



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

MINUTES of the meeting held at LB41 - Loxley House, Station Street, Nottingham, NG2 3NG on 15 October 2014 from 4.34pm – 6.24pm

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| ✓ Councillor David Mellen | - Chair of the Board and Portfolio Holder for Children's Services |) | |
| ✓ Chris Wallbanks | - Programme Manager Early Intervention and Partnerships |) | |
| ✓ Councillor Sam Webster | - Executive Assistant for Schools Engagement and Participation Lead |) | Nottingham City Council |
| ✓ Jon Rea | - Officer |) | |
| Alison Michalska | - Corporate Director Children and Families |) | |
| ✓ Sally Seeley | - Director of Quality and Delivery, NHS Nottingham City Clinical Commissioning Group | - | NHS Nottingham City Clinical Commissioning Group |
| Angela Horsley | - Clinical Lead | - | Nottingham Children's Hospital |
| ✓ Phyllis Brackenbury | - Children, Young People, Families and Health Improvement | - | Nottingham CityCare Partnership |
| Andrew Goodall | | | |
| ✓ (substitute for Paul Burrows) | - Inspector | - | Nottinghamshire Police |
| Clare Fox (substitute for Christine Oliver) | - Strategy and Commissioning Manager | - | Crime and Drugs Partnership |
| ✓ James Strawbridge | - CONGA (City of Nottingham Governors' Association) Representative |) | |
| ✓ Andy Sloan | - Head Teacher, Rosehill School (Special School representation) |) | |
| Jill Robey | - Head Teacher, Nottingham Nursery School and Training Centre |) | Nottingham Schools |
| Karen Slack | - Head Teacher, Rise Park Primary School |) | |
| ✓ Sean Kelly | - Principal Valley Academy (Secondary School) |) | |
| Paul Burnett | - Independent Chair | - | Local Safeguarding Children Board |
| Jean Sharpe | - Senior Customer Services Manager | - | JobCentre Plus |
| Stephen McLaren | - Literacy Volunteers | - | Community and Voluntary Sector |
| Malcolm Cowgill | - Principal, Central Nottingham College | - | Further Education |
| ✓ John Yarham | - Chief Executive | - | Nottingham and Nottinghamshire Futures |
| ✓ Sue Smith | - | - | Nottinghamshire Probation Trust |

✓ Charlotte Croft - Youth Cabinet Member) Youth Council

✓ Indicates present at meeting

Colleagues, partners and others in attendance:

| | |
|------------------------|---|
| Michelle Wright | Futures Advice Skills and Employment |
| Lynne McNiven | Consultant in Public Health |
| Marie Cann-Livingstone | Teenage Pregnancy and Early Intervention Specialist |
| Sean Kelly | Top Valley Academy |
| Debbie Barton-Moran | Nott's Police |
| Viv McCrossen | Head of Family Community Teams Central |
| Sara Jane Brighthouse | Project Manager Family Community Teams |
| Dot Veitch | Partnership Support Officer |
| Cath Ziane-Pryor | Governance Officer |

13 APOLOGIES FOR ABSENCE

| | |
|------------------|-------------------|
| Karen Slack | Clare Fox |
| Alison Michalska | Robert Ghahremani |
| Dawn Smith | Uzair Hashimi |
| Stephen McLaren | Malcolm Cowgill |

14 DECLARATIONS OF INTERESTS

Councillor Sam Webster informed the committee that he is employed by Futures but as the item to be presented is for information, he would not speak and did not intend to leave the room.

15 MINUTES

The minutes of the meeting held on 2 July 2014 were confirmed and signed by the Chair.

16 PARTNER UPDATE: FUTURES

To accompany the report, John Yarham and Michelle Wright of 'Futures Advice Skills and Employment', delivered a presentation which was included on the online agenda following the meeting.

The following points were highlighted:

- (a) Futures is an independent and 'not for profit' organisation providing services to the City and County Councils;
- (b) the primary purpose is to prepare and support young people for employment and through all major transitions;
- (c) Futures aims to ensure that the levels of young people 'not in education, employment or training' (NEET) or 'not known' remains as low as possible;
- (d) highly qualified advisors work with young people from aged 14/15 to help them decide their long term aspirations and provide advice and support;

- (e) a data base of all young people in the City aged 13 to 19 years of age is maintained but only those most in need of support, meeting specific criteria, are prioritised to receive that support;
- (f) dedicated support is provided to the Youth Outreach Team and Leaving Care Teams to ensure support is available for those young people in most need;
- (g) every child in the City reaching the age of 16 is accounted for and their designation, ie training, is recorded;
- (h) Futures fulfils the City Council's responsibilities for the 'September Guarantee' of every young person being offered a place in learning as well as 'raising of the participation age';
- (i) to counter the funding cuts which are experienced nationally, Futures has diversified by offering a careers service, providing an apprenticeship agency and selling services to schools and colleges, and winning work through the European Social Fund.

Questions from the Board were responded to as follows:

- (j) a transitions team has been established to engage with emerging communities. In addition the Arts Award project has brought people and communities together whose first language is not English;
- (k) it is a concern that Ofsted do not recognise the activity of schools preparing their pupils for education and employment or training. However the new Secretary of State has explicitly referred to this area of work and some schools have seen recent Ofsted inspections scrutinise careers activity were it has been inadequate.

Sean Kelly, Principal of Top Valley Academy, informed the Board that the National Enterprise Programme was provided to year 8 pupils and has proved highly productive. Year 10 pupils do an 'employability and entrepreneur programme' for the last 2 weeks of the summer term. With an initial 'start up grant' of £250, pupils can be very creative and successful in developing business models. This leads to a 'European Driving Licence' qualification, contributes to GCSEs and has resulted in pupils leaving school with high esteem and improved confidence. The Academy now plans to arrange work experience during the first 2 weeks of the summer for pupils who complete the programme to take advantage of the high personal esteem which many pupils benefit from as a result of taking part in the programme.

The Chair informed the Board that in regard to NEET and 'not known', Nottingham City achieves the best results among all of the Core Cities.

A short film on how 'Futures' has impacted on young people's lives can be viewed at:

<http://www.youtube.com/watch?v=VWsAwLopTNo&feature=youtu.be>

RESOLVED to note the presentation and the achievements of Futures in supporting the City's young people.

17 TEENAGE PREGNANCY IN NOTTINGHAM

Lynne McNiven, Consultant in Public Health, and Marie Cann-Livingstone, Teenage Pregnancy and Early Intervention Specialist, presented the report and highlighted the following points:

- (a) Teenage pregnancy is a complex issue and remains a key driver for poor health and social outcomes for both mother and child, including:
 - (i) 15% of NEETs are teenage parents;

- (ii) teenage parents are 20% more likely to not to have qualifications by the time they are 30 years old;
 - (iii) teenage mothers are 22% more likely to be living in poverty by the age of 30 and much less likely to be employed or living with a partner;
 - (iv) children of teenage mothers have a 63% increased risk of being born into poverty and are more likely to have accidents and behavioural problems;
 - (v) teenage mothers have 3 times the rate of postnatal depression and a higher risk of poor mental health up to 3 years after the birth;
 - (vi) the infant mortality rate of babies born to teenagers is 60% higher than those born to older parents;
 - (vii) teenage mothers are 3 times more likely to smoke through their pregnancy and 50% less likely to breastfeed, both of which have negative health consequences;
- (b) in 1998 there were 74.7 pregnancies per 1,000, by 2012, the figure had dropped to 37.6 per thousand;
- (c) the Teenage Pregnancy Plan has 8 key work streams:
- (i) improve health outcomes;
 - (ii) improve teenage pregnancy prevention and support services;
 - (iii) improve communication, marketing and social networking;
 - (iv) improve contraception services and sexual health advance;
 - (v) improve contraceptive and sex and relationships education services in schools, colleges and learning centres;
 - (vi) increase the percentage of pregnant teenagers and teenage parents in education, employment or training;
 - (vii) improve the evidence base through data collection and intelligence;
 - (viii) improve the confidence and skills of the teenage pregnancy workforce to support young people with making decisions;
- (d) all agencies and partners need to work together and to ensure that the subject remains high on the agenda.
- (e) Comments from the Board included:
- (i) it was pointed out that the teenage pregnancy rates from 1998 remained high until 2008, since then there has been rapid reduction of teenage pregnancy in the City;
 - (ii) one single pregnancy can impact on the figures so vigilance must be maintained;
 - (iii) sex and relationship education in schools, including involving school nurses, is vital;
 - (iv) in response to a question, Andy Sloan, Headteacher of Rose Hill School, responded that for young people with learning disabilities such as pupils attending Rose Hill School, a specific and detailed Sexual and Relationship Education Policy has been developed. Most young people are rarely on their own and are always supported. The Sexual and Relationship Education programme also tackles inappropriate behaviour. Teenage pregnancy is not a major issue within this vulnerable group of young people;
- (f) young people who are in work are less likely to become pregnant;
- (g) the long-term outcomes of the teenage pregnancy plan may not be apparent until 10 or 20 years' time.

RESOLVED

- (1) to note that teenage pregnancy annual update;
- (2) to agree the contents of the Teenage Pregnancy Plan Executive Summary 2014-15.

18 CHILDREN AND YOUNG PEOPLE'S PLAN PRIORITY HEALTHY LIVING: SCHOOL NURSING

Lynne McNiven, Consultant in Public Health, presented the report updating the Board on the current position of School Nursing following a recent review and restructure when the service became the responsibility of Public Health.

The following points were highlighted:

- (a) there are 57,000 young people aged 5-19 years old in the City;
- (b) universal services are available to children from the time they enter Reception Year at school and can include support for complex conditions, mental and emotional health, and sexual health;
- (c) Public Health are working with CityCare to develop a demand led model, having considered the differing needs in each area of the City;
- (d) across the City, 16 school groupings have been identified through health and social care profiles. These groupings are not in line school organisations;
- (e) the review found that some school nurses were well valued by schools but they needed to be more approachable and clearly accessible to pupils and parents;
- (f) it was clear that some schools and pupils were not accessing full range of support available;
- (g) CityCare divided the School Nurses into teams to target school areas, with senior nurses as team leaders for each area. This ensures that there is a continuity of care for children starting school in Reception Year, until they leave secondary school;
- (h) leaflets were distributed to pupils and parents to ensure it is understood what School Nurses can do and offer;
- (i) the 3 areas on which nurses will focus on are healthy weight, sexual and relationship education and support, and emotional health and well-being. However, school nurses will also offer support with highly complex issues and circumstances, liaising with the Domestic Abuse Referral Team (DART), Child and Adult Mental Health Services (CAMHS) and contributing to, Common Assessment Frameworks (CAFS);
- (j) the new model was launched in September 2014 and to date it appears to be working well;
- (k) some schools feel they have lost their school nurse as they are not necessarily based at a specific school but it is not possible to provide a nurse for each school. Instead there are between 30 and 33 whole-time school nurses, within band 6, working across the City to provide equitable services for each school. There has also been an issue of staff retention due to other areas of nursing undertaking large scale recruitment;
- (l) it is predicted that there will be a period of transition for pupils, parents and school staff to adjust to the new model. However once the Lead Nurse of each team becomes known, relationships will improve.

Sean Kelly, Principal of Top Valley Academy, informed the Board that school nurses are highly valued and that parents and young people did not like the referral based service that is now in place, added to which, this current model complicates the role of the Child Protection Officers in schools. Previously school nurses were part of the school team and were able to establish

relationships with pupils which then made them more approachable when pupils had issues or concerns.

Academy staff are concerned that although Headteacher groups may have been involved during the development of the new model, Academy staff were not consulted and had not been informed of the new structure prior to its implementation. Now that the structure has been explained, and with the Academy's emphasis on 'improving health to improve education attainment' the opportunity to consider a co-funded school nurse position would have been preferable to meet the needs of the pupils on roll at the Academy.

The questions and comments of the Board were responded to as follows:

- (m) it is proposed to consult those pupils and parents/carers who do not access school nurse services, to find out whether there is a lack of understanding for what is available, or if services have not yet been required;
- (n) school nurses will be available at each school at least once or twice a week;
- (o) a 'whole school approach' is to be developed to engage all school staff and ensure that pupils and parents/carers can be directed to access services and support via school nurse;
- (p) some schools already buy-in services such as counsellors and peer supporters but this needs to be tracked to enable need to be gauged and successful practices to be shared.

The Chair of the Board considered that dual funding for posts is worth pursuing as this has worked in other areas and enabled services to expand.

RESOLVED

- (1) to note the key findings of the review and recognise the value of School nursing in improving health and educational outcomes;**
- (2) to support the development of the new needs led model of delivery;**
- (3) for a future reports on the progress of implementing the school nursing development action plan to be brought to the Children's Partnership Board.**

19 BIANNUAL COMMON ASSESSMENT FRAMEWORK (CAF) PARTNERSHIP RETURN

Viv McCrossen, Head of Family Community Teams Central, presented the report which details the Partnership CAF Performance for the first quarter of 2014/15, comparing performance against 2013/14 and 2012/13.

A Common Assessment Framework is a framework to help practitioners working with children, young people and families to assess children and young people's additional needs earlier, provide more effective services, and develop a common understanding of needs and how partners can work together to meet them.

Since an information cleansing programme during 2013, a new set of measures were introduced to better measure need, analyse outcomes and prevent duplication. This included specifically recording initiation by agency, reason by outcome, age, outcome by agency, ethnicity and age.

The following points were highlighted at the meeting:

- (a) during 2013/14 1180 CAFs were initiated across the partnership, this was an increase of 36.1% on 2012/13 which is the highest number ever in the City;
- (b) during the first quarter of 2014/15 299 CAFs were initiated, the highest number during the first quarter ever;
- (c) from 2012/13 to 2013/14 initiations by Family Community Teams have increased by 71% with Primary Schools increasing initiations by 19.7%, Health Visitors by 31.9% and secondary schools decreasing initiations by 13.2%;
- (d) 62.3% of CAFs were closed when needs were met but there was an increase of cases closed due to increased risk where cases were escalated to specialist services;
- (e) 30% of cases escalated to social care already had a CAF, so investigation needs to take place to find out why 70% of cases had not had a CAF and what support if any had been received prior to Social Care involvement as this may identify a gap in identifying children with need at an early stage;
- (f) the cleansing exercise had highlighted that better discipline is required in closing of CAFs on the shared system but also that the system needed ask more questions, including identifying the a lead person for each initiation.

It is noted that referrals to Social Care were perceived to be much easier than initiating a CAF so this needed to be investigated along with who and how appropriate it had been for each referral to be made directly to Social Care before a CAF had been considered.

Impact tracking will take place to find out which organisations prove most successful in meeting the child's needs.

On behalf of the Partnership and in light of her leaving the Local Authority, the Chair thanked Viv McCrossen for her regular contributions to the work of the Children's Partnership Board.

RESOLVED

- (1) to note performance measures presented and agree to their continued usage in future reporting;**
- (2) to agree for the additional performance reporting on "tracking" of closed CAFs to measure sustained impact;**
- (4) to agree that each agency is responsible for consistently updating the accuracy of information for CAF records initiated and open on CAF Central Records system for each quarter of the financial year;**
- (5) to agree to the Communications Plan, timeline and launch of the refresh to CAF Central Records system and processes.**

20 PARTICIPATION IN GOVERNANCE PROGRAMME AND YOUTH COUNCIL UPDATE

Jon Rea, Engagement and Participation Lead Officer, and Charlotte Croft, Youth Cabinet Member, presented the report on the involvement of Nottingham's young people in the 2014/15 Participation in Governance Programme and gave a brief summary of the recent work of the Youth Cabinet.

The following points were highlighted:

- (a) the participation in governance programme is refreshed every year and aims to empower young people by enabling them by equipping and enabling them to contribute to the design, development and delivery of strategies and plans for improvement;
- (b) Youth Cabinet members contribute to several governance programmes and boards including:
 - (i) Children's Partnership Board;
 - (ii) Nottingham Growth Board;
 - (iii) One Nottingham Forum;
 - (iv) Equality and Fairness Commission;
 - (v) STAC Education and Training Group;
 - (vi) Creative Industries Award;
- (c) the two members of the Youth Cabinet who were elected to the UK Youth Parliament were Charlotte Croft and Rachel To;
- (d) the Children in Care Council are a key partner in the annual 'Have Your Say' survey of children in care and care leavers with resulting recommendations considered in the annual Corporate Parenting Action Plan;
- (e) the Special People Group engages young people with special educational needs and disabilities, currently acting as the principal young people's co-production forum for the Children and Families SEN Act reforms;
- (f) Youth Council is a large general meeting of young people from across the City, sharing findings with relevant partners;
- (g) the Primary Parliament is organised in conjunction with the Nottingham Learning Trust for young people in Year 5 and 6 at school, following the same thematic content as the Youth Council but presented in age appropriate formats;
- (h) the Youth Council meeting programme for 2014/15 will include:
 - (i) Education, Work and Training for the Knowledge Economy;
 - (ii) Safe Lives, Positive Communities;
 - (iii) Happy, Healthy, Creative You.

RESOLVED

- (1) to note that Board partners are invited to work with Youth Cabinet and utilise opportunities to engage with children and young people around the Participation in Governance programme;**
- (2) to agree to use the findings of participation work to inform plans and strategies for service improvement for children and young people across the Children's Partnership;**
- (3) to acknowledge the work of the Youth Cabinet as the principal youth leadership group for participation in the Children's Partnership agenda.**

21 FORWARD PLAN

It is noted that any requests for the Board to consider further topics, should be forwarded to Dot Veitch, Partnership Support Officer at dot.veitch@nottinghamcity.gov.uk