#### **PRESENT:** Councillor Raistrick (Chair)

Councillors Baines MBE, Blagbrough, Cavanagh (substitute for Councillor Dacre), Collins, Courtney, Hutchinson, and Rivron.

#### **CO-OPTED MEMBERS:**

David Gott (Roman Catholic Representative) and Shelagh Hirst (Church of England Representative).

#### 61 APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor Dacre and Dr. Helen Vickers (Co-opted Member, Parent Governor).

(Councillor Rivron arrived at 18:20 hours).

(The meeting closed at 20:35 hours).

#### 62 ADMISSION OF THE PUBLIC

**RESOLVED** that under Section 100A(4) of the Local Government Act 1972 the public be excluded from the meeting for the following item of business on the grounds that it involves the likely disclosure of exempt information as defined in the stated paragraphs of Part 1 of Schedule 12A of the Act, namely:-

Item 9 – Paragraph 2 and 3 – Information relating to an Individual and Financial or Business Affairs.

# 63 MINUTES OF THE CHILDREN AND YOUNG PEOPLE'S SCRUTINY BOARD HELD ON 5<sup>TH</sup> FEBRUARY 2020.

**IT WAS AGREED** that the Minutes of the Children and Young People's Scrutiny Board held on 5<sup>th</sup> February 2020 be approved as a correct record and signed by the Chair.

#### 64 FEEDBACK ON THE CALDERDALE CHILD AND ADOLESCENT MENTAL HEALTH SERVICE (CAMHS HEALTHWATCH REPORT AND PARTNERSHIP RESPONSE

The Healthwatch and Calderdale Clinical Commissioning Group submitted a written report as agreed by Members to be discussed at this Scrutiny Board meeting.

In November 2019, Healthwatch published a report regarding the service of CAMHS/Assessments – In response to the report findings, a Partnership Response was submitted in January 2020 by Calderdale Council, Calderdale Clinical Commissioning Group (CCG), South West Yorkshire Partnership NHS Foundation Trust (SWYPFT), Northpoint Wellbeing Limited and Kooth (online counselling).

At the Children and Young People's Scrutiny Board meeting in June 2019, some of the issues raised in these reports had been discussed and a recommendation was made for the Local Authority and Calderdale CCG to supply six monthly briefings (in December 2019 and June 2020) which would monitor the progress of this work and the support to Calderdale children and young people. The first of these briefing notes was shared in January 2020.

The representative from Calderdale Clinical Commissioning Group (CCG) updated Members and provided clarity on the aims of the Partnership with the purpose of combining ADHD and Autism pathways. The manager of the South West Yorkshire Partnership NHS Foundation Trust responded this would consist of a 'Neuro-development Pathway' which combined assessments for both ADHD and Autism, facilitating a simultaneous diagnosis of either without having to start the process again for either. The feedback received from parents had been positive and the Mental Health Trust clarified they had already been implemented in Kirklees. Parents/Carers would be able to self-refer with direct, single contact (known as, 'first point of contact (FPoC)'). Healthwatch asked the CCG Manager for some clarity around the future frequent meetings of the Open Minds Partnership, the CCG representative confirmed that plans were being developed to hold quarterly meetings with partners and that Calderdale CCG wanted the membership extended beyond the NHS, to ensure all agencies were involved.

Members commented on the following:

- Due to the waiting lists, if an assessment was undertaken outside of Calderdale and the family moved to Calderdale, would it be accepted or would it have to be revisited? In response, partnership representatives from Calderdale CCG and CAMHS (Children and Adolescent Mental Health Services) advised that assessments could be accepted provided they were deemed robust enough, and NHS assessments would be handled in the same way due to the systems in place and continuity of care.
- How did children and adults access mental health services? In response, the Partnership representatives advised that there was a first point of contact available (for children) to parents, and that training had been undertaken for staff in the Open Minds partnership to support best practice for both Autism and mental health.
- The common pathway had been implemented in Kirklees, when would it be implemented in Calderdale? In response, partnership representatives advised that it was being implemented but the waiting lists for ADHD and Autism were still being managed separately. The plan was to implement the pathway by summer 2020 and offer development assessments.
- Clarity was sought on the point of a single assessment for both ADHD and Autism and whether these had already started. In response, partnership representatives advised that there were 2 waiting lists but additional tests could be carried out to determine whether a diagnosis was ADHD or Autism, thus avoiding practitioners having to place young people on to another waiting list.
- With waiting lists ranging from 6 months to 2 years, would waiting times for single assessment improve this or increase waiting times? In response, partnership representatives advised that there was a plan to reduce waiting times to 12 months by the end of March 2020 and that a waiting list initiative was underway. It was anticipated that waiting times would reduce over time as

the 2 pathways would be merged; however further staffing would be needed in the interim in order to manage this efficiently.

- In relation to mental health triage and the waiting time of 12 months, was a persons' situation monitored whilst they were waiting? In response, partnership representatives advised that parents could phone the service whilst on the waiting list if there was deterioration in mental health and that other support services were available.
- Was the reduction of waiting times 'on track'? Was there a formal relationship with CAMHS and what did it look like? Was any gender analysis of the service completed, as males and females usually presented differently? In response, partnership representatives advised in order to achieve the reduction of waiting times this was reliant on the number of DNA's (did not attends) and the use of agency staff. The service had seen an increase in DNAs and there was a risk using agency staff which was being monitored. Agency staff were used due to insufficient number of permanent staff to manage the demand, which was reflective of the regional and national picture. Calderdale CCG hoped to be back on track but some risks were out of their control. A formal governance existed between Calderdale CCG and The Mental Health Trust to manage this appropriately.
- Were there target waiting times? In response, partnership representatives advised that currently the 12 month wait time by the end of March 2020 was the target. It was confirmed that sustainability of permanent staff was being discussed in order to reduce waiting times further; however the focus was on pre-assessment, diagnosis and treatment, not just on waiting times. In relation to gender, staff were trained to pick up differences. An independent review on ASD had been carried out in 2018. This review looked at all elements of the CYP population including the differences in how males and females presented.
- The information regarding how children were presenting, was this being fed back to help with prevention, to help tackle problems at an early stage? In response, partnership representatives confirmed that information was shared with GP's and schools, however assessments could take time to provide feedback. Northpoint Wellbeing offered schools training and opportunities to discuss mental health problems. Calderdale were also putting in a bid for funding for mental health support teams based in schools.
- Were symptoms being treated? In response, partnership representatives advised that the Open Mind Partnership focused on 'needs based' and information was being shared with schools so that further support could be picked up.
- Would this be included in training in schools and other settings? In response, partnership representatives advised that schools could access free training.
- Some waiting times were in excess of 2 years, what did this mean? What was the longest wait – 3 years? What would the longest have been? In response,

partnership representatives advised that no-one would be waiting over 2 years due to the work that had been undertaken on waiting lists, but the previous longest waiting time was not known as the focus was to look forward.

- Considering the involvement of professionals and the resources needed to provide appointments, in terms of management of waiting lists, what confirmation process was followed to ensure a child attended? In response, partnership representatives advised that a letter with details of the appointment was sent out and a text was sent as a reminder to parents. Schools were also informed of appointments as help has been offered to help students attend if parent/carers were unable to.
- Was it possible to make a phone call? Was there administrative support available to make pro-active contact to ensure attendance? In response, partnership representatives advised that an information pack was provided with contact and other support when parents first made contact. Some parents were difficult to contact by phone and there were often difficulties in attending for some young people that would occur on the day of the appointment, but contact was made afterwards to find out why an appointment was not attended and appointments would be rescheduled accordingly.
- A Member commented on the experience of one young person referenced in the Healthwatch report waiting for 3 years without hearing anything whilst waiting for assessment/diagnosis by which time their circumstances had changed. Transition to adulthood was very difficult and support was needed.
- Councillor Wilkinson, Cabinet Member for Children and Young People's Services, addressed the Board stating that support was needed for parents whilst waiting. A service called Unique Ways was available but take-up had become very low recently. Information was available as part of an information pack but was not conspicuous and there was no pro-active way to contact parents. Could this be promoted to parents more widely to make them aware and facilitate contact? In response, partnership representatives advised that a meeting with Unique Ways had already taken place and this issue was 'on their radar'. They suggested that whilst the service was included on their website, the profile of Unique Ways could be enhanced further. There was information available on the website as well as in the information packs. The CCG representative confirmed that Unique Ways was one of the organisations that would be invited to attend the proposed quarterly meeting as part of the Open Minds Partnership.
- ASD v ASC (Autism Spectrum Disorder v Autism Spectrum Condition) How and could would we change this terminology? In response, partnership representatives advised that the subject had already been previously discussed in Calderdale, and parents stated their preference was for it to be known as 'disorder' rather than 'condition' However, this could be re-visited. A Member commented that asking the young people would be a good starting point and calling it Autism was suggested.

- Were resources available to provide support for parents whose first language was not English? In response, partnership representatives advised that Unique Ways led on this resource and access to interpreters was also available through SWYPFT.
- A Member commented on the different options available to the Council to promote Unique Ways further, such as screensavers or conferences etc.
- Why was the 12 months waiting list being worked to, and why this target? Was this acceptable, and if not what was being done to improve it? Was there a plan to reduce it? How was the Communication Plan for 2020 progressing? In response, partnership representatives advised that the website had been improved with FAQ's for parents and that the Open Minds Partnership would be attending the April Scrutiny meeting reporting on 'What is Thrive' and the differences Open Mind Thrive and the CAMHS Tiered Model The update would also provide progress on the Communication Plan.

#### IT WAS AGREED that:

- (a) the report be noted.
- 65 THE WHITLEY ALTERNATIVE PROVISION ACADEMY (PREVIOUSLY KNOWN AS CALDERDALE PUPIL REFERRAL UNIT) PERFORMANCE UPDATE The Acting Service Manager, Commissioning and Contracts submitted a written report which informed Members on quality assurance measures for the first term following academisation. Monthly and termly monitoring information had been submitted since the Autumn Term 2019. Attendance had improved in some year groups, although was still an area for improvement overall. However, fixed term exclusions had decreased significantly. The School Improvement Plan aimed for the school to be 'Good' in all areas by the end of the 2019/20 academic year.

Some Members of the Scrutiny Board had visited the provision prior to this formal meeting and were impressed with the provision which had 80 places commissioned by Calderdale for students who were permanently excluded (PX) or were at risk of PX (called Prevent places). The Impact Education Trust had 4 Academies in disadvantaged communities and focused on attainment, education, love, care, understanding and work was underway across the Borough.

The Acting Service Manager, Commissioning and CEO of the Trust attended the meeting and responded to questions from Members. The CEO of the Trust commented that any Members or Officers were welcome to visit the school and they also extended this opportunity to other Headteachers throughout the Borough. Children and young people at the Whitley AP Academy had the same teaching and learning experiences as those young people at other schools or academies, through the curriculum and consistency in routines and boundaries.

Members commented on the following:

• The ethos at the provision was evident with a positive learning environment and positive behaviour through praise being used.

- There was a significant improvement in supervision and the rules and consequences were clear to students. Young people presented very well and the impression was that this was the 'norm' rather than an exception.
- Members discussed the options for a pre-alternative provision or early intervention places. Could this be explained further? In response, the CEO from Impact Education advised that there was a need for a wider, pre-alternative provision option. Discussions were taking place with the Assistant Director, Education and Inclusion in relation to early intervention. The Key Stage 2 provision had been relocated to the main site in support of the broader provision requested by Headteachers across all key stages, leaving a potential opportunity at the former site. Earlier interaction prevented children entering alternative provision and there were cases where this could be proved. Further discussions would need to be had but work was already underway in the possibility of utilising rooms at the previous site, with a view to providing a broader provision for children who needed their needs to be met and to prevent them from needing to attend an alternative provision at a later stage.
- Were figures available for children with alternative learning needs, such as SEND and EHC plans? In response, the CEO stated that more information was available and could be picked up with the Headteacher, however any child or young person who was attending the AP would be fully supported in their needs whilst attending.
- In relation to social care and a systemic approach, could clarification be given relating to the approach of training at the AP? In response, the CEO from Impact Education advised that staff worked closely with parents/carers and had an understanding of the environments some young people were exposed to, and a proactive approach was being taken to achieve more sustainable solution for effective interventions moving forward. There was lots of support available to children and young people who were attending the AP, but for some young people their lived experiences at home were very different. The nurture and care approach the AP takes would help to enable young people who were able to return to mainstream school, to do so when the time was right for that young person or child.
- There had previously been a stigma attached to the term 'Pupil Referral Unit (PRU)' but there appeared to be a mental shift taking place with a different feeling around what had been achieved so far at the AP. In response, the CEO from Impact Education advised that (for example), a uniform had been introduced so young people instantly felt the ethos that the AP was a school, and also that the overall aim was to minimise the time spent in alternative provision but the care provided was, sometimes, all some children had. The Assistant Director, Education and Inclusion advised that of the 80 places commissioned, the majority were for students who had been permanently excluded but 21 students on roll were in 'Prevent' places and there was a requirement for more of these as an early intervention strategy. The challenges faced were recognised but mainstream schools needed to be more

inclusive and alternative provision should be a turnaround provision, not a solution. There was a challenge to get students back into mainstream and an exit strategy was needed, which would continue to be worked upon. The 'one size fits all' provision was not what was needed.

- Was there a cohort of young people that needed particular focus? In response, the CEO from Impact Education advised that case was different and personal plans were in place for every child.
- Was there sufficient transition support from the primary to secondary phase? In response, the CEO from Impact Education advised that pastoral staff were supporting but the resource from AP could only be sustained for so long. Transitional phases were often challenging for many children and young people, however for these pupils, it was often more-so the case.
- Was peer mentoring used at the AP, as Members had observed older students looking after younger ones, which had impressed them on their recent visit? In response the CEO from Impact Education advised that this was not something formal that had been worked on, but the change since joining the primary and secondary provision was definitely more noticeable. There was an understanding and a level of care amongst the students around what was deemed acceptable behaviour and in mentoring one another. This had definitely been more recognisable in some of the older (Years 10 and 11) students caring for the children at Key Stage 2.
- Were students being sent from any school(s) in particular? In response, the Assistant Director, Education and Inclusion advised that data was available for permanent exclusions and there was now a robust process for prevent places which consisted of a panel, which scrutinised strategies used in schools for prevent permanent exclusion and could provide challenge to mainstream Headteachers. Trends in permanent and fixed term exclusions were examined when they arose and this was something which had previously been an issue for some schools, more often in secondary schools than primary schools in the past. This however was becoming less of an issue since processes had been in place.
- In terms of a feedback mechanism, was there anything else occurring to look at (other circumstances) which could affect permanent exclusions? In response the Assistant Director, Education and Inclusion advised that they were checking that schools were engaging and training from the alternative provision and specialist schools were offered when required.
- The emphasis was on the outcomes for young people, which needed to be the key focus and Members commented that concerns for the Board had been allayed and progress reports or updates were welcomed.

#### IT WAS AGREED that:

(a) the Officers and the Alternative Provision trust be thanked for attending;

(b) the report be noted; and

(c) any Members or Officers who wished to visit the Alternative Provision, be requested to liaise with the Scrutiny Team who would schedule visits with the school.

# 66 EARLY YEARS FOUNDATION STAGE PROGRESS (EYFSP) TO KEY STAGE 5 (KS5) RESULTS

The Assistant Director, Education and Inclusion submitted a written report that finalised the 2019 assessment positions and informed the Board about the attainment and progress of Calderdale pupils in the 2018/19 academic year. The report also summarised the priorities for improvement agreed for the 2019/20 academic year and outlined how these were being addressed. In contrast to previously, this report was based on validated results which were confirmed by the Department for Education.

Members commented on the following:

- Was Park Lane Learning Trust still in Local Authority control as it continued to struggle looking at the data presented? In response, The Assistant Director, Education and Inclusion advised that Park Lane was part of the South Pennine Academies Trust and had converted in October 2018. Progress 8 results had improved in 2019 and the ability to challenge was limited due to its status as an Academy.
- In terms of Local Authorities who were similar to Calderdale but ranked above the national average, what were they doing differently? In response, the Assistant Director, Education and Inclusion advised a robust strategy was in place to address these issues and that Calderdale and that Calderdale's particular trends, for example: early years, had been below national average for some time but were beginning to pick up due to lots of on-going work.
- With additional funding such as Pupil Premium, what differences were being made in schools? In response, the Assistant Director, Education and Inclusion advised that SEND/disadvantaged students were quite often the same children, so these figures sometimes needed to be explored in more detail as there could be a number of factors.
- In relation to the KS5 drop off, was it the same cohort following through in 2 years' time, should it improve? In response, the Assistant Director, Education and Inclusion advised that the cohort changed at KS5 as many Calderdale students went out of area for post-16 education. It was anticipated that with the new Sixth Form Provision (Trinity Academy) opening in 2020 it was hoped more students would remain in Calderdale, in turn improving these results.
- As disadvantaged students were not progressing as well as their peers, was there good practice within Calderdale which could be shared? In response, the Assistant Director, Education and Inclusion advised that progress for disadvantaged students was improving but Calderdale had a lower starting point to begin with.

- How was pupil premium funding paid to schools? Did they received it direct or was it distributed by Calderdale? In response, the Assistant Director, Education and Inclusion advised that pupil premium was paid directly to schools and Ofsted held schools to account over how funding was spent and used.
- A Member commented on a recent discussion regarding the Regional Schools Commissioner (RSC) and contact with them. How often did the Assistant Director, Education and Inclusion speak with Calderdale's RSC? In response, the Assistant Director, Education and Inclusion advised that he had had previous experience of liaising with the RSC, but had not had to as yet in this current role. The local authority had no power in terms of interventions with academies, however this was different for maintained schools.

#### IT WAS AGREED that:

(a) the report be noted;

(b) the Board recognised the improvements made across the Primary Phase Key Stages (including Early Years);

(c) the Board recognised the on-going strengths at Key Stage 4 (GCSE) in Calderdale;

(d) the Board recognised the new challenges faced at Key Stage 5; and

(e) the Board continued to support and challenge where priorities for improvement were identified.

# 67 WORK PLAN 2019/20 AND DRAFT TERMS OF REFERENCE FOR DETAILED REVIEWS

The Assistant Scrutiny Officer presented a written report which updated Members on the work plan for 2019/20 and provided draft Terms of Reference for consideration for the Virtual School and Secondary School detailed reviews.

The Virtual School review would mainly focus on the challenges the service was facing with regards to staffing capacity and resource. Changes in the national guidance required the Virtual School to support children and young people from 0–19 years, which had increased the staffing caseload, the range of support required and how this was to be provided. Since the changes in legislation, there had been no increased capacity. Members were asked to consider the additional focus objectives around educational attainment across all year groups in addition to the key detailed areas around Early Years and Post 16 as well as the objectives outlined in the report circulated. Members were also asked to consider use of Pupil Premium as well access to other funding streams that may have been available as part of point B, Section 3 of the report. Additions to key participants were also submitted to Members from a Review Group meeting (Foster Carers Association, Care Leavers Service, Early Years and Public Health, Assistant Director and Cabinet Member).

Calderdale had 13 Secondary Schools which comprised of 2 Community Comprehensive and Trust Schools, 9 Academies and 2 Grammar Schools. The purpose of this review was to consider how Calderdale schools supported young people through 'in-house' pastoral or safeguarding services and how schools resourced, planned and evaluated work relating to specific issues, such as: knife crime, social media use, substance misuse and how young people were supported to access work placements. This review would mainly focus on the pastoral/safeguarding services provided to young people within secondary school provision. Members acknowledged that schools may have delivered this support in different ways, either through universal education or more targeted support dependant on the needs of the young people they taught. The primary focus of this review was to ensure there was access to support for young people, that resources and capacity were readily available to schools and that the impact of such work was consistent and productive to ensure that young people continued to succeed in their education and ensured they became active and positive citizens in the future.

#### IT WAS AGREED that:

(a) the work plan be noted;

(b) the terms of reference for the Virtual School detailed review be formally agreed, subject to the amendments agreed by the Review Group prior to work commencing;

(c) the terms of reference for the Secondary Schools detailed review be formally agreed, subject to the meeting with the Calderdale Association of Secondary Headteachers (CASH) which Scrutiny Officers and Councillor Baines MBE would be attending, on behalf of the Review Group, prior to work commencing.

# 68 UPDATE ON THE ORANGE BOX

(E) The Director, Children and Young People's Services gave an oral report which supplemented the information circulated in a written report relating to safeguarding at the Orange Box which was a multi-use building. Members had requested the information be brought to a formal Board meeting following recent concerns which had been addressed.

The report contained sensitive information relating to a recent safeguarding incident, how this was addressed and what measures had been taken since the event.

The Health and Safety Manager, Director, and Cabinet Member for Children and Young People's Services attended the meeting and responded to Members questions.

It was felt that this incident should not be treated in isolation due to the nature of the work and services that were operating from the Orange Box, and the experiences were not dissimilar to those in other buildings across the Borough. The recent Annual Health and Safety report which had been submitted to Cabinet referenced some of the more serious cases that staff had handled in other public buildings and how these had been addressed. In this instance, staff had handled the situation at the Orange Box as effectively as possible, however due to the size and structure of the

building and the nature of the work, the incident had escalated and de-escalated as quickly as it took place. There had been a number of measures taken after the incident to mitigate risk in the future and help to support business continuity, for example: staff training, alternative access to the building, etc.

Members acknowledged the work that had been undertaken since the incident and thanked Officers for their reassurances. It was important that the Orange Box continued to remain a multi-use and purpose facility, but that staff were protected and young people were safeguarded appropriately.

#### IT WAS AGREED that:

(a) the report be noted; and

(b) the Director, Children and Young People's Services be requested to keep this Scrutiny Board up to date on the services/organisations utilising the Orange Box, including the strategies implemented and used to demonstrate that the facility was continued to be used appropriately, in conjunction with the Youth Services Review.