

CHILDREN AND YOUNG PEOPLE SCRUTINY COMMITTEE

7 September 2015

PRESENT – Councillor Lister (in the Chair); Councillors Crudass, Crumbie, Curry, L. Hughes, KE Kelly, Mills, Storr, C. Taylor and Wright. (10)

APOLOGIES – Councillor Mrs. D. Jones; Miss M Regan, Mrs G Harrison, Mr. P Rickeard; and Jenni Cooke. (4)

STATUTORY CO-OPTees – None (0)

NON-STATUTORY CO-OPTees – None (0)

OFFICERS IN ATTENDANCE – Miriam Davidson, Director of Public Health; Sharon Raine, Head of Organisational Planning; Kirstie Sutherland, (0-19 Area Co-ordinator (Area 3); Catherine Shaw, Relationship Education and Sexual Health Co-ordinator; and Allison Hill, Democratic Support.

CYP10. DECLARATION OF INTERESTS – There were no declarations of interest reported at the meeting.

CYP11. MINUTES – Submitted - The Minutes (previously circulated) of the meeting of this Scrutiny Committee held on 22 June 2015.

RESOLVED – That the Minutes be approved as a correct record.

CYP12. PERFORMANCE MANAGEMENT – Pursuant to CYP39/Apr/15, the Head of Organisational Planning gave a presentation to give Members graphical information on Quarter 4 performance relating to those strategic indicators for areas under the remit of this Scrutiny Committee 'giving children and young people the best start in life'.

Members were advised that they will continue to receive quarterly overviews of the strategic indicators and shorter term indicators including costs of service to enable them to monitor and understand more clearly the services being delivered and outlining the desired outcomes.

Members examined the graphical data relating to Excess Weight among Primary School Age Children in Reception year for 2013/14 which was at the North East average and had some concerns regarding this data and it was suggested that there may be a need to undertake joint working with Health and Partnerships Scrutiny to examine the data further; the Rate of Under-18 Conceptions which was reducing from the 2013/14 figures but was still slightly above the national average; the percentage of all infants due a 6-8 week check that are totally or partially breastfed which was under the national average and it was acknowledged by the Director of Public Health and Members that improvements need to be made; the percentage of Women Who Smoke at Time of Delivery was recording a decrease in the numbers but still above the national average; Hospital Admissions caused by Unintentional and Deliberate Injuries to Children (0-4 years of age), (4-14) and (15-24), which

showed higher levels in Darlington compared to the North East and Members were pleased to note that this has been highlighted regionally as a key line of enquiry; Children in Need per 10,000 population under 18 however there was no new data from 2012/14 which showed Darlington below the National Average; and Children Looked After by Darlington Borough Council per 10,000 Population under 18 and recent 2015 data showed no significant changes; Children Looked After by the Local Authority per 10,000 Population under 18 showed that Darlington was above the North-East and England average although the data was from 2013.

With regard to the Percentage of sessions missed by Primary and Secondary school pupils from 2012 data, Members were concerned that Darlington was below the North East average but higher than the National average and further information has been requested.

Members were also advised that GCSE performance data will be available for the next quarter.

RESOLVED – That the performance management data be noted.

CYP13. DARLINGTON DIRECTOR OF PUBLIC HEALTH REPORT 2014 – The Director of Public Health submitted a report (previously circulated) to present the Director of Public Health Annual Report 2014 and gave a presentation to Members on her second annual report following the transfer of public health responsibilities from the National Health Service (NHS) to local government, as part of the Health and Social Care Act 2012.

The Annual Report submitted with the theme 'Public Health: A Shared Agenda' provided a progress update on 2013-14 and work which will be on-going to address key priorities for 2015-16. The main focus of the 2014 Annual Report is to promote partnership working to tackle the causes of health inequalities and encourage local action by all sectors and not just the NHS or the Council.

The Annual Report outlines the link between health inequalities and social inequalities and how action is needed across all the social determinants of health e.g. housing, education, employment, poverty, over a person's lifetime.

The Director of Public Health's presentation focused on areas of consideration relating to this Scrutiny Committee and children's health in Darlington. It was highlighted that childhood obesity statistics showed that 11.2 per cent of 4/5 year olds and 18.7 per cent of 10/11 year olds were classified as obese; 20.4 per cent of mothers were smoking at time of delivery; and 62.9 per cent of mothers were breast feeding. It was also noted that under 18 conception rates were falling; 55.4 per cent of young children were achieving a good level of development at the end of reception; 6.7 per cent of 16-18 year olds are NEET; and 20.6 per cent children (under 16 years) were living in poverty.

Members in particular expressed their concern at the number of children classified as obese and the Director of Public Health confirmed that a recommendation of the report was for a shared Key Line of Enquiry (KLOE) about child obesity with partners across all sectors.

The presentation also outlined the further recommendations for 2014/16 to include 'stop smoking support' via the Baby Clear programme; develop an Oral Health Strategy as part of a Tees Valley wide approach; in partnership design and 'test' a 0-19 pathway for health and wellbeing for children and young people; share key lines of enquiry about self-harm with partners across sectors; and explore a mental health resilience model with the Children and Young People Collective.

Members also raised concern at the poor rate of young children achieving a good level of development at the end of reception and the Troubled Families Initiative was confirmed as a positive for addressing the needs of these families. A question was raised as to whether special needs children were included in these statistics and the Director of Public Health agreed to check the data and also comparatives to the National and North East averages and advise Members accordingly

RESOLVED – (a) That this Scrutiny Committee receive the Director of Public Health Annual Report 2014.

(b) That the thanks of this Scrutiny Committee be extended to the Director of Public Health for her presentation.

(c) That this Scrutiny monitor the progress of the recommendations contained within the Annual Report for 2015/16.

CYP14. 2014 HEALTHY LIFESTYLES SURVEY – The 0-19 Area Co-ordinator (Area 3) and the Relationship Education and Sexual Health Co-ordinator gave a presentation to advise Members of this Scrutiny Committee on the outcomes of the 2014 Healthy Lifestyles Survey using social norms to influence positive behaviour.

In 2014 seven schools completed the survey which included 3651 pupils taking part (75 per cent of available school population). The Survey initially covered alcohol, drugs and volatile substances but has now been expanded to cover tobacco, bullying, relationships and sexual health and diet/exercise.

The presentation advised Members that in relation to alcohol, results from the survey showed that 85 per cent of young people have never been drunk ; 94 per cent of young people have not used drugs; 94.5 per cent of young people have not smoked in the last 7 days and 84 per cent of young people have never smoked; two-thirds of young people do 60 minutes of physical exercise every day; 85 per cent of young people in Darlington are not having sex; 95 per cent of respondents agreed that it is not ok for young people to be bullied although 31 per cent of young people questioned said that they had been bullied within the last year.

The survey also outlined the key results from the Survey to inform work with schools and young people for each of the areas questioned.

Members were also advised about a pilot of the Healthy Lifestyles Survey which was carried out at the end of May in eight primary settings. In total 641 surveys were completed from year 5 and 6 pupils and included 50 questions covering a range of topics including alcohol, bullying, internet safety, diet and exercise, relationships,

smoking, energy drinks and emotional health and well being. The Primary Pilot key findings were also outlined in the presentation and an Expert Group will evaluate the project.

It was also highlighted that a new structure has been established to review and refresh the Healthy Lifestyles Survey for 2015 as result of key stakeholders including local services, educational settings and young people; and future work with individual schools will be carried out to address the findings of the survey and a Team Around the School (TAS) will Action Plan with the schools.

RESOLVED – (a) That the results of the 2014 Healthy Lifestyles Survey be noted.

(b) That the results of the 2015 Survey be reported to this Scrutiny Committee.

CYP15. WORK PROGRAMME – The Director of Neighbourhood Services and Resources submitted a report (previously circulated) to give consideration to the work programme items scheduled to be considered by this Scrutiny Committee and to consider any additional areas which Members suggest should be added to the previously approved work programme.

With regard to Review Groups Members noted that the Child Poverty Review Group Final Report findings and recommendations had been noted by Cabinet at their meeting on 7 July, 2015; and that the STEM Applications/Apprenticeships Review be ceased as Members had concluded that there was a lot of work being done from an educational point however they could not progress with this Review further and that the matter be referred to Place Scrutiny to address with regard to employer engagement.

Members agreed to include in the Work Programme a report on the Ofsted Improvement Plan; recommendations and education results; and school improvement to the next meeting scheduled for 2nd November, 2015 and that the Virtual Head Teacher present a report to Scrutiny in January, 2016.

It was also agreed to include in the Work Programme future items to examine the Commissioning Health Service changes and progress towards the transition of commissioning to this Council, with consideration for joint working with the Health and Partnerships Scrutiny Committee in early 2016; and to examine workforce sufficiency; skills, recruitment and retention.

Members also referred to items that were still to be programmed in relation to budgetary implications for Health Visitors and the Family Nurse Partnership and the extension of funding to 21 in Children in Foster Care.

RESOLVED – That the current status of the work programme be noted and the additional items be programmed for future meetings.

