WARRINGTON Borough Council

To: **Members of the Protecting the Most Vulnerable Policy Committee**

Councillors:
Cllr M Smith - Chair
Cllr M Creaghan - Deputy Chair
Cllrs D Bennett, K Buckley, H Cooksey, R Knowles, S Krizanac, K Morris and G Welborn

Professor Steven Broomhead
Chief Executive

Town Hall
Sankey Street
Warrington
WA1 1UH

11 June 2018

Protecting The Most Vulnerable Policy Committee

Tuesday 19 June 2018 at 6.30pm

Council Chamber, Town Hall, Sankey Street, Warrington, WA1 1UH

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A G E N D A

Part 1
Items during the consideration of which the meeting is expected to be open to members of the public (including the press) subject to any statutory right of exclusion.

Item	**Page Number**

1. **Apologies for Absence**

To record any apologies received.

2. **Code of Conduct - Declarations of Interest**
Relevant Authorities (Disclosable Pecuniary Interests) Regulations 2012

Members are reminded of their responsibility to declare any disclosable pecuniary or non-pecuniary interest which they have in any item of business on the agenda no later than when the item is reached.

3.   Minutes

To confirm the minutes of the meeting held on 3 April 2018 as a   3 - 10
correct record.

4.   Better Care Fund and Integration

To consider a report by Mike Alsop, Head of Integrated   11 - 18
Commissioning, on behalf of Steve Peddie, Executive Director
Families and Wellbeing, on the Better Care Fund and integration.

**5.   Update on the Work of the Transforming Care Partnership for
Cheshire and Merseyside**

To consider a report by Mike Alsop, Head of Integrated   19 - 32
Commissioning, and Margi Butler, Mental Health and Learning
Disability Commissioner (NHS Warrington CCG), on behalf of Steve
Peddie, Executive Director Families and Wellbeing, on
Transforming Care for People with a Learning Disability and/or
Autism.

**6.   Closing the Achievement Gap for Children and Young People from
Disadvantaged Backgrounds**

To consider a report and presentation by Hilary Smith, Head of   33 - 54
Education Services and SEND, on behalf of Steve Peddie, Executive
Director Families and Wellbeing, on Closing the Achievement Gap
for Children and Young People from Disadvantaged Backgrounds.

7.   Work Programme 2018/19

To consider a report on behalf of Councillor Matt Smith, Chair of   55 - 66
the Committee, on the draft Work Programme 2018/19.

8.   Schedule of Meetings for 2018/19

To note the schedule of meetings for 2018/19, as follows:-

- 18 September 2018
- 11 December 2018
- 19 February 2019
- 2 April 2019

Part 2

Items of a "confidential or other special nature" during which it is likely that the meeting
will not be open to the public and press as there would be a disclosure of exempt
information as defined in Section 100I of the Local Government Act 1972.
NIL

**PROTECTING THE MOST VULNERABLE
POLICY COMMITTEE
3 April 2018**

Present: Councillor M Hannon (Chairman)
Councillors: K Buckley, M Creaghan, H Cooksey, R Knowles, M Smith
and G Welborn

Also in Attendance: Councillors M McLaughlin, Executive Board Member
Public Health and Wellbeing and P Wright, Executive
Board Member Statutory Health and Adult Social Care

PTMV36   Apologies for Absence

Apologies for absence were received on behalf of Councillors K Morris and
S Krizanac

PTMV37   Code of Conduct - Declarations of Interest

There were no declarations of interest submitted.

PTMV38   Minutes

Decision,

That, subject to the inclusion of the following wording after Minute PTMV29,

"PTMV29A   Minutes

That the minute of the meetings held on 12 December 2017 and 17 January
2018 be agreed as correct records",

the minutes of the meeting held on 20 February 2018 be agreed as a correct
record.

PTMV39   Modern Slavery

The Committee considered a report by Steve Peddie, Executive Director Families
and Wellbeing, and Margaret Macklin, Head of Adult Safeguarding and Quality
Assurance, on Modern Slavery. Members had also received copies of some
presentation slides produced by the UK Modern Slavery Training Delivery Group.
Ms Macklin highlighted key issues from the report and presentation slides and was
supported by Mr Peddie.

The report included information on Modern Slavery in the UK and within that context,
the position in Warrington and the work which was taking place both to combat it and
to offer support to victims. Background information on the Modern Slavery Act 2015
was provided, which had introduced the offences of 'slavery, servitude and forced or
compulsory labour' and 'human trafficking'. The legislation covered a variety of

issues, including forced labour, debt bondage, sexual exploitation, criminal exploitation, domestic servitude and human trafficking. The Act provided for the following:-

- Two new civil orders to prevent Modern Slavery;
- Establishment of an Anti-Slavery Commissioner;
- Protection for victims;
- Seizing traffickers assets and channelling money towards victims for compensation payments;
- A new statutory defence for victims compelled to commit criminal offences; and
- Creation of child trafficking advocates.

Further information was provided about the implications for local authorities arising from the Act, the local situation and the Cheshire Modern Slavery Strategy 2017-19. Some key local activity included:-

- The authority's role as a 'first responder' under the Act;
- Establishing a Warrington Anti-Slavery Network and Membership of Cheshire Anti-Slavery Network;
- Awareness raising across the workforce;
- Publication of a transparency statement in relation to the authority's supply chains and business operations;
- Understanding the nature of modern slavery locally, including what might be hidden;
- Identification of service leads;
- Support for Police operations;
- Working with the Police to support victims; and
- Development of responses and intervention protocols.

The presentation sides included detailed information on the following:-

- The aims and objectives of the presentation;
- Types of exploitation;
- The Palermo Protocol ("Act - Means - Purpose");
- Human Trafficking;
- Modern Slavery Act 2015;
- Exploitation of children;
- Signs and indicators (and signs and indicators regarding children);
- Barriers to victims disclosing their situation;
- Reasons for vulnerability;
- Enticements supporting recruitment;
- National Referral Mechanism (NRM);
- List of top countries of origin (2016 data) for adult and child referrals;
- UK NRM data from 2016 by types of exploitation;
- Support for victims under the NRM;
- What to do if you have concerns;
- Vulnerability, what to look out for and potential victims;
- Modern Slavery Helpline details; and
- Look, Help and Understand

Members raised a number of issues, as follows:-

- There had been reports in some areas of looked after children being involved in drug running - *Response:* The local authority had a good relationship with Cheshire Police's Modern Slavery Unit. It was recognised that organised criminals often wished to use 'fresh faces', ie. not those who had previously been in trouble with the law.
- There had been numerous reports in the press across the country of organised gangs carrying out Child Sexual Exploitation (CSE), although fortunately no such widespread activity had been identified in Warrington.
- The quote in the presentation slides by William Wilberforce was felt to be particularly poignant - "You may choose to look the other way , but you can never say again that you did not know".

Decision,

(1)   To note the report on Modern Slavery and the additional information included within the presentation slides.

(2)   To endorse the actions which have already been implemented to tackle modern slavery and to support the planned areas for development as identified in the report.

PTMV40   Out of Borough Placements

The Committee considered a report by Steve Peddie, Executive Director Families and Wellbeing, Sally McGrail, Business Manager Adult Social Care, and Helen Challinor, Advanced Practitioner, about Out of Borough Adult Social Care Placements. Ms McGrail was in attendance to deliver a presentation and to highlight key elements within the report and was supported by Mr Peddie.

The report included the following information:-

- Introduction and background;
- Reasons for placing out of area;
- Potential challenges posed by out of area placements;
- Care Management priorities;
- Proposed approach and targeted project work; and
- Financial considerations.

Members were informed that in March 2018 there were 128 individuals placed outside of Warrington, receiving 24 hour care in a range of provisions, including residential and nursing homes, supported accommodation and 'shared lives' arrangements. Of those 128 individuals, 29 were in a placement that had a WA or WN postcode and were, therefore, placed within a short distance from the Borough. The remaining 99 were placed further afield, with placements as far away as Devon and Scotland. 39 were supported through Managed Care Teams (generally older people), whilst 89 came under the care of Complex Care Teams, due to their primary need being learning/physical disability, mental health or acquired brain injury, etc. A large proportion of individuals were jointly funded with the Health Service and 5

individuals were fully Health funded. The largest age group placed out of borough was the over 65 age group (51 individuals).

A placement out of borough was often the most appropriate placement and might not be the highest cost. Some reasons for out of borough placement included the following:-

•   Requirement for a specialist service not available locally;
•   To be near family who did not live in the Borough;
•   The choice of a family;
•   A continuation of a specialist education placement;
•   The out of borough placement was favoured over local services;
•   Lack of capacity locally at the time the placement was required; and
•   The service provider might be the only one agreeing to provide a care package in a situation of crisis or be the only option within the time available.

Some challenges to out of borough placement included:-

•   The risk of the individual being 'out of sight, out of mind';
•   Maintaining a relationship with 'single purchase' providers;
•   Placement costs could be higher and difficult to manage due to limited opportunities to review needs;
•   Temporary placements could drift beyond the original timeframe;
•   Access to advocacy services was more difficult;
•   Access to secondary specialist health input might not be available;
•   Requests for Deprivation of Liberty Safeguard Assessments were more challenging to respond to; and
•   There might be no alternative similar resource even if cost, quality, or distance were not ideal.

To address the above issues, a new care management system had been introduced which provided good information. Priorities included:-

•   Ensuring on-going oversight of individuals placed out of area and that there was a clear rationale for all placements;
•   Ensuring timely reviews of care and support to ensure outcomes were being achieved;
•   Gaining assurance about the quality of provision and taking action in relation to any concerns raised;
•   Ensuring that there were effective arrangements for identifying the need for the management of the regulatory requirements for advocacy support, deprivation of liberty safeguards, within a system of prioritisation based on risk; and
•   Proactively managing cases where short term arrangements had been made in order to plan, where appropriate, a return to local provision.

Members asked a number of questions and received responses as follows:-

•   Given that there were 27 individuals out of borough whose cases had not been review in the last 12 months and that one dedicated social worker from the Business Development Team would undertake the majority of the reviews for

complex cases, were there any plans to add additional staffing resource - *Response:* A number of cases would be allocated to the ordinary Care Management Team and the situation would be carefully monitored. However, the system of one main social worker post for out of borough placements continued to work well.

- The overall approach seemed robust. However, had any other concerns come to light? - *Response:* No other concerns had surfaced and the Team was reassured by what it had found during reviews. It had recently carried out a piece of work to identify when the last CQC Reviews had taken place and these had been relatively up to date. Further work would be undertaken to link in with families. It was acknowledged that the work was challenging in respect of individuals who had been out of the area for some time. It would also be difficult to move those individuals back into local care settings.

- The need for on-gong review was important. Further clarification was sought about the reporting timeframes described in Paragraphs 5.2 and 5.3 of the report. - *Response:* There were different reporting levels within the system. An annual overview report would be provided to the Senior Management Group, which would also help to inform commissioning. Quarterly performance data would also be collated and provided to the Senior Management Group. There would also be a monthly meeting with principal managers to go through all relevant data.

- Some 15 placements had not been reviewed within the last two years. What was the target? - *Response:* The standard was for an annual review. Currently the service undertook a 6 weekly placement review , then an annual assessment. However, a new review framework was being developed, which could lead to a step down of the 6 weekly system, although the annual review would be the maximum duration. For certain cases, such as rehabilitation, more frequent reviews might still be required with a view to bringing placements back within the Borough sooner.

Decision,

(1) To note the information contained within the report and presentation, including the number and type of out of borough placements.

(2) To endorse the proposed priorities for care management in respect of out of borough placement, as outlined in Paragraph 5.1 of the report.

(3) To endorse the current and proposed arrangements described n Paragraph 5 of the report, to deliver against the priorities at (2) above.

PTMV41   Adult Social Care Transformation Programme

The Committee considered a report and presentation by Steve Peddie, Executive Director Families and Wellbeing, providing an update on the Adult Social Care Transformation Programme, which had commenced in July 2017. The purpose of the Programme was to manage the demand for Adult Social Care Services, whilst promoting and maximising independence for individuals.

The report included background information, an overview of the Programme; and progress to date. The presentation highlighted a number of topics including the

following:-

- The challenge;
- Key insights from demand management work undertaken;
- New ways of working needed;
- Programme objectives and the six supporting workstreams;
- Measuring the benefits and impact;
- Tracking customer flow;
- Emerging management information;
- Tracking the financial benefits - actual and cost avoidance;
- On-going projects and opportunities;
- Update on the financial position 2017/18; and
- Continuous improvement.

Adult Social Care operated a gross budget of £77M and in the past three years had delivered efficiencies in excess of £8.6M. However, it was required to deliver £6.7M efficiencies over the next four years. As levels of demand were increasing and with national issues surrounding the care sector at the forefront of the Council's thinking, it was clear that the traditional savings approach was no longer a sustainable model. A transformational change programme had therefore been established, which was based on a shift in focus to new ways of working focusing on managing demand.

The six workstreams which supported the Transformation Programme, each lead by a Head of Service, were as follows:-

- Front Door - the new First Response Team;
- Information, advice, guidance and community offer;
- Assisted Living and Care Technology;
- Short Term Care and Reablement;
- Behaviour and culture change;
- Transition into adulthood - learning difficulties (commencing early 2018);

Additional transformation work would be undertaken to look at transport issues and to reduce overprovision of care.

Members asked a number of questions or made comments and any responses received are indicated, as follows:-

- At another of the Council's Committee's, mention had been made of the Mosaic system. How successful had the new system been, particularly since the issue of billing of service users had been raised? A number of service users had not been billed or had been adversely affected. - *Response:* Mr Peddie indicated that the system was an integrated client index, workflow and authorisation system. The system worked out how much the Council should charge its care service users and billed them for those services. It also integrated the details of hundreds of care providers and paid them the relevant amounts due. Previously the two system were not connected which led to inefficiencies. The new system was felt to be successful and had resulted in only a very small number of issues. The authority had decided to opt for a 'big bang' implementation of the new system. It was understood that only around 2% of all bills had given rise to

issues, which required some form of additional manual input. There were a number of reasons for the initial problems, including some software issues and some late inputting of the relevant information. The authority was aware that 2 or 3 clients had received very late bills, which had caused them some inconvenience and for which the authority had apologised. Ms McGrail added that it was a significant system change and that on the whole the new system worked really well. It also provided good management information. Any backlog had now been cleared and there was on-going project work taking place. Issues were being scrutinised line by line where the system was not quite working properly. Because the system was a workflow system any alterations needs to be made in the correct order. In addition, staff continued to be trained in the use of the system.

- It was noted that social workers had had some difficulty in inputting data into the Mosaic system and that there had been instances of duplication of information or information not available at all. - *Response:* The system's trainers had been working closely with social workers and it was no longer believed to be an issue with those staff. Lots of instruction had been provided and 'buddying up' had been arranged, as appropriate. The system had achieved a lot in just 6 months of operation. No problems had been reported in relation to children's care, which also used the same system. The issue was that bills for adult care tended to be more complicated. In one example, a bill had been submitted for the correct amount, but a complaint had been made about its timeliness. In response to a question about how clients who had received late bills could pay them without undue hardship, it was reported that the authority would always work closely with clients with hardship issues.

- Would the efficiency savings of £6.7M required over the next four years impact on frontline staff? - *Response:* There had always been excellent support from the Council's Executive to maintain frontline staff and there were currently no plans to take out staff. Around £0.5M had already been removed from the management structure to protect frontline staff. The authority was working hard to manage within the resources it had available. In general, local authorities were doing well to manage demand in relation to older people, but were struggling with the increasing demand from younger adults. 'Living within our means' was a very big challenge for all managers.

Decision,

> To note the report and presentation, including the objectives of the Adult Social Care Transformation Programme and the progress made to date.

PTMV42   Work Programme 2017/18 and 2018/19

The Committee considered a report of the Chairman, providing an update on the delivery of its Work Programme for 2017/18, monitoring the actions and recommendations arising from the Committee and any Working Groups and inviting consideration of initial topics for inclusion in its Work Programme for 2018/19. Mr Joinson, Principal Democratic Services Officer, was in attendance to provide support.

Members were reminded that the Committee, at its meeting on 20 June 2017, had

approved a number of themes for its draft Work Programme for 2017/18, including some topics being rolled forward from the Work Programme 2016/17. Subsequently, further work had been undertaken to refine the detailed content of the draft document and a final Work Programme had been approved on 19 September 2017. The Work Programme was a living document and was updated periodically in response to changing priorities and other factors.

The current Work Programme had been largely completed. However, a small number of topics remained outstanding and could be considered for rolling forward into 2018/19.

Upon the Committee's recommendation the Executive Board had established a Task and Finish Group to consider the Social Care Market for Older People, which comprised the Portfolio Holder for Statutory Health and Adult Social Care and a several Members of this Committee. Some initial meetings had taken place in the winter of 2016/17, but no further meetings had been held since.

Councillor Knowles reminded the Committee that, at its last meeting, it had agreed to include Social Mobility as a Work Programme topic. Mr Peddie commented that the topic was very broad and that its scope would need to be refined in order to identify some specific lines of enquiry for the Committee. He undertook to ascertain any particular areas of interest from Councillor Knowles outside of the meeting.

Decision,

(1)   To note the updated Work Programme 2017/18, as presented, which was largely completed.

(2)   To roll forward those items which have not yet been completed, to be considered for inclusion in the Work Programme 2018/19.

(3)   To note the Schedule of Progress on Actions and Recommendations, Referrals from Other Bodies and Final Recommendations from Working Groups.

PTMV43   Schedule of Meetings for 2018/19

Decision,

To note the proposed schedule of meetings for 2018/19, as follows:-

- 19 June 2018
- 18 September 2018
- 11 December 2018
- 19 February 2019
- 2 April 2019

WARRINGTON BOROUGH COUNCIL

PROTECTING THE MOST VULNERABLE POLICY COMMITTEE – 19th June 2018

Report of the:	Steve Peddie – Executive Director, Families and Wellbeing
Report Author:	Mike Alsop – Head of Integrated Commissioning

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Ward Members: All

TITLE OF REPORT: BETTER CARE FUND AND INTEGRATION

1.0   PURPOSE

1.1   The purpose of this report is to provide the Committee with a review of how the better care fund is contributing to better integrated working. The report also focuses on the support it provides to the NHS and how its activity contributes to reducing delayed transfers of care and length of stay in hospital.

2.0   CONFIDENTIAL OR EXEMPT

2.1   Not applicable.

3.0   INTRODUCTION AND BACKGROUND

3.1   The Better Care Fund (BCF) introduced in 2013 is a programme spanning both NHS and local government which seeks to join-up health and care services so that people can manage their own health and wellbeing and live independently in their communities for as long as possible.

3.2   The BCF has been created to improve the lives of some of the most vulnerable people in our society, placing them at the centre of their care and support, and providing them integrated health and social care services, resulting in an improved experience and better quality of life.

3.3   Since its inception, the BCF has enabled initiatives to deliver real improvements in the integration of local health and social care systems right across the country. The BCF encourages integration by requiring Clinical Commissioning Groups (CCGs) and Local

Authorities to enter into pooled budgets arrangements and agree an integrated spending plan.

3.4   The 2015 Spending Review set out the Government's intention that, by 2020, health and social care will be more fully integrated across England. BCF plans for 2017-19 set out how the CCG and Council are working towards fuller integration and better co-ordinated care, both within the BCF and in wider services.

3.5   **Disabled Facilities Grant** is allocated through the BCF. This is to encourage strategic thinking about the use of home adaptations, use of technologies to support people to live in their homes for longer, and to take a joined up approach to improving outcomes across health, social care and housing. In Warrington, our approach includes utilising some of the DFG funding to rapidly deal with inaccessible housing and the need to quickly discharge people from hospital.

3.6   Locally, a Section 75 (NHS Act 2006) Agreement was developed in 2013 between Warrington Borough Council and Warrington Clinical Commissioning Group for the pooled budget arrangement which currently stands at approximately £32m for 2018/19. A number of initial BCF schemes were established and have been in place since the inception of the BCF. This includes a pooled budget arrangement for all Intermediate care, reablement and hospital discharge services and a pooled budget for jointly funded complex packages of care supporting individuals in the community to remain at home.

3.7   Announced in the 2015 Spending Review, the Improved Better Care Fund (iBCF) was subsequently introduced in 2017/18. It builds on the early successes of the BCF and comprises additional monies which are aimed at further integration of services via pooled budget arrangements. BCF Initiatives developed from this additional funding along with existing BCF monies are aimed at preventing hospital admissions and reducing delayed transfers of care.

4.0   LOCAL PROGRESS AND IMPACT TO DATE

4.1   The Better Care Fund in Warrington is part of a wider plan to transform health and social care services in the town. It has acted as a catalyst for integration of services and has been a key driver in reshaping services and further aligning the way in which health and social care services work together.

4.2   The main elements of integrated working and the Better Care Fund to date have been:

- **A pooled budget for complex packages of care** administered through a joint 50:50 funding panel. This has achieved a reduction in the use of NHS beds and focus has been on the reduction of delayed transfers of care and the provision of the most appropriate care at the most economically advantageous cost to the system. This particular budget has seen considerable increase in demand due to increased numbers of people requiring complex packages of care in particular those people

who require aftercare services under Section 117 of the Mental Health Act[1]. Average cost of individual jointly funded packages of care has reduced by 30% since 2014.

The pooled arrangement has led to some innovative decisions on meeting the complex needs of the individuals served by this budget. One example is the purchase of a bungalow which has been adapted to meet the needs of 4 complex individuals resulting in annual savings of £280k to the health and social care system whilst providing safe and appropriate personalised care in a homely and suitable adapted setting. The pooled arrangements and close panel working between CCG and LA has developed an understanding between partners and has allowed the CCG to form part of the tender panel during the recent re-tendering of supported living services for people with a learning disability and has contributed to an appropriate specification for a new contract which was let in August 2017.

- **The development of a single integrated out of hospital care** offer incorporating intermediate care bed and home based services, step up/step down, re-ablement and hospital discharge. An 'Out of Hospital Board' was established with providers and commissioners working together to reduce delayed transfers, non-elective admissions and generally improve outcomes for individuals. The group established through this work have developed a program of schemes funded from the iBCF to tackle delayed transfers of care. This work has now been incorporated into a wider programme of work under 'Warrington Together', our health and social care partnership. Further schemes designed to avoid hospital admission and support people at home and enable a safe and speedy discharge from hospital when people are admitted are being mobilised.

- **Supporting Adult Social care** in meeting it's obligations of the Care Act. This includes supporting Telecare services, aids and adaptations and low level support services through the third sector. The fund additionally supports the increased demographic challenges faced by adult social care due to increasing numbers of individuals with complex care and support needs as well as increasing costs from care providers due to national living wage rises, pension enrolment and apprenticeship levy.

5.0   IMPROVED BETTER CARE FUND

5.1   Announced in the 2015 Spending Review, the Improved Better Care Fund (iBCF) was subsequently introduced in 2017/18. It builds on the early successes of the BCF and comprises additional monies which are aimed at further integration of services via pooled budget arrangements.

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[1] Section 117 of the Mental Health Act 1983 entitles a person to free after-care if they have been in hospital under specific sections of the Mental Health Act 1983. CCG's and LA's are required to jointly fund this care.

5.2 Three specific areas for expenditure of the iBCF were mandated in the iBCF Planning Guidance. That the monies must;

1. Meet Adult Social Care Needs;
2. Reduce pressures on the NHS, including supporting people to be discharged from hospital when they are ready;
3. Ensure the local social care market is supported;

5.3 Nationally, the iBCF represents an additional £105 million in 2017-18, £825 million in 2018-19 and £1.5 billion in 2019-20. The allocation of BCF and iBCF monies for Warrington is as follows;

	iBCF
	£
2017-18	3,337,564
2018-19	4,364,284
2019-20	5,201,529

5.4 In Warrington, system leaders have agreed to split the allocation of iBCF monies equally across the three specific mandated areas. In 2017/18 this has meant that £2.2m has been allocated to support additional pressures in adult social care services which includes additional cost due to demand and additional costs due to provider price increases such as national living wage, pension enrolment and apprenticeship levy. The remaining £1.1m has supported the significant pressures on the NHS particularly during the winter period.

6.0 Reducing pressures on the NHS, including supporting people to be discharged from hospital when they are ready

6.1 In July 2017, the Government published a written ministerial statement setting out the measures that it was putting in place to address delayed discharges from hospital in advance of winter 2017/18.   Local areas were given a specific mandate via iBCF to reduce delayed discharges from hospital as it became one of the three priorities attached to the allocation of the iBCF monies.

6.2 In Warrington during Winter 17/18, action was taken in response to iBCF to expedite early discharge planning via weekly teleconference calls which identified reasons for discharge delays. On each call reasons for patient delays were discussed and actions agreed, logged and later tracked with the aim of ensuring patients were discharged in as timely a way as possible.

6.3 As Delayed Transfers of Care (DToC) is a key performance indicator which reflects how the local health and social care system is performing overall, NHS England provide a reporting system to support the reporting of (DToC).   DToC performance is reported via

the dashboard as a monthly Sitrep report and is reported by Local Authority area, as well as each Hospital Trust.

6.4   Recent performance in Warrington on delayed transfers of care has worsened which is representative of the national situation. This is due to a number of factors but demographics, including an ageing population with much higher complexity of needs is the overarching reason. Performance (and ranking) can fluctuate on a monthly basis, with local performance improving or worsening depending on levels of demand and capacity of local services to meet levels of demand.

6.5   The biggest factor affecting an increase in the number of delayed transfers of care is patient and family choice. This is where a patient or their family chooses to remain in a hospital bed when they do not wish to accept the service offered to them once they are medically fit for discharge. This can be for a number of reasons including wishing to go to an alternative residential home or home care provider when there may be no vacancies and/or a waiting list. In Warrington we have ensured that there is sufficient supply in our care market to meet demand but of course cannot guarantee personal choice and availability at the point of discharge from hospital. A person remaining in hospital once medically fit will risk decompensation of their physical abilities which affects greatly their long term health and are therefore strongly encouraged to accept an alternative to their first choice.

6.6   To support the reduction of delayed transfers of care a number of specific schemes have been identified which are in line with the "High Impact Change Model" for managing transfers of care between hospital and home. The 'Model' has been jointly produced by LGA, ADASS, NHS England and the Department of Health. (See background papers for more info). Each scheme is currently in various stages of mobilisation;

- Expansion of the Reablement Service
- Development of a CareCall Response Service
- Increased capacity in Hospital Discharge Team and A&E (Social Worker Roles)
- Extension to existing Red Cross Supported Discharge Service
- Development of a Frailty Assessment Unit
- Development of a Rapid Intervention Service
- Development of a Trusted Assessor Model (Care Homes)
- Collaborative Cluster Project (supporting the development of Out of Hospital Services)
- Development of an Information and Advice system (online)

There are also plans to integrate hospital discharge staff into a single team, working within a co-located workspace. This is intended to support better working methods,

channels of communication and earlier decision making regarding discharges/discharge planning.

6.7   Each of the identified schemes has an identified project lead/Commissioning lead and has an agreed timeframe for mobilisation, with the expectation that all schemes are mobilised in advance of Winter 2018. Some of the schemes have partially-mobilised, or are on track to be fully mobilised in the expected timeframe. Weekly updates are captured for each scheme and progress regarding mobilisation is monitored.

7.0   Local Governance Arrangements

7.1   In terms of local governance arrangements, the BCF Steering Group reports to and makes recommendations to the Integrated Commissioning & Transformation Board (ICTB). The ICTB is a decision making Board in relation to the pooled funds of the Better Care Fund.

7.2   The Better Care Fund Steering Group also aligns closely with the governance arrangements for Warrington Together – Warrington's Health and Social Care Partnership, which oversees integration at the whole system level. The Warrington Together Service Re-design Group has oversight of the BCF/iBCF schemes and their prioritisation and ensures that the appropriate resources are aligned to the schemes to enable delivery. This includes enabler groups which have been established to support the delivery of key projects, such as Workforce Enabler Group, Estates Enabler Group, IT Enabler Group and finance/performance.

8.0   FINANCIAL CONSIDERATIONS

8.1   Not applicable.

9.0   RISK ASSESSMENT

9.1   **Risks/Challenges to improving the Performance of Delayed Transfers of Care (and mitigating actions)**
There are two main challenges facing Warrington in terms of improving performance against Delayed transfers of Care.

1. Good Quality and Sustainable Provider Market to support demand
2. Good Quality and Timely Data regarding Delayed Transfers of Care

9.2   **Good Quality and Sustainable Provider Market to support demand**
Warrington has observed challenges in providing domiciliary care packages where a person requires multiple visits and/or two carers and/or in an area where it is more difficult to source care. Providers cannot always recruit adequate staff resource which affects the market's ability to respond to peaks in levels of demand. The Local Authority

itself has also struggled to recruit to support carer roles that include domiciliary duties, even where terms and conditions could be perceived as more favourable than the wider market.

Despite the difficult carer recruitment conditions in Warrington, action is being taken to use existing and new staff flexibly across some services to ensure schemes are mobilised quickly, for example using staff flexibly across the Intermediate Care and Reablement services. Provider capacity however has recently improved with provider's more able to respond to levels of demand as a result of more favourable staffing levels. The Local Authority works closely with providers to support them to ensure sufficiency of labour supply.

9.3 **Good Quality and Timely Data regarding Delayed Transfers of Care**
Although the Local Authority and Warrington & Halton Hospital Trust appropriately share information, the organisations are not yet using shared IT systems or shared care records. As a consequence, both parties rely on the accuracy of information produced by Warrington & Halton Hospital Trust for Delays in Transfers of Care including the reasons for delays and the total number of delayed days (reported weekly).

These challenges are monitored closely through the BCF Steering Group and via Warrington Together in the appropriate Enabler groups e.g. Workforce and IT.

Warrington Together has commissioned a system demand and capacity tool backed by NHS England and funded through the iBCF in order to better understand the multiple stages and difficulties that may arise within a person's journey from hospital admission to returning home. This will better inform system partners as to where our resources need to be focused in order to improve the experience of people who need hospital care and wish to return home in a timely fashion.

10.0. EQUALITY AND DIVERSITY / EQUALITY IMPACT ASSESSMENT

10.1 Not applicable. Update report only.

11.0 CONSULTATION

11.1 Not applicable.

12.0 RECOMMENDATION

12.1 That the Committee receive the report and note its content.

13.0 BACKGROUND PAPERS

1. Integration and Better Care Fund Narrative Plan 2017/19

2. High Impact Change Model for Delayed Transfers of Care

Contacts for Background Papers:

Name	E-mail	Telephone
Mike Alsop	malsop@warrington.gov.uk	01925 444146

WARRINGTON BOROUGH COUNCIL

PROTECTING THE MOST VULNERABLE POLICY COMMITTEE – 19th June 2018

Report of the:	Steve Peddie – Executive Director, Families and Wellbeing
Report Author:	Mike Alsop – Head of Integrated Commissioning (WBC)
	Margi Butler – Mental Health & LD Commissioner (Warrington CCG)

Contact Details:	**Email Address:**	**Telephone:**
	malsop@warrington.gov.uk	**01925 444146**

Ward Members: All

TITLE OF REPORT: UPDATE ON THE WORK OF THE TRANSFORMING CARE PARTNERSHIP FOR CHESHIRE AND MERSEYSIDE

1.0   PURPOSE

1.1   Update on the activities and work programmes underway as part of the Cheshire and Merseyside Transforming Care Partnership.

2.0   CONFIDENTIAL OR EXEMPT

2.1   Not applicable.

3.0   INTRODUCTION AND BACKGROUND

3.1   Transforming care is all about improving health and care services so that more people with a learning disability and /or autism including those with challenging behaviors and mental health conditions can live in the community, with the right support, and close to home.

3.2   The Transforming Care Programme is a national response to the appalling scandal uncovered by a BBC documentary filmed in 2011 at Winterbourne View, a private hospital for people with learning disabilities. An in depth review of the care and treatment of people with learning disabilities in hospitals and care homes was undertaken by the Department of Health following the scandal and the final report was published in December 2012.

3.3   A further review was commissioned by NHS England in 2014 and led by Sir Stephen Bubb with a remit to make recommendations for a national framework under which local commissioners would secure community-based support for people with learning disabilities and/or autism. This came after a pledge made in the wake the Winterbourne View scandal – to enable people with learning disabilities and/or autism inappropriately placed in hospital to move to community based support by June 2014 – was missed. The final report, "Winterbourne View – Time for Change" was published in December 2014.

3.4   Following the report a national plan, "Building the Right Support" was published in October 2015 to set out what needed to be done to make sure this change happens.

3.5   Following on from "Building the Right Support" a national service model was also published along with a document called "supplementary guidance for commissioners" to inform local commissioners what good services should look like and what should be in place by March 2019. This was further backed up by three model service specifications.

3.6   Transforming Care Partnerships (TCPs) were set up to oversee and deliver the national service models on a sub-regional level. TCPs are made up of clinical commissioning groups, NHS England's specialised commissioners and local authorities. They work with people with a learning disability, autism or both and their families and carers to agree and deliver local plans for the programme. In England there are 48 TCPs and Warrington is part of the Cheshire and Merseyside TCP.

4.0   OVERVIEW OF THE TRANSFORMING CARE PROGRAMME

4.1   The broad aims for each partnership is to reduce the number of people in an inpatient setting and provide care and support instead in their own homes where possible. Although there is a need to provide inpatient hospital placements in some circumstances where there is a genuine need and in some cases as an alternative to custody, there is a commitment to seeing a substantial shift away from reliance on inpatient services .The focus will be on:

- A substantial reduction in the number of people placed in inpatient settings;
- Reducing the length of stay for all people in inpatient settings;
- Better quality of care for people who are in inpatient and community settings
- Better quality of life for people who are in inpatient and community settings.

4.2   The transforming care agenda requires the completion of Care and treatment reviews (CTRs) CTRs are designed to support the individual patient and their family to have a voice, and to support the team around them to work together with the person and their family to support a discharge into community. The review process, carried out by independent expert advisers (including one clinician, one 'expert by experience 'and the responsible commissioner), asks whether the person needs to be in hospital and, if there are care and treatment needs, why these cannot be carried out in the community. The

individual and their family are at the heart of the process, and the review team will meet with them to understand the individual as a central part of the review. If the resources and support are not in place to support someone's discharge, the CTR team can make recommendations to address what needs to be done to get to the point of a safe discharge into a community setting. To further support this, a dynamic register is kept of individuals who may be at risk of entering hospital as an inpatient and an appropriate action plan is put in place to mitigate that risk.

4.3   TCPs are also tasked with developing local housing and support models working with local housing providers and other stakeholders.

4.4   There is a particular focus on Children and Young people in each Transforming Care Partnership Plan.

4.5   All TCP plans are monitored by NHS England with quarterly reports prepared and submitted for each area. The latest update report for the Cheshire and Merseyside TCP is attached to this report.

5.0   WARRINGTON CONSIDERATIONS

5.1   **Inpatient performance** – Warrington already have less people in an inpatient setting than the national target requires although the TCP area that Warrington is a member of is still above the target.

5.2   Admissions have decreased through the use of MDT's and Care and Treatment Reviews across the whole partnership.

5.3   **Housing models** - A recent market sustainability study and report carried out by NW ADASS has identified that Warrington have a particularly strong offer in terms of supported accommodation for people with a learning disability in comparison to other NW authorities. This has been a long standing approach and is well developed in Warrington which has contributed to fewer numbers of people in inpatient settings.

5.4   Most recently, we have developed specific models of accommodation for some highly complex individuals with challenging behaviours through the use of the better care fund. This allowed us to purchase and adapt a property for 4 males who had previously been in placements outside of Warrington including hospital settings.

5.5   Warrington has submitted a bid for capital funding from NHS England to support the development of further models of accommodation such as that referred to above.

5.6   **Children and Young People** – Warrington is developing it's links with SEND boards and the TCP agenda to ensure that it informs other work and in particular the development

of LD, Autism and Mental Health strategies. A particular focus of strengthening the support for Children and Young People is around transition to adulthood.

6.0   FINANCIAL CONSIDERATIONS

6.1   Not applicable

7.0   RISK ASSESSMENT

7.1   Not applicable

8.0   EQUALITY AND DIVERSITY / EQUALITY IMPACT ASSESSMENT

8.1   The programme aims to ensure that people with a learning disability are able to expect quality of care and support in the right setting closer to home.

9.0   CONSULTATION

9.1   Not applicable.

10.0   RECOMMENDATION

10.1   That the Committee receive the attached update (Appendix A) on the progress of the Transforming Care Partnership for Cheshire and Merseyside as at Quarter 4 (March 2018) of 2017/18.

11.0   BACKGROUND PAPERS

1. **Winterbourne View – Time for Change (December 2014)**
2. **Building the Right Support (October 2015)**

Contacts for Background Papers:

Name	E-mail	Telephone
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Cheshire and Merseyside Transforming Care Partnership

Update - Quarter 4, 2017/18

1. **Introduction**

This report provides an overview of the performance of the Cheshire and Merseyside Transforming Care Partnership during Quarter 4, 2017/18 and highlights key points for the attention of Partnership organisations across Cheshire and Merseyside.

2. **Summary Position**

During this quarter the Partnership has undertaken a range of actions to make progress against the seven workstream areas within its Workplan which aims to:
- help people live in homes and not hospitals
- improve people's health, quality of care and quality of life

The Partnership recognises that, despite ongoing reductions in admissions, the overall inpatient position remains significantly challenging, particularly around inpatients with longer lengths of stay. Strategic Board members have agreed that it is unlikely that the TCP will achieve the target trajectory for March 2019 (82 inpatients). However, significant improvement on the current position is possible with targeted action from commissioners across Health and Social Care.

3. **Performance by Workstream**

   3.1. Leadership and Governance

During Quarter 4, the TCP Programme Management Team has stabilised with its final recruits commencing in post.

In March 2018, the Strategic Board approved the TCP's Workplan for 2018/19, together with its governance and meeting structure. The following key priority areas have been agreed:

- Market development of housing and care providers, working in particular to develop the complex community care offer
- Development of intensive community support across the footprint
- Development of safe place support in a crisis - as an alternative to hospital admission (where safe and appropriate)
- Services to help Children and Young People experiencing challenging behaviour and crisis
- Development of community based forensic support

   3.2. Inpatient Performance

To meet the needs of the more complex Learning Disability and/ or Autism population, the TCP requires access to:

- Secure beds
- Inpatient Assessment and Treatment beds
- Longer-term rehabilitation beds
- Respite and crisis/ safe place provision (not necessarily hospital provision)

Currently secure and ATU beds are commissioned through the NHS, with longer-term rehabilitation and respite provision commissioned through a varying mix of either NHS, social care or independent sector arrangements across the footprint.

Inpatient performance has not met trajectory requirements – Q4 ended with 133 inpatients against a target of 118. Of the 133 current inpatients, 45 are in spot-purchased beds in independent sector hospitals. The adult inpatient position remains broadly similar to that recorded in March 2016.
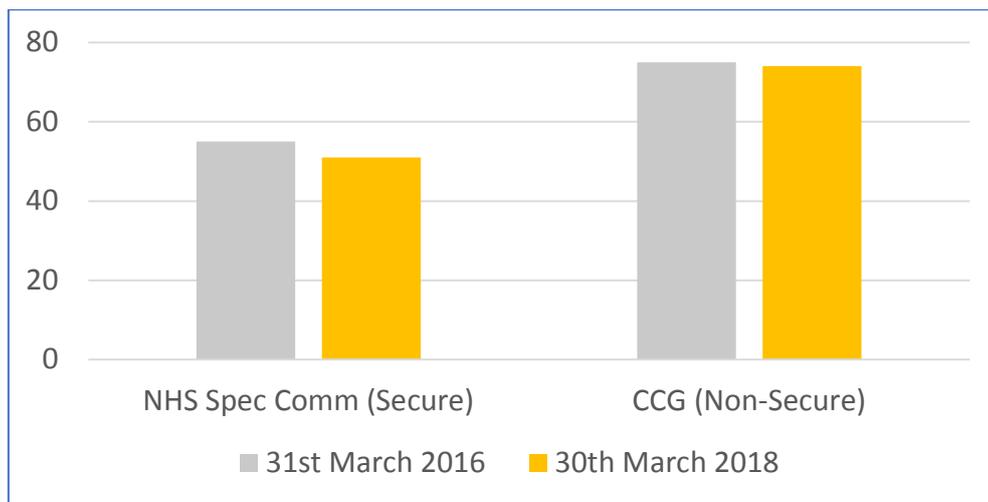
Graph 1: Adult Inpatients with LD and/ or ASD (Secure and Non-Secure)

41 of these inpatients have been in hospital for more than 4 years – a breakdown by CCG is shown below. Commissioners in CCGs will be asked to focus on these cases as a priority in 18/19.

	As at 30/03/2018		
	NHSE	**CCG**	**Total 4+yr Inpatients**
East Cheshire		2	2
Halton	1		1
Knowsley	1		1
Liverpool	7	6	13
South Cheshire	1	2	3
South Sefton	2		2
Southport & Formby	1		1
St Helens	3	3	6
Vale Royal		1	1
Warrington	2	2	4
West Cheshire	1	2	3
Wirral	4		4
Summary Position	**23**	**18**	**41**
Overall TCP Inpatient Position	**41**		

Table 1: Adult inpatients with a LoS greater than 4 years, shown by CCG.

A detailed breakdown of the inpatient position can be found in Appendix 1 showing cases by CCG and details of patients whose discharges have proved more challenging than anticipated.

Discharges

Cheshire and Merseyside continues to find the longer-stay, more complex individuals challenging to place in the community. 18 inpatients were discharged in Q4, including 6 children. Not all planned discharges for the Quarter occurred due to a range of reasons. A rolling programme of deep dives into complex 3 year+ cases projected for discharge has commenced with the TCP creating an escalation policy to provide support to individual CCGs experiencing difficulties.

Admissions

Improvement to the rate of adult admissions has continued. This trend is the result of considerable work through MDTs and the Care and Treatment Review (CTR) process. In Q3 and Q4, Blue Light Meetings (pre-CTR meetings) helped to avoid 21 admissions (out of 26 cases).
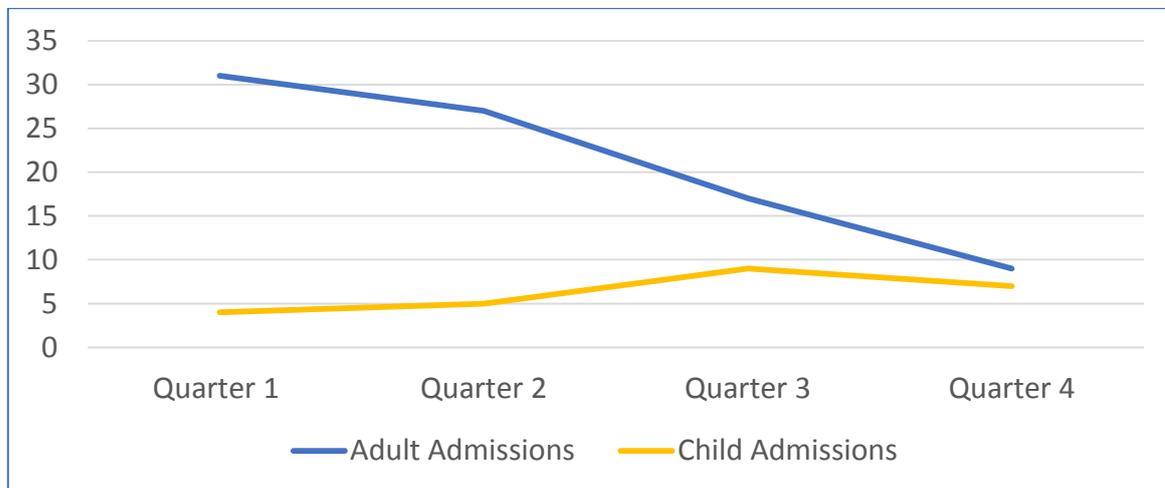
Graph 2: Adult and Child Inpatient Admissions (Secure and Non-Secure): 1st April 2017 – 30th March 2018

3.3. Housing and Providers

To support the commissioning of housing, the TCP has developed its Housing Plan for people with Learning Disabilities and/ or Autism. This was approved in March 2018 and has two broad aims to:

• Meet the requirements of the immediate cohort of inpatients (134 at time of plan)
• Plan for the future provision of client group

by delivering

• Settled accommodation (security of tenure / residence in medium to long term, or part of a household with such)
• Short-term accommodation (crisis and respite support)

Resettlement

The TCP continues to support commissioners to resettle long-stay inpatients. The TCP held a market stimulation event called "The Art of the Possible" in March 2018 where a number of housing and care providers showcased their offers for people with more complex needs to commissioners from across Health and Social Care. Since then, the TCP has circulated a contacts list to all attendees to stimulate

networking, together with a leaflet outlining support available from the TCP team in relation to housing and resettlement.

2 tools have been developed and circulated to commissioners to help support person-centred decision-making. These are the Confirm and Challenge tool and a detailed Housing Needs template.

The TCP is now working with commissioners to identify opportunities for cluster commissioning for people with more complex needs.

Wider Housing Market

A number of priority actions in relation to the wider housing market are identified in the Housing Plan, namely:

• The need to map existing stock (TCP will need support from each area to complete this)
• Develop a provider framework approach (Cheshire and Merseyside, or Local Authority groupings)
• Develop respite provision (Mid and North Mersey)
• Short stay accommodation for children and young people
• Focus on Personal Health Budgets

3.4. Adult Hospital and Community Services

Service Specifications (Inpatient ATU and Community LD Services)

The TCP aims to produce two service specifications which will be adopted across Cheshire and Merseyside to provide a consistent service across the footprint. The draft specifications have been revised by Task and Finish and we expect final versions to be issued for approval during Q1 2018/19.

Cheshire and Wirral Area

The Intensive Support Service covering Cheshire and Wirral has continued, with CWP presenting anonymised patient stories at both Operational and Strategic Boards. Commissioners report an improved impact in hospital admissions and patient outcomes.

Commissioners in Cheshire and Wirral are developing an LD dashboard to support the contractual process.

Mid Mersey Area

Intensive commissioning support has been provided to Mid Mersey Commissioners and North West Boroughs to work up proposals to address sustainability issues at Byron Ward, together with the need to develop enhanced community support. A proposal for interim services was discussed with NWB senior management on 29th March 2018, with a view to stabilising existing services whilst a more detailed plan is agreed for future provision.

North Mersey Area

Commissioners and Mersey Care have agreed that work needs to take place to strengthen the existing community infrastructure and address the need for stronger intensive support, crisis response and forensic support.   A "plan for a plan" has been developed with the TCP facilitating a further meeting scheduled in April 2018.

3.5. Workforce and Education

Recruitment and skills development

The TCP has continued to participate in the North West ODN Workforce sub-group raising the need to address recruitment and initial skills on a wider North West footprint. HEE have provided some support to identify the number of students currently working towards Learning Disability and Mental Health qualifications across Cheshire and Merseyside.

Training and development for staff already in post

CTR and CETR training has continued to be progressed with good feedback from participants across health and social care.

Working with regional colleagues, the TCP has developed a bespoke Health and Social Care Commissioners Development Programme for Cheshire and Merseyside which will commence in April 2018 (further details in Appendix 3).

Following nominations at the North West Regional conference, a working group of service users and carers has been identified to develop training proposals moving forward.

3.6. Finance

Transformational and short-term monies

The TCP completed its planned expenditure for 2017/18, including additional monies. Proposed spend of the indicative allocation of £280k for 18-19 is being finalised. The Partnership has requested additional financial support from the North region in 18/19.

Further long-term revenue

NHS Specialised Commissioning are finalising the process for Financial Transfer following the closure of Low Secure Beds. This is likely to come as one-off funding in 18/19 and recurrent revenue from 19/20, with funding released dependent on bed usage within low secure. The TCP will be discussing the approach to using this funding at its Strategic Board in June 2018, both in terms of supporting individual packages of care and intensive support across the community.

Wider financial impact of the programme

In Q4, the TCP circulated revised financial templates to CCGs and Local Authorities in order to map wider financial flows supporting people with Learning Disabilities and / or Autism. Following feedback from Local Authorities, the TCP is working to define which Local Authority services it should include within its financial scoping. The aim of this wider financial dataset is to inform the distribution of funding following closure of secure inpatient beds.

Capital Funding

Expressions of Interest in relation to capital funding to support housing development in 2018/19 have been received from Knowsley and Wirral.

3.7. Co-Production, Communications and Engagement

The TCP has continued to involve service users and stakeholders in a range of events and ways, recognising that experts by experience are members of both its Operational and Strategic Boards.

3.8. Children and Young People

The TCP has mapped children and young people's services across the TCP footprint which has shown a variable offer with some pockets of good practice. The analysis was presented to the Transforming Care Operational Board and Strategic Boards, highlighting areas for attention and action planning as:

- Developing links between programmes of work through SEND Boards – reducing duplication and ensuring that Transforming Care informs and supports other work (for example the Local Offer)
- Closing any gaps in vision and strategy, including strategies around parenting and developing joint outcomes frameworks
- Considering best practice in transition and applying this across the footprint
- Developing forensic support
- Developing crisis support, including the development of dynamic support databases highlighting those CYP at risk of crisis supported by a robust CETR process

Additional funding has been secured to develop and implement a Dynamic Support and At Risk of Admissions Register for Children and Young People across Cheshire and Merseyside.

4. Key Risks and Challenges

During Q4, the TCP thoroughly reviewed its Risk Register. Details of the open risks with a score of 16 and above are included in Appendix 2.

5. Conclusion and Recommendations

Q4 has seen progress across a range of actions.

Local Authority and CCG Commissioners will need to address housing and care provision for people with more complex needs in order to meet the ambitious national targets. The focus in 18/19 will be on:

- reducing the number of people in hospital for 4 or more years
- agreeing future service provision across Mid and North Mersey

The TCP office is supporting commissioners with a bespoke commissioning development programme, market stimulation events and a detailed offer of support.

A collaborative commissioning approach, encouraged by Accountable Officers, would greatly increase pace in this area.

It is recommended that:

- Accountable Officers and NHSE Directors note the progress made during Quarter 4
- Accountable Officers and NHSE Directors enable and support commissioners to work collaboratively to agree future service provision across Cheshire and Merseyside

Appendix 1: Detailed Inpatient Information

Table 1: All Inpatients by CCG (Adult and CAMHS)

	As at 30/03/2018		
	NHSE	**CCG**	**Total inpatients**
East Cheshire	1	8	**9**
Halton	2	3	**5**
Knowsley	3	5	**8**
Liverpool	14	17	**31**
South Cheshire	6	5	**11**
South Sefton	6	2	**8**
Southport & Formby	2	0	**2**
St Helens	4	9	**13**
Vale Royal	1	4	**5**
Warrington	2	4	**6**
West Cheshire	8	7	**15**
Wirral	10	10	**20**
Summary Position	**59**	**74**	**133**
Overall TCP Inpatient Position	**133**		

Table 2: All Inpatients by CCG with a Length of Stay 4+years (numbers are included in Table 1)

	4+ & 5+ Q4 2017/18		
	As at 30/03/2018		
	NHSE	**CCG**	**Total 4+ Inpatients**
East Cheshire	0	2	2
Halton	1	0	1
Knowsley	1	0	1
Liverpool	7	6	13
South Cheshire	1	2	3
South Sefton	2	0	2
Southport & Formby	1	0	1
St Helens	3	3	6
Vale Royal	0	1	1
Warrington	2	2	4
West Cheshire	1	2	3
Wirral	4	0	4
Summary Position	**23**	**18**	**41**
Overall TCP Inpatient Position	**41**		

Table 3: Patients scheduled for Q4 2017/18 discharge with revised discharge dates

Estimated Discharge Quarter	Commissioner	Q Ref	Key reason for discharge date slip	Comments -
Q4	Eastern Cheshire	Q44-774	Provision of robust placement	Discharge imminent Placement has been agreed and transition has commenced.
Q4	Knowsley CCG	Q30	Provision of robust placement	Discharge moved Patient refused to go back to previous accommodation, so out of area provider found. This placement now agreed and discharge is progressing in line with clinical condition.
Q4	Knowsley CCG	Q33	Provision of accommodation	Discharge moved to Q1 18/19 2 providers now found – one includes accommodation not available until June 2018. Case escalated to LA provider accommodation panel.
Q4	Knowsley CCG	Q21	Property modifications	Discharge moved to Q1 18/19 Provider found. Property adaptations required.
Q4	Liverpool CCG	Q48-99A-6	Provision of robust placement	Discharge imminent Placement now identified and patient happy following visit to provider.
Q4	Liverpool CCG	Q48-99A-55	Clinical condition	Discharge moved to Q1 18/19 Clinical condition deteriorated and extra support provided to day service. MDT meeting every fortnight to assess progress. Discharge plan delayed due to clinical condition.
Q4	South Cheshire CCG	306	Legal issues	Extremely complex case. Discharge plan includes guardianship order to run alongside SOPO to provide robust legal framework. MAPPA meeting with new area in place. Discharge relies on all parties agreement.
Q4	South Sefton CCG	Q48-01T 41	Property modifications	Discharge moved to Q1 18/19 Property and provider identified. Property modifications now required.
Q4	Vale Royal CCG	408	Provision of robust placement	Discharge imminent Provider identified and will access residential care - accessible by mother in South Manchester. Transition has commenced with final discharge imminent.
Q4	Vale Royal CCG	Q44-308	Agreement on care specification	Discharged moved to Q3 18/19 Complex case – currently agreeing level of care required in order to discharge
Q4	Vale Royal CCG	Q44- 719	Property modifications	Discharge moved to Q1 18/19 Property modifications required.
Q4	Warrington CCG	Q44-798	Clinical condition	Discharge imminent Discharge to family home has been agreed.
Q4	Warrington CCG	Q44-364	Legal issues	Discharge moved Placement identified and funding in place. Section 41 issues remain to be resolved with MoJ.
Q4	West Cheshire CCG	Q44-279	Provision of robust placement	Discharge moved Imminent discharge pulled following serious concerns about provider's suitability and sustainability. CCG now looking for alternative provider.
Q4	West Cheshire CCG	Q44-464	Provision of robust placement	Discharge moved Current specification out to tender and awaiting services
Q4	West Cheshire CCG	Q44-771	Provision of robust placement	Discharge moved to Q1 18/19 Provider identified but struggling to recruit team to meet individual's needs.

Estimated Discharge Quarter	Commissioner	Q Ref	Key reason for discharge date slip	Comments -
Q4	Wirral CCG	411a	Provision of robust placement	Discharge moved Suitable placement yet to be identified – 4 providers have been approached.
Q4	Wirral CCG	583	Provision of robust placement	Discharge moved Suitable placement yet to be identified
Q4	NHSE	Q44-532	Provision of robust placement	Discharge slipped to Q1 18/19 Residential care placement now identified and patient happy following visit to provider. Discharge meeting planned for 12/04 All MDT are supportive of this placement in preference to supported living placement.
Q4	NHSE	Q44-169	Clinical condition	Discharge moved to Q4 18/19 Patient at Auden Unit. Clinical condition deteriorated and unsettled since learnt of closure plan. Now arranged internal move to low secure (Whalley) but still planning for discharge.
Q4	NHSE	Q44-733	Additional care needs found on assessment	Discharge moved to Q1 18/19 Provider found. Additional SALT provision requested and funding to be agreed.
Q4	NHSE	Q44-438A	Legal issues	Discharge moved to Q1 18/19 Placement found at Residential Care. Family did not respond to contact and, following discussion MDT have agreed to proceed. MAPPA 2 referral has been made and awaiting date.
Q4	NHSE	Q44-189	Provision of robust placement	Discharge moved to Q3 18/19 Original plan to move to local rehab has been reconsidered at patient request following site visit. Now considered supported living/ residential placement.
Q4	NHSE	Q44-588	Provision of robust placement	Discharge moved to Q2 18/18 Planned transfer from high to medium has fallen through. Commissioners looking for alternative option.
Q4	NHSE	Q44-237	Provision of robust placement	Discharge slipped – internal Spec Comm transfer
Q4	NHSE	Q44-568	Provision of robust placement	Discharged moved to Q 18/19 Internal spec comm transfer – transition moved to Q1
Q4	NHSE	Q44-783	Provision of robust placement	Discharge slipped Assessed in January and several options for consideration (LSU or locked rehab).
Q4	NHSE	Q44-351	Provision of robust placement	Discharge imminent Funding secured, placement identified and transition programme underway
Q4	NHSE	Q44-778 (CAMHS)	Provision of robust placement	Discharge slipped Original plan to move to family home has fallen through. Now looking for Residential Care placement.
Q4	NHSE	Q44- 782 (CAMHS)	Provision of robust placement	Discharge slipped Plan is to return home with additional care support package when in place.
Q4	NHSE	Q44-791 (CAMHS)	Clinical condition	Discharge slipped Clinical condition to improve and work with family to be undertaken prior to discharge.

Appendix 2 – High Level Risks to the Programme

Domain	Risk Title	Score
Strategic Aims	There is a risk that patients with a longer length of stay remain in hospital when they are considered fit for discharge	16
Performance	There is a risk that delays in MoJ cases can hinder the progress of people scheduled for discharge (MM Judgement, Court of Protection)	16
Finance	There is a risk that delays in financial transfers from NHSE Spec Comm impede agreement of adequate support packages and support to community teams.	16
Adult Hospital and Community Services	Closure of Supported Living Service (Sefton/ Liverpool)	16
	Sustainability on Byron Ward following concerns raised by North West Boroughs	16
Children and Young People	There is a risk that CYP at risk of admission are not highlighted to local services/ partnerships and their care is not pro-actively planned	16
Workforce	There is a risk that there are not sufficent people wanting to work in LD/ ASC (recognised shortage)	16
	There is a risk that the existing workforce (paid and unpaid) do not have the right skills and training to deliver effective care	16

Appendix 3 – Health and Social Care Commissioners Development Programme

This is open to commissioners from Health and Local Authority, as well as NHS provider organisations and currently has 17 people signed up to attend. Following consultations with local commissioners, the course will cover:

- Person-centred housing
- Making connections
- Planning for children and young people
- Commissioning for personalised futures
- Showcasing good practice across the North West

Further details about the Programme are available from Julie Green in the TCP Office (email: Julie.Green20@nhs.net)

WARRINGTON BOROUGH COUNCIL

PROTECTING THE MOST VULNERABLE POLICY COMMITTEE - 19th June 2018

Report of the:	**Executive Director of Families and Wellbeing – Steve Peddie**
Report Authors:	**Hilary Smith, Melissa Young, Paula Worthington, Tim Smith and Jo Jackson, Muna Abdel-Aziz**
Contact Details:	**Email Address:** **Telephone:** **hsmith@warrington.gov.uk** **01925 442940**
Ward Members:	**All**

TITLE OF REPORT: Social Mobility of Young People in Warrington and Strategies to address the Attainment Gap.

1.   **PURPOSE OF THE REPORT**

1.1   This report is to provide members with the current position in relation to social mobility of young people in Warrington and the steps taken to address the attainment gap.

1.2   This report is an update on reports presented to Building Stronger Communities (BSC) Policy Committee in March 2018 and prior to that, to BSC in January 2017.

1.3   This report provides an in-depth review around early years and will also highlight the continuing good progress in primary schools and the improvements that we are now seeing in secondary education in the most deprived wards including Bewsey, Dallam, Orford and Poulton North.

1.4   It also highlights improvements in secondary, which is largely because of highly effective collaboration that has developed in recent years between the primary schools in those wards and Beamont Collegiate Academy (BCA), the local secondary school which is now having impact. The data shows that in addition to doing well at primary schools, children continue to make good progress at secondary.

1.5   In addition to school performance it is important to consider post 16 education and to maintain an understanding of the numbers of young people not in education, employment or training (NEET), and the Post 16 destinations and employability.

1.6   It is important to note the situation for vulnerable children across all key stages and additional effort being made to ensure vulnerable children do not get left behind.

2. INTRODUCTION AND BACKGROUND

2.1 Evidence submitted to the BSC Committee in January 2017

2.1.1 The Sutton Trust first identified inequalities in social mobility across nations and within the UK in the conference in 2012[1]. Policy recommendations were made for early years, schools, university and labour market.

2.1.2 The Sutton Trust went on to produce a social mobility index and mobility map for the parliamentary constituencies in England[2]. Warrington North ranked 389 out of 533 constituencies compared to Warrington South which ranked 181. This highlights inequalities in social mobility north and south of the canal.

The index is based on five measures:

- Performance of disadvantaged pupils in early years tests

- Performance of disadvantaged pupils in Key Stage 2 tests

- Performance of disadvantaged pupils at GCSE

- Progress of non-privileged/disadvantaged pupils to universities

- Progress of non-privileged graduates to professional occupations

2.1.3 Policy recommendations in 2015 included:

- Ensure all disadvantaged children can access the best early years education and care.
- Improve the quality of classroom teaching in schools
- Strengthen academies' support for low and middle income pupils through inspections and data tracking.
- Fairer school admissions to state grammar schools and comprehensives at age 11, and to break down barriers between state and private schools.
- Improve the impact of the pupil premium and incentives for schools that narrow the attainment gap.
- Provide every young person with an entitlement to good quality personalised education and careers guidance,
- University evidence-based outreach programmes to improve access.
- Greatly expand the number of good apprenticeships so that young people have real options at 18 and employers can develop the skilled workforce they need.

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[1] http://www.suttontrust.com/wp-content/uploads/2012/09/st-social-mobility-report.pdf
[2] http://www.suttontrust.com/wp-content/uploads/2015/04/Social-Mobility-Index-further-information.pdf

2.2 New Evidence in 2017

2.2.1 The Select Committee in Social Mobility considered in more detail the transition of young people into work (destinations). The report published in April 2017[3], Overlooked and left behind: improving the transition from school to work for the majority of young people, published in April 2016, summarised the experiences for young people (pp.4-5):

"*The transition from school into work is a vital point in the lives of young people. Making a successful transition through a high quality and valued pathway can mean a successful career. Becoming trapped in poor quality and under-valued alternatives can mean a lifetime of poverty.*"

"*The inequality between academic and other routes—such as vocational training— does not serve the UK's economic needs and produces outcomes which are unfair and restrict opportunities for social mobility*"

2.2.2 The more recent area of focus in 2017 has been on income and generational inequalities; rather than just geographical inequalities. In June 2017, the Social Mobility Commission, an advisory non-departmental public body with a duty to assess progress in improving social mobility in the UK, published their report on Time for Change: an assessment of government policies on social mobility 1997 to 2017. This considered the policy context for Early Years, Schools, Youth Transitions to adult life, and Work; all of which provide support for social mobility and inclusiveness.

2.2.3 The report breaks down each area, providing recommendations for consideration by the government and a set of grades on a traffic light scale of red, amber and green. Of the 38 measures used, only 7 are rated green, while more of the remainder are red than amber. Early Years and Schools receive overall amber grades, while Youth and Work receive red. They identify social mobility 'cold spots' where there is no focused effort to close social divides.

2.2.4 The commission heard evidence on links to child poverty. A recent systematic literature review[4] considered the effect of finances on child health and development. The overwhelming majority of studies across countries find significant positive effects of income on children's outcomes, including cognitive development and school achievement, social and behavioural development and their health, including birth weight.

2.2.5 There was a greater effect of income for those households with less to begin with, and this gives reason to believe that reducing income poverty would have important and measurable effects on the environment in which children live and subsequently on their development. Given rising levels of child poverty in the UK, and much steeper increases projected for the next few years, this demonstrates that we cannot improve life chances and equalise opportunities for children for social

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[3] Select Committee on Social Mobility (April 2016). Overlooked and left behind: Improving the transition from school to work. HL Paper 120. London : The Stationery Office Limited

[4] Cooper, K., Stewart, K. (July 2017). Does Money Affect Children's Outcomes? An update. Centre for Analysis of Social Exclusion London School of Economics.

mobility, without focusing on increasing family household incomes to alleviate child poverty.

2.2.6   The expectation that each generation would be better off than the previous one is no longer being met. Individuals born between 1981 and 2000 are the first cohort to show signs of falling behind their predecessor generation by the age of 30. Britain's deep social mobility problem, for this generation of young people in particular, is getting worse not better. In the last ten years, the number of under-25-year-old homeowners has more than halved. As wages have fallen, house prices have risen. Today's young generation is more reliant than ever on their parents for help to buy their first home: three times as many buyers used inherited funds to do so now compared to a decade ago.

2.2.7   The Commission made 5 key recommendations for government that include:
   • establishing social mobility as a central cross department goal
   • needing to focus resource to tackle disadvantage
   • closing the gap should take equal emphasis to increasing access and improving quality
   • focusing on long term progress, and allowing time for changes to take effect,
   • playing a role in market shaping including parenting, progression in jobs, and pay progression, and regional development with a focus on 'social mobility cold spots'.

2.2.8   In December 2017, the Department for Education (DfE) plan for improving social mobility through education 'Unlocking Talent, Fulfilling Potential' outlines ambitions and challenges across the life course. The report focuses on four ambitions:

   • Ambition 1 – Close the 'word gap' in the early years.
   • Ambition 2 – Close the attainment gap in school while continuing to raise standards for all.
   • Ambition 3 – High quality post-16 education choices for all young people.
   • Ambition 4 – Everyone achieving their full potential in rewarding careers.

3.   **Context in Warrington**:

3.1   From the 'closing the gap' strategy in 2010, Warrington has continued to focus on inequalities and a core element of each of the four pledges for the council. Some areas, such as Longford, Bewsey and Dallam, have benefitted from dedicated programmes of investment and collaborative working across partners and communities. The recent designation of the Central Area Neighbourhood Board continues this aspiration to ensure that growth and development of Warrington as a whole bring benefits to the central core of the town.

3.2   The Health and Wellbeing Strategy 2015-18 continues to place reducing social inequalities at its core, along the themes of Starting Well, Living and Working Well, Ageing Well, and Strong and Resilient Communities. The former Warrington Partnership arrangements are now part of this latter theme to ensure that all partners are contributing to the place based agenda and health and wellbeing.

"Working together for stronger neighbourhoods, healthier people, a vibrant and resilient economy and greater equality across all communities"

3.3 Alongside the Health and Wellbeing Strategy and to support its objectives, a 'Framework for closing the gap in social inequalities and child poverty 2015-18' was published in June 2015. Its aim was to bring together the key activities that were underway across partners to tackle social inequalities and child poverty under the following themes:

- A better start in life for children and young people living in poverty
- Improving employment levels and maximising household income
- Working differently with vulnerable households and those with complex needs
- Strengthening community resilience
- Commissioning for social value
- Enabling an intelligence led approach

3.4 The impact of welfare reform has been seen in particular this year. Under Universal Credit, a broader span of claimants are required to look for work than under Jobseeker's Allowance. As Universal Credit Full Service is rolled out in particular areas, the number of people recorded as being on the Claimant Count is therefore likely to rise, and it is the case that this has been the first year to see an increase in claimants compared to the previous reductions year on year from 2013.

3.5 In the 10% most deprived SOAs in Warrington, the number of benefit claimants has increased in September 2017 from the previous September by 43% (compared to 34% increase across Warrington overall). There were 780 claimants in the 10% most deprived SOAs and 2,855 claimants overall in September 2017.

3.6 18% of ESA claimants in Warrington are in the work related activity group - requirement to attend work focused interviews with Job centre plus. 65% of ESA claimants in Warrington are in the support group - not required to attend work focused interviews

4. EARLY YEARS

The DfE plan 'Unlocking Talent, Fulfilling Potential' includes the ambition to close the word gap in early years. Children with strong foundations start school in a position to progress, but too many children fall behind early. We need to tackle development gaps, especially key early language and literacy skills.

4.1 Challenge 1: Ensuring more disadvantaged children are able to experience a language rich early environment

4.1.1 Early Years Performance

The Early Years Foundation Stage profile summarises and describes children's attainment at the end of the Early Years Foundation Stage. It gives the child's

attainment in relation to the 17 early learning goals (ELG) descriptors and children achieve an overall good level of development if they achieve at least expected level in 12 out of 17 ELG's.

The data below demonstrates the overall good level of development (GLD) for those children who live within the areas of disadvantage based on the indices of deprivation; and compares it against the Warrington average and by ward within each of those areas.

Children living within the 10% areas of deprivation	2016 EYFS	2017 EYFS
Bewsey & Whitecross	60.0	64.4
Fairfield & Howley	45.8	59.7
Latchford East	52.6	42.1
Orford	48.1	42.0
Poplars & Hulme	57.6	59.8
Poulton North	54.2	71.4
Warrington Average	**71.0**	**71.0**

Children living within Latchford East & Orford saw a dip in performance from the 2016 data.

Poulton North saw a large increase of children's development and was just above the Warrington average. The improvement was largely down to the improvement of performance of 2 schools, namely Christchurch CE and Cinnamon Brow CE, where the majority of children attended.

Children living within the 20% areas of deprivation	2016 EYFS	2017 EYFS
Bewsey & Whitecross	59.7	58.6
Birchwood	58.7	50.0
Chapelford & Old Hall	88.9	63.6
Fairfield & Howley	53.4	61.7
Latchford East	67.7	54.5
Orford	54.3	50.0
Poplars & Hulme	61.1	60.4
Poulton North	54.2	71.4
Warrington Average	**71**	**71**

Pupils living in the 20% areas of deprivation in six of the eight wards saw a decline in performance. 87% of children in Birchwood attended 3 schools. At one school, the pupils living in the 20% areas of deprivation in the Birchwood ward saw performance decrease by 25 percentage points, with an 8.7% decrease in the ward overall.

Overall, of the children living in the 20% areas of deprivation who didn't achieve, 60% of the cohort were boys, 44% of the cohort were born in the summer term and 16% had Special Ed. Needs.

4.1.2 Tracking Children's Development

In 2014, Warrington Local Authority devised a 'tracking children's development' tool to be used across early years including schools. The aim of the tool was to collect attainment data for children accessing an early education funding place from 2-4 years. Year on year we have seen an increase in the number of early years providers making use of the tool to track their children and then share the data with the local authority at 3 points throughout the year. This information is populated and analysed and is used to target areas of the town.

4.1.3 What we will do;

- Offer targeted Family Learning and Adult Literacy classes in our 6 Children's Centres across the town
- Children's Centre staff will model good practice which will support parents to develop the home learning environment and play a significant role in their child's early education and language development
- Deliver Ready Steady Nursery sessions in our Children's Centres to targeted groups of children who need some additional support to make them nursery ready
- Deliver Talking Chefs sessions in our Children's Centres to targeted groups of children identified as having a language delay
- Look at ways in which we can build on the 'Raising Early Achievement in Literacy' project (REAL). Early Years Practitioners in the PVI and nursery school class sectors and Children's Centres Staff trained in REAL
- Our Portage service will support children with SEND and their families to learn together, play together and to be included in their community. The portage home visitor reflects on their positive, holistic assessment of a child's skills and from this basis plans opportunities for learning including supporting speech language and communication development.
- Working with Public Health to continue to embed the work between health visitors and early year's practitioners supporting early language development, with a focus on the 2 year old integrated check. We are exploring the development of a speech and language pathway that offers timely intervention from a wider scope of agencies.
- Deliver Chatter Box sessions in our children's Centres to targeted groups of children identified as having a language delay
- Further build on the work of the 'tracking children's development' project by targeting more of the early years providers, including schools, to share their termly tracking data
- Use tracking data to target resources in an effective and efficient way based on local need. Monitor the impact of the 2 year old funding by analysing the Good Level of Development achieved by those children at the end of Reception.
- Develop a cluster performance scorecard that will be used to drive the improvement of outcomes in specifically defined projects as part of the early year's school readiness sub groups.

4.2 Challenge 2: Improving the availability and take up of high quality early years provision by disadvantaged children and in challenging areas.

4.2.1 Free education and childcare for 2-year-olds for people on benefits

A 2-year-old can get free early education and childcare if they live in England and get one of the following benefits:
- Income Support
- Income-based Jobseeker's Allowance (JSA)
- Income-related Employment and Support Allowance (ESA)
- Universal Credit [5]

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[5] subject to change (consultation on eligibility criteria currently under review)

- Tax credits and you have an annual income of under £16,190 before tax
- The guaranteed element of State Pension Credit
- Support through part 6 of the Immigration and Asylum Act
- The Working Tax Credit 4-week run on (the payment you get when you stop qualifying for Working Tax Credit)

A child can also get free early education and childcare if any of the following apply:
- They are looked after by a local council
- They have a current statement of special education needs (SEN) or an education, health and care (EHC) plan
- They get Disability Living Allowance
- They have left care under a special guardianship order, child arrangements order or adoption order

Since 2015, statistics collected from the January census show an increase in the percentage of eligible 2 year olds accessing an early education funded place[6]. On average, 98% of children access an early year's provision for more than 13 hours per week.
- 2015 – 87%
- 2016 – 94%
- 2017 – 100% [7]

In Warrington 96% of vulnerable / disadvantaged 2 years olds are accessing a funded early education place in an early year's provision. (Autumn Term dataset) The Department for Work and Pensions (DWP) release an eligibility list at 6 points across the year that states the families it believes to be eligible at that given moment.

Each family on the list, who are not already accessing an early years provider, are sent an invitation letter to make them aware that they are entitled to a Government funded early years place. They are encouraged to approach an early year's provider of their choice to complete an application. Parents can also self-refer if they feel they meet the economic criteria by completing an application at (https://admissions.warrington.gov.uk/CitizenPortal_LIVE/Account/Login?ReturnUrl =%2FCitizenPortal_LIVE%2F)

During the Autumn Term 2017, a total of 777 children were accessing one of 179 early years providers registered to deliver 2 year old funding. Children eligible for 2 year old funding are recommended to attend an early year's provision deemed good or better in their last Ofsted inspection. This applies for providers who are inspected on the early year register; this includes childminder and private, voluntary and independent day nurseries. Children are able to attend a school based

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[6] Count of children aged 2 at 31 December in the previous calendar year. Numbers of 2-year-olds taking up places is expressed as a percentage of the 2-year-old population eligible for a funded early education. The estimated number of eligible children is derived from data supplied to the DfE by the DWP in November 2016 on the number of children believed to meet the benefit and tax credit eligibility criteria. It represents the best data available on the number of eligible children in each local authority area.

[7] Warrington is referenced in the DfE Social Mobility Strategy. 'Unlocking Talent, Fulfilling Potential' as top in the country: "while 100% of eligible children in Warrington take-up the two-year-old offer, in Tower Hamlets it is only 39%". Report page 13.

provision; however, these are inspected under the school inspection framework and would receive an overall judgement as well as a separate outcome for their early year's provision. Schools with academy status are inspected under the school inspection framework, however, should they receive a Requires Improvement or Special Measures judgement, the Local Authority may choose to withdraw funding.

During the Autumn Term the proportion of children attending a provision based on their Ofsted outcomes was as follows;

- 34% of children accessed a provision deemed Outstanding by Ofsted during their last inspection.
- 58% of children accessed a provision deemed Good by Ofsted during their last inspection
- 8% of children accessed a new provision that were awaiting their first Ofsted inspection[8]

In addition, to the national criteria, Warrington also consider referrals from professionals working with the most vulnerable 2 years and offer a nursery place to children who do not qualify for a free nursery place under the national criteria.

4.2.2 Early Years Pupil Premium

The early year's pupil premium (EYPP) is additional funding for early years providers to improve the education they provide for disadvantaged 3- and 4-year-olds. The funding equates to up to £300 extra per year for each disadvantaged child who meets the eligibility criteria. Early years providers have to use this extra funding to improve the quality of education for disadvantaged children. Ofsted inspections report on whether providers spend their EYPP funding effectively. During the Autumn Term, 410 children met the eligibility criteria to receive the additional funding.

Although national Pupil Premium Plus funding is available for 3 year old Children in Care, in Warrington we release this to 2 year olds to help them become school ready and diminish the difference in achievement between them and their peers as early as possible.

4.2.3 What we will do;

- Ensure providers are effectively communicating to parents about the entitlements for all children including EYPP
- Support families of 3 and 4 year olds with disabilities to access their free childcare entitlements through the £12.5 million Disability Access Fund
- Use existing datasets in a more efficient and effective way to target families who are already accessing an early education funding place to ensure that they are aware of all of the entitlements available to them
- Continue to monitor the uptake of the 2 year old funding to ensure that the take up rate amongst disadvantaged 2 year olds does not fall.
- Continue to encourage early literacy skills via the termly Children in Care Book Scheme.

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[8] For the purpose of the guidance, these providers are deemed to be good following a robust registration visit

4.3   Challenge 3: Improving the quality of early year's provision in challenging areas by spreading best practice.

4.3.1 Early years' quality:

In Warrington, 94.48% of childminders have received an outcome of good or better at their latest Ofsted Inspection whilst 92% of childcare on non-domestic premises received a Good or better Ofsted inspection.

The early year's quality support officer will continue to work with providers who are deemed to be requires improvement and / or inadequate by offering a targeted offer of support based on Ofsted recommendations and actions.

The early year's childcare development officer supports and will continue to support;
• Newly registered childminders
• Childminders due an Ofsted inspection
• Childminders judged to be requires improvement / inadequate

4.3.2 Early years' improvement:

Qualifications are important but so is affordable Continuing Professional Development (CPD). In Warrington we have a dedicated Early Years CPD programme for local providers that is affordable, relevant and well attended. Since January 2017, 2595 delegates from 290 sites attended some sort of training delivered or commissioned by the Early Years Team.
(www.myearlyyearsservices.co.uk).

4.3.3 What we will do;

• Organise and host a Warrington Early Years Conference (One Child, Every Child) focussing on meeting the individual needs of children. The conference will bring together a host of leading national early years' experts.
• Develop early year's school readiness sub groups to meet 3 times a year. Sub groups will consist of Children's Centres, School nursery teachers and practitioners working in 3 and 4 year old provisions in the PVI sector. These groups will primarily be based in areas of disadvantage with the aim of agreeing and defining what school readiness means to all partners and improve outcomes for children within those areas.
• During 2018, Warrington Early Years are forming an exciting new strategic partnership with the University of Chester to utilise the skills and expertise of the Early Childhood Studies Department including lecturers and students. The partnership, currently in its infancy, will look to focus on providing high quality support to early years providers in areas of disadvantage by reviewing and improving their provision to support early language development with an emphasis on the 0-2 year olds. The impact of this partnership will be tracked through measurable outcomes defined from the outset.

- We will continue to build on and strengthen the CPD offer to early year's providers by providing training opportunities in a more targeted way in line with national policy and data trends.

5. PRIMARY SCHOOLS

5.1 Primary Schools quality: The current position on primary schools is that 67 out of 69 primary schools (97%) are judged by Ofsted to be Good or Outstanding; and two are judged as Requiring Improvement. This is an extremely positive picture with 97% of nursery and primary children also accessing a school judged to be good or outstanding. It should be noted that one of those schools recently judged to be Requiring Improvement is Cinnamon Brow CE, which is a school identified under 4.1 as having made excellent progress in Early Years.

5.2 Primary Schools performance: The outcomes across early years and primary for the 2016/2017 academic year included the following positive results:

- EYFS outcomes were above the North West average and in line with national average.

- KS1 outcomes were above the North West average and national average.

- KS2 outcomes were well above North West, Statistical Neighbour and national averages. Warrington was 2nd in the North West with 70% of pupils achieving expected and above in reading, writing and maths. In Maths, Warrington were the highest performing authority in the North West.

5.3 The challenges for the primary schools include sustaining this high level of performance and reducing the difference between achievement of particular groups (children on free school meals, disadvantaged, children with SEND and looked after children specifically) and the rest. However, more significantly in relation to social mobility, schools recognise that the focus should be on ensuring that all children make a good level of progress, regardless of their starting point, and are therefore able to access the opportunities available to them.

6. SECONDARY SCHOOLS

6.1 Secondary Schools quality: Warrington young people have access to 7 secondary schools that are judged to be Good or Outstanding which represents 58.3% of the total number of secondary schools. As a number of these Good and Outstanding schools have the largest population of students, this means that 69% of the secondary population is accessing education which is of a good quality or better. This number continues to increase as these are the schools that have been identified for expansion.

6.2 In summary:

- 7/12 secondary schools are judged to be Good or Outstanding
- 4/12 secondary schools are judged as Requiring Improvement
- 1/12 secondary schools was judged to be Inadequate*

It should be noted that the school converted to academy and therefore the judgement no longer applies.

6.3   Of the 7 schools judged to be Good or Outstanding, four are located in the most affluent parts of the borough, namely Great Sankey, Lymm, Bridgewater and Culcheth. However, two of the 7 schools serve some of the most deprived communities and these are Beamont Collegiate Academy and Cardinal Newman Catholic High School.

6.4   It is the case that Beamont Collegiate Academy has seen the most improvement and the Ofsted Inspection in June 2017 identified a number of positive developments since the last inspection including:
- Pupils make better progress across a broad range of subjects than when the school was previously inspected. Pupils' progress in the majority of subjects was in line with national averages in 2016 and has improved further this year.
- Outcomes for pupils currently in the school are now typically good.
- School leaders use pupil premium and special educational needs and/or disabilities funding increasingly effectively. As a result, outcomes for these pupils are now good and their behaviour and attendance are strong.

6.5   In relation to secondary performance, new measures have been introduced which preclude direct comparison with previous years. Two new headline measures were introduced from 2016, Attainment 8 and Progress 8. In addition, from 2017, English and Maths moved to a new grading scale, 1-9 (9 being the highest) making it difficult to compare directly with previous years data.

- Final KS4 data for 2017 was published in January. The provisional average Attainment 8 score per pupil for Warrington decreased from 50 in 2016 to 46.8 in 2017. The indicator also decreased nationally, from 49.9 in 2016 to 46.1 in 2017. However the Warrington average is higher than the North West average of 45.3.

- The percentage achieving a grade 4 or above in English and Maths GCSEs in Warrington provisionally stands at 68.3%, which compares favourably with a national average of 63.3%.

- The provisional Progress 8 score for Warrington in 2017 is -0.11, which is below the national average of -0.03, but slightly higher than the North West average of -0.14. Warrington was also below the national average for Progress 8 in 2016. However there are a number of schools where the Progress 8 score was good and this included Beamont Collegiate Academy, Orford.

- Warrington pupils are not making sufficient progress in English and in Maths at KS4, with the provisional average progress 8 scores in both subjects being below zero. The progress 8 score for English in Warrington is -0.02, slightly

above the national average of -0.03. However in Maths, the progress 8 score is -0.08, below the national average of -0.02.

- Further, children eligible for free school meals and those with an Education, Health and Care Plan are included in groups that have been classified as lower performing groups for overall achievement and pupil progress.

6.6   It remains that whilst primary schools continue to perform well, this is not true for a number of secondary schools and children are not making sufficient progress as they move from the primary phase into the secondary phase.

6.7   Addressing school performance issues strategically is the focus of the Warrington Strategic School Improvement Partnership (SSIP), which is a group of partners including representatives of the Local Authority; Warrington Teaching Schools; Warrington National Leaders of Education (NLEs), Warrington National Leaders of Governance (NLG's), and local Diocesan Authorities.

6.8   Across the Partnership, a number of bids have been submitted for Strategic Investment Funding from the DfE to address the priority issues as follows:

- Warrington Teaching School Alliance (WTSA) has secured funding under the second bidding round (SSIF2) to support improvement from early years;
- WTSA submitted a second bid under SSIF3 to extend this work and include a focus on phonics;
- Bridgewater Teaching under SSIF3 to address quality of teaching English at KS4;
- Liverpool Archdiocese under SSIF3 (2 bids) to raise attainment across primary and secondary;
- Warrington Local Authority under SSIF3 to support effective transition between Key Stage 2 and Key Stage 3 for a cluster of one secondary school and its "feeder" primary schools through 3 work streams: Maths; English and Attainment Gap.

6.9   The Warrington bid aims to develop a model of effective transition arrangements with a focus on curriculum continuity; commonality of language and assessment; and effective use of pupil premium to narrow the attainment gap across Key Stage 2 and Key Stage 3.

6.10   The approach will be to target 3 Warrington clusters initially and build capacity so that in the longer-term this model can be rolled out to raise attainment in English and Maths and narrow attainment gaps across the borough.

6.11   Even if the bid is not successful, the Partnership has agreed to develop a model using capacity and resource within the system. Significant work is currently underway to develop a school-led system-wide approach to school improvement delivering better outcomes for all children.

6.12   Warrington schools continue to recognise that there is room for improvement across a range of areas. The focus on a borough wide initiative to improve the

quality of teaching in the classroom for all pupils was implemented in 2015/2016, and is starting to have impact with improvements in the position for all pupils including specific underperforming groups.

6.12   Schools are encouraged by the local authority to support each other through system leadership and peer support, which includes:

- High level of collaboration and school to school support across all Warrington schools, including: school to school; Multi Academy Trust (MAT) to school; and MAT to MAT;
- High level of cross phase working including strategies that ensure Warrington children and young people achieve their potential at all key stages;
- Multi-Academy Trusts bringing primary and secondary schools serving the same local community together in order to have shared accountability for the education of children and young people from nursery to post 16.

6.13   It is also noted that the situation may be different for Looked after Children with a need for targeted interventions supported by the Pupil Premium Plus. Warrington's Virtual School is partnered with 4 neighbouring authorities that are submitting a bid for Strategic Investment Funding from the DfE to support the social, emotional and mental health needs of Children in Care. If successful the bid will support a train the trainer approach to supporting children in schools that will benefit future cohorts of Warrington children.

6.14   In relation to special education there is a strong commitment to collaboration. The four special schools (Sandy Lane Nursery and Forest School; Fox Wood Special School, Green Lane Special School and Woolston Brook Special School) work together as the Warrington Association of Special Headteachers (WASH).

6.15   In response to the need to develop the local offer generally the Warrington Inclusion Hub (WIH) was launched in April 2015 which is a partnership forum with the objective of ensuring that whenever possible and appropriate a child or young person with special education needs would be able to access suitable education within the local Warrington community. The WIH Forum has now developed into the SEND Review Group which in tasked with delivering an outcomes- focussed improvement programme for the local SEND offer, which makes effective use of the extremely limited resources available.

6.16   A great deal has already been achieved since the launch of the WIH and the "Committed to Inclusion in Warrington" Initiative. For example, 80% of Warrington schools have participated in various events and activities designed to provide training; profile high quality inclusive practice and generally build capacity across mainstream.

7.   **EMPLOYMENT/ EMPLOYABILITY**

7.1   **Young people Not in Education Employment or Training (NEET)**

7.1.1 The latest NEET data reports that in November 2017, 3.1% of Warrington 16 and 17 year olds were NEET compared to 3% regionally and 2.5% nationally. It is hoped that we will see a marked difference in NEET over the coming months due to recent new education provision that has come to Warrington.

7.1.2 The post 16 destination data was published at the end of February. Analysis of the destination data of those year 11s that left last July unfortunately is worse than previous years. This is potentially due to a reduction in the education offer from some key providers in Warrington compared to previous years.

7.1.3 Action has been taken to address this, including introduction of new providers to Warrington with a focus on a vocational offer aligned to local employment opportunities including childcare; warehousing and retail.

7.1.4 This approach fits with the recently published DfE statutory guidance for schools ensuring that they comply with the DfE prescriptive requirement to provide good quality careers guidance, as well as enabling access to providers within schools and promotion of non-traditional study routes, such as vocational study programmes and new technical qualifications.

7.1.5 A SEND Transition Manager post has been established and officer recruited to work strategically across children's and adults' services to ensure young people with special education needs are supported to prepare for adulthood and therefore make an effective transition from school to their next destination.

7.1.6 Additionally there are a number of initiatives focussed on adult volunteer mentors for young people and ensuring that we are getting the right people for such a critical role.

7.1.7 This includes the "Mentor Me" project delivered by the Brighter Futures team, within Education Services and aims to suitably match adult volunteer mentors to support the needs of individual NEET young people.

7.1.8 The volunteer mentors are provided with training to become a mentor, which can be converted to a NVQ 2 in volunteering, and then matched very carefully to a young person. The project has been very successful to date with high demand from adults to become a mentor, and the number of young people successfully re-engaging in education or securing employment.

7.1.9 There have been some real success stories for young people getting back into education or into employment as a result of the support received.

7.2 Employment readiness and life skills:

7.2.1 The Brighter Futures team has a focus on three key areas: mentoring; support for excluded and vulnerable young people; and adult employability training. This activity contributes to the long term aim for all Warrington children, young people and adults to succeed and prosper through access to high quality education and opportunity. Priority focus and support is targeted at vulnerable residents.

7.2.2 All activity is linked to personal development, confidence building and raising aspirations. The team supports positive progressions into employment, volunteering, education and community involvement, which in turn impact on improving families' life chances and social mobility. The latest positive progression rates across the team activity in 2015/16 were 73%. In quarter 2 2016/17, 283 individuals had or were being supported

7.2.3 The adult training programmes, delivered through children's centres and community venues are to the quality standards expected by Ofsted, providing training and advice so that vulnerable adults are helped to gain skills and find work. The team offers opportunities for adults to participate in activities that improve their personal skills, education and employability.

7.2.4 The Neighbourhood team work systematically with local people and partners to maximise income and access to jobs and training to local people This is similar to the Brighter Futures offer but for all ages. As well as budget boosting income maximisation for households, training and skills, mentors support regarding personalised travel plans for individuals; which helps get people into jobs and training through active travel and public transport.

7.3   Career support

7.3.1 The Council has been successful in obtaining funding from two current European Social Fund (ESF) projects aimed at promoting careers information and employment opportunities for young people.

7.3.2 The Life Goals project involves Interserve as lead contractor, with the Council subcontracted to deliver support to young people aged 15-24 years who are NEET or at risk of becoming NEET. Activities help unemployed people, inactive people and young NEETs to improve their employability and move into work by improving their skills.

7.3.3 The Be Inspired project (via Cheshire East Council as lead contractor) delivers information, advice and guidance, focussing on schools and colleges and supporting those institutions (through collateral, labour market information, events and ambassadors) to provide the right information to young people on the skills required to benefit from employment opportunities in local key sectors.

7.3.4 The council is also applying to be part of the National Careers Services delivery contract in 2018. This will provide funding to support unemployed or low skilled 19yrs+ Warrington residents back into employment or to access further learning.

7.3.5 All Looked After Young People aged 16-18 resident in Warrington receive bespoke one to one careers support from the Virtual School to help ensure they continue with education, employment or training.

7.3.6 It is worth noting that even though council services have been reduced, the local authority has a duty to support vulnerable NEET back into education or employment, especially looked after young people and young people with special

educational needs or disabilities. Teams within Education Services carry out this responsibility and ensure all young people's current destination is accounted for as part of the council's participation requirements.

7.4   Work experience

7.4.1   Work experience is crucial for young people. Young people with 4 or more work experience-type activities under their belt are 5 times less likely to be not in education, employment or training.[9]

7.4.2   Two thirds of employers rate work experience as being of significant or critical value for young entrants to the labour market and half of employers believe a top priority for schools and colleges should be developing awareness of working life with support from businesses.

7.4.3   The Government's Post-16 Skills Plan (2016) committed that students following a new technical education route would be entitled to a quality work placement to arm them with the technical skills they need to give them the best possible chance for entering skilled employment. The DfE is therefore introducing a requirement for all full-time 16-18 year old students to undertake a substantive work placement as part of the new T levels, which will be rolled out from 2020.

7.4.4   In the meantime, DfE is introducing a Work Placement Capacity and Delivery Fund to help colleges and training providers deliver work placements from the 2018/19 academic year. It is recognised that the delivery of significant work placements as part of T levels will be a step change for the sector, so capacity and capability need to be developed now, in advance of the introduction of T levels in 2020.

7.4.5   The placements are for students on vocational and technical study programmes at level 2 and level 3, and must be –
  - an average of 50 working days, covering a minimum of 315 hours
  - occupationally specific and focused on developing practical and technical skills
  - with an external employer on an external site (i.e. not with a training provider)
  - delivered to a structured work plan, appropriately supervised, and monitored by site visits

7.4.6   Some of the funding may be used to support students' travel and subsistence costs, and colleges may use some of their bursary allocation to support students who meet their criteria. Employers can choose whether they want to pay students or not, although the Government will be considering this in more detail as part of more wider consultation on T Levels.

7.4.7   Looked After Children in Academic Years 11 and 12 are offered bespoke work experience to raise aspirations and provide experience of potential future careers. It should also be noted that the ESF projects (Life Goals and Be Inspired) both offer work experience placements as part of the programme offer.

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[9] Education and Employers Taskforce. Work experience: Impact and delivery - Insights from the evidence (April 2012)

8.   **KEY ACTIONS AND OPPORTUNITIES IN THE NEXT FIVE YEARS:**

8.1   **Partnerships**
        The Early Years strategy continues to be delivered, and the focus on Early Help and SEND. Collaborative working between partners, schools and training providers, and with businesses continue to be enhanced.

8.2   **Improving transitions**
        Strong collaboration across primary schools has been particularly effective, as has collaboration between some secondary schools and their local primary schools. MATs offer the opportunity for continuum across primary and secondary with shared ownership and accountability across the piece (can even include Early Years) and to mitigate for financial risks impacting on a low funded local authority.

8.3   **Improving aspiration**
        With the launch of the new Careers Strategy at the end of 2017, the quality of careers information and guidance provided by schools to their pupils is now one of Ofsted hot topics; and therefore greater focus is being placed on this to encourage schools to give priority focus to ensure that all children and young people are aware of opportunities available to them.

        The upcoming Youth Zone in the town centre will offer an iconic, inspiring, safe and affordable place for young people to go. Youth Zones are a four-way partnership between the private sector, the local authority, young people and the community. Where the model has succeeded elsewhere in the country, it has been found to raise aspirations, and contributes to social mobility and employment opportunities.

8.4   **Harnessing economic growth for social mobility**
        Recognising the wider system issues to social mobility and not just the education sector, we need to scale up and systematise relationships between schools and businesses for the economic growth of Warrington to improve social mobility for young people.

        Analysis of numbers employed by occupational sector, and growth over the last six years, confirms the importance to the Warrington labour market of engineering activities; professional, scientific and technical roles; and business and professional skills. However, there are also significant recruitment needs in some lower paid or lower skilled sectors. The social care sector continues to face difficulties in attracting enough staff, and there are upcoming opportunities in retail and logistics.

9.   **CONFIDENTIAL OR EXEMPT**

9.1   This report is not confidential or exempt

10.   FINANCIAL CONSIDERATIONS

10.1   Most of the current range of ESF projects will finish in 2018. Work is underway to develop project specifications for the next procurement round, with the intention that new projects will run from late 2018 until 2021. The Government has confirmed that "multi-annual" projects will still be funded after the UK has left Europe, as long as they are approved before that point.

10.2   Promoting career opportunities in key sectors to young people, particularly through activities linking employers with schools and youth services is a key priority, giving likelihood to funding being made available to continue the activity described earlier in 7.2 (BeInspired project). Emerging ideas for future ESFs include –
- a communications hub, i.e. a website and materials to support careers
- support for SMEs to take on apprentices (working with Government to examine potential use of unspent Apprenticeship Levy monies)
- support for people made redundant or at risk of redundancy
- wage subsidies and training grants
- linking with complex dependencies programmes to deliver intensive support to those with multiple barriers / furthest from the labour market
- support for Employment Allowance Support Group (by far the highest numbers of benefit claimants, particularly those with mental health conditions), maybe entry level jobs, not necessarily 16 hours per week
- employer led skills provision, focusing on higher/degree level skills, emphasising key sectors; satellite model including use of employers' premises and distance learning
- increasing basic and lower level skills to enable progression in employment, to address low incomes, under-employment and in-work poverty
- support for employers to understand the issues and upskill themselves (e.g. in-work mentors) to be willing and able to take-on target group participants

10.3   As a low funded authority, Warrington schools do particularly well and offer excellent value for money. However, despite an increase in the overall amount of funding received, with increasing cost pressures many schools are facing greater challenges than ever before. Therefore development of self-sustaining solutions will be key in the future and is an important strand of the school improvement strategy.

11.   RISK ASSESSMENT

11.1   Social mobility is also associated with geographical mobility into and out of area. Improved outcomes for individuals may not be measured as such due to different cohorts coming into the area when others move out.

11.2   Fragmentation of the Warrington Education system as a consequence of the Government policy on academisation, although this may be mitigated by the development of a smaller number of MATs comprising large numbers of schools that continue to provide support across the system.

11.3   Four of the six current ESF projects will run until 2018, with the other two ceasing in 2019. These projects have all been match-funded by "Opt In" organisations: the Skills Funding Agency, DWP, and Big Lottery. The Local Enterprise Partnerships (LEP) is currently developing project specifications for the next procurement round,

with input from partners, including hands-on support from Warrington & Co. However, no match funding will be available, meaning that project applicants will need to find 50% of total costs themselves. On the one hand, this presents a risk in terms of being able to maximise the amount of ESF funding still available for Cheshire and Warrington. However, it could also result in smaller, more specific projects being funded which, learning lessons from the first round of large-scale ambitious pan-Cheshire projects, might be deemed more likely to make an impact for priority groups and deprived areas.

11.4   Influencing behaviour change is not easy and managing parental expectations and aspiration within a diverse community that has pockets of deprivation is a challenge. Identifying where to target resources balanced against not creating dependency requires a good knowledge and analysis of data and need alongside community engagement and building social capital. Therefore key to this is the schools commitment to lead and drive improvement across the education sector. The evidence suggests that although there is still work to do, the vast majority of schools are rising to this challenge and we are seeing improvements across a number of areas. This has enabled the local authority to respond to cuts in local authority budgets for education but still maintain a focus on key vulnerable groups.

12.   EQUALITY AND DIVERSITY/EQUALITY IMPACT ASSESSMENT

12.1   This report on social mobility considers geographical inequalities and life chances broadly in Warrington. Actions underway to improve social mobility and to reduce inequalities are highlighted within the report. This is to be viewed in conjunction with the wider partnership efforts for poverty mitigation and impact of welfare reform. As with all inequalities, system change is slow and outcomes may not be measurable year on year.

13.   CONSULTATION

13.1   WBC officers across the council contributed to the development of this report and have reported on work underway with partners. There has not been specific consultation on this report.

13.2   School improvement activities take place across schools under the leadership of the Local Authority and the Strategic School improvement Partnership and in consultation with Warrington Association of Primary Heads and Warrington Association of Secondary School and College Leaders (WASCL).

13.3   The Warrington Skills Forum, Building Stronger Communities and Supporting the Local Economy Policy Committee, Cheshire and Warrington Local Enterprise Partnership have contributed and consulted to support skills, training and social mobility.

14.   RECOMMENDATIONS

14.1   This report is to advise members of the current measures of social mobility for young people in Warrington, and actions in place to improve this from early years into employment, and to reduce inequalities across the town.

14.2 Recommendations for councillors are to:
  i. Note the excellent progress that has been made in relation to education performance of all children across Warrington including those in the most deprived wards;
  ii. Note the extensive activity that continues to be delivered to support all young people to access opportunity in the town; including targeted activity to support vulnerable groups;
  iii. Sponsor activities in wards to support social mobility from early years right through to post 16 destinations and employability initiatives; in partnership with schools, colleges, training providers and local businesses
  iv. Support the Central Area Neighbourhood Board initiatives to improve social mobility and family circumstances in these wards. The benefits accrue to the whole of Warrington.

15. BACKGROUND PAPERS

- Sutton Trust Conference report, 2012

- Sutton Trust Mobility index and mapping, April 2015

- Closing the gap in social inequalities and child poverty 2015-18.

- Warrington Health & Wellbeing strategy 2015-18.

- Warrington Early years strategy 2017-2020

- Education and Employers Taskforce - Work experience: Impact and delivery - Insights from the evidence, April 2012

- UKCES 'Scaling the Youth Employment Challenge' 2014 and 'the Youth Employment Challenge', 2015

- National Statistics Education provision: children under 5 years of age, Jan 2016

- Select Committee on Social Mobility. Overlooked and left behind: Improving the transition from school to work, April 2016.

- Time for Change: an assessment of government policies on social mobility 1997 to 2017, June 2017.

- Department for Education. Social Mobility Strategy: Unlocking Talent, Fulfilling Potential, Dec 2017

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Protecting the Most Vulnerable Policy Committee
Draft Work Programme 2018-19
19 June 2018
Produced by the Business Intelligence Team

Introduction

The purpose of this document is to assist in the development of the policy committee work programme 2018/19. The document contains the following information:

- Purpose and remit of the policy committee and topics it has looked at in 2017/18.
- Guidance from the LGA on selecting work programme topics
- National policy themes relevant to this committee
- Local ideas for inclusion in the 2018/19 work programme.

What does the Committee do?

- The Committee assists the Council and Executive in developing, monitoring and reviewing the Council's plans, policies and strategies
- Scrutinises decisions taken by Executive Board, Committees, Sub-Committees and Officers where appropriate.
- Makes recommendations to Executive Board relevant to its area of activity.

What topics can the Committee look at?

- The protection and safeguarding of vulnerable adults, children and young people
- Regulatory services protecting people from harm
- Health and well being
- Prevention, early help and family support
- Personalisation and disabled children, adults and their families
- Children in care
- Partnership working and integration
- Charging systems
- Social inequalities including child poverty
- Support to young offenders
- Support to victims and those at risk of domestic abuse
- Support to victims of hate crime

What topics has the Committee looked at in the last year?

During 2017-18 the committee looked at the following topics;

- Housing Strategy
- Warrington Wellbeing – Update
- Reducing Emissions from Idling Vehicles near Schools
- Deprivation of Liberty Safeguards
- Carers Strategy 2017-20
- Adult Social Care Transformation Programme

- Out of borough placements – Adults
- Annual report for adoption service
- Annual report for fostering service
- Regional adoption agency
- Early help and edge of care – update
- Adult and Children's Safeguarding Boards Annual Report 2016/17
- European Skills Fund projects
- Modern Slavery

Guidance for selecting work programme topics

The following criteria is a guide for prioritising and selecting topics for policy committee work programmes:-

Topics **<u>are</u>** suitable for inclusion when:

• the policy committee could have an impact and add value

• the topic is of high local importance and reflects the concerns of local people

• it avoids work duplication elsewhere

• the issue is one that the committee can realistically influence

• the issue is related to an area where the council is not performing well

• the issue is relevant to all or large parts of the local area

Topics **<u>are not</u>** suitable for inclusion when:

• the issue is already being addressed elsewhere and change is imminent

• the topic would be better addressed elsewhere (and will be referred there)

• policy committee involvement would have limited or no impact upon outcomes

• the topic is too broad to undertake any meaningful policy development

• new legislation or guidance relating to the topic is expected within the next year

• the topic area is currently subject to inspection or has recently undergone substantial
   change.

Defining work programme topics

For every item on the work programme, it should be clear:

• What is the issue/activity/policy development topic under consideration?

• What is the policy committee being asked to do?

• What are the reasons for/expected benefits of involving the policy committee in the
   matter?

• Is there a specific deadline for the piece of work?

*Note: - Adapted from the Local Government Association <u>Scrutiny for Councillors,</u>
       <u>Councillor Workbook</u>*

National Policy Themes relevant to this Committee

This section contains details of key national policy themes relevant to the committee which could have an impact on the Council's customers and the town:-

Health and Wellbeing

[Study links air pollution to cot death -](#) Air pollution could play a role in cot death, after a study found a link between short-term variations in air quality and infant deaths. The research, published by BMJ Open, looked at more than 200 cases of sudden infant death syndrome (Sids) in the West Midlands. *(19 April 2018)*

[Spikes in air pollution can heighten risk of chest infection](#) - New research by scientists in the US, published in the American Journal of Respiratory and Critical Care Medicine, claims that even short-term increases in air pollution is linked to a higher risk of developing viral chest infections that turn into conditions such as bronchitis. (*13 April 2018*)

[Loneliness more likely to affect young people](#) **-** Almost 10%of people aged 16 to 24 are "always or often" lonely - the highest proportion of any age group and more than three times higher than people aged 65 and over - according to research from the Office for National Statistics. The study suggests that older people are becoming more "resilient" to worries about loneliness. (*10 April 2018*)

[Social media firms should do more to protect young people's mental health'](#). - A survey commissioned by the Royal Society of Public Health suggests an overwhelming demand from the public for tighter regulation of social media companies, with four in five (80%) believing it is needed to address the impact of social media on the health and wellbeing of young people. These findings coincide with the launch of a new All-Party Parliamentary Group (APPG) aimed at tackling the issue. *(18 April 2018).*

[Cyberbullying makes young people twice as likely to self-harm or attempt suicide](#) - Cyberbullying makes people under the age of 25 more than twice as likely to self-harm or attempt suicide, according to a new study by the Universities of Oxford, Swansea and Birmingham. (*22 April 2018*).

[Thousands of children lured into 'country lines' drug dealing](#)
The Metropolitan Police has said that more than 900 "county lines" have been identified across the UK, where organised crime groups in urban areas use violence and intimidation to force young and vulnerable people to sell drugs in rural or seaside areas. Officers say this means "potentially thousands" of young people are being exploited, with social media sites typically used to target them, although gangs also visit schools to try and recruit (*13 April 2018*)

Steep rise in child abuse images online **-** The Internet Watch Foundation says it is finding more images of child sexual abuse online than ever before, with over 78,000 website addresses containing child sexual abuse discovered in 2017, up from around 57,000 in 2016. Amid a rise in "disguised" websites, which are on the open web, where illegal content is shown only to people who access them via a particular pathway (*19 April 2018*)

Funding pledge for children of alcoholics - The Government has announced £6 million of funding to help children with alcoholic parents. Plans include fast access to mental health services for children and programmes to treat parents' addiction, with councils able to bid for a share of £4.5 million, based on their need for services. *(23 April 2018)*

Obesity-related hospital admissions - Hospital admissions where obesity is a factor have more than doubled in England during the last four years, according to new figures from NHS Digital, with almost 617,000 appointments in 2016-17 where obesity was either a primary or secondary diagnosis, up from 292,000 in 2012-13. NHS Digital's annual study highlighted a growing obesity divide between children living in the poorest and richest areas *(4 April 2018).*

Obesity Strategy - Buy-one-get-one-free deals on junk food are set to be banned as part of the Government's forthcoming obesity strategy. Junk food advertising before 9pm could also be included in the strategy, to be announced before the end of June. Restrictions on buy-one-get-one-free deals and other promotions on foods considered to be high in fat, sugar or salt are believed to be central to the planned legislation after Public Health England said that this was one of the most effective ways to tackle obesity. In addition a ban on fast food shops near schools could also be included in the strategy (*25 April 2018*)

Domestic abuse cases up among older couples - Studies indicate domestic violence is a growing problem among older couples. The latest research collated by Women's Aid on women killed by male partners discovered that 11.5% of women killed by a partner or ex-partner were aged 66 or over. According to a 2016 report by domestic abuse charity Safe Lives, an estimated 120,000 women over 65 had experienced at least one form of abuse. Studies also show older victims are less likely to leave abusive relationships than younger people. (*25 April 2018*)

Adult and Children's Services

Support for small childcare providers **-** A report from the Federation of Small Businesses has warned that small childcare providers will need action from the government to stay afloat. The report warned that government payments to local authorities, made to support its promise of 30 hours of free care for some children, will need to be increased to keep small businesses running. Some providers are already passing additional costs on to parents. (*19 April 2018).*

New measures to support children with SEND: 94% of young people with special educational needs or disabilities (SEND) have had their care reviewed as part of the Government's introduction of new Education, Health and Care (EHC) plans. DfE has announced 14 new special free schools across the country. Other measures include funding for local authority regional SEND coordinators, launch of a national trial to enable parents and young people to appeal decisions on the social care and health parts of their EHC plan. (*29 March 2018*).

Annual report of the Troubled Families Programme 2017 to 2018: provides an update on the progress made by the Troubled Families Programme in helping families tackle complex problems and enabling local authorities to provide more effective services. It found that better support for families is reducing the number of cases that need to be escalated to children's social care. (*27 March 2018*)

Social Care Green Paper - The Health Secretary has outlined the seven key principles that will guide the Government's thinking ahead of the Social Care Green Paper, which will be published in summer 2018. Central to all of these principles is innovation. He states that the current charging system for social care is far from fair and a new system needs to include an element of risk-pooling. The Green Paper will look at how to do this, as well as the potential costs. (*20 March 2018*).

Citizens' assembly to consider adult social care funding - The first citizens' assembly commissioned by Parliament will come together to consider the best way to fund adult social care. The Citizens' Assembly on Social Care will be formed by 50 people who have been chosen to reflect the makeup of the wider population. The assembly is being established as part of the inquiry into the long-term funding of adult social care. (*24 April 2018*).

Consultation on extending personal budgets – The Department of Health and Social Care is seeking views on giving more people the right to have personal health budgets and integrated personal budgets. Currently, the only people who have a specific 'right to have' a personal health budget, are adults in receipt of NHS continuing healthcare or children receiving continuing care. DHSC has identified a number of other groups who it feels could benefit from having a 'right to have' a personal health budget, or where appropriate, an integrated personal budget. (*6 April 2018*)

Social Inequality

Cumulative Impact of Tax and Welfare Reform – This research by the Equality and Human Rights Commission looks at the cumulative impact of tax and welfare reforms on different groups of people. The analysis shows that, overall, changes to taxes, benefits, tax credits and Universal Credit announced since 2010 are regressive. The largest impacts are felt by those with lower incomes and in particular disabled people, single female parents, children and Bangladeshi communities (*14 March 2018*).

Impact of tax and welfare changes on disabled people - A report on the impact of tax and welfare changes on disabled people has been published by Leonard Cheshire Disability. More than one in four (27%) working age disabled adults reported having less than £50 to spend each week after deducting income tax, council tax and housing costs. Lack of social care further deepens the financial difficulties faced by disabled people, severely limiting their ability to work, access education or other opportunities such as volunteering, says Leonard Cheshire. *(18 April 2018).*

Record level of supplies given out at food banks - Research by the Trussell Trust shows a 13% increase in food distributed by food banks last year with more than 1.3 million three-day food supplies in the year to March, half a million of which went to children. Figures from the National Housing Federation have found that rent arrears, evictions and food bank use are increasing in areas where universal credit has been rolled out. The figures show that 73% of housing association residents on Universal Credit are in arrears, compared to 29% of those not on Universal Credit. *(24 April 2018)*

Free school meals - Analysis by the Institute of Fiscal Studies has predicted that around 160,000 of the 1.3m children who currently qualify for free school meals will become ineligible under new criteria requiring families to be on Universal Credit, and with net earnings of less than £7,400. (*5 April 2018).*

The Homelessness Monitor: England 2018 – This annual report funded by Crisis and Joseph Rowntree Foundation analyses the impact of economic and policy developments on homelessness. As housing supply dwindles and rents outstrip wages and benefits, 70% of local authorities surveyed for the report said they had difficulties finding social housing for homeless people last year, while a striking 89% reported difficulties in finding private rented accommodation. (*12 April 2018*)

New government initiative to reduce rough sleeping: A cross-government plan of action to reduce significantly the number of people sleeping rough has been announced. The measures include: a new Rough Sleeping Team to drive reductions in rough sleeping; a targeted £30m fund for 2018 to 2019 for local authorities with high levels of rough sleeping; and £100,000 funding to support frontline Rough Sleeping workers.
(*30 March 2018*)

Growing Up North - The Children's Commissioner for England has published a report which contains evidence for the need for effective action to address the disparity between the prospects of children in the North and elsewhere and in particular those from disadvantaged backgrounds. The report highlights examples of existing excellent practice and contains a series of recommendations (*25 April 2018*)

Protecting the Most Vulnerable Policy Committee
Draft Work Programme 2018-19

This section contains the draft work programme 2018-2019 for approval by the Policy Committee. It contains items that have been brought forward from the 2017/2018 work programme and new topics for inclusion in the 2018/19 work programme. The purpose of the topic and what the committee is being asked to do have been included in the work programme.

Work Programme Topic	Purpose of the item	Recommendations - What is the Committee being asked to do?	Link to National Policy & Local Context	Lead Officer	Date of Meeting
Theme – Adult and Children's Services					
Better Care Fund	This item will look at how the better care fund is contributing to better integrated working. It will also take into account NHS bed capacity and the need to reduce delayed transfers of care and length of stay in hospital	To forward the committee's findings to Executive Board	Integration of health and social care, including reduction of so called 'bed blocking'	Steve Peddie, Executive Director, Families and Wellbeing	19 June 2018
Transforming care for people with a learning disability and/or autism	To review Warrington's progress on a service model for people with a learning disability and/or autism with behavioural and mental health conditions	To forward recommendations to Executive Board	This work stream is part of the Transforming Care Programme	Steve Peddie, Executive Director, Families and Wellbeing	19 June 2018
Social Care Task Group	This is a working group which will look at the quality of care in Warrington and CQC compliance	Forward findings to Executive Board	The CQC publishes an annual review of the quality of care across the UK. called "State of Care". The CQC also provides a baseline picture of quality of care through its inspection and rating programme.	Steve Peddie, Executive Director, Families and Wellbeing	August 2018

Social Care Green Paper	To examine the Government Social Care Green Paper and response from leading national organisations	To forward the committee's findings to Executive Board	The Government is due to publish a green paper on social care in summer 2018. It is expected that this will include proposals for a new social care charging system	Steve Peddie, Executive Director, Families and Wellbeing	18 September 2018
Recommissioning domiciliary care	To examine the delivery of the domiciliary care programme	To forward the committee's findings to Executive Board	Demand for health and social care continues to rise due to an aging population and an increase in the number of people with complex needs.	Steve Peddie, Executive Director, Families and Wellbeing	11 December 2018
Theme – Health and Wellbeing					
Support for children and young people on the autism spectrum	To assist in the development of a policy which sets out support for children and young people on the autism spectrum. An initial overview of the proposed work will be considered in September 2018	To forward recommendations to Executive Board for inclusion in the autism strategy	Further education and employment opportunities can be limited for autistic young people. Evidence suggests that early intervention improves life chances and opportunities.	Steve Peddie, Executive Director, Families and Wellbeing	18 September 2018 & 11 December 2018
Mental Health and Young People	To look at the mental wellbeing of young people. This topic will also look at the impact of social media on the mental wellbeing of young people	To forward the committee's findings to Executive Board	The government has commissioned a parliamentary group to look at the impact of social media on young people. An ONS study found that young people were more likely to be lonely than any other age group.	Steve Peddie, Executive Director, Families and Wellbeing	19 February 2019

Air Pollution	To review the impact of air pollution on health and wellbeing. This topic also links to the Building Stronger Communities Policy Committee and could be a joint work programme topic	To forward the committee's findings to Executive Board	The government published a draft clean air strategy at the end of May 2018 for consultation. The document sets out plans to tackle emissions from a range of sources.	Dr Muna Abdel Aziz, Director of Public Health	2 April 2019
Theme – Social Inequality					
Closing the achievement gap for children and young people from disadvantaged backgrounds	To look at research by Chester University and what actions the council can undertake to improve educational attainment and life opportunities	To submit recommendations to Executive Board	A number of research reports indicate that life opportunities for children/ young people from disadvantaged northern backgrounds are limited and in particular white British boys. Educational attainment is a key factor to future social mobility.	Steve Peddie, Executive Director, Families and Wellbeing	19 June 2018
Facilities for Homeless People	To be confirmed.	To be confirmed	National research shows that homelessness continues to rise due to housing shortages, low wage growth and welfare and tax reforms	Dr Muna Abdel Aziz, Director of Public Health	18 September 2018
Issues arising from the Homelessness Reduction Act which came into effect in April 2018	To review the arrangements in place for homelessness services in relation to standards recommended by the Homelessness PAG	To forward the committee's recommendations to Executive Board	National research shows that homelessness continues to rise due to housing shortages, low wage growth and welfare and tax reforms	Dr Muna Abdel Aziz, Director of Public Health	19 February 2019
Impact of Welfare and Tax Reforms	To look at the impact of welfare and tax reforms on different groups of people in Warrington	To forward the committee's findings to Executive Board	A number of national studies have found that welfare and tax reforms are more likely to impact on some groups of people e.g. disabled people	Dr Muna Abdel Aziz, Director of Public Health	2 April 2019

STANDARD ITEM					
Updates on current issues	To receive updates and scrutinise current issues This will include relevant outside bodies, conferences and children's homes inspections. The purpose of this item is to keep up to date with future adult and children's care trends.	To forward any findings (as applicable) to Executive Board	Members sit on a number of outside bodies, information from the boards maybe of interest to the committee. Future social care trends are discussed at major conferences.	Steve Peddie, Executive Director, Families and Wellbeing	Every Meeting

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