

## **MINUTES OF MEETING CHILDREN AND YOUNG PEOPLE'S SCRUTINY PANEL HELD ON TUESDAY 15TH MARCH 2022**

### **PRESENT:**

**Councillors: Makbule Gunes (Chair), James Chiriyankandath, Emine Ibrahim and Tammy Palmer**

**Co-opted Members: Yvonne Denny and Lourdes Keever (Church representatives), Anita Jakhu and KanuPriya Jhunjhunwala (Parent Governor representatives)**

### **47. FILMING AT MEETINGS**

The Chair referred Members present to agenda item 1 on the agenda in respect of filming at the meeting. Members noted the information contained therein.

### **48. APOLOGIES FOR ABSENCE**

Apologies for absence were received from Councillors Dixon and James and from the Cabinet Member for Early Years, Children and Families.

### **49. ITEMS OF URGENT BUSINESS**

None.

### **50. DECLARATIONS OF INTEREST**

None.

### **51. DEPUTATIONS/PETITIONS/PRESENTATIONS/QUESTIONS**

None.

### **52. MINUTES**

#### **AGREED:**

That the minutes of the meeting of 4 January 2022 be approved.

### **53. CABINET MEMBER QUESTIONS - EARLY YEARS, CHILDREN AND FAMILIES**

The Panel noted that Councillor Zena Brabazon, the Cabinet Member for Early Years, Children and Families, was unable to attend the meeting. She had asked Ann Graham, Director of Children's Services, to provide an update on four particular key areas of development within her portfolio:

- The Wood Green Youth Hub was still on track to be completed in the summer. The design for the Hub had been co-produced by the architect with young people;

- An Early Years strategy for the borough had been developed and was now being consulted on. It had been co-produced with those working in the sector;
- The schools capital programme was proceeding. It had been begun three years ago and had enabled work to take place to schools that were in disrepair;
- There had been a well-attended meeting of parents and carers of children with Special Educational Needs and Disabilities (SEND) with the Leader of the Council and senior officers to discuss long standing issues in order to improve relationships. Further meetings were now planned.

Answers had been circulated before the meeting to questions submitted by Panel Members to the Cabinet Member. Concern was expressed by the Panel at the answer that had been submitted to the question regarding the contract with Isos and its outcome. Some school governing body Chairs were dissatisfied with the progress that had been made. It was felt that greater clarity and a strategy on how the local authority was intending to respond to the drop in school rolls was required. Ms Graham agreed to provide further information to the Panel regarding this issue. The work by Isos was being undertaken in phases and parts of it had not been completed yet. A further report would be drafted later in the year.

Panel Members requested an update from the Cabinet Member on the new School Streets and how they were working. In addition, it was felt that feedback from schools and parents would also be useful.

In answer to a question, Ms Graham stated that there had been space for about thirty parents and carers to attend the recent SEND meeting in person plus a similar number to attend on-line. She agreed to provide further detail to Panel Members on attendance. The concerns that had been raised at the meeting covered a number of areas, including schools and the voice of parents not being clearly heard. It was also felt that the schools that children went to were not always a good fit for them. In addition, some parents had not been happy with the place that they had been allocated and there were concerns about waiting times for Education, Health and Care plans and regarding transitions. The matters that had been raised would be documented in the action plan. The next steps would be a series of themed meetings. The precise number of these had not yet been determined.

#### **AGREED:**

1. That the Director of Children's Services be requested to provide further information to the Panel regarding this Isos contract and plans to address the falling school rolls in the borough;
2. That the Cabinet Member be requested to provide an update to the Panel on the implementation of School Streets and how they are working.

## **54. MENTAL HEALTH AND WELL-BEING OF CHILDREN AND YOUNG PEOPLE**

Tim Miller, Joint Assistant Director for Vulnerable Adults and Children (Haringey Council and NHS North Central London CCG), reported on mental health and well-being of children and young people in the borough. Mental health services included the NHS, Council and voluntary sector and they were now working in a "whole system" way.

Mental health needs arose from social needs, deprivation and difficulties in people's lives. Services were critical to supporting the local population and particularly children and young people. It was known that Covid had had a huge impact, although the picture from data was complex.

Vivienne Okoh from Haringey CCG outlined the i-Thrive model, which was a national programme. Services had a skills mix so they were best able to meet the needs of young people. There were four parts to the model:

- Getting advice. There was a limited universal offer with small targeted services provided in schools and the community;
- Getting help. There was embedded support to schools and two specialist services;
- Getting more help. There were dedicated specialist mental health services, supported by some north central London (NCL) services; and
- Getting risk support. These services had grown significantly during Covid as part of NCL transformation and were NHS only offers. They included A&E diversion and a 24/7 crisis service. These aimed to manage risk and keep young children in the community.

Jeanne Faulet-Expitini from BEH Mental Health Trust reported that there had been a large increase in referrals during the Covid pandemic. Referrals came from a number of sources, including GPs, schools and social care services. Most referrals had been for anxiety and low mood. There were particular differences between boys and girls, with boys typically presenting earlier.

Recruitment and retention was a major challenge and a national issue. NCL CCG and providers were working as partners on solutions, including the creation of new roles to develop a sustainable workforce. There was also an opportunity to strengthen partnership and inter-agency working as the i-Thrive model was embedded.

Tina Read from BEH Mental Health Trust reported that the prime areas of investment had been concerned with crisis and a number of services had been developed. A 24/7 crisis line had been set up as well as an out of hours nurse led service. In addition, Diversion Hubs had been established. These aimed to see young people within four hours and prevent the need for them to go to hospital, which could be very distressing. Trailblazer was also being expanded to the west of the borough. The recommendations of the SEND inspection were currently being addressed by services. Waiting times for autism assessments were long throughout the NCL area and solutions to this were being worked on. An online platform on ADHD was shortly being rolled out. Significant service redesigns were taking place across BEH in order to remove unwarranted variations.

Ms Okoh reported that Haringey Borough Partnership had agreed the adoption of the Thrive Framework to provide a needs led, common framework to support emotional and mental health across the Council, Education, NHS and Voluntary services. New care pathways were also being developed to respond more efficiently to the children and young people in CAMHS Haringey and in-line with the NHS long term plan and the NCL CYP Mental Health and Wellbeing Transformation Plan.

In answer to a question, Ms Faulet-Expitini reported that the Trailblazer scheme had already been operating in 36 schools the east of the borough since 2019. A bid to

extend the scheme to the west of the borough from September 2022 had been successful.

In answer to a question regarding the impact of Covid, the Panel noted that there had been increased need for crisis services and Crisis Centres had been set up, providing access within four hours. A dedicated telephone line to provide advice and guidance for schools had also been set up. Consultations had been moved on-line and the level of engagement with patients had been maintained. Telephone and video consultations would continue after the pandemic. Digital platforms such as Kooth and Silver Cloud had also been used. The response to the pandemic had required innovation and a system wide approach. Support was provided for patients in the way that suited them best.

In answer to a question, Ms Okoh reported that the Trailblazer scheme used the iThrive model. As part of this, it was envisaged that the children and young people that they worked with in schools would eventually become mental health champions.

In answer to a question regarding help for parents, Mr Miller reported that a webinar had been held for parents and professionals before children returned to school following one of the lockdowns in order to address anxiety. This had been very well subscribed. It had been recognised that parents needed support and services wished to work closely with the local community. Work was taking place to further develop services and strengthen early intervention and prevention. The mental health support provided in schools through the Trailblazer scheme could also provide support for parents. There was also the Anchor Project with trained schools in how to work effectively with children and parents. In addition, every school now had an emotional well-being lead person. Training had been provided for parents and educational psychologists as well. CAMHS could also be contacted directly by e-mail if necessary.

Ms Okoh reported that a programme of specific work with parents and teachers had recently been agreed with MIND. In addition, consideration was also being given to how refugees from the Ukraine could be supported.

## **55. HARINGEY SEND STRATEGY 2022-2025 AND AREA SEND INSPECTION**

Jackie Difolco, Assistant Director for Early Help and Prevention, reported on the outcome of the public consultation which informed the SEND strategy for the next three years and which also reflected the written statement of action in response to the OFSTED inspection of SEND.

A number of informal engagement sessions had taken place with parents and carers at the Markfield Centre regarding the five priorities in the strategy. Presentations were also made to boards of partners as well and there was a public consultation. The SEND strategy and the Written Statement of Action in response to the OFSTED inspection were aligned so that they complemented each other. Nearly 100 responses had been received to the consultation from parents, carers and practitioners. Over 80% had believed that Priority 1 was the most important and almost all were in favour of the strategy being adopted. However, many questioned the capacity of the SEND Partnership to deliver the strategy and there was also dissatisfaction with the Council's

SEND service. In addition, there were concerns regarding transitions and post 16. A key element of the strategy was that the community needed to be at its heart.

The SEND Executive had approved the final strategy. All of the feedback from the consultation had been included in the final draft as well as the findings of the SEND evaluations, the OFSTED inspections and the Amaze report on parental participation. Additional funding had been made available to the SEND service in the Council's budget and there was to be an uplift in the High Needs Block of Dedicated Schools Grant. In addition, the CCG had made funding available to reduce the waiting time for autism assessments. Work to deliver the strategy was already taking place. Annual reports on progress would be produced and the strategy would be published on the Local Offer webpage.

In respect of the OFSTED inspection, there had been three issues that had been identified as requiring to be addressed in the Written Statement of Action:

1. The poor quality of EHC plans and the annual review process especially as children and young people prepare for adulthood;
2. The lack of partnership working and poor communication and co-production with parents, children and young people. This includes communication through the local offer; and
3. Unacceptable waiting times for Autism Spectrum assessment and insufficient support whilst waiting for a diagnosis.

A number of actions to address these had already been taken. The WSOA had been developed using the same principles as the SEND strategy. Feedback from a number of sources had been incorporated and six workshops had taken place with parents, carers and partners. The WSOA was in excess of 30 pages long but a summary had been developed and published on the local offer website. In addition, the website now also contained a wide range of additional information. Progress with the implementation of the WSOA was monitored through key performance indicators covering a number of areas and hard and soft outcomes. These included waiting times for autism assessments, completion of EHC plans and listening to parents and carers.

The SEND Executive Board was accountable for progress. Feedback was obtained from the Parent Carer Forum and there were now two representatives from it on the SEND Executive. Progress had already been made with the WSOA. This had included improvements in waiting times for autism assessments and in completion of EHC plans. There were regular meetings with the PCF. Work was also taking place with Islington, who had been appointed as the Council's partners in practice. In addition, a preparation for adulthood workshop had been undertaken and Schools SEND Support guidance had been developed and published.

The Chair welcomed the strategy and the progress made with the implementation of the WSOA. In answer to a question, Ms Difolco stated that there was a section of the strategy that dealt with transition to adult services and a separate preparing for adulthood strategy was being developed. This was due to be consulted upon in the early part of the summer. The draft strategy could also be considered by the Panel together with the Adults and Health Scrutiny Panel.

The Panel commented that the progress that had been made was encouraging but that it was important that momentum was not lost. It was also important that the Panel was able to hear the views of parents and carers and on a regular basis. Having a co-opted Member of the Panel representing SEND parents and carers would assist in this process.

Amanda Bernard, Interim Chair of the Parent Carer Forum, reported that there was a clear need for 16+ to be addressed. Many young people were currently falling through the net and some were not getting the placements that they required. There was also a need to address early years and waiting times for EHC plans as well. It was important that the voices of families were heard. The truth and reconciliation sessions that had taken place with the Council had enabled mistrust to be addressed and grievances to be aired and there needed to be further opportunities for this. Parents of SEND children needed to manage their time carefully and sufficient notice needed to be given of forthcoming meetings. This needed to be conveyed to external agencies. A minimum of 21 days notice was normally necessary.

In answer to a questions regarding commissioning, Ms Difolco reported that the Council currently commissioned a range of services. A new joint SEND commissioning strategy was being developed between the Council and the CCG. This would look at the level of need and of demand for services. Consideration could be given to extending the use of the voluntary sector as part of this.

The Panel noted that each scrutiny panel was entitled to appoint three non voting co-opted Members. Such appointments were normally taken at the first meeting of the new Municipal Year and the decision to appoint formally someone would therefore be for the new Panel to make. Non-voting co-opted Members were different in status to the statutory education co-opted Members of the Panel, who were appointed externally and able to vote on education matters.

In answer to another question, Ms Difolco acknowledged that that the documentation could be more accessible. However, a WSOA on one page had been developed and progress reports would be kept brief. In respect of the financing of EHC plans, a package of support was developed covering a number of bands. Banding arrangements had been in place for some time and similar systems were also used by other local authorities. They were also communicated to schools. It was agreed that they would be provided to school governing bodies so that they were made aware of them as well.

**AGREED:**

1. That the draft Preparing for Adulthood strategy be considered jointly by the Panel with the Adults and Health; and
2. That details of the banding arrangements for the provision and financing of support required in EHC plans be shared with school governing bodies.

**56. WORK PROGRAMME UPDATE**

The Panel agreed that SEND transport and support for refugee children would be prioritised for the first meeting of the new administration. The Panel were also of the view that SEND should continue to be the focus of particular attention by the Panel.

**AGREED:**

That the first meeting of the Panel of the new administration prioritise the following issues as substantive items:

- SEND transport; and
- Support for refugee children.

**57. VOTE OF THANKS**

It being the last meeting of the Panel for the current Municipal Year, the Chair was thanked by the Panel for her work as Chair. The Chair thanked Members and officers for their kind assistance and co-operation.

CHAIR: Councillor Makbule Gunes

Signed by Chair .....

Date .....