



BOROUGH OF POOLE
CHILDREN'S TRUST GOVERNANCE BOARD

MONDAY 12th September 2011

The Meeting commenced at 5 pm and concluded at 7 pm.

Present:

Members of the Board

Anne Newton – Chair, Strategic Director of Children's Services, Borough of Poole
Gerry Moore – Service Unit Head: Children and Young People's Social Care, Borough of Poole
Jan Thurgood – Strategic Director Adult Services, Borough of Poole
Linda Boland - Operational Director, Children's & Specialist Services, Dorset Healthcare University Foundation NHS Trust (sub for Roger Browning)
Ros Maycock – Chair, Professional Executive Committee
Vicky Wales – Service Unit Head: Children and Young People's Integrated Services, Borough of Poole
Gerry Moore- Service Unit Head, Children and Young People's Social Care Borough of Poole
Stuart Twiss- Service Unit Head, Children and Young People's Strategy Quality and Improvement Borough of Poole
Sophia Callaghan- Consultant Public Health NHS Bournemouth and Poole (sub Adrian Dawson)
Sue Pelham- Head Teacher, Canford Heath Schools
Janet Walton- Councillor
Sandra Moore-Councillor

Also in attendance

Nick Wharam – Strategic Planning and Commissioning Manager,
Matthew Windsor- Performance Data and Stats Officer

1. APOLOGIES FOR ABSENCE

Apologies of absence were received from:
Mandy Goodenough- Director BCHA,
Adrian Dawson Director of Public Health,
Blair Crawford Chief Executive YMCA
Val Graves –Chief Operating Officer, Community Health Services ,
Dorset Healthcare University Foundation NHS Trust

2. MINUTES AND MATTERS ARISING

LB informed the Board that the South West IAPT bid had unfortunately been unsuccessful probably because areas of deprivation had been targeted.

Action Agreed;

GM to circulate minutes from ADCS conference

NW to send out email circulation list for Health.

3. CHILDREN, YOUNG PEOPLE AND FAMILY PLAN

The plan was agreed by the Board with the proviso that the governance chart be changed to reflect the new Health and Wellbeing Board and that the work around the youth offending service is reflected in the Working Together section.

Action agreed;

The plan was agreed

4. PERFORMANCE FRAMEWORK FOR THE PLAN

The Board considered a draft performance framework. NW reminded the Board they had agreed some principles;

A small number of measures which could indicate progress (rather than multiple national indicators).

Where possible outcome measures which illustrated impact on lives of children.

MW presented a possible outcome measure based on GCSE results for young people from Bourne Valley post codes. The Board were interested in the large gap between the young people's expected results (based on Fischer Family Trust estimates ie. contextualised) and their likely lower results based on current trends. (and that other young people in Poole with a similar deprivation profile have the same poor predicted outcomes) He also reminded the Board that the young people were spread across several schools and that St Aldhelm's Academy could not be included as they had not agreed to data share.

A discussion took place on the proposed framework.

LB felt that more measures were needed against Mental Health and Emotional Well being and that this could be based on work the Trust were doing on reported patient outcomes.

VW pointed out that the two yearly consultation provided a robust view from young people and children about bullying and safety.

RM suggested that young people's views of the CAMHS services would be a useful measure.

VW suggested that the narrowing the gap data in the Early Years Profile would also provide an important measure, particularly around early intervention and both health and local authority services for under 5's and their families.

ST and NW explained the importance of a targeted outcome measure such as the GCSE one as it would provide a focus for work with schools and other agencies.

AN welcomed the approach and suggested that the framework be finalised and brought to the next Board.

Action agreed;

NW to work with others to complete performance framework and bring back to next Board

5. FAMILIES WITH MULTIPLE PROBLEMS

Gerry Moore gave a presentation on the current strategy and developments around families with multiple problems.

She briefed on the Family Intervention Project (FIP), the new Step Change project in Alderney and that Poole had bid to be a pilot area for Working Families Everywhere, this bid is linked to Poole being agreed as a Community Budget area.

She also outlined the emerging governance structure and asked the Board to think about the contribution other agencies would wish to make.

RM noted that some families would require a very long term and focused approach to overcome very embedded cultural and behavioural issues. GPs would be able to contribute to this agenda as they are very familiar with this group of patients.

JT pointed out that one challenge would be the different skill set which may be required for working with these families.

LB informed the Board that DHUFT were carrying out some work on skill mix and what was needed to engage hard to reach service users. This may provide some useful learning.

GM explained that workers joining the virtual team around these families would need to bring their skills and knowledge but leave their professional boundaries and barriers to flexible working behind.

Action agreed;

GM to update on progress on families with multiple problems at next CT Board.

6. PRIORITY SETTING PROCESS IN HEALTH AND LOACL AUTHORITY ENGAGEMENT PROGRESS

Sophia Callaghan gave a presentation on the emerging structures in Health and particularly the role of the Clinical Commissioning Programme Groups CCPG. She explained that much of the work in identifying how priorities would be delivered would be discussed in a children's services planning group which would sit under the Maternity, Reproductive Health and Family Health CCPG chaired by GP Dr Kirkham. She also said that there would be links across to other strategic groups.

A lively discussion took place between Board members as to the implications of this structure.

AN explained that she was now on the Maternity, Reproductive Health and Family Health CPPG and that this group would be setting priorities at its next meeting on 11th October which would then be passed down to the service delivery groups like children's services and up to the GP Commissioning Groups.

AN also said that she and Jane Portman were meeting with John Morton and Ross Maycock to discuss the priorities and processes within the Mental Health and Learning Disability CCPG.

RM explained she was Chair of the mental Health and Learning Disability CPPG and that the priority was to get an overview of what was being commissioned at the moment and how this matched need. She said that most services would be left alone to deliver as at present and they would focus on key areas to make changes.

NW asked how the Statutory Duties from the Children's Act and the statutory roles of Lead Member and DCS could be discharged through what was essentially a health planning framework.

LB explained that as the main provider of community health services the DHUFT was carrying through its own transformation plan and that this would probable have the biggest impact on services for children in Poole and needed to be considered in the work of the Children's Trust and the new health planning arrangements.

RM explained that the health structure was for commissioners and could not be provider led in the future.

VW asked how the planning to improve preventative services which are largely commissioned by the local authority alongside health could link in with the structure. She drew the attention of the Board to the existing framework of multi-agency planning groups, some of which have a statutory basis.

SP asked how existing service providers like schools could engage with this planning process as there were already working arrangements with health and other providers working together in place.

JT explained that there were concerns from the Local Authority in terms of the health planning structure and how it aligned with existing strategic planning processes and that a dialogue was taking place to try and resolve this.

Action agreed;

Priorities from the Clinical Commissioning Programme Groups to be brought to next Board.

7. FORWARD PLAN

Board members discussed the forward plan and agreed items for next Board would be;

Up date on working with families with multiple needs Gerry Moore

Revised performance framework for the Plan- Nick Wharam

Emerging Priorities from the Clinical Commissioning Programmes-
Adrian Dawson

Preventative item?

Participation of young people?

8. ANY OTHER BUSINESS

None

9. Next Meeting

The next meeting of the Board will be on 14th November 2011 5pm at the Committee suite, Poole Civic Centre.

Future meeting of the Board are at the same time and venue on;
9th January.

Nick wharam CTGB Minutes 120911 Final