

**IMPROVING LIVES SELECT COMMISSION**  
**5th June, 2018**

Present:- Councillor Cusworth (in the Chair); Councillors Allcock, Brookes, Clark, Elliot, Ireland, Jarvis, Khan, Marles, Pitchley, Price, Senior, Short and Julie Turner.

Councillor Watson was in attendance at the invitation of the Chair.

Apologies for absence were received from Councillors Beaumont, Hague and Jones (GROW).

The webcast of the Council Meeting can be viewed at:-  
<https://rotherham.public-i.tv/core/portal/home>

**1. DECLARATIONS OF INTEREST**

Councillor Senior declared a non-pecuniary interest in Minute No. 137 (manager of a charity that works with post-abuse survivors and their families).

**2. QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS**

There were no members of the public present at the meeting. The member of the press did not wish to ask any questions.

**3. COMMUNICATIONS**

**Councillor Clark**

The Chair wished to place on record the Select Commission's thanks to Councillor Clark for her work as Chair for the past 2 years and also her personal thanks for her help, support and mentoring.

**New Members**

The Chair welcomed Councillors Alcock and Price to their first meeting of the Select Commission.

**Performance Sub-Group**

Select Commission Members would be emailed seeking expressions of interest to be part of the newly established Performance Sub-Group.

**Member Development**

A training session was being held on Thursday, 7<sup>th</sup> June 9.30 a.m.-12.30 p.m. on Domestic Abuse Awareness a subject that the Commission had taken a great interest in in terms of its previous work programme.

**Corporate Parenting Panel**

It was noted that Councillor Jarvis was now a member of the above Panel and would be reporting back to the Select Commission.

**4. MINUTES OF THE PREVIOUS MEETING HELD ON 24TH APRIL, 2018**

Consideration was given to the minutes of the previous meeting of the Improving Lives Select Commission, held on 24th April, 2018 and matters arising from those minutes.

Arising from Minute No. 129 (Ofsted Single Inspection Framework Recommendations), it was noted that a copy of the 8 specific additional actions for the Looked After Children Service had not been circulated to the Select Commission as agreed.

Resolved:- (1) That the minutes of the previous meeting of the Improving Lives Select Commission, held on 24th April, 2018, be approved as a correct record, for signature by the Chairman.

(2) That the Assistant Director Early Help & Family Engagement ensure that the Select Commission was provided with the 8 specific additional actions for the Looked After Children Service had not been circulated to the Select Commission as agreed at the previous meeting.

**5. BARNARDO'S REACHOUT SERVICE UPDATE**

In accordance with Minute No. 62 of the meeting held on 4<sup>th</sup> July, 2017, an update was submitted of the key areas of service delivery and responses to the recommendations of the meeting. The full ReachOut report March 2018 was submitted as Appendix 1 together with the summary report of the Year 2 evaluation of the Service undertaken by the University of Bedfordshire (Appendix 2).

Marie Harris, Barnardos, and Di McLeish, Independent Evaluator, was also present to answer any questions.

The report highlighted:-

- The number of individual referrals
- Train the Trainer, 'Real Love Rocks' (RLR)
- Work with Schools
- Outreach
- Taxi Driver Training
- Lesbian, Gay, Bisexual, Transgender Queer (LGBTQ) – Safe Zone
- Engagement with Children from Black, Asian, Minority Ethnic and

Di McLeish gave a brief resume of the evaluation work that had taken place capturing the outcomes for/the feedback from young people which had resulted in a database of over 1,000 participants. ReachOut was delivered in most of Rotherham's primary and secondary schools with very positive feedback from both students and teachers. The Train the Trainer programme had been developed in order to support staff within schools to deliver the programme themselves and make the project more

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sustainable. The recent evaluation had shown that approximately 50 members of staff had participated in the training.

Discussion ensued with the following issues raised:-

- There was no waiting list of schools as all schools who had requested Train the Trainer training had been addressed. The schools not engaged with the initiative had chosen not to participate. The majority of schools had been visited over the last 2 years and all those that were interested in taking part had completed it
- There had been a decrease in referrals from the Education sector from 24% in 2016 to 17% in 2017. Nationally there were quite low levels of referrals from schools which would suggest that parents went to their GP, CYPS or may be referred as part of a multi-agency arrangement. When Barnardos carried out the Real Love Rocks work in schools in Year 1 greater number of referrals had been received; what was being seen now was the expected level of referrals as well as the impact of the work by Early Help
- There was a lack of referrals from health providers but Rotherham was not unique in this situation
- It was hoped to include a CAMHS Worker in the Barnardo's building
- 2 members of the Commissioning Team would be based within the CCG one day a week
- A Community Engagement Worker had been employed to work with the Black, Asian, Minority Ethnic and Refugee (BAMER) community and supporting efforts to forge links between the community and Barnardo's. It was also planned to apply for internal funding from Barnardo's to develop the work further
- ReachOut had carried out a lot of work with the Roma community which had been identified as a key priority earlier on
- The roll out of the Real Love Rocks initiative was very work intensive so there had not been opportunity to pursue or ascertain why a school had not engaged with the initiative
- The lack of engagement by some schools could be looked at in the next phase of evaluation
- There had been relatively few self-referrals and referrals from family members but it was difficult to ascertain the reasons for this

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- ReachOut had attempted to address the issue of self-referrals by maintaining a presence in the community and undertaking outreach work (via a bus). Whilst the engagement had been successful it had not resulted in greater number of self-referrals
- Part of the issue was the definition of a self-referral which required 1:1 work. There were many young people who had informal support from ReachOut which was not counted as 1:1 support
- If Ward Members were notified of where the bus was going to be they could encourage families to visit
- Generic publicity material had been produced and displayed in the first year. In the second year efforts had been more targeted
- Barnardos were very clear from the outset when they spoke to children that the information may be shared as appropriate. Multi-agency meetings took place to share information and intelligence
- Managers and practitioners were part of the Police Intelligence Meeting as well as 2 ReachOut Workers based within the Evolve Team

Resolved:- (1) That the Barnardo's ReachOut Service update be noted.

(2) That a further update be submitted in 6 months including the University of Bedfordshire's independent evaluation of the project.

(3) That the full evaluation be submitted to the December 2018/January 2019 meeting of the Select Commission.

(4) That discussions take place with the Young Inspectors with a view to them carrying out work on the areas where the profiles and awareness were not as good as others or where the engagement with schools had not been as effective.

(5) That discussions take place with the Assistant Director for Schools with regard to including information within the newsletters about the Service

(6) That the lower levels of engagement with Health colleagues be raised at the Children and Young People and Families Partnership where Health colleagues attended.

## 6. CSE POST ABUSE SERVICES UPDATE

In accordance with Minute No. 62 of 4<sup>th</sup> July, 2017, Sean Hill, Commissioning Officer, Children and Young People's Services, and Rebecca McAlister, Strategic Commissioning Manager, submitted the actions taken to address the recommendations made at that meeting.

The Services had been commissioned in 2016 based on a 2015 Multi-Agency Needs Analysis. The contracts were let in 2016 and mirrored that analysis. 3 voluntary sector providers bid and were successful for those services.

In July 2017, an update was provided to the Select Commission on the commissioned services. A Service Review had been undertaken by Children's Commissioning Team between October and December, 2017, to quantify and understand the pressures on the services. These services were open to anyone who was a victim or survivor of CSE. It had demonstrated that joint work with the Adult Social Care Commissioning Team was vital to understand the broader context of service provision. The key findings were set out in the report submitted.

Victims and survivors had been directly engaged with and their views listened to as part of the Service Review with informal meetings held at GROW and Rotherham Abuse Counselling Service (RACS) to seek their views on the impact of the services and quality of support.

The CYPS Leadership Team had agreed the following longer term recommendations:-

- A whole system approach to commissioning support services be developed with partners (including the National Crime Agency, the Police and Crime Commissioner's Office and the Rotherham Clinical Commissioning Group) to avoid duplication, maximise resources and improve the Service user experience
- A needs analysis be undertaken to help inform the future commissioning of Services and to inform bids for external funding opportunities. The needs analysis will take an asset/strength based approach to find out "what matters" to victims and survivors to victims and survivors instead of "what's the matter". It would consider the accessibility of current support services (from all sections of the community) and draw together evidence and first-hand accounts of what works in helping victims and survivors begin to recover and build resilience. The needs analysis will help identify trends for support over the next 5 years
- Contracts for the post-CSE commissioned services were extended from 1<sup>st</sup> April 2019 to 30<sup>th</sup> September 2019 to allow for commissioning of a different service offer following the findings of the needs analysis and whole system mapping

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There were some real significant funding pressures on the services and it was a very difficult situation for the service providers to manage. Without the funding to commission the services it was very difficult to address the need. A Service Improvement Partnership had been established to discuss the pressures as well as discussions with Adult Commissioning colleagues with regard to managing throughput.

The Chair commended the report but expressed disappointment that the mapping of all the provision across Rotherham, as requested last July by the Select Commission, was still missing.

Councillor Watson stated that it would have been hoped that the mapping of provision would have been carried out but again it was a question of capacity and the associated cost of post-abuse support which had not been met by Central Government.

It was noted that Sarah Champion MP had issued a press release demanding that the Government commit funding to support survivors of child sexual exploitation in the town.

The Chair also stated that the Commission had raised strong concerns with regard to the needs analysis being updated when the previous update was submitted in July, 2017. It was disappointing that it was still not in place.

Discussion ensued with the following issues raised:-

- There had been a delay in commissioning the needs analysis due to funding. Discussions were taking place as to whether it could be carried out inhouse or whether it should be an independent evaluation
- Consideration had not been given to bringing together not only the commissioned services but the identified non-commissioned services to submit a consortium bid although providers working together would be welcomed. The Service Improvement Partnership had been established with the current 3 commissioned services but would be willing to extend it to other providers
- There was concern of the anecdotal evidence of gaps in the post-trial support. Flexibility of service had been discussed with providers and what they could do with the funding that was available. However, if most emphasis was given on post-trial support then something would be lost elsewhere
- Acknowledgement that the situation may be vastly different from that currently known as the only data collected was from the 3 commissioned services
- Partners were now meeting and discussing the commissioned services

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- Within a commissioning cycle a needs analysis would be carried out and a service recommissioned 12-18 months before a contract ended. The contract extension was to give extra capacity and time for questions and queries given the subject matter was very sensitive and highly political
- The commissioning timeline for the awarding of a tender for the needs analysis had slipped. Discussions were still taking place regarding the right method of conducting the analysis and whether it was felt the response from victims and survivors would be better if it came from a third party
- Acknowledgement that the 2015 needs analysis, completed with the involvement of a research partner, had been done as well as it could at the time with the information known. It had been unprecedented times with nothing to draw on in terms of best practice or guidance of what services might be required
- The recently established Commissioning Sub-Group came under the auspices of the Safer Rotherham Partnership and consisted of representatives from RMBC Adults Commissioning, Children's Commissioning, NHS CCG, Adult Safeguarding, Children Safeguarding, Safer Rotherham Partnership, Police and Crime Commissioner's Office and the National Crime Agency. Member involvement would be welcomed
- There had been no direct involvement in attempting to get other commissioning bodies around the table

Resolved:- (1) That the update on CSE Post-Abuse Services be noted.

(2) That a further update be submitted in 6 months' outlining the impact of the remedial actions and the progress made on the proposed joint commissioning of CSE Post-Abuse Services with representatives of the Rotherham Clinical Commissioning Group and RDaSH in attendance.

(3) That clarification be provided with regard to what action was to be taken with regard to the gaps around the post-trial support acknowledging that there were limits to the funding available.

(4) That Rotherham Council continues to lobby Central Government for some joined up funding.

(5) That an update be provided with regard to support for the wider family of victims and survivors.

(6) That the possibility of a consortium funding bid be explored.

## 7. CHILDREN & YOUNG PEOPLE'S SERVICES EDGE OF CARE PROVISION

In accordance with Minute No. 117 of the Cabinet/Commissioners' Decision Making Meeting held on 14<sup>th</sup> November, 2016, Jenny Lingrell, Acting Head of Service, Early Help, presented an update on the implementation of Edge of Care Services by the Children and Young Peoples' Services Directorate as follows:-

### Family Group Conferencing (FGC)

- Launched in April 2017 and consisted of a FGC Co-ordinator and 3 Family Group Conference Practitioners. The size of the team was dictated by the funding that was made available. An additional practitioner was added to the team in December 2017
- The focus of the team was to work with families who had a Child in Need (CIN) plan particularly if risks were escalating. During the initial year following the service launch it had been necessary to be flexible and test work with families with a Child Protection Plan (CPP), families who were already in a Public Law Outline process and with Looked After Children where there may be an opportunity for a child or young person to return home
- 61 FGCs took place in the last financial year
- 25% of FGCs that did not take place during the 6 week timescale. These were families who required a longer period of time due to family dynamics and availability of family members when arranging a conference date
- Only 38% of referrals were allocated within 3 days

### Edge of Care Team

- Was a multi-disciplinary team made up of practitioners who had complementary skills and experience developed through working with adults with complex needs as well as with families
- The Team had the skills to address behaviours linked to adult trauma and its impact and has, at its core weekly group, supervision with a consultant clinical psychologist
- In addition the Team Co-ordinator had monthly personal systemic supervision, the Team took part in monthly group supervision and an ongoing programme of systemic training
- The Team consisted of a Consultant Clinical Psychologist, a Team Co-ordinator (skilled in systemic family therapy), a Parenting Practitioner (who could deliver 1:1 outreach support), a Level 3 Social Worker and 3 Family Intervention Workers
- All referrals were made through the new Edge of Care Panel, a multi-agency Panel chaired by a Head of Service from Social Care, which met on a weekly basis
- 79 families were referred to the Panel between 26<sup>th</sup> September 2017 and the end of the financial year
- The Team was currently at full capacity

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- It was estimated that the average cost for a child in care was £50,000
- 5 children had successfully moved home from foster care following an intervention by the Edge of Care Team with 2 more on caseload representing a full year saving of £350,000

### Multi-Systemic Therapy (MST)

- MST was a shared service delivered in partnership by Rotherham and Barnsley Councils to support families where there was a risk that a child or young person would become looked after or go into custody
- The pilot arrangement had commenced in July 2014 for 10 young people. A formal agreement had been in place since April 2015
- All MST referrals were now allocated via the Edge of Care Panel
- MST was an evidence based programme and routine outcome measures recorded for each case
- Consistently difficult to achieve a positive outcome for education for young people on the MST caseload
- Learning from MST embedded in all Edge of Care work with close joint working with the lead Social Worker a requirement

### Pause Rotherham

- Funding identified from the Early Help budget to set up a Pause Practice for a minimum of 18 months
- Each Pause Practice comprised a Pause Practice Lead, 3 Pause Practitioners and a Pause Co-ordinator
- The Team had capacity to work with between 20 and 24 women during the pilot phase
- The planning and implementation phase had been successful to date
- Pause Rotherham Board established and included broad multi-agency representation as well as a Rotherham Councillor

Discussion ensued with the following issues raised:-

- Multi-Systematic Therapy was separate intervention to Edge of Care but the principles of joint working was exactly the same between the 2. Much of the work would be completed by the Edge of Care practitioner; they were part of Early Help but had the additional layer of therapeutic intervention. There would be joint supervision whenever the Edge of Care Team worked with the Family Team Manager from the Edge of Care Team and Social Worker who would plan their work jointly so it was clear who was doing what within the timescales prescribed by the CPP
- The work fell into 2 categories with constant review to ensure the model responded appropriately:-

Adolescents - often these were situations where there may have been historical issues and, on becoming adolescents their behaviour prevented in a more challenging way. It was also known through "Right Child, Right Care" approach that the outcomes for a child that

went into the care system after the age of 14 years was very negative. The Edge of Care Panel would make a decision on how to proceed safely

Neglect – large sibling groups whose parents who had their own issues around mental health, drugs, alcohol and domestic abuse. This involved a more family intervention model

Work of the Edge of Care Team - often the work needed with the adolescent cohort was more therapeutic in nature. Family therapy work talked much more about the family dynamics and patterns of behaviour that developed over time

- As part of the Family Group Conference the child was very much part of the process. A specific resource was allocated to advocate and capture the child's voice and wishes. As part of the preparation work the views of everyone who would be attending the conference were captured. It was very much part of the Edge of Care Team's intervention work and the voice of the child was very much apparent. The voice of the child has its own section on the form
- The Routine Outcome Measures and Score 15 captured the levels of depression, anxiety and stress. The Edge of Care Team would record it on every visit to a family. In the future graphs could be submitted which would show how high it was at point of referral and the impact the Service had had
- Multi-Systematic Therapy offer had been available in Rotherham since 2014. Approximately 20 Rotherham children were worked with annually aged between 11-16 years of age
- The Pause Rotherham Team was now fully staffed
- The Pause Rotherham Board was Chaired by the Assistant Director of Safeguarding, the Chief Executive of the Pause national charity, South Yorkshire Police, the Community Rehabilitation Company, Adult Services, Domestic Abuse Service, Sexual Health, Housing, CAF/CASS, Councillor Clark, Drug and Alcohol Services
- The established model was the same as that delivered in other authorities
- Pause was really active and engaged in terms of making every Pause practice successful

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- Although Pause was targeted at women it was about positive relationships. Sometimes the relationships were not positive but women may still want to remain in that relationship; Pause would continue to work with them to make it as good as it could be. If it was a positive relationship Pause would embrace that positivity so there was no reason why they would not involve the father in that
- It was quite difficult to benchmark some of the work taking place. MST was reported in the national framework.

Resolved:- (1) That it be noted that Family Group Conferencing and Edge of Care Teams were fully operational.

(2) That the Select Commission scrutinises the performance outcomes to date.

(3) That the launch of Rotherham's Pause Practice in July, 2018 be noted.

(4) That the frequency of updates be determined once the 2018/19 work programme had been agreed.

(5) That the Select Commission suggest that the scorecards be submitted on a quarterly basis as part of the performance report.

### **8. DATE AND TIME OF THE NEXT MEETING**

Resolved:- That the next meeting of the Improving Lives Select Commission take place at the Town Hall, Rotherham on Tuesday, 17th July, 2018, commencing at 5.30 p.m.