



# Corporate Parenting Board

Minutes - 19 November 2014

## Attendance

**Chair** Cllr Val Gibson (Lab)

### Labour

Cllr Paula Brookfield  
Cllr Dr Michael Hardacre

Cllr Julie Hodgkiss  
Cllr Rita Potter

Cllr Martin Waite

### Conservative

Cllr Patricia Patten

## Employees

Emma Bennett  
Carl Craney  
Dr Roberta Fry

Alison Hinds  
Lorraine Millard

Dr Chitra Ramalingam

Assistant Director - Children, Young People and Families  
Democratic Support Officer  
Consultant Clinical Psychologist - Black Country Partnership NHS Foundation Trust  
Head of Looked After Children  
Designated Senior Nurse Safeguarding Children, Wolverhampton City Clinical Commissioning Group  
Designated Doctor Looked After Children Wolverhampton City Clinical Commissioning Group

*Item No.*     *Title*

**1        Apologies for absence (if any)**

Apologies for absence had been received from Cllrs Jasbinder Dehar and Mrs Christine Mills.

**2        Declarations of interests (if any)**

Cllr Dr Michael Hardacre declared personal interests in any matters pertaining to Woodthorne School [Chair of Governors], Central Learning Partnership (Heath Park, Moseley Park and Woden Primary Schools) [Director], Base 25 [Director], City of Wolverhampton College (Governor) and Graiseley Primary (Governor).

**3        Chair's announcement**

The Chair, Cllr Val Gibson, invited those present to introduce themselves. Introductions were duly made.

**4        Minutes of the previous meeting (23 October 2014)**

Resolved:

That the minutes of the meeting held on 23 October 2014 be confirmed as a correct record and signed by the Chair subject to the deletion of "Catch 22" in Minute No. 2 and the substitution therefor of "Base 25".

**5        Matters arising**

There were no matters arising from the minutes of the meeting held on 23 October 2014.

**6        Looked After Children - Children and Adolescent Mental Health Service (CAMHS) Annual Report**

Dr Roberta Fry presented the Child and Adolescent Mental Health Services (CAMHS) Looked After Children (LAC) Annual Report for the period April 2013 to March 2014. She drew to the attention of the Panel that the graph in respect of "referral Rate 2013/14" did not include data on ethnicity/gender etc. due to a change in the data recording system but offered to respond to any individual questions on that element of the report outside the meeting.

Cllr Paula Brookfield referred to the number of teenagers referred to the service and enquired as to whether earlier referrals would lead to a reduction in the number of on-going cases. Dr Fry explained that dealing with the LAC population was not as straightforward as dealing with mainstream cases inasmuch as the CAMHS was required to work within the care system. She reminded the Board that the majority of the LAC population were not subject to referral to CAMHS. The timeliness of a referral was a key issue but was also dependent on when the young person was ready to participate in the referral process. Cllr Paula Brookfield commended the concept of the "Agony Aunt" type column being made available on the website which

the young people were likely to find a more accessible format for initial contact with CAMHS.

With regard to the Referral Rate, Cllr Dr Michael Hardacre enquired as to whether any comparisons on either a regional, national or family group basis were available in order to assist the Board in understanding the scale of the issue and the Council's performance. Dr Fry advised that such information was not available and reminded the Board that not all authorities with Social Service responsibilities commissioned a dedicated service through CAMHS for LAC. He also referred to the "advantage of consultations to Social Work Team" section of the report and commented that it did not include any reference to consultations being undertaken with young people. He suggested that comparisons with other authorities on the approaches adopted would be helpful.

Cllr Martin Waite enquired as to the position with Care Leavers and whether they would be transferred into the mainstream service once they had left local authority care. He also enquired as to whether the Service engaged with the Children in Care Council (CCC). Dr Fry reported that the service worked with young people up to the age of 18 when they would be eligible to transfer to the mainstream mental service for support. In the majority of cases, however, the individual declined to continue to receive support. With regard to the CCC, she informed the Board that she attended meetings and intended to consult on the proposed "Agony Aunt" type column. Cllr Martin Waite enquired as to whether the CCC ever put forward ideas for consideration by CAMHS. Dr Fry advised that she was not aware of any suggestions having been made and this was such great reliance was placed on testimonials received. Cllr Martin Waite suggested that the period of transition between adolescent and adult services was likely to be difficult for the young person especially if the adult service practitioners were unaccustomed to dealing with LAC cases. Dr Fry responded that there was a need for a Group to be established in order that key mental health issues including the breakdown of family relationships could be addressed in transitional care planning.

Cllr Julie Hodgkiss reminded the Board that this particular service was not a statutory requirement but that the Council endeavoured to provide a service to those young people in its care. She suggested that there was a demonstrable need for performance management measures to ensure that the aims of service provision were achieved. Emma Bennett reported that the Council commissioned the service and that the service as a whole was being reviewed with a new specification being developed. Dr Fry advised that LAC were also able to access the mainstream CAMHS at the point of leaving care.

Cllr Paula Brookfield referred to a comment made during the presentation of the report inasmuch as there was likely to be an element of a reduced workload following the closure of residential units and enquired as to how this would arise given that the young people would still be in the care of the local authority. Dr Fry explained that in the event of any Out of City placements, the young people would fall under the care of the Host Authority and that it would no longer be necessary to conduct consultation exercises with the residential establishments. The Chair, Cllr Val Gibson, informed the Board that the intention was to recruit a number of specialist Foster Carers' to look after those young people currently residing in residential accommodation. Dr Michael Hardacre suggested that the proposed position would

be an improvement on the existing with the incidence of issues reduced. Emma Bennett reported that discussions were ongoing with CAMHS in relation to the support to be provided to the specialist Foster Carers'. Dr Fry concluded by reminding the Board that to some young people, residing in a residential unit was preferable to living with a family purely because of past experiences of family living.

Resolved:

That the report be received and noted and the best thanks of the Board be extended to Dr Roberta Fry and the CAMHS Team.

## 7 **Health Care Service for Looked After Children - Annual Report**

Lorraine Millard and Dr Chitra Ramalingam presented the Health Care Service for Looked After Children Annual Report for the period 1 September 2013 to 31 August 2014. They explained in detail the changes in the provision of the service following the re-organisation of the National Health Service from 1 April 2013 with the responsibility for delivery of the service transferring to the Wolverhampton City Clinical Commissioning Group (WCCCG), the various statutory requirements and steps which had been or were being taken to fulfil these duties.

Cllr Paula Brookfield welcomed the information provided and the progress which had been made over the years. Cllr Rita Potter acknowledged the comments made and enquired as to the age at which sexual health issues were addressed with young people with Mental Health and/or Learning Disability issues. Emma Bennett responded that this particular issue was addressed through schools rather than the NHS. Dr Ramalingam explained that support was provided by both the Sexual Health Service of the WCCCG and School Nurses albeit that for LAC it would be via the NHS LAC Team. Alison Hinds advised that there was also a "Drop In Centre" where advice was available to LAC by the LAC Nurse. Cllr Paula Brookfield opined that for those children with moderate or severe learning disabilities early support was required. Emma Bennett suggested that this was not a specific issue relating only to LAC but also to the wider young people population.

Cllr Dr Michael Hardacre welcomed the report but expressed an element of concern inasmuch as the WCCCG was comprised of General Practitioners and questioned whether the particular needs with children's mental health and sexual health issues were understood fully. He suggested that there was a possibility of non-compliance with the provisions of the Children's Act 2004. Specifically he enquired as to whether the following questions on the report could be responded to:

- Para 4.2 – was the contractual agreement in place to secure the expertise of designated professionals i.e. designated doctors and nurses for safeguarding children and Looked After Children;
- Para 5.2 – was a Designated Doctor LAC, Named Nurse LAC and a LAC Administration Officer in place and had consideration been given to increasing staffing numbers in the light of the increase in the LAC population;
- Para 5.4 – whether comparisons on a local / regional or family group basis were available in respect of the performance regarding Initial Health Assessments and Review Health Assessments;
- Table 4 - the full title of the acronyms "IHA" and "RHA".

Lorraine Millard reported on the changes at both the WCCCG and the Royal Wolverhampton NHS trust in relation to the Care Service for LAC and on the further steps proposed. She advised on the actions of the Commissioner for Mental Health (including young people) where a multi-service management group had been established to address the new services to be provided. With regard to the question in relation to Para 4.2 – this was currently being addressed. Dr Ramalingam advised that with regard to Para 5.4 that this issue was also being addressed and issues including the number of clinics provided and the number of referrals received on time or late were included within the deliberations. She explained that whilst the number of clinics provided was considered to be sufficient, the staffing resources available did not include provision for annual leave / sickness absence etc. Junior Doctors were now being trained to undertake the necessary assessments and the majority of assessments were now conducted on time. With regard to assessments, work was underway with partners to improve the rate and timeliness. “IHA” referred to “Initial Health Assessment” and “RHA” referred to “Review Health Assessment”.

Cllr Dr Michael Hardacre requested that comparator figures be provided in respect of referral statistics. Emma Bennett explained that national statistics were only available on an annual basis. Lorraine Millard advised that the situation, as she understood it, was replicated across the country with very similar issues being experienced.

Cllr Julie Hodgkiss commented that the quality of information provided to the Board on these issues had been improved but questioned as to whether this was, once again, due to the dedication and passion of the individuals involved. Lorraine Millard assured the Board that progress in this particular area would continue. Emma Bennett emphasised that the WCCCG had embraced the Children’s Agenda as a whole and that improvements in this area were not just concentrated on the LAC area.

Cllr Mrs Patricia Patten welcomed the report and thanked those responsible for the work they were undertaking.

Resolved:

That the report be received and noted and the thanks of the Board be extended to Lorraine Millard and Dr Chitra Chamalingham and their colleagues for the work undertaken.

## 8 **Performance Monitoring - Looked After Children (LAC)**

Emma Bennett presented Performance Monitoring Information as at 30 September 2014. She advised that the report had been refreshed since the iteration which had been presented to the Board on 23 October 2014 but that variations were minimal.

She drew to the attention of the Board that the percentage of LAC who had had a dental check in the last 12 months (only those who had been LAC for over 12 months) was higher than that for non LAC. With regard to “Average School Attendance” comparisons with the 2012/13 data had also now been provided.

Resolved:

That the report be received and noted.

9 **Exclusion of the public and press**

Resolved:

That in accordance with Section 100A(4) of the Local Government Act 1972 the press and public be excluded from the meeting for the following items of business as they involve the likely disclosure of exempt information contained in paragraph 1 of the Act, namely information relating to any individual.

10 **Councillors visits to establishments**

No visits to establishments had been undertaken since the last meeting of the Board. Cllr Martin Waite reported that he would be undertaking a visit to Merridale Street in the near future.

Resolved:

That the dates of proposed visits be re-circulated to members of the Board.