

**GATESHEAD METROPOLITAN BOROUGH COUNCIL**  
**FAMILIES OVERVIEW AND SCRUTINY COMMITTEE MEETING**

**Thursday, 18 January 2018**

**PRESENT:** Councillor B Oliphant (Chair)  
Councillor(s): M Hall, S Craig, L Kirton, E McMaster,  
R Mullen, P Craig and Jill Burrell

**IN ATTENDANCE:** Councillor(s): G Haley

**F36 APOLOGIES FOR ABSENCE**

Apologies for absence were received from Cllr McHugh, Cllr McCartney, Cllr Clelland, Cllr Caffrey, Cllr Weatherley and co-opted members Sasha Ban, Maveen Pereira and Cheryl Lain.

**F37 MINUTES OF LAST MEETING**

The minutes of the meeting held on 30 November 2017 were agreed as a correct record.

**F38 CAMHS UPDATE**

The Committee received a progress update report on the Children and Young People Local Transformation Plan and the implementation of the new CAMHS model. It was noted that CAMHS is one strand of the overall transformation plan.

It was reported that the listening phase was carried out in terms of what service users want. From that it was clear that children and families using the CAMHS service wanted; easy access, varied venues within the community as well as multi-media access to the service.

Work is underway with the current providers as if it were a new procurement, the service specification is being developed, using understandable language. The single point of access went live for schools only in December as there is a phased approach. The single point of access is operated by call handlers who are supported by clinicians. The next phase will be the single point of access for GP referrals, this will be rolled out in March. From April self-referrals will be made through the single point, this is for children and families. A multi-media access approach will be rolled out thereafter as currently access is through telephone and email only.

A protocol is being developed to offer a pathway for special groups, such as LAC, YOT and young people with substance misuse problems or young people from

families with substance misuse.

It was noted that providers continue to meet once per month. It is hoped that the new model will be more responsive than previously and work is underway to clear the backlog and reduce the waiting list. Initial feedback has been positive, however no formal review or evaluation has yet taken place.

It was questioned what the figures were for the current backlog. It was confirmed that this figure changes week on week, however this information can be provided for the next update, as well as waiting times. It was confirmed that each contact is needs assessed, therefore some people will be seen within a few days, this is clinically led so some people may have to wait. It was acknowledged that waiting times are unacceptable at previous levels. It was noted that for those vulnerable groups of young people there is no guarantee of an early appointment as it depends on need.

It was confirmed that the first evaluation will be carried out after 6 months into the new contract arrangements and it was agreed that after the first year Committee could be updated on progress.

It was explained that the first call handler will take demographic information from the caller and, based on the content of the conversation, either immediately refer or triaged and given appointment. Any urgent need is dealt with as soon as possible. The point was made that the service would not necessarily share information with schools because the information is confidential, however work is ongoing to ensure schools are engaged in the service. It was also confirmed that 43 schools are due to attend training events, this is a joint venture with the CCG and will be mental health and school specific. Committee was advised that since December 50 phone calls have been taken from schools, it is anticipated that this number will increase as during that time the schools were closed over the Christmas period.

The point was made that the backlog remains big and with professionals still under pressure in terms of workload how do they cope. It was noted that that is why the service is trying to be more responsive and robust and get young people into the service early in order to prevent more complex issues escalating. It was acknowledged that the current model means people remain on the waiting list until their mental health deteriorates further, which is something the new model will attempt to avoid.

- RESOLVED -
- (i) That the Committee noted the update report on implementation of the new CAMHS model.
  - (ii) That the Committee supported the Mental Health Governance Structure.
  - (iii) That the Committee agreed to received further updates throughout the phased implementation of the CAMHS transformation programme, including case studies and statistics around backlog and waiting times.

- (iv) That the Committee agreed the refreshed Children and Young People Mental Health, Emotional Wellbeing and Resilience plan and implementation group.

**F39**

## **MODERN SLAVERY UPDATE**

Committee received a report giving an overview of modern day slavery legislation and how the Council responds.

It was reported that, although modern slavery is not new, there is a lot more awareness locally, regionally and nationally. There is no typical profile of a slave, however they are likely to be vulnerable. The Modern Slavery Act 2015 consolidated offences and penalties and created statutory duties.

There are a number of indicators of Modern Day Slavery; forced / bonded labour, sexual exploitation, criminal exploitation and domestic servitude. It was noted that possible indicators of Modern Day Slavery could include physical appearance, isolation, no personal possessions, unusual travel times and restricted freedom of movement.

In terms of the Modern Slavery Act a number of duties were given to local authorities, to respond when they judge someone to be a victim of modern slavery. It was noted that the key areas local authorities can respond are around; victim identification and support, prevention and disruption of crime, working in partnership and awareness raising. It was acknowledged that this is very much a multi-agency approach. The Strategic Exploitation Group is a sub-group of the Local Safeguarding Children Board (LSCB), Chaired by a Chief Inspector from Northumbria Police, this group approached the operational response to modern slavery and developed an overarching strategy. This group also has oversight of the children's MSET (Missing, Sexually Exploited and Trafficked), to date there have been no child trafficked cases. It was reported that the Strategic Exploitation Group commissioned Hope for Justice to undertake training for front line practitioners in Gateshead, it was noted that it will be re-commissioned for further training.

Committee was advised that the operational response to modern slavery in Gateshead is co-ordinated by the Resilience and Emergency Planning Team. A Concept of Operations has been developed which provides an overview of how the authority will respond to issues in the area and also supports the multi-agency approach to supporting those people who have been subject to modern slavery, trafficking and exploitation. This includes; responding to acute incidents within normal service, co-ordination of pre-planned operations and escalation to an emergency or major incident situation. It was reported that the Concept of Operations document details the single point of contact, the key contacts and communication process and the escalation processes.

It was reported that the Concept of Operations has been in place since October 2016, since that time there has been six planned operations in the area, out of which Gateshead was involved in three; Operation Border, Operation Bridler and last week (Monday 15 January 2018) Operation Caritas. Committee was provided with

information regarding Operation Bridler which took place in June 2017, led by the National Crime Agency (NCA). Four properties in Gateshead were searched, with five victims attending Victim Centres in the area, all victims were female who declined support, there were no children involved. Operation Caritas involved dawn raids on properties in the Inner West area of Gateshead, six arrests were made and there were 12 potential victims who were safeguarded.

It was acknowledged that often the victims of modern slavery do not realise they are victims because their wages are better than at home, however they are often housed in sub-standard accommodation.

Over the course of the six planned operations, 48 adults in total were spoken to, 14 of these were from Gateshead with an overall total of only 5 in Newcastle who identified themselves as victims.

It was reported that work continues with Social Care services to pre-identify children and young people who may be implicated in order for arrangements to be made for those young people.

It was questioned whether perpetrators are still prosecuted if the victims return. It was confirmed that they are still prosecuted and the situation continues to be monitored through police liaison officers.

It was suggested that there should be more emphasis on links with housing as these perpetrators are likely to be renting properties for the victims to be housed. It was confirmed that work is ongoing with the private sector housing team within the Council as it has been found that most of the properties targeted are privately rented. Committee was advised that during operations a number of staff, including those from partner agencies and The Gateshead Housing Company, are on standby to check addresses and to ensure a real picture of the circumstances is gathered across all services. This also allows follow up work to be carried out on any information gathered. It was also noted that the operations are disruption strategies and the Council will continue to look at all disruption options available. During the recent Operation Caritas officers were prepared for the worst, planning for a potential of seven children coming into the Looked After Care system, however this didn't evolve on this occasion.

It was questioned whether houses are declared safe before Council officers enter the buildings. It was confirmed that there is weeks of preparation before Council staff go in, there is also a command and control structure in place with the police.

The Committee gave thanks to all officers involved in the operations.

- RESOLVED -
- (i) That the Committee's comments be noted.
  - (ii) That Committee was satisfied with the progress achieved.

**PERFORMANCE IMPROVEMENT UPDATE - CHILDREN PRESENTING AT HOSPITAL AS RESULT OF SELF HARM**

Committee received an update report on the number of hospital admissions of children and young people (ages 10 to 24 years) as a result of self-harm.

It was reported that the Child Health Profile published in March 2017 showed that there were 189 admissions to hospital for self-harm in 2015/16. This was a slight increase from 2014/15 which was 179. Gateshead has the second highest rate for hospital admissions due to self-harm in the North East and in terms of statistical neighbours Gateshead has the fifth highest rate.

It was acknowledged that these rates are not per individual but rather per episode of admission. Therefore it is necessary to look at the quality of data because this could be influenced by local variation. It was noted that Public Health England has advised that there are concerns with regards to the quality of the data for this indicator. It was noted that, for example, one person could have 25 episodes which would obviously skew data. It was also noted that how each hospital codes an admission requires further exploration.

In order to address self-harm Newcastle Gateshead CCG provided funding for training in schools for young people's mental health, this was delivered across 13 schools. There has also been the introduction of mental health toolkits in schools. Following this training 85% of staff stated that their knowledge had been improved around the risk factors of self-harm. In addition the LSCB continues to provide level 3 training for people working with children and families.

It was reported that the contract for 0-19 public health services was awarded to Harrogate and District Foundation Trust, delivery of the service will commence on 1 July 2018. It was confirmed that the service will have a dedicated emotional resilience nurse to work with the 11-19 population, this will include families and schools.

Anna Freud workshops will be held for schools and mental health professionals to help them in their support of children and young people with mental health needs.

It was suggested that future updates on self-harm be included in the six monthly performance report with a deep dive in the next six months.

It was questioned as to the transition arrangements into the new 0-19 contract. It was acknowledged that this would not be easy but that the key thing was that the contract was staying in a Foundation Trust and not coming into the Council, there would also still be safeguarding leads from STFT.

It was queried as to the coding that hospitals use and how many of the admissions were failed suicides. It was confirmed that there are 20 plus codes which are very complicated, it was confirmed that the information regarding suicide attempts would not be able to be obtained. Committee was however advised that if there is any doubt around the motivation of a self-harm incident an emergency CYPS meeting is

held and possibly referred through to Safeguarding.

The point was made that this data relates to up to 24 year olds, therefore transition into adult services is important in ensuring appropriate support.

It was questioned what is happening in Newcastle that is not happening in Gateshead as its numbers are lower. It was acknowledged that further analysis is needed into this, it could be that Gateshead may have more admissions per individual. The point was made that an action plan cannot be developed if the data is insufficient, however it was accepted that it is more about understanding and comparing the data better rather than it being insufficient.

It was suggested that all schools should be taking part in the workshops. It was confirmed that the workshops are open to Newcastle schools also, however if there were any spaces all schools would be encouraged to attend.

It was agreed that an addendum on self-harm would be provided with the overall performance report in June.

- RESOLVED -
- (i) That the comments of the Committee be noted.
  - (ii) That Committee agreed work to be undertaken with Gateshead Council Research and Intelligence team, Newcastle and Gateshead CCG and Newcastle Public Health Team to investigate the self-harm data and potential differences in coding and data collection.
  - (iii) That Committee agreed future updates on hospital admissions as a result of self-harm children and young people (age 10-24 years) should be included as part of the Council Plan – Six Month Assessment of Performance and Delivery 2017/18 report that is submitted to this Committee.

#### **F41 OFSTED - ANNUAL REPORT**

Committee received a report outlining the Ofsted Inspection findings for Autumn 2017. It was reported that all maintained schools have improved since previous inspections.

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

#### **F42 WORK PROGRAMME**

The Committee received the work programme for the municipal year 2017/18, which is a standing item on the agenda.

- RESOLVED -
- (i) That the provisional work programme be noted.
  - (ii) 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.