

Children's Health and Wellbeing Board

28th November 2014
Swale 1, Sessions House

MINUTES

In attendance:


Andrew Ireland (AI)	KCC - Director – Social Care, Health & Wellbeing (Chair)
Patrick Leeson (PL)	KCC - Director – Education and Young People's Services
Peter Oakford (PO)	KCC - Cabinet Member SCS
Roger Gough (RG)	KCC - Cabinet Member Education and Health Reform
Rob Price (RP)	Kent Police - Assistant Chief Constable
Karen Sharp (KS)	KCC - Head of Public Health Commissioning
Thom Wilson (TW)	KCC - Head of Strategic Commissioning (Children's)
Stephen Bell (SB)	CXK (VCS Provider rep)
Hazel Carpenter (HC)	NHS - South Kent Coast CCG & NHS Thanet CCG, Accountable Officer
Jo Purvis (JP)	Representing Kent District Councils Chief Executives
Gill Rigg (GR)	Kent Safeguarding Children Board Independent Chair
Jill De Paolis (JDP)	KCC - Commissioning Officer
Jo Tonkin (JT)	Representing KCC - Acting Director of Public Health
Philip Segurola (PS)	KCC - Acting Director Specialist Children's Services
Helen Buttivant (HB)	KCC - Public Health Registrar
Louise Fisher (LF)	KCC – Early Help Locality Manager

Apologies:

Abdool Kara	Kent District Councils Chief Executives Rep
Florence Kroll	KCC – Director of Early Help
Mark Lobban	KCC - Director of Strategic Commissioning
Michael Thomas-Sam	KCC - Strategic Business Adviser

		ACTION
1.	<p>Minutes of the last meeting and matters arising</p> <ul style="list-style-type: none"> Colin Thomson, Interim Consultant and Children's lead for Public Health will replace Andy Scott Clark on this Board. Updated MOU between CHWBB and KSCB is still an outstanding action from the last meeting. JDP confirmed that some items will be carried forward to the next meeting. JSNA – TW confirmed there will be a children's JSNA. Work is now being taken forward by a group which will report to this Board. CSE Needs Assessment – As a result of the thematic review a Health Needs Assessment on CSE will be carried out. Timescales to be confirmed. 	<p>JDP</p> <p>MTS</p> <p>JDP</p>
2.	<p>Emotional Well Being Strategy</p> <p>KS reported that the task and finish group managing this work is meeting weekly to ensure this work stays on track and continues at pace. There has been a discussion at the HWBB. The needs assessment is underway, the draft strategy is out to consultation until January 5th and considerable</p>	

	<p>activity is underway to inform the delivery plan as follows: Workshops with CYP have taken place. Clear messages were: accessibility of services – more drop-ins and less ‘clinics’, the importance of schools to access services and their role in de-stigmatising mental health issues and also use of services within the school culture. 2 workshops for professionals have also been held looking at Early Help and Specialist provision. A second summit will be held on 18th December to which all Board members have been invited. A new service model is under development which will be brought to the next meeting of this Board.</p> <p>KS also confirmed that she thought the current CAMHS contract had been extended. PL and AI both asked for clarification about the contract extension as KCC contributes £1Mill. TW and KS to discuss with Dave Holman and report back.</p>	TW/KS
3.	<p>Early Help and Headstart – Patrick Leeson and Louise Fisher Headstart is a strand of Kent EWB Strategy. Lottery funded £5 mill Kent is 1 of 12 pathfinders and aims to ensure young people aged 10-14 years have access to EWB support in the following ways: Thanet schools – restorative approaches NW Kent schools – Safe Places/time out Canterbury, Ashford and Dartford schools – Resilience Mentor training alongside digital resources. PI confident Kent will get phase 2 funding of £10 mill to roll out successes of year 1. Outcomes expected include a reduction in referrals to specialist services.</p> <p>Kent Family Support Framework (KFSF) is becoming embedded. There has been a big increase in assessments across all age groups and the right level of support is made as a result of timely assessments. Restructuring is continuing as is piloting further improvements as a result of working with Newton Europe. Coordination of services with health, recording of case work, stepping up and down of cases with SCS have all improved. In Sept/Oct 2014 there were 1251 notifications of a wide range of CYP – all ages and varied issues, in particular there were a lot of adolescents. The triage system is reported to be working very well.</p> <p>KS said that it was important the SPA for mental health and the new KFSF become aligned.</p>	KS/FK
4.	<p>Child Sexual Exploitation (CSE) OfSTED thematic review – AI AI said OfSTED are now not expected back until after Christmas and KCC’s self-assessment will be shared with partners.</p> <p>The CSE review report was published last week and is hard hitting, especially on the lack of urgency LAs have shown in managing this issue. http://www.ofsted.gov.uk/sites/default/files/documents/surveys-and-good-practice/t/The%20sexual%20exploitation%20of%20children%20it%20could%20happen%20here,%20could%20it.pdf</p>	PS

	<p>Clear issues for Kent were identified which need to be worked on at pace. These include the need for a clear strategic lead; a sub group currently exists but needs to be improved; greater consistency in use of the CSE toolkit and statutory guidance; awareness of CSE across the whole children’s workforce; improved tie ups with Community Safety Partnership work in the Districts and greater coordination of effort to tackle CSE. The EWB Strategy needs to refer to support for recovery of survivors. Social Work practice also needs work to raise understanding and the quality of return of runaways interviews.</p> <p>Operation Lakeland was identified as good practice but could not be written up as there is an ongoing criminal investigation. PS said that 14 individual actions have been carried forward to the Improvement Plan for SCS and added that OfSTED considered there was too much fragmentation of commissioning in Kent. SB suggested a short message to share with all partners should be prepared specifying what we all need to do and signposting resources such as training, the toolkit and the importance of really listening to what children and young people are saying whilst being mindful of the impact grooming may have on them. GR said she would put something in the KSCB newsletter.</p> <p>PO raised the question of where adult paedophiles would go for help. RP reported this was currently being looked at by the National Crime Agency but currently the only resources he was aware of are meagre and available only after criminal conviction.</p>	<p>KS to ensure CSE in EWB strategy</p> <p>GR to ensure this is covered in the KSCB newsletter.</p>
5.	<p>Review of the delivery of the antenatal and postnatal elements of the healthy child programme across Kent – Helen Buttivant KCC Public Health Registrar</p> <p>Helen gave a presentation outlining the findings of her research and recommendations for improving the Kent ‘offer’ attached.</p>  <p>Microsoft PowerPoint 97-2003 Presentatio</p> <p>AI said he recognised many of the issues Helen had identified which had come out in various SCRs. HC welcomed the report and links made with Health Commissioners. It is important that Public Health research and support are embedded into health commissioning arrangements. It was recommended the report goes to the Collaborative Commissioning Group looking at maternity services across KCC CCGs with NHS England. CCGs will be writing to the SE Commissioning Support Unit to say they no longer wish to continue current arrangements regarding maternity services. AI said this should be carried forward into KCC’s work with under 5s when they transfer from Health into KCC next year.</p>	
6.	<p>Framework and workplan for the CHWBB – Thom Wilson</p> <p>TW gave a presentation outlining future challenges the CHWBB needs to be mindful of.</p>	



Microsoft PowerPoint
97-2003 Presentation

KS said it was important commissioning and procurement arrangements are better aligned.

SB said how important he felt COGs are to underpin collaboration and communication across agencies locally and also to implement decisions of this Board on the ground.

AI said it was essential our work is driven by Needs Assessments. HC said it was a pity there are no GPs around the table. Meetings on Friday afternoon are not conducive. The Board needs to influence their thinking and encourage them not to medicalise childhood issues. CCGs are not necessarily cognisant of KCC's responsibilities, what needs to sit at county level and what locally. GPs are interested in talking to Headteachers, but this is not an efficient way to commission services. How we can work more effectively both Kent wide and locally are key questions we need to answer.

The Teenage Pregnancy Strategy has just been to the HWBB for ratification and has not come to this board. There is considerable confusion about roles and responsibilities which needs early resolution. HC said it is essential to clarify to Local HWBBs, perhaps through guidance, what this Board does, what we need them to do to support us and how they can communicate with us.

KS said we do need to get this right with a clear connection to localities so we can carry out our business efficiently and everyone knows what body to take partnership issues to for agreement.

All TW's recommendations were agreed
AI agreed to discuss and agree with MTS, TW, PO and RG.

JDP to look for different dates

JDP, TW, MTS

7. **The Care Act – Chris Grosskopf KCC Strategic Policy Manager**
CG presented the Care Act verbally. The main focus of interest to this Board are transitions to adult services. Transition protocols need to be in place making reference to the Care Act by April 2015. Therefore all relevant protocols need to be revised and updated. She asked if there should be partnership protocols or single agency ones and what the governance would be for sign-off.
AI clarified that the key work areas are around LD and mental health. AI said that the 0-25 Board should agree any changes to single agency protocols. PS said it would be helpful to have 1 protocol across all agencies underpinned by a clear service pathway and asked Chris to come back to this Board with proposals which this Board should probably sign off before it goes to the HWBB for final approval.

CG

8. **AOB:**
None
Date of next meeting:
3rd February 2015
2.00-16:30 – Medway Room, Sessions House, Maidstone