

**CHILDREN, YOUNG PEOPLE AND FAMILIES PARTNERSHIP**  
**Wednesday, 20th November, 2013**

Present:- Councillor Lakin (in the Chair); Steve Ashley, Clare Burton, Sara Graham, Shafir Hussain, Martin Kimber, Julie Mott, Rachel Nicholls, David Polkinghorn, Clair Pyper, John Radford, Emma Royle, Dorothy Smith, Kevin Stevens, Joyce Thacker, Sarah Whittle, Sue Wilson and Chrissy Wright.

Apologies for absence were received from Jason Harwin and Janet Wheatley.

**235. MINUTES OF THE PREVIOUS MEETING**

The minutes of the meeting held on 18<sup>th</sup> September, 2013, were considered and approved as a correct record.

Further to Minute No. 228 (CAMHS), it was reported that a meeting had taken place with regard to issues raised at the last Partnership meeting. A letter had been drafted for submission setting out the concerns.

Further to Minute No. 229 (Youth Cabinet), it was noted that Kate Tufnell and Dr. Russell Brynes to be invited to the Youth Cabinet to discuss suicide

**236. ISSUES AND CONCERNS**

**Looked after Children's Council**

- Voice and Influence training and development sessions being held weekly at the MyPlace building
- Regular meetings on weekends and evenings to prepare presentations and complete high profile project work
- In preparation for a visit to Portugal in April, 2014, the group had engaged in activities specifically designed to raise their awareness of the country and asked to learn basic Portuguese phrases to enable them to converse with the local people
- 6 Looked After and Leaving Care young people had volunteered at the Rotherham Show on the Voice and Influence mobile bus
- 12 young people had attended the Kingswood Activity Centre during the October half term
- A number of young people had attended the Remembrance Service on 10<sup>th</sup> November

**Child Sexual Exploitation**

- Alexis Jay had been appointed to undertake the independent review of CSE in Rotherham
- The diagnostic review undertaken by the Chair of the Safeguarding Board was well underway with all the interviews having been completed and hoping to meet with some young people. Whilst there was still work to be done, there were a lot of positives emerging. The

- review would be completed by the beginning of December
- The Barnardos Review had been completed and was to be launched on 11<sup>th</sup> December. It would be submitted to the 18<sup>th</sup> December Cabinet meeting
  - The HMIC review had been completed. Consideration would be given to any issues/implications for the Council. 3 issues raised were the Maltby location, caseload/workload management and data system compatibility

**Sarah Champion, MP**

- There had been announcement that Sarah Champion was to undertake an open inquiry with Barnardos regarding CSE. There was a call out for documentary evidence and a series of questions many of which centred around the criminal justice system and the appropriateness/effectiveness of legislation to tackle modern day CSE

**237. COMMISSIONING/DELIVERY OF EMERGENCY HORMONAL CONTRACEPTION TO YOUNG GIRLS AGED 14-16 YEARS**

In accordance with Minute No. 224 of 17<sup>th</sup> July, 2013, John Radford, Director of Public Health, submitted a further report on the progress to-date on the development of care pathways and safeguarding reporting mechanisms for all young people accessing Sexual Health Services in Rotherham.

Care pathways would be developed to allow for the extension of the Emergency Hormonal Contraception (EHC) service in Pharmacies to young women aged 14 to 16 which would include an automatic referral for all under 16 year olds to a named team within Integrated Youth Support Service (IYSS). Public Health would work with both IYSS and Pharmacy representatives to agree the necessary protocols and pathways prior to the extension being agreed.

An electronic recording system, similar to that already in use for supervised consumption of drugs at Pharmacies, was to be introduced which would immediately alert any Pharmacist to the pathway that would allow for accurate monitoring.

Protocols in relation to under 16 year olds attending the Genito-Urinary Medicine (GUM) and Contraceptive and Sexual Health (CaSH) already included screening for sexual exploitation but they would be developed to raise the profile of CSE to enhance the capture of concerns in relation to possible sexual exploitation and contain appropriate referral mechanisms. GUM and CaSH were moving to an integrated service where the protocols and referral criteria would be harmonised and work was taking place on protocols and an algorithm for referral to the newly appointed Sexual Exploitation Nurse.

Discussion ensued with the following issues raised:-

- Historical evidence showed that it was a very low number of females seeking emergency contraception but there was a need for an easily accessible route
- The young female would be automatically referred to the IYSS - what happened if they chose not to attend?
- Would an “automatic” referral deter a young person from seeking emergency contraception for fear of it being brought to their parents’ attention and result in a rise of teenage pregnancies?
- GPs would be far more challenging than a pharmacist - pharmacists would need support and training and a clear audit trail
- GPs had a duty of care – fear that the protocol gave duty of care to the organisation and not the individual
- Investigation of a number of Serious Case Reviews had revealed numerous referrals to GPs/health sector that had not raised alerts
- If there was no automatic referrals, strong reassurance was required of the process to be followed
- Proposed drop-in service offered at many pharmacies
- The pharmacist would inform the young person that they would be referred to the IYSS and that there may be some form of follow up
- The sub-group that had been set up to consider a protocol had included a pharmacist. The young person would be encouraged to see their GP as part of safeguarding advice advised that emergency contraception was only a temporary solution
- It had to be a referral even on the first occasion – how could you be certain that the young person had not attended a pharmacy somewhere else in the County before

Resolved:- That further work take place on the protocol and submitted to a future meeting.

### **238. YH HWB IMPROVING HEALTH OUTCOMES FOR CHILDREN**

Further to Minute No. 232 of 18<sup>th</sup> September, 2013, Sue Wilson, Performance and Quality Manager, submitted the revised Action Plan, which considered ways to improve health outcomes for children within Rotherham was considered.

Resolved:- That the report be noted.

### **239. ROTHERHAM REPORT CARD 2012/13**

Further to Minute No. 200 of 20<sup>th</sup> March, 2013, Clare Burton, Commissioning Officer, submitted the proposed Rotherham Report Card which was intended to inform Elected Members, colleagues and the public on how Services and outcomes for children, young people and their families were being improved in Rotherham. The Card would also raise the profile of Children and Young People’s Services, give the public a snapshot of the services that were delivered, how they were viewed and how well they performed.

The Card had been developed based on the Adult Services Local Account, a document that all local authorities were required to publish annually to inform citizens of how well Adult Social Care had performed, the challenges faces and plan for improvement to Services.

It had taken into account feedback from consultation with the Children and Young People's and Families Partnership, the Safeguarding Children and Families Services and the Schools and Lifelong Learning Service.

It was noted that the information contained within referred to the 2012/13 financial year rather than the academic year and, therefore, some of the information relating to educational establishments may be out of date. There would be a footnote stating that further updates could be found on the Ofsted website.

Resolved:- That the Rotherham Report Card be approved for publication.

#### **240. HEALTH PROFILES 2013**

John Radford, Director of Public Health, presented the Health Profile 2013 for Rotherham as published on 24<sup>th</sup> September, 2013. The headlines were:-

- The health of people in Rotherham was generally worse than the England average
- Deprivation was higher than average – approximately 11,500 children lived in poverty
- Life expectancy was 10.2 years lower for men and 6.4 lower for women in the most deprived areas of Rotherham than in the least deprived areas
- All cause mortality rates had fallen over the last 10 years – the early death rate from heart disease and strokes and fallen but was worse than the England average
- In Y6, 20.5% of children were classified as obese
- Levels of teenage pregnancy and breast feeding were worse than the England average
- Estimated levels of adult 'healthy eating', smoking and obesity were worse than the England average together with rates of sexually transmitted infections, smoking related deaths and hospital stays for alcohol-related harm
- The rate of road injuries and deaths, statutory homelessness and violent crime were better than average

Resolved:- That the report be noted.

#### **241. MULTI AGENCY REVIEW OF SERIOUS CHILD NEGLECT CASES**

Kevin Wilson, RLSCB/RMBC Quality Assurance Officer, reported, that as a result of an Ofsted recommendations following the unannounced Child

Protection Inspection in June, 2012, a multi-agency audit had been undertaken of 59 cases (59 children in 41 families) in order to address the following outline terms of reference:-

- Key trends/themes that emerge in relation to the management of cases of long term serious neglect
- Gain an understanding of what should be done to affect safe and timely case management and planning
- Identify potential impact changes to improve practice
- Identify the factors and circumstances that negatively influence decision making and risk assessment

Based upon initial findings, 2 of the most serious and long term cases were then subjected to a multi-agency case mapping exercise which were utilised in different partnership forums to share the findings of the review at an early stage. The findings had identified a number of themes:-

#### Risk Assessment

- Development of a Rotherham Risk Assessment Model - the lack of an adequate Risk Assessment Framework across Children's Services was a weakness and its omission had been criticised within Serious Case Reviews and Ofsted inspections.
- Consideration of the Strengthening Families Model for Child Protection Conferences
- Use of Graded Care Profile – fundamental tool to aid the assessment of need and risk
- Use of multi-agency chronologies on cases of significant concern

#### Care Planning

- Development of inhouse resources that clarified SMART principles and aid practitioners to incorporate them into their practice
- Establish a Task and Finish Group to review and develop a new more appropriate template for Child Protection and Children in Need plans
- Refresh the multi-agency training "Case Conferences and Core Groups" to ensure practitioners were fully understand their individual responsibilities, the process of professional challenge and the function of core group

#### Supervision

- The Social Work evidence was reflective - Team Managers to action learning sets, establish whether it was felt that there was an issue with the of recording of action

#### Consistency in Cases

- The number of changes of allocated Social Workers to children and their families should be minimised and become a Local Safeguarding Children Indicator
- The introduction of an allocation system to CP Conference Chairs to families continues and also becomes a Local Safeguarding Children

## Indicator

Resolved:- (1) That it be noted that 60% of all Rotherham children subject to a Child Protection Plan had Neglect as the main category, however, prevalence was actually higher as Neglect was a co-feature of other categories (e.g. Physical Abuse).

(2) That future commissioning of Services take account of the increasing number of children who were neglected and the Joint Strategic Needs Assessment would be key to understanding the assessed needs of the Rotherham child population.

**242. YOUTH CABINET**

The minutes of the Youth Cabinet held on 26<sup>th</sup> September, 2013, submitted for information, were noted.

**243. ROTHERHAM'S LOCAL SAFEGUARDING CHILDREN'S BOARD**

The minutes of the Rotherham Local Safeguarding Children Board, held on 14<sup>th</sup> June, 2013, were noted.

**244. ANY OTHER BUSINESS**

There was no other business to report.

**245. DATE AND TIMES OF FUTURE MEETINGS:-**

Resolved:- That a further meeting be held on Wednesday, 15<sup>th</sup> January, 2014, commencing at 2.00 p.m.