contact: Ann Muxworthy, Inspector SEN and Inclusion

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**FAMILIES OVERVIEW AND
SCRUTINY COMMITTEE
7 March 2019**

TITLE OF REPORT: Children and Families Social Work Recruitment and Retention

REPORT OF: Caroline O'Neill, Strategic Director, Care Wellbeing and Learning

POLICY CONTEXT

1. It is well understood that Social Work is a tough and demanding career that requires people who are highly skilled, resilient and intellectually able. Over the years many tragic child deaths have led to Government commissioning reviews and reforming statutory guidance and legislation.
2. In July 2016 the DFE (Department for Education) published its strategy to transform Children's Services due to ongoing concerns that the reforms of the previous years had not improved the quality of work with children and families. **'Putting Children First'** describes fundamental reform using 'three pillars' the DFE identify as significant in the children's social care system as it stands:
 - **People and leadership** – bringing the best into the profession and giving them the right knowledge and skills for the challenging but hugely rewarding work ahead, and developing leaders equipped to nurture practice excellence
 - **Practice and systems** – creating the right environment for excellent practice and innovation to flourish, learning from the very best practice, and learning from when things go wrong
 - **Governance and accountability** – making sure that what is being done is working, and developing innovative new organisational models with the potential to radically improve services.
3. A significant part of the reform thus far has also involved the DFE and the Chief Social Worker for children, Isobel Trowler, publishing Knowledge and Skills Statements (KSS) for Children's Social Workers (to be known as Approved Child and Family Practitioners) and their Team Managers (to be known as Practice Supervisors) and Senior Managers (to be known as Practice Leaders). The holders of these posts will be subject to an accreditation and assessment process delivered through the DFE over the next few years. Local Authorities are expected to ensure that Social Workers working in the 3 tiers described above are ready for the accreditation and assessment process by endorsing their practice.
4. The Government introduced, and currently supports, two fast track training programmes for would be Social Workers. The first, called 'step up to social work', launched in 2010 is a graduate scheme for those switching career. Evaluation of the

programme has indicated that it has generated a group of highly capable and committed new entrants to social work.

5. The second, is called Frontline, launched in 2014 and is based on the Teach First fast track model. High-flying graduates, typically from Russell Group universities are recruited and trained as Social Workers. An evaluation of Frontline in 2016 found that early indicators were 'most positive'.
6. Both of these programmes involve partnership arrangements with interested Local Authorities of which Gateshead is one. The quality of practice delivered by the participants and graduates from both schemes is extremely high.

Background

7. At the OSC meeting held in March 17, the Principal Children & Family Social Worker (PCFSW) presented a report, which outlined the difficulties experienced by teams in recruiting and retaining Social Workers in Gateshead. We knew that most Social Workers remain in the North East and move between the region's Local Authorities so in recruitment terms the available pool is a small one. Due to this Gateshead along with the other regional Local Authorities are always going to be vulnerable to local pressures such as the deleterious effects of negative Ofsted judgements. The recruitment and retention allowance was therefore proposed on the basis of a Local Authority benchmarking exercise, taking into account some known and some future anticipated outcomes in the region.
8. To recap, as at April 2016 sixteen (16) Social Workers left the Council's employment during a very short period of time. A rolling programme of recruitment advertising for both newly qualified and experienced staff was put in place due to the difficulties experienced in attracting sufficient experienced staff. Although the appointment of newly qualified Social Workers is helpful in terms of a longer-term strategy to 'grow our own' the limits placed on newly qualified Social Workers prevent a full caseload and the allocation of complex cases. Therefore, there is a limit to how many newly qualified Social Workers the services can tolerate without the need for additional capacity.
9. In response, Gateshead Children's Services had to rely on procuring experienced agency staff to maintain safe levels of capacity within its Social Work teams.
10. The report also referenced six outcomes to mitigate the difficulties in retention and recruitment. The first of which included a plan to enhance Social Work salaries across the board and align our recruitment processes to the KSS. The report further noted what efforts would be made to make Gateshead an authority where Social Workers want to work and remain. Cabinet approved the recruitment and retention package for Children & Families Social Work that came into force in May 2017 and confirmed in December 2018 that it should continue for a further 2 years.
11. In March 2018 the Principal Children & Family Social Worker (PCFSW) presented a report to OSC, which noted a marked improvement in successfully securing Social Workers to permanent posts in Gateshead and a 62.5% reduction in Social Workers

leaving the Council. The report covered the period from the R&R allowance being agreed by Cabinet (May 2017) to 28th February 2018.

Current update on the six outcomes-period 1st March 2018 to 31st December 2018

Outcome 1

12. **A competitive, if not higher salary offer, than our competitors based on new job profiles aligned to the KSS standard (see also appendix 1 and 2).** Since the last report Gateshead's position has continued to remain stable.
13. In **Referral and Assessment** there have been 2 new starters. Both of whom are experienced Social Workers. One chose to leave their Local Authority to come to Gateshead (relocated from a London Council) and the other chose to stop agency work in favour of a permanent contract with Gateshead.
14. Referral and Assessment lost 2 Social Workers in the period. 1 left on health grounds and 1 newly qualified Social Worker (a Frontline graduate) left to work in a Local Authority nearer to her home area.
15. **Complex Child in Need team** (CCiN/Edge of care team) successfully recruited to 1 vacancy. The candidate was an experienced Social Worker and chose to stop agency work in favour of a permanent contract in Gateshead.
16. There has since been 3 Social Workers leave, 2 to join agencies and 1 to take up a post in another Council.
17. In **Safeguarding and Care planning** (SGCP) there have been 15 new starters, 10 of whom came from other Councils and 5 from Frontline. 6 are newly qualified.
18. Retention in **SGCP** is an improving picture with 9 leavers, 1 transferred internally and 1 left on health grounds. Of the remaining 7, 4 took up posts in other Councils, 1 went into hospital Social Work and 1 left following the birth of her baby.
19. In the **Looked After Team and Fostering service** 2 team manager posts and 2 Social Work posts have been successfully appointed to.
20. There were 5 leavers in the period, 2 on medical grounds. 2 took up posts in other Councils and 1 left to join an independent fostering agency.
21. EDT have remained unchanged.
22. In summary the recruitment and retention policy has continued to secure Social Workers in permanent posts in Gateshead with low number of Social Workers choosing to leave the Council in favour of another Council. Of the 19 social Workers that left their posts only 8 left the authority to work for another Council (42%).
23. The services are currently recruiting to 6 vacancies.

24. The PCFSW initiated a survey in May 2018 directed only at children's social work and aimed at understanding the issues around recruitment and retention of Social Workers in Children's Services. Of the 125 Social Workers surveyed just over 45% returned a completed survey. The feedback was generally positive with Social Workers identifying Gateshead as a good place to work where they felt safe to practice and supported by their colleagues and managers. There were high rates of job satisfaction and the feeling that they are making a difference to the lives of the most vulnerable residents of Gateshead.

Service area	New Starters	Leavers	Total number of NQSW in Service
	01.03.18 - 01.01.19	01.03.18 - 01.01.19	Current
R&A	2	2	0
CCiN	1	3	0
SGGP	15	9	6
Fostering	0	2	0
LAC	4	3	1
EDT	0	0	0
Total	22	19	6
	22 (all new to the Council)	19 <ul style="list-style-type: none"> • 1 transferred internally • 4 left on medical grounds • 1 left following pregnancy • 3 joined an agency • 1 to hospital SW • 1 joined an independent fostering agency • 8 took up posts in other Councils 	

Outcome 2

25. **A recruitment process that is in line with the KSS and selection processes that provides a solid baseline assessment of candidates that can pull through into the employer practice endorsement process.**
26. The Ministers plans for the national accreditation and assessment of Children's Social Workers (NASS) are ongoing, although have not been universally welcomed by the profession. Crucially, at this moment in time the accreditation is not a mandatory process. At this time the intention is still for a 3-phase approach to roll out. Phase one (mid 2018) has involved five local authorities to test the delivery mechanism. Phase two (early 2019) will involve work with a further 12-15 local Authorities to build a working prototype to be rolled out nationally. Both phases will be underpinned by analysis from an independent research partner. Phase 3 (by 2020) will be full roll out involving a four-stage approach to assessment:
- **Stage 1:** individual social worker practice endorsement by the employer – in the workplace over a period of time
 - **Stage 2:** an online assessment of knowledge
 - **Stage 3:** an observed interactive practice simulation in a controlled environment with independent examiners
 - **Stage 4:** a written assessment
27. The PCFSW in collaboration with Gateshead's HR service have already aligned all Social Work job profiles to the KSS and assimilated existing staff to the 4 main levels- Newly qualified entry level, Experienced Child and Family Practitioner, Practice Supervisor and Senior Practice Supervisor. Recruitment processes are now more stretching for candidates at each level and focus on those competencies identified for each KSS.
- The continuous professional development (CPD) offer has also been aligned to the KSS and is intended to contribute to enabling Social Workers in achieving accreditation once they are ready to be sponsored through the process.
28. Workforce Development have developed an addendum to the Corporate Appraisal and Development Tool, which will support Social Workers within Children & Families to clearly map their achievement of the KSS appropriate to their level. This will further support stage 1 of the NAAS "employer endorsement" ensuring only the Social Workers who are fully prepared are put forward for accreditation.

Outcome 3

29. **A clear programme of development that can demonstrably attract Social Workers, both newly qualified and experienced, to Gateshead because they will know their practice will be enhanced and developed within an organisation that is prepared to invest in their future development and achieve accreditation.**

WFD have continued to develop a programme of training for Social Workers that meets their CPD requirements and ensures that their practice knowledge is both current and relevant. A significant development this year has been the secondment of the previous Frontline CSW into a pilot role of **Senior Practice Supervisor**

(Quality of Social Work) funded from the income generated by our partnership with Frontline. The focus of the post, in short, is to:

- Contribute to creating a culture where Social Work can flourish
- Support the development of coherent models of Social Work delivery (based on systemic, relational and collaborative practice tools)
- Supporting a learning and service improvement system-this will include a direct input and influence on the ASYE programme in Gateshead.

30. The establishment of this post has enabled the training offer to be expanded, particularly the roll out of a systemic and strength based modular programme for all Social Workers in Children and Families (see outcome 6 for more details).

Alongside this programme WFD have commissioned specialist training on Attachment, Trauma and Adverse Childhood Experiences (ACEs) to compliment the systemic practice training programme. ACEs is a topic which has been identified by the LSCB, SAB, Community Safety and Public Health as an emerging topic and a multi-agency ACEs conference is being hosted by Gateshead. Further training for staff will, following this event, to support staff development in this area across both Children's and Adults Services. WD has provided a variety of other training programmes to ensure social work staff are continually supported in their professional development and to support retention of the workforce:

- Parenting Assessment (PAMs) Training for social workers within the service;
- Jewish Cultural Awareness
- AIM training (Assessment of Adolescents who display Sexually harmful behaviour - under and over 12 years)
- How to argue better – working with parents in conflict
- Children – Capacity, Consent and the Mental Capacity Act
- CIN and CP plan training
- LAC Plan training
- Age Assessment and Triple Planning (Asylum and Refugee)

A series of Practice Shorts have also run, these provide an opportunity for social workers to attend a short workshop on a specific topic without having to commit to excessive time away from their main job role:

- ACEs
- Genograms
- Non-violent Resistance (NVR)
- Activities for Direct Work with Children
- Motivational Interviewing
- Parenting and Nurturing Approaches
- Typical Teen Behaviours
- Resilience Café (Mindfulness)

Outcome 4

31. **A clear progression structure that invests in preparing the talented to become future Practice Supervisors and Leaders.**

32. We continue to provide newly qualified social workers (NQSWs) with the support and guidance they need during their Assessed and Supported Year in Employment (ASYE). There are currently 9 ASYE's in the children's Social Work services at this time from 5 from Frontline and 4 from local HEI's.
33. The calibre of our ASYE's continues to be very high and serves to strengthen the quality of Social Work in Gateshead. The nurturing and supportive approach to ASYEs in Gateshead grows the resilience of future social workers and promotes Gateshead as an employer of choice.
34. The authority has a progression policy for Social Workers who have the necessary skills, knowledge and experience as well as academic evidence to move to the role of experienced social worker. The aim of the progression policy is to ensure that the social workers who can demonstrate a level of ability consummate with the role of an experienced social worker are able to progress. Upon completion of a demanding and stretching portfolio of evidence all social workers attend an interview with the PCFSW and a Service Manager from the relevant service to establish their suitability for this role.
35. Gateshead continues to support our front line Social work managers to attend the Firstline leadership programme. A fourth cohort started in September. Attendees on this programme is intended to identify and prepare the senior leaders of the future in Gateshead.
36. The continued partnership with Frontline and 'step up' has significantly strengthened our recruitment and retention policy by growing and retaining our own. This year we have two units of 5 Frontline participants who will graduate in July and work with us for their ASYE year. This will achieve our initial target of having recruited at least 20 Social Workers from the two programmes by 2020. It is our intention to take a further unit of 5 in 2019/20.

Outcome 5

37. **Caseloads that are manageable and allow for quality Social Work, whereby risks are appropriately assessed, and proportionate responses provided; helping to manage needs "down" and preventing them from escalating up.**
38. Caseloads continue to be carefully monitored and overseen by managers and leaders at all levels. There is a workload management policy that sets the acceptable caseload numbers across the services within a range of 18-20. There is also a caseload weighting system in place that seeks to measure activity as well as the numbers of cases held by Social Workers. There are inevitably peaks and troughs in numbers and activities. An additional 4 peripatetic posts, (above establishment) have been utilised to manage demand within SGCP and R&A which has meant that demand is currently within acceptable parameters. Average caseloads across the entire children's Social work workforce currently sit at 14 children per worker, although this is a very crude measure of activity and doesn't take into account the experience of individual workers, complexity of case or FTEs.

Outcome 6

39. **A unique selling point that is rooted firmly in Social Work and appeals to the hearts and minds of our existing Social Workers and those who we seek to recruit.**
40. The last report noted that Frontline delivered two conference workshops in Gateshead to help us understand the principles and see the practice advantages of systemic practice as a model for intervention with children and their families. This cemented our resolve that this was an appropriate model that we wanted to roll out. . The development of the Systemic and Strengths Based Practice training programme draws not only on the expertise within the Children and Families Service but also utilises the skills and knowledge of Family Therapy Tutors from the University of Northumbria. The programme runs on a modular basis to allow workers to build their skills and knowledge and to allow greater access to the training. The programme also includes a two-day practical skills session at the UNN Simulation Suite, allowing workers the opportunity to practice the skills they have learnt in a safe but realistic environment. This training will form part of the mandatory training offer for social workers within Children & Families and will be extended to other workers within the service to ensure a consistent approach to systemic ways of working. (See Appendix 1 for the programme details).

Recommendations

Committee is asked to:

1. Continue to champion the work undertaken by the Council's Children's Social Workers.
2. Note the content of this report.
3. Agree to receive regular reports from the Children's Principal Social Worker regarding the progress of work against the six outcomes articulated above.

CONTACT: Steve Day - Service Manager and Principal Social Worker
Extension: 3989

Systemic Practice and Strengths Based Practice Training

Introduction:

Finding new ways of working to engage with vulnerable children and their families is essential if we as a service are to meet the increasing demands placed upon us. The ability of social workers to help families and individuals to achieve change can be achieved by focusing on relationships and the social context of the families with whom we work.

Evidence from research and evaluations of systemic ways of work show that adopting systemic practice not only improves outcomes for children and young people but also increases workers resilience where they are able to exercise a high level of professional skill and autonomy.

We know you want to provide the best service possible to the children and families of Gateshead so with this in mind we are offering a suite of training around Systemic theory, skills and practice.

Systemic and strengths-based social work practice:

This modular training programme 'Systemic and strengths-based social work practice' has been developed for Social Workers and Practice Supervisors and is widely available throughout January, February and March 2019. The programme links theory and models of practice covering strengths-based and systemic approaches.

The majority of the programme will be delivered in-house with a final 2-day, practical module at Northumbria University

The programme is flexible as you do not have to do all the modules sequentially, though please note:

- Modules 1 and 2 must be completed before any of the other modules, but can be done in any order.
- If you have completed the Genograms practice short session in either November or December 2018, you do not need to repeat Module 1.
- Modules 3, 4 and 5 can be completed in any order following completion of modules 1 and 2.
- Module 6 (Practical Simulation) cannot be undertaken until the first five modules have been completed. This is to ensure that learners have all the necessary theoretical knowledge available to them prior to undertaking the simulation exercises.
- Module 7 complements this programme but is not an integral part of it and therefore can be completed at any point.

Programme:

Module 1 – Genograms

This module is delivered in a 2-hour session at the Civic Centre **(no need to pre-register)**.

This presentation introduces some key systemic concepts which underpin the use of genograms in social work practice:

- cybernetics, homeostasis, the family as a system
- horizontal and vertical stressors on the system, social GRACES, family life cycle impacts, cultural organising principles, pride and shame, ‘family scripts’

A ‘case-study’ exercise enables participants to practice building genograms from scratch using a common set of rules and symbols, then build on this to explore social and cultural impacts on the system.

Dates and Times:

10th January	-	12.00 to 2.00pm (Bridges Room)
16th January	-	9.00am to 11.00am (Bridges Room)
29th January	-	9.00am to 11.00am (Bewicks B)
6th February	-	9.00am to 11.00am (Bridges Room)
20th February	-	9.00am to 11.00am (Bewicks B)
6th March	-	9.00am to 11.00am (Bewicks B)

Module 2

This half-day module is delivered at Dryden Road PDC, unless otherwise stated **(pre-registration required)**.

The session will set the whole programme in the context of social work in Gateshead in 2019. It will explore ‘why systemic and strengths-based practice?’, and ‘why now? It will introduce:

- The Shared Visions and Shared Values frameworks recently developed by Gateshead’s social work supervisors
- The notion of systemic and strengths-based approaches as the underpinnings of a shared practice model for Gateshead (including an exploration of where these approaches are already being applied)
- The human systems in safeguarding children; structuralism
- The fundamental importance of context

Dates and Times:

15th January	-	9.30am to 12.30pm (Room 2, Dryden)
21st January	-	9.30am to 12.30pm (Room 2, Dryden)
4th February	-	9.30am to 12.30pm (Room 2, Dryden)
21st February	-	9.30am to 12.30pm (Room 2, Dryden)
4th March	-	9.30am to 12.30pm (Emily Davis, Dryden)
13th March	-	9.30am to 12.30pm (Room 3, Dryden)

Module 3

This half-day module is delivered at Dryden Road PDC, unless otherwise stated (**pre-registration required**).

The session will explore the role of written and spoken language in the social construction of meaning and the theoretical and practical applications of the co-ordinated management of meaning.

It will introduce self, self-reflexivity, relational-reflexivity, Intersectionality, power and prejudice, second-order cybernetics, reframing and positive connotation

Dates and Times:

15th January	-	1.30pm to 4.30pm (Room 2, Dryden)
21st January	-	1.30pm to 4.30pm (Room 2, Dryden)
4th February	-	1.30pm to 4.30pm (Room 2, Dryden)
21st February	-	1.30pm to 4.30pm (Room 2, Dryden)
4th March	-	1.30pm to 4.30pm (Emily Davis, Dryden)
13th March	-	1.30pm to 4.30pm (Room 3, Dryden)

Module 4

This half-day module is delivered at Dryden Road PDC, unless otherwise stated (pre-registration required).

The session will introduce the theory and practice of the Milan and post-Milan systemic approach. Practical exercises will introduce participants to the arts of circularity, curiosity and systemic hypothesising. Relational (therapeutic) practice and change.

It will explore the practice of intentionality in different questioning approaches - solution-focused, motivational and interventive interviewing.

Dates and Times:

18th January	-	9.30am to 12.30pm (Room 3, Dryden)
24th January	-	9.30am to 12.30pm (Room 2, Dryden)
12th February	-	9.30am to 12.30pm (Room 3, Dryden)
28th February	-	9.30am to 12.30pm (Lamesley Room, Civic Centre)
8th March	-	9.30am to 12.30pm (Room 3, Dryden)
15th March	-	9.30am to 12.30pm (Room 3, Dryden)

Module 5

This half-day module is delivered at Dryden Road PDC, unless otherwise stated (pre-registration required).

The session will explore the principles of collaboration and working with 'risk' and 'resilience' in a systemic and strengths-based framework. It will introduce Barry Mason's

model of Safe Uncertainty and revisit the Signs of Safety framework. It will introduce the model of Radical Candour.

Dates and Times:

18th January	-	1.30pm to 4.30pm (Room 3, Dryden)
24th January	-	1.30pm to 4.30pm (Room 2, Dryden)
12th February	-	1.30pm to 4.30pm (Room 3, Dryden)
28th February	-	1.30pm to 4.30pm (Lamesley Room, Civic Centre)
8th March	-	1.30pm to 4.30pm (Room 3, Dryden)
15th March	-	1.30pm to 4.30pm (Room 3, Dryden)

Module 6 - Practical Simulation

This part of the training will be held at the University of Northumbria, Coach Lane Campus. These sessions require a high level of learner participation and all learners will be expected to take part in the sessions. This is an opportunity for learners to practice their newly acquired skills in a safe and supportive environment.

31st January & 1st February	-	9.30am to 4.30pm (UNN, Coach Lane Campus)
6 th and 7 th February	-	9.30am to 4.30pm (UNN, Coach Lane Campus)
20 th and 21 st February	-	9.30am to 4.30pm (UNN, Coach Lane Campus)
18 th and 19 th March	-	9.30am to 4.30pm (UNN, Coach Lane Campus)

Module 7 – Non-Violent Resistance (NVR)

This module is delivered in a 90-minute session at the Civic Centre **(no need to pre-register)**.

NVR is systemic and restorative framework to use with parents who have lost the control in their parent – child relationship. Developed from the field of socio-political struggle, NVR supports parents and adult networks to peacefully resist and overcome violence, coercion, and self-destructive behaviours in children and young people.

This training session will take you through the “what, why and how?” of NVR, leaving you with practical tools to help support children and families you work with.

Dates and Times:

25th January	-	9.00am to 10.30am (Bewicks B)
15th February	-	9.00am to 10.30am (Bewicks B)
26th February	-	9.00am to 10.30am (Bewicks B)
12th March	-	9.00am to 10.30am (Bewicks B)

To book onto training:

To reserve your place on these sessions please email darrenwhite@gateshead.gov.uk, please state your full name, team name, and the title and date of each of the sessions you wish to attend. Places will be allocated as requests are received.

TITLE OF REPORT: Briefing – Permanent exclusions

REPORT OF: Caroline O'Neill, Strategic Director - Care, Wellbeing and Learning

Introduction

1. Following a substantial reduction in permanent exclusions during the 2017/18 academic year, the current 2018/19 academic year has seen a continued rise in the number of permanent exclusions across secondary schools. The purpose of this report is to update the Families Overview and Scrutiny Committee on the current situation in relation to permanent exclusions in the 2018/19 academic year, as of February ½ Term 2019.

Background

2. We know that the consequences of being permanently excluded from school are extremely serious. The 2012 report by the Office of the Children's Commissioner on illegal exclusions '*Always someone else's problem*' states that unless high quality support is put into place for excluded children, their life chances are likely to be substantially affected in both the short and longer term. In the case of 'illegal' exclusions children are also less likely to receive the support they need in order to achieve to their abilities.
3. We also know that there are potential safeguarding issues, especially with older children whose parents may think they are in school so there is no adult looking after them. As educators, therefore there is a need following a permanent exclusion, to ensure that the child is given access to high quality appropriate educational provision and support from other services, if needed, to continue with and/or reengage with their education and learning.
4. Schools have the right to permanently exclude a pupil on disciplinary grounds. Pupils can be excluded for one or more fixed term periods (up to a maximum of 45 days in a single school year and if exceeded a pupil is automatically permanently excluded) or permanently. In exceptional cases, usually where further evidence has come to light, a fixed period exclusion may be extended or converted to a permanent exclusion.
5. Evidence provided shows that the proportion of children and young people being excluded in primary and secondary schools is increasing nationally. Since 2013 permanent exclusions have been on the rise, with a 40% increase

over the past 3 years, having previously been on the decrease since 2006/7. (Forgotten children: alternative provision and the scandal of ever increasing exclusions July 2018).

6. The DfE report in their most recent statistical release, July 2018 (Permanent and Fixed Period Exclusions in England 2016 to 2017) that both the number for fixed and for permanent exclusions has continued to increase over the past academic year (2016/17).
7. Their report states that the rate of permanent exclusions across all state-funded primary, secondary and special schools has increased from 0.08 percent of pupil enrolments to 0.10 percent, which is the equivalent of 10 pupils per 10,000. The report states that 83 percent of permanent exclusions occurred in secondary schools, which increased from 0.17 percent in 2015/16 to 0.20 percent in 2016/17. The rate of permanent exclusions also rose in primary schools from 0.02 percent to 0.03 percent but decreased in special schools from 0.08 percent in 2015/16 to 0.07 percent in 2016/17.
8. Gateshead currently has 10 secondary schools; 8 secondary academies, 2 of which are Roman Catholic, 1 maintained secondary schools and 1 CTC (City Technology College). One of the secondary academies is due to close at the end of this academic year August 2018. Gateshead also has 1 secondary Pupil Referral Unit and 1 secondary SEMH (social, emotional and mental health) special school.
9. Gateshead currently has 68 primary schools; 47 community schools, 16 Roman Catholic schools, 1 Roman Catholic academy, 2 Church of England Schools, 2 primary academies, 3 infant and 3 junior schools and 1 nursery. It also has one primary special school for pupils with SEMH (social, emotional and mental health) issues and 3 special schools.
10. During the academic year 2017/18 Gateshead's permanent exclusions reduced considerably, decreasing from 85 in 2016/17 to 58 in 2017/18. In 2016/17 of the 85 permanent exclusions, 80 were secondary and 6 were primary, in 2017/18 of the 58 permanent exclusions 57 were secondary and 1 was primary. **Table 1** shows the number of permanent exclusions (secondary) from 2004/5 to 2017/18.
11. Despite the decrease in secondary permanent exclusions during the 2017/18 academic year, Gateshead secondary permanent exclusions continued to be considerably higher than that of other local authorities in the North East and/or our statistical neighbours. Even with the 2017/18 decrease in permanent exclusions, Gateshead excluded a higher rate of secondary aged pupils that its north east and statistical neighbours. **Table 2** provides this comparison data. A full report on permanent exclusions for the 2017/18 academic year can be found in **Appendix 1**.

	2004/05	2005/06	2006/07	2007/08	2008/09	2009/10	2010/11	2011/12	2012/13	2013/14	2014/15	2015/16	2016/17	2017/18
Thorp							3		3	2	3	5	7	2
Emmanuel							1		3	3	2	3	1	3
Heworth	3	3	Nil	3	1	1	3	0	3	1	5	4	8	6
Hookergate	Nil	2	2	Nil	1	1	1							
Joseph Swan	3	4	4	4	2	4	1	4	3	2	5	12	11	6
Kingsmeadow	2	Nil	Nil	1	5	1	3	7	4	4	2	7	7	7
Lord Lawson	1	5	6	3	1	3	1	1	1	2	7	11	9	8
Ryton	Nil	1	2	1	1	2	3							
St Edmund Campion/Cardinal Hume	6	8	6	2	1	4	2	Nil	2	2	3	8	8	6
St Thomas More	3	1	1	1	2	5	Nil	2	3	2	9	2	4	4
Thomas Hepburn	10	3	6	11	5	6	6	3	3	3	6	11	14	6
Whickham	3	2	1	1	Nil	2	6	2	1	2	12	7	8	8
Furrowfield	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil
PRU	1	Nil	Nil	Nil	Nil	Nil	Nil	2	Nil	1	Nil	Nil	1	1
Extra District												1	2	0
Total	31	30	28	27	19	29	26	24	28	24	54	70	80	57

Table 1 Overview of permanent exclusions from 2004/5 to 2017/18 academic years

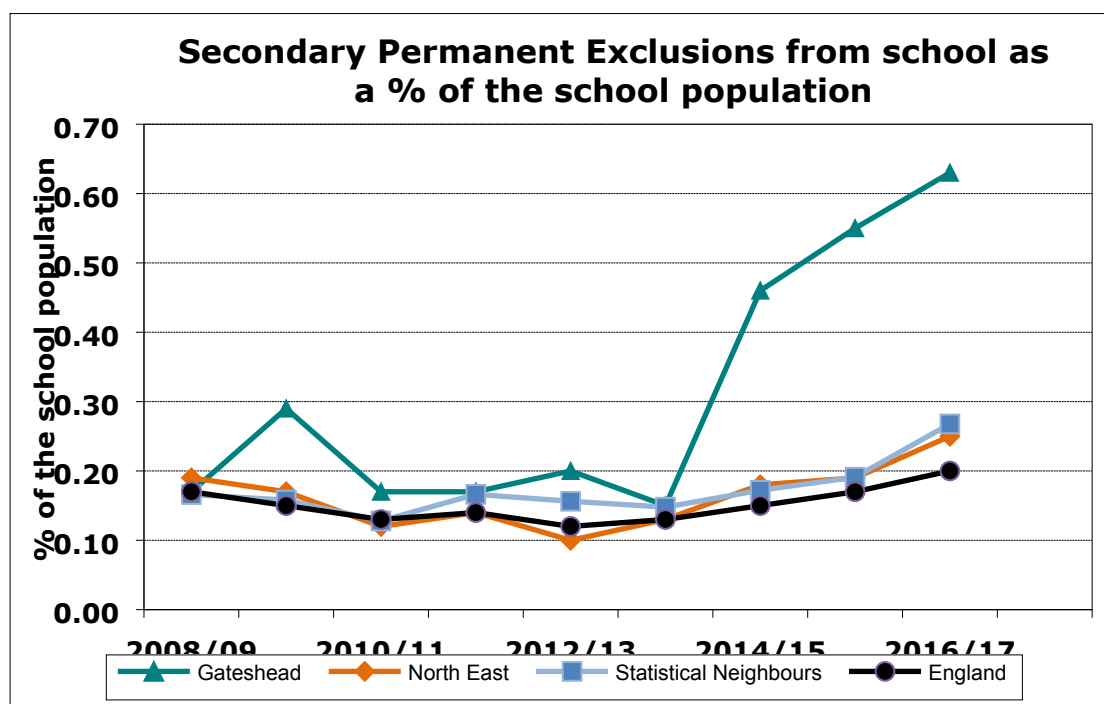


Table 2 Comparison data-permanent exclusions (Data taken from the Local Authority Interactive Tool- LAIT)

Current Context

Secondary Permanent Exclusions

12. Unfortunately, this decreasing trend has not continued into the 2018/19 academic year. To date (February ½ Term 2019) secondary schools have permanently excluded a record number of pupils. We current have 50 secondary permanent exclusions (41 upheld and 9 pending). **Table 3** shows a comparison of secondary permanent exclusions broken down by academic term for the past 5 academic years.

Academic Year	Permanent Exclusions (Total)	Permanent Exclusion Secondary/Primary	Autumn Term	Spring Term	Summer Term
2014/15	56	54/2	21	19	16
2015/16	72	71/1	28	21	22
2016/17	85	80/5	34	19	32
2017/18	58	57/1	29	15	14
2018/19			36	5 upheld 9 pending (As of Feb ½ term 2019)	

Table 3 Overview of permanent exclusions broken down by academic term as of Feb. 2019

13. **Table 4** shows a breakdown of secondary permanent exclusions (upheld and pending) by school and the percentage of pupil population. Of the 50 permanent exclusions 3 are at schools outside of Gateshead, but these are counted in our figures because they are Gateshead residents.

Secondary School/Academy	Number of Permanent Exclusions			
	Upheld	Pending	% of pupil population	% of overall PX
PRU	1	1	2.35% (includes pending PX)	4%
Cardinal Hume	2	1	0.25%(includes pending PX)	6%
Emmanuel	4		0.36%	8%
Heworth Grange	3	2	0.48% (includes pending PX)	10%
Joseph Swan	11		1.08%	22%
Kingsmeadow	2	1	0.40% (includes pending PX)	6%
Lord Lawson	6	1	0.58% (includes pending PX)	14%
St Thomas More	4		0.33%	8%
Thorp	1		0.12%	2%
Whickham	4		0.31%	8%
THCA	2	1	1.54% (includes pending PX)	6%
OOA	1 (Hebburn)	2 (Hebburn St Josephs)		6%
Sub-total	41	9		
Total number of permanent exclusions				50

Table 4 Secondary permanent exclusions by secondary school

14. Persistent disruptive behaviour continues to be the most significant reason for permanently excluding a secondary pupil with 54% of all permanent exclusions being for persistent disruptive behaviour. This is considerably higher than the national figure for persistent disruptive behaviour; national statistics indicate that persistent disruptive behaviour accounted for 35.7% of all permanent exclusions in 2016/17.

15. Table 5 sets out the reason for secondary permanent exclusions from Sept. 2018 to February 2019.

Reason	Number
Drug and alcohol related	2
Persistent disruptive behaviour	27
Other	10 (4 were for possession of knives)
Verbal abuse against staff	2
Verbal abuse against pupil	2
Physical assault against a pupil	3
TCA	4

Table 5-Reasons for Permanent exclusions in secondary schools-autumn term 2018

16. The highest number of permanent exclusions is currently in Y19 and Y10 with 32% in each year group. Key Stage 4 (Y10 and Y11) account for 40% of all permanent exclusions. National statistics show that over half of all permanent exclusions occur in Y9 or above. This is a similar pattern in Gateshead, with 72% of permanent exclusions taking place in Y9, Y10 and Y11. (Table 6).

Key Stage	Year Group	Number	% of over PX	% of overall PX in Key Stages	% of overall PX Y9, Y10,Y11
Key Stage 3	Y7	5	10%	60%	
	Y8	9	18%		
	Y9	16	32%		72%
Key Stage 4	Y10	16	32%	40%	
	Y11	4	8%		

Table 6-Secondary Permanent Exclusions by year Group

17. In line with national statistics more boys have been permanently excluded than girls; with 47 pupils being male and 3 being female. The national patterns show that boys are three times more likely to be permanently excluded than girls, in Gateshead boys accounted for 94% of all permanent exclusions and girls for just 6% of all permanent exclusions.

Primary Permanent Exclusions

18. Primary permanent exclusions spiked in 2016/17. There were a record number of primary permanent exclusions that academic year; 5 in total. The past two years however have seen this number decline with 1 primary permanent exclusion in 2017/18 and none (so far) during the current 2018/19 academic year (Table 7)

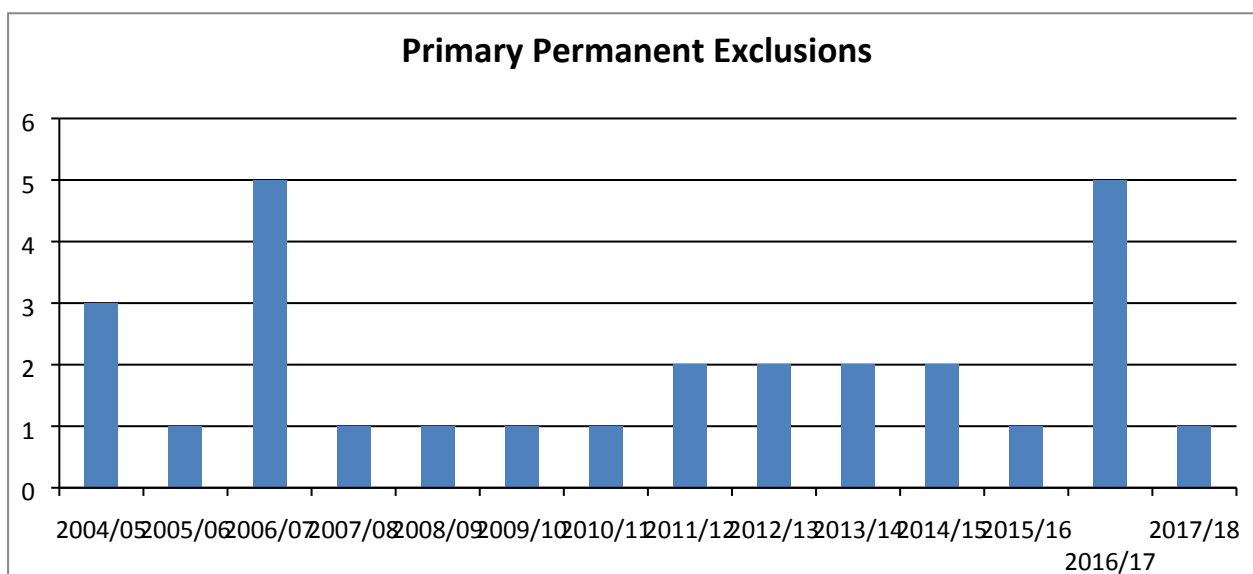


Table 7 –Primary Permanent Exclusions

19. Following a year (2017/18) of decreased permanent exclusions, the current academic year 2018/19 has seen permanent exclusions rise again in secondary schools. Although nationally permanent exclusions are increasing, they are not increasing at the same speed as they are in Gateshead.

Strategies used to address the rise in permanent exclusions

20. Recognising the need to address the previous sharp rise in permanent exclusions a conference was held in July 2017 with Headteacher representation from all secondary schools, a cluster primary school representative and Service Directors from Early Help, social care, health and education. The outcome of this conference was an action plan overseen by a multi-agency task and finish group.

21. The Team around the School was one action, from the action plan. Early Help has piloted working directly into schools to help identify needs earlier so that appropriate interventions could be put into place. Initially piloted in 1 school and reviewed in July 2018, it has now been expanded to include 2 other secondary schools.

22. Some secondary schools are piloting 'Kooth' an online counselling service as a means of providing intervention early when the need first arises.

23. The work of the Primary Behaviour Support Team addresses behavior in primary schools including training, advice, guidance, 1-1 and small group work to ensure that primary pupils needs are met. During the 2017/18 academic year the team worked with 114 cases of which 68 were closed by the end of the 2017/18 academic year;

- 50 returned to School Support - this means that 74% of the closed cases showed sufficiently improved behaviour to require no further action

- 2 returned to school action following a managed move
- 7 returned to school action with a single plan
- 3 were placed in Bede ARMS
- 4 were placed in specialist provision (Eslington School)
- 1 moved out of borough and into a specialist EBD provision
- 0 were permanently excluded
- 1 went out of borough

24. This represents a higher percentage of children returning to school support within their mainstream school than previously, 74% 2017/18 compared to 68% in 2016/17.

25. Primary schools pay for the 5 teaching assistants that are part of the team.

26. Primary schools also pay for a full time educational psychologist who works to the Primary Fair Access Panel who is able to provide immediate support for primary aged pupils who are placed in schools through the Panel. The educational psychologist provided support to 28 children during the 2017/18 academic year as well as providing training across all schools (secondary schools are also able to attend) in the following areas:

- a. Foetal alcohol spectrum disorder
- b. Staff mental health and wellbeing
- c. Refugees and asylum seekers
- d. Promoting positive child mental health
- e. Inclusive behavior management
- f. Play therapy
- g. Social interventions
- h. Introduction to CBT

27. The secondary Fair Access Panel places vulnerable secondary aged pupils into secondary schools. Secondary schools contribute funding to pay for alternative education as/when needed for a young person who arrive in the local authority at the end of KS 4.

28. The Education Inclusion Panel was established in June 2017 to decide on the most appropriate educational placements for those children and young people who:

- i. can't attend school due to medical reasons or illness (pregnancy or non-attendance is not appropriate entry criteria)
- j. have been permanently excluded
- k. are Looked After and who are at risk of permanent exclusion
- l. where there are resource implications for the current placement

29. This process ensures that there is a clear and transparent admissions process for the RTMAT (previously the LA PRU) as well as ensuring that children and young people are placed in the most appropriate educational provision suitable to their needs.

30. EIP is a multi-agency panel, with core membership consisting of representation from:
- Service Manager Education Support Service (Chair)
 - SEN
 - Triage and Placement Manager
 - Early Help Officer
 - Clerical support
 - Mental Health
 - Health (CYPS)
 - Virtual School Headteacher (in the case of a Looked After child/Young Person)
 - HT PRU
 - Social Care representative
31. Decisions on the placement of children and young people are made jointly by the panel members.
32. Information has been sent to all secondary Headteacher and Chair of Governors on this year's increase in secondary permanent exclusions. In addition to this at every primary and secondary fair access panel exclusions are discussed.

Future Actions

33. A follow up conference; from the Behaviour Conference held in July 2017 is planned to share good practice between schools and to explore current strategies and their impact.
34. A piece of work will be undertaken to look at what information is passed between primary and secondary schools in relation to existing permanent exclusions to see if this process can be refined.
35. Discussions are ongoing with alternative providers to explore alternative options for schools to engage with.
36. Trends on exclusions will continue to be monitored closely; while the work of the EIP will be reviewed and evaluated on an ongoing basis. A more detailed analysis of permanent exclusions and the work of the Education Inclusion Panel (EIP) can be found in **Appendix 1**.

Recommendations

37. OSC are asked to:
- Receive this report for information and discussion

Appendix 1

Report on Permanent Exclusions 2017/18 Academic Year

Introduction

Between 2006/7 and 2012/13 the number of permanent exclusions nationally reduced by nearly half, but since 2013 permanent exclusions have been on the rise with a 40% increase nationally over the past 3 years. (*Forgotten children: alternative provision and the scandal of ever increasing exclusions July 2018*).

We know from national data that on average children in need are 3 times as likely to be permanently excluded, pupils who are eligible for FSM are more than 3 times likely to be permanently excluded, with pupils on SEN support 4 times more likely and those with an EHCP or a statement twice as likely to be permanently excluded. Boys are more than 3 times as likely to be permanently excluded than girls and Gypsy/Roma, Travellers (of Irish heritage) and Black Caribbean pupils have the highest permanent exclusions rates with Indian and Chinese pupils having the lowest permanent exclusion rate.

The consequences of being permanently excluded from school are extremely serious. The 2012 report by the Office of the Children's Commissioner on illegal exclusions '*Always someone else's problem*' states that unless high quality support is put into place for excluded children, their life chances are likely to be substantially affected in both the short and longer term. In the case of 'illegal' exclusions children are also less likely to receive the support they need in order to achieve to their potential. There are also potential safeguarding issues, especially with older children whose parents may think they are in school so there is no adult looking after them. As educators, therefore there is a need following a permanent exclusion, to ensure that the child is given access to high quality appropriate educational provision and support from other services, if needed, to continue with and/or reengage with their education and learning.

The DfE report in their statistical release, July 2018 (Permanent and Fixed Period Exclusions in England 2016 to 2017) that both the number for fixed and for permanent exclusions has increased over the past year (2016/17). Their report states that the rate of permanent exclusions across all state-funded primary, secondary and special schools has increased from 0.08 percent of pupil enrolments in 2015/16 to 0.10 percent in 2016/17, which is the equivalent of 10 pupils per 10,000.

The report states that 83 percent of permanent exclusions occurred in secondary schools, which increased from 0.17 percent in 2015/16 to 0.20 per cent in 2016/17. The rate of permanent exclusions also rose in primary schools to 0.03 per cent up from 0.02 per cent in 2015/16 but continued to decrease in special schools from 0.08 percent in 2015/16 to 0.07 percent in 2016/17.

Persistent disruptive behaviour remained the most common reason for permanent exclusions, accounting for 35.7 per cent of all permanent exclusions. However, all reasons except bullying and theft saw an increase in permanent exclusion since 2015/16.

This report provides information on Gateshead's permanent exclusions during the 2017/18 academic year.

Background Information

Schools have the right to permanently exclude a pupil on disciplinary grounds. Pupils can be excluded for one or more fixed term periods (up to a maximum of 45 days in a single school year; if exceeded a pupil is automatically permanently excluded) or permanently.

It is unlawful to exclude for academic attainment or the actions of a pupil's parent, exclusions are undertaken as a direct result of a disciplinary issue. Behaviour that is disruptive over the lunchtime period may result in lunchtime exclusion and is counted as a half day exclusion to give parents the right to challenge this via the school governors discipline panel.

The behaviour of pupils outside of school or attending alternative provision can be considered as ground for exclusion, this will be a matter of judgement on the part of the Headteacher in accordance with the school's published behaviour policy.

All exclusions must be made in line with the principles of administrative law in that they are lawful (including the schools wider legal duties as well as guidance on exclusion), rational, reasonable, fair and proportionate. The Headteacher must also apply the civil standard of proof when considering the use of exclusion i.e. the balance of probabilities that a pupil did what they are accused of rather than the criminal standard, beyond reasonable doubt.

Informal or unofficial exclusions, such as sending pupils home to 'cool off' are unlawful regardless of whether or not they occur with the agreement of the parents/carers. The threat of exclusion must never be used in order to influence a parent to remove their child from a school.

Whilst there is no role in the exclusion guidance for a dedicated LA officer, all schools in Gateshead, including academies, have access to one to ensure the robustness of their decisions in relation to other schools practice and national guidance. All schools work within the fair access process and use the Pupil Placement Panel or the Primary Fair Access Panel to consider managed moves to avoid permanent exclusion or to reintegrate a permanently excluded pupil.

Once a Headteacher makes the decision to permanently exclude, the Headteacher must notify the parents, local authority and the governing body of their decision to permanently exclude a pupil. At this point the local authority will consider this as a permanent exclusion.

The governing body must convene a meeting within 15 days of receiving notice of the permanent exclusion in order to consider the reinstatement of the exclude pupil. If they support the decision to permanently exclude the pupil the exclusion is considered to be 'upheld' by the local authority.

A parent also has the right to request a review of their child's permanent exclusion which is currently arranged via Legal and Corporate Services for all schools including academies. During the last academic year (2017/18) we had 1 appeal to an independent review panel. In this instance the parents appeal was dismissed. Since the introduction of this review process in 2012 we have had seven appeals, six were decided in favour of the school and one in favour of the parent.

Contextual Information

Gateshead has 10 secondary schools; 8 secondary academies, 2 of which are Roman Catholic, 1 maintained secondary schools and 1 CTC (City Technology College). One of our secondary academies

is due to close at the end of the 2018/19 academic year. Gateshead also has 1 secondary Pupil Referral Unit and 1 secondary SEMH (social, emotional and mental health) special school. Gateshead has 68 primary schools; 47 community schools, 16 Roman Catholic schools, 1 Roman Catholic academy, 2 Church of England Schools, 2 primary academies, 3 infant and 3 junior schools and 1 nursery. It also has one primary special school for pupils with SEMH (social, emotional and mental health) issues and 3 special schools.

Table 1 and 1a shows the number of upheld secondary permanent exclusions since the 2004/5 academic year.

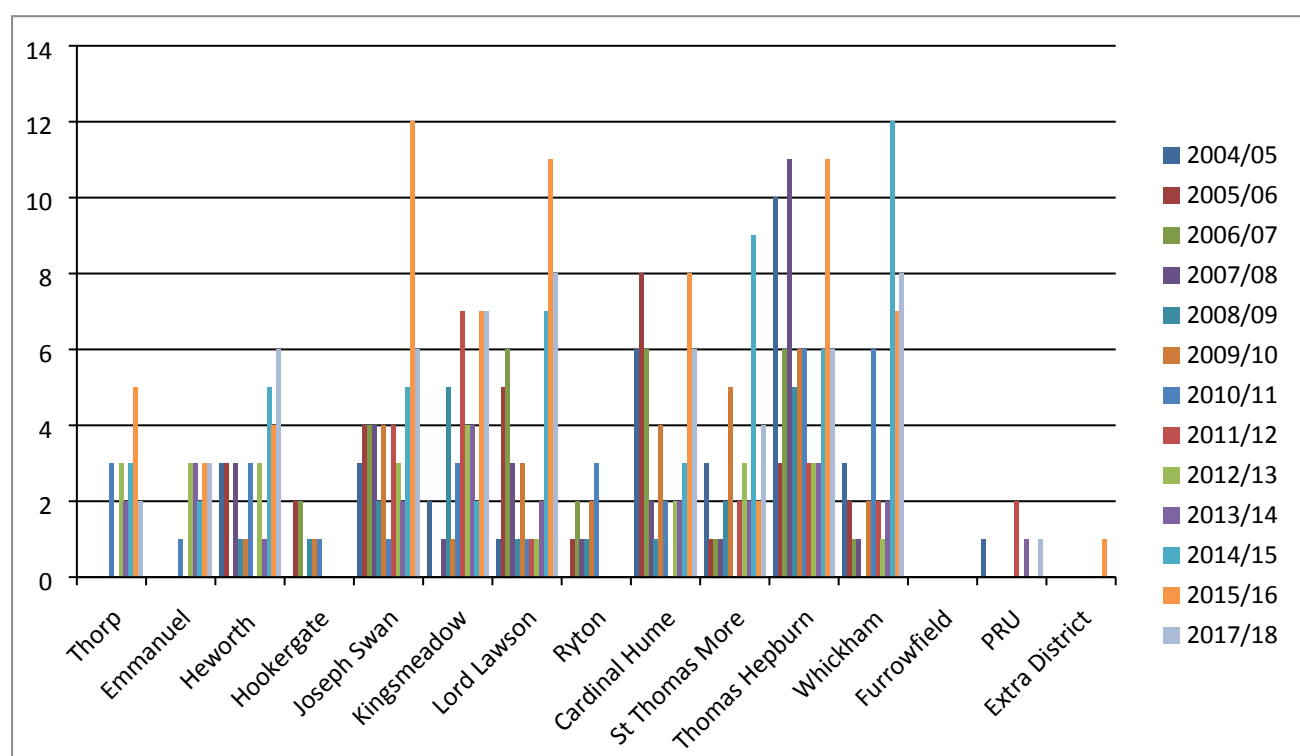


Table 1 - Overview of Permanent Exclusions

	2004/05	2005/06	2006/07	2007/08	2008/09	2009/10	2010/11	2011/12	2012/13	2013/14	2014/15	2015/16	2016/17	2017/18
Thorp							3		3	2	3	5	7	2
Emmanuel							1		3	3	2	3	1	3
Heworth	3	3	Nil	3	1	1	3	0	3	1	5	4	8	6
Hookergate	Nil	2	2	Nil	1	1	1							
Joseph Swan	3	4	4	4	2	4	1	4	3	2	5	12	11	6
Kingsmeadow	2	Nil	Nil	1	5	1	3	7	4	4	2	7	7	7
Lord Lawson	1	5	6	3	1	3	1	1	1	2	7	11	9	8
Ryton	Nil	1	2	1	1	2	3							
St Edmund Campion/Cardinal Hume	6	8	6	2	1	4	2	Nil	2	2	3	8	8	6
St Thomas More	3	1	1	1	2	5	Nil	2	3	2	9	2	4	4
Thomas Hepburn	10	3	6	11	5	6	6	3	3	3	6	11	14	6

Whickham	3	2	1	1	Nil	2	6	2	1	2	12	7	8	8
Furrowfield	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil
PRU	1	Nil	Nil	Nil	Nil	Nil	Nil	2	Nil	1	Nil	Nil	1	1
Extra District												1	2	0
Total	31	30	28	27	19	29	26	24	28	24	54	70	80	57

Table 1a-Overview of Permanent Exclusions

Table 2 shows a breakdown of upheld primary permanent exclusions since the 2004/5 academic year.

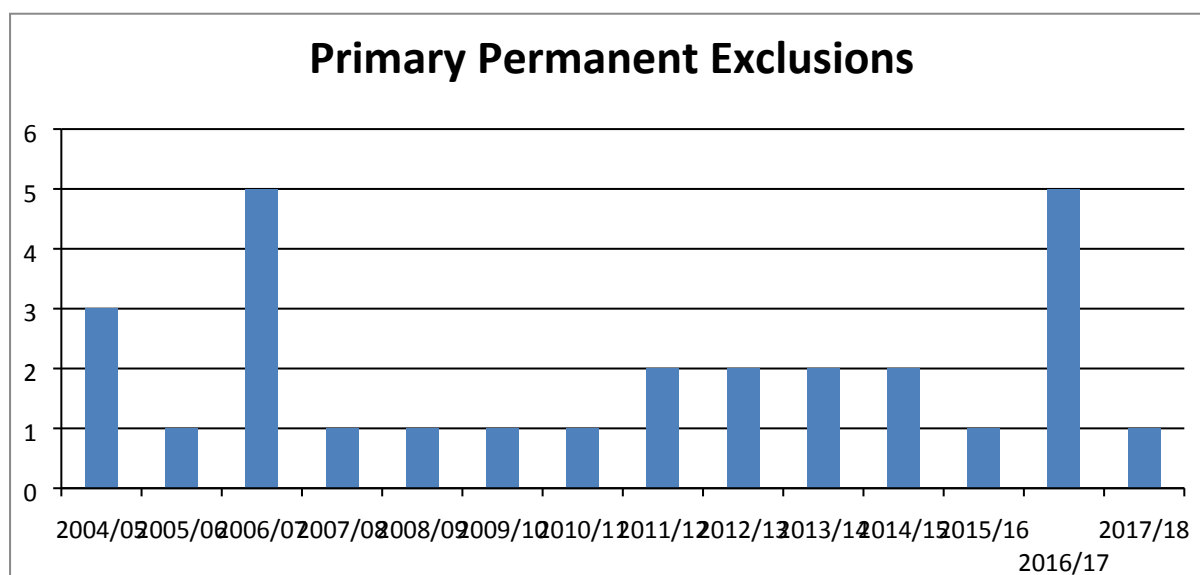
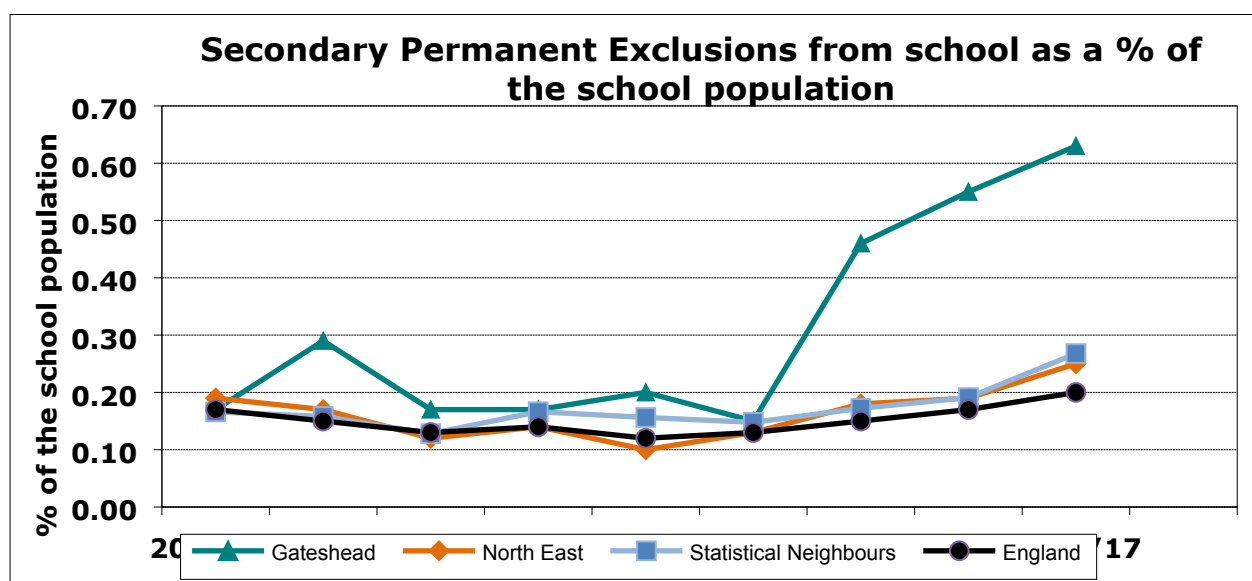


Table 2 –Primary Permanent Exclusions

Historically, Gateshead has excluded a higher proportion of its secondary aged pupils that its Northeast neighbours. **Table 3** compares Gateshead’s permanent exclusion numbers with other secondary schools in the northeast, with our statistical neighbours and with the England average, since the 2008/09 academic year. As shown, the rise in secondary permanent exclusions in 2016/17 continued to be considerably higher than other local authorities in the North East and/or our statistical neighbours.



Current Situation (2017/18 Academic Year)

During 2017/18 there were 62 children and young people permanently excluded which is a decrease from the 99 children and young people permanently excluded in 2016/17. Of these 62 children and young people, 60 of the pupils permanently excluded were secondary and 2 were primary. Of these 60 secondary pupils, 57 secondary pupils' permanent exclusions were upheld at the governors' disciplinary meeting, 2 were withdrawn for individual reasons and 1 was reinstated.

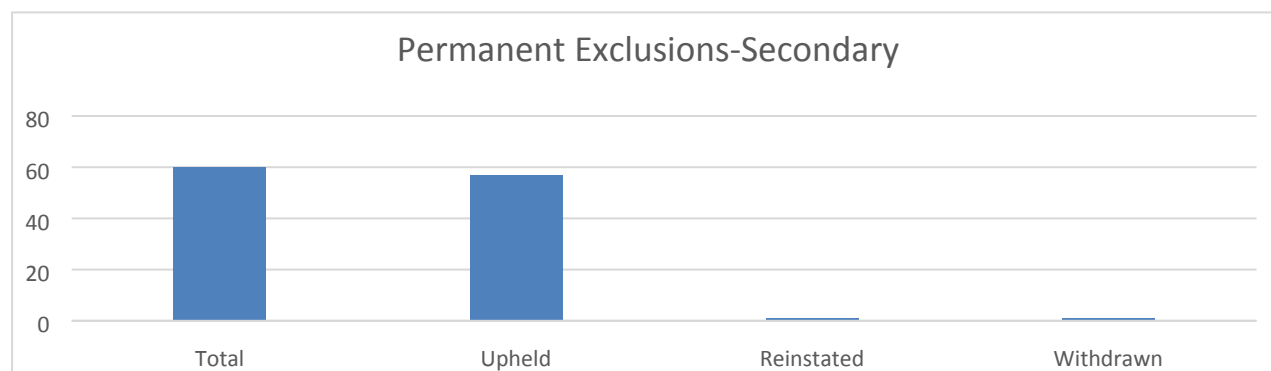


Table 4 – Permanent Exclusions Secondary (Total-before disciplinary meeting)

The 57 upheld permanent exclusions is a **considerable** decrease from the 80 upheld permanent exclusions during the previous academic year.

At a primary level in 2017/18 there were 2 permanent exclusions which is a decrease from 8 in 2016/17 of which 1 was upheld at the governors disciplinary meeting, which is a decrease from 5 upheld in 2016/17 and 1 was withdrawn.

Table 5 sets out the number of primary permanent exclusions, the number upheld, and the number withdrawn during the 2016/17 academic year.

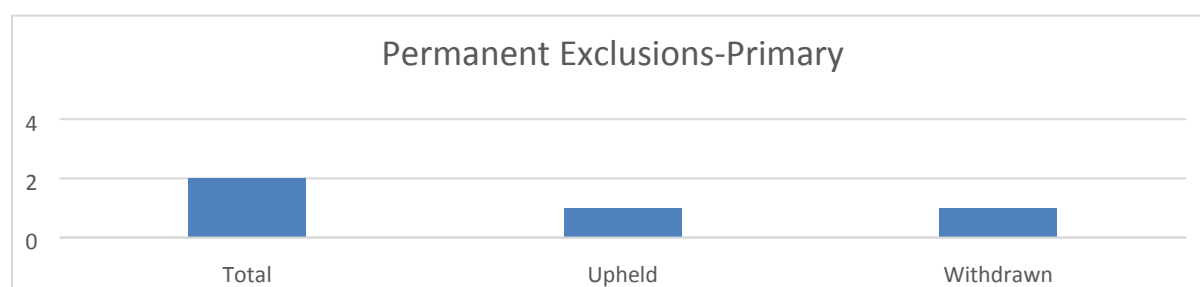


Table 5 – Permanent Exclusions Primary (Total-before disciplinary meeting)

Table 6 shows a breakdown of permanent exclusions by secondary school; overall total, upheld and withdrawn.

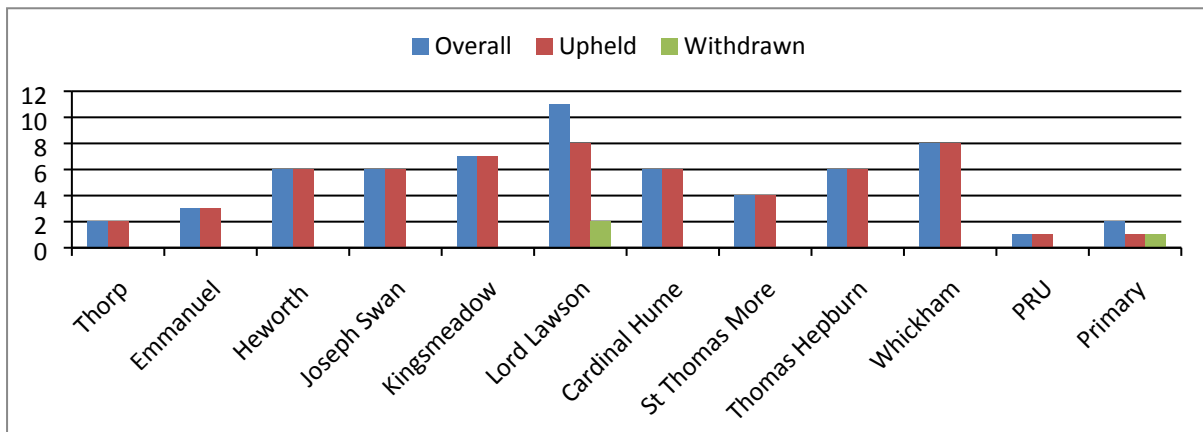


Table 6 Permanent exclusion breakdown by schools (including primary)

National statistics show that over half of all permanent exclusions occur in Y9 or above. This is a similar pattern in Gateshead, with 67% of permanent exclusions taking place in Y9, Y10 and Y11. KS4 accounts for 48% of all permanent exclusions. **Table 7** shows a breakdown of the year groups which permanently young people belonged to. The highest number of permanent exclusion were in year 10 (19) followed by Y8 (15) and Y9 (11).

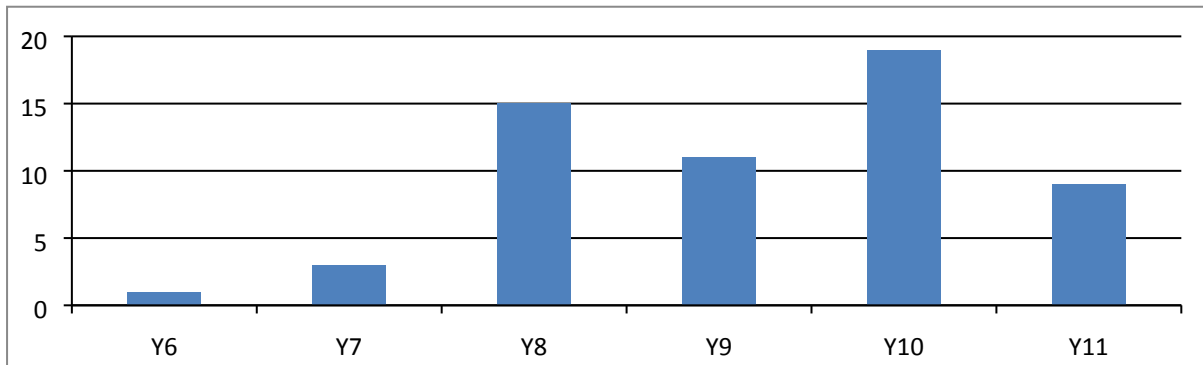


Table 7 Permanent exclusions by year group

Table 8 shows a comparison over the past 4 years of exclusions by year group.

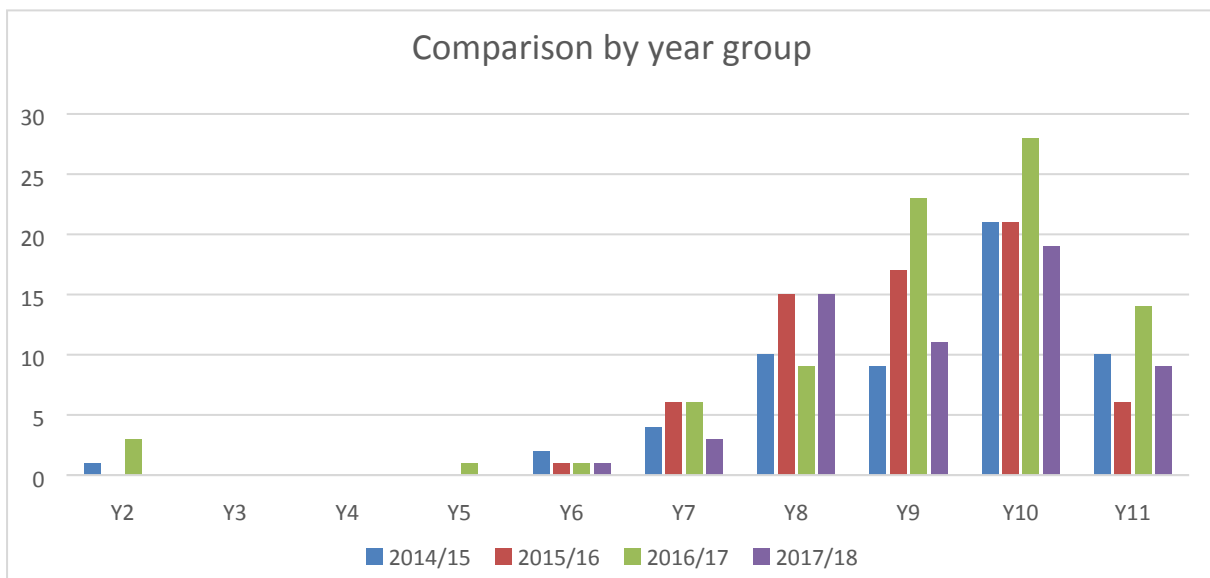


Table 8 Year on Year Comparison of Permanent Exclusions

Table 9 provides a breakdown of permanent exclusions by term over the past 4 academic years. The table indicates that more pupils were permanently excluded in the autumn term, with a decrease in the spring term.

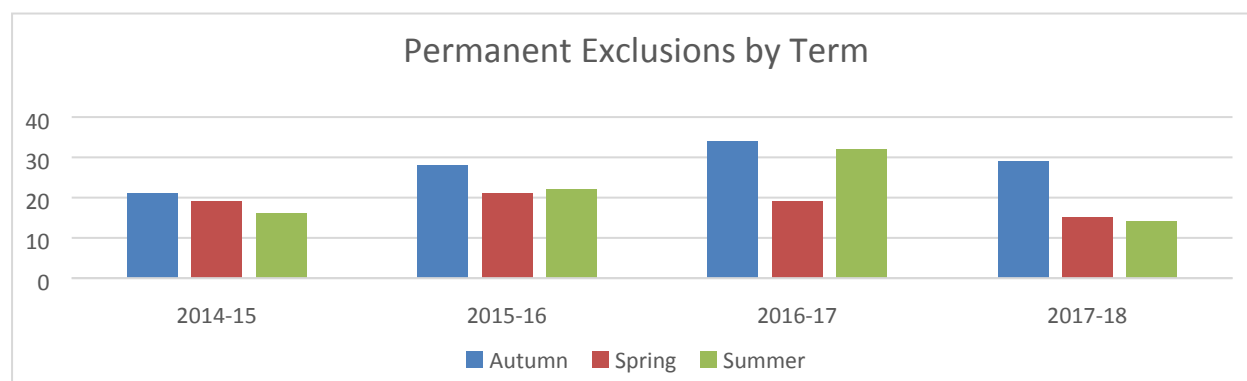


Table 9 Permanent exclusion by term

Reasons for permanent exclusions

Table 10 shows a breakdown of permanent exclusions by reason, with 62% of all permanent exclusions for persistent disruptive behaviour, which is an increase on 58% from the previous year. In Gateshead the figure continues to be higher than the national statistics which indicates that persistent disruptive behaviour accounted for 35.7 per cent of all permanent exclusions in 2016/17. The category 'other' included failed managed moves and bringing a weapon into school.

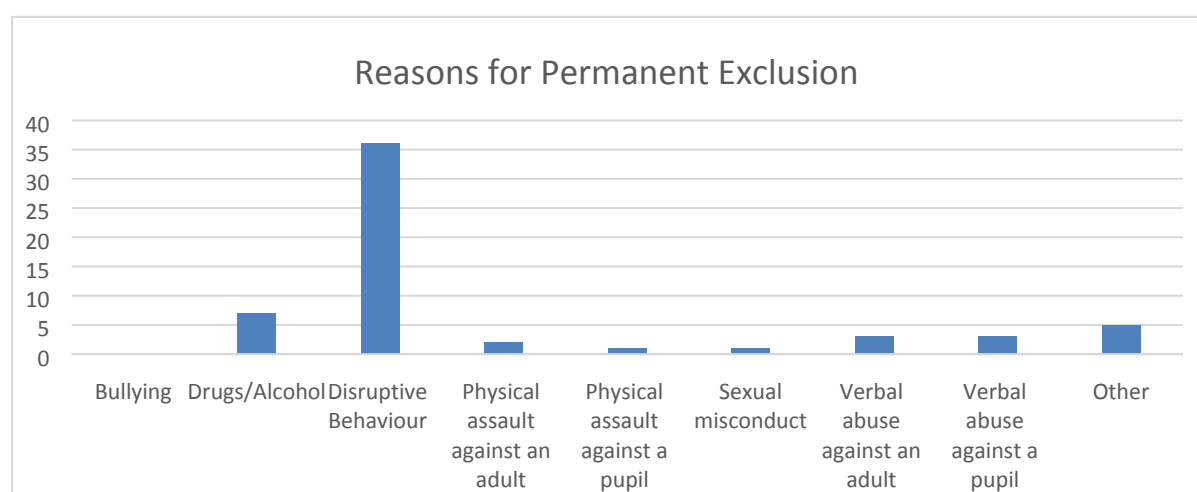


Table 10 Reasons for permanent exclusions

Exclusions by characteristics

As set out in **Table 11** and in line with national statistics more boys have been permanently excluded than girls; with 48 pupils being male and 10 being female. The national patterns show that boys are three times more likely to be permanently excluded than girls, in Gateshead boys accounted for 83% of all permanent exclusions and girls for 17% of all permanent exclusions.

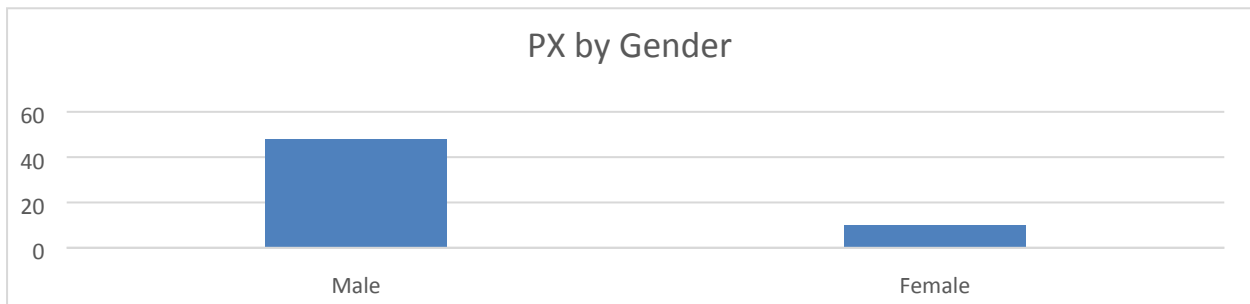


Table 11 Gender of permanently excluded pupils

Of the 58 pupils who were permanently excluded:

- 48% had current or closed CAF/TAF
- 22% were CiN or CP
- 7% were known to MARAC
- 7% were SEN
- 64% had one or more FTE
- 36% had more than one primary school

Education Inclusion Panel

In June 2017, the decision was made to establish the Education Inclusion Panel (EIP).

The Education Inclusion Panel was developed to decide on the most appropriate educational placements for those children and young people who:

- can't attend school due to medical reasons or illness (pregnancy or non-attendance is not appropriate entry criteria)
- have been permanently excluded
- are Looked After and who are at risk of permanent exclusion
- where there are resource implications for the current placement

This process ensures that there is a clear and transparent admissions process for the RTMAT (previously the LA PRU) as well as ensuring that children and young people were placed in the most appropriate educational provision suitable to their needs.

The Education Inclusion Panel meets on a monthly basis (Wednesday 9:00-11:00) during term time to consider the educational placements of these children and young people.

EIP is a multi-agency panel, with core membership consisting of representation from:

- Service Manager Education Support Service (Chair)
- SEN
- Triage and Placement Manager
- Early Help Officer
- Clerical support
- Mental Health
- Health
- Virtual School Headteacher (in the case of a Looked After child/Young Person)
- HT PRU
- Social Care representative

Decisions on the placement of children and young people are made jointly by the panel members.

The decision was also taken to provide a lead officer (Triage and Placement Officer) to support and monitor the placement of those children and young people who are referred to the panel; primarily those who have been permanently excluded and those pupils who can't attend school due to medical reasons or illness.

During the 2017/18 academic year, 48 young people were referred to EIP because it was felt they were **unable to attend mainstream school due to medical reasons or illness**. 17 young people had education packages agreed and put in place and 10 young peoples' education packages are still being developed. 21 referrals were not progressed, mainly because the supporting information that was provided was deemed by the panel not to be sufficient to evidence a medical reason for why a young person was not able to attend mainstream school. Of those referrals not progressed only 6 referrals were considered to be inappropriate. Over half of all referrals were for Anxiety related issues.

During 2017/18 academic year at KS 3, 31 **permanently excluded pupils** were referred in to the EIP. 74% (23) went to River Tyne Academy; 16% (5) went in alternative education. Subsequently 13% (4) had managed moves to mainstream schools and 2 pupils have been through EHCP assessments.

At KS 4, 25 pupils were referred in to the EIP in the year, with 21 pupils already in alternative education at the start of the year.

The alternative education model is the prevailing model for this KS4, offering accredited qualifications in English and Maths and a sustained vocational element to support post-16 progression. However, offers of education are bespoke and this year we did have 3 pupils sitting additional GCSEs.

The success of year 11 placings is evidenced in the fact that 84% of those going through, sat GCSE exams or Functional Skills in Summer 2018. Progressions into post 16 opportunities have been supported by pro-active work from Gateshead Learning and Skills, Gateshead College and Early Help (IAG) team.

Of the 16 pupils who sat GCSE's in the summer all took English and Maths. The range of passes for the subjects taken ranged from U (one pupil) to 6 (one pupil). The overall average pass grade was slightly higher than a 3 Grade.

The engagement of these pupils to their learning programme was very good. Out of the 19 pupils in that cohort only 2 did not engage.

Progression

All Year 11 pupils were actively supported in their progression. With their permission, their contact information was shared with both Learning and Skills and Gateshead College. Both organisations have been pro-active in following up these young people so many now have offers of post 16 college courses or places on Traineeships leading to potential apprenticeships.

To support those steps, referrals had also been made to the IAG section of the Early Help Service for further support into progressions.

First destinations for these pupils as at September 2018 were as follows;

College	Training	Mainstream School	NEET	Not available (personal Circumstances)	Not KNown
9	4	1	3	1	1
47%	21%	5%	16%	5%	5%

Children and Family Support

Taking the end of the academic year as the check point, 26 young people had received some form of Family support in the year in KS 3 and 28 in KS 4.

Keystage	No Support	Early Help open	Early Help; closed in year	CiN/ C.P. Support	Looked after Child
3	5	13	6	6	1
4	18	11	10	6	1

38 young people were still open to receive a level of support at the end of the academic year. Education Gateshead staff would attend TAFs, Core Group meetings etc. wherever possible and whenever invited. Links between Early Help, Complex Families in Need and Education Gateshead were strong with regular mutual support and exchange of information.

The full report can be found in **Appendix A**.

Conclusion

Following a three year upward trend, permanent exclusions reduced considerably in the 2017/18 academic year. Primary permanent exclusions reduced by 80% down from 5 in 2016/17 to 1 in 2017/18 and secondary exclusions reduced by 37% down from 99 in 2016/17 to 62 in 2017/18.

The introduction of the Education Inclusion Panel has allowed for a transparent admissions process for the PRU as well as the systematic placement of those young people who have been permanently excluded into the PRU and/or alternative provision. The EIP has also established a robust placement process for those pupils who are unable to attend mainstream school due to medical reasons or illness.

Trends on exclusions will continue to be monitored closely; while the work of the EIP will be reviewed and evaluated on an ongoing basis.

Recommendations

OSC are asked to receive this report for information and discussion.

Jeanne Pratt
Service Manager, Education Support Service
October 2018

Appendix A

Education Inclusion Panel;

Review of Academic Year 2017/18

The Multi -agency panel meets monthly and pulls together representatives from education, Health, CYPS, REALAC, Complex Families and Early Help. The River Tyne Academy (RTMAT) also attend. This enables a meaningful information sharing between partners.

The panel considers the placing of children who have been referred in as “not being able to access education in mainstream schools”. This is usually because of Permanent Exclusions, for medical reasons or due to pupils entering the borough with complexities that would make referral into mainstream provision impractical.

Executive Summary

Permanent Exclusions; Key stage 3

- 31 Permanently excluded pupils were referred in to the EIP. 74% (23) went to River Tyne Academy; 16% (5) went in alternative education.
- 13% (4) subsequently had managed moves to mainstream schools
- 2 pupils have subsequently been through EHCP assessments.

Permanent Exclusions Key stage 4

- 25 pupils were referred in to the EIP in the year. 21 were already in alternative education at the start of the year.
- The alternative education model is the prevailing model for this keystage, offering accredited qualifications in English and Maths and a sustained vocational element to support post-16 progression. However, offers of education are bespoke and this year we did have 3 pupils sitting additional GCSEs.
- The success of year 11 placings is evidenced in the fact that 84% of those going through, sat GCSE exams or Functional Skills in Summer 2018. 15 of the 16 pupils who sat the exams achieved a grade.
- Progressions into post 16 opportunities have been supported by pro-active work from Gateshead Learning and Skills, Gateshead College and Early Help (IAG) team. 73% (15) of the leavers remained in learning.
- Despite success of this year's year 11 there is a concern over the level of non-engagement in current year 10. 30% (7) are not, or are only sporadically engaging and this figure could rise to 37% (10) when the new referrals are placed.

Children and Family Support Services

- 70% of pupils were involved with Early Help, Complex Families or R&A. 49 were still open cases at the end of the academic year. 2 children were escalated to LAC status during the year.

Providers

- 14 different providers were used over the year, providing education in either small groups or on a 1-1 basis.

Hospital and Home Tuition

- 48 young people were referred in. 17 had education packages agreed and in place, 10 are still being developed and 21 were not progressed. Of those not progressed only 6 were considered to be inappropriate referrals
- Over half of referrals were for Anxiety related issues.

Permanent Exclusions

Each pupil's needs are considered on an individual basis. However, there is an over-arching framework that assists in decision making for the pupils. Those excluded in Key Stage three are referred onto the River Tyne Academy for assessment and education. Those excluded in Keystage four have a raft of possible options. This will ensure that, despite their exclusion, they are offered opportunities that will enable them to be competitive in the wider labour market.

Keystage 3 Placings

Year Group	Number referred in academic year	Number carried forward from last academic year	Total numbers in Alt. Ed across academic year	No. in registered school (incl. PRU) at end of term	No. Engaging on EOTAS role at end of term	No. not engaging at end of term
7	3		2	2		1
8	15		15	14		1
9	9	5	14	9	5	

Of the 18 pupils excluded in years 7 and 8, all but one were referred to RTMAT. 16 are attending and 1 parent refused the offer to attend. Their child is currently still outside education. Work is currently being done with parent by Early Help and education to explore how this impasse can be resolved. The child who was not referred to RTMAT was excluded too late in the year to be considered at the last EIP for referral. This pupil will be picked up at the start of the new academic year.

Of the 14 pupils in Year 9, 5 were carried forward from the previous academic year and were receiving an alternative education. Of those, 2 have progressed into mainstream schools via the PRU. The remaining 3 are still in alternative education for individual reasons. These 5 pupils were deemed by the Fair Access Panel in 2016/17 to be "not suitable for immediate re-introduction into mainstream education" and the PRU were full at the time, hence the use of the alternative education for these young people.

Of the remaining 5 pupils who were permanently excluded in this academic year, 3 went to RTMAT and 2 went on to alternative education whilst a managed move to another mainstream school was being arranged and supportive work with a specialist agency was being undertaken. Both were then placed on Managed Moves to mainstream schools but neither settled and the moves broke down late in the summer term, due to their inability to settle. They currently are back on alternative education.

At the end of the year the situation for those pupils who had been excluded from Keystage 3 mainstream schooling are that 23 are in RTMAT, 2 are in mainstream schools and 5 are in alternative education

SEND

2 young people who were permanently excluded and referred to River Tyne Academy have subsequently undergone Education Health Care Plan assessments

Keystage 4 placings

Year Group	Number referred in academic year	Number carried forward from last academic year	Total numbers in Alt. Ed across academic year	No. in registered school (incl. PRU) at end of term	No. Engaging on EOTAS role at end of term	No. not engaging/ not placed at end of term
10	16	11	27	6	15	6
11	9	10	19	1	17	1

Year 10 placings

Of the 16 pupils coming through the EIP in this academic year, 9 have accessed an alternative education provision. Of these, 5 progressed back into mainstream schools through managed moves. 1 of these managed moves failed due to the pupil not being able to settle in their new school. The others are currently sustained. The remaining 4 are on Alternative Education accessing a mixture of English and maths, leading to accredited qualifications and a vocationally relevant experience. 1 pupil is studying a wider GCSE curriculum at RTMAT.

Of the 11 pupils brought in from 2016/17 academic year, 7 are continuing to access a mixture of English and mathematics and vocational education, 2 are accessing a fuller alternative education placement, 1 is in between placements and 1 is due to start at RTMAT in September. 1 of these students sat GCSE English and Maths early, this summer, and is awaiting results.

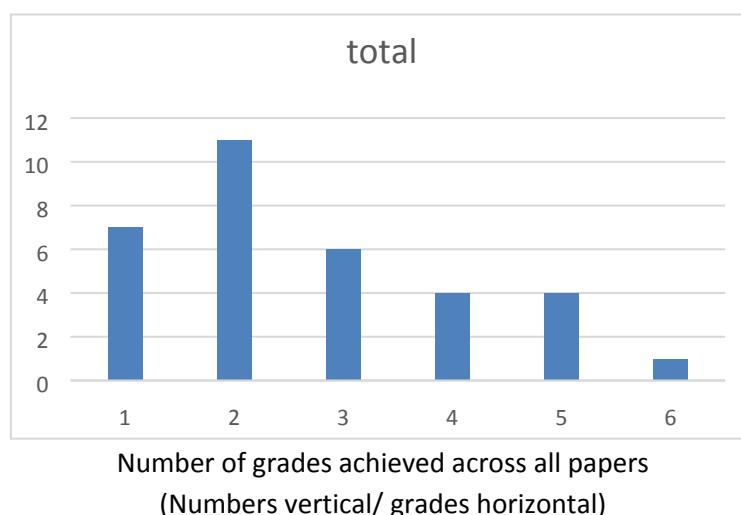
6 pupils are not yet placed in education. 1 of these is because he is refusing to take up the offer of RTMAT; alternative approaches are being taken by Education and Complex Families to offer a workable solution. 1 has wilfully avoided engagement although now is on line for a September start and 4 were excluded too late in the summer term to arrange alternatives for. 3 of these will be placed in a mixture of alternative education and vocational opportunities to start early in September. 1 will be more complex to place, being Permanently Excluded from RTMAT. The position at the end of the term was that there were 15 pupils accessing an alternative educational curriculum working towards accredited qualifications and expanding their options through vocational placements. 4 are in mainstream schools and 2 are in RTMAT. The remaining 6 are not currently engaged in education for reasons outlined earlier.

Year 11 placings

Of the 19 pupils who were on alternative education placements during the academic year, 16 took accredited exams in June. 15 of these took GCSEs (many with Functional Skills as a backup). One took Functional Skills only, at his alternative education placement. There were three students who did not take sit qualifications this year for individual reasons. One was on a managed move to a mainstream school and opted to resit year 10, one was terminated from Newcastle College for behaviour reasons too late in the academic year to allow a remedy. The third has disengaged from every offer of education made and so was not in a place to be confidently able to sit exams. Of those ready and entered for GCSEs, one did not attend due to changes in domestic circumstances

during this time. All others attended all GCSE exam sessions, although there were some instances of absences during Functional Skills, which were sat after the GCSEs were finished.

All pupils who took GCSEs sat English and Maths. Across the range of pupils, smaller groups or individual pupils also sat English Literature, Art and History. The range of passes for the subjects taken ranged from U (one pupil) to 6 (one pupil). The overall average pass grade was slightly higher than a 3 Grade.



Pupils were entered for their exams as guest students with RTMAT. The help proffered by RTMAT staff towards the delivery of this task was invaluable.

Engagement

As demonstrated by the number of Year 11 pupils entered for exams, the engagement of these pupils to their learning programme was very good. Out of the 19 pupils in that cohort only 2 did not engage.

Engagement amongst the much smaller alternative education cohort in Year 9, 5 pupils in all, was equally good, with every pupil engaging.

However, there has been a greater issue with Year 10 pupils engaging. Of the 23 Year 10 pupils placed in alternative education this year 9 are not engaging at any meaningful level. As outlined earlier, one is due to start in September, after avoiding engaging for several months, another's family is in dispute, refusing to accept the RTMAT place that has been offered. He is open to Complex Families and YOT. A further 7 have engagements levels that are sporadic and of a level to cause significant concern. 5 of these families are receiving support for parenting and other issues from either Early Help or higher level support services. The remaining 2 declined this support although there are clear issues in the households that could be addressed. 4 have not yet been considered, being excluded after the July panel met.

Of these pupils, where non-engagement has been established for a significant length of time, all have all been brought up to the Complex Pupils Panel. The remainder are being monitored and attempts made to address their issues.

Progression

All Year 11 pupils were actively supported in their progression. With their permission, their contact information was shared with both Learning and Skills and Gateshead College. Both organisations have been pro-active in following up these young people so many now have offers of post 16 college courses or places on Traineeships leading to potential apprenticeships.

To support those steps, referrals had also been made to the IAG section of the Early Help Service for further support into progressions.

First destinations for these pupils as at September 2018 were as follows;

College	Training	Mainstream School	NEET	Not available (personal Circumstances)	Not KNown
9	4	1	3	1	1
47%	21%	5%	16%	5%	5%

Children and Family Support

Taking the end of the academic year as the check point, 26 young people had received some form of Family support in the year in Keystage 3 and 28 in Keystage 4.

Keystage	No Support	Early Help open	Early Help; closed in year	CiN/ C.P. Support	Looked after Child
3	5	13	6	6	1
4	18	11	10	6	1

38 young people were still open to receive a level of support at the end of the academic year. Education Gateshead staff would attend TAFs, Core Group meetings etc. wherever possible and whenever invited. Links between Early Help, Complex Families and Education Gateshead were strong with regular mutual support and exchange of information.

This was augmented by input into one another's meetings and by a Complex Families and Early Help representation on the EIP and Complex Pupils Panel.

The small number of Looked After Children coming in this system does not represent the level of LAC in alternative education. That would be addressed by REALAC and LAC. The two young people who are recorded here as LAC were taken into the system whilst on alternative education, rather than before entering the system and were a result of safeguarding escalating their cases.

Provision

Alongside the RTMAT the following provision was used:

Alternative academic education was provided in small group settings by Kip McGrath (Gateshead), Kip McGrath (Whickham) and CUMBRIC. In specific circumstances 1-1 tuition was provided by tutors from Vision for Education, Education World and New leaf.

Vocational education was provided by Learning and Skills (Stonehill's), Wheels, ALD Hairdressing, Groundworks and New Leaf. CUMBRIC also have an element of vocational experience and learning in their curriculum and linked one student to a community Art Project. Skimstone Arts also allowed one pupil to work towards an Art award in performing art.

Trinity Solutions and Newcastle College also provided both academic and vocational opportunities to pupils over this academic year.

For appropriate cases, the Young Women's Outreach Project was also commissioned to deliver issue based education.

The fluctuating nature of these young people's engagement makes a definitive finalised set of figures impossible to capture in a table. However, at the end of term pupils on the EOTAS role were accessing the following educational placements (n.b. pupils may be counted against more than one provider);

Provision	No.	provision	No
Kip McGrath – Gateshead	13	New Leaf work placements	13
1-1 tuition	11	CUMBRIC	9
Kip McGrath Whickham	5	Wheels	3
ALD Hairdressing	3	YWOP	3
Newcastle College	2	Learning and Skills	2
Groundwork; Skimstone Arts; Trinity Solution			1

Hospital and Home Tuition

Referrals

Over the year, the Education Inclusion Panel considered 48 requests for Hospital and Home Tuition for pupils who it was felt were not able to access mainstream education for health reasons. Of the 48 who were referred in, the overriding reason was school related anxiety.

Reason	Number
Anxiety	24
SEN related	5
Post-operative	6
Medical	6
Chronic Fatigue Syndrome	3
Anxiety related to Gender issues	2
other	2

Approved placings

17 young people were referred in and educational provision was agreed.

Of these 5 were still accessing bespoke education at the end of the academic year. 6 were re-integrated into mainstream school and a further 2 ended their involvement when they sat their GCSE exams. One, sadly, was still a long way from being re-integrated when he completed his Year 11. 2 pupils moved from H&HT to special schools when their Education and Health Care Plans were agreed. 1 pupil went to RTMAT.

10 pupils' cases were still being reviewed with additional information being sort or developmental work to be done.

Declined placings

21 referrals were considered but considered not appropriate, for the following reasons;

Reason for closure	Number
Young person not engaging with outside services	2
Young person had returned to school by time of referral	4
Referred on elsewhere	7
Young person not engaging with provision	2
Evidence suggests referral not appropriate	6

Review Points

- **Permanent Exclusions:** The time between a young person being permanently excluded and beginning a placement is variable, depending upon several factors; promptness of notification; arrival of information (exclusion paperwork/ contact details etc.); proximity to EIP meeting; actual response time by provider; etc. It is suggested that to address this a quicker response of 1-1 tuition in all P. Ex cases will be piloted to try reducing this fluctuating gap.
- **Permanent Exclusions:** Monitoring SEND issues amongst the P. Ex pupils. EHCP is currently monitored but SEND Support and Ed Psych involvement has not been. Is there a story being missed at SEND level that is below the EHCP thresholds? There may be, but at the moment the evidence has not been collected.
- **Accredited exams;** GCSEs and Functional Skills were offered this year to all Year 11 pupils. Functional Skills were offered as a 'safety net' for pupils should they not get GCSE passes. However, it now appears that this may have been unnecessary owing to the new GCSE grades. To the pupils they were a set of exams too many and a repeat of any double entries would be managed so that FS exams were taken away from the GCSE window.
- **Engagement;** It is concerning that 7 Year 10 pupils do not engage with their offer of education, despite it being discussed and negotiated with them in the preparatory stage. What is particularly concerning is that of the 4 Exclusions in July, who have yet to be placed, history suggests that a possible further 3 may not engage from them (all are currently receiving support from Early Help or Complex Families). This will be addressed by an additional team member working these cases, but also more time needs to be spent considering multi-agency responses through the Complex Pupils and additionally, aligned work with the Legal Intervention team to see if a legal response would be effective.
- **Children and Family Support:** To review work with Early Help, Complex Families and R&A. Whilst links are strong and positive just over 50% of pupils either did not receive any support or had their support closed in the year of their Permanent Exclusion. There is scope for a discussion to see if further support could be ensured to support a placement until it is sustained.
- **Progression;** to motivate the pupils and enable them to make the most of their opportunities we will investigate an 'employability week', delivered by an outside agency for all year 11 pupils, either later in the autumn term or early in the spring
- **Provision:** As Key stage 4 placings continue to increase outside of registered schools there is an increased onus on education to ensure that content and safeguarding elements are robust so they will be reviewed and developed further, particularly in light of 'Keeping Children Safe in Education 2018' paper. Alternative provision needs to be expanded further to enable a variety of behavioural needs, interests and learning styles to be accommodated.

14 providers were used in this academic year but do not represent a geographical spread across the borough. there are also no registered schools providing alternative education in the borough.

- **Hospital and Home Tuition;** A major success this year has been the information sharing between agencies and services at the Educating Inclusion Panel. However, too many referrals in are rejected at the panel due to lack of information. Next year there will be pre-processing and young people who have inappropriate referrals will be held in abeyance until that information is obtained. This will ensure that partners' time on the panel continues to be effectively spent.
- **Hospital and Home Tuition;** As part of an approved referral from Hospital and Home Tuition there is a need to approve a review date, where by progress is reported back on and a further decision made about the education offer. This will allow the EIP a greater part in the process and ensure that schools also are more fully involved.

S. Graham

Triage and Placement manger

08/08/18

TITLE OF REPORT: North East Public Health Sector Led Improvement – Conception to two years pilot

REPORT OF: Alice Wiseman, Director of Public Health, Care Wellbeing and Learning

SUMMARY

The purpose of this report is to give Overview and Scrutiny Committee an overview of the North East public health sector led improvement (SLI) – conception to two years pilot.

The report will cover the following areas:

- Background
 - Details of work undertaken as part of the self-assessment
 - Results of the self-assessment – areas of good practice and areas to consider for improvement
 - Prioritised areas for SLI and progress in these areas
-

BACKGROUND

1. The transfer of public health responsibilities in 2013 brought public health services into the established local government SLI regimes. In the Public health sector-led improvement framework the Association of Directors of Public Health (ADPH) indicated that the purpose of SLI is to “provide confidence both to internal and external stakeholders and the public as well as demonstrate continuous improvement to public health practice”.
2. The North East Directors of Public Health and Public Health England’s (PHE) North East centre approved a process for SLI for children from conception to two years. The work built on learning from the Local Government Association (LGA) SLI model. The SLI involved a local self-assessment procedure and aimed to identify where local authorities could focus time and resources to improve areas within the conception to 2 year offer.
3. The North East Directors of Public Health and Public Health England’s (PHE) North East centre agreed that the Gateshead and Durham Public Health Teams would pilot the SLI work in their areas.

SELF-ASSESSMENT PROCESS

4. The SLI process involved undertaking a high level local self-assessment which was led by a Steering Group from Public Health, who worked with locally agreed multi-agency stakeholders and partners in Gateshead.
5. The high level self-assessment provided information and evidence, both strategically and from the local system for each of the following areas:
 - Local Need; factors associated with low levels of school readiness (the data including public health indicators and local system knowledge)
 - Leadership and planning (strategy, commissioning and operational planning)
 - Wider determinants (housing, employment, access to health services etc)
 - Local delivery of evidence-based activity which supports best start in life to include:
 - Pre-conception
 - Transition to parenthood, including healthy pregnancy and the early weeks
 - Breastfeeding (Initiation and Duration)
 - Healthy weight, healthy nutrition (to include Physical Activity)
 - Health, wellbeing and development of the Child Age 2
 - Maternal mental health

RESULTS OF SELF ASSESSMENT

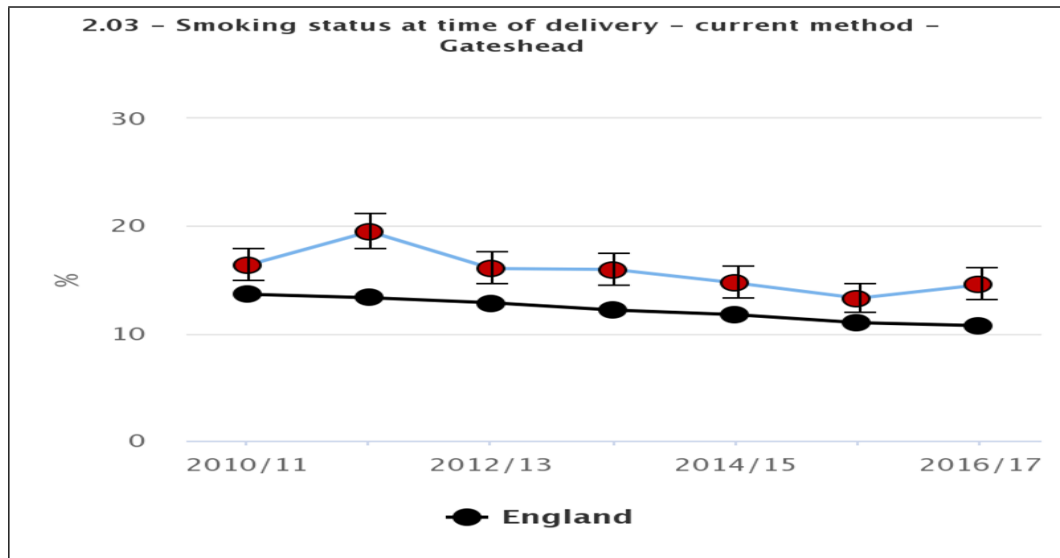
Identified areas of good practice

6. The self-assessment highlighted that there is strong evidence that demonstrates areas of good practice across all elements of the conception to two year offer across Gateshead including:
 - Leaders are focused on improving outcomes for children and the local aspiration for the best start in life is clearly set out in strategic and planning documents.
 - There is a strong commitment from all multi-agency stakeholders to give children the best start in life and there are named leads across organisations.
 - There is good access to health services e.g. health visiting, maternity, family nurse partnership.
 - There is good access to children's centres and early years settings.
 - 100% of day nurseries and pre-schools rated as good or outstanding by Ofsted at the point in time that they were inspected.
 - There is a well established common assessment framework process in place which underpins the early help offer in Gateshead.
 - The Healthy Child Programme is at the heart of universal services for children, young people and families and provides a framework to support collaborative work and more integrated delivery.

- The joint area SEND inspection highlighted that Gateshead is effective in identifying children with special educational needs or disabilities. It also identified that families and new born babies benefit from the consistent approach to early screening and development checks by midwives and health visitors

Identified areas to consider for improvement

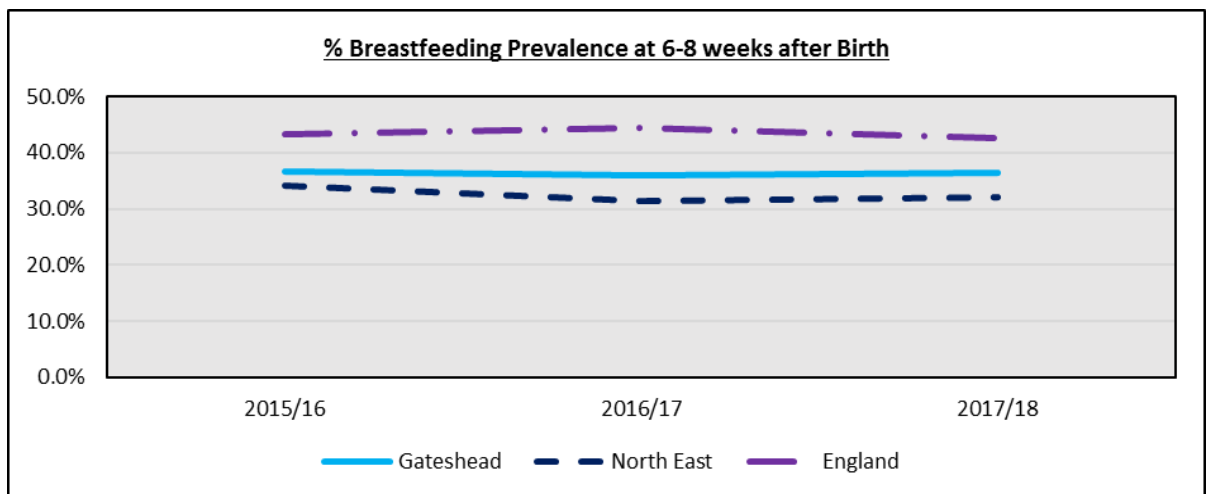
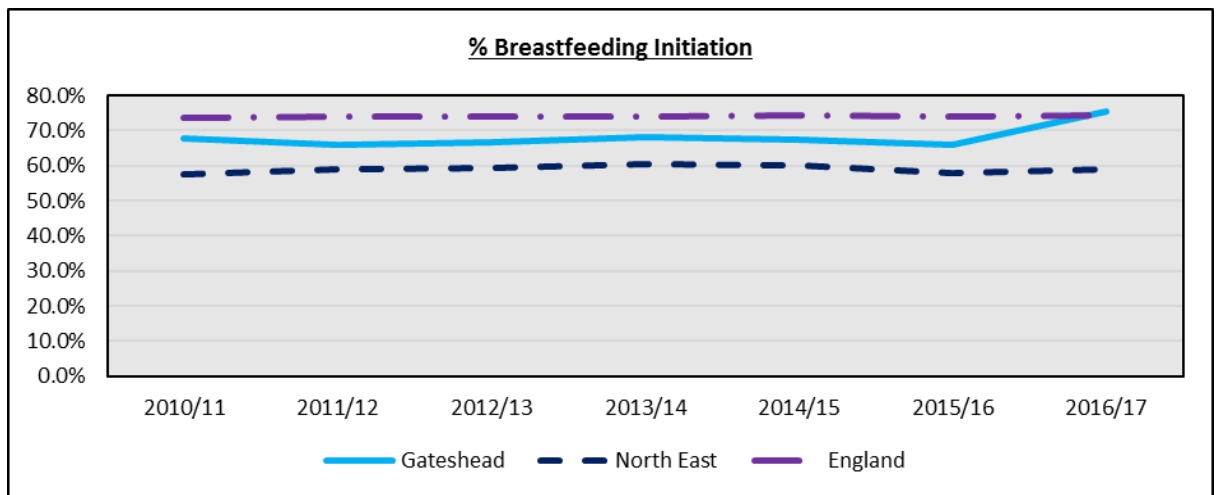
7. Whilst there was strong evidence of areas of good practice the self-assessment enabled the identification of some areas, within the conception to two offer, where outcomes for children could be improved:
 - Low birth weight of term babies
 - Smoking in pregnancy (smoking at time of delivery)
 - Teenage pregnancies (under 18 conceptions)
 - Breastfeeding (6 to 8 week prevalence)
 - Hospital admissions – dental caries children aged 1 to 4 and unintentional and deliberate injuries in children age 0 to 4
 - Immunisations
 - Excess weight in 4 to 5 year olds (linked to breastfeeding agenda, weaning etc)
 - Maternal mental health
 - Education status
 - Adequate, safe and affordable housing
8. Details of the findings from the self-assessment were presented to the Gateshead Child Be Healthy Group for consideration. This group is chaired by Dr David Jones (Children, Young People and Families Lead for Gateshead/Newcastle CCG) and is attended by partner agencies/services including CCG, children and young people's mental health services, paediatric services, 0-19 service, early years' service. The group agreed that the initial focus areas for SLI should be breastfeeding and smoking in pregnancy.
9. Smoking in pregnancy causes up to 2,200 premature births, 5,000 miscarriages and 300 perinatal deaths every year in the UK. Smoking during pregnancy increases the risk of complications such as miscarriage, premature (early) birth, a low birth weight baby, still birth. Infants born to smokers are more likely to become smokers themselves which perpetuates cycles of health inequalities.
10. The chart below illustrates smoking status at time of delivery in Gateshead. Whilst there had been a year on year reduction since 2011/12 (19.5%) this has increased in 16/17 to 14.5% and 15.1% in 17/18. It should be noted however that since 13/14 the data is presented at Newcastle Gateshead CCG level.



11. Breastfeeding has an important role in the prevention of illness and reducing health inequalities:

- There are acknowledged links between sustained breastfeeding and a reduced risk of childhood obesity
- Breastfeeding promotes emotional attachment between mother and baby
- Breastfed babies have a reduced risk of respiratory infections, gastroenteritis, ear infections, allergic disease and sudden infant death syndrome
- Breastfed babies may have better neurological development and be at lower risk of tooth decay and cardiovascular disease in later life
- Women who breastfeed are at lower risk of breast cancer, ovarian cancer and hip fractures/reduced bone density

12. The charts below illustrate breastfeeding initiation rates and breastfeeding prevalence at 6 to 8 weeks. Initiation rates are higher than the north east average and in 16/17 are better than the England average. Breastfeeding prevalence at 6 to 8 weeks has been above the north east average since 15/16 but lower than the England average and has not seen any real improvement since 15/16.



13. Within the identified areas to be considered for improvement it should be noted that since the self-assessment was carried out there have been improvements in some of the indicators, and there are areas where work is already underway. It was decided that these areas will not be considered for any improvement work. The details are included in paragraphs 14 to 17.
14. The data included in the self-assessment was based on the June 2017 child health profile. An updated child health profile was released in June 2018 which showed improvement in two indicators that had previously been identified as potential areas for improvement, namely low birth weight of term babies and teenage pregnancies (under 18 conceptions). These two indicators are not significantly different from the England average.
15. Education status was also highlighted as a potential issue in the initial self-assessment. This was based on data taken from the 2011 census. On examination of the four school readiness indicators Gateshead is not significantly different to the England average for three of the indicators, and is

significantly better for one (% of year 1 pupils achieving expected level in phonics screening).

16. Immunisations were also highlighted in the initial self-assessment based on the 16/17 data. All immunisations for the 0 to 2.5 years age group have shown an improvement in 2017/18. Eight of the 9 indicators are within the PHE tolerance level and one indicator is above the target of 95%. These indicators are closely monitored by the council's management information research officer.

17. Work is already ongoing in the following areas:

- Excess weight in 4 to 5 year olds – Work is being taken forward in line with the all age health needs assessment and the healthy weight review across the life course which is being undertaken by Families OSC
- Maternal mental health – The national maternity review “Better Births” has set out some key recommendations in relation to better postnatal and perinatal mental health care. These recommendations are being taken forward as part of the local maternity systems review.
- Adequate, safe, affordable housing – The Gateshead Housing Strategy 2019- 2030 has a focus on housing supply, standards and support.

18. Work on hospital admissions (dental caries children aged 1 to 4 and unintentional and deliberate injuries in children age 0 to 4) will be considered for the next phase of SLI work.

PROGRESS TO DATE

19. Two task and finish groups, led by public health with key partners involved, have been set up to look at the focus areas for SLI (smoking in pregnancy and breastfeeding). The groups have been meeting since October 2018. It has been acknowledged by the group that there is no additional funding available and services need to work together to make use of the available skills and resources to drive this work forward.

20. Smoking in pregnancy work to date includes:

- There are 26 GP practices and 37 pharmacies within Gateshead who have stop smoking advisors. The single point of contact number for advice on referral into stop smoking services has been established.
- The group is currently reviewing the pathway between maternity services and local stop smoking services.
- A bespoke public health maternity plan has been drafted as part of the North East Local Maternity system network and this is currently being reviewed and agreed by maternity services. This has a specific section which focuses on reduction in tobacco dependency in pregnancy
- Local Authority Early help services – links are being made to have workers in the service trained in very brief advice, so they can offer advice and be able to refer on, where appropriate, and “hand hold” to get people into GP's

or pharmacies if they wish to quit. They will then look at embedding smoking support into the support plan.

- 0-19 service (health visiting, family nurse partnership, school nursing) – The service already has 4 family nurses trained as stop smoking advisors. A number of health visiting and school nursing staff are currently being trained as stop smoking advisors. At the 28-32 week visit health visiting staff will be able to identify if the person is still smoking and support them to quit. They will also be able to offer support to anyone else in the household who is smoking.
- The maternity service at the QE is currently one of 23 sites participating in the PREP trial (Helping Pregnant Smokers Quit: A multi-centre randomised control trial of electronic cigarettes and nicotine patches). They are currently seeing all smokers who are identified in clinics, who are over the age of 18, are daily smokers and are between 12 and 24 weeks pregnant. The QE is the number one recruiting site in the country for the trial.
- Following a presentation to the Board of the QE they have nominated a Quality Improvement Lead to drive forward improvements in identifying and treating nicotine dependence. Support includes work to ensure that hospital staff can easily refer patients to local stop smoking services.
- The Quality Improvement Lead for the QE has carried out a gap analysis on smoking training and the Public Health MECC lead is providing very brief advice training for the Trust. The initial priority groups to train are midwifery, A & E, respiratory staff and the short stay unit.
- The public health programme lead for tobacco is working with the QE to support them to develop nicotine dependence pathways and to become completely smoke-free in line with NICE guidance.
- There are “screen savers” around the hospital so staff know who to contact within the public health team to get details of stop smoking advisors in Gateshead.

21. The following progress has been made around the breastfeeding agenda:

- The QE’s combined maternity and community services breastfeeding policy is being reviewed to ensure this is fit for purpose and will link with the 0-19 infant feeding policy
- Maternity services and early help services are looking at community hubs to identify how services can work together and support children and families.
- The 0-19 service will work into the community hubs to support breastfeeding and smoking in pregnancy agenda.
- A bespoke public health maternity plan has been drafted as part of the North East Local Maternity system network and this will also have a specific section which focuses on breastfeeding. This section is not yet complete as the audit on breastfeeding in maternity services is not yet complete.
- A mapping exercise to understand what training is provided to staff around breastfeeding, weaning and nutrition is being carried out. This will ensure that there is a consistent approach to training and resources can be shared between partner agencies.

- The vulnerable parent pathway is being developed. The pathway will link in with the breastfeeding agenda and midwifery, particularly around the additional support that agencies can give to those families
- The 0-19 Service will be applying for Unicef breastfeeding accreditation. This is a staged accreditation programme which supports providers to improve care by setting standards and providing training and support to implement the standards. It enables providers to audit their progress and assess this by measuring the skills and knowledge of their staff and listening to the views of mothers about their care.
- The 0-19 Service has developed their digital offer and details of baby clinics and breastfeeding support groups are now available on the Growing Healthy Gateshead facebook page.
- A locality manager in the 0-19 service is the infant feeding and nutrition lead and is supported by a breastfeeding champion. They are responsible for ensuring a consistent approach across the team and will lead on supporting mothers with complex breastfeeding needs.
- There is a 0-19 breastfeeding peer support co-ordinator who will deliver level 2 accredited breastfeeding training to mothers who are interested in becoming volunteers. The volunteers will provide basic breastfeeding advice and support to parents in community venues, antenatal sessions, maternity wards and at infant feeding workshops. The volunteer programme will be delivered and supported in partnership with maternity services and the early help service.

RECOMMENDATIONS

The committee is asked to note the contents of this report and the progress to date against the two areas identified for SLI (breastfeeding and smoking in pregnancy).

Contact: Alice Wiseman Ext 2777

TITLE OF REPORT: Annual Work Programme

REPORT OF: Sheena Ramsey, Chief Executive
Mike Barker, Strategic Director, Corporate Services and Governance

Summary

The report sets out the provisional work programme for Families Overview and Scrutiny Committee for the municipal year 2018/19.

1. The Committee's provisional work programme was endorsed at the meeting held on 19 April 2018 and Councillors have agreed that further reports will be brought to future meetings to highlight current issues / identify any changes/additions to this programme.
2. Appendix 1 sets out the work programme as it currently stands. Any changes proposed to the programme will be set out in bold and italics for ease of identification.

Recommendations

3. The Committee is asked to
 - a) Note the provisional programme;
 - b) Note that further reports on the work programme will be brought to the Committee to identify any additional policy issues, which the Committee may be asked to consider.

Contact: Angela Frisby

Extension: 2138

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APPENDIX 1

Draft Families OSC 2018-19	
14 June 18	<ul style="list-style-type: none"> • Constitution (to note) • Role and remit (to note) • The Council Plan – Year End Assessment and Performance Delivery 2017-18 • Review of Obesity (across the life course) - Scoping report • How Adult and Children's Services are working Together – Progress Update. • Ofsted Inspection – Outcome and Next Steps • Work Programme
13 Sept 18	<ul style="list-style-type: none"> • OSC Review of Obesity (across the life course) - Evidence Gathering • Annual Report on Complaints and Representations – Children • Ofsted Inspections/School Data – Progress Update • Monitoring – OSC Review of Children on the Edge of Care • Safeguarding Children - LSCB Annual Report and Plans • Work Programme
18 Oct 18	<ul style="list-style-type: none"> • Safeguarding Children – LSCB Annual Report and Plans • Early Help – Progress Update • School Exclusions – Performance Update • <i>YOT Performance Update</i> • Work Programme
6 Nov 18 <u>*Additional Meeting</u>	<ul style="list-style-type: none"> • <i>CAMHS Progress Update</i> • <i>Work Programme</i>
6 Dec 18	<ul style="list-style-type: none"> • The Council Plan – Six Monthly Assessment and Performance Delivery 2018-19 • OSC Review of Obesity (across the life course) – Evidence Gathering • Provision of School Meals (Universal Credit) • Tackling the Toxic Trio (domestic abuse/substance misuse and neglect) – Case Study • Work Programme
31 Jan 19	<ul style="list-style-type: none"> • <i>OSC Review of Obesity (across the life course) – Evidence Gathering</i> • Ofsted – Annual Report • Secondary Academies Performance – Progress Update • Promoting the Independence of children and young people with SEN/learning disabilities – Progress Update (with a focus on how needs are being met; SEN progression and Home to School Transport) • Work Programme
7 March 19	<ul style="list-style-type: none"> • OSC Review of Obesity (across the life course) – Interim Report • Recruitment & Retention of Social Workers – Progress Update (Deferred from December meeting) • Annual Conversation with Head Teachers of Special Schools • School Exclusions – Performance Update • Best Start in Life – Outcome of Pilot Self- Assessment • Work Programme

4 April 19	<ul style="list-style-type: none"> • OSC Review of Obesity (across the life course) – Final Report • Liaison with Gateshead Youth Assembly • Monitoring - OSC Review of Children on the Edge of Care • Early Help – Progress Update • LSCB Emerging Priorities • OSC Work Programme Review
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Issues to slot in:

- **Progress update – Foetal Alcohol Spectrum Disorder (Deferred from 07.03.19 for inclusion in 2019/20 Work Programme)**