

OVERVIEW & SCRUTINY BOARD SUPPLEMENTARY AGENDA

5 May 2015

5 OVERVIEW & SCRUTINY SUB-COMMITTEES - ANNUAL REPORTS (Pages 1 - 12)

Additional reports attached.

**Andrew Beesley
Committee Administration
Manager**

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Children & Learning Overview and Scrutiny Sub-Committee Annual Report 2015/16

INTRODUCTION

This report is the annual report of the Sub-Committee, summarising the Sub-Committee's activities during its year of operation ended May 2015.

It is planned for this report to stand as a public record of achievement for the year and enable Members and others to have a record of the Committee's activities and performance.

The Sub-Committee met on 5 separate occasions including a Special meeting for the requisition of the Cabinet Members decision *Implementation of the primary expansion proposals*.

SUB-COMMITTEE MEMBERSHIP

Councillors Gillian Ford (Chairman), Jason Frost (Vice-Chair), Joshua Chapman, Philippa Crowder, Nic Dodin, John Glanville, Carol Smith, Keith Robert and John Wood

Co-opted Members: Emma Adams, Philip Grundy, Jack How, Julie Lamb, Lynda Rice and Ian Rusha

WORK UNDERTAKEN

The Sub-Committee established an Agenda reports pack, to keep members informed of work undertaken by boards and committees, focused on supporting children's health and wellbeing across Havering and placements out of borough.

Due to a high number of new Members, an induction programme was provided at the beginning of the year, outlining the role of Overview and Scrutiny, learning and achievement and Children's Services. The Sub-Committee agreed a work plan for the year.

During the year under review, the Sub-Committee considered and reviewed a number of issues including:

Future shape of education services, review of Children's Centres, OFSTED Action Plan, Multi-Agency Safeguarding Hub (MASH), Children's Improvement Board,

School improvement Framework, Early help and troubled families, SEND transport, Children and Young Peoples Plan, Healthwatch, school admissions, school places, corporate performance, school attendance, performance of all schools and vulnerable groups including those in receipt of pupil premium, Multi-Agency Sexual Exploitation Partnership and the Self Evaluation Framework (SEF).

1. SEND (Special Educational Need and Disabilities)

In the second July meeting, the Sub-Committee received an update on the Travel Training Scheme, and supporting SEND children to be able to travel independently. The Authority had run a pilot scheme where 29 children had been trained and a further 19 children were receiving training.

The Children and Families Act proposed to extend the SEND system from birth to 25; replace statements of special educational need with a new birth-to-25 education, health and care plan and offer families personal budgets.

There had been an increased demand for SEND transport at the same time as significant budgetary savings had to be made. The sub-committee discussed issues arising from the current service. A further review would be linked to changes in the SEND Bill and to providing parents with more options.

The Sub-Committee agreed to receive updates on the review process and outcomes.

Special schools have a very different profile with most children having a severe, moderate or profound, multiple learning difficulties – accounting for 79% of SEND in Havering's special schools.

Havering has successfully integrated the majority of these young people within the mainstream school environment, investing in the necessary support and adaptations to enable them to enjoy the same schooling as their peers.

2. Educational Attainment

A Topic Group of the Sub-Committee have looked into the logistic of narrowing the attainment gap between pupils entitled to free school meals (FSM) and all other pupils (non-FSM) as this was a key government priority. Whilst there were other important factors, analysis shows that poverty is often the key factor thus the introduction of the pupil premium.

Pupils attending Havering schools had a larger gap in attainment in 2013 between those currently eligible for FSM and Non-FSM pupils than was found nationally at both key stage two and key stage four.

4.1% of Havering 16-19 year-olds are NEET, lower than national, London and statistical neighbour averages. This performance is comparable with previous years.

3. Youth Engagement

The Sub-Committee welcomed a member of Havering's Youth Parliament who raised concerns over the lack of employment opportunities for young people.

4. School Attendance Exclusion

In March 2015 the Sub-Committee considered a detailed report on Attendance and Exclusion that was presented by the Alternative Provision & Looked After Children (LAC) Education Manager. This report covered a number of issues including:

- Pupils who missed more than 50% of school
- Taking children out of school for holidays in term time (much debated by Government)
- Vulnerable children as they are particularly at risk of exclusion
- Ethnic groups - highest rates of exclusion nationally are Gypsy/ Roma, Travellers of Irish Heritage and Black Caribbean communities
- Growing number of parents electing to 'home educate'

Permanent exclusion rates in Havering had been consistently higher than the London and national average over the past few years. The Sub-Committee was informed that the service worked and learnt from other boroughs and alternative providers to provide and make more choices available.

5. OFSTED Outcomes

Officers explained that official OFSTED grades could be:

- 1) Outstanding
- 2) Good
- 3) School requires Improvement
- 4) Poor/failing

Overall, Havering Infant Schools were performing exceptionally well and Junior Schools were performing broadly well. Secondary Schools were not performing as well as Primary Schools. Too few schools were performing at 'Outstanding' level (Grade 1), and too many required improvement (Grade 3). All failing schools were academies and hence not under direct control of the authority.

'Outstanding' and 'Good' schools were inspected once every five years. Some of Havering's 'Good' schools were performing at an 'Outstanding' level but had yet to be re-inspected, as inspection occurred once every five years for schools attaining Grade 1 or 2.

The Committee noted that although there were no Red ratings, there were a number of Amber ratings, which officers advised were being given the highest priority. An amber rating was possibly awaiting sign off and therefore the action had been completed but was not showing as completed on the system. Additional resources were being put into IT and training. The Committee requested an update on all Amber rated actions once completed.

5. Complaints Annual Report 2014

At its October meeting the Sub-Committee reviewed the Complaints Annual Report for 2014 and noted that most complaints were received via email and telephone as these were the instant, most convenient methods and comprised of three stages:

Stage One: Local Resolution

This had a 10 day response time (which could be extended to 20 days if a letter of delay explanation was sent to the complainant).

Stage Two: Independent Investigation

Two independent people would be invited to investigate the complaint and the original complaint response.

Stage Three: Review Panel

A panel would be called to independently review the complaint and the actions taken.

The highest levels of complaints had come from Under 12's Triage/MASH, Assessment teams and Looked After Children (LAC). LAC was a highly emotive area, and often resulted in a decision of one parent or another receiving care of a child. The other parent often did not agree with the decision of the Social Worker. Information had been improved for those outcomes. Acknowledging how parents felt often improved the outcome for the aforementioned parents. The summer break could impact on timing of the complaints process, as parties may not be available for interview or investigation.

Members correspondence had a 56% drop in 2013/14 compared to the previous year. This was largely due to the closure of children's centres in 2012/13 having increased the volume of complaints. 67% of these were responded to within 10 days.

6. Child Sexual Exploitation / Implications of Rotherham Inquiry

A presentation was given to the meeting in October 2014 on Child Sexual Exploitation (CSE) and the Implications of the Rotherham Inquiry.

Data from the police detailing that from July to September 2014 there had been 25 reported suspicions of CSE in Havering. Nineteen of those were investigated. Within those investigations, six gangs were disrupted. These gangs were not from Havering, but some of the victims were. This figure included all children (including 'Looked After Children' and 'at home' children).

The report into CSE between 1997 and 2013 in Rotherham had been widely publicised, and the implications for all Local Authorities and Local Safeguarding Children's Boards (LSCBs) were extensive, including a requirement for full auditing.

Further preventative work was due to be completed in schools including providing more information in Personal, Social and Health Education (PSHE) classes on the changing context of Havering, and all boroughs.

CORPORATE PARENTING PANEL

Annual Report 2015/16

The Panel met on 9 separate occasions including a meeting with Social Workers.

PANEL MEMBERSHIP

Councillors Gillian Ford (Chairman), Jason Frost (Vice-Chair), Joshua Chapman, Philippa Crowder, Nic Dodin, John Glanville, Carol Smith, Keith Robert and John Wood

WORK UNDERTAKEN

Due to a high number of new Members, an induction programme was provided at the beginning of the year, outlining the role of Corporate Parents, Looked After Children, Fostering and adoption. The Panel agreed a work plan for the year.

All Panel Members have been DBS checked.

The panel established the regular tracking of two children taken into care, monitoring their progress through the system.

During the year, the Panel considered and reviewed a number of issues including:

Virtual Head Teacher, Fostering and Adoption Panel, two individual cases for tracking, placement data, Performance indicators on Looked After Children (LAC) data, audits – children in Police protection, legal processes and delays in adoption, new adoption, Fostering & Private Fostering Statement, Corporate Parenting Strategy, Viewpoint survey & literature, LAC education, Children in Care Council, Staying Put Policy, fostering and adoption reports, transition leaving care.

The Panel has reinforced the need to celebrate the achievements of our LAC and officers are considering activities that will support this aim.

1. Viewpoint Survey

At the meeting held in November 2014, Members received a presentation on the 'Viewpoint' out turn, which was a summary of the surveys completed by children in care.

'Viewpoint' allowed children in care to express their views in a method which was measurable, meaningful and allowed action to be taken as a result of the responses given. Surveys were conducted electronically, and then followed-up at the following review meeting with their Social Worker, with individualised questions asked on any areas of concern previously raised in their 'Viewpoint' response.

The questions were not benchmarked against other authority's questions as they were focussed on local requirements. The survey was voluntary, as it was in other boroughs.

The survey results showed that:

- Children were generally happy in school
- Many of the children had high ambitions that the service could support them with
- Teachers were very prominent in the lives of the children and seemed to be highly regarded role models.

The panel identified the need for, outcome focused questions.

2. Looked After Children (LAC)

At the meeting in April 2014 the Sub-Committee were informed that the recently engaged Virtual Head, Paul Tinsley had commenced work. The Virtual School had been set up to theoretically place all Looked After Children within the context of one school, whilst they physically attended schools across the borough (and in some cases, across the country where they were placed out of borough).

The number of Looked After Children (LAC) has increased each year, placing extra demand on local services. There has been a corresponding increase in both the number of new LAC and those ceasing to be LAC, indicating a greater fluidity in the LAC population.

Schools that had difficulties could request support from the Virtual School. Occasional fixed term exclusions were worked on closely, but these were very occasional. Havering had much shorter and fewer fixed term exclusions than other authorities, usually amounting to a 1 or 2 day period. Reports on daily exclusions and attendance were given to the Head of The Virtual School, who was notified if anything needed to be done quickly.

The proportion of NEET (Not in Employment, Education or Training) young people was still too high (22%) in the 2013-14 year. Targets had been set to reduce this number. Good careers guidance including realistic careers action plans were needed for all LAC.

Improved practice, planning and management of LAC social work has led to significant improvements to the solidity of placements. The focus on ensuring permanency and stability for LAC has helped to improve the % of LAC experiencing long-term placements.

3. Social Workers

An informal meeting took place in February 2015 specifically to address Social Workers understanding of their roles, the structure, and the issues that Social Workers have in order to address any concerns and to improve the working of the teams.

The topics discussed included: MASH, Assessment Team, Safeguarding / Section 47, CAHMS and mobile technology working.

4. Children in Care Council

A presentation was received at the Sub-Committee meeting in April 2015 from the new Children in Care Manager, who is now in post and working on the re-launch of the Children in Care Council for the 242 0-18year old children in care in Havering.

The following key issues will be implemented:

- Raise the profile of the Children in Care Council
- Develop relationships with each child on an individual/personal basis
- Improve and maintain a good working relationship with Foster Carers
- Develop an action plan to promote the Children in Care Council events which will be held throughout the year
- Implement Q&A sessions and evaluate feedback.

Membership has already shown an increase since the re-launch.

Members will be meeting the Children in Care Council on a regular basis and will be attending a number of events being organised for Children in Care.

5. Staying Put Policy

This item has been discussed at a recent Sub-Committee meeting as the new policy effects 18-19 year olds' allowances. Their allowance would remain the same (although it will be funded from different sources i.e. benefits and housing) after age 19 if they are still in education or training, their allowances would be paid on a sliding scale.

Training is now in place to ensure this policy is disseminated to Foster Carers and relevant agencies/partnerships.

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Children & Learning Overview and Scrutiny Sub-Committee (Special Joint Meeting with Health Overview & Scrutiny Committee Annual Report 2015/16

INTRODUCTION

This report is the annual joint report of the Children & Learning Overview and Scrutiny Sub-Committee and the Health Overview & Scrutiny Sub-Committee, summarising activities during its year of operation ended May 2015.

It is planned for this report to stand as a public record of achievement for the year and enable Members and others to have a record of the Committee's activities and performance.

The Sub-Committee met on 2 separate occasions and Members visited the new Child Development Centre 'The Acorn Centre'.

SUB-COMMITTEE MEMBERSHIP

Members of both the Children & Learning Overview & Scrutiny Sub-Committee and the Health Overview & Scrutiny Sub-Committee.

WORK UNDERTAKEN

The Sub-Committees agreed to meet to discuss children's health and wellbeing as there is scrutiny crossover. Two meetings will take place a year and an Action List has been developed.

Havering's Public Health team, Havering Clinical Commissioning Group (CCG), NHS England, North East London NHS Foundation Trust (NELFT) and Council Officers have supported the work of the Joint Committee

During the year under review, the Joint Sub-Committee considered and reviewed a number of issues including:

Healthy weight and obesity, immunisation, School Nurses, 0-5's transition, teenage breakdown and CAMHS issues, sexual health and teenage pregnancy, FGM, Educational Health and Care Plans, commissioned service for children.

1. Healthy Weight/Obesity

Within in the London Borough of Havering, one fifth of children at reception, are overweight or obese while one third of children of year 6 age are obese. This followed the trend of the national average and was marginally better than the London average. Historically, rates had been flat, but in recent years rates of obesity had been increasing with greater frequency. Some ethnic groups at a higher risk and as the diversity of the borough changes, further action to

address obesity may be required.

The short term impacts of obesity to children include being stigmatised and low self-esteem. The long term impacts include risk of type-2 diabetes and cardiovascular issues. Havering's model of treatment within the partnership focusses on prevention including, health advice to weaning mothers on diet, nutrition and cooking information, promoting parks and green spaces healthy walking schemes for over 10yrs, catering in schools, healthy schools programme, change for life clubs, leisure centres and smarter travel. Officers feel Havering has set a standard which was becoming best practice.

2. Immunisation

The officer from NHS England reported that the World Health Organisation (WHO) had stated, all Western countries would be without vaccine preventable diseases by 2020. Immunisation was the best chance to prevent the spread of disease. The Hepatitis B vaccination was now available for all of London. Havering is the national leader on flu vaccinations and children as young as four years old had self-administered flu vaccines nasally. All children, staff and parents associated with SEND schools, were to be given the flu vaccine. This had placed Havering at the top of the league for pilot schemes within schools. Teenagers had 'dovetailed' vaccinations where multiple vaccinations are given at the same time (HPV, School leavers' vaccine and MENC). These were available in schools, pharmacies and other locations as opposed to doctor's surgeries, reducing pressure on GP's.

3. School Nurses

School nurses are specialists in public health providing individual support to children and families and also issues of the school as a community, improving health. Their priorities are to keep children healthy and happy, including issues of weight, sexual health, reducing the number of children requiring help and reducing school absenteeism. The service has been variable between schools. The Council has a mandate to measure children in the National Children's Measurement Programme including vision and hearing checks. NELFT currently provide the service with 17 School Nurses covering 84 schools in the borough. More resources would increase the capacity of the team there was however also capacity to improve within current resources.

4. Mental Health/Teenage Breakdown and CAMHS

Havering has seen a significant growth in child mental health issues needing CAMHS (Child and Adolescent Mental Health Services). There had been a 6% increase of self-harm from 2011 (7%) to 2013 (13%) and a 4% increase of prolonged sadness or unhappiness. The risks associated with this include, sexual, self-harm, smoking, drinking, drug-taking and recklessness. The pressures on children and young people include: exams, general teenage years, social networking and the change of social interactions globally. Havering CAMHS Tier 4 service was nationally acclaimed, the small budget allocation does however limit work undertake. Referrals come from school nursing teams, intervention support, early years, parents, GP's or self-referral.

It is essential the referral routes are simplified as they can be complex and confusing. It was accepted that CAMHS information could be more accessible and clearer.

5. Sexual Health and Teenage Pregnancy

Poor sexual health included sexually transmitted infections, pregnancy, FGM and sexual abuse, whilst encompassing wider social implications including domestic violence and poor mental health.

Havering has the lowest rates of HIV in London, but the highest proportion of late diagnoses. High quality treatment and prevention services were commissioned but the critical change needed to be, young people taking charge of their own sexual health, including how to properly use contraception. The sexual health service is being recommissioned, focusing on treatment, with a greater focus on prevention including better use of GP surgeries and pharmacies promoting healthy relationships in schools. Appson mobile devices would be used to spread awareness of the services on offer. Good quality OFSTED inspected, mandated Personal, Social and Health Education (PSHE) is available in Havering Schools. However due to social and media changes, the sexualisation of children and young people had been increasing nationally.

6. 0-5 transition (Early Years)

As from October the borough will be mandated to deliver 0-5 services. Havering now has 27.5 health visitors. Local performance data would be produced monthly from October for the London Boroughs and parts of Essex, involved in NELFT. There is a lack of data around resident population in some areas. At primary school age, there was a 7% difference in GP registrations and the numbers in the school cohort. At a senior level, this was a 47% difference. The allocation calculated in 2008 transferring across to Havering for this service is extremely small and had not increased despite an increase in caseloads.

7. Education Health Care Plans

The new legislation framework in Social Care, combined early years, social care, schools and colleges in Children's and Young People's provision from, 0-25 years for those with Special Educational Needs and Disabilities. Awareness of the 'local offer' to support children, families, young people and Carers, includes NELFT, leisure services. Any corporate body or organisation is subject to 'open text response' and needed to be aware that anyone could now review their services. Specialist services were not provided locally in Havering, but there were substantial links with pan-London specialist services.

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