

# Children and Education Policy and Accountability Committee

## Agenda

## Monday 13 June 2016 7.00 pm Committee Room 1 - Hammersmith Town Hall

## **MEMBERSHIP**

Administration:	Opposition		
Councillor Caroline Needham (Chair)	Councillor Caroline Ffiske		
Councillor Alan De'Ath	Councillor Marcus Ginn		
Councillor Elaine Chumnery			
Co-opted Members:			
Eleanor Allen, London Diocesan Board for Schools			
Dennis Charman, Teacher Representative			
Nandini Ganesh, Parentsactive Representative			
Philippa O'Driscoll, Westminster Diocesan Education Service Representative			
Nadia Taylor, Parent Governor Representative			
Vic Daniels, Parent Governor Representative			

#### CONTACT OFFICER:

David Abbott Committee Co-ordinator Governance and Scrutiny Tel 020 8753 2063 E-mail: david.abbott@lbhf.gov.uk

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Members of the public are welcome to attend. A loop system for hearing impairment is provided, along with disabled access to the building.

## Children and Education Policy and Accountability Committee Agenda

#### 13 June 2016

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## 1. APPOINTMENT OF VICE CHAIR AND CO-OPTED MEMBERS

The Committee is asked to elect a Vice Chair and agree the appointment of co-opted members for the 2016/17 Municipal Year.

#### 2. MINUTES

To approve the minutes of the previous meeting.

### 3. APOLOGIES FOR ABSENCE

### 4. DECLARATIONS OF INTEREST

More information of declarations of interest can be found on the following page.

#### 5. PUBLIC PARTICIPATION

Members of public are encouraged to ask questions of the Committee or Cabinet Member. To submit a question please contact: <u>david.abbott@lbhf.gov.uk</u>

#### 6. EXECUTIVE DIRECTOR'S UPDATE

#### 7. CABINET MEMBERS UPDATE

#### 8. CHILD AND ADOLESCENT MENTAL HEALTH TASKFORCE 13 - 36 REPORT AND UPDATE ON CAMHS TRANSFORMATION

In response to national concerns about mental health provision for young people, a Hammersmith & Fulham focused taskforce was set up to:

- Summarise the local need for mental health and wellbeing provision.
- Assess the services available in Hammersmith and Fulham which support good mental health and emotional wellbeing for young people.
- Identify any gaps.
- Comment on whether Hammersmith & Fulham young people and professionals have access to the right provision and services that young people want to use?

This report contains their findings and recommendations for improvements.

#### 9. SCHOOL HOLIDAY CHILDCARE PROVISION

This report provides an overview of childcare and other provision available for children and young people in Hammersmith & Fulham. It also outlines plans to improve systems to make information about such provision more accessible to families.

#### 10. SERVICE IMPROVEMENTS FOLLOWING OFSTED INSPECTION OF 43 - 48 SERVICES FOR CHILDREN IN NEED OF HELP AND PROTECTION, CHILDREN IN CARE AND CARE LEAVERS

This report provides an overview of planned improvements to be made by the Family Services Directorate following the Ofsted inspection of services in January and February 2016.

#### 11. WORK PROGRAMME

The Committee is asked to give consideration to its work programme.

#### 12. DATE OF NEXT MEETING

The Committee is asked to note the date of the next meeting, which is to be held on 19 September 2016.

### Information on Declarations of Interest

If a Councillor has a disclosable pecuniary interest in a particular item, whether or not it is entered in the Authority's register of interests, or any other significant interest which they consider should be declared in the public interest, they should declare the existence and, unless it is a sensitive interest as defined in the Member Code of Conduct, the nature of the interest at the commencement of the consideration of that item or as soon as it becomes apparent.

At meetings where members of the public are allowed to be in attendance and speak, any Councillor with a disclosable pecuniary interest or other significant interest may also make representations, give evidence or answer questions about the matter. The Councillor must then withdraw immediately from the meeting before the matter is discussed and any vote taken.

Where Members of the public are not allowed to be in attendance and speak, then the Councillor with a disclosable pecuniary interest should withdraw from the meeting whilst the matter is under consideration. Councillors who have declared other significant interests should also withdraw from the meeting if they consider their continued participation in the matter would not be reasonable in the circumstances and may give rise to a perception of a conflict of interest.

Councillors are not obliged to withdraw from the meeting where a dispensation to that effect has been obtained from the Audit, Pensions and Standards Committee.

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## Agenda Item 2

## London Borough of Hammersmith & Fulham Children and Education Policy and Accountability Committee Minutes



## Monday 25 April 2016

#### PRESENT

**Committee members:** Councillors Alan De'Ath, Elaine Chumnery, Caroline Ffiske (Vice-Chair), and Donald Johnson

**Co-opted members:** Eleanor Allen (London Diocesan Board for Schools), Nandini Ganesh (Parentsactive Representative), Philippa O'Driscoll (Westminster Diocesan Education Service Representative), and Nadia Taylor (Parent Governor Representative)

**Other Councillors:** Councillor Sue Macmillan, Cabinet Member for Children and Education

**Officers:** Brenda Whinnett, Steve Miley, Ian Heggs, Alan Wharton, and David Abbott

#### 1. <u>MINUTES OF THE PREVIOUS MEETING</u>

Members noted that at the bottom of page 4, the final sentence should read, "Councillor Sue Macmillan responded that she would consult with Councillor Sue Fennimore, Cabinet Member for Social Inclusion, and provide this information outside of the meeting."

#### RESOLVED

That the minutes of the meeting held on 29 February 2016 be approved as a correct record and signed by the Chair.

#### 2. APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor Caroline Needham, Vic Daniels, and Dennis Charman.

#### 3. DECLARATIONS OF INTEREST

There were no declarations of interest.

Minutes are subject to confirmation at the next meeting as a correct record of the proceedings and any amendments arising will be recorded in the minutes of that subsequent meeting.

#### 4. PUBLIC PARTICIPATION

There were no public questions.

#### 5. <u>PRESENTATION ON YOUTH COUNCIL AND YOUTH PARLIAMENT</u> <u>ACHIEVEMENTS, YOUTH MAYOR ELECTIONS, AND THE NEW YOUTH</u> <u>MANIFESTO</u>

The Chair welcomed Aminata Koroma, the newly elected Youth Mayor, and Joshua Owuraku, the Deputy Youth Mayor. They addressed the committee and informed members that they had recently held the first meeting of the Youth Cabinet to discuss their manifesto priorities and how they could become more involved in decision making in the Council. They also highlighted some of the Youth Council's previous achievements such as; helping to research and develop recommendations for the Mental Health Task Force, generating over 6000 responses to the Make Your Mark survey, and helping to shape the Youth Partnership.

The Youth Cabinet were working on their manifesto for 2016/17 and the key areas of focus would be on encouraging local employers to adopt the London living wage, tackling racism and extremism, and preparing young people for later life. The Youth Cabinet would be working with policy and governance officers to drive their agenda forward within the Council over the coming year.

Members asked how the Youth Cabinet engaged young people to determine their priorities. Brenda Whinnett responded that the Youth Council produced questionnaires and distributed them through schools. They also worked with services (like the Youth Offending Team) and partner organisations to plan who to target.

Members asked if they also used social media to engage with their peers. Brenda Whinnett responded that they had a Facebook page that was popular. They were also considering creating a space on the Council's website focused on young people's issues.

Members asked which schools had been involved in the election and whether there were plans to expand in future. Brenda Whinnett responded that most schools in the borough were involved in the election, excepting the minority that did not engage with any youth voice initiatives. Members asked why those schools did not engage and Brenda responded that they did not feel that it linked with the curriculum.

Members asked if the Youth Council were involved in the recently launched Youth Partnership. The Youth Mayor responded that they would be working closely with the Youth Partnership and sat on a panel to feed in their ideas.

Members asked if children with special education needs would be involved with the Youth Council and Cabinet. Brenda Whinnett responded that Cambridge School (a local special school) had been very involved and the previous Youth MP had given presentation on their work at the school. They also worked regularly with Action on Disability and HFMencap. Ian Heggs

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noted that the Council was very interested in getting young people's feedback on the new SEN local offer website and they would value input from the Youth Council and Cabinet.

Members asked that the new Youth Manifesto for 2016/17 be sent to all school governors and councillors for discussion and to promote the work of the Youth Council.

The Chair congratulated the new Youth Mayor and Deputy Youth Mayor on their recent electoral success and thanked them for their presentation.

#### RESOLVED

- 1. That the new Youth Manifesto for 2016/17 be sent to all School Governors and Councillors for discussion and to promote the work of the Youth Council.
- 2. That the Youth Council be invited to provide feedback on the new SEN local offer website.

#### 6. EXECUTIVE DIRECTOR'S UPDATE

#### Ofsted Inspection of Services for Children in Need of Help and Protection, Looked After Children & Care Leavers and Review of the Local Safeguarding Children Board

Steve Miley shared that Ofsted's judgement regarding the overall effectiveness of children's services in Hammersmith & Fulham was that they were 'good' with sub-judgements about adoption performance and leadership, management, and governance were found to be 'outstanding'.

Areas highlighted for improvement over the next year were the Look After Children and Care Leavers service - even though they achieved a rating of 'good' it was felt there was still room for improvement.

The Chair asked which of the Local Safeguarding Children's Board (LSCB) recommendations (3.8 of the report) were the highest priority. Steve Miley informed members that LSCB results nationally had been lower than social care results and there was a national debate about how they can enact change across all of their partner organisations without executive powers. Consolidating three LSCBs into one across the shared services area was a good foundation but Ofsted are now looking for LSCBs to more clearly demonstrate the impact that they have.

Members asked how much of the Ofsted inspection was focused on SEN. Steve Miley responded that Ofsted took a relatively light touch approach to children with disabilities because SEN providers were inspected separately. Ian Heggs noted that the SEN service did provide information to Ofsted on a number of cases and was a local area inspection coming in the near future that would look at local provision for young people from 0 - 25 years old with SEN and / or disabilities.

Minutes are subject to confirmation at the next meeting as a correct record of the proceedings and any amendments arising will be recorded in the minutes of that subsequent meeting.

The Chair asked if senior officers had any thoughts on the inspection process itself. Steve Miley responded that the services had fed back to Ofsted that, in future, more thought should be given to proportionality as currently smaller authorities received far more scrutiny than larger authorities. It was also felt that the inspection would be a good opportunity to offer help and more specific recommendations for improvement rather than just getting a one word judgement on each area. The inspection teams were very knowledgeable as they saw best practice across the country – a move to narrative judgements would have a far greater impact.

The Chair, on behalf of the Committee, congratulated all staff involved in the inspection on the excellent result.

#### RESOLVED

That the Committee noted the contents of the report.

#### 7. CABINET MEMBERS UPDATE

Councillor Sue Macmillan, Cabinet Members for Children and Education, gave an overview of the work that she had undertaken since the previous meeting including:

- Schools visits to Wendell Park, Good Shepherd, and the new West London Free School campus.
- A visits to the Looked After Children's and Care Leavers service following the recent Ofsted inspection to discuss how to take forward the issues highlighted.
- A meeting with schools on proposed changes to the national funding formula. Many schools in the borough had serious concerns about the changes as they could mean significant shortfalls in school budgets. The Council provided a lengthy response to the funding formula consultation and Councillor Macmillan said she would report back when more detail was known.

Members asked if all schools were facing funding issues if the national funding formula changes went ahead as proposed. Councillor Macmillan said that the changes would affect all schools and rising costs applied across the board.

#### 8. <u>IMPACT OF DELAYS TO DISCLOSURE AND BARRING SERVICE</u> <u>CHECKS</u>

Steve Miley presented the report that detailed significant delays to the Enhanced Disclosure and Barring Service (DBS) checks at the stage where the Metropolitan Police undertake their check of locally intelligence. The delay had impacted the delivery of local services for children, most notably the Fostering and Adoption Service and the Travel Care and Assistance Service.

It was reported that the Metropolitan Police had a backlog of around 30,000 outstanding DBS checks and while they had acknowledged there was a problem they were struggling to recruit staff to reduce these numbers.

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Members asked if it was possible to recover the costs for the DBS charges, in light of the poor level of service. Steve Miley responded that the police had no plans to compensate affected parties.

The Chair asked why this was only an issue in London. Steve Miley responded that it appeared that the police had underestimated the level of demand and were simply under resourced to deliver the function.

Members asked if it was possible for another police force to deliver the service for the Council (e.g. Thames Valley Police). Officers did not believe that would be possible because the DBS check involved reviewing hard and soft intelligence from local police stations, but they would explore whether it was a possibility.

#### RESOLVED

That the Committee noted the contents of the report.

#### 9. SCHOOL ORGANISATION AND INVESTMENT STRATEGY 2016

lan Heggs presented the annual revision of the School Organisation and Investment Strategy.

The Chair asked if there was sufficient provision of secondary school places across the borough. Ian Heggs responded that schools in the centre of the borough were near capacity but there were still a number of schools with spare places further north and south.

Members asked if there would be capacity to support the requirement for all young people to be education or training up to the age of 18. Ian Heggs responded that Hammersmith and Fulham was generally in a good position on young people not in education, employment, or training (NEET), but there were groups such as young people with SEN and care leavers where more work was needed. Overall there was far more provision than necessary (both locally and across London) – an upcoming review was expected to lead to a 25 percent reduction. Officers were working with schools to ensure that the right kind of provision was in place, including routes into work, pre-internships, and pre-apprenticeships.

Members asked for more information on the range of apprenticeships on offer to young people. Ian Heggs responded that the Council was working closely with local partners (e.g. the Lyric Theatre) to provide a broad range of opportunities. Steve Miley added that the virtual school had recently added a post that would focus on apprenticeships.

The Chair asked what action the Council took with regards to schools with significant numbers of surplus places. Ian Heggs said that officers provided advice to schools but ultimately it was a decision for the governing body. The Council was more focused on setting the wider trends through discussions at Headteacher and governors groups.

Minutes are subject to confirmation at the next meeting as a correct record of the proceedings and any amendments arising will be recorded in the minutes of that subsequent meeting.

Members asked how the Government's recent white paper on converting all schools to academies would affect the strategy and the role of the local authority going forward. Ian Heggs responded that officers were waiting for the details of the proposal, particularly around the practicalities of converting so many schools over a relatively short period. Officers were running a workshop in May with schools about the possibility of forming a joint multiacademy trust that would allow the Council to retain some influence.

#### RESOLVED

That the Committee reviewed and commented on the School Organisation and Investment Strategy for 2016.

#### 10. WORK PROGRAMME 2016

Members asked for an item on childcare during the school holidays – including how provision was promoted, cost per child, available hours, and information on where demand was highest – for the next meeting.

#### 11. DATE OF NEXT MEETING

The Committee noted that the next meeting would be held on 13 June 2016.

Meeting started: 7.00 pm Meeting ended: 9.00 pm

Chair

Contact officer: David Abbott Committee Co-ordinator Governance and Scrutiny Tel 020 8753 2063 E-mail: david.abbott@lbhf.gov.uk

Minutes are subject to confirmation at the next meeting as a correct record of the proceedings and any amendments arising will be recorded in the minutes of that subsequent meeting.

## Agenda Item 6

London Borough of Hammersmith CHILDREN AND EDUCATION PO ACCOUNTABILITY COMMITT 13 June 2016	LICY &	hammersmith & fulham		
EXECUTIVE DIRECTOR'S UPDATE				
Report of the Executive Director of Children's Services				
Open Report				
Classification - For Information				
Key Decision: No				
Wards Affected: All				
Accountable Executive Director:				
Clare Chamberlain, Executive Director of Children's Services				
<b>Report Author:</b> Clare Chamberlain, Executive Director of Children's Services	Contact Details			
Executive Director of Children's Services		amberlain@lbhf.gov.uk		

### 1. EXECUTIVE SUMMARY

1.1. This report provides a brief overview of recent developments of relevance to the Children's Services department for members of the Policy and Accountability Committee to consider.

## 2. **RECOMMENDATIONS**

2.1. The Committee is asked to review and comment upon the contents of this report.

#### 3. APPOINTMENT OF EXECUTIVE DIRECTOR OF CHILDREN'S SERVICES

- 3.1. Andrew Christie provided an update at the last CEPAC regarding arrangements being made to appoint his successor. On 6 May I was appointed as Executive Director for Children's Services, initially for one year.
- 3.2. To support me in my role, Ian Heggs will take on additional responsibilities as Director of Education, leading on all education matters including those relating to schools standards, children with special educational needs and disabilities and vulnerable children and school place planning.

#### 4. EDUCATION

#### Ofsted judgements on local schools

- 4.1. There have been fewer Ofsted inspections this academic year. Five schools have been inspected so far: Holy Cross Primary, All Saints Primary,Sir John Lillie Primary, Ark Swift Primary Academy and Phoenix High School. Reports from the these inspections have now been published, apart from Phoenix.
- 4.2. Overall trends in outcomes have been very positive. In August 2014 84% of children went to good/outstanding schools, the current figure is 91%. This compares very favourably against the national average (84%) and the London average (88%). From the reports published so far, two of the five schools moved from requiring improvement at their last inspection to good at their most recent inspection (Holy Cross and Sir John Lillie), and one school (Ark Swift) moved from inadequate at the last inspection to good. This is a real credit to the high quality of leadership in these schools. There has also been recognition by Ofsted, in their feedback, of the targeted support and challenge provided by Local Authority services.

School	Previous Inspection Outcome	New Inspection Outcome
All Saints Primary	Good (July 2011)	Good (April 2016)
Ark Swift Primary Academy	Inadequate (October 2012)*	Good (May 2016)
Holy Cross Primary	Requires Improvement (October 2013)	Good (November 2015)
Phoenix High School	Requires Improvement (December 2013)	tbc
Sir John Lille	Requires Improvement (November 2013)	Good (May 2016)

\* As Canberra Primarry School

#### Academy conversions for September 2016

4.3. Fulham, Queen's Manor and Sulivan Primary Schools are to be established as a multi-academy trust (MAT) with the three schools converting to academy status from September 2016. Although the MAT will be supported by the London Diocesan Board (LDBS) for Schools, each school will retain its community school ethos. A number of intended benefits have been identified from this arrangement including extended learning opportunities and activities for pupils; increased mutual support between head teachers and governors; sharing excellent practice in teaching and learning with enhanced professional development for staff; and the securing of cost and resource efficiencies through joint commissioning of services for the schools.

#### 5. SAFEGUARDING AND CORPORATE PARENTING

- 5.1. Hammersmith & Fulham is one of 12 "Partners in Practice" authorities working with the Department for Education (DfE) to develop models of effective practice which will contribute to overall improvement in children's social care. We have submitted our proposed programme of work, with delivery costs to the DfE and presented these to their Expert Steering Group on 16 May 2016. We await their feedback.
- 5.2. The proposal includes outlines of plans as follows:

#### Development of the practice system

The plan is to develop the existing *Focus on Practice* programme, ensuring increased access to clinical staff and other multi-disciplinary input by social work teams, while developing dual qualified expert staff to lead practice in the longer term. We also intend to make increased use of predictive modelling to provide intensive services at the earliest stage for children who are likely to need them.

#### Sector Improvement

We have proposed setting up a Centre for Social Work across three authorities to support improvement in the wider sector. Local expertise will be used to develop and offer courses regarding applying systemic approaches to social work practice, along with coaching and opportunities to spend time in local services where systemic approaches are being employed.

#### Deregulation

We plan to continue to explore and challenge system conditions which determine the culture and practice within our services including where there might be unnecessary bureaucracy; ensuring a proportionate balance between assessment and providing services; enabling social workers and other to work intensively with families; and developing professional accountability for our work in a way which allows the front line workforce to be more creative and confident in their interventions with families.

#### Year end summary of Family Services data

- 5.3. A summary of social care activity in the borough for 2015/16 has been added to this report as an appendix. The aim of this is to provide CEPAC with key social care data to scrutinise. It also includes details of performance for the previous three years as well as comparative measures at London and national levels for 2014/15.
- 5.4. General themes to be noted from this data include:
  - an ongoing reduction of referrals received year on year. However this has not led to a similar reduction in the number of Section 47 child protection investigations carried out.
  - Stabilised and reduced numbers of children with child protection plans. This is the result of a new child protection case conference model and different ways of working with families through the Focus on Practice programme.
  - A slight increase in numbers of looked after children numbers. This was partly due to an increase in unaccompanied asylum seeking children (5 young people) as well as a reduction in the number of children leaving care on permanency orders (including through adoption or with Special Guardianship Orders) as a result of a change in court decisions.

#### Social care workforce developments

5.5. There are currently 8 social workers in their Assessed and Supported Year in Employment (ASYE) in the Contact and Assessment Service, with 4 more ASYE social workers joining the service in the Autumn. The ASYE programme supports newly qualified social workers in their first year of employment to develop their skills, knowledge and professional confidence. This is in an employment market where it is difficult to recruit more experienced staff. Proposals are being developed to improve the retention of staff, however, in the meantime 3-4 additional posts at deputy team manager are being recruited to to support the ASYE workers as well as freeing up team managers to focus more on the work of their teams. In addition, a close working relationship is being developed with child protection case conference chairs to promote and enhance consultations regarding thresholds for interventions and working with complex cases.

#### **Children and Social Work Bill**

5.6. The Committee is asked to note the implications from the Children and Social Work Bill announced in Parliament as part of the Queen's speech in May 2016. This includes developments for care leavers which include a "covenant" through which businesses and charities will be asked to support this cohort of young people. There will be a requirement to publish a "local offer" setting out services

care leavers are entitled to. They will also be entitled to support from a personal adviser until the age of 25.

- 5.7. There is an aim to "tip the balance" in favour of permanent adoption where this is most likely to ensure stability for children rather that pursuing placements with connected or kinship carers if there is uncertainty about the ability of such carers to look after children in the longer term. There are also measures to promote educational achievement for adopted children and those cared for through a Special Guardianship Order.
- 5.8. The Bill also includes a number of measures intended to improve the social work profession, including setting up a specialist regulator and the encouragement of testing different ways of working, for example through exemption for some local authorities from some social care legislation. A new, centralised system for Serious Case Reviews is to be introduced, overseen by an independent Child Safeguarding Practice Review Panel.

#### 6. COMMISSIONING

#### School Meals

- 6.1. Following a successful mobilisation, the new school meals contract goes live on the 6<sup>th</sup> June 2016 and is expected to produce over 32,000 meals in the first week alone across 34 nursery, primary and special schools and 7 secondary schools. Eden have been awarded the contract to deliver school meals for Lot 1 (Nursery, Primary, and Special schools) and Caterlink have been awarded the contract for Lot 2 (secondary school establishments). The contract is for three years, with the option to extend for a further two years.
- 6.2. The new service will promote high quality, freshly prepared meals cooked that cater to cultural and dietary needs. Contractors are working closely with schools to ensure that there is a smooth transition to the new service and to meet school specific individual requirements. Social value remains a key priority under the new contract which will also secure a total of 22 apprenticeships across the service.

#### Travel Care and Support

- 6.3. Procurement of a new contract for the travel care and support routes to Jack Tizard has been undertaken and the contract awarded to CT Plus for three years. The procurement was reserved to social enterprises. Extensive preparatory work has been undertaken in respect of contract mobilisation with service delivery due to begin on 6 June 2016. There has been extensive communication with service users and the school regarding the new arrangements. Officers are confident that the service delivery from CT Plus will be of a consistently high quality.
- 6.4. Agreements have been secured with the existing provider to vary this contract to CT Plus, along with two other smaller routes to alternative providers.

- 6.5. Work has continued with all providers to improve standards of service delivery where required, and to ensure that these are then consistently maintained. The impact of this work has been to improve performance and increase customer satisfaction with a significant reduction in the number of complaints.
- 6.6. Successful permanent recruitment has been achieved to the key posts of Transport Commissioning Team Manager and the Team Leader. Both candidates are now in post and there is a phased transition from the interim postholders currently taking place. In addition, an experienced commissioning manager has begun work in respect of future Travel Care and Support arrangements for April 2017 onwards when the current contracts (with the exception of the newly let CT Plus contract) come to an end. This commissioning and procurement work will also include independent travel training arrangements.

#### 7. EQUALITY IMPLICATIONS

7.1. As this report is intended to provide an update on recent developments, there are no immediate legal implications. However any legal issues will be highlighted in any subsequent substantive reports on any of the items which are requested by the Committee.

#### 8. LEGAL IMPLICATIONS

8.1. As this report is intended to provide an update on recent developments, here are no immediate legal implications. However any legal issues will be highlighted in any subsequent substantive reports on any of the items which are requested by the Committee.

#### 9. FINANCIAL AND RESOURCES IMPLICATIONS

9.1. As this report is intended to provide an update on recent developments, there are no immediate financial and resource implications. However any financial and resource issues will be highlighted in any subsequent substantive reports on any of the items which are requested by the Committee.

#### LOCAL GOVERNMENT ACT 2000 LIST OF BACKGROUND PAPERS USED IN PREPARING THIS REPORT

None.

#### LIST OF APPENDICES:

Appendix 1: LBHF Children's Social Care update April 2016

## Agenda Item 8

Hammersmith & Fulham CAMHS Taskforce Report



## Hammersmith & Fulham

## Child and Adolescent Mental Health Taskforce Report 2016

#### Introduction

In 2014 there was significant national criticism of mental health services for young people. Inpatient facilities commissioned by NHS England (NHS E) were found to be too far away from patient's homes with insufficient capacity to meet demand. Local community based Child and Adolescent Mental Health Services (CAMHS) were described by the Minister at the time, Norman Lamb, as 'not fit for purpose' and in need of 'a complete overhaul.' Additionally, the Health Select Committee criticised investment in the service and the poor state of the current needs data and demanded improvements.

These pressures led to establishing the national CAMHS Taskforce led by Dr Martin McShane (NHS England) and Jon Rouse (DoH). The work of the national CAMHS Taskforce concluded with the publication of its well-received report, 'Future in Mind' in February 2015.

In step with these national developments, across Hammersmith & Fulham, Kensington & Chelsea and Westminster, a CAMHS Task & Finish Group met and made recommendations<sup>1</sup> for improvements to all three Health & Well Being Boards. The Task & Finish Group findings were strongly influenced by and indeed presented to the HWBBs by local Young People's Champions supported by Rethink<sup>2</sup>.

In response to the Task & Finish report and the presentations made to the H&F Health and Well Being Board, a Hammersmith & Fulham focused CAMHS 'Taskforce' was asked to:

- Summarise the local need for mental health and wellbeing provision.
- Assess the services available in Hammersmith and Fulham which support good mental health and emotional wellbeing for young people.
- Identify any gaps.
- Comment on whether Hammersmith & Fulham young people and professionals have access to the right provision and services that young people want to use?

#### **Taskforce Members:**

Cllr Alan De'Ath (Chair), Cllr Sharon Holder, Cllr Sue Fennimore and Cllr Caroline Ffiske.

Dr Christine Elliot – GP H&F CCG

<sup>&</sup>lt;sup>1</sup> Reported Autumn 2014

<sup>&</sup>lt;sup>2</sup> Rethinking Mental Illness is a national charity campaigning for improvement in mental health services

Georgina Bell – West London Action for Children

Harry Wills, Shahid Khan and Selena Grogan – Rethink Young People's Champions

Stuart Lines – Public Health Vijay Parkash, Mennal Sohani and Kassim Makorie – West London Mental Health Trust

Alex Tambourides – H&F MIND

Officer Support from: Kerry Russell, Steve Buckerfield, Andy Davies and Jacqui Wilson<sup>3</sup> (CAMHS Commissioner)

#### Process

The H&F Young People's Mental Health Taskforce met on five occasions:

Initial Planning	19 <sup>th</sup> March 2015
Provider's Focus	30 <sup>th</sup> April 2015
School's View	18 <sup>th</sup> June 2015
Young People's Priorities	2 <sup>nd</sup> September 2015
What have we learnt?	29 <sup>th</sup> October 2015

Over the course of the Taskforce meetings members heard evidence from a variety of organisations, individuals and stakeholders including: Rethink Young People Champions, H&F Youth Council, Hammersmith & Fulham schools, West London Action for Children, H&F MIND, Health Watch, the Centre for Mental Health and West London Mental Health Trust.

The Taskforce chair, Cllr Alan De'Ath and several other members visited the innovative Brent Centre for Young People<sup>4</sup> on the 20<sup>th</sup> July 2016.

The Taskforce also heard the results of the Hammersmith & Fulham Youth Council survey<sup>5</sup> of 200 local young people who were asked about their knowledge of mental health and emotional wellbeing.

Reports from HealthWatch on Young People's Priorities; the results of a survey across Hammersmith & Fulham primary schools and work produced by ReThink, working with local young people on perceptions of mental health services, were all considered by the Taskforce.

#### Needs in Hammersmith & Fulham

<sup>&</sup>lt;sup>3</sup> Jacqui Wilson has left the CAMHS commissioner post and has been replaced by Angela Caulder

<sup>&</sup>lt;sup>4</sup> Laufer House, 51 Winchester Avenue, London, NW6 7TT

<sup>&</sup>lt;sup>5</sup> June 2015

A snapshot of mental health needs across the UK shows that:

- 1 in 10 children and young people aged 5 16 suffer from a diagnosable mental health disorder around three children in every class
- 75% of mental health problems in adulthood (excluding dementia start before 18 years
- Between 1 in 12 and 1 in 15 children and young people deliberately self harm
- More than half of all adults with mental health problems were diagnosed in childhood. Less than half were treated appropriately at the time.

#### **Local Population**

No of Children <sup>6</sup>	33,328
No of School Children <sup>7</sup>	20,071
Rate of LAC <sup>8</sup>	60

Up to date information on the health, educational and social care needs of children and young people with emotional and/or mental health needs is not available. This is a common issue across North West London. Hammersmith & Fulham CCG, in collaboration with neighbouring North West London CCGs, has committed to commissioning a new Joint Strategic Needs Assessment for young people mental health needs for 2016<sup>9</sup>. The Anna Freud Centre has been recruited to undertake this work, which is now underway and will report in the summer 2016.

Estimates across North West London suggest 25,000 5-16 year olds will have a mental health disorder. Public Health England (2014) estimates that for Hammersmith & Fulham:

1828 young people may have a mental disorder

723 may have an emotional disorder

1104 can have a conduct disorder

307 experience a Hyperkinetic disorder

Self harm is also more common amongst young people with mental health needs. Among 11-16 year olds, over a quarter of those with emotional disorders and around a fifth of those with conduct or hyperkinetic disorders or depression said that they had tried to harm themselves<sup>10</sup>. Deliberate self-harm is more common among girls than boys. Between

<sup>&</sup>lt;sup>6</sup> ONS Mid-Year Projections: Table SAPE15DT8; Mid 2013 Population Estimates of wards in England & Wales

<sup>&</sup>lt;sup>7</sup> DfE School Rolls 2015

<sup>&</sup>lt;sup>8</sup> Looked After Children DfE SFR36/2014 LAC aged 0-17 per 10,000

<sup>&</sup>lt;sup>9</sup> The Anna Freud Centre has been commissioned to complete this work which is now underway and will report in the summer of 2016.

<sup>&</sup>lt;sup>10</sup> ONS (2005) Mental Health of children and young people in Great Britain

2001/02 to 2010/11, rates of hospital admission due to deliberate self-harm have increased nationally by around 3% among 11-18 year olds (to around 17,500 in 2010/11).

There are also a number of specialist mental health needs for some vulnerable populations. National research has found that among looked after young people, 38% to 49% (depending on age) have a mental health disorder. Mental health conditions are also more common among young offenders. This is thought to be associated with the offending behaviour in over three-quarters of the young people who had a full assessment in 2014/15.

Children with special educational needs with an Education, Health and Care Plan (EHCP) may also be at higher risk of developing mental health needs, including autistic spectrum disorders.

#### **Current Services and Performance**

West London Mental Health Trust (WL MHT) is contracted by H&F CCG to provide community mental health services for young people in the borough. A team of approximately 30 mental health clinicians provides a service from their main base in Glenthorne road. The team is comprised of psychiatrists (4), psychologists (6), family therapists (3.1), psychiatric nursing (1), primary mental health staff in reaching to local schools (5.8) and management and administration (6.6).

#### Funding

Hammersmith & Fulham CCG invest £2,010,863 in mental health services for young people.

Hammersmith & Fulham local authority invest £512,000 in young people's mental health services, primarily supporting CAMHS work in schools, local training, a liaison post in social care, support for looked after children and a family therapy project. The local authority contribution is currently not guaranteed beyond March 31<sup>st</sup> 2017.

The London Borough of Hammersmith & Fulham have also benefited from short term national investment to introduce systemic family therapy clinicians and techniques into social work teams through the successful Focus on Practice programme.

Both the council and H&F CCG also joint fund the specialist Multi-Systemic Therapy (MST)<sup>11</sup> team which works intensively with families where young people are at risk of custody, care or not engaging with education.

#### Performance

2014-15 897 referrals received

748 accepted

<sup>&</sup>lt;sup>11</sup> MST Team – 3 therapists and a coordinator offer 24 hours support to high risk families. Funding is provided by the 3 inner London CCGs and Hammersmith and Fulham, Kensington and Chelsea and Westminster local authorities.

662 young people had a first attendance

5,156 follow up appointments offered

Waiting Times (June 2015) – all referrals are triaged to assess the severity of the issues and to decide priority.

55.6% (15 young people) assessed within 4 weeks of referral

37% (10 young people) assessed between 5 to 11 weeks

7.4% (2 young people) waited for longer than 11 weeks

#### **Assessment to Treatment**

68% (17 young people) treated within 4 weeks of assessment

20% (5 young people) treated between 5 and 11 weeks

12% (3 young people) treated beyond 11 weeks

#### Outcomes

Outcome measures have been included in the WL MHT contact for 2015-16. Both the clinician and the young person complete a self-assessment which tracks improvement as a result of the intervention. The national Children & Young Peron's Increasing Access to Psychological Therapies (C&YP IAPT) programme provides a menu of condition specific measures to be completed at the beginning and conclusion of treatment. Completion of an outcome measure at the start and conclusion of an intervention is termed a 'matched pair.' On a year to date basis, 41% of young people discharged from the service have a 'matched pair' of outcome measures. Of that cohort, 68% record that improvement was achieved.

It is anticipated that compliance with these outcome measure key performance indicators will improve significantly in 2016-17 and this is currently being negotiated with WL MHT.

#### Admissions to In-patient units

NHS England is responsible for commissioning in-patient psychiatric beds for young people (Tier 4 provision). The provision is provided by a variety of predominantly private hospitals (e.g. the Priory Group). NHS E data for 2014-15 indicates that there were 45 admissions for young people in Hammersmith & Fulham or 13.4 per 10,000 population, the highest ratio across North West London<sup>12</sup>.

On the 10<sup>th</sup> March 2016 NHS England announced its intension to relinquish control of tertiary mental health beds in 'selected areas.' The changes could mean CCGs, NHS mental health trusts and independent providers could band together to make local or regional bids

<sup>&</sup>lt;sup>12</sup> Ealing 6.1 Hounslow 5.0 Hillingdon 7.9 West London 8.2 Central London 9.5 Brent 9.0 Harrow 5.4

to take on the commissioning of secure mental health services, tier four child and adolescent mental health services, and other specialist services such as eating disorder units.

North West London CAMHS commissioners are keen to restore local control of access and discharge from inpatient units and will be contacting NHS England to explore how this can be taken forward.

#### Taskforce visit to Brent Centre for Young People

The Brent Centre for Young People was founded in 1967 by psychoanalysts<sup>13</sup> who had developed their work initially through the Anna Freud Centre<sup>14</sup>. The centre has grown over the years developing talking therapies unique to the centre which include: Adolescent Exploratory Therapy, Group Therapy for Young Offenders and Sport & Thought, as well as more widely used therapies such as psychoanalytical therapy, art therapy, psychotherapy and family therapy.

The centre receives some funding from Brent CCG but also has strong links with ten Brent schools which commission 'on site' support for young people from the service. This includes providing a service to young people excluded from school.

The Taskforce members who visited the Brent Centre for Young People were particularly impressed with:

- Centre's ability to combine therapeutic support with practical problem solving: e.g. homelessness, debt and access to sports activities
- Close working relationships with schools, the Key Stage 4 Referral Unit and Youth Offending Service
- Vibrant and up to date website providing support to young people and families
- Capacity to see young people and families quickly

The Brent Centre explained that there were still challenges and that their offer did not resolve everything. For example, transition between children and adult services remains an issue, and they work hard to keep communication working well with the local CAMHS team provided by CNWL.

• In summary, the Taskforce members thought there were considerable advantages to the Brent Centre for Young People's model and that exploring opportunities to look for collaborative models with the voluntary sector and other council services should feature in the Taskforce's recommendations.

#### Taskforce Discussions with Hammersmith & Fulham Young People

<sup>&</sup>lt;sup>13</sup> Moses Laufer, Egle Laufer, Mervin Glasser, Myer Wohl and Child and Adolescent Psychiatrist Maurice Friedman.

<sup>&</sup>lt;sup>14</sup> Originally known as the Hampstead Clinic

The Taskforce considered contributions from young people presented by three organisations:

- Hammersmith & Fulham Youth Council
- HealthWatch Central West London
- ReThink (national voluntary agency)

**Hammersmith & Fulham Youth Council** identified mental health as a key issue and therefore incorporated mental health for young people into its Youth Parliament 2015 Mind the Gap Campaign. The Youth Council's 2015-16 manifesto includes the pledge:

## 'We will work to help reduce the stigma around mental health so that young people can access the support they need.'

As part of their campaign the Youth Council asked 3,000 young people:

## 'Do you know where to access support if you're feeling down or stressed? If so where would you go?'

This was followed up with a more details questionnaire discussion with 196 young people in Hammersmith & Fulham schools or youth projects. The key findings were that:

- Many young people did not know where to access support, either in or out of school
- In school, friends, school based counsellors, peer mediators and form teachers were mentioned, but the understanding varied enormously from school to school.
- Out of school young people mentioned family and friends, going on line and going to see their GP, although a number also specifically ruled out seeing their GP.

The Youth Council survey also asked young people about their understanding of '*mental health*' and '*emotional well-being*.'

- Most gave negative definitions portraying the negative stigma surrounding mental health e.g. *Psycho, Mad, Dangerous*
- Only a few offered positive definitions e.g. *Happiness, satisfaction and no stress.*

The Youth Council's conclusions were that schools should talk more openly and regularly about mental illness, including encouraging young people who have experienced mental health issues, to talk to others.

Hammersmith & Fulham Youth Council also recommended stronger promotion and advertising of services with schools being much clearer about what is available and how to find support (including web links etc.).

Young people told the Youth Council that videos in assemblies or PHSCEE were very effective, particularly if it was produced by young people and for young people.

There were also some 'great examples of counselling in schools' but other schools don't provide this. These good examples should be shared and encouraged.

Finally, the Youth Council wanted to see more emphacise on how important *positive mental health* is and *good tips* for *emotional wellbeing*.

**HealthWatch Central West London** produced a helpful report; 'Our Perspectives...read our stories about young people and mental health' in July 2015 and this was shared with the Taskforce. The report summarised the views and opinions of young people in Hammersmith & Fulham, Kensington & Chelsea and Westminster<sup>15</sup>, with input from parents, carers and professionals<sup>16</sup>.

The HealthWatch report echoes the findings reported by the Youth Council:

- Stigma associated with mental health and fear of 'labelling' remains powerful for young people
- Very mixed understanding of mental health and emotional well being
- Parents complained that they often did not understand what we being said as 'jargon' was frequently used by health professionals

A large proportion of young people (78%) that HealthWatch spoke to reported that they would seek support from their parents in the first instance. School based services were also popular with both parents and young people.

Finding information on young people's local mental health services was patchy. National organisations and charities had better capacity to keep websites up to date and relevant.

Transitions between services were also seen as problematic and the findings from the 2014 CQC '*From the Pond to the Sea – Children's Transition to Adult Services'* remained relevant:

- Parents still caught up in with both CAMHS and Adult Mental Health Services
- No one to 'co-ordinate' transitions
- Transitions should be tailored to the individual and started at least 18 months before the 18<sup>th</sup> birthday

The HealthWatch report concluded with 18 recommendations which included:

• Calls to improve training: general awareness, mental health responsibilities for front line staff, jargon free communication for professionals and support and information for parents

<sup>&</sup>lt;sup>15</sup> Young people's involvement included a focus group at a West London school, 100 young people completing an on line survey and a further 150 attending two engagement events

<sup>&</sup>lt;sup>16</sup> Two engagement events were held: Oct 2014 St Anne's Church Soho and March 2015 Westminster College. The in-patient Unit Collingham Gardens operated by CNWL was visited and professionals given the opportunity to complete a survey.

- Improve clarity on pathways to services, co-ordination with the voluntary sector, and inclusion of the referrer in the 'solution', early intervention, transition planning and liaison with schools.
- Work with young people to develop creative early interventions which can be delivered as a 'whole family approach, through schools or young people's homes.

**ReThink,** the national mental health charity, has been providing support to a group of Hammersmith & Fulham 'Young Champions' who have been promoting the 'co-production' approach to mental health services: active involvement and participation of young people in service re-design, rather than traditional 'consultation' events.

The Champions produced a summary report based on an on line survey of 115 young people aged between 14 and 25 years old. Almost half of the respondents lived in North West London and half of those in Hammersmith & Fulham. Three quarters were female. There were equal numbers of respondents with and without a psychiatric diagnosis. The questionnaire asked participants firstly had they sought support and then where did they look to find it?

#### Findings

64% of the sample had made efforts to find help for their emotional or mental health issues which was broadly in line with both NW London and London comparisons.

Of those seeking support:

- 23% approached mental health services
- 19% turned to their family
- 12% found help through school or college
- 11% asked their GP
- 10% looked to friends
- 5% had access to a private counsellor or therapist
- 3% found an unspecified 'other' solution

Approximately two thirds of those seeking supported received what they had hoped for, with 25 young people registering disappointment.

Respondents were then asked to rate the quality of the support they received.

On average family, friends and teachers were rated as the most supportive, whereas statutory mental health services, often accessed in a crisis (in-patient or Accident & Emergency) were rated poor. Most forms of support received at least one high score (10)

from at least one young person, but specialist mental health services (CAMHS, counsellor or in-patient) also received some very low scores (0).

#### **ReThink Conclusions**

- More can and should be done in schools to promote positive mental health, open discussion and knowledge of support services, including via the web.
- Young people do seek help from family, friends and teachers and highly rate its effectiveness
- There is more we can do to improve both the visibility, access and initial responses from crisis and specialist mental health services

#### Taskforce Discussions with Hammersmith & Fulham Schools

The Taskforce heard the results of a survey of Hammersmith & Fulham Primary Schools which raised a number of issues that were then discussed with school representatives. This included:

- Uncertainty about the 'early signs' of mental health issues to look for
- Concern about increasing incidence of mental health issues within school and waiting lists and 'high' thresholds for professional help
- Schools were buying in valued additional support including: art therapy, counselling (West London Action for Children) and family therapy. Provision across schools was however inconsistent.
- From the small number of primary schools contacted, there was little in the way of additional training for school staff.

In terms of improvements, schools asked for:

- 1. Improved sign posting (e.g. flow diagrams) to services and simplified explanations about how to find services and what they could offer.
- 2. Schools were concerned that the 'in school' support and services was very limited. They would like to see this improved.
- 3. Schools also asked for 'sustainable' and easy access to 'highly skilled practitioners' who could provide advice and guidance.

There were additional contributions from the Bridge Academy, Lena Gardens, Fulham Cross Girls, Brackenbury and Jack Tizzard Special School. The points that follow summarise the lively and robust discussion that took place.

 The school representatives who were able to attend the Task Force were unanimous in their view that the impact of pupil and on some occasion's also parental mental health issues was a significant and escalating issue.

- 2. The Bridge Academy has engaged its own therapy team<sup>17</sup> as local CAMHS was unable to respond quickly enough to identified issues. Mental health input was seen to make a difference where it was delivered at school and in groups.
- 3. Considerable interest in establishing more 'school linked' mental health posts and emphacising an 'early intervention' approach.
- 4. Concern that there was no specific service for younger children with an eating disorder
- 5. Also, complaints that waiting lists for a community service from Hammersmith & Fulham CAMHS could be up to 12 weeks.
- 6. Primary Heads felt that they were identifying need early but had little or no resource to address this.
- Additional training for school staff was seen as essential. The training delivered by Educational Psychologists (two day input) was praised but access and knowledge of the training offer varied. More specialist mental health training for school staff was requested (e.g. anxiety, attachment, neuro-science, loss at an early age, deescalation and self-harm).
- 8. General concern that Council resources for young people's mental health services will be reduced. Some schools already buy in art and music therapy but resources to expand this are limited.
- 9. Parental mental health or refusal to engage with mental health services both complicates and frustrates interventions often with the school involved being left to cope as best they can.
- 10. There are further complications for secondary schools with larger numbers of pupils living outside of Hammersmith & Fulham. Self harm and concerns about uncertain transition arrangements were also mentioned.

Clinicians from WL MHT explained that their resources are finite and agreed that demand was increasing. Most of the mental health resources are already focused on schools but the range of needs being identified is very broad. A duty officer is available each day at Hammersmith & Fulham CAMHS, but it can be challenging when asked to respond immediately in a 'crisis.'

#### **Universal Services:**

There was also discussion of the impact and effectiveness of universal services and support available to schools.

Personal, Health and Social Education (PSHE), Emotional Wellbeing (EWB) and Social and Emotional Aspects of Learning (SEAL) were all mentioned as positive contributions within schools. Although SEAL has come to an end a number of schools persist with the programme as it was seen to be very effective.

<sup>&</sup>lt;sup>17</sup> Includes Multi-Systemic Therapy, Art and Music Therapy and the Healthy Touch Programme.

Young Minds, Mind Up, Horn Foundation and Take Ten were examples of interventions or lesson plans that schools could make use of.

Public Health's Healthy School Partnership was also seen as a continuing positive initiative. This had led to discussions within schools about: home life; impact of social media; body image; exam stress; panic attacks; staff wellbeing; role of social workers and positive relationships.

It was noted that families are increasingly travelling longer distances to access education. Jack Tizzard School was also concerned about changes in support packages for families and the knock on effects on siblings.

Both Educational Psychology and the School Nursing service were seen as helpful supports for school responding to pupils with complex needs but both disciplines are primarily focused on meeting statutory obligations (SEN and/or safeguarding conferences).

Video Interactive Guidance was mentioned as a positive tool which Jack Tizzard had found to be useful.

#### Conclusions - Ideas for Improvements

The discussion was summed up by: how to respond with 'less resources and rising demand.'

Ideas to make the best use of available services included:

- Exploring co-location for mental health and/or early help or social work services with schools. These could be shared by groups of schools and linked to a local medical centre or GP practice(s).
- WLMHT explained that their work would be more effective if family social issues were addressed social care or early help services, rather than included with the mental health referral.
- Several present felt it was time that young people's services embraced a truly 'whole system' approach to improve 'joined up' outcomes and to make the available resources go as far as possible. This approach is being followed in adult services with increasingly close working between health and adult social care.
- Encouraging quarterly 'cluster meetings' for schools was suggested as an effective means improving communication and inter-agency understanding and responses.
- Establishing a clear Single Access Point for mental health services which is capable of generating a swift response was seen as essential (more than just a great web site).
- Developing a coherent mental health promotion strategy for young people was seen as an important priority for Public Health to pursue.

#### Taskforce Discussions with mental health clinicians and professionals

The Taskforce's discussion with local mental health providers and professionals included contributions from Rethink, the Centre for Mental Health (charity), Hammersmith & Fulham

MIND, West London Action for Children, West London Mental Health Trust and Christine Elliot, Hammersmith & Fulham GP. As with the other discussions overseen by the Hammersmith & Fulham CAMHS Taskforce, what follows is a summary of the lively discussion that ensued.

**Andy Bell** from the Centre for Mental Health told the Taskforce that there was a national drive to encourage local authorities to seriously consider the impact of mental health issues on their populations and the consequences for local services. With as many as 1 in 10 young people experiencing some form of emotional or mental health issues in childhood, this was a significant issue that should not be ignored. Andy Bell went on to stress that the consequences and costs both for individuals and society were high in adulthood: poor outcomes, reduced income and contribution to society and the economy, as well as service costs for local authorities, prisons and the NHS.

Andy Bell argued that the Taskforce should strongly support early intervention, with support through pregnancy, parenting programmes and easy access to therapy as required for both parents and young people. The Future in Mind report from the national CAMHS taskforce endorsed this approach and when combined with the Governments undertaking to improve investment (1.25 billion over 5 years) this was an opportunity to be grasped with both hands.

**Alex Tambourides** from H&F MIND explained that there are 148 branches of MIND across the UK. H&F MIND sees approximately 2,500 people each year and offers support with counselling and mental health advocacy. Locally MIND has been involved with initiatives to improve perinatal services, support for carers and understanding the needs being picked up in primary schools.

H&F MIND have also been engaged with West London College which has been improving its offer to students with mental health issues. This has included training for college staff and input on sign posting to appropriate services.

From MIND's perspective, more could be done to ensure that voluntary sector groups and other local stakeholders had stronger links to CAMHS and plans to develop local services for young people with mental health problems.

Alex Tambourides thought that key issues included:

- Professional service was good for people with severe mental illness but there was a real lack of preventative services
- Teachers dealing with mental health questions generally lack confidence
- Support 'gap' between universal and specialist services
- Stigma continues to be a massive issue
- Local coordination of mental health support for young people could be improved be re-launching a Hammersmith & Fulham young people's mental health partnership (possibly on a pilot basis to test the appetite)

**Georgina Bell** from West London Action for Children (WL AFC) told the Taskforce that only 23% of the local group's income came from statutory bodies with the rest coming from fund raising programmes. WL AFC employs 8 therapists and 'lots of volunteers.' The service supports low income families in Hammersmith & Fulham and Kensington & Chelsea. As well as providing direct services to local families, WL AFC also supplies counselling staff to several primary schools.

WL AFC receives both self referrals and referrals from professionals. They operate their own evaluation rating scale to measure the impact of their work and have offered a variety of group based interventions over the years including:

- Pre-Primary and Primary for Parents
- Parents of Teens
- Dad's Matter
- Breathe (Mindfulness)
- Mighty Me (Pre-school)
- Year 6 'Cool Moves' for transition
- Outreach at Jigsaw

Other services include: Mindfulness, Family Therapy and Cognitive Behavioural Therapy (CBT)

WLAFC have 500 new cases each year. Their focus is often more on the parent than the child.

**Dr Meenal Sohani** and **Kassim MaKorie** presented the services provided by West London Mental Health Trust (WL MHT). WL MHT is a large provider of mental health services supporting a population of up to 800,000, both adults and young people across Ealing, Hounslow and Hammersmith & Fulham. WL MHT also provides tier 2 services in Brent and the Forensic Mental Health Service for Southern England.

At present in Hammersmith & Fulham CAMHS is organised in two sections: Tier 3 which offers a specialist mental health service to young people with complex or entrenched needs and Tier 2, which provides brief interventions to support young people who do not require specialist psychiatric input. Both services see young people up to the age of 18.

The Tier 3 service provides talking therapies, family therapy, CBT, Psychology and Psychiatric diagnosis. The service is based at Glenthorne road in Hammersmith and will see young people at home and also at school, as well as supporting Chelsea Westminster A&E during the day. Emergencies are seen within 5 working days and all referrals are seen initially within 6 weeks. There is a 9 to 5 duty system each day.

Areas to strengthen include:

• Support for young people with learning disabilities and mental health

- Crisis Care
- Shortage of in-patient beds

The Tier 2 service, locally called community CAMHS, employs psychotherapists, nurses and family therapists. There is a team of 8. Statistics for 2013-14 evidence 1700 consultations, with 1100 direct to schools. Locally schools do know how to access the service and the team regularly see pupils on school premises.

In addition, there is a worker based in the Youth Offending Service (Cobbs Hall base) who leads on care planning for young offenders with mental health needs. A lot of training is also offered to YOS professionals.

There is also a small service providing mental health support to looked after young children. As funding is only confirmed until April 2017 short term appointments have been made.

Vijay Parkash, WL MHT Service Director and Clinical Lead agreed that:

- Improvements were required to improve data on need, performance and outcomes
- Mental health services across the UK required 'rethinking' not just tinkering with what's already there.

**Christine Elliot**, Hammersmith & Fulham GP, explained that general practice had the advantage of a global oversight of the family and knowledge of historic mental illness, but will often see very little of the 'family' once children have turned five years of age. A GP has to be very proactive if they want to continue to check on a young person's development.

Dr Elliot agreed that schools were best placed to spot issues for young people 5 to 18 years. Concerns included:

- Information sharing and confidentiality issues can limit inter-agency communications
- GPs not being aware of the support services available locally

#### **Discussion and Issues**

• Will shifting resources to the preventative side reduce demand?

Both MIND and WL MHT agreed that any new resource should be aimed at the preventative, early intervention side of demand, but warned that this would not necessarily reduce the incidence of young people (young adults) with severe mental illness. Staff from the WL MHT community service argued that their service was simply 'too small' to meet the rising demand from Hammersmith & Fulham schools. SENCOs were also seen as a key group of school staff to 'up skill.'

Rethink, argued that young people did not want more CAMHS professionals, but much better equipped and skilled teachers and social workers who could respond confidently to mental health needs.

### • Accessing information and consultation?

General concern that the 'local offer' of mental health support services was very hard to find with everyone complaining they 'don't know what's there or how to find it.'

Rethink pointed out that if you want to improve 'access' to information, ask lots of young people what works for them? Young people will often talk to each other and go on line before approaching A&E.

### • How might services be different?

Andy Bell argued that local authorities were well placed to bring organisations together to combine resources and services with a view 'collectively' reaping longer term benefits.

Single Points of Contact and/or service hubs for young people were seen as attractive ideas. There were some concerns expressed about how a 'hub' might be achieved in the current funding climate. Others emphacised and any 'single point of contact' must link to staff who can respond in real time – not just by e mail.

Service 'hubs' for young people in Australia had been praised in the Future in Mind report, but would they be used and be sustainable?

Would piloting community mental health services (or integrated early help services) based in a local school be more likely to succeed?

Julie Pappacoda argued that we have to improve the general early help – early intervention offer and look at integration of services where duplication looked likely.

Cllr Holder reminded the Taskforce that any findings or recommendations would have to be supported by a very strong evidenced based business case.

• Peer support has been suggested by local young people and the Future in Mind report!

Vijay Parkash thought developing a peer support approach could be 'revolutionary' if we could get it right. H&F MIND had examples of peer support working well. Some concern that any 'on line' peer support would have to be 'actively' supported by professionals to minimise risks. Rethink pointed out that peer support initiatives could be supported and promoted by 'co-production' principles.

#### Transition:

Wide spread agreement that 'transitions' continued to be a challenging area. There were different transitions depending on the services and young peoples' circumstances. Thresholds for support from Adult Mental Health Services are evidently higher.

A brief snap shot taken by CNWL revealed large numbers of young people leaving mental health services between 16 and 18. It was very unclear whether this was appropriate, or whether some of these young people re-engaged with Adult Mental Health Services later in their twenties? Was this an issue to be concerned about?

NICE guidelines have now been published on Transitions: **Transition from children's to adults' services for young people using health or social care services** – NG 43 February 2016. The guidance calls on health providers to identify a senior clinician or manager to drive forward improvements in transitions between services.

#### **Potential for Improvements**

Towards the end of 2015 and as the Hammersmith & Fulham CAMHS Taskforce moved to conclude its enquiries, three significant and very positive initiatives have taken shape:

- Improved Crisis Care: earlier in 2015 North West London CCGs agreed that additional resources should be found to improve the support available to young people with a mental health crisis which occurred beyond office hours or over weekends and public holiday. WL MHT launched the new Out Of Hours service or young people in February 2016. This has introduced waking psychiatric nursing staff who operate in the evenings, weekends and bank holidays. This mobile and face to face service will see young people who present and Accident & Emergency and will be able to review young people admitted to paediatric wars at weekends. The nurses will be support by the existing on call CAMHSA supported provided by WL MHT. The new service will begin in April 2016.
- CAMHS School Link Pilot: Hammersmith & Fulham CCG has been awarded a place on the NHS England CAMHS Schools Link pilot. This initiative links ten Hammersmith & Fulham schools to WL MHT who have received short term funding (from the CCG, DfE and NHS E) to strengthen school and CAMHS links. Two training days have now been held with SENCOs and school mental health leads, with a further review scheduled for later in 2016. Designated CAMHS staff are now linked to the ten schools in the pilot.
- Future in Mind Transformation Plans: In October 2015, led by Hammersmith & Fulham CCG, a local Transformation Plan was submitted to NHS England and subsequently approved. The Hammersmith & Fulham Transformation Plan is part of the North West London 'Like Minded' Mental Health Strategy and seeks to address eight priority areas. An update on the local plan can be found at Appendix !. The eight priority areas are:
  - 1. Updating the local needs assessment
  - 2. Supporting co-production with young people
  - 3. Training

- 4. Establishing a community eating disorder service
- 5. Service re-design for young peoples' mental health services
- 6. Improving services for young people with Learning Disabilities and Neurodevelopmental disorders
- 7. Improving crisis care
- 8. Embedding ideas from 'Future in Mind'

For 2015-16 Hammersmith & Fulham CCG have been allocated **£100,744** to establish a community eating disorder service (to be developed collaboratively with Ealing and Hounslow CCGs) and a further **£252,173** to address 'transformation' priorities.

#### Hammersmith & Fulham CAMHS Taskforce - What have we learnt?

Young people and their representatives told the taskforce that:

- They often did not know where to turn to for help
- That family, school and friends were all potential sources of help and advice
- School based support is welcomed by both young people and parents
- That the stigma attached to mental health was still strong
- That peer support and co-production initiatives are popular and effective approaches

Hammersmith & Fulham schools told the Taskforce:

- That an urgent improvement in the scope and scale of training offered to school staff should be an immediate priority
- Primary schools required support as well as secondary schools
- Schools are interested in experimenting with more 'school based' services (mental health and/or early help)
- That the 'offer' to school on mental health should be clear with more readily available sign posting materials (flow charts, video and/or websites) for external services
- Mental illness of parents and/or parental refusal to engage was a significant issue

Mental Health clinicians and the Voluntary Sector told the Taskforce:

- Demand for services and support, particularly from schools was increasing
- There is a 'needs gap' between universal and specialist services
- Partnership working between CAMHS, voluntary agencies and social care requires effort and perseverance and could be improved.
- Crisis care and support for young people with learning disabilities and mental health issues should be stronger
- GPs also had knowledge gaps about local young people's mental health provision

• Transition between services can still be uncertain

#### **Taskforce Conclusions and Recommendations**

Taskforce members have been impressed by the passion and determination to make improvements demonstrated by the contributors to the discussions. Thanks are particularly due to the young people from the Hammersmith & Fulham Youth Council and the champions supported by Rethink, both of whom have contributed important insights and suggestions for improvements.

The main conclusions reached by the Hammersmith & Fulham CAMHS Taskforce are:

#### 1. Access to Services, Information and Support Needs to Improve:

The Taskforce recommends that the council, NHS mental health and voluntary sector providers and CCG commissioners pool their managerial and clinical expertise to:

- a. Clarify the services and support available to Hammersmith & Fulham young people who are emotionally vulnerable and/or at risk of mental illness. This should include considering whether integration, aligning or pooling of staff, or resources between council, NHS and/or voluntary organisations would improve support for young people and provide a sustainable service able to respond to the current high demand and expectations.
- b. Draw up a feasibility plan for developing a Hammersmith & Fulham Centre for Young People that seeks to combine opportunities for purposeful activities, sports and fun with the capability to also access emotional wellbeing, sexual health and other young people focused support services, similar to the Brent Centre for Young People.
- c. The Taskforce recommends that a Guide to Young People's Emotional Wellbeing and Mental Health Services is produced using the principles of 'co-production' with young people. Once available in several formats, (print, web and if applicable apps), this should be distributed to every Hammersmith & Fulham school, GP practice and youth setting.
- d. The material should also be used to support creative and informed debates across Hammersmith & Fulham schools to tackle the stigma and fear that can be associated with mental health.
- e. The 'guide' information should form the basis of a published 'local offer' to be promoted on the local authority, CCG, mental health provider and voluntary sector web sites.

- f. The 'local offer' for young people's mental health services in Hammersmith & Fulham should also be informed by the Schools CAMHs Link Pilot and the endorsement of school based services report above in this report.
- g. Re-launch on a pilot basis, the Hammersmith & Fulham young people's mental health 'partnership' forum, with young people's active involvement, to improve coordination, planning and innovation.

#### 2. Training Needs to be Strengthened and Sustainable:

A comprehensive and sustainable training programme should be commissioned to support school based staff, but also with the capacity to meet the training and information needs of other important groups: GPs, parents, young people etc.

#### 3. Transitions Arrangements:

Transition arrangements between services continue to defy attempts to bring about improvements. The Taskforce strongly recommends that health and social care providers take immediate steps to achieve compliance with the new NICE Transitions Guidance.

#### 4. Hammersmith & Fulham Transformation Plan:

The Taskforce supports the work underway as part of the Hammersmith & Fulham 'Transformation Plan' submitted to NHS England in October 2015.

- As the primary provider of mental health services to young people in Hammersmith & Fulham the Taskforce recommends that West London Mental Health Trust develop plans and options to realise the ambitions articulated in Future in Mind to:
  - Improve access to services
  - Offer flexible appointment times and settings
  - Demonstrate improved outcomes for young people
- Progress on developing and delivering these changes and improvements to be reported to the Hammersmith & Fulham Health and Wellbeing Board by WL MHT and commissioner in Sept/Oct 2016.

#### 5. Mental Health Challenge:

To sign the Local Authorities' Mental Health Challenge run by Centre for Mental Health, Mental Health Foundation, Mental Health Providers Forum, Mind, Rethink Mental Illness, Royal College of Psychiatrists and Young Minds. We commit to

appoint an elected member as 'mental health champion' across the council. We will seek to identify a member of staff within the council to act as 'lead officer' for mental health.

**Clir Alan De'Ath** Hammersmith & Fulham CAMHS Taskforce

## Appendix 1

## Update - Hammersmith & Fulham CAMHS Transformation 2016-17

**Background -** Following the government's publication of *Future in Mind* (Feb 2015) Hammersmith & Fulham CCG was allocated £100,744<sup>1</sup> to establish a community eating disorder service for young people and a further £252,173<sup>2</sup> to transform Child and Adolescent Mental Health Services (CAMHS). The funds arrived with CCGs in December 2015 and similar amounts have been confirmed for 2016- $17^3$ .

**2015-16 resource -** Given the late arrival of the 2015-16 funds these resources have been largely committed to short term projects or to provide immediate improvements e.g. tackling waiting lists, high needs placements. Recruitment to the new eating disorder service was also initially challenging for West London Mental Health Trust (WL MHT).

Funding has been set broadly against eight agreed priority areas:

- Needs Assessment
- Co-production with young people
- Training and workforce
- Community eating disorder service
- Service and pathway redesign
- Learning disability and neuro-developmental conditions
- Crisis Care
- Embedding Future in Mind

**Needs Assessment:** The Anna Freud Centre has been commissioned by H&F CCG and several other North West London CCGs to update the local young people's mental health needs assessment<sup>4</sup>. This work is underway and an interim report is expected in June 2016. The findings of the needs assessment will be utilised to underpin the pathway and service re-design work planned for the summer. The needs assessment work has been funded from 2015-16 resources<sup>5</sup>.

**Co-production:** H&F CCG have an existing successful relationship with ReThink, a national charity which specialises in support co-production' support for young people. This has already produced results in relation to work with looked after children, contributions to the Hammersmith & Fulham CAMHS Taskforce and recruitment of CAMHS champions. Transformation funds for both 2015 and 2016 have been committed to commissioning Rethink to:

- a. continue to recruit young champions
- b. contribute to the evaluation of both the new Out of Hours service and the new eating disorder service and
- c. deliver Collective Voices, which is a training programme devised and delivered by young people for teachers and other professionals.

**Training and Workforce:** Developing a sustainable and comprehensive training programme for young people's emotional well-being and mental health is one of *Future in Mind's* key recommendations. In addition to their general needs assessment work, Anna Freud have also been commissioned to develop a training needs analysis. Whilst this work is awaited, funding has been committed from both 2015 and 2916 resources<sup>6</sup> to support training. This has included: a series of courses 'training the trainers' to deliver programmes in Hammersmith schools; a seminar for early

<sup>&</sup>lt;sup>1</sup> Recurrent funding.

<sup>&</sup>lt;sup>2</sup> Funding for five years.

<sup>&</sup>lt;sup>3</sup> CCGs have been informed that the eating disorder funding will arrive in Q3 or 2016-17. The 'transformation' funding has been included in CCG baseline resourcing so has to be found within CCG 2016-17 budgets.

<sup>&</sup>lt;sup>4</sup> Known as a Joint Strategic Needs Assessment (JSNA)

<sup>&</sup>lt;sup>5</sup> 2015-16 £27,500

<sup>&</sup>lt;sup>6</sup> Approximately £50,000 plus a further £10,000 to commission Anna Freud's training analysis

years providers and schools with input from Young Minds, WL MHT clinicians, NHS England and Public Health. Short term funding has also been used to support Educational Psychology staff running 'nurturing groups' in children's centres and delivering training to school staff on attachment, loss, behaviour and emotional well-being.

**Community Eating Disorder Service:** WL MHT has been developing a new community eating disorder service for young people registered with a GP in Hammersmith and Fulham, Hounslow and Ealing. The service mobilised in the New Year and formally launched on the 1<sup>st</sup> April 2016. The community eating disorder service accepts self-referrals from young people, has a one week wait for urgent cases, and all referrals regardless of urgency are seen within 4 weeks<sup>7</sup>. The main service hub is in Ealing<sup>8</sup> and a regular outreach clinic is held at the CAMHS Glenthorne road base.

**Pathway and Service Redesign:** The pathway and service redesign work for young people's mental health services is scheduled for the summer of 2016 and will be informed by the findings of the updated needs analysis.

In terms of the service re-design, ideas are still coming together but several options are beginning to develop including:

- Incorporate mental health expertise into an integrated offer to schools, working alongside council early help and Public Health school nurses.
- Deliver services through young people friendly environments where service access can be combined with opportunities for purposeful activities, sports and leisure etc.
- Establish a mental health professional presence one day a week in every secondary school in line with the recommendations of the recent Institute for Policy Research report, '*Education, Education, and Mental Health* supporting secondary schools to play a central role in early intervention mental health services.' May 2016
- Develop an integrated early intervention as described above and also reshape CAMHS into a more focused 'young person's mental health service.'
- Extend the current CAMHS offer to 25 years to address transition issues as recently launched in Birmingham.

These ideas are not mutually exclusive and each has strengths and weaknesses. It is anticipated that this re-design work will mature in the autumn and a further report will be produced for both the CCG and the London Borough of Hammersmith and Fulham to confirm the 'vision for the future' and agree next steps. Any recommendations will also take into account learning from the Hammersmith and Fulham CAMHS School Link Pilot, which is running with 10 local schools.

**Learning Disability and Neuro-developmental Services:** In 2015 £80,000 was invested in additional WLMHT staffing to reduce waiting times for young people with Attention Deficit Hyperactivity Disorder (ADHD) and Autism Spectrum Disorder ASD). As a result a 75% reduction in the number of families waiting for an assessment was achieved by February 2016.

Current waiting times are now between 9-12 weeks in line with national assessment expectations. This short term intervention will continue in 2016-17 pending agreement on the longer term direction. Additionally, interim funding has been used to support several high cost placements for young people with learning disabilities.

In 2016-17 assessment pathways for young people with learning difficulties and mental health issues and also those requiring ASD and ADHD assessment, including post diagnostic support, will be reviewed. The objective is to streamline assessment pathways and reduce waits without compromising clinical input. The pathway review will also look at options for improving the current multi-agency model, strengthening psycho-social and parenting support.

**Crisis and Urgent Care**: The new CAMHS Out of Hours service provided by WL MHT was launched in February 2016. This 'pilot' service for a year deploys CAMHS trained psychiatric nurses to support

<sup>&</sup>lt;sup>7</sup> In line with national waiting time standards

<sup>&</sup>lt;sup>8</sup> WL MHT headquarters and clinical base.

young people presenting to Accident & Emergency in the evening and at weekends and bank holidays. The pilot is funded by Hammersmith & Fulham, Hounslow and Ealing CCGs and aims to strengthen out of hour's assessments and available support with a view to limiting admissions to psychiatric units for young people. The impact of the service will be assessed later in the year pending decisions on whether to continue the initiative.

**Embedding Future in Mind:** This final priority area captures a number of small initiatives which aim to develop the ideas suggested in the *Future in Mind* report. This has included: £15,000 allocated to WLMHT to improve performance and outcome data collection and £36,000 invested with the voluntary sector.

**CAMHS School Link:** Hammersmith & Fulham CCG made a successful bid for the national CAMHS schools Link Pilot. With joint CCG and DfE/DoH funding<sup>9</sup>, 10 Hammersmith and Fulham schools are linked to a local named 'mental health lead' to develop an active partnership and joint working. Each school receives weekly specialist support from WLMHT staff and has a small budget for school based mental health initiatives. The pilot formally concludes in January 2017. £30,000 from the 2016-17 transformation funding has been allocated to extend the project until March 2017. Following an assessment of the impact of the CAMHS School Link pilot in the autumn, decisions will be taken on whether to mainstream the approach for 2017-18 and beyond.

#### Next Steps 2016-17

- The major focus ahead for this year is considering the options for service redesign for young peoples' mental health services. Depending on the outcome of these discussions current short term funded initiatives may cease as resources are marshalled to drive service change in 2017-18. The outcome of the Anna Freud work will play a key role in these deliberations (July Sept) as will ideas contributed by local authorities, providers, young people and Hammersmith and Fulham CCG.
- 2. To support and inform the service redesign, several *multi-agency working groups* will be looking at particular areas: e.g. Learning Disability and Neuro-developmental assessment pathways. Additional short term commissioning support will be brought in to drive and develop these work steams.
- 3. The WLMHT **Out of Hours** pilot will be evaluated including contributions from young champions supported by Rethink.
- 4. A Young People's Mental Health Conference is scheduled for October 2016.
- 5. Towards the end of 2016-17 the new *Community Eating Disorders Service* will reviewed to ensure outcomes, clinical practice, investments and times scales are all on track.
- 6. A sustainable *Mental Health Training Programme* for multi-agency staff will be developed for delivery in 2017-18. This will include the 'Collective Voices' training developed by the Rethink young champions.

### Angela Caulder

CAMHS Joint Commissioning Manager

<sup>&</sup>lt;sup>9</sup> £50,000 NHS England, £50,000 Hammersmith and Fulham CCG and £3,500 from DfE for each participating school

## Agenda Item 9

London Borough of Hammersmith & CHILDREN AND EDUCATION POL ACCOUNTABILITY COMMITTI 13 June 2016	ICY &	hammersmith & fulham		
SCHOOL HOLIDAY CHILDCARE PROVISION				
Report of the Executive Director of Children's Services				
Open Report				
Classification - For Information Key Decision: No				
Wards Affected: All				
Accountable Executive Director: Clare Chamberlain, Executive Director of Children's Services				
<b>Report Author:</b> Rachael Wright-Turner, Director of Commissioning	Contact Details: Tel: 020 7745 6399 E-mail: <u>rachael.wright-turner@rbkc.gov.uk</u>			

## 1. EXECUTIVE SUMMARY

1.1. This report provides an overview of childcare and other provision available for children and young people in Hammersmith & Fulham. It also outlines plans to improve systems to make information about such provision more accessible to families.

## 2. **RECOMMENDATIONS**

2.1. The Committee is asked to review and comment upon the contents of this report.

## 3. INTRODUCTION

- 3.1. The local authority is required under the Childcare Act 2006 to secure, so far as is reasonably practicable, that the childcare provision is sufficient to meet the requirements of parents in their area who need childcare in order to take up, or remain in, work, or education or training which might assist them to obtain work.
- 3.2. There is also a duty to establish and maintain a service providing information, advice and assistance for parents regarding the provision of childcare in the area, and any other services, facilities or publications, which may be of benefit to parents, prospective parents, children or young people.
- 3.3. These duties apply to the provision of childcare provision and other services during school holidays.

## 4. SECURING SUFFICIENT CHILDCARE PROVISION

- 4.1. The Childcare Act and the statutory guidance 'Early Education and Childcare Guidance for local authorities' require the local authority to assess the sufficiency of childcare in the local area at least every three years. The last Childcare Sufficiency Assessment (CSA) was carried out in Hammersmith & Fulham in December 2015.
- 4.2. The CSA included some consideration of the number of "provision types by ward" as at September 2015. The data for this was provided by the borough's Early Years team. One type of provision counted was "holiday playschemes". The numbers available in September 2015 were as follows:

Ward	Number of holiday playschemes (September 2015)
Addison	1
Askew	2
Avonmore and Brook Green	1
College Park and Old Oak	2
Fulham Broadway	1
Fulham Reach	1
Hammersmith Broadway	1

Munster	1
North End	1
Palace Riverside	1
Parsons Green and Walham	1
Ravenscourt Park	1
Sands End	0
Shepherds Bush Green	1
Town	1
Wormholt and White City	3

4.3. One of the issues identified in the CSA was a need to improve data collection for the number of childcare places that are available for 5-11 year olds, with a focus on Holiday Play schemes, After School Clubs and Breakfast Clubs. There are plans to incorporate details of such provision in future refreshes of the Childcare Sufficiency Assessment.

## 5. PROVIDING INFORMATION, ADVICE AND ASSISTANCE

- 5.1. The borough's Family Information Service (FIS) provides information and advice on provision and services for children and young people aged up to 19. This includes council provided services as well as those run by the private, voluntary and independent sectors in the borough. Provision in Kensington and Chelsea and Westminster can also be identified on the site if it is open to Hammersmith and Fulham residents. The service is accessible through the Hammersmith and Fulham website (including an online form through which request information can be requested) where there is a searchable directory containing details of childcare and other services and activities for children and young people. It is also possible to telephone a call centre to obtain additional advice. An important role of the FIS is to make local Ofsted information on childcare and early years education available to people who need it.
- 5.2. Childminders, nurseries, crèches, children's centres, holiday play schemes and activities for children and young people, all might potentially meet childcare needs during school holidays.
- 5.3. On 26 May, the FIS website went live after having been upgraded and improved. The site is linked to the portal for the Special Educational Needs Local Offer which was developed as part of the implementation of the Children and Families Act. It also includes all Ofsted registered provision in the borough, and although this includes registered holiday

provision, at the current time, further work is required to ensure they are identified through relevant searches. In addition, providers have been contacted to update details of what is available for families in the borough other than that which requires Ofsted registration.

- 5.4. There is a plan to expand on the number of provisions recorded on the website including information on schools with holiday play schemes, childminders who look after younger children during holiday times and details of activities for young people promoted by providers who tend to promote these in the run-up to school holidays. These details are planned to be added to the site 2-3 weeks before the start of the holidays.
- 5.5. The FIS website provides detailed information regarding the accessibility of all provision to children who have a range of additional or complex needs or disabilities.
- 5.6. In addition it is understood that a number of schools in the borough provide summer playschemes. However these are not being publicised outside of the individual school community as they are being provided to meet a specific level of need of children on roll at the schools.

## 6. ADDITIONAL PROVISION

- 6.1. The Summer in the City programme has been running for a number of years and coordinates the wide range of summer events and activities taking place for children, young people and their families in Hammersmith & Fulham, Kensington and Chelsea and Westminster. Many of these events are free or low cost and are accessible to residents of all three boroughs.
- 6.2. The 2016 Summer in the City Programme is currently being finalised and is due to be published as a booklet on 20 June 2016. In addition, there will be a website which will be updated with additional activities as they are notified. There will be some overlap between the Summer in the City provision and that listed on the FIS website.
- 6.3. As at 24 May, the following activities and schemes were available (including details of activities based in the borough). All of the activities are listed as being suitable for someone with a disability:

## Play Activities (50 activities)

8 based in Hammersmith and Fulham

Age ranges catered for: 0-16 (two for under 5s)

Duration: Throughout the school holidays

Cost: Free or £22-£27 per day depending on type of provision and length of day.

NB one provider is offering over 80 activities in the borough including art, sport, dance and music in venues such as schools, parks, community and sports centres throughout the summer. All of the activities are being advertised as free of charge and some are aimed at children who have disabilities. There are multiple sessions for many of the activities at different times of day and throughout the school holiday period.

## Performing arts, media and culture (30 activities)

6 based in Hammersmith and Fulham

Age ranges catered for: 0-16

Duration: 1 day to 1 week

Cost: Free to £100 for 4 days

### Family events and days out (48 activities\*)

6 based in Hammersmith and Fulham

Age ranges catered for: 0-18

Duration: 1 to 4 days

Cost: Free to £25

\*Many are multiple events organised by major museums and Royal Parks

### Youth activities (11 activities)

4 based in Hammersmith and Fulham (including National Citizen Service programme)

Age ranges catered for: 7-25

Duration: 5 days to 4 weeks

Cost: £50-£125 (costs for 4 week programme vary – some subsidised costs for activities)

### Sport and Leisure (41 activities)

12 based in Hammersmith and Fulham

Age ranges catered for: All

Duration: Up to 9 weeks (sessional)

Cost: Varies, some activities are free

## Activities for children and young people with disabilities (10 activities)

3 based in Hammersmith and Fulham

Age ranges catered for: 6-25

Duration: 2-4 weeks

Cost: Free or charged by activity

## 7. CONCLUSION

7.1. There is a range of school holiday provision available in the borough over the summer holidays 2016. This includes the ongoing childcare provided by nurseries and childminders for younger children, playschemes provided for schools and specialist schemes for disabled children and a range of activities available for single days, weeks or throughout the summer or young people. Costs vary and there are a number of free activities. Information is available online from a range of sources and the Family Information Service is being developed to provide more comprehensive, easily accessible information about this and other types of childcare. There are also plans to incorporate details of such provision in future refreshes of the Childcare Sufficiency Assessment.

## LOCAL GOVERNMENT ACT 2000 LIST OF BACKGROUND PAPERS USED IN PREPARING THIS REPORT

None.

# Agenda Item 10

## London Borough of Hammersmith & Fulham

## CHILDREN AND EDUCATION POLICY & ACCOUNTABILITY COMMITTEE

13 June 2016



## SERVICE IMPROVEMENTS FOLLOWING OFSTED INSPECTION OF SERVICES FOR CHILDREN IN NEED OF HELP AND PROTECTION, CHILDREN IN CARE AND CARE LEAVERS

Report of the Executive Director of Children's Services

**Open Report** 

Classification - For Information Key Decision: No

Wards Affected: All

Accountable Executive Director: Clare Chamberlain, Executive Director of Children's Services

Report Author: Steve Miley, Director	Contact Details:	
of Family Services	Tel: 020 8753 2300	
	E-mail: <u>steve.miley@lbhf.gov.uk</u>	

## 1. EXECUTIVE SUMMARY

**1.1.** This report provides an overview of planned improvements to be made by the Family Services Directorate following the Ofsted inspection of services in January and February 2016.

## 2. **RECOMMENDATIONS**

**2.1.** The Committee is asked to review and comment upon the contents of this report.

## 3. INTRODUCTION

- **3.1.** Ofsted carried out an unannounced inspection of the borough's services for children in need of help and protection, children in care and care leavers between 12 January and 4 February 2016. The inspection was the most in depth inspection undertaken by Ofsted with 8 Inspectors allocated to review activity in Hammersmith and Fulham and a number of other inspectors inspecting services which are shared with Kensington and Chelsea and Westminster (which were also being inspected at the same time). The cases of over 300 children and young people were reviewed as part of the inspection process.
- **3.2.** Ofsted raised the bar with their expectations and judgements in this round of inspections with the result that most Local Authorities to date have been judged as "requires improvement".
- **3.3.** The outcome judgements give Hammersmith and Fulham the third best result in the country out of the 95 inspections to date. Ofsted's overall conclusion was that Children's Services in Hammersmith & Fulham are good. A number of sub-judgements were made. The borough's adoption performance and leadership management and governance were both judged to be outstanding. Services for children who need help and protection and for children looked after and achieving permanence were both judged to be good, as was the experience and progress of care leavers.
- **3.4.** Six recommendations were made by Ofsted. The Ofsted Single Inspection Framework includes a requirement for the local authority to prepare and publish a written statement of the action it intends to take in response to the inspection report. This statement should be sent to Ofsted within 70 working days of receiving the final report.
- **3.5.** This report summarises the recommendations made by Ofsted and the actions planned, as well as wider service developments that are being actioned.

## 4. **RESPONDING TO OFSTED RECOMMENDATIONS**

**4.1.** The recommendations made by Ofsted and the actions that are planned in response are as follows:

**Recommendation 1:** Collate information drawn from return home interviews of children who go missing from home to identify patterns and trends and assist disruption activity.

Missing children has been a particular focus of the current Ofsted inspection framework. Ofsted noted that in Hammersmith & Fulham, the children at risk from going missing were known and well supported including follow up from social workers when they returned home. However it was felt that better use could be made of information emerging from return home interviews to identify patterns of behaviour, support proactive planning and reduce risk. In response to this, an audit is taking place of cases where children frequently go missing and where interventions have been effective. A Missing Action Plan is already in place and this will be updated to include and implement any learning from the audit. There are also plans locally to develop a proportionate process to provide effective, targeted interventions for children who are most at risk from going missing.

**Recommendation 2:** Review out of hours arrangements to ensure that children and young people are offered a standard of practice consistent with daytime services.

This recommendation resulted from a concern identified by inspectors that children referred out of hours to the Emergency Duty Team (EDT) were not immediately subject to the same formal statutory child protection procedures and processes compared with children referred during the day. While Ofsted was not concerned that the children were unsafe, it was pointed out that these children were not being immediately assessed. There were also concerns that, although the decision making was undertaken by EDT social workers and managers some children were placed in care without being seen by a social worker due to capacity issues and were being taken to foster carers by police. An immediate review of the EDT has now taken place and reported to the Children's Services Senior Leadership Team. Additional resources are being put into the service to ensure that there is an effective social work response.

**Recommendation 3:** Ensure that children who are subject to the child protection process have access to a suitable independent advocate if they want one, to help them make their views known and understood, and inform decisions about their life.

Ofsted noted that children referred because of child protection concerns received a good service in terms of a timely response with assessments capturing their views. However, there was not routine access to an independent advocate to support them through the child protection process. The options and costs for making independent advocacy available are being explored as well as developments to case management systems are now being improved to enable production of data on participation, representation and attendance at case conferences by children. This will be monitored by the Safeguarding, Review & Quality Assurance team who will provide challenge should there be evidence that children are not being effectively encouraged to engage in conferences. A review of various services which provide opportunities for advocacy and participation has completed. The recommendations of this, once agreed, are expected to improve access to such services for children who need them.

**Recommendation 4:** Ensure that assessments and care plans for children looked after are updated following significant events.

This followed an Ofsted comment that this was not always evident for "a minority of assessments and care plans". A detailed looked after children and care leavers service improvement plan has been developed and is being implemented for Hammersmith and Fulham children and young people to address required service developments identified by the service as well as Ofsted. This includes an expectation that risk assessments and plans will be routinely updated to ensure that these respond to changes in circumstances of children, with clear evidence that strategies are put in place to reduce risks. The plan is being overseen by a multi-agency Service Improvement Group who will monitor and support progress. The form which social workers use for reviews of looked after children is being redesigned to incorporate social worker assessments for the review, and to more clearly identify decisions and changes to the care plan that need to be considered and agreed. To ensure these developments are consistently responded to, Independent Reviewing Officers are to identify plans that do not reflect the current direction of the child's journey and take robust action where required, as part of mid-point reviews that they routinely carry out.

**Recommendation 5:** Improve the quality of the minority of pathway plans that are not yet good, so that outcomes are improved and the results of actions can be assessed more effectively.

The inspection report noted that the quality of pathway planning and reviews for care leavers has improved markedly with two thirds of such plans assessed to be "good". This was seen as a rapid and sustained improvement over the last two years. However a small number of plans were seen to be "insufficiently clear regarding plans for the future. Targets are not clear enough and target dates are not tightly linked to actions." Ofsted also observed that managers are fully aware of this and where improvements are needed "with plans in place to address this area of improvement". This recommendation is also addressed through the previously mentioned looked after children and care leavers service improvement plan. Plans are currently reviewed every 6 months and this is noted on the case management system. In addition, quality audits of pathway plans will now be undertaken at regular intervals and reported to the Service Improvement Group for additional action where required. As the majority of pathway plans are already of good quality, these will be used as examples to inform good practice guides.

**Recommendation 6:** Increase the range and number of apprenticeship opportunities for care leavers to reduce further the proportion who are not engaged in education, employment or training.

Inspectors reported that the borough's care leavers enter a range of full-time vocational training, employment and higher education institutions but that staff recognised "the need to improve the options and progression pathways for care leavers" including the "insufficient range of apprenticeship opportunities".

Using the smarter budgeting programme, to address and improve this situation, a review is taking place to identify and implement common financial support opportunities for care leavers, not only for those in apprenticeships

but also for those in work, those aged 21 or older, unaccompanied asylum seeking children and those in Higher Education. The Virtual School will provide advice and guidance to the borough's Leaving Care team on good practice in Education, Employment and Training (EET) planning. A range of employability and work experience programmes are to be implemented, linked into internal and external partnerships. A more robust robust system is to be developed for tracking and monitoring the education, employment and training of care leavers and an EET adviser in the Virtual School will support care leavers in accessing and sustaining apprenticeships, employment, education or training. We are also making a funding bid to develop supported internship and employment programmes for care leavers.

## 5. WIDER SERVICE DEVELOPMENTS

**5.1.** With specific reference to services to Looked after Children and Care Leavers, there has been a substantial re-organisation of our specialist social work teams for this vulnerable group. This has seen the development of two 16 plus teams that have social workers allocated to Care Leavers as oppose to Personal Advisers. Ofsted acknowledged the positive trajectory of this service, which was implemented in July 2015. They recognised that this has helped to improve service standards and quality; however, ultimately it will mean that children and young people can benefit from sustained working relationships as they will no longer have to transfer to another team and will remain with their allocated Social Worker up until 21 or 25 years of age if in higher education. The recent announcement of the Children and Social Work Bill will mean it is likely that all care leavers will be entitled to support from a Personal Adviser should they request this.

Additional plans to further enhance partnership working include the colocation of the Virtual School with the Specialist Looked after Children and Care Leavers service, where it is envisaged a number of opportunities will be promoted to co-facilitate workshops and develop group work intiaitives aimed at promoting education, attainment and social development. Additional strategies to work with some of the most challenging children and young people are being developed. This includes plans to provide intensive support mirroring that already provided by the Family Assist model which was highly praised by Ofsted. It is envisaged that this will support a reduction in increased placement costs and more opportunities to return children to their families when it is safe to do so.

## 6. EQUALITY IMPLICATIONS

**6.1.** Children and young people receiving services from Family Services are likely to include service users who have a number of protected characteristics as identified under the Equality Act 2010. Case management systems provide some opportunity to track the impact of the service improvements outlined in this report on particular groups of children.

## LOCAL GOVERNMENT ACT 2000 LIST OF BACKGROUND PAPERS USED IN PREPARING THIS REPORT

None.

## Agenda Item 11

London Borough of Hammersmith	h & Fulham			
CHILDREN AND EDUCATION POL ACCOUNTABILITY COMMITT	ICY &	hammersmith & fulham		
13 June 2016				
WORK PROGRAMME 2016				
Report of the Chair				
Open Report				
Classification: For review and comment				
Key Decision: No				
Wards Affected: All				
Accountable Executive Director: Kim Dero, Director of Delivery and Value				
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## 1. EXECUTIVE SUMMARY

1.1 The Committee is asked to give consideration to its work programme for the municipal year.

## 2. **RECOMMENDATIONS**

2.1 The Committee is asked to consider the proposed work programme and suggest further items for consideration.

### LOCAL GOVERNMENT ACT 2000 LIST OF BACKGROUND PAPERS USED IN PREPARING THIS REPORT None.

LIST OF APPENDICES:

Appendix 1 – Work Programme 2016

## Children and Education PAC – Work Programme 2016

Item	Report Author(s)	Comments
June 2016		
Executive Director's Update	Clare Chamberlain, Steve Bywater	Standing Item
Cabinet Members' Update (Verbal)	Cllr Macmillan	Standing Item
CAMHS Mental Health Taskforce Report	Steve Buckerfield	
Childcare During School Holidays	Steve Bywater	
Ofsted Outcomes and Improvement Proposals	Steve Bywater	
September 2016		
Executive Director's Update	Clare Chamberlain, Steve Bywater	Standing Item
Cabinet Members' Update	Cllr Macmillan	Standing Item
SEN - Impact of recent policy changes	lan Heggs	Include passenger transport element? SENCOs to be involved.
Care Leaver Accommodation (incl. visit prior to meeting)	Ros Morris	
Childcare Task Group – Final Report	Steve Comber	

## **Children and Education PAC – Work Programme 2016**

#### Items to be scheduled

**1. Skills for Young People -** Regarding the 'curriculum for life' scheme, to consider a range of initiatives aiming to provide new skills for young people. Link with Youth Council for feedback.

#### 2. Permanency and Adoption

3. Focus on Practice – September?

4. 8-6 Extended Nurseries Update – Summer 2016 - Update on Childcare Task Group report from 21 September.

5. SEN Passenger Transport - Update on the reconfigured service currently operating and the vision for the new service.

**6. Primary School Curriculum -** Consideration of the introduction of the new primary school curriculums. To hear / share good practice from primary schools – invite Headteachers to share their views.

7. School Pupils with Medical Health Needs – Members wanted assurances that the young people in question were receiving a high quality education and that the move between hospital/home/school was smooth and supportive and that the impact of their medical condition was not detrimental to their educational attainment.