

**MINUTES OF THE CHILDREN'S SERVICE ADVISORY COMMITTEE
MONDAY, 27 FEBRUARY 2006**

Councillors *Meehan (Chair), *Adamou, Adje, *Bax, *Jean Brown, *Engert *Harris, Hoban, *Santry and Stanton

*Present

MINUTE NO.	SUBJECT/DECISION	ACTION BY
CSAC50.	<p>APOLOGIES FOR ABSENCE</p> <p>Apologies were received from Cllr Adje and from Cllr Stanton. Cllr Stanton was unable to attend as he was attending a school governing body meeting.</p>	
CSAC51.	<p>MINUTES:</p> <p>RESOLVED:</p> <p>That, subject to the correction of the figures for discriminatory incidents, the minutes of the meeting held on 5 January 2006 be approved and signed by the Chair as an accurate record of the meeting.</p>	HMS
CSAC52.	<p>DEPUTATIONS/PETITIONS/PRESENTATIONS/QUESTIONS</p> <p><u>Presentation by Haringey Primary Care Trust (PCT)</u></p> <p>We received a presentation from the Haringey PCT entitled "Growing Up in Haringey" which concerned the health needs of young people in the Borough. The spokesperson of the PCT (Ms Gerry Taylor) informed us that</p> <ul style="list-style-type: none"> • The number of young people in Haringey was forecast to increase; • That there were a high number of one-parent families in the Borough; • That there were a high number of homeless families. • The youth population of the Borough was extremely diverse, with children from a wide variety of backgrounds. • The Borough had a large number of looked-after children and unaccompanied minors. <p>All of these figures were far higher than the average national figures.</p> <p>We were also informed that</p> <ul style="list-style-type: none"> • There were notable inequalities in infant mortality rates, which were higher in Haringey than in the rest of the country; • The Borough had a high teenage pregnancy rate as well as a high rate of pregnancies to older mothers. • There was a low immunisation rate in the borough. 	

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	<p>We were advised that the priorities for the PCT were to improve the quality of data obtained on children's and young people's health, to encourage physical activity & healthy eating, to enhance emotional well-being, to minimise the impact of inequalities and to prevent avoidable premature death.</p> <p>Following the presentation, we sought clarification of the provision for child mental health treatment and we were informed that while a needs assessment was taking place, prevention was seen as a key factor as was the provision of outreach services that did not stigmatise.</p> <p>In thanking Ms Taylor for her presentation we expressed concern that although figures by ethnicity had been provided for most communities, there were none relating to young people from the Irish and Greek Cypriot communities.</p>	
<p>CSAC53.</p>	<p>DECEMBER & JANUARY PERFORMANCE DATA FOR THE CHILDREN'S SERVICE: (Report of the Director of the Children's Service – Agenda Item 6):</p> <p>We received a report on the performance data obtained for December 2005 and January 2006 in relation to the Children's Service and we noted that there had been an improvement in the number of initial assessments carried out to timescale and that the outturn was better than in the corresponding period in 2004/5.</p> <p>We also noted that the number of looked-after children had reduced slightly, from 497 to 492, from December to January. 92.8% of looked-after children had a review to timescale in December and 95.4% had a review to timescale in January against a target of 96%.</p> <p>We were informed that 93% of children who required a personal education plan now had one and that the aim was to increase this to 100%. The number of children who were recorded as having had visits had increased in January and officers were investigating the way in which the figures were compiled as performance in this area might not be measured fully and figures might improve further after a new approach was adopted and implemented.</p> <p>We were informed that all children on the Child Protection Register now had an allocated social worker while the number of unallocated family support cases had declined, as had the number of children on the child protection register. 16 adoptions that had taken place during the period in question while 8 children had a date for an adoption hearing against a target of 20.</p> <p>Having been informed that the basket of indicators used by the Central Government was likely to be changing with the fostering/adoption indicator being dropped as one of the key indicators to be reported, we were assured that this figure would still be collected by the Children's Service and reported to us.</p>	

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	<p>Concern having been expressed that in some individual cases children might not be getting the required 25 hours of education, officers confirmed that they would look into the matter.</p> <p>We noted that there were no significant changes to staffing and we voiced disquiet that less than 50% of non-managerial social work staff were permanent employees. Officers indicated that although they were working on a recruitment and retention strategy there might be a difficulty for the Council, in that salaries were thought not to be competitive.</p> <p>RESOLVED:</p> <p>That the report be received and the recruitment and retention strategy be submitted for discussion to a future meeting of the Committee.</p>	<p>DD (D&P)</p> <p>DD (D&P)</p>
<p>CSAC54.</p>	<p>CHILDREN'S WORKFORCE STRATEGY: (Report of the Director of the Children's Service – Agenda Item 7):</p> <p>We were informed that every local authority had been asked to draw up a Children's Workforce Strategy for all staff working in the sector, both Council employees and those who were not. We were also informed that a vision had been developed and had been attached as an appendix to the circulated report.</p> <p>We noted that officers were in the process of collecting data on the children's workforce from various agencies with a view to improving the understanding of the nature of the workforce so that 'gaps' could be identified which might indicate weakness. We also noted that a Steering Group which included external partners had been established.</p> <p>We expressed the view that staff working with children should work towards a multi-disciplinary approach, rather than there being an over-reliance on specialist teams. We also expressed concern about CRB checks which could not currently be made of existing staff but rather could only be required of people when they changed jobs or took up a new post.</p> <p>RESOLVED:</p> <p>That the Committee the report be received and that the vision developed for the children's workforce be noted.</p>	<p>DD (D&P)</p>
<p>CSAC55.</p>	<p>UPDATE ON COMMON ASSESSEMEMENT FRAMEWORK: (Report of the Director of the Children's Service – Agenda Item 8):</p> <p>We were informed that a common assessment framework was to be introduced by 2008 for children which should reduce the need for children and their carers to answer certain questions repeatedly when they were assessed by different professionals.</p> <p>A pilot scheme would be implemented in April and officers were in the</p>	

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	<p>process of agreeing thresholds and putting the management support in place to facilitate it's implementation.</p> <p>RESOLVED:</p> <p>That the report be received.</p>	
<p>CSAC56.</p>	<p>CHILDREN & YOUNG PEOPLE'S CONSULTATION LEAFLET - SUPPORTING NEEDS ASSESSMENT: (Report of the Director of the Children's Service – Agenda Item 9):</p> <p>We received a needs assessment which informed the Children and Young People's Plan and we were informed of the consultation that had been taking place on the Plan including information which had been displayed on the website. The Plan would be considered by the Executive and recommended to the Council for approval.</p> <p>We expressed concern about young people's political participation which we considered should be channelled and about the need for them to have means whereby they could obtain feedback on how their contributions made a difference. The view was expressed that the 'Leadership course' run by the Black Police Association seemed particularly inspiring.</p> <p>We noted that the plan would list desired outcomes rather than how they would be achieved which would be a matter for further plans. We also noted that information on mental health and obesity was currently not available at borough level which meant that differed on the scale of these problems in Haringey.</p> <p>RESOLVED:</p> <p>That the report be received.</p>	
<p>CSAC57.</p>	<p>UPDATE ON E-CARE TRAINING (Report of the Director of the Children's Service – Agenda Item 10):</p> <p>We noted that there had been an extensive programme of training for users prior to July 2005, when E-care had gone live since which time support had also been available to staff.</p> <p>However, there had still been change management issues while staff were familiarising themselves with the new system and we noted that there had a number of changes with which staff had to cope including the change from Social Services into the Children's Service which had proved challenging. We also noted that five training days had been organised during February for staff to assist them in using E-care.</p> <p>Having been informed that pre-population of commonly-used fields would be implemented in order to speed up the process for users we sought clarification of the interface between the Children's Service's IT systems and those of the NHS. We noted the NHS IT system did not</p>	

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	<p>relate to local authority ones which would hinder the implementation of the Common Assessment Framework</p> <p>RESOLVED:</p> <p>That the report be received.</p>	
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GEORGE MEEHAN
Chair