

**FAMILIES
OVERVIEW AND SCRUTINY COMMITTEE**

3 December 2015

PRESENT: Councillor Malcolm Brain

Councillors: Caffrey, McCartney, Adams, Ronchetti,
Clelland, S Craig, Simcox, Oliphant

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

F23 Apologies for Absence

Apologies for absence were received from Councillors Hawkins, Robson, J Graham and McNally and co-opted member Sasha Ban.

F24 Minutes

RESOLVED - The minutes of the meeting held on 22 October 2015 be agreed as a correct record subject to the following addition;

Minute F18 'Performance Improvement Update – Children Presenting at Hospital as a result of Self Harm' – paragraph 10 to include the sentence:

“The Committee requested statistics around the waiting times for CAMHS, in particular how many young people’s condition worsened during the waiting period.”

F25 Case Study – Health in Schools

The Committee received a report and case study on The Gateshead Health in Schools Programme. It was noted that previously the national Healthy Schools programme was in place and had good take up within Gateshead, however this was decommissioned in 2011.

In order to continue addressing the challenges of the health and wellbeing of children and young people in Gateshead a locally developed Healthy Schools Programme was established. It was noted that Ofsted now recognised health and wellbeing as part of its inspection framework. A consultation period was held around the future of the programme and a simplified programme was developed, more outcome based approach based on locality.

An evaluation of the programme was held in 2013 and key areas for future development were identified. These formed the basis of the new Health in Schools Programme.

The overall aim is to improve health and reduce the health inequality gap. A number of objectives were outlined which the programme aims to achieve, including early identification and referral to appropriate services.

Due to financial pressure the programme will be offered for schools to buy back from September 2016 under a service level agreement. As Ofsted now recognise this as an important element of personal development, behaviour and welfare of pupils schools do see the value and schools do receive funding that they could spend on emotional health and wellbeing.

The Committee received a case study on the work undertaken at Bede Primary School. The school chose to focus on the area of emotional health and wellbeing. The school is located in an area of high deprivation and historically there are high numbers of pupils with emotional health and wellbeing issues. In addition the school felt that a number of children were growing up facing negativity, hardship and lack of self confidence, due to the environment, family cycles and a lack of aspiration support. Therefore a number of interventions were implemented across the whole school;

- New assessment system focusing on 'super learning powers' i.e. perseverance, independence, positivity and cooperation
- Bringing emotional health and wellbeing to the fore in school, focusing on all areas of the school, including staff and parents, in order to think about themselves and others more positively.

These interventions have been built into learning, linked to all aspects of school to improve aspirations and academic performance.

Bede School's achievements so far were outlined;

- Regular talking sessions are being held for vulnerable children to discuss their worries and concerns
- Encouraging children to complete three self portraits across the year as a means of tracking progress on how they are feeling
- Yoga sessions have been introduced for children, parents and staff
- Parent and child craft sessions held as a means of expressing themselves
- Parents and visitors invited to school to talk to children about their own lives and how they have overcome adversity
- SRE introduced for KS2 around issues such as self esteem, self image and respect for yourself and others.

In relation to the next steps, regular Healthy School Conferences will be held, Bede School wish to share their practice with other schools. Training will be held around the self-harm protocol and buy back from the schools will be monitored. In addition, a localised health and wellbeing survey will be carried out, it was noted that there was poor take up in 2014 due to the timing and the fact that it was only available electronically. Therefore work is ongoing to provide a more local survey on a more timely basis.

It was questioned how this work links to the obesity strategy and educating children and families about food. It was confirmed that data from the child measurement programme are collected and schools can choose to focus on healthy eating as an option to focus on under the Health in Schools Programme. Also, the School Sport Partnership works to support healthy eating and physical education with a focus on the whole family approach.

It was noted that schools face pressure around the curriculum and have a lack of financial support and therefore it was questioned whether the programme would be sustainable if not all schools bought back. It was acknowledged that there is a need for buy in from the majority of schools in order for it to be viable, however it was felt that a number of schools will commit. It was noted that the Committee can be updated next year as to the number of schools who have signed up. It was pointed out that the School Sport Partnership is very well established and it receives no Council funding therefore there is optimism that schools will buy into the Health in Schools Programme. It was also noted that the cost is £500 per year and it is expected that most schools will buy in, especially in order to evidence to Ofsted.

In terms of secondary schools, various responsibilities are delegated to separate teachers, therefore it was suggested that officers should address a parents meeting rather than speaking through teachers. It was confirmed that officers have linked with Headteachers and Governors, however an opportunity to address the wider school community would be welcomed.

- RESOLVED -
- (i) That the Committee would encourage all schools to buy into the new Health in Schools Core offer to help enhance and support their efforts to addressing health inequalities and promoting health and wellbeing within their schools.
 - (ii) That the Committee encourage schools to utilise School Sports Premium money to buy into the Health in Schools Programme.

F26 Vision 2030 and Corporate Plan – Delivery and Performance

The Committee received the six month update of performance and delivery of the Council Plan 2015-2020.

Overall achievements include the roll out of training to over 700 taxi drivers around recognising children at risk of being sexually exploited. This is now compulsory and Ofsted has recently recognised this as good practice. There has been 100% sign up by schools to Operation Encompass, which is in place to support children who have witnessed domestic violence. Gateshead College has been rated as 'outstanding' by Ofsted, only one of two further education colleges to receive this rating in the academic year. 83 schools in Gateshead have been inspected by Ofsted, 28 were judged as outstanding, 44 as good, 10 require improvement and one has been judged as inadequate.

Active Kidz has supported over 375 children and young people during the school holidays, 70% of which were Social Care referrals.

In terms of areas for improvement it was noted that smoking in pregnancy has increased to 15.1%, compared to the national average of 11.4%. This is the first time there has been an increase since 2009/10, work is ongoing with the Baby Clear Programme to tackle this.

Readiness for school measures children achieving a good level of development at age 5, this is positive and there has been a significant improvement on last year of 7%.

Educational achievement for KS2 is positive, at 82% which is 2% above the national average. However, GCSE results have dropped slightly, although it was recognised that this is due to changes in performance measures by the DfE so the figures are not directly comparable to previous years and Gateshead remains strong in terms of national and regional figures. There has been an improvement in GCSE results for vulnerable groups, in particular LAC, however it was acknowledged that this remains an area of challenge. Work is ongoing with the REALAC team around Personalised Education Plans (PEPs) and ensuring Pupil Premium is being used appropriately.

Young people not in education, training or employment (NEET) is improving and continues to decline, this is based on locally driven data. Work is ongoing with Connexions to improve access to the labour market.

Figures for first time entrants to the youth justice system are reducing, this is an improving picture and the service is working with young people on the cusp of offending. This work is through the Prevention Programme within the Youth Offending Team.

In terms of early intervention and reducing the number of children subject to a child protection plan it was noted that there was a spike in the figures during 2013/14. This figure has fallen significantly in the first six months of this year, currently this number stands at 256. There is a large increase in the number of CAFs, 445 in the last six months and 1139 TAFs, working with families at early intervention stage.

The percentage of children subject to a Child Protection Plan for a second or subsequent time is a proxy measure for the success of plans. In the first six months of the year 13 children became subject to a plan for a second time, eight of whom began their current plan over two years from their previous plan ending. In those cases it would be expected that there be changes in a child or young person's life. LAC numbers have increased since the end of March, there are 370 young people currently looked after in Gateshead.

In terms of placement stability, measured by the percentage of children living in the same placement for two years, performance is strong at 81%. 18 out of

371 (at the end of September) have been in three or more placements, this equates to 5.5% and is positive in terms of the national picture.

Self harm in young people aged 10-17 continues to be an area of focus, data has been broken down to identify incidents within this age range. Collaborative CAMHS work is ongoing and is a significant part of looking at how better to support these young people in the future.

Child Poverty rates have improved, currently 20.5%, this is measured by the number of children living in homes with 60% less than the median income. This rate is lower than the regional average and Gateshead is the only area in the region to see this. It was reported that from July this target will be removed and replaced with reporting on educational attainment, worklessness and addiction rather than relative material disadvantage.

It was noted that during its recent inspection Ofsted questioned Councillors about housing for care leavers. It was confirmed that suitable accommodation is reported in relation to those care leavers that the service is still in touch with and there are currently 17 that the service is not in touch with. It was also confirmed that this is only a DfE definition and does not mean that the service is unaware of the whereabouts of those young people.

It was suggested that messages need to be disseminated to young mothers around the impact of alcohol consumption during pregnancy and it was questioned whether this is currently being done. It was confirmed that the information would be sought from maternity services, it was also noted that this issue has been raised at the LSCB and has been flagged previously at this Committee in relation to the number of unborn babies subject to a plan.

The point was made that there is no indicator around the number of homeless families, which should be linked to child poverty. It was confirmed that those figures are reported into the LSCB and it was agreed that future performance reports to this Committee should include that information.

It was queried why teen conception figures are currently high. It was confirmed that this is being looked at, however it was acknowledged that it is difficult to identify what it was that helped figures previously. In addition, there have been changes within the team and there is no longer an individual teenage pregnancy coordinator. It was suggested that this issue be included on the work programme for next year.

Concerns were raised over the workloads of the Safeguarding and Care Planning Teams and in particular the recent high turnover of staff. It was confirmed that staff have not left the service due to their workload but rather have either retired, moved to other teams within the Council or moved to other authorities who are currently paying a premium for experienced Social Workers. It was noted that presently there is a stable position in terms of staffing levels following recent recruitment, although there are a number of newly qualified workers which will impact on workload this will be monitored

on a weekly basis. It was recognised that some local authorities have had money invested because they have not done so well in Ofsted inspections, therefore there is a market for Social Workers and this will continue to be monitored. At the recent Ofsted inspection it was found that Gateshead Social Workers have appropriate caseloads and are well supported.

It was queried as to how this Committee's input changes policies within the Council. It was confirmed that it is reported to the Children's Trust Board, chaired by the Cabinet Portfolio holder for children and young people and Cabinet will also have the opportunity to question Strategic Directors. This is reported on a six monthly basis to allow actions to be taken in the intervening time. It was noted that concerns were formally raised by this Committee around LAC educational attainment and this prompted actions to be taken in order to make improvements. It was confirmed that Ofsted recognised a 'golden thread' throughout the Council and could see where gaps had been identified, mitigated against and used to improve outcomes for children and young people. It was suggested that the Cabinet member for children and young people should be invited to attend the Committee in order for Cabinet decisions and specific issues to be scrutinised.

It was questioned how figures were established in relation to Children's Centre reach, as many groups are being run independently and are nothing to do with Children's Centres. It was agreed that officers would check where the numbers have come from. It was assumed that figures from volunteer run centres must be included in these numbers, although they are no longer Children's Centres.

It was suggested that the take up figures for 'Fill the Holiday Gap' are low, based on local knowledge. It was agreed that this would be unpicked further and more information be brought back to a future meeting.

- RESOLVED -
- (i) That the OSC considered the activities undertaken during the last six months are achieving the desired outcomes in the Council Plan 2015-2020.
 - (ii) That the OSC agreed the report be referred to Cabinet on 9 February 2016, with the comments of the OSC for their consideration.

F27 OSC Work Programme Review

The Committee received a report seeking views on future review topics to be considered during 2016/17 and also the process and effectiveness of the current work programme.

It was confirmed that suggestions received so far for next year's work programme include; teenage conception, the consequences for alcohol consumption in teenage pregnancies and LAC aspiration.

RESOLVED -

- (i) That any issues identified as potential review topics by 18 December 2014 will be included in the list of review topics to be considered by the OSC at the start of the municipal year, unless such issues are being or would more appropriately be dealt with via other Council processes.
- (ii) That the Committee was satisfied with the review monitoring process carried out so far.
- (iii) That the Committee was satisfied with the effectiveness of the case studies carried out in 2014/15.