

DRAFT

EAST AYRSHIRE OFFICER LOCALITY GROUP FOR CHILDREN AND YOUNG PEOPLE

**MINUTES OF MEETING HELD ON WEDNESDAY 1 JULY 2009 AT 1000 HOURS
IN MEETING ROOM 1, EAST AYRSHIRE COUNCIL HEADQUARTERS, LONDON
ROAD, KILMARNOCK**

PRESENT: Joanne Sharp, Healthcare Manager; David Rowlands, Head of Primary Care Development; Carol Fisher, Healthcare Manager; Cathy Roarty, Lead Public Health Practitioner; Grace Moore, Assistant Director of Public Health; and Sharon Hardy, Health Promotion Manager, all NHS Ayrshire and Arran; Brian Cameron, Area Manager, Skills Development Scotland; and Susan Taylor, Head of Service: Children and Families; Janie Allen, Principal Officer, Early Education & Childcare; Katie Kelly, Community Health Partnership Facilitator, Corporate Support Community Planning and Partnership Unit; Angie Bennett, Leisure Development Manager and Jim Lyon, Principal Officer, Children & Young People, all East Ayrshire Council.

ATTENDING: Gillian Hamilton, Administrative Officer, East Ayrshire Council.

CHAIR: Joanne Sharp, Healthcare Manager, NHS Ayrshire and Arran.

MINUTES OF PREVIOUS MEETING

1. There were submitted and approved as a correct record, Minutes of the previous meeting held on 13 May 2009 (circulated).

MATTERS ARISING

2.1 Governance Arrangements

It was agreed to add the following to the remit of the Group:

“To identify the health needs, promote health and wellbeing and reduce inequalities for children and young people”.

2.2 Child Health Strategy

Cathy Roarty had collated information on the Community Health Strategy and submitted a response to Kay Gilmour. A further report would be submitted to the CHP Committee incorporating the response from East Ayrshire.

2.3 CEL36

Joy Tomlinson had provided feedback on the status of funding bids. Most of what was requested has been delivered or subsumed into other provisions. Cathy Roarty would provide feedback to unsuccessful bidders.

2.4 Dietician Service

CHP funding was no longer available to support the Dietician Service to roll out the work in Hillside Special School to other establishments. Further funding options were being explored.

2.5 Primary Care Strategy

David Rowland gave a presentation on the Primary Care Strategy.

The Strategy was concerned with “shifting the balance of care” and represented a new way of working to address financial and ageing population challenges.

The Strategy had 3 focuses:-

- building relationships between the public, partners and within primary and secondary healthcare and using relationships to target services and ensure best quality;
- shifting the balance of care into the community through (i) avoidance of health crises. This involved empowering patients to take control of their own medical condition; (ii) alternatives to hospital admission for those patients in need of care. This involved a shift from hospital to GP practice based care; and (iii) opportunities for the development of specialist roles in practices, and for provision of secondary care in the community; and
- action for vulnerable groups, linking to the early years and national rehabilitation frameworks.

Recommendations would be made to the NHS Board, followed by a consultation period until 30 October 2009. Detailed proposals would then be submitted to the NHS Board in December 2009, which would include an outline of public consultation responses.

The CHP had an important role both in finalising the draft Strategy for submission to the NHS Board, and in the implementation of the Strategy. The CHP had a further role in engaging communities at locality level during the consultation process.

Challenges were presented in terms of timescales and gaps in community engagement opportunities and the group were invited to consider routes for community consultation, particularly with young people, ethnic minorities, Bowhouse prisoners and people who were not affiliated to any group.

The following suggestions were put forward and agreed:-

- existing Youth Forums;
- LAAC Forum;
- KULOC;
- Ready for Work Training;
- Lifelong Learning Group;
- Leisure Services;
- Homeless Hostels;
- Young Offenders Addiction Services;
- School Nurses in Circle Time; and
- direct contact with schools through the Head of Service.

Further suggestions would be forwarded direct to Katie Kelly, who was responsible for collating all information.

At the conclusion of the consultation period, public information sessions would be held, World Cafe style, providing a constructive and open approach to consultation.

The CHP would receive a copy of the Strategy when it goes live.

The Group thanked David for his presentation and he left the meeting.

LEARNING AND DISABILITY STRATEGY

3. Grace Moore was invited to give a presentation on the Learning and Disability Strategy.

It was noted:-

- that this was a Strategy for health improvements within the target group of adults with learning disabilities and children with learning difficulties, focusing on epidemiology, different morbidities, and the complex needs of a group who are not homogenous and so needed a person centred approach. There were also significant mental health issues within this target group. The Strategy was concerned with the health of the target group, carers and professionals working with the target group;
- priorities included lifestyle programmes, training for carers, health needs of carers, and the development of care pathways for common conditions, concentrating on active living and encouraging people to take control of their own health;
- the Strategy initially targeted transitions from children's to adults services;
- CHP's were the vehicle for taking forward this Strategy with the target group and carers. Two Development Workers would work with the CHP's; and
- the emphasis was on carers as key partners and the resourcing of carers.

An issue was highlighted regarding the withholding of information, for reasons of confidentiality, from carers of people who were incapable of making decisions due to mental incapacity.

The Strategy also sought to tackle the issue of people with learning disabilities who were parents with accommodated children, and parenting skills for this group. These issues were addressed through the Parents Support Initiative with some funding for research to follow up on longer term outcomes and implications, linked to lifestyle programmes delivered in schools and community based work. It was noted that lifestyle qualifications were now available for workers through the University of West of Scotland and Caledonian University.

The group thanked Grace Moore for her presentation.

ANNUAL REVIEW OF CHILDREN AND YOUNG PERSONS SERVICE PLAN

4. Jim Lyon submitted the Draft 2008/09 Review of the East Ayrshire Children and Young People's Services Plan 2008-2011.

It was noted that the indicators in Appendix A were straight lifts from current thematic Action Plans and most of these are consistent with the single outcome agreement. Some alignment of specific actions will be necessary when the new sub groups are established, mainly around the current Improving Opportunities Theme.

It was agreed that any further updates be forwarded to Jim for inclusion in the final draft which would be circulated to Members.

SUB-GROUP FEEDBACK

5. It was noted that the Group would establish five Sub-Groups for:-

- Early Years Early Intervention (including pre birth to 12 years)
- Health & Wellbeing
- GIRFEC, for assessment and integrated work;
- Young people; and
- Corporate Parenting.

Given that some groups have not met yet there may be changes to titles but this would require to come back through the Officer locality Group.

It should be noted that the Improving Community Safety Thematic Group of the Community Plan continues with representation from the Officer Locality Group and a very strong connection with child protection and reference to the Child Protection Committee.

However, the relationship to the Child Protection Committee, Adult Protection Committee, Domestic Abuse Forum and Ayrshire Wide Structures had to be clarified within the CHP structural diagram as produced by Katie.

Jim Lyon would raise through Improving Community Safety whether the Domestic Abuse Forum should be a full partner with performance management accountability in relation to the Officer Locality Group for Children & Young People or a group in the middle of the structure with strong links to and representation from the Officer Locality Group for Children & Young People. It was noted that Domestic Abuse is an adult agenda with clear implications for children and young people's services.

The Child Health Group would take forward issues raised by the Sub-Groups.

It was agreed that:-

- (i) the CHP structure was evolving and required to be upgraded on an ongoing basis. Katie Kelly would contact members for updates;
- (ii) Members would bring issues from other groups to the Sub's;
- (iii) there be commonality in terms of the core purpose of the Sub's;
- (iv) the Sub's would focus on information sharing on single agency activity;
- (v) the Sub's would ensure progress against relevant Action Plans and have an overview of the performance of the Single Outcome Agreement, in addition to progressing specific issues and tasks;
- (vi) the profile of children and young people be raised within the Alcohol and Drug Partnership, the focus of which had been on treatment; and
- (vii) Sub-Group feedback would be circulated to the Group.

CORPORATE PARENTING ACTION PLAN

6. It was noted:-

- (i) the Action Plan had been developed by Partners and signed off by the Community Planning and Partnership Board in principle, subject to fine tuning. A range of Officers had been involved in the development of the plan;

- (ii) in particular, good progress was being made with the Foster Care Recruitment Campaign and Care Leaver commitments, with Care Plans being developed to meet individual needs; and
- (iii) future progress reports would be submitted to the Corporate Parenting Sub-Group.

It was further noted that CEL16 related to the Corporate Parenting Action Plan.

There followed discussion on operational changes within Learning Partnerships and it was noted:-

- (i) whilst core support teams would be retained and Officers were reviewing arrangements for ensuring best returns, learning partnerships would however cease to exist in the current format;
- (ii) where previously there had been 9 learning partnerships, there was a possibility of establishing 9 clusters within 2 Learning Communities in the north and south of the Authority, and a greater role for Designated Senior Managers and Deputies, maintaining links through Social Work, Health and Leisure. Further work was required to ensure continuity of relationships already established for the sharing of information, connections and processing referrals; and
- (iii) the new Social Work management structure and a reduction in School Nurses would have an impact on arrangements.

CHILD AND ADOLESCENT MENTAL HEALTH SERVICES

7. It was noted that a paper would be circulated in due course on CAMHS locality based structure which would support more partnership working and pathways. ADHD would be included on the Agenda for the next Officer Locality Group meeting.

PROPOSED ROLL-OUT OF INTEGRATED ASSESSMENT FRAMEWORK

8. Jim Lyon circulated the note of the Integrated Assessment Framework Group meeting held on 5 June 2009.

It was noted:-

- (i) the IAF Group had agreed on a geographical approach to rolling out this component of GIRFEC, concentrating on new cases;
- (ii) an implementation plan would be prepared by Jim Lyon prior to roll-out commencing;
- (iii) staff would be identified for the first tranche of roll-out, to implement training;
- (iv) there would be links to the data sharing partnership;
- (v) paperwork would continue until the new multi-agency store was operational;
- (vi) roll-out required careful planning and
- (vii) there is a need to consider the requirements of social work which does not sit co-terminously with any of the geographic areas in the roll out

CEL16 (2009) IMPLEMENTATION OF ACTION 15 OF THE LOOKED AFTER CHILDREN AND YOUNG PEOPLE: WE CAN AND MUST DO BETTER

9. Joanne Sharp circulated CEL16 to be implemented by Health in consultation with Partners.

HMIE INSPECTION OF CHILD PROTECTION SERVICES

10. Joanne Sharp reported on the forthcoming HMIE Inspection of Child Protection Services.

HEALTHY WEIGHT, CATRINE

11. Angie Bennett circulated a report which provided an update on East Ayrshire's successful bid to form a Scottish Government led pathfinder healthy weight community within the settlement of Catrine.
It was agreed to note the report.

CARERS STRATEGY

12. The Carers Strategy was circulated to Group Members and comments were requested.

CROSSHOUSE HOSPITAL EDUCATION SERVICE

13. It was reported and noted that Crosshouse Hospital Educational Service had been awarded Health Promoting School status; the first hospital to achieve this accolade in Scotland.

FIT AYRSHIRE BABIES

14. It was reported and noted that Fit Ayrshire Babies had been highly commended in the recent national Health for Kids Awards.

INFORMATION ITEMS SUBMITTED FOR NOTING

- 15.
- Breast feeding and introduction of solid foods; and
 - Children and young people's mental health indicators: background briefing.

FUTURE AGENDA ITEMS

- 16.
- Preventing youth offending.

The meeting terminated at 1225 hours.