

GATESHEAD METROPOLITAN BOROUGH COUNCIL
FAMILIES OVERVIEW AND SCRUTINY COMMITTEE MEETING

Tuesday, 18 July 2017

PRESENT: Councillor B Oliphant (Chair)

Councillor(s): M Hall, L Caffrey, S Craig, L Kirton,
S Ronchetti, D Bradford and P Craig

CO-OPTED MEMBERS Maveen Pereira

F8 APOLOGIES FOR ABSENCE

Apologies for absence were received from Cllr Clelland, Cllr Mullen, Cllr McCartney, Cllr Adams, Cllr Thompson and co-opted members Jill Steer and Sasha Ban.

F9 MINUTES OF LAST MEETING

The minutes of the meeting held on 15 June 2017 were agreed as a correct record.

F10 CAMHS - PROGRESS UPDATE

Committee received a presentation which provided an update on the review of Children and Adolescent Mental Health Services (CAMHS) across Gateshead and Newcastle.

Newcastle Gateshead CCG, along with both Councils, began a review in 2015 into children and young people's mental health provision. The aim of the review is to design an integrated, early response to the emotional and psychological needs of children, young people and families. Throughout the review process communities, service users and stakeholders were engaged. It was noted that the new model is a move towards a single point of access, to ensure all services are joined up.

In terms of progress so far it was reported that strategic planning and engagement work was completed in December 2016. The procurement of services process is ongoing until August and service monitoring and evaluation will be undertaken from September 2017.

The goals of the new service were outlined as;

- Collaboration between all providers
- Shift focus of service delivery to first line early intervention
- Reduce inappropriate referrals to specialist services
- Implement workforce development to ensure good succession planning and therefore sustainability of the service

- Delivery within the current financial envelope

It was reported that the new service will be focused on prevention and early intervention, it will respond to the needs of children and young people and will have clear routes to the right support. The service will be recovery focused, with a shared care approach, so no bounce between services for patients, and will allow for ease of access and choice. It was also confirmed that the new service will provide appropriate escalation when necessary and has integrated working at its heart.

It was reported that the new service will have a clear single point of access for all referrers. There will be a move away from the tiered structure which is currently in place, the service will use more easily understandable language.

In terms of the next steps it was noted that a workshop has been held with two providers at which it was agreed that weekly meetings would be held until September to agree how the service will be delivered. Implementation of the new service will be a phased approach, phase one; implementation of service specification is ongoing. Phase two from September will be pathways development and evaluation of new service and December will see the formal launch of the new provision. It was acknowledged that there are financial challenges in terms of the implementation phase.

The point was made that there are currently young people failing to get care due to issues with GP access to services and length of waiting lists and it was therefore queried what is being done to tackle this. It was confirmed that listening events have been held and issues identified by service users are hoped to be avoided under the new service provision. It was acknowledged that waiting times will be based on the clinical need of the child. It was questioned whether families can go out of the area to access services, it was confirmed that this would only be if the required support was not available in Gateshead.

It was questioned whether there would be a period with which to defer full discharge in cases where a child may need re-referring. It was agreed that this information would be sought and Committee informed.

It was pointed out that work is ongoing to become more responsive to special classes of children and young people, such as; LAC, children subject to child protection orders or victims of CSE and youth offenders. It was also noted that previously patient flow between services has not been effective and the new model is aimed at preventing this in the future.

It was questioned how the service will be scrutinised by the Council. It was noted that the Council does not directly commission the CAMHS service, however the 0-19 nursing service supports children and families to prevent them requiring medical services and this will be scrutinised through the Council's OSC process.

A further update is scheduled for Committee in January 2018.

RESOLVED - (i) That the content of the report and comments of the Committee be noted.

- (ii) That an update on the development of a new Children and Adolescent Mental Health Service across Gateshead be received in six months.

F11 OSC REVIEW - CHILDREN ON EDGE OF CARE - SCOPING REPORT

Committee received a report outlining the scope of the review into the support to young people and families with complex needs on the edge of care.

It was reported that the council is working on changing service delivery in order to meet the changing demands for adolescent young people on the edge of care. There is a high level of adolescents on the edge of the care system, with this age group making up 45% of children in need, 23% of children on a child protection plan and 24% of Serious Case Reviews. It was noted that in Gateshead there is a peak in the number of teens in terms of crisis intervention.

It was noted that there are challenges with the adolescent cohort due to the diverse complexity of need within this group. In terms of the national picture, 64% of adolescents face challenges with their mental and emotional health. In addition 3,000 young people per year who enter the care system are looked after for less than eight weeks, it was acknowledged that this turnover is something that needs to be avoided in the future.

The scope of the review was outlined, it was proposed to focus on; key ingredients to successful approaches to support young people and families with complex needs on the edge of care, strengthen service delivery to better meet the needs of local families with multiple needs at risk of becoming looked after. The review will also look at safely reducing the numbers of children coming into care and service design that will support young people on the edge of care.

It was suggested that there should also be a focus on how these children access the mental health system. It was acknowledged that currently plans are tailored around the specific young person, for example that could include treatment services or parental techniques. Outcomes are measured through Strength and Difficulties Questionnaire (SDQ) with the young person which aims to establish if they see improvement.

It was questioned how young people on the edge of care are identified. It was confirmed that professionals are involved in complex families and they are looked at in terms of if they reach the threshold for assessment and if not professionals would look at the lower level need.

RESOLVED - That Committee agreed the scope, process and timescale for the review, as set out in the report.

F12 UPDATE ON FEMALE GENITAL MUTILATION (FGM) AND CHILD SEXUAL EXPLOITATION (CSE)

Following a request at its previous meeting the Committee received a briefing report on the numbers of Female Genital Mutilation (FGM) and Child Sexual Exploitation (CSE) cases in Gateshead.

It was reported that the latest data available relates to 2015/16. In terms of FGM the majority of cases seen in the Newcastle Gateshead CCG area are in adults, from historical procedures carried out, mostly in Northern Africa between the ages of five and nine. Newcastle Gateshead CCG contributes to almost all of the FGM recorded in Cumbria and the North East (the majority in Newcastle).

In relation to CSE, Committee was advised that the Missing Sexually Exploited and Trafficked (MSET) sub group has oversight of cases where there are concerns about sexual exploitation. In 2016/17 47 young people were discussed at MSET, this is an 8.5% increase from the previous year. Work has been undertaken in schools through drama to raise awareness of CSE. In addition joint work has been delivered to ensure all taxi drivers licensed by Gateshead Council are aware of the signs of CSE and how to respond.

RESOLVED - That Committee noted the information provided in the report.

F13 ANNUAL REPORT ON COMPLAINTS AND REPRESENTATIONS - CHILDREN

Committee received the annual report on Children's Services complaints and representations during 2016-2017.

It was reported that the two key themes of complaints were the same as the previous year, around quality of service and staff conduct. During 2016/17, 13 complaints (41%) regarding members of staff were received. Any complaints regarding staff conduct and behaviour are responded to formally, working closely with management.

Committee was advised that there have been a number of low level issues, however frontline staff are experienced at resolving them before they escalate to formal complaints.

It was noted that there was a 14% decrease in formal complaints received compared to the previous year. Although, to date there has been no benchmarking across the region so it is not clear how Gateshead compares, it was agreed this information would be provided to Committee once received. During the year there was one stage two complaint, this is a decrease of 80% on the previous year. There were four Independent Review Panels held during the year, however they were a direct progression of the Stage 2 investigations carried out the previous year.

Five queries were received from young people and LAC through the MOMO (Mind of My Own) app, one was upheld, one resolved and one partially upheld.

It was reported that over the year, 44% of complaints were not upheld, which is a 17% increase on the previous year. 50% of all complaints were partially upheld. The majority of complaints were not resolved within timescale and the Service is considering how they can improve performance in this area.

Service improvements from complaints were outlined in the report, with the main focus of improvement being on better communication. There has been learning around communication in relation to Section 20 orders as complaints were received that this information was unclear and many service users found it difficult to listen when they were at crisis point. Following this, leaflets have been developed so that parents and Section 20 accommodators can be better informed.

It was confirmed that overall there has been a decrease in complaints and an increase in the number of compliments received.

- RESOLVED -
- (i) That the Committee noted the annual report.
 - (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.