

Children and Young Peoples Strategic Partnership Executive

Minutes of a meeting held on 15th October 2007

PRESENT

Aileen Fitzgerald	Head of C & F Commissioning, NHS North of Tyne
Catherine Fitt	Executive Director Children's Services
Don Irving	Head of Play and Youth, Children's Services
Barrie Irving	Learning & Skills Council
Rod Stapley	Youth Offending Team manager
Bob Ryan	Northumbria Police
Sara Morgan-Evans	Local Connexions Manager, Newcastle
Helen Cavanagh	Transformational Change Lead, Children Services
Gerard Murphy	Head Teacher, St Cuthbert's High School
Maurya Cushlow	Executive Director of Community Services, PCT
Ruth Rogan	Head of Children's Social Care
Heidi Douglas	Streetwise Manager
Pam Jobbins	Manager, CVS Newcastle
Julia Bayes	Head Teacher St. John's Primary School
Shirley Chambers	Children's Fund Manager
Carole Shipley	Directorate Manager, Children's Services, NUTH
Carol Hambling	C&YPSP Coordinator

IN ATTENDANCE

Danielle Jeffries	Minute Taker
Dave Baharie	Principal Accountant, Children's Services
Janette Brown	Area Locality Manager
Jayne Moules	Area Locality Manager
Jamie Spence	Area Locality Manager
Helen Warriner	Finance Manager, Children's Services
Deb Tyler	Head of Performance Management
Andy Roberts	CAMHS Social Care Coordinator
Helen Warriner	Finance Manager, Children's Services

APOLOGIES

Nick Cott	Lead Member Children's Services
Tom Adams	Chief Executive, Children North East
Nick Springham	Public Health
Jan Cole	Service Manager, NTW NHS Trust
Dave Clegg	Head of Education

1. WELCOME AND APOLOGIES

1.1 Apologies were received as listed above.

2. COORDINATORS REPORT

2.1 The Child Poverty Action Group and Inclusion are developing a web based tool kit to help local areas localise the PSA target to reduce child poverty. CF is a member of the regional child poverty group. CH informed the Executive that Newcastle would like reducing Child Poverty as a theme of the Sustainable

Community Strategy and asked if the C&YPSP Executive would support reducing child poverty as a key theme and whether the C&YPSP would be a suitable delivery partnership to lead on the work. An event will be held to engage partners around child poverty. It was suggested that the Newcastle Partnership would agree the reduction of child poverty as a theme and recommend the C&YPSP as a potential lead.

The Executive discussed Child Poverty as an influence on other major outcomes and how this would fit with the priorities of LAA. It was suggested that addressing child poverty will impact on other outcomes and raise life chances of Newcastle's children and young people. CH informed the Executive that economy is also one of the NRF themes.

There was a consensus to support the notion of reducing child poverty but there was further discussion around the suitability of C&YPSP Executive as the lead partnership. SC and RS felt championing the reduction of child poverty would assist in the mainstreaming of this issue. CH informed the Executive there are questions around delivery across cross cutting themes. It was suggested that the C&YPSP Executive may be more suited to monitoring and championing the progress of reducing child poverty as the Children's services may not be able to directly influence child poverty.

SM-E noted that children and young people will not prosper independently but as part of their families and felt the ECM outcomes around child poverty may be impacted upon through work with workless households. RR felt the C&YPSP feed a vast amount of information into other partnerships around how child poverty affects children and young people in Newcastle, why it needs to change and what would make a difference to Newcastle's children and young people but may not be the appropriate lead delivery partnership. The C&YPSP needs clarity around what needs to be achieved.

ACTION: CH to discuss appropriate arrangements for leading on delivery of this target.

2.2 There are 30 Public Service Agreements with 6 relating to children and young people.

2.3 The Newcastle Partnership Delivery Board has revised its membership to include Barry Rowlands from Local Authority. CH requested the C&YPSP Executive's view of the revised membership. BR asked if the C&YPSP had adequate representation on the board as the LSC will be moving towards work with adults and older young people in future so AW may not be expected to feedback to C&YPSP. CH felt it was important to ensure consistency across partnerships and cooperate with other partnership[s such as Health and Well Being and CAMHS which can only be effectively achieved if there is a forum to meet and feedback.

ACTION: CH to write to director to feedback C&YPSP's concerns re: revisions to membership of LSP.

2.4 The structure of Newcastle City Council's Children's Services has been revised and will include two new Director posts. It is hoped the interviews will be held before end December.

ACTION: All members to send comment to CF before next meeting.

2.5 NRF have begun to review the projects from Round 3. Each project from Round 3 has been allocated to a category; A- complete, B- continuation funding necessary, C- mainstreaming with taper, D- expected to be mainstreaming. RS raised the issue of projects being categorised as 'mainstreamed' without the allocation of resources to achieve this. NRF are creating a further category 'E' for projects which have not performed as expected (e.g. recruitment issues) but where the need they were intending to meet remains a priority.

NRF are planning to establish a transition period for certain projects, it is likely the information from the government will be received later than expected and necessitate tight deadlines. NRF have request the assistance of C&YPSP Executive to prioritise projects. It was noted that raising aspirations of young people is critical to impact on worklessness- which is the theme of Round 4 NRF.

3. FORWARD PLAN AND EVENTS CALENDAR

3.1 The C&YPSP Executive checked the Forward plan and events calendar for accuracy and omissions. No issues were raised under this item.

ACTION: All members to send suggestions to CH for amendments to Forward Plan or Events Calendar.

4. TIER 4 CAMHS REVIEW

4.1 Significant work has been undertaken across the region to review the provision of Tier 4 services. Tier 4 services are provided across a large area with some services provided nationally. The new proposals suggest how and where services should be delivered. The changes are to assist with effective delivery of the ECM agenda and are unlikely to result in reduced costs.

4.2 For mental health services for the under 12s the main driver is avoiding admissions where possible and bolstering community services in localities (i.e. Newcastle, Gateshead, Northumberland). The review intends to maintain young people's links with education, family and peer groups and minimise the need for travel. CAMHS will move towards the configuration of a high use day service at Flemming Nuffield to continue provision but in a different way.

4.3 For young people with learning difficulties a lifespan model is being proposed to maintain a continuum from young person to adult services. A national service recommendation around services for children, recognised Investing in Children work and rated family and young people's services very highly but recommended a more sustainable outreach approach.

4.4 Changes to services for young people over 12. The Young People's unit is not fit for purpose as it is a mixed ward where 75% of admissions are young women with eating disorders which can raise safety issues. This has led to a number of young people being placed out of Authority. A local short term secure unit is required. CAMHS also hope to eliminate use of adult beds by young people.

4.5 Eating disorder service. CAMHS are exploring a lifespan pathway, possibly for ages 14-25 and ensuring age appropriate care for young people. There will be a whole system approach from anorexia to obesity.

4.6 The consultation for the review has now been completed but there is ongoing consultation around how to achieve the goals in each area. AF requested support from the Executive to achieve the changes.

4.7 The changes should free some resources to provide more sustainable services around eating disorders. CAMHS intend to have an 'invest to save' approach. The strategy is to consider residents needs on a long term basis. There are some temporary issues such as the Young People's Unit which will require an interim solution. The intention is to relocate in the interim to Prudhoe Hospital. HD asked if there would be issues having a children and young people's service in an adult setting.

4.8 AF informed the Executive that marketing of the new approach would be critical to successful implementation. RS asked about the scope of the changes as forensic CAMHS was not referred to in the paper. AF informed the Executive that forensic CAMHS is commissioned nationally and will remain at St Nicholas Hospital. RS noted the importance of ensuring close links between services as some young people are sequentially involved with different parts of CAMHS and issues can arise if services are commissioned separately. AR informed the Executive that a CAMHS High Care Needs system is being developed with a forum for practitioners to discuss these issues.

4.9 RR raised the importance of explaining the review as a planned change to provision not an end to services. AF informed the Executive that services should be enhanced not diminished by the reforms and that any queries around the changes should be directed to AF or Rosemary Granger.

5. ANNUAL PERFORMANCE ASSESSMENT

5.1 No issues were raised under this item. Item deferred until next meeting.

6. CURRENT SPEND

6.1 CH informed the Executive that the exercise was an attempt to relate spend to levels of need and to give partners an overview of spending; Local Authority, Primary Care Trust, Neighbourhood Renewal Fund and Children's Fund services are divided into citywide and locality provision and also provision by Tiers of

need. CH asked if partners would be willing to complete the form and if it would be useful as part of an annual review of how resources are spent in Newcastle.

6.2 The group discussed the issues with the document as funding is frequently not divided clearly into tiers and may also include; staffing, building costs etc. AF informed the Executive that some funds are distributed nationally and may be demand led. BI informed the group that funding for Newcastle College is not ring-fenced to young people from Newcastle and 40% of students at the college are from outside of the city. It was agreed that despite highly complex issues around where funding actually goes the document was a useful start. RS raised a query around possible 'double counting' e.g. NRF funding and budgets for services which receive NRF funding which are not broken down to exclude this.

6.3 DT informed the Executive that the form was useful under the Transformation programme and that it would be useful to get specialist support from agencies to assist work with DB.

6.4 CH informed the Executive that the budgets for voluntary and community sector partners would also be useful for inclusion and that duplication of funds can be reduced when working through the table in greater detail. CH acknowledged issues for services which cannot discriminate between residents and non residents or spend on adults and spend on children. CH envisioned the table becoming more accurate over time and with the assistance and input of partners.

6.5 It was suggested the document carry 'health warnings' to ensure it is used as a guide and it was noted that divisions between tiers and the funding allocated to tiers for services are not always clear cut. There was a discussion around what the document would be used for. It was felt that the document fuels further discussion and provides more questions than answers but that it is a positive step and leads to more transparency around spending.

ACTION: All members to send budgetary information to CH for inclusion on table.

ACTION: All members to give contact names for partner organisations (finance) for CH. CH to send to DB

7. BUDGET SPENDING PROTOCOL

7.1 The budget spending protocol gives partners guidelines around sharing budget resources and will provide a calendar to demonstrate the different timetables for spending allocations. E.g. some partners budgets run April-March some January-December and some- September to August. The Executive will be expected to share information and to discuss when decisions should be made to ensure changes are made in line with time pressures. This will be a long term project to deliver on outcomes for children and young people.

ACTION: All members to send comments to CH by 2nd November. CH to revise.

8. AREAS OF CHANGE/ PRESSURE TO BUDGETS

8.1 NORTH OF TYNE COMMISSIONING

AF informed the Executive of the financial pressures on NHS North of Tyne including a £2.5million revenue overspend (0.45% of total budget) which will require caution with funding to ensure no overspend by year end. If balance is achieved this may come from non-recurring sources and will require budgetary caution over the next few years.

The delivery of the cost improvement programme will be critical in terms of provider services in Newcastle. Provider services such as Community Services are required to make a 1.5% efficiency saving above the national target. Management are expected to save £3.2 million which has been achieved but with a reserve built in for redundancy savings. The contract for secondary providers is tied into payment by results and is demand led. A key risk area is around how to manage demand. There are also issues around patient charging and dental income. However, the service improvement fund has £1.5million to 'spend to save' to pump prime initiatives.

8.2 PCT COMMUNITY SERVICES

MC informed the Executive that Children's Services has significant pressure for service delivery of £800,000. Over the next year health visitor services will be reconfigured to concentrate on priority services. There are also additional pressures on health visitors particularly around safeguarding.

ACTION: MC to bring information back to partnership re: reconfiguration.

CS informed the Executive that the Hospital Trust are looking at new ways to support children and young people to avoid admissions and ensure hospital stays are as short as possible. The Trust is also working to meet the 18 week target from referral to treatment and equip the adaptation service to provide more effective provision.

The financial data and priorities are available on PCT website and include tackling health and inequalities.

Palliative care at home has been mainstreamed, a hearing screening service is being established and Tier 4 services are being redesigned. A children and young people's eating disorder service is also being developed.

The Executive discussed the best format to share information around resources and how useful the overviews are to other partners. AR felt it was useful to know where the pressures are for services, how progress fits with children and young people's priorities and how services may be able to work together to achieve better solutions. The Executive felt knowing the key target areas for other agencies was particularly useful as it is gaining an understanding of different systems used by other agencies.

ACTION: AF to produce brief summary of budget info for Executive

8.3 EARLY INTERVENTION AND PREVENTION IN THE LOCALITIES

JS informed the Executive that the diagram had been created after a series of conversations about how Children's Services see the direction of travel around resource alignment for locality services to focus on Early Intervention and Prevention services and links to citywide Integrated Services Group (CISSG).

The locality partnerships should assist partner agencies with allocation, alignment and spending of resources. For example the former Children's Fund has an allocation of just under £1million per year over the next 3 years and this will be allocated to the locality partnerships from April 2008 onwards. The locality partnerships may also be used for the deployment of funding streams available for extended services. In time this may be extended to include Sure Start, Early Years and Child Care Grant funding to ensure resources are aligned to target the most vulnerable Under 5s.

JM informed the Executive of the importance of allocating resources according to age, need and geography. AF raised the geographical differences between the health service and local authorities localities. MC stressed the importance of ensuring the LA and PCT localities establish effective links. RS informed the Executive of the importance of establishing commissioning around need to ensure services are not caught in budget issues around age of service users.

It was felt the Children's Fund being controlled by the localities would be useful to assist early intervention and prevention work. CF reminded the Executive of the importance of moving towards delivery on outcomes in localities quickly. The APA inspectors have confirmed the Newcastle City Council Children's Services self assessment of 'good capacity to improve' and Newcastle City Council hope to be assessed as 'good' this time next year. To achieve this and give children and young people improved chances by impacting on outcomes the way resources are spent should be changed as soon as possible. CF informed the Executive of the significance of having all budgetary information available by April 2008.

SC reminded the Executive of the issues for community and voluntary sector services which are commissioned citywide and the need for effective links with locality managers to understand services. SC suggested commissioners put a mechanism in place to assist voluntary and community sector services to fit with services and link with capacity issues. JM agreed that a dialogue was needed with these agencies to ensure locality partnerships are aware of how to join up working with smaller agencies.

9. VALUE FOR MONEY AND MEDIUM TERM BUDGET PROCESS IN CITY COUNCIL

9.1 Each Directorate in Newcastle City Council is going through a Value for Money process to ascertain the level of value for money in current provision and to consider future budget pressures. Newcastle are comparing themselves against their regional neighbours, CIPFA neighbours and Core Cities. Newcastle have been considering key issues including child poverty and deprivation to ensure resources are allocated in line with priorities. Newcastle's multiple deprivation rank is very high with a higher concentration of children deprived than nationally. 37% of children in Newcastle are in the 10% most deprived areas of the country, with 42% of pupils in 2007 school census in the 10% most deprived areas. This is polarised with some schools having much higher concentration.

The presentation highlighted;

- Children's Social Care had a deficit for 2006/7
- financial pressures around LAC (the costs of OOA placements and independent agencies)
- work to increase the recruitment and retention of foster carers
- continuing uncertainty in statutory and voluntary sector about some funding streams.
- NRF projects that may be under threat include services that deliver on core priorities.

The overall driver is to create resources for early intervention and prevention work.

10. INFORMATION ON GRANTS

10.1 The information around the Children's Fund has now been received and the guidance for NRF is beginning to emerge.

ACTION: CH to circulate all area based grants information to C&YPSP Executive.

11. MINUTES OF THE PREVIOUS MEETING

11.1 The minutes of the previous meeting were agreed as an accurate record with the following amendment;

Page 4, Item 5. Paragraphs 5.1 and 5.3 - AF to clarify wording.

ACTION: AF to send amendments to DJ

12. MATTERS ARISING

12.1 CF informed the Executive that the 2 Director posts for Children's Service are currently being advertised in Children Now with a closing date of 8th November.

12.2 Amendment to the minutes of the C&YPSP Executive for June. The minutes suggested that it is the responsibility of parents to ensure their children attend

school. The duty on parents is to secure access to education, and the majority select school attendance as the means for this.

13. ANY OTHER BUSINESS

13.1 No issues were raised under this item.

Item	Action	Lead	Due Date
1	Return to Newcastle Partnership to discuss resources and return to C&YPSP with more information Page 2	Carol Hambling	
2	Write to director of Newcastle Partnership to feedback C&YPSP's concerns re: revisions to membership of LSP. Page 3	Carol Hambling	
3	Send comment to CF before next meeting Page 3	All Members	
4	Send suggestions to CH for amendments to Forward Plan or Events Calendar. Page 3	All Members	
5	Send budgetary information to CH for inclusion on table. Page 5	All Members	
6	Give contact names for partner organisations (finance) for CH. Ch to send to DB Page 5	All Members	
7	Send comments on Budget Spending Protocol to CH by 2nd November. CH to revise. Page 5	All Members	
8	Bring information back to partnership Page 6	Maurya Cushlow	
9	Produce brief summary of budget info for Executive Page 7	Aileen Fitzgerald	
10	Circulate all area based grants information to C&YPSP Executive. Page 8	Carol Hambling	
11	Send amendments for minutes to DJ Page 8	Aileen Fitzgerald	
Date of the next meeting: Monday 19 th November 2007. Meeting to be held Room 5, Springfield Centre 09:15-12:00			