



Minutes of the Children and Young People's Trust Executive Group Meeting held on 17 June 2016

Present

Core Members

Rachel Dickinson (Chair)	BMBC, Executive Director: People
Bob Dyson	Independent Chair of the Barnsley Safeguarding Children Board
Margaret Libreri	BMBC, Service Director for Education, Early Start and Prevention
Mel John-Ross	BMBC, Service Director of Children's Social Care and Safeguarding
Gerry Foster-Wilson	Executive Headteacher, Representing the Barnsley Association of Headteachers of Primary, Special and Nursery Schools
Sean Rayner	SWYPFT District Director Barnsley/ Wakefield
Cllr Margaret Bruff	Cabinet Member: People (Safeguarding)
Sue Gibson	Barnsley Hospital NHS Foundation Trust, Head of Midwifery/ Nursing
Dr Clare Bannon	GP representing Barnsley Local Medical Committee
Julia Burrows	BMBC, Director of Public Health
Jenny Miccoli	Barnsley College, Vice Principal Teaching, Learning & Student Support
Jayne Hellowell	BMBC, Head of Locality Commissioning and Healthier Communities

Deputy Members

Ann O'Flynn	BMBC Service Director for Customer Services, Communities Directorate (for Wendy Lowder)
Martine Tune	Barnsley CCG, Deputy Chief Nurse (for Brigid Reid)
Patrick Otway	Barnsley CCG, Head of Commissioning (Mental Health, Children's and Specialised Services) (for Brigid Reid)
Christine Drabble	Voluntary Action Barnsley, CEO Corporate Services (for Nigel Middlehurst)

Advisers

Richard Lynch	BMBC, Head of Commissioning, Governance and Partnerships
Julie Green	BMBC, Strategic Lead, Procurement and Partnerships Manager
Anna Turner	BMBC, School Models and Governor Development Manager

In attendance

Rebecca Clark	BMBC Public Health Specialist Practitioner (for item 7.2 and 7.3)
Kay Bennett	BMBC Infant Feeding Strategy Coordinator (for item 7.1)
Caroline Berry	BMBC Research and Business Intelligence Advisor (for item 7.3)
Carol Stringer	BMBC, Contracts and Relationships Officer
Denise Brown	BMBC, Governance, Partnerships and Projects Officer

		Action
1.	Apologies: Brigid Reid Barnsley CCG, Chief Nurse Wendy Lowder BMBC, Service Director for Stronger, Safer and Healthier Communities Amanda Glew BMBC Organisation Development Manager Tim Cheetham Cabinet Member: People (Achieving Potential) Nigel Middlehurst Voluntary Action Barnsley, External Services Manager	

		Action
	<p>Dave Whitaker Executive Headteacher, Representative of Secondary Headteachers</p> <p>Angela Kelly BMBC, Targeted Youth Support Operations Manager</p> <p>Diane Lee BMBC, Head of Public Health</p> <p>Tim Innes South Yorkshire Police Chief Superintendent (Barnsley Commander)</p> <p>Julie Govan BMBC Children's Social Care and Safeguarding, Improvement Programme Manager</p>	
2.	<p><u>Identification of confidential reports</u></p> <p>It was noted that the reports for items 5; 6; 7.4; 9 & 10 were of a confidential nature. There were no conflicts of interest declared.</p> <p>Rachel shared her experience of a recent visit with a Social Worker and a Learning Disability Nurse who were doing some fantastic work with a family. It was clear that earlier intervention would have made a big difference to the young people and the family involved. Rachel stressed the importance of constantly reminding ourselves to the importance of working together to effectively support children as early in their lives as possible.</p> <p>Jenny suggested that a few moments are spent at the start of each meeting to share similar experiences from the front line.</p>	
3.	<p><u>TEG Minutes of 29 April 2016</u></p> <p>Carol was thanked for preparing the minutes of the last meeting. The minutes were approved as an accurate record of the meeting subject to including Margaret Libreri's name under 'apologies'.</p>	Denise
3.1	<p><u>Action log</u></p> <p>Rachel stated that Jonathan and Tracey had appreciated the welcome they had received at the last TEG meeting and felt that it had been worthwhile for them to attend. Rachel stated that she had invited Jonathan to have input into the Health and Wellbeing Board as well.</p> <p>The action log was updated as follows:</p> <p><u>Actions outstanding from previous meetings:</u></p> <p>4.1 – The briefing by Ray Powell had been circulated. Action completed.</p> <p>5.1 – Still births in Barnsley. Rachel had followed up the action for Communities Directorate and developing Family Centres to be made aware of the risk factors during pregnancy, including smoking. Wendy Lowder had confirmed that feedback had been received. Action completed.</p> <p><u>Actions outstanding from 17 March 2016:</u></p> <p>4 – Detail on Child Health Programme Board work streams had been provided to TEG members. Action completed.</p> <p>9 – Impetus on cultural change for improving staff skills to deliver quality services to be considered. Rachel requested an update from Paul Hussey and Ann undertook to follow up this action.</p> <p><u>Actions from 29 April 2016:</u></p> <p>4.1 – Barnsley's Parent and Carer's Forum. Confidence and effectiveness of the workforce need to be increased, particularly in relation to personalised</p>	Ann

		Action
	<p>budgets. Amanda to take forward the issues in terms of the Workforce Development Strategy.</p> <p>4.2 – The Barnsley Alliance Board would be meeting at the end of June when Margaret would inform them of the work of the Barnsley Parent and Carers Forum. Action outstanding.</p> <p>5.1 – SEND Strategy. Action outstanding for Colette and Margaret to work with Jonathan and Tracey to emphasise the importance of including the child's voice and to ensure that family support is strengthened.</p> <p>5.2 – Action outstanding for Colette to meet with Brigid. It is understood that work is taking place with Karen O'Brien.</p> <p>5.3 – No further comments or amendments had been received.</p> <p>5.4 – Equipping the workforce to capture the wishes and feelings of a non-verbal child is being included in the Workforce Development Strategy.</p> <p>5.5 – The TEG work programme had been updated to include an invitation to the Parent and Carers Forum to attend a meeting in a year's time to discuss progress.</p> <p>6 – Early Help update on progress is on the TEG agenda for 4 August 2016.</p> <p>7 - Rachel to write to the Barnsley Alliance Board to ask them to commission a piece of work around school exclusions for a future CYP Trust meeting.</p> <p>8 – Richard proposed that an annual report of activity be developed for the Trust, including the work of the Executive Commissioning Group. The report would be structured in line with the Children and Young People's Plan. A report would be brought to a future meeting following approval of the format of the performance report. Rachel commented that this would be a useful driver and a form of accounting of the difference that has been made as a partnership. It was agreed that the proposed report would be prepared for the next meeting.</p> <p>9 – Future in Mind. A successful stakeholder event had been held. Gerry and Jenny confirmed that they had found it to be very positive. Two more events are being arranged, the next one being in September. Patrick stated that stakeholders had agreed to fund existing priorities for 2016. A lot of work is taking place to train teaching staff, and training for children themselves is also being considered. Patrick to escalate any barriers to the Trust.</p> <p>10 – Continuous Service Improvement Plan and the implementation of MASH is on track.</p> <p>13.1 – The TEG work programme review was completed.</p> <p>13.2 – Rachel requested that the action to consider holding a reflective workshop be carried over. Need to consider the right time to hold a workshop to determine whether or not priorities are focussed accordingly and to re-prioritise depending upon urgent changes.</p> <p>13.3 – An update on 'Think Family' is on the work programme for 6 October 2016 for Paul Hussey and Margaret Libreri.</p>	<p>Amanda</p> <p>Margaret</p> <p>Colette/ Margaret</p> <p>Colette</p> <p>Rachel</p> <p>Richard</p> <p>Rachel/ Richard</p> <p>Paul/ Margaret</p>
4.	<p><u>Performance: escalated items:</u></p> <p>No performance issues were escalated.</p>	
5.	<p><u>Child Health Programme Board Work streams</u></p> <p>5.1 <u>Breastfeeding</u> (Kay Bennett)</p> <p>The report provided an update on the present position of breastfeeding, giving both the national and local picture for 2015-16, demonstrating future challenges. The following points were highlighted:</p> <ul style="list-style-type: none"> • The Breastfeeding and Infant Feeding Steering Group used to report into the Child Health Programme Board which no longer meets. • The group needs a broader range of representatives at decision making 	

		Action
	<p>level to strengthen its effectiveness.</p> <ul style="list-style-type: none"> • Breastfeeding and infant feeding needs to be incorporated into other strategies, including healthy weight and healthy lifestyle choices such as stop smoking. • The 'Baby friendly' initiative is due to be accredited in three years. Accreditation needs to be continually maintained and audits are relentless. The Hospital and Children's Community Services are fully accredited, and it is hoped that the Neonatal Centre will become accredited in its own right. It is quite an expensive programme but is worth the cost benefits of future savings. It is important to have good champions to support breastfeeding and to advocate for it. • There is a concern that the data received is not accurate. The data shows that there are about 30 mums breastfeeding at 6-8 weeks, but Kay acknowledges that there may be a lot of women still breastfeeding that are not known to the service. • Data is collected by Health Visitors and submitted to Public Health England. Sue stated that problems had been experienced with a new data system and that this was currently being resolved. • Breastfeeding initiation rates have been going up over the last few years, but young women are not continuing to breastfeed. 64% of mothers start breast feeding and 28% are still breast feeding by the time the child is 6-8 weeks. It is important to focus efforts to encourage young women to continue to breastfeed at that stage. • The Lactation Consultant has left, and specialist breastfeeding support needs to be developed. • The plea is for partners to ensure that their respective organisations and services are welcoming to women who wish to breast feed, and for schools and further education institutions to support young women who choose to return to education. Guidance also needs to be developed for young women who are breastfeeding. • It was acknowledged that a cultural change is needed, which takes a long time to achieve. • Julia stated that a research project was undertaken in Sheffield giving shopping vouchers to young women who were breastfeeding. Not everyone may agree with this approach, but it does seem to be effective and may start to change the culture. • Factors that influence breastfeeding include: experiencing pain when breastfeeding; night feeds; worklessness; feeding in public places and poor body image; peer pressure; pressure from boys to not breast feed; young women wanting to get their figures back. • 'Having a baby' programme provides one to one support which is very effective. It was acknowledged that peer support is most effective. • The excellent work of Kay and the breastfeeding team was acknowledged. • Anna suggested sharing positive case studies to encourage young women to continue to breast feed. • Ann O'Flynn suggested that breast feeding be promoted through the Registrar's Service when the birth is registered. Kay requested that parents also be signposted to the Service's Facebook page. • Susan is happy to support the Neonatal Unit becoming 'baby friendly' accredited. • Jenny suggested educating young men. Kay stated that the service would welcome working with Barnsley College. <p>The Trust Executive Group agreed to the recommendations in the report.</p>	

		Action
	Kay undertook to contact colleagues to invite them onto the Breastfeeding and Infant Feeding Steering Group, and it was agreed that any difficulties in recruiting the right people, or resolving the issues around data, would be flagged up to the TEG.	Kay
5.2	<p><u>Teenage conception</u> (Rebecca Clark)</p> <p>Rebecca presented slides prepared by Megan Ward who had been unable to attend.</p> <p>The following comments were noted:</p> <ul style="list-style-type: none"> • The latest data available for under-16 abortion rates is from 2014. It would be helpful to have more up-to-date data, and to look at local data sources. Sue asked Rebecca to let her know what data was needed. • It would be interesting to know the number of planned pregnancies. It is important to raise the aspirations of young people and to break generational cycles and cultural 'norms'. • It was noted (slide 11) that RSE is achieving access in all but one school in Barnsley, and it would be useful to know what impact this has. • Since the demise of the Youth Service it would be helpful to know what education is offered by voluntary sector organisations. • Rachel suggested that a steering group be formed to track the impact and challenges from different parts of the system to make sure the issue of teenage conception prevention is being considered by partner agencies. It was agreed that Public Health would coordinate the group to consider how this work could be integrated. • There had been good feedback as a result of Spectrum working in Horizon School. • It was agreed that an update would be submitted to a future meeting. • Richard pointed out that consideration be given to monitoring the Children and Young People Health and Wellbeing Strategy. 	<p>Rebecca</p> <p>Public Health</p> <p>Work Programme</p>
5.3	<p><u>Young People Health and Wellbeing data presentation</u> (Caroline Berry)</p> <p>After the presentation, the following comments were noted:</p> <ul style="list-style-type: none"> • It would be helpful to know whether excessive use of alcohol is changing. • The WAY Survey shows that more girls are involved in risk taking behaviour, which in turn may be resulting in increased teenage conceptions. • Some of the issues are enduring and have been spoken about for years. Need to continue the work through Public Health and through schools to enforce the messages about stop smoking, having a good diet and responsible drinking habits. The number of young people smoking has gone down, but the issues of alcohol abuse and obesity still need to be prioritised. • Need to consider how well the frontline workforce understand the health risks to key lifestyle outcomes, and how effectively young people most at risk are able to be identified. • It was noted that the 'Be Well Barnsley' website is still under construction. • It was agreed that Rachel and Julia would consider how TEG partners could support the work of the Child Health Programme Board to add value to this work. <p><i>(Kay, Rebecca and Caroline left the meeting and Mel John-Ross arrived at this point.)</i></p>	<p>Rachel/ Julia</p>

		Action
5.4	<p><u>0-19 Healthy Child Programme progress update</u> (Julia Burrows)</p> <p>The paper provided an update on the transition of the 0-19 Healthy Child Programme for School Nursing and Health Visiting Services, which will be delivered by the Council from 1 October 2016. A Transition Board has been established along with Transition Steering Groups and a number of sub-groups to drive this work.</p> <p>Clare stated that GPs had expressed concern regarding the impact on their workloads, having to complete lengthy referral forms for the School Nursing Service. SWYPFT to follow this up. It was noted that Julia is scheduled to attend the Local Medical Committee meeting in July.</p> <p>A multi-agency event, focusing on maximising the frontline workforce, is being planned for October with stakeholders.</p>	SWYPFT
6.	<p><u>Contacts into social care and the front door</u> (Mel John-Ross)</p> <p>Mel provided an update following the report that was presented to TEG in February, highlighting the following points:</p> <ul style="list-style-type: none"> • On average, 1100 contacts had been received into social care each month. The high conversion rate to assessment resulted in a lot of families having to undergo intrusive assessments, many which resulted in no further action. The number of contacts into social care has also affected assessment timeliness, and it was acknowledged that resources would have been more effectively targeted on those children needing to be safeguarded. • During February, TEG and BSCB endorsed a proposed change to the way contacts are recorded and screened, and an 'operational guide for screening staff' has been implemented. • Children Social Care staff are not recording contacts that don't meet the threshold for statutory services, and the number of contacts into social care have reduced. • Children Social Care and early intervention need to work together and have the right conversations about families to ensure that resources are most effectively targeted. <p>The following comments were noted:</p> <ul style="list-style-type: none"> • There is a risk that a safeguarding concern may be missed if all contacts are not being recorded, and it is therefore essential that the right referrals are being processed. Mel confirmed that this is a valid concern that had been raised previously, and there has been agreement to invite agencies to the CSC Screening Meeting to discuss these concerns. • It is important to ensure that all partners have systems in place to support staff with safeguarding concerns that don't meet the threshold of social care. Organisations need to ensure that referrals into social care are appropriate and that staff use the escalation process if they don't get the right response. Further, that ownership is taken of the safeguarding concern and followed through for the sake of the child. • A significant number of referrals come from schools and it is important that designated safeguarding leads are well supported. • Mel to check with Nigel Leeder that quarterly meetings have been set up with the Schools Safeguarding Leads and that dates are circulated. 	Mel

		Action
	The Trust Executive Group agreed to note the report and members were encouraged to keep the conversations going in their respective organisations.	
7.	<p><u>Keeping children and young people safe</u> (Bob Dyson and Mel John-Ross)</p> <p>The report provided an overview of current performance data in relation to this TEG priority, and the following points were highlighted:</p> <ul style="list-style-type: none"> • The BSCB is concerned about the low number of early help assessments being completed. Despite there being fewer assessments, the timeliness of assessments continues to be a concern, taking 45 days and more to complete. Work is taking place to address this. • It is pleasing to note that there were no S47 assessments awaiting allocation. Also that the backlog of S17s had been cleared. • Child Sexual Exploitation remains a priority for the BSCB. A dedicated sub-group monitors the recently refreshed strategy and action plan. Three cases of CSE were recorded by the Police. It appears that Barnsley does not have the gang related incidents found in other places. • There are a lot of young people who go missing at times and some of those are repeat offenders, particularly looked after children. • The Board is doing further work to understand an increase in violent crime where the victim is under 18 years of age. • The Board provides high quality training courses, and is trying to determine what impact that has on outcomes. • A campaign to raise awareness of various safeguarding issues will be taking place the week of 4 July. • It was noted that there had been an article in the Barnsley Chronicle to raise awareness of FGM. • Barnsley has more children on child protection plans than statistical neighbours, and there needs to be a discussion regarding the added value and protection that a CPP has as opposed to a Child in Need form. Bob added that improvements in Early Help Assessments should reduce the need for CPPs. <p>The Trust Executive Group agreed to note the report and the issues raised.</p>	
8.	<p><u>Sustainability and Transformation Plan (STP)</u> (Julia Burrows)</p> <p>The paper provided an update on the development of the Sustainability and Transformation Plan.</p> <p>The following points were highlighted:</p> <ul style="list-style-type: none"> • Every health and care system in England will be producing a STP showing how local services will evolve and become sustainable over the next five years, with a view to providing better patient care and improve NHS efficiency. The process has been very NHS focused. • A lot of discussion has taken place about re-designing the secondary care system. • Lesley Smith is the CCG leader for South Yorkshire and Bassetlaw 'footprint'. • There are some challenging discussions to be had regarding local services and how this fits in with the bigger tertiary centre in Sheffield. • Alongside the STP is the development of the Barnsley Integrated Place Based Plan. These will be important to accessing transformational 	

		Action
	<p>funding to make a real difference to health inequalities and outcomes in Barnsley.</p> <ul style="list-style-type: none"> • Timescales are challenging with a submission date of 30 June. <p>Discussions have been held to consider the advantages to the system; the priorities for Barnsley; and what could be done differently.</p> <p>Priorities include: life expectancy; smoking; changing relationship with communities and individuals; mental health; changing the way we work together. Need to consider a small number of things that will make a difference.</p> <p>Christine stated that Voluntary Action is working in partnership with counterparts in Sheffield, Rotherham and Bassetlaw, and regular meetings are being held regarding this work.</p> <p>It is important that TEG members are kept informed of progress.</p>	
9.	<p><u>BSCB meeting 13 May 2016</u> (Bob Dyson)</p> <p>The minutes of the Barnsley Safeguarding Children Board meeting held on 13 May had been circulated for information.</p> <p>Bob stated that after the BSCB meeting he had met with a group of about 15 young people who had come across as very articulate, and overall it had been a very positive session. Issues raised included:</p> <ul style="list-style-type: none"> • Mental health and frustrations over waiting times. • Young people don't feel that they are being listened to. • Places that don't feel safe include the Barnsley Bus Station, and they are aware of low level drugs and drinking in the Town Centre which makes them feel uncomfortable. South Yorkshire Police have responded by allocating a Town Centre team to address some of the issues raised. • Other issues of concern included sexualisation of young women and reports of on-line bullying. <p>Bob had written to each young person to thank them for their involvement and had reported back to them what had been done as a result.</p>	
10.	<p><u>Continuous Service Improvement Plan</u> (Mel John-Ross)</p> <p>During the update it was noted that:</p> <ul style="list-style-type: none"> • No actions are flagged as red - everything is on target and is work in progress. New actions added since the last TEG are shaded grey. • Priorities remain: early help; front door; emotional and therapeutic support for young people. • Another priority is the need to improve our offer to care leavers and this will be the main agenda item at the next BSCB meeting. <p>Rachel suggested that as there will be a discussion on early help at the next TEG meeting it would be helpful to include information from the improvement plan.</p> <p>Rachel suggested that the Officer Group carries out an assessment of where we think we are in terms of the framework, following the inspection 2 years ago. This could form the basis for discussion at the next TEG/ BSCB meeting.</p>	Margaret/ Mel

		Action
11.	<p><u>Children's workforce development</u></p> <p>The report prepared by Amanda Glew to provide TEG with an update in respect of improving staff skills and early help training was noted, and members agreed that they were happy to give their endorsement.</p> <p>Members were asked to provide any further feedback directly to Amanda Glew at AmandaGlew@barnsley.gov.uk</p>	Members
12.	<p><u>TEG work programme review</u></p> <p>The TEG work programme had been extended to July 2017 and was presented for comment.</p> <p>Members were asked to keep it under review and to be aware of the discussions that are scheduled for future meetings.</p> <p>Margaret stated that Nina Sleight would attend the next TEG meeting in her absence.</p> <p>The Children and Young People's Plan had been finalised and members were reminded to take it through their respective organisation's governance structures.</p>	
13.	<p><u>Date of next meeting</u></p> <p>The next TEG meeting will be held on 4 August 2016, from 13.30 – 16.30 in Westgate Plaza, Level 3, Room 3.</p>	