

 	<p style="text-align: center;"><b>Health and Wellbeing Board</b> 5 October 2017</p> <p style="text-align: center;"><b>Report from Strategic Director of Children and Young People</b></p>
<p style="text-align: right;">Wards affected: ALL</p>	
<p><b>Brent Children's Trust Update</b></p>	

## 1.0 Summary

- 1.1. The Brent Children's Trust (BCT) is a strategic body that encompasses a local partnership of commissioners and key partners. The primary function of the BCT relates to commissioning, joint planning and collaborative working, in ensuring that resources are allocated and utilised to deliver the maximum benefits for children and young people.
- 1.2. The BCT has strong relationships with the Brent Health and Wellbeing Board (HWB) and Brent Local Safeguarding Children Board (LSCB). Through its Joint Commissioning Group (JCG), the BCT oversees five groups tasked with implementing specific priorities operationally across the partnership. This structure is set out in section 3.1.
- 1.3. The BCT provides the Brent Health and Wellbeing Board with an update paper every six months, with the previous report having been presented at the March 2017 meeting. This paper provides a broad summary of the BCT work programme and actions of the JCG from April 2017 to September 2017.

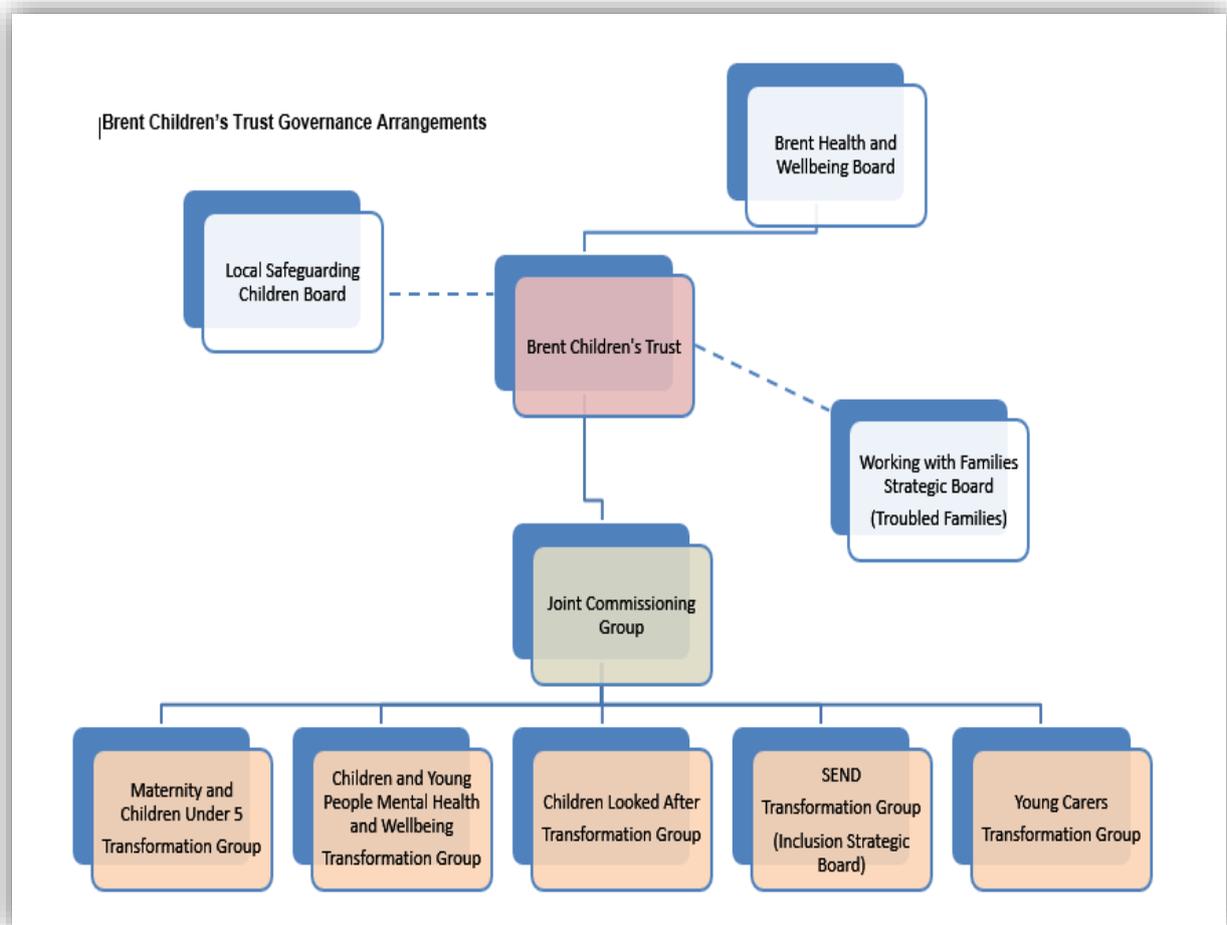
## 2.0 Recommendation(s)

- 2.1. The Health and Wellbeing Board is asked to note the work of the Brent Children's Trust for the period April 2017 to September 2017.

### 3.0 Detail

#### Structure

3.1. The diagram below provides an overview of the governance structure of the BCT, JCG and five Transformation Groups.



#### ***BCT work programme***

3.2. The BCT meets six times a year to review progress of its work programme and address emerging issues locally and nationally. It steers the JCG and the transformation groups. Between April 2017 and September 2017 the BCT met three times on 17 May 2017, 11 July 2017 and 12 September 2017.

3.3. During this period the BCT examined:

- issues relating to transitions from childhood to adulthood which resulted in the BCT recommending that the Special Educational Needs and Disability (SEND) transformation group (also known as the Inclusion Strategic Board) initiate a task and finish group to deliver a multi-agency transitions protocol
- an update on the Joint Targeted Area Inspection (JTAI) theme "neglect", the BCT will provide strategic oversight to the partnership work being

- undertaken to understand the impact of support for children living with neglect and will also contribute to the development of a neglect strategy
- the Brent schools exclusions annual report and agreed to explore opportunities for sharing joint strategic oversight with the LSCB on partnership working that supports children at risk of exclusion/ excluded and their families

3.4. Since March 2017 the BCT's work programme has covered the following areas:

***Collaborative working and information sharing with Brent LSCB***

- The BCT continues to work collaboratively with the Brent LSCB. The LSCB Chair is a standing member of the Children's Trust which allows the two boards to develop shared priorities and identify areas for joint working.
- A new Strategic Partnerships team was created at the Council in May 2017 to provide consistent support to key Brent partnerships and further strengthen the links between BCT and other key strategic partnerships.

***Oral health***

- The BCT considered the implications of NHS England's London-wide re-tendering of Community Dental Services (CDS). The BCT welcomed Brent Council's associate commissioner status to the new CDS contracts which enables it to influence the service specification, contribute to the oral health promotion work programme and participate in contract management.
- The BCT identified Harlesden as the area with the highest tooth extraction rates in the borough and agreed that oral health services should be prioritised in this area.
- The BCT also recommended that oral health be considered by the Community and Wellbeing Scrutiny Committee.

***Healthy Child Programme 0-19 Service: health visitor and school nurse commissioning***

- Following the BCT involvement in the procurement process of the agreed service model for children's public health services (0-19 service), the new service contract was awarded to Central London Community Healthcare (CLCH) NHS Trust. This service came into effect on 01 June 2017.
- As part of this new service the Maternal Early Childhood Sustained Home-Visiting (MESCH) model was endorsed by the BCT and members of the Board sit on the newly established multi-agency MECSH strategy group.

***Maternity services***

- Significant numbers of Brent women give birth at hospitals outside Brent. Public Health are now meeting regularly with midwives at Imperial and the Royal Free as well as at Northwick Park.
- The BCT recognises that these relationships have strengthened the public health offer from maternity services and improved the linkages between midwives and health visitors. Of particular note is

the work towards Unicef baby friendly accreditation and the offer by maternity units of flu and pertussis (whooping cough) immunisation.

### ***Child and Adolescent Mental Health Services (CAMHS) transformation***

- The BCT continues to be a key forum to share, discuss and inform the Brent CCG led Children and Young People Mental Health and Wellbeing Transformation Plan. A comprehensive needs assessment has been produced with multi-agency involvement.
- The BCT remains sighted on the CAMHS service redesign project and the development of monthly monitoring data. Waiting times and numbers of children waiting have fallen significantly.
- CAMHS pathway redesign workshops have been held with stakeholders including Central North West London Mental Health Trust (CNWL), Brent Council and Brent Centre for Young People. The recommendations from these workshops will be shared with the BCT for review and comment as part of an updated transformation plan.
- Further exploration is being undertaken to establish an integrated multi-agency approach to transformation. Existing effective models of working with schools and families will be scaled-up.
- The BCT has begun to evidence impact of partnership working activity. For example, wider referral pathways into services have been established and schools are now able to make referrals direct to CAMHS.
- Brent CCG performance dashboards have been analysed and driven discussions around improvements to the location and accessibility of CAMHS services for eating disorders and Looked After Children (LAC). More comprehensive CCG data has subsequently been developed which was used at the CAMHS Transformation Delivery Workshop and updated data will be reviewed by the JCG in September 2017.
- The Brent Council Community and Wellbeing Scrutiny Committee established a task group to evaluate CAMHS and progress on joint commissioning. Their findings were reported in July 2017 to the Community and Wellbeing Scrutiny Committee and reviewed by the BCT in September 2017. Recommendations from the committee will be taken forward through the BCT.

### ***Looked After Children (LAC)***

- The BCT has supported a Brent Council led review of the LAC system and continues to oversee the progress of areas of work including LAC health, education, accommodation and overall outcomes for LAC and care leavers.
- The BCT recognises that care planning for vulnerable adolescents remains an area of challenge due to the complex needs of young people such as missing from care, child sexual exploitation (CSE) and gang-related activities.
- Some focused work has been undertaken on improving outcomes for those children and young people that are not in education, employment, or training (NEET). This includes the development of a NEET tracking

panel which tracks the progress of and develops a tailor package of support plan for each NEET young person (both LAC and care leavers).

- A proposed accredited independent life skills programme is being developed with the view to support care leavers with aspects of independent living including; education, employment, housing, relationships and health and wellbeing.
- The BCT is overseeing the development of a new local offer for Brent's care leavers as per legislative requirements under the new Children and Social Work Act 2017.
- The BCT has enabled LAC to be engaged in joint commissioning processes through the Care In Action Group's involvement in the Children Looked After transformation group.

### ***Outcome Based Reviews (OBR)***

- The BCT received a briefing on the OBRs that are led by Brent Council and all members of the BCT have attended OBR workshops contributing their expertise.
- The Chair of the BCT is leading the Gangs OBR.

### ***Brent Health and Care Plan***

- The BCT have agreed that appropriate representatives feed in and contribute to the Brent Health and Care Plan working groups.

### ***Working with Families (Troubled Families Programme)***

- The Working with Families Brent partnership work is now under the governance of the BCT. It receives updates from the Working with Families Transformation Group every six months to oversee delivery of the five year Expanded Troubled Families programme in Brent.
- The BCT continues to oversee the Troubled Families Programme (Phase 2) to ensure alignment of the whole family approach (which attempts to ensure clients access the right service at the right time) with the Brent 2020 vision.
- The BCT welcomed the spot check visit from the Department for Communities and Local Government (DCLG) earlier this year. The feedback from the visit on the Brent programme was positive, with DCLG commenting on the high quality work that Brent is carrying out with families.
- The BCT agreed the importance of capturing the business case benefits to support long term sustainability and endorsed the work that is underway in Brent Council to develop case studies demonstrating partnership cost-benefits of the programme.
- The BCT is exploring opportunities to reconfigure the Maternity and Children Under Five Transformation group to focus on early help and link to the Working with Families Board.

### ***Young Carers***

- Young Carers remain a priority area for the BCT and it continues to be sighted on the work led by the Brent Early Help service to raise awareness of Young Carers across Brent.

- The BCT considered a case study focused on the partnership support and response to a Young Carer and their family. The BCT identified that the implementation of the CAMHS THRIVE model (part of the joint emotional health and wellbeing strategy) will support families like this to experience good outcomes and therefore limit their need for high cost acute professional services.
- Members of the BCT were directly involved in organising briefing sessions to raise awareness of Young Carers and strengthen working relationships. These sessions have targeted a range of professionals and forums across Brent including schools, GPs, Addaction, CAMHS, Early Help Service, Brent CCG and Brent Libraries.
- The BCT have influenced the expansion of the LSCB multi-agency training offer to include a regular briefing session on Young Carers.
- The BCT have endorsed a Young Carer self-assessment and identification model has been piloted through a series of workshops in Brent schools (Chalkhill Primary School, John Keble C of E Primary School and Salusbury Primary School) which helped to identify a number of Young Carers.
- The BCT supported National Carers Week (12-18 June) and members contributed to events that took place over the course the week.

### ***Joint local area Special Educational Needs and Disabilities (SEND) inspection in Brent***

- 3.5. The BCT led the preparation for the joint SEND inspection and provided a steer on a range of activities including refreshing the Self Evaluation Form (SEF), developing clear rationales and evidencing impact of improvement.
- 3.6. In May 2017, Ofsted and the CQC conducted a joint inspection of Brent to gauge how effectively the borough is delivering the improvements within the Special Educational Needs and Disabilities (SEND) reforms contained within the Children and Families Act 2014.
- 3.7. During the period, inspectors met with children and young people who have special educational needs and/or disabilities, parents and carers, local authority and National Health Service (NHS) officers. They also visited a range of providers and spoke to members of the BCT, leaders, staff and governors about how the SEND reforms are being implemented in Brent.
- 3.8. Ofsted and the CQC identified a number of strengths in the Local Authority's provision for children and young people with SEND, one of which was the;
 

*“Strong commitment from senior leaders across Brent local authority is improving outcomes and services for children and young people. The local children's trust board is chaired by the director of children's services who ensures that improving education and care outcomes for children and young people remains at the heart of their work.”*
- 3.9. Although the education and care aspects of our inspection were very positive and some health aspects were commended, a Written Statement of Action (WSoA) was requested primarily due to health provision concerns raised in

the report. The BCT have submitted the draft WSoA to the Health and Wellbeing Board for approval.

- 3.10. The full report was published on Ofsted's website on 20 July 2017.
- 3.11. Following the inspection, a number of actions have been initiated to take forward improvements. One key area for development was the involvement of parents and carers in the design and delivery of service. The Inclusion Strategic Board has established four work streams and each has parent representatives participating in the group. The four work streams will focus on:
- The local offer and short break activities to ensure there is wider publicity and information for parents/carers and children and young people with SEND.
  - The ongoing development and quality assurance of Education, Health and Care Plans and the systems and processes ensuring there is co-production with parents.
  - Joint commissioning of paediatric therapy services – developing the specifications for Speech and Language Therapy, Occupational Therapy and Physiotherapy to deliver a seamless service for children and young people with SEND.
  - Developing pathways and protocols for good transition to adulthood.

### ***Children's Joint Commissioning Group (JCG) and Transformation Groups***

- 3.12. The BCT has oversight of the JCG. This group meets every two months to progress the Joint Commissioning Framework and consists of the Chairs of the five Transformation Groups, Brent CCG Children's Commissioner, Brent Council Children's Commissioner, and other key stakeholders.
- 3.13. Attendance from members is consistent and has representation from Brent Council and Brent CCG. School representatives will be attending as standing members of the JCG from September 2017.
- 3.14. The BCT recognises that the progress of joint commissioning has been slower than expected and the gaps between services and providers supporting Brent children and families require resolution with senior leadership sponsorship and commitment to increasing capacity.
- 3.15. The JCG identified four priorities that have outstanding actions which require resolution in 2017/18:
- Shared implementation of joint emotional health and wellbeing strategy
  - Integrated monitoring and assurance dashboard on joint commissioning priorities
  - Integrated commissioning of therapies
  - School Nursing support in Special Schools
- 3.16. The JCG is now monitoring the ongoing development of its delivery plan with a key focus on recommendations around integration and co-location.

3.17. The JCG has been developing the JSNA as a forward-looking, live document and is in the process of collating data from a range of sources including Brent CCG and the Anna Freud Needs Assessment.

3.18. Assurance dashboards are being introduced from September 2017 and will be available for the next update to Health and Wellbeing Board.

#### **4.0 Financial Implications**

4.1 There are no financial implications.

#### **5.0 Legal Implications**

5.1 There are no legal implications.

#### **6.0 Equality Implications**

6.1 There are no equality implications.

#### **7.0 Staffing/Accommodation Implications**

7.1 There are no staffing/accommodation implications.

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