

## **Children and Families Overview and Scrutiny Panel**

### **Friday, 14 February 2020, County Hall, Worcester - 2.00 pm**

#### **Present:**

#### **Minutes**

Mrs F M Oborski (Chairman), Mrs J A Potter (Vice Chairman), Ms P Agar, Mr T Baker-Price, Mr B Clayton, Ms R L Dent, Mr P M McDonald and Mr S J Mackay

#### **Also attended:**

Sue Harris, Worcestershire Health and Care NHS Trust  
Sally-Anne Osborne, Worcestershire Health and Care NHS Trust  
Ness Cole, Head of Service for Parenting and Community, Action for Children  
Nicola Jones, School Improvement Lead, Babcock Prime

Dr Catherine Driscoll (Chief Executive of Worcestershire Children First & Director of Children's Services),  
Dr Kathryn Cobain (Interim Director for Public Health),  
Liz Altay (Public Health Consultant),  
Sarah Wilkins (Director, Education and Early Help, WCF),  
Sheena Jones (Democratic Governance and Scrutiny Manager) and  
Alyson Grice (Overview and Scrutiny Officer)

#### **Available Papers**

The members had before them:

- A. The Agenda papers (previously circulated);
- B. Presentation handouts for Item 6 Educational Outcomes 2019 Including Ofsted Update (circulated at the Meeting)
- C. The Minutes of the Meeting held on 23 January 2020 (previously circulated).

(Copies of documents A and B will be attached to the signed Minutes).

#### **420 Apologies and Welcome**

Apologies were received from Ms T L Onslow, Mr M J Hart (Cabinet Member with Responsibility for Education and Skills), Mr J H Smith (Cabinet Member with Responsibility for Health and Wellbeing) and Ms J Stanley (Healthwatch).

#### **421 Declaration of Interest and of any Party Whip**

None.

#### **422 Public**

None.

## Participation

### 423 Confirmation of the Minutes of the Previous Meeting

The Minutes of the Meeting held on 23 January 2020 were agreed as a correct record and signed by the Chairman.

### 424 Commissioning a 0-19 Prevention and Early Intervention Service

Attending for this item were:

Liz Altay, Public Health Consultant, WCC  
Kathryn Cobain, Interim Director of Public Health, WCC  
Ness Cole, Head of Service for Parenting and Community, Action for Children  
Sue Harris, Director of Strategy and Partnerships, Worcestershire Health and Care NHS Trust  
Sally-Anne Osbourne, Associate Director for Children Young People & Families & Specialist Primary Care, Worcestershire Health and Care NHS Trust

The Interim Director of Public Health and colleagues had been invited to the meeting to brief Members on the latest developments in relation to the 0-19 Prevention and Early Intervention Service.

The Panel had previously received an update in May 2019. The commissioning process had now been completed and the Worcestershire Health and Care NHS Trust had been awarded the contract as the Lead Provider. The new service would commence on 1 April 2020.

By way of introduction, Members received a presentation and were given an opportunity to ask questions. The following main points were raised:

- There was an annual £9.3 million spend on this service.
- Action for Children was a national charity and currently held the Parenting and Community Development contract in south Worcestershire.
- It was confirmed that community capacity building aimed to provide more service capacity through volunteering and peer support.
- In response to a question about the demand for specialist services, Members were informed that, although the number of births overall was not going up, the potential complexity of need was increasing.
- The importance of service integration was highlighted. The commissioned service would

bring together Public Health Nursing Services for Children and Young People and the Parenting & Community Development Service.

- It was confirmed that the Service would have a focus on narrowing inequalities.
- Members were shown the 'windscreen of need' which highlighted the breadth of the service ranging from universal to specialist services.
- Members noted details of the Healthy Child Programme which would be delivered in full by the newly commissioned service.
- The new service would be known as the Starting Well Partnership. It would be a fully integrated partnership with one pathway, with the aim that families would not be aware that those delivering the service were employed by different organisations.
- It was confirmed that there were currently four providers: Worcestershire Health and Care NHS Trust, Action for Children (in south Worcestershire), Barnado's (in Wyre Forest) and Redditch Borough Council (in Redditch and Bromsgrove). These providers currently had four different contracts which would be brought together under one organisation moving forward (to be known as the Starting Well Partnership). The Partnership would deliver the contract on behalf of Worcestershire County Council. Although there would be one contract held by Worcestershire Health and Care NHS Trust as the prime contractor, the service would retain the expertise of all four partners, with local knowledge as a strength.
- In response to a question about communication in relation to the new service, Members were reminded that the new contract would start on 1 April 2020. There would be face-to-face communication with staff. It was confirmed that all appropriate staff would be able to access electronic records via care notes.
- The Partnership's vision was central to the model of delivery. The service outcomes focused on known areas for improvement.
- It was confirmed that any staff concerns about neglect would be followed up through safeguarding procedures.
- In response to a question about support available for new mothers (and specifically young mothers), Members were reminded about the Family Nurse Partnership Programme, an evidence-based programme for vulnerable young mothers.

Intensive home visiting from an early stage was essential to support the expectant mother, with far more contacts antenatally to develop confidence and skills. This would continue through to the child's second birthday.

- Members were also informed about 'Birth and beyond' an evidence-based antenatal programme, involving midwives and health visitors. The focus was on the relationship between parents and child from a very early stage.
- The aim was to ensure that all parents had easy access to information and support, via the Starting Well website.
- Concern was expressed that in recent years the number of health visitors had been reduced by 25% and some Children's Centres had also closed. It was difficult to see where there was capacity in the system for the new service. Members were reminded that the service had been working on reducing duplication within the system, in order to develop a more efficient service thus freeing up capacity.
- It was important to recognise that resources had been reduced and the service now had to work with partners to use the available resources better and more effectively. For example, colleagues were working with the Herefordshire and Worcestershire Sports Partnership to develop antenatal and postnatal activities for women.
- In developing community capacity, the service aimed to help communities to help themselves. This would involve training and increasing the number of volunteers, not just as helpers but to deliver the service.
- School performance at Key Stage 2 was included as a key area for improvement. Members were reminded that in Worcestershire outcomes at Key Stage 2 were not as good as at Key Stage 4 and some secondary schools had expressed concern about this.
- In response to a question, Members were informed that volunteers undertook a variety of roles, including the delivery of 'Stay and Play' groups, parent peer support, breast feeding groups and parenting programmes. Some volunteers may have been through a parenting programme themselves and had undertaken further training to allow them to co-deliver the programme. This was good for their own development, but also good for parents to receive support from someone who understood the

issues. The partnership was also looking to develop a volunteer passport. It was confirmed that, although volunteers were trained and DBS checked, they were not currently able to access qualifications or accreditation. The partnership was looking at making training and DBS checks were portable across the partnership. The calibre of volunteers was high, including people with little previous experience as well as those with established skills in relevant areas.

- It was confirmed that the partnership had links with the National Childbirth Trust and the antenatal offer would be for all pregnant women.
- Members were informed that meetings with headteachers would be held to explain the delivery model and what would be required of schools. It was confirmed that the partnership would work alongside social care colleagues but in a different role.
- Concern was expressed that schools may no longer have the resources to support the partnership's work. Planned headteacher briefings would take place at the beginning of March providing an opportunity for schools to better understand the new service and allowing the Partnership to better engage with schools. Members were reminded that school nurses already provided a link. The briefings would also provide an opportunity to ask schools to help in the testing of the new digital well-being self-assessment tool.
- It was confirmed that safeguarding was central to the service and woven throughout, including making sure that any intervention was undertaken by the most appropriate role. Where additional need was identified, the aim would be to take a holistic, whole family approach. Partner agencies would come together to discuss the family's strengths and weaknesses and develop a joint action plan with the family.
- Joint district plans would be developed to ensure consistency across Worcestershire but with a distinct district 'feel'. For example, this would recognise the rural nature of Wychavon in contrast to more urban Redditch.
- The Partnership proposed to develop a team of 'influencers' - parents and young people who would use social media to disseminate health related messages. It was suggested that these messages may be more readily accepted from a peer than from a health professional and could

target minority groups (in different languages), non-school attenders and the LGBT community.

- It was confirmed that the digital well-being self-assessment tool would be completed by young people online and would be piloted in some schools in the summer term. Analysis of responses would lead to a school action plan outlining how the school could be further supported.
- It was confirmed that the self-assessment tool would also be available to electively home educated children. This was an advantage of an electronic system but it was acknowledged that reaching children who were not in school would not be without its challenges. It was suggested that some children may be more easily reached through youth clubs and projects rather than school. Members were informed that other local authorities had already undertaken such assessments and the Partnership would look to learn from their experiences.
- The new website would be jargon-free and easy to access. Existing social media channels would be rebranded.
- Members were informed that combined pathways would be used by all staff in the partnership regardless of the organisation they were employed by.
- It was agreed that, once the service was up and running, all Councillors would be informed of the key access people within each district council area.
- The Panel requested that the Partnership considered the possibility of accrediting volunteers.
- The Chief Executive/Director of Children's Services reminded Members of the importance of the whole family approach. However, it would not be appropriate for the Partnership to have a performance indicator in relation to reducing the number of children entering care, as the majority of this work was the responsibility of Worcestershire Children First. It was confirmed that Worcestershire Children First would be working closely with the Starting Well Partnership.
- It was confirmed that some mapping of existing community services had already taken place and further work would be done to update this.
- Although accommodation restrictions meant that teams may not always be co-located, they would be meeting regularly throughout the working week

**425 Educational Outcomes 2019 Including Ofsted Update**

to coordinate the service. The Starting Well Partnership Board would meet monthly.

- It was confirmed that Worcestershire health and social care partners were developing a digital portal to include a directory of community services. Once complete, this would be an open portal.

It was agreed that:

- Once the service was up and running, all Councillors would be informed of key access people in each district council area;
- The Partnership would consider the possibility of accrediting volunteers;
- The Children and Families Overview and Scrutiny Panel would receive a further report in February/March 2021 to include how the service was progressing and performance against KPIs.

Attending for this item were:

Nicola Jones, School Improvement Lead, Babcock Prime  
Sarah Wilkins, Director of Education and Early Help, Worcestershire Children First

The Panel was asked to consider a summary of the educational outcomes for children and young people in Worcestershire schools for 2019. Members were reminded that, from 1 June 2020, staff currently working for Babcock Prime would be transferring to Worcestershire Children First.

During the discussion, the following main points were made:

- Across the board, results showed very little difference between attainment in maintained schools and academies. For Early Learning Goals, maintained schools were showing a more rapid improvement.
- At Key Stage 1, schools in Worcestershire were achieving in line with national results.
- At Key Stage 2, Worcestershire schools were achieving below national results. Although there had been some improvement, there had also been improvements nationally. The gap had decreased but needed to narrow faster.
- In response to a question about the difference in attainment between boys and girls, Members were informed that national trends were replicated in

Worcestershire, with more able boys doing better than more able girls. It was agreed that further details on this would be circulated following the meeting.

- In response to a question about attainment in each district council area at Key Stage 2, the Panel was informed that Bromsgrove, Malvern and Worcester City achieved above the national average whereas Redditch, Wyre Forest and Wychavon achieved below the national average. There were similar trends in the Early Years.
- It was confirmed that there was no clear split on achievement between 2-tier and 3-tier areas. Achievement levels very much depended on how schools worked together.
- It was agreed that further details of attainment levels broken down by district council area would be circulated to the Panel, once validated data was available.
- It was confirmed that the County had good models of collaboration between schools (for example, in Bromsgrove) but imposing a model of working on other areas was unlikely to be successful. It was part of the way forward to have a community approach and this would be developed using the existing district briefings.
- To date, the focus of work at Key Stage 2 had been on reading and mathematics. This had started to have an impact and there was now a need to include writing in the focus.
- Schools had been assessed as being in one of five categories according to the amount of support they needed. Members were informed that the model for support had recently changed and schools in Category 3 were now able to access training free of charge. Support was either bespoke to an individual school or group of schools, and take up and engagement had already improved. The peer-to-peer model aimed to bring schools together to work with a School Improvement Adviser.
- Since 1 September, all maintained schools had access to a School Improvement Adviser. Members were reminded that school improvement would take time. Ofsted reports were now recognising where the School Improvement Service was making a difference.
- Early identification of poorly performing schools had been improved by holding monthly 'schools at risk' meetings, giving the full picture of intelligence around the school. The service had got better at



**426 Work Programme 2019/20**

finding out what was happening in schools, including academies. It was confirmed that category 1/2 schools would have access to a School Improvement Adviser for 2 days per year and had the option to buy in further support if necessary.

- A question was asked about the new Ofsted framework and it was noted that the reports would be much more parent friendly. It was suggested that a consequence of the new framework was that verbal feedback would become critical. Furthermore, it was suggested that it would be much more difficult for a school to be judged as 'outstanding' under the new framework.

The Panel agreed that it was happy with the progress being made in school improvement. It was agreed that, once 2019 performance data was validated, the Panel would be sent:

- Details of attainment at KS2 for writing, reading and maths split by boys and girls;
- Details of attainment by district council area.

The Panel reviewed its work programme and no comments were made.

The meeting ended at 4.00 pm

Chairman .....