# Children, Education and Skills Sub-committee

# 22 January 2018

Present: Councillor M Thirlaway (Chair – part of meeting)

Councillor P Oliver (Chair – part of meeting)

Councillors A Austin, J Cassidy, K Clark, Janet Hunter,

A Newman, M Reynolds, A Waggott-Fairley and

F Weetman.

Rev. M Vine Church Representative

# CES40/01/18 Apologies

[Councillor P Oliver in the Chair]

Apologies for absence were received from Councillor M Thirlaway, who would arrive at the meeting late due to his attendance at a Holocaust Memorial event in his ward. The subcommittee was informed that until his arrival the Deputy Chair, Councillor P Oliver, would chair the meeting.

Apologies for absence were received from Councillor M A Green, Mr G O'Hanlon, church representative and Mrs M Ord, parent governor representative.

#### CES41/01/18 Substitute Members

Pursuant to the Council's Constitution the appointment of the following substitute member was reported:

Councillor Janet Hunter for Councillor M A Green.

#### CES42/01/18 Declarations of Interest

There were no declarations of interest or dispensations reported.

#### CES43/01/18 Minutes

**Resolved** that the minutes of the previous meeting held on 20 November 2017 be confirmed as a correct record and signed by the Chair.

## CES44/01/18 Eating Disorder Service

The sub-committee received a report on the services provided by North Tyneside CAMHS (Child and Adolescent Mental Health Service) for children and adolescents presenting with eating disorders in North Tyneside.

Dr. Elisa Gatiss Clinical Psychologist, Dr. Julie Owens Consultant Child and Adolescent Psychiatrist and Clinical Lead and Janet Arris, Commissioning Manager NHS North

Tyneside Clinical Commissioning Group (CCG) attended the meeting to present the report.

The sub-committee was informed that eating disorders were serious mental health problems which could have severe psychological, physical and social consequences. Children and young people with eating disorders often had other mental health problems (for example anxiety or depression), which also need to be treated in order to get the best outcomes, and it was vital that children and young people with eating disorders, and their families and carers, could access effective help quickly. Offering evidence-based, high-quality care and support as soon as possible could improve recovery rates, lead to fewer relapses and reduce the need for inpatient admissions.

In 2015, due to concerns about the provision of services for children and young people presenting with eating disorders across the county, NHS England published "Access and Waiting Time Standard for Children and Young People with Eating Disorders". This guidance stated that treatment should start within a maximum of 4 weeks from first contact with a designated healthcare professional for routine and within 1 week for urgent cases. NHS England, clinical commissioning groups (CCGs), local authorities, education providers and other eating disorder services (including adult mental health) should work in partnership to improve outcomes for children and young people with eating disorders and support their transition between services. This was an effective way to increase capacity and share resources to deliver better care.

The report provided information on the management of young people presenting with eating disorders in North Tyneside; the specialist eating disorder team in CAMHS; what other services/pathways were commissioned by North Tyneside CCG, including EDICT (Eating Disorder Intensive Community Treatment) from Northumberland Tyne and Wear Mental Health Trust; inpatient care; and data which showed the number of referrals to the team, the team's caseload, the number of cases seen and appointments offered and the average waiting times for referral to assessment from December 2016 to November 2017.

The sub-committee was informed that there were no specialist eating disorder beds in Northumbria, with the nearest being in Middlesbrough and the next option a private unit near Edinburgh. Currently the team averaged seeing young people reporting with Anorexia in under a week (0.6 weeks) and those with other disorders being seen under two weeks. The CAMHS specialist eating disorder team consisted of 1.4 whole time equivalent members of the CAMHS staffing, which included time from psychiatrists, clinical psychologist and nursing staff. All the members of the eating disorders team had received specialist training in eating disorders and were able to provide evidence based treatment. The team met weekly to discuss new referrals as well as open cases and team development. Recently a paediatric dietician has joined the team for one session a week.

Over the last 4 years the clinicians team have accessed a range of training opportunities including Maudsley training of family based treatment for anorexia nervosa, IAPT (Improving Access to Psychological Therapies) systemic family therapy training for eating disorders and, more recently, eight days of national training that has been rolled out across the country funded by NHS England.

Members sought clarification on the availability of specialist and emergency beds at the Royal Victoria Infirmary (RVI) in Newcastle and why the nearest eating disorder specific beds were in Middlesborough and expected to cover such a large area.

In response it was confirmed that NHS England had the responsibility for commissioning eating disorder beds, it was not something the CCG could do and it was NHS England that had decided where the beds should be located for each region; a review of this provision

was being undertaken to assess whether all the specialist beds nationally were located in the right place but it was not expected that this would lead to more beds closer to the borough. The sub-committee was assured that the CCG could assist families in travel and accommodation costs if their child was admitted to one of the specialist beds. It was also clarified that a number of beds at the RVI were for psychological patients with physical complications; there were no psychological beds available.

It was reiterated that all the evidence indicated that people with eating disorders do better if they can stay at home and the team worked very hard to keep young people in their homes; only the most complicated cases become inpatients. On average North Tyneside referred 4-5 young people a year to the specialist centre; unusually currently two young people were waiting for beds.

In response to a question regarding the reported national trend of an increase in eating disorder in young people; the sub-committee was informed that the trend in North Tyneside had remained steady and was low.

The Chair thanked Dr. Gatiss, Dr. Owens and Ms Arris for their attendance at the meeting.

It was **agreed** to note the information provided on the services provided by North Tyneside Child and Adolescent Mental Health Service for children and adolescents presenting with eating disorders in North Tyneside.

### CES45/01/18 Children and Young People's Plan 2014-18

[Councillor M Thirlaway in the Chair]

The sub-committee received a mid-year report on the delivery of the Children and Young People's Plan. The Children and Young People's Plan provided the strategic framework for the integrated planning, commissioning and delivery of children's services in order to improve the lives of children and young people in the borough. The Plan was produced and owned by the Children, Young People and Learning Partnership. The Plan also served as the borough's Child Poverty Strategy, setting out how partners would work together to address the underlying causes of deprivation.

The Plan's priorities were aligned with the 'Our North Tyneside Plan', the Joint Health and Wellbeing Strategy and the Safer North Tyneside Plan and set out three priorities and associated outcomes, which were:

### 1. Ready for School

- a) A healthy early childhood.
- b) Children are ready to start school.

### 2. Ready for Work and Life

- a) Narrow the gap in educational outcomes.
- b) Ready for employment.

### 3. Safe, Supported and Cared For

- a) The most vulnerable children and young people are protected.
- b) Improved outcomes for looked after children.
- c) The right support for children and young people with disabilities and additional needs.

The Policy, Performance and Research Manager attended the meeting to present the report and answer any questions.

The sub-committee was informed that for the fifth year in a row, there had been an increase in the number of children who were 'ready for school'. This overall success was further supported by a reduction in the gap, linked to deprivation, for children achieving the expected level at Foundation Stage. This gap had been reduced by all children improving but those on Free School Meals improving at a faster rate. There had been a reduction in the number of young people who are not in education, employment or training over the lifetime of the Plan. In addition there had also been a reduction in the number of 18-24 year olds who were claiming Job Seekers Allowance. This was part of a wider reduction in the number of people claiming unemployment benefits, which had reduced from 4.8% in 2012/13 to 2.7% in 2016/17. In addition, young people were proceeding to a positive destination at an increasing rate. 88% of young people progressed to Key Stage 5 (A level) and of those, 90% progressed into a positive destination after Key Stage 5.

The Children and Young People's Plan had a four year cycle and was about to be refreshed with the development being discussed at the next Children, Young People and Learning Partnership meeting in March. The Authority's Our North Tyneside Plan was in the process of being renewed and it was anticipated that going forward the Children and Young People's Plan would reflect the priorities for children and young people in the Our North Tyneside Plan.

Members requested information on the attainment rates of children with SEND in Maths and English and the numbers who then went into further education. The Head of Health, Education, Care and Safeguarding agreed to provide the information and also explained that a peer review of SEND Services had recently been undertaken and that this information could also be shared with the sub-committee. The attainment gap between disadvantaged pupils and their peers had widened in the last year but due to changes in the methodology, mainly curriculum and assessment changes, direct comparison was impossible. The service was discussing the issue across the region and was focused on how to support those disadvantaged pupils through the difficulties and challenges of the new assessments.

A Member raised concern that the childhood obesity rate was the same at Reception and Year 6 and remained at 25%. The specific measures aimed at reducing the number of obese children was explained to the sub-committee, including a targeted approach to the whole family instead of an individual child in a family. It was noted that incorrect figures had been provided in the table for Year 6 children and the correct figures would be provided after the meeting.

**Agreed** to (1) note the information on the mid-year progress of the delivery of the Children and Young People's Plan 2014-18; and

(2) that the additional information requested above be provided and circulated to the sub-committee.

### CES46/01/18 Ofsted Inspection Update

In July 2017 the sub-committee received the North Tyneside Inspection of Services for children in need of help and protection; children looked after; and care leavers and the Review of the Effectiveness of the Local Safeguarding Children Board Report, which had been published by Ofsted on 13 June 2017. Ofsted judged the overall effectiveness of children's services in North Tyneside to be 'Good', placing the Authority within the top

performing Children's Services within the country. Ofsted defined this grading as being achieved when inspectors find work of good quality, with some outstanding elements and which was delivering measurably improved outcomes (previous minute CES13/07/17).

Ofsted made seven formal recommendations to the Authority about areas for development. All areas were known to officers and improvement work was on-going at the point of inspection. The Authority had been required to provide a Post Inspection Action Plan relating to the recommendations for approval by the Secretary of State and Her Majesty's Chief Inspector and did so within the required timescale on 19 September 2017.

The formally identified seven recommended areas for development were:

- 1. Ensure that assessments are regularly updated to reflect the changing needs of children and that they fully consider children's identities, contingencies and research.
- 2. Ensure that support to children who are privately fostered is timely, managed well and effectively meets the needs of children.
- 3. Improve the timeliness with which designated officers complete investigations.
- 4. Improve the oversight of IRO's (Independent Review Officers) of the progress of plans between child protection conferences and between children looked after reviews, and evidence this on the child's records.
- 5. Ensure that life story work and later life letters are of consistently good quality and completed in a timely way to ensure that children and their adopters have a clear understanding of a child's history in preparation for placement and for later life understanding.
- 6. Ensure that supervision for all staff is consistently of good quality because it is reflective, directive, regular and well recorded.
- 7. Ensure that actions identified as a result of audits are specific and measurable and have timescales.

Jacqui Old, the Head of Health, Education, Care and Safeguarding as the Director of Children's Services, accompanied by Nik Flavell, senior manager for Quality Assurance, attended the meeting to present to the sub-committee progress achieved in relation to the twenty three identified actions to address the seven recommendations and to identify areas to progress during the next period.

The sub-committee was informed that eleven of the twenty three actions had been successfully completed; of the remaining twelve, five were dependent upon the implementation of the new Case Management System (Liquid Logic LCS) which was scheduled to 'go live' within the next quarter. One action, relating to use of a new post within Children's Social Care to progress work, had been discontinued due to a change in workforce planning with the responsibilities for the work passing to another officer. The final six were all work in progress and would be delivered in the next quarter. A number of the training elements had needed to be organised in phases to take into account the implementation of Signs of Safety and Liquid Logic and for the processes and methods to be designed and introduced, for example in the Life Story and Life Letters work it was important to ensure the work undertaken would produce the results needed consistently.

Members sought clarification on the deletion of the Permanency Champion role; which

software add-ons to Liquid Logic had been purchased and the changes as a result of the creation of the MASH (multi-agency safeguarding hub).

The sub-committee was also informed that the inspection framework for children's services had changed again and that the new process was based on a more pro-active approach which would include an 'annual conversation' with the Director of Children's Services and a no notification focussed visit of two days at some point over the next eighteen months.

The Head of Health, Education, Care and Safeguarding stated that whilst the Action Plan provided a focus to improve, the service was not complacent and had ambition to deliver better outcomes for the children of the borough and this was an opportunity to invest and support the staff to ensure that this could be achieved and maintained. The service was also sighted on multi agency working, particularly in relation to children and domestic violence and revisiting child sexual exploitation to ensure processes across all agencies were as robust as they needed to be.

It was **agreed** to note and welcome the progress made in relation to the Action Plan and the steps to be taken to ensure progress during the next three month period.

## CES47/01/18 Work Programme 2017/18 update

At its meeting on 20 November 2017 the sub-committee was provided with an update on its work programme and the progress of the in-depth investigation into the transition process for children with disabilities to adult services (previous minute CES39/11/17).

Since that meeting further changes to the work programme had been agreed by the Chair and Deputy Chair and the sub-committee received a report which detailed the changes and the reasons for the changes for its approval.

#### These included that:

- a) the report of the Transition Sub Group would now be submitted to the February meeting to allow the members of the public who had contributed to the work of the sub group time to read the report and make any comments;
- b) a report on the Narrowing the Gap work stream, to include information on Pupil Premium allocation, spend and monitoring be added to the work programme and submitted to the 19 March 2018 meeting:
- c) the topic of Pupil Premium to be submitted as a suggested topic for in-depth investigation to be agreed by the new membership of the sub-committee at it first meeting of the 2018/19 municipal year in summer 2018; and that
- d) a report on the Keeping Children and Young People in School work stream be added to the work programme and submitted to the 19 February 2018 meeting.

The report also included an update on the work of the Dyslexia Service after the presentation made to the sub-committee in January 2017.

The sub-committee was informed that the Dyslexia Service had continued to provide a high quality service to schools, parents/carers, children and young people and that this was confirmed by the service users' feedback evaluations which were collated each year. The team's current priorities were:

- A presentation of North Tyneside's Policy for Literacy Difficulties and Dyslexia on January 11th, which has been jointly written with the Educational Psychology Service and has been co-produced with contributions from Sencos, parents/carers, children and young people.
- Preparation for the Peer Assisted Review next week (15th 17th January) in preparation for the Local Area Inspection.
- Collation and analysis of data from 2016-17 and 2017-18 to provide more indepth information regarding the impact of the team's work on pupil outcomes.

Information about the progress against these priorities would be known in a year's time and it was suggested that an update to the sub-committee every 2-3 years would be a more effective way to update the sub-committee on the Dyslexia Team's work; much of the work from year to year was ongoing and new initiatives such as those outlined above could then be presented once information evaluating their impact was available and to discuss implications for the team's future priorities.

The Chair and Deputy Chair had agreed that due to the nature of the work undertaken by the service it would be a more appropriate use of the sub-committee's time to defer the full report on the work of the team until January 2019 and that this would be reflected in the work programme.

**Agreed** to note the information provided in the report and endorse the proposed changes to the work programme 2017/18 as set out above.