

Health & Wellbeing Board Summary – 3 December 2014

Safeguarding Children Board Annual Report



**Nottinghamshire
SAFEGUARDING
CHILDREN Board**

Working in Partnership to Safeguard
Children & Young People

Chris Few, Chair of the Children's Safeguarding Board, gave an overview of the Boards achievements during the last year, highlighting updated procedures for the MASH (Multi Agency Safeguarding Hub), training & work targeting vulnerable groups.

The annual report demonstrated that the Safeguarding Board was safe & effective but improvements will continue. In particular the Board will maintain its aim of reducing the cycle of abuse & neglect. It will also monitor the arrangements for CAMHS during the implementation of new services. The Board will continue to work to understand the impact on children from mental health issues & substance misuse within families and to ensure that procedures to prevent & deal with child sexual exploitation are embedded into services & that long term support is provided for victims into adulthood where necessary.

The Board welcomed the report & members agreed to raise the work with their organisations to ensure that vulnerable children are identified & services targeted appropriately.

Mental Health

The Board received a number of papers on mental health issues, starting with an overview of the recent [Chief Medical Officers \(CMO\) report](#). A local Framework for Action has been developed which is being updated to meet the recommendations made by the CMO.

The Board are keen to ensure that integration work for mental health services is joined up across the local transformation boards and they recognised the work within the voluntary sector for people with mental health issues. The Board particularly recognised the importance of employment issues for good mental health.

Child & Adolescent Mental Health Services (CAMHS)

Following a previous discussion at the Board a review of the CAMHS pathway including a wide consultation has taken place. The Board repeated concerns about the current provision, particularly with waiting times. While members supported the proposed model to improve services they asked for assurance that risks to young people would be minimised during implementation.

The Board is keen to see more work undertaken within schools to promote emotional resilience, recognising that preventing & addressing issues in children & young people would have an impact them in later life. The role of social media in supporting this was highlighted, as was the role of voluntary sector organisations in supporting work locally.

This meeting at a glance:

[Safeguarding Children](#) – annual report.

[Mental health](#) – Chief Medical officer's annual report

[Child & adolescent mental health services](#) – local pathways reviewed & services to be improved

[Crisis Care Concordat](#) – local progress & challenges

[Health & Wellbeing Strategy](#) – first report on progress

[Better Care Fund](#) – fully approved for implementation

The Board also recognised that quality of services & outcomes should be recognised rather than focussing on spend & as well as the importance of holistic care addressing physical & mental health needs, which should include support for families.

Crisis Care Concordat

Karon Glynn, Assistant Director Mental Health & Learning Disabilities at NHS Newark and Sherwood CCG and Chief Inspector Kim Molloy presented a paper which described the [Concordat](#) & the local response to implementing it. She described a number of local initiatives were described which are already underway such as the street triage pilot where mental health nurses join police on calls outs to vulnerable people who need immediate mental health support.

There has been support to implement the Concordat locally but there were still a number of issues which would need to be addressed, in particular S136 provision (which allows the police to take people who they think have a mental illness to a place of safety), the 4 hour response to crises, transportation & access to a local helpline which is not currently commissioned. Partners were on track to sign up to the Concordat by 31 December 2014. The impact of crisis care on the police was highlighted & concerns raised about whether all partners were following local procedures.

The Board noted the concerns regarding the ambulance response to crises, the impact of changes in service locally, S136 beds & also issues around transportation. They requested a further report in April 2015 to be supported by a local action plan for implementation of the Concordat & financial modelling.

Health and Wellbeing Strategy

Cathy Quinn, Associate Director of Public Health presented a report outlining progress on implementing the [Strategy](#) & the [Delivery Plan](#). The Delivery Plan is being refined to focus on partnership work.

Board members agreed to accept the proposed roles as sponsors for each of the priorities within the Strategy.

The Board agreed that the Strategy should be the overarching framework for health & wellbeing locally & Board members should ensure that this is embedded in partner organisations. They also highlighted the need to recognise individual health needs in addition to addressing issues in specific communities.



Better Care Fund

Jon Wilson confirmed to the Board that the [Better Care Fund submission](#) had now been fully approved as part of the progression of the programme.

Board members recognised that once local plans were implemented they would be responsible for managing the pooled budget for the Fund & that robust performance monitoring was essential.