

meeting **Nottinghamshire Children's Trust Board**  
**MINUTES OF THE MEETING HELD AT COUNTY HALL, NG2 7QP**

date **3 October 2013**

**Present:**

Anthony May (Chair), Nottinghamshire County Council  
Chris Few, Nottinghamshire Safeguarding Children Board  
Dr David Hannah, Nottinghamshire Clinical Commissioning Group  
Irene Kakoullis (representing Kate Allen), Public Health, Nottinghamshire County Council  
Sally Moorcroft, Networking Action with Voluntary Organisations  
Vikki Taylor, NHS Commissioning Board  
Maxine Bunn (representing Sam Walters), Nottinghamshire Clinical Commissioning Groups

**Children's Trust Support in attendance:**

Maggie Pape (Nottinghamshire County Council)  
Georgina Carnill – minutes (Nottinghamshire County Council)

**In attendance:**

Kerrie Adams, Family Nurse Partnership Supervisor (Item 2)  
Jenny Brown, Public Health and Commissioning Manager (Item 2)  
Rachel Coombs, Group Manager, Access to Resources (Item 3)  
Justine Gibling, Group Manager, Early Years and Early Intervention  
Kathleen Ashton – observing (Nottinghamshire County Council)

**1a Welcome and introductions****ACTIONS**

Anthony May, Corporate Director, Nottinghamshire County Council in the chair, welcomed members to the meeting and there was a round of introductions.

**1b Apologies for absence**

Apologies for absence were received from Derek Higton, Nottinghamshire County Council, Kate Allen, Public Health, Nottinghamshire County Council (represented by Irene Kakoullis), Sue Gill, NHS Bassetlaw (Commissioning), Ruth Marlow, District Council Representative, Richard Stapleford, Nottinghamshire Police, Sam Walters, Nottinghamshire Clinical Commissioning Groups (represented by Maxine Bunn).

**2 Family Nurse Partnership Update**

Kerrie Adams, Family Nurse Partnership (FNP) Supervisor spoke to her previously circulated report explained that the FNP had started to deliver the programme in February 2013. The programme is licensed by the Department for Health and is an evidence based, intensive nurse-led

prevention and early intervention programme for vulnerable first time young parents and their children. The licensing of the programme will move to NHS England in April 2014 and will ultimately move to Local Authority licensing.

The FNP is targeted at young woman who are aged nineteen or under at the time of becoming pregnant with their first child. The aim of the programme is to have a positive impact on the short and long term health outcomes, life chances, emotional wellbeing and self esteem and a reduction in the costs of ongoing care as young people grow into adult life. It is targeted in areas where there will be the most benefit, with resources being allocated using teenage pregnancy and social deprivation data. The majority of referrals come from the midwifery service but referrals have also come from the MASH, Social Care and GPs. The locality with the greatest number of clients is the Ashfield/Mansfield area. In Nottinghamshire, there are a higher proportion of younger age pregnancies than nationally, and a higher proportion of clients who have five or more GCSEs.

There followed a discussion on how the FNP might be developed further in Nottinghamshire, as there are more young women within the target group than the programme has capacity to support. It was noted that other organisations could provide support to young mothers, including Children's Centres for additional or alternative support (if caseloads are full or for young women who are not eligible for FNP). The further development of Early Help pathways should be helpful in developing provision further.

The FNP in Nottinghamshire is currently commissioned by NHS England, using funding provided from Nottinghamshire County Council's early help budget, and will be commissioned by the Council from 2014. The group consensus was that local re-direction of funds could support the programme's continuation or expansion, but that this would need the support of all partners, including Clinical Commissioning Groups. All partners would want to see evidence of effectiveness, although it might be difficult to provide local evidence as the programme has only been in operation for a short time, in Nottinghamshire.

In summary, Anthony May stated that the Children's Trust Board recognised that the FNP appears to be working well so far and that in principal could be expanded but that this needs to be considered carefully, in order to target the service effectively and to allow for incremental growth, planned in parallel with other care pathways. Information on the FNP would be included in a paper to the Health and Well Being Board in the new year, including options about further funding.

**Anthony May/  
Irene Kakoullis**

**Dr David Hannah joined the meeting at 2.20pm during discussion of this item.**

**Kerrie Adams and Jenny Brown were thanked for their contributions and left the meeting at 2.50pm.**

### **3 Looked After Children Strategy**

Rachel Coombs, Group Manager Access to Resources provided an update to the Board on progress in implementing the Looked After Children Strategy. Reports are also provided to County Councillors via the Corporate Parenting Sub-Committee. There is also a 'Pledge' to Looked After children and young people; this reflects those things that children and young people identify as being important to them.

Rachel explained that there had been a huge expansion in the number of Looked After children in Nottinghamshire; currently it is in the region of nine hundred children in care which although less than the proportion for Nottinghamshire's statistical neighbours and for the average in England represents an increase in Nottinghamshire. Rachel said that the majority of children are placed in Nottinghamshire or in the immediate area and if they are placed further away then this is for a specific reason.

Rachel drew attention to the list of key actions in her report and spoke about the work that had been undertaken to achieve these.

The Board discussed the report and associated issues including recent media coverage of the adoption process. The revised Ofsted framework for inspection of Local Authorities' Children's Services now includes services to looked after children and Anthony emphasised the importance of looking at this provision in the whole.

Justine Gibling offered her support to help resolve any blocks in the system with respect to using Children's Centres as venues for contact meetings for families.

**Justine  
Gibling/Rachel  
Coombs**

**Rachel Coombs was thanked for her contribution and left at 3.10pm.**

### **4 Safeguarding Update:**

- **MASH**
- **Assessments (timeliness and quality)**
- **New assessment arrangements**

Anthony May spoke to his previously circulated presentation on the above.

He stated that the County Council had reviewed the whole system for provision of Children's Social Care, including Early Help, and over a four year period had completely re-configured all elements of its Children's Social Care provision. One of the principal aims was to keep children out of the care system; all the data indicates that children who are in the care system do worse than their peers. However, if children were placed in Local Authority care as the only viable option then this should be an as efficient and smooth process as possible with good multi-agency working.

Nottinghamshire has moved to a single point of access to Children's Social Care system via the Multi Agency Safeguarding Hub (MASH) which was implemented in December 2012. Anthony referred to the comparative data in respect of referrals and assessments for the periods before and after the instigation of the MASH.

Anthony described the changes implemented in the MASH from September, involving social workers at an earlier stage, to be involved in triage of contacts to the MASH, to refer on to initial assessment by children's social care when appropriate or signpost elsewhere. This should reduce some pressure on children's social care from high numbers of referrals, although Anthony noted that increased referrals to children's social care may have many causes, including socio-economic factors, and reflects national trends.

The Board discussed the presentation and its implications, including:

- the process and timeliness of Child Protection Plans
- the work being undertaken around the recruitment and retention of social workers
- multi-agency information sharing. Although the development of the MASH has had a positive impact, recent Serious Case Reviews have highlighted there remains an ongoing need to ensure effective communication.

Anthony shared with colleagues that he had recently been at a Conference where he had spoken with a Junior Health Minister and this change in ways of working had been discussed. It was agreed that the related report from the OPM should be circulated to Board members.

**Maggie Pape**

Anthony concluded that it was early days since the inception of the MASH and that there is limited data available; there is a need to capture data on the effectiveness of the MASH and it is anticipated that the number of inappropriate referrals to children's social care will decrease and increased signposting to other areas of support such as the Early Help Unit will happen.

Justine Gibling added that as the Early Help Unit becomes established, there should be more clarity around the processes of 'step down' from children's social care support.

## **5 Early Help Development Plan**

Justine Gibling, Group Manager Early Years and Early Intervention spoke to her previously circulated report. She explained that the Early Help Development Plan started out as a strategy and has now become a plan; taking over from the Early Intervention Strategy and incorporating all the early intervention strategies and governed through the Early Help Executive Group.

There has been a lot of work over the past twelve months to define the offer and access arrangements to Early Help; the Development Plan is in place along with an outline performance plan which is also governed by the Early Help Executive Group with reporting mechanisms into the Children's Trust Board. Justine explained that in bringing this report she was seeking the approval of the Early Help Development Plan by the Children's Trust Board and agreement to a process for monitoring the implementation of this Plan including the frequency of progress reports.

Chris commented that on reading through the outline Plan he was not overly aware of references to child poverty and closing the gap which are closely related to Early Help. There is broader reference to child poverty but Chris was afraid that the underlying causes could get lost. Justine explained that she had chaired the Child Poverty Reference Group that morning and assured Chris that there had been discussion about how child poverty can be kept in focus. Child poverty is to be kept as a standing item on Locality Management Group agendas and the Early Help Implementation Groups also capture child poverty data. Child poverty, as an issue, is a thread through all the working parties including those involving District Councils. Justine was confident that there was a strength of commitment to continuously addressing this issue.

Ms Kakoullis said that now that the Early Intervention Strategy has become the Early Help Development Plan she had concerns that it appeared more like a Nottinghamshire County Council Development Plan and she questioned the impact that this had on partnership working. Justine explained that this work had started with the County Council's Early Help offer but now the Development Plan will include all the key partners across the Council and wider. She said that she was keen that all the Early Help strategies should have one 'home' within the Early Help Development Plan and that this will widen and involve all the children's services workforce.

The Board discussed the development plan and its associated action plan. This included discussing how issues related to child poverty are captured within the action plan and the scope of Early Help activities. Justine confirmed that she chaired the Child Poverty Reference Group and a focus on child poverty remained.

Anthony May reflected that the development of this work was a 'sign of the times' and is to some extent a pragmatic response to the budgetary constraints and the need to target limited resources to essential areas of work.

It was agreed that the Board would receive six-monthly progress updates on the implementation of the Development Plan as well as quarterly reports on the key performance indicators in the Early Help dataset, which will also be reported to the Nottinghamshire Safeguarding Children's Board the Children and Young People's Committee.

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## **6 Children's Trust Forward Plan**

Maggie Pape, Executive Officer, Planning, Performance and Quality Assurance drew colleagues' attention to the previously circulated work programme and future dates for the Children's Trust Board and the process for requesting an item be added to the agenda.

Additional agenda items confirmed at the meeting were:  
Chris Few would present the Nottinghamshire Safeguarding Children's Board to the November meeting.

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In response to a question from Irene Kakoullis, Maggie said that it was still

possible to feed responses into the Health and Well Being Strategy consultation via the informal route up until early December and that she would be collating a response on behalf of the Children's Trust.

**Maggie Pape**

### **1c Minutes and matters arising from previous meeting on 5 September 2013**

The minutes of the meeting held on 5 September 2013 were accepted as a true record with the following amendments:

Page 1, under those present it should be noted that Jacquie Williams was representing Vikki Taylor and Vikki Taylor's apologies should be listed under item 1b.

Page 3, paragraph 5 should read 'A Speech and Language Therapy Review ...' not 'An Occupational Therapy Review ...'.

Page 3, penultimate paragraph Chris clarified that his meaning had been that school nurses should only attend, or be invited to, Child Protection Conferences when they can add value.

There were no outstanding matters arising that had not been dealt with previously on the agenda.

### **7 Any Other Business**

Chris Few clarified that although the addendum regarding the Ofsted inspection of Safeguarding Boards has not been published alongside the new framework for inspection for Children's Social Care and Looked After Children provision, it would come into force at the same time in November 2013.

A new framework for multi-agency inspections will come into force in 2015.

It was agreed that it would be useful for the new Ofsted framework and information about inspections of children in health setting to be uploaded to the Children's Trust Board website.

**Maggie Pape**

**The meeting closed at 4pm.**