

**Minutes of the Children's Partnership Senior Officers' Group**  
**Monday 23 January 09:30 – 11:30**  
 Room 2.11, Loxley House

**Attendees**

Ian Curryer	Corporate Director of Children and Families NCC
Chris Wallbanks	Programme Manager Early Intervention & Partnerships NCC
Liz Asher	Director of Playworks Representing the Voluntary Sector
Phyllis Brackenbury	Assistant Director of Children's Services, CitiHealth Nottingham
Deborah Hooton	Head of Joint Commissioning, Children & Families NHS
Jane Belinda Francis	Head Teacher, Springfield Primary School (representing all City Schools)
Simon Nickless	Chief Superintendent, Nottinghamshire Police, City Division
Susan Martin	Nottinghamshire Probation
Satinder Gautum	Director of Safeguarding NCC
Dr Peter Cansfield	Acting Director of Public Health
Gill Ellis	Director of Schools and Learning NCC
Tim O'Neill	Director of Family Community Teams
Viv McCrossen	Head of Service Central Locality, Family Community Teams NCC
Mandy Smith	CAF Co-ordinator, Family Community Teams NCC
Chris Cutland	Chief Executive Women's Aid Integrated Services
Paula Clarke	Stronger Families Programme Manager Women's Aid Integrated Services
Clare Gilbert	Lead Commissioning Officer, NCC
Dot Veitch (minutes)	Partnership Support Officer

**Apologies**

Jean Pardoe	Chief Executive, Connexions
Sheila Wright	Deputy Chief Officer and Director of Operations, Nottinghamshire Probation <b>Representation: Susan Martin</b>
Shirley Smith	Assistant Director of Joint Commissioning Nottingham City Clinical Commissioning Group NHS <b>Representation: Deborah Hooton</b>

Item	Detail
1	<u>Welcome and apologies</u> <ul style="list-style-type: none"> <li>Apologies noted as above</li> </ul>
2	<u>Minutes, Matters Arising and Action Log</u> <ul style="list-style-type: none"> <li>Minutes agreed with no matters arising and no outstanding actions</li> </ul>
<b>Items for discussion</b>	
3	<u>CAF Performance</u> <ul style="list-style-type: none"> <li>This item, presented by Viv McCrossen and Mandy Smith, gave an update on CAF performance and the future</li> <li>There has been a continuing upward trend in CAF performance with a 74% increase in the twelve months up until 31<sup>st</sup> December and a 127% increase in this Quarter 3 against last year's Quarter 3</li> <li>Initial findings from 1<sup>st</sup> April to 21<sup>st</sup> November show that the four groups of vulnerable children being monitored for the percentage supported through CAF are: teenage pregnancy 55%; persistence absence 25%; exclusions 33% and permanent exclusions at 38%</li> <li>A CAF audit was carried out during November and December as part of NCC's Quality Assurance process. The five categories audited were: <b>at risk of exclusion</b>; persistent absence; teenage pregnancy; unborn babies and cases initiated by the voluntary sector. Outcomes are recorded in more detail in the report</li> <li>One of the key overall findings of the audit was that where CAFs with all four stages are put in place outcome results improve</li> <li>PC recognised the great progress but was concerned at what happened to those not on a</li> </ul>

## CAF

- VM clarified that the Family Support Strategy identifies cases at the earliest stage but relies heavily on universal services
- PB expressed concern that Health & Local Authority data doesn't relate and also that cases where parental consent was not given should be followed up in some way
- MS confirmed **something very similar is being done by the Education Welfare Service**
- IC stated that if parental consent was not given and we have identified risk, although there is no national guidance, we may need to intervene. This might not be a full CAF but a similar multi agency report.

**Action point: VM to pull together some information for discussion at the Partnership board in relation to cases of risk where parental consent has not been given**

- JBF asked if there was any comparative data on referral numbers between schools in similar areas as she felt that this was varied. It was suggested that every EIP should have it on the Head Teacher's meetings agenda to raise the profile further
- IC suggested that this could also be raised through Head Teacher briefings and through the Children's Partnership Board
- **Action point: TO'N suggested that it would be useful to capture in a concise message for head teachers and he will look at this**
- IC said that there had been very good progress from last year's position and thanked everyone for their hard work **and requested the performance report be presented to the board**

## Recommendations

- All four report recommendations were accepted

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## CYPP Priorities

- This overview of progress on the five CYPP priorities was introduced by Chris Wallbanks with individual presentations by the relevant accountable officers

## Stronger Safeguarding by Satinder Gautum

- The implementation of Mini MASH is due in April, the direction of travel for this has been endorsed by recent inspection
- The implementation of the new Working Together report and the Munro Review will require a large amount of partnership working
- The results of the recent Fostering report are due on 28<sup>th</sup> and indications are good with outstanding features. There is an adoption inspection due in August
- IC stated that the work on Suicide was a good piece of work; although numbers are small impact is significant. Observations of calls into safeguarding show a high number with excellent signposting systems in place
- There will be a review of the Safeguarding Board in the next period
- The Munro report will need strong partnership discussion and working, will plug into troubled families work and influence how we collect and understand work in families

## Healthy Living by Dr Peter Cansfield

- IC congratulated PC on his new role as Acting Director of Public Health
- The Teenage Pregnancy (TP) model (small strategic group linking with wider stakeholder network) works well. Although still higher than the national average rates are continuing to fall and maintaining this will require consistent support
- IC asked that if sustained TP improvement is now the norm do we need to drop structures away
- PC felt that we need to maintain progress
- SN agreed and felt that we need to look at why this model is successful and replicate this for other key areas
- Healthy Weight shows evidence of a slowing down in the rise of child obesity due to a push on the child side but the adult side needs developing
- PB mentioned that work on the Child Measurement programme is high on Nottingham's agenda
- The Infant Mortality gap between Nottingham and the rest of England is narrowing

## Achievement and Attainment by Gill Ellis

- There have been some great successes in Early Years and Key Stages 1,2 and 3

- JBF asked if the data included Academies
- GE confirmed this but advised that the data was also kept separately if needed
- JBF said that there was an issue around children moving areas where they might miss school as there was not a place available in their new area. This affected attainment which skewed results
- IC advised that the challenge on this is that house moves are for a variety of reasons, can't wait for term changes and that there is a need to work with Nottingham City Homes.
- GE explained that overall in the City there are sufficient school places but these may not always be in the right place
- IC confirmed that there is a problem with primary places in the city centre

#### Improving Attendance by Tim O'Neill

- Persistent Absence rates have improved in Primary and Secondary schools although the rate of improvement is slowing
- JBF commented that the attendance tool was good and that the 'day off for a birthday' culture was changing
- IC Persistent Absence may need a corporate response i.e. a week of action. Issues such as register marking need to be standardised i.e. if a child attends at 9.15 some schools mark them as late whereas others mark them as absent. Absence at primary school is more about the family than the child.
- SEN is above target for the issuing of statements within 26 weeks
- In the autumn term there has been an increase from autumn 2010 in secondary permanent exclusions of 87.5% whereas primary numbers have remained the same. This gives an overall exclusion increase of 64%
- There are a range of areas of focus but we basically need a 'Turn every stone' approach

#### Recommendations

- Recommendations one and two were accepted
- Recommendation three was agreed in terms of having more detailed sessions but the timetable will be reconsidered after the March SOG

#### 5 Young People's Substance Misuse Transition arrangements

- This item was presented by Chris Wallbanks with input from Clare Gilbert
- The restructuring of the Quality and Commissioning Directorate has resulted in the most effective way to take forward the Young People's Drugs Agenda being considered. It was proposed that the CDP take the lead
- Funding discussions, governance arrangements and risk management are still under development

#### Recommendations

- All three recommendations were accepted

#### 6 Stronger Families Presentation

- This item was presented by Chris Cutland and Paula Clarke from Woman's Aid Integrated Services
- The impact of Domestic Violence on children was illustrated
- This is a 12 week programme of one and a half hour sessions which runs concurrently for groups of children and groups of mothers
- Evaluation has shown good results in lowering repeat rates which increases preventative cost savings. The programme impacts on many other long term areas such as behavioural issues and improved communication in families
- SN said that this was an excellent programme but with small numbers and the fact that it is only people who have left their DV situation means that we need to see it in context
- CC welcomed the idea of a wider partnership approach to DV
- **Action Point IC will talk to Candida Brudenell about a broader commissioning review**
- PC advised us that there will be a Public Health forum on DV on 21 February 2012
- The Partnership was asked to continue support through provision of facilitators, gathering of evidence and funding

7	▪ CWFD As no comments were received closure was agreed
8	▪ Forward Plan. It was noted that the CYPP priority detailed report be delayed until the Performance Year end in order to give sufficient time for full discussion of the Future Partnership Operation and emerging Health and Well-Being Board developments
9	Any Other Business There were no items for discussion
10	<b>Next meeting</b> <b>5<sup>th</sup> March 2012 09.30 – 11.30 Loxley House Room 2.11</b>