# Children and Young People's Partnership

A meeting of the Children and Young People's Partnership was held on Wednesday, 22nd October, 2014.

Present: Jane Humphreys (SBC - CESC) (Chairman),

Peter Kelly, Sarah Bowman, Emma Champley, Cllr Ann McCoy, Simon Willson, , James Hadman (sub for Steve Rose) (Catalyst), Janet Mackie, Linda Watson (NTHFT) Chris Davis (TEWV), Julie Allan (Probation), Phil Cook (SRC)

Officers: Margaret Waggott, Michael Henderson, Jane Smith (SBC)

Also in attendance: Aishah Waithe (Catalyst), Susan Hutchinson-Brown (NTHFT) (for FNP item)

Apologies Caroline Reed (Secondary Rep), Julie Nixon (SBC), Ian Coates (Cleveland Police)

#### 1 Declarations of Interest

There were no declarations of interest.

# **Apologies**

Apologies were received. It was noted that Cleveland Police was not present for this meeting and had not been present for the meeting in September. The Partnership asked that the Chairman take this matter up with the local Chief Superintendent.

## 2 Minutes of the meeting held on 24 September 2014

The minutes of the meeting held on 24 September 2014 were agreed as a correct record subject to Simon Willson being added to the apologies.

# 3 Minutes of the Adults Partnership held on 4 September 2014

The minutes of the Adults' Partnership meeting held on 4 September were noted.

#### 4 Fairer Start Programme

Members were provided with an update on the development of the Fairer Start Partnership Project in Stockton Town Centre.

Members noted that the project had been instigated in recognition that the first few years of a child's life were crucial in their development and in setting the foundations for positive outcomes during the course of their life. There was strong evidence that investing in early years improved social, emotional and physical development of children, which had an impact on educational attainment and their health and wellbeing.

Based on social care support and deprivation figures the project would start in the Stockton Town Centre Ward. It would be evaluated with a view to rolling out to additional wards. The work was led by the Voluntary and Community Sector, through Catalyst. The project was being funded through £250k from the Council's Public Health and £200k from the CCG with £38k, support and leadership from Catalyst.

It was explained that a Steering Group and Operations Group had been set up to oversee the project and carry out key pieces of work.

Members noted the overarching aims of the project were to:

- Improve maternal and infant nutrition
- Improve speech and language development
- Improve emotional and cognitive development

Members also noted that the project supported a number of the Early Help Strategy priorities:

- Improve the use of intelligence and information to target early help provision
- Provide well-coordinated, multiagency Early Help Services that are accessible and meet the needs of children, young people and their families
- Ensure the workforce is effective in identifying and supporting children, young people and families who require support from Early Help services
- Improve the voice of children, young people and their families to inform the way in which we commission, plan and deliver services.

It was explained that Jane Humphreys and Peter Kelly would be on the National WAVE Trust Board looking at an initiative aimed to reduce child maltreatment in the UK by 70% by the year 2030. The initiative would complement the Fairer Start work and the Fairer Start project would need to be expanded to other parts of the Borough.

The Partnership discussed issues surrounding Fairer start. Discussion could be summarised as follows:

- The population of the Stockton Town Centre Ward was transient and tracking and monitoring would need to be put in place.
- Mapping of siblings and whole family. Social Care had looked at family size by ward and would pass information to Public Health
- Consent Once only. Ideally this would be done through the midwifery notification process. Any system would need to meet the requirements of partner organisations and would exist until taken back by the individual. There were questions relating to ownership and storage of information. The principle was supported but further consideration was needed via the Steering Group.

In terms of partner involvement in the project, the following were identified:

- TEWV Chris Davies
- Healthwatch Joanne Shaw-Dunn
- NTHFT Linda Watson
- CCG Karen Hawkins and Paul Williams (via the Steering Group)

#### **RESOLVED** that

- 1. the update and discussion be noted and actioned where appropriate.
- 2. further updates be provided when appropriate.
- 3. Partner involvement, identified at the meeting, be noted.

# 5 Performance Framework for the Children and Young People's Partnership

Members considered a report that proposed arrangements for the Partnership to monitor progress and performance in delivery of its key priorities.

Members were provided with an updated version of priorities and key actions to take account of discussion that had taken place at its previous meeting. Members agreed that the discussion at that meeting had been accurately reflected in the revised priorities. These priorities would be included in a Children and Young People's Plan (CYPP) 2014 -17.

The Partnership needed to consider how it would ensure the priorities were being progressed and how services across partner agencies were monitored, and held to account for their contribution to these priority areas of service development. Members were provided with a set of proposed performance indicators for the key priority areas. The information also identified some of the lead groups for key actions, to assist with the Partnership's arrangements for future monitoring of performance.

Members agreed that monitoring performance had to include receiving feedback from young people. On this it was noted that the Chairman would be attending the Stockton Youth Assembly to talk about the work of the Partnership and look at a process of communication and feedback. Other opportunities to engage with and receive feedback on priorities from children and young people (CYP) were discussed including:

- arrangements, some of which were already in place, for CYP to attend future meetings of the Partnership
- Vox pops
- An event at Riverside College
- Healthwatch research

It was agreed that the CYP Plan must indicate that interaction with CYP was key to partners.

There may be some overlap between performance framework of the CYP Partnership and the Adults Health and Wellbeing Partnership This should be cross referenced outside the meeting (Simon Willson and Sarah Bowman – Abouna).

It was noted that any issues revealed by the performance indicators and highlighted by the Partnership would need to be raised with the relevant Lead Group(s); equally the Group(s) may be asked to attend a Partnership meeting to

discuss any issue.

There was a discussion on the different age ranges to be monitored within each priority. It was explained that the Partnership was not being asked to commit to these performance indicators at this time, however, it was agreed that they were a good starting point and could be developed. It was explained that a December meeting of the Partnership had been arranged which would look to evaluate, and develop a shared understanding of, current performance (Q1 and Q2). The performance indicators and activity data could be discussed and further developed at that meeting.

Members agreed that referrals to CAMHS should be included in Performance Indicators for children and young people's mental health. This information could be provided by TEWV. It was noted that this indicator would also be useful for the Mental Health Action Plan, for Stockton. The Council's Public Health Team and TEWV would liaise to identify any other suitable potential indicators for that Plan

#### **RESOLVED** that

- 1. the key priorities, actions and monitoring arrangements be agreed subject to any necessary amendments arising from the discussion above.
- 2. the meeting of the Partnership, scheduled in December, be used to focus on an evaluation of current performance, taking account of the Ofsted inspection framework, recent regional benchmarking data, and our local 2014-15 mid-year performance data.

# 6 Family Nurse Partnership

The Partnership received a presentation relating to the Family Nurse Partnership.

It was noted that the Family Nurse Partnership was a voluntary home visiting programme for first time young mothers, aged 19 or under (and fathers). A specially trained family nurse visited the young mother regularly, from early in pregnancy until the child was two.

The Family Nurse Partnership programme aimed to enable young mums to:

- Have a healthy pregnancy
- Improve their child's health and development
- Plan their own futures and achieve their aspirations

The Family Nurse Partnership programme was underpinned by an internationally recognised robust evidence base, which had shown that it could improve health, social and educational outcomes in the short, medium and long term. The project operated on a very specific licensed model that had to be

strictly adhered to.

The FNP in North Tees and Hartlepool had commenced in May 2012 and had enrolled 127 clients. There was a Team of 6 nurses with one supervisor and a quality support officer.

Members noted some of the key features of the programme:

- Multiple vulnerabilities were common.
- Prevention and early intervention
- 64 visits in 2 years
- Trust and buy-in was vital
- Working with the family was key
- Safeguarding was a high priority
- The programme had to replicate the requirements of the model licence
- Multiagency collaborative approaches
- · Quality assessment and data

### Going forward the FNP wanted to:

- Improve notification processes only getting to about 50 60 %
- Increase capacity on the programme to meet demand and need potentially 241 eligible each year
- Continue with strengths based approach and encourage others to use motivational interviewing
- Learn through appreciative enquiry with peers and at the FNP Advisory Board

Members discussed the information provided and a number of comments/queries arose;

- How did the proportion of children on the Child Protection Register, who had been part of the programme, compare with children who had not been part of the programme?
- How successful had the programme been in terms of rates associated with smoking at time of delivery and breastfeeding. Janet Mackie would look at this from a Stockton perspective.
- There may be opportunities to use the FNP model, particularly with regard to motivational interviewing, in other areas.
- There needed to be a push in terms of notification. The link with midwives would be key in this.
- Noted that 25% of those notified still said no and the reasons for this needed to be understood.

RESOLVED that the presentation and discussion be noted

# **Forward Plan**

The Partnership noted the Forward plan and agreed that it be amended to:

- Include a VEMT update at the November meeting
- draft CYP Plan at the November meeting
- benchmarking and direction of travel to be included in December meeting.
- Health Visitors to be scheduled
- Sexual Health to be scheduled
- Task and Finish Scrutiny CSE/VEMT review.

RESOLVED that the Forward Plan be amended as indicated.