DONCASTER METROPOLITAN BOROUGH COUNCIL

CHILDREN AND YOUNG PEOPLE OVERVIEW AND SCRUTINY PANEL

THURSDAY, 13TH OCTOBER, 2022

A MEETING of the CHILDREN AND YOUNG PEOPLE OVERVIEW AND SCRUTINY PANEL was held at the COUNCIL CHAMBER, DONCASTER on THURSDAY, 13TH OCTOBER, 2022 at 4.30 PM

PRESENT:

Chair - Councillor Leanne Hempshall

Councillors Bob Anderson, Steve Cox, Susan Durant and David Nevett

ALSO IN ATTENDANCE:

Lee Golze, Assistant Director Partnerships, Early Interventions and Localities Jane Cresswell, Head of Service Virtual School Stephanie Douglas Head of Service Early Intervention and Localities Martyn Owen Head of Service Inclusion Jess Touhig – Young Advisor Owen Dungworth – Young Advisor

APOLOGIES:

Apologies for absence were received from Councillors Tim Needham, Laura Bluff, Antoinette Drinkhill and Nesbit

		<u>ACTION</u>
6.	APOLOGIES FOR ABSENCE	
7.	TO CONSIDER THE EXTENT, IF ANY, TO WHICH THE PUBLIC AND PRESS ARE TO BE EXCLUDED FROM THE MEETING.	
	There were no items on the agenda.	
8.	DECLARATIONS OF INTEREST, IF ANY.	
	There were no items on the agenda.	
9.	MINUTES OF THE MEETING HELD ON 17TH MARCH AND 27TH JUNE 2022	
	The minutes of the meeting held on 17 th March and 27 th June 2022, were agreed as a correct record and signed by the Chair.	

10.	PUBLIC STATEMENTS	
	There were no public statements.	
11.	ELECTIVE HOME EDUCATION / CHILDREN MISSING EDUCATION AND ALTERNATIVE PROVISION IN DONCASTER	
	The Panel gave consideration to the report and addressed the following issues:	
	Children missing in education case closures — in response to a question relating to the 692 children whose cases had been closed and missing in education, the following was explained. When a child moves into or leaves an area and do not have a place at a new school, they are recorded as a child missing education. Once they were registered then the cases were closed.	
	Additionally a child could be removed from school by parents and still remain in the local authority area but not registered at another school. Parents were therefore contacted to re-register their child with a school.	
	Checks were undertaken by the Local Authority in all cases to ensure children were not missing education and safe.	
	Reduced school timetables – with regard to the number of children on a reduced timetable, the figures July 2021 were provided as follows:	
	5 hours or less = 46 children	
	10 hours or less = 111 children	
	25 hours or less = 260	
	The figures included children that required alternative provision plus main stream school packages.	
	It was explained that if a child was not receiving 25 hours per week the Local Authority had a duty to inform the behaviour and inclusion team to address the case. The children and young people were RAG rated during this set process and discussed at a weekly meeting of the casework group. For example, it was possible that a young girl could be pregnant and would undertake 25 hours curriculum but also in alternative provision undertaking life skill classes in readiness for the birth of her child. If children and young people were missing education for longer than acceptable the cases were escalated to the Assistant Directors who then held the process to account. It was stressed there was a good internal scrutiny mechanism to address this issue.	
	<u>Virtual school</u> – it was explained that every Local Authority much establish a virtual school and acts as a data collection point for children in care. The virtual school recently stood alone, but had now been	

realigned to a Head of Service to ensure all teams work more closely with streamlined systems.

The Virtual school:

- ensured each child or young person in care had an education plan;
- allocated pupil premium and held schools to account on how it was used to ensure the child reached their targets and potential;
- provided a pot of money for Social Workers to apply for, for example, to purchase push bikes for post 16 student to get to school, college or work; and
- held extended duties to raise attendance and attainment for children and young people who have a social worker.

<u>Elective home education</u> – It was explained that there were many reasons why a child was home educated and noted that not all parents declared the reasons why. These included parental dissatisfaction with school, special educational needs not being met, school parental conflict and the Gypsy and Traveller community generally wishing that their children be educated at home from a secondary school age. It was noted that officers worked closely with the Gypsy and Traveller community and some children do continue to secondary education.

Education Welfare Officers work closely with schools where there is conflict with parents and facilitate meetings to achieve the correct result for the child or young person. The conflicts were generally relating to attendance, behaviour and exclusions.

In response to a supplementary question, it was explained that there was no noticeable trend of children and young people being removed from certain schools. After Covid, generally there was an increase in parents wishing to continue to home educate but when officers explained their responsibility, curriculum requirements to home education and that the online assistance would not continue then children and young people returned to school.

Of the three major causes the following were attributed to each cause:

2021/22

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43 = dissatisfaction with schools

19 = Special educational needs not met

191 = School and parent conflict. This figure was derived from evidence that officers had found and even though parents must self-declare this has not been done in many cases.

2021/22 figures as of date of meeting

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19= dissatisfaction with schools

18= Special educational needs not met

22 = School and parent conflict

Education and Health Care Plans (EHCP)

2020 = 5

2021 = 7

2022 to date = 5

With regard to whether the number of requests for an EHCP had increased it was noted that there had not been a noticeable increase following covid.

In response to whether the 20 week statutory timeframe was being met, it was explained that the 20 week period started from the agreement that an assessment process would be undertaken. There was a detailed process to carry out before decisions could be made on whether to provide an EHCP. Concern was expressed that 20 weeks out of a school year was a long period of time but it was explained that the process required all parties, including schools and educational psychologists to provide evidence. Because a parent had requested an EHCP it would not automatically mean one was required but children and young people were not then left without support. There were other avenues that could be used, for example, through SENDIASS (SEND Information Advice Support Service) that provides support and guidance.

Nurturing a family and child friendly borough – A Young Advisor questioned how the Authority had worked towards the priorities set out by Children and Young People in the new Children and Young People's Plan. It was explained that the Plan was a three year plan

and developed by children and young people and within it were 8 priorities that required focus. The Local Lived experience was heard through the children's voice which was a key asset to shape the service response. Young people have stated they wished for more participation and engagement with over 15,000 presenting themselves at holiday free school meals, arts and life skill programmes plus a range of other activities. The Youth Advisory Board held the Local Authority to account against the Plan.

Following a subsequent question from a Young Advisor it was explained that to hear about the lived experience various pieces of work had been undertaken with Young Advisors during 2021 eg. Lifestyle survey and work on mental health, in turn this shaped the provision required in schools, then work moved onto the Special Needs Strategy consultation with the Youth Council and LADDER Group particularly. There was much face to face discussion through planned activities continuing through 2022/23. It was acknowledged that it was difficult to hear the voice of children who were home educated therefore work had been undertaken with parents within this community to find the best ways to consult with EHE children and young people.

<u>Pressures on social workers</u> – Nationally social workers were in demand for Looked After Children and there was a lot of pressure placed upon them. With regard to children who were presented for assessment figures showed Doncaster was high nationally, but at a national average that required social care action. Within Doncaster additional support and a supervision framework had been put in place for social workers however the challenges they faced should not be underestimated.

<u>Figure breakdown in future reports</u> – it was acknowledged that future reports including detailed figures could be made more reader friendly. It was noted that if the figures were broken down to a ward level, it wouldn't necessarily provide accurate information due to some children and young people not attending school where they lived.

RESOLVED that:-

- 1. The report, be noted; and
- 2. The statistic provided within the report be broken down to a ward level where possible and provided to the Panel.

12. POST COVID IMPACTS ON CHILDREN INCLUDING CHILDREN'S MENTAL HEALTH (STRATEGY UPDATE) 0 - 3 YEARS

To commence discussion on the item, the Chair stated that she had been contacted by a teacher / SENCo who had raised the following points with her relating to covid impact on children and wished to share them with the Panel:

- This year had seen children with abilities ranging across the full scale, but a huge number being able to write their names, count accurately, have amazing listening skills a wide range of vocabulary and imaginative play skills. The time they had spent at home had been well used providing lots of quality interaction. However, some of the children need extra support in these areas;
- Seen emotional resilience / reassurance required when children leave their parents for the school day and sometimes during the day;
- Children struggling following lock down tend to be Years 1 and 2 due to missed learning and find it difficult when reaching KS1 due to missing building the foundations of learning in nursery and reception;
- Across age ranges there were children with gaps in their knowledge, poor spelling, handing writing, grammar and punctuation;
- There were a number of gaps to fill.

<u>School Mental Health First Aider</u> — Following a question, it was explained that not all schools had a mental health first aider but held a safeguarding lead and there were efforts to replicate this for mental health. However, each school must hold a Mental Health Charter. Doncaster's success with the Trailblazer scheme some years ago, was noted, bringing significant resources to provide mental health support teams bridging the CAMHS service and schools (where they could receive low level support managing emotions and normal feelings and ensure that children and young people are aware that it is ok to be worried or nervous about things).

Figures from approximately two years ago showed that 80% of schools held a mental health lead but as part of the Strategy this was being revisited.

The Local Authority was working closely with schools, with the first school summit being held at the beginning of the year with a representative present from virtually every school in the borough and was repeated during the summer term. Schools were receiving support with issues such as ensuring all staff were properly trained. Joint work was also being undertaken by developing a mental health

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pledge to ensure they were healthy schools to be learning in. In-depth Audits had also been undertaken within 20 schools and work was continuing in this area.

With regard to mental health training for teachers there was a massive push to help schools recognise mental health and where to find help. It was noted that the DfE provided a funded course for senior leadership training. Doncaster's Educational psychology team had been successful in winning a bid to deliver it to schools so they would not have to pay a cost of approximately £1000. Additional resources had been allocated to schools for supporting staff, for example, with training.

<u>Kooth App</u> - Members were of the opinion that the "App" was a good idea but had concern about children or young people who did not have an electronic device, access to internet or shared devices with the whole family.

The Panel was reminded that at the start of the Covid pandemic all children and young people that had a social work received an electronic device. Following that time schools were then responsible for making sure the machines were maintained with the Virtual school funding safety upgrades and parental controls, because the Government funding only lasted for the first year. It was noted that there should not be many children or young people that do not have access to the App and it was still in it's infancy therefore being monitored. It was explained that Kooth had been into the majority of schools to provide training.

<u>CAMHS</u> – It was reported that the Doncaster team was fully staffed and was in the top quartile for access nationally. It was stressed that Covid had changed the service to some of the referrals being undertaken by phone call rather than face to face reducing the wait time. The wait times to be seen were as follows:

Emergency: within 2 hours

Urgent: within 24 hours

Non urgent: 86% were seen within 4 weeks.

In response to a question, it was confirmed that if a child or young person was found to be suicidal, had acute psychosis or acute eating disorder then an assessment would be undertaken and shape the next steps including a care plan. If it was determined there was a risk to life then the child or young person would have to remain in Accident and Emergency for a period of 24 hours under supervision and on occasions an inpatient psychiatric bed may be required.

With regard to staff recruitment the Panel was reminded of the recruitment drive in 2015 when the system was flooded with funding

and budgets tripled. It was stressed that with the best will in the world larger cities tended to attract more staff, however, it was noted that there were not enough young doctors wishing to work in childrens health care and paediatrics.

General Development Assessment (GDA) referrals – these were undertaken through the health commissioned pathway with the waiting time to see a clinician at 2 and a half years but to have a virtual assessment it was much speedier.

Additional to the reference relating to changes made to the referrals following the SENCo network, the referral form was rewritten based on the feedback from SENCos, a number of drop in sessions were held to discuss what happened before referrals were made to the GDA and in November the form would be relaunched. To summarise work was being undertaken to ensure the correct information was included and being requested and to ensure the children and young people who were waiting for a GDA were receiving the relevant support from appropriate partners.

Early Intervention funding system – it was noted that a lot of time and expense was spent on assessing young people for an EHCP (Education, Health and Care Plan) to identify support to allow schools to meet the specific needs of a child or young person. However many local authorities allow those funds to be allocated much earlier in the child's journey to a point where the child or young person shows a change in their needs and ability to cope with the school environment. Therefore where Local Authorities have these early intervention models in place it could lead to a reduced number of EHCPs, specialist placements and sometimes reduce the need for out of authority placements. Therefore the authority was keen to see a model of this type in Doncaster and was currently in development with a view to piloting within the next calendar year.

<u>Governance structure</u> – In response to a question relating to the membership of the following groups, it was agreed that the terms of reference and membership of the Boards would be circulated to the Panel:

Safeguarding Board
Early intervention steering group
Young People's mental health strategy group
SEND Board

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<u>Social and mental health needs</u> – In response to a question from a Young Advisor, relating to the growth in the number of pupils with social and mental health needs it was explained that the numbers could not be predicted however, whilst there had been improvements in some trends long term intelligence was required and awareness within

	the school system to ensure it was managed. It was noted over the course of the next academic year one piece of specific work was to introduce and increase in specialist provision within localities for Social Mental Health needs because to many children and young people were seeking help out of the borough.	
	RESOLVED that:-	
	1. the report be noted; and	
	2. terms of reference and membership of the Boards would be circulated to the Panel:	
	Safeguarding Board	
	Early intervention steering group	
	Young People's mental health strategy group	
	SEND Board	
13.	OVERVIEW AND SCRUTINY WORK PLAN AND THE COUNCIL'S FORWARD PLAN OF KEY DECISIONS	
	The Senior Governance Officer introduced the Overview and Scrutiny Work Plan and Council's Forward Plan of key decisions to the attention of the Panel.	
	RESOLVED: That the information, be noted.	