

# People Select Committee

A meeting of People Select Committee was held on Monday, 22nd January, 2018.

**Present:** Cllr Jean O'Donnell (Chair), Cllr Eileen Johnson (Vice-Chair), Cllr Sonia Bailey, Cllr Di Hewitt, Cllr Gillian Corr, Cllr Barbara Inman, Cllr Elsi Hampton, Cllr Mrs Sylvia Walmsley

**Officers:** Diane McConnell (CHS); Jill Douglas, Liz Purdy (HRL&C); Jane Smith, Aishah Waithe (AH); Gary Woods, Annette Sotheby (DCE)

**Also in attendance:** Katie Bannister (Teeswide Suicide Prevention Taskforce), Clare Mahoney (St Michael's Catholic Academy), Paul Plows (Conyers School)

**Apologies:** Cllr Stefan Houghton

**PEO 41/17 Evacuation Procedure**

The evacuation procedure was noted.

**PEO 42/17 Declarations of Interest**

There were no declarations of interest recorded.

**PEO 43/17 Minutes of the Meetings Held on 18th September and 16th October 2017**

Consideration was given to the draft minutes of the meetings held on 18th September and 16th October 2017.

AGREED – that the minutes be approved as a correct record and signed by the Chair

**PEO 44/17 Action Plan for Agreed Recommendations - Review of Sickness Absence**

Members were presented with the Action Plan setting out how the agreed recommendations from the Review of Sickness Absence will be implemented and target dates for completion.

The Quarter 3 sickness absence figures would be forwarded to Members when available.

AGREED - that the Action Plan be approved.

**PEO 45/17 Scrutiny Review of Mental Health and Wellbeing including Suicide and Self-Harm**

Mental Health and Wellbeing – The Role of Public Health

Members received a presentation on the role of Public Health in mental health and wellbeing, the key issues they face, and to understand the mental health profile for Stockton-on-Tees, which included:-

- A survey "What About Youth" asked 15 year-olds what they thought of

- themselves. In Stockton, when questioned, 48.8% said they perceived their body to be the right size – this was lower than the national average of 52.4%.
- The percentage of children aged 14-15 years who had been bullied was above the national average.
  - Estimated prevalence of emotional health disorders in 5-16 year-olds showed figures above the national average.
  - Hospital admissions as a result of self-harm in 10-24 year-olds was above the national average.
  - Figures for Stockton showed higher than the national average for poverty, free school meals, child protection cases, family stress or dysfunction, which all have an influence on the emotional wellbeing of children.
  - Vulnerability data figures including LAC, children leaving care and children in need were all higher than the national average.
  - 50% of parents diagnosed with mental health issues were likely to have a child with problems.
  - Mental illness hospital admissions for depression were lower than the national average.
  - Positive and negative factors should be considered when addressing mental health and wellbeing problems – these include societal, environmental and individual factors.
  - Early intervention and encouraging people to seek help is crucial. Some feel that the stigma around mental health is worse than the problem itself.
  - Mental health is everyone's business including parenting, housing and education – not just the role of the health services.

Members comments and questions could be summarised as follows:-

- The Committee asked for views on which one improvement would have the biggest effect around this issue. In response, it was felt that earlier intervention was crucial and would have a big impact on the future wellbeing of young people.
- How was parenting effectiveness measured? Discussion took place around capacity to parent and what prevents this – people did not intend to parent badly, however lack of parenting skills and difficult childhood experiences could contribute or cause repeat behaviour. Some young people are resilient when dealing with parental challenges, however this can impact on their wellbeing.
- Were risk factors considered associated with LGBT young people, in particular those without a supportive family environment? In response it was confirmed that sexuality and gender identity were given due consideration.

#### Tees Suicide Prevention Strategic Plan

– The Role of Teeswide Suicide Prevention Taskforce

Members received information from the Tees Suicide Prevention Coordinator. The key areas of priority included:-

1. Sustain current funding for the TSPT group and activities – reviewing task force membership to ensure involvement of relevant parties.
2. Reduce the risks of suicide in key high-risk groups.
3. Tailor approaches to improve mental health in specific groups.
4. Reduce access to the means of suicide.
5. Provide better information and support to those bereaved or affected by

suicide.

6. Support the media in delivering sensitive approaches to suicide and suicidal behaviour.

7. Support research, data collection and monitoring – surveillance system ongoing to gather data on demographics, age, trends etc.

Co-ordination of partnership working is considered crucial in working towards the prevention of suicide and self-harm in the region.

Members comments and questions could be summarised as follows:-

- Were there any plans for pop-up information (like on Facebook), for example the Samaritans? It was noted that work was ongoing with them to identify hot-spot areas and install signage in public places. Could make better use of social media in the future.

- Were lessons learned from death by suicide and was there a process to determine the reason? It was noted that information was shared through the Coroner's Department, however there is a requirement to use local data to actively monitor trends.

- Where was funding obtained for the Coordinator role? It was reported that the four Tees authorities would provide funding for three years, and a business case would be developed for future funding.

Building Suicide-Safer Schools and Colleges - A Guide for Teachers and Staff

Members were presented with the results of the Safeguarding Pupil Survey 2016 which included:-

- A survey of 2,600 pupils (Year 8 and 10 only) in 13 secondary schools had been carried out, initially to determine safeguarding of youngsters in schools - how well they were keeping themselves safe and how well supported they felt they had been by school, to do so. Some outcomes were concerning - for example, only 38% of pupils thought that school cared whether they were happy or not, and outcomes for Year 10 girls were more concerning than those of boys.

- The survey results led to individual schools looking at their pastoral systems and enabled the Local Authority to reflect on what was being done in Stockton. This helped to inform the Future in Mind project and enabled more support to be sought from Public Health.

- Appropriate training for school staff is to be devised to respond in school earlier to tackle issues and better support pupils. This should address the referral culture.

- The survey will be repeated this year to benchmark progress for the present cohort of pupils (Year 10 who previously completed the survey in Year 8) and the impact of developments on the current Year 8 cohort (who were in Year 6 when the survey was previously undertaken).

Secondary Schools - St Michael's Catholic Academy, Billingham

Members received a presentation on Mental Health from St Michael's Catholic Academy, Billingham, which included:-

sooner, and most students know the member of staff.

- Three non-gender-specific toilets have been recently installed, still retaining separate boys and girls toilets.
- Two new leadership posts have been created and the impact of this would be evaluated after a 2-year period.
- Following the death of a student, a charity has been engaged "If you Care, Share" aiming to get boys and men to discuss any problems or issues.
- When trauma is dealt with in school, every emotional response is different and students are advised that this is normal.
- Students are encouraged to communicate with staff - the first step is being brave enough to ask to talk about a problem.
- Confidential key information on students is shared weekly to all staff in a pastoral bulletin for each year group.
- Staff attend 30-minute micro courses at lunchtime to share good practices and gain confidence to deal with any student health and wellbeing issues.
- Mental health and Anti Bullying Champions (student voice group) meet half termly.
- MHWB section created in the library.
- When coping with loss, facts are gathered from appropriate agencies, staff are briefed and a written statement prepared which is then read to students. All parents would be contacted via school Comms.
- Specialist support is tiered over a period of days (Alliance 3 days).

Members comments and questions could be summarised as follows:-

- When did staff become aware of the shift in trend and the realisation to evaluate solutions? In response it was noted that all schools are different as all schools are battling different issues. Conyers has experienced tragedy. It was felt that academic results were pointless if they did not go hand-in-hand with coping strategies. Involvement of parents is vital as often parents are unaware of what their child is exposed to, particularly social media and television which often portrays life as being perfect.
- Had any benefits been seen from implementing new procedures? It was noted that issues could now be identified much sooner than previously which allows an earlier level of support.
- Was co-operation from parents satisfactory? Members were advised that proactive communication with parents was crucial, and although some parents could be resistant when dealing with sensitive topics such as bullying, they were generally supportive, particularly following positive outcomes.
- What recommendation would you ask of the Committee? In response, it was noted that increased resources to offer such mental health provision in schools, and do it well, would always help, along with appropriate time for students and staff to engage without impacting upon their education. It was felt that the speed of referrals and capacity to use external mental health services (thresholds are being constantly raised) remained a challenge.

AGREED - that the information be noted.

**PEO**      **Work Programme 2017-2018**  
**46/17**

Next meeting 19th February 2018 at 1.00 p.m.

AGREED – that the Work Programme be noted.

**PEO**  
**47/17**

**Chair's Update**

The Chair had nothing further to report.