

# Public Document Pack



## Agenda for a meeting of the Children's Services Overview and Scrutiny Committee to be held on Wednesday, 17 November 2021 at 4.30 pm in Council Chamber, City Hall - City Hall, Bradford

### Members of the Committee – Councillors

| LABOUR  | CONSERVATIVE       | LIBERAL DEMOCRAT | BRADFORD GROUP | INDEPENDENT |
|---|--------------------|------------------|----------------|-------------|
| Alipoor<br>Choudhry<br>Humphreys<br>Jamil<br>Mohammed | Winnard<br>Pollard | Stubbs           | Sajawal        |             |

### Alternates:

| LABOUR                         | CONSERVATIVE        | LIBERAL DEMOCRAT | BRADFORD GROUP | INDEPENDENT |
|--------------------------------|---------------------|------------------|----------------|-------------|
| Firth<br>H Khan<br>Mir<br>Wood | K Green<br>Felstead | Knox             |                |             |

### VOTING CO-OPTED MEMBERS:

Joyce Simpson

Fauzia Raza

Church Representative (CE)

Parent Governor Representative

### NON VOTING CO-OPTED MEMBERS

Tom Bright

Dr Samina Karim

Teachers Secondary School Representative

Children's Social Care Representative

### Notes:

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- The taking of photographs, filming and sound recording of the meeting is allowed except if Councillors vote to exclude the public to discuss confidential matters covered by Schedule 12A of the Local Government Act 1972. Recording activity should be respectful to the conduct of the meeting and behaviour that disrupts the meeting (such as oral commentary) will not be permitted. Anyone attending the meeting who wishes to record or film the meeting's proceedings is advised to liaise with the Agenda Contact who will provide guidance and ensure that any necessary arrangements are in place. Those present who are invited to make spoken contributions to the meeting should be aware that they may be filmed or sound recorded.
- If any further information is required about any item on this agenda, please contact the officer named at the foot of that agenda item.
- Anyone wishing to speak to any of the business items on the agenda must register to speak by emailing Mustansir Butt ([mustansir.butt@bradford.gov.uk](mailto:mustansir.butt@bradford.gov.uk)) by midday on Monday 15 November 2021.

On the day of the meeting you are expected to wear a suitable face covering (unless you are medically exempt) and adhere to social distancing. Staff will be at hand to advise accordingly.

From:

Parveen Akhtar

City Solicitor

Agenda Contact: Fatima Butt / Jill Bell

Phone: 01274 432227/434580

E-Mail: [fatima.butt@bradford.gov.uk](mailto:fatima.butt@bradford.gov.uk) / [jill.bell@bradford.gov.uk](mailto:jill.bell@bradford.gov.uk)

To:

## **A. PROCEDURAL ITEMS**

### **1. ALTERNATE MEMBERS (Standing Order 34)**

The City Solicitor will report the names of alternate Members who are attending the meeting in place of appointed Members.

### **2. DISCLOSURES OF INTEREST**

(Members Code of Conduct - Part 4A of the Constitution)

To receive disclosures of interests from members and co-opted members on matters to be considered at the meeting. The disclosure must include the nature of the interest.

An interest must also be disclosed in the meeting when it becomes apparent to the member during the meeting.

*Notes:*

- (1) Members may remain in the meeting and take part fully in discussion and voting unless the interest is a disclosable pecuniary interest or an interest which the Member feels would call into question their compliance with the wider principles set out in the Code of Conduct. Disclosable pecuniary interests relate to the Member concerned or their spouse/partner.*
- (2) Members in arrears of Council Tax by more than two months must not vote in decisions on, or which might affect, budget calculations, and must disclose at the meeting that this restriction applies to them. A failure to comply with these requirements is a criminal offence under section 106 of the Local Government Finance Act 1992.*
- (3) Members are also welcome to disclose interests which are not disclosable pecuniary interests but which they consider should be made in the interest of clarity.*
- (4) Officers must disclose interests in accordance with Council Standing Order 44.*

### **3. INSPECTION OF REPORTS AND BACKGROUND PAPERS**

(Access to Information Procedure Rules – Part 3B of the Constitution)

Reports and background papers for agenda items may be inspected by contacting the person shown after each agenda item. Certain reports and background papers may be restricted.

Any request to remove the restriction on a report or background paper should be made to the relevant Strategic Director or Assistant Director whose name is shown on the front page of the report.

If that request is refused, there is a right of appeal to this meeting.

Please contact the officer shown below in advance of the meeting if you wish to appeal.

(Fatima Butt - 01274 432227)

#### **4. REFERRALS TO THE OVERVIEW AND SCRUTINY COMMITTEE**

The Committee is asked to note any referrals and decide how it wishes to proceed, for example by incorporating the item into the work programme, requesting that it be subject to more detailed examination, or refer it to an appropriate Working Group/Committee.

### **B. OVERVIEW AND SCRUTINY ACTIVITIES**

#### **5. FAMILIES FIRST PROGRAMME 2021-2022**

1 - 8

The Interim Strategic Director, Children's Services will submit **Document "J"** which provides an update on highlights from the Families First Programme and focuses on areas of progress, action in the next period and areas of concern and potential concern.

**Recommended-**

**That the contents of the report and the progress being made be noted.**

(Chad Thompson – 01274 432904)

#### **6. CRISIS SUPPORT FOR CHILDREN AND YOUNG PEOPLE**

9 - 26

The Director for Keeping Well (NHS Bradford) will submit **Document "K"** which provides a summary of local work undertaken to develop the crisis support model, outlines plans to implement the crisis protocol and the wider context in which crisis support fits within the plans and ambitions for children and young people's mental health and emotional wellbeing.

**Recommended-**

**(1) That the progress of the crisis protocol work as part of the Act as One Children and Young People's Wellbeing Programme be noted.**

**(2) That the plan and next steps to developing multi-disciplinary models of care that support children and young people in crisis closer to home and, reduce the amount of time spent within the hospital setting be supported.**

**(3) That the development of a business case for the proposed joint commission of a local alternative to hospital for children and young people in crisis be supported.**

(Kris Farnell/Joanne Tooby - (01274) 237587)

**7. CHILDREN'S SERVICES OVERVIEW AND SCRUTINY COMMITTEE - WORK PROGRAMME 2021/22** 27 - 40

The report of the Chair of the Committee (**Document "L"**) includes the Children's Services Overview and Scrutiny Committee Work Programme for 2021-2022.

**Recommended-**

- (1) That Members consider and comment on the areas of work included in the work programme.**
- (2) That Members consider any detailed scrutiny reviews that they may wish to conduct.**

(Mustansir Butt – 01274 432574)



## **Report of the Strategic Director of Children's Services to the meeting of Children's Services Overview & Scrutiny Committee to be held on 17 November 2021**

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**J**

### **Subject:**

**Families First Programme 2021-2022**

### **Summary statement:**

**This report will provide an update on highlights from the Families First Programme and focus on areas of progress, action in the next period and areas of concern and potential concern.**

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Marium Haque  
Strategic Director of Children's Services

### **Portfolio:**

**Children & Families**

Report Contact: Chad Thompson  
Phone: (01274) 432904  
E-mail: [Irfan.alam@bradford.gov.uk](mailto:Irfan.alam@bradford.gov.uk)

### **Overview & Scrutiny Area:**

**Children's Services**

## **1. SUMMARY**

- 1.1 This report will provide an update on highlights from the improvement journey of Supporting Families programme delivered locally in Bradford and to provide a performance update on the Families First (FF) Programme in 2021/22.

## **2. BACKGROUND**

The criteria for the programme is that every family will have at least two of these six headline problems:

- 1) Parents or children involved in crime or anti-social behaviour
- 2) Children who have not been attending school regularly
- 3) Children who need help
- 4) Adults out of work or at risk of financial exclusion and young people at risk of worklessness
- 5) Families affected by domestic violence and abuse
- 6) Parents and children with a range of health problems

The measure of success of the programme focuses on achieving 'significant and sustained' progress for families. Therefore, the principles of having a lead professional who facilitates and coordinates a multiagency response to the family's needs, one whole family assessment and one family action plan is required. A Family Outcomes Plan has been developed within Bradford in order to facilitate this.

There has been a significant turnaround in the performance of Bradford's delivery for 2020/21. The previous position was that Bradford was placed on a 'Recovery Plan' and had increased MHCLG intervention and scrutiny due to not meeting its targets of the numbers of families being worked with in a whole family way and the number of family outcomes achieving significant and sustained progress. The department recognised that the programme needed to be properly resourced and due to having joint Service and Improvement Programme support this has enhanced performance and therefore accelerated at scale and pace.

### **2.1 How Supporting Families Contributes to the Strategic Direction across the District**

- a) Supporting Families contributes to delivering the Early Help Strategy for Children and Families for Level 3 (Multiple and Complex Needs) Lead Practitioners and Team around the Family approach which builds confidence with partners and families through Bradford's Prevention and Early Help Partnership.
- b) Early Help System Guide (MHCLG Transformation Assessment) will help deliver and drive Children's system leadership through its action plan and feedback from the national team.
- c) Families First Commissioned Services - keyworker service for approx. 500 vulnerable families that meet the national 'Supporting Families' criteria and the

locally set criteria. Barnardo's and Families First Police Team (West Yorkshire Police) provide key work and youth support through a 'Lead Practitioner Model;' with one worker, one family, one plan and actively support external Lead Practitioners in a Team Around the Family (TAF) approach

## 2.2 Key Areas of Progress

In December 2020, Bradford achieved 100% of the 20/21 target of 1,017 families, 3 months before the end of the programme. These families have had to achieve sustained and significant progress of 6 months without regression to post family support.

## 2.3 Providing and maintaining a stable workforce:

- A dedicated Programme Lead recruited to oversee the strategic leadership and governance of the programme;
- A dedicated Practice Lead in post, to offer operational management, to improve internal and external processes, to manage the FF team and the commissioned services; and full time analysts were recruited, to carry out improvements to data practices.

## 2.4 What we are doing to improve:

- Data maturity  
There is a large amount of data and intelligence that is requested by Central Government from Bradford's and its commissioned partners who deliver services to families. In order to collate this efficiently there is a need to transform the current Councils IT and Liquid Logic System's in order to capture outcomes and evidence needed for audit and monthly submissions to Department for Levelling Up, Housing and Communities. This is being mitigated through Families First Data analysts who are employed as part of the core programme team to ensure what we have is fit for purpose. Additional to this there is some system development work being carried out as part of the Childrens IT end to end Programme
- Workforce development  
There is an opportunity to further transform public services to upskill the children's workforce to help deliver of the Families First key objectives. Part of the sign up to the national programme is to further capacity build local practitioners who work with children and families to carry out the lead practitioner role (this role helps coordinate the families relationship with other agencies who provide services to the family) and to carry out and Early Help Assessment and Team around the family reviews which are then centrally recorded on the Councils EHM Liquid Logic system. There is a need to have a workforce development strategy that pulls together an offer of training and support for partners to access. This is being mitigated and progressed through the Prevention and Early Help Partnership. A first draft has been produced and will be consulted on in December 2021 and January 2022

## 2.2 Current Performance 2021/2022

On 28<sup>th</sup> January 2021, MHCLG confirmed a 12-month extension to the programme for 2021/22 outlining the following funding for Bradford:

- £1,307,000 Service Transformation Funding: core funding for providing intensive family support services and increasing the maturity of your Early Help system; and
- £848,000 Funding for Successful Outcomes (PbR): 1,060 successful family outcomes that can be claimed between April 2021 and March 2022.
- Bradford has achieved 513 Family Outcomes which equates to 53% of its target (April – September claims period) and is currently performing above the national average at this point of the programme.
- The trajectory of Bradford's performance is 100% of targets and family outcomes achieved by March 2022 or sooner.

## 2.3 Areas of Concern or Potential Concern

Families First Programme is 100% funded by Department for Levelling Up, Housing and Communities (Previously MHCLG) and therefore future funding will depend on the outcome of the treasury's spending review.

There has been a recent announcement from National Supporting Families Team that funding will continue for the next three years (2022-25) which will ensure the sustainability of services to families in Bradford for that period. It was also communicated that the programme will be expanded. The Spending Review included an additional £200 million for Supporting Families nationally. This is around a 40% real-terms uplift in funding for the programme by 2024-25, taking total planned investment across the next three years to nearly £700 million.

## 3. OTHER CONSIDERATIONS

3.1 There are no other considerations.

## 4. FINANCIAL & RESOURCE APPRAISAL

N/a

## 5. RISK MANAGEMENT AND GOVERNANCE ISSUES

5.1 Risks with cessation of funding



### **5.1.1 Risks to Families**

The average number of families worked with per year for each of the contracts are;

- Families First VCS 344
- Intensive Youth Support 72
- Police 80

This would mean approximately 496 families not receiving a service if funding ends in March 2022

### **5.1.2 Risk to Local Authority**

- Removal of services would result in Local Authorities Family Support Workers picking up this work to ensure families received support. At present, there are a number of families on Hub waiting lists for a service. The VCS and Police Commissioned Service assist with any actual/potential waiting lists within the authority, on a weekly basis, which reduces the wait time for families. By removing this capacity, Hubs would potentially need to increase the staffing levels and/or waiting list times would significantly increase.
- Children's welfare would be a risk, if support was not offered in a timely manner and family vulnerabilities increased.
- Long term, this may result in more families escalating to requiring a statutory service from Social Workers and increasing the demand for Children's Social Care.

### **5.1.3 Risk to the Commissioned Partnership**

- Loss of 20 FTE key workers from the District
- Loss of dedicated Early Help Police Team (6 in total)
- Potential loss/reduction in VCS management teams. Ability to represent partnership at district partnership meetings
- Potential loss of specialist provision e.g. emotional mental health – alternative learning opportunities – youth work interventions
- Loss of formal partnership arrangements with 4 VCS organisations
- Loss of income to small/medium sized organisations based with the District – ripple effect this will have into other work streams
- Loss of representation at Early Help Locality Hub Panels

## **6. LEGAL APPRAISAL**

6.1 Not applicable.

## **7. OTHER IMPLICATIONS**

### **7.1 SUSTAINABILITY IMPLICATIONS**

Not applicable.

## **7.2 GREENHOUSE GAS EMISSIONS IMPACTS**

Not applicable.

## **7.3 COMMUNITY SAFETY IMPLICATIONS**

Not applicable.

## **7.4 HUMAN RIGHTS ACT**

Not applicable.

## **7.5 TRADE UNION**

Not applicable.

## **7.6 WARD IMPLICATIONS**

The Ofsted judgement affects all wards.

## **7.7 AREA COMMITTEE ACTION PLAN IMPLICATIONS (for reports to Area Committees only)**

Not applicable.

## **7.8 IMPLICATIONS FOR CORPORATE PARENTING**

All improvements across Children's Services will strengthen the Council's ability to discharge its Corporate Parenting responsibilities.

## **7.9 ISSUES ARISING FROM PRIVACY IMPACT ASSESMENT**

None; the Ofsted report and Notice of Improvement are in the public domain.

## **8. NOT FOR PUBLICATION DOCUMENTS**

8.1 None.

## **9. OPTIONS**

9.1 None.

## **10. RECOMMENDATIONS**

10.1 That this Committee notes the contents of this report and the progress being made.

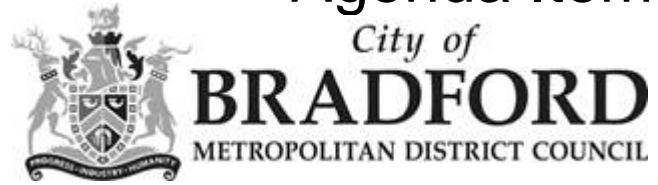
## **11. APPENDICES**

11.1 N/a

## **12. BACKGROUND DOCUMENTS**

12.1 None.

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## **Report of the Director for Keeping Well (NHS Bradford) to the meeting of Children's Services Overview & Scrutiny Committee to be held on 17<sup>th</sup> November 2021**

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**K****Subject:****Crisis Support for Children and Young People****Summary statement:**

The purpose of this paper is to provide a summary of local work undertaken to develop the crisis support model, outline plans to implement the crisis protocol and the wider context in which crisis support fits within our plans and ambitions for children and young people's mental health and emotional wellbeing. This paper also highlights the challenges that exist to supporting children and young people in crisis, the needs of children and young people who present in crisis and the breadth of partnership work that is taking place to support children and young people to thrive and achieve their potential. The paper concludes with the next steps for implementing the crisis protocol and wider system work to support children and young people in crisis.

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Ali Jan Haider  
Strategic Director for Keeping Well

**Portfolio:****Health and wellbeing**

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**Overview & Scrutiny Area:****Children's Services**

## 1. SUMMARY

- 1.1 The vision for the Act as One Children and Young People's Wellbeing Programme is *'Brighter futures for children and young people to thrive and achieve their potential'*.
- 1.2 To achieve our vision, the Children and Young People's Wellbeing Leadership Team have agreed to a shared commitment to work as a whole system to promote, protect and improve children and young people's mental wellbeing to enable them to thrive and lead full, happy, and healthy lives.
- 1.3 The priority work streams for the programme have been established following the findings and recommendations of the jointly commissioned system-wide review of children and young people's mental health services in Bradford and Craven by the Centre for Mental Health, the Children's Services Improvement Plan and the foundations of the existing local Future in Mind implementation plan and associated national guidance.
- 1.4 One of our agreed work streams is to strengthen our approach to preventing crisis for children and young people and ensure we have accessible, effective multi-disciplinary crisis care pathways. A crisis may be defined as a situation in which the child or young person presents a risk to themselves, a risk to others or when there is a need for immediate action or intervention.
- 1.5 NHS Long Term Plan requirements, agreed by the Integrated Care System, set an emphasis on our place to ensure 24-hour access and planned crisis support for children and young people who live in Bradford and Craven. There is also a commitment to support children and young people closer to home and reduce avoidable, and inappropriate, use of inpatient beds.
- 1.6 Increases in the number and complexity of children and young people presenting to emergency services in psychological distress and in crisis in health settings is an issue that is reported nationally. We are working in partnership to develop models of care to support children and young people locally, to reduce out of area placements, reduce time in hospital and bring the care and support they need to them in Bradford and Craven, the places where they live, learn, have family, friends and wider circles of support.
- 1.7 The purpose of this paper is to provide a summary of local work undertaken to develop a children and young people's crisis protocol, plans to implement the model and the wider context in which crisis support fits within our plans and ambitions for children and young people's mental health and emotional wellbeing. This paper also highlights the challenges that exist to supporting children and young people in crisis, the needs of children and young people who present in crisis and the breadth of partnership work that is taking place to support our children and young people to thrive and achieve their potential.
- 1.8 This paper represents our system approach to crisis support for children and young people, which is supported through the Act as One Children and Young People's Wellbeing Programme. Therefore, this paper does not focus on one organisation's role in supporting children in crisis, but the system in its entirety whether that be Specialist CAMHS, Children's Social Care, education, acute trusts, the Police

Service, the voluntary sector or other partners. For the purposes of this paper, Neurodiversity pathways, assessment and diagnosis are out of scope.

## 2. BACKGROUND

### 2.1 The THRIVE Framework

2.1.1 There are a range of services that exist locally to support children and young people's mental health and emotional wellbeing. Services are commissioned and delivered by organisations across health, social care, education and the voluntary sector. The landscape of provision within Bradford District and Craven is described within the system-wide review report as difficult to understand and navigate for children, young people, parents, carers and professionals.

2.1.2 Within the responses to surveys conducted by the Centre for Mental Health for the system-wide review in April 2020, 66% (n.130) of parents and carers said it was very difficult or quite difficult to access support for their child in crisis. In addition, 72% (n.145) of professionals responding to the survey thought it was very difficult or difficult to access mental health crisis care for children aged 4 – 16 years old. Although, this was reported as slightly less difficult for young people aged 17 – 25 years old in crisis, with 67% of respondents noting this was very difficult or difficult.

*"I'd like... to be able to get help immediately – being able to talk to someone when in distress". [Young Person]*

2.1.3 The THRIVE framework is recommended by NHS England as an evidence based operating model that can deliver integrated approaches across health, social care, education and the voluntary sector. In this way the THRIVE framework can bring together often complex systems and arrangements to provide a coherent mental health offer for children and young people. Please refer to Appendix I for further information on the THRIVE Framework.

2.1.4 The THRIVE Framework provides a set of principles for creating coherent and resource efficient communities of mental health and wellbeing support for children, young people and families. It is a framework that we are committed to implementing locally. THRIVE supports the use of a common and understandable shared language about mental health and mental wellbeing. The framework is needs-led which means that mental health needs are defined by the children, young people and their families, alongside professionals, through shared decision making.

2.1.5 The THRIVE Framework considers the mental health and wellbeing needs of children, young people and families through five different needs-based groupings: *Getting Advice and Signposting*, *Getting Help*, *Getting More Help* and *Getting Risk Support*. It also allows for a focus on prevention and promotion of mental wellbeing across the whole population '*Thriving*'.

2.1.6 We recognise that there are opportunities for the system to strengthen its approach for the cohort of children and young people within the *Getting Risk Support* quadrant of THRIVE. Whilst many may be known to some or all of our partner organisations, including CAMHS, Children's Social Care, the Police Service and Youth Justice, they

remain at risk of adverse and harmful experiences such as family breakdown, school exclusion, criminality, child sexual exploitation, domestic violence and abuse. This group may include children and young people who routinely go into crisis, who self-harm or have other ongoing issues but support to date has not been able to make a difference or they are not in a place where they are ready to accept support and benefit from evidence-based treatment.

- 2.1.7 This group are not clearly defined with a common language shared across organisations, but they are often the cases that cause a high level of professional anxiety and sometimes challenges to agreeing the best approach across the organisations and practitioners in contact with the child, young person or family.
- 2.1.8 It was clear from the outset, that co-production of the *Getting Risk Support* quadrant in the THRIVE framework requires significant multi-agency involvement and that the outputs would involve a collaborative response from across the statutory and voluntary sector. Our aim is to build a system that supports the practitioners, teams and managers in these very complex situations to provide approaches that better suit the needs of the individual child or young person and their families. Our risk support approach is about working together to support the families, carers and young people in the settings where they are, supporting those professionals who have existing relationships and working closely with them to advise and support the management of risks. Please refer to Appendix II for descriptions of the purpose and objectives of risk support.

## **2.2 The Crisis Protocol**

- 2.2.1 We are aware of instances where children and young people have presented to hospital in crisis and have remained for extended periods of time within the hospital wards, particularly in situations where they are unable to return home or have no safe discharge destination. This could be for a number of reasons including family breakdown, risks of abuse or neglect within the household. In crisis, the child or young person may present in emotional distress, may or may not have a diagnosable or underlying mental health condition, but their presentation commonly includes a psychological response to experiencing trauma and their home environment.
- 2.2.2 The Children and Young People's Wellbeing Leadership Team requested that a multi-disciplinary crisis protocol be established to coordinate the care and support of those children and young people with a mental health concern within a hospital setting who do not have a safe destination for discharge. This was in response to an increase in admissions, a number of discussions at the leadership team meeting and a call for us to understand how we can work together better to support this group of children and young people. The core principle of the work was that it required a coordinated multi-disciplinary response from all agencies who may be involved in the child or young person's care to ensure that:
- the child or young person is supported appropriately according to their needs and wishes while within the hospital setting
  - an appropriate new home or placement can be planned and coordinated which meets the needs of the child or young person and their parent/carers
  - the intelligence and insight of all agencies involved in the child and young person's care and their wider circle of support contributes towards achieving



better outcomes for the child or young person both within the hospital setting and on discharge.

2.2.3 The Crisis Protocol Task and Finish Group was established to understand the current issues affecting our response to children and young people who are admitted to hospital with a mental health concern and cannot return home. The task and finish group's purpose was to review and learn from recent cases and to agree together the improvements required. The overall aim was to develop a multi-disciplinary protocol and shared documentation to facilitate an improved and more coordinated response for children and young people in these circumstances. To support the multi-disciplinary approach representation was drawn from Bradford District Care Foundation Trust (BDCFT) within the CAMH service, Children's Social Care and Placement Coordination, Bradford Teaching Hospitals Foundation Trust (BTHFT), CCG, voluntary sector and the Police Service.

2.2.4 The multi-disciplinary approach to developing the crisis protocol provided a platform on which to foster a shared understanding of the key challenges and obstacles to providing effective, consistent, and coordinated care and support to this group of children and young people. The crisis protocol is intended to be child centred, drawing in the expertise of professionals, families and carers to wrap support around the child or young person to meet their needs, wishes and aspirations in an holistic way. The group established a number of key aims which include:

- Reducing the amount of time spent in the hospital setting and reducing inappropriate readmissions by working together to get things right the first time
- Coordinating support during the daytime, evening and night time to ensure the child or young person is well supported and can access activities as appropriate to maintain and support their wellbeing
- Ensuring the formulation of the risk assessment and care plan reflects the insight of a range of professionals, the child or young person, parent/carer, and this is shared and understood by all those supporting the child or young person
- Reducing escalation of needs and behaviours that can challenge wherever possible, increasing positive outcomes and experiences during the hospital stay
- Enabling early instigation of placement coordination and increase in the success of future placements due to multi-disciplinary insight, recording and reflecting on what has worked well during the hospital stay
- Reducing the time and pressure of calls and following up between Children's Social Care, Specialist CAMHS, Acute Trusts and other agencies to ascertain what support and plans are in place for the child or young person on the ward
- Ensuring everyone involved in the child or young person's care is aware of and has contact details for all other professionals and key people supporting them
- Providing multi-disciplinary support and assurance to the nursing teams so they can provide consistent care to all children and young people on the ward
- Sharing learning, skills and expertise across the workforce
- Ensuring any concerns or risks are escalated to senior managers within partner organisations.

2.2.5 A clear outcome of this work was to agree a shared process and documentation which would enable everyone involved in a child or young person's care to understand the best way to support them and allow all agencies, family members and carers to contribute towards their care plan. The protocol places an emphasis on

agencies to respond urgently to the child or young person in crisis and introduces a timeframe for establishing the multi-disciplinary team, formulation meeting, risk management and care plan production, case management, commissioning and discharge planning. Appendix III outlines the crisis protocol flowchart which show the steps to be completed when a child or young person is admitted to hospital with a mental health concern and no safe discharge destination.

- 2.2.6 The crisis support work fits within the *Getting Risk Support* area of the THRIVE Framework and the multi-disciplinary approach to developing the crisis protocol enabled us to consider the wider context in which developments sit and the interdependencies between services and initiatives that are able to provide support to children and young people in crisis.
- 2.2.7 With this in mind, the CAMHS Crisis Team liaison work within the acute trusts and the established morning huddles between acute trust staff and Specialist CAMHS take place everyday Monday to Friday within BTHFT and Airedale General Hospital (AGH). These huddles allow the opportunity to discuss any child or young person who have presented to A&E in the proceeding day/night, and any child who is being supported as an inpatient. Staff are able to dial into these huddles and if a child or young person has social care involvement, the Social Worker will be invited to attend. The morning huddles are highly valued by staff and have improved our response to children and young people presenting to and admitted to hospital. The crisis protocol was designed to utilise the morning huddles as part of the multi-disciplinary approach to managing and supporting a child or young person who is on the ward.
- 2.2.8 Youth in Mind Buddies (Youth Workers) work within BTHFT Children's Ward weekdays between 1.00pm – 3.00pm supporting children in hospital and signposting to community services following discharge, arrangements are in place for this to be introduced within Airedale General Hospital (AGH). These workers will offer additional support to any child or young person admitted to hospital with a mental health concern, including those who are being supported through the crisis protocol. The Manager of the Youth Workers is part of our task and finish group.

### **2.3 Piloting the Crisis Protocol**

- 2.3.1 The crisis protocol and associated documentation was developed and piloted within the Children's Ward of BTHFT for a three-month period which ended in July 2021. The findings from the pilot were recorded by each organisation and discussed together. The key successes recorded throughout the pilot related to the improvements to partnership working and clearer lines of communication between all those involved in the child or young person's care.
- 2.3.2 Although there was no way to accurately predict how many children and young people would be admitted to hospital during the pilot period with no safe place to discharge, it was anticipated that one or two children or young people would be supported. During the pilot period, four young people were supported, there were admissions prior to the pilot that benefited from the principles of the approach and since the pilot ended there have been multiple admissions where the process has been followed to support the young person. BTHFT report an unprecedented increase in this group of children and young people accessing hospital care, amidst Covid and other pressures currently affecting children's health.

- 2.3.3 Increases in referrals and the acuity of need of children and young people presenting to mental health services are continuing to be experienced across the system. Acute trust staff are reporting a similar picture for those presenting to A&E with a mental health concern. BTHFT analysed a total of 1,097 mental health attendances to A&E between 1<sup>st</sup> January and 31<sup>st</sup> March 2021. Of these, 2.5% (n.27) were aged between 0-9 years and 18.7% (n.205) were 10-19 years old. A quarter of 0-9 year olds were subsequently admitted to hospital and almost a third of 10-19 year olds. Monitoring trends in this data will provide some insight into how the system as a whole are supporting children and young people, and possible gaps in provision.
- 2.3.4 Through the rapid improvement work undertaken by BDCFT significant reductions to the average waiting times for specialist CAMHS were achieved. Referral to assessment times reduced from 3.4 weeks in December 2020 to 1.7 weeks in May 2021, assessment to treatment times reduced from 5.9 weeks to 2.5 weeks, and referral to treatment from 14.1 weeks to 5.3 weeks respectively.
- 2.3.5 CAMHS report that due to the increases in demand and acuity of need of children and young people, their caseloads are increasing and there is a concern that this has started to impact on waiting times. August 2021 figures show that average wait times have increased with referral to assessment times now 2 weeks, assessment to treatment times are 4 weeks, and referral to treatment times are now 6 weeks. In addition, data is showing that the caseloads for CAMHS have increased over the last 12 months from 2,719 in August 2020 to 3,589 in August 2021.
- 2.3.6 There were a number of areas which impacted on the success of the protocol during the pilot, many of these will be addressed by officially launching the protocol and rolling out joint training across health, social care and the voluntary sector. This will ensure members of staff and managers are aware of the crisis protocol, and their role and responsibility within it. Others related to the availability of support workers to provide additional support where required throughout the day, evening and night time, which is a critical part of the protocol not only for the child or young person, parents and carers, but to support the nursing staff who can struggle with capacity at times.
- 2.3.7 In addition, there were several wider issues impacting on the effectiveness of the protocol and achieving the best outcomes possible for the children and young people being supported. Many of these related to the availability of appropriate residential placements for the young people to move on to following their hospital stay, this often prolonged the length of stay in hospital and exacerbated the young person's mental health issues and behaviour. There were a number of occasions where time for an assessment and diagnosis was required which created further delays to securing an appropriate placement for the child or young person.
- 2.3.8 In September, a multi-agency needs analysis workshop was held to consider the cases of six young people who had presented to A&E who required urgent crisis care, many of the young people had presented following episodes of self-harm, with five young people's needs escalating further and requiring admission to hospital. All of the young people did not return home and required support from Children's Social Care to find an appropriate home or residential placement to move on to following their presentation to A&E and hospital stay. All the young people who were admitted to hospital were supported through the crisis protocol approach.

2.3.9 The workshop allowed time to consider the needs and experiences of this group of young people, what had gone well, what could have been improved and what lessons could we learn from their journeys to hospital, throughout their hospital stay and following discharge. The focus of the workshop was to consider the commissioning implications for this cohort of young people where there is often limited availability and choice of appropriate residential placements for them to move on to.

## **2.4 Next Steps for the Crisis Protocol**

2.4.1 The next step for the crisis protocol is for the protocol, associated documentation and guidance to be finalised and agreed by the Children & Young People's Wellbeing Leadership Team including proposals for:

- A joint training programme facilitated by leads across health, social care and the voluntary sector, with support from young people, families and carers
- The development of accessible resources to support the understanding of the protocol for professionals, children and young people, families and carers
- A roadmap for the implementation of the crisis protocol with timescales across both acute trusts, associated communications plan and agreed launch date
- Evaluation and measuring the impact of the protocol, including capturing feedback from children, young people, families, carers and professionals
- Regular review and refinement of the protocol, coproducing any changes in collaboration with professionals, children, young people, families and carers
- Commissioning skilled and experienced Support Workers who are able to respond quickly to provide support within the hospital setting
- Staff support, wellbeing and supervision
- Share the innovative work of the crisis protocol with regional and national partners to support better responses for more children and young people in crisis
- Future ambitions for shared systems and the ability for all professionals to input onto electronic case files.

## **2.5 Wider Issues for Crisis Support**

2.5.1 As discussed, there are a number of issues that are impacting on how we respond in a multi-disciplinary way to the cohort of children and young people who are in crisis or who remain a risk to themselves or others. In addition to those initiatives mentioned throughout this report, the following areas of work are planned or have recently been established to prevent children and young people's needs escalating wherever possible and respond to those who require risk support:

- Mapping existing pathways and making improvements for access to mental health and wellbeing support for Children in Care
- Building the infrastructure to support integrated commissioning and agreeing commissioning intentions based on robust data, needs analysis and evidence-based examples of best practice
- Two weekly meetings for senior managers and directors where urgent cases can be escalated for discussion and direction
- System resource profiling and mapping resources across the THRIVE framework to ascertain if we have the right amount and type of services within each quadrant, including risk support

- Coproduction of a business case and service specification for the joint commissioning of an alternative to hospital for children and young people who require a period of stabilisation, assessment and support prior to moving on to their future home
- Consideration of how the children and young people Dynamic Support Register could be adapted to include children and young people at risk of crisis
- Commission and redesign elements of our safer space for children and young people to support the prevention of admissions to hospital.

2.5.2 In addition, the Mental Health Investment Standard will support the enhancement and creation of a number of specialist services in response to where the greatest demand has been experienced, this includes CAMHS Psychiatric Liaison Service (Crisis Service), Intensive Home Treatment Team, Psychological Therapies Team and Community Eating Disorder Service for children and young people. Recruitment is currently underway for a number of additional posts.

2.5.3 Our ambition is to roll out the AMBIT (Adaptive Mentalization-Based Integrative Treatment) approach, a model that focuses on supporting children and young people and their families at times when they don't feel safe, and it hasn't been possible to resolve the situation. The approach provides multi-agency support to improve the capacity of the young person and family to self-manage until the point where they can engage in therapeutic interventions.

2.5.4 The One Trusted Referral Pathway will be the new way for children and young people to access mental health support in Bradford and Craven. The pathway will be supported by a skilled and experienced multi-disciplinary team who will work alongside existing crisis pathways to support children and young people who are in crisis, ensure children and young people have access to the right support at the right time to prevent needs escalating wherever possible and to facilitate step down support for those following a crisis.

2.5.5 In summary, there is a clear commitment to acting as one to bring about the improvements required across children and young people's mental health. The crisis protocol work is an example of where a multi-disciplinary response was required to meet the needs of this group of children and young people in crisis who may present with risks to themselves or others. We have made significant progress with this work and have addressed many challenges to how our organisations work together on a strategic and operational level, which has resulted in a more coordinated response to children, young people, their parents and carers.

2.5.6 The crisis protocol aims to address issues raised through the system wide review and coproduction events with parents, carers, young people and professionals which called for better access and awareness of crisis care pathways, and more joined up responses across agencies. In addition, the development of the protocol has provided the opportunity for shared learning across professional boundaries and mutual support for staff when working with children and young people in challenging or distressing situations. The Children and Young People's Wellbeing Programme is committed to coproducing everything we do with children, young people, parents, carers and professionals, the crisis protocol will continue to evolve with this in mind to ensure it remains current, utilised and available to support children and young people when they are in crisis.

### **3. OTHER CONSIDERATIONS**

- 3.1 The work of the Children and Young People's Wellbeing Leadership Team is feeding into the work of the Children's Service Improvement Board and forms part of the new system governance under the Health and Care Partnership Board.

### **4. FINANCIAL & RESOURCE APPRAISAL**

- 4.1 The development of an alternative to hospital for children and young people in crisis will have financial and resource implications for the system. The business case and service specification will be developed with a financial appraisal.

### **5. RISK MANAGEMENT AND GOVERNANCE ISSUES**

- 5.1 The governance for the crisis support work will sit within the Act as One Children and Young People's Wellbeing Leadership Team and will report to the Bradford Health and Care Partnership.

### **6. LEGAL APPRAISAL**

- 6.1 Not applicable.

### **7. OTHER IMPLICATIONS**

#### **7.1 EQUALITY & DIVERSITY**

- 7.1.1 The work of the Crisis Protocol Task and Finish Group is designed to ensure support is provided to the most vulnerable children and young people.
- 7.1.2 Co-production and involvement of children, young people and families is embedded in all work streams with explicit support provided to enable engagement, provide peer support opportunities, apprenticeships and employment opportunities.

#### **7.2 SUSTAINABILITY IMPLICATIONS**

- 7.2.1 None.

#### **7.3 GREENHOUSE GAS EMISSIONS IMPACTS**

- 7.3.1 None.

#### **7.4 COMMUNITY SAFETY IMPLICATIONS**

- 7.4.1 There are no community safety implications arising from this report.

#### **7.5 HUMAN RIGHTS ACT**

- 7.5.1 None.

#### **7.6 TRADE UNION**

7.6.1 Not applicable.

## **7.7 WARD IMPLICATIONS**

7.7.1 There are no direct implications in respect of any specific ward.

## **7.8 AREA COMMITTEE ACTION PLAN IMPLICATIONS**

7.8.1 Not applicable.

## **7.9 IMPLICATIONS FOR CORPORATE PARENTING**

7.9.1 Members are requested to review the information presented.

## **7.10 ISSUES ARISING FROM PRIVACY IMPACT ASSESMENT**

7.10.1 There may be a need for partner agencies to share data however this would only be with the express permission of the individual affected in the full knowledge of why and what it would be used for. GDPR principles relating to any individual's data and rights under the Data Protection Act 2018 will be respected.

## **8. NOT FOR PUBLICATION DOCUMENTS**

8.1 None.

## **9. Options**

9.1 There are no options associated with this report. Its contents are for information only.

## **10. RECOMMENDATIONS**

10.1 The committee are asked to note the progress of the crisis protocol work as part of the Act as One Children and Young People's Wellbeing Programme.

10.2 The committee are asked to support our plan and next steps to developing multi-disciplinary models of care that support children and young people in crisis closer to home and reduce the amount of time spent within the hospital setting.

10.3 The committee are asked to support the development of a business case for the proposed joint commission of a local alternative to hospital for children and young people in crisis.

## **11. APPENDICES**

Appendix I: Introduction to the THRIVE Framework  
Appendix II: Purpose and Objectives of Risk Support  
Appendix III: Children and Young People's Crisis Protocol

## **12. BACKGROUND DOCUMENTS**

None.

**Introduction to THRIVE**

The THRIVE Framework for system change (Wolpert et al., 2019) is an integrated, person centred and needs led approach to delivering mental health services for children, young people and their families that was developed by a collaboration of authors from the Anna Freud National Centre for Children and Families and the Tavistock and Portman NHS Foundation Trust. It conceptualises need in five categories: Thriving, Getting Advice and Signposting, Getting Help, Getting More Help and Getting Risk Support. Emphasis is placed on prevention and also the promotion of mental health and wellbeing across the whole population.

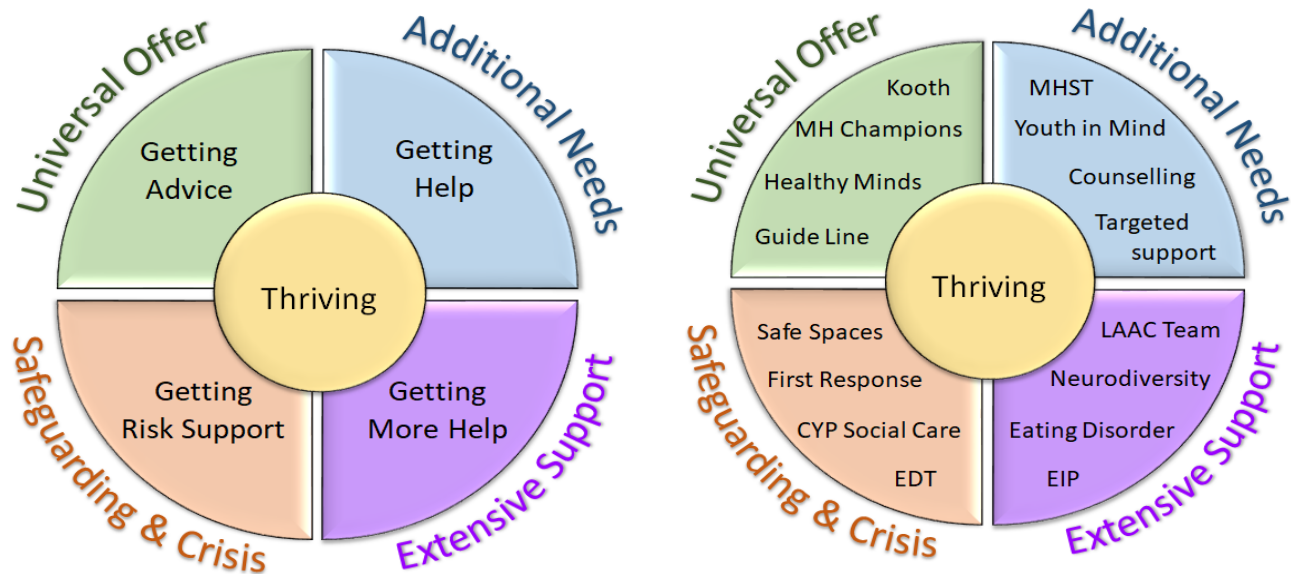
**Figure 1: THRIVE Model**





In Bradford the current redesign of our services focuses on implementing THRIVE for the 0-25 age range. Figure 2 provides an example of how a number of local services fit within the THRIVE framework, this is for illustration purposes only and is not a comprehensive picture of all services.

**Figure 2: THRIVE in Bradford district and Craven**



With regards to integrated multi-agency working, the THRIVE model recognises the importance of:

- multi-agency definitions of what mental health is and how to promote mental health
- the shared responsibility across agencies for mental health
- the substantial evidence that poverty is a major factor in the development of mental ill health in childhood
- trauma experienced by children and young people can have wide ranging impacts on their emotional, psychological, behavioural and interpersonal functioning
- multi-agency training to understand these factors and work across professional boundaries
- the involvement of local communities (including schools and other educational establishments) in developing support systems at a local level
- the need for inter-agency proactive support and advice.

The model acknowledges the interaction between the other quadrants of THRIVE and the interdependencies with other work streams within or outside of the same quadrant. In particular, there is potential for considerable overlap with the First Response provision as many young people who need risk support may first be identified or may continue to present in crisis. In these instances, First Response will provide the initial response and assessment. Young people who are already known to be in risk support will have an agreed plan that will include how to respond in an urgent situation.

Other young people may be identified after assessment and initial support from First Response as unable to benefit from an evidence-based intervention at that time, it is important that we do not 'reject' cases as we do not want to set up further thresholds to children and young people to meet before they are accepted by services.

## Purpose and Objectives of Risk Support

The proposed model aims to achieve the vision that has been co-produced with young people, parents, carers and professionals. The overall aim is that we will establish jointly developed and commissioned risk support services. The Anna Freud Centre who developed the THRIVE Framework proposes that there are three levels which form a risk support approach: Micro, Meso and Macro.

|                           |  |
|---------------------------|--|
| <b>Individual (Micro)</b> | how we manage individual cases better                                    |
| <b>Team (Meso)</b>        | how we embed new approaches in local multi-agency working                |
| <b>System (Macro)</b>     | how we change the culture at a system-wide level and across all partners |

The operational model seeks to deliver the following:

### ***At individual case level***

- Ensure joint working between CAMHS, Children’s Social Care, Police Service, voluntary sector partners and schools/colleges in cases where young people are considered to be at risk due to their psychological distress and are not able to benefit from evidence-based interventions
- Make brave decisions to step down input when there isn’t a solution and support the young person and their family, home and school setting by supporting a lead worker who has a long-term relationship with them
- Continue to provide support and advice to the lead worker and work with them to ensure the young person is supported to re-engage with other services when ready.

### ***At local team level***

- Build on the best practice already in place in some areas to ensure supportive local relationships between CAMHS, Children’s Social Care, Police Service, schools and colleges around managing young people requiring risk support, including developing risk support registers, panel meetings and joint risk management plans
- Co-locate staff where possible to support the building of relationships between local multi-agency teams
- Build a culture of providing advice and consultation on cases not currently directly receiving services
- Roll out training for professionals and leaders across the whole system in AMBIT approaches.

### ***At system level***

- Provide leadership for the risk support model at a strategic level across the ICS partners in health and local authorities
- Encourage and support local teams in taking brave decisions
- Lead the implementation of AMBIT training and approaches across the system
- Identify and embed system-wide learning and continue to refine the risk support model.

## Defining the cohort of young people appropriate for Risk Support

The risk support quadrant addresses the needs of children and young people who:

- Have emotional well-being needs and/or psychological distress
- and are currently unable/unwilling to benefit from evidence-based treatment
- and present with behaviours which, if not supported, are likely to result in harm to self or others and in some cases breakdown in living arrangements.

It is important to note that:

- Access to risk support is not dependent on where they are living e.g. family home, foster care, residential care
- The scope includes children placed into and out of area<sup>1</sup>
- Risk support is not only about managing young people in crisis, although some of the young people will present in crisis
- The above description of the cohort of young people should not be used as criteria to exclude anyone from seeking advice and support. Advice and consultation should be widely offered to all professionals where they are working with children and young people who may benefit from risk support approaches, whichever quadrant they are in and whether or not they meet the criteria above.

The young people who are likely to benefit from a risk support approach include those who:

- Are either unable to access or unable to benefit from evidence-based mental health interventions and possibly not ready or able to engage
- Need some support/advice/input in order to keep them safe where they are
- May be emotionally dis-regulated and possibly repeatedly going into crisis
- Have multiple agencies involved and often open to social care
- Are likely to generate lots of anxiety due to extreme or risky behaviour
- May be putting themselves or others in dangerous situations
- Often the system around them has broken down so it becomes a social crisis
- Family/carers/professionals working with them are asking for support but often the young person doesn't meet the criteria for services
- These young people are likely to already be requiring significant input from a number of agencies and a lot of time in discussions within and between services often escalating to director or senior manager level
- May be at risk of exclusion from school, placed in alternative provision or specialist settings.

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<sup>1</sup> This does not alter the Responsible Commissioner arrangements

Child or young person (CYP) presents to Acute Trust and cannot be discharged safely or has no safe discharge destination

Acute staff to alert Multi-Disciplinary Team (MDT). Contact CAMHS via crisis email and Children's Social Care (CSC) via advice line or Multi-Agency Referral Form (MARF) if unknown and have consent, unless section 47. Acute Trust to handover information that is gathered regarding safeguarding and health (EPR)

MDT

CAMHS identify key clinician, this would be Care Coordinator (if known to CAMHS), if unknown this would be a Crisis Worker. Key clinician to book initial assessment on the ward to risk assess the CYP time on the ward and collect information for formulation (OOH - Out of Hours Duty)

MDT complete background checks e.g. Personalised Commissioning (PCD), Police, Education, Youth in Mind, Child Exploitation, OOH support

Youth in Mind peer, parent and community support identified

CSC identify key Social Worker, this would be the allocated Social Worker (if known to CSC), if not known this may be someone from the assessment/duty team. Social Worker to book initial appointment with the ward to establish social circumstances (consent from CYP/family unless on a Section 47). Also to notify EDT OOH

Multi-agency meeting to discuss formulation and complete the risk assessment and care plan (virtual meeting). To include Acute Trust, CAMHS, CSC (Social Worker and Placement Coordination), VCS and any other appropriate agency. Document shared between agencies and feedback provided to CYP and parent/carer

CAMHS provide 111 night-time support from 5.00pm until 9.00am where appropriate

VCS and parent/carer support

CSC provide daytime support workers in line with risk assessment to facilitate appropriate activities

Daily huddles at 9.15am to communicate any updates from staff as to the CYP's presentation, progress on actions from initial planning meeting and any changes which need to be made to the multi-agency risk assessment and care plan. Meetings held virtually. Feedback provided to CYP and parent/carer.

NB: Any serious concerns to be escalated as appropriate via Head of Service (CSC) and CAMHS

CAMHS to provide relevant information on any mental health history and risk assessment to identify appropriate discharge destination

CSC to provide relevant information to identify appropriate discharge destination

If the child or young person cannot safely return home and needs to become looked after by the Local Authority, consider application for information sharing regarding joint commissioning. Ensure CYP and family feedback and SLT notifications - CCG (PCD), BDCFT, Acute trust, CSC. Agree commissioning responsibility

Placement/discharge destination and support package identified, arranged and agreed. MDT meet again to plan discharge, including transport and invite new agency to join in a handover meeting to share formulation prior to transfer

Following discharge, a review meeting is held to learn any lessons and ensure staff reflection and support, facilitated by CAMHS Consultant Psychiatrist or CAMHS named Doctor for Safeguarding as appropriate

Key for colour code:

Acute Trust

CAMHS

CSC

VCS

All agencies

24 hrs

48 hrs

72 hrs

14 days



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## **Report of the Chair of the Children’s Services Overview and Scrutiny Committee to be held on Wednesday 17 November 2021**

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**L**

**Subject:**

**Children’s Services Overview and Scrutiny Committee – Work Programme 2021/22**

**Summary statement:**

**This report includes the Children’s Services Overview and Scrutiny Committee work programme for 2021/22.**

**EQUALITY & DIVERSITY**

**Community Cohesion and Equalities related issues are part of the work remit for this Committee.**

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Cllr Geoff Winnard  
Chair – Children’s Services Overview and Scrutiny Committee

**Portfolio:**  
**Children and Families**

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**Overview & Scrutiny Area:**  
**Children’s Services**

## **1. SUMMARY**

1.1 This report includes the Children's Services Overview and Scrutiny Committee work programme for 2021/22, which is attached as appendix 1 to this report.

1.2 Also attached as appendix to this report is a list of unscheduled topics for 2021/22.

## **2. BACKGROUND**

2.1 The Council constitution requires all Overview and Scrutiny Committees to produce a work programme.

## **3. OTHER CONSIDERATIONS**

3.1 The Children's Services Overview and Scrutiny Committee has the responsibility for "the strategies, plans, policies, functions and services directly relevant to the corporate priority about services to children and young people." (Council Constitution, Part 2, 6.3.1).

3.2 Best practice published by the Centre for Public Scrutiny suggests that "work programming should be a continuous process". It is important to review work programmes, so that important or urgent issues that arise during the year are able to be scrutinised. Furthermore, at a time of limited resources, it should also be possible to remove areas of work which have become less relevant or timely. For this reason, it is proposed that the Committee's work programme be regularly reviewed by members of the committee throughout the municipal year.

3.3 The work programme as agreed by the Committee will form the basis for the Committee's work during the year, but will be amended as issues arise during the year.

3.4 This Committee has agreed to undertake a programme of detailed scrutiny reviews, with the Committee already having started the Alternative School Provision Scrutiny Review. The other scrutiny reviews include:

- Looked after Children.
- Children's Homes.
- Fostering.
- Children's Mental Health.
- Recruitment and retention of Social Workers.
- SEND, (Special Educational Needs and Disabilities).
- YOT, (Youth Offending Team).

## **4. FINANCIAL & RESOURCE APPRAISAL**

4.1 None.

## **5. RISK MANAGEMENT AND GOVERNANCE ISSUES**

5.1 None.



**6. LEGAL APPRAISAL**

6.1 None.

**7. OTHER IMPLICATIONS**

**7.1 SUSTAINABILITY IMPLICATIONS**

None.

**7.2 GREENHOUSE GAS EMISSIONS IMPACTS**

None.

**7.3 COMMUNITY SAFETY IMPLICATIONS**

None.

**7.4 HUMAN RIGHTS ACT**

None.

**7.5 TRADE UNION**

None.

**7.6 WARD IMPLICATIONS**

Work of this Overview and Scrutiny Committee has ward implications, but this depends on that nature of the topic.

**7.7 IMPLICATIONS FOR CORPORATE PARENTING**

This will be a key area of work for the Committee.

**7.8 ISSUES ARISING FROM PRIVACY IMPACT ASSESMENT**

None.

**8. NOT FOR PUBLICATION DOCUMENTS**

None.

**9. OPTIONS**

9.1 The Committee may choose to add to or amend the topics included in the 2021-22

work programme for the committee.

- 9.2 Members may wish to consider any detailed scrutiny reviews that it may wish to conduct.

## **10. RECOMMENDATIONS**

- 10.1 That members consider and comment on the areas of work included in the work programme.
- 10.2 That members consider any detailed scrutiny reviews that they may wish to conduct.

## **11. APPENDICES**

Appendix One – 2021-22 Work Programme for the Children’s Services Overview and Scrutiny Committee.

Appendix Two – Unscheduled Topics.

## **12. BACKGROUND DOCUMENTS**

Council Constitution.  
2020-21 Children’s Services Overview and Scrutiny Committee Work Programme.

# Democratic Services - Overview and Scrutiny

## Childrens Services O&S Committee

Scrutiny Lead: Mustansir Butt tel - 43 2574

### Work Programme

| Agenda Items   | Description   | Report Author                              | Comments  |
|--|---|--|---|
| <b>Thursday, 29th July 2021 at City Hall, Bradford.</b>  |   |  |   |
| Chair's briefing 30/06/21. Report deadline 15/07/21.   |   |  |   |
| 1) Ofsted inspection of LACS - Improvement   |   | Mark Douglas/Irfan Alam/Stuart Smith.      |   |
| 2) Work Planning.  | There is a need to regularly review the work programme, in order to prioritise and manage the work.                             | Mustansir Butt                             | Also including Resolution Tracking.   |
| <b>Wednesday, 22nd September 2021 at City Hall, Bradford.</b>  |   |  |   |
| Chair's briefing 01/09/21. Report deadline 09/09/21.   |   |  |   |
| 1) Ofsted inspection of LACS - Improvement.  | To also include Vital Signs, as recommended by the Committee on Thursday 29 July 2021.  | Mark Douglas/Irfan Alam.                   |   |
| 2) Workforce development aspect of the Children's Services Improvement Programme.                                  |   | Mark Douglas/Irfan Alam/Claire Threpleton. | Children's Services Overview & Scrutiny Committee recommendation from Wednesday 11 March 2021. Deferred from Children's Services Overview & Scrutiny Committee from Wednesday 7 April 2021. |
| 3) School organisation including, school expansion programme, education capital funding and academy conversations. | That a report be presented to the Committee in 12 months, which also includes a breakdown of capital and ethnic mix of schools. | Marium Haque.                              | Children's Services Overview and Scrutiny recommendation from Wednesday 5 August 2020.  |
| 4) Work Planning.  | There is a need to regularly review the work programme, in order to prioritise and manage the work.                             | Mustansir Butt.                            |   |
| <b>Wednesday, 6th October 2021 at City Hall, Bradford.</b>   |   |  |   |
| 1) Child Sexual Exploitation Child Thematic Safeguarding Practice Review.  |   | Lawrence Bone/Jane Booth/Darren Minton.    | Children's Services Overview & Scrutiny Committee recommendation from Thursday 29 July 2021.  |

# Childrens Services O&S Committee

Scrutiny Lead: Mustansir Butt tel - 43 2574

## Work Programme

| Agenda Items   | Description   | Report Author                                       | Comments  |
|--|---|---|---|
| <b>Wednesday, 6th October 2021 at City Hall, Bradford.</b>   |   |   |   |
| 2) Valley View Home Closure/Bradford's Care Homes.   |   | Mark Douglas/Irfan Alam.                            | Children's Services Overview & Scrutiny Committee recommendation from Thursday 29 July 2021.  |
| 3) Work Planning.  | There is a need to regularly review the work programme, in order to prioritise and manage the work.   | Mustansir Butt.                                     |   |
| <b>Wednesday, 13th October 2021 at Remote Virtual Meeting.</b>   |   |   |   |
| 1) Scrutiny Review - Alternative School Provision.   | Interim report back.  | Mustansir Butt.                                     |   |
| <b>Wednesday, 17th November 2021 at City Hall, Bradford.</b><br>Chair's briefing 28/10/21. Report deadline 04/11/21. |   |   |   |
| 1) Troubled Families Programme.  |   | Chad Thompson.                                      | Children's Services Overview & Scrutiny Committee recommendation from Wednesday 6 January 2021. Deferred from Wednesday 7 April 2021 meeting. |
| 2) Mental Health issues relating to Children's Social Care.  |   | Irfan Alam/Sasha Bhatt/Ali Jan Haider/Joanne Toobey | Councillor request. Was due to be considered at the meeting on Wednesday 20 October 2021, but postponed due to Officer request.               |
| 3) Work Planning.  | There is a need to regularly review the work programme, in order to prioritise and manage the work.   | Mustansir Butt.                                     |   |
| <b>Wednesday, 15th December 2021 at City Hall, Bradford.</b><br>Chair's briefing 25/11/21. Report deadline 02/12/21. |   |   |   |
| 1) Improvement Plan.   |   | Marium Haque.                                       | Children's Services Overview & Scrutiny Committee Recommendation from Wednesday 22 September 2021.  |
| 2) Child Sexual Exploitation Thematic Review 2021  | To focus on the Work undertaken to date and progress against the review recommendations.<br>To also include Bradford Partnership Annual Report. | Darren Minton/Jane Booth.                           | Children's Services Overview & Scrutiny Committee Recommendation from Wednesday 6 October 2021.   |

## Childrens Services O&S Committee

Scrutiny Lead: Mustansir Butt tel - 43 2574

### Work Programme

| Agenda Items   | Description   | Report Author             | Comments  |
|--|---|---------------------------|---|
| <b>Wednesday, 15th December 2021 at City Hall, Bradford.</b> |   |                           |   |
| Chair's briefing 25/11/21. Report deadline 02/12/21.         |   |                           |   |
| 3) Annual Report for Looked After Children.                  |   | Irfan Alam.               | Children's Services Overview & Scrutiny Committee recommendation from Wednesday 22 September 2021.  |
| 4) Youth Offending Team.                                     |   | Lisa Brett/Sarah Griffin. | Children's Services Overview & Scrutiny Committee recommendation from Wednesday 6 January 2021. Deferred from Wednesday 7 April 2021 meeting. |
| 5) In-house Fostering Service.                               | Demand/supply/quality/sufficiency/recruitment.  | David Johnston.           | Request from Childrens Services Overview & Scrutiny Committee Chair and Deputy Chair. Deferred from meeting in November 2021.                 |
| 6) Sufficeinecy Strategy.                                    |   | David Johnston.           | Children's Services Overview & Scrutiny Recommendation from Wednesday 6 October 2021.   |
| 7) Review of the School Appeals process.                     |   | Guy Close.                | Children's Services Overview & Scrutiny Committee recommendation from Thursday 11 March 2021.   |
| 8) Work Planning.  | There is a need to regularly review the work programme, in order to prioritise and manage the work.   | Mustansir Butt.           |   |
| <b>Wednesday, 19th January 2022 at City Hall, Bradford.</b>  |   |                           |   |
| Chair's briefing 23/12/21. Report deadline 06/01/22.         |   |                           |   |
| 1) Ofsted inspection of LACS - Improvement                   |   | Irfan Alam.               |   |
| 2) Residential Children's Homes & Related Issues             | To focus on the actions being taken to improve the Children's Residential Homes, be presented to this Committee.<br><br>Also the findings from the external review of the quality of provision across each of the Children's homes. | David Johnston.           | Children's Services Overview & Scrutiny Committee recommendation from Wednesday 6 October 2021.   |

## Childrens Services O&S Committee

Scrutiny Lead: Mustansir Butt tel - 43 2574

### Work Programme

| Agenda Items   | Description   | Report Author                  | Comments   |
|--|---|--------------------------------|--|
| <b>Wednesday, 19th January 2022 at City Hall, Bradford.</b>        |   |                                |  |
| Chair's briefing 23/12/21. Report deadline 06/01/22.               |   |                                |  |
| 3) Budget for Children's Services.                                 |   | Marium Haque.                  | Children's Services Overview & Scrutiny Committee recommendation from Wednesday 3 February 2021.   |
| 4) Educational Standards - Early Years to Key Stage 4.             | Future reports to contain details of key areas of improvement and actions being taken to continue to address them, focusing on the approaches being taken to improve Bradford Council's ranking in this area.         | Marium Haque.                  | Children's Services Overview and Scrutiny Committee recommendation from Wednesday 15 January 2020. |
| 5) Corporate Parenting Strategy.                                   |   | David Johnston.                | Children's Services Overview & Scrutiny Committee request from Wednesday 6 October 2021.           |
| 6) Work Planning.  | There is a need to regularly review the work programme, in order to prioritise and manage the work.   | Mustansir Butt.                |  |
| <b>Wednesday, 9th February 2022 at City Hall, Bradford.</b>        |   |                                |  |
| Chair's briefing 19/01/22. Report deadline 27/01/22.               |   |                                |  |
| 1) Audit findings relating to the quality of Social Work Practice. |   | David Johnstone.               | Children's Services Overview & Scrutiny Recommendation from Wednesday 11 March 2021.               |
| 2) Raising Attainment Strategy.                                    | That the Raising Attainment Strategy to be presented to this Committee in the New Year.   | Marium Haque.                  | Children's Services Overview & Scrutiny Committee recommendation from Wednesday 2 December 2020.   |
| 3) Workforce Development - Children's Services.                    | Committee requested that a more detailed report be presented, which also specifically focuses on the activities being undertaken and the progress being made on increasing and reducing the number of agency workers. | Claire Threpalton/ Irfan Alam. | Children's Services Overview & Scrutiny Committee recommendation from Wednesday 22 September 2021. |
| 4) Work Planning.  | There is a need to regularly review the work programme, in order to prioritise and manage the work.   | Mustansir Butt.                |  |

## Childrens Services O&S Committee

Scrutiny Lead: Mustansir Butt tel - 43 2574

### Work Programme

| <b>Agenda Items</b>                                       | <b>Description</b>   | <b>Report Author</b> | <b>Comments</b>   |
|---|--|----------------------|---|
| <b>Wednesday, 23rd March 2022 at City Hall, Bradford.</b> |  |                      |   |
| Chair's briefing 03/03/22. Report deadline 10/03/22.      |  |                      |   |
| 1) Special Educational Needs and Disability Reforms.      | That a further report be presented to the Committee in January 2021also focusing on compliance.      | Marium Haque.        | Children's Services Overview & Scrutiny Committee recommendation from Wednesday 2 September 2020. |
| 2) Young Carers.  | Specifiacly focusing on performance targets and standards.   | Cath Dew.            | Children's Services Overview & Scrutiny Committee recommendation from Wednesday 11 March 2021.    |
| 3) Work Planning.   | There is a need to regularlry review the work programme, in order to prioritise and manage the work. | Mustansir Butt.      |   |

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# Democratic Services - Overview and Scrutiny

## Scrutiny Committees Forward Plan

### Unscheduled Items

#### Childrens Services O&S Committee

| Agenda item  | Item description  | Author           | Comments  |
|--|---|------------------|---|
| 1 Performance Outturn report   |   | Phil Witcherley. |   |
| 2 Schools Forum.   | An update on the work of the Schools Forum.   | Andrew Redding.  | Monthly Electronic briefing to members.   |
| 3 Child Friendly City.   | The Committee will receive a report detailing the progress towards Bradford becoming a "Child Friendly City".   | Sue Woolmore.    | Stuart Smith suggested the report be presented to Children's Services Overview and Scrutiny, rather than the Improvement Board. Need re-scheduling from cancelled meeting on Wednesday 15 April 2020. |
| 4 Informal information gathering sessions relating to the Alternative School Provision Scrutiny Review.            |   | Mustansir Butt.  |   |
| 5 Children's Services Overview and Scrutiny - Programme of Scrutiny Reviews.                                       | That a programme of Scrutiny Reviews be undertaken across key areas within Children's Services which include:<br><br>(a) Alternative School Provision, (including Home Schooled Children).<br>(b) Looked after Children.<br>©Children's Homes.<br>(d) Fostering.<br>€Children's Mental Health.<br>(f) Recruitment and retention of Social Workers.<br>(g) SEND, (Special Educational Needs and Disabilities).<br>(h) YOT, (Youth Offending Team). | Mustansir Butt.  | Children's Services Overview and Scrutiny recommendation from Wednesday 9 October 2019.   |
| 6 School Organisation including school expansion programme, educational capital funding and academy converstaions. |   | Marium Haque.    | Children's Services Overview and Scrutiny recommendation from Wednesday 5 August 2020.  |

## Childrens Services O&S Committee

| Agenda item | Item description  | Author                                     | Comments   |
|-------------|---|--|--|
| 7           | This Committee requests that the Children's Services Overview &Scrutiny Committee considers aspects of the Impower Contract that relate specifically to Children's Services.                                  | Mark Douglas/Chris Chapman/Parveen Akhtar. | Recommendation from Corporate Overview & Scrutiny Committee on Thursday 23 July 2020.              |
| 8           | 8 Sepcial Educational Needs and Disability Reforms, (SEND).   | Jane Hall.                                 | Children's Services Overview & Scrutiny Committee recommendation from Wednesday 2 September 2020.  |
| 9           | 9 Opportunity Area.   | Kathryn Loftus/Lee Turner.                 | Children's Services Overview and Scrutiny Committee recommendation from Wednesday 15 January 2020. |
| 10          | 10 Impower.   | Mark Douglas/Joanne Hyde.                  | Children's Services Overview & Scrutiny Committee recommendation from Wednesday 2 September 2020.  |
| 11          | 11 Early Help and Prevention Service.   | Lisa Brett.                                | Children's Services Overview & Scrutiny Committee recommendation from Wednesday 2 December 2020.   |
| 12          | 12 That the Committee keeps an overview of the Council's plans for remote learning taking place across the District and requests that officers present new information when it is available to the Committee. | Marium Haque/Sharon Sanders.               | Children's Services Overview & Scrutiny Committee recommendation from Wednesday 6 January 2021.    |
| 13          | 13 School Expansion.  | Marium Haque.                              | Children's Services Overview & Scrutiny Committee recommednation from Wednesday 22 September 2021. |
| 14          | 14 Better Start Bradford  |  | Children's Services Overview & Scrutiny Committee recommednation from Thursday 29 July 2021.       |
| 15          | 15 Young Carers.  | Cath Dew.                                  | Briefing to be circulated to members.  |

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## Childrens Services O&S Committee

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| Agenda item  | Item description  | Author        | Comments   |
|--|---|---------------|--|
| 16 Improvement Plan.                                       | That an informal remote session be arranged with the Commissioner at a date to be arranged and for this Committee to discuss the remit of the work to be undertaken and any key findings to date.   | Steve Walker. | Children's Services Overview & Scrutiny Committee recommendation from Wednesday 22 September 2021. |
| 17 Informal session with Children's Services Commissioner. | This Committee requests that an informal and remote session be arranged with the Commissioner and members of this Committee at a date and time to be decided, to discuss the remit of the work to be undertaken and any key findings to date. |               | Children's Services Overview & Scrutiny Committee recommendation from Wednesday 22 September 2021. |

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