

CHILDREN AND YOUNG PEOPLE'S SCRUTINY COMMITTEE

9 OCTOBER 2018

PRESENT

Councillors Miss L. Blackburn (Vice-Chair), J. Dillon, J. Holden, D. Jerrome, A. New, G. Whitham, A.M. Whyte, D. Acton (ex-Officio) and Councillor D. Western (in the Chair).

Mrs S. Khan (Co-opted Member)

In attendance

Cathy Rooney	Acting Corporate Director for Children and Families
Karen Samples	Director Education Standards, Quality and Performance
Glynis Williams	Acting Director of Safeguarding
Helen Gollins	Consultant in Public Health
Sara Barnes	Healthy Young Minds Directorate Manager
Prathiba Chitsabesan	Healthy Young Minds Clinical Director
Peter Forrester	Head of Governance
Alexander Murray	Democratic and Scrutiny Officer

APOLOGIES

Apologies for absence were received from Councillors T. Carey, J. Coupe, J.R. Reilly, and R. Chilton. Apologies were also received from P. Goodstadt (Co-Opted Member).

7. MINUTES

RESOLVED: That the minutes of the meeting held 10 July 2018 be agreed as an accurate record and signed by the Chair.

8. DECLARATIONS OF INTEREST

No additional declarations of interest were made.

9. CHILD PROTECTION PLANS

The Acting Director of Safeguarding went through the presentation that had been circulated with the agenda. The first slide showed that Trafford had 250 (+/- 4%) Child Protection Plans (CPPs) on average. There had been a sharp increase in CPPs during August which had seen the number rise to 275, they had since returned to standard levels. The Committee were told that 6.5% of CPPs had been running for over 2 years which was higher than the national average and the Council's statistical neighbours.

The Acting Director then described the main aims of the service going forward. There was a focus upon increasing the number of early interventions and helping children to step down into lower level support as quickly as possible. She told the

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Committee it was also important that the structure of the service enabled quick decision making to ensure at risk children were moved into care with minimal disruption. Finally, whilst the statutory services needed to be accessible to protect children this had to be balanced so they were only used when necessary.

The Acting Director of Safeguarding told the Committee of the Council's move towards a restorative approach to child protection. A number of improvements had already been made as part of the adoption of this approach. These included a change in the environment in which Child Protection Conferences were held which made them less intimidating for families. There had also been changes in the documentation used in child protection cases so that they were easier to understand and made the Council's expectations clearer.

Another change was the way Independent Reviewing Officers (IROs) looked at cases. Previously IROs had reviewed cases in isolation. Within the new approach they looked at the whole history of the child and their family. When there was recurrence the IRO would look at previous solutions and see whether that support had been removed. The team would then use this data to help monitor the efficacy of commissioned services. The team were also looking at Cheshire East Council's CPP processes as they had a 30% lower re-plan rate than Trafford.

A Member of the Committee welcomed the changes that had been made and the adoption of the restorative approach. The Member then asked why this approach had not been adopted earlier. The Acting Director of Safeguarding told the Committee that the Council had used aspects of this approach before but it had required a shift in perspective to enable the approach to be fully implemented. Previously the system had been the driver of the service whereas the restorative approach was more human centred.

The service now looked at the whole family and worked with them to build resilience through training and developing the family unit. This was in stark contrast to old system which had been paternalistic with officers trying to do as much as they could for vulnerable people rather than teaching them how to do things themselves. The Acting Corporate Director of Children's Services added that Trafford had a track record of being very over protective and the new approach was more appropriate given that the Council were only involved with the majority of families for a short period of time.

A Member asked how the performance data was collected and whether the Committee could see it. The Acting Director of Safeguarding responded that they could provide the data outside of the meeting or at a later meeting of the Committee. The Acting Corporate Director for Children's services said that it would be best to provide an update at the meeting in March in order to allow the changes to bed in.

RESOLVED:

- 1) That the report be noted by the Committee
- 2) That the Committee receive a further update March 2019.

10. HEALTHY YOUNG MINDS

The Healthy Young Minds Clinical Director went through the report which had been submitted to the Committee and highlighted the areas that had changed since the last update to the Health Scrutiny Committee in March 2018. A number of appointments had been made which had increased the team's capacity. The main difficulties for the team were the continued high level of demand and the need to make further appointments. There had been a delay in releasing some of the services annual funding. When a Member of the Committee asked why this funding had not been released they were told that the issue related to the provider who was to receive the funds. The Healthy Young Minds Directorate Manager added that releasing the funds was to be discussed at a meeting on the 15th October.

Another Committee Member enquired why the rate of accepted referrals had increased by 48%. The Healthy Young Minds Clinical Director explained that because the service now followed the Thrive model they had a lower threshold for referral acceptance as they signposted people to services which provided lower level support. This had negatively affected the services statistics as they were involved with a wider range of cases. The service had 10 pathways in total with the earliest point of each pathway being where voluntary services provided low level support. The Thrive model was also being adopted at a Greater Manchester level with funding and support being provided for the early stages of the pathways.

The Healthy Young Minds Directorate Manager noted that the Thrive model had a similar ethos to the restorative approach being used in the Child Protection Plan service. The service was moving towards a resilience building approach working with schools and other services in order to help children to cope with mental health issues. Healthy Young Minds would continue to provide support to children who were in crisis but would also increase the ability of the wider system to deal with children at lower levels to reduce the numbers of children in crisis. The service was also looking at the wider determinants of mental health such as the role a child's environment played in their wellbeing.

The Vice Chair asked what the staffing structure of the service was. The Healthy Young Minds Directorate Manager went through the structure of the team and explained that there was a focus on recruiting younger staff as they had an ageing workforce. The group then discussed issues relating to the retention of staff, the level of staff turnover, and the impact that this had upon children receiving support. It was hoped that these issues would be tackled, in part, through the reduction of peoples' dependence on the service so changes in staff would not have such a large impact.

The Committee asked how referrals were made and how suitable treatment was decided upon. The Healthy Young Minds Directorate Manager said that GPs were the main source of referrals into the service and the referrals received varied in the level of information provided. In order to decide upon treatment they looked at a child's level of need, their ability to function, their age, and their circumstances. Once the service understood a child's situation they implemented support which was best suited to meet that child's needs. The team often got 'push back' from

children's parents as they did not feel they were getting high enough level support or that the Council were not dealing with the child when, in actuality, they were but through a commissioned service. The Healthy Young Minds Clinical Director concluded by informing the Committee that the service had conducted GP direct training on referrals. Despite this they believed it would take a while before GPs understood the new structure of service and understood which was the right part of the service to send their referrals to.

RESOLVED: That the update be noted by the Committee.

11. SEN ATTAINMENT

The Director of Education Standards, Quality, and Performance went through the presentation that had been distributed in advance of the meeting. The Committee were informed that the data for key stage 4 was missing as it had not yet been received. They were assured that this was standard procedure as the data was received initially by schools and then sent to the Council. The key stage 2 data was yet to be verified but all information presented was accurate as it could be.

The Committee were told that the early years' assessments were carried out by teachers and all were reporting a good level of attainment. Early years assessments were measured in a number of areas and if a child did not achieve a good level of attainment they were listed as emerging. In Trafford whilst the attainment of children with Special Educational Needs and Disabilities (SEND) was lower than the national average, the current year had seen a marked improvement compared to the previous cohort. The phonics results showed that by the age they took those assessments SEND children had closed the gap on the national average but they were still not at the same level of attainment as mainstream children.

A member of the Committee asked why Trafford had fallen behind in SEND pupil attainment given that the rest of Trafford Children performed better than the national average. The Director of Education Standards, Quality, and Performance responded that it was difficult to say why SEND children were underperforming at this level as they were being assessed by teachers. Trafford offered mediation training to schools in an attempt to increase consistency in assessment across the borough. Trafford also offered support to schools in helping SEND children to develop and thrive. A deep dive exercise to look into the performance was planned for later on in the year, after the results had been confirmed.

The team were also looking at other local authorities which had better records of SEND attainment to see if there was anything that could be learned from them. The Director of Education Standards, Quality, and Performance stated that whilst educational underperformance was an indicator of an issue SEND children were also lagging behind health and social areas. In light of this, Trafford had decided to take a holistic approach to improve all outcomes for SEND children instead of focusing only upon education.

A Member of the Committee requested that the report following the deep dive exercise be brought to the Committee once completed. The Director of Education

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Standards, Quality, and Performance agreed to bring the report to a later meeting of the Committee.

The Chair asked whether children turned up under prepared for the start of the school year. The Director of Education Standards, Quality, and Performance responded that the service was looking at trends of school preparedness across areas so that they could focus support where it was needed.

The Vice Chair asked how many children had not been included within the stats as they had been dissatisfied. The Director of Education Standards, Quality, and Performance did not have the figures to hand but said that she would send through the figures to the Committee outside of the meeting.

The Key stage one statistics were broken down by reading, writing, maths and a combination of those three scores. The data showed a varied picture for SEND pupils with them out performing the national average in some areas and falling below the national average in others. The Committee were told that following the Rochford review the way the way that the P scales were measured was to change (The P Scale was the measurement of performance for children who are below standard level of attainments).

A Committee Member asked whether the reason for the improvement in attainment compared with previous years was known. The Director of Education Standards, Quality, and Performance stated that, whilst it could not be known for certain, it was believed that the improvements were due to teachers and schools getting used to the new curriculum and tests. The Council had also been focused upon improving the development of SEND pupils.

The Chair asked whether teachers were identifying children with SEND sooner. The Director of Education Standards, Quality, and Performance did feel that teachers were becoming better at identifying SEND children at an earlier age, which was in part due to the increased focus upon early identification of SEND children within the Borough. The Council had put a lot of resources to integrate with schools through SENCO officers and the quality of assessment of children had improved greatly over time.

By Key stage 2, SEND children were performing above the national average in all areas apart from statemented children for reading. The Director of Education Standards, Quality, and Performance commented that it was presumed this underperformance was due to the format of the assessment. This was because the reading assessment was a long test, especially with extended time for SEND children, which could be tiring for children. The Committee were told that children were also evaluated upon their level of progress and all SEND children in Trafford were making better progress than the national average across the board.

RESOLVED:

- 1) That the update be noted.
- 2) That a report on the underperformance of SEND children during early years be brought to the committee once completed.

- 3) That the Committee be supplied with details of the number of children dissatisfied from the statistics outside of the meeting.

12. ACTIVITY AND FACILITIES WITHIN TRAFFORD

The Consultant in Public Health went through the presentation that had been distributed with the agenda. The presentation contained statistics of key demographics of children and young people within Trafford. The statistics predicted that Trafford would have a large increase in the number of teenagers by 2031 which would present a number of challenges as that was an age group which required a larger amount of help and support.

The Consultant in Public Health showed a list of all the indicators for comparing Trafford's health to other areas nationally. The majority of the indicators were green or amber which showed that Trafford was either in line with or better than the National average. The Committee were warned that whilst Trafford may be performing well against the national average as a whole there were large inequalities in the area which masked some very poor health outcomes for residents. For example children in the most deprived areas of the borough were twice as likely to be obese as children in the most affluent areas. The Consultant in Public Health added that performing at national levels for some indicators was not very positive as the UK had some of the worst outcomes in Europe.

The main areas of concern for Trafford were the number of children in care, mental health among young men, and alcohol abuse. Hospital admissions for babies and early years were above the national average and continuing to rise. The Consultant in Public health told the Committee that they were unaware of why these admissions were increasing. There were also early year issues around dental health and tooth decay. There had been a slight increase in the number of child deaths in 2013 which had a large impact on the data and made it look as though this had increased a lot.

School aged children and young people in the borough had low levels of physical activity and the Trafford Sports and Physical activity partnership were attempting to tackle this issue through a range of initiatives. There were a number of activities available within Trafford through leisure trusts and volunteer organisations all of which were listed upon the Trafford Family Information service website.

Following the presentation the Committee were given the opportunity to ask questions. A Co-Opted Member asked what the regulations were surrounding Shisha bars in the area. The Consultant in Public Health responded that she was not aware of the regulations but that they would contact regulatory services and pass on their response.

The Committee then asked several other questions covering a number areas including; the cost of activities, best practice in increasing activity, dental issues, social prescribing, and walking to school initiatives. The Consultant in Public Health provided the Committee with detailed responses to their questions and the Committee were satisfied by the answers received.

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RESOLVED:

- 1) That the update be noted by the Committee.
- 2) That the Consultant in Public Health is to provide the Committee with information relating to Shisha Bar regulation in Trafford.

13. COMMITTEE WORK PROGRAMME

The Chair updated the Committee on the progress of the SEND task and finish group. Two meetings had been held and the group had requested and received information from the Acting Corporate Director for Children and Families and the Director of Education Standards, Quality, and Performance. The second meeting had been held on the 2 October and there were a number of actions outstanding for both Members and Officers. The Group planned to arrange their third meeting prior to the next meeting of the Committee.

The Chair then reminded the Committee that a follow up was required on the recommendations of the Closing the Gap report conducted by the Scrutiny Committee in 2016/17. The Chair requested that this be added as the Education item for the next meeting in January 2019. A Member of the Committee requested that early years and school readiness be added to the work programme. Another Member of the Committee requested that an update focused around childhood obesity be added to the work programme; as childhood obesity was an issue within the borough and the Member was aware of good examples across the country which the Council could look to replicate.

The Acting Corporate Director for Children and Families suggested that the Social Care item at the next meeting be out of borough placements as there had been a lot of interest expressed in this area and it represented a significant area of spend for the Council. They also suggested that the health item for the next meeting could be to look at the Joint Commissioning Units Commissioning Intentions for Children. Finally the Acting Corporate Director for Children and Families suggested that the partnership item be the Family Information Service as they enabled residents to access all services within the borough and had contact with all providers in the area.

Following discussions about the items suggested the Committee agreed that all the suggestions be added to the work programme for the year.

RESOLVED: That all the topics put forward by Committee Members and Officers be added to the 2018/19 Work Programme.

The meeting commenced at 6.30 pm and finished at 8.12 pm