

Bury Children's Trust

Minutes of the Joint Meeting of the Children's Trust Board and Children's Trust Operational Sub Group held on 31 January 2018

Attendance:

Paul Cooke (Chair)	Interim Assistant Director of Learning, Council CYP&C
Tony DeCrop	Interim Assistant Director Social Care & Safeguarding, Council CYP&C
Maxine Lomax	Head of Safeguarding & Designated Nurse Child Protection and Looked After Children, Bury CCG
Michael Hargreaves	Bury Clinical Commissioning Group (on behalf of David Latham)
Kim Marshall	Operational Manager, Bury Healthy Young Minds, Pennine Care NHSFT
Nicola Gray	Bury Healthy Young Minds, Pennine Care NHSFT (shadowing Kim Marshall)
Vicky Maloney	Chief Officer, Early Break, representing CYP Third Sector Forum
Karen Whitehead	Strategic Lead Health, Families, Partnerships & Complex Care, Council CYP&C and C&WB
Tom Gledhill	Headteacher, Spring Lane School, representing BASH
Jon Hobday	Consultant in Public Health, Council C&WB (on behalf of Lesley Jones)
Mandy Symes	Interim Strategic Lead, Strategy & Development, Council CYP&C
Rachel Davis	Project Lead, Council C&WB
Mark Dennis	Strategic Lead SEND, Inclusion and Integrated Youth Support, Council CYP&C
Lesley Davidson	Emotional Health & Wellbeing Coordinator, Council CYP&C
Lindsay Dennis	Children's Trust Development Officer, Council CYP&C
Adele Crowshaw	Youth Participation Officer, Council CYP&C attended for item 3

1. Introductions and Apologies (P Cooke)

PC explained that KD was on leave and unable to attend and had asked him to Chair the meeting in her absence. He welcomed everyone to the meeting and introductions were made.

Apologies were received from Karen Dolton, Sue Reynolds, Charlie Deane, Maria Worthington, Gemma Philburn, Karen Young and Anne Gent. Attendance on behalf of other partners who were unable to attend is listed above.

2. Minutes and Matters Arising

Papers circulated

Actions from the last meeting were confirmed as set out in the Action Log. In addition the following was noted:

Item 3: Youth Combined Authority – feedback on progress deferred to the next meeting in KD's absence.

Item 8: Transformation – The November Board meeting was replaced with a Transformation workshop, at which there had been a talk by STH officer, Kirsty Booth about new ways of working in STH to identify and improve early help to STH tenants provide the support to build stronger communities.

Item 9: Transformation group mapping – LD has received feedback from some partners with respect to the number of groups they attend where there is duplication/overlap. Addressing this needs to be part of the Transformation improvements.

3. Circles of Influence (Adele Crowshaw)

Papers circulated

AC reminded partners of the format of the annual Circles of Influence, which last year took place on 13 July 2017. She outlined the main points from the report and highlighted that some come up every year. For example, young people feeling that they are not prepared for life - which has been agreed as a UK Youth Parliament national campaign issue. In addition the need for first aid training; transport issues (being looked at by Andy Burnham) and getting the right help at the right time.

PC asked partners to think about what role the Board can have in addressing the issues raised and what links can be made. Key points from this discussion were that:

- In the refreshed CYPP as well as the collective priorities, PC recommended that young people's priority from the Circles report could be included.
- Some issues raised regularly are ones we could address, eg, budgeting skills and bank accounts. A very brief conversation between LD and Tracy Flynn flagged up the possibility of involving the Banks as part of their social responsibility – this is now being pursued.
- PC noted that the issues often show a high level of maturity and we should be looking at how we support. For example another regular issue is that young people want sex and relationships education to focus more on healthy relationships. The government is now reviewing SRE and this is one of the things they flag up.
- TG stressed the need to ensure that we don't just look to schools as being the route to respond to these issues as PSHE is becoming overloaded. LDavidson noted that we may need to adapt what is taught in PSHE rather than add more topics (eg change the focus of SRE)
- Needs to be more focus on the home and parenting responsibility to prepare young people for life.
- It is important to manage expectations
- Need to increase understanding that many of the skills young people are learning are transferrable life skills.

In discussion about where the report goes next, it was noted that it goes to BSCB and that it needs to inform commissioning, eg, JH noted that CAB are doing some of this work with adults and it may be that a family approach is needed. It was agreed that the report needs to be considered in the development of the next Children & Young People's Plan. It was also agreed that there needs to be a feedback mechanism to young people and oversight by the Board.

Action: LD/All Report to be included in development of CYPP

All: Report to inform related commissioning and planning where relevant

AC: Feedback mechanism to young people/updates to Board

4. CYPP Priority 2 – Emotional Health & Wellbeing and Resilience

4.1 Local Transformation Plan CYP Mental Health (M Hargreaves)

Papers circulated and attached to these Minutes at p7

MH noted that regular updates are due the Children's Trust to keep all partners informed and engaged. In the last 6-9 months this has fallen off, especially since the CT Ops Group have stopped having their meetings. MH will continue to provide an update every other month.

LTP Progress update - MH highlighted the following points from the written update:

- Transition Service - recruitment process for Transition Manager substantive post is underway and will hopefully be appointed very shortly. Meetings with colleges and other agencies will be arranged to strengthen support to age 18 initially, extending to 21 and then 25 by 20/21.
- Link workers – Interviews for 3rd link worker taking place week commencing 5 February. A key area of work will be the development of BEST (Behavioural & Emotional Skills Training) low level support to young people who are struggling with emotions and at risk to behaviours such as self-harm to manage their emotions and build resilience, including the involvement of their parents. Participating teachers will be trained to deliver BEST by Healthy Young Minds staff, who will then supervise them in school and provide a mentoring role. Currently have 2 schools who wish to take up the training. Any professionals who want to shadow and find out more, should contact KM. It was also suggested that information could be included in the CT weekly e-mail.

Action: KM/LD to discuss

- For young people needing HYM support, HYM staff are being trained in DBT (Dialectical Behaviour Therapy), an evidence based treatment model. Any

TG expressed concern that pressure in schools can make it difficult to release staff and the impact of removing staff from the classroom. There needs to be a structure (and funding) around how to disseminate to the rest of school staff, including school nurses and classroom assistants. There are 5 inset training days but a lot to be included in these in addition to curriculum training – possible use of PAD days suggested. TD highlighted that mental health support in schools is a key part of the Green Paper Mental Health and said that a briefing needs to come to the Board.

Action: Briefing on Green Paper to next Board meeting

- Bereavement & Loss service commenced in September, delivered by Early Break. VM said currently referrals are coming via HYM and already there is a waiting list of approx. 40 young people, so unable to take referrals from elsewhere at this time. TG highlighted the link between bereavement and exclusion – a significant number of excluded young people have suffered a bereavement.
- MH gave brief updates on other areas of work and these are outlined in the LTP brief at the end of these Minutes, ie business case being developed for a drop-in café type service that better meets cyp needs than traditional NHS provision; redesign of neurodevelopmental service pathways (ADHD and ASD); pilot of a local Sensory Integration Service; updates on Voluntary Sector Grants – including plans to build on the Homestart 1 year agreement to develop a comprehensive perinatal mental health model over the next 2-3 years.

New Items for LTP (*see paper*) MH outlined that the National 5 Year Forward View for Mental Health has an expectation of significantly improved support for prospective and new parents. This includes enhanced specialist services, eg for parents suffering severe depression and post-partum psychosis; extended fast track IAPT access and community parent-infant MH early help hub programmes. Following discussions with the Starting Well Partnership Board, MH will be setting up a multi-agency working group for this.

With regard to LTP funding for the 3 year plan, MH stated the plan is overdrawn for next year so will need to assess expenditure.

MH asked Board Members to think about how the LTP work fits with their own services, identify links and possible benefits and stressed the need for partnership working for successful implementation.

A possible link with the Life Chances Commission which is all age but includes a lot of recommendations around younger years. A standing committee chaired by Rishi Shori met for the first time in January and further meetings are scheduled in. Not clear yet how this will fit with other work but it needs to be linked in. The importance of ensuring that the Life Chances work responds to needs in the JSNA was also flagged up.

All Different All Equal Anti-bullying Network Event (*report provided*) LD explained that the event on 17 November was the 3rd event linked to the LTP and funded from CCG LTP funding. It aimed to give young people's perspective on bullying and what works to address it through drama, poetry, workshops and presentations. The report gives more details and includes key messages from young people involved in the event. Following the event there have been a number of enquiries about intervention and good practice showcased. There will be a follow up e-mail to delegates to ask what difference the event made to them. The report will be sent out all delegates and go on the CT website.

4.2 Gateway Action Mentoring Project (JH)

JH asked the Board to consider information from Gateway Action about a Mentoring project that they are running in partnership with Salford Council in the Jewish community and enquiring about setting up a similar project in Bury. There was some discussion and it was noted that this is a specific group where we struggle to engage. Concerns raised included sustainability of the project after initial 12 months funding ends. It was agreed that more research should be undertaken into the needs of groups/communities where we currently don't engage well, and to understanding what support there is, such as the Gateway Project, so that a systematic approach to addressing need can be taken.

Action: JH

5. CYPP Priority 1 – Early Help (LD)

In Sue Reynolds' absence, LD gave an update on the Early Help toolkit which builds on the lunchtime learning and fact sheets to provide staff with information on a range of issues so that they can provide early help.

The Board have agreed a format that starts with basic awareness-raising information and then on to how to find out more, what learning opportunities there are, assessment and referral pathways where appropriate and good practice examples. To date the Board has only seen a paper version, but working with Janet Watts, progress

has been made to developing this online in the Bury Directory and LD gave a brief presentation of this.

Currently the Early Help pages are in the Children & Families staff area pending further developments to the format of the Bury Directory. There is an Early Help page describing what this means and providing links to different topics. Information under each topic is organised as per the paper version (description; basic information; useful contacts; assessment and referral pathways; learning opportunities; good practice). Some changes have been made to make the online pages more user-friendly, including dropping the use of the word 'toolkit' which could be confusing and is unnecessary.

LD asked for approval to continue this work and for support in identifying professionals who could check the pages (including the description of the topics) and professionals who could 'test' the toolkit for how useful and easy to use it is.

The Board agreed this and noted the good progress. In response to a question about updating the pages, LD said that in general the pages provide links to information elsewhere in the Directory and online. The fact sheets are updated annually but in general the information on these is fairly general and/or provides links to websites. ML noted that a link to the GM Tri-x site could be added to relevant pages (including the CSE page that was demonstrated).

Action: LD

6. **CYPP Priority 3 – Alcohol & Substance Misuse (JH)**

JH advised that the Adult Substance Misuse Contract finishes in April 2019 and the Early Break contract has been extended so that it is aligned. JH and AN are developing a position statement working with Karen Dolton, Julie Gonda and Lesley Jones so that there is a collective plan of action in place by 2019 – looking at this being an all age approach and place-based. This will also need to fit with the GM Drug & Alcohol Strategy which is under final consultation. This will provide the catalyst to re-charge the Drug & Alcohol Partnership.

KW stressed that this needs to be part of a system wide approach that aligns with other work. For example the funding for the transition worker based in Early Break had not been renewed but this was a crucial post around support for young people who are not engaging with Adults. There is a need for a tiered approach that starts with early help.

JH confirmed that he will stress the importance of good engagement in the development of the Plan and will ensure that the Children's Trust is kept 'in the loop'.

Action: JH

7. **Transformation developments (PC)**

7.1 **CT Transformation Agenda – overview of progress**

PC noted that Board and Ops Group members have been involved in the work led by PA Consultants to set out the current approach to Early Help and to look at alternative models. This information is being brought together into a draft paper which needs to be shared - possibly via a final 'wrap up' workshop to look at what needs to be done and aspects of delivery. KD is presenting on progress to Senior Leadership Team on 12 February and PC anticipated that there will be information to circulate shortly after this.

Action: KD

7.2 **Restorative Practice project**

PC outlined that the RP project is an aspect of the Early Help and SEN approach. A great deal of work has gone into developing the project, but funding issues now require that we look at scaling it down and what will be the impact of delivering elements of the project as opposed to the whole project. The presentation about the project that was on the agenda was therefore deferred.

8. **Trust Board and Operational Group and Governance (LD)**

LD flagged up that Terms of Reference and operating arrangements of the Board and Operational Group need to be reviewed. For example, the Board and Operational Group meetings are now held together and this has implications for governance and decisions that previously came to the Board; and it needs to be clear around the role of the Board/Operational Group in the Transformation agenda. It was agreed that this needs to be undertaken within Transformation developments. With regard to meeting regularity and dates for 2018/19, it was agreed to defer this until the March meeting by which time there should be more clarity.

Action: LD – agenda item March

9. **Open Forum and Any other business**

9.1 **Third sector issues/update from CYP & Families Forum (VM)**

VM flagged up a concern that there are third sector groups being set up by willing volunteers but with no safeguarding procedures in place. VM will be taking to Safeguarding Board but was also bringing to the attention of the Children's Trust Board.

It was agreed that there is a real concern about how to ensure that organisations that are not commissioned by the public sector are appropriately regulated, especially as we are looking increasingly to the third sector to deliver IAG and support.

LD noted that she receives enquiries from 'new' third sector organisations and currently sends them information about the Children's Trust and the Forum and adds them to her mailing list for weekly e-mail. She could at the same time inform them about safeguarding requirements. It was noted that in the past there had been a simple breakdown of safeguarding requirements that LD could send out to new and existing Third Sector organisations. It was agreed that this would be good practice and LD to discuss with Donna Green; and also with Andrew Knight re including on the Bury Directory (and look at including a link to Tri.X site).

Action: LD

9.2 **Partner updates and issues for consideration**

9.2.1 VM flagged up that Holding Families referrals are coming from Adult treatment services, but not from Children and Young People's Services and she wanted to bring this to the attention of partners.

Action: All partners

9.2.2 TD advised that the Annual conversation with Ofsted takes place on 8 February. A requirement of this is that a self evaluation focused on social care and safeguarding has been sent to them.

- 9.2.3 KW advised that a quarterly visit to monitor SEND had been held on 25 January. Ofsted were very positive about the Statement of Action and progress and KW thanked all involved.
- 9.2.4 TD advised that the Reach Out Project house is now on the market and the the team have moved to the New Kershaw Centre.
- 9.2.5 LD advised that she and Mark Love had attended the launch of Nightstop Greater Manchester in November. The aim of the service (run by Depaul UK) is to prevent vulnerable young people who are unable or unwilling to go home from sleeping rough or making unsuitable arrangements by finding them a safe place to stay with a trained and vetted volunteer. It provides a short term intervention whilst more suitable long term arrangements can be made and/or help to return home. The good news is that Depaul UK have been funded to run Nightstop across GM.

To assist them in getting established LD invited David Batchelor to the CYP Forum (which he attended in December) and to give a Children's Trust lunchtime briefing on 30 January. As well as the usual open invite, key services had been targeted to ensure that they sent someone along. The briefing had gone very well and as a result of this and the info in the weekly e-mail there have been a number of enquiries about volunteering, contacts made and follow up attendance at team meetings arranged. It hoped that this service will be up and running in Bury in March.

6. Date of next meeting

The next Joint Children's Trust meeting will be on 28 March, 9.30 – 11.30 at the New Kershaw Centre. In addition to the items listed on the agenda, it was agreed that Transformation; the role of the group; frequency of meetings; briefing on mental health green paper also be included.

Children's Trust - Brief Update

Children and Young People's Mental Health – Local Transformation Plan (LTP)

Date - January 2018

1. LTP Refresh

In line with national and GM expectations, the LTP will be refreshed and republished by the end of March 2018. The lighter touch refresh will focus on investment plans, improvement trajectories for 5 Year Forward View and local ambitions, early help/support for schools and, an updated action plan. Contributing partners have been asked to consider elements of the LTP and to provide updates by the 9th February.

2. Current and Planned Priorities

Transition Service

The Transition Service Manager was recruited in November 2017 and Pennine Care is to submit a business case to the CCG by the 29th January, around recruitment to a number of other roles. Once fully operational, the Transition Service will strengthen links with partner agencies throughout Bury to optimise patient care for those CYP during transition up to 18th birthday initially – before extending to 21 and ultimately 25 by 20/21. The service will also enable, where appropriate, newly referred patients aged 16 and 17 to be seen within CYPMH rather than adult mental health.

Link Working/BEST

Pennine Care is currently recruiting to a third Link Worker to work across schools and other sectors. The Link Working service provides a named Healthy Young Minds contact for each school (the link workers cover multiple schools) for real-time advice and guidance, offers training and enables a single point of access for mental health referral. The key focus for late 2017/18 and into 2018/19 is development of a 'BEST' model. The Behavioural, Emotional, Skills Training (BEST) group has been developed to help those that experience high levels of distress and intense emotion that lead to urges to harm themselves. The skills taught are based on Dialectical Behaviour Therapy, which is an intensive treatment that aims to help people to cope more effectively with intense emotions and thoughts that lead to risky behaviours and breakdown in relationships.

The BEST group is a proactive early identification and intervention to school populations where pupils struggle with emotional regulation and managing relationships that in the long term maybe at risk of developing behaviours, such as alcohol or substance misuse, self-harm or suicidal ideation. The aim is that early intervention and skills will prevent these behaviours exacerbating to unhealthy coping strategies in adolescence and early adulthood.

- **Who will refer CYP?** Pastoral staff, HYM from screening of referrals, school health.
- **Timescales for testing the model with a small number of schools and potential wider roll-out**
Spring summer term, a cluster of schools, using one of the schools as a host building
- **Who will deliver the sessions-short and medium –term** initially healthy young minds staff and then Teaching Assistants/SENCOs

It is envisaged that the link workers will work closely with the proposed school inclusion officers as and when in post.

Enhanced Bereavement Service

The enhanced bereavement and loss service has been operational since November and is delivered by Early Break on behalf of Pennine Care. The service has been well utilised from the outset – access is currently via Healthy Young Minds. Initially funded as a 12 month pilot, there will be an interim review in June and an end of 12 month period evaluation around October to make a decision on longer term provision.

Drop-in ‘Café’ Type Service

In response to the results of engagement with CYP, as well as the success of the #Thrive service in the Heywood, Middleton and Rochdale locality, the LTP Implementation Group has recommended to work up a business case around a drop-in ‘café’ type service targeted at CYP. We have heard from CYP via engagement with different groups that young people would greatly value a less ‘NHS’ type provision with a greater emphasis on the youth worker and peer support ‘social’ aspect.

To date, members of the LTP Implementation group have met with local CVS organisations – Streetwise and Early Break and to begin to develop a model for Bury. Representatives from the group have also visited the #Thrive service to understand the background and journey to develop their service. The next step is to draw up an outline model and seek feedback from stakeholders.

Neurodevelopmental Pathways (ADHD and Autistic Spectrum Disorders)

The two providers of the jointly delivered care pathways for ADHD and ASD assessment (PAHT – Community Paediatrics and PCFT – Health Young Minds) continue to work with the CCG to redesign how the service is delivered. For ADHD the aim to ensure delivery against a recently developed set of care standards developed by a GM ADHD working group. The work was supported by an external review into ASD services at PAHT which concluded late last year. Key changes agreed are:

- all school age CYP to be assessed by Healthy Young Minds with pre-school children seen by the paediatricians
- recruitment to nurse specialist roles (subject to approval by the CCG’s Clinical Cabinet). The new roles will work across both providers creating a seamless single service for patients.
- Once these changes are embedded and functioning effectively, as well as an initiative to significantly reduce the backlog of patients awaiting ASD assessment outcome at PAHT having completed, the two providers will work towards similar changes for the ASD pathway.

Sensory Integration Assessment (Specialist Neurodevelopmental Service)

Triggered by a significant number of applications to the Individual Funding Request (IFR) Panel over a 2 year period, which clearly evidenced the demand/need, the CCG is working with PCFT Occupational Therapy to pilot a local Sensory Integration service. To date, the CCG has hosted a workshop, well attended by stakeholders from across the CCG, LA, NHS providers and CVS – as well as patient and family representation from Bury2Gether. The results of the workshop are informing a business case expected from PCFT by the end of the month.

Voluntary Sector Grants

Grant agreements in place with Early Break/First Point Family Support and Streetwise are progressing well, expanding the breadth of support available for CYPMH and will continue for a further 2 years. The 1 year agreement with Homestart came to a close in December 2017 but plans are in place to build on this with a new agreement into 2018, which will support the CCG’s development of a comprehensive perinatal mental health model over the next 2-3 years.