Herefordshire Council

Minutes of the meeting of Children and young people scrutiny committee held at Committee Room 1 - The Shire Hall, St. Peter's Square, Hereford, HR1 2HX on Tuesday 14 January 2020 at 2.00 pm

Present: **Councillor Carole Gandy (chairperson)**
Councillor Diana Toynbee (vice-chairperson)

Councillors: Kath Hey, Phillip Howells and Mike Jones

Co-optees: Pat Burbidge and Andy James

In attendance: **Councillor David Hitchiner, Leader of the Council**
Councillor Felicity Norman, Cabinet Member for Children and Families

Officers: **Director for Children and Families, Chief Finance Officer, Director of Public Health, Assistant Director Safeguarding and Family Support, Democratic Services Manager and Statutory Scrutiny Manager, Strategic Capital Finance Manager, Early Help Service Manager, Early Help Family Support Team Manager and Speciality Registrar in Public Health.**

32. APOLOGIES FOR ABSENCE

Apologies were received from Councillors Graham Andrews and Paul Andrews.

33. NAMED SUBSTITUTES

Councillor John Hardwick acted as a substitute for Councillor Graham Andrews.

34. DECLARATIONS OF INTEREST

There were no declarations of interest.

35. MINUTES

RESOLVED: That the minutes of the meeting on 25 November 2019 are agreed as a correct record and be signed by the chairperson.

36. REVIEW OF BUDGET AND CORPORATE PLAN PROPOSALS FOR 2020/21 RELATING TO THE REMIT OF THE CHILDREN AND YOUNG PEOPLE SCRUTINY COMMITTEE

The committee considered a report from the Leader of the council which contained the budget proposals for 2020/21 and the draft corporate plan as relating to the remint of the children and young people scrutiny committee. The chief finance officer (CFO) and the director of children and families (DCF) provided the presentation attached to the circulated report.

During the course of the debate the following points were raised:

- It was queried how the corporate plan took account of the priorities contained in the children and young people's plan. *The DCF explained that the corporate delivery plan, underpinning the corporate plan, made specific reference to the children and young people's plan.*
- The reduction in the number of new entrants to care was welcomed and it was queried how this reduction could be explained. It was queried whether the application of thresholds for admitting children to care had in the past been too cautious. *The DCF explained that a number of initiatives over the previous 18 months accounted for the reduction including the alternatives to care panel, early help assessments and the more co-ordinated approach which ensured that needs were identified and co-ordinated support provided. The assistant director safeguarding and family support (ADS&FS) commented that the alternatives to care panel had been established in September 2018 to provide a process to challenge the grounds on which children were taken into care. The Panel ensured that professional were held accountable for ensuring that all potential services had been made available to children and families prior to becoming looked after. The leaving care looked after children reduction strategy was also raised and the focus on reunifying children with their families and seeking special guardianship orders. The ADS&FS commented that without undertaking a review of earlier cases the application of thresholds would be difficult to appraise but it was noted that in June 2018 Ofsted had found that all children in the care system were there appropriately.*
- There was a query regarding the social care pooled budget of £2 million. *The CFO explained that funding had been provided from central government for social care and a budget had been established to enable funding to meet identified need, such as children transitioning to adulthood who continued to require social care. Proposals were being developed for the operation and allocation of the pooled budget which would be reported to the committee in due course.*
- The rate of inflation used to calculate the cost of the replacement of Peterchurch primary school was queried; at 6% the rate of inflation was considered to be in excess of the general inflation rate. *The CFO explained that the rate used in the calculation was based on the inflation of prices and costs in the construction industry which exceeded the general inflation rate.*
- It was queried whether the consultation results that had identified investment in council-owned care homes as a priority was supported by other forms of evidence and feedback from local residents. It was queried whether the investment allocated to council-owned care homes was sufficient to meet identified need and the proposed outcomes. *The CFO commented that the consultation process tended to produce selective engagement with the community with some demographics disproportionately represented in the final results. The determination of priorities for the allocation of investment was often informed through political judgement. The challenges faced by the care market included current providers seeking to withdraw from providing care and the role of the council to meet any shortfall created. Evidence from across the county suggested that the need for care was increasing across all age ranges and work was ongoing to align care provision to the demand in the community. The construction of new facilities would have an impact on the care market including the potential for the concentration of demand in an area where new facilities became available.*
- The committee queried the outcomes from the safeguarding family support development plan for the previous year and the continuation of the plan into 2020/21. *The DCF explained that the quarterly reviews presented to scrutiny provided details of the improvements made. The plan would be refreshed over the next few months and improvement work would continue over future years. Ofsted had recently carried out a focused visit in December and they had recognised the improvements in stability that had been brought to the social work*

workforce but that recruitment remained a significant challenge and additional work was still needed.

- A query was raised regarding the roll-out of the superhubs and the impact on children's centres. It was commented that some of the centres were in a poor state of repair which would require significant resource for use in the future. A query was raised regarding the access to services from rural areas of Herefordshire *The DCF explained that proposals for superhubs were being developed and the potential for children's centres to act as superhubs would be considered but there were no plans for a reduction in the level of service. The services provided by children's centres would look to be involved in the 'talk community' work. The Early Help Manager (EHM) explained that children's centre services were taken out into the community to families in need where work was conducted in homes.*
- The family befriending service was queried and how it could be accessed by individuals. *The EHM explained that the service was funded through the troubled families programme and a contract to operate the service was currently out to tender. The service would commence in April and would be accessed through an early help assessment targeted at families on level 2 and 3 of the needs thresholds with emerging and complex needs.*
- The committee commented that there was a challenge in supporting care leavers to move into apprenticeships and employment. *The Director of Public Health (DPH) explained that the NHS long-term plan contained an intention to offer opportunities to care leavers and the DCF explained that within the contract with Balfour Beatty there was a requirement to provide apprenticeships.*
- The committee supported the budget and the additional investment proposed.

The cabinet member for children and families commented on the budget proposals and explained that the cabinet were backing early help and intervention for which funding was being provided. There was an importance that the projects in children and families link to the talk community proposals which should recognise that active and vibrant communities were in place across Herefordshire. The foremost priority was the wellbeing of children and young people and ensuring they had the best outcomes possible through early intervention and early investment.

The oral health needs assessment (OHNA) was presented to the committee by the DPH and the Specialty Registrar in Public Health (SRPH). The following principal points were made in the presentation:

- The OHNA provided a comprehensive position of dental services in Herefordshire and a full mapping exercise had been undertaken.
- A number of recommendations had emerged from the OHNA including establishing an oral health improvement group of professionals to work in partnership to improve the oral health of children and adults in Herefordshire.
- An action plan including key indicators would shortly be published which would outline the measures necessary to realise local improvement to oral health.
- The issue of dental access was identified as a challenge in Herefordshire; the current provision in Herefordshire was not felt to meet the need across the population. The Public Health Team had met with practitioners to explore the issue and seek to understand why some dentists were withdrawing NHS treatments. It had been identified that there was a lack of contractual or legal levers to ensure dentists provide NHS treatment.
- NHS England would shortly be undertaking a market engagement exercise to investigate alternative delivery models for general dental provision within both urban and rural areas (possibly using mobile provision), domiciliary care and fluoride varnish.

The committee made the points below in the discussion that followed:

- The work being undertaken by NHSE was welcomed but there was concern that there were still families in the rural areas without access to treatment. *The SRPH acknowledged the issue concerning rurality and explained that there was existing investment within the system from NHSE enabling access for 15,000 more NHS patients in Herefordshire. This provision could not be fulfilled however because some dental surgeries appear to be prioritising private dental services over the provision of NHS treatment. The use of mobile provision for general dental provision was unusual and typically mobile provision was for specialist provision. Dental health needs are able to be addressed at Dental Access Centres but dental practices were not obligated to accept NHS patients. The DPH explained that a conventional approach to increasing access was not effective therefore alternative arrangements had to be considered which the market engagement exercise by NHSE would seek to identify.*
- It was queried how the work of the oral health improvement group was accounted for in the budget. *The DPH explained that the work was supported by the public health grant which was ring-fenced but work was ongoing to calculate the costs of future oral health improvement activity and interventions.*
- The involvement of the local MPs in seeking to achieve dental health improvement was discussed. Jesse Norman MP had been approached and was pursuing the issue but it was felt that contact should be made with the local MPs to promote lobbying of central government.
- The campaigns that sought to improve oral health were raised. *The DPH explained that Public Health England had run a campaign which had encouraged people to attend their local dentist to seek to register however this campaign was not promoted in Herefordshire because of concerns over the lack of access to dentists providing NHS treatment. The promotion of healthy behaviours was also undertaken in large organisations such as the NHS and in the council. The SRPH explained that the improvement group had already and were planning to undertake a wider range of activities in respect of improving oral health including awareness raising in early years settings and targeted fluoride varnish in such settings. The group was not solely focused on the issue of access.*
- The committee raised the statistics in the report which showed that the dental health of 12 year olds was worse than neighbouring areas but that Herefordshire had only had a small increase in the number of fluoride treatments. It was asked what was being done to increase fluoride treatment. *The SRPH explained that dental surveys consistently showed that dental health in Herefordshire was generally poorer than regionally and nationally. Fluoride varnish was acknowledged as an effective, safe and cost effective treatment but not all dentists felt that it was worthwhile despite a financial incentive provided for the provision of the treatment. When NHSE communication was undertaken with dentists regarding access, the prioritisation of varnish for 3 – 16 year olds twice a year was also promoted. There was inconsistency among dentists in Herefordshire in providing fluoride varnish and some didn't apply it routinely. Due to access problems alternative arrangements for fluoride varnish were being explored including targeted provision in community settings such as nurseries or schools.*
- It was felt that the ONHA was a good step forward and that there should be a report to the committee in due course to report on progress with the recommendations and action plan.
- It was noted that statistics for dental health in 3 year olds in Herefordshire compared favourably but at 5-12 years of age the county's performance was poor. It was queried whether the absence of fluoridation of the water supply was a reason for such poor dental health at a later stage of development. *The SRPH explained that the Public Health Team had recently explored the value in conducting a feasibility study and a position paper was due to be published shortly. It was noted that about 10% of the national population have fluoride in*

their water supply. Despite being supported as an effective and cost effective measure, it was acknowledged that introduction in Herefordshire at the current time would present a number of challenges which would be explained in the forthcoming position paper. The surveys that produced results concerning dental health had previously relied on small samples; recently the sample had been expanded and it was hoped that there would be better results in the spring statistics.

The cabinet member commented that good dental health was important to wider health indicators and it was important to engage schools to reach as many children as possible in efforts to improving dental health.

RESOLVED: That the committee:

- **Supports the additional areas of investment identified in the budget;**
- **Writes to the local MPs to request details of actions to lobby central government to improve oral health in Herefordshire; and**
- **Requests a report to a forthcoming meeting of the committee containing the high-level action plan for improving oral health in Herefordshire and details of any progress against the recommendations in the oral health needs assessment.**

37. YOUNG CARERS SUPPORT SERVICE

The committee received a report from the director for children and families relating to the young carers support service (YCSS). The early help manager introduced the report and advised the committee of the statutory duty of the council to young carers and the specification for the service which had emerged through the Joint Carers Strategy 2017-2021. The four objectives of the YCSS were outlined, in particular the promotional work that was ongoing around the service including digital material and presentations at schools and the GP forum. The service operated by undertaking an early help assessment of the family of a young carer from which a package of support could be compiled. Young carers were encouraged to complete evaluations of their experiences at the end of the intervention.

The committee made the points below in the discussion that followed:

- It was estimated that there were between 400 -700 carers in Herefordshire and the number the service had been in contact with was 83. The proportion of carers that the service supported was felt to be low but it was acknowledged that some young carers did not require or want support. There was concern if families did not want a young carer, who required support, to have contact with the service and it was queried how this could be overcome. *The EHM explained that it was not an easy barrier to overcome but promotional materials such as the youtube video that had been developed was important in demonstrating the support that the service could provide. The priority for the service was to ensure that those with need were getting the help that they required. Presentations to the GPs Forum had been provided to ensure young carers and their families could be signposted to the service and notions that the service sought to take children into care could be dispelled.*
- It was queried whether children that have been supported had been consulted on how to engage other young carers. For older children a closed group on a social media platform was proposed and it was suggested that the social media details should be included on the services promotional posters. Details of where the poster had been distributed were sought. *The EHM confirmed that a question*

regarding effective engagement with young carers could be added to the evaluation that was completed following intervention. The early help family support team manager (EHFSTM) explained that a number of children that the service works with do not initially identify as young carers and work that was undertaken in primary schools was effective in raising awareness. The poster was distributed to all schools and GP surgeries and adding social media details to the poster would be looked into.

- The committee queried the definition of a young carer. It was clarified that young carers were not only carers for parents but could also care for siblings. *The EHFSTM explained that a question, about jobs in the home, posed of children to determine if they were a young carer was: "if you didn't do it, would it get done?" It was confirmed that the service also provided support to families where siblings provided care.*
- The committee asked what opportunities existed for young carers to interact and engage with one another. *The EHM confirmed that there were young carer groups, some of which were delivered by the Herefordshire Young Carer Clubs. The council also funded tender exercise to identify providers for young carers groups in different locations; the CarersTrust4All had been awarded a contract and were in the process of establishing carers groups.*
- The committee asked what the advantages had been of bringing the service back 'in house' with the council acting as the provider. *The EHM confirmed that one of the reasons for bringing the service back 'in-house' was because statutory guidance stated that a holistic family assessment should be provided and following a consultation with young carers it was ascertained that such a comprehensive approach was not being achieved under previous arrangements. With effective co-ordination of support greater free time was enabled for young carers. The EHFSTM explained that young carers were told about the groups that were available and activities they could undertake. Some young carers wanted to engage with carer groups but others wanted to explore other interests relevant to their age.*
- The committee queried if the provision of a greater level of early help services had identified more young carers who required support. The role played by Addaction was also raised. *The EHM confirmed that was the experience of the service and often there were other issues identified through school such as behavioural problems or lateness which suggested there were family issues which could involve young people acting as carers. It was confirmed that there was some challenge working with Addaction and receiving referrals but where there was a safeguarding concern this was reported through the Multi Agency Safeguarding Hub (MASH).*
- It was queried if the service received feedback from former young carers about their experiences and the support provided. *The EHFSTM explained that former carers could contact the service at any point and if young carers became adult carers they were referred to the adult carer group. The EHM explained that the service had been in operation for two years and methods for gathering feedback from former young carers was something that could be investigated in future. The survey conducted by the children and young people's partnership scheduled for summer 2020 would include questions to ask young people if they were carers which would help the service develop a more accurate picture of numbers in the county. It was hoped that a link to webpages for young carers could be provided on the survey, alongside the question above, to provide instant access to information for those young people who identified as carers.*
- The service period on the young carers service summary specification was raised, in particular the end date of 31 March 2020. The budget that was planned for the new financial year was queries and the grant funding of £20,000 awarded in May 2019 was raised and if this would be reviewed in May 2020. *The DCF confirmed that the service would operate beyond the date in the specification and the budget remained fixed for the forthcoming year. The EHM*

explained that there was a contingency to address an increase in the numbers of young carers if this occurred following the children and young people partnership survey. It was confirmed that the grant funding would be reviewed.

The Cabinet Member for Children and Families explained that there was a fine judgement required by those working in this area where there was the potential for exploitation of young carers and where young carers could be involved in care for siblings. *The EHM explained that the service retained a safeguarding obligation and would involve social care where required.*

The Chairperson explained that there had been an intention to hear from young carers at the meeting but this had not been possible due to concerns over the sensitivity of the information they would share in the public domain. It was proposed that an engagement session in private was arranged for members of the committee with an interest in talking to young carers ahead of the next committee meeting.

RESOLVED: That a session is arranged with young carers to discuss their experiences of being a young carer and provide feedback on the support they receive.

38. WORK PROGRAMME REVIEW

The committee considered a report from the democratic services officer which provided the work programme for the remainder of the current administrative year, the outcomes of the peer on peer abuse in schools spotlight review and the recommendation tracker.

The committee noted those items that would be presented to the next meeting on 16 March 2020.

RESOLVED: That the committee's work programme 2019/20, as attached at appendix a, is approved.

The committee considered the outcomes of the peer on peer abuse in schools spotlight review. Two amendments to the recommendations in the report were proposed as below:

- Recommendation vii be expanded to include encouragement to schools to also receive the vulnerability training provided by the West Mercia Police and Crime Commissioner and training from the West Mercia Rape and Sexual Abuse Support Centre; and
- Recommendation xi be expanded to include in the business to be considered at future meetings of the spotlight review the monitoring of progress and proposal of recommendations.

The director children and families outlined a number of factual corrections or elements that required clarification in the wording in the report. *The Chairperson explained that the proposed corrections and clarifications would be investigated after the meeting and would be included in the final report to the executive, if appropriate.*

RESOLVED: That the committee agrees the recommendations and outcomes of the peer on peer abuse in schools spotlight review (appendix b) for submission to the executive, subject to the amendments to recommendations outlined above and evaluation of appropriate factual corrections.

The committee considered the recommendations tracker and the Chairperson provided an update on the response received from the Wye Valley Trust to correspondence concerning occupational therapists which would be shared in due course.

RESOLVED: That the committee notes the recommendation tracker in appendix c.

39. DATE OF NEXT MEETING

The next meeting would take place on 16 March 2020.

The meeting ended at 4.55 p.m. **Chairperson**