

# **CHILDREN'S HEALTH, SOCIAL CARE AND EDUCATION OVERVIEW AND SCRUTINY COMMITTEE**

**WEDNESDAY, 3 JULY 2019**

PRESENT:- Councillors Barbara Parry (Chair), Alan Bishop, Matthew Courtliff, Fay Howard, Oladapo Ibitoye, Nick Martin, Paul, Carol Shelley and Nadine Watts, Spencer Allen (Swindon Association of Primary Headteachers), Alison Paul (Swindon Association of Special School Headteachers) and Jacqui Watt (Swindon SEND Families Voice).

Apologies for absence were received from Councillors Nick Martin and Mary Martin and Liz Townend (Church of England Bristol Diocese).

## **1. Appointment of Vice Chair**

It was noted that Councillor Matthew Courtliff had been appointed Vice-Chair of this Committee at the meeting of the Annual Council held on 17<sup>th</sup> May 2019 (Council Minute 13, 2019/20 refers).

## **2. Declarations of Interest**

The Chair reminded Members of the need to declare any known interests in any matters to be considered at the meeting.

Councillor Barbara Parry made a personal and non-prejudicial declaration of interest in respect of agenda items 9 (Implementation of Early Help Strategy), 10 (SEND Written Statement of Action) and 11 (Children's Performance Summary 18/19 Final Outturn Position) as she worked for Ridgeway School.

Councillor Carol Shelley made a personal and non-prejudicial declaration of interest in in respect of agenda items 9 (Implementation of Early Help Strategy), 10 (SEND Written Statement of Action) and 11 (Children's Performance Summary 18/19 Final Outturn Position) in her capacity as a Governor of Swindon Academy.

Councillor Matthew Courtliff made a personal and non-prejudicial declaration of interest in respect of agenda items 9 (Implementation of Early Help Strategy), 10 (SEND Written Statement of Action) and 11 (Children's Performance Summary 18/19 Final Outturn Position) as his wife worked at Kingsdown School.

Councillor Basil Solomon made a personal and non-prejudicial declaration of interest in respect of agenda items 9 (Implementation of Early Help Strategy), 10 (SEND Written Statement of Action) and 11 (Children's Performance Summary 18/19 Final Outturn Position) capacity in his capacity as a part time teacher.

## **3. Public Question Time**

No public questions were received before or during the meeting.

4.

## **Minutes**

Resolved – That the minutes of the meeting held 13<sup>th</sup> March 2019 be confirmed and signed as a correct record.

5.

### **Appointment of co-optees**

The Committee considered a report of the Chief Legal Officer regarding the appointment of co-optees to the Children's Health, Social Care and Education Overview and Scrutiny Committee for the Municipal Year 2019/20.

Resolved - (1) That this Committee confirms the appointment of

(a) Liz Townend as the Church of England Bristol Diocese representative.

(2) That it be noted that a single nomination of a voting co-opted Parent Governor Representative was awaited.

(3) That it be noted that a single nomination of a voting co-opted representative was awaited from the Roman Catholic Clifton Church Diocese.

(4) That the appointment of the following non-voting representatives be confirmed:

(a) Alison Paul (Swindon Association of Special School Headteachers).

(b) Spencer Allen (Swindon Association of Primary Headteachers).

(c) Steve Colledge (Swindon Association of Secondary Headteachers).

(d) Steve Henderson (Equalities Advisory Forum).

(e) Jacqui Watt (Swindon SEND Families Voice).

(f) Carol Willis (Healthwatch).

(5) That it be noted that two children representatives (and two deputies) were being sought in order to allow children to participate in decisions affecting young people.

(6) That, further to (2), (3) and (5) above, the Chair be authorised to approve nominations received.

### **6. NHS Swindon Clinical Commissioning Group - Children's Services Review**

The Director of Nursing and Transformation, Swindon Clinical Commissioning Group (CCG), submitted a report setting out information in relation to the planning and provision of children's health and social care within the Borough. In presenting her report the Director of Nursing and Transformation drew Members' attention to (i) the Mental Health Trailblazer Project, (ii) the role of Mental Health Support Teams and potential changes to these teams moving forward, (iii) the redesign of the Autism Spectrum Disorder Pathway, and (iv) current waiting times for services. Following her presentation of the report the Director of Nursing and Transformation responded to comments and issues raised by Members in respect of:

- The work of the Trailblazer Project in Swindon to promote better mental health support to children in Swindon within the participating schools, (approximately 66% of schools within the Borough).
- The criteria for schools joining the Trailblazer Scheme and support that might be offered by the Council and CCG to those schools falling outside the Trailblazer Scheme.
- Additional training for staff within Family Services to offer more help for children with lower level mental health needs and support for their families.
- The reduction in waiting times for children and young people for receiving

assessments for autism, the development of the new Autism Spectrum Disorder pathway and employment of an additional community paediatrician.

- Work by the CCG to validate referrals to the Community Paediatric Service and reduce waiting times for this service. It was hoped evidence on improved outcomes would be seen by December 2020.
- The triaging of referrals to the Community Paediatric Service and assurances that young people being removed from the Community Paediatric Service waiting list would continue to receive appropriate help or referrals to alternative services.
- The reasons for young people being overdue appointments and remedial actions to rectify this (and ensure there was no clinical risk whilst waiting), including additional and weekend clinics and ensuring appropriate communication was maintained with families waiting for appointments.
- The process for families to escalate service delivery should there be an adverse impact on the child resulting from the wait for treatment.
- Work being undertaken with Imperial College London to update the current outpatient appointments service.
- The future scrutiny by this Committee of autism waiting list times and the Mental Health Trailblazer scheme.
- Access by Children Looked After and Care Leavers to Mental Health Services.

Resolved – That the report be noted.

## **7. Health Visiting Service**

The Principal Officer, Health and Wellbeing, submitted an update on key issues relating to Swindon Borough Council's Health Visiting Service including (i) the delivery of Swindon Health Visitor Services, (ii) the level of need for children under 5 years of age, (iii) the delivery of the Healthy Child Programme, (iv) performance against the Healthy Child Programme targets and the delivery risk assessments, (v) safeguarding workloads, (vi) Baby Hubs and the Speech and Language Hub Pilot, (vii) early help assessments and packages of care, (viii) staffing issues and skillsets, and (ix) the wider locality team. Following her presentation the Principal Officer, Health and Wellbeing responded to comments and scrutiny from Members in respect of:

- How information on the location of Swindon's four early help hubs, and support they can provide, could be accessed by members of the public through GPs, the Swindon Local Offer, parenting apps and social media.
- The rationale for reducing 16 traditional baby clinics in 2018 to the current four early help hubs and whether this adversely affected the number of families accessing the service.
- The on-going evaluation process for checking the effectiveness of service delivery and activities at the early help hubs that had been positively received by users.
- The focus of Health Visitors on vulnerable families with babies that required additional support or were deemed to be vulnerable.
- Issues with the recruitment of Health Visitors locally given the problems faced nationwide; how this affected service delivery, the current process of recruiting trainee health visitors and work to retain current Health Visitor staff. It was noted that work was on-going with Human Resources to ensure

Swindon's offer was competitive and to allow Health Visitors to concentrate directly on their work.

- How hard to reach families who would not attend baby clinics were identified and provided with services, including the Healthy Child Programme with priority given to new birth visits and 6-8 week visits which allowed Health Visitors to assess the child's health, how families were coping with a new child, whether additional support might be required.
- How the 7.9% of families not currently seen were assessed, it being noted that information on vulnerable families would be received from a number of partners as part of multi-agency teams.
- Additional support such as intensive visit programmes and parenting programmes offered to support young families who were identified as vulnerable by partner organisations.
- The role of the mid-wife in advising the Health Visitor Service of new-born babies and of potentially vulnerable parents and the sharing of information with statutory partners which would highlight issues such as safeguarding concerns or a history of domestic violence in households.
- Work with adult services if there were concerns such as mental health or substance abuse history within new families.
- Work to identify skill mixes and new ways of working that allow other nurses to help deliver the Early Help Programme; training to upskill Early Health Practitioners who work closely with the Health Visitor Service in the delivery some 2½ year checks which were important for school readiness. It was noted that this resources was used in support of Health Visitors but that work by Health Visitors was prioritised.
- The benefits of Health Visitors attending nurseries although it was noted that without parents being present 2½ year checks couldn't be undertaken. It was also noted that professionals in nurseries were a good safeguard for identifying potential issues with children or families.
- The pathways and procedures for dealing with issues identified and which were largely based upon national standards.
- The funding of three trainee health visitor posts by Health Education England from September 2019 and the Council's work to identify how it can employ additional trainees.
- Concerns that a child potentially might not be seen by a health visitor between his/her initial visit and their 2½ year visit and whether this might lead to mental health or other issues developing in some children. It was noted that families identified by Health Visitors as requiring support would receive additional visits as part of an early help package.
- Concern that the percentage of 2-2½ year checks had fallen despite this being identified as a priority area; it was noted that this was an area that Early Health Practitioners would assist with and that this should increase the number of visits undertaken.
- The role of the Health Visitor Service in preparing child protection plans for vulnerable families or for children on the risk register and in undertaking safeguarding visits.
- That 12 month reviews were targeted as a priority. These visits were based upon Safeguarding Matrix when a family was identified as vulnerable.
- The mechanism for identifying families where English was a second language in order that proactive intervention could be put into place in the form of a one off session delivered by the Early Years Family Practitioners.

Resolved - (1) That the report be noted.

(2) That the Principal Officer, Health and Wellbeing be requested to submit a report to the Committee in January 2020 updating Members in respect of:

- (a) the percentage of 2-2½ year checks that have been undertaken;
- (b) an indication of how Swindon compares with its statistical neighbours in respect of the percentage of 2-2½ year checks undertaken by Health Visitors;
- (c) the recruitment of Health Visitors and trainee Health Visitors;
- (d) a breakdown of (i) the numbers of families in Swindon and (ii) the number of vulnerable families receiving 12 month reviews by Health Visitors.
- (e) a comparison of the Health Visitor Budget for the Financial Years 2018/19 and 2019/20; and
- (f) the 0-5 pathway with an explanation of the points at which other pathways might be accessed or a pathway risk assessment being undertaken.

## **8. Implementation of Early Help Strategy**

The Service Manager, Early Help Service, submitted a report setting out progress on the implementation of the Early Help Strategy, the new service structure and the impact and quality of work in the Early Help Hub. The report set out how the work progressed the Council's Priorities and Pledges and in particular with reference to Priority 4 and Pledges 21 and 22. The Service Manager highlighted (i) research into the effectiveness of early intervention, (ii) the work of the Early Help Hub, (iii) assessments and allocation of support, (iv) the co-ordination of early help work, (v) audits and independent oversight of work undertaken, (vi) partnership working, (vii) feedback received from partners and service users, (viii) a breakdown of the work undertaken during 2018/19 by the Family Service, (ix) early support and intervention to children young people and families, including support for children on the edge of care and adolescents at risk, (x) the current staffing structure, (xi) the work of the troubled families programme, and (xii) Governance arrangements. Following her presentation the Service Manager, Early Help Service, responded to Member inspection of the following:

- The refreshed Early Help Strategy and evidence and feedback in respect of the positive impact of the Early Help Hub on service delivery.
- The potential development of a Parenting Hub in Swindon to support families and parents through the use of evidence based parenting programmes developed by fully qualified practitioners including nonviolent resistance training (which had been very positively received by parents in areas using it) to support parents with children with challenging behaviour. This would augment the current Family Links and Managing Challenging Behaviour Programmes.
- On-going training for staff, including new staff joining the team.
- The successful outcome in achieving one year funding, in partnership with Gloucestershire Council (to share learning), for Early Outcomes supporting babies aged 0-13 months in speech, language and communication and to increase the number of stay and play groups, including during the summer holidays.
- The importance of identifying and working with existing stay and play groups and engaging community resources to make the system more sustainable.
- The importance of having a number of programmes available for use in order to tailor services to families more effectively.

- The Honey Bees toddler group supporting children with special needs which would be running throughout August.
- Recognising that because early help came prior to statutory intervention it required the family to agree to participate and engage with the service, although referrals could be received from other agencies with the consent of the parent.
- Work to de-stigmatise parenting programmes and to make them more universal rather than targeted.
- Feedback from families and how this has been incorporated to improve service delivery.
- Work to encourage both parents to attend sessions, especially when it related to challenging behaviour, to provide a consistent parental approach to their child.
- An on-going review of data to ensure services were as robust as possible across ages, communities, gender, and ethnicity.

Resolved – (1) That the report and progress being made to support children, young people and families be noted.

(2) That the Director of Nursing and Transformation, Swindon Clinical Commissioning Group, be requested to forward to Members of the Committee a breakdown of money saved under the Troubled Families Programme.

## **9. SEND Written Statement of Action**

The Head of Education submitted a report setting out details of the Written Statement of Action produced by the Council and the Swindon Clinical Commissioning Group to address the outcomes of the OFSTED and Care Quality Commission's joint Local Area Inspection of SEND (Special Education Needs and Disabilities). The Head of Education introduced the report drawing Members' attention to the following issues (i) that the inspection incorporated SEND education and health and social care, (ii) the Written Statement of Action, covering eight key areas identified by inspectors following the inspection had been sent to OFSTED, (iii) that the Written Statement of Action had been positively received by OFSTED whose letter was appended to the report, and (iv) the key actions set out within the report, including Governance, and the importance of Member oversight and challenge in respect of progressing those actions. Following his presentation the Head of Education responded questions from Members in respect of:

- The scrutiny of progress against Inspection Report actions and the reporting of outcomes to this Committee and the Special Needs Education Board of the detailed and complex plan requiring delivery through a commitment across the whole of Swindon's partnership.
- How the Council and CCG had progressed work to remedy the significant area of weakness identified in Swindon's local area practice; and in particular whether there was sufficient staffing resources to progress the detailed plan of action.
- Resourcing within the SEND team following the ending of the transitional grant to assist Local Authorities introduce the new legislation in 2014.
- The allocation of additional resources to facilitate the team re-organisation to improve service provision, the digitalising of the SEND system including the Local Offer, the processing of the high number of assessments received and demand for specialist placements.

- The digitalisation and upgrading of Information Technology to make current SEND systems more efficient.
- The appointment of a Designated Clinical Officer and Designated Medical Officer by the CCG to offer more focused medical advice.
- Training undertaken since the inspection by both social care and health staff and how this would be refreshed for existing staff and delivered to new staff.
- The outcomes of the conference, chaired by a head teacher, aimed at reducing exclusions and absence from school and how lessons would be disseminated within the Council and CCG with greater collaboration with schools to obtain more consistency and a more inclusive culture with earlier intervention.
- Feedback received from NHS England and the Department of Education on the first three months of the delivery and monitoring of the plan.
- Plans in place for delivery of for the plan within timescales should this be require the prioritisation of some of its elements.
- Mechanisms available for parents and young people to report their experiences and how this might inform the improvement plan.
- Current staffing levels to deliver the improvement plan, the use of agency staff and the qualities that agency staff currently provide.
- Ownership of the improvement plan through named officers.
- The need to ensure any child with special educational needs had timely access to medical services, advice and support through their GP or from additional children's clinics to ensure it did not adversely affect their education.

Resolved - (1) That the Written Statement of Action be noted.

(2) That this Committee receive an update on progress against the eight priorities within the Written Statement of Action following its consideration by the SEND Board.

## **10. Children's Performance Summary 18/19 Final Outturn Position**

The Director of Children's Social Care and the Business Improvement Lead submitted a joint report summarising performance in Children's Services based upon the final outturn position for 2018/19. In introducing the report the Director of Children's Social Care drew Members' attention to (i) links to the Council's Priorities and Pledges and the Children's Services Improvement Plan, (ii) key performance headlines in respect of Early Help, (iii) the Healthy Child Programme, (iv) contacts received during the Municipal Year, (v) social care referrals and statutory assessments, (e) children requiring a social worker, (vi) child protection, (vii) serious case reviews, (viii) Children Looked After, (ix) permanency for Children Looked After, (x) the Health of Children Looked After, (xi) the Education of Children Looked After, (xii) Care Leavers, (xiii) Youth Offending, (xiv) SEND, and (xv) elective home education, Following their presentation the Director of Children's Social Care and the Business Improvement Lead responded to Members questions and scrutiny regarding:

- The matrix of forums, including, but no limited to, the Health and Wellbeing Board, Local Safeguarding Partnership and Corporate Parenting Advisory Board, that contributed to the oversight and scrutiny of the work identified within the report.
- The role of the Council's statutory services in engaging with families that

require safeguarding intervention and that are not accessing services elsewhere, including assessments and agreed thresholds.

- The type of interventions and multi-agency plans that might be made under statutory intervention and how these would be implemented.
- The reasons for the reduction in the number of Child Protection Orders in Swindon with Children Looked After numbers remaining stable.
- The range of services provided through the Thames Valley Regional Adoption Agency and options for permanent placements through adoption or special guardianship orders together with support offered following such placements.
- The role of senior management within Children's Services in promoting a stable environment for safeguarding and in stabilising the social worker team to provide Children Looked After with more stable social worker support.
- Work to recruit and retain both permanent and agency social workers, including a series of open days for social workers across the country, commencing in the autumn, and a second launch of the Council's Academy of Social Work Practice and Leadership. The Council would also be more active in going into colleges and schools in Swindon to highlight social work as a career.
- How the Council compared to national statistics in respect of the number of serious case reviews undertaken together with lessons learnt from previous serious case reviews and subsequent training arising.
- The role of teachers in safeguarding children, their procedures and the process for involving the Council.
- Reasons for Swindon's greater use of Child Protection Orders to safeguard children, when compared to national statistics, and current practice in operation regarding the use of Child Protection Orders.
- Support for children with either attachment or behavioural problems to reduce the risk of school exclusion.
- Current support offered to Care Leavers who were Not in Employment, Education or Training and additional assistance might be available.
- A breakdown of the reasons for the nineteen Care Leavers classified as not being in suitable accommodation and work by the Council's Housing Department to provide more suitable accommodation where this was possible.

Resolved – (1) That the report on key performance data in relation to Children's Early Help and Social Care Services be noted.

(2) That progress against the Children's Services Improvement Plan be noted.

(3) That an update of Serious Case Reviews be presented to the Committee at an appropriate time following the conclusion of a Review.

(4) That details in respect of the number of children in home education and the number of cases where this is not parental choice, be forwarded to Committee Members for information.

(5) That the Corporate Director Children's Services be requested to submit a report to a future meeting of the Committee setting out the options and opportunities available to assist Care Leavers who are classified as Not in Employment, Education or Training.

## **11.**

### **Work Programme**

The Committee considered a report by the Chief Legal Officer on the results of the



work programme consultation and the suggested priorities for the work for the Municipal Year, 2019/20.

Resolved – (1) That the report be noted.

(2) That the work programme be updated to include items recommended by the Committee.