

Minutes of the Children's Partnership Senior Officer Group

Monday 5th March 2012, 09:00 – 11:30

Room 2.11, Loxley House

Attendees

Ian Curryer (Chair)	Corporate Director of Children and Families, NCC
Teresa Cope	Director of Contracting, Quality and Delivery, NHS Nottingham City Clinical Commissioning Group
Angela Walker	Senior Probation Officer, Nottinghamshire Probation Trust
Brian Beasley	Superintendent, Nottinghamshire Police, City Division
Jane Wilson	Children's Locality Manager - North, Nottingham CityCare Partnership
Deborah Hooton	Head of Joint Commissioning for Children and Families, NHS Nottingham City Clinical Commissioning Group
Ellen Martin	Senior Strategy & Commissioning Manager, Crime & Drugs Partnership
Teresa Flower	Aspiration Strategy Manager, NCC
Viv McCrossen	Head of Family Community Teams Central, NCC
Sara-Jane Brighthouse	Project Manager, Family Community Teams, NCC
Elise Darragh	Insight Manager, Commissioning & Insight, NCC
Dot Veitch	Partnership Support Officer, Early Intervention & Partnerships, NCC

Apologies

Liz Asher	Projects Director, Playworks (Representing the Voluntary Sector)
Shirley Smith	Representation: Teresa Cope
Chris Wallbanks	Programme Manager Early Intervention & Partnerships
Phyllis Brackenbury	Representation: Deborah Hooton and Jane Wilson
Jane-Belinda Francis	Head Teacher, Springfield Primary School
Jean Pardoe	Chief Executive, Futures (Connexions)
Simon Nickless	Representation: Superintendent Brian Beasley
Sheila Wright	Representation: Angela Walker

Item	Detail
1	<u>Welcome and apologies</u> <ul style="list-style-type: none"> ▪ Attendance and apologies noted as above.
2	<u>Minutes, Matters Arising and Action Log</u> <ul style="list-style-type: none"> ▪ Minutes were agreed as an accurate record by those present at the January meeting. ▪ All actions were agreed as either complete or on track.

Items for discussion

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| 3 | <p><u>Family Support Implementation</u></p> <ul style="list-style-type: none">• This item led by Viv McCrossen gave the background , and asked for endorsement to be agreed, of the draft family Support Strategy Implementation plan• The Family Support Strategy (FSS) and Pathway Guidance for Practitioners were launched in 2011• The Implementation Plan is now two years into the four year delivery and achievement is high• The purpose of the strategy is to provide a consistent approach to the delivery of family support services whilst shifting focus towards greater prevention and early intervention• The below action point in relation to accountability will be particularly important when business moves from the SOG to the public forum of the Children's Partnership Board and the Local Authority CAF service is disestablished. Representatives will therefore need to be at an appropriately high level in order to give quality information and handle sensitive public enquiries• Family Support Strategy and CAF performance and reporting will have to be developed further and it is crucial that partnership agencies have robust practices in place to monitor and report on their own CAF performance via the Family Support Implementation group• IC thanked VM and team for their work on developing the FSS Implementation. It is breaking new ground and has received great interest from other organisations. Now with the full endorsement of the SOG it can be moved from draft to full operational status• The Senior Officer Group are asked to identify CAF champions and representatives for the Family Support Implementation Group and to send nominations to VM by the end of March |
| 4 | <p><u>Aspiring Nottingham</u></p> <ul style="list-style-type: none">• This item led by Teresa Flower gave the background to the development of Aspiring Nottingham as a cross cutting theme within the Nottingham Plan to 2020 and covered the draft Aspiring Nottingham Delivery Plan• TF recognised that the strong partnership commitment and support already shown by the Partnership to this agenda will now help translate the next phase into further action• BB congratulated TF on this area of work and how it linked into areas and initiatives such as 'guns and knives'• IC commented on how this cut across all areas of the Children and Young People's Plan and that it has been clearly identified how lack of aspiration is at the root of many problem areas. It should therefore be embedded into all work and be a cross cutting theme for all agencies• BB asked how this could fit into the varied governance structures across agencies• TF explained that the report would also be going to the Children's Partnership Board and would link into the emerging Health and Well being Board• IC recommended going back to the original source of One Nottingham to make sure this was considered in all new work• EM requested more information on how other organisations have implemented this and will look at how to develop Aspirations within the CDP• AW asked for the availability of the listed toolkits and TF explained that as they become available they will be added to the Children's Partnership web• TF to take Aspiring Nottingham to a future One Nottingham meeting |

5	<p><u>Health Visiting</u></p> <ul style="list-style-type: none"> • This item was introduced by Jane Wilson and Deborah Hooton and gave the background to the expansion of the Health Visiting Service • This sets out the government commitment to; delivering a larger, re-energised health visiting service, offering a new model of family support and building on the Healthy Child Programme • The expansion will transform health visiting but present challenges such as a huge commitment to recruitment and training. • Retaining the workforce with career development will be key • The expansion will underpin Early Intervention working in areas of high deprivation and take into account the complexity of our families with a mix of case loading approaches • GPs are very engaged and have critical information • IC commented that placing Health Visitors in Children’s Centres rather than GP practices would reach a wider more vulnerable audience • JW & DH commented that the increase in numbers would enable them to cover all key areas but they would ensure the debate on this was carried forward • By September the present cohort of students will qualify with a new intake of 21 qualifying in January • DV to get promotional recruitment DVD displayed in the public area of Loxley house
6	<p><u>Performance</u></p> <ul style="list-style-type: none"> • This item was presented by Elise Darragh and covered key areas of strong performance and areas of challenge from Quarter 3 • Some key areas of achievement were : <ul style="list-style-type: none"> ○ Numbers of Child Protection plans continued to fall to 333. CP reviews were completed within timescale for the third consecutive quarter of this year. ○ All Early Intervention work streams were on track and are due to achieve progress within timescales. ○ The number of CAFs continued to increase and at Q3 754 were initiated compared to 359 against the same period last year. ○ An Ofsted judgement of ‘good’ was awarded for the recent fostering inspection. ○ Tier 2 CAMHs within the Malt fully met its performance targets relating to waiting times and activity levels. ○ Teenage Pregnancy showed a slight increase of 1.8% in Q3 However the rate is 23.7% below the 1998 baseline and below the target of 57.7 ○ Re-offending rates continued to reduce from 0.98 (Q2) to 0.93 (Q3). There has been a 17% reduction in first time entrants in Q3 and an 18% reduction in custodial sentences compared with the same period last year. ○ Primary school persistent absence rates have improved at 2.6% ○ Nottingham has the lowest NEET population compared to its core cities. The rate at Q3 was 5.2% (434) which was 0.6% lower than Q2 (533) ○ 46.7% of pupils achieved level 2 including English & Maths in 2011. This was up 2.5 percentage points from the 2010 final results (44.2 ○ 76.6% of pupils achieved level 2 in 2011. This was up 4.3 percentage points from the final 2010 result (72.3%). ○ Drug offences committed by under 18s are on track to be lower than 2010/11. There were 30 fewer offences recorded compared to the same period in he previous year.

	<ul style="list-style-type: none"> • Some key areas of challenge remain: <ul style="list-style-type: none"> ○ Increasing numbers of Children in Care. At Q3 there were 545 ○ 13 permanent exclusions from maintained schools during the autumn term 2011 (and a further 7 when academies are included) ○ Nottingham has the 10th highest level of child poverty with 35% of children in poverty in 2011. ○ The new DfE threshold for persistent absence from 15% to 20% will double the number of persistent absentees. The secondary school pa rate has improved (5.6%) but fell short of the 5% target. ○ The move of all secondary schools to academy status will mean that the LAs ability to influence outcomes will be diminished. New Ofsted framework will put some schools at risk of lower ratings. <p>Performance in many areas is extremely strong and positive and where performance remains a challenge robust action plans are in place to address issues.</p> <ul style="list-style-type: none"> • IC Two areas which require discussion at the Children’s Partnership Board and recovery plans are; NI 061 (placements into adoption) and from Health Immunisations & Vaccinations particularly in relation to how this affects attendance
7	<p><u>Future Partnership Operation</u></p> <ul style="list-style-type: none"> • This item was led by Ian Curryer and developed from earlier SOG discussions • The positive action and range of work delivered or influenced by the SOG over the four years it has been in place has been recognised and valued by the Children’s Partnership • Since the removal of Trust and statutory status and more recently the emerging Health and Well Being Board (HWB) agenda the Partnership Operation and any duplication of resource and direction has been under review • The development of the HWB makes it appear likely that there will be a range of sub groups including a strategic officers group developed by Ian Curryer, Dawn Smith and Peter Cansfield • The Children’s Partnership Board will continue to operate the children’s agenda • It was agreed that it is now timely to disestablish the SOG and remit any outstanding work to the Children’s Partnership Board • A notice will be sent all SOG members and any organisations not represented on the Board will be invited to join the membership • One area of caution is that if the Health and Social Care Bill is not approved by Parliament there may be need for a further review • Letter of closure and thanks to be sent to all SOG members • Organisations not presently represented to be invited to join the Board • Any outstanding work to be referred to the Board
7	No other business recorded