

# Children and Young People's Health and Wellbeing Commissioning Group

A meeting of Children and Young People's Health and Wellbeing Commissioning Group was held on Wednesday, 5th July, 2017.

**Present:** Martin Gray (Chairman), (SBC), Jo Heaney (CCG), Jason Harwin (Cleveland Police)

**Officers:** Michael Henderson, Jane Smith, Jenny Collier, Tanja Braun (SBC)

**Also in attendance:** Cllr Lauriane Povey

**Apologies:** Cllr Ann McCoy, Emma Champley, Sarah Bowman-Abouna, Kate Birkenhead,

## 1 **Declarations of Interest**

There were no declarations of interest.

## 2 **Minutes of the meetings held on 8 May 2017 and 5 June 2017**

The minutes of the meetings held on 8 May 2017 and 5 June 2017 were confirmed as a correct record.

## 3 **Future Commissioning of Domestic Abuse Support Service Procurement 2018**

Members considered a report that provided the group with an overview of the process undertaken to establish a proposed model for Domestic Abuse support services within Stockton on Tees from April 2018 onwards.. The report provided an overview of programme activity to date and an outline of the proposed services model.

It was noted that the proposed new model of service would retain all the features of the current service but would bring in new aspects that have been identified as being needed. These included:

- A range of interventions for perpetrators dependant on risk assessment and need.
- A specialist Domestic Abuse Worker within Children's Services who would be able to undertake direct work with clients before a referral was made or if disengagement occurred.
- Family Group Conferencing where risk was appropriate
- Therapeutic support interventions for children and young people

Members noted the timeline associated with the procurement of the services, which would be in place by 1<sup>st</sup> April 2018. The new service model would cost in the region of £445k which represented an additional commitment, by the Council, of around £100k.

Members supported the approach detailed in the report but there was a lengthy discussion and that discussion is summarised below:

- Demands on service. There had been increases in demand and complexity of referrals and the costing of the new service had attempted to take account of this. The post in Children's services would help with engagement work and create capacity.
- Evidence base of programmes – NSPCC Caring Dads had been evaluated and had some very positive feedback. The Domestic Abuse Choices programme took elements of three early intervention programmes that could lead onto RESPECT programme, which was accredited. Some of these programmes had received some positive feedback and it was hoped that the evidence base around these would be increased. Officers would be keeping an eye on DRIVE, which was being piloted and was a multi-agency, high risk perpetrator, intervention, quite aggressive targeted work. Commissioners were keen for everything to be evidenced and this would be explicit in the specification.
- This Group would be involved in monitoring the contract.
- It was suggested that a conversation with Community Rehabilitation Service and a look at some of the programmes they may have planned would be useful.
- In terms of young people displaying behaviours, that may give an early indication of potentially being a future perpetrator it was explained that the new service would link with youth offending and the RESPECT Young Persons programme would be available, plus one to one work and other programmes and interventions.
- There were would be strong links to Operation Encompass.
- The situation relating to the Police Transformation Fund Bid was unclear and the Police representative indicated he would look into this and update the Group.
- There was a discussion on whether it would be possible to identify some required outcomes within the contract specification, potentially incentivised. This could be considered further.
- The new service would be highlighted with the Health Service. The current provider was proactive in raising awareness and this would need to continue. The CCG would disseminate information to GPs on a regular basis.
- High risk clients would be targeted but standard and medium risk clients still needed to be monitored as these could quickly escalate.
- Family Group Conferencing would be used in Domestic Abuse cases and

its use would be extended within Children's services.

- There was a discussion about the drop-off of engagement with families at the Children's hub and the fact that this was greater in Stockton than Hartlepool. This was likely to be because the person receiving the contact into the Hub on the Hartlepool side continued to engage with the family, whereas, in Stockton, the contact was passed onto someone else. This was being considered and would be addressed.
- It was recognised by commissioners, and partners on the Domestic Abuse Steering Group, that domestic abuse was a significant and growing issue for a range of services. Despite this recognition the only extra funding for service provision was coming from the Council and the Chair indicated that he would be contacting partners to ask what funding they would be committing going forward.

RESOLVED that the report and discussion be noted and the proposed service model be supported.

### **Sexual Health Service**

Members considered a report that provided an update on the commissioning arrangements for sexual health services in Stockton and the progress to implement a revised model of delivery with a clear focus on prevention, testing and treatment and promotion.

In terms of performance members noted that:

- To date the service had seen an average of 940 Stockton patients per month.
- 800 contacts had been made by Stockton residents using the Virtual Hub, from August 2016 to April 2017.
- The delivery of chlamydia screening was a challenge for the service. The screening was undertaken by a sub-contractor and discussions, to improve the situation, were underway.

There were challenges around estates. The provider had decided to relocate the hub element of its hub and spoke model but this was proving difficult. The provider had identified alternative premises but negotiations around void costs had proved difficult to resolve. This issue had been raised directly with the CCG, but, in the meantime, private properties were being looked at.

It was noted that Middlesbrough Borough Council would be leading contract management of the sexual health service, going forward.

Discussion:

- There didn't appear to be any significant problems with regard to appointment availability.

- Training staff, who worked with young people, would be important going forward particularly in terms of opportunistic work.
- The service did make referrals into Domestic Abuse Service, if necessary.
- Under 16's demand was quite low. Safeguarding referrals were made appropriately and consistently but this would be checked further. The service had very tight protocols for working with children which were linked to VEMT meetings. There were also safeguarding inspections and arrangements had been found to be robust.
- The virtual hub was national and was very visible. It was planned that there would be virtual consultations in the future, which would have safeguarding considerations.
- The procurement arrangements for the shared service had been complex but the service was easier to operate than it would have been had each borough procured separately.

RESOLVED that the update and discussion be noted and reports be presented to the group in future.

#### **4 Eastern Ravens Young Carers Commissioning Service**

Members considered a report that outlined the current commissioning arrangements for the provision of young carers support across the borough. The paper presented an overview of the review of the contracted service that took place during June 2017, and headlines from wider mapping work across the system. Recommendations for extension of the Eastern Ravens current contract and for the wider system were included.

The systems mapping identified gaps within the current system supporting young carers which were similar to those challenges that were present on a national basis, including the continued need to involve all children and adult workforces in training & awareness raising, and in embedding a No Wrong Door approach and Whole Family working. This was demonstrated during the mapping where it was identified that at strategic level progress continued to take place to establish systems to support the identification and assessment of young carers, however at a workforce level uncertainty remained about how this should be carried out in practice. Next steps included:

- Identifying outstanding service groups who required training, and to review if any opportunities existed to embed key messages about young carers within other training being delivered to maintain ongoing awareness raising.
- To embed requirements within future contracts across the authority that

state the responsibilities that all services have in identifying young carers, and signposting them to support.

- To take forward opportunities identified during mapping including reviewing transition thresholds within young carers services and how awareness raising & information for young carers is provided digitally, both by the local authority and commissioned service

Areas for development identified during the review process included:

- Strengthening the performance monitoring system for the service to enable outcomes for children and young people to be identified, and minimise the time this takes the service to collate. While it is clear that the service is valued by stakeholders, young people and parents / carers, the systems are not in place to enable the service to demonstrate the outcomes that are described by stakeholders and service users beyond an individual case by case level.
- To review the current service performance framework and adapt to collect proxy measures that demonstrate outcomes of the whole family working (e.g. family members now accessing financial advice, care to reduce young person's role).
- To review and develop methods to evaluate the impact of the service model on both young people and their families.

It was proposed that the current contract be extended for 12 months.

Members discussed the report and the next steps and areas of development that had been identified. Discussion could be summarised as follows:

- Adult Services staff going into homes may be in a position to identify and refer children in those homes who may be undertaking tasks/providing care.
- The Police representative asked if how many children were from minority communities and it was agreed that this would be provided. Links were being made with these communities.
- It would be important that the young carers' service was highlighted with general practice. May be an opportunity to deliver a package of non-clinical training to GPs, such as domestic abuse and young carers.
- Health initiatives funding bid from Eastern Ravens had come in for Emotional Health and Wellbeing
- There was a whole family approach and every member of the family could contribute to the plan. There was still separate work with children, who received protected time, away from their caring responsibilities.

- Mental health issues was the main presentation of adults, who were being cared for by children in the family. This fact could be highlighted to GPs.
- In terms of children present at houses, visited by the police, safeguarding would be the main focus and young carers wouldn't necessarily be identified.

RESOLVED that:

1. the Young Carers Service contract be extended for 12 months.
2. the next steps identified above and in the report be agreed.

## **5 Special Schools Nursing**

Members received an update report relating to Special Schools Nursing.

The Group was reminded of the background to this matter including the result of consultation and various meetings.

A new model would shortly be proposed to the CCG's Executive:

A step change approach to be introduced in Stockton, with Special School Nursing being provided by the School Nursing Team, with tight timescales to move to whole system change.

To work with Stockton Borough Council to ensure a smooth transition through these changes.

A direct contract arrangement to be entered into with the Trust to provide the service for the period of one academic school year from September 2017.

That an intensive training regime takes place with the staff who will be carrying out the direct care support within Stockton schools prior to the new academic year.

All schools will be communicated with prior to the end of this academic year as to the changes and these would be shared with the Council

The expansion of the role of the Designated Medical Officer (DCO) to include oversight of Children and Young People who had an EHC plan, to act as a co-ordinator and facilitator for changes to plans and transitions. The DCO would provide a general oversight to special schools and also into enhanced provision. This expansion would also afford the CCG with the assurance around the management of these children & young people. This would be replicated across both CCGs.

RESOLVED that the information be noted.

## **6 Forward Plan**

Members noted the Forward Plan and it was noted that the next meeting had too many items identified and would need to be considered outside the meeting.

The CCG representative explained that she was keen to meet with primary heads and secondary heads to present on joint commissioning. It was noted that the Council could assist with arranging this.

RESOLVED that the Forward Plan be amended as discussed.