



NOTTINGHAM CITY COUNCIL **CHILDREN'S PARTNERSHIP BOARD**

Date: Wednesday, 20 March 2019

Time: 4.00 pm

Place: LB 31-32 - Loxley House, Station Street, Nottingham, NG2 3NG

Councillors and Board Members are requested to attend the above meeting to transact the following business

Corporate Director for Strategy and Resources

Constitutional Services Officer: James Lavender **Direct Dial:** 0115 8764460

AGENDA

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Board to note upcoming items.

IF YOU NEED ANY ADVICE ON DECLARING AN INTEREST IN ANY ITEM ON THE AGENDA, PLEASE CONTACT THE CONSTITUTIONAL SERVICES OFFICER SHOWN ABOVE, IF POSSIBLE BEFORE THE DAY OF THE MEETING

CITIZENS ATTENDING MEETINGS ARE ASKED TO ARRIVE AT LEAST 15 MINUTES BEFORE THE START OF THE MEETING TO BE ISSUED WITH VISITOR BADGES

CITIZENS ARE ADVISED THAT THIS MEETING MAY BE RECORDED BY MEMBERS OF THE PUBLIC. ANY RECORDING OR REPORTING ON THIS MEETING SHOULD TAKE PLACE IN ACCORDANCE WITH THE COUNCIL'S POLICY ON RECORDING AND REPORTING ON PUBLIC MEETINGS, WHICH IS AVAILABLE AT WWW.NOTTINGHAMCITY.GOV.UK. INDIVIDUALS INTENDING TO RECORD THE MEETING ARE ASKED TO NOTIFY THE GOVERNANCE OFFICER SHOWN ABOVE IN ADVANCE.



**NOTTINGHAM CITY COUNCIL
CHILDREN'S PARTNERSHIP BOARD**

MINUTES of the meeting held at LB 41 - Loxley House, Station Street, Nottingham, NG2 3NG on 19 December 2018 from 4.05 pm - 5.48 pm

✓	Cllr Mellen	Portfolio Holder for Early Intervention and Early Years NCC
	Cllr Khan	Portfolio Holder for Education and Skills NCC
	Andrea Baxter	Superintendent, Nottinghamshire Police
✓	Helen Blackman	Director of Children's Integrated Services NCC
✓	Nichola Bramhall	NHS Nottingham City Clinical Commissioning Group representative
✓	Tracy Tyrell	Nottingham CityCare Partnership representative
	Julie Burton	Senior Operational Support Manager, National Probation Service Nottinghamshire
	Nicky Bridges	Primary Schools' representative
	Zoe Butler	Further Education representative
✓	Karla Capstick	Small Steps Big Changes representative
✓	Chris Cook	Independent Chair, Local Safeguarding Children Board
	Helene Denness	Public Health representative, NCC
	John Dexter	Director of Education NCC
✓	Sarah Fielding	Nottingham Schools Trust & Virtual School Representative
	Sue Fielding	Department for Work and Pensions representative
✓	Derek Hobbs (Nottingham Emmanuel School)	Secondary Schools' representative
	Nick Lee	Director of Education NCC
	Scott Mason (Rosslyn School)	Primary Schools' representative
	Stephen McLaren	Voluntary Sector Representatives
✓	Alison Michalska	Corporate Director for Children and Adults, NCC
	Toni Price	Community Engagement representative, NCC
	Jon Rea	Engagement & Participation Lead Officer NCC
		Representatives for Young People (Youth Cabinet)
✓	Sophie Russell	Head of Children's Strategy and Improvement NCC
✓	David Stewart (Oakfield School)	Special Schools' representative
✓	Chris Wallbanks	Head of Commissioning NCC

✓	Maria Ward	School Governor Representative
	John Yarham	Chief Executive of Futures Advice, Skills and Employment Ltd

✓ Indicates present at meeting

Colleagues, partners and others in attendance:

Sara-Jane Brighouse	- Project Manager Children's Integrated Services
Tim Brown	- Department for Work and Pensions (substitute for Sue Fielding)
Becky Cameron	- Nottingham Community and Voluntary Service (substitute for Stephen McLaren)
Jane Garrard	- Senior Governance Officer
Emily Humphreys	- Board administration
John Matravers	- Safeguarding Manager
Karen McAndrew	- Education Welfare

21 APOLOGIES FOR ABSENCE

Councillor Neghat Khan – Other Council Business
Andrea Baxter
Nicky Bridges
Helene Denness
Jon Rea
John Yarham
Stephen McLaren

22 DECLARATIONS OF INTERESTS

None

23 MINUTES AND MATTERS ARISING

The minutes of the meeting held on 3 October 2018 were agreed as an accurate record and signed by the Chair.

24 MEMBERSHIP UPDATE

Emily Humphreys, Support Assistant Children and Adults Directorate, provided an update on changes in membership of the Children's Partnership Board.

RESOLVED to note that

(1) Nicky Bridges has replaced Kate Clifford as the Primary School Representative;

- (2) Nichola Bramhall has replaced Sally Seely as the Clinical Commissioning Group Representative;**
- (3) Tracy Tyrell has replaced Phyllis Brackenbury as the Nottingham CityCare Partnership Representative; and**
- (4) Karla Capstick has joined the Board as a representative of Small Steps Big Changes.**

25 CYPP PRIORITY: SUPPORTING ACHIEVEMENT AND ACADEMIC ATTAINMENT

Nick Lee, Director of Education Services, introduced the report providing an update on the Children and Young People's Plan Priority: Supporting Achievement and Academic Attainment. He gave a presentation focused on the latest attainment data, elective home education and secondary school place planning. He highlighted the following information:

Educational Attainment

- (a) At the Early Years Foundation Stage there has been a rise in attainment levels narrowing the gap to the national average. This indicates an improvement in school readiness.
- (b) There has been a focus on phonics at Key Stage 1 in the City and Nottingham has moved up the league tables with children eligible for free school meals now outperforming their peers nationally.
- (c) At Key Stage 2 there has been an improvement against the expected standard in reading; and reading, writing and maths. Attainment in maths is good but below the expected standard. There has also been an increase in progress scores at primary years.
- (d) At secondary school level, school attendance is now better than the national rate and school attendance at primary school level is slightly below the national rate.

Elective home education

- (e) Parents do not have to register their children as being electively home educated and this is a concern. The local authority has a responsibility to monitor, and requests them to work with the local authority on education but there is no legal requirement for them to do so. Local concerns about this are reflected nationally and there is a national lobby to try and change legislation.
- (f) In Nottingham there are two home education co-ordinators, who are part of the Education Welfare Team. When they become aware of a child who has previously been at school but has been removed from the school roll, they request a meeting between the local authority, school and parent or carer to understand the reasons for this. If the local authority has concerns then the local authority will write a letter of concern, including notifying the appropriate professionals.

- (g) Most home educators are doing it because it accords with their beliefs and/ or meets their particular needs of their child(ren), and work with the local authority on education issues. However if they don't engage then a home visit is arranged.
- (h) There is concern about the potential for schools to encourage families to remove their children from formal education. Schools and the Regional Schools Commissioner have been challenged about this.
- (i) Perceived Special Education Needs (SEN) is a common reason why children are home educated and school place provision can also be a factor.
- (j) Electively home educated children are not a static group and there is a lot of movement in and out of the cohort.

School place planning

- (k) The local authority has a duty to provide sufficient school places, but has limited powers and resources to deliver this.
- (l) There has been investment in creating primary school places but there is now pressure on secondary school places. A further 7-9 forms of entry are still required at secondary school level.
- (m) The local authority is working with high performing and popular schools to expand and increase their capacity, and accept over-capacity.
- (n) The Archway Trust has submitted a bid to Government for a new 8 form entry school through the Free School Process. The local authority is supporting this bid by trying to secure the proposed site. If the bid is not successful then the capital money will be used to expand other schools.
- (o) Djanogly School is proposing to add an additional 2 forms on its Sherwood Rise site.
- (p) The situation with secondary school places is challenging but incrementally being addressed.

During discussion the following comments and additional information was provided:

- (q) There are active groups of electively home educated children that provide opportunities for social interaction and shared learning. However risks of isolation are a concern.
- (r) It is a concern that there is no monitoring of standards of teaching and learning in home education.
- (s) Those children who have never engaged with school can be identified by health visitors and Nottingham CityCare Partnership is keen to support this work. However data sharing issues can be a challenge.
- (t) There have been occasions when there have been concerns about a home educated child and the local authority has taken action to gather evidence about the situation.

- (u) It is important for the local authority to maintain a good relationship with the Elective Home Educators Network.
- (v) Children can attend the meeting with the local authority, parent/ carer and school to discuss the decision to remove them from the school roll and become home educated.
- (w) Children either need to attend school or be home educated, there is not a part-time option.

RESOLVED to note the attainment of children and young people

26 PARTNER UPDATE: SECONDARY EDUCATION

Derek Hobbs, Secondary School Representative, gave a presentation on secondary education highlighting the following information:

- (a) There has been some improvement in Grade 5 Maths and English attainment, and this is important for a pupil's future.
- (b) Progress 8 is a key factor in accountability and there has been some improvement. Small changes in performance on Progress 8 can make a difference to national rankings and the City has moved out of the bottom 10% of local authorities. There has been greater progress in some subjects than others e.g. physics, biology, history and French.
- (c) There have been improvements in school attendance and low levels of young people not in education, employment or training which is positive given the pressures on the high needs budget. There are challenges in if/ how this can continue to be supported.
- (d) Challenges for the year ahead including focusing on Progress 8, dealing with budget pressures, developing relationships with new head teachers in the city, transitions between primary and secondary school, Alternative Provision and the new Ofsted inspection framework.

During discussion the following comments and additional information was provided:

- (e) The direction of travel for secondary schools is good and they should be congratulated for this.
- (f) Recruitment and retention of teachers and managing teacher workload is a big challenge, especially in cities. The use of agency staff has a significant financial impact and also impacts on the quality of education. Consistency in teachers is important so schools work hard to retain teachers but this has to be balanced against the need to ensure that all teachers are high quality and delivering the best for pupils.
- (g) It is positive that Ofsted is taking a broader perspective away from just looking at outcomes and focusing more on the quality of education because there is a lot of positive work taking place in the city schools.
- (h) The significant number of changes in headteachers and leadership at secondary schools could have an impact on progress.

RESOLVED to note the update on secondary education

27 UPDATE FROM CORPORATE DIRECTOR FOR CHILDREN AND ADULTS

Alison Michalska, Corporate Director for Children and Adults, provided an update to the Board highlighting the following information:

- (a) The report from the Ofsted Inspection of Children's Social Care Services hasn't been published yet but the headlines so far are that Ofsted were impressed by the multi-agency 'front door' to children's integrated services; early help services; improvements to children in care and care leavers services; and the dedicated and hardworking staff. However they remained concerned about workforce capacity. An improvement plan will be developed in response to the inspection, but this will reflect the Council's financial situation.
- (b) Key issues for the Council's budget are the costs of children on remand, children in secure accommodation and units for children with complex needs. Work to keep the numbers of children in care stable has been effective but further recruitment of foster carers will take place in January and there is an ambition to reduce the average cost of a child in care.
- (c) The report of the Independent Inquiry into Child Sexual Abuse is due to be published in summer 2019. It is anticipated that it will be one report covering all three inquiries involving local authorities so it is likely that the recommendations will be directed to local authorities in general rather than Nottingham City Council specifically. The findings will be disseminated widely so that lessons can be learnt. A key area of learning is how to engage with the, now adult, survivors. Several survivors are working closely with the Council, for example on training for foster carers. It is important to use this knowledge and experience effectively and consideration is being given to making films that could be used in future years. There is also potential for the Inquiry to change how people make civil claims on local authorities, so that the process is less adversarial, shorter and easier to navigate.

During discussion Board members made the following points:

- (d) The Ofsted inspection provided assurance that the threshold for intervention is right and that assessments are consistently good.
- (e) The Ofsted framework just focuses on Children's Services and it would be helpful for it to engage with the wider safeguarding partnership.

**28 NOTTINGHAM CITY SAFEGUARDING CHILDREN BOARD:
INDEPENDENT CHAIR'S ANNUAL REPORT AND NCSCB BUSINESS
PLAN**

Chris Cook, Independent Chair of the Nottingham City Safeguarding Children Board, introduced the Annual Report and Business Plan of the Nottingham City Safeguarding Children Board. He highlighted the following information:

- (a) The landscape for safeguarding is changing. It is not just about the home environment, but increasingly about the wider community and online issues and partners need to be able to respond to this.
- (b) The Safeguarding Children Board plays a key role in co-ordinating activity and partnership work in the City is strong. It also publishes policies and procedures and has a scrutiny and audit role.
- (c) Safeguarding reviews are now carried out more rapidly and there is a requirement to report to the National Panel in 15 days to identify whether there is a need for a Serious Case Review to be completed. So far the National Panel has agreed with everything that the Board has sent so far.
- (d) Reviews are about learning and not apportioning blame. Learning from reviews is disseminated through training programmes.
- (e) It is important for all colleagues to be appropriately trained and for relevant information to be shared.
- (f) The Board encourages professional curiosity about why some children are not present at appointments e.g. medical appointments and that missed appointments matter because they could indicate a wider safeguarding issue. Films have been developed to promote this mindset. The first had a professional focus and the second has a citizen focus.
- (g) The Quality Assurance Sub Group carries out audits to provide feedback to agencies in the City.
- (h) An emerging theme is knife crime in the City Centre.
- (i) Designated Safeguarding Leads from schools meet three times a year to discuss safeguarding issues and share safeguarding information.
- (j) The Wood Review reviewed safeguarding arrangements nationally. New requirements were set out in the Children and Social Work Act 2017. However, local safeguarding arrangements in the City are successful so it is not proposed to make significant changes. The Act states that there should be three key partners involved (local authority, Police and Clinical Commissioning Group) but recognises the role of others.
- (k) The new framework includes a Board that will oversee performance and risk; a Business Management Group; and Sub Groups, some of which will be undertaken jointly with Nottinghamshire. There will also be a cross-authority partnership development session held twice a year.

RESOLVED to note the Nottingham City Safeguarding Board Annual Report and Business Plan

29 FAMILY SUPPORT PATHWAY

Sara-Jane Brighthouse, Project Manager Children's Integrated Services, introduced the report about the refresh of the Family Support Pathway. She highlighted the following information:

- (a) The Family Support Pathway is the threshold document for safeguarding and support.
- (b) The Pathway was originally launched in 2011 and this is the third refresh of that document.
- (c) The Pathway document was co-produced with a range of agencies and approved by the Safeguarding Children's Board in December 2018.
- (d) Key changes agreed as part of the refresh include highlighting key changes since the previous iteration of the Pathway; improving the language used in some sections; adding information about early help assessment; refreshing indicators for early help assessment and immediate help to reflect changes in access to services; and providing more information on levels of support to help practitioners.

During discussion, Board members discussed the need to acknowledge the work of the voluntary and community sector and how the new arrangements provide an opportunity to consider this.

RESOLVED to ask Board members to cascade and disseminate the Family Support Pathway to their workforce.

30 FORWARD PLAN

RESOLVED to add the action plan arising from the Ofsted inspection of Children's Social Care Services to the agenda for the meeting scheduled for 20 March 2019.

Title of paper:	An update on children and young people's health and wellbeing in the context of Nottingham City's Children and Young People Plan 2016-20.		
Report to:	Nottingham Children's Partnership Board		
Date:	19/02/2019		
Relevant Director:	Alison Challenger (Director of Public Health)	Wards affected: All	
Contact Officer(s) and contact details:	Helene Denness (helene.denness@nottinghamcity.gov.uk)		
Other officers who have provided input:	Uzmah Bhatti uzmah.bhatti@nottinghamcity.gov.uk David Johns david.johns@nottinghamcity.gov.uk Marie Cann-Livingstone marie.cannlivingstone@nottinghamcity.gov.uk Jenn Burton Jennifer.burton@nottinghamcity.gov.uk		
Relevant Children and Young People's Plan (CYPP) priority:			
Safeguarding and supporting children and families: Children, young people and families will benefit from early and effective support and protection to empower them to overcome difficulties and provide a safe environment in which to thrive.			<input type="checkbox"/>
Promoting the health and wellbeing of babies, children and young people: From pregnancy and throughout life, babies, children, young people and families will be healthier, more emotionally resilient and better able to make informed decisions about their health and wellbeing.			<input checked="" type="checkbox"/>
Supporting achievement and academic attainment: All children and young people will leave school with the best skills and qualifications they can achieve and will be ready for independence, work or further learning.			<input type="checkbox"/>
Empowering families to be strong and achieve economic wellbeing: More families will be empowered and able to deal with family issues and child poverty will be significantly reduced.			<input type="checkbox"/>
Summary of issues (including benefits to customers/service users):			
<p>This report highlights partnership activity that promotes the health of babies, children and young people. Whilst all outcomes in Nottingham Children and Young People's Plan will be referenced this report specifically focuses on efforts to reduce the:</p> <ul style="list-style-type: none"> • Proportion of women smoking in pregnancy. • Proportion of year 6 children who are obese. <p>In 2017/18, 17.2% of mothers in Nottingham City were smokers at the time of delivery, which is significantly higher than the England average of 10.8%. Whilst there has been no statistically significant reduction in the rate from 2016/17 to 2017/18 Nottingham's position compared to statistical neighbours has improved from the third highest rate in 2016/17 to fifth highest rate in 2017/18.</p> <p>Changes in service provision have led to the development of new ways of working to support women to stop smoking in pregnancy. In addition, a new social marketing campaign 'LoveBUmp'</p>			

will be launched in March 2019.

In 2017/18, 26.7% of reception age children in Nottingham City were obese or overweight. This percentage increases to 40.8% by Year 6 that is significantly higher than the England average and the third highest of our statistical neighbours. Work is underway to better integrate public health nutrition across the commissioned 0-19 children's public health services and review referral pathways for the children's weight management service. In addition, the whole system approach approved by Nottingham Children's Partnership Board is being advanced.

Recommendations:

- | | |
|----------|---|
| 1 | Nottingham Children's Partnership Board is requested to note the contents of this report and progress on health and wellbeing outcomes in the Nottingham City Children and Young People's Plan. |
| 2 | Nottingham Children's Partnership Board partners continue to support activity to improve health and wellbeing of children and young people in Nottingham. |

1 BACKGROUND AND PROPOSALS

Good maternal health and healthy babies: Smoking in pregnancy

The proportion of women smoking in pregnancy is recorded by the number of women smoking at the time of delivery (SATOD). Whilst this is the agreed national measure, it doesn't capture those women who are smoking at their 'booking appointment' with their midwife and quit before birth. Local intelligence suggests that the proportion of women smoking at their first midwifery appointment is considerably higher than SATOD. Nottingham's Smoking In Pregnancy Strategy Group, a sub-group of the City/County Local Maternity Transformation System group, are leading work to improve data collection and collation.

As figure 1 shows, in 2017/18, 17.2% of mothers in Nottingham City were smokers at delivery which is significantly higher than the England average of 10.8% and the fifth highest rate of our statistical neighbours. Whilst there has been no statistically significant reduction in the rate from 2016/17 to 2017/18, Nottingham's position compared to statistical neighbours has improved from the third highest rate in 2016/17 to fifth highest rate in 2017/18. There has been no statistically significant reduction since 2010/11, the first year the data was published in this form.

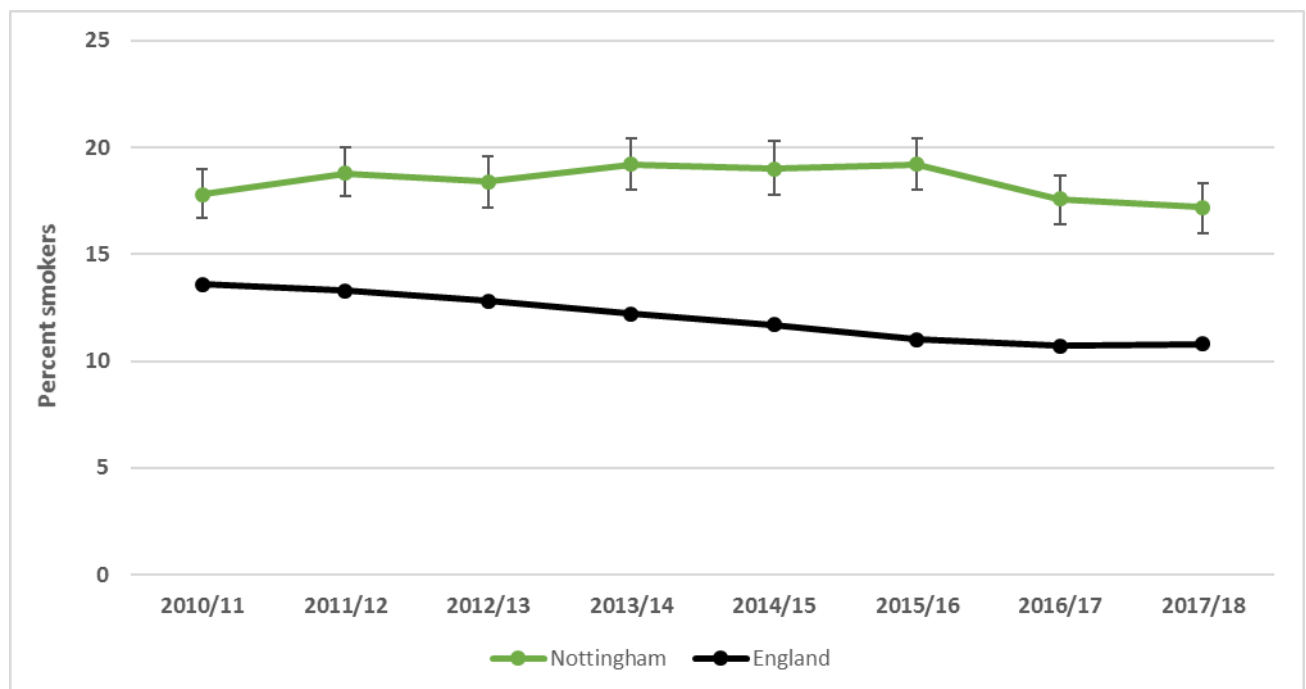


Figure 1: Smoking status at the time of delivery in Nottingham and England

Women who smoke in pregnancy are more likely to have a stillbirth, have a baby born at a low birth weight and/or a baby born with a cleft palate. Babies living in a household with smokers are more likely to die from Sudden Infant Death Syndrome (SIDS).

Through the publication of Better Births, the national maternity transformation plan, there is a renewed focus on reducing the proportion of pregnant women smoking. Historically, in Nottingham, we have had 'opt-out' referral to a community stop smoking service for pregnant women. Due to unprecedented budget pressures, local stop smoking services (New Leaf), funded by Nottingham City Council, were decommissioned in March 2018. Nottingham City Council has been working with the GP Alliance to establish a new stop smoking service, 'StubIt', for Nottingham City citizens. Nottingham City Council funding focuses on the support required by 'at risk' populations including pregnant women.

Nottingham City Council has worked with Nottingham City Care to create a new, fixed term smoking in pregnancy post within the Nottingham University Hospital SmokeFree team. This post will consider the training needs of staff within the midwifery division regards smoking in pregnancy; explore the best way to work with the midwifery service to engage pregnant women about smoking throughout their pregnancy and provide advice to stop smoking; and will help establish referrals links between the new community stop smoking service and midwives.

The NHS Long Term plan published earlier this year commits to offering a stop smoking service to all pregnant women AND their partners. However, how this commitment will look in practice or be funded is less clear at this stage and will require collaborative working between the local authority and clinical commissioning groups.

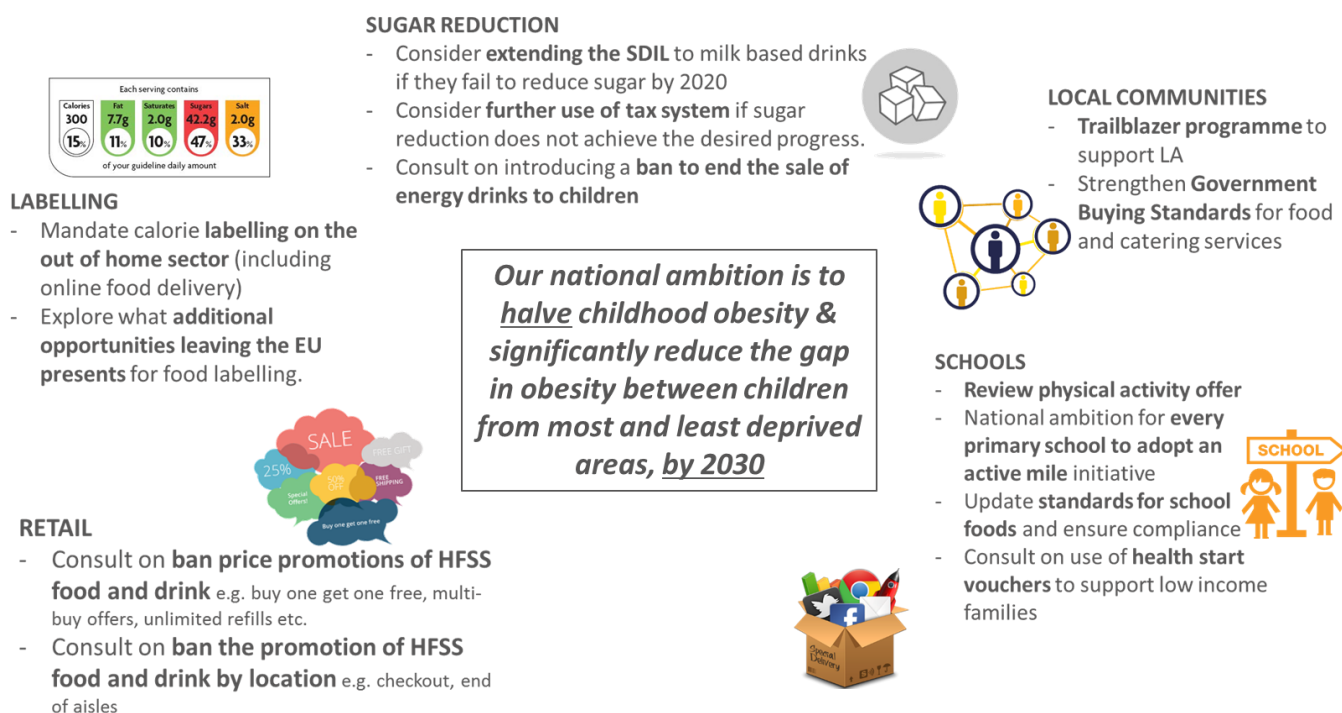
In addition to the new post described and new stop smoking service, March 2019 will see the launch of the 'Love Bump' campaign to promote the dangers of smoking in pregnancy and the benefits to mother/partner, unborn baby and other family members of giving up smoking (<https://lovebump.org.uk/>). In addition to a social marketing campaign, the LoveBump campaign will include additional resources for midwives, namely new conversation packs to use in their daily conversations with pregnant women.

Children and young people adopt healthy lifestyles: Childhood Obesity

There is national concern about the rise of childhood obesity and the implications of such obesity persisting into adulthood. Studies tracking child obesity into adulthood have found that the probability of overweight and obese children becoming overweight or obese adults increases with age. The health consequences of childhood obesity include: increased blood lipids, glucose intolerance, Type 2 diabetes, hypertension, increases in liver enzymes associated with fatty liver, exacerbation of conditions such as asthma and psychological problems such as social isolation, low self-esteem, teasing and bullying.

The issues of excess weight in children is complex with many drivers ranging from environment and individual behaviour to genetics. The latter, genetics, not acting alone and relying heavily on interactions with environmental factors that often favour weight gain.

Nationally, the government has outlined its plan to halve childhood obesity and significantly reduce the gap in obesity between children from the most and least deprived areas, by 2030. Many of the policies outlined below are currently under consultation with several additional consultations taking place this year.



In 2017/18, 26.7% of reception age children in Nottingham City were obese or overweight. This percentage increases to 40.8% by Year 6 that is significantly higher than the England average.

The prevalence of obesity in Year 6 children between 2011 and 2018 are shown in Figure 3 and suggest an upward trend following a period of relative consistency.

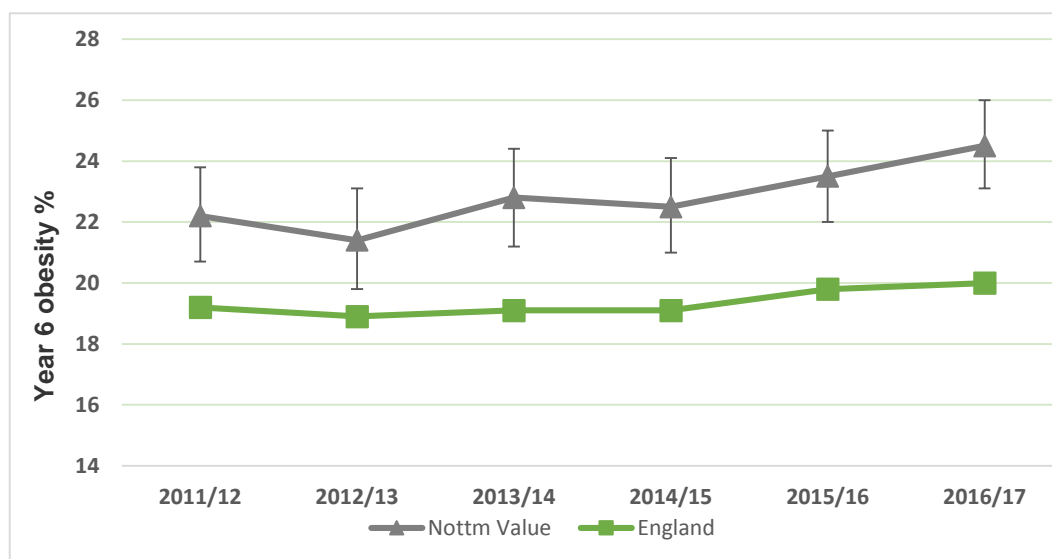


Figure 3: Percentage of Year 6 children who are classified as obese in Nottingham and England

Nottingham City Council commissions a range of services that support families and children to eat healthily and maintain a healthy weight, details of which can be found in the appendices. Despite reductions in the resource allocation for 0-19 children's services, a Public Health Nutrition/Weight Management function has been maintained and is delivered by CityCare (Appendix 1).

Services for adults and those transitioning into adult services have been impacted by the unprecedented financial challenge. However, referral for 'at risk' groups to a commercial weight management provider is currently available and a new universal digital weight management offer is to be rolled out in 2019.

A review of referral pathways is currently underway to capitalise on having an integrated 0-19 services and incorporate public health nutrition pathways across a range of children's services. In addition, this work will ensure appropriate referral pathways with related services commissioned by the CCG.

Nottingham City was unsuccessful in its bid for trailblazer funding for childhood obesity (see Appendix 2) but was commended for its proposed engagement of local stakeholders and project plan. Work on a whole system approach to Obesity, as presented to the Children and Young People's Partnership Board in October 2018, will continue. A network analysis is currently exploring who in Nottingham City works on helping children 'eat better and move more for good health' in the city with the intention of inviting them to a workshop to identify the key local drivers that are amenable to change by the system.

1a. Good maternal health and healthy babies

i) Improving mental health for new mums and mums-to-be

Work to improve the mental health of new mums and mum-to-be is driven by the perinatal mental health group, a sub-group of the Local Maternity System Transformation group. Current work is focused on strengthening the pathway of care for women with mental health needs and improving early identification of mental health need in the perinatal period, with a particular focus on mild to moderate and emerging mental health needs, including those who:

- Enter pregnancy with existing mental health conditions,
- Would benefit from talking therapies (IAPT)¹
- And those who develop a serious mental health problem during pregnancy or after birth.

The current indicator in the CYP plan is a proxy for the number/proportion of women with low mood and/or a mental health problem that are identified in a timely way, and offered appropriate support. This indicator may be updated as a more robust national method of capturing new mums and mums-to-be mental health is developed.

ii) Breastfeeding: Percentage of mothers who breastfeed their babies at 6-8 weeks

In 2017/18, 72.4% of mothers in Nottingham City breast-fed at birth, lower than the national average of 74.5%. However, breastfeeding rates at 6 weeks are better than the national average; 47.3% in Nottingham compared to national average of 42.7%. Nottingham has the fourth highest 6-week breastfeeding rate of its statistical neighbours.

¹ Increasing access to psychological therapies

Whilst increasing breastfeeding rates is best achieved by the joint efforts of all services working with pregnant women and new parents, local intelligence suggests that Nottingham's relatively high breast-feeding rates are due, in part, to our long established breastfeeding peer support service which works with mothers under the age of 25 to support them to breastfeed as long as they can. This Nottingham City Council commissioned breastfeeding support service, within the 0-19 years' service specification, works alongside both the maternity and health visiting service to target all mothers to be under the age of 25 to support initiation and continuation of breastfeeding. CityCare is working with Commissioners to increase the reach of breastfeeding support.

iii) Infant Mortality

Infant Mortality rate (IMR) is defined as the number of deaths of children under the age of one each year, per 1000 live births. During 2015-17, infant mortality deaths in Nottingham, 4.5 deaths per 1000 live births, is similar to the England average of 3.9 deaths per 1000 live births, and is the fifth lowest mortality when compared to its statistical neighbours. There has been no statistically significant reduction in infant deaths from 2010-12. As the number of deaths in children under 1 year is small, any variation in the rate of deaths should be interpreted with caution as the variation may be due to random fluctuation.

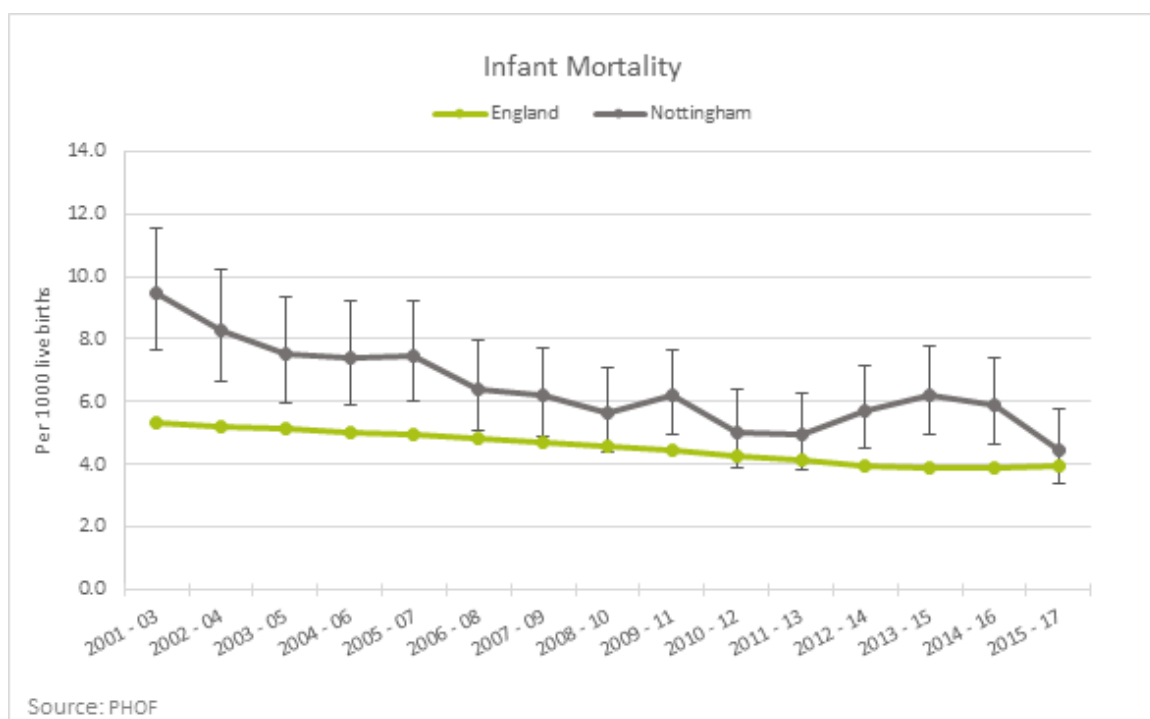


Figure 2: Infant mortality in Nottingham and England 2001-13 – 2015-17

All child deaths in Nottingham are reviewed by multi-agency Child Death Overview Panels (CDOPs) as per *Working Together to Safeguard Children 2015* guidance. Learning from CDOP is fed back into the governance structures within NUH. A detailed database of all childhood deaths is managed by the Child Death Review Team based at NUH. All deaths are discussed with the local Coroner prior to completing death certification.

In 2017, there were 17 deaths of children under 1 year of age. The majority of these deaths were classified as a perinatal/neonatal event; a category, which includes babies who are born extremely prematurely, a considerable proportion of whose others smoked during pregnancy.

Other infant deaths in 2017, as in previous years, are associated with unsafe sleeping. The importance of safe sleeping continues to be highlighted to parents and a Safe Sleeping group is in place to mobilise action across health, social care and other partners. Local training sessions targeted at early years and social care have been developed and delivered across Nottingham City. There is also a free online training package, which can be accessed via the Nottingham City Safeguarding website.

Perinatal mortality

In 2015, the Secretary of State announced a national ambition to halve rates of stillbirths, neonatal and maternal deaths and intrapartum brain injuries by 2030, with a 20% reduction seen by 2020.

To help maternity services achieve this aspiration, Saving Babies' Lives care bundle was introduced and designed to tackle stillbirth and early neonatal death, and is a significant driver to deliver the ambition to reduce the number of stillbirths, bringing four elements of care together:

- I. Reducing smoking in pregnancy
- II. Risk assessment and surveillance for foetal growth restriction
- III. Raising awareness of reduced foetal movement
- IV. Effective foetal monitoring during labour

During 2016 and 2017 there were 41 stillbirths in Nottingham, a rate of 4.8 per 1000 births which is significantly higher than the England average of 4.4 stillbirths per 1000 births. Many of these stillbirths are preventable. Although the causes of stillbirths are often unclear, there are associated risk factors, these include, but are not limited to:

- Smoking in pregnancy
- Maternal age (stillbirth rates are highest for women aged under 20 or over 40)
- Maternal obesity
- living in deprivation
- Multiple births
- Influenza

Saving Babies' Lives care bundle supports the delivery of safer maternity care, as described by the National Maternity Review, in Better Births and is driven by the Safe and Effective group, a sub-group of the Nottinghamshire Local Maternity System Transformation group. In 2017, Nottingham City Public Health Team produced, with the support of Nottingham City CCG and NUH, a review of perinatal deaths, including stillbirths, to identify any unexpected themes. The patterns observed were similar to those seen nationally; however, higher levels of deprivation in the city mean risk factors, such as smoking in pregnancy, are often more prevalent. NUH has worked with partners, including Nottingham City Public Health team, to improve learning from stillbirths. This work is ongoing and links with the ambition of the Safe and Effective sub group to reduce the proportion of women smoking in pregnancy, which is the most important, preventable cause of stillbirth and neonatal deaths.

iv) Immunisations: Percentage of eligible children who have received 3 doses of Dtap/IPV/Hib vaccine by their first birthday

The percentage of eligible children who received three doses of Dtap/IPV/Hib vaccine by their first birthday in Nottingham in 2017-18 was 89.7%, lower than the England average of 93.1%, the second lowest of our statistical neighbours and the third lowest in England outside of London. The national target is 95%. The proportion who receive three doses remained low at 93.9% at age 2 years compared to an England average of 95.1%.

Vaccination services are commissioned by NHS England with the Dtap/IPV/Hib vaccine being administered in General Practice. Promotion of immunisations and vaccinations is integrated into the 0-19 years' public health service specification as part of MECC (making every contact count) as well as a consistent approach to information provided to families. Some development work with primary care requires action to implement a 'Call and Recall Programme' so that parents are aware of when children are required to have their vaccination. This work will be

implemented in partnership with NHS England and Public Health England. Work to explore the opportunity to increase vaccination cover through opportunistic contact with primary care will be implemented in partnership with NHS England and Public Health England.

1b) Children and young people adopt healthy lifestyles

i) Oral Health: Percentage of children aged 5 with tooth decay

Poor oral health can affect children and young people's ability to sleep, eat, speak, play and socialise with other children. The impacts can be seen educationally with children missing school and in addition can affect parents/carers who would need to take time off work. Nationally, tooth decay remains the most common reason for hospital admissions in children aged five to nine years old (2014-2015). Furthermore, it is a sign of neglect. Significant dental decay, which, if it remains untreated, may be considered a safeguarding concern.

Nottingham has a similar proportion of five-year-old children free from dental decay (74.1%) to the England average (76.7%); an improvement, albeit not statistically significant, on 2014/15. The number of decayed, missing or filled teeth on average in five year olds in Nottingham in 2016/17 (1.22 teeth) remains similar to that seen in 2014/15 and higher than the England average (0.78 teeth). The number of decayed missing or filled teeth is also linked to deprivation within the City. There is considerable variation in the prevalence of tooth decay at the area committee/ward levels in the City.

In March 2018 the oral health promotion service was not recommissioned. However, many schools continued supervised tooth brushing until September 2018. Small Steps Big Changes now commissions Nottinghamshire Healthcare Trust, *Tooth Fairies* to provide school oral health engagement programme in several of its wards. At present, health visitors continue to offer advice and resources to new parents. Public Health England Start4Life resources and 'Dental check by One' messages continue to be cascaded.

A Health Needs Assessment is currently being completed to explore the full range of data on the oral health of Nottingham City residents and work is ongoing to explore other opportunities to improve the oral health of Nottingham City's children and reduce inequalities.

ii) Children and young people's mental health:

Our vision is to provide children and young people with flexible support around emotional well-being, so no child or young person has to face emotional distress alone (see Appendix 3)

The most up to date data from the 2017 Children and Young People's Mental Health National Prevalence Study indicates that one in eight children and young people aged 5 -19 had a mental disorder in 2017.

The *Green Paper on Transforming Children and Young People's Mental Health* (December 2017) and the recent *NHS 10 Year Plan* focused on schools as playing a key role around early intervention and prevention around children and young people's mental health. There is an ambition that all schools will have a 'Designated Mental Health Lead', who will be responsible for the whole school approach to addressing mental health.

Across Nottingham City, engagement and collaboration with schools and colleges has increased to ensure they feel supported to support our children and young people. Schools have been participating in a number of initiatives as detailed below.

Zippy and Apple's Friends academic resilience programmes were piloted in 8 primary schools. The University of Belfast is currently working with the collected data and the final report is due to be published soon.

The Emotional Health and Resilience Charter was set up by a partnership of local services who work with schools on mental health and emotional wellbeing. This is a way for schools to demonstrate their commitment to support the mental health and emotional wellbeing and resilience of their pupils. Once the school has signed the charter they complete an audit to record their strengths and identify areas for development. An action plan is then created and support can be requested from the Emotional Health and Wellbeing Consultants and Partner Services who developed the charter. Schools will then be encouraged to share the outcomes of their development work as case studies which can be disseminated across the city.

The Emotional Health and Wellbeing Consultants also offer Youth Mental Health First Aid (MHFA) training to staff from city schools. Schools are able to access the full 2-day training to become a Youth Mental Health First Aider and/or a 1-day training to become a Youth MHFA Champion. So far this year, 38 staff have been trained in the 2-day Youth MHFA course and 13 teachers on the

1 day training. The staff have come from 37 different schools. 14 schools attended training sessions from the Character Curriculum Programme which was delivered by the Council's Personal, Social and Health Education Team and 17 schools received resources to support their curriculum.

Mental Health First Aid Youth training is also delivered to the wider children's workforce in Nottingham City. To date, 250 members of the children's workforce have become Youth Mental Health First Aiders. The Youth Mental Health First Aiders have the skills to recognise young people showing early signs of emotional distress to more complex mental health need to support them appropriately. This early intervention approach will help towards supporting the (approximately) 1 in 8 young people in the city who suffer with mental health problems. It will also help to build on the 'time to change agenda' highlighting the need for improved public awareness and understanding and aiding people to think differently about mental health issues for young people.

Targeted Children and Adolescent Mental Health Service (CAMHS) prevention and early intervention work, links schools and universal services to offer support and training to staff. A CAMHS practitioner links with schools in a number of ways to offer support, including by:

- Offering support directly to secondary school aged children;
- Piloting a project to support the early identification of mental health needs in primary school aged children;
- And monthly self-harm clinics delivered by the SHARP service in 18 City secondary schools, one in Nottingham College and one for the CAMHS Children Looked After service. Of these, approximately 80% of YP seen over a 2.5 year period have received support from Universal Services and not required input from Targeted/Specialist mental health services, clearly evidencing that early and targeted interventions can reduce self-harm and suicidal behaviours in secondary school students.

The Targeted CAMHS offer also includes parent/carers psychoeducation workshops that cover anxiety, depression, attachment, self-harm awareness and supporting transgender children.

The Targeted City's CAMHS 'Single Point of Access' model is quite unique nationally. It ensures referrals are processed quickly and effectively and children and young people can be navigated to the right support for them depending on their presentation and needs. This model has ensured that over the last 4 years 95% of cases remain at a Targeted CAMHS or universal level, only escalating to Specialist Community CAMHS when absolutely essential.

The service has led a working group to explore ways to further improve easier access into the behavioural, emotional and mental health (BEMH) pathway and/or Targeted and Community CAMHS. This work has led to the agreement from commissioners (CCP) for the redesign the BEMH website to make it young people friendly, and to develop ways for CYP and families to self-refer more easily. The single point of access (SPA) continues to closely monitor our wait times weekly, ensuring that referrals are screened within 5 working days and that CYP get seen within 6 weeks of their referral. Where there is any reach of breaching our agreed wait, this is escalated to senior managers, the Mental Health and Wellbeing Programme Lead, and commissioners.

Targeted CAMHS ensures it has staff trained in a range of evidenced based therapeutic models including a number of specialist staff such as a Cognitive Behavioural Therapy Specialist (for complex and enduring mental health needs). In addition other forms of more specialised work including a Domestic Abuse CAMHS practitioner, and animal assisted therapy with therapy dog, Freud.

Targeted CAMHS works closely with the 'Young Minds Amplified' project to co-design the service offer and embed parent/carers participation strategy/action plan and a parent/carer support group. Participation events in the last year have included Splendour Festival, Ruby Wax at the Play House, and expo parenting teens event. Working jointly with the MH2K project, Targeted Child and Adolescent Mental Health Services are developing a co-designed poster detailing available support, which will be on the back of all school toilet doors in order to improve access to support for those who need it. Targeted CAMHS also lead a multiagency working group on participation with the aim to improve co-production and participation in the service's development. Alongside a CAMHS newsletter that goes out twice a year updating on all services developments for BEMH pathway and CAMHS and aims to reduce stigma and promote positive mental wellbeing.

The behavioural and emotional health (BEH) team is a CCG commissioned service that aims to bridge the gap between universal and targeted CAMHS provision for children/young people who are registered with a City GP. The service is primarily receiving referrals for children/young people who have behaviour issues and/or where there are concerns that the child/young person may have autism or ADHD. The CCG has recently commissioned an educational psychologist and a clinical psychologist to ensure the diagnostic service meets NICE guidance. In 2017/2018, the BEH team received 2323 referrals. This high number of referrals each month evidences the level of need

within the City, and the increasing number of referrals to the paediatric service in relation to Autism and/or ADHD.

Across Nottingham City young people continue to access Base 51 which offers face to face counselling services and access to wider health support such as sexual health. During 17/18, 223 young people from Nottingham City were referred to Base 51.

Kooth continues to offer open access support to young people across Nottingham City providing online counselling and face to face appointments, as well as a range of other online emotional health support tools such as moderated forums and self-care tools. During 17/18, 376 young people accessed the Kooth face to face service offered within Nottingham City with 2038 appointments delivered, whilst 892 young people from Nottingham City registered for Kooth online services with 589 online counselling sessions offered. 87% of young people returned to Kooth more than once and 96% reported that they would recommend the service to a friend.

Nottingham City has participated in the MH:2K project. 30 local young people representing the diversity within Nottinghamshire and Nottingham City were trained as citizen researchers and delivered a number of engagement events and engaged over 500 of their peers and set priorities for improving young people's mental health. This project has now been extended until 2020, with a plan to recruit more citizen researchers and produce a short film tackling stigma around mental health.

Self-harm Prevention: SHARP Service (Self-harm awareness and Resource Project)

Data collected from over 9,000 children, young people, parents and professionals as part of the 2017 National Prevalence Survey indicated that 5.5% of 11-16 year olds had self-harmed at some time, with the proportion higher in girls than boys. This figure was higher for 17-19 year olds with 15.4% overall having reported to have self-harmed, again with higher incidence in girls than boys.

SHARP is a preventive self-harm service model that have trained 3980 professionals since October 2015 through 411 training sessions. SHARP have delivered assemblies to 650 children/young people aged 11–16 years, raising awareness around healthy coping strategies and breaking down barriers to access to services. 7000 front-line professionals have been trained since SHARP was formed just over 5 years ago.

SHARP have delivered 6 'Exam Stress-LESS' workshops to children/young people over the last few months and have another 6 schools booked in for this academic year reaching out to approximately 300 CYP. SHARP produced a training package called 'If Toys Could Talk' as an action from a Serious Case Review in 2017 which focusses on helping professional to recognise and support young children where self-harm is a concern. This training is available for all City primary schools.

SHARP oversee all self-harm follow-ups and joint protocols (a joint assessment within 48 hours with social care for high risk young people) which come through the City SPA, ensuring a timely and accurate risk assessment is completed and a robust safety plan is in place with clear recommendations of further support for the child/young person/family and offering the professional network consultation if required.

In 2017/2018:

- 1857 referrals were received and processed by the CAMHS Single Point of Access; of them 918 assessments were carried out with CYP and their families.
- 94% of young people offered feedback on their assessment experience with Targeted CAMHS said they would recommend us to a friend.

In 2016/17:

- There were 58 admissions for self harm amongst 10-14 year olds (349.9 per 100,000 population). This is significantly above the England average.
- There were 159 admissions for self harm amongst 15-19 year olds (626.6 per 100,000 population). This is similar to the England average.

iii) Teenage Pregnancy

An update on teenage pregnancy will be provided at the next Children's Partnership Board when new conception data is available.

2 RISKS

Children and young people who do not receive the right support at the right time in childhood are more likely to experience health problems in adulthood. Budget pressures across the statutory and voluntary sectors could reduce the support available to children, young people and families.

3 FINANCIAL IMPLICATIONS

None

4 LEGAL IMPLICATIONS

None

5 CLIENT GROUP

All children and young people, and their parents/carers and families, especially those with physical and/or mental health problems

6 IMPACT ON EQUALITIES ISSUES

Children and young people who identify as LGBT are more likely to experience mental health problems than other young people.

7 OUTCOMES AND PRIORITIES AFFECTED

Promoting the health and wellbeing of babies, children and young people: From pregnancy and throughout life, babies, children, young people and families will be healthier, more emotionally resilient and better able to make informed decisions about their health and wellbeing.

Appendix 1

Table 3: Services related to childhood nutrition and obesity in Nottingham

Age Group	Services in relation to need
Pregnant women	Currently no service available
2 - 4 years	Healthy Child Programme (Level 1) <ul style="list-style-type: none"> - Families of overweight children receive brief intervention and intensive support including signposting to local healthy living opportunities by Health Visitors, Family Nurse Practitioners, GPs and Practice Nurses. - There is capacity for all eligible families. - There is no specific intervention provided for level 2- 4 year olds who are identified as obese other than support offered through the Healthy Child Programme by health visiting.
5 - 16 years	Brief Intervention (Level 1) <ul style="list-style-type: none"> - Overweight children/families receive brief intervention and intensive support including signposting to local health living opportunities by school nurses, GPs and practice nurses. - There is capacity for all eligible families through the Public Health Nursing Service (Healthy Child Programme, 5-19 years).
5-16 years	Healthy Weight Support Programme <ul style="list-style-type: none"> - Nottingham's Healthy Weight Support Programme is an evidenced based targeted weight management service provided by Nottingham CityCare Public Health Nursing service which encourages children and families to establish and maintain healthy lifestyles by promoting skills and knowledge around nutrition, physical activity and behaviour change. The service consists of an individually tailored package of support including home visits/assessment and 3 follow up sessions with school nursing. This service launched in September 2014. - There is capacity for 80 children/families to have a 3-month package of support per year.

Table 4: Targeted Interventions for those most at risk of overweight and obesity

Healthy Child Programme embedded in the integrated 0-19 service provided by CityCare	The HCP seeks to reduce health inequalities and meet the needs of the most at-risk children, young people and families through a progressive universal model. Parents of overweight and obese children receive appropriate information and signposting to further sources of advice/ support and referral to appropriate weight management services.
Breastfeeding peer support	CityCare Partnership has provided a breastfeeding peer support programme since September 2012. This service offers targeted one-to-one support for mothers aged under 25 years by paid peer supporters. Midwives, health visitors and peer supporters distribute breastfeeding materials to young mothers.
Healthy Start - Free vouchers for fruit and vegetables	Healthy Start is open to pregnant women and families with children under 4 years. Vouchers are provided to exchange for fresh fruit and vegetables as well as milk and infant formula milk.
Healthy Weaning Programme CityCare	Healthy weaning education targeting those living in deprived areas of the City.
Cook and Eat sessions – practical cooking skills CityCare	Practical cook and eat sessions for parents to increase cooking skills and promote healthy eating incorporating behaviour change techniques targeting those living in deprived areas of the City e.g. Eatwell for life

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An update on children and young people's health and wellbeing in the context of Nottingham City's Children and Young People Plan 2016-20

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Helene Denness
David Johns

Children and young people's health and wellbeing

Part 1 of this presentation, and associated report, focuses on partnership efforts in Nottingham to reduce the:

- Proportion of women smoking in pregnancy.
- Proportion of year 6 children who are obese.

Part 2 focuses on emotional health and wellbeing

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Smoking in Pregnancy



What is the issue?



Smoking more than doubles the risk of stillbirth, but stopping, and making your house smoke free can greatly reduce this risk.



Every cigarette you smoke has 4,000+ chemicals in it & reduces the oxygen reaching your baby. As a result, their heart has to beat harder every time you smoke.



Babies born to mothers who smoke are more likely to be born small. This has short term health issues and a greater lifetime risk of obesity & diabetes.



Babies whose parents smoke are more likely to be admitted to hospital for bronchitis and pneumonia during their first year.



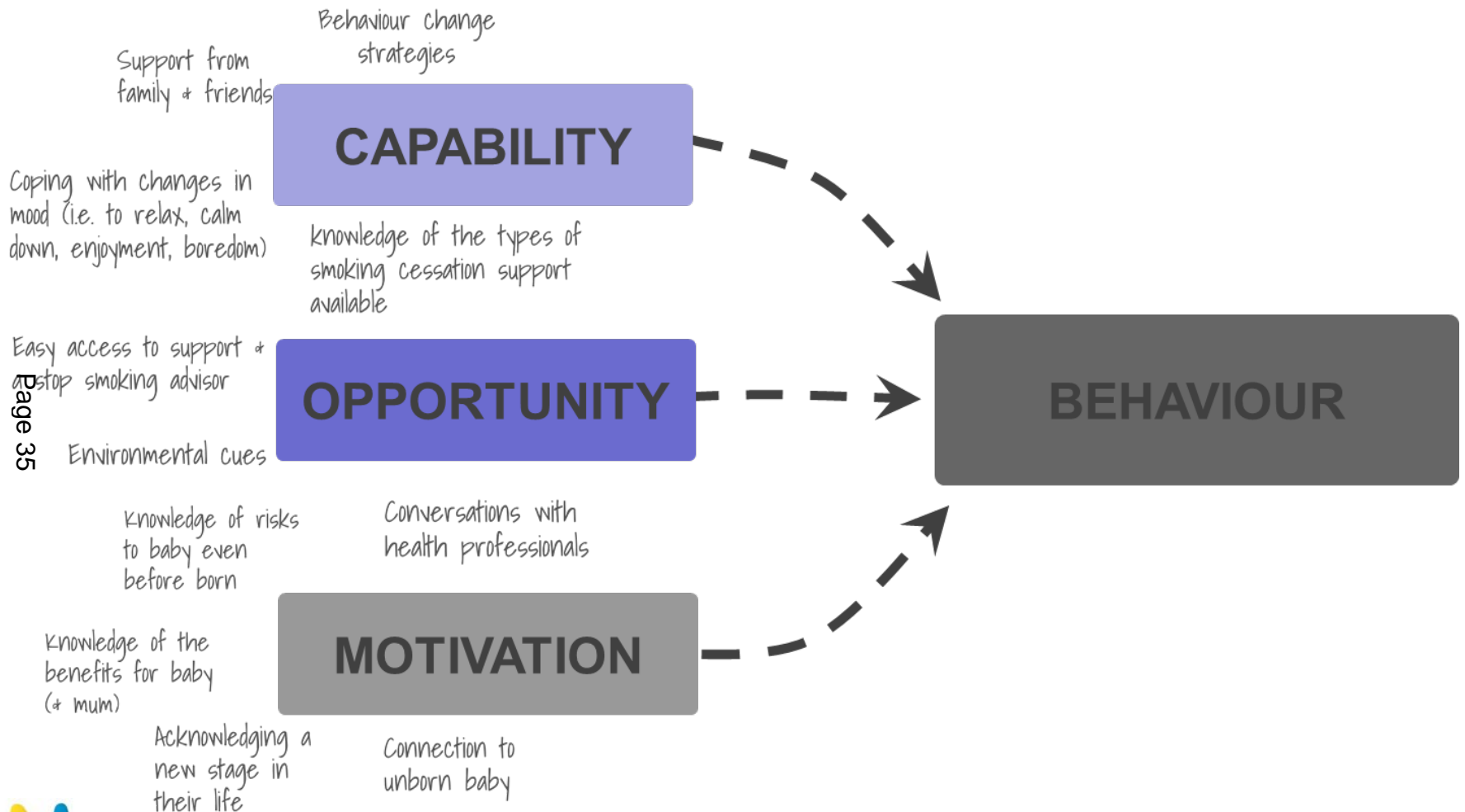
Some babies born to mums who smoke have malformations, like cleft lip, or a squint.



It's never too late in pregnancy to stop. It can be difficult, but smoking is much more harmful to your baby than any stress stopping may bring.



What is the issue?



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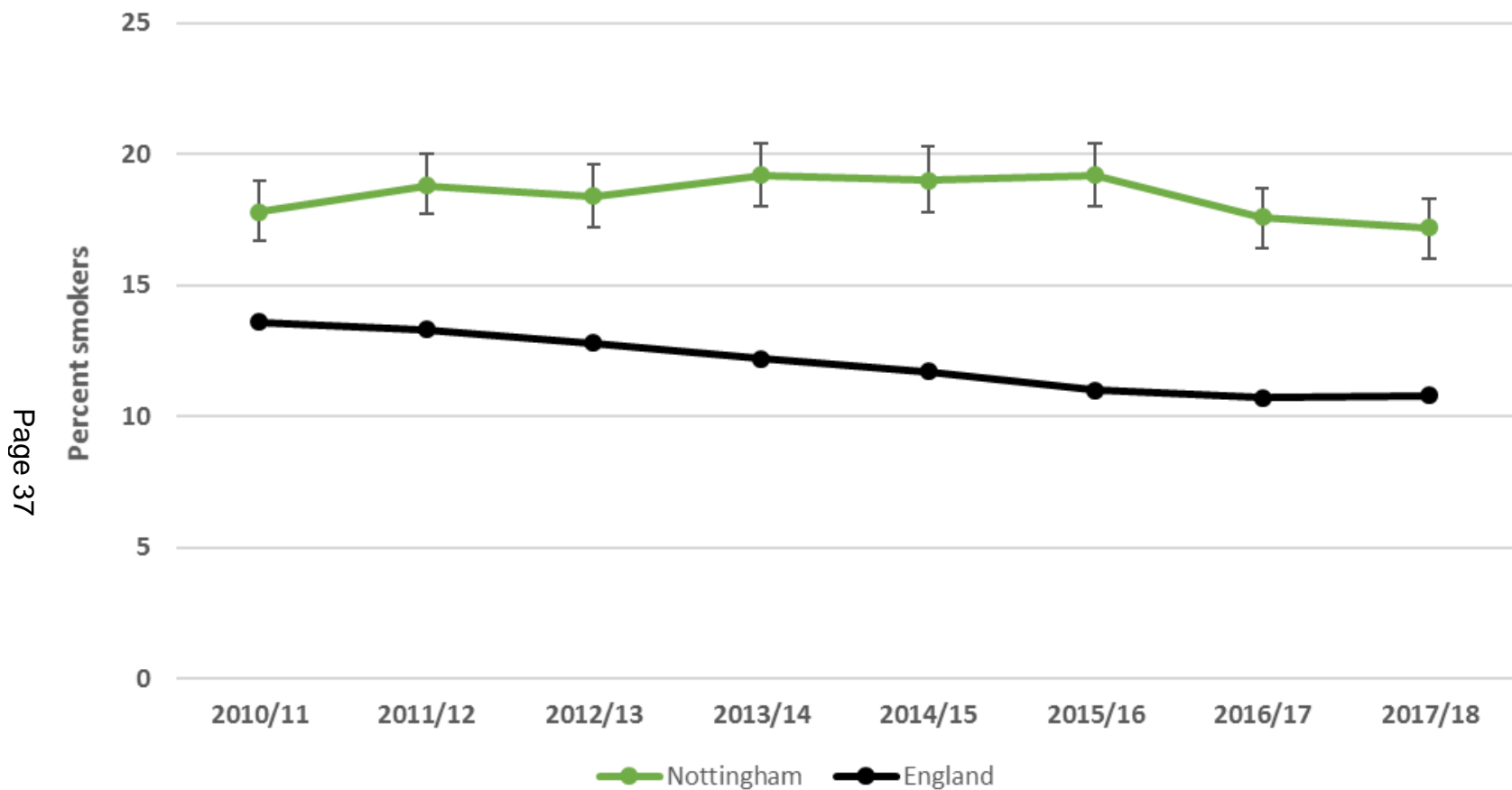
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Reducing the proportion of women smoking in pregnancy

- In 2017/18 17.2% of mothers in Nottingham City were **smokers at the time of delivery.**
- The **5th highest** rate amongst our statistical neighbours.
- The England average was 10.8%.

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Reducing the proportion of women smoking in pregnancy



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CASE STUDY VIDEO



Danielle's Story.mp4



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What are we doing to help?

New smoking in pregnancy post

(Fixed term for 18 months)



Page 39 love
bump ♥



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NHS
England

 **CityCare**
Building Healthier Communities



Nottingham
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General Awareness Campaign

- Posters for key venues such as GP surgeries, libraries, children's centres, hospitals;
- Bespoke website;
- Social media;
- Press release / case study;
- Staff comms: newsletters and intranets.

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- Bespoke, on-the-ground activity in two key City wards with high smoking prevalence:

1. Bulwell
2. Aspley

This will involve engaging with key opinion formers and groups, such as NDOs, councillors, Children's Centres and Small Steps Big Changes.

- This will be ongoing throughout the year.

Maternity staff toolkit and conversion cards...

love
bump

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Social media...



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Encouraging a healthy pregnancy

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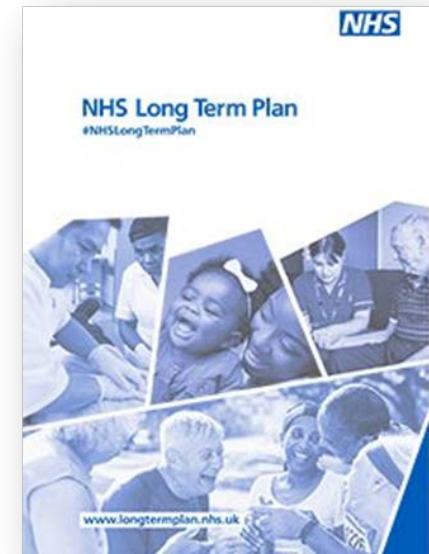
This Long Term Plan sets out new, funded, action the NHS will take to strengthen its contribution to prevention and health inequalities.

Wider action on prevention will help people stay healthy and also moderate demand on the NHS. The Long Term Plan commits the NHS to a number of specific new NHS prevention actions.

Smoking:

2.9. By 2023/24, all people admitted to hospital who smoke will be offered NHS-funded tobacco treatment services.

2.10. Second, the model will also be adapted for expectant mothers, **and** their partners, with a new smoke-free pregnancy pathway including focused sessions and treatments.



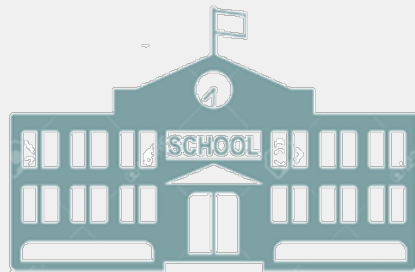
Reducing the proportion of year 6 children who are obese

Emotional & Behavioural



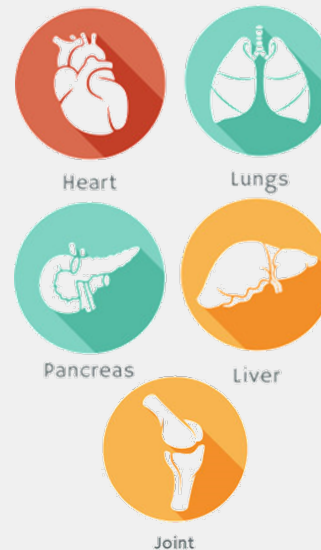
- Stigma
- Bullying
- Self-esteem

Education

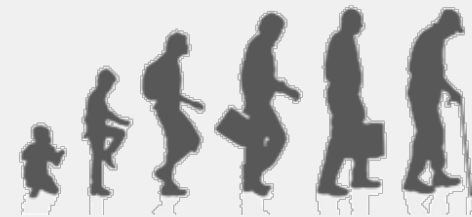


- School absence

Physical health



Long-term

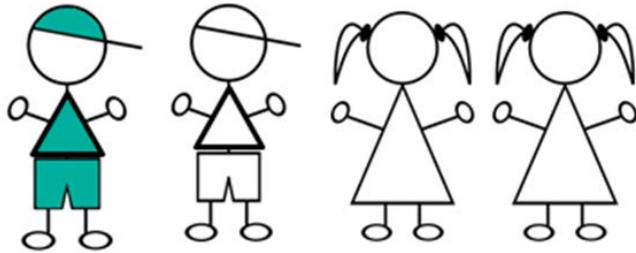


- Risk into adulthood
- Morbidity & mortality

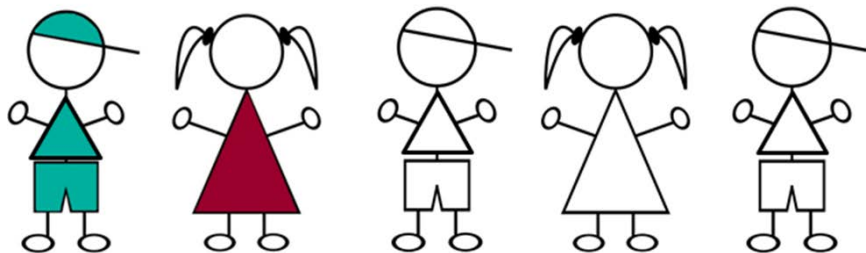


Reducing the proportion of year 6 children who are obese

More than one in four children in reception are overweight or obese in Nottingham (26.7%).



Page 47 Two in every five children are overweight or obese by the time they leave school in Nottingham City (40.8%).



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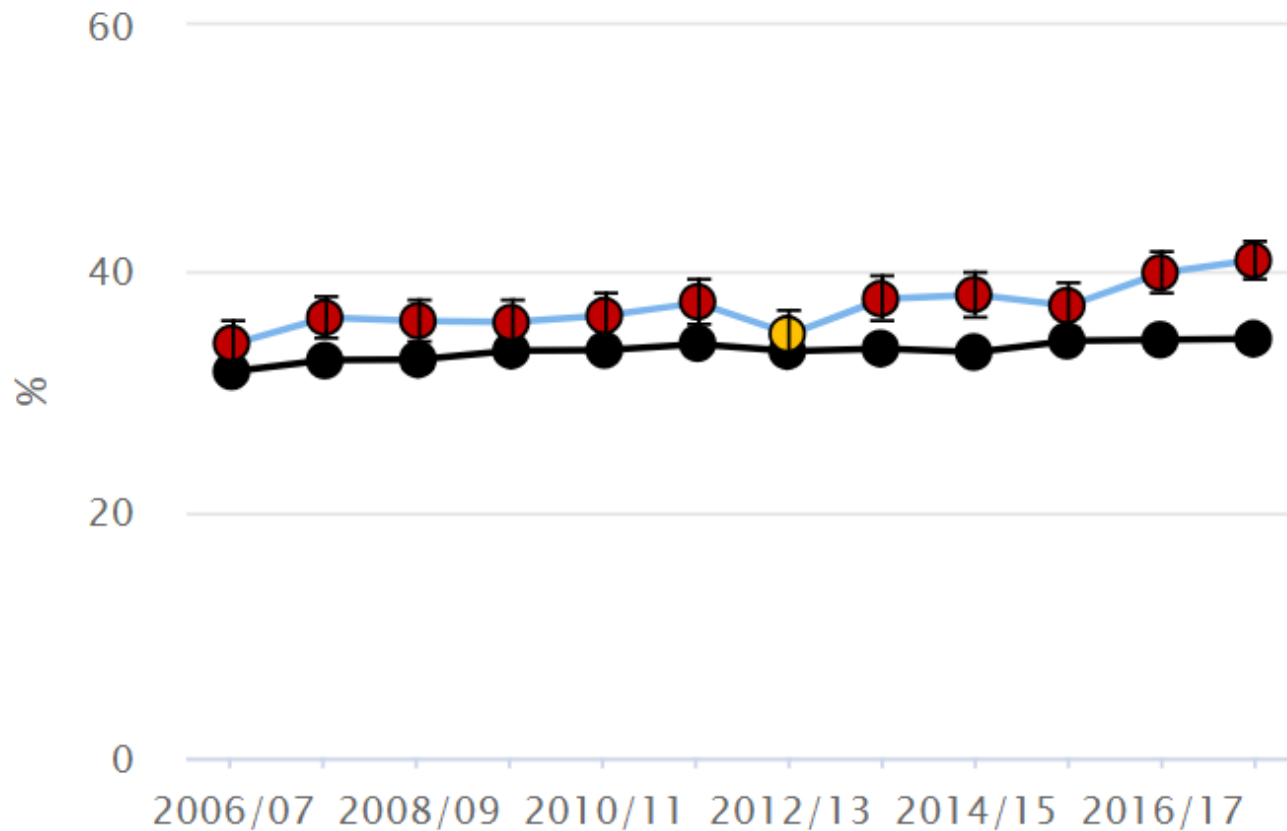
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Reducing the proportion of year 6 children who are obese



● England



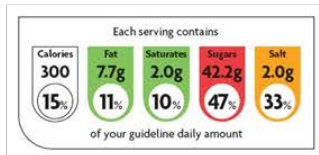
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Reducing the proportion of year 6 children who are obese



LABELLING

- Mandate calorie **labelling on the out of home sector** (including online food delivery)
- Explore what **additional opportunities** leaving the EU presents for food labelling.

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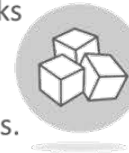


RETAIL

- Consult on **ban price promotions of HFSS food and drink** e.g. buy one get one free, multi-buy offers, unlimited refills etc.
- Consult on **ban the promotion of HFSS food and drink by location** e.g. checkout, end of aisles

SUGAR REDUCTION

- Consider **extending the SDIL** to milk based drinks if they fail to reduce sugar by 2020
- Consider **further use of tax system** if sugar reduction does not achieve the desired progress.
- Consult on introducing a **ban to end the sale of energy drinks to children**



Our national ambition is to halve childhood obesity & significantly reduce the gap in obesity between children from most and least deprived areas, by 2030

LOCAL COMMUNITIES

- **Trailblazer programme** to support LA
- Strengthen **Government Buying Standards** for food and catering services



SCHOOLS

- **Review physical activity offer**
- National ambition for **every primary school to adopt an active mile initiative**
- Update **standards for school foods** and ensure compliance
- Consult on use of **health start vouchers** to support low income families



MARKETING

- Consult on **Introducing a 9pm watershed for advertising HFSS products** in broadcast media with similar action in **online space**



Reducing the proportion of year 6 children who are obese

Local Action

Embedded within 0-19 service

- **Healthy Child Programme**

Brief advice from Health Visitors, Family Nurse Practitioners, GPs, Practice Nurses.

- **Healthy Weight Support Programme**

Targeted weight management provided by Public Health Nursing to up to 80 children/families per year.

- **Targeted interventions**

Breastfeeding peer support, Healthy Start Vouchers, Healthy weaning programme, Cook & Eat sessions.

Future work

Healthy weight pathway review

Three working groups have been set up to establish new integrated healthy weight pathways in Early years, School Years and in relation to NCMP.

Whole Systems

Network mapping:

- An exercise is underway to better understand who works with Nottingham City's young people on eating and moving for good health.

Whole system workshop (Date TBC):

- Aim is to map the local causes and identify their position amongst our collective action.
- A virtual network will be created and second workshop arranged to collectively establish the key priority points within our local system map.



Questions and comments

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Emotional health and wellbeing

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Youth Mental Health First Aid (MHFA) Training

Training in Schools by the Emotional Health and Wellbeing Consultants:

- 38 members of school staff have been in the 2-day Youth MHFA.
- 13 school staff have been trained on the 1-day Youth MHFA Champions course.
- 37 schools now have at least 1 member of staff trained in one of the course.

Training to Wider Children's Workforce:

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Trained 250 members of the children's workforce on the 2-day and 83 on the 1-day Youth MHFA.

- Provides skills to recognise young people showing early signs of emotional distress to support them appropriately.
- Helps to build on the 'time for change agenda' highlighting the need for improved public awareness, understanding and aiding people to think differently about mental health issues for young people.



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Emotional Health and Resilience Charter

- The Charter was set up by a partnership of local services who work with schools on mental health and emotional wellbeing.
- Schools are invited to sign up to the charter to demonstrate their commitment to promoting the mental health of their pupils and staff.
- The charter is based on a whole school approach to promoting positive mental health.
- Schools audit their current provision and set actions for development.
- Schools are supported by local services within the partnership as they implement their actions.
- Schools will be encouraged to share the impact of their development work through the dissemination of case studies.

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Prevention Is Key: SHARP's Early Intervention

SHARP offer self-harm clinics in **20 City Secondary Schools including alternative education** across Nottingham City every month this also includes:

- Workshops for CYP – Exam Stress-LESS, Key Stage.
- Assemblies – Understanding self-harm.
- Offering risk management and appropriate resources and further recommendations to the schools (includes consultation, safety planning, distress tolerance, harm minimisation).

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Prevention is Key: SHARP's Early Intervention

- **FREE training available to all City schools** - Over 5300 front-line professionals have attended training;
 - If Toys Could Talk (understanding harmful behaviour in primary children);
 - Self-harm and Suicide Awareness;
 - Understanding Transgender Children;
 - A to Z of Your Head (Mental Health training).
- **Professional Consultations** – management of self-harm/suicidal behaviours.
- **Trans4Me** – Weekly group for YP who identify as transgender/non-binary.
- SHARP have developed various resources for **Professionals and CYP** – Safety planning (Safe From Harm, Personal Safety Plan, Me:Source booklet, Crisis Card, Relapse Prevention).

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A powerful model for engaging young people in conversations about mental health and emotional wellbeing

So far

- 30 local young people were trained as citizen researchers across Nottinghamshire.
- Set priorities for improving young people's mental health.
- Delivered a number of engagement events and engaged over 500 of their peers.

Future

- Contract extended to 2020.
- Additional recruitment of new cohort of citizen researchers.
- More roadshows to reach up to 1000 young people/community members.
- Produce a short film to challenge stigma and raise awareness of support.
- Design a leaflet promoting sources of support.

Below is a link to a short video:

<https://www.youtube.com/watch?v=2E14pVGH4NM>

Questions and comments

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CHILDREN'S
PARTNERSHIP

PROUD OF NOTTINGHAM'S CHILDREN & YOUNG PEOPLE



Nottingham
City Council

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Nottingham City Council

Giving — Nottingham Children the Best Start in Life

Giving Nottingham Children the Best Start in Life

The transfer of commissioning responsibilities for the children's public health services to the Local Authority was finalised in October 2015

Page 62 This presented a unique opportunity to:-

- consider how services could integrate with existing children's delivery teams
- develop a universal and early help pathway for pregnant women, babies, children and young people; delivered in an integrated way, through a consistent evidence-based approach by a competent and confident workforce
- work innovatively and holistically to help children get the best possible start in life

The New Integrated Service Delivery Model

- The new integrated service delivery model is delivered jointly by Nottingham CityCare; Children's Public Health Nursing Service and Nottingham City Council's Early Help Team
- We are integrating Universal and Early Help services for children 0-5 years to minimise duplication and free professionals to work together in the best interests of children and families
- We are creating local area teams that align with the Local Area Committees and 8 Care Delivery Groups
- We are working within the shared outcomes framework, delivering evidenced based programmes in response to recommendations from the Child Development review
- We will have an integrated workforce development and learning plan

Overview of the Integration of Public Health Nursing and Early Help Services

The Joint Operational Group is responsible for:

- Developing an Operational Change Programme Plan (the Transformation Plan) for delivering a fully integrated service by 2020
- Determining how the Integrated Service Model will be delivered. This will be through a co-productive approach that engages the workforce and the community

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The Strategic System Change Board is responsible for:

- Ensuring that the Transformation Plan meets the expectation of the service specification and is implemented within the agreed timeframe
- Monitoring the implementation of the Integrated Service Delivery Model, including the consideration of headline performance measures and longer term outcomes

Timelines / Progress

- A transformation plan timeline highlights the areas of work being progressed per month to achieve an integrated service by 2020

				2018												2019												2020		
	Activity	Lead	RAG	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
1	Establish governance arrangements																													
1.1	Identify key stakeholders for the Strategic System Change Board and Joint Operational Group	DM/HB	G																											
1.2	Agree terms of reference for each group	DM/HB	G																											
1.3	Set up regular meeting dates	GT	G																											
1.4	JOG to agree sub-groups																													
2	Performance	HD																												
2.1	Establish a sub-group and agree Terms of Reference		G																											
2.2	Review original integrated service delivery model and update to reflect current capacity, prioritisation and service re-design		A																											
2.3	Identify a new set of key performance indicators for the integrated Best Start Service based on the above		A																											
2.4	Identify gaps in monitoring information collected at present to inform service delivery and reflect population need		R																											
2.5	Identify changes required to Liquid Logic and System and a timeline for amendments		R																											
2.6	Identify the intended impact of the system changes that relate to the integrated approach to service delivery and how they will be measured		A																											
2.7	Monitor the impact of the system changes		R																											
2.8	Implement the updated monitoring framework through a phased approach		R																											
2.9	Report on the monitoring information to key stakeholders		R																											
3	Places	AW																												
3.1	Establish a sub-group and agree Terms of Reference		G																											
3.2	Create a detailed map of the current property portfolio of Early Help and CityCare		G																											
3.3	Co-produce with colleagues, parents and carers a Places Development Plan		A																											
3.4	Identify appropriate venues for the delivery of an integrated and community-based service aligned to the 8 CDD areas that are accessible to all families in Nottingham City		G																											
3.5	Identify which team members from each organisation will be based in each venue		A																											
3.6	Offer surplus capacity to other providers at a market rate to generate income		A																											
3.7	Start to transition teams to their identified premises		G																											
3.8	Undertake an evaluation with families to assess their satisfaction with the venues offered		A																											
4	Practices	SC																												
4.1	Establish a sub-group and agree Terms of Reference		G																											
4.2	Review the revised integrated service delivery model and identify opportunities to improve working practices and deliver more effective and streamlined services to families		A																											
4.3	Identify tasks and finish groups to progress specific areas of work		G																											
4.4	Develop joint policies and protocols as appropriate		A																											
4.5	Work in partnership with the People sub-group to develop training programmes that upskill the 0-5 workforce		A																											
4.6	Undertake an evaluation with families to assess their satisfaction with the services offered		R																											
5	People	EM																												
5.1	Identify existing cross partner learning and development delivery available to the children's workforce and identify opportunities to share and learn from 'what works'		G																											
5.2	Enable co-design of a system approach to workforce development solutions where necessary		G																											
5.3	Respond to new developments and initiatives and disseminate information across partner agencies		G																											
5.4	Work with the Practices sub-group to identify areas of priority development need in the creation of policy and procedure to improve current practice		A																											
5.5	Specifically review, design and deliver a Child Development Programme with topics that support knowledge and understanding of child development from pregnancy to school entry and beyond		A																											
5.6	Build capacity to create leaders and managers that are ready to work collaboratively, including a review across partners of leadership programmes available		G																											
5.7	Support workforce planning issues that may arise from developing the Care Delivery Group model and aligning services		A																											
5.8	Develop a series of Workforce Events on cross-cutting themes and engagement sessions to bring together the range of colleagues in groups to share practice and make links		A																											
5.9	Evaluate the effectiveness of the support and training provided		A																											
6	Communications	ALL LEADS																												
6.1	Each sub-group lead will consider when relevant information needs to be communicated to whom and by when																													
6.2	AW, SC and DS will co-ordinate communications with the support of their organisation's Comm Team																													
6.3	The JOG will sign-off all comm updates																													
6.4	Regular updates will be published in the CIS newsletter and the SSEB newsletter and will be disseminated in the same week																													

Progress to Date: Performance Workstream

Aim: To develop a performance framework and data set to reflect the integrated approach to service delivery and enable progress to be monitored

- **Performance Indicators:** A high-level set of performance indicators that will reflect progress in key areas of the service specification and system changes has been accepted by the Strategic System Change Board
- **The Integrated Service Model** has been reviewed and partially amended to reflect current capacity, prioritisation and service re-design
- All Key Performance Indicators have been reviewed, amended and agreed by both organisations
- **System changes** and the intended positive impacts have been accepted for the Strategic System Change Board

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Progress to Date: People Workstream

Aim: To develop a unified 0-5's workforce that delivers services to families confidently and competently through a shared set of values and a consistent evidence-based approach

- **Parental Representation and Developing a Co-productive Model** – This subgroup is developing an engagement model to ensure parents' views are represented within workstreams and sub-groups
- **Child Development Training, including understanding of developmental milestones** – This subgroup is developing a training programme to ensure that the whole workforce has the good level of knowledge and skills in relation to child development
- **Applying Systems Leadership in an integrated setting** - Progress includes: Joint whole service development sessions, joint leadership meetings, joint team meetings and rolling out 'Change Champions' across both services.
- **Developing a Joint Approach to Assessing Families' needs** – This subgroup is reviewing and scoping a whole family approach to assessing a family's needs when delivering services

Progress to Date: Places Workstream

Aim: To review and identify appropriate venues, linked to the 8 CDG areas to deliver an accessible, integrated community-based service

- **Location of colleague desk space:** Mapping of desk capacity completed to increase co-location of Early Help and City Care colleagues within community buildings aligned to Care Delivery groups and Area Committee areas.
- **Detailed geographical maps** created showing placement of current delivery sites for Early Help and Nottingham CityCare Public Health Nursing services, alongside childcare providers/community venues who have identified potential capacity to support future service delivery in the community.
- **Parental involvement in improving the quality of venues through satisfaction questionnaires in Early Help and City Care venues** to inform the prioritisation of resources to upgrade buildings, improve aesthetics and accessibility, ensuring welcoming sites.
- **Improving colleague communication and accountability in shared office space:** Including room requests, computer / printing access, car parking, kitchen facilities etc.

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Progress to Date: Practice Workstream

Aim: To develop and deliver integrated, evidence-based programmes that guide and equip 0-5 practitioners to improve outcomes for children and their families in Nottingham City

- **Right Help at the Right Time Screening Meeting** -This subgroup is developing a strategy that will enable the integrated workforce to allocate the appropriate resource to a family to ensure that they receive the right help at the right time
- **Development of the Family Support Pathway 2018-2020** -This subgroup has supported the development of a new Family Support Pathway which reflects the integration of the Children's Public Health Nursing and Early Help services
- **2 ½ Integrated Review and Preparedness for School Review** -This subgroup is developing a standardised approach in the holistic assessment of children's development at key development stages as recommended in the Healthy Child Programme and Early Years Foundation Stage Framework
- **Development of a Healthy Weight Pathway** - This subgroup is developing a new integrated pathway that describes the support that will be offered to families with children aged from birth to 19 years to enable them to maintain a healthy weight
- **Specialist and Protection** - This subgroup is reviewing existing practice and developing new practice pathways in order to safeguarding children, young people and their families

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Title of paper:	YOUTH CABINET Q3 & Q4 REPORT		
Report to:	CHILDREN'S PARTNERSHIP BOARD		
Date:	20.3.19		
Relevant Director:	ALISON MICHALSKA	Wards affected: ALL	
Contact Officer(s) and contact details:	JON REA Jon.rea@nottinghamcity.gov.uk		
Other officers who have provided input:			
Relevant Children and Young People's Plan (CYPP) priority or priorities:			
Safeguarding and supporting children and families: Children, young people and families will benefit from early and effective support and protection to empower them to overcome difficulties and provide a safe environment in which to thrive.		x	
Promoting the health and wellbeing of babies, children and young people: From pregnancy and throughout life, babies, children, young people and families will be healthier, more emotionally resilient and better able to make informed decisions about their health and wellbeing.		x	
Supporting achievement and academic attainment: All children and young people will leave school with the best skills and qualifications they can achieve and will be ready for independence, work or further learning.		x	
Empowering families to be strong and achieve economic wellbeing: More families will be empowered and able to deal with family issues and child poverty will be significantly reduced.		x	
Summary of issues (including benefits to customers/service users):			
<p>This report summarises the work of various participation groups, events and activities that support children and young people's decision-making, convened through the CYP Participation Strategy and delivered through the Participation in Governance Programme calendar.</p> <p>The PiGP programme provides opportunities for a wide range of children, young people and their families and carers to participate in decision-making activities across the remit of the Children's Partnership Board and other Council-held strategic plans.</p> <p>Board partners are alerted to the achievements of these participation activities, and the forthcoming challenges and opportunities for participation work in the coming year.</p>			
Recommendations:			
1	The Board acknowledges the contribution made by children and young people to the work of the Children's Partnership Board and wider Council partners.		
2	The Board considers the opportunities and challenges outlined in the report, and reiterates its support for children and young people's active participation in decision-making.		
3	Board partners continue to support work done under the CYP Participation Strategy, and contribute to the refresh of the strategy in 2018-19.		

1. BACKGROUND AND PROPOSALS

1 Overview

This report details children and young people's participation in decision-making activity over the Q3 and Q4 period, as guided by the Children and Young People's Participation Strategy, and summarises the outcomes of engagement work completed through the Participation in Governance Programme (PiGP) in 2018-19.

2 Participation in Governance Programme 2018-19

PiGP is the principal work programme for the Children and Young People's Participation Strategy, and aligns the various participation forums, standing groups and bespoke activities into a calendar of events for the academic year, themed around the three main areas of decision-making and consultation: Learning and Earning (Autumn term); Safe Lives, Positive Neighbourhoods, Smart City (Spring); Healthy, Creative You (Summer).

PiGP enables the fulfilment of the Corporate Plan requirement to involve children and young people in Council decision-making activities. The two performance indicators for this a) Number of events and b) Number of participants. In 2018-19, PiGP achieved the following performance:

	Q1	Q2	Q3	Q4	2018-19 Total
Events (Target 60)	12	19	12	18	61
Participants (Target 1000)	208	272	238	511	1239

3 PiGP groups and activities

3.1 Youth Cabinet

3.1i In a busy Q3 period, the Youth Cabinet met with the Lord Mayor and Sheriff for discussions about young people's priorities, and heard about the role of the Civic Office. Youth Cabinet also offered both major political parties the opportunity to discuss their forthcoming manifestos for the May 2020 local elections. The group subsequently met with Rebecca Langton from the Council Leader's office to comment on the draft Labour manifesto. Members stressed the importance of creating opportunities for young people to undertake work experience through work placements, shadowing and employer visit programmes.

3.1ii In Q4 Youth Cabinet met with Cllr David Mellen to contribute to the Council's budget consultation. Areas of concern and interest raised through this consultation included:

- * Proposed reduction in Youth Service posts - counter-intuitive to be reducing posts while knife crime and other public safety issues on rise
- * New initiatives needed to tackle knife crime in school and in extra-curricular settings

- * Creating more opportunities for young entrepreneurs
- * Improving information on pathways to training and good jobs
- * The commercial and shared use potential of Council assets to offset losses in Government revenue – need to get young people's ideas for this

Elsewhere, Youth Cabinet members took part in the judging of the 2018-19 Jean Case youth awards, and also met for consultation with:

- Andrew Napier, Comms & Marketing lead for the Metropolitan Growth Strategy, to advise on how to reach young people with virtual and traditional marketing with the aim of raising awareness of training routes and career options for the 15+
- Catherine Kirk, RSE Lead, and Jane Hyland, PSHE Healthy Schools Lead, to advise on the RSE and Emotional Health and Well-being strategies, and consider ideas for RSE day on June 27th

3.1iii Youth Cabinet currently has 14 active members from a diverse range of backgrounds, including school, college and university students, and full-time workers including apprentices, and unemployed young people. The group accepts members from Year 11 upwards, and is supported by post-21 alumni, enabling involvement up to the age of 24. The group has recently been delighted to welcome members of other youth participation groups into Youth Cabinet, including young people from the Pythian Club, and Action for Young Carers. The group welcomes association with other participation groups and forums.

3.1iv Esther Akpovi currently represents Youth Cabinet on the One Nottingham Board, who also represents the group on the Children's Partnership Board, along with Eliza Larmond.

3.1v Larelle Flowers recently marked ten years of involvement in Council-led participation work. Larelle took part in work on the formation of the Children in Care Council in 2009, and has been involved ever since, becoming a member of the Youth Cabinet in 2017 while continuing with the CiC Council in a mentoring role. Larelle recently gained a youth work apprenticeship place with Nottinghamshire County Council, who will benefit greatly from his skills, experience and passion for young people's voice. His contribution to our work has been tremendous.

3.2 Youth Council

3.2i The Autumn Term Youth Council event in Q3 provided an opportunity for focus on the Learning and Earning theme, exploring work-readiness and apprenticeships through discussion, role-play and presentation. 25 young people from five of the city's six locality-based youth teams, generously hosted by young people from Bulwell Riverside, who organised the session timetable, guided groups through the day and made lunch for everyone. Partners included both the Metropolitan Growth Strategy and the Crime & Drug Partnership, who worked with young people to explore how issues like drug and alcohol abuse could affect young people's chances of progressing into good jobs. In addition, the group were joined by two colleagues on work exchange from the City of Ningbo Government, who immersed themselves in the role-play workshops and gave insights into young people's life in China.

3.2ii Youth Council in Q4 meanwhile has been merged with the Early Help Play and Youth Team's celebration event on 22th March, 6.30pm – 9pm at the Council House. Looking forward to Summer Term, the July edition of Youth Council is scheduled to take place on Wednesday 24th July, during the first week of the school summer holiday.

3.3 Primary Parliament

3.3i Ideas for promoting careers featured in the Q3 Primary Parliaments, while a discussion on technology challenges of the future led to a range of green-themed projects to take back to

schools. These included an air pollution-monitoring project supported by the Council's Clean Air team and Ignite! The results from this project were showcased at the Real Science in Schools Symposium during FOSAC19 (see below Section 3). The Q4 sessions in mid-March have focused on RSE and literacy, with consultations on the new Central Library development and the 'Big reader? Big future!' reading campaign, and work around activities to celebrate and spotlight RSE Day in June.

3.3ii One Nottingham has sponsored Primary Parliament for the past three years, enabling essential administration and facilitation support for the programme. However, this agreement ends this summer, so a new sponsor is needed for academic year 2019-20. Discussions are underway with education partners to secure future support, while suggestions for other sponsorship avenue are also welcome. Meanwhile One Nottingham is warmly thanked for its previous sponsorship, which made so much good work happen.

3.4 Children in Care Council and Your Voice care leavers' groups

3.4i CiC Council members met with Ofsted inspectors in Q3 to share experiences of care services. In the final Ofsted judgment, there was positive assessment of the way in which the Council listens to voice of CiC and involves them in decision making, and the CiC Council/Your Voice were picked out for praise by inspectors.

3.4ii Work in Q4 has focused on helping the Nottingham Children and Young People's Safeguarding Board understand young people's perspective on staying safe. Three members of the CiC Council designed and delivered a training event for children's social care workers, part of the Every Colleague Matters programme. 14 staff took part in the training, and took away positive actions to share with team members, and there were key messages for the Safeguarding Board lead to share with Board partners.

3.4iii CiC Council remains a strong participation group rooted in regular meetings and mixed programme of partner engagement and social/personal development activities, helping aid confidence, expression and decision-making skills. The group has an active membership of 12 young people, plus additional involvement from Your Voice members for joint consultation. Continual recruitment enables fresh members to be brought in, as others graduate out.

3.5 Other targeted and specialist participation groups

3.5i In Q4 young people from the Action for Young Carers' took part consultation on the proposed new Carers' Strategy, exploring views and experiences of carer identification, existing provision and future needs, and carers' life-balance requirements.

3.5ii With regard to SEND engagement, a programme of participation activities is currently being put together by Futures under the new Integrated Advice & Support Services contract, guided by the CYP Participation Strategy and mapped against the PiGP themes and events calendar.

4 Takeover Challenge

4.1 Takeover Challenge Week each November is a chance for local governments and other public sector institutions to give young people experience of decision making in a work environment. This year the Council supported a small number of shadowing days with Councillors, and also supported two members of the Children in Care Council to spend a day in Eat Culture kitchen at Loxley House, cooking a menu designed by other children in care.

4.2 While Takeover Challenge Week is a valuable opportunity for both young people and the Council, it is a time and labour intensive exercise requiring significant support from partners in both planning and delivery. Consideration needs to be given as to whether a repeat of the

programme is possible in 2019-20, and the what expectation there should be on Board partners to take on greater involvement in planning and managing the work.

5 Festival of Science and Curiosity (FOSAC)

5.1 Since its launch in 2015, FOSAC has developed into one of the principal platforms for CYP engagement and participation, providing an opportunity for partners to deliver a range of science, technology and creativity-based learning activities aimed at the whole family. Activities are strongly participative, encouraging shared and peer-to-peer learning, supporting self-led curiosity journeys. FOSAC aims to build confidence in people to ask questions, try new things and make choices. The programme is mostly free, and takes place in schools, the city centre and across neighbourhoods in and around the Nottingham area and the A52 corridor to Derby (in line with the Metropolitan Growth Strategy aims).

5.2 FOSAC19 in February was the fifth edition of the annual festival and its most successful yet. Indicative returns show more than 6,500 people took part in over 40 different FOSAC activities, at some 25 plus venues. While the event programme aims to be fully accessible, a number of specific SEND-friendly activities were incorporated into FOSAC19, with 'SEND Sunday' activities at 38 Carrington Street and Wollaton Hall.

5.3 A highlight of FOSAC19 was the second Real Science in Schools Symposium, which saw c.150 students, teachers, parents, Councillors, officers and FOSAC partners gathered to celebrate and share learning from the wide range of real science project research and application taking place in schools across the City and wider D2N2 region. Speeches by the Sheriff and Director of Education preceded a fascinating showcase of science and technology work taking place in local classrooms, which is helping inspiring STEM careers and skills learning, and supporting the Nottingham City Education Improvement Board's priority work to embed the Gatsby Benchmark standards for practical science teaching.

5.4 The recent establishment of a FOSAC board and not-for-profit trading company is the first part of a five-year sustainability strategy aiming to secure the long-term embedding of the festival in the city's cultural landscape, and broaden stakeholder support and sponsorship. Interest from within the D2N2, Metropolitan Growth Strategy, and Midlands Engine areas is offering new opportunities for partnership and audience development, enabling greater reach for our participation-led approach to learning engagement. The Council is represented on the FOSAC Board by the Director of Education, John Dexter and supported by Cllr Leslie Ayoola, and Lorel Manders from the One Nottingham partnership, which has been a long-time supporter and sponsor of the project.

6 University links

6.1 Work to strengthen the partnership with the city's universities has resulted in a number of pieces of work. Members of Youth Cabinet and the CiC Council took part in Nottingham Trent University's forum on post-Brexit democratic engagement, and will be supporting further participation events in April. NTU students are working on a programme of student parliament activities with local schools, supported by the Engagement Lead. Meanwhile the University of Nottingham has pledged to support Youth Council activities in 2019-20 through student volunteering time, and the provision of UoN venues and amenities. It is hoped that this partnership work will make an important contribution to the sustainability of area-based youth participation activity.

7 Proposed review and refresh of CYP Participation Strategy

7.1 The CYP Participation Strategy was launched in 2015 as a five-year plan for developing and maintaining children and young people's voice and influence in Council decision-making

processes. Its objectives are reflected as an action in the Council's Corporate Plan, with key performance indicators around the number of participation-focused engagement events held each year and the number of participants in them.

7.2 A review of the CYP Participation Strategy is proposed for 2019-2020, with the objective of refreshing the strategy to align with the new Corporate Plan, post-May 2020. Key factors to be considered will be:

- taking account of changes to staffing and resources in Council teams, in particular Early Help Play and Youth Team
- how the new area-based voluntary group and funding arrangements for CYP activities enable participation culture
- changes to sponsorship arrangements for Primary Parliament, and increasing partnership with academy trust and Nottingham Schools Trust;
- developing opportunities for partnership with external supporters including universities;
- utilising the increasing importance of partnership engagement platforms such as FOSAC for wide-spread whole-family participation.

8 Forthcoming work

8.1 In 2019-20 Q1 the participation focus will be on the theme of 'Healthy, Creative Me'.

8.2 Youth Council and Primary Parliament sessions will host workshops on healthy weight with the Public Health team, and take part in consultation on the emerging Sustainability Plan to 2050. Youth Cabinet members will continue work on RSE and PHSE strategies and RSE Day.

8.3 CiC Council members will support the assessment of the CiC and Care Leavers Have Your Say survey, and identify priorities for future Corporate CiC Council meetings.

8.4 A programme of civic engagement activities for Ningbo exchange schools is planned for July, enabling local and visiting students to take part in discussion and decision-making together at the Council House, supported by the Lord Mayor and Sheriff.

8.5 A new PiGP calendar for the 2019-20 academic year will be published in July, and distributed to Children's Partnership Board members. Partners are encouraged to discuss their 2019-20 participation needs with the Engagement and Participation Lead at the earliest opportunity.

2. RISKS

This work contributes directly to the fulfilment of a Corporate Plan commitment and is accountable through quarterly monitored performance indicators. Loss of this work programme would significantly impact on the Council's ability to meet this commitment.

3. FINANCIAL IMPLICATIONS

The Engagement and Participation core budget is currently £12,000 per annum, from which the full programme of participation work is delivered, with additional bespoke fund-raised monies where available. One Nottingham have previously provided £3,000 per annum in sponsorship for the Primary Parliament programme. The loss of this revenue in 2019-20 will potentially impact on the ability of the Engagement Lead to deliver the programme in its current form and may result in a reduction of availability of places for schools.

4. LEGAL IMPLICATIONS

None

5. CLIENT GROUP

All children, young people, families and carers

6. IMPACT ON EQUALITIES ISSUES

The programme provides a range of opportunities for public/group participation by vulnerable and protected characteristic groups, including SEND children and young people, young carers and the children in care and care leavers. Students from special schools participate equally with mainstream school students in Primary Parliament sessions

7. OUTCOMES AND PRIORITIES AFFECTED

All priorities of the CYPP are positively impacted by the empowerment and active involvement of children and young people.

8. CONTACT DETAILS

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Nottingham Children's Partnership Board

Ofsted Inspection of Children's Social Care

20th March 2019

Alison Michalska



**Nottingham
City Council**

Strengths (1)

- Clear vision across the service.
- Highly respected and visible leaders.
- Staff have a strong commitment to the City.
- Relatively low turnover of social workers and successful recruitment and development of newly qualified social workers.
- Impressive and responsive front door/MASH arrangements. Robust and timely multi agency responses keep children safe.
- Early intervention, edge of care services, targeted family support effective at supporting children in their own families.

Strengths (2)

- Thorough and timely assessments and good quality direct work by staff with families.
- Strong response to new and emerging complex/high risk safeguarding issues.
- Children in Care live in stable homes, siblings are supported to stay together.
- Children in Care report good relationships with their social workers and they are listened to and their views taken into account.
- Effective strategic partnerships.
- Wide array of family support services, play and youth services which identify early the children in need of help.

Significant areas of improvement since our last inspection

- **Fostering service**
- **CiC services**
 - Effective specialist support for UASC,
 - Stronger staff teams, manageable caseloads for staff
- **Care leavers**

Inspectors Concerns

- Capacity of Social Workers to manage the high demands and complexity of need in the City.
- Capacity of front line and middle managers.
- The Virtual Schools is not yet ensuring a good education for all Children in Care.
- Page 83 Not all plans for children are clear enough as to what is expected of the family and not always progressed in a timely way.
- The number of young people detained overnight in Police cells.
- Levels of child and family poverty and resultant neglect.



Areas for Improvement

- Management oversight of private fostering.
- Quality of planning for children and their review.
- Timely action for children living with sustained neglect.
- Quality of management oversight and supervision of social workers to progress children's plans.
- Quality/consistency of return home interviews for children who go missing.
- Educational progress and achievement of children in care.
- Availability of sufficient and suitable emergency accommodation for vulnerable young people and children with complex needs.
- The progress and timeliness of permanence plans for children inc. fostering for adoption.

Next Steps

- Improvement plan developed and due to be submitted March 2019.
- Ofsted Annual Challenge Conversation (May 2019).
- Focussed visit or JTAI expected within the next 18 months.
- Full inspection expected in next 3 years.
- Next inspection is likely to be SEND Local Area Review by the end 2019/20.

Link to report on Ofsted website

<https://reports.ofsted.gov.uk/provider/44/892>





Children's Partnership Board Forward Plan

June 2019 (Date tbc)

CYPP Priority: Safeguarding and Supporting Children and Families
Young People and Knife Crime Update
Children's Partnership Board EOY Action Plan Update
Supporting Mental Health in Further Education
Terms of Reference Update
Partner Update: Greater Nottingham CCG

September 2019 (Date tbc)

CYPP Priority: Empowering Families to be Strong and Achieve Economic Wellbeing
Update on Disabilities and Transitions
Update on Young Carers
Reorganisation of Youth and Play Offer
Youth Cabinet Update
Partner Update: DWP Jobcentre Plus

December 2019 (Date tbc)

CYPP Priority: Supporting Achievement and Academic Attainment
Update on Exclusions / Managed Moves
Nottingham Schools Trust Update
Safeguarding Board Annual Report and Business Plan
Partner Update: Nottinghamshire Police

Please contact Emily Humphreys if you have any suggestions for future items for the forward plan: emily.humphreys@nottinghamcity.gov.uk

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