

Minutes of the 0-25 Health and Wellbeing Board Meeting
28 March 2017
2.00pm – 4.15pm
Swale Room 1 Sessions House

Present:			
Andrew Ireland*	AI	-	Social Care Health & Wellbeing Corporate Director, KCC (Chair)
Peter Oakford*	PO		Cabinet member – Specialist Children’s Services
Roger Gough	RG	-	Cabinet Member – Education & Health Reform, KCC
Karen Sharp*	KS		Head of Commissioning Public Health, KCC
Amanda Kenny	AK	-	Swale & DGS Clinical Commissioning Group Commissioner
Debbie Wade	DW	-	Representing Simon Thompson Head of Partnerships and Communities, Kent Police
Helen Cook	HC	-	Children’s Commissioning Manager, KCC
Claire Winslade	CW	-	Interim Public Health Consultant , KCC
David Holman*	DH	-	West Kent Clinical Commissioning Group, Children’s Lead
Penny Southern*	PSo	-	Director Disabled Children, Adults learning Disability and Mental health, Representing Penny Southern KCC
Sue Chandler	SC	-	South Kent Coastal CCG representing the LCPG Chairs
Philip Segurola*	PSe	-	Specialist Children’s Services Director, KCC
Sarah Robson	SR	-	Representing Kent Housing Group Executive
Gill Rigg*	GR	-	Kent Children’s Safeguarding Board Independent Chair
Patrick Leeson	PL	-	Education and Young People’s Services Corporate Director, KCC
Julie Ely	JE	-	Head of SEN Assessment & Placement, KCC
Emily Silcock	ES	-	Headstart Analyst, KCC
Jo Tonkin	JT	-	Public Health Specialist, KCC
Alex Gamby*	AG	-	Head of Early Years and Child care
Jayne Hagues*	JH	-	District Partnership Manager - Shepway
* Present for part of the Meeting			
Apologies			
Jane O’Rourke	East Kent Clinical Commissioning Group Head of Children’s Commissioning		
Michael Thomas-Sam	Head of Strategy and Business Support		
Stuart Collins	Director of Early Help, KCC		
Mark Radford	Chief Executive Swale Borough Council		
Matthew Scott	Kent Police Crime Commissioner		
Sharon McLaughlin	Thanet District Manager Early Help and Preventative Services, KCC		

1. Welcome & Introductions

1.1 The Chair welcomed everyone to the meeting and introductions were made.

2. Minutes from meeting held on 21 November 2016

2.1 The minutes were agreed as an accurate account.

2.2 All actions were noted as completed.

3. UASC Update – Andrew Ireland

3.1 The Chair provided a detailed update on UASC, highlighting the following:

- The number of new arrivals remains at a low level with the transfer scheme working well and where a client's transfer is delayed Kent starts the health check and assessment process on the taking authority's behalf.
- Kent is not expected to take any children under the Dublin Amendment unless they have family already in the county. Kent staff, continue to contribute with Home Office work supporting French authorities in the encampments with child assessments which helps to identify those who need to come to the UK.
- With regards those clients who came in within the first wave prior to the introduction of the transfer scheme are no longer eligible as a large number of these are 18+ and leaving care which in turn is now placing additional pressures on all public services including housing.

3.2 The Chair highlighted that concerns are already being voiced on what Mental Health support can be offered to this particular client group who have/may develop mental health issues like post-traumatic stress disorder (PTSD), and recommended that as part of the transformation programme it should look at building a future strategy in what support can be offered to this particular client group.

3.3 Members were assured that there have already been discussions around supporting these clients and agreed that the transformation programme should give some more thought to how this vulnerable client group with Mental health needs are supported in both the short and long-term. Action agreed: DH to raise at the next Mental Health Transformation meeting.

Action 1

4. Item 6.5 – Emotional Health & Wellbeing CAMHS Transformation of Children and Young People's Mental Health Services – Dave Holman

4.1 The above report provided board members with an update on the progress and next steps in the redevelopment of Children and Young people's mental health services. The report highlighted key achievements including:

- Securing funding from national bodies to secure to fund additional programmes/studies
- Collaboration with CCGs and other strategic partners on the procurement of services.

4.2 The next steps include:

- Continue to work against NHS England's criteria to reform and develop Children and Young People's Mental Health services.
- Further develop a local, system wide leadership and ownership through revised governance arrangements which includes clear accountability for delivery across local health economies.
- Development of a robust system wide monitoring including risk register dashboard and evaluation framework which can be measured against NHS England's outcomes.

- 4.3 With regards to the procurement of services this is still on track with contract award scheduled for May 2017 with a four month mobilisation phase to the service live date of September 2017.
- 4.4 In addition to the above report members were also briefed on the re-procurement of Public Health's school nursing contract which has been divided into two lots:
- Primary
 - Adolescent's Health and Wellbeing Service
- Both contracts have been awarded to Kent Community Health Foundation Trust (KCHFT) with a formal communications of the award to be sent out in the near future. The services are currently in the mobilisation phase, structured across the age line.
- 4.5 As part of this new Adolescent's Emotional Mental Health service's design, it is both a universal and tier 2 level service and therefore it is anticipated that the HeadStart provision for children aged 10-16years could be embedded as part of the overall service offer.
- 4.6 Board members were also assured that to ensure governance around the Transformation programme the Transformation Board are required to provide an annual plan to demonstrate that all areas of the plan can be reported against.
- 4.7 In welcoming the progress made on the significant achievements made the group discussed what measures are being considered for those young people within primary care crisis groups or those in specialist hospital placements outside the county requiring support post discharge.
- 4.8 Actions agreed:
- JT to share the Transformation Board's governance structure with board members. **Action 2**
 - DH to update plan on how links with primary care and the Winterbourne programme can be made. **Action 3**
 - DH to provide an update report on the progress of the transformation programme and the annual report at the October meeting. **Action 4**

5. **Item 5 Joint Reviews for Children aged 2 years (JR2); Update and Progress report – Alex Gamby**

- 5.1 The above report provided members with an overview of the first two phases of the Thanet pilot for joint reviews for children aged 2 years. The key areas highlighted included:
- Development of four referral pathways that will determine the type of review that is undertaken.
 - Positive engagement within Early Years settings requests for JR2 assessments especially for those who have missed their Health check reviews
 - Positive response from parents on their involvement in providing a more holistic picture of the child's issues and needs.
 - Strengthening the support mechanisms of the early years Local Inclusion Forum Team (LIFT).
 - Development of a JR2 implementation toolkit.

- Health visitors are supportive of the reviews
- Challenges include:
 - Ensuring that there is adequate time to complete further reviews once the initial assessment has taken place
 - Maintaining delivery of JR2s when relevant Health practitioners are unavailable as this can create a backlog.
 - Work is under way to ensure greater effectiveness in communication strategies at a strategic level between Health and Early Years to share information in a timely manner
 - Countywide roll out – the development of a new service specification that includes the JR2 assessment.

5.2 In agreeing the recommendations for the continuation of the pilot's Phase II along with a final report at the Autumn meeting, Board members welcomed the proposal to ensure that there is a whole system model through which the workforce can identify speech/language needs.

5.3 Actions agreed:

- AG to present a final report at the October meeting. **Action 5**
- KS to add the communication strand to the pilot and share learning with the group. **Action 6**

6. **Item 4: Children Needs assessment – Claire Winslade**

6.1 Board members were provided with an overview of the progress made to the needs assessment outcomes resource pack highlighting the key benefits it will bring including:

- Maintaining an overview of the demographics and information about particular populations
- Using PHE child health profiles/indicator framework to a county level and reproducing where possible the most deprived family super output areas.
- Bespoke JSNAs and refreshing existing JSNAs
- Priority analysis – who's at risk
- Update with new child health priorities.

6.2 The group welcomed the progress made in developing the document's accessibility maintaining a balance between the amount of information contained in relation to what can be achieved. The next step will be ensuring that the data is used to inform service provision. Actions agreed:

- CW to bring a further update paper to the autumn meeting. **Action 7**
- PM to send out presentation slides. **Action 8**

7 **Item 6.1: Healthy Child Programme: Local Maternity System and Maternity Needs Assessment – Amanda Kenny and Claire Winslade**

7.1 The above report provided an update on the progress made on the local maternity system to plan and deliver the requirements of Better Births across Kent and Medway to reduce the numbers of still births and neonatal deaths. Action agreed: AK to send through the Terms of reference for the LMS group. **Action 9**

- 7.2 The Maternity needs assessment has been carried out with two main areas of focus:
- Up to date demographic information on women giving birth in Kent.
 - Use of the Kent Integrated Dataset (KID) to analyse the impact of smoking, obesity and long term conditions on Kent mothers re service use and cost during pregnancy and the following six months post-delivery.

- 7.3 In noting the paper Board members agreed that the children's agenda across the priorities of the Sustainable Transformation Programme (STP) needs to be more prominent and better represented across this agenda especially as there is still no clarification on when funding will be available. Action agreed: STP and the profile of children will be an agenda item for the next meeting.
Action 10

8 Item 6.2: Special Educational Needs and Disability (SEND) Update – Patrick Leeson

- 8.1 The above report gave an overview of the progress to date on the delivery of the SEND strategy and the key priorities for action to continue the revised strategy's implementation. The key areas highlighted were:

- Education
- Independence
- Access to employment and training

- 8.2 In endorsing and noting the progress in delivery of the revised strategy, Board members welcomed that the revision will have a forward focus in SEND provision especially in supporting those within the 16-25age group

- 8.3 Board members were provided with an overview of the further developments of the Lifespan transformation which has been developed to be in line with the strategy to support those with disability throughout their life. Actions agreed
- PS to raise with AI for this to be included as a future agenda item on the Social DMT with CCG accountable officers attending. **Action 11**
 - PS to bring a report on Lifespan transformation to the next meeting.
Action 12

9. Item 6.3: Children and Young People's Framework (CYPF) update – Helen Cook

- 9.1 The above paper is a performance report for December on the delivery of the framework's key indicators, highlighting the updates and changes following feedback from Local Children's Partnership Group (LCPG's).

- 9.2 In noting the paper Board members discussed the process undertaken on how grants are allocated and the assurances officers can evidence that the funding provided has been spent appropriately against performance and outcomes. The Chair was optimistic that the framework will deliver the outcomes and make a difference at a local level. Action agreed
- HC to provide a further report for the October meeting that looks at:
 - Monitoring
 - How outcomes are different
 - Demonstrate value for money. **Action13**

10 Item 6.4: Turning the curve presentation – Sue Chandler

- 10.1 The above presentation provided the group with an overview of the approach that the South Kent Coastal Local Children's Partnership Board has taken to reduce the numbers of self-harm hospital admissions.
- 10.2 Board members welcomed the work carried out and were advised that other LCPGs are also undertaking a similar approach to this indicator. Action agreed: PM to send out the presentation slides. **Action 14**

11 KCC transformation

- 11.1 The Chair gave assurance that it was business as usual whilst KCC continues with its transformation , with PL still leading on the SOR programme as part of this integration.
- 11.2 With regards to the Ofsted inspection, the outcome and recommendations from the inspection will be included as part of the transformation process. Action agreed: AI to share the Ofsted report and recommendations along with the supporting action plan with the board. **Action 15**

12. Any Other Business

- 12.1 None noted.

Next meeting:

19 July 2017 – Darent Room, Session House, 2.00pm – 4.00pm

Action List

Action Number	Action Required and By Whom	By When
1	UASC update DH to raise with the Mental Health Transformation board on how this vulnerable client group with Mental health needs are supported in both the short and long-term.	Next meeting
2	Item 6.5 – Emotional Health & Wellbeing CAMHS Transformation of Children and Young People’s Mental Health Services JT to share the transformation Board’s governance structure with board members.	With minutes
3	DH to update plan on how links with primary care and the Winterbourne programme can be made.	Next meeting
4	DH to provide an update report on the progress of the transformation programme and the annual report at the October meeting.	October meeting
5	Joint Reviews for Children aged 2 years (JR2); Update and Progress report AG to present a final report at the October meeting.	October meeting
6	KS to add the communication strand to the pilot and share learning with the group.	Next meeting
7	Children’s needs assessment CW to bring a further update paper to the autumn meeting.	October meeting
8	PM to send out presentation slides	30 March 2017
9	Healthy Child programme – LMS AK to send through the Terms of reference for the LMS group.	With minutes
10	AK to draft a letter on behalf of the group to NHS England regarding the need for a dedicated resource to support the implementation of Better Births.	Next meeting
11	SEND update PSo to raise with AI for this to be included as a future agenda item on the Social DMT with CCG accountable officers attending.	30 March 2017
12	PSo to bring report on Lifespan transformation to the next meeting.	July 2017
13	Children’s & Young People Framework HC to provide a further report for the October meeting that looks at: <ul style="list-style-type: none"> ○ Monitoring ○ How outcomes are different ○ Demonstrate value for money. 	October 2017
14	Turning the curve presentation PM to send out the presentation slides.	30 March 2017
15	KCC transformation AI to bring the Ofsted report and recommendations along with the supporting action plan will be shared with the board.	October meeting

