# FAMILIES OVERVIEW AND SCRUTINY COMMITTEE

## 10 September 2015

PRESENT: Councillor Malcolm Brain

Councillors: J Graham, McCartney, S Craig, Hawkins,

Oliphant, Turnbull, Thompson and Robson

**CO-OPTED MEMBERS:** Malcolm Brown, Ray Tolley and John Wilkinson

## F9 Apologies for Absence

Apologies for absence were received from Councillors Caffrey, Adams, McNally and Clelland and co-opted members, Sasha Ban, Jill Steer and Carolyn Duffy.

#### F10 Minutes

RESOLVED - The minutes of the meeting held on 18 June 2015 be

approved as a correct record.

## Matters Arising

It was confirmed that, following the issues raised around LAC achievement in education results, a meeting has been planned regarding REALAC team funding.

It was requested that officers provide additional information to the Committee around what work is being done in schools to raise awareness that 'sexting' is illegal.

## F11 Children Looked After and Safeguarding – Role of Health Services in Gateshead

The Committee received a report which provided a progress update following the unannounced CQC Inspection for Safeguarding and Looked After Children in Gateshead.

It was reported that a number of organisations were involved in the inspection including; QE Hospital, CCG, NHS FT, GP's, Health Visitors, LAC Services, Drug and Alcohol Service, Family Nurse Partnership, Maternity Services, Sexual Health Services and School Nurses.

The inspection focused on the voice of the child, in particular looking into the experiences and views of children and their families. The key line of enquiry was looking at the quality and effectiveness of safeguarding arrangements in health. Focused in particular on; assessing need and providing early help,

identifying and supporting children in need and the quality and impact of child protection arrangements.

It was confirmed that safeguarding was found to be solid and that significant progress had been made since the last inspection. Partnership working, governance and leadership arrangements were also seen as areas of good practice. In addition, there was found to be good reporting of child protection issues at A&E, good examples of specialist support being available in maternity services and information sharing between GPs, midwives and health visitors. There was also found to be good evidence of achievement relating to professional staff training at all levels.

It was reported that areas for development have been compiled into an action plan. Actions include; development of a perinatal mental health pathway in midwifery services, routine inquiries around domestic violence at each midwifery contact. Two teenage pregnancy specialist midwives are in post to support the work of the Family Nurse Partnership. A GP Report Writer administrator has been appointed to strengthen GP's contributions to Child Protection Conferences, this has improved contributions from 27% to 54%. Information sharing links to NTW NHS Foundation Trust have improved with lists of children on Child Protection plans being frequently shared. Training has been held with Health and Children Services around alcohol and substance misuse impact on children. The Committee was advised that an audit on LAC assessments has been carried out and will be held on an annual basis.

The Committee was advised that outstanding actions include; strengthening the GP multi agency information sharing meetings and supporting the new designated Dr Safeguarding Children in her new role from October 2015. In addition an audit will be carried out on the quality of GP contributions to Child Protection reports.

It was queried as to the role of the Designated Dr. It was confirmed that the Dr is employed in this role by the CCG for one day per week. The role includes looking at training and governance arrangements, dealing with queries from GPs around concerns about children they have seen.

It was questioned whether any work is underway to identify child carers and what is done to ensure their care hours are not exceeded. It was confirmed that this was not a key line of enquiry so information is not clear about this. The point was made that organisations, such as Crossroads, support these children which shows that there are large numbers of young carers within Gateshead.

It was queried what the issues were around LAC assessment quality. It was acknowledged that there are variable amounts of contributions to LAC assessments, for example from school nurses, GPs and health visitors, therefore training for contributors has been enhanced.

It was questioned whether any review has been carried out on waiting times for CAMHS. It was confirmed that this has been picked up and is monitored through the Children and Young People Service. There are no recent figures from NTW but this will be picked up in the future.

It was queried what mental health support was available within midwifery services. It was confirmed that five additional midwives have been appointed, as well as two teenage pregnancy champions, and work is ongoing to develop a perinatal mental health pathway.

The point was queried that nearly half of GPs are not contributing to Child Protection Conferences. It was acknowledged that within safeguarding representatives have 10 days to provide information which is a short timescale by which to respond. It was noted that as GPs are very busy and demands are such that there is limited contribution and quality is not always of a good standard. The point was made that it was hoped that this time next year the position would be improved. It was confirmed that this is not an unusual position as this is a challenge in all areas, however there is a unique pilot in place to tackle this.

The Committee agreed that the contribution to Child Protection Conferences from all agencies, including Health Services, should be looked at further. It was agreed that this would be picked up during the Committee's current Child Protection review.

The Committee also agreed that a letter should be written to the CQC to suggest inclusion of young carers support in its future inspections. It was pointed out that within the Single Inspection Framework of Ofsted this issue would be looked at.

RESOLVED -

- (i) That the Committee would suggest the CQC look at young carers support in any future inspections.
- (ii) That the Committee was satisfied with the progress made against the action plan.

### F12 Annual Report on Complaints and Representations – Children

The Committee received the annual report on Children's Services complaints and representations. For complaints received during 2014/15 two key themes were identified; quality of service and disputes around Social Work reports.

It was acknowledged that generally families want reports changed, sometimes this is to delay the process and an attempt to stop action. It was noted that there has been a 32% increase in complaints since last year, it was suggested that this could be due to safeguarding issues being more in the media and some historic complaints have been received. It was also noted that regionally there has been an increase in complaints as people are more aware of their rights.

During 2014/15 there were no complaints received in relation to staff conduct. Five complaints were received around breach of confidentiality and work is underway with Information Officers from legal services to prevent this happening in the future. 4% of the complaints were received from representatives of the BME communities, however in those cases there was no evidence of racial discrimination.

It was reported that 42% of the complaints received were not upheld and 44% were partially upheld. The Committee was advised that when complaints move to stage two there are financial implications for the service as there is a requirement to provide an independent person to oversee the complaint.

It was noted that learnings from every complaint is used to drive improvements within the service and identifies where things can be improved. It was acknowledged that usually communication is a key issue and is addressed by team managers. It was also noted that a number of compliments were received during the year, 37% of representations made were compliments.

It was queried why half of complaints were not resolved within the 20 working day timescale. It was stated that when an internal investigation starts at stage one the investigator will contact the complainant to try and work with them and if there are a number of services involved it is difficult to resolve within the timescale. If the investigating officer keeps in contact with the complainant and keeps them updated they will generally be happy. If the complainant is unhappy with the timescale they can move their complaint to stage two, however it was noted that this does not often happen. It was recognised that generally complainants wish to have a thorough investigation rather than rushed to meet timescales.

It was questioned whether additional resources are needed in support of Social Workers as quality of service is a key issue coming out of the complaints. It was confirmed that safeguarding care planners get the most complaints and team managers are involved with each complaint at stage one. It was also noted that if issues with a particular Social Worker are received more than once this would be flagged with the Service Manager.

RESOLVED -

- (i) That the Committee's comments on the annual report are noted.
- (ii) That the Committee was satisfied with the performance of Care Wellbeing and Learning in responding to complaints and ensuring that this results in continuous service improvement.

### F13 Gateshead Child Health Profile

The Committee received an overview of the current Child Health Profile that was released in June 2015. The profile was produced by Public Health

England and looks at performance relating to child health and wellbeing in Gateshead in comparison to national performance.

The key findings were identified as;

- Child poverty in Gateshead is worse than the national average with 22% of children aged under 16 living in poverty.
- Obesity rates are above the national average
- Immunisation uptake in Gateshead is above the national average
- Increase in hospital admissions as a result of self harm for 10-24 year olds.

Indicators showing improvement since last year include; increase in immunisation to children in care, increase in breastfeeding and reduction in child poverty. Indicators not showing improvement were also highlighted, these included; increase in infant mortality, substance misuse, hospital admissions due to asthma and self harm. It was noted that some measures will be changed for next year, this includes the children in poverty measure.

A breakdown of immunisation rates was provided, which showed that Gateshead is performing above the national average, this includes rates for looked after children. GCSE attainment, including English and Maths, remains above the national average, however there is currently no data for looked after children's attainment.

In terms of obesity rates it was noted that in 10-11 year olds this is above the national average. Similarly, under 18 conception rates are worse than the England average, although within Gateshead there has been a reduction in under 18 conception rates.

It was reported that there has been a reduction in under 18 hospital admissions due to alcohol specific conditions, however this still remains higher than the national average. It was acknowledged that hospital admissions due to substance misuse is significantly higher than the national average, therefore this would need to be monitored in order to examine trends.

Mothers smoking at time of delivery remains above the England average rate. Rates of breastfeeding initiation are below the national average, however regionally Gateshead is performing well.

A&E attendances of 0-4 year olds has increased over the last three years and is currently higher than the national average. In particular there has been an increase in hospital admissions due to asthma.

It was noted that the Committee has previously raised its concerns around self harm and substance misuse figures and felt that no progress had been made on this issue. It was acknowledged that next years figures would likely increase further to reflect the increase in use of legal highs. It was noted that drug and substance misuse and legal highs remain a regular issue and

education sessions are being held. It was also suggested that there needs to be some distinction between intentional self harm and those incidents of young people taking legal highs. It was confirmed that there are clear definitions of what is included in the figures and it was noted that an update on self harm is programmed for the next meeting of the Committee.

It was queried as to why there is an increase in hospital admissions due to asthma. It was confirmed that this is usually as a result of emergency admissions and there has been an increase in respiratory problems which needs to be looked into further.

It was questioned whether there is a taskforce in place to address the whole body of issues. It was confirmed that there is no taskforce as such, however there is a Programme Board with an overview and Public Health look at this overall in terms of advances in Gateshead. This is also reported to the Health and Wellbeing Board.

It was questioned why not all LAC were reported on in terms of immunisation. It was noted that this may be to do with the age of the cohort but would be checked and confirmed.

It was also questioned as to whether the number of young people using vaporisers instead of smoking cigarettes is recorded. Committee was advised that this information is not currently being recorded.

RESOLVED - (i) That the comments of the Committee are noted.

(ii) That the Committee is satisfied with performance to date.

### F14 Ofsted Inspections / School Data – Progress Update

The Committee received a report outlining the position of Gateshead schools in relation to Ofsted inspections for spring and summer 2015 terms.

It was reported that St Anne's Catholic Primary School is the lowest performing primary school in Gateshead and was found to 'require improvement' at its recent inspection. It was noted that the school has lost its Headteacher and Deputy Headteacher and Council officers are continuing to work with the Catholic Diocese to overcome the problems of the school.

It was noted that Winlaton West Lane Primary School were previously found to 'require improvement' although its leadership was judged to be good. However, at its recent inspection the school was still found to require improvement but its leadership was no longer classed as good. Work is continuing with the school as the improvement that was expected has not yet been made.

Lobley Hill Primary School was judged as 'good', although there was a dip in SATS results Ofsted still recognised the school's achievements.

It was reported that Kibblesworth Primary Academy was previously judged as 'outstanding' but was found to 'require improvement' at its most recent inspection. It was noted that Council officers previously had limited contact with the school after it became an academy, however since the inspection a support package has been put in place.

It was noted that Birtley East Primary School was initially found to require improvement, however, the school and officers disagreed with this finding and it was subsequently changed to good.

Ofsted found that Kingsmeadow School required improvement but recognised that its leadership was good. It was noted that this was a disappointing result and was due to a weakness in their data.

In relation to Ryton Junior School it was put into special measures and it was looking likely that the school would need to convert to an academy. HMI visited the school in the summer and advised that it would not be converted until Ofsted returned to inspect, in order that sufficient time was given for the school to improve. However, if at that time the school was found not to be good enough it would be converted to an academy.

RESOLVED - That the Committee noted the position of schools in relation to Ofsted inspections.

## F15 OSC Review - Child Protection in Gateshead - Evidence Gathering

The Committee took part in the first evidence gathering session of the review into how the child protection system operates in Gateshead. The Committee received an overview on the legal framework of the child protection system and the roles and responsibilities of multi agency working.

It was reported that the Children Act 1989 governs child protection functions and the Children Act 2004 strengthened the previous Act by enforcing a duty on a range of organisations to promote the welfare of children.

Working Together to Safeguard Children Guidance was published in 2013 and provided statutory guidance for interagency working to safeguard and promote the welfare of children. The guidance took on the recommendations from the Munro Review to focus more on the individual needs of the child and clarified the procedure for a single assessment, which Gateshead established. The guidance was updated in 2015 and included referral of allegations to the LADO and emphasised the multi agency nature of safeguarding, reasserting the principles of a child centred approach.

In terms of the process it was noted that the Referral and Assessment Team decides in one day how to handle the referral. Options to be looked at at this

point include; whether the child requires immediate protection, usually police would be involved at this point, whether the child is in need, whether there is cause to suspect the child is suffering or is likely to suffer significant harm and should be assessed under section 47. At this time the team would also look to see if any services are required by the child and whether further specialist assessments are required.

If a Child in Need Assessment is needed this must be determined within 45 days, it will be done with the consent of parents. However, if during the assessment it becomes apparent that there is cause to believe the child may be at risk of significant harm, a multi agency strategy meeting will be called. This will bring together information on the family and it will then be decided whether a Child Protection investigation (section 47 enquiry) should be started. It was noted that this can be done without parental consent and therefore frees up organisations to release information.

A Social Worker will lead assessments under section 47 and will work with organisations namely; police, health professionals and teachers. The assessment will take in the views of the family, the child and professionals and the information will be evaluated and risk analysed. The enquiry will reach a view following, if it is not substantiated the case will return to a Child in Need Plan. If the referral is substantiated an initial Child Protection Conference will be called within 15 days.

The Initial Child Protection Conference (ICPC) is a multi agency meeting, including the family and the child, and is chaired by an Independent Reviewing Officer (IRO). The IROs operated outside of the operational line of responsibility. The ICPC reaches a conclusion as to whether it meets the threshold for a Plan, it points to actual harm or is based on professional judgement that there is the potential for future harm. Immediately following the ICPC an outline plan is put in place, this sets out what and by who it should be done. The Plan articulates the actions required and identifies the core group, which then meets the family monthly.

A Review Child Protection Conference (RCPC) is held at the three month point and then six monthly thereafter. It was confirmed that only a RCPC can stop a plan, a core group cannot.

A breakdown of child protection figures was provided, it was noted that figures were high at 2013/14 however 2014/15 figures are not yet available. It was pointed out that last year the number of plans decreased, however this year there are currently 220 but there is a corresponding increase in the number of LAC. It was noted that this is likely to be a similar picture nationally and regionally as authorities move to single assessments.

Committee was advised that in Gateshead there is a higher number of unborn babies being subject to child protection plans, this has been seen as good practice as it provides a long period through which to work with families. The

low numbers of children becoming subject to plans for a second time shows that the right decisions regarding plans are being made in the first place.

It was confirmed that those section 47 enquiries that are not progressed are currently being dip reviewed and the outcome of this will be reported during the review.

It was questioned whether economic factors play a part in the increased number of plans as a result of neglect. It was confirmed that Ofsted did carry out a thematic inspection and did find an impact of poverty on neglect. The authority is now seeing this more broadly than just a single issue.

- RESOLVED -
- (i) That the views of the Committee on the evidence presented was noted.
- (ii) That the Committee agreed the proposals for the next evidence gathering session.