

# Minutes of Children's Services and Education Scrutiny Board

**Monday 8 January 2024 at 6.00pm  
in the Council Chamber, Sandwell Council House, Oldbury**

- Present:** Councillor Hinchliff (Chair);  
Councillors Mayo, Pall, Uddin and Weston.  
Barrie Scott Co-opted Member - Church of England dioceses  
of Birmingham and Lichfield Representative and Yvonne  
Ologbo - Parent Governor representative.
- Officers:** Sally Giles – (Assistant Director - Strategic Partnerships and  
Commissioning); Gillian Ming (Children's Safeguarding  
Partnership Business Manager); Samantha Harman (Holiday  
Activity and Food Programme Manager); Claire Tate (Senior  
Transformation Lead for Emotional Wellbeing and MH);  
Emma Aspinall and Nicky Mountford (Child and Adolescent  
Mental Health Service) and Stephnie Hancock (Deputy  
Democratic Services Manager).

## 1/24 **Apologies for Absence**

Apologies for absence were received from Councillors Allcock,  
Ashraf and Choudry.

## 2/24 **Declarations of Interest**

There were no declarations of interest.



3/24 **Minutes**

**Resolved** that the minutes of the meeting held on 13 November 2023 are approved as a correct record.

4/24 **Additional Item of Business**

There were no additional items of business to consider.

5/24 **The Effectiveness of the Sandwell Children's Safeguarding Partnership's Response to Serious Child Safeguarding Incidents**

The Board considered a report and presentation detailing the operations of the Sandwell Children's Safeguarding Partnership in relation to its response to serious child safeguarding incidents.

Introduced in 2018 the Local Safeguarding Partnerships gave equal responsibility to three statutory agencies which included local authorities, Police and the then Clinical Commissioning Groups (now known as Integrated Commissioning Boards (ICBs)) for agreeing the local multi-agency safeguarding arrangements. Sandwell had added a fourth equal statutory partner, Sandwell Children's Trust, which delivered the children's social care functions on behalf of the Council. These four key agencies were known locally as Sandwell Children's Safeguarding Partnership (SCSP).

The four leading partners at SCSP were required to agree on ways to co-ordinate their safeguarding functions; act as a strategic leadership group in supporting and engaging other partners and stakeholders; and implement local and national learning including from serious child safeguarding incidents.

The SCSP focused on children's welfare across Sandwell. It was the ambition of the service that every child in Sandwell was able to grow up in a safe, stable and loving home. The service worked to provide high quality and effective support to any child who needed



it. Individuals, agencies and organisations worked as a partnership to ensure and promote the welfare of all children across Sandwell.

Local authorities, working with partner organisations and agencies, had specific duties to safeguard and promote the welfare of all children in their local authority area. The SCSP had specific duties which included taking action if they believed a child had suffered or was likely to suffer significant harm, and maintaining robust processes where abuse or neglect was known or suspected to be a causal factor, and if a child had died or been seriously harmed.

Since the inception of the SCSP on 1 April 2019, there had been 20 serious child safeguarding incidents across Sandwell which had been scrutinised through the Rapid Review process. Of those 20 cases, 13 (65%) had met the criteria for further learning and improvement activity, known as a Local Child Safeguarding Practice Review (LCSPR). Across the 13 LCSPRs that had been initiated over this period, the following themes had emerged:-

Emerging Theme	Reoccurring in no. of LCSPRs
Under 1s	7/13
Child from Black and minoritized ethnic background	6/13
Mental ill health of parents/carers	10/13
Issue with information sharing/communication	13/13
Neglect	10/13
Core safeguarding procedures/processes (e.g. application of thresholds, quality of assessments, plan progression)	10/13
Substance/alcohol misuse (child or parent)	8/13
Domestic abuse	7/13

Requirements for undertaking rapid reviews and timescales for the statutory review processes were set in guidance and monitored by the National Child Safeguarding Practice Review Panel (NCSPRP). All rapid reviews in Sandwell were submitted to the NCSPRP within the prescribed 15 working days timescale, with the NCSPRP concurring with the decision of the Sandwell Learning from Practice Reviews (SLPR) Panel in 18 of the 20 serious incidents considered.



Where (LCSPRs) were commissioned, they were to be completed through to publication within 6 months, however this had not been the case in Sandwell due to other competing processes such as criminal and coroner's investigations. The Sandwell Children's Safeguarding Partnership (SCSP) had published 6 of the 13 LCSPRs in full. 3 LCSPRs were currently embargoed awaiting the conclusions of parallel proceedings and 3 remained in progress.

The SCSP framework for undertaking this function was highly regarded both regionally, and nationally where Sandwell had been referenced as an area of good practice and cited by the NCSPP in its annual report for 2020/21.

Following comments and questions from members of the Board, the following responses were provided and issues highlighted:-

- the proportion of BME children coming into contact with the Partnership was disproportionate in relation to Sandwell's population and there was in some cases a connection to gun, gang and knife crime and it was recognised that further work was required to engage with communities;
- a Cultural Competence Framework and associated training had been developed and regionally recognised;
- the effectiveness of the service was dependent on partnership working, which could always improve;
- challenges in partnership working came from being unable to share data and transfer data across different systems;
- services shared data across local authority boards where appropriate;
- it was important that any lessons learned were imbedded into practice and oversights and mistakes not repeated;
- across the Black Country Sandwell had the highest proportion of child deaths;
- Sandwell worked to ensure lessons were learned from all serious incidents.



The Board agreed that it would be beneficial to review the effectiveness of the Sandwell Children's Safeguarding Partnership's annually and this would be added to its work programme.

6/24

## Child Friendly Sandwell

The Board considered a report outlining the proposal for the Council to submit an expression of interest, and subsequent application, to UNICEF to receive Child Friendly City (Borough) status. The Cabinet was due to consider the proposal on 17 January 2024.

A Child Friendly City was a place that respected and promoted the rights of children and young people and provided them with opportunities to participate in its social, cultural, political and economic life. Developing a Child Friendly Borough involved engaging with children and young people as active citizens, ensuring their safety and wellbeing, and creating inclusive and accessible spaces and services for them. A Child Friendly Borough was not only beneficial for children and young people, but also for the whole community, as it fostered social cohesion, diversity, sustainability, and innovation.

The guiding principles of building a Child Friendly Borough mirrored the overarching principles of the United Nations Convention on the Rights of the Child. The initiative required adoption of the following principles for good governance:-

- equity and inclusion
- accountability and transparency
- public participation
- adaptability and sustainability

Delivering a Child Friendly Borough would support the Council to deliver its commitments to equality and diversity and key elements of both the Corporate Plan and the Improvement Plan.

Following comments and questions from members of the Board, the following responses were provided and issues highlighted:-



- work had already begun on ensuring that all service areas were considering the impact on children and promoting a wider culture change within the organisation following feedback from other authorities that had sought Child Friendly status;
- the process was long and likely to take between three and five years from expression of interest to assessment and award of the status;
- if the Cabinet approved the proposal, work would commence on a task and finish group and building a partnership network focused on project delivery;
- the project would require reaching out to children and young people across the borough from all backgrounds;

The Board welcomed the proposal wholeheartedly and members undertook to support the process by advocating for Child Friendly Sandwell in everything they did.

**Resolved** that the proposal for Sandwell to seek Child Friendly City (Borough) Status from the United Nations is endorsed.

7/24

## Health and Wellbeing of Students - Thrive Board Update

The Board received a report and presentation detailing the work of the Sandwell Thrive Board in the development, implementation, and review of its strategic plan to ensure that the emotional mental health and wellbeing needs of children and young people in Sandwell were met.

The Sandwell Thrive Board was established in November 2021 and was responsible for the development, implementation, and review of a strategic plan to ensure that the emotional mental health and wellbeing needs of children and young people of Sandwell were met in a timely, effective, and sustainable manner.

The Board had a strategic focus, with representation from health, education, social care, police, schools and the voluntary sector. It



was chaired by the Senior Children and Young Person Mental Health Commissioner, Black Country Healthcare NHS Foundation Trust. Members worked within their respective governance and monitoring processes of each organisation, to enable timely development and delivery.

The Board noted the following key headlines:-

- the Thrive Board ensured multi-agency governance for the Thrive Plan in Sandwell;
- the Thrive Board maintained a skilled and knowledgeable multi-agency workforce through delivery of emotional wellbeing and mental health training;
- the Thrive Board ensured that engagement with children, young people and families continued through the SHAPE Board and wider young people's fora, and development areas;
- there was a development of a 'whole system' approach to commissioning, identifying commissioning gaps and improving transition;
- the service continued to address the surge in demand caused by the Coronavirus pandemic;
- I Thrive Framework:-
  - mapped all services within the framework to help understand both commissioned and non-commissioned services;
  - a youth-specific iThrive Model and a co-produced video to demonstrate the services and how to access them had been developed;
  - a Sandwell-specific directory for emotional wellbeing and mental health services had been created;
  - events for practitioners to enhance their understanding had been facilitated;
  - facilitation of Q&A sessions with specialist leads, and commissioned services had been held to improve communication across partners;
  - additional digital services had been commissioned to support children who find it difficult to access mainstream services;



- Mental Health Support Teams:-
  - Mental Health Support Team professional was provided to 51 of 131 schools;
  - a new focussed activity programme was in place including LGBTQ+, holiday activities, and Advantage mentoring programme with West Bromwich Albion FC;
- School Nursing:-
  - there continued to be interactive emotional health and wellbeing roadshows in secondary schools across Sandwell;
  - drop-in sessions across secondary schools were held monthly around the 'Here for You; programme;
  - there existed a confidential chat health text messaging service for young people;
- Education – Attendance Service:-
  - there were nine Attendance Service officers, across the service who were assigned to 14 schools;
  - there was a termly meeting to conduct an Attendance 'Audit';
  - the service worked closely with Exploitation and Youth Justice;
  - a recent forum attended by over 30 partner agencies, enabled school representatives to find agencies that could support their students' needs;
  - a new panel had been established to discuss cases where multiple interventions had been tried to improve school attendance;
- Sandwell Emotional Wellbeing Programme – Phase 2:-
  - a consultation was held as part of Phase 1 with schools and young people and identified specific needs, of children and young people which enabled a more targeted approach;
  - Phase 2 of the programme had been successfully implemented from October 2022 to December 2023;
  - a total of 51 schools had accessed support throughout Phase 2;
  - since June 2021, over 2,600 children and young people had been able to access support;



- voluntary sector providers had accessed training to adopt an approach to provide young people with consistent emotional well-being language;
- the programme had been nationally recognised at the Municipal Journal Awards 2023 for its partnership and innovative approach to providing early intervention;
- ICB Health Inequalities funding:-
  - funding was targeted to provide provision where gaps were identified;
  - focus was on young black boys, new to uk children, unaccompanied asylum-seeking children aged 16-25, and families;
  - there had been a significant number of referrals for focused areas and for providers in applying for additional funding to support young people;
  - there had been a recognition of the need for additional assistance for the emotional wellbeing of headteachers;
- Children in Care and Care Leavers 'Getting Help' service:-
  - there was a dedicated service for children and those with care experience to access 'getting help';
  - there were three focussed pilot programmes planned, starting January 2024;
  - there had been the development of a care leavers specific emotional wellbeing resource;
- Social, Emotional Competency Framework:-
  - training needs of individuals had been identified for those who worked with children and young people;
  - the framework had been rolled out to service areas over the last 12 months;
- Senior Mental Health Leads and Forums:-
  - there had been 92 schools that had successfully trained a School Mental Health Lead;
  - termly peer support forums had been set up to provide a supportive community;
- the Thrive Board had identified a number of challenges including:-
  - demand for emotional wellbeing and mental health services had increased by 20%;



- funding was not recurrent, which impacted on the provision of early intervention support for children in need;
- there was a shortage of staff across key services including School nursing, the voluntary sector, and CAMHS;
- children and young people continued to miss school due to mental health reasons and anxieties;

The Board was also updated on the going initiatives and developments across the service:-

- Thrive Board multi-agency workshop:-
  - a Sandwell Thrive strategy was under development which would align the service with the wider Black Country Health Foundation Trust Transformation plan, SEND strategy, and Public Health Better Mental Health Strategy;
  - ongoing opportunities for joint commissioning of services was under review;
- Education:-
  - the service was collaborating with CAMHS SPA, in instances where schools were not specified in the referral, to progress the referral process quicker;
  - the service was working to gather information from schools regarding the reasons for modified timetables, which would enable the attendance team to provide support where necessary;
  - where attendance had decreased due to specific needs, active work with Inclusive Learning Service would take place to discuss and handle cases ensuring that the child was placed in the appropriate educational provision;
- Emotional wellbeing programme:-
  - the service was moving toward the implementation of Phase 3 of the programme;
  - there was an open grants round to support community-based provision and deliver provision based on identified needs and gaps;



- there was an increased engagement by CAMHS and Inclusive Learning Services to deliver Sandwell's Emotional Wellbeing Charter Mark with voluntary providers;
- Mental Health Support Teams:-
  - key developments were underway including autism and mental health, ADHD and mental health, staff wellbeing;
  - the development of support mechanisms for home-schooled children, young people at risk of exclusion, and children exhibiting emotional-based school non-attendance;
- School Nursing:-
  - there was an increase drop-in services to fortnightly;
  - the service continued to promote the emotional well-being roadshows to increase participation in schools.

Following comments and questions from members of the Board, the following responses were provided and issues highlighted:-

- issues around attendance continued post pandemic, a significant number of families had disengaged with education and work was underway to re-engage them, with dedicated attendance officers in place;
- all schools had access to the attendance officers and the service provided;
- support was provided to families through targeted support meetings and wider support through schools and other agencies;
- the number of children and young people who were electively home educated continued to increase and had significantly increased since the pandemic;
- those who were electively home educated had access to dedicated support from within the Council which provided guidance and signposted resources;



- if a school was not accessing services to support the health and wellbeing of children and young people the service reached out to engage with them;
- staff and children and young people were engaged to understand their views and how the service operated from their perspective;
- the waiting lists for CAMHS support was around 21 weeks after the first referral with a follow up meeting around 50 weeks later;
- those who required urgent CAMHS support had a 2 week waiting time;
- there was an average of 400 referrals to CAMHS every month and around 100 children and young people on the waiting list at any given time;
- the stress on the CAMHS service was national and related to the shortage of staff, limited funds available and numbers of referrals;
- the reasoning behind CAMHS referrals were recorded and monitored.

#### 8/24 **Scrutiny Action Tracker**

The Board noted progress on actions and recommendations from previous meetings.

#### 9/24 **Work Programme and Cabinet Forward Plan**

The Board noted the Cabinet Forward Plan as it related to Children, Young People and Education.

Meeting ended at 8.03pm

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