

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

**MINUTES of the meeting held at Loxley House, Nottingham on 22 March 2017 from
16.05 - 18.04**

✓	Cllr Mellen	Portfolio Holder for Early Intervention and Early Years NCC
✓	Cllr Webster	Portfolio Holder for Education, Employment and Skills NCC
	Katy Ball	Director of Commissioning and Procurement- NCC
✓	Alison Michalska	Corporate Director of Children and Adults, NCC
✓	Helen Blackman	Director of Children's Social Care NCC
	Patrick Fielding Sarah Fielding	Joint Directors of Education NCC
	Chris Wallbanks	Strategic Commissioning Manager for Children NCC
✓	Jon Rea	Engagement & Participation Lead NCC
✓	Daunay Robinson	Representatives for Young People (Youth Cabinet)
	Supt Ted Antill	Nottinghamshire Police Authority
	Christine Oliver	Head, Crime and Drugs Partnership
✓	Sally Seeley	Director of Quality Personalisation NHS Nottingham City Clinical Commissioning Group
	Phyllis Brackenbury	Nottingham CityCare Partnership, Director of Operations and Transformation
	Chris Cook	Independent Chair, Local Safeguarding Children Board
✓	Julie Burton	Deputy Head, National Probation Service Nottinghamshire
✓	Jackie Newton	Primary Schools' representative
✓	Sally Pearce (Seely Primary School)	
✓	Scott Mason (Snape Wood School)	Primary Schools' representative
	David Stewart (Oakfield School)	Special Schools' representative
	Sean Kelly (Head of Top Valley)	Secondary Schools' representative
	John Yarham	Chief Executive of Nottingham and Nottinghamshire Futures
	Gaynor Rossiter	Jobcentre Leader and Troubled Families Employment Advisor (TFEA) Lead, DWP Job Centre Plus
✓	Stephen McLaren Maria Ward	Voluntary Sector Representatives

✓ Indicates present at meeting

Colleagues, partners and others in attendance:

Clive Chambers	- Head of Safeguarding and Quality Assurance
Helene Denness	- Consultant in Public Health
Emily Humphreys	- Directorate Support, Children and Adults
Nick Lee	- Head of Access and Learning
Sharon O'Love	- SHARP Manager
Dot Veitch	- Partnerships Support Officer
Phil Wye	- Constitutional Services Officer

34 APOLOGIES FOR ABSENCE

Phyllis Brackenbury
Chris Cook
Maria Ward
John Yarham

35 DECLARATIONS OF INTEREST

None.

36 MINUTES

The minutes of the meeting held on 18 January 2017 were agreed by the Board as a true record and signed by the Chair.

37 KEY MESSAGES AND ITEMS FOR INFORMATION

Alison Michalska updated the Board:

- (a) the inquest into the death of Shanay Walker took place at the beginning of February, with a verdict due on the 29th March. Outcomes of the Serious Case Review will not be released until the inquest is complete;
- (b) Nottingham City Council (NCC) has taken part in a pilot of re-inspection by Ofsted, as they were previously judged to require improvement. NCC is now judged to be good overall, with further work required in work with care leavers;
- (c) this is Dot Veitch's last Children's Partnership Board before her retirement. Dot has been instrumental in co-ordinating the Board and members wish her well in her retirement.

38 SMALL STEPS BIG CHANGES

Luke Murray, Programme Manager, gave a presentation to the Board, highlighting the following:

- (a) the Small Steps, Big Changes (SSBC) programme is lottery funded for 10 years and is focused in four wards of the city to deliver three child development outcomes: communication & language, nutrition and social & emotional development. Activities are co-ordinated by the Programme to deliver to these three outcomes, and evaluated to see

which ones make the greatest impact;

- (b) the SSBC programme is collaborative in order to work and develop new services in the hope that these will continue beyond the funding period. Collaboration is between existing workforces and newly commissioned workforces such as Family Mentors. There are also partnerships with the community and parents;
- (c) examples of successful initiatives of the programme include the Family Mentor programme, Small Steps at Home, the Imagination Library and the Innovation Fund;
- (d) the programme aims to keep children at the heart, with parents leading the way. This involves lots of events and engagements, as well as parent panels in order to keep parents involved in the design of services;
- (e) one challenge of the programme is to ensure consistent engagement with the workforce, as it requires support and guidance from experts in order to make successful changes beyond the programme's 10 year period. Another challenge is leading on system change, as one of the programme's principal aims is a move to early intervention away from later services;
- (f) upcoming work by SSBC includes a shared learning event on 12 May at Nottingham Conference Centre, the FRED programme to encourage fathers to read with their children, and work with the National Literacy Trust to investigate a literacy hub for the city;

The following points were raised during the discussion which followed:

- (g) schools are a key partner to the SSBC programme and they have met with and presented to head teachers across the four wards. However, more could be done to promote the programme as it is not seen as relevant as it is aimed at pre-school children;
- (h) the take-up of family mentors has been higher in the Aspley and Bulwell wards as they were introduced there first and so are more established. Every new mother is given a phone call offering the service and there are currently around 400 children with mentors.

39 CHILDREN AND YOUNG PEOPLE'S HEALTH AND WELLBEING IN NOTTINGHAM CITY - AN UPDATE

Helene Denness, Consultant in Public Health, introduced the report giving 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. Helene highlighted the following:

- (a) nearly 48% of women in Nottingham City are breastfeeding at 6 weeks which is better than the England average. Nottingham has the best initiation and 6 week breastfeeding rate of all its statistical neighbours;
- (b) 18.7% of mothers in Nottingham City were smokers at the time of delivery which is significantly higher than the England average. Every mother is referred to stop smoking services during pregnancy, and 70% of these quit, however many opt out of this;

- (c) the percentage of overweight or obese children in year 6 is 39% which is slightly lower than the statistical neighbourhood average but significantly higher than the England average. This number has plateaued and is not reducing;
- (d) mental and emotional health problems affect about 1 in 10 children and young people living in the UK. Using this estimate nearly 4,000 children and young people aged 5-16 in Nottingham have a mental health problem;
- (e) voluntary and community sector organisations have identified issues around mental health problems with access to services, lack of understanding in schools, academic stress, lack of services for young adults and bereavement;
- (f) priorities for 2017/18 are to further enhance the community eating disorder service, increase capacity for Child and Adult Mental Health Services (CAMHS) interventions, develop a CAMHS liaison function and to deliver a joint agency workforce plan to support children's emotional and mental health needs.

RESOLVED to

- (1) note the contents of the report and progress on health and wellbeing outcomes in the Nottingham City Children and Young People's Plan;**
- (2) note progress in improving the emotional and mental health of children and young people in Nottingham.**

40 SHARP

Sharon O'Love, SHARP Manager, gave a presentation to the Board on the Self-Harm Awareness & Resource (SHARP) Project, highlighting the following:

- (a) the SHARP project is funded by the Nottingham City Clinical Commissioning Group (CCG), initially for 18 months and now extended to 3 years. Its main aim is to raise awareness, build confidence and skills, and provide support to front-line service providers and professionals to intervene and manage young people who present with self-harm and suicidal behaviours;
- (b) there is a lot of evidence that early intervention works in reducing self-harm and suicidal behaviour. Between October 2015 and September 2016 all completed therapeutic interventions saw a reduction in these behaviours, and no young people risk assessed required a referral to the children's emergency department. There has also been a 28% reduction of children and young people presenting with self-harm to the children's emergency department between February 2014 and February 2015;
- (c) there are 66 school clinics, with most secondary schools having a clinic monthly, which identify early signs of self-harm or suicidal behaviours and undertake risk assessments. A robust safety plan is written, with some young people referred to specialist CAMHS services. However, 87% of young people attending receive support through universal services;
- (d) additional services include SHARP 4 Parents, for parents running bi-monthly in every area, and TRANS4ME for young transgender people. TRANS4ME ran 42 sessions last

year with 204 young people supported and has won awards;

- (e) funding from the CCG has enabled free training for front-line professionals, with the aim of running 15 sessions per month. These are on self-harm awareness, as well as other issues such as drugs, transgender issues, males and suicide, and early harmful behaviours in children. Between October 2015-September 2016, 133 training sessions were delivered with 1375 professionals attending;

The following points were raised during the discussion which followed:

- (f) young people are nominated by individual schools to attend clinics, and they must have consent to attend. They are given a 45 minute robust risk-assessment, given coping strategies and a crisis card with contacts;
- (g) the SHARP service also offers training to the voluntary and community sector, but this can be difficult sometimes as they are a very small team.

41 ELECTIVE HOME EDUCATION

Nick Lee, Head of Access and Learning, introduced the report providing an overview of Elective Home Education (EHE) in Nottingham, highlighting the following:

- (a) legally all parents have a right to home educate their children and there is no requirement to inform the local authority of this. The children must have a suitable education, but this does not include following the national curriculum or taking exams;
- (b) sometimes EHE can be a positive choice for a child if the parents are committed and have the time and capacity to provide a broad education, and to work towards suitable qualifications. However in many cases it is chosen for negative reasons such as where the relationship with a school have broken down;
- (c) there are two officers at the council who work with EHE families: a co-ordinator who manages caseload and records, and a partnership officer who develops partnerships to support the families and share good practice. When a child is removed from a school's roll for EHE, a 3 way meeting is set up between the school, family and council to make sure that the child's educational needs are met. A letter is written to the parent if the council does not support a move to EHE outlining the reasons why;
- (d) there are currently increasing numbers and more turnover of children in EHE at both a regional and national level. There has also been concern by Ofsted that some children registered as EHE may be in unregistered, potentially illegal schools, though there is no evidence of this in Nottingham;
- (e) there is concern around the profile of the children in EHE in Nottingham as a high proportion of them are either open to, or have previously been open to, social care. A number of them also have identified special educational needs, with 5 currently being open to an Education Health and Care Plan;

The following points were raised during the discussion which followed:

- (f) the local authority has developed relationships with colleges to encourage EHE children to move onto Further Education. They do not have to be on roll at a school to take their GCSEs as they can do this in exam centres;
- (g) the letter that is sent to parents discouraging them from EHE has no legal status but is backed up by professionals where appropriate. Nottingham is seen as one of the more proactive local authorities for EHE.

RESOLVED to note the findings of the report and associated presentation and consider the implications / cascade across respective areas of responsibility.

42 PARTICIPATION STRATEGY ACTION PLAN 2016-17

Jon Rea, Partnership Officer introduced the report giving a brief summary of achievements during the first full year of the Strategy action plan and signposting areas for further work going forward, highlighting the following:

- (a) the Participation Strategy was adopted a year ago. It has met and exceeded its targets for 2016-17 of both holding 60 participation events and 1000 children and young people (CYP). The participation strategy has three key strands: individual participation, social participation and public participation. Examples of activities within these areas as well as areas for development are included in the report and the presentation attached to these minutes;
- (b) individual participation supports the voice of CYP in statutory areas like Children in Care, as well of those engaged by non-statutory targeted and specialist services like Priority Families Many of the most vulnerable CYP in the city benefit from participation;
- (c) social participation involves CYP engaged through universal and targeted services, including through education provision and community-based activities;
- (d) public participation is a well-established field of participation activity with a calendar of forums and groups such as Primary Parliament and Youth Cabinet.
- (e) colleagues in many areas and services support the participation agenda. These are supported by the Participation in Steering Group. A participation model called 'Sharing the Future' is being trialled with the University of Nottingham. This will also help shape engagement and participation in the voluntary sector;

RESOLVED to

- (1) recognise the importance of the work done across the Children's Partnership to support children and young people to be involved in decisions which affect their lives and the contribution it makes to the work of the Partnership;**
- (2) approve the direction of the Participation Strategy and to continue to contribute to the successful delivery of the action plan;**
- (3) consider specific areas of participation work for inclusion in the 2017-18 participation action plan.**

43 PARTNER UPDATE: NCVS

This item was withdrawn from the agenda.

44 FORWARD PLAN

The Forward Plan was noted